

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 THICK BREAST-TUMOR 20 SQ CM/LESS	F649	[REDACTED]	1780940262
OP2943553227	10/4/2022	11/4/2022	Outpatient Surgery	APPROVE	SMI	[REDACTED]	6601	MASTECTOMY, GYNECOTM, NOS	F649	[REDACTED]	1780940262
OP2943553227	10/4/2022	11/4/2022	Outpatient Surgery	APPROVE	SMI	[REDACTED]	19350	NIPPLE/AREOLA RECON	F649	[REDACTED]	1780940262
OP9053960532	7/25/2022	10/31/2022	Outpatient Surgery	APPROVE	CMS	[REDACTED]	19303	MASTECTOMY, SIMPLE, COMPLETE	F649	[REDACTED]	1679660617
OP9053960532	7/25/2022	10/31/2022	Outpatient Surgery	APPROVE	CMS	[REDACTED]	19305	MASTECTOMY, RADICAL	F649	[REDACTED]	1679660617
OP9057853348	7/25/2022	10/31/2022	Outpatient Surgery	APPROVE	Medicaid	[REDACTED]	19303	MASTECTOMY, SIMPLE, COMPLETE	F649	[REDACTED]	1225033020
OP9078517911	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 CHLD	F640	[REDACTED]	1396317137
OP3104123016	11/1/2022	11/1/2022	Outpatient Surgery	DENY	SMI	[REDACTED]	19303	MASTECTOMY, SIMPLE, COMPLETE	F640	[REDACTED]	1396317137
OP31320416760	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