IHCP *bulletin*

This bulletin has been updated. See IHCP Bulletin BT2026130.

INDIANA HEALTH COVERAGE PROGRAMS BT2026100 JUNE 16, 2026

Evaluation time frames set for qualified providers determining presumptive eligibility

As explained in *Indiana Health Coverage Programs (IHCP) Bulletin BT2025128*, *Indiana Code IC 12-15-4-1.5* of *Senate Enrolled Act 2* (2025) requires the office of the secretary to establish performance standards for qualified providers (QPs) in making presumptive eligibility (PE) determinations and an appeals process for QPs to dispute findings of violation of those standards.

Senate Enrolled Act 222 (2026) clarified the definition of "qualified provider" for PE determinations. *IC 12-15-4-1.5* previously used the term "qualified hospitals" only. The updated definition includes all QPs that make PE determinations.

Because the legislation, which clarified the definition, has an effective date of July 1, 2026, the first evaluation quarter for hospitals' compliance will remain Q1 for calendar year 2026 (January 1 to March 31), as announced in *BT2025128*. However, the first evaluation period for nonhospital QPs will be Q3 for calendar year 2026 (July 1 to September 30).

For additional information on the performance standards for QPs determining PE, see *IHCP Bulletin BT2025128*. For any questions, email presumptiveeligibility@fssa.in.gov.

QUESTIONS

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