| AUTH_NBR | START_DATE | END_DATE | SERVICE_TYPE | LINE_ITEM_STATUS | PRODUCT_ROLLUP | MEMBER_NAME | PROC_CODE | PROC_DESC | PRIMARY DX CODE | ATTENDING_PROV_TIN | ATTENDING_PROV_NPI |
|---|---|---|---|---|---|---|---|---|---|---|---|
| OP2943553227 | 10/4/2022 | 11/4/2022 | Outpatient Surgery | APPROVE | SMI | [redacted] | 15200 | FULL THICKNESS FREE TRUNK; 20 SQ CM/LESS | F649 | [redacted] | 1780940262 |
| OP2943553227 | 10/4/2022 | 11/4/2022 | Outpatient Surgery | APPROVE | SMI | [redacted] | 19318 | MASTECTOMY,SUBQ GLANDULAR | F649 | [redacted] | 1780940262 |
| OP2943553227 | 10/4/2022 | 11/4/2022 | Outpatient Surgery | APPROVE | SMI | [redacted] | 19350 | NIPPLE/AREOLA RECON | F649 | [redacted] | 1780940262 |
| OP3053960532 | 7/25/2022 | 10/31/2022 | Outpatient Surgery | APPROVE | CMS | [redacted] | 19303 | MASTECTOMY, SIMPLE, COMPLETE | F649 | [redacted] | 1679660617 |
| OP3053960532 | 7/25/2022 | 10/31/2022 | Outpatient Surgery | APPROVE | CMS | [redacted] | 19305 | MASTECTOMY, RADICAL | F649 | [redacted] | 1679660617 |
| OP3057853348 | 7/25/2022 | 10/31/2022 | Outpatient Surgery | APPROVE | Medicaid | [redacted] | 19303 | MASTECTOMY, SIMPLE, COMPLETE | F649 | [redacted] | 1225033020 |
| OP3078517911 | 8/8/2022 | 11/28/2022 | Outpatient Surgery | APPROVE | Foster Care | [redacted] | 19325 | MAMMAPLASTY AUGMEN; W/PROSTH IMPLNT | F649 | [redacted] | 1679660617 |
| OP3104123016 | 11/1/2022 | 11/1/2022 | Outpatient Surgery | DENY | SMI | [redacted] | 15100 | SPLIT GFT TRUNK; 1ST 100 SQ CM/1% BODY CHILD | F640 | [redacted] | 1396317137 |
| OP3104123016 | 11/1/2022 | 11/1/2022 | Outpatient Surgery | DENY | SMI | [redacted] | 19303 | MASTECTOMY, SIMPLE, COMPLETE | F640 | [redacted] | 1396317137 |
| OP3132016760 | 9/22/2022 | 12/31/2022 | Outpatient Surgery | APPROVE | Medicaid | [redacted] | 19303 | MASTECTOMY, SIMPLE, COMPLETE | F649 | [redacted] | 1225033020 |
| OP3132041105 | 9/22/2022 | 1/31/2023 | Outpatient Surgery | APPROVE | SMI | [redacted] | 19303 | MASTECTOMY, SIMPLE, COMPLETE | F649 | [redacted] | 1225033020 |
| OP3159245327 | 10/4/2022 | 11/3/2022 | Outpatient Surgery | DENY | SMI | [redacted] | 19303 | MASTECTOMY, SIMPLE, COMPLETE | F649 | [redacted] | 1699874248 |
| OP3171783381 | 12/1/2022 | 2/28/2023 | Outpatient Surgery | APPROVE | SMI | [redacted] | 19303 | MASTECTOMY, SIMPLE, COMPLETE | F649 | [redacted] | 1437300597 |
| OP3172892570 | 10/13/2022 | 11/12/2022 | Outpatient Surgery | DENY | SMI | [redacted] | 11406 | EXC BEN LES TRNK ARM/LEG;OVR 4.0 CM | F649 | [redacted] | 1235196510 |
| OP3172892570 | 10/13/2022 | 11/12/2022 | Outpatient Surgery | DENY | SMI | [redacted] | 13101 | REPR COMPLX TRUNK; 2.6 CM TO 7.5 CM | F649 | [redacted] | 1235196510 |
| OP3172892570 | 10/13/2022 | 11/12/2022 | Outpatient Surgery | DENY | SMI | [redacted] | 13102 | REPAIR COMPLEX TRUNK EACH ADDL 5 CM | F649 | [redacted] | 1235196510 |
| OP3172892570 | 10/13/2022 | 11/12/2022 | Outpatient Surgery | DENY | SMI | [redacted] | 15771 | GRAFTING OF AUTOLOGOUS FAT BY LIPO 50 CC OR LESS | F649 | [redacted] | 1235196510 |
| OP3172892570 | 10/13/2022 | 11/12/2022 | Outpatient Surgery | DENY | SMI | [redacted] | 15772 | GRAFTING OF AUTOLOGOUS FAT BY LIPO EA ADDL 50 CC | F649 | [redacted] | 1235196510 |
| OP3172892570 | 10/13/2022 | 11/12/2022 | Outpatient Surgery | DENY | SMI | [redacted] | 19350 | NIPPLE/AREOLA RECON | F649 | [redacted] | 1235196510 |
| OP3172892570 | 10/13/2022 | 11/12/2022 | Outpatient Surgery | DENY | SMI | [redacted] | 19355 | CORRECT INVERTED NIPPLES | F649 | [redacted] | 1235196510 |
| OP3172892570 | 10/13/2022 | 11/12/2022 | Outpatient Surgery | DENY | SMI | [redacted] | 19380 | REVISION OF RECONSTRUCTED BREAST | F649 | [redacted] | 1235196510 |
| OP3190506018 | 10/4/2022 | 10/4/2022 | Vendor | DENY | Medicaid | [redacted] | J8499 | PRESCRIPTION DRUG-ORAL-NON-CHEMOTHERAPEUTIC-NOS | F649 | [redacted] | 1234567893 |
| OP3216076411 | 12/1/2022 | 2/28/2023 | Outpatient Surgery | APPROVE | SMI | [redacted] | 19303 | MASTECTOMY, SIMPLE, COMPLETE | F649 | [redacted] | 1437300597 |
| OP3225637456 | 12/1/2022 | 3/1/2023 | Outpatient Surgery | APPROVE | Foster Care | [redacted] | 19303 | MASTECTOMY, SIMPLE, COMPLETE | F640 | [redacted] | 1831432210 |
| OP3228242877 | 11/21/2022 | 2/24/2023 | Outpatient Surgery | APPROVE | SMI | [redacted] | 19303 | MASTECTOMY, SIMPLE, COMPLETE | F640 | [redacted] | 1831432210 |
| OP3229821535 | 11/22/2022 | 11/22/2022 | Outpatient Surgery | DENY | SMI | [redacted] | 15771 | GRAFTING OF AUTOLOGOUS FAT BY LIPO 50 CC OR LESS | F649 | [redacted] | 1831432210 |
| OP3229821535 | 11/22/2022 | 11/22/2022 | Outpatient Surgery | DENY | SMI | [redacted] | 15772 | GRAFTING OF AUTOLOGOUS FAT BY LIPO EA ADDL 50 CC | F649 | [redacted] | 1831432210 |
| OP3231440994 | 11/16/2022 | 11/16/2022 | Outpatient Surgery | APPROVE | Medicaid | [redacted] | 19303 | MASTECTOMY, SIMPLE, COMPLETE | F640 | [redacted] | 1679660617 |
| OP3266549641 | 11/29/2022 | 11/29/2022 | Vendor | DENY | Medicaid | [redacted] | J8499 | PRESCRIPTION DRUG-ORAL-NON-CHEMOTHERAPEUTIC-NOS | F649 | [redacted] | 1234567893 |

Worksheet: Sheet1

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