

# IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS    BT202658    APRIL 21, 2026

## IHCP to adjust or reprocess claims for Hoosier Healthwise members that denied incorrectly

The Indiana Health Coverage Programs (IHCP) discovered an error that affects certain fee-for-service (FFS) claims for the Current Procedural Terminology (CPT<sup>®1</sup>) and Healthcare Common Procedure Coding System (HCPCS) codes listed in Table 1. These codes are carved out of managed care, and claims for these codes may have been denied incorrectly for members enrolled in Hoosier Healthwise.



The claim-processing system has been corrected. Claims that may have been denied incorrectly for dates of service (DOS) between **Sept. 18, 2023**, and **Aug. 25, 2025**, will be reprocessed. Claims that previously paid with a paid date on or after **July 1, 2024**, will be mass adjusted. Providers should see adjusted or reprocessed claims on remittance advices (RAs) beginning immediately, with internal control numbers (ICNs)/Claim IDs that begin with 52 (mass replacements non-check-related) or 80 (reprocessed denied claims).

*Table 1 – Procedure codes that may have denied incorrectly for Hoosier Healthwise members*

Procedure code	Code description
95913	Nerve conduction, 13 or more studies
J7198	Anti-inhibitor, per i.u.
J7200	Injection, factor ix, (antihemophilic factor, recombinant), rixubis, per iu
J7201	Injection, factor ix, fc fusion protein, (recombinant), alprolix, 1 i.u.
J7205	Injection, factor viii fc fusion protein (recombinant), per iu
J9999	Not otherwise classified, antineoplastic drugs

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