

**ADDITIONAL CLINICAL INFORMATION NEEDED TO REVIEW FOR
(20930, 20931)**

1. Operative Report from Date of Service 9/26/13.
2. Implant Log from Date of Service 9/26/13.
3. Description of what the 20930 charge is being billed for. (HCFA claim)
4. Itemized Statement for Dates of Service 9/26/13. (UB claim)