

Medical Overview by Prior Authorization Approval or Denial 1st Quarter 2023

| LOB | Specialty | Procedure | Diagnosis | Determination | Reason For Denial |
|-----|-------------------|---------------------|-----------------------|---------------|-------------------|
| ABC | Dentistry | ,00170 | Dental caries | Approved | |
| ABC | Dentistry | ,00170 | Dental Caries | Approved | |
| ABC | Dentistry | ,00170 | Dental Caries | Approved | |
| ABC | Dentistry | 00170, 41899 | Dental caries | Approved | |
| ABC | General Surgery | 43644 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43644 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43644 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43644 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43644 | Morbid Obesity | Denied | CMD |
| ABC | General Surgery | 43644 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43644 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43644 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43775 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43775 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43775 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43775 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43775 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43775 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43775 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43775 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43775 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43775 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43775 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43775 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43845 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43845 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43845 | Morbid Obesity | Approved | |
| ABC | DME Provider | E0483 | Chronic lung disease | Approved | |
| ABC | DME Provider | L5856, L5987 | R AKA | Approved | |
| ABC | Infusion Therapy | B4087, B4088 | Dysphagia | Approved | |
| ABC | Internal Medicine | B4152, B4088, S9343 | Hypopharyngeal cancer | Approved | |

| LOB | Specialty | Procedure | Diagnosis | Determination | Reason For Denial |
|-----|----------------------------|-----------------------------------|------------------------------|---------------|-------------------|
| ABC | Infusion Therapy | B4036, B4152, B4155, S9342 | Squamous Cell CA of mandible | Approved | |
| ABC | Infusion Therapy | B4152, B4036 | Dysphagia | Approved | |
| ABC | Infusion Therapy | B4160, B4035, B4088, B4087, S9342 | Dysphagia | Denied | BC/CP |
| ABC | DME Provider | B4162 | PKU | Approved | |
| ABC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Dx testing | Infertility | Denied | Benefit Exclusion |
| ABC | Reproductive Endocrinology | Dx Testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Infertility testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IUI | Infertility | Denied | CMD |
| ABC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IVF | Infertility | Denied | CMD |
| ABC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IVF | Infertility | Denied | CMD |
| ABC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IVF/PGT | Infertility | Approved | |
| ABC | Reproductive Endocrinology | OI timed | Infertility | Approved | |
| ABC | Reproductive Endocrinology | SA | Infertility | Approved | |
| ABC | Reproductive Endocrinology | 89322 | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Testing/PGT | Infertility | Approved | |
| ABC | Urology | 54520 | Gender Dysphoria | Denied | CMD |
| ABC | Breast Surgical Oncologist | 19318 | Hypertrophy Of Breast | Approved | |

| LOB | Specialty | Procedure | Diagnosis | Determination | Reason For Denial |
|-----|------------------------------------|-----------|--|---------------|-------------------|
| ABC | Plastic & Reconstructive Surgery | 19318 | Hypertrophy of Breast | Approved | |
| ABC | Plastic and Reconstructive Surgery | 19318 | Macromastia | Approved | |
| ABC | Plastic and Reconstructive Surgery | 19318 | Macromastia | Approved | |
| ABC | Plastic Surgery | 19318 | Hypertrophy of breasts | Denied | CMD |
| ABC | Rheumatology | J0129 | RA | Approved | |
| ABC | Hematology Oncology | J0223 | Acute intermittent (hepatic) porphyria | Approved | |
| ABC | Internal Medicine | J0223 | hepatic porphyria | Approved | |
| ABC | Rheumatology | J0490 | SLE | Approved | |
| ABC | Rheumatology | J0490 | SLE | Approved | |
| ABC | Rheumatology | J0490 | SLE | Approved | |
| ABC | Anesthesiology | J0585 | Chronic Migraines | Denied | CMD |
| ABC | Family Practice | J0585 | Pyriiformis syndrome | Denied | CMD |
| ABC | General Surgery | J0585 | Anal fissure | Approved | |
| ABC | Neurology | J0585 | Chronic Migraines | Denied | CMD |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Neurology | J0585 | Migraines | Denied | CMD |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Neurology | J0585 | Migraines | Approved | |
| ABC | Nurse Practitioner | J0585 | Chronic Migraines | Approved | |
| ABC | Physiatrist | J0585 | RUE Spasticity | Approved | |
| ABC | Urology | J0585 | OAB | Approved | |
| ABC | Urology | J0585 | OAB | Approved | |
| ABC | Nurse Practitioner | J0741 | HIV | Approved | |
| ABC | Rheumatology | J1602 | RA | Approved | |
| ABC | Gastroenterology | J1745 | Crohn's Disease | Approved | |
| ABC | Gastroenterology | J1745 | Crohn's Disease | Approved | |
| ABC | Gastroenterology | J1745 | UC | Approved | |
| ABC | Infusion therapy | J1745 | UC | Approved | |
| ABC | Pediatric Medicine | J1745 | Crohn's Disease | Denied | CMD |
| ABC | Gastroenterology | J2327 | Crohn's Disease | Approved | |
| ABC | Infusion Therapy | J3032 | Migraines | Approved | |
| ABC | Rheumatology | J3241 | Thyrotoxicosis | Approved | |
| ABC | Gastroenterology | J3358 | Crohn's Disease | Approved | |
| ABC | Gastroenterology | J3358 | Crohn's disease | Approved | |

| LOB | Specialty | Procedure | Diagnosis | Determination | Reason For Denial |
|-----|---------------------|--|------------------------|---------------|-------------------|
| ABC | Infusion Therapy | J3358 | Crohns | Approved | |
| ABC | Gastroenterology | J3380 | Crohns/UC | Approved | |
| ABC | Gastroenterology | J3380 | ulcerative colitis | Approved | |
| ABC | Gastroenterology | J3380 | Crohn's Disease | Approved | |
| ABC | Gastroenterology | J3380 | Crohn's Disease | Approved | |
| ABC | Gastroenterology | J3380 | Crohn's disease | Approved | |
| ABC | Health Clinic | J3380 | Crohns | Approved | |
| ABC | Neurology | J9332 | Myasthenia Gravis | Denied | CMD |
| ABC | Gastroenterology | Q5103 | Crohn's Disease | Approved | |
| ABC | Cardiology | Q5115 | Heart transplant | Approved | |
| ABC | Gastroenterology | Q5121 | Crohn's Disease | Approved | |
| ABC | Internal Medicine | Q5121 | Crohn's disease | Approved | |
| ABC | Rheumatology | Q5121 | Ankylosing spondylitis | Approved | |
| ABC | Rheumatology | Q5121 | RA | Approved | |
| ABC | Internal Medicine | J0491 | Lupus | Denied | CMD |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Neurology | J9312 | RRMS | Approved | |
| ABC | Rheumatology | J0129 | PsA | Approved | |
| ABC | Pain Management | J0585 | Chronic Migraines | Approved | |
| ABC | Hematology/Oncology | J1602 | Ankylosing spondylitis | Approved | |
| ABC | Dentistry | ,0017 | Dental Caries | Approved | |
| ABC | General Surgery | 43644 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43644 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43644 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43775 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43775 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43775 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43775 | Morbid Obesity | Denied | CMD |
| ABC | General Surgery | 43775 | Morbid Obesity | Approved | |
| ABC | Oral Surgeon | 41899 | Cleft soft palate | Approved | |
| ABC | Infusion Therapy | B4149, B4155, B4035, B9998, B4088 | Dysphagia | Approved | |
| ABC | DME provider | B4035, B9002, E0776, B9998 (ext set) and B4088 | Dysphagia | Approved | |
| ABC | DME Provider | B4149, S9343, B4034, B4087, B4088, B9888 | Dysphagia | Approved | |

| LOB | Specialty | Procedure | Diagnosis | Determination | Reason For Denial |
|-----|----------------------------|--|----------------------|---------------|-------------------|
| ABC | Infusion | B4161 (3066 units), B4035 (365 units), B4088 (24 units Mic-Key), B9998 (4 units Mic-Key ext) | Dysphagia | Approved | |
| ABC | | B4161, B4149, B4155, B4035, B9002, B4088, B9998 | Dysphagia | Approved | |
| ABC | DME Provider | B4088, B9998 | Dysphagia | Approved | |
| ABC | General Surgery | 54125, 54520, 15240 | Gender Dysphoria | Approved | |
| ABC | Obstetrics/Gynecology | Infertility Testing | Infertility | Approved | |
| ABC | Obstetrics/Gynecology | IUI | Infertility | Denied | CMD |
| ABC | Reproductive Endocrinology | 76830 | Infertility | Approved | |
| ABC | Reproductive Endocrinology | 89322 | Infertility - male | Approved | |
| ABC | Reproductive Endocrinology | 89320, 89261 | Infertility | Approved | |
| ABC | Reproductive Endocrinology | 99212, 76857, 84144, 82670 | Infertility | Denied | CMD |
| ABC | Reproductive Endocrinology | Dx testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Dx testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Denied | BC |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Infertility Testing | Infertility | Denied | CMD |
| ABC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IUIH | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IVF | Infertility | Denied | BC/CP |
| ABC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IVF with PGT | Infertility | Denied | CMD |
| ABC | Reproductive Endocrinology | IVF/PGT | Infertility | Denied | CMD |
| ABC | Reproductive Endocrinology | 89322 | Infertility | Approved | |
| ABC | Obstetrics/Gynecology | 64595 | Urinary Incontinence | Approved | |
| ABC | Oral Surgery | 21089, 00170 | congenital anomaly | Approved | |
| ABC | General Surgery | 19318 | Macromastia | Approved | |

| LOB | Specialty | Procedure | Diagnosis | Determination | Reason For Denial |
|-----|------------------------------------|--------------|--|---------------|-------------------|
| ABC | Plastic and Reconstructive Surgery | 19318 | Hypertrophy of Breast | Approved | |
| ABC | Plastic and Reconstructive Surgery | 19318 | Macromastia | Approved | |
| ABC | Anesthesiology | J0585 | Chronic Migraines | Approved | |
| ABC | Family Practice | S0189, 11980 | Testicular hypofunction | Denied | CMD |
| ABC | Gastroenterology | J1745 | Crohns | Approved | |
| ABC | Gastroenterology | J1745 | UC | Approved | |
| ABC | Gastroenterology | J3380 | Microscopic colitis | Approved | |
| ABC | Hematology Oncology | J1745 | Crohn's Dx | Approved | |
| ABC | Hematology Oncology | J3032 | Chronic Migraines | Approved | |
| ABC | Hospital | J9312 | Non-hodgkin's Lymphoma | Denied | CMD |
| ABC | Infusion Provider | J9332 | Myasthenia gravis without (acute) exacerbation | Approved | |
| ABC | Infusion Provider | Q5104 | Crohns | Approved | |
| ABC | Infusion therapy | J0129 | Pompe disease | Approved | |
| ABC | Infusions | J3380 | Chrons dx | Approved | |
| ABC | Internal Medicine | J3357 | Psoriatic arthritis | Approved | |
| ABC | Neurology | J0585 | Chronic Migraines | Denied | CMD |
| ABC | Neurology | J0585 | Cerebral palsy with RUE spasticity | Approved | |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Neurology | J0585, 64615 | Chronic Migraines | Approved | |
| ABC | Neurology | J0588 | Meige Syndrome | Approved | |
| ABC | Neurology | J2323 | MS | Approved | |
| ABC | Neurology | J2323 | Multiple Sclerosis | Approved | |
| ABC | Neurosurgery | J0585 | Chronic Migraines | Approved | |
| ABC | Nurse Practioner | J0585 | Migraines | Denied | CMD |
| ABC | Nurse Practioner | J1306 | CAD | Denied | CMD |
| ABC | Nurse Practitioner | J0585 | Chronic Migraines | Approved | |
| ABC | Ophthalmology | J0585 | cervical dystonia, blepharospasm | Approved | |
| ABC | Ophthalmology | J0585 | Blepharospasms | Approved | |
| ABC | Ophthalmology | J0585 | Chronic Migraines | Approved | |
| ABC | Pediatric Medicine | Q5119 | Nephrotic Syndrome | Approved | |
| ABC | Pediatric Neurology | J0586 | | Approved | |
| ABC | Primaty Care | J0739 | HIV Prevention | Approved | |
| ABC | Rheumatology | J1602 | AS | Approved | |
| ABC | Rheumatology | J1602 | RA | Approved | |
| ABC | Rheumatology | J2323 | MS | Approved | |

| LOB | Specialty | Procedure | Diagnosis | Determination | Reason For Denial |
|-----|------------------------------------|------------------------|-------------------------|---------------|-------------------|
| ABC | Rheumatology | J3111 | Osteoporosis | Denied | CMD |
| ABC | Rheumatology | J9312 | RA | Approved | |
| ABC | Rheumatology | J9312 | Wegeners Granulomatosis | Approved | |
| ABC | Rheumatology | J9312 | SLE | Approved | |
| ABC | Rheumatology | Q5103 | RA | Approved | |
| ABC | Rheumatology | Q5104 | Crohns | Approved | |
| ABC | Rheumatology | Q5121 | RA | Approved | |
| ABC | Gastroenterology | J3380 | crohns | Approved | |
| ABC | Neurology | J0332 | Migraines | Approved | |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Pain Management | J0585 | Chronic Migraines | Approved | |
| ABC | Rheumatology | J9312 | Wegeners Granulomatosis | Approved | |
| ABC | Rheumatology | Q5115 | RA | Approved | |
| ABC | Reproductive Endocrinology | 89322 | Infertility | Approved | |
| ABC | Dentistry | 00170, 41899 | Dental caries | Approved | |
| ABC | General Surgery | 43644 | Morbid Obesity | Approved | |
| ABC | General Surgery | 43644 | Morbid Obesity | Approved | |
| ABC | Ophthalmology | 15823 | blepharitis/ptosis | Approved | |
| ABC | DME provider | E0748 | Arthodesis | Denied | CMD |
| ABC | Plastic and Reconstructive Surgery | 19303, 19350 | Gender Dysphoria | Denied | CMD |
| ABC | Obstetrics and Gynecology | 58662 | Infertility | Approved | |
| ABC | Nurse Practitioner | 76830 | Infertility | Approved | |
| ABC | Obstetrics and Gynecology | dx testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Dx testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Dx testing/IUI | Infertility | Denied | CMD |
| ABC | Reproductive Endocrinology | Fertility preservation | AML | Denied | CMD |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Reproductive Endocrinology | FET | Infertility | Approved | |
| ABC | Nurse Practitioner | Infertility Testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |

| LOB | Specialty | Procedure | Diagnosis | Determination | Reason For Denial |
|-----|------------------------------------|--|-------------------------|---------------|-------------------|
| ABC | Reproductive Endocrinology | Infertility Testing | 89320, 89261 | Approved | |
| ABC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IUI | infertility | Approved | |
| ABC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IUIH | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IVF | Infertility | Denied | CMD |
| ABC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| ABC | Reproductive Endocrinology | IVF | Infertility | Denied | CMD |
| ABC | Reproductive Endocrinology | IVF | Infertility | Denied | CMD |
| ABC | Reproductive Endocrinology | OI | Infertility | Approved | |
| ABC | Reproductive Endocrinology | SA | Infertility | Approved | |
| ABC | Hospital | J9306, Q5117 | Breast CA | Approved | |
| ABC | Oral Surgery | 21089 | squamous cell carcinoma | Approved | |
| ABC | Oral Surgeon | 21249, 21215, 21210, 21085, 21089, 00170 | Congenital Anomaly | Approved | |
| ABC | Plastic and Reconstructive Surgery | 19318 | Breast Hypertrophy | Approved | |
| ABC | Anesthesiology | J0585 | Chronic Migraines | Approved | |
| ABC | Colorectal Surgery | J0585 | anal fissure | Approved | |
| ABC | Dermatology | J0585 | hyperhidrosis | Approved | |
| ABC | Dermatology | J0585 | hyperhidrosis | Approved | |
| ABC | Family Practice | J0585 | Chronic Migraines | Denied | CMD |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |

| LOB | Specialty | Procedure | Diagnosis | Determination | Reason For Denial |
|-----|--------------------|-----------|------------------------|---------------|-------------------|
| ABC | Neurology | J0585 | Chronic Migraines | Denied | CMD |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Neurology | J0585 | chronic Migraines | Approved | |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Neurology | J0585 | Chronic Migraines | Approved | |
| ABC | Nurse Practitioner | J0585 | Spastic hemiplegic CP | Approved | |
| ABC | Nurse Practitioner | J0585 | Chronic Migraines | Approved | |
| ABC | Nurse Practitioner | J0585 | Chronic Migraines | Approved | |
| ABC | Ophthalmology | J0585 | blepharospasm | Approved | |
| ABC | Pain Management | j0585 | spasticity | Approved | |
| ABC | Physiatry | J0585 | Chronic Migraines | Approved | |
| ABC | Neurology | J0588 | blepharospasm | Approved | |
| ABC | Rheumatology | J1602 | RA | Approved | |
| ABC | Gastroenterology | J1745 | Crohns dx | Approved | |
| ABC | Gastroenterology | J1745 | Ulcerative Colitis | Approved | |
| ABC | Gastroenterology | J2327 | Crohns dx | Approved | |
| ABC | Gastroenterology | J2327 | Crohns dx | Approved | |
| ABC | Infusion site | J2327 | Chron's dz | Approved | |
| ABC | Infusions | J2327 | Crohns dx | Approved | |
| ABC | Neurology | J3032 | Migraines | Approved | |
| ABC | Gastroenterology | J3358 | Crohns dx | Approved | |
| ABC | Infusions | J3358 | Crohns dx | Approved | |
| ABC | Gastroenterology | J3380 | Ulcerative Colitis | Denied | CMD |
| ABC | Gastroenterology | J3380 | Ulcerative Colitis | Approved | |
| ABC | Gastroenterology | J3380 | Crohns dx | Approved | |
| ABC | Infusion | J3380 | Chrohns dx | Approved | |
| ABC | Rheumatology | J9312 | WPA | Approved | |
| ABC | Infusion Therapy | J9332 | Myasthenia Gravis | Approved | |
| ABC | Rheumatology | Q5104 | RA | Approved | |
| ABC | Rheumatology | Q5121 | Sarciodosis | Approved | |
| ABC | Rheumatology | J1745 | arthropathic psoriasis | Approved | |
| ABC | Pulmonology | J9312 | MTCD | Approved | |
| ABC | Dermatology | J0585 | Hyperhidrosis | Denied | CMD |

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|-----|----------------------------|----------------------|--|---------------|-------------------|
| EXC | DME Provider | E0483 | Bronchiectasis | Approved | |
| EXC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| EXC | Obstetrics and Gynecology | 58345, 58340 | Infertility | Denied | CMD |
| EXC | Reproductive Endocrinology | 89320, 89261 | Infertility | Approved | |
| EXC | Reproductive Endocrinology | Dx testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | Dx testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | FET | Infertility | Approved | |
| EXC | Reproductive Endocrinology | FET | Infertility | Approved | |
| EXC | Reproductive Endocrinology | FET | Infertility | Approved | |
| EXC | Reproductive Endocrinology | FET | Infertility | Approved | |
| EXC | Obstetrics and Gynecology | Infertility Services | Encounter Asstd Reproductive Fertility Proc Cycl | Denied | CMD |
| EXC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | Infertility Testing | Infertility Testing | Denied | CMD |
| EXC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | Infertility Testing | Infertility | Denied | CMD |
| EXC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IVF/PGT | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IVF/PGT | Infertility | Approved | |
| EXC | Obstetrics and Gynecology | OI | Infertility | Approved | |
| EXC | Reproductive Endocrinology | OI/testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| EXC | DME Provider | E0466 | COPD, CRF | Approved | |
| EXC | Oral Surgeon | 21089, 00170 | Unspecified fracture of facial bones, sequela | Approved | |
| EXC | Family Practice | J0585 | Chronic Migraines | Approved | |
| EXC | Pain Management | J0585, 64615 | Migraines | Denied | CMD |
| EXC | Ophthalmology | J0588 | Blepharospasam | Approved | |
| EXC | Internal Medicine | J1745 | Crohns dx | Approved | |
| EXC | Neurology | J3032 | Migraines | Approved | |

| LOB | Specialty | Procedure | Diagnosis | Determination | Reason For Denial |
|-----|------------------------------------|---------------------|---|---------------|-------------------|
| EXC | Nurse Practitioner | J3380 | Crohns | Approved | |
| EXC | Cardiology | J1306 | ASCVD | Approved | |
| EXC | Reproductive Endocrinology | PGT testing | Infertility | Approved | |
| EXC | Dentistry | ,00170 | Encounter for dental exam | Approved | |
| EXC | Dentistry | ,00170 | Dental Caries | Approved | |
| EXC | DME Provider | K0823 | RA, chronic pain | Approved | |
| EXC | Plastic and Reconstructive Surgery | 19303 | Gender Dysphoria | Approved | |
| EXC | Plastic and Reconstructive Surgery | 19303, 19350 | Transsexualism | Approved | |
| EXC | Obstetrics/Gynecology | 84144, 99213, 76830 | Infertility | Approved | |
| EXC | Obstetrics/Gynecology | Infertility Testing | Infertility | Approved | |
| EXC | Obstetrics/Gynecology | IVF | Endometriosis Unspecified | Denied | CMD |
| EXC | Reproductive Endocrinology | 58340 | Infertility | Approved | |
| EXC | Reproductive Endocrinology | 89342 | Infertility | Approved | |
| EXC | Reproductive Endocrinology | Dx testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | Dx testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | FET | Infertility | Approved | |
| EXC | Reproductive Endocrinology | FET | Infertility | Approved | |
| EXC | Reproductive Endocrinology | FET | Infertility | Approved | |
| EXC | Reproductive Endocrinology | FET with donor egg | Infertility | Approved | |
| EXC | Reproductive Endocrinology | infertility Testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IUI | Infertility | Denied | CMD |
| EXC | Reproductive Endocrinology | Ivf | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| EXC | Acute Care Hospital | J9312 | Wegeners Granulomatosis | Approved | |
| EXC | Allergy Immunology | J2356 | severe persistant asthma | Approved | |
| EXC | Emergency Medicine | Q5104 | RA | Approved | |
| EXC | Gastroenterology | J3358 | Crohns | Denied | |
| EXC | Gastroenterology | J3358 | Crohns | Approved | |
| EXC | Hospital | J3032 | Migraines | Denied | CMD |
| EXC | Infusions | J2356 | Severe persistent asthma, uncomplicated | Approved | |
| EXC | Nurse Practioner | J2327 | Crohn's Dx | Approved | |

| LOB | Specialty | Procedure | Diagnosis | Determination | Reason For Denial |
|-----|------------------------------------|---------------------|----------------------|---------------|-------------------|
| EXC | Obstetrics/Gynecology | J0585 | Urinary Incontinence | Approved | |
| EXC | Rheumatology | J0491 | SLE | Approved | |
| EXC | Dentistry | 00170, 41899 | Dental caries | Approved | |
| EXC | Plastic and Reconstructive Surgery | 19303 | Gender dysphoria | Approved | |
| EXC | Reproductive Endocrinology | 89322 | Infertility | Approved | |
| EXC | Obstetrics and Gynecology | 58340, 58345, 74740 | Infertility | Approved | |
| EXC | Obstetrics and Gynecology | 58340, 74740 | Infertility | Approved | |
| EXC | Reproductive Endocrinology | FET | Infertility | Approved | |
| EXC | Reproductive Endocrinology | FET | Infertility | Approved | |
| EXC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | Infertility Testing | Infertility | Denied | BC/CP |
| EXC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | Infertility Testing | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IUI | infertility | Approved | |
| EXC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IUI | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IUIH | Infertility | Denied | BC/CP |
| EXC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IVF | Infertility | Approved | |
| EXC | Reproductive Endocrinology | IVF | Infertility | Denied | BC/CP |
| EXC | Reproductive Endocrinology | OI/TI | Infertility | Denied | BC/CP |
| EXC | Reproductive Endocrinology | OI/TI | Infertility | Approved | |

| LOB | Specialty | Procedure | Diagnosis | Determination | Reason For Denial |
|-----|------------------------------------|------------|--|---------------|-------------------|
| EXC | Reproductive Endocrinology | Dx Testing | Infertility | Approved | |
| EXC | Plastic and Reconstructive Surgery | 19318 | Macromastia | Approved | |
| EXC | Hospital | J0222 | - Neuropathic heredofamilial amyloidosis | Approved | |
| EXC | Rheumatology | J0490 | SLE | Denied | BC/CP |
| EXC | Internal Medicine | J0491 | Lupus | Approved | |
| EXC | Pediatric Rehab Medicine | J0585 | Dystonia | Denied | BC/CP |
| EXC | Gastroenterology | J2327 | Chrons disease | Approved | |
| EXC | Neurology | J2350 | MS | Denied | BC/CP |
| EXC | Infusion Therapy | J2356 | Asthma | Approved | |
| EXC | Nurse Practitioner | J2356 | Severe Asthma | Approved | |
| EXC | Dermatology | J3245 | Psoriasis | Denied | CMD |
| EXC | Hospital | J3380 | Crohns dx | Denied | BC/CP |
| EXC | Hematology/Oncology | Q5123 | RA | Approved | |
| EXC | cardiology | J1306 | Hyperlidemia | Approved | |