EXC Code	Short Description
0304	INVALID BATCH TYPE
0888	CLAIM FDOS LESS THAN 1/1/1964
1120	PROV NBR MSS OR INV
1128	MBR ID MIS OR INV NO ATTACH
1129	MBR ID IS MIS OR INV - ATTACH
1130	MEM DOB MIS OR INV
1131	PROV SIG MIS OR INV
1175	HDR OVRIDE LOC CD INV
1187	HDR RMK CD INV
1188	COB AMT INVALID
1189	CLM TYP MATCH LIST PARM 4463
1190	MCARE ALLW AMT ZERO OR MIS
1191	DV- DIAG CD INV DIAL PRG
1192	DV - FROM SVC DATE IS INVALID
1193	SPECIAL BATCH
1203	RMK CD LINE INV
1301	DV - FDOS AFTER TDOS
1302	DV-TDOS AFTER BATCH D
1303	DV-ACC DT AFTER TDOS
1304	DV-TDOS MIS OR INV
1320	TOTAL CLM CHRG CONFLICT
1330	DV-SUB UNTS OF SERV MIS OR INV
1340	DV-MED DIAG REQ
1361	MCARE PD DT MIS OR INV
1362	MCAR PD DT BFR TDOS/AFT BTC DT
1363	DEDUCT OR COINS ON XOVER CLAIM
1364	SUM DDUCT & COINS GRTER ALL AM
1365	MCARE ALLW AMT CONFLICT
1366	DV-HBRHC MUST USE TOB 711
1369	CT B AND C MUST HAVE EOMB
1370	MOD 1 INVALID
1371	MOD 2 INV
1372	MOD 3 INV
1373	MOD 4 INV
1374	SPENDDOWN ATT REQ RVW
1375	ATT 34 REQ REVIEW
1376	ATT ON ELECTRONIC CLM
1377	ELECTRONIC ATT NOT REC
1500	DV-PLC OF SVC MIS OR INV
1503	1ST CAUSE CD INV
1504	2ND CAUSE CD INV
1505	DIAG REL CD INV
1506	3RD CAUSE CD INV
1521	DV-NET CLAIM CHG CONFLICT
1533	DV-DENTAL CAUSE CODE 1 INV
1534	DV-DENTAL CAUSE CODE 2 INV
1535	DV-DENTAL CAUSE CD 3 INVALID
1539	DV-1ST TOOTH SURF INV

1540	DV-TOOTH/ QUAD NUM INVALID
1541	DV - PROC CD MIS
1542	DV-2ND TOOTH SURFACE INVALID
1543	DV-3RD TOOTH SURFACE INVALID
1544	DV-4TH TOOTH SURFACE INVALID
1545	DV-5TH TOOTH SURFACE INVALID
1553	INV TOB FOR DIALYSIS
1557	DV-DME SER NUM REQ
1558	DV - PROC CODE RESTRIC DIAL
1562	CLAIM CONTAINS SPENDOWN ATTCHM
1600	ADMIT SRC INV
1601	ADMIT TYP INV
1602	DV -REVENUE CD MISSING
1604	DV-ADM DT MIS OR INV
1605	DV-MIS/ INV CVRD/NCVRD DAYS
1606	DV-HOSP UNTS SERV INV
1607	DV-HOSPC SUB UNTS GRTR TOT DYS
1608	DV-ADM HR MIS OR INV
1609	PAT STAT INV
1610	DV-NCVRD CHRG CONFLICT
1611	DV-REV CD 169 CNFLCT
1612	DV-ICD SRG CD NOT IN FDOS/TDOS
1613	DV-INPTNT ADM LESS THAN 24 HRS
1614	DV-TOB MIS OR INV
1615	DV-SERV DATES INVALID
1616	DV-DIALYSIS NOT CVRD OUTPTNT
1617	DV -INV SWNGBD REV CD BILLED
1618	DV-ADM DT AFTER FDOS
1619	INVALID NURS FAC REV CD
1620	DV-DISCHRG HR MIS OR INV
1621	DV - REV CD INVALID FOR DYLS
1622	PSYCH SERV SHRT TERM ACUTE
1623	DV-OP RM AND KDNY TRNS TOGETHR
1624	DV-BRTH CNTR NOT WITH LABOR RM
1625	DV-VAL CDS NOT REV UNITS BILLD
1626	DV-THRP/PSYCH MUST OCC/VAL CDS
1627	DV- RESPITE CARE NOT CVRD NH
1628	DV-LTC UNITS GREATER CVRD DAYS
1629	COINS EXCEEDS AMT ALLOWABLE
1630	DV- INVALID COND CODE FOR DIAL
1631	DV-INVALID DIALYSIS PAT STATUS
1632	ADMIT DIAG MISSING
1633	MCARE DEDUCT GREAT YRLY AMT
1634	DV-INV TOB FOR DIALYSIS SERV
1635	PSYCH SERV SHRT TERM WO ATTCH
1721	DV-1ST COND CD INVALID
1722	DV-2ND COND CD INVALID
1723	DV-3RD COND CODE INVALID
1724	DV-4TH COND CODE INVALID

1725	DV-5TH COND CD INVALID
1726	DV-6TH COND CD INVALID
1727	DV-7TH COND CD INVALID
1731	DV-1ST SUR PROC CD/DT MIS/ INV
1732	DV-2ND SURG PROC CD/DT MIS/INV
1733	DV-3RD SURG PROC CD/DT MIS/INV
1734	DV-4TH SURG PROC CD/DT MIS/INV
1735	DV-5TH SURG PROC CD/DT MIS/INV
1736	DV-6TH SURG PROC CD/DT MIS/INV
1740	DV-1ST OCCUR SPAN CD INVALID
1742	DV-2ND OCCUR SPAN CD INVALID
1745	DV-1ST OCCUR SPAN DT MIS / INV
1746	DV-2ND OCCUR SPAN DT MIS / INV
1751	DV-1ST OCCUR CODE INVALID
1752	DV-2ND OCCUR CODE INVALID
1753	DV-3RD OCCUR CODE INVALID
1754	DV-4TH OCCUR CODE INVALID
1755	DV-5TH OCCUR CODE INVALID
1756	DV-6TH OCCUR CODE INVALID
1757	DV-7TH OCCUR CODE INVALID
1758	DV-8TH OCCUR CODE INVALID
1761	DV-1ST OCCUR CODE/DATE MIS
1762	DV-2ND OCCUR CODE/DATE MIS
1763	DV-3RD OCCUR CODE/DATE MISSING
1764	DV-4TH OCCUR CODE/DATE MIS
1765	DV-5TH OCCUR CODE/DATE MIS
1766	DV-6TH OCCUR CODE/DATE MIS
1767	DV-7TH OCCUR CODE/DATE MISSING
1768	DV-8TH OCCUR CODE/DATE MIS
1801	DV-1ST VALUE CODE INVALID
1802	THE 2ND VALUE CODE IS INVALID
1803	DV-3RD VALUE CD INV
1804	DV-4TH VALUE CD INV
1805	DV-5TH VALUE CD INV
1806	DV-6TH VALUE CD INV
1807	DV-7TH VALUE CD INV
1808	DV-8TH VALUE CD INV
1809	DV-9TH VALUE CD INV
1810	DV-10TH VALUE CD INV
1811	DV-11TH VALUE CD INV
1812	DV-12TH VALUE CD INV
1821	DV-1ST VALUE CD/AMT MIS
1822	DV-2ND VALUE CD/AMT MIS
1823	DV-3RD VALUE CD/AMT MIS
1824	DV-4TH VALUE CD/AMT MIS
1825	DV-5TH VALUE CD/AMT MIS
1826	DV-6TH VALUE CD/AMT MIS
1827	DV-7TH VALUE CD/AMT MIS
1828	DV-8TH VALUE CD/AMT MIS

1829	DV-9TH VALUE CD/AMT MIS
1830	DV-10TH VALUE CD/AMT MIS
1831	DV-11TH VALUE CD/AMT MIS
1832	DV-12TH VALUE CD/AMT MIS
1901	RPLCEMNT/CRDT OF DENIED CLM
1902	CRDT/RPLCMENT TCN MIS OR INV
1903	RPLCMT/CRDT IN PROCESS
1904	MEMBER ID NOT MATCHED
1905	RNDR PROV MATCH NOT FOUND
1906	CLM ALRDY CRDTED/RPLCED
1907	CLM NOT ON HX
1908	FT/PHARM CANT BE CRDTED/RPLCED
1909	CRDT CANT BE ADJUSTED
1910	INV ADJ RSN CODE
1911	CLM OVER 5 YRS/CAN'T REPLACE
2141	MBR NOT FOUND - W/O ATT
2143	MBR NOT ELIGIBLE - NO ATTACH
2146	MBR NOT FOUND - W/ATTACH
2148	MBR HAS PRTL ELIG - W/ATTACH
2149	MBR HAS PRTL ELIG - NO ATTACH
2222	MBR NAME MISMATCH - NO ATTACH
2253	CLM DOS/MBR DOD ERR-W/ATTACH
2254	CLM DOS/MBR DOD ERR-NO ATTACH
2263	XOVER CLM - NO MCARE ON FILE
2266	QMB MBR ELIG 4 MCAR XOVER ONLY
2274	PAT STAT / MBR DOD CONFLICT
2288	MBR NOT ELIG - W/ATTACH
2289	DV-MBR NOT LOCKD 2 PROV ON DOS
2290	DV-MBR INELIG FOR NH ON DOS
2314	DV-CLM NOT CVRD 4 PE
2331	MBR INELIG 4 NH ON DOS - RECYC
2336	PROV NOT AUTH BY NH SPAN-RECYC
2337	PROV NOT AUTH BY NH SPAN
2357	DV-NO HSPC LCKN AVAIL FOR DOS
2702	DOS BFR DOB - WO ATTACH
2703	MBR ON MED REVW
2710	COVERS QMB, PESUMPTIVE OR HOSP
2714	DV-CLM SPN MBR HSPC SEG-WO ATT
2715	CLM SPANS MBR HSPC SEG- W/ATT
2716	DV-MBR ELCT 2 RC HSP SVC-NO AT
2717	DV- DIAL NOT BLD 2 DIAL PROG
2718	DV-IP CLM BLD FOR DIAL PAT
2719	DV-MBR NOT CERT FOR DIALYSIS
2720	DV-DIAL MBR RSTRCTD PROV 4 DOS
2721	DV-CLM DOS OUTSIDE DIAL CERT
2722	DV-MBR IS PROV RSTRCTD
2723	MBR NAM MISS/INVLD - NO ATTACH
2725	PCARE MBRS INELIG 4 THIS COS
2727	HSPC CERTIFICATION PENDING

2728	HSPC CLM SPNS MBR HSPC SEG
2729	CLM SPANS MBR HSPC SEG -NO ATT
2731	MBR IN HMO FOR DOS
2733	MBR LIAB SEG NOT ON FILE -PEND
2734	MBR LIAB SEG NOT ON FILE
2735	MBR NAME MISSING/INV- W/ATTACH
2736	FIRST DAY LIABILITY ERROR W/AT
2737	CLM SPANS MBR HSPC SEG- W/ATT
2740	MBR ELCTD HSPC SVC - W/ATT
2741	RESUBM W/FORM 57 CMS - NO ATT
2742	MBR NAME MISMATCH - W/ATTACH
2743	DOS BEFORE DOB - W/ATTACH
2744	1ST DAY LIAB AMT MISSING
2745	CLM XCDS FILING TIME PER-W/ATT
2746	DV - EXCDS FLNG TIME - NO ATT
2747	DOS EXCEEDS TIME LIMIT
2748	FIRST DAY LIABILITY ERROR
2749	GAPP LOCKIN OR AUTH REQUIRED
2750	INCORRECT BIRTH DATE ON CLAIM
3165	INVALID PROVIDER SPECIALTY COD
3287	OTHER PROVIDER NOT ON DATABASE
3288	REFERRING PROV ID NOT ON DB
3300	PAY TO PROVIDER NOT ON DB
3301	DIAG RELATED CODE INVALID
3302	MCARE ALLOWED AMT ZERO OR MISS
3313	DV-CAT OF SVC NOT DETERMINED
3348	RNDR PROV SUB XOVER CLMS ONLY
3378	REFERRING PROV NOT ELIG ON DOS
3412	DV-REND PROV NOT ON DATABASE
3413	RENDERING PROV IS UNDER REVIEW
3414	RNDR PROVIDER LICENSE EXPIRED
3415	RENDERING PROVIDER LIC EXPIRED
3422	DV- RNDR PROVIDER NOT ENROLLED
3699	PROV NOT ENRLD ELECTRONIC BLNG
3725	NURS FAC PROV INACTIVE DOS/COS
3727	COS INVALID FOR NURS HME XOVER
3728	OUT OF STATE CLAIM, SUSPEND
3729	DV-PROC CODE NOT COVRD FOR ASC
3730	DV-PROC NOT CVD FOR BIRTH CTR
3731	RNDR PROV NOT ENROLLED IN VFC
3732	RNDR PROV NOT AUTH FOR PROGRAM
3733	COS INV FOR MBRS AGE 21 & OVER
3734	PROV NOT ALWD TO BILL TECH CMP
3735	PROV NOT ALWD TO BILL PROF CMP
3736	DV-UNITS BLLD INV FOR RNTAL CD
3737	DV-CLAIM SPANS 2 CALENDAR YEAR
3738	DV-DME SUPPLIES BILLD MONTHLY
3739	PROC Y3005 DOS(S) MUST BE <14
3740	DV-FDOS & TDOS MUST EQUAL EOM

3741	DV-SUB CHARGE IS MISSING/INVAL
3742	DV-PROC CAN'T BE BLLD AFT 6 MO
3743	PROV COS/MBR CARE LVL MISMATCH
3744	TERMINATED PROC - PEND TO DCH
3745	MDEL WAVR/INDP SER NT ON SM DO
3750	EMC SUBM PAY NOT MTCH CALC PAY
3751	LINE REN PROV HV DIFF PAY TO
3752	PAY TO PROVIDER NOT FOUND
4003	DV-PRC CD MUST BE BILLED W/RE
4004	DV-REV CD MST BE BILD W/REV CD
4005	MIN 8 UNITS BILLED W REV CODE
4006	REV UNITS GREATER THAN COV DAY
4007	MCARE REIMB GT MCAID MAX ALLOW
4008	ABOR PROC REQUIRES CERT
4009	DV-CLAIM WITH NO ACCOM REV CD
4010	ABORTION PROCEDURE REQUIRES CE
4011	DV-INECTABLE DRUG PROC MISSING
4017	ESUB W/MED JUST INP ADM-NO ATT
4018	RESUBMIT W/ MEDICAL JUSTIFICAT
4019	FAMILY PLANNING WAIVER EDITD F
4020	HOS BASAE RT MULT NT INST RT
4021	DV- SURG PROC REQ W/ O/R SERV
4025	PEND FOR REVW DUE TO ATTACH(S)
4026	LIABILITY NOT ON FILE, RECYCLE
4027	DV-MBR LIABIL SEG NOT ON FILE
4028	DV-DOS SPAN USUAL CUSTOMARY P
4030	DV-PROC NOT ALLOWED WITH DIA
4032	DV-D.M.E. AND THERAPY NONCOVD
4033	DV-WT TIME CAN ONLY BE BILLED
4034	DV-TRANSP UNITS/MILES NOT
4035	DV-INVALID ANESTHESIA HOURS AN
4036	ANESTHESIA NOT VALID FOR COS/P
4037	DV-ANESTHESIA ON DOCUMENT W/O
4040	DV-PROC CODES INVALID FOR HO
4042	DV-VALID ENCOUNTER CD MUST BE
4044	DV-ICWP PROC NOT ALLOWED ON
4045	DV-INVALID PROC BILLED FOR C
4058	CLAIM NOT VALID FOR DIALYSIS/R
4059	DV-PROC NOT ALLOWED ON CLAIM
4060	DV-VALID ENCOUNTER CD NOT PRES
4061	COVERED DAYS INVALID
4065	DV-MAMMOGRAPHY CERIFICATION NU
4066	DV-MAMMOGRAPHY SERV PERFORMED
4100	DISCHARGE SUMMARY NOT COVERED
4101	DV-PSYCHOLOGY SERVICES NOT COV
4102	TRAUMA/ACCIDENT CLMHAVE VALID
4103	DIAG CODE MISSING
4104	MANUAL PRICE GT SUBMITTED CHAR
4105	DV-DIAG CD NOT VALD AS PRIMARY

4106	RATE REC NOT FOUND
4107	DV-NEGATIVE CALCULA ALLOWED AM
4108	STERILIZATION CONSENT FORM REQ
4109	HYSTERECTOMY FORM REQUIRED, NO
4110	DIAGNOSIS CODE REQUIRES REVIEW
4111	HIGH VARIANCE
4112	LOW VARIANCEANNOT BE BILLED W/
4113	TOTAL CHARGES EXCEED THRESHOLD
4114	CALC ALLOWED CHARGE TOO LARGE
4115	DV-DIAG NOT VALID FOR DOS
4116	DV-MAJOR PROG - SERVICE CONFLI
4117	DV-PROC/AGE CONFLICT
4118	PART B ONLY CLAIM NEEDS MCARE
4119	DIAGNOSIS REQUIRES REVIEW BY F
4120	DV-PROC NOT ALLOWED ON CLAIM
4121	CHARGE DISALLOWED BY MEDICARE-
4122	MEDICARE PAID EQUAL ALLOWED AM
4123	MEDICARE MAXIMUM ALLOWED AMOUN
4124	NO PAYMENT DUE FROM MEDICAID
4200	DV-1ST DIAG NOT ON DB
4201	DV-1ST DIAG NOT COVERED
4202	DV-1ST DIAG/AGE CNFL
4203	DV-1ST DIAG/SEX CNFL
4204	DV-1ST DIAG INVALID FOR COS
4210	DV-2ND DIAG NOT ON DB
4211	DV-2ND DIAG NOT COVERED
4212	DV-2ND DIAG/AGE CNFL
4213	DV-2ND DIAG/SEX CNFL
4214	DV-2ND DIAG INVALID FOR COS
4220	DV-3RD DIAG NOT ON DB
4221	DV-3RD DIAG NOT COVERED
4222	DV-3RD DIAG/AGE CNFL
4223	DV-3RD DIAG/SEX CNFL
4224	DV-3RD DIAG INV FOR CATEGORY
4230	DV-4TH DIAG NOT ON DB
4231	DV-4TH DIAG NOT COVERED
4232	DV-4TH DIAG/AGE CNFL
4233	DV-4TH DIAG/SEX CNFL
4234	DV-4TH DIAG INV FOR CATEGORY
4240	DV-5TH DIAG NOT ON DB
4241	DV-5TH DIAG NOT COVERED
4242	DV- 5TH DIAG/AGE CNFL
4243	DV-5TH DIAG/SEX CNFL
4244	DV-5TH DIAG INVALID FOR COS
4250	DV-6TH DIAG NOT ON DB
4251	DV-6TH DIAG NOT COVERED
4252	DV-6TH DIAG/AGE CNFL
4253	DV-6TH DIAG/SEX CNFL
4254	DV-6TH DIAG INVALID FOR COS

4260	DV- 7TH DIAG NOT ON DB
4261	DV-7TH DIAG NOT COVERED
4262	DV-7TH DIAG/AGE CNFL
4263	DV-7TH DIAG/SEX CNFL
4264	DV-7TH DIAG INVALID FOR COS
4270	DV-8TH DIAG NOT ON DB
4271	DV-8TH DIAG NOT COVERED
4272	DV-8TH DIAG/AGE CNFL
4273	DV-8TH DIAG/SEX CNFL
4274	DV-8TH DIAG INVALID FOR COS
4300	SUBMITTED UNITS EXCEED MAXIMUM
4301	REND PROV/LAB CLASS CNFL
4302	DV-PROC/MOD 1 CNFL
4303	DV-PROC/MOD 2 CNFL
4304	DV-PROC/MOD 3 CNFL
4305	DV-PROC/MOD 4 CNFL
4306	REV CDE 762 MUST USE VLID UNIT
4310	PROC/PLACE OF SERV CNFL
4311	PROC/REND PROV SPEC MISMATCH
4312	PROC/REND PROV TYPE CNFL
4313	PROC/CLM TYPE CNFL
4314	DV-PROC REQUIRES MODIFIER
4315	DV-PROC NOT ON DB
4316	DV-PROC/SEX CNFL
4317	DV-PROC/CAT OF SVC CNFL
4318	DV-PROC NOT COVERED
4319	PROCEDURE REQUIRES REVW
4320	PROC NOT VALID FOR SERV DATE
4321	DV-PROC NOT COVERED
4340	STER FORM REQUIRED W/ATTACH
4342	MUTLTIPLE REVENUE CODE 190 SUB
4343	PROVIDER MISSING CLIA NUMBER F
4344	PROCEDURE CODE REQUIRES REVIEW
4345	PROC REQUIRES MANUAL PRICE
4349	DV-TOOTH/QUADRANT NBR REQD
4350	DV-TOOTH SURFACE REQD
4351	DV-PROC/TOOTH/QUAD NBR CNFL
4352	DV-PROC RATE DOES NOT HAVE VAL
4361	DV-IND LAB MUST BILL
4362	PROCEDURE CODE REQUIRES REVIEW
4363	REVIEW HYSTERECTOMY ATTACHMENT
4365	DV-GROUND AMBULANCE SERVIC REQ
4501	ICD-9 PROCEDURE CODE REQUIRES
4502	DV-REV NOT ON DB
4503	DV-REV/PROV TYPE CNFL
4504	DV-REV/TYPE OF BILL CNFL
4506	DV-REV CD / COS CONFLICT
4507	REVENUE CODE REQUIRES REVIEW B
4508	DV-REV CD MUST BE 490 FOR ASC

4509	SERVICE NOT PAYABLE FOR LTC ME
4510	DV-REVENUE CD / SEX CONFLICT
4520	DV-9TH DIAG NOT ON DB
4521	9TH DIAG NOT COVERED
4522	DV-9TH DIAG/AGE CNFL
4523	DV-9TH DIAG/SEX CNFL
4524	DV-9TH DIAG INVALID FOR COS
4530	DV-ADM DIAG CD NOT ON DATA BSE
4531	DV-ADM DIAG/AGE CNFL
4532	DV-ADM DIAG /SEX CNFL
4600	DV-1ST ICD-9-CM SURG PROC NOT
4601	DV-1ST SURG PROC NOT COV
4602	DV-1ST SURG PROC/SEX CONFLI
4610	DV-2ND SURG PROC NOT ON
4611	DV-2ND SURG PROC NOT COV
4612	DV-2ND SURG PROC/SEX CONFLI
4620	DV-3RD SURG PROC NOT ON
4621	DV-3RD SURG PROC NOT COV
4622	DV-3RD SURG PROC/SEX CONFLI
4630	DV-4TH SURG PROC NOT ON
4631	DV-4TH SURG PROC NOT COV
4632	DV-4TH SURG PROC/SEX CONFLI
4640	DV-5TH SURG PROC NOT ON
4641	DV-5TH SURG PROC NOT COV
4642	DV-5TH SURG PROC/SEX CONFLI
4650	DV-6TH SURG PROC NOT ON
4651	DV-6TH SURG PROC NOT COV
4652	DV-6TH SURG PROC/SEX CONFLI
4653	DV-SUM ACCOM DAYS NOT EQ COVER
4701	DV-SERV AREA RADIOLOGY/PATHOLO
4702	REVIEW PHYSICIAN STATEMENT FOR
4703	DV-TOTAL OF REPAIR IS GREATER
4704	DV-PURCHASE PROC CODE REQUIR
4705	DV-PROC CODE BILLED IS NOT A
4706	DV-VISION CARE SRVICES NON-COV
4707	PURCHASE PROCEDURE CODE REQUIR
4708	DV-NON EMER TRANS SER CD INVAL
4709	NET MILEAGE GREATER THAN 350
4710	DV-LABOR PROC CANNOT BE BILLED
4711	DV-PURCHASE PROC CODE REQUIR
4712	DV-PURCHASE PROC CODE REQUIR
4713	CLAIM LIMITED TO ONE DATE OF S
4714	DV-CLAIM SPANS 2 STATE FIS YEA
4715	DV-PROC CODE Y0407 IS NOT AL
4716	DV-PROC CODE Y0412 ONLY ALLO
4717	DV-SERV DATES SPAN MORE THAN O
4718	DV-E0570NU OR E0600NU REQUIRED
4719	PROC CD INVALID FOR COS
4720	REVIEW PHYSICIAN STATEMENT FOR

4721	DV-LABOR PROC CD CANT BE BILL
4801	HOSPICE CONSULTANT PHYSICIAN C
4802	DV-FIRST DRG INTERIM BILLS
4804	DV-DRG RECORD NOT ON DB
4805	DV-DRG PRICING SPAN NOT FOUND
4806	DV-DRG WEIGHT IS MISSING
4807	DV-DRG CLM QUALIFIES OUTLIER
4820	DV-DRG RC 1 DIAG NT PRIN DIAG
4821	DV-DRG RC 2 PRIN D DX MEET DRG
4822	DV-DRG RC 3 - INV MEMBER AGE
4823	DV-DRG RC 4 - INV MEMBER SEX
4824	DRG RC 5 - INV DISCH STAT
4825	DV-DRG RC 6 - ILLOG PRIN DIAG
4826	DV-DRG RC 7 - INV PRIN DIAG
4902	DV-REV NOT A BENEFIT SERV DAT
4903	DV-REV NOT VALID FOR SERV DT
4904	REV REQUIRES MANUAL REVIEW
4905	DV-REV CODE MUST BE LABORATOR
4906	DV-HCPCS CODE MUST BE LAB
4907	REV REQUIRES MANUAL PRICE
4908	PROC REQUIRES PRICE
4909	DV-NON-PATIENT, BILL LAB ONLY
5000	SOURCE AUTHORIZATION REQUIRED
5001	DV-WAV SVC NRS PROC CODS ONLY
5002	SURGICAL PROC REQ PA IN NRS HM
5004	CHRG CANNOT EXCEED 200 W/O PA
5005	LI CHRG CANT EXCEED 200 W/O PA
5006	PA RQUIRED WHEN EXCED 150 MILE
5007	HOSP OUTPAT EMER REV REQUIR PA
5008	PA REQUIRD HYPER OXYGEN THRAPY
5012	AUTH HEADER STATUS SUSPENDED
5013	MISMATCH CLM PROC CD AND PA CD
5014	AUTH LI STATUS SUSPENDED
5015	AUTH LI STATUS DENY
5017	PRECERT IS REQUIRED
5018	MBR ID DOES NOT MATCH PA
5020	PA IS DENIED OR SUSPENDED
5021	AUTHORIZATION PROVIDER CNFL
5022	DV-CLM DOS NOT WITIN PA EFF DT
5024	AUTHORIZATION MODIFIER CNFL
5025	AUTH/TOOTH NUM CNFL
5026	AUTH/TOOTH SURF CNFL
5027	PA RQUIRED OUT-STATE W/ ATTACH
5028	PA RQUIERD OUT-STATE NO ATTACH
5029	AUTH ID NOT FOUND
5030	PROC CD DOES NOT MATCH PRECERT
5031	PRECERT FOR OUTPATIENT ONLY
5036	AUTH ID IS MISSING
5037	AUTH NOT FND CLM HAS ATTACH

5040	GBHC REFERRAL INVALID
5041	CLM COS DOES NOT MATCH PA COS
5750	MEMBER HAS PRIMARY INSURANCE C
5751	CASUALTY RESOURCE AVAILABLE
5753	COB WORKERS COMPENSATION
5754	COB TRAUMA
5755	COB BLACK LUNG
5756	PAYMENT IS INSUFFCIENT
5757	NO RESOURCE ON FILE
5759	COB ATTACHMENT ON CLAIM
5761	MEMBER HAS PRIMARY INSURANCE C
5762	HMO COVERAGE
5764	MEMBER IS MCARE PART A ELIGIBL
5765	MEMBER IS MCARE PART B ELIGIBL
5766	MEMBER IS MCARE PART A ELIGIBL
5767	MEMBER IS MCARE PART B ELIGIBL
6000	COS 840 AND 200 CANT BILL SAME
6002	PASRR SERVICES DUPLICATE
6003	BILAT & UNILAT CANT BILL SAME
6005	DUP HEALTH CHK PRC NT ALLOWED
6006	COMP HCHK SCREEN NT ALWD S DOS
6007	DV-PROC NT ALWD SM DT HCHK SCR
6008	SVC FOR MEM PD TO ANOTHER PROV
6010	SUSP DUPE - CIS VS OUT MTL HLT
6011	PROV HAD PREV KNWLDG OF ELIG
6012	SUSPECT CROSSOVER DUPLICATE
6013	VSTS/H&P/CONSULT IN SURG REIMB
6014	VSTS/H&P/CONSULT IN SURG REIMB
6015	DOS ON ANESTHESIA ALREADY PAID
6016	PMT REDCD-HOSPL LEAV EXC 7DAYS
6017	PMT REDCD-PLAN LEAVE LMTS EXCD
6018	NEONAT,EMER...NT REIMB SAMEDAY
6019	REPEAT SURG PROC WITHIN 2 DAYS
6020	ANEST FOR DOS ALRDY PD BY DMA
6021	CLM DUPE OF PD HIST/CURR XOVER
6022	PSSBL MRWP DUPE AGNST HOSPCE..
6023	SVC NT ALLWD DURING MEM HOPITL
6024	SUSP DUPE HOME HLTH & COMMCARE
6025	SUSP DUPE CLAIM FOR PROF FILE
6028	STERILIZATION/HYSTER-PEND RVW
6029	CASE MAN NOT SAME MO AS ANOTHR
6030	MEDICARE DEDUCT EXCDS ALLWBLE
6031	COS 910 OVERLAPS DOS OF COS070
6033	THERAPY/CIS DUPLICATE
6034	DUPLICATE DETAIL SERVICE DATE
6035	COS FOR ORIG PD CLM NO MATCH
6036	THER/CHLD SVC INTRVENTION DUP
6037	THER/CHLD SVC INTRVENTION DUP
6038	INPAT INTRM CLM REPLC NOT VALD

6039	PYMT REDUCED-ALT L LMT EXCEED
6051	PASRR SERVICES DUPLICATE ALLOW
6053	SVC PAID TO ANOTHER PROV - RPT
6054	PSBL MRWP DUPE AGAINST HOSP,MH
6055	SVC NOT ALWD DURING HOSP -RPT
6056	COS900 SAME DOS COS010,680,681
6065	PAY LESSER WHEN 2 OR MORE BLLD
6066	PAY LESSER WHEN 2 OR MORE BLLD
6070	COMP VST MUST BE PD BFR Y0197,
6071	FLLW-UP CARE NT CVR WO PD SURG
6072	ESCORT NT ALLWD WO TRANSPORT
6086	INCMPL HEALTH CHK EXM-NO BLDLV
6087	ESCORT W MINIVAN MST BE SM DOS
6088	CLAIM PENDING REVIEW BY DMA
6089	MULTI SURG WI 2 DAYS -PODIATRY
6091	ONE COMP SCREEN ALLWD PER SEQ
6093	SUSPECT DUPE HOMEHLTH & COMCAR
6096	HLTHCHK SCRN NT SME DOS INTPER
6097	INTER VIS/HEAR SME DOS HLTHCHK
6098	DISP FEE W/HIST OF OPTICAL DEV
6099	Y5150 MUST BE PD BFR Y5151...
6100	D0120 ALLWD ONCE WHEN D0110 PD
6101	EXACT DUPLICATE
6102	POSSIBLE DUPLICATE
6103	POSSIBLE CONFLICT
6201	POST-OP CARE BY NON-OPER PROV
6202	PRE-OP CARE BY NON-OPER PROV
6203	NEONAT,EMER...NT REIMB SAMEDAY
6204	TRANSFER LOGIC - REPROCESS CLM
6205	MEM READMTD WI 72 OF DISCHARGE
6206	HOME HEALTH VISITS NOT EXHSTD
6207	DUPLICATE GBHC CLAIM
6208	NORM HCK SCRN NT ALWED W/ PROC
6209	OFC VST NT ALWD W/ABN HCHK PRC
6210	S4502 ALLWD W/ Y0186 - Y0189
6211	COS 430-1,740,480,790 NT W/AHC
6212	COS 430-1,740,480,790 NT W/AHC
6500	PROC DONE ONLY ONCE PER DAY
6501	BILATERAL PROC DUPLICATE
6502	UNI/BILATERAL PROC DUPLICATE
6503	ASST SURGEON NEVER ALLOWED
6504	EXPERIMENTAL PROCEDURE
6505	MUTUALLY EXCLUSIVE PROC DENIED
6506	MEDICAL VISIT PROCEDURE
6508	PROC NOT VALID WITH AGE
6509	INTENSITY OF SERVICE
6510	DUPLICATE PROCEDURE
6511	REPL WITH ESTABLISHED PROC
6512	DIAG TO PROC COMPARISON

6513	UNDEFINED PROCEDURE CODE
6514	RE-BUNDLE PROCEDURE
6515	COSMETIC PROCEDURE
6516	UNLISTED PROCEDURE
6517	COSMETIC AND UNDEFINED
6518	OBSOLETE PROCEDURE
6519	PROC NOT VALID FOR MALE
6520	PROC NOT VALID FOR FEMALE
6521	PROC ONLY FOR MEMBER LESS 1 YR
6522	PROC FOR MEMBER 1 TO 17 YEARS
6523	PROC ONLY MATERN MEM 12-55 YRS
6524	PROC ONLY MEMBERS 14YRS OLDER
6525	ASST SURGEON SOMETIMES ALLOWED
6526	PROF COMPONENT MOD NOT VALID
6527	CLAIMCHECK SYSTEM ERROR
6528	CLAIMCHECK PROCESS CONTROL
6529	INCIDENTAL PROCEDURE CODE
6530	NCCI EDIT
6531	PROC DELETED FROM CLAIMCHECK
6532	PROC NOT DEFINED TO CLM CHK
6533	CLAIM CHECK HISTORY ADJUST
7000	ALLOW ONLY 6 PER ROLLING YR
7001	ALLOW ONLY 2 PER YEAR
7002	ALLOW 1 EVERY 2 YRS
7003	Y3334 LMTD TO 6 UNITS PER LIFE
7004	Y3333 & Y3334 ONE PER MONTH
7005	Y3339 & Y3316 LIMIT 960 PER YR
7006	TOTAL AMT PD Y3338 EXCEEDS
7007	TOTAL AMT PAID Y3340 EXCEEDS
7008	ALLOW 24 PER ROLL YR
7009	PROCS LMTD TO 2 UNTS PER YR
7011	PROC 92508 LIMIT 120 PER YR
7012	PROC 92510 LIMIT 8 PER YR
7013	PROC CODES LIMIT 480 PER YR
7014	PRC LMTD TO 40 UNTS PER CAL MO
7015	PROC 92586 LIMIT 3 PER YR
7016	PROC Y3342 LIMIT 1 PER MONTH
7017	PROC Y3341 LIMIT 10,000 PER YR
7018	PROC Y3341 LIMIT 1 PER MONTH
7019	ONLY 20 ALLOWED PER MONTH
7020	ONLY 10 ALLOWED PER MONTH
7021	1 UNIT EACH ALLOWED PER MONTH
7022	ONLY 2 EACH ALLOWED PER MONTH
7023	ONLY 3 ALLWOED PER MONTH WO PA
7024	4 EACH ALLOWED PER MONTH WO AP
7025	5 ALLOWED PER MONTH WO AP
7026	ALLOW 31 PER MONTH WO PA
7027	Y4081 Y4082 Y4083 60 HRS P/M
7028	Y4081 Y4082 Y4083 360 PER YR

7029	TOTAL PAID AMT EXCEEDS PER M&L
7030	LIMIT 24 PER DATE OF SERVICE
7031	31 PER MONTH WO PRIOR APPROVAL
7032	200 PER MONTH WO PRIOR APPROVA
7033	2 PER ROLLING YR WO P APPOVAL
7034	LIMIT 2 PER YR UNLESS P APPROV
7035	LIMIT 120 PER YR UNLESS PA
7036	120 UNITS PER YR UNLESS PA
7037	ONLY 4 ALLOWED PER YR WO PA
7038	6 ALLOWED PER YR WO PA
7039	ALLOW 124 PER MONTH WO PA
7040	J1630 & J1631 ALLOWED PER MON
7041	ONLY 100 ALLOWED PER MON WO PA
7042	Y0247 LIMIT 2 PER MONTH
7044	LIMIT AUDIT PSYCHO&PSYCHI SVCS
7045	LIMIT 10 UNITS PER MONTH
7046	LIMIT 125 PER YR UNLESS PA
7047	LIMIT 2 PER YR UNLESS PA
7048	LIMIT 4 PER YR UNLESS PA
7049	LIMIT 5 PER YR UNLESS PA
7050	LIMIT 6 PER YR UNLESS PA
7051	LIMIT 9 PER YR UNLESS PA
7052	LIMIT 10 PER YR UNLESS PA
7056	LIMIT 360 PER YR UNLESS PA
7057	ONLY 1 PROC PER MEMBER D O S
7058	ALLOWED ONCE PER LIFTIME
7059	LIMIT TO ONE PER ROLLING YR
7060	EXCEEDS MAX AMT PER YR WO PA
7062	CATARACT FLLW-UP EXCD 1 14DAYS
7064	LIMIT 12 PER DATE OF SERVICE
7065	Y3019 Y3026 Y3020 LIMIT 155 HR
7066	Y3019 LIMITED480 HRS PER YR
7068	TOT PD AMT CANNOT EXCD 10,400
7069	Y3824 REIMBURSED ONE PER WK
7070	PD AMT Y3321 CANNOT EXCD 3,120
7072	LIMIT 24 PER DATE OF SERVICE
7074	ALLOWED ONE PER FIVE YR
7075	TOT AMT PD Y3322 EXCEEDS FY L
7076	TOT PD AMT CANNOT EXCD 13,474
7077	ALLOWED TWO PER LIFTIME
7079	Y3324 LIMIT 1 MEMBER LIFETIME
7083	DEN'L FM RADIOGRAPH 1 IN 3 YR
7086	Y5151 Y0188 Y5101 ONLY 3 P Y
7087	90712 ALLOWED 6 PER LIFETIME
7088	Y5400 OR Y5401 ALLWD 1 LIFETIM
7089	LIMIT 1 90 DZS DIAGNO 585 586
7090	LIMIT 1 P M W/DIAG 585 586
7091	FAMLY PLAN LIMIT 1 P YR
7092	Y3191 Y3192 Y3193 Y3194 L 1 M

7094	EYEGLS FRAM EXCEED ANNUL LIMIT
7095	LENS EXCEEDS ANNUAL LIMIT
7098	LENS EXCEEDS ANNUAL LIMIT
7099	EYEGLASS FRAMES EXCEED ANN LIM
7101	LENS PAIR EXCD ANN LIMIT
7102	LENS PAIR EXCD ANN LIM < 21
7103	ONLY 1 FOLLOW-UP VIST ALWD MON
7104	Y0196 LIMIT 1 PER 180 DAYS
7105	Y0199 LMT 1 PER 280 DYS PSTPAR
7106	Y0198 LMT 2 PER 280 DYS EXT FU
7107	PROC MAY BE PERF 1 IN LIFETIME
7108	E0183NU & E0178NU ALLWD 1 PER2
7110	LIFETIME LIMIT HAS BEEN EXCD
7116	SEE PROC CODE 1 PER MONTH
7117	GRP TRAIN/COUNSL Y3015 LMT 60
7118	PROC Y3308-Y3315 MAX 312HRS FY
7119	NORPLANT SVCS LIMIT 2 PER 5 YR
7120	ONLY 1 BILL REV CD 942 ALLW YR
7121	PROC ALLWD 1 PER 280 DAYS
7122	PROC ALLOWED 1 PER YEAR
7125	PROC 90801 ALLW 1 PER YR
7126	PROC ALLD 10 HRS (20 UNITS) MO
7130	LMT HRS FOR CHILD & ADOL DAY
7131	PROCS NT ALLWD W/I 14 DAYS
7132	PROC LMT 6 UNTS PER MEM PER LT
7133	PROC Y5150 Y0186 Y5100 ALLWD 1
7136	PROC LIMIT 1 PER MEMBER PER YR
7137	PROC LIMIT 1 EVERY 6 MONTHS
7138	PROC LIMITED 1 PER MO PER MEM
7139	PROC LIMIT 1 EVERY 3 MONTHS
7142	INTENS DAY TREAT Y3001 LMT 180
7144	PROC Y4040 Y4091 ALLWD 1 IN MO
7146	PROC Y4015 OR Y4030 ALLWD 1 B
7148	PROC Y4041 ALLWD 1 PER YR
7149	NEW PAT VST LMT 1 EVERY 3 YRS
7152	PROC Y4033 ALLWD 1 PER MONTH
7153	PROC Y3304 LMT 960 PER FY
7154	Y3300 Y3301 Y3302 Y3303 > 31
7155	PROC LIMIT 240 PER FISCAL YR
7156	PROC Y3316 LIMIT 80 HRS PER MO
7157	90160-TC 99341-TC LMT 2 IN 280
7158	PROC Y3020 LMT 1860 UNTS YR
7160	HIB VACCINE LIMIT TO 4 PER YR
7161	ACT THERAPY Y3011 LMT 360 MO
7162	CRISIS MGMT Y3013 LMT 120 MO
7163	PROC LIMIT 1 EVERY 6 MONTHS
7164	AMBULATORY DETOX Y3005 LMT 960
7165	ONE EXTRACTION ALLOWED PER TOO
7167	PROC ALLWD 1 PER 24 MONTHS

7168	PROC Y5350-01 Y5351-01 LMT 1
7171	REPAIRS FOR DME EXCD 400.00 YR
7173	HOME DELIVERED MEALS LMT 14 WK
7178	PSYCHIATRIC SVC LMT 1 PER DOS
7185	DAY HABIL SVCS LMT 240(1440HR)
7186	Y5352 Y5353 LIMIT 1 PER LIFE
7187	DALY LMT REACHD FOR PRC CD
7188	PROC D2710 D2751 LMT 1 PER 3YR
7189	NURS ASSES & HLTH SVCS LMT
7190	NO SEAL ALLWD IF TOO EXTR
7193	ALLWD 2 PER DAY & NO MORE 2 WK
7194	1 CHILDBIRTH ED PROV PER CAL Y
7195	1 CHILDBIRTH ED PROV PER CAL Y
7196	DEPO PROVERA INJECTION LMT 5
7197	CONDOMS LMT TO 14 UNTS 365 DAY
7198	HEARING AID NOT REPLAC WI 3 YR
7205	PROC LIMIT TO 1 PER YR
7206	PROC LIMIT TO 1 PER 90 DAYS
7207	PROC LIMIT 20 UNITS PER MONTH
7208	MEM EXCD 10 UNT LMT PSYCH SVCS
7217	80055-01 80055-26 ON SAME DOS
7219	80058 NOT ON SAME DOS AS 82040
7220	93510 INCLUDED IN PROC 93526..
7221	SVC INCL IN GLOBAL OB FEES
7222	80061 NOT SAME DOS AS 82465...
7223	80072 NOT SAME DOS AS 84450 ..
7224	80090 NOT SAME DOS AS 86644
7225	93526...NOT BILLD W/ 93510...
7226	80091 NOT SAME DOS AS 84436...
7228	AMT PD Y3337 EXCD MEM SFY LMT
7233	PA REQ AFTER ONE MO RENTAL
7239	RESTOR SVCS NC ON EXTRCTD TOOT
7240	RSTOR SVC NO-COV ON EXTR TOOTH
7245	PROC CDS RESTRICT TO SNGL PROV
7246	HOME HEALTH VSTS NOT EXHAUSTED
7247	EMGY-OPEN PULP CHAMB NT ALLWD
7249	EVAL/MAN SVCS NOT W/PSYCH SVCS
7250	EXTRA-CAPSULAR SME DT AS INTRA
7251	INTRA-CAPSULAR SME DT AS EXTRA
7252	Y4240 OR Y4260 MST BE SAME DOS
7256	SUSP PROC PREV PD WI 30 DAY PD
7257	ASST SURG FEE PD FOR SAME PREG
7258	PROC RESTRICTED TO STATE LAB
7259	FTL MON W/I 280 DYS OF DELIVER
7260	DELVRY W/I 280 DAYS OF FTL MON
7261	INVALID DIAGNOSIS FOR PROC
7262	DIAG CDE NOT COV OPTOMETRIC SV
7263	COV LMT TO DIABETES/PERI VASCU
7350	MEMB CNNOT RECEIVE SVCS SIMULT

7351	Y4081 Y4085 Y4086 ARE NT ALLWD
7352	92586 CNNOT BE BLLD W/ 92585
7353	92587 CNNOT BE BLLD W/ 92588
7354	Y3341 NT ALLWD ON SAME/OVERLAP
7355	Y3307 NT ALLWD ON SAME/OVERLAP
7356	Y3343 NT ALLWD SAME DOS Y3300
7357	Y3300 NT ALLWD ON SAME...
7358	Y3344 NT ALLWD ON SAME/OVERLAP
7359	Y3327-30 & Y3332 NT SAME DOS
7360	Y4081 Y4082 &Y4083 NT SAME DOS
7361	Y4070 & Y4071 NT SAME DOS
7362	IND CARE NT ALLW SAME DOS HH
7363	HME HLTH NT ALLW SAME DOS IC
7364	J1630 & J1631 ALLWD 6 PER MO
7367	MULT UNTS AUTO TESTS NOT ALLWD
7368	MULT UNTS AUTO TESTS NOT ALLWD
7369	99238 99431 99432 99435 NT ALW
7370	99431 99432 99435 NOT ALLSD
7373	20100-20103 NT ALLWD SAME DOS
7374	32100-32160...NT ALWD SAME DOS
7375	Y3823OR Y3824 NT ALLWD SAME MO
7376	D0130...NT ALWD SAME DOS D0110
7377	D0130...NT ALWD W/Y0035O D0140
7379	DENT OFCEXAM NT COVRD SAME DOS
7380	DENT OFCEXAM NT COVRD SAME DOS
7381	Y3823 Y3824 NOT REIMB SAME MOS
7382	Y3823 HAS BEN REIMB FOR MO SVC
7383	Y0035..NT ALLWD SAME DOS D0110
7384	Y0035..NT ALLWD SAME DOS D0130
7385	ALLWD 1 PER 5 YRS (SUSP CLAIM)
7386	93510 93543 & 93545 ON SME DOS
7387	MODEL WAIV DAYC SAME DOS AS HH
7388	HH SAME DOS AS MODEL WAIV DAYC
7391	HIST NORM NWBRN INF NT W NICU
7392	1 HPTL ADM/VST/SVC ALLWD DOS
7393	HPTL ADM/VST NT CVD W PSYCHSVC
7394	1 HPTL ADM/VST/SVC PER DOS
7396	1 FILL ALWD PER TOOT SAME DOS
7397	CASE MGMT SVC SAME DOS PRV PD
7398	Y3317 Y3318 NT ALW SAME CAL MO
7399	OFC VST& REFRAC EX NT SAME DOS
7400	REFRAC EX &OFC FST NT SAME DOS
7401	84436 84479 NOT ALWD W 80091
7402	ALLWD 1 PER 280 DAYS (SUSPEND)
7403	Y0600 NT ALLWD W/PROC 90830-52
7404	REV 821 831 NT ALLWD SAME DOS
7405	REV 831 821 NT ALLWD SAME DOS
7406	PROC CNNOT BE BLLD IN SAME MO
7407	NEONATAL INTENSIVE CARE REIMB

7408	HH SVCS NT ALWD W MDL WAIVER
7409	90830-52 NT ALLWD W/ Y0600-01
7411	Y3305&Y3329 NT ALLWD W/ Y0704
7412	Y0704 NT ALLWD W/ Y3305&Y3329
7415	MULT OFC VST NT ALLWD SAME DOS
7416	PROC CNNOT BE BLLD IN SAME MO
7419	12 FAM PLN VST ALLWD FY (SUSP)
7420	HM DEL MEALS &ALT LIV NT ALWD
7421	CLAIM FOR THIS DOS PREV PD
7422	INDIV LAB NT ALLWD W LAB PANEL
7426	NO PMT Y0403-Y0405 FOR SME DOS
7427	Y3001...CNNOT BE BLLD SAME DOS
7428	PROC PREV PAID W/IT 3 DAY PER
7429	CNNOT RCV > 1 UNT PER CY(SUSP)
7431	PROC CNNT BE BLLED W/I 14 DAYS
7432	ECMO NICU & CCU PROC NT COMBO
7436	GLOBAL FEE PD FOR SAME PREG
7437	GLBL&ITEM FEE NT ALWD SME PREG
7440	PROC PREV PD W/I 30 DAY PERIOD
7441	Y4240 NOT ALLWD SAME DOS Y4260
7442	Y4260 NOT ALLWD SAME DOS Y4240
7443	ALLW ONLY REIMB IND UNTS WO PA
7444	HM BLD GLUC MON&NEB NT RPR DME
7445	82040..NT ALLWD SAME DOS 80058
7446	86644 NT ALLWD SAME DOS 80090
7447	IMMUN PRC ALLWD 8 TIMES LIFETM
7451	PROC LIMIT TO ONE UNIT PER DOS
7453	Y3031 CANNOT BE BILLED SAME DY
7454	COM MNTL HLTH Y3011 NT SME DOS
7455	COM MNTL HLTH Y3020 NT SME DOS
7456	COM MNTL HLTH Y3023 NT SME DOS
7457	COM MNTL HLTH Y3024 NT SME DOS
7458	COM MNTL HLTH Y3005 NT SME DOS
7459	COM MNTL HLTH Y3025 NT SME DOS
7460	COM MNTL HLTH Y3018 NT SME DOS
7461	COM MNTL HLTH Y3030 NT SME DOS
7462	COM MNTL HLTH Y3036 NT SME DOS
7463	COM MNTL HLTH Y3028 NT SME DOS
7464	COM MNTL HLTH Y3014 NT SME DOS
7465	COM MNTL HLTH Y3015 NT SME DOS
7466	COM MNTL HLTH Y3013 NT SME DOS
7467	COM MNTL HLTH Y3016 NT SME DOS
7468	COM MNTL HLTH Y3001 NT SME DOS
7469	COM MNTL HLTH Y3033 NT SME DOS
7470	COM MNTL HLTH Y3012 NT SME DOS
7471	COM MNTL HLTH Y3006 NT SME DOS
7472	COM MNTL HLTH Y3010 NT SME DOS
7473	COM MNTL HLTH Y3027 NT SME DOS
7474	COM MNTL HLTH Y3022 NT SME DOS

7475	COM MNTL HLTH Y3007 NT SME DOS
7476	COM MNTL HLTH Y3032 NT SME DOS
7477	COM MNTL HLTH Y3008 NT SME DOS
7478	COM MNTL HLTH Y3034 NT SME DOS
7479	COMMUNITY MENTAL
7480	COM MNTL HLTH Y3026 NT SME DOS
7481	COM MNTL HLTH Y3009 NT SME DOS
7483	Y0186 CNT BLL SDOS Y0187...
7484	Y0187..CNNT BLLD SDOS AS Y0186
7485	SPCL ED IEP REVIEW
7486	SPCL ED TRI IEP RVW 1 IN 24 MO
7487	SPECIAL EDUCATION TRANSPORTATI
7488	Y3343 LMT TO 20000 PER SFY
7489	ONLY 1 Y0400 Y0405 Y0410 ALLWD
7490	Y3342 NOT ALLWD W/PROC BILLED
7491	BLLD PROC NOT ALLWD WITH Y3342
7494	M0064 LIMITD TO 1 EVERY 14 DYS
7495	PROC LIMITED TO 1 PER LIFETIME
7496	MDLWAIV HCARE NT ALWD SAME DOS
7497	AMBUL - EXCESS 2 TRIPS PER DOS
7499	BITEWNG/PERI NT ALWD W PANDREX
7500	PROC LMT TO 2 PER MEMB CAL YR
7501	RENT AMTS TOT EXCD PURCH PRICE
7502	MORE THAN 6 RESERVE DAYS WO PA
7503	MORE THAN 65 RESERV DAYS WO PA
7504	Y3825 REIMBURS ONLY 1 W/OUT PA
7506	PROC NONCOVERED FOR DIAGNOSIS
7507	ANTEPART CARE NT ALLWD W ABORT
7508	MAX REIMB FOR EQUIP 10 MO RENT
7509	BRACHYTHER INCLDS HOSP ADM&VST
7510	PROC 01960..NT ALLWD SAME DOS
7511	LIMIT MULTIPLE DRUG SCREENS
7512	LIMIT SCREENING SIGMOIDOSCOPY
7513	LMT 1 PER CALMO W/DIAG 585 586
7514	85021 NT ALLWD W/COMPONENT CDS
7515	85022 NT ALLWD W/COMPONENT CDS
7516	85023 NT ALLWD W/COMPONENT CDS
7517	85024 NT ALLWD W/COMPONENT CDS
7518	85025 NT ALLWD W/COMPONENT CDS
7519	85027 NT ALLWD W/COMPONENT CDS
7520	85031 NT ALLWD W/COMPONENT CDS
7521	1 85021-85031 CN BE PD PER DOS
7522	PROC 85022-01..NT ALLWD SM DOS
7523	PROC 85022-01..NT ALLWD SM DOS
7524	PRCS 82465...NT ALLWD W/ 80061
7525	PROC 80061 NT ALLWD W/82465...
7526	PROC 84450...NT ALLWD W/ 80072
7527	PROC 80072 NT ALLWD W/84450...
7528	PROC 86644...NT ALLWD W/ 80090

7529	PROC 80092 NT ALLWD W/84436...
7530	HSPL ADM/VST NT ALWD W/PSYCHSV
7531	DISALW HOSP ADM/VST PD AS PSYC
7532	MED VST NT ALLWD W/INI/ANN VST
7533	MED VST NT ALLWD W/INI/ANN VST
7534	RES TRNG SVC NT ALLD W/RESPITE
7535	RES TRNG SVC NT ALLD W/RESPITE
7536	D9220 NT ALLWD W D9240 D9241..
7537	D9220 NT ALLWD W D9240 D9241..
7538	REV 841 845 849 NT ALWD W/DIAL
7539	REV 841 845 849 NT ALWD W/DIAL
7540	REV 841 NT ALLWD W 845 OR 849
7541	REV 841 NT ALLWD W 845 OR 849
7542	D2940 NT ALLWD W/PROC BILLED
7543	PROC BILLED NT ALLWD W/D2940
7544	SUTURING NT ALLWD W/ PROC
7545	SUTURING NT ALLWD W/ PROC
7546	NH ROOMBOARD CNT BLL W IP HSPC
7547	GEN IP HSP CNNT BLL W/ NURS HM
7548	COMP VST Y0186 SC LMT 1 PER LF
7549	PROC Y0187 SC LIMITED TO 40 CY
7550	PROC CD Y0187SC LMTD 4 PER DAY
7568	1 UNIT ALLWD PER 3 ROLLG YRS
7801	PROC CD D0110/D0150 1 PER CLYR
7802	DENT EXAM AFTR HRS LMT 2 IN CY
7803	DENT EXAM DURG HRS LMT 2 IN CY
7804	DENT EXAM CHILD EXCDS 2 PER CY
7805	PROC D1203 TWICE PER CLYEAR
7806	FULL MOUTH RADIOGRAPH/PANO
7807	TOOTH 02 LMT 1 SEALT PER 4 CY
7808	TOOTH 03 LMT 1 SEALT PER 4 CY
7809	TOOTH 14 LMT 1 SEALT PER 4 CY
7810	TOOTH 15 LMT 1 SEALT PER 4 CY
7811	TOOTH 18 LMT 1 SEALT PER 4 CY
7812	TOOTH 19 LMT 1 SEALT PER 4 CY
7813	TOOTH 30 LMT 1 SEALT PER 4 CY
7814	TOOTH 31 LMT 1 SEALT PER 4 CY
7815	DENT X-RAY EXCD LMT $100 IN CY
7816	DENTAL PROSTH NT REPL FOR 3 CY
7817	LOWER DENT ADJ LMT TO 2 PER CY
7818	DENTAL PROSTH NT REPL FOR 3 CY
7819	UPPER DENT ADJ LMT TO 2 PER CY
7820	HEMODIAL/PERI DIAL RETRNG LMT
7821	ELECTROCONV SHK THRPY LMT 12
7822	12 FAM PLAN LAB ALLWD PER SFY
7823	12 FAM PLAN VST ALLWD PER SFY
7824	FIT & DISP SVC EXCDS ANL LIMIT
7825	FIT & DISP SVC EXCDS ANL LIMIT
7826	HEMO DIAL RETRANG EXCD LMT 1

7827	HOME HLTH VSTS EXCD 75 CY LMT
7829	12 NURS FAC VST ALLWD PER SFY
7830	12 OFFICE VIS ALLWD PER CAL YR
7831	12 ORAL SURG OFC VST ALLWD SFY
7832	HEMODIAL/PERI DIAL LMT 1 PER L
7833	12 PODI NURS FAC VST ALLWD SFY
7834	12 PODI OFC VSTS ALLWD PER SFY
7835	PROPHYLAX ADT LMT TO 1 PER CY
7836	PROPHYLAX CHILD LMT TO 2 IN CY
7837	PSYCH EVAL LMT TO 5 HRS PER CY
7838	REDUCED/DENIED PSYC LMT FOR CY
7839	OUTPATPSYCHTHER LMT TO 24 UNTS
7840	REFRACTIVE EXAM EXCDS ANL LMT
7841	REFRACTIVE EXAM EXCDS ANL LMT
7842	REFRACTIVE EXAM EXCDS ANL LMT
7843	MEM CANNOT RCV > 1 UNT PER CY
7844	TISSUE COND LMT TO 2 PER CY
7901	MAMMOGRAMS LMT TO 1 PER RLG YR
7902	OB ULTRASO LMT TO 3 PER PREG
7903	URINALYSIS LMT TO 1 PER RLG MO
7904	CHOLEST & LIPDS LMT TO 1 RLGMO
7906	CBC LIMITD TO 1 PER RLG MONTH
7907	SEDIMENT RATE LMT TO CERT DIAG
7908	FTL MON & EPIS W GLOB SME PREG
7909	ITEMZD CD W GLBL/DEL SAME PREG
7910	VIS FIELD EX LMT TO CERT DIAG
7911	CHEST X-RAY DIAGNOSIS RESTRICT
7912	OFC EM/UA INCL IN GLOBL OB FEE
7913	PROC LMTD TO 2976 UNTS PER MO
7914	PROC Y3028 LMTD TO 6 UNTS DAY
7915	PROC Y3012...LMTD 1 UNT DAY
7916	PROC Y3014/Y3016 LMTD 20 PER D
7917	PROC Y3027 LMTD TO 8 PER DAY
7918	PROC Y3027/Y3028 REQ PA AFTR72
7919	PROCS Y3013...LMTD 96 PER DAY
7920	PROC Y3005 LMTD TO 32 UNTS DAY
7921	PROCEDURE CODE D7110 CANNOT BE
7922	NCCI EDIT OF EPIDURAL W/DELFEE
7923	OFC EM/UA INCL IN GLOBL OB-PAY
7924	SVC BLLD INCL IN HLTH CHK PGM
7925	SVC BLLD INCL IN HLTH CHK PGM
8093	PA EXCEEDS MONTHLY LIMIT
8094	PA EXCEEDS DAILY LIMIT
8095	PA APPROVED AMOUNT EXCEEDED
8096	PA APPROVED UNITS EXCEEDED
8097	COPAYMENT INFORMATION INVALID
8098	EXC SET TO F BYP-REPROCES
8854	FIRST CYCLE MASS ADJ
8855	LM PEND REVIEW BY FISCAL AGENT

9157	LI COUNT IS INV
9378	CLAIM TBL CNTS GREATER THAN MX
9379	SYSTEM ERROR
9892	ON-SIZE ERROR
9899	MORE THAN 50 EXCEPTIONS
9900	BASE RATE CHNG RSNS EXCEEDED