



NETWORK *Notification*

Notice Date: August 25, 2025
To: Indiana Medicaid Providers
From: CareSource
Subject: Prior Authorization Electronic Submission Mandate
Effective Date: October 1, 2025

Summary:

Pursuant to Senate Enrolled Act (SEA) 480 (2025) Section 19, effective October 1, 2025, Indiana Medicaid Health Partners are required to submit Prior Authorizations through a secure electronic submission method or an application programming interface.

There are two methods to comply with this mandate for CareSource providers:

Secure Submission Methods
CareSource Provider Portal Users - User Login
e-Fax 1-844-417-6157

Health Partners unable to submit Prior Authorizations via the CareSource Provider Portal or e-fax must meet the following exception requirements:

- Financial hardship
- Lacking sufficient internet access
- Limited number of individuals covered as patients or customers to warrant compliance

Once it has been determined that a provider meets the exception requirements, these are the exception submission methods:

Exception Submission Methods
Phone 1-844-607-2831

Mail
CareSource
PO Box 1307
Dayton, OH 45401-1307

To register for the Provider Portal, visit caresource.com/documents/in-med-p-2136952-mfa-provider-portal-web-posting-guide/. Our [Health Partner Engagement Specialists](#) are available to assist with registration and Provider Portal training.

IN-MED-P-4317402; First Use: 08/25/2025

OMPP Approval Date: 08/21/2025