



# NETWORK *Notification*

**Notice Date:** April 3, 2026  
**To:** Ohio Marketplace, Medicaid, and MyCare Providers  
**From:** CareSource  
**Subject:** Evaluation and Management (E&M) Coding Review Program  
**Effective Date:** June 3, 2026

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## Summary

Beginning with claims processed on or after June 3, 2026, CareSource will implement a level of care review program on all E&M coding levels to ensure accuracy of coding.

## Impact

A provider's medical record should report the pertinent facts of a patient's health and social history, physical exam findings, test results, an assessment, and a care plan. The documentation should support the medical necessity and appropriateness of the diagnoses and services provided on the health claim form.

Certified nurse review coders will conduct a review, and they will periodically and randomly review for appropriate level of care coding. If a claim is found to not be supported, it will be paid at the supported level.

Should providers disagree with the determination, they should follow the claims dispute process as outlined in the Provider Manual and provide all clinical documentation necessary to support the appropriate level of coding. We will review the dispute with additional documentation, make a decision on the claim, and communicate to providers within 30 days of receipt.

## Questions?

Contact your Health Partner Engagement Specialist or Provider Services at the appropriate number below:

- Marketplace: **1-833-230-2101**, available Monday through Friday, 8 a.m. to 6 p.m. Eastern Time (ET)
- Medicaid: **1-800-488-0134**, available Monday through Friday, 7 a.m. to 8 p.m. ET
- CareSource® MyCare Ohio (HMO D-SNP): **1-800-488-0134**, available Monday through Friday, 8 a.m. to 6 p.m. ET

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