



# IHCP Live Webinar

**April 1, 2026**

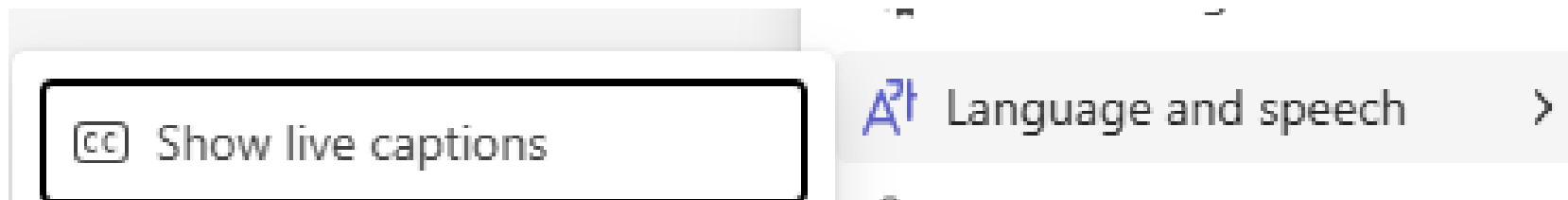
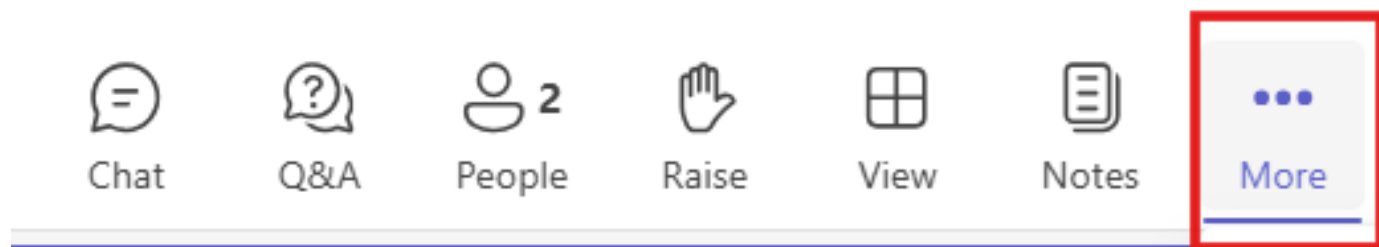


# Before We Get Started...





# How to Use Live Captions





# Questions or Future Webinar Topics

The Indiana Health Coverage Programs (IHCP) Live webinar primarily offers an opportunity for the IHCP to share current news, updates and to offer brief training opportunities.

We want to hear your ideas about additional webinar topics that would be helpful to you across the Medicaid program. This webinar is a monthly opportunity to discuss updates and issues impacting Indiana's Medicaid providers.

- For any specific questions please reach out to [OMPPProviderRelations@fssa.IN.gov](mailto:OMPPProviderRelations@fssa.IN.gov)
- Share your topic ideas at [IHCPListens@fssa.in.gov](mailto:IHCPListens@fssa.in.gov)

# Agenda



**Reminders for Providers**



**General IHCP Publication Updates**



**General Provider Education Opportunities**



**Trending Questions**



**OMPP HCBS Certification Support**



**HCBS Certification: Publication Updates and Education Opportunities**



**Future Webinar Topic Ideas**



# Reminders For Providers

# Reminders With Effective Dates



Waiver amendments became effective December 31, 2025. Use the links below to review all requirements for the waiver services for:

- Division of Disability and Rehabilitative Services (DDARS) waivers at <https://www.in.gov/fssa/ddars/bds/medicaid-hcbs-waivers/>
- Indiana PathWays for Aging (PathWays) waiver at <https://www.in.gov/pathways/resources/>





# Policy, Compliance & Enrollment Reminders

1. Applied behavior analysis (ABA) rendering providers **do not** have to get a new background check for each ABA location that they are hired at as long as the IHCP has one within the previous 12 months.
2. Revalidation applications that are submitted close to the 30-day mark of their enrollment end date might experience a temporary deactivation until the application is worked and completed by Gainwell with no gap in eligibility once completed, so submit early!

# Documentation and/or Claim Submission Best Practices



Make sure that the ZIP+4 submitted on claims exactly matches both the USPS and the service location address on file with the IHCP. Review the [October 2025 Box 33 presentation](#) located in the Provider Education: IHCP Works section on the [in.gov/medicaid/providers](https://www.in.gov/medicaid/providers) website for more information.

# Action Items Needing Provider Attention



Gainwell Technologies has implemented a paper claim submission processing fee beginning 1/29/26. Each initial paper claim submission will receive a \$5 charge. There are no fees applied for corrected or adjusted claim submissions. Any special batched claims will also not have a fee applied.

Fee collection will be applied through an accounts receivable (A/R) procedure where the per-claim fees owed will be calculated and deducted from providers' future IHCP claim payments.

More information can be found in IHCP Bulletin [BT202610](#).



# Contacting Gainwell Technologies Vs. OMPP

## Contacting Gainwell

- It is recommended that providers first contact Gainwell Technologies, who has dedicated [Provider Relations Consultants](#) to work with you on any issues that arise.
- Can provide onsite guidance and/or training, per request of the provider or the Office of Medicaid Policy and Planning (OMPP).

## Contacting OMPP

- If you are unable to resolve your issue with Gainwell Technologies, or it requires escalation to the State, OMPP's Provider Relations team is here to assist.
- Contact email: [OMPPProviderRelations@fssa.in.gov](mailto:OMPPProviderRelations@fssa.in.gov)



# General IHCP Publication Updates

# Bulletin Updates



Any important announcements regarding the IHCP are made in IHCP bulletins which are published on the [IHCP Bulletins webpage](#).

Check out the '[Bulletin Spotlight](#)' section on the IHCP Bulletins webpage to see the bulletins, with links, that the IHCP believe will help answer reoccurring provider questions.

## Bulletin Spotlight

- [BT202637: IHCP presents an updated status of claim-processing payment of impacted CCBHC claims](#)
- [BT202630: Updated coverage and billing information for the 2026 annual HCPCS codes update](#)
- [BT202627: IHCP announces changes to applied behavior analysis \(ABA\) therapy services](#)
- [BT2025173: IHCP updates the billing policy for HCBS assisted living providers](#)
- [BT2025157: MDwise to end participation as a managed care health plan for HIP and Hoosier Healthwise](#)
- [BT202577: IHCP reminds HCBS waiver providers of certification and enrollment guidelines](#)
- [BT202562: IHCP issues updated guidance for FFS and managed care ABA therapy prior authorizations](#)
- [BT202543: IHCP clarifies billing requirements for ABA claims with primary payer](#)
- [BT2024194: IHCP clarifies ABA documentation requirements and updates provider enrollment requirements](#)
- [BT2024181: IHCP reminds providers not to bill Medicaid members, with some exceptions](#)
- [BT202456: IHCP provides instructions for OMPP HCBS Certification Portal](#)

# Breakdown of Important Bulletins: BT202616



## [IHCP Bulletin BT202616](#): IHCP corrects rates for certain MRO services

The IHCP identified incorrect rates for two MRO services billed with these procedure codes and modifiers:

- H0031 HW – Behavioral Health Level of Need Redetermination
- T1016 HW – Case Management

These MRO services should **not** have received rate changes. The correct rates are as follows:

- H0031 HW – \$77.72 for DOS on or after Jan. 1, 2024
- T1016 HW – \$14.53 for DOS on or after Jan. 1, 2025

The rates for these two services have been rolled back to the correct rate, and claims will be mass adjusted or reprocessed.

# Breakdown of Important Bulletins: BT202627



## **IHCP Bulletin BT202627: IHCP announces changes to applied behavior analysis therapy services**

Beginning April 1, 2026, the IHCP will implement several updates to the ABA benefit to strengthen program integrity, promote sustainability, and support consistent service delivery. These changes include the following:

- Updates to member eligibility for ABA therapy services
- Revisions to provider qualifications for rendering certain ABA therapy services
- Rate adjustments and group size stratification
- New modifier requirements and lifetime service allocation for comprehensive ABA therapy services
- IHCP Provider Healthcare Portal (IHCP Portal) enhancements that improve transparency for providers
- Defining hours threshold for targeted ABA therapy
- Caregiver coaching requirements
- RBT supervision requirements
- Telehealth restrictions for certain ABA therapy services

# ABA Questions Regarding BT202627



- If you have questions about IHCP Bulletin [BT202627](#), please send those to [OMPProviderRelations@fssa.in.gov](mailto:OMPProviderRelations@fssa.in.gov).
- The Public Notice can be viewed [here](#).
  - **The public comment period has ended as of March 27, 2026.**



# Breakdown of Important Bulletins: BT202629

## **[IHCP Bulletin BT202629](#): IHCP presents status of claim-processing payment of impacted CCBHC claims**

The IHCP is aware of claim-processing issues stemming from a system implementation on January 28, 2026, for Certified Community Behavioral Health Clinics (CCBHCs)

- These claim issues have impacted CCBHC and non-CCBHC providers, such as MRO and waiver provider types.
- As issues have been resolved, claims have been reprocessed or adjusted, as applicable.
- No action from providers is required.

Additional details on each of these issues are outlined in the bulletin.

**Additional publications will be forthcoming as remaining issues are corrected.**

- [BT202633- CCBHC Claims Issue Update](#) (posted 3/10)
- [BT202637- CCBHC Claims Issue Update](#) (posted 3/17)
- [BT202645 - CCBHC Claims Issue Update](#) (posted 3/24)



# Bulletin Corrections

Any important announcements regarding IHCP are made in IHCP bulletins which are published on the [IHCP Bulletins webpage](#).

The following IHCP bulletin corrections were posted this month:

- [Correction to BT2025136](#): Changed implementation date to Feb. 1, 2026, Clarified information about encounter claims billed at zero dollars, Corrected EOB 4285 reason denial, Changed the date of ACT billing change, Updated numbers showing on IHCP Portal in Table 1, and Replacing Table 1 with MRO LON 4 limits displayed in IHCP Portal. (*Posted on 1/29*)
- [Correction to BT2025161](#): Changed listed phone number for J&B Medical. (*Posted on 2/5*)
- [Correction to BT202603](#): Correcting wrong link to 450B. (*Posted on 2/6*)

**Note: You may need to refresh your webpage after clicking on the URL for the corrected bulletin to show the updated page.**



# Provider Reference Module Updates

New information announced in IHCP bulletins is later incorporated into [IHCP provider reference modules](#), as applicable, during regularly scheduled updates.

The IHCP has posted the following updated provider reference modules so far this month:

- Version 8.0 "[Evaluation and Management Services](#)" Module (*Posted 2/5*)
- Version 5.0 "[Medical Practitioner Reimbursement](#)" Module (*Posted 2/5*)
- Version 8.0 "[Hearing Services](#)" Module and Code Table (*Posted 2/10*)
- Version 7.0 "[Provider Enrollment](#)" Module (*Posted 2/12*)
- Version 8.0 "[Dental Services](#)" Module and Code Table (*Posted 2/24*)
- Version 8.0 "[Presumptive Eligibility](#)" Module (*Posted 2/26*)
- Version 8.0 "[Family Planning Eligibility Program](#)" Module and Code Table (*Posted 3/10*)
- Version 8.0 "[Renal Dialysis Services](#)" Module and Code Table (*Posted 3/10*)
- Version 8.0 "[Family Planning Services](#)" Module and Code Table (*Posted 3/26*)

The IHCP has started adding temporary updates to the front page of the provider reference modules to reflect information in newly published bulletins that impact the modules. This update acts as a placeholder for the information before the module content is fully updated in the regular schedule.



# Provider Reference Module Corrections

New information announced in IHCP bulletins is later incorporated into [IHCP provider reference modules](#), as applicable, during regularly scheduled updates.

The following IHCP provider reference module corrections were posted this month:

- [Two corrections to the Claim Submission and Processing Module](#):
  - V8.4- Corrected timely filing information regarding providers retroactive enrollment (*Posted on 2/12*)
  - V8.5- Added Provider Specialty 250 to ‘The Specialties Required to include OPR NPI on All Claims’ (*Posted on 2/24*)
- [Correction to the Home Health Services Module](#):
  - V8.1- Removed Coordination with ATTC and SFC section (*Posted on 3/10*)

**Note: You may need to refresh your webpage after clicking on the URL for the corrected bulletin to show the updated page.**



# General Provider Education Opportunities



# Indiana Medicaid for Providers Website

<https://www.in.gov/medicaid/providers/>

The IHCP offers providers easy access to the resources and tools needed to conduct business with Indiana Medicaid. Provider updates and announcements, important reference materials, and general program information are all available through links and webpages located on this website.

Please be sure to stay connected and [sign up to get important FSSA news and updates.](#)

<b>FSSA - Medicaid Policy and Planning</b> <input type="checkbox"/>
Indiana Health Coverage Programs Providers <input checked="" type="checkbox"/>



# Quick Hit Videos

## [IHCP Quick Hit Videos:](#)

Short informational videos on a variety of topics of particular interest and concern to providers. The current topics available are:

- Provider Enrollment
- Acentra Health
- Billing Guidance- LRI Claim Note
- Attendant Care Service
- Billing and Reimbursement reminders about Special Care Unit add-on



# IHCP Portal Training

## [IHCP Provider Healthcare Portal Training:](#)

Training is offered in a web-based format to allow self-directed, self-paced online learning at the convenience of all IHCP Portal users. Registration is not required to access these trainings.

This webpage also offers Quick Reference Guides for the IHCP Portal.

The three guides offer a quick reference with step-by-step procedures for specific functions within the IHCP Portal.



# In-person Seminars

## [IHCP Works Seminar:](#)

An in-person seminar held in October each year. The IHCP Works seminar includes educational sessions presented by IHCP partners, including the Indiana Family and Social Services Administration (FSSA), Gainwell Technologies, Acentra Health, and the managed care entities (MCEs).

Topics from IHCP partners typically include prior authorization (PA), claims, provider enrollment, behavioral health and waiver services, among others. Providers can also access the 2025 IHCP Works seminar presentation slide decks on this webpage.

***Reminder to providers: Please do not bring personal health information (PHI) to any seminar.***



# IHCP Live Webinars

## [IHCP Live:](#)

The IHCP uses webinars to help providers learn about new policy initiatives and billing guidance. All webinars are accessible through this webpage. The webinar presentations are hosted by staff members of the OMPP.

Upcoming live webinars will be announced in IHCP bulletins, news announcements and through the provider associations. Recordings will be available on the IHCP Live webpage three to four weeks following the webinar.

**Please know that recordings of past webinars are also accessible from this page!**



# Trending Questions



# Question #1:

Who do I contact?

## Answer:

For issues related to prior authorizations and claims with managed care programs, please reach out to the MCE provider relations team. <https://www.in.gov/medicaid/providers/contact-information/contact-us/>

For issues related to your FFS claims, reach out to your Gainwell provider relations consultant. <https://www.in.gov/medicaid/providers/contact-information/provider-relations-consultants/>

For non-PathWays waiver related issues, such as the H&W, TBI waiver pick lists or issues regarding the BDS portal, please reach out to [BDSProviderServices@fssa.in.gov](mailto:BDSProviderServices@fssa.in.gov) or [BDS.Help@fssa.in.gov](mailto:BDS.Help@fssa.in.gov)

When issues remain unresolved after using these avenues, please reach out to OMPP Provider Relations at [OMPPProviderRelations@fssa.in.gov](mailto:OMPPProviderRelations@fssa.in.gov)



## **Question #2:**

How do I update my address on my waiver certification letter?

### **Answer:**

Updating the agency's address depends on previous Certification:

#### **If the original certification was issued by the Division of Aging:**

- You will need to complete a 'New Application' in the OMPP certification portal that includes all services and counties you are currently approved for, ensuring that your new address is present.
- This includes resubmitting all required policies for review. Please review the Required Documents Definition Sheet to ensure all policies are still in compliance with the Aging Rule and HCBS Waiver Manuals.
- Once the New Application is reviewed and approved, you will receive an updated certification letter reflecting your new address and listing all services you are certified to provide. This will make future updates easier as well.

#### **If you were previously certified with OMPP in the certification portal:**

- Submit an inquiry within the portal.
  - The OMPP Team will review the inquiry and advise of next steps to receive an updated certification letter.



## Question #3:

I have questions about the new ABA supervision requirement. Where can I find more information?

### Answer:

There will be a forthcoming bulletin that addresses the supervision requirement. Please check the [IHCP Bulletins](#) page or weekly IHCP Updates email for more details.



# OMPP HCBS Waiver Certification Support

# OMPP Certification Common Setback #1



## Organizational Chart and Job Description Errors

### Resolution:

- Ensure all positions of the agency are listed on the organizational chart. Required positions and staff for services can be found in Service Summaries on the [OMPP Certification website](#).
- If the agency is adding services, all positions for previously certified services must be included.
- All staff must be listed by first and last name in their respective position. If positions are not filled, they should be listed as 'Vacant'.
- Job titles must be identical between the chart and the job descriptions with no inconsistencies.
- The job description should be appropriate for the service.

# OMPP Certification Common Setback #2



## Legal Business/DBA Not Matching on Application and Policies

Legal business name of applicant

Tax Classification

DBA Name of Applicant ⓘ

### Resolution:

- The legal business name and doing business as (DBA) submitted on an application must match exactly with what is listed on the: W-9 Tax Form/EIN Letter, Secretary of State Letter, Personal Services Agency License (if applicable), Home Health Agency License (if applicable) and the Proof of Liability Insurance.



# HCBS Certification: Publication Updates and Education Opportunities



# Breakdown of Waiver Bulletin: BT202612

## [IHCP Bulletin BT202612](#): CMS approves waiver amendment for Medicaid HCBS Family Supports waiver

This bulletin highlights changes that went into effect for dates of service on or after January 1, 2026, for the Family Supports Waiver.

Highlighted services and benefits in this bulletin include:

- Self-directed service options
- Benefits Counseling
- Behavioral Support Services
- Home Modifications and Assessments
- Recreational Therapy and Music Therapy
- Facility-based Prevocational Services
- Participant Assistance and Care
- Home and Community Support Professional Training Registry
- Level-of-Care Determination Tools



# Breakdown of Waiver Bulletin: BT202613

## [IHCP Bulletin BT202613](#): CMS approves waiver amendment for Medicaid HCBS CIH waiver

This bulletin highlights changes that went into effect for dates of service on or after January 1, 2026, for the Community Integration and Habilitation (CIH) waiver.

Highlighted services and benefits in this bulletin include:

- Self-directed Service Options
- Benefits Counseling
- Behavioral Support Services
- Home Modifications and Assessments
- Recreational Therapy and Music Therapy
- Facility-based Prevocational Services
- Level-of-care Determination Tools
- Short- and long-term budget requests
- Home and Community Support Professional Training Registry



# Breakdown of Waiver Bulletin: BT202614

## [IHCP Bulletin BT202614](#): CMS approves waiver amendment for Medicaid HCBS H&W and TBI waivers

This bulletin highlights changes that went into effect for dates of service on or after January 1, 2026, for the Health and Wellness (H&W) and Traumatic Brain Injury (TBI) waivers.

Highlighted services and benefits in this bulletin include:

- Self-directed Service Options
- Benefits Counseling
- Extended Employment Options
- Attendant Care
  - Extraordinary Care
  - Hourly Documentation
  - Paid Family Caregiver hour limitations
- License requirements
- Home Modifications and Assessments
- Residential-Based Habilitation Services
- Case Management Updates



# Breakdown of Waiver Bulletin: BT202628

## **IHCP Bulletin BT202628: Clarification provided to H&W, TBI and PathWays waiver providers regarding termination of services**

- This bulletin reminds service providers that they shall furnish at least 30 days' written notice to an individual, their legal representative (if applicable), and their case manager or PathWays service coordinator before terminating waiver services to an individual.
- Providers are required to continue delivering authorized services and may not terminate solely due to the loss of an individual staff member, even if that direct care staff is a family member.
- Providers must ensure continuity of care, including maintaining adequate staffing and implementing backup staffing plans.
- Provider agencies must work with individuals, along with their legal guardian or representative, and their primary caregivers to establish backup plans for emergencies and other times when the primary caregiver is unable to provide care. This should be part of the individual's plan to ensure the individual's health and safety and to prevent inappropriate service disruption.



# OMPP Certification Resources

- Resources found on the [Medicaid HCBS Certification webpage](#)
  - Single Sheet Summaries present on Service Description and Requirements.
  - [Required Document Definitions](#)
  - [Office Of Medicaid Policy and Planning Home- and Community-Based Services Waiver: Indiana PathWays for Aging](#)
  - [Division of Disability and Rehabilitative Services Home- and Community-Based Services Waivers](#)
  - [Indiana Administrative Code - Aging Rule](#)
  - Provider Guidelines
  - Description of Step 1-3: [Quick Reference for HCBS Provider Enrollment](#)
  - Information on Heightened Scrutiny and Public Comment
- Certification Portal- <https://omppproviders.fssa.in.gov/>



# OMPP HCBS Certification Education

## OMPP HCBS Certification Training Videos:

- [Demonstration for continuing an application](#)
- [Demonstration for updating a returned application](#)

## Important Bulletins:

- [BT202609: Reminder for TB tests \(SFC\)](#)
- [BT202577: Reminder of HCBS Certification and Enrollment Guidelines](#)
- [BT202488: OMPP clarifies background check requirements for HCBS provider certification](#)
- [BT202472: IHCP announces additional guidance for HCBS provider certification](#)
- [BT202460: OMPP HCBS Certification FAQs](#)
- [BT202456: Instructions for OMPP HCBS Certification Portal](#)



# Contacting OMPP Certification Team: Inquiries

The best way to contact the OMPP Certification Team is through Inquiries, the Chatter feature in the portal or the team email.

To submit an inquiry a provider **must have established an account with OMPP.**

- Inquiries can be submitted to the OMPP Certification team on the [OMPP Certification Portal](#).
- Inquiries are responded to within 3 business days.

Inquiries can be submitted for the following:

- PAN Application Status, General Questions regarding OMPP Certification process, OMPP Certification Portal issues, Address changes

**This is the best way to get a timely response.**



# Contacting OMPP Certification Team: Chatter

Located within the [OMPP Certification Portal](#), this feature allows providers to communicate directly with their assigned specialist when an application is actively under review.

Please use @tagging to notify the specialist (example: @Johnathan Doe). Tagging triggers a notification that a response is required. These messages are responded to within 2 business days.

If the application status changes to "Expired", "Certification Complete" or "Denied", providers should submit an inquiry for the quickest response.

**When an application is actively assigned for review, please use Chatter rather than submitting an inquiry.**



# Contacting OMPP Certification Team: Team Email

- The OMPP Certification Team can be reached by email for:
  - OMPP Certification Portal access issues
  - Support during creation of a new portal account
  - Responding to emails sent by the OMPP Certification Team

**It is recommended that providers create a portal account and submit questions through the portal for the quickest response.**



# Future Webinar Topic Ideas?



The IHCP Live webinar primarily offers an opportunity for the IHCP to share current news, updates, and to offer brief training opportunities. We want to hear your ideas about additional webinar topics that would be helpful to you across the Medicaid program. This webinar is a monthly opportunity to discuss updates and issues impacting Indiana's Medicaid providers.

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*Thank  
You*

**Next IHCP Live Monthly Webinar:  
May 6, 2026, at 11 am ET**