CareSource | NETWORK Notification

Notice Date: November 24, 2025
To: Georgia D-SNP, Marketplace and Medicaid Providers
From: CareSource
Subject: Lymphedema Compression Treatment Items Claims Editing Enhancements
Effective Date: February 24, 2026

Summary
Beginning with claims processed on or after February 24, 2026, CareSource will enhance claims editing as follows.

Impact
The following policy area is affected:

- Diagnosis and modifier requirements for lymphedema compression treatment items

Important Policy Changes
Appropriate diagnosis for lymphedema must be used when billing the following codes:

- A6520-A6530
- A6533-A6541
- A6549
- A6552-A6589
- A6593-A6610

Lymphedema compression treatment items can be billed bilaterally and require use of right side (RT) or left side (LT) modifiers to indicate treatment laterality.

Questions?
Contact Provider Services at the appropriate number below:

- D-SNP: **1-833-230-2176**, available Monday through Friday, 8 a.m. to 6 p.m. Eastern Time (ET)
- Marketplace: **1-833-230-2101**, available Monday through Friday, 8 a.m. to 6 p.m. ET
- Medicaid: **1-855-202-1058**, available Monday through Friday, 7 a.m. to 7 p.m. ET

GA-Multi-P-4472739 DCH Approved: 11/20/2025