



[View a sample appeal letter here >](#)

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- Use appropriate codes to report the patient's condition, the treatment (drugs, services, equipment) the patient received
 - ICD-10-CM code
 - CPT Codes
 - HCPCS code
- Include additional information requested by the health plan in box 19 of the CMS-1500 form or in box 80 of the CMS-145- (UB-04) form
- Include additional information requested by the health plan in box 24E of the CMS-1500 form or in box 66 of the CMS-145- (UB-04) form
 - 0662T for fit and calibration only once per patient
 - 0663T at each treatment
- Attach additional information if necessary
 - Letter of medical necessity
 - Prior authorization if needed
 - Prescribing information
 - Notes from patient's medical records
 - Clinical guidelines from NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®)
- Review claim for accuracy
 - Patient ID numbers
 - Diagnosis code
 - On-label use
- File claim as soon as possible within health plan filing time limits
- Reconcile claim reports promptly and thoroughly to assure proper processing
- Verify payment amounts correspond with your health plan allowables and your private health plan contracts

NCCN Guidelines:

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