

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

| Code | Description | Edit Type |
|-------|--------------------------------|---------------------------|
| 0346U | Beta Amyl Aβ40&Aβ42 Lc-Ms/Ms | Investigational Denial |
| 0380U | Rx Metb Advrs Trgt Sq Aly 20 | Investigational Denial |
| 90654 | Flu vaccine no preserv, id | Non-Reimbursable Services |
| C9734 | U/S treatment, not leiomyomata | Investigational Denial |
| C9769 | Cysto w/temp pros implant | Investigational Denial |
| G1001 | Cdsm evicore | Non-Reimbursable Services |
| G1002 | Cdsm medcurrent | Non-Reimbursable Services |
| G1003 | Cdsm medicalis | Non-Reimbursable Services |
| G1004 | Cdsm ndsc | Non-Reimbursable Services |
| G1007 | Cdsm aim | Non-Reimbursable Services |
| G1008 | Cdsm cranberry pk | Non-Reimbursable Services |
| G1010 | Cdsm stanson | Non-Reimbursable Services |
| G1011 | Cdsm qualified nos | Non-Reimbursable Services |
| G1012 | Cdsm agilemd | Non-Reimbursable Services |
| G1013 | Cdsm evidencecare | Non-Reimbursable Services |
| G1014 | Cdsm inveniq | Non-Reimbursable Services |
| G1015 | Cdsm reliant | Non-Reimbursable Services |
| G1016 | Cdsm speed of care | Non-Reimbursable Services |
| G1017 | Cdsm healthhelp | Non-Reimbursable Services |
| G1018 | Cdsm infinx | Non-Reimbursable Services |
| G1019 | Cdsm logicnets | Non-Reimbursable Services |

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| G1020 | Cdsm curbside | Non-Reimbursable Services |
| G1021 | Cdsm ehealthline | Non-Reimbursable Services |
| G1022 | Cdsm intermountain | Non-Reimbursable Services |
| G1023 | Cdsm persivia | Non-Reimbursable Services |
| G1024 | Cdsm Radrite | Non-Reimbursable Services |
| G2070 | Med assist tx implant | Non-Reimbursable Services |
| G2071 | Med tx remove implant | Non-Reimbursable Services |
| G2072 | Med tx insert/remove imp | Non-Reimbursable Services |
| G8482 | Influenza Immunization Was Ordered Or Administered | Non-Reimbursable Services |
| G8483 | Influenza Immunization Was Not Ordered Or Administ | Non-Reimbursable Services |
| G8484 | Influenza Immunization Was Not Ordered Or Administ | Non-Reimbursable Services |
| G8965 | CSIT perf on low CHD rsk | Non-Reimbursable Services |
| G8966 | CSIT perf sx or high CHD rsk | Non-Reimbursable Services |
| G9402 | Recd f/u w/in 30d disch | Non-Reimbursable Services |
| G9403 | Doc reas no 30 day f/u | Non-Reimbursable Services |
| G9404 | No 30 day f/u | Non-Reimbursable Services |
| G9405 | Recd f/u w/in 7d disch | Non-Reimbursable Services |
| G9406 | Doc reas no 7d f/u | Non-Reimbursable Services |
| G9407 | No 7d f/u | Non-Reimbursable Services |
| G9458 | Tob user recd cess interv | Non-Reimbursable Services |
| G9459 | Tob non-user | Non-Reimbursable Services |

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| G9460 | No tob assess or cess inter | Non-Reimbursable Services |
| G9707 | Pt had hosp dur msmt per | Non-Reimbursable Services |
| G9751 | Pt died w/in 24 mos rpt time | Non-Reimbursable Services |
| G9760 | Pt w/hosp anytime msmt per | Non-Reimbursable Services |
| G9892 | Doc pt rsn no dil mac exam | Non-Reimbursable Services |
| G9893 | No mac exam | Non-Reimbursable Services |
| G9919 | Scrn nd pos nd prov of rec | Non-Reimbursable Services |
| G9920 | Scrnng perf and negative | Non-Reimbursable Services |
| G9921 | No or part scrn nd rng or os | Non-Reimbursable Services |
| G9974 | Dil mac exam performed | Non-Reimbursable Services |
| G9975 | Doc med rsn no mac exm perf | Non-Reimbursable Services |
| G9990 | No Pneum Vax Admin 60+ | Non-Reimbursable Services |
| G9991 | Pneum Vax Admin 60+ | Non-Reimbursable Services |
| M0003 | Opt Care Episod Neuro Mvp | Non-Reimbursable Services |
| M1154 | Hospc Serv Dur Meas Pd | Non-Reimbursable Services |
| M1155 | Pt Anphx Due To Pneum | Non-Reimbursable Services |
| M1219 | Anphx Due To Vax | Non-Reimbursable Services |
| M1264 | Pts 75+ Dialysis Dt | Non-Reimbursable Services |