

## Medical Overview by Prior Authorization Approval or Denial 4th Quarter 2024

LOB	Treatment Type	Place of Service	Primary Diagnosis Code	Diagnosis Description	Review Outcome	Denial Reason
НА	Surgical	Inpatient Facility	177.1	STRICTURE OF ARTERY	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Voided	
НА	Surgical	Inpatient Facility	N94.6	DYSMENORRHEA, UNSPECIFIED	Voided	
НА	Surgical	Inpatient Facility	Z93.3	COLOSTOMY STATUS	Approved	
НА	Surgical	Inpatient Facility	Z96.642	PRESENCE OF LEFT ARTIFICIAL HIP JOINT	Voided	
НА	Surgical	Inpatient Facility	Z47.1	AFTERCARE FOLLOWING JOINT REPLACEMENT SURGERY	Denied	CMD
НА	Surgical	Inpatient Facility	125.10	ATHSCL HEART DIS OF NATIVE COR ART W/O ANG PCTRS	Approved	
НА	Surgical	Inpatient Facility	C49.A0	GASTROINTESTINAL STROMAL TUMOR, UNSPECIFIED SITE	Voided	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Transplant	Inpatient Facility	N18.6	END STAGE RENAL DISEASE	Approved	
НА	Surgical	Inpatient Facility	C34.12	MALIG NEOPLASM OF UPPER LOBE LEFT BRONC OR LUNG	Approved	
НА	Surgical	Inpatient Facility	Z93.3	COLOSTOMY STATUS	Approved	
НА	Surgical	Inpatient Facility	K31.6	FISTULA OF STOMACH AND DUODENUM	Approved	
НА	Surgical	Inpatient Facility	M54.12	RADICULOPATHY, CERVICAL REGION	Approved	
НА	Surgical	Inpatient Facility	M51.16	INTVRT DISC DISORD W RADICULOPATHY LUMBAR REGION	Approved	
НА	Transplant	Inpatient Facility	N18.6	END STAGE RENAL DISEASE	Approved	
НА	Surgical	Outpatient Hospital	N83.209	UNSPECIFIED OVARIAN CYST, UNSPECIFIED SIDE		
НА	Surgical	Inpatient Facility	Q24.9	CONGENITAL MALFORMATION OF HEART, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	K63.89	OTHER SPECIFIED DISEASES OF INTESTINE	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Voided	
НА	Surgical	Inpatient Facility	C61	MALIGNANT NEOPLASM OF PROSTATE	Withdrawn	
НА	Surgical	Inpatient Facility	M51.16	INTVRT DISC DISORD W RADICULOPATHY LUMBAR REGION	Voided	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Withdrawn	

LOB	Treatment Type	Place of Service	Primary Diagnosis Code	Diagnosis Description	Review Outcome	Denial Reason
НА	Surgical	Inpatient Facility	T84.59XA	INFECT/INFLM REAC D/T OTH INT JOINT PROSTH INIT	Voided	
НА	Surgical	Inpatient Facility	T84.59XA	INFECT/INFLM REAC D/T OTH INT JOINT PROSTH INIT	Denied	CMD
НА	Surgical	Inpatient Facility	K21.9	GASTRO-ESOPHAGEAL REFLUX DIS WITHOUT ESOPHAGITIS	Approved	
НА	Surgical	Inpatient Facility	N39.3	STRESS INCONTINENCE (FEMALE) (MALE)	Approved	
НА	Surgical	Inpatient Facility	K43.2	INCISIONAL HERNIA WITHOUT OBST OR GANGRENE	Approved	
НА	Surgical	Inpatient Facility	M21.859	OTHER SPECIFIED ACQ DEFORMITIES OF USP THIGH	Withdrawn	
НА	Surgical	Inpatient Facility	Q21.10	ATRIAL SEPTAL DEFECT, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	C78.6	SEC MALIG NEOP OF RETROPERITON AND PERITONEUM	Approved	
НА	Surgical	Inpatient Facility	Q43.7	PERSISTENT CLOACA	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Voided	
НА	Surgical	Inpatient Facility	M24.60	ANKYLOSIS, UNSPECIFIED JOINT	Approved	
НА	Surgical	Inpatient Facility	R10.2	PELVIC AND PERINEAL PAIN	Voided	
НА	Surgical	Inpatient Facility	M43.16	SPONDYLOLISTHESIS, LUMBAR REGION	Approved	
НА	Surgical	Inpatient Facility	N28.89	OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER	Approved	
НА	Surgical	Inpatient Facility	K44.9	DIAPHRAGMATIC HERNIA WITHOUT OBST OR GANGRENE	Approved	
НА	Surgical	Inpatient Facility	K82.2	PERFORATION OF GALLBLADDER	Approved	
НА	Surgical	Inpatient Facility	N81.6	RECTOCELE	Voided	
НА	Surgical	Inpatient Facility	T84.032A	MECH LOOSENING OF INT RIGHT KNEE PROS JOINT INIT	Approved	
НА	Surgical	Inpatient Facility	D05.11	INTRADUCTAL CARCINOMA IN SITU OF RIGHT BREAST	Approved	
НА	Surgical	Inpatient Facility	M43.16	SPONDYLOLISTHESIS, LUMBAR REGION	Withdrawn	
НА	Surgical	Inpatient Facility	125.10	ATHSCL HEART DIS OF NATIVE COR ART W/O ANG PCTRS	Approved	
НА	Transplant	Inpatient Facility	K72.10	CHRONIC HEPATIC FAILURE WITHOUT COMA	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	D3A.090	BENIGN CARCINOID TUMOR OF THE BRONCHUS AND LUNG	Approved	
НА	Surgical	Inpatient Facility	Q62.11	CONGENITAL OCCLUSION OF URETEROPELVIC JUNCTION	Approved	
НА	Surgical	Inpatient Facility	135.0	NONRHEUMATIC AORTIC (VALVE) STENOSIS	Voided	
НА	Surgical	Inpatient Facility	R91.8	OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD	Approved	
НА	Surgical	Inpatient Facility	S02.609A	FRACTURE MANDIBLE UNSP INIT FOR CLOSED FRACTURE	Approved	
НА	Surgical	Ambulatory Surgery Center	C61	MALIGNANT NEOPLASM OF PROSTATE	Approved	
НА	Surgical	Inpatient Facility	C71.9	MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	N42.89	OTHER SPECIFIED DISORDERS OF PROSTATE	Denied	CMD
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	135.0	NONRHEUMATIC AORTIC (VALVE) STENOSIS	Voided	
НА	Surgical	Inpatient Facility	135.0	NONRHEUMATIC AORTIC (VALVE) STENOSIS	Approved	
НА	Surgical	Inpatient Facility	142.1	OBSTRUCTIVE HYPERTROPHIC CARDIOMYOPATHY	Approved	

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НА	Surgical	Inpatient Facility	G93.5	COMPRESSION OF BRAIN	Approved	
НА	Surgical	Ambulatory Surgery Center	M46.1	SACROILIITIS, NOT ELSEWHERE CLASSIFIED	Voided	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Voided	
НА	Surgical	Inpatient Facility	T81.40XA	INFECTION FOLLOWING A PROCEDURE, UNSP, INIT	Approved	
НА	Surgical	Inpatient Facility	T84.84XD	PAIN DUE TO INTERNAL ORTH PROSTH DEV/GRFT SUBS	Approved	
НА	Surgical	Inpatient Facility	M54.12	RADICULOPATHY, CERVICAL REGION	Approved	
НА	Surgical	Inpatient Facility	M47.812	SPONDYLS W/O MYELPATH OR RADICULOPATHY CERV RG	Approved	
НА	Surgical	Inpatient Facility	M54.12	RADICULOPATHY, CERVICAL REGION	Approved	
НА	Surgical	Inpatient Facility	N28.89	OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER	Approved	
НА	Surgical	Inpatient Facility	C18.9	MALIGNANT NEOPLASM OF COLON, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	135.0	NONRHEUMATIC AORTIC (VALVE) STENOSIS	Approved	
НА	Surgical	Inpatient Facility	R10.13	EPIGASTRIC PAIN	Voided	
НА	Surgical	Inpatient Facility	173.9	PERIPHERAL VASCULAR DISEASE, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	125.10	ATHSCL HEART DIS OF NATIVE COR ART W/O ANG PCTRS	Voided	
НА	Surgical	Inpatient Facility	M50.122	CERVICAL DISC DIS@C5-C6 LEVEL W RADICULOPATHY	Approved	
НА	Surgical	Inpatient Facility	M50.30	OTHER CERV DISC DEGENERATION UNSP CERV REGION	Approved	
НА	Surgical	Inpatient Facility	K57.90	DVRTCLOS INTEST PRT USP W/O PERF/ABSCS W/O BLEED	Approved	
НА	Surgical	Inpatient Facility	K57.30	DVRTCLOS OF LG INT W/O PERF OR ABSCESS W/O BLEED	Approved	
НА	Surgical	Inpatient Facility	N93.8	OTHER SPECIFIED AB UTERINE AND VAGINAL BLEEDING	Approved	
НА	Surgical	Inpatient Facility	K95.89	OTHER COMPLICATIONS OF OTHER BARIATRIC PROCEDURE	Approved	
НА	Surgical	Inpatient Facility	C71.9	MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	D12.6	BENIGN NEOPLASM OF COLON, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	G54.0	BRACHIAL PLEXUS DISORDERS	Approved	
НА	Surgical	Inpatient Facility	M54.12	RADICULOPATHY, CERVICAL REGION	Voided	
НА	Surgical	Inpatient Facility	E26.09	OTHER PRIMARY HYPERALDOSTERONISM	Voided	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Voided	
НА	Surgical	Inpatient Facility	R91.1	SOLITARY PULMONARY NODULE	Approved	
НА	Surgical	Inpatient Facility	M25.811	OTHER SPECIFIED JOINT DISORDERS, RIGHT SHOULDER	Approved	
НА	Transplant	Inpatient Facility	D76.1	HEMOPHAGOCYTIC LYMPHOHISTIOCYTOSIS	Approved	
НА	Surgical	Inpatient Facility	N28.89	OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER	Withdrawn	
НА	Surgical	Inpatient Facility	N83.8	OT NONINFLAMMATORY DIS OVARY FALLOP&BROAD LIGMT	Approved	
НА	Surgical	Inpatient Facility	M53.3	SACROCOCCYGEAL DISORDERS NOT ELSEWHERE CLAS	Approved	
НА	Surgical	Inpatient Facility	Q37.4	CLEFT HARD AND SOFT PALATE WITH BI CLEFT LIP	Approved	
НА	Surgical	Inpatient Facility	N32.1	VESICOINTESTINAL FISTULA	Approved	
НА	Surgical	Inpatient Facility	M53.3	SACROCOCCYGEAL DISORDERS NOT ELSEWHERE CLAS	Voided	
НА	Surgical	Inpatient Facility	N92.0	EXCESS AND FREQUENT MENSTRUATION W REGULAR CYC	Approved	

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НА	Surgical	Inpatient Facility	Q75.009	CRANIOSYNOSTOSIS UNSPECIFIED	Voided	
НА	Surgical	Inpatient Facility	K63.5	POLYP OF COLON	Voided	
НА	Surgical	Inpatient Facility	K57.80	DVTRCLI OF INTEST PRT USP W PERF&ABSCS W/O BLEED	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	C20	MALIGNANT NEOPLASM OF RECTUM	Approved	
НА	Surgical	Inpatient Facility	M47.26	OTHER SPONDYLS WITH RADICULOPATHY LUMBAR REGION	Approved	
НА	Surgical	Inpatient Facility	M43.9	DEFORMING DORSOPATHY, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	C34.12	MALIG NEOPLASM OF UPPER LOBE LEFT BRONC OR LUNG	Approved	
НА	Surgical	Inpatient Facility	K63.5	POLYP OF COLON	Voided	
НА	Surgical	Inpatient Facility	S81.809A	USP OPEN WOUND USP LOWER LEG INIT	Approved	
НА	Surgical	Inpatient Facility	D25.9	LEIOMYOMA OF UTERUS, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	E66.812	OBESITY, CLASS 2	Approved	
НА	Surgical	Inpatient Facility	173.9	PERIPHERAL VASCULAR DISEASE, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	R91.8	OTHER NONSPECIFIC ABNORMAL FINDING OF LUNG FIELD	Approved	
НА	Surgical	Inpatient Facility	Z96.651	PRESENCE OF RIGHT ARTIFICIAL KNEE JOINT	Approved	
НА	Surgical	Inpatient Facility	Z96.652	PRESENCE OF LEFT ARTIFICIAL KNEE JOINT	Approved	
НА	Surgical	Inpatient Facility	M43.16	SPONDYLOLISTHESIS, LUMBAR REGION	Approved	
НА	Surgical	Inpatient Facility	D25.9	LEIOMYOMA OF UTERUS, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Voided	
НА	Surgical	Inpatient Facility	M19.011	PRIMARY OSTEOARTHRITIS, RIGHT SHOULDER	Approved	
НА	Surgical	Inpatient Facility	125.10	ATHSCL HEART DIS OF NATIVE COR ART W/O ANG PCTRS	Approved	
НА	Surgical	Inpatient Facility	S82.872A	DSP PILON FRACTURE LEFT TIBIA INIT FOR CLOS FX	Approved	
НА	Surgical	Inpatient Facility	Q65.4	CONGENITAL PARTIAL DISLOCATION OF HIP, BILATERAL	Approved	
НА	Surgical	Inpatient Facility	M41.45	NEUROMUSCULAR SCOLIOSIS, THORACOLUMBAR REGION	Approved	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Approved	
НА	Surgical	Inpatient Facility	D49.6	NEOPLASM OF UNSPECIFIED BEHAVIOR OF BRAIN	Approved	
НА	Surgical	Inpatient Facility	E66.812	OBESITY, CLASS 2	Approved	
НА	Surgical	Inpatient Facility	M54.14	RADICULOPATHY, THORACIC REGION	Approved	
НА	Surgical	Inpatient Facility	R13.10	DYSPHAGIA, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	C09.9	MALIGNANT NEOPLASM OF TONSIL, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	C20	MALIGNANT NEOPLASM OF RECTUM	Approved	
НА	Surgical	Inpatient Facility	170.209	UNSP ATHSCL NATIVE ART OF EXTREM UNSP EXTREM	Voided	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Approved	
НА	Surgical	Inpatient Facility	135.0	NONRHEUMATIC AORTIC (VALVE) STENOSIS	Approved	
НА	Surgical	Inpatient Facility	C16.2	MALIGNANT NEOPLASM OF BODY OF STOMACH	Approved	
НА	Surgical	Inpatient Facility	M19.111	POST-TRAUMATIC OSTEOARTHRITIS, RIGHT SHOULDER	Approved	
НА	Surgical	Inpatient Facility	135.0	NONRHEUMATIC AORTIC (VALVE) STENOSIS	Approved	

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НА	Surgical	Inpatient Facility	E66.812	OBESITY, CLASS 2	Approved	
НА	Surgical	Inpatient Facility	173.9	PERIPHERAL VASCULAR DISEASE, UNSPECIFIED	Voided	
НА	Surgical	Inpatient Facility	M48.02	SPINAL STENOSIS, CERVICAL REGION	Approved	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Approved	
НА	Surgical	Inpatient Facility	T84.59XD	INFECT/INFLM REAC D/T OTH INT JOINT PROSTH SUBS	Approved	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Approved	
НА	Surgical	Inpatient Facility	N93.9	ABNORMAL UTERINE AND VAGINAL BLEEDING USP	Approved	
НА	Surgical	Inpatient Facility	D25.9	LEIOMYOMA OF UTERUS, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	C54.1	MALIGNANT NEOPLASM OF ENDOMETRIUM	Approved	
НА	Surgical	Inpatient Facility	M43.16	SPONDYLOLISTHESIS, LUMBAR REGION	Voided	
НА	Surgical	Inpatient Facility	N83.201	UNSPECIFIED OVARIAN CYST, RIGHT SIDE	Approved	
НА	Surgical	Inpatient Facility	T84.033A	MECH LOOSENING OF INT LEFT KNEE PROS JOINT INIT	Voided	
НА	Surgical	Inpatient Facility	167.5	MOYAMOYA DISEASE	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Withdrawn	
НА	Surgical	Inpatient Facility	C18.2	MALIGNANT NEOPLASM OF ASCENDING COLON	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	K57.20	DVTRCLI OF LG INT W PERF AND ABSCESS W/O BLEED	Withdrawn	
НА	Surgical	Inpatient Facility	N92.0	EXCESS AND FREQUENT MENSTRUATION W REGULAR CYC	Voided	
НА	Surgical	Inpatient Facility	187.1	COMPRESSION OF VEIN	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	C20	MALIGNANT NEOPLASM OF RECTUM	Voided	
НА	Surgical	Inpatient Facility	M43.16	SPONDYLOLISTHESIS, LUMBAR REGION	Approved	
НА	Surgical	Inpatient Facility	M75.122	COM ROTATR-CUFF TEAR/RUPTR OF LEFT SHLD NOT TRMA	Approved	
НА	Surgical	Inpatient Facility	M48.061	SPINAL STENOS LUMBAR REGION W/O NEUROGENIC CLAUD	Approved	
НА	Surgical	Inpatient Facility	Z93.2	ILEOSTOMY STATUS	Approved	
НА	Surgical	Inpatient Facility	R52	PAIN, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	T82.898A	OTH COMPL OF VASCULAR PROSTH DEV/GRFT INIT	Approved	
НА	Surgical	Inpatient Facility	N28.89	OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER	Approved	
НА	Surgical	Inpatient Facility	K43.2	INCISIONAL HERNIA WITHOUT OBST OR GANGRENE	Approved	
НА	Surgical	Inpatient Facility	D25.9	LEIOMYOMA OF UTERUS, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	N85.8	OTHER SPECIFIED NONINFLAMMATORY DISORD OF UTERUS	Approved	
НА	Surgical	Inpatient Facility	S06.5XAA	TRAUM SUBDR HEM W LOC STATUS UNKNOWN INIT ENCNTR	Approved	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Withdrawn	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Withdrawn	
НА	Surgical	Inpatient Facility	K43.2	INCISIONAL HERNIA WITHOUT OBST OR GANGRENE	Withdrawn	
НА	Surgical	Inpatient Facility	R19.09	OTHER INTRA-ABD AND PELV SWELLING MASS AND LUMP	Voided	
НА	Surgical	Inpatient Facility	K57.80	DVTRCLI OF INTEST PRT USP W PERF&ABSCS W/O BLEED	Approved	

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НА	Surgical	Inpatient Facility	K56.1	INTUSSUSCEPTION	Denied	CMD
НА	Surgical	Inpatient Facility	C18.9	MALIGNANT NEOPLASM OF COLON, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	D12.6	BENIGN NEOPLASM OF COLON, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	R19.09	OTHER INTRA-ABD AND PELV SWELLING MASS AND LUMP	Approved	
НА	Surgical	Inpatient Facility	D25.9	LEIOMYOMA OF UTERUS, UNSPECIFIED	Voided	
НА	Surgical	Inpatient Facility	K31.89	OTHER DISEASES OF STOMACH AND DUODENUM	Approved	
НА	Surgical	Inpatient Facility	Z68.41	BODY MASS INDEX [BMI] 40.0-44.9, ADULT	Approved	
НА	Surgical	Inpatient Facility	M25.561	PAIN IN RIGHT KNEE	Approved	
НА	Surgical	Inpatient Facility	K43.5	PARASTOMAL HERNIA W/O OBSTRUCTION OR GANGRENE	Approved	
НА	Surgical	Inpatient Facility	K57.20	DVTRCLI OF LG INT W PERF AND ABSCESS W/O BLEED	Approved	
НА	Surgical	Inpatient Facility	Z87.19	PERSONAL HISTORY OF OTHER DIS OF DIGESTIVE SYS	Voided	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Approved	
НА	Surgical	Inpatient Facility	N13.5	CROSSING VESS&STRIX OF URETER W/O HYDRONEPHROSIS	Withdrawn	
НА	Surgical	Inpatient Facility	N28.9	DISORDER OF KIDNEY AND URETER, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Denied	CMD
НА	Surgical	Inpatient Facility	K83.5	BILIARY CYST	Voided	
НА	Surgical	Inpatient Facility	K42.9	UMBILICAL HERNIA WITHOUT OBSTRUCTION OR GANGRENE	Denied	CMD
НА	Surgical	Inpatient Facility	D39.10	NEOPLASM OF UNCERTAIN BEHAVIOR OF USP OVARY	Approved	
НА	Surgical	Inpatient Facility	Z96.651	PRESENCE OF RIGHT ARTIFICIAL KNEE JOINT	Approved	
НА	Surgical	Inpatient Facility	M17.12	UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE	Approved	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Withdrawn	
НА	Surgical	Inpatient Facility	Z96.652	PRESENCE OF LEFT ARTIFICIAL KNEE JOINT	Approved	
НА	Surgical	Inpatient Facility	T84.093D	MECH COMPL OF INT LEFT KNEE PROSTH SUBS ENCNTR	Voided	
НА	Surgical	Inpatient Facility	S82.841A	DISPLACED BIML FRACTURE RIGHT LOWER LEG INIT	Approved	
НА	Surgical	Inpatient Facility	D21.9	BENIGN NEOP OF CONN AND OTHER SOFT TISSUE UNSP	Denied	CMD
НА	Transplant	Inpatient Facility	D46.9	MYELODYSPLASTIC SYNDROME, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	C62.90	MALIG NEOPLASM OF UNSPTESTIS UNSPIDES OR UNDES	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Withdrawn	
НА	Surgical	Inpatient Facility	170.201	UNSP ATHSCL NATIVE ARTERIES OF EXTREM RIGHT LEG	Approved	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Withdrawn	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Voided	
НА	Surgical	Inpatient Facility	C71.9	MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	M47.22	OTHER SPONDYLS WITH RADICULOPATHY CERV REGION	Approved	
НА	Surgical	Inpatient Facility	M50.20	OTHER CERVICAL DISC DSPM UNSP CERVICAL REGION	Voided	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Approved	
НА	Surgical	Inpatient Facility	134.0	NONRHEUMATIC MITRAL (VALVE) INSUFFICIENCY	Voided	
НА	Surgical	Inpatient Facility	K56.1	INTUSSUSCEPTION	Approved	

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НА	Surgical	Inpatient Facility	D49.6	NEOPLASM OF UNSPECIFIED BEHAVIOR OF BRAIN	Approved	
НА	Surgical	Inpatient Facility	N32.1	VESICOINTESTINAL FISTULA	Voided	
НА	Surgical	Inpatient Facility	D25.0	SUBMUCOUS LEIOMYOMA OF UTERUS	Approved	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Approved	
НА	Surgical	Inpatient Facility	K44.9	DIAPHRAGMATIC HERNIA WITHOUT OBST OR GANGRENE	Approved	
НА	Surgical	Inpatient Facility	134.0	NONRHEUMATIC MITRAL (VALVE) INSUFFICIENCY	Approved	
НА	Surgical	Observation	M43.16	SPONDYLOLISTHESIS, LUMBAR REGION	Voided	
НА	Surgical	Inpatient Facility	C18.9	MALIGNANT NEOPLASM OF COLON, UNSPECIFIED	Approved	
НА	Transplant	Inpatient Facility	C92.00	ACUTE MYELOBLASTIC LUK NOT HAVING ACHIEVE REMIS	Approved	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Approved	
НА	Surgical	Inpatient Facility	R22.0	LOCALIZED SWELLING, MASS AND LUMP, HEAD	Approved	
НА	Surgical	Inpatient Facility	N92.0	EXCESS AND FREQUENT MENSTRUATION W REGULAR CYC	Approved	
НА	Surgical	Inpatient Facility	D3A.8	OTHER BENIGN NEUROENDOCRINE TUMORS	Approved	
НА	Surgical	Inpatient Facility	W34.00XA	ACC DISCHARGE FROM UNSP FIREARMS OR GUN INIT	Approved	
НА	Surgical	Inpatient Facility	125.119	ATHSCL HRT DIS OF NATIVE COR ART W USP ANG PCTRS	Approved	
НА	Surgical	Inpatient Facility	K59.9	FUNCTIONAL INTESTINAL DISORDER, UNSPECIFIED	Denied	CMD
НА	Surgical	Inpatient Facility	l48.91	UNSPECIFIED ATRIAL FIBRILLATION	Approved	
НА	Surgical	Inpatient Facility	C73	MALIGNANT NEOPLASM OF THYROID GLAND	Approved	
НА	Surgical	Observation	M43.16	SPONDYLOLISTHESIS, LUMBAR REGION	Voided	
НА	Surgical	Inpatient Facility	K83.5	BILIARY CYST	Approved	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Approved	
НА	Surgical	Inpatient Facility	189.8	OTH NONINFECTIVE DISORD OF LYMPH VESLS AND NODES	Approved	
НА	Surgical	Inpatient Facility	M54.16	RADICULOPATHY, LUMBAR REGION	Approved	
НА	Surgical	Inpatient Facility	Z68.42	BODY MASS INDEX [BMI] 45.0-49.9, ADULT	Withdrawn	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Voided	
НА	Surgical	Inpatient Facility	R05.3	CHRONIC COUGH	Voided	
НА	Surgical	Inpatient Facility	T84.012D	BROKEN INTERNAL RIGHT KNEE PROSTH SB ENCOUNTER	Approved	
НА	Surgical	Inpatient Facility	G95.9	DISEASE OF SPINAL CORD, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	135.0	NONRHEUMATIC AORTIC (VALVE) STENOSIS	Voided	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Withdrawn	
НА	Surgical	Inpatient Facility	R22.0	LOCALIZED SWELLING, MASS AND LUMP, HEAD	Voided	
НА	Surgical	Inpatient Facility	G20.C	PARKINSONISM, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	K21.9	GASTRO-ESOPHAGEAL REFLUX DIS WITHOUT ESOPHAGITIS	Approved	
НА	Surgical	Inpatient Facility	Z93.2	ILEOSTOMY STATUS	Approved	
НА	Surgical	Inpatient Facility	T84.010D	BROKEN INTERNAL RIGHT HIP PROSTH SB ENCOUNTER	Withdrawn	
НА	Surgical	Inpatient Facility	S72.22XK	DSP SBTROCH FX L FEMUR SB FOR CLOS FX W NONUNION	Voided	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Withdrawn	

LOB	Treatment Type	Place of Service	Primary Diagnosis Code	Diagnosis Description	Review Outcome	Denial Reason
НА	Surgical	Inpatient Facility	K43.0	INCISIONAL HERNIA WITH OBST WITHOUT GANGRENE	Approved	
НА	Surgical	Inpatient Facility	M48.02	SPINAL STENOSIS, CERVICAL REGION	Approved	
НА	Surgical	Inpatient Facility	D25.9	LEIOMYOMA OF UTERUS, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	C16.9	MALIGNANT NEOPLASM OF STOMACH, UNSPECIFIED	Voided	
НА	Surgical	Inpatient Facility	K21.9	GASTRO-ESOPHAGEAL REFLUX DIS WITHOUT ESOPHAGITIS	Approved	
НА	Surgical	Inpatient Facility	M43.10	SPONDYLOLISTHESIS, SITE UNSPECIFIED	Voided	
НА	Surgical	Inpatient Facility	125.10	ATHSCL HEART DIS OF NATIVE COR ART W/O ANG PCTRS	Approved	
НА	Surgical	Inpatient Facility	M54.16	RADICULOPATHY, LUMBAR REGION	Approved	
НА	Surgical	Inpatient Facility	M43.16	SPONDYLOLISTHESIS, LUMBAR REGION	Voided	
НА	Transplant	Inpatient Facility	C90.00	MULTIPLE MYELOMA NOT HAVING ACHIEVED REMISSION	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	C18.9	MALIGNANT NEOPLASM OF COLON, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	K63.89	OTHER SPECIFIED DISEASES OF INTESTINE	Approved	
НА	Surgical	Inpatient Facility	M43.16	SPONDYLOLISTHESIS, LUMBAR REGION	Approved	
НА	Surgical	Inpatient Facility	K56.609	USP INTESTNL OBST USP AS TO PRTL VERSUS COM OBST	Approved	
НА	Surgical	Inpatient Facility	N28.89	OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER	Voided	
НА	Surgical	Inpatient Facility	G91.2	(IDIOPATHIC) NORMAL PRESSURE HYDROCEPHALUS	Approved	
НА	Surgical	Inpatient Facility	N92.1	EXCESS AND FREQUENT MENSTRUATION WITH IRREG CYC	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	D35.02	BENIGN NEOPLASM OF LEFT ADRENAL GLAND	Approved	
НА	Surgical	Inpatient Facility	R93.2	AB FIND ON DX IMAGING OF LIVER AND BILIARY TRACT	Approved	
НА	Surgical	Inpatient Facility	M16.12	UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT HIP	Approved	
НА	Surgical	Inpatient Facility	125.119	ATHSCL HRT DIS OF NATIVE COR ART W USP ANG PCTRS	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Withdrawn	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Voided	
НА	Surgical	Inpatient Facility	C20	MALIGNANT NEOPLASM OF RECTUM	Approved	
НА	Surgical	Inpatient Facility	K76.6	PORTAL HYPERTENSION	Voided	
НА	Surgical	Inpatient Facility	J43.9	EMPHYSEMA, UNSPECIFIED	Denied	CMD
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Voided	
НА	Surgical	Inpatient Facility	142.8	OTHER CARDIOMYOPATHIES	Denied	CMD
НА	Surgical	Inpatient Facility	135.0	NONRHEUMATIC AORTIC (VALVE) STENOSIS	Voided	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	T81.49XA	INFECTION FOL A PROCEDURE, OTHER SRG SITE, INIT	Approved	
НА	Surgical	Inpatient Facility	K63.89	OTHER SPECIFIED DISEASES OF INTESTINE	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	N13.2	HYDRONEPHROSIS W RENAL & URETERAL CALCULOUS OBST	Approved	

LOB	Treatment Type	Place of Service	Primary Diagnosis Code	Diagnosis Description	Review Outcome	Denial Reason
НА	Surgical	Inpatient Facility	D12.0	BENIGN NEOPLASM OF CECUM	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Denied	CMD
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Approved	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Voided	
НА	Surgical	Inpatient Facility	D13.0	BENIGN NEOPLASM OF ESOPHAGUS	Approved	
НА	Surgical	Inpatient Facility	Z87.19	PERSONAL HISTORY OF OTHER DIS OF DIGESTIVE SYS	Approved	
НА	Surgical	Inpatient Facility	K76.6	PORTAL HYPERTENSION	Approved	
НА	Surgical	Inpatient Facility	K86.89	OTHER SPECIFIED DISEASES OF PANCREAS	Approved	
НА	Surgical	Inpatient Facility	Z43.2	ENCOUNTER FOR ATTENTION TO ILEOSTOMY	Approved	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	174.09	OTHER ARTERIAL MBLSM AND THROMBOSIS OF ABD AORTA	Approved	
НА	Surgical	Inpatient Facility	G95.20	UNSPECIFIED CORD COMPRESSION	Withdrawn	
НА	Surgical	Inpatient Facility	G96.01	CRANIAL CEREBROSPINAL FLUID LEAK, SPONTANEOUS	Voided	
НА	Surgical	Inpatient Facility	M48.062	SPINAL STENOS LMBR RG W NEUROGENIC CLAUDICATION	Approved	
НА	Transplant	Inpatient Facility	C90.00	MULTIPLE MYELOMA NOT HAVING ACHIEVED REMISSION	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Voided	
НА	Surgical	Inpatient Facility	H71.02	CHOLESTEATOMA OF ATTIC, LEFT EAR	Denied	CMD
НА	Surgical	Inpatient Facility	134.1	NONRHEUMATIC MITRAL (VALVE) PROLAPSE	Approved	
НА	Surgical	Inpatient Facility	C44.329	SQUAMOUS CELL CA OF SKIN OF OTHER PARTS OF FACE	Approved	
НА	Surgical	Inpatient Facility	R10.2	PELVIC AND PERINEAL PAIN	Approved	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Approved	
НА	Surgical	Inpatient Facility	Z38.31	TWIN LIVEBORN INFANT, DELIVERED BY CESAREAN	Voided	
НА	Surgical	Inpatient Facility	J98.6	DISORDERS OF DIAPHRAGM	Approved	
НА	Transplant	Inpatient Facility	N18.6	END STAGE RENAL DISEASE	Approved	
НА	Surgical	Inpatient Facility	G93.5	COMPRESSION OF BRAIN	Approved	
НА	Surgical	Inpatient Facility	M47.816	SPONDYLS W/O MYELPATH OR RADICULOPATHY LUM RG	Approved	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Approved	
НА	Surgical	Inpatient Facility	C18.9	MALIGNANT NEOPLASM OF COLON, UNSPECIFIED	Voided	
НА	Surgical	Inpatient Facility	D49.9	NEOPLASM OF USP BEHAVIOR OF USP SITE	Approved	
НА	Surgical	Inpatient Facility	165.22	OCCLUSION AND STENOSIS OF LEFT CAROTID ARTERY	Voided	
НА	Surgical	Inpatient Facility	165.22	OCCLUSION AND STENOSIS OF LEFT CAROTID ARTERY	Voided	
НА	Surgical	Inpatient Facility	C56.9	MALIGNANT NEOPLASM OF UNSPECIFIED OVARY	Approved	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Withdrawn	
НА	Transplant	Inpatient Facility	C92.01	ACUTE MYELOBLASTIC LEUKEMIA, IN REMISSION	Approved	
НА	Surgical	Inpatient Facility	M43.16	SPONDYLOLISTHESIS, LUMBAR REGION	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Withdrawn	

LOB	Treatment Type	Place of Service	Primary Diagnosis Code	Diagnosis Description	Review Outcome	Denial Reason
НА	Surgical	Inpatient Facility	Q65.89	OTHER SPECIFIED CONGENITAL DEFORMITIES OF HIP	Approved	
НА	Surgical	Inpatient Facility	Q65.89	OTHER SPECIFIED CONGENITAL DEFORMITIES OF HIP	Voided	
НА	Surgical	Inpatient Facility	Z96.652	PRESENCE OF LEFT ARTIFICIAL KNEE JOINT	Voided	
НА	Surgical	Inpatient Facility	Z96.651	PRESENCE OF RIGHT ARTIFICIAL KNEE JOINT	Approved	
НА	Transplant	Inpatient Facility	N18.6	END STAGE RENAL DISEASE	Approved	
НА	Surgical	Inpatient Facility	K95.89	OTHER COMPLICATIONS OF OTHER BARIATRIC PROCEDURE	Approved	
НА	Surgical	Inpatient Facility	T84.093A	MECH COMPL OF INTERNAL LEFT KNEE PROSTHESIS INIT	Approved	
НА	Surgical	Inpatient Facility	G95.0	SYRINGOMYELIA AND SYRINGOBULBIA	Withdrawn	
НА	Surgical	Inpatient Facility	Z93.2	ILEOSTOMY STATUS	Approved	
НА	Surgical	Inpatient Facility	D25.9	LEIOMYOMA OF UTERUS, UNSPECIFIED	Denied	CMD
НА	Surgical	Inpatient Facility	G50.0	TRIGEMINAL NEURALGIA	Approved	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Approved	
НА	Surgical	Inpatient Facility	M47.22	OTHER SPONDYLS WITH RADICULOPATHY CERV REGION	Withdrawn	
НА	Surgical	Inpatient Facility	M47.22	OTHER SPONDYLS WITH RADICULOPATHY CERV REGION	Voided	
НА	Surgical	Inpatient Facility	M54.16	RADICULOPATHY, LUMBAR REGION	Approved	
НА	Surgical	Inpatient Facility	M25.661	STIFFNESS OF RIGHT KNEE NOT ELSEWHERE CLASSIFIED	Approved	
НА	Surgical	Inpatient Facility	M47.812	SPONDYLS W/O MYELPATH OR RADICULOPATHY CERV RG	Approved	
НА	Surgical	Inpatient Facility	M17.12	UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE	Approved	
НА	Surgical	Inpatient Facility	N28.89	OTHER SPECIFIED DISORDERS OF KIDNEY AND URETER	Voided	
НА	Surgical	Inpatient Facility	I35.1	NONRHEUMATIC AORTIC (VALVE) INSUFFICIENCY	Approved	
НА	Surgical	Inpatient Facility	T84.59XA	INFECT/INFLM REAC D/T OTH INT JOINT PROSTH INIT	Approved	
НА	Surgical	Inpatient Facility	D25.9	LEIOMYOMA OF UTERUS, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	S82.852D	DSPTRMAL FX L LO LEG SB FOR CLOS FX W ROUT HEAL	Approved	
НА	Surgical	Inpatient Facility	C20	MALIGNANT NEOPLASM OF RECTUM	Approved	
НА	Surgical	Inpatient Facility	L98.7	EXCESSIVE & REDUNDANT SKIN & SUBCUTANEOUS TISSUE	Approved	
НА	Surgical	Inpatient Facility	K57.32	DVTRCLI OF LG INT W/O PERF OR ABSCESS W/O BLEED	Approved	
НА	Surgical	Inpatient Facility	125.10	ATHSCL HEART DIS OF NATIVE COR ART W/O ANG PCTRS	Approved	
НА	Surgical	Inpatient Facility	M16.11	UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT HIP	Approved	
НА	Surgical	Inpatient Facility	Z93.3	COLOSTOMY STATUS	Approved	
НА	Surgical	Inpatient Facility	N80.9	ENDOMETRIOSIS, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	D16.8	BENIGN NEOP OF PELVIC BONES SACRUM AND COCCYX	Approved	
НА	Surgical	Inpatient Facility	D49.6	NEOPLASM OF UNSPECIFIED BEHAVIOR OF BRAIN	Approved	
НА	Surgical	Inpatient Facility	Z93.3	COLOSTOMY STATUS	Approved	
НА	Surgical	Inpatient Facility	N18.6	END STAGE RENAL DISEASE	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Approved	
НА	Surgical	Inpatient Facility	D21.9	BENIGN NEOP OF CONN AND OTHER SOFTTISSUE UNSP	Approved	
НА	Surgical	Inpatient Facility	C20	MALIGNANT NEOPLASM OF RECTUM	Approved	

LOB	Treatment Type	Place of Service	Primary Diagnosis Code	Diagnosis Description	Review Outcome	Denial Reason
НА	Surgical	Inpatient Facility	C7A.8	OTHER MALIGNANT NEUROENDOCRINE TUMORS	Approved	
НА	Surgical	Inpatient Facility	C18.0	MALIGNANT NEOPLASM OF CECUM	Approved	
НА	Surgical	Inpatient Facility	C20	MALIGNANT NEOPLASM OF RECTUM	Approved	
НА	Surgical	Inpatient Facility	K44.9	DIAPHRAGMATIC HERNIA WITHOUT OBST OR GANGRENE	Approved	
НА	Surgical	Inpatient Facility	E66.01	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES	Voided	
НА	Surgical	Inpatient Facility	C18.7	MALIGNANT NEOPLASM OF SIGMOID COLON	Approved	
НА	Surgical	Inpatient Facility	R19.00	INTRA-ABD & PELV SWELLING MASS & LUMP UNSP SITE	Approved	
НА	Surgical	Inpatient Facility	C79.31	SECONDARY MALIGNANT NEOPLASM OF BRAIN	Approved	
НА	Surgical	Inpatient Facility	C20	MALIGNANT NEOPLASM OF RECTUM	Approved	
НА	Surgical	Inpatient Facility	Z43.2	ENCOUNTER FOR ATTENTION TO ILEOSTOMY	Approved	
НА	Surgical	Inpatient Facility	125.10	ATHSCL HEART DIS OF NATIVE COR ART W/O ANG PCTRS	Approved	
НА	Surgical	Inpatient Facility	C49.A4	GI STROMAL TUMOR OF LARGE INTESTINE	Approved	
НА	Surgical	Inpatient Facility	135.0	NONRHEUMATIC AORTIC (VALVE) STENOSIS	Approved	
НА	Surgical	Inpatient Facility	M43.16	SPONDYLOLISTHESIS, LUMBAR REGION	Approved	
НА	Surgical	Inpatient Facility	C73	MALIGNANT NEOPLASM OF THYROID GLAND	Approved	
НА	Surgical	Inpatient Facility	C73	MALIGNANT NEOPLASM OF THYROID GLAND	Approved	
НА	Surgical	Inpatient Facility	Q65.89	OTHER SPECIFIED CONGENITAL DEFORMITIES OF HIP	Approved	
НА	Surgical	Inpatient Facility	Z93.3	COLOSTOMY STATUS	Approved	
НА	Surgical	Inpatient Facility	Q24.9	CONGENITAL MALFORMATION OF HEART, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	K63.89	OTHER SPECIFIED DISEASES OF INTESTINE	Approved	
НА	Surgical	Inpatient Facility	Q21.10	ATRIAL SEPTAL DEFECT, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	C78.6	SEC MALIG NEOP OF RETROPERITON AND PERITONEUM	Approved	
НА	Surgical	Inpatient Facility	Q43.7	PERSISTENT CLOACA	Approved	
НА	Surgical	Inpatient Facility	K82.2	PERFORATION OF GALLBLADDER	Approved	
НА	Surgical	Inpatient Facility	D3A.090	BENIGN CARCINOID TUMOR OF THE BRONCHUS AND LUNG	Approved	
НА	Surgical	Inpatient Facility	C71.9	MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	T81.40XA	INFECTION FOLLOWING A PROCEDURE, UNSP, INIT	Approved	
НА	Surgical	Inpatient Facility	M47.812	SPONDYLS W/O MYELPATH OR RADICULOPATHY CERV RG	Voided	
НА	Surgical	Inpatient Facility	135.0	NONRHEUMATIC AORTIC (VALVE) STENOSIS	Approved	
НА	Surgical	Inpatient Facility	173.9	PERIPHERAL VASCULAR DISEASE, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	K57.30	DVRTCLOS OF LG INT W/O PERF OR ABSCESS W/O BLEED	Approved	
НА	Surgical	Inpatient Facility	N93.8	OTHER SPECIFIED AB UTERINE AND VAGINAL BLEEDING	Approved	
НА	Surgical	Inpatient Facility	C71.9	MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	D12.6	BENIGN NEOPLASM OF COLON, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	G54.0	BRACHIAL PLEXUS DISORDERS	Approved	
НА	Surgical	Inpatient Facility	N83.8	OT NONINFLAMMATORY DIS OVARY FALLOP&BROAD LIGMT	Approved	
НА	Surgical	Inpatient Facility	N32.1	VESICOINTESTINAL FISTULA	Approved	

LOB	Treatment Type	Place of Service	Primary Diagnosis Code	Diagnosis Description	Review Outcome	Denial Reason
НА	Surgical	Inpatient Facility	C20	MALIGNANT NEOPLASM OF RECTUM	Approved	
НА	Surgical	Inpatient Facility	C34.12	MALIG NEOPLASM OF UPPER LOBE LEFT BRONC OR LUNG	Approved	
НА	Surgical	Inpatient Facility	S81.809A	USP OPEN WOUND USP LOWER LEG INIT	Approved	
НА	Surgical	Inpatient Facility	D25.9	LEIOMYOMA OF UTERUS, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	D25.9	LEIOMYOMA OF UTERUS, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	125.10	ATHSCL HEART DIS OF NATIVE COR ART W/O ANG PCTRS	Approved	
НА	Surgical	Inpatient Facility	S82.872A	DSP PILON FRACTURE LEFT TIBIA INIT FOR CLOS FX	Approved	
НА	Surgical	Inpatient Facility	M41.45	NEUROMUSCULAR SCOLIOSIS, THORACOLUMBAR REGION	Approved	
НА	Surgical	Inpatient Facility	M54.14	RADICULOPATHY, THORACIC REGION	Denied	CMD
НА	Surgical	Inpatient Facility	C20	MALIGNANT NEOPLASM OF RECTUM	Approved	
НА	Surgical	Inpatient Facility	135.0	NONRHEUMATIC AORTIC (VALVE) STENOSIS	Approved	
НА	Surgical	Inpatient Facility	135.0	NONRHEUMATIC AORTIC (VALVE) STENOSIS	Approved	
НА	Surgical	Inpatient Facility	M48.02	SPINAL STENOSIS, CERVICAL REGION	Voided	
НА	Surgical	Inpatient Facility	T84.59XD	INFECT/INFLM REAC D/T OTH INT JOINT PROSTH SUBS	Approved	
НА	Surgical	Inpatient Facility	N93.9	ABNORMAL UTERINE AND VAGINAL BLEEDING USP	Approved	
НА	Surgical	Inpatient Facility	C18.2	MALIGNANT NEOPLASM OF ASCENDING COLON	Approved	
НА	Surgical	Inpatient Facility	187.1	COMPRESSION OF VEIN	Approved	
НА	Surgical	Inpatient Facility	M43.16	SPONDYLOLISTHESIS, LUMBAR REGION	Approved	
НА	Surgical	Inpatient Facility	R52	PAIN, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	T82.898A	OTH COMPL OF VASCULAR PROSTH DEV/GRFT INIT	Approved	
НА	Surgical	Inpatient Facility	D25.9	LEIOMYOMA OF UTERUS, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	N85.8	OTHER SPECIFIED NONINFLAMMATORY DISORD OF UTERUS	Approved	
НА	Surgical	Inpatient Facility	K57.80	DVTRCLI OF INTEST PRT USP W PERF&ABSCS W/O BLEED	Voided	
НА	Surgical	Inpatient Facility	K43.5	PARASTOMAL HERNIA W/O OBSTRUCTION OR GANGRENE	Approved	
НА	Surgical	Inpatient Facility	E66.813	OBESITY, CLASS 3	Voided	
НА	Surgical	Inpatient Facility	N28.9	DISORDER OF KIDNEY AND URETER, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	D21.9	BENIGN NEOP OF CONN AND OTHER SOFT TISSUE UNSP	Approved	
НА	Surgical	Inpatient Facility	C71.9	MALIGNANT NEOPLASM OF BRAIN, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	M47.22	OTHER SPONDYLS WITH RADICULOPATHY CERV REGION	Voided	
НА	Surgical	Inpatient Facility	D25.0	SUBMUCOUS LEIOMYOMA OF UTERUS	Voided	
НА	Surgical	Inpatient Facility	134.0	NONRHEUMATIC MITRAL (VALVE) INSUFFICIENCY	Approved	
НА	Surgical	Inpatient Facility	R22.0	LOCALIZED SWELLING, MASS AND LUMP, HEAD	Approved	
НА	Surgical	Inpatient Facility	N92.0	EXCESS AND FREQUENT MENSTRUATION W REGULAR CYC	Approved	
НА	Surgical	Inpatient Facility	W34.00XA	ACC DISCHARGE FROM UNSP FIREARMS OR GUN INIT	Approved	
НА	Surgical	Inpatient Facility	125.119	ATHSCL HRT DIS OF NATIVE COR ART W USP ANG PCTRS	Approved	
НА	Surgical	Inpatient Facility	K83.5	BILIARY CYST	Approved	
НА	Surgical	Inpatient Facility	K21.9	GASTRO-ESOPHAGEAL REFLUX DIS WITHOUT ESOPHAGITIS	Approved	

LOB	Treatment Type	Place of Service	Primary Diagnosis Code	Diagnosis Description	Review Outcome	Denial Reason
НА	Surgical	Inpatient Facility	125.10	ATHSCL HEART DIS OF NATIVE COR ART W/O ANG PCTRS	Approved	
НА	Surgical	Inpatient Facility	C18.9	MALIGNANT NEOPLASM OF COLON, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	K56.609	USP INTESTNL OBST USP AS TO PRTL VERSUS COM OBST	Approved	
НА	Surgical	Inpatient Facility	125.119	ATHSCL HRT DIS OF NATIVE COR ART W USP ANG PCTRS	Voided	
НА	Surgical	Inpatient Facility	C20	MALIGNANT NEOPLASM OF RECTUM	Approved	
НА	Surgical	Inpatient Facility	Z87.19	PERSONAL HISTORY OF OTHER DIS OF DIGESTIVE SYS	Approved	
НА	Surgical	Inpatient Facility	Z43.2	ENCOUNTER FOR ATTENTION TO ILEOSTOMY	Approved	
НА	Surgical	Inpatient Facility	C44.329	SQUAMOUS CELL CA OF SKIN OF OTHER PARTS OF FACE	Approved	
НА	Surgical	Inpatient Facility	J98.6	DISORDERS OF DIAPHRAGM	Approved	
НА	Surgical	Inpatient Facility	M43.16	SPONDYLOLISTHESIS, LUMBAR REGION	Approved	
НА	Surgical	Inpatient Facility	Z96.651	PRESENCE OF RIGHT ARTIFICIAL KNEE JOINT	Approved	
НА	Surgical	Inpatient Facility	T84.093A	MECH COMPL OF INTERNAL LEFT KNEE PROSTHESIS INIT	Voided	
НА	Surgical	Inpatient Facility	D21.9	BENIGN NEOP OF CONN AND OTHER SOFTTISSUE UNSP	Approved	
НА	Surgical	Inpatient Facility	N18.6	END STAGE RENAL DISEASE	Approved	
НА	Surgical	Inpatient Facility	C7A.8	OTHER MALIGNANT NEUROENDOCRINE TUMORS	Approved	
НА	Surgical	Inpatient Facility	R19.00	INTRA-ABD & PELV SWELLING MASS & LUMP UNSP SITE	Approved	
НА	Surgical	Inpatient Facility	125.10	ATHSCL HEART DIS OF NATIVE COR ART W/O ANG PCTRS	Approved	
НА	Surgical	Inpatient Facility	C49.A4	GI STROMAL TUMOR OF LARGE INTESTINE	Approved	
НА	Surgical	Inpatient Facility	Q24.9	CONGENITAL MALFORMATION OF HEART, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	C78.6	SEC MALIG NEOP OF RETROPERITON AND PERITONEUM	Approved	
НА	Surgical	Inpatient Facility	Q43.7	PERSISTENT CLOACA	Approved	
НА	Surgical	Inpatient Facility	D12.6	BENIGN NEOPLASM OF COLON, UNSPECIFIED	Voided	
НА	Surgical	Inpatient Facility	N32.1	VESICOINTESTINAL FISTULA	Voided	
НА	Surgical	Inpatient Facility	C34.12	MALIG NEOPLASM OF UPPER LOBE LEFT BRONC OR LUNG	Approved	
НА	Surgical	Inpatient Facility	N93.9	ABNORMAL UTERINE AND VAGINAL BLEEDING USP	Voided	
НА	Surgical	Inpatient Facility	M47.22	OTHER SPONDYLS WITH RADICULOPATHY CERV REGION	Voided	
НА	Surgical	Inpatient Facility	W34.00XA	ACC DISCHARGE FROM UNSP FIREARMS OR GUN INIT	Approved	
НА	Surgical	Inpatient Facility	K21.9	GASTRO-ESOPHAGEAL REFLUX DIS WITHOUT ESOPHAGITIS	Approved	
НА	Surgical	Inpatient Facility	N18.6	END STAGE RENAL DISEASE	Approved	
НА	Surgical	Inpatient Facility	C7A.8	OTHER MALIGNANT NEUROENDOCRINE TUMORS	Approved	
НА	Surgical	Inpatient Facility	M47.22	OTHER SPONDYLS WITH RADICULOPATHY CERV REGION	Voided	
НА	Surgical	Inpatient Facility	N18.6	END STAGE RENAL DISEASE	Approved	
НА	Surgical	Inpatient Facility	C7A.8	OTHER MALIGNANT NEUROENDOCRINE TUMORS	Approved	
НА	Surgical	Inpatient Facility	M47.22	OTHER SPONDYLS WITH RADICULOPATHY CERV REGION	Voided	
НА	Surgical	Inpatient Facility	C7A.8	OTHER MALIGNANT NEUROENDOCRINE TUMORS	Approved	
НА	Surgical	Inpatient Facility	M47.22	OTHER SPONDYLS WITH RADICULOPATHY CERV REGION	Voided	
НА	Surgical	Inpatient Facility	C15.9	MALIGNANT NEOPLASM OF ESOPHAGUS, UNSPECIFIED	Approved	

LOB	Treatment Type	Place of Service	Primary Diagnosis Code	Diagnosis Description	Review Outcome	Denial Reason
НА	Surgical	Inpatient Facility	C7A.8	OTHER MALIGNANT NEUROENDOCRINE TUMORS	Approved	
НА	Surgical	Inpatient Facility	C15.9	MALIGNANT NEOPLASM OF ESOPHAGUS, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	C7A.8	OTHER MALIGNANT NEUROENDOCRINE TUMORS	Approved	
НА	Surgical	Inpatient Facility	C15.9	MALIGNANT NEOPLASM OF ESOPHAGUS, UNSPECIFIED	Approved	
НА	Surgical	Inpatient Facility	N36.0	URETHRAL FISTULA	Approved	