

GNDC	GENERIC EQUIVALENT PAID
0000	PAYMENT NOT ALLOWED ON THIS ITEM.
0005	THIS CODE HAS A ZERO VALUE IN RVP.
0010	DISALLOWED--LETTER WILL FOLLOW
0011	PAID PER THE DIVISION'S GUIDELINES FOR THIS SERVICE
1005	ADDITIONAL PAYMENT FOR PREVIOUSLY PROCESSED CHARGES
1006	AMOUNT OF TIME NOT SHOWN OR DOCUMENTED--THIS CODE IS TIME-BASED.
1010	BILLED CODE CHANGED TO THE CODE APPROPRIATE FOR THE DOCUMENTED SERVICE
1012	GUEST TRAYS OR ITEMS OF PERSONAL CONVENIENCE ARE NOT A BENEFIT AND ARE NOT PAID
1015	SERVICE IS CONSIDERED INCLUDED IN AND COVERED BY THE PRIMARY SERVICE FEE
1020	BILLED CODE IS NOT VALID IN WYOMING FEE SCHEDULE/ UNABLE TO IDENTIFY SERVICE
1022	BY-REPORT OR RELATIVITY NOT ESTABLISHED/CODE PAID AT VALUE OF NEAREST LIKE PROCEDURE(S)
1025	PREVIOUSLY CONSIDERED CHARGE(S)
1030	NO INVOICE(S) RECEIVED - UNABLE TO PAY
1036	THIS ITEM OR SERVICE IS NOT DESCRIBED IN THE DOCUMENTATION YOU SENT FOR THIS DATE OF SERVICE. THIS CHARGE WILL REMAIN UNPAID UNTIL CLARIFIED
1039	PD AT THE WORKERS' COMP RATE FOR YOUR STATE OR LOCALE--NO ADDITIONAL AMOUNTS MAY BE COLLECTED FROM THE INJURED WORKER
1044	PMT ADJUSTED TO THE WORKERS' COMP RATE FOR YOUR STATE OR LOCALE--NO ADDITIONAL AMOUNTS MAY BE COLLECTED FROM THE INJURED WORKER
1045	MULTIPLE SURGICAL PROCEDURES COMBINED FOR PAYMENT
1050	SERVICE NOT CONSIDERED RELATED TO WORK INJURY
1055	CODE IS NOT TIME-BASED AND/OR ALLOWED ONLY ONCE PER SESSION
1056	QUANTITY HAS BEEN ALLOWED AS DEFINED BY THE PROCEDURE CODE
1060	ROUTINE OFFICE VISIT WITHIN SURGICAL FOLLOW-UP PERIOD
1070	CHARGE DISALLOWED/CHARGE NOT IDENTIFIED BY A CODE
1075	NUMBER OF UNITS BILLED CHANGED AND PAYMENT BASED ON NUMBER OF UNITS SUPPORTED BY THE DOCUMENTATION
1085	BALANCE OF ATTORNEY FEES PD ON OTHER CASE(S)
1091	THIS ITEM OR SERVICE IS DENIED AS NOT REASONABLE AND NECESSARY
1095	DISALLOWED PENDING REVIEW FOR MEDICAL BENEFIT
1100	CODED AND PAID PER DIVISION RULES AND REGULATIONS FOR THIS PROCEDURE

1101	PER LETTER OF UNDERSTANDING ON FILE FOR THIS CASE
1105	ADDITIONAL DOCUMENTATION IS NEEDED TO SUPPORT THIS ITEM'S RELATIONSHIP TO THE WORK INJURY
1110	SERVICE PAID AS RULE-OUT. IT IS NOT CONSIDERED RELATED TO THE WORK INJURY.
1200	NDC IS NOT CURRENTLY ACTIVE IN REDBOOK--PAID AT LAST KNOWN REDBOOK RATE
1300	DATE OF SERVICE IS PRIOR TO DATE OF INJURY
2002	CONTINUOUS MANUAL APPLICATION OR ADJUSTMENT OF THIS MODALITY NOT DOCUMENTED AFTER INITIAL SESSION
2005	ONE-TO-ONE/MANUAL TREATMENT OR THERAPY NOT NOTED
2010	EXCEEDS THE DIVISION'S CHIROPRACTIC GUIDELINES ON ICE OR HEAT
2015	EXCEEDS THE DIVISION'S CHIROPRACTIC GUIDELINES ON SUPPORTIVE CARE
2020	EXCEEDS THE DIVISION'S CHIROPRACTIC GUIDELINES ON CONSECUTIVE DAYS OF CARE
2025	EXCEEDS THE DIVISION'S CHIROPRACTIC LIMIT OF 1 TO 2 VISITS MONTHLY
2030	EXCEEDS THE DIVISION'S MANUAL/EXERCISE THERAPY CAP
2035	MASSAGE THERAPY WAS NOT TO AREA OF INJURY
2040	DENIED PER THE DIVISION'S CHIROPRACTIC GUIDELINES ON REHABILITATION PROGRAMS
2045	CHARGE DISALLOWED PER THE DIVISION'S CHIROPRACTIC GUIDELINES ON WHO MAY PERFORM MASSAGE THERAPY
2049	CHARGE DISALLOWED--MECHANICAL MASSAGE CONSIDERED INCLUDED IN THE INTRA-SERVICE, PRE-MANIPULATION PORTION OF CMT
2052	PAID PER CODE APPROPRIATE FOR THE NUMBER OF LEVELS OR BODY PART(S) ACCEPTED FOR THIS CASE.
2055	EXCEEDS THE DIVISION'S GUIDELINES FOR RE-EXAMINATIONS DURING NORMAL COURSE OF TREATMENT
2060	CHARGES COMBINED AND PAID UNDER CODE APPROPRIATE FOR DOCUMENTED THERAPY
3005	PAID ONLY THOSE DAYS IN USE/UNIT RETURNED
4005	PAID AT DIVISION'S STANDARD FACILITY FEE FOR THIS PROCEDURE
5005	BILLED NDC # IS NOT VALID/PAID UNDER DIVISION IN-HOUSE CODE
5010	BILLED NDC # IS NOT VALID--THE DIVISION HAS SUBSTITUTED A LIKE NDC IN ORDER TO PAY THE BILL
5015	CHARGE IS DISALLOWED--A COPY OF THE PRESCRIPTION IS NEEDED
6005	MICROSCOPES NOT COVERED FOR THIS PROCEDURE PER THE DIVISION'S RULES AND REGULATIONS
6010	PAYMENT FOR INTEROPERATIVE TESTING IS LIMITED TO CERTAIN PROCEDURES AND IS NOT ALLOWED IN THIS

PARTICULAR INSTANCE