CareSource | NETWORK Notification

Notice Date: July 17, 2026
To: CareSource Ohio Medicaid Providers
From: CareSource
Subject: Evaluation and Management (E/M) and Psychotherapy Add-On Billing Policy
Effective Date: September 1, 2026

Summary
This is a supplemental notification to remind providers of the CareSource policy on billing Evaluation and Management (E/M) services:

- Psychotherapy add-on codes on the same date
- Outlining coding and documentation requirements to distinguish these services
- Establishing limitations on concurrent billing to ensure compliance and prevent overlap.

This policy was announced in the July 2026 Policy Updates network notification released on July 1, 2026.

Overview
When psychotherapy add-on codes **90833**, **90836** and **90838** are billed with high-level E/M services (**99204**, **99205**, **99214** or **99215**) for the same member, date of service and provider TIN, the psychotherapy add-ons will be denied and only the E/M service reimbursed.

Because of the complexity of moderate to high-level medical decision-making (MDM), psychotherapy is unlikely to be provided separately without overlapping effort. Providers must apply add-on codes, modifiers (including modifier 25), and interactive complexity correctly, with documentation clearly demonstrating that psychotherapy and E/M services are substantial, independently identifiable, and do not include overlapping time. Psychotherapy records should include start and stop times, and detail interventions aimed at symptom reduction, behavior modification and functional support.

E/M services must be supported by medical decision making (MDM) per American Medical Association (AMA) Current Procedural Terminology (CPT)® guidelines, excluding psychotherapy time. E/M levels should be based on MDM, not time, when add-on psychotherapy codes are billed, and prolonged services cannot be reported with these codes. CareSource may request documentation to verify claims.

The following list of codes is provided as a reference. This list may not be all inclusive and is subject to updates:

CPT Code	Description
90833	Psychotherapy, 30 minutes with patient when performed with an E/M service.
90836	Psychotherapy, 45 minutes with patient when performed with an E/M service.
90838	Psychotherapy, 60 minutes with patient when performed with an E/M service.

99204	Office or other outpatient visit for the E/M of a new patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using total time on the date of the encounter for code selection, 45 minutes must be met or exceeded.
99205	Office or other outpatient visit for the E/M of a new patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using total time on the date of the encounter for code selection, 60 minutes must be met or exceeded.
99214	Office or other outpatient visit for the E/M of an established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using total time on the date of the encounter for code selection, 30 minutes must be met or exceeded.
99215	Office or other outpatient visit for the E/M of an established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using total time on the date of the encounter for code selection, 40 minutes must be met or exceeded.

Importance
Proper differentiation between E/M and psychotherapy services is critical to ensure accurate billing and compliance with CareSource and CMS guidelines. Providers must maintain clear and detailed documentation to support distinct services and avoid duplication of clinical effort within a single encounter.

To access all CareSource policies, visit **CareSource.com** > Providers > Tools & Resources > Provider Policies. Select your plan and state, then the type of policy.

Questions?
For additional questions, please contact Provider Services at 1-800-488-0134 (Monday through Friday, 7 a.m. to 8 p.m.).

OH-MED-P-5799419