



NETWORK Notification

Notice Date: October 1, 2025
To: Michigan Medicaid Providers
From: HAP CareSource™
Subject: End-Stage Renal Disease Claims Editing Enhancements
Effective Date: January 1, 2026

Summary

Beginning with claims processed on or after January 1, 2026, CareSource will enhance claims editing as follows.

Impact

Hemodialysis claims must be reported with a modifier to indicate the adequacy of the hemodialysis service; otherwise, the service will be denied.

Important Policy Changes

Correct Use of Modifiers:

- Hemodialysis Current Procedural Terminology (CPT) Code: 90999
- Required Modifiers for End-Stage Renal Disease Hemodialysis: G1-G6

Questions?

Contact Provider Services at **1-833-230-2102**, Monday through Friday, 8 a.m. to 6 p.m. Eastern Time (ET).

MI-MED-P-4353503