



NETWORK *Notification*

Notice Date: August 22, 2024
To: Indiana Medicaid Providers
From: CareSource
Subject: Indiana Health Coverage Programs (IHCP) Enrollment Reminder

Summary

CareSource would like to remind providers of enrollment requirements that must align with IHCP enrollment, as applicable.

Importance

CareSource will credential and enroll providers for participation with Indiana Medicaid based on the type/specialty that a provider is enrolled with the State (IHCP). If a provider is requesting to provide services as a type/specialty other than their enrollment with IHCP, the provider will need to update their enrollment information with IHCP prior to enrolling with CareSource. This requirement applies to both delegated **and** non-delegated providers.

Impact

We will be updating our systems in accordance with this alignment. Should we be unable to make a valid match based on your credentialing and IHCP enrollment, our team may outreach to obtain additional documentation or clarification. Please reach out to your [Provider Engagement Specialist](#) with additional questions or to obtain an updated provider roster for your group.

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OMPP Approved: 08/09/2024