

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT2026133 AUGUST 11, 2026

IHCP reminds dental providers of the appropriate claim filing code

The Indiana Health Coverage Programs (IHCP) reminds dental providers of the proper claim filing code to use for fee-for-service (FFS) Medicaid members who have a Medicare Advantage Plan as their primary coverage.

For all dental claims submitted electronically via the [IHCP Provider Healthcare Portal](#) (IHCP Portal), **CI – Commercial Insurance Co.** should always be selected in the Claim Filing Code field (located in the *Other Insurance Details* panel) for any member who has other dental insurance, including through a Medicare Advantage Plan.



As part of its quality oversight activities, the IHCP reviewed dental claims and identified the improper use of claim filing codes MA – *Medicare Part A* and MB – *Medicare Part B* on dental claims for members enrolled in a Medicare Advantage Plan (Medicare Part C). This improper use of codes resulted in overpayments.

Because dental services are excluded from Medicare (Parts A and B), the IHCP considers dental coverage provided through a Medicare Advantage Plan to be commercial insurance. Therefore, CI – *Commercial Insurance Co.* should **always** be selected in the Claim Filing Code field of the IHCP Portal for **all** dental claims where the member has other insurance. For more information on submitting dental claims, see the [Claim Submission and Processing](#) provider reference module at in.gov/medicaid/providers.

QUESTIONS

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