



# NETWORK Notification

**Notice Date:** July 1, 2025  
**To:** CareSource Providers  
**From:** CareSource  
**Subject:** Avalon Q2 2025 Quarterly Policy Updates

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## Summary

CareSource has partnered with Avalon Healthcare Solutions for laboratory benefits management (LBM), including routine testing management (RTM), a post-service pre-payment clinical claim editing program for routine lab testing.

The RTM program is based on ensuring compliance with the lab policies located on [Avalon's website](#).

This notification is intended to provide you notification of changes to the policies listed below. The policies appear on Avalon website upon their effective dates.

## Policies

Policy Name	Plans	Effective Date
F2019: Flow Cytometry – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
G2008: Prostate Specific Antigen (PSA) Testing – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
G2022: Biomarker Testing for Autoimmune Rheumatic Disease – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
G2031: Allergen Testing – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
G2035: Prenatal Screening (Nongenetic) – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
G2042: Pediatric Preventive Screening – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
G2044: Helicobacter pylori Testing – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
G2045: Thyroid Disease Testing – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
G2099: Intracellular Micronutrient Analysis – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
G2120: Salivary Hormone Testing – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025

G2125: Urinary Tumor Markers for Bladder Cancer – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
G2138: Evaluation of Dry Eyes – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
G2143: Lyme Disease Testing – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
G2149: Pathogen Panel Testing – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
G2164: Parathyroid Hormone, Phosphorus, Calcium, and Magnesium Testing – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
G2181: Colorectal Cancer Screening – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
M2041: Venous and Arterial Thrombosis Risk Testing – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
M2057: Diagnosis of Vaginitis – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
M2116: Human Immunodeficiency Virus (HIV) – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
M2172: Onychomycosis Testing – Effective Date: 09-01-2025	Ohio Dual Special Needs (D-SNP)	09/01/2025
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F2019: Flow Cytometry – Effective Date: 09-01-2025	Ohio Marketplace	09/01/2025
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G2120: Salivary Hormone Testing – Effective Date: 09-01-2025	Ohio Marketplace	09/01/2025

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G2120: Salivary Hormone Testing – Effective Date: 09-01-2025	Georgia Marketplace	09/01/2025

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### **Trial Claim Advice Tool**

Providers may use the Trial Claim Advice tool to review claims with laboratory services for adherence and consistency with CareSource laboratory policies. This is a simulation tool and does not guarantee approval or reimbursement of claims. You can access the Trial Claim Advice Tool on the CareSource [Provider Portal](#).

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