

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

\*Based on Medical Policy, potential investigational codes may be denied as Investigational (member liability) or not medically necessary (provider liability).\*

\*\*In addition, some cosmetic codes may be denied as cosmetic (member liability) or not medically necessary (provider liability).\*\*

Code	Description	Edit Type
A2014	Omeza collag per 100 mg	Investigational Denial (retro effective 10/1/2022)
A2015	Phoenix wnd mtrx, per sq cm	Investigational Denial (retro effective 10/1/2022)
A2016	Permeaderm b, per sq cm	Investigational Denial (retro effective 10/1/2022)
A2017	Permeaderm glove, each	Investigational Denial (retro effective 10/1/2022)
A2018	Permeaderm c, per sq cm	Investigational Denial (retro effective 10/1/2022)
A4596	Ces system monthly supp	Investigational Denial (retro effective 10/1/2022)
G0310	Immunize counsel 5-15 min	Non-Reimbursable Services (retro effective 10/1/2022)
G0311	Immunize counsel 16-30 mins	Non-Reimbursable Services (retro effective 10/1/2022)
G0312	Immunize couns < 21yr 5-15 m	Non-Reimbursable Services (retro effective 10/1/2022)
G0313	Immunize couns < 21yr 6-30 m	Non-Reimbursable Services (retro effective 10/1/2022)
G0314	Counsel immune <21 16-30 m	Non-Reimbursable Services (retro effective 10/1/2022)
G0315	Counsel immune <21 5-15 m	Non-Reimbursable Services (retro effective 10/1/2022)
T1032	Sv doula brth wrk per 15 min	Non-Reimbursable Services (retro effective 10/1/2022)
T1033	Sv doula brth wrk per diem	Non-Reimbursable Services (retro effective 10/1/2022)