

**Clinical Edits by Code List**  
**Non-Reimbursable Services Edit Removal List**  
**Applies to Medicare Advantage**

Code	Description	Edit Type
J1094	Injection Dexamethasone Actat 1 Mg	Non-Reimbursable Services
J1810	Inj Dropridl&fentnyl Citrat To 2ml	Non-Reimbursable Services
J1890	Inj Cephalothin Sodium To 1 Gm	Non-Reimbursable Services
S0017	Injection Aminocaproic Acid 5 Grams	Non-Reimbursable Services
S0028	Injection Famotidine 20 Mg	Non-Reimbursable Services
S0032	Injection Nafcillin Sodium 2 Grams	Non-Reimbursable Services
S0039	Inj Sulfmethoxazl&trimethoprm 10 Ml	Non-Reimbursable Services