

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT202681 MAY 26, 2026

IHCP corrects claim-processing error for sterilization claims

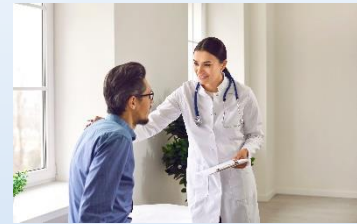
Effective immediately, the Indiana Health Coverage Programs (IHCP) has corrected the fee-for-service (FFS) claim-processing system related to sterilization review procedures.

Sterilization claims were automatically denying for explanation of benefits (EOB) code 4075 – *Please resubmit with a valid sterilization consent form* for the following situations:

- Non-check-related adjustments
- Mass adjustments
- Reprocessed denied claims

The IHCP has corrected the FFS claim-processing system so that claims submitted for adjustments or reprocessing will be flagged for manual review rather than deny. This correction will allow adjusted and reprocessed claims to undergo the same manual review process as the original claim.

Providers should see adjusted/reprocessed claims on remittance advices (RAs) beginning July 1, 2026, with internal control numbers (ICNs)/Claim IDs that begin with 52 (mass replacements non-check-related) or 80 (reprocessed denied claims).



QUESTIONS

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

COPIES OF THIS PUBLICATION

If you need additional copies of this publication, please download them from the [IHCP Bulletins](#) page of the IHCP provider website at in.gov/medicaid/providers.

SIGN UP FOR IHCP EMAIL NOTIFICATIONS

To receive email notices of IHCP publications, subscribe by clicking the blue subscription envelope or sign up from the [IHCP provider website](#) at in.gov/medicaid/providers.

