

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS

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Continuity of care provided for PathWays Dual Care program launching Jan. 1, 2026

The Indiana Family and Social Services Administration (FSSA) will be launching the Indiana PathWays for Aging (PathWays) Dual Care program on Jan. 1, 2026. PathWays Dual Care is a specialized program for Indiana Hoosiers who are dually eligible for Medicare and Medicaid and are age 60 or older.

This program fully integrates Medicare and Medicaid seamlessly into one program administered through a Fully Integrated Dual Eligible Special Needs Plan (FIDE SNP) Medicare Advantage health plan that contracts with the FSSA and the Centers for Medicare & Medicaid Services (CMS).

With the launch of this new program, it is expected that some dually eligible members will be changing their PathWays managed care entity (MCE) enrollment on either Dec. 1, 2025, or Jan. 1, 2026. Providers are responsible for checking members' PathWays MCE plan assignment prior to providing services and billing.



The FSSA Office of Medicaid Policy and Planning (OMPP) is committed to providing continuity of care for dually eligible members as they transition from their Medicaid coverage PathWays MCE to another PathWays MCE that provides both their Medicaid and Medicare coverage.

See *IHCP Bulletin* [BT202496](#) for additional information on the critical continuity-of-care periods and continuity-of-care guidance for MCEs, skilled nursing facilities and Home- and Community-Based Services (HCBS) waiver providers.

The MCEs supporting the transition of dually eligible members are creating additional member and provider communications to support a smooth transition. The transition process will be overseen by the MCE transition coordinator and other care/service coordination staff.

The provider still has ongoing responsibility to monitor member coverage and MCE enrollment.

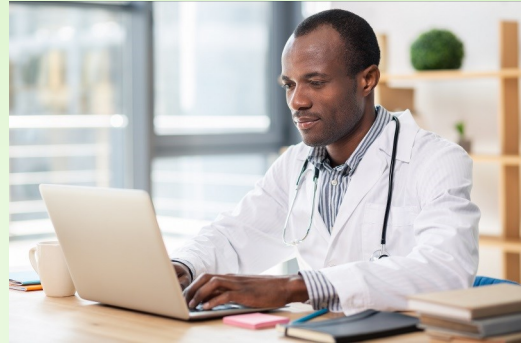
When receiving dually eligible members from another MCE on either Dec. 1, 2025, or Jan. 1, 2026, the MCE will honor the previous care authorizations for 90 calendar days from the member's enrollment date with the new MCE.

Service authorizations for members transitioning to PathWays

For continuity of care, all service authorizations prior to the transition will be honored by the new PathWays MCE for 90 calendar days after the transition to ensure ongoing care is provided and to prevent any delay in care for IHCP members.

PathWays Waiver providers that have notice of action (NOA) authorizations for services (referred to as “service authorizations”) will see these authorizations in the PathWays MCE portals within 30 days for transition:

- [Anthem](#) at [providers.anthem.com](#)
- [Humana](#) at [humana.com](#)
- [UnitedHealthcare](#) at [uhcprovider.com](#)



NOA will continue to be known as “service authorizations” in the PathWays program and the PathWays Dual Care program that will launch Jan. 1, 2026. Regardless of their MCE contracting status, all providers that have registered for access will be able to use the MCE provider portal. Providers will receive service authorizations from the MCEs and will be able to request any changes through the member’s service coordinator. Their information will be shown in the member’s profile on the MCE portal.

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