Clinical Edits by Code List
Edit Removal List
Applies to All Commercial Products (excl. Medicare)

Code	Description	Edit Type
A2003	Bio-Connekt Wound Matrix	Investigational Denial (retro effective 1/1/2022)
M1072	Rom Rad Therapy Anal, Pc	Non-Reimbursable Services (retro effective 1/1/2022)
M1073	Rom Rad Therapy Anal, Tc	Non-Reimbursable Services (retro effective 1/1/2022)
M1074	Rom Rad Therapy Bladder, Pc	Non-Reimbursable Services (retro effective 1/1/2022)
M1075	Rom Rad Therapy Bladder, Tc	Non-Reimbursable Services (retro effective 1/1/2022)
M1076	Rom Rad Ther Bone Mets, Pc	Non-Reimbursable Services (retro effective 1/1/2022)
M1077	Rom Rad Ther Bone Mets, Tc	Non-Reimbursable Services (retro effective 1/1/2022)
M1078	Rom Rad Ther Brain Mets, Pc	Non-Reimbursable Services (retro effective 1/1/2022)
M1079	Rom Rad Ther Brain Mets, Tc	Non-Reimbursable Services (retro effective 1/1/2022)
M1080	Rom Rad Therapy Breast, Pc	Non-Reimbursable Services (retro effective 1/1/2022)
M1081	Rom Rad Therapy Breast, Tc	Non-Reimbursable Services (retro effective 1/1/2022)
M1082	Rom Rad Therapy Cervical, Pc	Non-Reimbursable Services (retro effective 1/1/2022)
M1083	Rom Rad Therapy Cervical, Tc	Non-Reimbursable Services (retro effective 1/1/2022)
M1084	Rom Rad Therapy Cns, Pc	Non-Reimbursable Services (retro effective 1/1/2022)
M1085	Rom Rad Therapy Cns, Tc	Non-Reimbursable Services (retro effective 1/1/2022)
M1086	Rom Rad Ther Colorectal, Pc	Non-Reimbursable Services (retro effective 1/1/2022)
M1087	Rom Rad Ther Colorectal, Tc	Non-Reimbursable Services (retro effective 1/1/2022)
M1088	Rom Rad Ther Head/Neck, Pc	Non-Reimbursable Services (retro effective 1/1/2022)
M1089	Rom Rad Ther Head/Neck, Tc	Non-Reimbursable Services (retro effective 1/1/2022)
M1094	Rom Rad Therapy Lung, Pc	Non-Reimbursable Services (retro effective 1/1/2022)
M1095	Rom Rad Therapy Lung, Tc	Non-Reimbursable Services (retro effective 1/1/2022)
M1096	Rom Rad Therapy Lymphoma, Pc	Non-Reimbursable Services (retro effective 1/1/2022)
M1097	Rom Rad Therapy Lymphoma, Tc	Non-Reimbursable Services (retro effective 1/1/2022)
M1098	Rom Rad Therapy Pancreas, Pc	Non-Reimbursable Services (retro effective 1/1/2022)
M1099	Rom Rad Therapy Pancreas, Pc	Non-Reimbursable Services (retro effective 1/1/2022)
M1100	Rom Rad Therapy Prostate, Pc	Non-Reimbursable Services (retro effective 1/1/2022)
M1101	Rom Rad Therapy Prostate, Tc	Non-Reimbursable Services (retro effective 1/1/2022)
M1102	Rom Rad Therapy Gi, Pc	Non-Reimbursable Services (retro effective 1/1/2022)
M1103	Rom Rad Therapy Gi, Tc	Non-Reimbursable Services (retro effective 1/1/2022)
M1104	Rom Rad Therapy Uterus, Pc	Non-Reimbursable Services (retro effective 1/1/2022)
M1105	Rom Rad Therapy Uterus, Tc	Non-Reimbursable Services (retro effective 1/1/2022)