

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

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

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

Code	Description	Edit Type
0306U	Onc Mrd Nxt-Gnrj Alys 1St	Investigational Denial
0307U	Onc Mrd Nxt-Gnrj Alys Sbsq	Investigational Denial
0308U	Crđ Cad Alys 3 Prtn Plsm Alg	Investigational Denial
0309U	Crđ Cv Ds Aly 4 Prtn Plm Alg	Investigational Denial
0310U	Ped Vscrls Kđ Alys 3 Bmrks	Investigational Denial
0312U	Ai Ds Sle Alys 8 Igg Autoant	Investigational Denial
0313U	Onc Pncrs Dna&Mrna Seq 74	Investigational Denial
0314U	Onc Cutan Mlnma Mrna 35 Gene	Investigational Denial
0315U	Onc Cutan Sq Cll Ca Mrna 40	Investigational Denial
0316U	U B Brgđrferi Lyme Ds Ospa Evl	Investigational Denial
0317U	Onc Lung Ca 4-Prb Fish Assay	Investigational Denial
0319U	Neph Rna Pretrnspl Perph Bld	Investigational Denial
0320U	Neph Rna Psttrnspl Perph Bld	Investigational Denial
0322U	Neuro Asđ Meas 14 Acyl Carn	Investigational Denial
43770	Lap, Place Gastr Adjust Band	Investigational Denial
A2011	Supra Sdrm, Per Sq Cm	Investigational Denial
A2012	Suprathel, Per Sq Cm	Investigational Denial
A2013	Innovamatrix Fs, Per Sq Cm	Investigational Denial
C9781	Arthro/Shoul Surg; W/Spacer	Investigational Denial
H2038	Skill Train And Dev/Diem	Non-Reimbursable Services
K1028	Control Unit Neuromuscul Osa	Investigational Denial
K1029	Oral Dv/App Neuromus Mouthpi	Investigational Denial
K1030	Ext Recharge Bat Replacement	Investigational Denial
Q4224	Hhf10-P Per Sq Cm	Investigational Denial
Q4225	Amniobind, Per Sq Cm	Investigational Denial
Q4256	Mlg Complet, Per Sq Cm	Investigational Denial
Q4257	Relese, Per Sq Cm	Investigational Denial
Q4258	Enverse, Per Sq Cm	Investigational Denial
T2050	Financial Mgt Waiver/Diem	Non-Reimbursable Services

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Code	Description	Edit Type
T2051	Support Broker Waiver/Diem	Non-Reimbursable Services