



Subject: Home- and Community-Based Services claims changing to reject when billed with a Zip+4 does not match IHCP enrollment

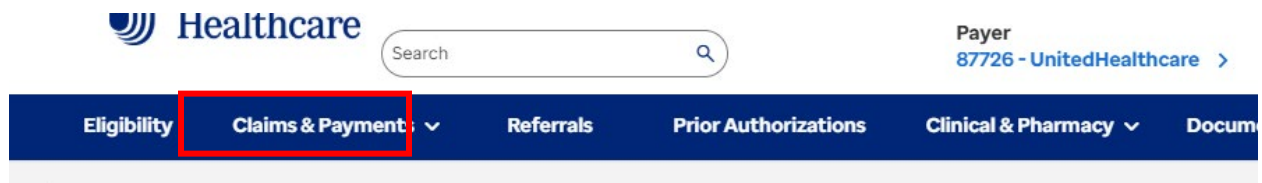
Effective **December 1, 2025**, UnitedHealthcare Community Plan of Indiana will begin rejecting HCBS claims that are billed with the Zip+4 in box 33 of the claim form when that information does NOT match the Zip+4 that was enrolled for the service location.

This applies to HCBS providers and services currently provided under the Indiana PathWays for Aging plan.

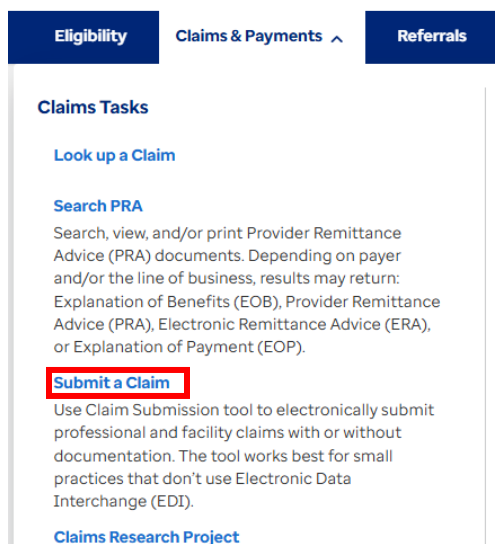
Providers using a clearinghouse should receive these rejection reports through their clearinghouse. For providers who utilize the UHC Provider Portal to submit claims, after submitting the claims, please check/review these submissions for acceptance or rejection.

How to check submission status:

1. Securely login to the UHC Provider Portal [UnitedHealthcare Community Plan of Indiana Homepage | UHCprovider.com](#)
2. Click Claims & Payments dropdown in the blue banner



3. Select the Submit a Claim option



4. Choose *Check submission status* radial option then enter the span of dates when the claim/s would have been submitted. Then submit your search to see results of claim submissions.

[Eligibility](#) [Claims & Payments ▾](#) [Referrals](#) [Prior Authorizations](#) [Clinical & Pharmacy ▾](#) [D](#)

[Admin](#) ▶ [Home](#) ▶ [Claim Submission](#)

Claim Submission

Perform a Claim task

Check submission status for electronic claims or perform other claim-related tasks



Select Claims Task:

☐ Submit a claim ☒ Check submission status ☐ Predetermination & bundling logic

Check submission status

View the submission status for electronic claims submitted through the UnitedHealthcare Provider Portal. To view the claims processing status (paid, denied, or in process), visit [Look Up a Claim](#) under the Claims & Payments tab.

Currently Selected Provider: ████████████████████ [Edit](#)

From*  To* 

MM/DD/YYYY MM/DD/YYYY

[Submit Search](#)