

**Clinical Edits by Code List**  
**Always Not Medically Necessary Denials**  
**Applies to Medicare Advantage**

Code	Description	Edit Type	Comment
0001U	RBC DNA HEA 35 AG 11 blood groups	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0002U	measure of subst in urine to predict polyps large intestine	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0004M	Scoliosis DNA analysis using saliva	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0006M	Oncology mRNA express tumor	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0007M	Oncology PCR express tumor	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0012M	ONC mRNA 5 gene risk urothelial carcinoma	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0013M	ONC mRNA gene recurrent urothelial carcinoma	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0015M	Adrnl cortcl tum bchm asy 25	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0016M	Onc bladder mrna 209 gen alg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0019M	Cv Ds Plasma Alys Prtn Bmrk	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0021U	Oncology prostate detection 8 autoanitbodies	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0035U	Neuro CSF prion protein qua	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0036U	XOME TUM & NML SPEC SEQ ALYS	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0038U	Vitamin D serum microsample quan	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0040U	BCR/ABL1 gene major breakpoint quantitative	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0041U	Borrelia burgdoferi antibody 5 protein IgM	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0042U	Borrelia burgdoferi antibody 12 protein IgG	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0043U	Tick-borne Borrelia grp antibody 4 protein IgM	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0044U	Tick-borne Borrelia grp antibody 4 protein IgG	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0050U	Targeted genomic sequence DNA 194 genes	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0052U	Lipoprotein blood w/5 major classes	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off

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Code	Description	Edit Type	Comment
0055U	Cardiology heart transplant 96 DNA sequence	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0058U	Oncology Merkel cell carcinoma serum quan	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0059U	Oncology Merkel cell carcinoma serum +/-	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0060U	Twin zygoty genomic seq analysis chromosome 2	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0061U	Transcutaneous meas bmrk SFDI M-S Alys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0062U	Autoimmue SLE IgG & IgM analysis 80 biomakers	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0063U	Neurology autism 32 amines algorithm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0067U	Oncology breast IMHCHEM profiling 4 biomarkers	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0079U	Comparative DNA analyis multiple SNPS	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0087U	Crd hrt trnspl mrna 1283 gen	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0088U	Trnsply kdn algrft rej 1494	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0091U	Onc clrct scr whl bld alg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0092U	Onc lng 3 prtn bmrk plsm alg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0094U	Genome rapid sequence alys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0096U	Hpv hi risk types male urine	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0102U	Hered brst ca rtdo 17 gen	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0103U	Hered ova ca pnl 24 genes	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0108U	Gi barrett esoph 9 prtn bmrk	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0113U	Onc prst8 pca3&tprss2- erg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0117U	Pain mgmt 11 endogenous anal	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0119U	Crd ceramides liq chrom plsm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off

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Code	Description	Edit Type	Comment
0120U	Onc b cll lymphm mrna 58 gen	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0132U	Hered ova ca rlted do pnl 17	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0135U	Hered gyn ca mrna pnl 12 gen	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0136U	Atm mrna seq alys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0137U	Palb2 mrna seq alys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0138U	Brca1 brca2 mrna seq alys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0152U	Nfct bct fng prst dna >1000	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0153U	Onc breast mrna 101 genes	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0157U	Apc mrna seq alys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0158U	Mlh1 mrna seq alys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0159U	Msh2 mrna seq alys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0160U	Msh6 mrna seq alys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0161U	Pms2 mrna seq alys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0163U	Onc clrct scr 3 prtn alg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0173U	Psyc gen alys panel 14 genes	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0174U	Onc solid tumor 30 prtn trgt	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0175U	Psyc gen alys panel 15 genes	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0203U	Ai ibd mrna xprsn prfl 17	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0205U	Oph amd alys 3 gene variants	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0209U	Cytog const alys interrog	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0211U	Onc pan-tum dna&rna gnrj seq	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off

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Code	Description	Edit Type	Comment
0212U	Rare ds gen dna alys proban	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0213U	Rare ds gen dna alys ea comp	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0214U	Rare ds xom dna alys proband	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0215U	Rare ds xom dna alys ea comp	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0216U	Neuro inh ataxia dna 12 com	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0217U	Neuro inh ataxia dna 51 gene	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0219T	Fuse spine facet jt cerv	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0220T	Fuse spine facet jt thor	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0221T	Fuse spine facet jt lumbar	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0222T	Fuse spine facet jt add seg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0226U	Svnt SAR COV2 elisa plsm srm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0228U	Onc prst8 ma molec prfl alg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0243U	Ob pe biochem assay pgf alg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0247U	Ob prtrm brth ibp4 shbg meas	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0248U	Onc Brn Sphrd Cll 12 Rx Pnl	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0249U	Onc Brst Alys 32 Phsprtn Alg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0251U	Hepcidin-25 Elisa Serum/Plsm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0252U	Ftl Aneuploidy Str Alys Dna	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0253U	Rprdtve Med Rna Gen Prfl 238	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0254U	Reprdtve Med Alys 24 Chrsm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0258U	Ai Psor Mrna 50-100 Gen Alg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off

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Code	Description	Edit Type	Comment
0260U	Rare Ds Id Opt Genome Mapg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0261U	Onc Clrct Ca Img Alys W/Ai	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0264U	Rare Ds Id Opt Genome Mapg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0265U	Rar Do Whl Gn&MtcdrI Dna Als	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0266U	Unxpl Cnst Hrtbl Do Gn Xprsn	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0267U	Rare Do Id Opt Gen Mapg&Seq	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0269U	Hem Aut Dm Cgen Trmbctpna 14	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0270U	Hem Cgen Coagj Do 20 Genes	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0271U	Hem Cgen Neutropenia 23 Gen	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0272U	Hem Genetic Bld Do 51 Genes	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0273U	Hem Gen Hyprfibrnllysis 8 Gen	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0274U	Hem Gen Pltlt Do 43 Genes	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0276U	Hem Inh Thrombocytopenia 23	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0277U	Hem Gen Pltlt Funcj Do 31	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0278U	Hem Gen Thrombosis 12 Genes	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0282U	Rbc Dna Gntyp 12 Bld Grp Gen	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0285U	Onc Rsps Radj ClI Fr Dna Tox	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0289U	Neuro Alzheimer Mrna 24 Gen	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0290U	Pain Mgmt Mrna Gen Xprsn 36	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0291U	Psyc Mood Do Mrna 144 Genes	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0292U	Psyc Strs Do Mrna 72 Genes	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off

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0293U	Psyc Suicidal Idea Mrna 54	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0294U	Lngvty&Mrtlty Rsk Mrna 18Gen	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0295U	Onc Brst Dux Carc 7 Proteins	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0296U	Onc Orl&/Orop Ca 20 Mlc Feat	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0297U	Onc Pan Tum Whl Gen Seq Dna	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0298U	Onc Pan Tum Whl Trns Seq Rna	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0299U	Onc Pan Tum Whl Gen Opt Mapg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0300U	Onc Pan Tum Whl Gen Seq&Opt	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0308U	Crd Cad Alys 3 Prtn Plsm Alg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0309U	Crd Cv Ds Aly 4 Prtn Plm Alg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0312U	Ai Ds Sle Alys 8 Igg Autoant	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0315U	Onc Cutan Sq ClI Ca Mrna 40	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0316U	U B Brgdrferi Lyme Ds Ospa Evl	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0317U	Onc Lung Ca 4-Prb Fish Assay	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0319U	Neph Rna Pretrnspl Perph Bld	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0320U	Neph Rna Psttrnspl Perph Bld	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0321U	Iadna Gu Pthgn 20Bct&Fng Org	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0332U	Onc Pan Tum Gen Prflg 8 Dna	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0333U	Onc Lvr Surveilanc Hcc Cfdna	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0335U	Rare Ds Whl Gen Seq Fetal	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0336U	Rare Ds Whl Gen Seq Bld/Slv	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off

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0341U	Ftl Aneup Dna Seq Cmpr Alys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0342U	Onc Pncrtc Ca Mult Ia Eclia	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0344U	Hep Nafld Semi q Evl 28 Lipid	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0347U	Rx Metab/Pcx Dna 16 Gen Alys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0348U	Rx Metab/Pcx Dna 25 Gen Alys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0349U	Rx Metab/Pcx Dna 27Gen Rx Ia	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0350U	Rx Metab/Pcx Dna 27 Gen Alys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0359U	Onc Prst8 Ca Alys All Psa	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0361U	Neurflmnt Lt Chn Dig Ia Quan	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0363U	Onc Urthl Mrna 5 Gen Alg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0365U	Onc Bldr 10 Prb Bldr Ca	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0366U	Onc Bldr 10 Prb Recr Bldr Ca	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0367U	Onc Bldr 10 Flwg Trurl Rescj	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0368U	Onc Clrct Ca Mut&Mthyltn Mrk	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0369U	Iadna Gi Pthgn 31 Org&21 Arg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0373U	Iadna Rsp Tr Nfct 17 8 13&16	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0384U	Neph Ckd Rsk Hi Stg Kdn Ds	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0385U	Neph Ckd Alg Rsk Dbtc Kdn Ds	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0390U	Ob Pe Kdr Eng&Rbp4 Ia Alg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0392U	Rx Metab Genrx Ia 16 Genes	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0400U	Neuro Cere Folate Defncy Srm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off

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0401U	Neuro Cere Folate Defncy Srm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0415U	Cv Ds Acs Bld Alg 5 Yr Score	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0417U	Rare Ds Alys 335 Nuc Genes	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0421U	Onc Clrct Scr Sgl Amp 8 Rna	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0425U	Genom Rpd Seq Alys Ea Cmprtr	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0426U	Genome Ultra-Rapid Seq Alys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0429U	Hpv Orop Swab 14 Hirisk Typ	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0434U	Rx Metab Advrs Vrrnt Alys 25	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0435U	Onc Chemo Rx Cytos Csc 14 Rx	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0437U	Psyc Anxiety Do Mrna 15 Bmrk	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0438U	Rx Metab Advrs Vrrnt Alys 33	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0439U	Crđ Chđ Dna Alys 5 Snp 3 Dna	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0440U	Crđ Chđ Dna Alys 10 Snp 6Dna	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0443U	Neurflmnt Lt Chn Ultrsens Ia	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0449U	Car Scr Sev Inh Cond 5 Genes	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0452U	Onc Bldr Mthyl Penk Lte-Qmsp	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0453U	Onc Clrct Ca Cfdna Qpqr Asy	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0458U	Onc Brst Ca S100 A8&A9 Elisa	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0460U	Onc Whl Bld/Bucc Rtpcr 24Gen	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0461U	Onc Rxgenom Alys Rtpcr 24Gen	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0462U	Melatonin Lvl Tst Slp Std7/9	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off



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0464U	Onc Clrct Scr Qrtsa Dna Mrk	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0465U	Onc Urthl Carc Dna Qmsp 2Gen	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0466U	Crđ Cad Dna Gwas 564856 Snp	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0468U	Hep Nash Mir34A5P A2M Ykl40	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0476U	Rx Metab Psyc 14Gen&Cyp2D6	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0477U	Rx Metab Psy 14&Cyp2D6 Gn-Rx	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0482U	Ob Pe Biochem Asy Sflt1&Plgf	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0488U	U Ob Fetal Ag Nipt Cfdna Alys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0489U	Ob Sgnipt Cfdna Seq Alys 1+	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0494U	Rbc Ag Ftl Rhd Gene Alys Ngs	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0496U	Onc Clrct Cfdna 8/7 Genes	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0501U	Onc Clrc Bld Quan Meas Cfdna	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0511U	Onc Sol Tum 3Dmicroenvir 36+	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0524U	OB PE SFLT-1/PLGF IA SRM/PLS	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0525U	ONC SPHRD CELL CUL 11-RX PNL	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0529U	HEM VTE SNP F2&F5 GEN LEIDEN	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0564T	Onc chemo rx cytotox csc 14	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0620T	Evasc ven artlz tibl/prnl vn	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0621T	Trabeculostomy interno laser	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0622T	Trabeculostomy int lsr w/scp	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0627T	Perq njx algc fluor Imbr 1st	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off

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Code	Description	Edit Type	Comment
0628T	Perq njx algc fluor Imbr ea	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0629T	Perq njx algc ct Imbr 1st	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0630T	Perq njx algc ct Imbr ea	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0631T	Tc vis lit hyperspectral img	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0632T	Perq tcat us abltj nrv p-art	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0639T	Wrls skn snr anisotropy meas	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0640T	Ncntc Nr lfr Spctrsc Wnd	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0645T	Tcat Impltj C Sins Rdctj Dev	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0646T	Ttvi/Rplcmt W/Prstc Vlv Perq	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0656T	Vrt Bdy Tethering Ant <7 Seg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0657T	Vrt Bdy Tethering Ant 8+ Seg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0660T	Implt Ant Sgm Io Nbio Rx Sys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0661T	Rmvl&Rimpltj Ant Sgm Implt	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0672T	Ndovag Cryg Rf Remdl Tiss	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0674T	Laps Insj Nw/Rpcmt Prm Isdss	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0675T	Laps Insj Nw/Rpcmt Isdss 1Ld	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0676T	Laps Insj Nw/Rpcmt Isdss Ea	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0677T	Laps Repos Lead Isdss 1St Ld	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0678T	Laps Repos Lead Isdss Ea Add	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0679T	Laps Rmvl Lead Isdss	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0680T	Insj/Rplcmt Pg Only Isdss	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off

**Clinical Edits by Code List**  
**Always Not Medically Necessary Denials**  
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Code	Description	Edit Type	Comment
0681T	Rlcj Pulse Gen Only Isdss	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0682T	Removal Pulse Gen Only Isdss	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0683T	Prgmng Dev Eval Isdss Ip	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0684T	Peri-Px Dev Eval Isdss Ip	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0685T	Interrog Dev Eval Isdss Ip	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0686T	Histotripsy Mal Hepatcel Tis	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0697T	Quan Mr Tis Wo Mri Mlt Orgn	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0698T	Quan Mr Tiss W/Mri Mlt Orgn	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0700T	Molec Fluor Img Sus Nev 1St	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0701T	Molec Fluor Img Sus Nev Ea	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0714T	Tprnl Lsr Ablt B9 Prst8 Hypr	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0717T	Adrc Ther Prtl Rc Tear	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0718T	Adrc Ther Prtl Rc Tear Njx	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0719T	Pst Vrt Jt Rplcmt Lmbr 1 Sgm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0725T	Vestibular Dev Impltj Uni	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0726T	Rmvl Implt Vstibular Dev Uni	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0727T	Rmvl&Rplcmt Implt Vstblr Dev	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0728T	Dx Alys Vstblr Implt Uni 1St	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0729T	Dx Alys Vstblr Implt Uni Sbj	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0730T	Trabeculotomy Lsr W/Oct Gdn	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0732T	Immntx Admn Electroporatn Im	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off

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Code	Description	Edit Type	Comment
0737T	Xenograft Impltj Artclr Surf	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0738T	Tx Pln Mag Fld Abltj Prst8	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0739T	Abltj Mal Prst8 Mag Fld Ndct	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0744T	Insj Bioprostc Vlv Fem Vn	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0745T	Car Ablt Rad Arr N-Invas Loc	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0746T	Car Ablt Rad Arr Cnv Loc Map	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0747T	Car Ablt Rad Arrhvt Dlvr Rad	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0748T	Njx Stm Cl Prdct Anl Sft Tis	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0764T	Asstv Alg Ecg Rsk Asmt Cncrt	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0765T	Asstv Alg Ecg Rsk Asmt Prev	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0766T	Tc Mag Stimj Pn 1St Tx 1Nrv	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0767T	Tc Mag Stimj Pn 1St Tx Ea	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0770T	Vr Technology Assist Therapy	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0776T	Ther Indctj NtrabrN Hypthrm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0781T	Brnchsc Rf Dstrj Pulm Nrv Bi	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0782T	Brnchsc Rf Dstrj Plm Nrv Uni	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0783T	Tc Auriculr Neurostimulation	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0793T	Prq Tcat ThrM Ablt Nrv P-Art	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0794T	Pt Spec Alg Rx-Onc Tx Option	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0811T	Rem Mlt Day Uroflow Setup	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0812T	Rem Mlt Day Uroflow Dev Sply	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off

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**Always Not Medically Necessary Denials**  
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Code	Description	Edit Type	Comment
0814T	Prq Njx Biod Osteo MatrL Fem	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0859T	Ncntc Ifr Spctrsc O/T Pad Ea	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0860T	Ncntc Ifr Spctrsc Scr Pad	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0861T	Rmvl Pg Wcs Lv Both Compnt	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0862T	Rlcj Pg Wcs Lv Battery Only	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0863T	Rlcj Pg Wcs Lv Trnsmtr Only	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0864T	Low Ntsty Eswt Corpus Cvrnsm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0865T	Quan Mri Alys Brn W/O Dx Mri	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0866T	Quan Mri Alys Brn W/Dx Mri	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0870T	Imp Subq Prtl Ascts Pmp Sys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0871T	Rplcmt Subq Prtl Ascites Pmp	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0872T	Rplcmt Ndwlg Bldr&Prtl Cath	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0873T	Revj Subq Prtl Asct Pmp Sys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0875T	Prgm Subq Prtl Asct Pmp Sys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0876T	Duplex Scan Hemo Fstl Lmtd	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0881T	Cryotherapy Oral Cavity	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0884T	Esphgsc Flx 1St Tndsc Dilat	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0885T	Colsc Flx 1St Tndsc Dilat	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0886T	Sgmdsc Flx 1St Tndsc Dilat	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0901T	PLMT BONE MARROW SMP LG PORT	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0915T	INSJ PERM CCM-D SYS PG&ELTRD	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off

**Clinical Edits by Code List**  
**Always Not Medically Necessary Denials**  
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Code	Description	Edit Type	Comment
0916T	INSJ PERM CCM-D SYS PG ONLY	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0917T	INSJ PERM CCM-D SYS 1 LEAD	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0918T	INSJ PERM CCM-D SYS DUAL LD	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0919T	RMVL PERM CCM-D SYS PG ONLY	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0920T	RMVL PERM CCM-D SYS 1 PAC LD	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0921T	RMVL PERM CCM-D SYS 1 DFB LD	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0922T	RMVL PERM CCM-D SYS DUAL LD	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0923T	RMVL&RPLCMT PERM CCM-D PG	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0924T	RPOS PRV CCM-D TRNSVNS ELTRD	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0925T	RLCJ SKIN POCKET CCM-D PG	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0926T	PRGRMG DEV EVAL CCM-D IP	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0927T	INTERROG DEV EVAL CCM-D IP	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0928T	REM INTERROG DEV CCM-D PHYS	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0929T	REM INTERROG DEV CCM-D TECH	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0930T	EPHYS EVAL CCM-D LD 1ST IMPL	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0931T	EPHYS EVAL CCM-D LD SEPARATE	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0933T	TCAT IMPL WRLS L ATR PRS SNR	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0934T	REM MNTR WRLS L ATR PRS SNR	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0936T	PHOTOBIMODULATION THER RTA	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0937T	XTRNL ECG REC>15D<30D	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0938T	XTRNL ECG REC>15D<30D REC	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off

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**Always Not Medically Necessary Denials**  
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Code	Description	Edit Type	Comment
0939T	XTRNL ECG REC>15D<30D SCAN	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
0940T	XTRNL ECG REC>15D<30D R&I	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
15819	Plastic Surgery, Neck	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
15824	Removal Of Forehead Wrinkles	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
15825	Removal Of Neck Wrinkles	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
15826	Removal Of Brow Wrinkles	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
15828	Removal Of Face Wrinkles	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
15829	Removal Of Skin Wrinkles	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
21137	Reduction Of Forehead	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
21138	Reduction Of Forehead	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
21139	Reduction Of Forehead	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
21270	Augmentation, Cheek Bone	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
31830	Revise Windpipe Scar	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
36468	Injection(s), Spider Veins	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
53855	Insert prost urethral stent	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
69300	Revise External Ear	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
81240	F2 gene	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
81241	F5 gene	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
81291	Mthfr gene	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
81506	Endo assay seven anal	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
81508	Ftl cgen abnor two proteins	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off

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**Always Not Medically Necessary Denials**  
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Code	Description	Edit Type	Comment
81509	Ftl cgen abnor 3 proteins	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
81510	Ftl cgen abnor three anal	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
81511	Ftl cgen abnor four anal	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
81512	Ftl cgen abnor five anal	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
86408	Neutrlzg antb SARSCOV2 SCR	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
86409	Neutrlz antb SARSCOV2 titer	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
86965	Pooling Blood Platelets	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
98978	Rem Ther Mntr Dev Sply Cbt	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
A2011	Supra Sdrm, Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
A2012	Suprathel, Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
A2013	Innovamatrix Fs, Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
A2014	Omeza collag per 100 mg	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
A2015	Phoenix wnd mtrx, per sq cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
A2016	Permeaderm b, per sq cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
A2017	Permeaderm glove, each	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
A2018	Permeaderm c, per sq cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
A2019	Kerecis Marigen Shld Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
A2020	Ac5 Wound System	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
A2021	Neomatrix Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
A4100	Skin Sub Fda Clrd As Dev Nos	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
A4540	Trans Elec Nerv Periph Nerv	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off



**Clinical Edits by Code List**  
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A4541	Monthly Supp Use With E0733	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
A9291	Pres Digital Behav Thera Fda	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
C1833	Cardiac Monitor Sys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
C9783	Blind Cor Sinus Reducer Impl	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
E0490	Control Unit Nm Hw Remote	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
E0491	Oral Dv Nm Mouthpc Hw Remote	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
E0492	Control Unit Nm Stim W Phone	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
E0493	Oral Dv/App Neuromus Mouthpi	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
E0715	Intravag Pelvic Floor Kegel	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
E0716	Supp And Acces Intravag Pelv	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
E0744	Neuromuscular Stimulator Scoliosis	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
E0762	Transcut Elec Joint Stim Devc Sys	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
E0769	Estim/elec magnet Wound Tx Devc Noc	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
E3200	Gait Mod Systm Rhym Auditory	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
L5969	Ak/ft power asst incl motors	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4224	Hhf10-P Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4225	Amniobind, Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4236	Carepatch per sq cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4256	Mlg Complet, Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4257	Relese, Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4258	Enverse, Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4259	Celera Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4260	Signature Apatch, Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4261	Tag, Per Square Centimeter	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4262	Dual Layer Impax, Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4263	Surgraft TI, Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4264	Cocoon Membrane, Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4265	Neostim TI Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off

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**Always Not Medically Necessary Denials**  
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Code	Description	Edit Type	Comment
Q4266	Neostim Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4267	Neostim DI Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4268	Surgraft Ft Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4269	Surgraft Xt Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4270	Complete SI Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q4271	Complete Ft Per Sq Cm	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
Q9004	Va Whole Health Partner Serv	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
S9432	Med Food Non Inborn Err Meta	Not Medically Necessary	Always considered not medically necessary. Will be denied as a provider write-off
3395F	Quant HER2 IHC eval breast cancer	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3450F	Dyspnea Scrnd, No-mild Dysp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3451F	Dyspnea Scrnd Mod-high Dysp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3452F	Dyspnea Not Screened	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3455F	Tb Scrng Done-interpd 6mon	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3470F	Ra Disease Activity, Low	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3471F	Ra Disease Activity, Mod	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3472F	Ra Disease Activity, High	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3475F	Disease Progn Ra Poor Docd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3476F	Disease Progn Ra Good Docd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
34839	Plnning pt spec fenest graft	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
34848	Visc & infraren abd 4+ prost	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3490F	History - Aids-defining Cond	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3491F	Hiv Unsure Baby Of Hiv+moms	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3492F	History Cd4+ Cell Count <350	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3493F	No Hist Cd4+cell Cnt<350	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3494F	Cd4+cell Count <200cells/mm3	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3495F	Cd4+cell Cnt 200-499 Cells	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3496F	Cd4+ Cell Count =500 Cells	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3497F	Cd4+ Cell Percentage <15%	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3498F	Cd4+ Cell Percentage =15%	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3500F	Cd4 +cell Count% Documented As Done	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3502F	Hiv Rna Vrl Load <Imts Quantif	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3503F	Hiv Rna Vrl Load Below Limits Of Quantif	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

**Clinical Edits by Code List**  
**Always Not Medically Necessary Denials**  
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Code	Description	Edit Type	Comment
3510F	Doc Tb Screening Results Interpreted	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3511F	Chlamydia And Gonorrhea Documented Done	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3512F	Syphilis Screening Documented As Done	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3513F	Hepatitis Screening Documented As Done	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3514F	Hepatitis C Screening Documented As Done	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3515F	Patient Has Documented Immunity To Hep C	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3517F	Hbv assess&results intrp 1yr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3520F	Cdifficile testing performed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3550F	Low Risk Thromboembolism	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3551F	Intermediate Risk Thromboembolism	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3552F	High Risk For Thromboembolism	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3555F	Patient Inr Measurement Preformed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3570F	Report Scint X-ref With X-ray	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3572F	Patient Considered Poss Risk Fx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3573F	Patient Not Considered Poss Risk Fx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
36000	Place Needle In Vein	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
36416	Capillary Blood Draw	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
3650F	EEG ordered rwd reqstd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3700F	Psychiatric disorder or disturbances assessed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3720F	Cognitive impairment or dysfunction assessed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
37216	Transcath Stent, Cca W/o Eps	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3725F	Screen depression performed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3750F	Ptnotrcvngsteroid>/=10mg/day	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3751F	Electrodiag polyneuro 6 months	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3752F	No electrodiag polyneuro 6 months	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3753F	Pt has symp and signs neuropathy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3754F	Screeing tests dm done	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3755F	Cognitive and behav impairment scrng	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3756F	Pt with pseudobulb affect ALS	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3757F	Pt with no pseudobulb affect ALS	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3758F	Pt referred pulmon fx test / peak flow	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3759F	Pt screened dysphag/wt loss/nutr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
3760F	Pt w/ dysphag/wt loss/nutr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3761F	Pt w/o dysphag/wt loss/nutr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3762F	Patient is dysarthric	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3763F	Patient is not dysarthric	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3775F	Adenoma(s)/neoplasm detected during colonoscopy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
3776F	Adeonom(s)/neoplasm not detected in colonoscopy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
38204	Bl Donor Search Management	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
38207	Cryopreserve Stem Cells	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
38208	Thaw Preserved Stem Cells	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
38209	Wash Harvest Stem Cells	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
38210	T-cell Depletion Of Harvest	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
38211	Tumor Cell Deplete Of Harvst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
38212	Rbc Depletion Of Harvest	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
38213	Platelet Deplete Of Harvest	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
38214	Volume Deplete Of Harvest	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
38215	Harvest Stem Cell Concentrte	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
38225	Car-t hrv bld-drvt lymphcyt	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
38226	Car-t prep t lymphcyt f/trns	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
38227	Car-t receipt&prep admn	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
4000F	Tobacco Use Txmnt Counseling	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4001F	Tobacco Use Txmnt, Pharmacol	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4003F	Pt Ed Write/oral, Pts W/ Hf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4004F	Pt tobacco use done rcvd tlk	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4005F	Pharm Thx For Op Rx'd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4008F	Beta-blocker therapy rxd/tkn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4010F	Ace/arb therapy rxd/taken	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4011F	Oral Antiplatelet Therapy Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4012F	Warfarin Therapy Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4013F	Statin therapy/currently tkn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4014F	Written Discharge Instr Prvd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4015F	Persist Asthma Medicine Ctrl	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4016F	Anti-inflm/anlgsc Agent Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
4017F	Gi Prophylaxis For Nsaid Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4018F	Therapy Exercise Joint Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4019F	Doc Recept Counsl Vit/calc+	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4025F	Inhaled Bronchodilator Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4030F	Oxygen Therapy Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4033F	Pulmonary Rehab Rec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4035F	Influenza Imm Rec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4037F	Influenza Imm Order/admin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4040F	Pneumo Imm Order/admin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4041F	Doc Order Cefazolin/cerfurox	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4042F	Doc Antibio Not Given	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4043F	Doc Order Given Stop Antibio	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4044F	Doc Order Given Vte Prophylx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4045F	Empiric Antibiotic Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4046F	Doc Antibio Given B/4 Surg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4047F	Doc Antibio Given B/4 Surg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4048F	Doc Antibio Given B/4 Surg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4049F	Doc Order Given Stop Antibio	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4050F	Ht Care Plan Doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4051F	Referred For An Av Fistula	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4052F	Hemodialysis Via Av Fistula	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4053F	Hemodialysis Via Av Graft	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4054F	Hemodialysis Via Catheter	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4055F	Pt. Rcvng Perton Dialysis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4056F	Approp. Oral Rehyd Recomm'd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4058F	Ped Gastro Ed Given Caregvr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4060F	Psych Svcs Provided	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4062F	Pt Referral Psych Doc'd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4063F	Antidepress rxthxpy not rxd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4064F	Antidepressant Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4065F	Antipsychotic Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4066F	Ect Provided	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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4067F	Pt Referral For Ect Doc'd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4069F	Vte prophylaxis rcvd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4070F	Dvt Prophylx Recv'd Day 2	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4073F	Oral Antiplat Thx Rx Dischrg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4075F	Anticoag Thx Rx At Dischrg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4077F	Doc T-pa Adm Considered	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4079F	Doc Rehab Svcs Considered	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4084F	Aspirin Recv'd W/in 24 Hrs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4086F	Aspirin/clopidogrel rxd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4090F	Pt Recvng Epo Thxpy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4095F	Pt Not Rcvng Epo Thxpy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4100F	Biphos Thxpy Vein Ord/rec'vd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4110F	Int Mam Art Used For Cabg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4115F	Beta Bckr Admin W/in 24 Hrs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4120F	Antibiot Rx'd/given	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4124F	Antibiot Not Rx'd/given	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4130F	Topical Prep Rx, Aoe	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4131F	Syst Antimicrobial Thx Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4132F	No Syst Antimicrobial Thx Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4133F	Antihist/decong Rx/recom	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4134F	No Antihist/decong Rx/recom	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4135F	Systemic Corticosteroids	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4136F	Syst Corticosteroids Not Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4140F	Inhaled corticosteroids rxd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4142F	Corticoster sparing txmnt rxd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4144F	Alt long-term cntrl med rxd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4145F	2+ anti-hyprtnsv agents tkn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4148F	Hep A Vaccine Injection Admin/recvd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4149F	Hep B Vaccine Injection Admin/recvd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4150F	Pt Recvng Antivir Txmnt Hepc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4151F	Pt Not Recvng Antiv Hep C	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4153F	Combo Pegintf/rib Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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4155F	Hep A Vac Series Prev Recvd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4157F	Hep B Vac Series Prev Recvd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4158F	Pt Consl'd About Risk Of Alcoho	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4159F	Contrcp Talk B/4 Antiv Txmnt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4163F	Patient Counseling At A Minimum On All Of The Foll	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4164F	Adjuvant (ie, In Combination With External Beam Ra	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4165F	Three-dimensional Conformal Radiotherapy (3d-crt)	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4167F	Head Of Bed Elevation (30-45 Degrees) On First Ven	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4168F	Patient Receiving Care In The Intensive Care Unit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4169F	Patient Either Not Receiving Care In The Intensive	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4171F	Patient Receiving Erythropoiesis-stimulating Agent	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4172F	Patient Not Receiving Erythropoiesis-stimulating A	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4174F	Counseling About The Potential Impact Of Glaucoma	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4175F	Best-corrected Visual Acuity Of 20/40 Or Better (d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4176F	Counseling About Value Of Protection From Uv Light	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4177F	Counseling About The Benefits And/or Risks Of The	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4178F	Anti-d Immune Globulin Received Between 26 And 30	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4179F	Tamoxifen Or Aromatase Inhibitor (ai) Prescribed (	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4180F	Adjuvant Chemotherapy Prescribed Or Previously Rec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4181F	Conformal Radiation Therapy Received (onc)1	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4182F	Conformal Radiation Therapy Not Received (onc)1	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4185F	Continuous (12-months) Therapy With Proton Pump In	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4186F	No Continuous (12-months) Therapy With Either Prot	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4187F	Disease Modifying Anti-rheumatic Drug Therapy Pres	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4188F	Appropriate Angiotensin Converting Enzyme (ace)/an	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4189F	Appropriate Digoxin Therapeutic Monitoring Test Or	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4190F	Appropriate Diuretic Therapeutic Monitoring Test O	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4191F	Appropriate Anticonvulsant Therapeutic Monitoring	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4192F	Pt Not Rcvng Glucoco Thxpy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4193F	Pt Rcvng<10mg Daily Predniso	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4194F	Pt Rcvng>10mg Daily Predniso	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4195F	Pt Rcvng Anti-rheum Thxpy Ra	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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4196F	Ptnot Rcvng Anti-rhm Thxpyra	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4200F	External Beam Radiotherapy To Prostate W/wo (prca)	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4201F	External Beam Radiotherapy For Prostate Cancer To	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4210F	Angiotensin Converting Enzyme (ace) Or Angiotensin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4220F	Digoxin Medication Therapy For 6 Months Or More (m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4221F	Diuretic Medication Therapy For 6 Months Or More (	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4230F	Anticonvulsant Medication Therapy For 6 Months Or	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4240F	Instruction In Therapeutic Exercise With Follow-up	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4242F	Counseling For Supervised Exercise Program Provide	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4245F	Patient Counseled During The Initial Visit To Main	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4248F	Patient Counseled During The Initial Visit For An	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4250F	Active Warming Used Intraoperatively For The Purpo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4255F	Anesth >= 60 min as docd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4256F	Anesth < 60 min as docd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4260F	Wound Srfc Culturetech Used	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4261F	Tech Other Than Surf Cult	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4265F	Wet-dry Dressings Rx-recmd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4266F	No Wet-dry Drssings Rx-recmd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4267F	Comprssion Thxpy Prescribed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4268F	Pt Ed Re Comp Thxpy Rcvd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4269F	Appropos Mthd Offloading Rxd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4270F	Patient Receiving Anti R-viral Therapy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4271F	Patient Receiving Anti R-viral Therapy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4274F	Flu Immunization Administered Received	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4276F	Potent antivir thxpy rxd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4279F	Pcp Prophylaxis Rxd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4280F	Pcp Prophylax Rxd 3mon Low %	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4290F	Patient Screen For Injection Drug Use (hiv) 5	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4293F	Patient Screened High-risk Sexual Behavior	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4300F	Patient Receiving Warfin Therapy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4301F	Patient Not Receiving Warfin Therapy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4305F	Pt Ed Re Ft Care Inspct Rcvd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.



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4306F	Pt Tlk Psych & Rx Opd Addic	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4320F	Patient Talk Psychsoc And Treatment Oh Dpnd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4322F	Crgvr prov w/ ed addl rsrcs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4324F	Patient queried Parkinson's Disease Complications	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4325F	Med and surgical treatment options reviewed w/ pt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4326F	Patient asked regarding symptoms auto dysfxn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4328F	Patient asked regarding sleep disturbances	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4330F	Cnslng epi spec sfty issues	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4340F	Cnslng chldbrng+ women epi	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4350F	Cnslng provided symp mngmnt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
43842	V-band Gastroplasty	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4400F	Rehab therapy options with patient	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4450F	Self-care ed provided to pt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
44705	Prepare fecal microbiota	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4470F	lcd counseling provided	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4480F	Pt rcvng ace/arb b-blockertx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4481F	Pt rcvng ace/arb blker<3mons	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4500F	Ref to outpt card rehab prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4510F	Prev cardrehab qualcardevent	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4525F	Neuropsychia interven order	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4526F	Neuropsychia interven rcvd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4540F	Disease modifying pharmacothxpy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4541F	Pt offered tx for pseudobulb	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4550F	Noninvas resp support talk	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4551F	Nutritional support offered	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4552F	Pt ref for speech lang path	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4553F	Pt asst in planning for end of liffe issues	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4554F	Pt receieved inhalation anesthetic	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4555F	Pt received no inhalation anesthetic	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4556F	Pt w/3 or more post op nausea and vomiting	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4557F	Pt w/o 3 or more post op nausea and vomiting	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4558F	Pt received 2 rx anti-emetic agents	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
4559F	1 body temp >=35.5 cw/in 30 min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4560F	Anesth w/o gen/neuraxial anesth	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4561F	Pt w/ coronary artery stent	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4562F	Pt w/o coronary artery stent	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
4563F	Pt received aspirin within 24 hrs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
5010F	Macul+findngs To Dr Mng Dm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
5015F	Doc Fx & Test/txmnt For Op	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
5020F	Treatment Summary Report Communicated To Physician	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
5050F	Treatment Plan Communicated To Provider(s) Managin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
5060F	Findings From Diagnostic Mammogram Communicated To	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
5062F	Documentation Of Direct Communication Of Diagnosti	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
5100F	Rsk Fx Ref W/n 24 Hrs X-ray	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
5200F	Eval appros surg thxpy epi	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
5250F	Asthma discharge plan presnt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
57465	Cam cervix uteri drg colp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
6005F	Care Level Rationale Doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
6010F	Dysphag Test Done B/4 Eating	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
6015F	Pt Recvng/ok For Eatng/swallowing	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
6020F	Npo (nothing-mouth) Ordered	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
6030F	All Elements Of Maximal Sterile Barrier Technique	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
6040F	Use Of Appropriate Radiation Dose Reduction Device	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
6045F	Radiation Exposure Or Exposure Time In Final Repor	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
6070F	Pt asked/cnsld aed effects	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
6080F	Patient/Caregive queried about falls	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
6090F	Patient/Caregive counseled about safety issues	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
6100F	Verify pt site procedure documented	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
6101F	Safety counseling dementia	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
6102F	Safety counseling dem order	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
6110F	Counsel prov driving risks	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
6150F	Pt notrcvng1st antitnf txmnt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
61630	Intracranial Angioplasty	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
61640	Dilate Ic Vasospasm, Init	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
61641	Dilate Ic Vasospasm Add-on	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
61642	Dilate Ic Vasospasm Add-on	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
69090	Pierce Earlobes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
7010F	Patient Information Entered Into A Recall System W	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
7020F	Breast Imaging-reporting And Data System (bi-rads-	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
7025F	Patient Information Entered Into A Reminder System	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
74263	Ct colonography, screen	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
76140	X-ray Consultation	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
77061	Breast tomosynthesis uni	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
77062	Breast tomosynthesis bi	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
77385	Brachytx isodose complex	Non-Reimbursable Services	Not considered a payable Professional service and/or reimbursed separately.
77386	Ntsty modul rad tx dlvr cplx	Non-Reimbursable Services	Not considered a payable Professional service and/or reimbursed separately.
77387	Guidance for radiaj tx dlvr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
77402	Radiation Treatment Delivery	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
77407	Radiation Treatment Delivery	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
78350	Bone Mineral, Single Photon	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
78351	Bone Mineral, Dual Photon	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
78609	Brain Imaging (pet)	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80050	General Health Panel	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80055	Obstetric Panel	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80320	Drug screen quantalcohols	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80321	Alcohols biomarkers 1or 2	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80322	Alcohols biomarkers 3/more	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80323	Alkaloids nos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80324	Drug screen amphetamines 1/2	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80325	Amphetamines 3or 4	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80326	Amphetamines 5 or more	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80327	Anabolic steroid 1 or 2	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80328	Anabolic steroid 3 or more	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80329	Analgesics non-opioid 1 or 2	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80330	Analgesics non-opioid 3-5	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80331	Analgesics non-opioid 6/more	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
80332	Antidepressants class 1 or 2	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80333	Antidepressants class 3-5	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80334	Antidepressants class 6/more	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80335	Antidepressant tricyclic 1/2	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80336	Antidepressant tricyclic 3-5	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80337	Tricyclic & cyclical 6/more	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80338	Antidepressant not specified	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80339	Antiepileptics nos 1-3	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80340	Antiepileptics nos 4-6	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80341	Antiepileptics nos 7/more	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80342	Antipsychotics nos 1-3	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80343	Antipsychotics nos 4-6	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80344	Antipsychotics nos 7/more	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80345	Drug screening barbiturates	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80346	Benzodiazepines 1-12	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80347	Benzodiazepines 13 or more	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80348	Drug screening buprenorphine	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80349	Cannabinoids natural	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80350	Cannabinoids synthetic 1-3	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80351	Cannabinoids synthetic 4-6	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80352	Cannabinoid synthetic 7/more	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80353	Drug screening cocaine	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80354	Drug screening fentanyl	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80355	Gabapentin non-blood	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80356	Heroin metabolite	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80357	Ketamine and norketamine	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80358	Drug screening methadone	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80359	Methylenedioxyamphetamines	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80360	Methylphenidate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80361	Opiates 1 or more	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80362	Opioids & opiate analogs 1/2	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80363	Opioids & opiate analogs 3/4	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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80364	Opioid & opiate analog 5/more	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80365	Drug screening oxycodone	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80366	Drug screening pregabalin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80367	Drug screening propoxyphene	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80368	Sedative hypnotics	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80369	Skeletal muscle relaxant 1/2	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80370	Skel musc relaxant 3 or more	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80371	Stimulants synthetic	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80372	Drug screening tapentadol	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80373	Drug screening tramadol	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80374	Stereoisomer analysis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80375	Drug/substance nos 1-3	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80376	Drug/substance nos 4-6	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
80377	Drug/substance nos 7/more	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
82075	Assay Of Breath Ethanol	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
83992	Assay For Phencyclidine	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
86152	Cell enumeration & id	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
86153	Cell enumeration phys interp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
87913	Nfct Agt Gntyp Alys Sarscov2	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
88000	Autopsy (necropsy), Gross	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
88005	Autopsy (necropsy), Gross	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
88007	Autopsy (necropsy), Gross	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
88012	Autopsy (necropsy), Gross	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
88014	Autopsy (necropsy), Gross	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
88016	Autopsy (necropsy), Gross	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
88020	Autopsy (necropsy), Complete	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
88025	Autopsy (necropsy), Complete	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
88027	Autopsy (necropsy), Complete	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
88028	Autopsy (necropsy), Complete	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
88029	Autopsy (necropsy), Complete	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
88036	Limited Autopsy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
88037	Limited Autopsy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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88040	Forensic Autopsy (necropsy)	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
88045	Coroner's Autopsy (necropsy)	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
88099	Necropsy (autopsy) Procedure	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
9001F	Aortic aneurysm<5cm diam ct	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
9002F	Aortic aneurysm 5-5.4cm diam	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
9003F	Aortic anrysm5.5-5.4cm diam	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
9004F	Aortic anrysm 6/grtr cm diam	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
9005F	Asympt carot/vrtbrbas sten	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
9006F	Sympt sten-tia/strk<120days	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
9007F	Other carot sten120days/grtr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
90393	Vaccina Ig, Im	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
90476	Adenovirus Vaccine, Type 4	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
90477	Adenovirus Vaccine, Type 7	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
90593	CHIKUNGUNYA VACC RECOMB IM	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
90634	Hep A Vacc, Ped/adol, 3 Dose	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
90655	Flu Vaccine No Preserv 6-35m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
90676	Rabies Vaccine, Id	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
90863	Pharmacologic mgmt w/psytx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
90882	Environmental Manipulation	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
90885	Psy Evaluation Of Records	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
90887	Consultation With Family	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
90889	Preparation Of Report	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92352	Special Spectacles Fitting	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92353	Special Spectacles Fitting	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92354	Special Spectacles Fitting	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92355	Special Spectacles Fitting	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92358	Eye Prosthesis Service	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92371	Repair & Adjust Spectacles	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92531	Spontaneous Nystagmus Study	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92532	Positional Nystagmus Test	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92533	Caloric Vestibular Test	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92534	Optokinetic Nystagmus Test	Non-Reimbursable Services	CMS Status B, not reimbursed separately.

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92551	Pure Tone Hearing Test, Air	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
92605	Eval For Nonspeech Device Rx	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92606	Non-speech Device Service	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92618	Ex for nonspeech dev rx add	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92630	Aud Rehab Pre-ling Hear Loss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
92633	Aud Rehab Postling Hear Loss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
92921	Prq cardiac angio addl art	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92925	Prq card angio/athrect addl	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92929	Prq card stent w/angio addl	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92934	Prq card stent/ath/angio	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92938	Prq revasc byp graft addl	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
92944	Prq card revasc chronic addl	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
93050	Art pressure waveform analys	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
93356	Myocrd strain img spckl trck	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
93740	Temperature Gradient Studies	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
93770	Measure Venous Pressure	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
94005	Home Vent Mgmt Supervision	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
94150	Vital Capacity Test	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
95120	Immunotherapy, One Injection	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
95125	Immunotherapy, Many Antigens	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
95130	Immunotherapy, Insect Venom	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
95131	Immunotherapy, Insect Venoms	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
95132	Immunotherapy, Insect Venoms	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
95133	Immunotherapy, Insect Venoms	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
95134	Immunotherapy, Insect Venoms	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
95941	Ionm remote/>1 pt or per hr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
96040	Genetic Counseling, 30 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
96041	Genetic counseling svc ea 30	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
96110	Developmental Test, Lim	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
96155	Interv Hlth/behav Fam No Pt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
96902	Trichogram	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
96904	Whole Body Photography	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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97010	Hot Or Cold Packs Therapy	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
97014	Electric Stimulation Therapy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
97602	Wound(s) Care Non-selective	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
98000	Synch audio-video new sf 15	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98001	Synch audio-video new low 30	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98002	Synch audio-video new mod 45	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98003	Synch audio-video new hi 60	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98004	Synch audio-video est sf 10	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98005	Synch audio-video est low 20	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98006	Synch audio-video est mod 30	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98007	Synch audio-video est hi 40	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98008	Synch audio-only new sf 15	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98009	Synch audio-only new low 30	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98010	Synch audio-only new mod 45	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98011	Synch audio-only new high 60	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98012	Synch audio-only est sf 10	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98013	Synch audio-only est low 20	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98014	Synch audio-only est mod 30	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98015	Synch audio-only est high 40	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98960	Self-mgmt Educ & Train, 1 Pt	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
98961	Self-mgmt Educ/train, 2-4 Pt	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
98962	Self-mgmt Educ/train, 5-8 Pt	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
98970	Qnhp ol dig e/m svc 5-10min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98971	Qnhp ol dig em svc 11-20min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98972	Qnhp ol dig e/m svc 21+ min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98975	Rem Ther Mntr 1St Setup&Edu	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98976	Rem Ther Mntr Dev Sply Resp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98977	Rem Ther Mntr Dv Sply Mscskl	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98980	Rem Ther Mntr 1St 20 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
98981	Rem Ther Mntr Ea Addl 20 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99000	Specimen Handling	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99001	Specimen Handling	Non-Reimbursable Services	CMS Status B, not reimbursed separately.



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Code	Description	Edit Type	Comment
99002	Device Handling	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99024	Postop Follow-up Visit	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99026	In-hospital On Call Service	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99027	Out-of-hosp On Call Service	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99050	Medical Services After Hrs	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99051	Med Serv, Eve/wkend/holiday	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99053	Med Serv 10pm-8am, 24 Hr Fac	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99054	Srvc Req Sun/holiday Add Basic Serv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99056	Med Service Out Of Office	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99058	Office Emergency Care	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99060	Out Of Office Emerg Med Serv	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99070	Special Supplies	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99071	Patient Education Materials	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99072	Addl supl matrl&staf tm phe	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99078	Group Health Education	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99080	Special Reports Or Forms	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99100	Special Anesthesia Service	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99116	Anesthesia With Hypothermia	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99135	Special Anesthesia Procedure	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99140	Emergency Anesthesia	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99172	Ocular Function Screen	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99173	Visual Acuity Screen	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99174	Instrument based eye screening of both eyes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99190	Special Pump Services	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99191	Special Pump Services	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99192	Special Pump Services	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99242	Office Consultation	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99243	Office Consultation	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99244	Office Consultation	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99245	Office Consultation	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99252	Initial Inpatient Consult	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99253	Initial Inpatient Consult	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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99254	Initial Inpatient Consult	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99255	Initial Inpatient Consult	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99288	Direct Advanced Life Support	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99360	Physician Standby Services	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99366	Medical Team Conference With Interdisciplinary Tea	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99367	Medical Team Conference With Interdisciplinary Tea	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99368	Medical Team Conference With Interdisciplinary Tea	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99374	Home Health Care Supervision	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99375	Home Health Care Supervision	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99377	Hospice Care Supervision	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99378	Hospice Care Supervision	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99379	Nursing Fac Care Supervision	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99380	Nursing Fac Care Supervision	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99408	Alcohol And/or Substance (other Than Tobacco) Abus	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99409	Alcohol And/or Substance (other Than Tobacco) Abus	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99411	Preventive Counseling, Group	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99412	Preventive Counseling, Group	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99429	Unlisted Preventive Service	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
99485	Suprv interfacility transport	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
99486	Suprv interfac trnsport addl	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
A0021	Amb Svc Otsd State-mile Transport	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A0140	Nonemerg Trnsprt & Air Travel	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A0380	Bls Mileage	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A0382	Bls Routine Disposable Supplies	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A0384	Bls Splized Srvc Dispbl Spl; Defib	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A0390	Als Mileage	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A0392	Als Splized Srvc Dispbl Spl; Defib	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A0394	Als Splized Srvc Dispbl Spl; Iv Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A0396	Als Splizd Srvc Dispbl Spl;intubat	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A0398	Als Routine Disposable Supplies	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A0420	Amb Waiting Time 1/2 Hr Increments	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A0422	Amb Oxygen&o2 Spl Life Sustaining	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
A4226	Weekly supply maint cgs pump	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4230	Infus Set Ext Insulin Pump Nonndle	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4231	Infus Set Ext Insulin Pump Needle	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4232	Syringe Ndle Ext Insulin Pump Sterl	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4257	Repl Lens Shield Cartridge Lasr Skn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4262	Temp Absorb Lac Duct Implant Ea	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
A4263	Perm Nondissolv Lac Duct Impl Ea	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
A4270	Disposable Endoscope Sheath Each	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
A4300	Impl Accs Catheter External Access	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
A4305	Dispbl Rx Del Sys Rate 50 MI/>-hr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4306	Dispbl Rx Del Sys Rate 5 MI/<-hr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4337	Incontinent rectal insert	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4400	Ostomy Irrigation Set	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4465	Nonelastic Binder For Extremity	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4467	Belt strap sleeve grmnt cover	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4480	Vabra Aspirator	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4550	Surgical Trays	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
A4555	Ca tx e-stim electr/transduc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4570	Splints	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4575	Topical Hyprbr Oxygen Chamb Dispbl	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4580	Cast Supplies	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4590	Special Casting Material	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4606	O2 Probe W/oximeter Device Replcmt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4611	Battry Hevy Duty; Repl Pt-ownd Vent	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4627	Spacr Bag/resrvor MetrD Dose Inhal	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4639	Repl Pad Infrard Heating Pad Sys Ea	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4890	Contracts Repr&maint Hemodial Eqp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4927	Gloves Non-sterile Per 100	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A4930	Gloves Sterile Per Pair	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A6000	Non-cntc Wnd Warming Covr W/devc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A6025	Gel Sheet Dermal/epidrmal Applic Ea	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A6250	Skn Sealnt Protct Moisturzr Ointmnt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
A6260	Wound Cleansers Any Type Any Size	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A6413	Adhesive Bandage, First Aid Type, Any Size, Each	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A7008	Lg Vol Nebulizr Dispbl Prfil Compr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A7009	Resrvor Bottle Lg Vol Us Nebulizr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A7047	Resp suction oral interface	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A9272	Disposable mech wound suct	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A9273	Hot/cold h2obot/cap/col/wrap	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A9274	Ext Amb Insulin Del Sys Disposble Ea	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A9275	Home Glu Dispbl Mon W/test Strips	Non-Reimbursable Services	Not considered a payable service. Will be denied provider write-off.
A9276	Sensor; Invsv Intrstl Glu Mon Sys	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A9277	Transmit; Ext Intrstl Cont Glu On	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A9278	Receiver Mon; Ext Intrstl Glu Mon	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A9279	Monitoring feature/deviceNOC	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A9284	Spirometer, Non-electronic, Includes All Accessori	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A9286	Any hygienic item, device	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A9900	Dme Sup/access/srv-compon/oth Hcpcs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
A9901	Dme Del Set&/dspns Srv Anoth Hcpcs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
B4100	Food Thickener Admided Orally-ounce	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
B4102	Entnal F Adlt Repl Fl&lytes 500 MI	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
B4103	Entnal F Ped Repl Fl&lytes 500 MI	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
B4104	Additive For Enteral Formula	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
C1748	Endoscope, single, ugi	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
C1824	Generator, ccm, implant	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
C1890	No device w/dev-intensive px	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
C9760	Non-blind interatrial shunt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0117	Crtch Underarm Artic Sprng Asstd Ea	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0118	Crutch Substitute Lw Leg Platform	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0144	Walker Enclos 4 Side Whl Post Seat	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0175	Foot Rest Use W/commode Chair Each	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0215	Electric Heat Pad Moist	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0217	Water Circulating Heat Pad W/pump	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0218	Water Circulating Cold Pad W/pump	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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E0221	Infrared Heating Pad System	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0225	Hydrocollator Unit Includes Pads	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0231	Non-cntc Wnd Warm Devc W/card&covr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0232	Wound Warming Wound Cover	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0236	Pump For Water Circulating Pad	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0239	Hydrocollator Unit Portable	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0249	Pad For Water Circulating Heat Unit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0265	Hos Bed Tot Elec W/rail W/mattrss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0266	Hos Bed Tot Elec W/rail W/o Mattrss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0270	Hosp Bed Inst Type: W/mattrss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0296	Hos Bed Tot Elec W/o Rail W/mattrss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0297	Hos Bed Tot Elec W/o Rail/mattrss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0350	Cntrl U Elec Bowel Irrig/evac Sys	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0352	Dispbl Pack W/elec Bowel Irrig/evac	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0425	Station Comprs Gas Sys Purchase;	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0430	Prtble Gaseous O2 Sys Purchase;	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0435	Prtble Liquid O2 Sys Purchase;	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0440	Station Liquid O2 Sys Purchase;	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0445	Oximeter Msr Bld O2 Lev1 Non-invasv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0446	Topical Ox Deliver sys, nos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0487	Spirometer, Electronic, Includes All Accessories	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0575	Nebulizer Ultrasonic Large Volume	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0620	Skn Pierc Devc Clct Capry Bld Lasr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0675	Pneumat Comprs Devc Hi Press Rapid	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0676	Inter Limb Compress Dev Nos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0700	Safety Equipment	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0787	Cgs dose adj insulin inf pmp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0840	Traction Frame Headboard Cerv Tract	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0850	Tract Stand Freestand Cerv Tract	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0856	Cervical Traction Device, Cervical Collar With Inf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0936	Cpm Device, Other Than Knee	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0968	Commode Seat Wheelchair	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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E0969	Narrowing Device Wheelchair	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0970	No 2 Footplates Except Elev Legrest	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0980	Safety Vest Wheelchair	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0983	Mnl Wc Acss Pwr Add-on Cnvrt Mnl Wc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0984	Mnl Wc Acss Pwr Add-on Cnvrt Mnl Wc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E0994	Armrest Each	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E1085	Hemi-whlchair;fix Arm Dtach Footrst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E1086	Hemi-whlchair; Dtachbl Arms Footrst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E1089	Hi-strgth Whlchair; Fix Arm Footrst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E1090	Hi-strgth Whlchar;dtach Arm Footrst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E1130	Std Whlchair; Fix Arm Dtach Footrst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E1140	Whlchair; Dtachble Arms Footrests	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E1227	Special Height Arms For Wheelchair	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E1228	Special Back Height For Wheelchair	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E1250	Lghtwt Whlchr;fix Arm Dtach Footrst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E1260	Lghtwt Whlchair; Dtach Arms Footrst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E1285	Hevy-duty Whlchr;fix Arm Dtach Foot	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E1290	Hevy-duty Whlchr; Dtach Arm Footrst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E1296	Special Wheelchair Seat Ht From Flr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E1297	Special Whlchair Seat Depth Uphlstr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E1298	Spcl Whlchair Seat Dpth&/wdth Cnstr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E1358	Oxygen Accessory, Dc Power Adapter For Portable Co	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E2230	Manual Wheelchair Accessory, Manual Standing Syste	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E2301	Pwr Whlchair Acss Pwr Standing Sys	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E2310	Pwr Wc Acss Elec Cnct Betwn Wc Cntr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E2340	Pwr Wc Acss Nonstd Seat W 20-23 In	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E2341	Pwr Wc Acss Nonstd Seat W 24-27 In	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E2342	Pwr Wc Nonstd Seat Depth 20/21 In	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E2343	Pwr Wc Nonstd Seat Depth 22-25 In	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E2358	Gr 34 nonsealed leadacid	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E2360	Pwr Wc Acss 22 Nf Non-sealed Battry	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E2362	Pwr Wc Acss Grp 24 Non-sealed Batt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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E2364	Pwr Wc Acss U-1 Non-sealed Battery	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E2367	Pwr Wc Acss Battery Charger Dul Mode	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E2372	Pwr Wc Grp 27 Nonseal Led Acid Batt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E2610	Wheelchair Seat Cushion Powered	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E8000	Gait Trainer Ped Sz Post Supp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E8001	Gait Trainer Ped Sz Upright Supp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
E8002	Gait Trainer Ped Sz Ant Supp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0029	No Tob Scr/Cess Int	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0030	Pt Scr Tob & Cess Int	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0031	Pall Serv During Meas	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0032	2+ Antipsy Schiz	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0033	2+ Benzo Seiz	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0034	Pall Serv During Meas	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0035	Pt Ed Pos 23	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0036	Pt/Ptn Decln Assess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0037	Pt Not Able To Participate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0038	Clin Pt No Ref	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0039	Pt No Ref, Rn Spec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0040	Pt Phys/Occ Therapy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0041	Pt/Ptn Decln Referral	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0042	Ref To Therapy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0043	Pt Mech Pros Ht Valv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0044	Pt Mitral Stenosis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0045	Mrs 90 Days Post Stk	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0046	No Mrs 90 Days Post Stk	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0047	Ped Blunt Hd Traum	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0048	Pall Serv During Meas	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0049	Main Hemo In-Cntr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0050	Pt W/ Lmtd Life Expec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0051	Pt Hospice Mnth	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0052	Pt Peri Dialysis Dur Mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0053	Adv Rheum Pt Care Mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

**Clinical Edits by Code List**  
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Code	Description	Edit Type	Comment
G0054	Strk Cr Prev Pos Outcme Mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0055	Adv Care Heart Dx Mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0057	Best Pct Pt Safety Em Mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0058	Imprv Care Le Jnt Repr Mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0059	Pt Sfty Pos Exp W Aneth Mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0060	Allergy/Immunology Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0061	Anesthesiology Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0062	Audiology Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0063	Cardiology Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0064	Cert Nurse Midwife Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0065	Chiropractic Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0066	Clinical Social Work Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0067	Dentistry Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0076	Care manag h vst new pt 20 m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0077	Care manag h vst new pt 30 m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0078	Care manag h vst new pt 45 m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0079	Care manag h vst new pt 60 m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0080	Care manag h vst new pt 75 m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0081	Care man h v ext pt 20 mi	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0082	Care man h v ext pt 30 m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0083	Care man h v ext pt 45 m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0084	Care man h v ext pt 60 m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0085	Care man h v ext pt 75 m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0086	Care man home care plan 30 m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0087	Care man home care plan 60 m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0235	Pet Imaging Any Site Nos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0252	Pet Imag Dx Brest Ca&/surg Plan	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0255	Cpt/snct Per Limb Any Nerve	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0269	Plcmt Occl Devc Post Surg/intrvnl	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
G0282	E-stim 1/> Areas Wnd Care Not G0281	Non-Reimbursable Services	Not considered a payable Professional service and/or reimbursed separately.
G0293	Noncovr Surg Sedat Anes-mcr Qual	Non-Reimbursable Services	Not considered a payable Professional service and/or reimbursed separately.
G0294	Noncovr Proc No Anes/loc-mcr Qual	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.



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Code	Description	Edit Type	Comment
G0295	Electromagnet Tx 1/>area Not G0329/oth	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0310	Immunize counsel 5-15 min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0311	Immunize counsel 16-30 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0312	Immunize couns < 21yr 5-15 m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0313	Immunize couns < 21yr 6-30 m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0314	Counsel immune <21 16-30 m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0315	Counsel immune <21 5-15 m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0463	Hospital outpt clinic visit	Non-Reimbursable Services	Not considered a payable Professional service and/or reimbursed separately.
G0501	Resource-inten svc during ov	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
G0519	New Pt-Cg Dyad Dem Low Cmplx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0520	New Pt-Cg Dyad Dem Mod Cmplx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0521	New Pt-Cg Dyad Dem Hig Cmplx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0522	Mgt Nw Pt Dementia Low Cmplx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0523	Mgt Nw Pt Dem Mod-High Cmplx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0524	Est Pt-Cg Dyad Dem Low Cmplx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0525	Est Pt-Cg Dyad Dem Mod Cmplx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0526	Est Pt-Cg Dyad Dem Hig Cmplx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0527	Mgt Est Pt Dementia Low Cmplx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0528	Mgt Est Pt Dem Mod-Hi Cmplx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0529	In Home Respite Care, 4 Hr U	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0530	Adult Daycare Center, 8 Hr U	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0531	Fclty-Based Respite, 24 Hr U	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0539	Initial care training 30 m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0540	Train for caregiver add 15	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0541	No pt prsnt train initial 30	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0542	No pt prsnt train add 15	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0543	Group train w/o patient	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0913	Improve visual funct	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0914	Survey not complete	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0915	No improve visual funct	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0916	Satisfy with care	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G0917	Satisfy survey not complete	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
G0918	No satisfy with care	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G1025	Pt Mnth 1 Mcp Prov	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G1026	Pt Hemo > 3Mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G1027	Pt Hemo < 3Mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2001	Post D/C home visit new pt 20 minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2002	Post D/C home visit new pt 30 minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2003	Post D/C home visit new pt 45 minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2004	Post D/C home visit new pt 60 minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2005	Post D/C home visit new pt 75 minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2006	Post D/C home visit existing pt 20 minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2007	Post D/C home visit existing pt 30 minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2008	Post D/C home visit existing pt 45 minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2009	Post D/C home visit existing pt 60 minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2013	Post D/C home visit existing pt 75 minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2014	Post D/C care plan oversight 30 minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2015	Post D/C care plan oversight 60 minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2020	Hi inten serv for sip model	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2021	Hea care pract tx in place	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2022	Benef refuses service, mod	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2067	Med assist tx meth wk	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2068	Med assist tx bupre oral	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2069	Med assist tx inject	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2073	Med tx naltrexone	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2074	Med assist tx no drug	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2075	Med tx meds nos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2076	Intake act w/med exam	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2077	Periodic assessment	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2078	Take-home meth	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2079	Take-hom buprenorphine	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2080	Add 30 mins counsel	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2081	Pt 66+ snp or ltc pos > 90d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2090	Pt 66+ frailty and med dem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
G2091	Pt 66+ frailty and adv ill	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2092	Ace arb arni	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2093	Med doc rsn no ace arn arni	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2094	Pt rsn no ace arn arni	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2096	No rsn ace arb arni	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2097	Child dx uri 3d of other dx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2098	Pt 66+ frailty and med dem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2099	Pt 66+ frailty and adv ill	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2100	Pt 66+ frailty and med dem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2101	Pt 66+ frailty and adv ill	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2105	Pt 66+ It ints > 90	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2106	Pt 66+ It ints > 90	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2107	Pt 66+ frailty and adv ill	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2112	Pred<=5 mg ra glu <6m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2113	Pred>5 mg >6m, no chg da	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2115	Pt 66+ frailty and med dem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2116	Pt 66+ frailty and adv ill	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2118	Pt 81+ frailty	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2121	Psy dep anx ap and icd asse	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2122	Psy/dep/anx/apandicd noasse	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2125	Pt 81+ frailty	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2126	Pt 66+ frailty adv ill	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2127	Pt 66+ frailty med dem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2128	No aspirin med rsn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2129	No bp outpt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2136	Bk pain vas 6-20wk = 3	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2137	Bk pain vas 6-20wk > 3	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2138	Bk pain vas 9-15mo = 3	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2139	Bk pain vas 9-20mo > 3	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2140	Leg pain vas 6-20wk = 3	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2141	Leg pain vas 6-20wk > 3	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2142	Fs odi 9-15mo postop<= 22	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
G2143	Fs odi 9-15mo > 22	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2144	Fs odi 6-20wk postop > 22	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2145	Fsodi 6-20wk >22 or chg 30pt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2146	Leg pain vas 9-15mo <= 3	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2147	Leg pain vas 9-15mo > 3	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2148	Mpm used	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2149	No mpm med rsn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2150	No mpm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2151	Dx degen neuro	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2152	Res change sc =0	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2167	Res change sc < 0	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2168	Svs by pt in home health	Non-Reimbursable Services	Not considered a payable Professional service and/or reimbursed separately.
G2169	Svs by ot in home health	Non-Reimbursable Services	Not considered a payable Professional service and/or reimbursed separately.
G2172	Tx for opioid use demo proj	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2173	Uri w comorb 12m oth dx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2174	Uri new rx antibiotic 30d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2175	Pt comorb dx 12m of epi	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2176	Outpt ed obs w inpt admit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2177	Bronch w rx antibx 30d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2178	Pt not elig low neuro ex	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2179	Med doc rsn no low ex	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2180	Inelig footwr eval	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2181	Bmi not doc medrsn ptref	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2182	Pt 1st biolog antirheum	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2183	Doc pt unable comm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2184	No caregiver	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2185	Caregiver dem trained	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2186	Pt ref app rsrcs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2187	Clin ind img hd trauma	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2188	Pt 50 yrs w/clin ind hd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2189	Img hd abnml neuro exam	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2190	Ind img hd rad neck	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
G2191	Ind img hd pos hd ache	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2192	>55 yrs temp hd ache	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2193	<6yr new onset hd ache	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2194	New hdache ped pt dis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2195	Occip hdache child	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2196	Screen unhlthy etoh use	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2197	Screen hlthy etoh use	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2199	Not scrn etoh no rsn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2200	Unhlthy etoh rcvd couns	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2202	No rsn no brief couns	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2204	Pt 50-85 w/ scope	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2205	Preg drng adjv trtmt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2206	Adjv trtmt chemo her2	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2207	Rsn no trtmt chem her2	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2208	No trtmt chemo and her2	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2209	Refused to participate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G2210	No neck fs prom no rsn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4000	Dermatology Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4001	Diagnostic Rad Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4002	Ep Cardio Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4003	Emergency Med Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4004	Endocrinology Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4005	Family Medicine Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4006	Gastroenterology Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4007	General Surgery Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4008	Geriatrics Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4009	Hospitalists Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4010	Infectious Disease Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4011	Internal Medicine Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4012	Interventional Rad Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4013	Mentl/Behav Health Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4014	Nephrology Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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G4015	Neurology Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4016	Neurosurgical Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4017	Nutrition/Dietician Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4018	Ob/Gyn Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4019	Oncology/Hema Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4020	Ophthalmology Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4021	Orthopedic Surgery Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4022	Otolaryngology Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4023	Pathology Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4024	Pediatric Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4025	Physical Medicine Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4026	Phys/Occ Therapy Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4027	Plastic Surgery Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4028	Podiatry Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4029	Preventive Medicine Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4030	Pulmonology Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4031	Radiation Oncology Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4032	Rheumatology Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4033	Skilled Nursing Facility Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4034	Speech Language Path Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4035	Thoracic Surgery Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4036	Urgent Care Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4037	Urology Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G4038	Vascular Surgery Ss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8395	Left Ventricular Ejection Fraction (lvef) >= 40% O	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8396	Left Ventricular Ejection Fraction (lvef) Not Perf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8397	Dilated Macular Or Fundus Exam Performed, Includin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8399	Patient With Central Dual-energy X-ray Absorptiome	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8400	Patient With Central Dual-energy X-ray Absorptiome	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8404	Lower Extremity Neurological Exam Performed And Do	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8405	Lower Extremity Neurological Exam Not Performed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8410	Footwear Evaluation Performed And Documented	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

**Clinical Edits by Code List**  
**Always Not Medically Necessary Denials**  
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Code	Description	Edit Type	Comment
G8415	Footwear Evaluation Was Not Performed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8416	Clinician Documented That Patient Was Not An Eligi	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8417	Bmi >= 30 Was Calculated And A Follow-up Plan Was	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8418	Bmi < 22 Was Calculated And A Follow-up Plan Was D	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8419	Bmi >= 30 Or < 22 Was Calculated, But No Follow-up	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8420	Bmi < 30 And >= 22 Was Calculated And Documented	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8421	Bmi Not Calculated	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8427	Written Provider Documentation Was Obtained Confir	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8428	Current Medications With Dosages (includes Prescri	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8430	Documentation That Patient Is Not Eligible For Med	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8431	Documentation Of Clinical Depression Screening Usi	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8432	No Documentation Of Clinical Depression Screening	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8433	Patient Not Eligible/not Appropriate For Clinical	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8450	Beta-blocker Therapy Prescribed For Patients With	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8451	Clinician Documented Patient With Left Ventricular	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8452	Beta-blocker Therapy Not Prescribed For Patients W	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8465	High Risk Of Recurrence Of Prostate Cancer	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8473	Angiotensin Converting Enzyme (ace) Inhibitor Or A	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8474	Angiotensin Converting Enzyme (ace) Inhibitor Or A	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8475	Angiotensin Converting Enzyme (ace) Inhibitor Or A	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8476	Most Recent Blood Pressure Has A Systolic Measur	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8477	Most Recent Blood Pressure Has A Systolic Measur	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8478	Blood Pressure Measurement Not Performed Or Docum	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8510	Negative Screen For Clinical Depression Using A St	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8511	Screen For Clinical Depression Using A Standardize	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8535	No Documentation Of An Elder Maltreatment Screen,	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8536	No Documentation Of An Elder Maltreatment Screen,	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8539	Documentation Of A Current Functional Outcome Asse	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8540	Documentation That The Patient Is Not Eligible For	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8541	No Documentation Of A Current Functional Outcome A	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8542	Documentation Of A Current Functional Outcome Asse	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8543	Documentation Of A Current Functional Outcome Asse	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
G8559	Pt ref doc oto eval	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8560	Pt hx act drain prev 90 days	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8561	Pt inelig for ref oto eval	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8562	Pt no hx act drain 90 d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8563	Pt no ref oto reas no spec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8564	Pt ref oto eval	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8565	Ver doc hear loss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8566	Pt inelig ref oto eval	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8567	Pt no doc hear loss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8568	Pt no ref otolo no spec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8569	Prol intubation req	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8570	No prol intub req	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8575	Postop ren insuf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8576	No postop ren insuf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8577	Reop req bld grft oth	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8578	No reop req bld grft oth	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8598	Asp therp used	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8599	No asp therp used	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8600	tPA initi w/in 3 hrs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8601	No elig tPA init w/in 3 hrs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8602	No tPA init w/in 3 hrs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8633	Pharm ther osteo rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8635	No pharm ther osteo rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8647	Fun stat score knee >= 0	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8650	Fun stat score knee not done	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8651	Fun stat score hip >= 0	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8652	Fun stat score hip < 0	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8654	Fun stat score hip not done	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8655	Fun stat score LE >= 0	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8656	Fun stat score LE < 0	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8658	Fun stat score LE not done	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8659	Fun stat score LS >= 0	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.



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Code	Description	Edit Type	Comment
G8660	Fun stat score LS < 0	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8661	Fun stat score LS pt no elg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8662	Fun stat score LS not done	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8663	Fun stat score shdl >=0	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8664	Fun stat score shdl < 0	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8666	Fun stat score shdl not done	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8667	Fun stat score UE >=0	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8668	Fun stat score UE < 0	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8670	Fun stat score UE not done	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8694	Lvef <40%	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8708	Antibiotic not pres	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8709	Med reas antibiotic pres	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8710	Pt pres antibiotic	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8711	Pres antibiotic	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8712	Not pres antibiotic	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8721	Pt, pn, hist grade doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8722	Med reas pt, pn, not doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8723	Spec sit not prim tumor	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8724	Pt, pn, hist grade not doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8733	Doc pos elder mal scrn plan	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8734	Doc neg elder mal no plan	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8735	Eld mal scrn pos no plan	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8749	Signs of melanoma absent	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8752	Sys bp less 140	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8753	Sys bp > or = 140	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8754	Dias bp less 90	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8755	Dias bp > or = 90	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8756	No bp measure doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8783	Bp scrn perf rec interval	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8785	Bp scrn no perf at interval	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8797	Specimen site not esophagus	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8798	Specimen site not prostate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
G8806	Transab or transvag us	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8807	Doc reas no us	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8808	No transab or transvag us	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8815	Doc reas no statin therapy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8816	Statin med pres at disch	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8817	Doc reas no statin med disch	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8826	Pt disch home day #2 evar	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8833	Pt not disch home day#2 evar	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8834	Pt disch home day #2 cea	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8838	Not disch home by day #2	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8839	Sleep apnea assess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8840	Doc reas no sleep apnea	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8841	No sleep apnea assess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8842	Ahi or rdi initial dx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8843	Doc reas no ahi or rdi	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8844	No ahi or rdi initial dx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8845	Pos airway press prescribed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8846	Mod or severe osa	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8849	Doc reas no pos air press	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8850	No pap prescribed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8851	Adhere pos air press therapy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8854	Reas no adhere pos air pres	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8855	Pos air press adhere no perf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8856	Ref for oto eval	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8857	No elig ref for oto eval	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8858	Not ref for oto eval	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8863	No assess bone loss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8864	Pneumococcal vaccine admin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8865	Doc med reas no pneumococcal	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8866	Doc pt reas no pneumococcal	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8867	No pneumococcal admin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8869	Doc immun hep b 1st antitnf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
G8875	Breast cancer dx min invsive	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8876	Doc reas no min inv dx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8877	No brst cnrc dx min invasive	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8878	Sent lymph node biopsy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8880	Doc reas no lymph node biop	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8881	Brst cnrc stage > t1n0m0	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8882	No sent lymph node biopsy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8907	Pt doc no events on discharge	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8908	Pt doc with burn prior to discharge	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8909	Pt doc with no burn prior to discharge	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8910	Pt doc to have fall in ASC	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8911	Pt doc no fall in ASC	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8912	Pt doc with wrong event	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8913	Pt doc with no wrong event	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8914	Pt trans to hospital post discharge from ASC	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8915	Pt not trans to hospital at discharge from ASC	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8916	Pt with IV AB given on time	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8917	Pt with IV AB not given on time	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8918	Pt w/o preop order IV AB prop	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8923	LVEF < 40% or lvsd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8924	Spiro EV1/FVC <60% COPD sym	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8934	LVEF <40% or dep lv sys fcn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8935	Rx ACE or ARB therapy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8936	Pt not eligible ACE/ARB	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8937	No rx ACE/ARB therapy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8942	Doc fcn/care plan w/30 days	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8944	AJCC Mel cnr stg 0 - IIC	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8946	MIBM but no dx of breast CA	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8950	Pre-htn or htn doc, f/u indc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8952	Pre-htn/htn, no f/u, not gvn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8955	Most recent assess vol mgmt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8956	Pt rcv HeDia outpt dyls fac	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
G8958	Assess vol mgmt not doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8961	CSIT lowrisk surg pts preop	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8962	CSIT on pt any reas 30 days	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8967	Wfrn or oral antioag pres	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8968	Md rsn no pres Wfrn or othr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8969	Pt rsn no pres Wfrn or othr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G8970	No rsk fac or 1 mod risk TE	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9001	Coordinated Care Fee Initial Rate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9002	Coordinated Care Fee Maint Rate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9003	Coord Care Fee Risk Adjustd Hi Init	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9004	Coord Care Fee Risk Adjustd Lw Init	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9005	Coord Care Fee Risk Adjusted Maint	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9006	Coord Care Fee Home Monitoring	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9007	Coord Care Fee Schedule Team Conf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9008	Coord Care Fee Phys Ovrsght Srvc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9009	Coord Care Fee Risk Adj Maint Lvl 3	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9010	Coord Care Fee Risk Adj Maint Lvl 4	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9011	Coord Care Fee Risk Adj Maint Lvl 5	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9012	Coord Care Fee Risk Adj Maint Oth	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9013	EsrD Demo Basic Bundle Level I	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9014	EsrD Demo Expnd Bundle W/venus Acss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9016	Smok Cessatn Cnsl Ind Absnc/add E&m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9037	Intrpro Req Fr Rec Phys/Qhcp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9038	Co-Management Services	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9050	Onc; Prim Focus; Wrkup Eval/stag	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9051	Onc; Prim Focus; Tx Decision Optns	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9052	Onc; Prim; Surveillance Recur;	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9053	Onc; Prim; Expect Mgmt Evidence Ca;	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9054	Onc;prim;sup Pt Term Ca;palliav Tx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9055	Onc;prim;oth Uns Not Otherwise List	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9056	Onc;prac Guide;mgmt Adhers To Guide	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9057	Onc; Prac; Mgmt Differ Clin Trial	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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G9058	Onc; Mgmt Difr Phys Disagree Guide	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9059	Onc;prac;mgmt Differs Pt Opt Alt Tx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9060	Onc; Prac; Mgmt Differ Comorbid Ill	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9061	Onc; Pts Cond Not Addressed Guide	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9062	Onc; Prac; Mgmt Differs Oth Reason	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9063	Onc; Status; Nslc; St I No Progrsn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9064	Onc; Status; Nslc;st li No Progrsn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9065	Onc;nsclc; St Iii A No Progressn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9066	Onc; Status; Nslc; St Iii B-4 Met	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9067	Onc; Status; Nslc; Extent Dz Unkn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9068	Onc; Status; Sc&comb;ltid No Progrsn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9069	Onc; Status; Sclc Sc&comb; Ext Met	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9070	Onc;status;sclc Sc&comb;extent Unkn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9071	Onc; Brst; Aca;st I/ii;pos; No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9072	Onc; Brst; Aca; St I/ii;neg:no Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9073	Onc; Brst; Aca; St Iii; Pos;no Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9074	Onc; Brst; Aca; St Iii; Neg;no Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9075	Onc; Status; F Brst Ca; Aca; M1 Met	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9077	Onc;pros Ca;t1-t2c& Psa</=20no Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9078	Onc; Pros Ca; T2 Psa >20 No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9079	Onc;pros Ca; T3b-t4 N; T N1 No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9080	Onc; Pros Ca; Tx Rising Psa	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9083	Onc; Pros Ca Aca; Extent Unkn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9084	Onc; Colon Ca; T1-3 N0 M0 No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9085	Onc; Colon Ca; T4 N0 M0 No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9086	Onc; Colon Ca; T1-4 N1-2 M0 No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9087	Onc; Colon Ca; M1 Met W/curr Dz	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9088	Onc; Colon Ca; M1 Met No Curr Dz	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9089	Onc; Status; Colon Ca; Extent Unk	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9090	Onc; Rectal Ca; T1-2 N0 M0 No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9091	Onc; Rectal Ca; T3 N0 M0 No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9092	Onc; Rectal Ca;t1-3 N1-2 M0 No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
G9093	Onc; Rectal Ca; T4 Any N M0 No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9094	Onc; Status; Rectal Ca; M1 Met	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9095	Onc; Status; Rectal Ca; Extent Unk	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9096	Onc;esoph Ca;t1-t3 N0-n1/nx No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9097	Onc; Esoph Ca; T4 Any N M0 No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9098	Onc; Status; Esoph Ca ; M1 Metastat	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9099	Onc; Status; Esoph Ca; Extent Unk	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9100	Onc; Gastr Ca; R0 Resect No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9101	Onc; Gastr Ca; R1/r2 Resect No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9102	Onc; Gastr Ca; M0 Unresect No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9103	Onc; Status; Gastr Ca; Clin M1 Met	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9104	Onc; Status; Gastr Ca ; Extent Unk	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9105	Onc; Pan Ca; R0 Resect No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9106	Onc; Pan Ca; R1/r2 Resect No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9107	Onc; Pan Ca; Unresectbl M1 Met	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9108	Onc; Status; Pan Ca; Extent Dz Unk	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9109	Onc; H&n Ca; T1-t2&n0 M0 No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9110	Onc;h&n Ca; T3-4&/n1-3 M0 No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9111	Onc; Status; H&n Ca; M1 Met Loc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9112	Onc; Status; H&n Ca; Extent Unkn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9113	Onc; Ov Ca; St Ia-b Gr 1 No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9114	Onc; Ov Ca; St Ia-b; Ic; Ii;no Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9115	Onc; Ov Ca; St Iii-iv; No Prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9116	Onc; Ov Ca; Progrssn&/platinm Rsist	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9117	Onc; Status; Ov Ca; Extent Unkn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9123	Onc; Nhl Transto Dlbcl; Relapsed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9124	Onc; Nhl; Relapsed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9125	Onc;nhl; Stage Not Detrm Poss Relap	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9126	Onc; Status; Ov Ca; Stage Ia/ib	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9128	Onc; Status; Mm; Stage Ii /higher	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9129	Onc; Cml; Extnt Unk Tx Opt Considrd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9130	Onc; Status; Mx Myeloma; Extent Unk	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
G9131	Onc Dx Brst Unknown Nos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9132	Onc Dx Prostate Mets No Cast	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9133	Onc Dx Prostate Clinical Mets	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9134	Onc Nhlstg 1-2 No Relap No	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9135	Onc Dx Nl Stg 3-4 Not Relap	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9136	Onc Dx Nhl Trans To Ig Bcell	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9137	Onc Dx Nhl Relapse/refractor	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9138	Onc Dx Nhl Stg Unknown	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9139	Onc Dx Coml. Dx Status Unknown	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9140	Frontier Extended Stay Clin Demo;	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9147	Outp IV insulin tx any meas	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9148	Medical Home Level I	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9149	Medical Home Level II	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9150	Medical Home Level III	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9151	MAPCP demo state	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9152	MAPCP demo community	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9153	MAPCP demo physician	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9188	Beta not given no reason	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9189	Beta pres or already taking	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9190	Medical reason for no beta	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9191	Pt reason for no beta	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9212	Doc of dsm-iv init eval	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9213	No doc of dsm-iv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9223	Pjp proph ordered cd4 low	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9225	Norsn no foot exam	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9226	3 comp foot exam completed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9227	Docrsn no care plan	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9228	Gc chl syp documented	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9230	Norsn for gc chl syp test	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9231	Doc esrd dia trans preg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9242	Doc viral load >=200	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9243	Doc viral load <200	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
G9246	No med visit in 24mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9247	1 med visit in 24mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9254	Doc pt dischg >2d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9255	Doc pt dischg <=2d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9273	Sys<140 and dia<90	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9274	Bp out of nrml limits	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9275	Doc of non tobacco user	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9276	Doc of tobacco user	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9277	Doc daily aspirin or contra	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9278	Doc no daily aspirin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9279	Pne scrn done doc vac done	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9280	Pne not given norsn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9281	Pne scrn done doc not ind	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9282	Doc medrsn no histo type	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9283	Hist type doc on report	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9284	No hist type doc on report	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9285	Site not small cell lung ca	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9286	Doc antibio order w in 7d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9287	No doc antibio order w in 7d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9288	Doc medrsn no hist type rpt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9289	Doc type nsm lung ca	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9290	No doc type nsm lung ca	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9291	Not nsm lung ca	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9292	Medrsn no pt category	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9293	No pt category on report	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9294	Pt cat and thck on report	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9295	Non cutaneous loc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9296	Doc share dec prior proc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9297	No doc share dec prior proc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9298	Eval risk vte card 30d prior	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9299	No eval riskk vte card prior	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9305	No interv req for leak	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.



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Code	Description	Edit Type	Comment
G9306	Interv req for leak	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9307	No ret for surg w in 30d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9308	Unplnd ret to surg w in 30d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9309	No unplnd hosp readm in 30d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9310	Unplnd hosp readm in 30d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9311	No surg site infection	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9312	Surgical site infection	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9313	Docrsn not first line amox	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9314	Norsn not first line amox	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9315	Doc first line amox	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9316	Doc comm risk calc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9317	No doc comm risk calc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9318	Image std nomenclature	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9319	Image not std nomenclature	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9321	Doc count of ct in 12mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9322	No doc count of ct in 12mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9341	Srch for ct w in 12 mos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9342	No srch for ct in 12mo norsn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9344	Sysrsn no dicom srch	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9345	Follow up pulm nod	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9347	No follow up pulm nod norsn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9351	Doc >1 sinus ct w 90d dx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9352	Not >1 sinus ct w 90d dx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9353	Medrsn >1 sinus ct w 90d dx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9354	Norsn >1 sinus ct w 90d dx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9355	No early ind/delivery	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9356	Early ind/delivery	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9357	Pp eval/edu perf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9358	Pp eval/edu not perf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9361	Medical indication for induction	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9364	Sinus caus bac inx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9367	2high risk med ord	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
G9368	2high risk no ord	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9380	Off assis eol iss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9382	No off assis eol	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9383	Recd scrn hcv infec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9384	Doc med reas no offer eol	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9385	Doc pt reas not rec hcv srn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9386	Scrn hcv infec not recd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9393	Ini phq9 >9 remiss <5	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9394	Dx bipol, death, nhres, hosp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9395	Ini phq9 >9 no remiss >=5	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9396	Ini phq9 >9 not assess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9408	Card tamp w/in 30d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9409	No card tamp e/in 30d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9410	Admit w/in 180d req remov	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9411	No admit w/in 180d req remov	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9412	Admit w/in 180d req surg rev	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9413	No admit req surg rev	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9414	1dose menig vac btwn 11 & 13	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9415	No 1dose meni vac btwn 11&13	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9416	Tdap or td or 1tet/diph	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9417	No tdap or td or 1tet/diph	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9418	Lungcx bx rpt docs class	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9419	Med reas no rpt histo type	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9420	Spec site no lung	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9421	Lung cx bx rpt no doc class	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9422	Rpt doc class histo type	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9423	Med reas rpt no histo type	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9424	Site no lung or lung cx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9425	Spec rpt no doc class histo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9426	Impr med time edarr pain med	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9427	No impro med time pain med	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9428	Rpt pt cat and pt1	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
G9429	Doc med reas no pt cat	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9430	Spec site no cutaneous	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9431	No pt cat and pt1	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9432	Asth controlled	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9434	Asth not controlled	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9452	Doc med reas no scrn hcv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9455	Abd imag w/us, ct or mri	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9456	Doc med pt reas no hcc scrn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9457	No abd imag w/o reason	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9468	No recd cortico>=10mg/d >60d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9470	No rec cortico>60d 1rx 600mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9471	W/in 2yr dxa not order	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9474	Diet counsel at hospice	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9475	Other counselor at hospice	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9476	Volun service at hospice	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9477	Care coord at hospice	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9478	Othe therapist at hospice	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9479	Pharmacist at hospice	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9480	Admission to mccm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9481	Remote E/M new pt 10 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9482	Remote E/M new pt 20 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9483	Remote E/M new pt 30 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9484	Remote E/M new pt 45 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9485	Remote E/M new pt 60 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9486	Remote E/M est. pt 10 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9487	Remote E/M est. pt 15 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9488	Remote E/M est. pt 25 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9489	Remote E/M est. pt 40 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9490	Joint replac mod home visit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9497	Preop anes or proxy b/4 surg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9498	Abx reg prescribed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9500	Rad exp time w/fluor doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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G9501	Rad exp time w/o fluor doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9502	Med reas no perf foot exam	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9504	Doc reas no hbv status	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9505	Abx pres w/in 10 dys of symp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9507	Doc reas on statin or contra	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9508	Doc pt not on statin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9509	Remis 12m phq-9 score <5	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9510	Remis 12m not phq-9 score <5	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9511	Phq-9 >9 during 12m time	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9512	Indiv pdc > 0.8	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9513	Indiv pdc not > 0.8	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9514	Req ret or w/in 90d of surg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9515	No reas, no ret or w/in 90d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9516	Impr vis acuit w/in 90d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9517	No impr vis acuit w/in 90d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9518	Doc active inj drug use	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9519	Final refract +/- 1.0 in 90d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9520	Refract not +/- 1.0 w/in 90d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9521	Er and ip hosp <2 in 12 mos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9522	Er/ip hosp =/>2 in 12 mos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9529	Minor blunt trauma w/head ct	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9530	Min hd traum gcs=15 w/ct ed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9531	Indic for head ct valid	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9533	Indic for head ct not valid	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9534	Adv brain image not ordered	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9535	Normal neuro exam	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9536	Doc med reas adv brain image	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9537	Doc system reas adv imaging	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9538	Adv brain image ordered	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9539	Intent pot remv time placemt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9540	Pt alive 3 mos post proc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9541	Filter gone aft 3mos placmt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
G9542	Doc reass appr remo filt 3ms	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9543	Doc 2x re-assess filt remov	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9544	No filt remov w/in 3mos plcm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9547	Incid ct liver/kid/adre fdg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9548	Abd imag and followup rec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9549	Doc med reas no follow imag	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9550	Abd imag and followup no rec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9551	Abd imag w/o liv/kid/adr les	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9552	Inc thyr node <1.0 in rpt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9553	Prior thyroid dise dx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9554	Ct/mri chest/neck follup rec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9555	Doc med reas no follow imag	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9556	Ct/mri chest follup not rec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9557	Ct/mri chest/neck no thy nod	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9580	Door to punc time <2hrs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9582	Door to punc time >2hr, nrg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9593	Low pecarn ped head trauma	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9594	Gsc >15 & hd ct by ed md	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9595	Val rsn hd ct ord reg indic	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9597	No low pecarn ped head traum	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9598	Aor ane 5.5-5.9 cm max diam	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9599	Aor ane >=6.0 cm max diam	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9603	Pt surv improv bsline tx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9604	Pt surv results not avail	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9605	Surv score no improv w/tx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9606	Intraop cyst eval trac inj	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9607	Pt not elig	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9608	Intraop cyst eval not done	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9609	Doc order anti-plat or p2y12	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9610	Doc md rsn no antipla/p2y12	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9611	No antipla/p2y12 ord, rs nos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9621	Scr unheal etoh w/counsel	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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G9622	No unheal etoh user	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9624	No etoh scr/no councl/nrg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9625	Bld inj at surg/1mos post	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9626	Pt not elig	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9627	No bld inj at surg/1mos post	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9628	Vis inj at surg/1mos post	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9629	Pt not elig	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9630	No vis inj at surg/1mos post	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9637	Doc >1 dose reduc tech	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9638	No doc >1 dose reduc tech	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9642	Current cig smoker	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9643	Elective surgery	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9644	No smok b/4 anes day of surg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9645	Had smoke b/4 anes day surg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9646	Pt w/90d mrs 0-2	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9648	Pt w/90d mrs >2	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9649	Psori tool doc w/benchmk	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9651	Psori tool doc/no bnchmk met	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9654	Mon anesth care	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9655	Toc tool incl key elem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9656	Pt direct anesth loc to pacu	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9658	Toc tool incl elem not used	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9659	>85y no hx colo ca/rsn scope	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9660	Doc med rsn scope pt >85y	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9661	>85y scope othr rsn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9662	Prior dx/active clin ascvd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9663	Fast/dir ldl = 190 mg/dl	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9664	Taking statin or rec'd order	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9665	No statin/no order statin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9674	Pt w/clin ascvd dx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9675	Pt w/fast/dir lab ldl-c >190	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9676	40-75y w/type 1/2 w/ldl-c rs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
G9679	Acute care pneumonia	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9680	Acute care congestive heart	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9681	Acute care chronic obstruct	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9682	Acute care skin infection	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9683	Actue care fluid or electrolyte disorder	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9684	Acute care urinary tract infection	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9685	Acute nursing facility care	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9687	Hospice anytime msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9688	Pt w/hosp anytime msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9689	Inpt elect carotid intervent	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9690	Pt rec hospice dur msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9691	Pt hosp dur msmt period	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9692	Hosp recd by pt dur msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9693	Pt use hosp during msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9694	Hosp srv used pt in msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9695	Long act inhal bronchdil pre	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9696	Med rsn no presc bronchdil	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9698	Sys rsn no presc bronchdil	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9699	Long inhal bronchdil no pres	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9700	Pt is w/hosp during msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9702	Pt use hosp during msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9703	Child anbx 30 prior dx phary	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9704	Ajcc br ca stg i: t1 mic/t1a	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9705	Ajcc br ca stg ib	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9706	Low recur prost ca	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9708	Bilat mast/hx bi /unilat mas	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9709	Hosp srv used pt in msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9710	Pt prov hosp srv msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9711	Pt hx tot col or colon ca	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9712	Doc med rsn presc anbx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9713	Pt use hosp during msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9714	Pt is w/hosp during msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
G9716	Bmi not norm, no follow, doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9717	Doc dx depr/dx bipolar, no scr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9719	Pt not ambul/immob/wc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9720	Hospice anytime msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9721	Pt not ambul/immob/wc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9722	Doc hx renal fail or cr+ >4	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9723	Hosp recd by pt dur msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9724	Pt w/doc use anticoag mst yr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9726	Refused to participate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9727	No knee intake prom, no prox	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9728	Refused to participate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9729	No hip intake prom, no proxy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9730	Refused to participate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9731	No foot prom, no proxy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9732	Refused to participate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9733	No back intake prom, no prox	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9734	Refused to participate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9735	Pt no foto knee and no proxy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9736	Refused to participate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9737	Pt no foto elbow, no proxy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9740	Hosp srv to pt dur msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9741	Pt w/hosp anytime msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9742	Psych sympt assessed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9743	Psych symp not assessed, rns	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9744	Pt not elig, dx htn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9745	Doc rsn no scr high bp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9746	Mit sten, valve or trans af	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9752	Urgent surgery	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9753	Doc no dicom, ct other fac	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9754	Incid pulm nodule	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9755	Doc med rsn for imaging	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9756	Surg proc w/silicone oil	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.



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Code	Description	Edit Type	Comment
G9757	Surg proc w/silicone oil	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9758	Hospice or term phase	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9761	Pt w/hosp anytime msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9762	Pt had hpv b/t 9-13 yr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9763	Pt no hpv b/t 9-13 yr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9764	Pt tx oral syst/bio med psor	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9765	Pt decl chan/conind or <6m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9766	Cva stroke dx tx transf fac	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9767	Hosp new dx cva consid evst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9768	Pt w/hosp anytime msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9769	Bn den 2yr/got ost med/ther	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9770	Perip nerve block	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9771	Anes end, 1 temp >35.5(95.9)	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9772	Doc temp >35.5(95.9), anest	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9773	No temp >35.5(95.9), anes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9775	Recd 2 anti-emet pre/intraop	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9776	Doc med rsn no proph antiem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9777	Pt no antiemet pre/intraop	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9779	Pts breastfeeding	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9780	Pts dx w/rhabdomyolysis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9781	Doc rsn no statin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9782	Hx dx fam/pure hypercholes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9784	Path/derm 2nd opin bx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9785	Path rpt snt path/derm in 7d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9786	No path rpt sent in 7d	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9787	Pt alive 1st day msmt yr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9788	Most rct bp </= 140/90	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9789	Record bp ip, er, urg/self	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9790	Most rct bp >/= 140/90	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9791	Most rct tob stat free	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9792	Most rct tob stat not free	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9793	Pt on daily asa/antiplat	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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G9794	Doc med rsn no asa/antiplat	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9795	Pt no daily asa/antiplat	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9796	Pt not currently on statin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9797	Pt currently on statin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9805	Pt w/hosp anytime msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9806	Pt recd cerv cyto/hpv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9807	Pt no recd cerv cyto/hpv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9812	Pt died during inpt/30d aft	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9813	Pt not died w/in 30d of proc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9818	Doc sex activity	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9819	Pt w/hosp anytime msmt per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9820	Doc chlam scr test w/follow	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9821	No doc chlam scr ts w/follow	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9822	Endo abl proc yr prev ind dt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9823	Endo smpl/hyst bx res doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9824	Endo smpl/hyst bx res no doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9830	Her-2 pos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9831	Ajcc stg brt ca dx ii or iii	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9832	Brt ca dx i, no t1/t1a/t1b	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9838	Pt met dis at dx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9839	Anti-egfr mon anti ther	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9840	Kras tst bfr beg anti moab	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9841	No kras tst bfr beg ant moab	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9842	Pt met dis at dx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9843	Kras gene mut	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9844	Pt no recd anti-egfr ther	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9845	Pt recd anti-egfr ther	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9846	Pt died from cancer	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9847	Pt recd chemo last 14d life	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9848	Pt no chemo last 14d life	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9858	Pt enroll hospice	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9859	Pt died from cancer	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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G9860	Pt less 3d hospice	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9861	Pt more than 3d hospice	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9862	Doc rsn no 10 yr follow	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9868	Asynch telehealth derm/opth 10 min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9869	Asynch telehealth derm/opth 10-20 min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9870	Asynch telehealth derm/opth 20 or> min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9894	Adr dep thrpy prescribed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9895	Doc med rsn no adr dep thrpy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9896	Doc pt rsn no adr dep thrpy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9897	Pt nt prsc adr dep thrpy rng	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9898	Snplg trm cre pt w/pos cde	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9899	Scrn mam perf rslts doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9900	Scrn mam perf rslts not doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9901	Snplg trm cre pt w/pos cde	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9902	Pt scrn tbco and id as user	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9903	Pt scrn tbco id as non user	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9905	No pt tbco scrn rng	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9906	Pt recv tbco cess interv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9908	No pt tbco cess interv rng	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9910	Snplg trm cre pt w/pos cde	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9911	Node neg pre/post syst ther	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9912	Hbv status assesd and int	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9913	No hbv status assesd and int	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9914	Pt receiving anti-tnf agent	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9915	No documtd hbv results rcd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9916	Funct status past 12 months	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9917	Doc med rsn no funct status	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9918	No funct stat perf, rsn nos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9922	Sfty cncrns scrn nd mit recs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9923	Safty cncrns scrn and neg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9925	No scrn prov rsn nos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9926	Sfty cncrns scrn but no recs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
G9928	No warf or fda drug presc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9929	Trs/rev af	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9930	Com care	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9931	No chad or chad scr 0 or 1	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9938	Snplg trm cre pt w/pos cde	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9939	Same path/derm perf biopsy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9940	Doc reas no statin therapy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9943	Bk pn nt msr vas scl pre/pst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9945	Pt w/cancer scoliosis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9946	Bk pn nt msr vas pre-pst 1y	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9949	Lg pn nt msr vas scl pre/pst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9954	Pt >2 rsk fac post-op vomit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9955	InhInt anesth only for induc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9956	Combo thrpy of >= 2 prophly	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9957	Doc med rsn no combo thrpy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9958	No combo prophyl thrp for pt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9959	Systemic antimicro not presc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9960	Med rsn sys antimi nt rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9961	Systemic antimicro presc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9962	Embolization doc separatly	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9963	Embolization not doc separat	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9964	Pt recv >=1 well-chld visit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9965	No well-chld vist recv by pt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9968	Pt refrd 2 pvdr/spclst in pp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9969	Pvdr rfrd pt rpt rcvd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9970	Pvdr rfrd pt no rpt rcvd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9976	Doc pat rsn no mac exm perf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9977	Dil mac exam no perf rsn nos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9978	Remote E/M new patient 10 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9979	Remote E/M new patient 20 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9980	Remote E/M new patient 30 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9981	Remote E/M new patient 45 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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G9982	Remote E/M new patient 60 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9983	Remote E/M est. patient 10 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9984	Remote E/M est. patient 15 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9985	Remote E/M est. patient 25 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9986	Remote E/M est. patient 40 mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9987	BPCI advanced in home visit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9988	Pall Serv During Meas	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9992	Pall Serv During Meas	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9993	Pall Serv During Meas	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9994	Pall Serv During Meas	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9996	Doc Pt Pal Or Hospice	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9997	Doc Pt Preg Dur Msrmt Pd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9998	Doc Med Rsn <3 Colon	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
G9999	Doc Sys Rsn <3 Colon	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0001	Alcohol And/or Drug Assessment	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0002	Bhval Hlth Scr Detrm Admis Tx Progm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0003	Alcohol&/rx Scr;lab Analy Alcohol&/rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0004	Behavioral Health Cnsl&tx-15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0005	Alcohol&/rx Srv; Grp Cnsl Clinician	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0006	Alcohol &or Drug Srv; Case Mgmt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0007	Alcohol &or Rx Srv; Crisis Interven	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0008	Alcohol&/rx Srv;sub-ac Dtox Hosp Ip	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0009	Alcohol&/rx Srv; Acute Dtox Hosp Ip	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0010	Alcohol&/rx Srv; Sub-ac Dtox Res Ip	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0011	Alcohol&/rx Srv;ac Dtox Res Prog Ip	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0012	Alcohol&/rx Srv; Sub-ac Dtox Res Op	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0013	Alcohol&/rx Srv;ac Dtox Res Prog Op	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0014	Alcohol &/ Rx Srv; Amb Dtoxication	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0015	Alcohol&/rx Srv; Intensv Op; Intrvn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0016	Alcohol &or Rx Srv; Medical/somatic	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0017	Bhval Health; Res W/o Room&bd-diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0018	Bhval Hlth; Shrt-term Res Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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H0019	Bhval Hlth; Lng-term Res Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0020	Alcohol&/rx Srvc;methdone Admn&/srvc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0021	Alcohol &or Drug Training Service	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0022	Alcohol &or Drug Interven Service	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0023	Behavioral Health Outreach Service	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0024	Bhval Hlth Prv Inform Dissemin Srvc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0025	Bhval Health Prev Education Service	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0026	Alcohol&/rx Prev Prc Srvc Cmty-based	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0027	Alcohol &or Rx Prev Envir Service	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0028	Alcohol&/rx Prev Prob Id&ref Srvc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0029	Alcohol &or Rx Prevention Alt Srvc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0030	Behavioral Health Hotline Service	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0031	Mental Health Assess Non-physician	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0032	Mentl Hlth Srvc Plan Dvlp Non-phys	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0033	Oral Medadmin Dir Observation	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0034	Medication Trn&support Per 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0035	Mental Health Part Hosp Tx < 24 Hr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0036	Cmty Psyc Supp Tx Fce-to-fce-15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0037	Cmty Psyc Supportive Tx Progm-diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0038	Self-help/peer Services Per 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0039	Assertive Cmty Tx Fce-to-fce-15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0040	Assertive Cmty Tx Progm Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0041	Foster Care Chld Non-tx-diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0042	Foster Care Chld Non-tx-month	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0043	Supported Housing Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0044	Supported Housing Per Month	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0045	Respite Care Srvc Not Home Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0046	Mental Health Services Nos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0047	Alcohol &or Oth Drug Abs Srvc Nos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0048	Alc &/oth Rx Tst: Clct&hndl Not Bld	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0049	Alcohol/drug Screening	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0050	Alcohol/drug Service 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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H0052	Mmip mental health and care	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H0053	Ht mental health and care	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H1000	Prenatal Care At-risk Assessment	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H1001	Prenatal at risk Enhncd Srvc; Antprtm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H1002	Prenatal at risk Enhncd Srvc; Coord	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H1003	Prenatal at risk Enhncd Srvc; Ed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H1004	Prenatal at risk Enhncd Srvc; F/u Hom	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H1005	Prenatal at risk Enhncd Srvc Pkg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H1010	Non-medical Fam Planning Ed-session	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H1011	Fam Assess Lic Bhval Hlth State Def	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2000	Comp Multidisciplinary Evaluation	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2001	Rehabilitation Program Per 1/2 Day	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2010	Comp Medication Services Per 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2011	Crisis Interven Service Per 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2012	Behavioral Health Day Tx Per Hour	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2013	Psyc Health FacI Service Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2014	Skills Training&dvlp Per 15 Minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2015	Comp Cmty Support Srvc Per 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2016	Comp Cmty Support Srvc Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2017	Psychosocial Rehab Srvc 15 Munutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2018	Psychosocial Rehab Srvc Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2019	Therapeutic Behavioral Srvc 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2020	Therapeutic Behavioral Srvc Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2021	Cmty-based Wrap-around Srvc 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2022	Cmty-based Wrap-around Srvc Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2023	Supported Employment Per 15 Minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2024	Supported Employment Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2025	Ongoing Supp Mntain Employ 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2026	Ongoing Supp Mntain Employment Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2027	Psychoeducational Service 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2028	Sexloffender Tx Service Per 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2029	Sexual Offender Tx Service Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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H2030	Mental Health Clubhouse Srvc 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2031	Mental Health Clubhouse Srvc Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2032	Activity Therapy Per 15 Minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2033	Multisys Therapy Juvs Per 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2034	Alc&/rx Abs Halfway House Srvc Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2035	Alcohol &or Oth Drug Tx Prog-m-hour	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2036	Alcohol &or Oth Drug Tx Prog-m-diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2037	Dvlpmntl Dlay Prev Actv Chld 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2038	Skill Train And Dev/Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2040	Coord Specialty Care, Month	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
H2041	Coord Special Care Encounter	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J0120	Injection Tetracycline Up To 250 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J0190	Injection Biperiden Lactat Per 5 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J0200	Inj Alatrofloxacin Mesylate 100 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J0205	Injection Alglucerase Per 10 Units	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J0288	Inj Amphotericin B Cholesteryl 10 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J0350	Injection Anistreplase Per 30 Units	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J0365	Injection Aprotonin 10000 Kiu	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J0380	Inj Metaraminol Bitartrate 10 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J0390	Injection Chloroquine Hcl Up 250 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J0395	Injection Arbutamine Hcl 1 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J0520	Inj Bethanechol Chlorid Up 5 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J0620	Inj Calcml Glycrophsphte&lactat-10ml	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J0710	Inj Cephapirin Sodium To 1 Gm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J0715	Inj Ceftizoxime Sodium Per 500 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J0745	Inj Codeine Phosphate Per 30 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J0890	Peginesatide injection	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J0945	Inj Brompheniramine Maleate-10 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1056	Inj Mdrxyprgestron/estradiol 5/25mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1094	Injection Dexamethasone Actat 1 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1180	Injection Dyphylline Up To 500 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1320	Inj Amitriptyline Hcl To 20 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.



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J1330	Inj Ergonovine Maleate Up To 0.2 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1435	Injection Estrone Per 1 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1436	Inj Etidronate Disodium Per 300 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1452	Inj Fomivirsen Sodium Io 1.65 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1457	Injection Gallium Nitrate 1 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1562	Immune Globulin Subcutaneo/brand Name - Vivaglobin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1573	Injection, Hepatitis B Immune Globulin (hepagam B)	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1600	Inj Gold Sodium Thiomalate To 50 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1620	Inj Gonadoreln Hydrochlorid 100 Mcg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1642	Injection Heparin Sodium 10 Units	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1655	Injection Tinzaparin Sodium 1000 Iu	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1675	Inj Histrelin Actat 10 Microgms	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1700	Inj Hydrocortisone Actat To 25 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1710	Inj Hydrocortison Sod Phos To 50 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1730	Injection Diazoxide Up To 300 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1810	Inj Dropridl&fentanyl Citrat To 2ml	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1835	Injection Itraconazole 50 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1890	Inj Cephalothin Sodium To 1 Gm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1945	Injection Lepirudin 50 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1960	Inj Levorphanol Tartrate To 2 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J1990	Inj Chlordiazepoxide Hcl To 100 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J2010	Injection Lincomycin Hcl To 300 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J2180	Inj Mepridin&promthzin Hcl To 50 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J2320	Inj Nandrolone Decanoate To 50 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J2460	Inj Oxytetracycline Hcl To 50 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J2513	Inj Pentastarch 10% Sol 100 Ml	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J2650	Inj Prednisolone Acetate To 1 Ml	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J2670	Injection Tolazoline Hcl To 25 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J2725	Injection Protirelin Per 250 Mcg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J2910	Injection Aurothioglucose To 50 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J2940	Injection Somatrem 1 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J2950	Injection Promazine Hcl Up To 25 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
J2995	Inj Streptokinase Per 250000 Iu	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J3280	Inj Thiethylprazine Maleat To 10 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J3302	Inj Triamcinolone Diactat 5 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J3305	Inj Trimetrexate Glucuronate 25 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J3310	Injection Perphenazine Up To 5 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J3320	Inj Spctnomycn Dhydrochlorid To 2 Gm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J3350	Inj Urea Up To 40 Gm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J3364	Injection Urokinase 5000 Iu Vial	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J3400	Inj Triflupromazine Hcl To 20 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J3472	Inj Hyaluronidase Ovine 1000 Usp U	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J3520	Edetate Disodium Per 150 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J3530	Nasal Vaccine Inhalation	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J3570	Laetrile Amygdalin Vitamin B17	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7110	Infusion Dextran 75 500 Ml	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7191	Factor Viii Ahf Procine Per Iu	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7196	Antithrombin recombinant	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7306	Levonorgestrel Contraceptv Impl Sys	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7505	Muromonab-cd3 Parenteral 5 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7513	Daclizumab Parenteral 25 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7604	Acetylcysteine, Inhalation Solution, Compounded Pr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7607	Levalbuterol, Inhalation Solution, Compounded Prod	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7609	Albuterol, Inhalation Solution, Compounded Product	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7610	Albuterol Comp Con	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7622	Beclomethasone Inhal Sol U Dose Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7624	Betamethasone Inhal Sol U Dose Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7628	Bitolterol Mesylate Inh Sol Conc-mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7629	Bitolterol Mesylate Inhal Sol U-mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7633	Budesonide Inhal Sol Dme-0.25 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7634	Budesonide, Inhalation Solution, Compounded Produc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7635	Atropine Inhal Solution Conc Per Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7636	Atropine Inhal Sol Ud Per Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7637	Dexamethasone Inhal Sol Con Per Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
J7638	Dexamethasone Inhal Sol Ud Per Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7641	Flunisolide Inhal Sol Admned Dme-mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7642	Glycopyrrolate Inhal Sol Conc-mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7643	Glycopyrrolate Inhal Sol U-mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7645	Ipratropium Bromide Comp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7647	Isoetharine Hcl, Inhalation Solution, Compounded P	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7648	Isoetharine Hcl Inhal Sol Conc-mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7649	Isoetharine Hcl Inhal Sol U-mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7650	Isoetharine Comp Unit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7657	Isoproterenol Hcl, Inhalation Solution, Compounded	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7658	Isoproterenol Hcl Inhal Sol Conc-mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7659	Isoproterenol Hcl Inhal Sol U-mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7660	Isoproterenol Comp Unit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7667	Metaproterenol Sulfate, Inhalation Solution, Compo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7668	Metaproterenol Inhal Sol Conc-10 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7669	Metaproterenol Inhal Sol U-10 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7670	Metaproterenol Comp Unit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7676	Pentamidine Isethionate, Inhalation Solution, Comp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7680	Terbutaline Sulfate Inhal Sol Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7681	Terbutaline So4 Inhal Sol U Dose-mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7683	Triamcinolone Inhal Sol Conc-mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7684	Triamcinolone Inhal Sol U Dose-mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J7685	Tobramycin, Inhalation Solution, Compounded Produc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J8515	Cabergoline Oral 0.25 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J8562	Oral fludarabine phosphate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J8565	Gefitinib Oral 250 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J9165	Diethylstilbestrol Diphoshat 250 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J9212	Inj Intraferon Alfacon-1 Recomb 1 Mcg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J9213	Intrferon Alfa-2a Recombinant 3 M U	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J9219	Leuprolide Acetate Implant 65 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
J9270	Plicamycin 2.5 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
K0669	Wc Accss Seat/back Cushn No Sadmerc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
K0740	Repair/service oxygen equipment	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
K0806	POV group 2 std up to 300 lbs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
K0807	POV group 2 hd 301-450 lbs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
K0808	POV group 2 vhd 451-600 lbs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
K0868	Pwc Gp 4 Std Seat/back	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
K0869	Pwc Gp 4 Std Cap Chair	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
K0870	Pwc Gp 4 Hd Seat/back	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
K0871	Pwc Gp 4 Vhd Seat/back	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
K0877	Pwc Gp 4 Std Sing Pow Opt S/b	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
K0878	Pwc Gp 4 Std Sing Pow Opt Cap	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
K0879	Pwc Gp 4 Hd Sing Pow Opt S/b	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
K0880	Pwc Gp 4 Vhd Sing Pow Opt S/b	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
K0884	Pwc Gp 4 Std Mult Pow Opt S/b	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
K0885	Pwc Gp 4 Std Mult Pow Opt Cap	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
K0886	Pwc Gp 4 Hd Mult Pow S/b	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
L0984	Protective Body Sock Each	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
L1847	Ko Dbl Uprrt-adj Jnt-inflat Air Supp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
L1848	Ko dbl upright w/air pre ots	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
L2840	Add Lw Ext Orthos Tib Len Sock Fx/=	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
L2850	Add Lw Ext Ortho Fem Len Sock Fx/=	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
L2861	Torsion mechanism knee/ankle	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
L4394	Repl Sft Infrfce Matl Ft Drop Splnt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
L4398	Ft Drop Splnt Recumbnt Pstn Devc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
L5990	Add Lw Extrm Prosth Use Adj Heel Ht	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
L7600	Prosetic Donning Sleeve Material Ea	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
L8678	Ext Sply Implt Neurostim	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
L8680	Impl Neurostimulator Electrode Ea	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
L8685	Impl Neurostim 1 Array Rechargeable	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
L8686	Impl Neurostim 1 Array Non-recharge	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
L8687	Impl Neurostim 2 Array Rechargeable	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
L8688	Impl Neurostim 2 Array Non-recharge	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
L8692	Non-osseointegrated snd proc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
L9900	Ortho/prosth Supp Acces &/ Serv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M0001	Advancing Cancer Care Mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M0002	Opt Care Kidney Hlth Mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M0004	Support Care Neur Cond Mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M0005	Promot Wellness Mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M0075	Cellular Therapy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M0076	Prolotherapy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M0100	Intragastr Hypothm Use Gastr Freez	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M0300	Iv Chelation Therapy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M0301	Fabric Wrapping Abdominal Aneurysm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1003	Tb scr 12 mo pri fst bio dz	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1004	Doc med rsn no srn tb	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1005	Tb scr no perf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1006	Dz not ases, no rsn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1007	>=50% total pt outpt ra enct	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1008	<50% total pt outpt ra encts	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1009	Pt tx and final eval comp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1010	Pt tx and final eval comp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1011	Pt tx and final eval comp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1012	Pt tx and final eval comp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1013	Pt tx and final eval comp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1014	Pt tx and final eval comp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1016	Pt dx meop or sur steri	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1018	Pt dx hst cr pt sk lg cr scr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1019	Adl pt mj dep ds rs 12 phq<5	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1020	Adl pt mj dep ds no rs 12 mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1021	Pt uc in pp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1027	Img head (ct or mri) obtnd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1028	Doc of pt prm hda dx and otr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1029	Doc systm rsn img hd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1032	Adt tkng pharmthry for oud	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1034	Adt 180 dys pharmthry oud	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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M1035	Adt pd out mat pr 180 dys tx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1036	Adt no 180 dys pharmthry oud	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1037	Pt dx lum sp reg cacr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1038	Pt dx lum sp reg fract	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1039	Pt dx lum sp reg inf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1040	Pt dx lum idi or cong scol	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1041	Pt cr ft inf lm or pt id sl	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1043	Ftl st mea sco no ot odi	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1045	Fsm wth scr oks pre and post	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1046	Fsm wth scr no oks pre and p	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1049	Fsm wth scr no odi pre and p	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1051	Pt w/cancer scoliosis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1052	Lg pn nt msr vas scl pre/pst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1054	Pt uc in pp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1055	Aspirin used	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1056	Presc antico med in pp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1057	Aspirin not used, no rsn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1058	Pt prm nurs hm res in pp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1059	Pt no prm nurs hm res in pp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1060	Pt died in pp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1067	Hspc pt prv time meam per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1068	Pt not ambulatory	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1069	Pt scr ft fall rsk	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1070	Pt not scrn fut fall no rsn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1106	Start eoc doc med rec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1107	Docu dx degen neuro	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1108	Oc ni pt 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1109	Oc ni pt dc 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1110	Oc ni pt selfdc 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1111	Start eoc doc med rec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1112	Docu dx degen neuro	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1113	Oc ni pt 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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M1114	Oc ni pt dc 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1115	Oc ni pt selfdc 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1116	Start eoc doc med rec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1117	Docu dx degen neuro	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1118	Oc ni pt 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1119	Oc ni pt dc 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1120	Oc ni pt selfdc 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1121	Start eoc doc med rec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1122	Docu dx degen neuro	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1123	Oc ni pt 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1124	Oc ni pt dc 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1125	Oc ni pt selfdc 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1126	Start eoc doc med rec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1127	Docu dx degen neuro	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1128	Oc ni pt 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1129	Oc ni pt dc 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1130	Oc ni pt self dc 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1131	Docu dx degen neuro	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1132	Oc ni pt 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1133	Oc ni pt dc 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1134	Oc ni pt self dc 1-2 vis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1135	Start eoc doc med rec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1141	Fs no oks	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1142	Emerge cases	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1143	Ni rehab med chiro	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1146	Ongoing care not ind	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1147	Care not poss med rsn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1148	Pt self dschg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1149	No neck fs prom incap	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1150	Lvef <=40% Or Mod/Sev L Vsf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1151	Pt W/ Hx Trnsplt Or Lvad	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1152	Pt W/ Hx Trnsplt Or Lvad	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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M1153	Pt W/ Dx Osteo Doe	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1159	Hospc Serv Dur Meas Pd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1160	Pt Anphx Due To Mengb Bef 13	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1161	Pt Anphx Due To Dtp Bef 13	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1162	Pt Enceph Due To Dtp Bef 13	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1163	Pt Anphx Due To Hpv Bef 13	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1164	Pt W/ Dementia Any Time	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1165	Pt Use Hspc Dur Meas Pd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1166	Path Rpt Tis Spec Wle/Reexc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1167	Hspc Dur Meas Pd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1168	Pt Recd Flu Vax 7/1-6/30	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1169	Doc Med Rsn No Flu Vax	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1170	Pt W/O Flu Vax 7/1-6/30	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1171	Pt Recd 1 Td/Tdap 9Yrs Prior	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1172	Doc Med Rsn No Td/Tdap	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1173	Pt No Rec Td/Tdap 9Yrs Prior	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1174	Pt W/ 1 Hzv Lv Or 2 Hzv Recm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1175	Doc Med Rsn No Hzv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1176	Pt W/O Hzv On/Aft Age 50	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1177	Pt Recd Pcv On/Aft 60	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1178	Doc Med Rsn No Pcv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1179	No Pcv Recd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1180	Pt Imm Ckpt Inhib Therapy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1181	Gr 2 Or> Dia Or Gr2 Or> Col	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1182	Not Elg Pre Ex Ibd/Uc/Crohn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1183	Doc Imm Ckpt Inhib Hld	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1184	Doc Med Rsn No Cst/Ist Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1185	Imm Ckpt Inhib Not Hld No Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1186	Pt W/ Rx For Hspc/Plltv Care	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1187	Pt W/ Esrd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1188	Pt W/ Ckd Stg 5	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1189	Doc Khe Pef W/Efgr/Uacr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.



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Code	Description	Edit Type	Comment
M1190	Doc Khe Not Pef W/Efgr/Uacr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1191	Hspc Svc Any Time In Meas Pd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1192	Pt W/ Dx Sq Cell Ca Of Esoph	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1193	Rpts W/ Imp/Con Mmr/Msi	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1194	Med Rsn No Imp/Con Mmr/Msi	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1195	Rpt Wo Imp/Con Mmr/Msi	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1196	Ixv Nrs Vrs Iqa >=4	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1197	Isa Red >=2 Fr Ixv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1198	Isa Not Red 2Pts Fr Ixv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1199	Pt Rec'G Rrt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1200	Ace-I/Arb Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1201	Med Rsn No Ace-I/Arb Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1202	Pt Rsn No Ace-I/Arb Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1203	No Rsn Ace-I/Arb Rx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1204	Ixv Nrs Vrs Iqa >=4	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1205	Isa Red >=2 Fr Ixv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1206	Isa Not Red 2Pts Fr Ixv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1207	#Pts Scrn Sdoh	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1208	#Pts No Scrn Sdoh	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1209	>=2 Same Hi-Rsk Med W/O Diag	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1210	>=2 Same Meds Tbl4 Not Ord	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1211	Hemoglobin A1C Level >9.0%	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1212	Missing Hb A1C Level	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1213	No Hx Spiro Prs Spiro>=70%	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1214	Spiro Results Wth Obs Doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1215	Med Rsn For No Doc Spiro	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1216	No Spiro Doc No Res Doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1217	Sys Rsn No Doc Spiro	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1218	Pt Copd Symptoms	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1220	Dre Wth Interp Rtnophy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1221	Dre W/O Rtnophy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1222	Glaucoma Pln Of Care Not Doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
M1223	Glaucoma Plan Of Care Doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1224	Iop Dec <20% From Base	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1225	Iop Dec >=20% From Base	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1226	Iop Not Doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1227	Eb Therapy Prescribed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1228	Pt + Hcv Aby +Vir W/ Rx 3 Mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1229	Pt W/ +Hcv +Vir Ref Win 1 Mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1230	Pt Hcv Rctv Aby No F/U Tst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1231	Pt Hcv Tst No Reactive Res	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1232	Pt Hcv Tst Reactive Result	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1233	Pt No Hcv Aby Or Result	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1234	Pt Hcv Rctv Aby F/U Neg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1235	Doc Pt Hcv Aby Rna Tst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1236	Baseline Mrs > 2	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1237	Pt Rsn No Scrn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1238	Doc 2Nd Recom Hzv 2-6 Mo Int	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1239	Pt No Resp Heard	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1240	Pt No Resp Best Int	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1241	Pt No Resp Seen As Person	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1242	Pt No Resp Imprt To Me	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1243	Pt Othr Thn True Heard	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1244	Pt Othr Thn True Best Int	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1245	Pt Othr Thn True Person	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1246	Pt Othr Thn True Imprt To Me	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1247	Pt Resp True Best Int	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1248	Pt Resp True Seen As Person	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1249	Pt Resp True Imprt To Me	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1250	Pt Resp True Heard	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1251	Pts Proxy Cmplt Hu Surv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1252	Pts No Cmplt Hu Survey	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1253	Pts Hu Surv No Amb Pltvt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1254	Pts Deceased Prior Hu Surv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
M1255	Pts W/ Othr Rsn Vst,+Prg Tst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1256	Prior History Of Known Cvd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1257	Cvd Risk Assess Not Perf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1258	Cvd Risk Assess Perf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1259	Pt Kid Transplt Wtlist Lv Don	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1260	Pt No Kd Trnsplt Wtlist Lv Do	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1261	Pts On Wtlist Bef Dialysis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1262	Pts Transplt Bef Dialysis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1263	Pts Hosp Dialysis Dt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1265	Cms 2728 Completed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1266	Pts Admit Snf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1267	Pt No Act Kid Transplt Wtlist	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1268	Pt Ac Stat Kid Trnsplt Wtlist	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1269	Rec'D Esrd Mcp Lst Day Of Mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1270	Pts No Kid Transplt Wtlist	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1271	Pts Dem Any Time/Dur Mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1272	Pts Kid Transplt Wtlist	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1273	Pts Snf 1 Yr Dialysis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1274	Pts Snf Exl Mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1275	Pts Hosp Exl	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1276	Calc Bmi Out Nrm Param Nof/U	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1277	Colorectal Ca Screen Doc Rev	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1278	Pre-Htn Or Htn Doc, F/U Indc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1279	Pre-Htn/Htn, No F/U, Not Gvn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1280	Bilat Mast/Hx Bi /Unilat Mas	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1281	Bp Scrn No Perf At Interval	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1282	Pt Scrn Tbco Id As Non User	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1283	Pt Scrn Tbco And Id As User	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1284	Pt 66+ Snp Or Ltc Pos > 90D	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1285	Scrn Mam Perf Rslts Not Doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1286	Bmi Doc Onl Fup Not Cmpltd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1287	Calc Bmi Blw Low Param F/U	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
M1288	Doc Rsn No Hbp Scrn Or F/U	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1289	No Pt Tbco Cess Interv Rng	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1290	Pt Not Eli D/T Act Dig Htn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1291	Pt 66+ Frailty And Med Dem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1292	Pt 66+ Frail Inpt Adv Ill	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1293	Calc Bmi Abv Up Param F/U	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1294	Bp Scrn Perf Rec Interval	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1295	Pt Hx Tot Col Or Colon Ca	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1296	Calc Bmi Norm Parameters	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1297	Bmi Not Doc Medrsn Ptrf	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1298	Doc Pt Preg Dur Msrmt Pd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1299	Flu Immunize Order/Admin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1300	Flu Imm No Admin Doc Rea	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1301	Pt Recv Tbco Cess Interv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1302	Scrn Mam Perf Rslts Doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1303	Hospc Serv Dur Meas Pd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1304	No Pneum Vax Admin 19+	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1305	Pneum Vax Admin 19+	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1306	Pt Anphx Due To Pneum	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1307	Doc Pt Pal Or Hospice	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1308	Flu Immunize No Admin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1309	Pall Serv During Meas	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1310	Pt Scr Tob & Cess Int	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1311	Aphlx To Vax Bef Enc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1312	No Pt Tbco Scrn Rng	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1313	No Tob Scr/Cess Int	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1314	Bmi Not Calculated	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1315	Crc No Doc No Rsn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1316	Tobacco Non-User	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1317	Pts Counsl Cpt Opt Out	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1318	Pts No Csp Doc Contact	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1319	Pts Csp Doc Contact	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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M1320	Pts Scrn + Hrsn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1321	Pts No 7Wk Inj, No Iop, Iop > 25	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1322	Pts 7Wk Inj, Scrn Iop ≤ 25	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1323	Pts 7Wk Inj, Scrn Iop > 25	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1324	Pts Intravitreal/Pci	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1325	Doc Med Rsn Not Seen	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1326	Pts Dx Hypotony	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1327	Pts No Eval Ini Xm No 8 Wks	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1328	Pts Dx Acute Vitreous Hem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1329	Pts Act Pvd 2 Wks 8 Wks	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1330	Doc Pts Rsn No F/U Xm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1331	Pts Eval Ini Xm 8 Wks	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1332	Pts No Eval Ini Xm No 2 Wks	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1333	Acute Vitreous Hemorrhage	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1334	Pts Act Pvd 2 Wks 2 Wks	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1335	Doc Pts Rsn No F/U Xm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1336	Pts Eval Ini Xm 2 Wks	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1337	Acute Pvd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1338	Pt F/U 30-180 Dys No + Imprv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1339	Pts F/U 30-180 Dys + Improv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1340	Indx Whodas 2.0 Or Sds	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1341	Pt No F/U 30-180 Dys	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1342	Pts Died Perf Per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1343	Pt Pam Lvl 4 Base Or Srt Lin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1344	Pts No Bsln Or 2Nd Pam Score	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1345	Pt Bsln Pam, 2Nd Scr 6-12 Mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1346	Pts No Pam 6 Pts 6-12 Mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1347	Pt Pam Incr 3 Pt 6-12 Mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1348	Pt Pam Incr 6 Pt 6-12 Mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1349	Pt No Pam 3 Pts 6-12 Mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1350	Pt W/ Suic Saf Pln Init Rev	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1351	Pt Cmplt Suicd Saf Pln 120Dy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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M1352	Suicd C-Ssrs Assessment, Equ	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1353	Pts No Cmplt Suicd Saf Pln	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1354	Pt No Suicd Saf Pln 120Dy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1355	Suicd Based Cln Eval	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1356	Pt Died Dur Meas Pd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1357	Pt W/Red Suic Idea 120 Days	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1358	Pts No <Suicd Idea 120 Dys	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1359	Indx Suicd Idea, No 0 Scr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1360	Suicd C-Ssrs Assessment	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1361	Suicd Based Cln Eval	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1362	Pt Died Dur Meas Pd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1363	Pts No F/U 120 Dys	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1364	Ascvd Risk >=20Pct	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1365	Hosp+Pall Care Spec Code 17	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1366	Focus On Women'S Health Mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1367	Qual Care Ent Disorder Mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1368	Prev Trt Inf D/O Hiv/Hep Mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1369	Qualcare Mental Hlth/Sud Mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1370	Rehab Support Msk Care Mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1371	Mst rec gsa<7	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1372	Mst rec gsa >=7 and<8	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1373	Mst rec gsa >=8 and <=9	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1374	Ra dx enc 90 days dur per pd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1375	Ra dx enc 90 days dur per pd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1376	Ra dx enc 90 days dur per pd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1377	Fu colscop 10 yr doc w/ disc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1381	Pt sec strk wthin 5 days	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1382	Enc dur perf pd pos 11	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1383	Acute pvd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1384	Pt died dur perf pd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1385	Pt rsn not seen 2nd pam	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1386	Exc sx melmn or mlnm is	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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M1387	Pt died dur perf pd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1388	Pt doc exm rec melmn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1389	Pt rsn no exm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1390	Pt no doc exm for rec	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1391	All pt dx w/ rec mlnm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1392	Pt rsn no exm or lst to fu	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1393	Pr no dx rec mlnm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1394	Stg i-iii br ca	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1395	Init chemo w/def dur ec grp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1396	Pt ther clin trial	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1397	Pt w/ recur/prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1398	Bslne and fu promis doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1399	Pt lve prac	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1400	Pt died dur perf pd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1401	Stg i-iii br ca	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1402	Init chemo w/def dur ec grp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1403	Bslne and fu promis doc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1404	Pt ther clin trial	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1405	Pt w/ recur/prog	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1406	Pt lve prac	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1407	Pt died dur perf pd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1408	Gmln brca bef dx ca	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1409	Recd gmln brca1/brca2 couns	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1410	No gmln brca1/brca2 couns	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1411	1st ln ici no chemo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1412	Met nsclc w/ egfr alk oth ab	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1413	Pos pdl1 bef init ici tx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1414	Med rsn no pdl1 bef 1st ther	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1415	No pos pdl1 bef ici ther	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1416	Pt rec hosp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1417	Pt up to date cov	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1418	Med rsn not up to date cov	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

**Clinical Edits by Code List**  
**Always Not Medically Necessary Denials**  
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Code	Description	Edit Type	Comment
M1419	Pt not up to date cov	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1420	Complete ophthalmologic mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1421	Dermatological care mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1422	Gastroenterology care mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1423	Opt care urologic cnd mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1424	Pulmonology care mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
M1425	Surgical care mvp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
P2028	Cephalin Flocculation Blood	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
P2029	Congo Red Blood	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
P2031	Hair Analysis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
P2033	Thymol Turbidity Blood	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
P7001	Cult Bacterl Urine; Quan Sens Study	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
Q0173	Trimethobenzamide Hcl 250 Mg Oral	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
Q0174	Thiethylperazine Maleate 10 Mg Oral	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
Q0515	Inj Sermorelin Actate 1 Mcg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
Q2034	Influenza virus vaccine, split virus, for IM use	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
Q2052	IVIG demo, sevice/supplies	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
Q3031	Collagen Skin Test	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
Q9001	Va chaplain assessment	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
Q9002	Va chaplain counsel individu	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
Q9003	Va chaplain counsel group	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
Q9951	Locm 400/> Mg/ml Iodine Conc MI	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
Q9953	Inj Ironbased Mr Contrast Agent MI	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
Q9954	Oral Mr Contrast Agent MI	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
Q9955	Inj Perflexane Lipid Microsphers MI	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
Q9959	Hocm 150-199 Mg/ml Iodine Conc MI	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
Q9962	Hocm 300-349 Mg/ml Iodine Conc MI	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
Q9964	Hocm 400 Or > Mg/ml Iodine Conc MI	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
R0076	Trans Prtble Ekg Fac/Location-pt	Non-Reimbursable Services	CMS Status B, not reimbursed separately.
S0012	Butorphanl Tartrat Nasl Spray 25 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0013	Esketamine, nasal spray	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0014	Tacrine Hydrochloride 10 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.



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Code	Description	Edit Type	Comment
S0017	Injection Aminocaproic Acid 5 Grams	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0021	Injection Ceftoperazone Sodium 1 Gm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0023	Inj Cimetidine Hydrochloride 300 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0028	Injection Famotidine 20 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0032	Injection Nafcillin Sodium 2 Grams	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0034	Injection Ofloxacin 400 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0039	Inj Sulfmethoxazl&trimethoprm 10 Ml	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0040	Inj Ticarcillin & Clavulanat K+3.1 Gm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0074	Injection Cefotetan Disodium 500 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0078	Inj Fosphenytoin Sodium 750 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0080	Inj Pentamidine Isethionate 300 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0081	Inj Piperacillin Sodium 500 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0088	Imatinib 100 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0090	Sildenafil Citrate 25 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0091	Granisetron Hydrochloride 1 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0092	Inj Hydromorphone Hydrochlorid 250 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0093	Injection Morphine Sulfate 500 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0104	Zidovudine Oral 100 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0106	Bupropion Hci Sr Tab 150 Mg 60 Tabs	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0108	Mercaptopurine Oral 50 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0109	Methadone Oral 5mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0117	Tretinoin Topical 5 Grams	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0119	Ondansetron 4 mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0122	Injection Menotropins 75 Iu	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0126	Injection Follitropin Alfa 75 Iu	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0128	Injection Follitropin Beta 75 Iu	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0132	Injection Ganirelix Acetate 250 Mcg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0136	Clozapine 25 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0137	Didanosine 25 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0138	Finasteride 5 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0139	Minoxidil 10 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0140	Saquinavir 200 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
S0142	Colisthmthate Soduim Inhal Conc-mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0145	Inj Pegylatd Ifn Alfa-2a 180 Mcg MI	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0148	Peg interferon alfa-2b/10	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0155	Sterile Dilutant Epoprostenol 50 MI	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0156	Exemestane 25 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0157	Becaplermin Gel 0.01% 0.5 Gm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0160	Dextroamphetamine Sulfate 5 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0166	Injection Olanzapine 2.5 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0170	Anastrozole Oral 1 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0172	Chlorambucil Oral 2 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0174	Dolasetron Mesylate Oral 50 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0175	Flutamide Oral 125 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0176	Hydroxyurea Oral 500 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0177	Levamisole Hydrochloride Oral 50 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0178	Lomustine Oral 10 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0179	Megestrol Acetate Oral 20 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0182	Procarbazine Hydrochlord Oral 50 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0183	Prochlorperazine Maleate Oral 5 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0187	Tamoxifen Citrate Oral 10 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0189	Testosterone Pellet 75 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0190	Mifepristone Oral 200 Mg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0191	Misoprostol Oral 200 Mcg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0194	Dialys/stress Vit Supl Oral 100 Cap	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0197	Prenatal Vitamins 30-day Supply	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0199	Med Induced Ab Oral Ingest Med	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0201	Part Hositalizatn Srvc<24 Hr-diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0207	Paramed Intercept Non-hos-based Als	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0208	Paramed Intrcpt Als Non-trnsprt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0209	Wheelchair Van Mileage Per Mile	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0215	Non-emerg Transportation; Per Mile	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0220	Med Conf Md W/team Hlth Prof;30 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0221	Med Conf Md W/team Hlth Prof;60 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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S0250	Comp Geriatric Assess&tx Planning	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0255	By Nrs Socl Wrker/oth Desnatd Staff	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0260	Hx & Phys Related To Surgical Proc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0265	Genetic Cnsl Phys Sup Ea 15 Mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0270	Home Std Case Rate 30 Days	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0271	Home Hospice Case 30 Days	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0272	Home Episodic Case 30 Days	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0273	Md Home Visit Outside Cap	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0274	Nurse Practr Visit Outs Cap	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0280	Medical home, initial plan	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0281	Medical home, maintenance	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0285	Consult before screen colonoscopy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0302	Cmpl Early Prd Screen Dx&tx Srvc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0310	Hospitalist Services	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0311	Comprehensive management care coord adv ill	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0315	Dz Mgmt Progm; Init Assess&init Pro	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0316	Disease Mgmt Progm; F/u/reassess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0317	Disease Management Progm; Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0320	Tel Calls Rn Dz Mgmt Memb Monitr;mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0340	Lifestyl Mod Mgmt Cor Art Dz; 1 Qtr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0341	Incl All Supp Srvc; 2/third Qtr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0342	Lifestyl Mod Mgmt Cor Art Dz; 4 Qtr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0353	Cancer treatment plan initial	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0354	Cancer treatment plan change	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0390	Routine Foot Care; Per Visit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0395	Impression Cast Foot-practitioner	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0400	Globl Fee Xtracorp Shock Wave Lith	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0500	Disposable Contact Lens Per Lens	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0504	Single Vision Prsc Lens Per Lens	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0506	Bifocal Vision Prsc Lens Per Lens	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0508	Trifocal Vision Prsc Lens Per Lens	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0510	Non-prescription Lens Per Lens	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
S0512	Daily Wear Splcly Cntc Lens-lens	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0514	Color Contact Lens Per Lens	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0515	Scleral Lens Lqd Bandge Device-lens	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0516	Safety Eyeglass Frames	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0518	Sunglasses Frames	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0580	Polycarbonate Lens	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0581	Nonstandard Lens	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0590	IntegrL Lens Srvc Misc Reported Sep	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0592	Comp Contact Lens Evaluation	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0595	Dispns New Spctcl Lens Pt Spl Frme	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0596	Phakic iol refractive error	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0601	Screening Proctoscopy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0610	Annual Gyn Examination New Patient	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0612	Annual Gyn Examination Est Patient	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0613	Annual Gyn Ex Clin Brst W/o Pelv Ex	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0618	Audiometry For Hearing Aid Eval	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0620	Routine Ophth Ex W/refrac; New Pt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0621	Routine Ophth Ex W/refrac; Est Pt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0622	Physical Exam College New/est Pt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0630	Remv Suturs; Md Not Md Who Clos Wnd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0800	Laser In Situ Keratomileusis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0810	Photorefractive Keratectomy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S0812	Phototherapeutic Keratectomy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S1001	Deluxe Item Patient Aware	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S1002	Customized Item	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S1015	Iv Tubing Extension Set	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S1016	Non-pvc Iv Admn Set Rx Not Stable	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S1030	Cont Noninvas Glu Mon Devc Purchase	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S1031	Cont Noninvas Glu Mon Devc Rental	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S1034	Artificial pancreas systemb	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S1035	Artificial pancreas invasive disposable sensor	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S1036	Arifical pancreas external transmitter	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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S1037	Artificial pancreas external receiver	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S1040	Cranil Remold Orthos Rigid W/sft Int	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S1091	Stent non-coronary propel	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2053	Tplnt Sm Intestine&liver Allogfts	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2054	Transplantation Multivisceral Orgn	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2055	Harv Donr Mx-vsclrl Orgn; Cadvr Donr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2060	Lobar Lung Transplantation	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2061	Donor Lobect Tplnt Living Donor	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2065	Simultaneous Panc Kidney Tplnt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2066	Breast Gap Flap Reconst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2067	Breast Stacked" Diep/gap"	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2068	Breast Reconstruction Diep Flap Uni	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2070	Cysto; Laser Tx Ureteral Calc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2079	Lap Esophagomyotomy Heller Type	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2080	Laser-assisted Uvulopalatoplasty	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2083	Adj Gastric Band Diam Subq Port	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2095	Trnscath Occl/emboliz Tumr Destruc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2102	Islet Cell Tiss Tplnt Panc; Allogen	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2103	Adrenal Tissue Transplant To Brain	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2107	Adoptive Immunotx Course Treatment	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2112	Arthroscopy Knee Surg Harvest Cart	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2115	Osteot Periacetabular W/intrl Fix	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2117	Arthroereisis Subtalar	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2118	Total Hip Resurfacing	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2120	Ldl Apheres Heparin Xtrcrp Ldl Precp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2140	Cord Bld Harvest Tplnt Allogeneic	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2142	Cord Blood Stem-cell Tplnt Allogen	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2150	Bn Marrow/stem Cell Harv Tplnt&comp;	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2152	Solid Organ; Tplnt & Related Comp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2202	Echosclerotherapy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2205	Min Invas Dir Cab; Art Gft 1 Cag	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2206	Min Invas Dir Cab; Art Gft 2 Cag	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

**Clinical Edits by Code List**  
**Always Not Medically Necessary Denials**  
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Code	Description	Edit Type	Comment
S2207	Min Invas Dir Cab; Ven Only 1 Cvg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2208	Min Invas Dir Cab; 1 Art&vg 1 Vg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2209	Min Invas Dir Cab; 2 Art Gft&1 Vg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2225	Myringotomy Laser-assisted	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2230	Impl Magnt Cmpnt Semi-impl Hear Dvc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2235	Impl Auditory Brain Stem Implant	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2260	Inducd Ab 17-24 Weeks Any Surg Meth	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2265	Ab Fetal Indication 25-28 Weeks	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2266	Ab Fetal Indication 29-31 Weeks	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2267	Ab Fetal Indication 32 Weeks/>	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2300	Scope Shldr;w/therml-inducd Cpslorr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2325	Hip Core Decompression	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2340	Chemodnervat Abductr Musc Vocl Cord	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2341	Chemodnervat Adductr Musc Vocal Crd	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2342	Nasl Endo Postop Debrid Uni/bil	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2348	Decomp Perq Disc Rf 1/mx Lumb	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2350	Dissect Ant-osteophyt;lumb 1 Intrsp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2351	Dskct Ant-osteophyt;lumb Add Intrsp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2400	Repr Congn Hern Fetus In Utero	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2401	Repr Urin Tract Obst Fetus-utero	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2402	Repr Congen Cyst Malf Fetus-utero	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2403	Repr Pulmonary Sequist Fetus-utero	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2404	Repr Myelomeningo Fetus Proc-utero	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2405	Repr Sacrococ Tratoma Fetus In Utro	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2409	Rep Congn Malform Fetus-utero Noc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2411	Fetoscop Laser Tx Treatment-ttts	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S2900	Surg Tech Rqr Use Robotic Surg Sys	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3000	Diab Ind; Ret Eye Ex Dilat Bil	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3005	Prfrm Msr Eval Pt Self Assess Dprss	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3600	Stat Laboratory Request	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3601	Emerg Stat Lab Chrg Pt Hb/nrs FacI	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3620	Newborn Metabolic Screening Panel	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

**Clinical Edits by Code List**  
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S3630	Eosinophil Count Blood Direct	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3645	Hiv-1 Antibod Test Mucos Transudate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3650	Saliva Test Hormone Level;menopause	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3652	Sliva Tst Hormone Lev;prterm Labor	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3655	Antisperm Antibodies Test	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3708	Gastrointestinal Fat Absorb Study	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3722	Dose optimization auc - 5fu	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3800	Genetic Testing For Amyotrophic Lateral Sclerosis	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3840	Dna Analysis Ret Proto-oncogene	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3841	Genetic Testing For Retinoblastoma	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3842	Genetic Tst Von Hippel-lindau Dz	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3844	Dna Analy Gjb2 Congn Pfd Deafness	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3845	Genetic Testing Alpha-thalassemia	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3846	Genetic Tst Hgb E Beta-thalassemia	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3849	Genetic Testing Niemann-pick Dz	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3850	Genetic Testing Sickle Cell Anemia	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3852	Dna Analy Apoe Epsilon 4 Allele Alz	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3853	Genetic Tst Myotonic Musc Dystrophy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3854	Gene Expression Profiling Panel (oncotype)	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3861	Genetic Testing Brugada	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3865	Comp gene sequence hypertrophic cardiomy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3866	Specific gene test hypertrophic cardiomy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3870	CGH test development delay	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3900	Surface Electromyography	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3902	Ballistocardiogram	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3904	Masters Two Step	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S3905	Auto Handheld Diag Nerv Test	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4005	Interim Labor Facility Global	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4011	In Vitro Fertilization;	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4013	Complete Cycle Gift Case Rate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4014	Complete Cycle Zift Case Rate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4015	Complete Ivf Cycle Case Rate Nos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
S4016	Frozen Ivf Cycle Case Rate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4017	Incpl Cycl Tx Canceld Prior To Stim	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4018	Frzn Emb Trans Cancl Case Rate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4020	Ivf Proc Cancl Befr Aspir Case Rate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4021	Ivf Proc Cancl Aftr Aspir Case Rate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4022	Assist Oocyte Fertiliz Case Rate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4023	Donor Egg Cycle Incpl Case Rate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4025	Donor Srvc In Vitro Fertilization	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4026	Procurement Donr Sperm Sperm Bank	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4027	Storage Previously Frozen Embryos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4028	Micsurg Epididymal Sperm Aspir	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4030	Sperm Procurement&cryopres; 1 Visit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4031	Sperm Procure&cryopres; Subsqst Vst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4035	Stim Intrauterine Insemin Case Rate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4037	Cryopreservd Embryo Trnsf Case Rate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4040	Mon & Stor Cryopresrv Embryos 30 Da	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4042	Mgmt Ovulation Induction Per Cycle	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4981	Insrt Levonorgestrel Intrautrnr Sys	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4990	Nicotine Patches Legend	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4991	Nicotine Patches Non-legend	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4993	Contraceptive Pills Birth Control	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S4995	Smoking Cessation Gum	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5000	Prescription Drug Generic	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5001	Prescription Drug Brand Name	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5010	5% Dxtros & 0.45% NI Saline 1000 MI	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5012	5% Dxtros W/k+ Chlorid 1000 MI	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5013	5% Dxtros/45% N/s Kci&mgso4 1000 MI	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5014	5% Dxtros/45% N/s Kci&mgso4 1500 MI	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5100	Day Care Services Adult; Per 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5101	Day Care Srvc Adult; Per Half Day	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5102	Day Care Services Adult; Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5108	Hom Care Trn Hom Care Client 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.



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Code	Description	Edit Type	Comment
S5109	Home Care Trn Home Care Client Sess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5110	Home Care Training Fam; Per 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5111	Home Care Training Fam; Per Session	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5115	Home Care Trn Non-fam; Per 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5116	Home Care Trn Non-fam; Per Session	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5120	Chore Services; Per 15 Minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5121	Chore Services; Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5125	Attendant Care Services; Per 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5126	Attendant Care Services; Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5130	Homemaker Service Nos; Per 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5131	Homemaker Service Nos; Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5135	Companion Care Adult; Per 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5136	Companion Care Adult ; Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5140	Foster Care Adult; Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5141	Foster Care Adult; Per Month	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5145	Foster Care Therapeutic Child; Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5146	Foster Care Therapeutic Chld; Month	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5150	Unskld Respite Care Not Hospice; 15	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5151	Unskld Respite Care Not Hospice;per	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5160	Emerg Response System; Instl&tst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5161	Emerg Response Sys; Srvc Fee-month	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5162	Emerg Response Sys; Purchase Only	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5165	Home Modifications; Per Service	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5170	Home Del Meals Incl Prep; Meal	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5175	Laundry Service Ext Prof; Order	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5185	Med Remindr Srvc Non-fce-to-fce; Mo	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5190	Wellness Assess Prfrm Non-physician	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5199	Personal Care Item Nos Each	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5550	Insulin Rapid Onset; 5 Units	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5551	Insulin Most Rapid Onset; 5 Units	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5552	Insulin Intermed Acting; 5 Units	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5553	Insulin Long Acting; 5 Units	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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S5560	Insulin Devc Reusable Pen;1.5 MI Sz	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5561	Insulin Devc Reusable Pen; 3 MI Sz	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5565	Insulin Cartridge Not Pump; 150 U	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5566	Insulin Cartridge Not Pump; 300 U	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5570	Insulin Disposable Pen; 1.5 MI Sz	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S5571	Insulin Disposable Pen; 3 MI Sz	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8030	Scleral Application Tantalum Ring	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8035	Magnetic Source Imaging	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8037	Mr Cholangiopancreatography	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8040	Topographic Brain Mapping	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8042	Magnetic Resonance Imag Low-field	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8055	Us Guid Mxifetl Pg Rduc Tech Cmpnt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8080	Scintimammo Uni W/spl Radiopharm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8085	F-18 Fdg Imag 2-hd Coincenc Detct	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8092	Electron Beam Computed Tomography	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8096	Portable Peak Flow Meter	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8097	Asthma Kit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8100	Hold Chamb W/inhal/nebulizr;no Mask	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8101	Hold Chamb W/inhal/nebulizr; W/mask	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8110	Peak Expiratory Flow Rate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8120	O2 Cntn Gaseous 1 U = 1 Cubic Foot	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8121	O2 Contents Lqd 1 U Equals 1 Pound	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8130	Interferential stim 2 chan	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8131	Interferential stim 4 chan	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8185	Flutter Device	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8186	Swivel Adaptor	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8189	Tracheostomy Supply Noc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8210	Mucus Trap	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8265	Haberman Feeder Cleft Lip/palate	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8270	Enuresis Alarm Buzz&vibration Devc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8301	Infection Control Supplies Nos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8415	Supplies Home Delivery Of Infant	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
S8420	Gradient Press Aid Sleeve&glove Cstm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8421	Gradient Press Aid Slv&glov Rdy Made	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8422	Gradient Press Aid Sleeve Cstm Med Wt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8423	Gradient Press Aid Sleeve Cstm Hvy Wt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8424	Gradient Press Aid Sleeve Ready Made	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8425	Gradient Press Aid Glove Cstm Med Wt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8426	Gradient Press Aid Glove Cstm Hvy Wt	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8427	Gradient Press Aid Glove Ready Made	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8428	Gradient Press Aid Gauntlet Rdy Made	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8429	Gradient Pressure Exterior Wrap	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8430	Padding Compression Bandage Roll	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8431	Compression Bandage Roll	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8450	Splint Prefabricated Digit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8451	Splint Prefabricated Wrist Or Ankle	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8452	Splint Prefabricated Elbow	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8460	Camisole Post-mastectomy	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8490	Insulin Syringes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8930	Auricular electrostimulation	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8940	Equestrian/hippotherapy Per Session	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8948	Applic Modal 1/more Areas; Lw-level	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8950	Complex Lymphedema Tx Ea 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8990	Phys/manip Tx Maint Not Restoration	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S8999	Resuscitation Bag	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9001	Home Uterin Mon W/wo Assoc Nrs Srvc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9007	Ultrafiltration Monitor	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9024	Paranasal Sinus Ultrasound	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9025	Omnicrodiogram/cardiointegram	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9034	Eswl For Gall Stones	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9055	Procuren/oth Growth Factor Prep	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9056	Coma Stimulation Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9083	Global Fee Urgent Care Centers	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9088	Services Prov An Urgent Care Center	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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S9090	Vert Axial Decomprs Per Session	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9117	Back School Per Visit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9125	Respite Care In The Home Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9140	Dm Mgmt Progm F/u Vst Non-md Prov	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9141	Diab Mgmt Progm F/u Visit Md Prov	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9145	Insulin Pump Init Instruct Use Pump	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9150	Evaluation By Occularist	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9335	Hom Tx Hd; Admin Spl & Eqp Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9401	Anticoagulat Clin No Lab Per Sess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9430	Pharm Compounding & Dispensing Serv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9433	Medical Food Nutritionally Complete, Administered	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9434	Mod Solid Food Sup Inborn Err Metab	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9435	Medical Foods Inborn Errors Metab	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9436	Chldbrth Prep/lamaze Class Per Sess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9437	Childbirth Refresh Class Per Sess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9438	Cesarean Brth Class Non-md Per Sess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9439	Vbac Classes Non-md Per Session	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9441	Asthma Ed Non-md Prov Per Session	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9442	Birthing Classes Non-phys Prov-sess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9443	Lactation Class Non-phys Prov-sess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9444	Parenting Classes Non-md Per Sess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9445	Pt Ed Noc Non-md Prov Ind Session	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9446	Pt Ed Noc Non-md Prov Group Session	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9447	Infant Safety Class Non-md Per Sess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9449	Weight Mgmt Class Non-phys Per Sess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9451	Exercise Classes Non-phys Per Sess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9452	Nutrition Classes Non-phys Per Sess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9453	Smoking Cessation Class Non-md Sess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9454	Stress Mgmt Class Non-phys Per Sess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9455	Diabetic Mgmt Progm Group Session	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9460	Diabetic Mgmt Progm Nurse Visit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9465	Diabetic Mgmt Progm Dietitian Visit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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Code	Description	Edit Type	Comment
S9470	Nutritional Cnsl Dietitian Visit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9472	Card Rehab Progm Non-phys Prov Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9473	Pulm Rehab Progm Non-phys Prov Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9475	Amb Set Sbstnc Abs Tx/dtox Srvc Day	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9476	Vestibulr Rehab Non-phys Prov-diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9480	Intensive Op Psyc Services Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9482	Family Stabilizatn Srvc Per 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9484	Crisis Interven Mentl Hlth Srvc-hr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9485	Crisis Intervent Mental Health Serv	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9529	Routine veinpuncture for collection of specimen(s)	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9810	Home Therapy; Noc Per Hour	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9900	Srvc Auth Christian Sc Pract Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9901	Christian sci nurse visit	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9960	Air ambulanc nonemerg fixed	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9961	Air ambulanc nonemerg rotary	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9970	Health Club Membership Annual	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9975	Tplnt Rel Lodg Meals & Trnsprt Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9976	Lodging Per Diem Nos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9977	Meals Per Diem Nos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9981	Medical Records Copying Fee Admin	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9982	Medical Records Copying Fee-page	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9986	Not Medically Necessary Service	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9988	Serv Part Of Phase 1 Clinical Trial	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9989	Services Provided Outside Usa	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9990	Srvc Prov Part Phase Ii Clin Trial	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9991	Srvc Prov Part Phase Iii Clin Trial	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9992	Trnsprt Costs Clin Trial Prtcp&comp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9994	Lodg Cost Clin Trial Prtcp&caregvr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
S9996	Meals Clin Trial Prtcp&one Caregivr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1000	Priv Duty/independent Nrs To 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1001	Nursing Assessment/evaluation	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1002	Rn Services Up To 15 Minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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T1003	Lpn/lvn Services Up To 15 Minutes	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1004	Srvc Qualified Nrs Aide To 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1005	Srvc Qual Nursing Aide Up To 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1006	Alcohol&/substnc Abs Fam/couple Cnsl	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1007	Alcohol&/substance Abuse Services	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1009	Child Sit Ind Alc&/substnc Abs Srvc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1010	Meals Rec Alcohol&/substnc Abs Srvc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1012	Alcohol&/substnc Abs Srvc Skl Dvlp	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1013	Sign Lange/oral Intepr Srvc-15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1014	Telehealth Trans Min Prof Srvc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1015	Clinic Vst/encounter All-inclusive	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1016	Case Management Each 15 Mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1017	Targeted Case Management Ea 15 Mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1018	School-basd Ind Ed Prog Serv Bundld	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1019	Personal Care Services Per 15 Mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1020	Personal Care Services Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1021	Home Hlth Aide/cert Nurse Asst Vst	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1022	Contract Home Health Agcy Srvc Day	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1023	Scr Ind Particip Spec Prog Proj/tx	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1024	Eval&tx Team Mx/sev Handicap Child	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1025	Mxdisciplin Child Cmplx Impair Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1026	Mxdisciplin Child W/cmplx Impair Hr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1027	Fam Train & Cnsl Child Dvlp 15 Mins	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1028	Assess Home Physical & Family Envir	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1029	Comp Envir Lead Investigat-dwell	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1030	Nrs Care Home Registered Nurse-diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1031	Nursing Care The Home Lpn Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1032	Sv doula brth wrk per 15 min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1033	Sv doula brth wrk per diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1040	Comm bh clinic svc per diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1041	Comm bh clinic svc per month	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1502	Admn Orl Im&/subq Med Hlth Prof	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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T1503	Med Admin Other Than Oral	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1505	Elec med comp dev, noc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T1999	Misc Tx Items&supplies Retail Noc	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2001	N-emerg Trnsprt; Pt Attendnt/escort	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2002	Non-emerg Transportation; Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2003	Non-emerg Trnsprt; Encounter/trip	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2004	N-emerg Trnsprt;commer Carr Mx-pass	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2005	Nonemergency Trnsprt; Stretcher Van	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2007	Trnsprt Wait Time Non-er Veh 1/2 Hr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2010	Pasrr Level I Id Screen Per Screen	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2011	Pasrr Level ii Evaluation Per Eval	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2012	Habilitation Ed Waiver; Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2013	Habilitation Ed Waiver; Hour	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2014	Habilitatn Prevocationl Waivr;diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2015	Habilitation Prevocational Waivr;hr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2016	Habilitation Res Waiver; Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2017	Habilitation Res Waiver; Per 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2018	Habilitatn Supp Emplmnt Waivr;diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2019	Habilitatn Supp Emplmnt Waivr;15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2020	Day Habilitation Waiver; Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2021	Day Habilitation Waiver; Per 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2022	Case Management; Per Month	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2023	Targeted Case Management; Per Month	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2024	Srvc Assess/plan Care Dvlp Waiver	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2025	Waiver Services; Nos	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2026	Splclized Childcare Waiver; Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2027	Splclized Childcare Waiver; 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2028	Specialized Supply Nos Waiver	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2029	Specialized Medical Eqp Nos Waiver	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2030	Assisted Living Waiver; Per Month	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2031	Assisted Living Waiver; Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2032	Res Care Nos Waiver; Per Month	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.

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T2033	Res Care Nos Waiver; Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2034	Crisis Interven Waiver; Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2035	Utility Services Med Eqp Waiver	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2036	Tx Camping Ovrngt Waiver; Ea Sess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2037	Tx Camping Da Waiver; Ea Sess	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2038	Cmty Transition Waiver; Per Service	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2039	Vehicle Mod Waiver; Per Service	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2040	Financial Mgmt Waiver; 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2041	Supp Broker Slf-dired Waivr; 15 Min	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2042	Hospice Routine Home Care Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2043	Hospice Continuous Home Care Per Hr	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2044	Hospice Inpat Respite Care Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2045	Hospice General Inpat Care Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2046	Hospice Lt Care Rm And Bd Per Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2047	Hab prevo waiver per 15	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2048	Bhval Hlth; Ltc Res W/room&bd-diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2049	Non-emerg Trnsprt; Van Mileage;mile	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2050	Financial Mgt Waiver/Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2051	Support Broker Waiver/Diem	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T2101	Humn Brst Milk Prc Stor&dstrb Only	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4521	Adlt Sz Dispbl Incont Brf/diaper Sm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4522	Adlt Sz Dispbl Incont Brf/diaper Md	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4523	Adlt Sz Dispbl Incont Brf/diaper Lg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4524	Adlt Dispbl Incont Brf/diaper X-lg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4525	Adlt Szd Dispbl Incont Undwear Sm	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4526	Adlt Szd Dispbl Incont Undwear Med	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4527	Adlt Szd Dispbl Incont Undwear Lg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4528	Adlt Szd Dispbl Incont Undwear X-lg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4529	Ped Sz Dispbl Incont Brf/diaper S/m	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4530	Ped Sz Dispbl Incont Brf/diaper Lg	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4531	Ped Sz Dispbl Incont Undwear Sm/med	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4532	Ped Sz Dispbl Incont Undwear Lg Ea	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.



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T4533	Youth Szd Dispbl Incont Brf/diaper	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4534	Youth Szd Dispbl Incont Undwear Ea	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4535	Dispbl Liner/pad/undgrmnt Incont Ea	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4536	Incont Prod Undwear/pullon Reuse Sz	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4537	Incont Prod Undpad Reusbl Bed Sz Ea	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4538	Diaper Srvc Reusbl Diaper Ea Diaper	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4539	Incont Prod Diaper/brf Reusbl Sz Ea	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4540	Incont Prod Undpad Reusbl Chair Sz	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4541	Incont Product Dispbl Undpad Lg Ea	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4542	Incont Prod Dispbl Undpad Sm Sz Ea	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4543	Disp Bariatric Brief/diaper	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4544	Adlt disp und/pull on abv xl	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T4545	Incon disposable penile wrap	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T5001	Pstn Seat Pers W/spcl Orthoped Need	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
T5999	Supply, Not Otherwise Specified	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
V2525	Cl, Hydrophilic, Dual Focus	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
V5362	Speech Screening	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.
V5363	Language Screening	Non-Reimbursable Services	Not considered a payable service and/or reimbursed separately.