Clinical Edits by Code List Edit Add List Applies to Uniform Medical Plan (UMP)

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).** Description **Edit Type** Code A2014 Omeza collag per 100 mg Investigational Denial (retro effective 10/1/2022) Investigational Denial (retro effective 10/1/2022) A2015 Phoenix wnd mtrx, per sq cm A2016 Investigational Denial (retro effective 10/1/2022) Permeaderm b, per sq cm 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 Investigational Denial (retro effective 10/1/2022) Ces system monthly supp 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 Non-Reimbursable Services (retro effective 10/1/2022) Sv doula brth wrk per 15 min T1033 Non-Reimbursable Services (retro effective 10/1/2022) Sv doula brth wrk per diem