

NETWORK Notification

Notice Date: July 1, 2025

To: CareSource Georgia Medicaid Providers

From: CareSource

Subject: July 2025 Policy Updates

Effective Date: September 1, 2025

Summary

At CareSource, we listen to our providers, and we streamline our business practices to make it easier for you to work with us. We have worked to create a predictable cycle for releasing administrative, medical, and reimbursement policies, so you know what to expect.

Check back each month for a consolidated network notification of policy updates from CareSource.

How to Use This Network Notification

- Reference the list of policy updates.
- Note the effective date and impacted plans for each policy.
- Click the hyperlinked policy title to open the webpage with the full policy.

Find Our Policies Online

To access all CareSource policies, visit **CareSource.com** > Providers > Tools & Resources > <u>Provider</u> <u>Policies</u>. Select your plan and state, then the type of policy. Each revised policy has a previous version that can be referenced on the corresponding archived policy webpage.

Policies

Policy Name & Number	Policy Type	Plans	Effective Date	New or Revised Policy
Emergency Services	ADMINISTRATIVE	GEORGIA MEDICAID	SEPTEMBER 1, 2025	REVISION
<u>AD-1064</u>		WEDICAID	2023	
Facility Charges	REMIBURSEMENT	GEORGIA	SEPTEMBER 1,	NEW
for Hospital-Based Outpatient Clinics		MEDICAID	2025	
PY-1619				
Genetic Testing	MEDICAL	GEORGIA	SEPTEMBER 1,	REVISION
and Counseling		MEDICAID	2025	
<u>MM-0735</u>				

Medical Record	ADMINISTRATIVE	GEORGIA	SEPTEMBER 1,	REVISION
Documentation		MEDICAID	2025	
Standards for				
<u>Practitioners</u>				
<u>AD-0755</u>				
<u>Modifiers</u>	REIMBURSEMENT	GEORGIA	SEPTEMBER 1,	REVISION
PY-1353		MEDICAID	2025	
<u>Outpatient</u>	ADMINISTRATIVE	GEORGIA	SEPTEMBER 1,	REVISION
Physical Therapy,		MEDICAID	2025	
<u>Occupational</u>				
Therapy, and				
Speech-Language				
<u>Pathology</u>				
<u>AD-0986</u>				
Peripheral Nerve	MEDICAL	GEORGIA	SEPTEMBER 1,	REVISION
Stimulators for		MEDICAID	2025	
Treatment of Pain				
MM-1429				
<u>Urinalysis and</u>	REIMBURSEMENT	GEORGIA	SEPTEMBER 1,	NEW
Evaluation and		MEDICAID	2025	
Management				
<u>Services</u>				
PY-1605				

GA-MED-P-3973709 DCH Approved: 06/18/2025