



# NETWORK *Notification*

**Notice Date:** August 21, 2025  
**To:** Georgia, Indiana, North Carolina, Ohio and West Virginia Marketplace Providers  
**From:** CareSource  
**Subject:** CareSource Edifecs CRA Solution  
**Effective Date:** October 1, 2025

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## Summary

As of October 1, 2025, CareSource is working with Edifecs to enable a pre-adjudication claims completeness examination solution called Concurrent Risk Adjustment (CRA). CRA is designed to work within the existing claim workflow to alert providers when diagnoses have been potentially overlooked, and therefore, not billed on a claim.

## Impact

**For the member**, the CRA solution enhances the medical provider's awareness of their potential medical conditions, thereby increasing the opportunity or need to receive the right level of care and services or follow-up care and services from their medical health plan and its provider network.

**For the provider**, the CRA solution brings another opportunity for awareness of their patient's medical history and ensures a line of sight to the accuracy of their billing practices within the medical office. The solution may also reduce some of the administrative rework associated with the existing health plan's chart review process that frequently occurs to maximize health plan quality standards and measures. The CRA solution fosters improved accuracy and agreement between the patient's medical record and the claim submission. CRA does not create an administrative burden because it targets only the claims where the rendering provider's specialty relates to chronic medical conditions in the member's medical history. At the rendering provider level, CRA sends an average of less than three claim alerts per month. Responses to the alerts by the biller will be received by CareSource within one business day, so there is very little impact to the providers.

## Importance

CRA significantly diminishes delays in the payment cycle as compared to the traditional operational processes (requests for chart submission and corrected claims, resulting in claim adjustments in multiple payment cycles).

## Questions?

To learn more, review the [Provider FAQ document](#) and the [Claims Rejection Instructions](#).

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