

# IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS    BT202566    MARCH 27, 2025

## IHCP requires provider participation with independent audit before June 27

[Indiana Executive Order 25-24](#) (*Assuring Prudent Use of Taxpayer Funds by Assessing Waste, Fraud and Abuse in Healthcare Spending*) directs the Indiana Family and Social Services Administration (FSSA) to conduct a comprehensive independent audit of Indiana Health Coverage Programs (IHCP) managed care entities (MCEs). The purpose of this audit is for the FSSA to develop updated best practices, safeguards and accountability mechanisms to prevent payment and processing errors, mitigate waste, and reduce fraud and abuse. This audit is being performed on all managed care programs as well as the Traditional Medicaid program.

This audit is being conducted by Health Management Associates (HMA), an independent third-party firm.

Providers that are selected for this independent audit will be contacted by the entity that adjudicated the claim payment (an MCE or Gainwell Technologies). Providers will receive a formal letter requesting medical records and all documentation supporting the validity and accuracy of the paid claim. If a provider is selected for audit by multiple MCEs, the provider will receive a letter for **each** separate request.

### All documentation must be submitted by June 27, 2025.

Providers are reminded that the IHCP Provider Agreement requires providers:

- To fully cooperate with federal and state officials and their agents as they conduct periodic inspections, reviews and audits.
- To make available upon demand by federal and state officials and their agents all records and information necessary to assure the appropriateness of IHCP payments made to providers, to assure the proper administration of the IHCP, and to assure a provider's compliance with all applicable statutes and regulations.



### QUESTIONS?

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