

Disclaimer

The following report(s) provides findings from an FDA-initiated query using Sentinel. While Sentinel queries may be undertaken to assess potential medical product safety risks, they may also be initiated for various other reasons. Some examples include determining a rate or count of an identified health outcome of interest, examining medical product use, exploring the feasibility of future, more detailed analyses within Sentinel, and seeking to better understand Sentinel capabilities.

Data obtained through Sentinel are intended to complement other types of evidence such as preclinical studies, clinical trials, postmarket studies, and adverse event reports, all of which are used by FDA to inform regulatory decisions regarding medical product safety. The information contained in this report is provided as part of FDA's commitment to place knowledge acquired from Sentinel in the public domain as soon as possible. Any public health actions taken by FDA regarding products involved in Sentinel queries will continue to be communicated through existing channels.

FDA wants to emphasize that the fact that FDA has initiated a query involving a medical product and is reporting findings related to that query does not mean that FDA is suggesting health care practitioners should change their prescribing practices for the medical product or that patients taking the medical product should stop using it. Patients who have questions about the use of an identified medical product should contact their health care practitioners.

The following report contains a description of the request, request specifications, and results from the modular program run(s).

If you are using a web page screen reader and are unable to access this document, please contact the Sentinel Operations Center for assistance at info@sentinelssystem.org.

Overview for Request: cder_mpl1p_wp071

Request ID: cder_mpl1p_wp071

Request Description: In this report, we describe the utilization of various medical products during pregnancies ending in live birth delivery in the Sentinel Distributed Database (SDD). Medical products of interest (MOIs) include those with pregnancy-related postmarketing requirement(s) and/or commitment(s), those involved in pregnancy registries, or those investigated in clinical trials with respect to their use during pregnancy.

Sentinel Routine Querying Module: Cohort Identification and Descriptive Analysis (CIDA) module, version 12.0.0, with custom programming

Data Source: We distributed this request to five Sentinel Data Partners (DPs) on January 12, 2023. These five DPs are a subset of the entire SDD. Data from Medicaid beneficiaries are included in this report. The study period includes data from January 1, 2008 through June 30, 2022. Please see Appendix A for a list of dates of available data for each DP.

Study Design: For this request, we identified females aged ≥ 10 years and < 54 years at the time of a live birth delivery, including in the cohort all deliveries that met eligibility criteria. We assessed use of various MOIs in the 90 days prior to pregnancy, 90 days after delivery, as well as during pregnancy overall and by trimester. This is a Type 4 (medical product use during pregnancy) analysis as referenced in the Query Request Package (QRP) documentation.

Cohort Eligibility Criteria: Members were required to have at least 391 days of continuous medical and drug coverage prior to the index delivery, allowing gaps in coverage of up to 45 days. Members were not required to be enrolled during the post-delivery medical product assessment period. Deliveries with evidence of another live birth delivery in the 301 days prior were excluded. Only live birth deliveries identified in the inpatient care setting were included.

Pregnancy Episode Creation: We identified pregnancies ending in live birth using a validated claims-based algorithm.¹ This algorithm used International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) diagnosis codes indicative of weeks of gestation, and International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and ICD-10-CM diagnosis codes for pre-term and post-term deliveries, to calculate the length of the pregnancy episode. Codes had to occur within seven days of a delivery date in the inpatient setting. In absence of pre-/post-term codes, pregnancy duration was set to 273 days. Please see Appendix B for a list of ICD-9-CM and ICD-10-CM codes used in the gestational age algorithm, and Appendix C for Current Procedural Terminology, Fourth Edition (CPT-4) procedure codes, and ICD-9-CM and ICD-10-CM codes used to define a live-born delivery.

Exposure Identification During Pregnancy: We identified pregnancy episodes with evidence of various MOIs during the 90 days prior to pregnancy start, during each pregnancy trimester, and in the 90 days after delivery. MOIs overlapping the date of delivery were counted as exposures during the third trimester. We additionally assessed the use of one MOI (apremilast) by calendar year.

We assessed use of MOIs during the following time periods during and surrounding pregnancy:

- Exposed in the 90 days prior to pregnancy start (pre-pregnancy period);
- Exposed during the first trimester;
- Exposed during the first trimester only;
- Exposed during the second trimester;
- Exposed during the second trimester only;
- Exposed during the third trimester;
- Exposed during the third trimester only;
- Exposed anytime during pregnancy;
- Exposed during all trimesters; and,
- Exposed in the 90 days after delivery (post-delivery period)

We used the presence of any Healthcare Common Procedure Coding System (HCPCS), CPT-4, or National Drug Code (NDC) codes to define these medical products, capturing all dispensings and setting treatment episode lengths to the dispensed days supply. Please see Appendix D for a list of HCPCS and ICD-10 Procedure Coding System (ICD-10-PCS) codes used to define medical products of interest in this request and Appendix E for a list of proprietary and non-proprietary names used to identify MOIs in this request.

Overview for Request: cder_mpl1p_wp071

Baseline Characteristics: On the day of delivery, we described the following demographics for each pregnancy episode: age (continuous and classified as 10-17, 18-24, 25-34, 35-44, and 45-54 years), race, and Hispanic origin. We also described the following pregnancy characteristics: year of delivery, term, and gestational age at delivery.

Additionally, we assessed several health characteristics in two windows: first in the 90 days prior to through 90 days after pregnancy start and second in the entire history through 90 days after pregnancy start. Conditions included: cancer; cardiovascular and other vascular diseases generally in addition to cardiovascular disease, congenital heart disease, other vascular diseases specifically; endocrine disorders generally and diabetes mellitus and obesity specifically; hypertension; immunological diseases generally plus human immunodeficiency virus (HIV) and immunosuppression specifically; mental disorders; renal disease; respiratory diseases generally plus asthma, chronic obstructive pulmonary disease (COPD), and other chronic respiratory diseases specifically; rheumatic diseases; sickle cell disease; and smoking.

Finally, we assessed health service utilization intensity in the 90 days prior to pregnancy start by measuring the number of ambulatory, emergency, inpatient, and other ambulatory encounters as well as the number of filled prescriptions, generics dispensed, and unique drug classes dispensed.

We used the presence of any ICD-9-CM diagnosis and procedure, ICD-10-CM, ICD-10-PCS procedure, HCPCS, CPT-4, or CPT Category III codes to define these conditions. Please see Appendix F for a list of codes used to define baseline characteristics in this request.

Sensitivity Analyses: In addition to the cohort described above, we also constructed a cohort with relaxed enrollment requirements in which to assess all MOIs and baseline characteristics. This cohort of pregnancies only required 180 days of pre-delivery medical and drug coverage (45-day gap allowance) instead of 391 days in the main cohort. However, the pregnancies were additionally required to be continuously enrolled for 121 days from pregnancy start. Just as the main cohort excluded deliveries with evidence of a live birth in the 301 days prior to delivery, the sensitivity cohort excluded deliveries with evidence of a live birth in the 180 days prior to delivery and in the 121 days following pregnancy start. Furthermore, health service utilization was assessed in the 60 days prior to pregnancy start in this sensitivity cohort instead of the 90 days prior to pregnancy start that was assessed in the main cohort of pregnancies. Finally, whereas MOIs were assessed in the 90 days pre-pregnancy and post-delivery in the main cohort, only 60 days were included in these assessment periods for the sensitivity cohort.

Please see Appendix G for the specifications of parameters used in the analyses for this request.

Please see Appendix H for a diagram detailing the design of this request.

Limitations: Algorithms used to identify live birth deliveries and to estimate pregnancy start date and duration are imperfect; thus, it is possible that there may be misclassification. MOIs and baseline health characteristics only required the presence of one code for identification, and code lists were designed to be as inclusive as possible to maximize capture. Data should be interpreted with these limitations in mind.

Notes: Please contact the Sentinel Operations Center (info@sentinelssystem.org) for questions and to provide comments/suggestions for future enhancements to this document. For more information on Sentinel's routine querying modules, please refer to the documentation (<https://dev.sentinelssystem.org/projects/SENTINEL/repos/sentinel-routine-querying-tool-documentation/browse>).

¹ Li Q, Andrade SE, Cooper WO, et al. Validation of an algorithm to estimate gestational age in electronic health plan databases. *Pharmacoepidemiol Drug Saf.* 2013;22(5):524-532. doi:10.1002/pds.3407

Table of Contents

<u>Glossary (CIDA)</u>	List of Terms Found in this Report and their Definitions
<u>Table 1</u>	Aggregated Characteristics of Live-Birth Deliveries Pregnancy Cohort and Live-Birth Deliveries with Relaxed Enrollment Requirements Pregnancy Cohort in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022
<u>Table 2a</u>	Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022
<u>Table 2b</u>	Pregnancy Episodes with Evidence of Apremilast in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022, by Year of Delivery
<u>Table 3</u>	Summary of Episode Level Cohort Attrition in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022
<u>Appendix A</u>	Dates of Available Data for Each Data Partner (DP) as of Request Distribution Date (January 12, 2023)
<u>Appendix B</u>	List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Codes Used to Define Gestational Age Algorithm in this Request
<u>Appendix C</u>	List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request
<u>Appendix D</u>	List of Healthcare Common Procedure Coding System, Level II (HCPCS) and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Exposures in this Request
<u>Appendix E</u>	List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request
<u>Appendix F</u>	List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request
<u>Appendix G</u>	Specifications Defining Parameters for this Request
<u>Appendix H</u>	Design Diagrams for this Request

**Glossary of Terms for Analyses Using
Cohort Identification and Descriptive Analysis (CIDA) Module***

Amount Supplied - number of units (pills, tablets, vials) dispensed. Net amount per NDC per dispensing.

Blackout Period - number of days at the beginning of a treatment episode that events are to be ignored. If an event occurs during the blackout period, the episode is excluded.

Care Setting - type of medical encounter or facility where the exposure, event, or condition code was recorded. Possible care settings include: Inpatient Hospital Stay (IP), Non-Acute Institutional Stay (IS), Emergency Department (ED), Ambulatory Visit (AV), and Other Ambulatory Visit (OA). For laboratory results, possible care settings include: Emergency Department (E), Home (H), Inpatient (I), Outpatient (O), or Unknown or Missing (U). The Care Setting, along with the Principal Diagnosis Indicator (PDX), forms the Care Setting/PDX parameter.

Ambulatory Visit (AV) - includes visits at outpatient clinics, same-day surgeries, urgent care visits, and other same-day ambulatory hospital encounters, but excludes emergency department encounters.

Emergency Department (ED) - includes ED encounters that become inpatient stays (in which case inpatient stays would be a separate encounter). Excludes urgent care visits.

Inpatient Hospital Stay (IP) - includes all inpatient stays, same-day hospital discharges, hospital transfers, and acute hospital care where the discharge is after the admission date.

Non-Acute Institutional Stay (IS) - includes hospice, skilled nursing facility (SNF), rehab center, nursing home, residential, overnight non-hospital dialysis and other non-hospital stays.

Other Ambulatory Visit (OA) - includes other non overnight AV encounters such as hospice visits, home health visits, skilled nursing facility visits, other non-hospital visits, as well as telemedicine, telephone and email consultations.

Charlson/Elixhauser Combined Comorbidity Score - calculated based on comorbidities observed during a requester-defined window around the exposure episode start date (e.g., in the 183 days prior to index).

Code Days - the minimum number of times the diagnosis must be found during the evaluation period in order to fulfill the algorithm to identify the corresponding patient characteristic.

Cohort Definition (drug/exposure) - indicates how the cohort will be defined: 01: Cohort includes only the first valid treatment episode during the query period; 02: Cohort includes all valid treatment episodes during the query period; 03: Cohort includes all valid treatment episodes during the query period until an event occurs.

Computed Start Marketing Date - represents the first observed dispensing date among all valid users within a GROUP (scenario) within each Data Partner site.

Days Supplied - number of days supplied for all dispensings in qualifying treatment episodes.

Eligible Members - number of members eligible for an incident treatment episode (defined by the drug/exposure and event washout periods) with drug and medical coverage during the query period.

Enrollment Gap - number of days allowed between two consecutive enrollment periods without breaking a "continuously enrolled" sequence.

Episodes - treatment episodes; length of episode is determined by days supplied in one dispensing or consecutive dispensings bridged by the episode gap.

Episode Gap - number of days allowed between two (or more) consecutive exposures (dispensings/procedures) to be considered the same treatment episode.

Event Deduplication - specifies how events are counted by the Modular Program (MP) algorithm: 0: Counts all occurrences of a health outcome of interest (HOI) during an exposure episode; 1: de-duplicates occurrences of the same HOI code and code type on the same day; 2: de-duplicates occurrences of the same HOI group on the same day (e.g., de-duplicates at the group level).

Exposure Episode Length - number of days after exposure initiation that is considered "exposed time."

Exposure Extension Period - number of days post treatment period in which the outcomes/events are counted for a treatment episode. Extensions are added after any episode gaps have been bridged.

Lookback Period - number of days wherein a member is required to have evidence of pre-existing condition (diagnosis/procedure/drug dispensing).

Maximum Episode Duration - truncates exposure episodes after a requester-specified number of exposed days. Applied after any gaps are bridged and extension days added to the length of the exposure episode.

Member-Years - sum of all days of enrollment with medical and drug coverage in the query period preceded by an exposure washout period all divided by 365.25.

Minimum Days Supplied - specifies a minimum number of days in length of the days supplied for the episode to be considered.

Minimum Episode Duration - specifies a minimum number of days in length of the episode for it to be considered. Applied after any gaps are bridged and extension days added to the length of the exposure episode.

Monitoring Period - used to define time periods of interest for both sequential analysis and simple cohort characterization requests.

Principal Diagnosis (PDX) - diagnosis or condition established to be chiefly responsible for admission of the patient to the hospital. 'P' = principal diagnosis, 'S' = secondary diagnosis, 'X' = unspecified diagnosis, '.' = blank. Along with the Care Setting values, forms the CareSetting/PDX parameter.

Query Period - period in which the modular program looks for exposures and outcomes of interest.

Switch Evaluation Step Value - value used to differentiate evaluation step. Each switch pattern can support up to 2 evaluation steps (0 = switch pattern evaluation start; 1 = first evaluation; 2 = second evaluation).

Switch Gap Inclusion Indicator - indicator for whether gaps in treatment episodes that are included in a switch episode will be counted as part of the switch episode duration.

Switch Pattern Cohort Inclusion Date - indicates which date to use for inclusion into the switch pattern cohort of interest as well as optionally as the index date of the treatment episode initiating the switch pattern. Valid options are the product approval date, product marketing date, other requester defined date, or computed start marketing date.

Switch Pattern Cohort Inclusion Strategy - indicates how the switch pattern cohort inclusion date will be used: 01: used only as a switch cohort entry date. First treatment episode dispensing date is used as index for computing time to first switch; 02: used as switch cohort entry date and as initial switch step index date for computing time to first switch.

Treatment Episode Truncation Indicator - indicates whether the exposure episode will be truncated at the occurrence of a requester-specified code.

Washout Period (drug/exposure) - number of days a user is required to have no evidence of prior exposure (drug dispensing/procedure) and continuous drug and medical coverage prior to an incident treatment episode.

Washout Period (event/outcome) - number of days a user is required to have no evidence of a prior event (procedure/diagnosis) and continuous drug and medical coverage prior to an incident treatment episode.

Years at Risk - number of days supplied plus any episode gaps and exposure extension periods all divided by 365.25.

*all terms may not be used in this report

Table 1. Aggregated Characteristics of Live-Birth Deliveries Pregnancy Cohort and Live-Birth Deliveries with Relaxed Enrollment Requirements Pregnancy Cohort in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

	Live-Birth Deliveries Pregnancy Cohort		Live-Birth Deliveries with Relaxed Enrollment Requirements Pregnancy Cohort	
Mother Characteristics²	Number	Percent	Number	Percent
Unique patients	3,812,622	N/A	4,632,968	N/A
Episodes	4,340,586	100.0%	5,289,819	100.0%
Demographic Characteristics	Mean	Standard Deviation	Mean	Standard Deviation
Mean Age (Years)	30.1	5.5	29.9	5.5
Age (Years)	Number	Percent	Number	Percent
10-17	66,985	1.5%	81,664	1.5%
18-24	823,003	19.0%	1,059,895	20.0%
25-34	2,550,001	58.7%	3,098,693	58.6%
35-44	880,567	20.3%	1,027,102	19.4%
45-54	20,030	0.5%	22,465	0.4%
Sex				
Female	3,812,622	100.0%	4,632,968	100.0%
Race ³				
American Indian or Alaska Native	31,696	0.8%	38,717	0.8%
Asian	58,948	1.5%	74,386	1.6%
Black or African American	266,212	7.0%	344,327	7.4%
Multi-racial	12,569	0.3%	14,460	0.3%
Native Hawaiian or Other Pacific Islander	10,089	0.3%	12,520	0.3%
Unknown	2,903,734	76.2%	3,470,186	74.9%
White	529,374	13.9%	678,372	14.6%
Hispanic origin				
Yes	264,500	6.9%	335,703	7.2%
No	751,400	19.7%	978,697	21.1%
Unknown	2,796,722	73.4%	3,318,568	71.6%
Year				
2008	93,329	2.2%	157,931	3.0%
2009	234,472	5.4%	283,211	5.4%
2010	227,977	5.3%	259,915	4.9%
2011	212,526	4.9%	244,618	4.6%
2012	204,699	4.7%	235,680	4.5%
2013	202,954	4.7%	242,884	4.6%
2014	223,487	5.1%	290,131	5.5%
2015	315,422	7.3%	412,834	7.8%
2016	419,532	9.7%	592,987	11.2%

Table 1. Aggregated Characteristics of Live-Birth Deliveries Pregnancy Cohort and Live-Birth Deliveries with Relaxed Enrollment Requirements Pregnancy Cohort in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Demographic Characteristics	Live-Birth Deliveries Pregnancy Cohort		Live-Birth Deliveries with Relaxed Enrollment Requirements Pregnancy Cohort	
	Number	Percent	Number	Percent
2017	709,989	16.4%	863,263	16.3%
2018	717,150	16.5%	821,927	15.5%
2019	234,291	5.4%	268,253	5.1%
2020	222,642	5.1%	255,173	4.8%
2021	232,434	5.4%	261,102	4.9%
2022	89,682	2.1%	99,910	1.9%
Pregnancy Characteristics	Number	Percent	Number	Percent
Pre-Term (0-258 days)	375,454	8.6%	488,297	9.2%
Term (259-280 days)	1,710,931	39.4%	2,073,870	39.2%
Post-Term (281-301 days)	878,047	20.2%	1,047,266	19.8%
Unknown Term	1,376,154	31.7%	1,680,386	31.8%
	Mean	Standard Deviation	Mean	Standard Deviation
Gestational age ⁴ at delivery	39.6	2.0	39.6	2.0
Health Characteristics from 90 Days Prior through 90 Days after Pregnancy Start	Number	Percent	Number	Percent
Cancer	17,296	0.4%	19,845	0.4%
Cardiovascular and other vascular diseases	28,743	0.7%	33,901	0.6%
Cardiovascular disease	14,008	0.3%	16,618	0.3%
Congenital heart disease	10,506	0.2%	12,328	0.2%
Other vascular disease	6,614	0.2%	7,740	0.1%
Endocrine Disorders	329,030	7.6%	390,547	7.4%
Diabetes mellitus	88,627	2.0%	106,757	2.0%
Obesity	261,441	6.0%	308,790	5.8%
Hypertension	100,937	2.3%	119,238	2.3%
Immunological Diseases	9,997	0.2%	12,282	0.2%
HIV	5,900	0.1%	7,471	0.1%
Immunosuppression	4,124	0.1%	4,842	0.1%
Mental disorders	261,526	6.0%	304,812	5.8%
Renal disease: Chronic kidney disease	31,831	0.7%	38,044	0.7%
Respiratory Diseases	124,959	2.9%	146,100	2.8%
Asthma	101,031	2.3%	118,101	2.2%
COPD	23,738	0.5%	27,648	0.5%
Other chronic respiratory diseases	25,767	0.6%	29,956	0.6%
Rheumatic diseases	87,976	2.0%	101,489	1.9%
Sickle cell disease	6,989	0.2%	8,594	0.2%
Smoking	192,020	4.4%	234,767	4.4%

Table 1. Aggregated Characteristics of Live-Birth Deliveries Pregnancy Cohort and Live-Birth Deliveries with Relaxed Enrollment Requirements Pregnancy Cohort in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Health Characteristics in Entire History through 90 Days after Pregnancy Start	Live-Birth Deliveries Pregnancy Cohort		Live-Birth Deliveries with Relaxed Enrollment Requirements Pregnancy Cohort	
	Number	Percent	Number	Percent
Cancer	41,561	1.0%	44,917	0.8%
Cardiovascular and other vascular diseases	103,092	2.4%	110,891	2.1%
Cardiovascular disease	52,557	1.2%	56,587	1.1%
Congenital heart disease	35,134	0.8%	37,800	0.7%
Other vascular disease	27,357	0.6%	29,184	0.6%
Endocrine Disorders	691,231	15.9%	766,972	14.5%
Diabetes mellitus	247,367	5.7%	271,419	5.1%
Obesity	519,705	12.0%	577,432	10.9%
Hypertension	227,005	5.2%	250,275	4.7%
Immunological Diseases	33,449	0.8%	37,275	0.7%
HIV	11,023	0.3%	12,854	0.2%
Immunosuppression	22,778	0.5%	24,808	0.5%
Mental disorders	636,385	14.7%	698,281	13.2%
Renal Disease CKD	130,851	3.0%	141,428	2.7%
Respiratory Diseases	321,047	7.4%	349,708	6.6%
Asthma	238,176	5.5%	260,799	4.9%
COPD	84,529	1.9%	90,450	1.7%
Other chronic respiratory diseases	96,424	2.2%	102,879	1.9%
Rheumatic diseases	222,664	5.1%	240,585	4.5%
Sickle cell disease	14,439	0.3%	16,471	0.3%
Smoking	445,029	10.3%	501,312	9.5%

Table 1. Aggregated Characteristics of Live-Birth Deliveries Pregnancy Cohort and Live-Birth Deliveries with Relaxed Enrollment Requirements Pregnancy Cohort in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Health Service Utilization Intensity Metrics ⁵	Live-Birth Deliveries Pregnancy Cohort		Live-Birth Deliveries with Relaxed Enrollment Requirements Pregnancy Cohort	
	Mean	Standard Deviation	Mean	Standard Deviation
Mean number of ambulatory encounters	2.1	3.6	1.3	2.5
Mean number of emergency room encounters	0.1	0.5	0.1	0.4
Mean number of inpatient hospital encounters	0.0	0.1	0.0	0.1
Mean number of non-acute institutional encounters	0.0	0.0	0.0	0.0
Mean number of other ambulatory encounters	0.5	2.3	0.3	1.6
Mean number of filled prescriptions	2.0	3.3	1.2	2.3
Mean number of generics dispensed	1.4	2.1	1.0	1.7
Mean number of unique drug classes dispensed	1.3	2.0	0.9	1.6

¹Pregnancy is defined as a pregnancy that resulted in a live birth delivery identified using the method specified in the overview section of this report.

²All metrics are based on total number of episodes per group, except for sex, race, and Hispanic origin which are based on total number of unique patients.

³Race data may not be completely populated at all Data Partners; therefore, data about race may be incomplete.

⁴Gestational age estimated using a claims-based algorithm, previously validated in the Medication Exposure in Pregnancy Risk Evaluation Program (MEPREP), to identify pregnancies ending in a live birth. ICD-10-CM diagnosis codes indicative of weeks of gestation, and ICD-9-CM and ICD-10-CM diagnosis codes for pre-term and post-term deliveries, were used to calculate the length of the pregnancy episode. Codes had to occur within 7 days of a delivery date in the inpatient setting. In absence of pre-/post-term codes, pregnancy duration was set to 273 days.

⁵Health Service Utilization Intensity assessed in the 90 and 60 days prior to pregnancy start among the "Live-Birth Deliveries" and "Live-Birth Deliveries with Relaxed Enrollment Requirements" pregnancy cohorts, respectively.

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Live-Birth Deliveries (N = 4,340,586)										
<i>Analgesics, Anesthesia, and Drugs of Abuse</i>										
acamprosate	184	0.004%	132	0.003%	122	0.003%	24	0.001%	16	<0.001%
cocaine	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
duloxetine	16,491	0.380%	14,820	0.341%	13,840	0.319%	6,862	0.158%	5,246	0.121%
eltrombopag	18	<0.001%	15	<0.001%	12	<0.001%	*****	<0.001%	*****	<0.001%
milnaciprin	307	0.007%	251	0.006%	242	0.006%	63	0.001%	46	0.001%
naltrexone	2,779	0.064%	2,150	0.050%	2,001	0.046%	404	0.009%	216	0.005%
nicotine	4,564	0.105%	14,406	0.332%	6,128	0.141%	7,670	0.177%	6,035	0.140%
pregabalin	2,935	0.068%	2,521	0.058%	2,304	0.053%	1,037	0.024%	738	0.017%
remimazolam	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
varenicline	4,060	0.094%	2,876	0.066%	2,525	0.058%	515	0.012%	292	0.007%
<i>Cardiac and Hematologic Agents</i>										
ambrisentan	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
asparaginase	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
denosumab	13	<0.001%	46	0.001%	*****	<0.001%	*****	<0.001%	39	0.001%
eculizumab	19	<0.001%	30	0.001%	23	0.001%	26	0.001%	29	0.001%
lenalidomide	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
mavacamten	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
midostaurin	0	0.000%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
ofatumumab	0	0.000%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%
ravulizumab-cwvz	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
romiplostim	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
tafamidis	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
vericiguat	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
<i>Metabolic Agents</i>										
alirocumab	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
bempedoic acid	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
burosumab-twza	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
canagliflozin	537	0.012%	489	0.011%	471	0.011%	178	0.004%	84	0.002%
dapagliflozin	249	0.006%	228	0.005%	218	0.005%	73	0.002%	35	0.001%
ertugliflozin	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%
evinacumab-dgnb	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
evolocumab	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%
exetanide	523	0.012%	430	0.010%	407	0.009%	124	0.003%	59	0.001%
incisiran	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
insulin aspart	5,931	0.137%	19,559	0.451%	8,426	0.194%	11,627	0.268%	17,533	0.406%
insulin detemir	2,221	0.051%	15,280	0.352%	4,756	0.110%	7,700	0.177%	13,345	0.309%
insulin nph	1,970	0.045%	61,088	1.407%	10,290	0.237%	24,354	0.561%	58,228	1.347%
lomitapide	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
metreleptin	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
phentermine and topiramate	91	0.002%	58	0.001%	52	0.001%	*****	<0.001%	*****	<0.001%
semaglutide	378	0.009%	353	0.008%	333	0.008%	121	0.003%	64	0.001%
sitagliptin	1,396	0.032%	1,365	0.031%	1,295	0.030%	549	0.013%	248	0.006%
<i>Neurological Agents: Epilepsies and Related Disorders</i>										
abobotulinumtoxin-a	15	<0.001%	15	<0.001%	12	<0.001%	*****	<0.001%	*****	<0.001%
diroximel fumarate	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
efgartigimod alfa	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
fremanezumab-vfrm	88	0.002%	84	0.002%	81	0.002%	20	<0.001%	13	<0.001%
inebilizumab	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
levetiracetam	6,862	0.158%	9,499	0.219%	7,164	0.165%	7,317	0.169%	7,551	0.175%
monomethyl fumarate	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
natalizumab	288	0.007%	225	0.005%	209	0.005%	44	0.001%	44	0.001%
stiripentol	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Neurological Agents: Migraine</i>										
dimethyl fumarate	340	0.008%	287	0.007%	276	0.006%	111	0.003%	76	0.002%
fenfluramine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
interferon beta-1a	497	0.011%	378	0.009%	349	0.008%	81	0.002%	71	0.002%
interferon beta-1b	93	0.002%	82	0.002%	74	0.002%	14	<0.001%	13	<0.001%
naratriptan	1,092	0.025%	772	0.018%	717	0.017%	177	0.004%	99	0.002%
ocrelizumab	80	0.002%	20	<0.001%	17	<0.001%	*****	<0.001%	0	0.000%
risdiplam	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
sumatriptan	31,007	0.714%	25,601	0.590%	20,159	0.464%	7,947	0.183%	5,248	0.121%
ubrogepant	141	0.003%	135	0.003%	115	0.003%	34	0.001%	28	0.001%
<i>Neurological Agents: Multiple Sclerosis</i>										
daclizumab	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%
eptinezumab-jjmr	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
erenumab-aooe	346	0.008%	304	0.007%	288	0.007%	87	0.002%	53	0.001%
eslicarbazepine	45	0.001%	55	0.001%	48	0.001%	41	0.001%	33	0.001%
fampiridine	35	0.001%	27	0.001%	27	0.001%	*****	<0.001%	*****	<0.001%
fingolimod	148	0.003%	115	0.003%	111	0.003%	34	0.001%	28	0.001%
galcanezumab	272	0.006%	232	0.005%	219	0.005%	71	0.002%	38	0.001%
inotersen	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
lamotrigine	21,503	0.495%	21,495	0.495%	19,294	0.445%	12,910	0.297%	11,750	0.272%
lasmiditan	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%
nusinersen	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
ozanimod	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%
patisiran	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
ponesimod	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
rimegepant	119	0.003%	107	0.002%	101	0.002%	25	0.001%	18	<0.001%
siponimod	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%
teriflunomide	28	0.001%	19	<0.001%	18	<0.001%	11	<0.001%	*****	<0.001%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Neurological Agents: Other</i>										
alemtuzumab	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%
amifampridine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
atogepant	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
cannabidiol	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
cenobamate	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
cladribine	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
lacosamide	538	0.012%	638	0.015%	522	0.012%	481	0.011%	494	0.011%
satralizumab-mwge	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
<i>Dermatology</i>										
abrocitinib	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
acitretin	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
afamelanotide	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
alefacept	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
brodalumab	0	0.000%	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%
cyclosporine	3,315	0.076%	2,862	0.066%	2,438	0.056%	1,179	0.027%	960	0.022%
dupilumab	266	0.006%	254	0.006%	244	0.006%	118	0.003%	95	0.002%
efalizumab	11	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%
tretinoin	51	0.001%	28	0.001%	22	0.001%	*****	<0.001%	*****	<0.001%
guselkumab	29	0.001%	29	0.001%	28	0.001%	15	<0.001%	*****	<0.001%
ixekizumab	47	0.001%	45	0.001%	44	0.001%	14	<0.001%	15	<0.001%
pimecrolimus	1,362	0.031%	1,599	0.037%	994	0.023%	537	0.012%	441	0.010%
risankizumab	20	<0.001%	24	0.001%	23	0.001%	*****	<0.001%	*****	<0.001%
tildrakizumab-asmn	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
tralokinumab, tralokinumab-ldrm	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
tretinoin	64	0.001%	40	0.001%	31	0.001%	*****	<0.001%	*****	<0.001%
ustekinumab	523	0.012%	528	0.012%	498	0.011%	403	0.009%	360	0.008%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Gastroenterology and Hepatology</i>										
certolizumab pegol	811	0.019%	1,153	0.027%	909	0.021%	884	0.020%	892	0.021%
odevixibat	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
prucalopride succinate	29	0.001%	28	0.001%	25	0.001%	12	<0.001%	*****	<0.001%
vedolizumab	398	0.009%	445	0.010%	403	0.009%	411	0.009%	380	0.009%
zinc acetate	11	<0.001%	16	<0.001%	11	<0.001%	13	<0.001%	15	<0.001%
<i>Immunology</i>										
abatacept	148	0.003%	126	0.003%	117	0.003%	33	0.001%	23	0.001%
adalimumab	3,192	0.074%	3,145	0.072%	2,954	0.068%	2,187	0.050%	1,945	0.045%
anifrolumab-fnia	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
apremilast	176	0.004%	153	0.004%	147	0.003%	48	0.001%	23	0.001%
belatacept	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
belimumab	95	0.002%	74	0.002%	72	0.002%	22	0.001%	15	<0.001%
benralizumab	24	0.001%	24	0.001%	21	<0.001%	*****	<0.001%	*****	<0.001%
dornase alfa	137	0.003%	172	0.004%	143	0.003%	134	0.003%	135	0.003%
etanercept	1,695	0.039%	1,597	0.037%	1,496	0.034%	752	0.017%	665	0.015%
infliximab	1,905	0.044%	1,981	0.046%	1,835	0.042%	1,685	0.039%	1,547	0.036%
leflunomide	115	0.003%	94	0.002%	85	0.002%	37	0.001%	21	<0.001%
mepolizumab	32	0.001%	37	0.001%	33	0.001%	17	<0.001%	17	<0.001%
mycophenolate	466	0.011%	286	0.007%	266	0.006%	114	0.003%	64	0.001%
omalizumab	613	0.014%	621	0.014%	571	0.013%	400	0.009%	356	0.008%
riloncept	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
sarilumab	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
sirolimus	23	0.001%	29	0.001%	23	0.001%	18	<0.001%	15	<0.001%
tacrolimus	1,986	0.046%	2,128	0.049%	1,593	0.037%	920	0.021%	852	0.020%
tocilizumab	99	0.002%	136	0.003%	81	0.002%	35	0.001%	61	0.001%
tofacitinib	93	0.002%	89	0.002%	87	0.002%	39	0.001%	25	0.001%
upadacitinib	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Infectious Disease</i>										
ansuvimab-zykl	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
artesanate	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
brincidofovir	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
cilastatin and imipenem	14	<0.001%	39	0.001%	18	<0.001%	12	<0.001%	*****	<0.001%
delafloxacin meglumine	0	0.000%	*****	<0.001%	0	0.000%	*****	<0.001%	0	0.000%
efavirenz	127	0.003%	127	0.003%	105	0.002%	70	0.002%	54	0.001%
emtricitabine and tenofovir	2,016	0.046%	2,991	0.069%	2,139	0.049%	2,399	0.055%	2,467	0.057%
fexinidazole	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
ibalizumab-uiyk	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
lamivudine	501	0.012%	1,000	0.023%	601	0.014%	792	0.018%	837	0.019%
lefamulin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
miltefosine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
nifurtimox	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
remdesivir	20	<0.001%	582	0.013%	14	<0.001%	106	0.002%	464	0.011%
ribavirin	29	0.001%	13	<0.001%	13	<0.001%	*****	<0.001%	*****	<0.001%
tecovirimat	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
telavancin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
vonoprazan, amoxicillin, and clarithromycin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
zanamivir	147	0.003%	452	0.010%	149	0.003%	163	0.004%	169	0.004%
<i>Miscellaneous</i>										
gadobenate dimeglumine	1,984	0.046%	816	0.019%	709	0.016%	59	0.001%	56	0.001%
gadodiamide	138	0.003%	46	0.001%	37	0.001%	*****	<0.001%	*****	<0.001%
gadopentetate dimeglumine	201	0.005%	71	0.002%	61	0.001%	*****	<0.001%	*****	<0.001%
gadoterate meglumine	1,467	0.034%	549	0.013%	476	0.011%	45	0.001%	29	0.001%
gadoversetamide	138	0.003%	45	0.001%	36	0.001%	*****	<0.001%	*****	<0.001%
gadoxetate disodium	127	0.003%	43	0.001%	39	0.001%	*****	<0.001%	*****	<0.001%
ibrexafungerp	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Oncology</i>										
bevacizumab	152	0.004%	129	0.003%	93	0.002%	36	0.001%	30	0.001%
imatinib	32	0.001%	33	0.001%	28	0.001%	15	<0.001%	12	<0.001%
ipilimumab	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
nilotinib	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
pertuzumab	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
regorafenib	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
sonidegib	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
trastuzumab	40	0.001%	33	0.001%	26	0.001%	*****	<0.001%	12	<0.001%
trastuzumab emtansine	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
vismodegib	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
<i>Inborn Errors</i>										
agalsidase beta	19	<0.001%	26	0.001%	17	<0.001%	17	<0.001%	19	<0.001%
alglucosidase alfa	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
avalglucosidase alfa	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
cholic acid	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
elosulfase alfa	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
galsulfase	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
idursulfase	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
laronidase	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
migalastat	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
n-carbamyl-L-glutamic acid	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
pegvaliase-pqpz	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%
sapropterin	46	0.001%	62	0.001%	51	0.001%	57	0.001%	58	0.001%
taliglucerase alfa	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
triheptanoin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
vestronidase alfa-vjbk	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Psychiatry: Antidepressants</i>										
amitriptyline	14,314	0.330%	11,892	0.274%	10,368	0.239%	3,940	0.091%	2,668	0.062%
amoxapine	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
brexanolone	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
bupropion	51,239	1.180%	53,482	1.232%	44,150	1.017%	27,304	0.629%	23,656	0.547%
citalopram	45,133	1.040%	45,283	1.043%	37,813	0.871%	22,475	0.518%	20,440	0.473%
clomipramine	405	0.009%	310	0.007%	294	0.007%	118	0.003%	93	0.002%
desipramine	244	0.006%	190	0.004%	178	0.004%	61	0.001%	34	0.001%
desvenlafaxine	4,288	0.099%	3,777	0.087%	3,565	0.082%	1,652	0.038%	1,315	0.030%
doxepin	2,243	0.052%	1,818	0.042%	1,575	0.036%	573	0.013%	377	0.009%
escitalopram	62,667	1.444%	62,175	1.432%	52,608	1.212%	32,013	0.738%	29,876	0.691%
fluoxetine	52,224	1.203%	57,007	1.313%	46,357	1.068%	31,139	0.717%	28,935	0.669%
fluvoxamine	1,234	0.028%	1,106	0.025%	1,027	0.024%	587	0.014%	517	0.012%
imipramine	471	0.011%	386	0.009%	352	0.008%	120	0.003%	82	0.002%
isocarboxazid	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
levomilnacipran	227	0.005%	196	0.005%	183	0.004%	80	0.002%	51	0.001%
lurasidone	3,423	0.079%	6,109	0.141%	3,908	0.090%	3,575	0.082%	3,168	0.073%
maprotiline	*****	<0.001%	11	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
mirtazapine	5,714	0.132%	5,648	0.130%	4,625	0.107%	2,182	0.050%	1,715	0.040%
nefazodone	62	0.001%	55	0.001%	51	0.001%	31	0.001%	29	0.001%
nortriptyline	4,771	0.110%	3,732	0.086%	3,326	0.077%	1,116	0.026%	745	0.017%
paroxetine	12,910	0.297%	10,372	0.239%	9,618	0.222%	3,092	0.071%	2,183	0.051%
protriptyline	58	0.001%	36	0.001%	35	0.001%	*****	<0.001%	*****	<0.001%
quazepam	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%
selegiline	32	0.001%	26	0.001%	24	0.001%	*****	<0.001%	*****	<0.001%
sertraline	108,649	2.503%	161,345	3.717%	106,502	2.454%	98,435	2.268%	105,348	2.437%
tranylcypromine	11	<0.001%	11	<0.001%	11	<0.001%	*****	<0.001%	*****	<0.001%
trazodone	29,139	0.671%	24,998	0.576%	22,051	0.508%	8,520	0.196%	6,351	0.147%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
trimipramine	0	0.000%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%
venlafaxine	23,019	0.530%	21,040	0.485%	19,637	0.452%	11,023	0.254%	8,791	0.203%
vilazodone	1,558	0.036%	1,359	0.031%	1,287	0.030%	578	0.013%	420	0.010%
vortioxetine	1,429	0.033%	1,247	0.029%	1,165	0.027%	467	0.011%	315	0.007%
<i>Psychiatry: Antipsychotics</i>										
aripiprazole	11,058	0.255%	10,109	0.233%	9,058	0.209%	4,048	0.093%	3,110	0.072%
asenapine	305	0.007%	251	0.006%	222	0.005%	103	0.002%	70	0.002%
brexpiprazole	361	0.008%	348	0.008%	320	0.007%	152	0.004%	111	0.003%
clozapine	77	0.002%	78	0.002%	69	0.002%	65	0.001%	61	0.001%
iloperidone	43	0.001%	33	0.001%	28	0.001%	13	<0.001%	11	<0.001%
olanzapine	2,982	0.069%	3,172	0.073%	2,419	0.056%	1,443	0.033%	1,322	0.031%
paliperidone	362	0.008%	326	0.008%	277	0.006%	143	0.003%	115	0.003%
phenelzine	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
quetiapine	14,715	0.339%	14,978	0.345%	12,656	0.292%	7,563	0.174%	6,471	0.150%
risperidone	4,049	0.093%	3,522	0.081%	2,954	0.068%	1,317	0.030%	1,085	0.025%
ziprasidone	1,835	0.042%	1,578	0.036%	1,416	0.033%	658	0.015%	461	0.011%
<i>Psychiatry: Sedatives and Hypnotics</i>										
daridorexant	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
esketamine	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
eszopiclone	3,027	0.070%	2,449	0.056%	2,152	0.050%	664	0.015%	516	0.012%
lemborexant	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
temazepam	2,571	0.059%	1,987	0.046%	1,775	0.041%	489	0.011%	326	0.008%
triazolam	1,930	0.044%	854	0.020%	746	0.017%	118	0.003%	68	0.002%
zolpidem	29,407	0.677%	57,530	1.325%	23,772	0.548%	17,641	0.406%	39,432	0.912%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Psychiatry: Stimulants</i>										
amphetamine	53,012	1.221%	48,780	1.124%	47,674	1.098%	23,236	0.535%	15,817	0.366%
armodafinil	626	0.014%	520	0.012%	491	0.011%	162	0.004%	112	0.003%
dexmethylphenidate	931	0.021%	785	0.018%	740	0.017%	274	0.006%	174	0.004%
dextroamphetamine	53,768	1.239%	49,417	1.138%	48,319	1.113%	23,560	0.543%	16,044	0.371%
lisdexamfetamine	15,599	0.359%	13,710	0.316%	13,370	0.308%	4,619	0.106%	2,714	0.063%
methamphetamine	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
methylphenidate	8,677	0.200%	7,179	0.165%	6,888	0.159%	2,536	0.058%	1,711	0.040%
modafinil	906	0.021%	736	0.017%	709	0.016%	221	0.005%	147	0.003%
pitolisant	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%
solriamfetol	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
viloxazine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
<i>Reproductive and Urologic Agents</i>										
bremelanotide	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%
doxylamine succinate and pyridoxine	1,109	0.026%	125,177	2.884%	103,018	2.373%	86,015	1.982%	25,880	0.599%
drospirenone and ethinyl estradiol	54,999	1.267%	22,506	0.519%	22,275	0.513%	4,151	0.096%	1,512	0.035%
elagolix	193	0.004%	97	0.002%	95	0.002%	13	<0.001%	*****	<0.001%
etonogestrel and ethinyl estradiol	47,965	1.105%	24,412	0.562%	23,473	0.541%	4,593	0.106%	2,032	0.047%
flibanserin	36	0.001%	24	0.001%	24	0.001%	*****	<0.001%	*****	<0.001%
hydroxyprogesterone caproate	177	0.004%	43,687	1.006%	876	0.020%	39,941	0.920%	38,054	0.880%
levonorgestrel, intrauterine devices	2,914	0.067%	4,654	0.107%	1,555	0.036%	521	0.012%	3,025	0.070%
lutropin alfa	257	0.006%	177	0.004%	172	0.004%	*****	<0.001%	0	0.000%
mifepristone	1,431	0.033%	420	0.010%	278	0.006%	72	0.002%	72	0.002%
relugolix	0	0.000%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
ulipristal	829	0.019%	357	0.008%	324	0.007%	30	0.001%	21	<0.001%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Live-Birth Deliveries with Relaxed Enrollment Requirements (N = 5,289,819)										
<i>Analgesics, Anesthesia, and Drugs of Abuse</i>										
acamprosate	162	0.003%	157	0.003%	145	0.003%	31	0.001%	20	<0.001%
cocaine	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
duloxetine	16,501	0.312%	17,272	0.327%	16,000	0.302%	7,989	0.151%	6,177	0.117%
eltrombopag	17	<0.001%	17	<0.001%	14	<0.001%	*****	<0.001%	*****	<0.001%
milnaciprin	284	0.005%	285	0.005%	275	0.005%	70	0.001%	47	0.001%
naltrexone	2,697	0.051%	2,520	0.048%	2,343	0.044%	473	0.009%	252	0.005%
nicotine	4,031	0.076%	18,284	0.346%	7,584	0.143%	9,769	0.185%	7,781	0.148%
pregabalin	2,881	0.054%	3,016	0.057%	2,746	0.052%	1,252	0.024%	899	0.017%
remimazolam	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
varenicline	3,644	0.069%	3,552	0.067%	3,097	0.059%	663	0.013%	370	0.007%
<i>Cardiac and Hematologic Agents</i>										
ambrisentan	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
asparaginase	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
denosumab	*****	<0.001%	53	0.001%	*****	<0.001%	*****	<0.001%	43	0.001%
eculizumab	22	<0.001%	35	0.001%	27	0.001%	29	0.001%	32	0.001%
lenalidomide	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
mavacamten	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
midostaurin	0	0.000%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
ofatumumab	0	0.000%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%
ravulizumab-cwvz	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
romiplostim	*****	<0.001%	12	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
tafamidis	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
vericiguat	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
<i>Metabolic Agents</i>										
alirocumab	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
bempedoic acid	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
burosumab-twza	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
canagliflozin	531	0.010%	554	0.010%	533	0.010%	193	0.004%	89	0.002%
dapagliflozin	245	0.005%	249	0.005%	238	0.004%	81	0.002%	38	0.001%
ertugliflozin	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%
evinacumab-dgnb	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
evolocumab	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
exetanide	522	0.010%	502	0.009%	476	0.009%	141	0.003%	65	0.001%
incisiran	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
insulin aspart	6,223	0.118%	23,978	0.453%	10,253	0.194%	14,270	0.270%	21,407	0.407%
insulin detemir	2,208	0.042%	18,474	0.349%	5,751	0.109%	9,384	0.177%	16,081	0.306%
insulin nph	1,872	0.035%	73,643	1.392%	12,708	0.240%	29,687	0.561%	70,062	1.331%
lomitapide	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
metreleptin	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
phentermine and topiramate	80	0.002%	65	0.001%	59	0.001%	*****	<0.001%	*****	<0.001%
semaglutide	377	0.007%	385	0.007%	360	0.007%	131	0.002%	70	0.001%
sitagliptin	1,424	0.027%	1,586	0.030%	1,507	0.028%	639	0.012%	291	0.006%
<i>Neurological Agents: Epilepsies and Related Disorders</i>										
abobotulinumtoxin-a	12	<0.001%	18	<0.001%	15	<0.001%	*****	<0.001%	*****	<0.001%
diroximel fumarate	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
efgartigimod alfa	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
fremanezumab-vfrm	79	0.001%	88	0.002%	85	0.002%	21	<0.001%	13	<0.001%
inebilizumab	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
levetiracetam	7,266	0.137%	11,641	0.220%	8,615	0.163%	8,904	0.168%	9,256	0.176%
monomethyl fumarate	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
natalizumab	272	0.005%	256	0.005%	235	0.004%	52	0.001%	51	0.001%
stiripentol	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Neurological Agents: Migraine</i>										
dimethyl fumarate	339	0.006%	328	0.006%	314	0.006%	122	0.002%	83	0.002%
fenfluramine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
interferon beta-1a	503	0.010%	434	0.008%	402	0.008%	90	0.002%	82	0.002%
interferon beta-1b	95	0.002%	98	0.002%	89	0.002%	16	<0.001%	14	<0.001%
naratriptan	992	0.019%	895	0.017%	827	0.016%	209	0.004%	120	0.002%
ocrelizumab	59	0.001%	24	<0.001%	20	<0.001%	*****	<0.001%	0	0.000%
risdiplam	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
sumatriptan	27,856	0.527%	30,209	0.571%	23,476	0.444%	9,484	0.179%	6,260	0.119%
ubrogepant	121	0.002%	141	0.003%	120	0.002%	37	0.001%	31	0.001%
<i>Neurological Agents: Multiple Sclerosis</i>										
daclizumab	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
eptinezumab-jjmr	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
erenumab-aooe	334	0.006%	337	0.006%	317	0.006%	99	0.002%	63	0.001%
eslicarbazepine	46	0.001%	60	0.001%	52	0.001%	43	0.001%	35	0.001%
fampiridine	33	0.001%	31	0.001%	30	0.001%	*****	<0.001%	*****	<0.001%
fingolimod	148	0.003%	138	0.003%	130	0.002%	42	0.001%	32	0.001%
galcanezumab	257	0.005%	258	0.005%	243	0.005%	76	0.001%	41	0.001%
inotersen	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
lamotrigine	22,215	0.420%	25,636	0.485%	22,706	0.429%	15,334	0.290%	14,059	0.267%
lasmiditan	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%
nusinersen	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
ozanimod	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%
patisiran	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
ponesimod	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
rimegepant	114	0.002%	114	0.002%	107	0.002%	26	<0.001%	19	<0.001%
siponimod	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%
teriflunomide	27	0.001%	20	<0.001%	19	<0.001%	12	<0.001%	*****	<0.001%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Neurological Agents: Other</i>										
alemtuzumab	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%
amifampridine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
atogepant	0	0.000%	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%
cannabidiol	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
cenobamate	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
cladribine	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
lacosamide	536	0.010%	711	0.013%	572	0.011%	530	0.010%	550	0.010%
satralizumab-mwge	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
<i>Dermatology</i>										
abrocitinib	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
acitretin	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
afamelanotide	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
alefacept	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%
brodalumab	0	0.000%	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%
cyclosporine	2,945	0.056%	3,265	0.062%	2,757	0.052%	1,350	0.026%	1,092	0.021%
dupilumab	264	0.005%	270	0.005%	260	0.005%	125	0.002%	97	0.002%
efalizumab	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%
tretinoin	38	0.001%	35	0.001%	28	0.001%	*****	<0.001%	*****	<0.001%
guselkumab	28	0.001%	31	0.001%	29	0.001%	15	<0.001%	*****	<0.001%
ixekizumab	47	0.001%	48	0.001%	47	0.001%	15	<0.001%	16	<0.001%
pimecrolimus	1,133	0.021%	1,817	0.034%	1,123	0.021%	615	0.012%	495	0.009%
risankizumab	23	<0.001%	30	0.001%	29	0.001%	11	<0.001%	*****	<0.001%
tildrakizumab-asmn	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
tralokinumab, tralokinumab-ldrm	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
tretinoin	49	0.001%	47	0.001%	37	0.001%	*****	<0.001%	*****	<0.001%
ustekinumab	522	0.010%	594	0.011%	557	0.011%	463	0.009%	415	0.008%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Gastroenterology and Hepatology</i>										
certolizumab pegol	832	0.016%	1,297	0.025%	1,000	0.019%	991	0.019%	1,004	0.019%
odevixibat	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
prucalopride succinate	29	0.001%	30	0.001%	27	0.001%	12	<0.001%	*****	<0.001%
vedolizumab	410	0.008%	493	0.009%	444	0.008%	457	0.009%	422	0.008%
zinc acetate	11	<0.001%	18	<0.001%	12	<0.001%	15	<0.001%	17	<0.001%
<i>Immunology</i>										
abatacept	139	0.003%	138	0.003%	128	0.002%	37	0.001%	26	<0.001%
adalimumab	3,259	0.062%	3,540	0.067%	3,294	0.062%	2,455	0.046%	2,208	0.042%
anifrolumab-fnia	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
apremilast	163	0.003%	170	0.003%	164	0.003%	54	0.001%	25	<0.001%
belatacept	0	0.000%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
belimumab	89	0.002%	82	0.002%	80	0.002%	23	<0.001%	16	<0.001%
benralizumab	22	<0.001%	24	<0.001%	21	<0.001%	*****	<0.001%	*****	<0.001%
dornase alfa	141	0.003%	205	0.004%	169	0.003%	162	0.003%	159	0.003%
etanercept	1,711	0.032%	1,815	0.034%	1,687	0.032%	868	0.016%	769	0.015%
infliximab	1,977	0.037%	2,258	0.043%	2,075	0.039%	1,903	0.036%	1,757	0.033%
leflunomide	115	0.002%	107	0.002%	97	0.002%	42	0.001%	22	<0.001%
mepolizumab	30	0.001%	39	0.001%	35	0.001%	17	<0.001%	17	<0.001%
mycophenolate	424	0.008%	333	0.006%	309	0.006%	134	0.003%	75	0.001%
omalizumab	621	0.012%	702	0.013%	638	0.012%	446	0.008%	403	0.008%
riloncept	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
sarilumab	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
sirolimus	25	<0.001%	33	0.001%	26	<0.001%	20	<0.001%	18	<0.001%
tacrolimus	1,730	0.033%	2,445	0.046%	1,825	0.035%	1,079	0.020%	990	0.019%
tocilizumab	96	0.002%	154	0.003%	87	0.002%	36	0.001%	72	0.001%
tofacitinib	89	0.002%	93	0.002%	91	0.002%	39	0.001%	25	<0.001%
upadacitinib	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Infectious Disease</i>										
ansuvimab-zykl	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
artesunate	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
brincidofovir	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
cilastatin and imipenem	*****	<0.001%	43	0.001%	18	<0.001%	14	<0.001%	12	<0.001%
delafloxacin meglumine	0	0.000%	*****	<0.001%	0	0.000%	*****	<0.001%	0	0.000%
efavirenz	131	0.002%	157	0.003%	128	0.002%	86	0.002%	67	0.001%
emtricitabine and tenofovir	2,168	0.041%	3,752	0.071%	2,619	0.050%	2,986	0.056%	3,097	0.059%
fexinidazole	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
ibalizumab-uiyk	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
lamivudine	519	0.010%	1,283	0.024%	740	0.014%	1,011	0.019%	1,077	0.020%
lefamulin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
miltefosine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
nifurtimox	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
remdesivir	12	<0.001%	673	0.013%	14	<0.001%	116	0.002%	545	0.010%
ribavirin	28	0.001%	18	<0.001%	18	<0.001%	*****	<0.001%	*****	<0.001%
tecovirimat	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
telavancin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
clarithromycin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
zanamivir	120	0.002%	515	0.010%	172	0.003%	177	0.003%	195	0.004%
<i>Miscellaneous</i>										
gadobenate dimeglumine	1,483	0.028%	955	0.018%	826	0.016%	70	0.001%	68	0.001%
gadodiamide	101	0.002%	57	0.001%	47	0.001%	*****	<0.001%	*****	<0.001%
gadopentetate dimeglumine	158	0.003%	79	0.001%	69	0.001%	*****	<0.001%	*****	<0.001%
gadoterate meglumine	1,076	0.020%	605	0.011%	528	0.010%	47	0.001%	31	0.001%
gadoversetamide	92	0.002%	57	0.001%	46	0.001%	*****	<0.001%	*****	<0.001%
gadoxetate disodium	91	0.002%	52	0.001%	48	0.001%	*****	<0.001%	*****	<0.001%
ibrexafungerp	0	0.000%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Oncology</i>										
bevacizumab	143	0.003%	157	0.003%	111	0.002%	43	0.001%	37	0.001%
imatinib	32	0.001%	35	0.001%	29	0.001%	17	<0.001%	14	<0.001%
ipilimumab	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%
nilotinib	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
pertuzumab	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
regorafenib	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
sonidegib	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
trastuzumab	38	0.001%	37	0.001%	29	0.001%	*****	<0.001%	14	<0.001%
trastuzumab emtansine	0	0.000%	*****	0.000%	0	0.000%	0	0.000%	*****	<0.001%
vismodegib	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
<i>Inborn Errors</i>										
agalsidase beta	20	<0.001%	28	0.001%	18	<0.001%	18	<0.001%	21	<0.001%
alglucosidase alfa	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
avalglucosidase alfa	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
cholic acid	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
elosulfase alfa	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
galsulfase	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
idursulfase	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
laronidase	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
migalastat	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
n-carbamyl-L-glutamic acid	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
pegvaliase-pqpz	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%
sapropterin	49	0.001%	70	0.001%	58	0.001%	64	0.001%	65	0.001%
taliglucerase alfa	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
triheptanoin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
vestronidase alfa-vjbk	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Psychiatry: Antidepressants</i>										
amitriptyline	13,641	0.258%	14,286	0.270%	12,348	0.233%	4,788	0.091%	3,295	0.063%
amoxapine	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
brexanolone	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
bupropion	50,995	0.964%	63,649	1.203%	51,483	0.973%	32,593	0.616%	28,476	0.541%
citalopram	45,143	0.853%	54,633	1.033%	44,724	0.845%	27,144	0.513%	24,893	0.473%
clomipramine	394	0.007%	347	0.007%	329	0.006%	138	0.003%	112	0.002%
desipramine	222	0.004%	222	0.004%	203	0.004%	72	0.001%	43	0.001%
desvenlafaxine	4,253	0.080%	4,308	0.081%	4,024	0.076%	1,899	0.036%	1,517	0.029%
doxepin	2,123	0.040%	2,223	0.042%	1,924	0.036%	690	0.013%	457	0.009%
escitalopram	61,976	1.172%	72,715	1.375%	60,582	1.145%	37,339	0.706%	35,145	0.668%
fluoxetine	52,235	0.987%	68,118	1.288%	54,269	1.026%	37,267	0.705%	34,829	0.662%
fluvoxamine	1,245	0.024%	1,286	0.024%	1,184	0.022%	675	0.013%	610	0.012%
imipramine	463	0.009%	465	0.009%	425	0.008%	150	0.003%	98	0.002%
isocarboxazid	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
levomilnacipran	226	0.004%	241	0.005%	223	0.004%	102	0.002%	65	0.001%
lurasidone	3,373	0.064%	7,372	0.139%	4,635	0.088%	4,334	0.082%	3,869	0.074%
maprotiline	*****	<0.001%	12	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
mirtazapine	5,557	0.105%	6,853	0.130%	5,536	0.105%	2,691	0.051%	2,121	0.040%
nefazodone	63	0.001%	63	0.001%	59	0.001%	35	0.001%	31	0.001%
nortriptyline	4,492	0.085%	4,343	0.082%	3,865	0.073%	1,277	0.024%	860	0.016%
paroxetine	12,716	0.240%	12,471	0.236%	11,469	0.217%	3,723	0.070%	2,661	0.051%
protriptyline	52	0.001%	42	0.001%	41	0.001%	*****	<0.001%	*****	<0.001%
quazepam	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%
selegiline	30	0.001%	30	0.001%	28	0.001%	*****	<0.001%	11	<0.001%
sertraline	108,755	2.056%	193,237	3.653%	123,921	2.343%	117,571	2.223%	126,772	2.409%
tranylcypromine	13	<0.001%	13	<0.001%	13	<0.001%	*****	<0.001%	*****	<0.001%
trazodone	28,210	0.533%	29,997	0.567%	26,239	0.496%	10,267	0.194%	7,719	0.147%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
trimipramine	0	0.000%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%
venlafaxine	23,647	0.447%	25,147	0.475%	23,255	0.440%	13,118	0.248%	10,504	0.200%
vilazodone	1,539	0.029%	1,560	0.029%	1,477	0.028%	651	0.012%	475	0.009%
vortioxetine	1,371	0.026%	1,411	0.027%	1,306	0.025%	534	0.010%	370	0.007%
<i>Psychiatry: Antipsychotics</i>										
aripiprazole	11,000	0.208%	11,948	0.226%	10,620	0.201%	4,795	0.091%	3,745	0.071%
asenapine	301	0.006%	296	0.006%	259	0.005%	117	0.002%	81	0.002%
brexpiprazole	334	0.006%	378	0.007%	344	0.007%	168	0.003%	126	0.002%
clozapine	80	0.002%	96	0.002%	80	0.002%	79	0.001%	74	0.001%
iloperidone	42	0.001%	40	0.001%	34	0.001%	18	<0.001%	14	<0.001%
olanzapine	2,853	0.054%	3,872	0.073%	2,911	0.055%	1,774	0.034%	1,631	0.031%
paliperidone	342	0.006%	378	0.007%	323	0.006%	163	0.003%	134	0.003%
phenelzine	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
quetiapine	14,957	0.283%	18,171	0.344%	15,182	0.287%	9,139	0.173%	7,831	0.149%
risperidone	3,880	0.073%	4,356	0.082%	3,608	0.068%	1,663	0.031%	1,364	0.026%
ziprasidone	1,799	0.034%	1,930	0.036%	1,729	0.033%	786	0.015%	564	0.011%
<i>Psychiatry: Sedatives and Hypnotics</i>										
daridorexant	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
esketamine	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
eszopiclone	2,828	0.053%	2,859	0.054%	2,494	0.047%	792	0.015%	610	0.012%
lemborexant	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
temazepam	2,428	0.046%	2,377	0.045%	2,122	0.040%	589	0.011%	398	0.008%
triazolam	1,499	0.028%	1,026	0.019%	894	0.017%	147	0.003%	79	0.002%
zolpidem	28,301	0.535%	70,036	1.324%	28,128	0.532%	21,501	0.406%	48,520	0.922%
<i>Psychiatry: Stimulants</i>										
amphetamine	55,775	1.054%	56,779	1.073%	55,198	1.043%	27,106	0.512%	18,415	0.350%
armodafinil	620	0.012%	587	0.011%	556	0.011%	187	0.004%	126	0.002%
dexmethylphenidate	901	0.017%	897	0.017%	850	0.016%	314	0.006%	191	0.004%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

Exposure(s) of Interest ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
dextroamphetamine	56,584	1.070%	57,522	1.087%	55,946	1.058%	27,470	0.519%	18,672	0.355%
lisdexamfetamine	15,893	0.300%	15,721	0.297%	15,292	0.289%	5,309	0.100%	3,163	0.060%
methamphetamine	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
methylphenidate	8,608	0.163%	8,303	0.157%	7,946	0.150%	2,906	0.055%	1,972	0.037%
modafinil	886	0.017%	863	0.016%	824	0.016%	261	0.005%	170	0.003%
pitolisant	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
solriamfetol	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
viloxazine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
<i>Reproductive and Urologic Agents</i>										
bremelanotide	*****	<0.001%	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%
doxylamine succinate and pyridoxine	801	0.015%	148,873	2.814%	121,524	2.297%	102,203	1.932%	30,878	0.587%
drospirenone and ethinyl estradiol	47,422	0.896%	25,066	0.474%	24,749	0.468%	4,510	0.085%	1,650	0.031%
elagolix	170	0.003%	105	0.002%	103	0.002%	14	<0.001%	*****	<0.001%
etonogestrel and ethinyl estradiol	42,550	0.804%	28,177	0.533%	26,752	0.506%	5,164	0.098%	2,583	0.049%
flibanserin	30	0.001%	26	<0.001%	26	<0.001%	*****	<0.001%	*****	<0.001%
hydroxyprogesterone caproate	119	0.002%	53,766	1.016%	1,082	0.020%	48,986	0.926%	46,709	0.887%
levonorgestrel, intrauterine devices	1,983	0.037%	5,798	0.110%	1,842	0.035%	604	0.011%	3,846	0.073%
lutropin alfa	267	0.005%	202	0.004%	197	0.004%	*****	<0.001%	0	0.000%
mifepristone	780	0.015%	495	0.009%	320	0.006%	90	0.002%	88	0.002%
relugolix	0	0.000%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
ulipristal	679	0.013%	478	0.009%	431	0.008%	42	0.001%	29	0.001%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Live-Birth Deliveries (N = 4,340,586)										
<i>Analgesics, Anesthesia, and Drugs of Abuse</i>										
acamprosate	*****	<0.001%	101	0.002%	*****	<0.001%	*****	<0.001%	53	0.001%
cocaine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
duloxetine	4,261	0.099%	7,369	0.170%	174	0.004%	410	0.009%	10,110	0.233%
eltrombopag	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%	19	<0.001%
milnaciprin	37	0.001%	183	0.004%	*****	<0.001%	*****	<0.001%	111	0.003%
naltrexone	109	0.003%	1,669	0.038%	51	0.001%	68	0.002%	1,036	0.024%
nicotine	635	0.015%	3,383	0.078%	3,055	0.070%	3,176	0.073%	7,160	0.165%
pregabalin	546	0.013%	1,387	0.032%	42	0.001%	80	0.002%	1,566	0.036%
remimazolam	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
varenicline	50	0.001%	2,215	0.051%	128	0.003%	127	0.003%	1,542	0.036%
<i>Cardiac and Hematologic Agents</i>										
ambrisentan	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	13	<0.001%
asparaginase	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
denosumab	*****	<0.001%	*****	<0.001%	*****	<0.001%	34	0.001%	39	0.001%
eculizumab	22	0.001%	0	0.000%	0	0.000%	*****	<0.001%	49	0.001%
lenalidomide	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
mavacamten	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
midostaurin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
ofatumumab	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
ravulizumab-cwvz	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
romiplostim	0	0.000%	*****	<0.001%	*****	<0.001%	*****	<0.001%	14	<0.001%
tafamidis	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
vericiguat	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
<i>Metabolic Agents</i>										
alirocumab	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
bempedoic acid	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
burosumab-twza	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
canagliflozin	65	0.002%	300	0.007%	*****	<0.001%	*****	<0.001%	138	0.003%
dapagliflozin	25	0.001%	151	0.003%	*****	<0.001%	*****	<0.001%	74	0.002%
ertugliflozin	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
evinacumab-dgnb	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
evolocumab	0	0.000%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
exetanide	45	0.001%	299	0.007%	*****	<0.001%	*****	<0.001%	127	0.003%
inclisiran	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
insulin aspart	6,701	0.155%	587	0.014%	506	0.012%	7,140	0.165%	13,363	0.308%
insulin detemir	3,192	0.074%	600	0.014%	461	0.011%	6,890	0.159%	9,659	0.223%
insulin nph	8,455	0.196%	480	0.011%	1,180	0.027%	36,105	0.835%	39,560	0.911%
lomitapide	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
metreleptin	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
phentermine and topiramate	*****	<0.001%	45	0.001%	0	0.000%	*****	<0.001%	29	0.001%
semaglutide	44	0.001%	221	0.005%	*****	<0.001%	*****	<0.001%	252	0.006%
sitagliptin	189	0.004%	785	0.018%	19	<0.001%	23	0.001%	501	0.012%
<i>Neurological Agents: Epilepsies and Related Disorders</i>										
abobotulinumtoxin-a	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
diroximel fumarate	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
efgartigimod alfa	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
fremanezumab-vfrm	*****	<0.001%	61	0.001%	0	0.000%	*****	<0.001%	43	0.001%
inebilizumab	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
levetiracetam	5,393	0.125%	994	0.023%	353	0.008%	1,012	0.023%	8,817	0.203%
monomethyl fumarate	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
natalizumab	25	0.001%	168	0.004%	*****	<0.001%	*****	<0.001%	213	0.005%
stiripentol	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Neurological Agents: Migraine</i>										
dimethyl fumarate	61	0.001%	161	0.004%	0	0.000%	11	<0.001%	222	0.005%
fenfluramine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
interferon beta-1a	27	0.001%	259	0.006%	*****	<0.001%	22	0.001%	323	0.007%
interferon beta-1b	*****	<0.001%	61	0.001%	0	0.000%	*****	<0.001%	56	0.001%
naratriptan	55	0.001%	563	0.013%	22	0.001%	21	<0.001%	342	0.008%
ocrelizumab	0	0.000%	16	<0.001%	*****	<0.001%	0	0.000%	112	0.003%
risdiplam	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
sumatriptan	1,997	0.046%	15,390	0.355%	2,629	0.061%	1,828	0.042%	15,769	0.363%
ubrogepant	*****	<0.001%	89	0.002%	*****	<0.001%	*****	<0.001%	61	0.001%
<i>Neurological Agents: Multiple Sclerosis</i>										
daclizumab	0	0.000%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
eptinezumab-jjmr	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
erenumab-aooe	36	0.001%	209	0.005%	*****	<0.001%	*****	<0.001%	129	0.003%
eslicarbazepine	28	0.001%	13	<0.001%	*****	<0.001%	*****	<0.001%	43	0.001%
fampiridine	*****	<0.001%	16	<0.001%	0	0.000%	0	0.000%	14	<0.001%
fingolimod	24	0.001%	78	0.002%	0	0.000%	*****	<0.001%	71	0.002%
galcanezumab	26	0.001%	155	0.004%	*****	<0.001%	*****	<0.001%	95	0.002%
inotersen	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
lamotrigine	9,501	0.220%	7,343	0.169%	341	0.008%	855	0.020%	15,615	0.360%
lasmiditan	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
nusinersen	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
ozanimod	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%
patisiran	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
ponesimod	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
rimegepant	11	<0.001%	80	0.002%	0	0.000%	*****	<0.001%	52	0.001%
siponimod	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
teriflunomide	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%	17	<0.001%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Neurological Agents: Other</i>										
alemtuzumab	0	0.000%	*****	<0.001%	0	0.000%	*****	<0.001%	46	0.001%
amifampridine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
atogepant	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
cannabidiol	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
cenobamate	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
cladribine	0	0.000%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
lacosamide	381	0.009%	85	0.002%	11	<0.001%	64	0.001%	552	0.013%
satralizumab-mwge	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
<i>Dermatology</i>										
abrocitinib	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
acitretin	0	0.000%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
afamelanotide	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
alefacept	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
brodalumab	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
cyclosporine	550	0.013%	1,436	0.033%	117	0.003%	144	0.003%	1,156	0.027%
dupilumab	86	0.002%	132	0.003%	*****	<0.001%	*****	<0.001%	145	0.003%
efalizumab	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%
tretinoin	0	0.000%	21	<0.001%	*****	<0.001%	*****	<0.001%	37	0.001%
guselkumab	*****	<0.001%	14	<0.001%	0	0.000%	0	0.000%	25	0.001%
ixekizumab	12	<0.001%	28	0.001%	0	0.000%	*****	<0.001%	35	0.001%
pimecrolimus	47	0.001%	795	0.018%	234	0.005%	244	0.006%	727	0.017%
risankizumab	*****	<0.001%	15	<0.001%	0	0.000%	0	0.000%	23	0.001%
tildrakizumab-asmn	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%	*****	<0.001%
tralokinumab, tralokinumab-ldrm	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
tretinoin	*****	<0.001%	28	0.001%	*****	<0.001%	*****	<0.001%	45	0.001%
ustekinumab	324	0.007%	105	0.002%	*****	<0.001%	11	<0.001%	445	0.010%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Gastroenterology and Hepatology</i>										
certolizumab pegol	658	0.015%	170	0.004%	18	<0.001%	91	0.002%	965	0.022%
odevixibat	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
prucalopride succinate	*****	<0.001%	15	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
vedolizumab	343	0.008%	20	<0.001%	*****	<0.001%	13	<0.001%	400	0.009%
zinc acetate	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%	12	<0.001%
<i>Immunology</i>										
abatacept	13	<0.001%	85	0.002%	*****	<0.001%	*****	<0.001%	79	0.002%
adalimumab	1,731	0.040%	843	0.019%	20	<0.001%	72	0.002%	2,327	0.054%
anifrolumab-fnia	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
apremilast	15	<0.001%	99	0.002%	*****	<0.001%	*****	<0.001%	65	0.001%
belatacept	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
belimumab	13	<0.001%	51	0.001%	0	0.000%	*****	<0.001%	26	0.001%
benralizumab	*****	<0.001%	13	<0.001%	0	0.000%	*****	<0.001%	18	<0.001%
dornase alfa	106	0.002%	20	<0.001%	*****	<0.001%	13	<0.001%	127	0.003%
etanercept	516	0.012%	750	0.017%	*****	<0.001%	37	0.001%	1,090	0.025%
infliximab	1,406	0.033%	228	0.005%	26	0.001%	47	0.001%	1,637	0.038%
leflunomide	13	<0.001%	54	0.001%	*****	<0.001%	*****	<0.001%	76	0.002%
mepolizumab	13	<0.001%	16	<0.001%	0	0.000%	*****	<0.001%	18	<0.001%
mycophenolate	49	0.001%	166	0.004%	*****	<0.001%	*****	<0.001%	313	0.007%
omalizumab	310	0.007%	198	0.005%	*****	<0.001%	17	<0.001%	361	0.008%
rilonacept	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
sarilumab	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
sirolimus	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%	20	<0.001%
tacrolimus	469	0.011%	959	0.022%	180	0.004%	221	0.005%	1,128	0.026%
tocilizumab	15	<0.001%	58	0.001%	13	<0.001%	39	0.001%	72	0.002%
tofacitinib	22	0.001%	48	0.001%	0	0.000%	*****	<0.001%	59	0.001%
upadacitinib	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Infectious Disease</i>										
ansuvimab-zykl	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
artesunate	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
brincidofovir	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
cilastatin and imipenem	0	0.000%	17	<0.001%	11	<0.001%	*****	<0.001%	21	<0.001%
delafloxacin meglumine	0	0.000%	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%
efavirenz	35	0.001%	48	0.001%	*****	<0.001%	*****	<0.001%	86	0.002%
emtricitabine and tenofovir	1,664	0.038%	273	0.006%	87	0.002%	281	0.007%	2,493	0.057%
fexinidazole	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
ibalizumab-uiyk	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
lamivudine	463	0.011%	63	0.001%	39	0.001%	131	0.003%	862	0.020%
lefamulin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
miltefosine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
nifurtimox	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
remdesivir	0	0.000%	14	<0.001%	104	0.002%	462	0.011%	91	0.002%
ribavirin	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
tecovirimat	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
telavancin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
vonoprazan, amoxicillin, and clarithromycin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
zanamivir	0	0.000%	137	0.003%	134	0.003%	152	0.004%	72	0.002%
<i>Miscellaneous</i>										
gadobenate dimeglumine	0	0.000%	704	0.016%	54	0.001%	50	0.001%	1,671	0.038%
gadodiamide	0	0.000%	37	0.001%	*****	<0.001%	*****	<0.001%	85	0.002%
gadopentetate dimeglumine	0	0.000%	61	0.001%	*****	<0.001%	*****	<0.001%	89	0.002%
gadoterate meglumine	0	0.000%	476	0.011%	44	0.001%	28	0.001%	1,259	0.029%
gadoversetamide	*****	<0.001%	35	0.001%	*****	<0.001%	*****	<0.001%	65	0.001%
gadoxetate disodium	0	0.000%	38	0.001%	*****	<0.001%	*****	<0.001%	122	0.003%
ibrexafungerp	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Oncology</i>										
bevacizumab	*****	<0.001%	76	0.002%	12	<0.001%	16	<0.001%	169	0.004%
imatinib	*****	<0.001%	17	<0.001%	*****	<0.001%	*****	<0.001%	44	0.001%
ipilimumab	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%	*****	<0.001%
nilotinib	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%	12	<0.001%
pertuzumab	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%	84	0.002%
regorafenib	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
sonidegib	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
trastuzumab	*****	<0.001%	19	<0.001%	0	0.000%	*****	<0.001%	149	0.003%
trastuzumab emtansine	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%	*****	<0.001%
vismodegib	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
<i>Inborn Errors</i>										
agalsidase beta	12	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	17	<0.001%
alglucosidase alfa	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%	*****	<0.001%
avalglucosidase alfa	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
cholic acid	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
elosulfase alfa	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
galsulfase	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
idursulfase	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
laronidase	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
migalastat	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
n-carbamyl-L-glutamic acid	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
pegvaliase-pqpz	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
sapropterin	47	0.001%	*****	<0.001%	0	0.000%	*****	<0.001%	56	0.001%
taliglucerase alfa	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%	*****	<0.001%
triheptanoin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
vestronidase alfa-vjbk	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Psychiatry: Antidepressants</i>										
amitriptyline	1,499	0.035%	7,343	0.169%	441	0.010%	523	0.012%	5,001	0.115%
amoxapine	0	0.000%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
brexanolone	0	0.000%	0	0.000%	0	0.000%	0	0.000%	15	<0.001%
bupropion	15,299	0.354%	21,658	0.499%	1,883	0.043%	3,617	0.084%	39,343	0.906%
citalopram	13,368	0.309%	18,786	0.433%	1,250	0.029%	3,174	0.073%	41,907	0.965%
clomipramine	78	0.002%	184	0.004%	*****	<0.001%	*****	<0.001%	162	0.004%
desipramine	27	0.001%	125	0.003%	*****	<0.001%	*****	<0.001%	77	0.002%
desvenlafaxine	1,086	0.025%	1,986	0.046%	27	0.001%	95	0.002%	2,672	0.062%
doxepin	198	0.005%	1,139	0.026%	78	0.002%	92	0.002%	789	0.018%
escitalopram	20,435	0.473%	24,463	0.564%	1,436	0.033%	4,393	0.102%	64,855	1.494%
fluoxetine	18,648	0.431%	20,260	0.467%	1,629	0.038%	4,346	0.101%	51,278	1.181%
fluvoxamine	434	0.010%	455	0.010%	14	<0.001%	46	0.001%	858	0.020%
imipramine	53	0.001%	246	0.006%	*****	<0.001%	17	<0.001%	189	0.004%
isocarboxazid	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
levomilnacipran	40	0.001%	111	0.003%	*****	<0.001%	*****	<0.001%	93	0.002%
lurasidone	1,354	0.031%	1,670	0.038%	457	0.011%	794	0.018%	3,813	0.088%
maprotiline	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
mirtazapine	851	0.020%	2,966	0.068%	229	0.005%	430	0.010%	3,350	0.077%
nefazodone	26	0.001%	21	<0.001%	*****	<0.001%	*****	<0.001%	35	0.001%
nortriptyline	423	0.010%	2,434	0.056%	110	0.003%	156	0.004%	1,714	0.039%
paroxetine	1,435	0.033%	6,782	0.156%	144	0.003%	360	0.008%	9,756	0.225%
protriptyline	*****	<0.001%	27	0.001%	*****	<0.001%	0	0.000%	15	<0.001%
quazepam	0	0.000%	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%
selegiline	*****	<0.001%	14	<0.001%	0	0.000%	*****	<0.001%	18	<0.001%
sertraline	54,843	1.269%	33,807	0.779%	7,737	0.178%	25,700	0.595%	225,612	5.198%
tranylcypromine	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
trazodone	3,746	0.087%	14,831	0.342%	648	0.015%	1,340	0.031%	12,068	0.278%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
trimipramine	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%
venlafaxine	7,391	0.171%	9,187	0.212%	254	0.006%	579	0.013%	15,432	0.356%
vilazodone	352	0.008%	746	0.017%	14	<0.001%	25	0.001%	835	0.019%
vortioxetine	233	0.005%	736	0.017%	16	<0.001%	28	0.001%	815	0.019%
<i>Psychiatry: Antipsychotics</i>										
aripiprazole	2,095	0.048%	5,462	0.126%	202	0.005%	433	0.010%	7,120	0.164%
asenapine	46	0.001%	134	0.003%	*****	<0.001%	11	<0.001%	133	0.003%
brexpiprazole	88	0.002%	186	0.004%	*****	<0.001%	*****	<0.001%	241	0.006%
clozapine	55	0.001%	11	<0.001%	*****	<0.001%	*****	<0.001%	69	0.002%
iloperidone	*****	<0.001%	17	<0.001%	0	0.000%	*****	<0.001%	16	<0.001%
olanzapine	675	0.016%	1,340	0.031%	148	0.003%	347	0.008%	2,740	0.063%
paliperidone	67	0.002%	151	0.003%	*****	<0.001%	28	0.001%	319	0.007%
phenelzine	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
quetiapine	4,314	0.100%	6,200	0.143%	389	0.009%	991	0.023%	9,703	0.224%
risperidone	571	0.013%	1,902	0.044%	91	0.002%	266	0.006%	2,585	0.060%
ziprasidone	339	0.008%	846	0.019%	56	0.001%	58	0.001%	1,012	0.023%
<i>Psychiatry: Sedatives and Hypnotics</i>										
daridorexant	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
esketamine	0	0.000%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
eszopiclone	273	0.006%	1,611	0.037%	75	0.002%	153	0.004%	928	0.021%
lemborexant	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
temazepam	159	0.004%	1,371	0.032%	57	0.001%	115	0.003%	934	0.022%
triazolam	19	<0.001%	700	0.016%	60	0.001%	35	0.001%	908	0.021%
zolpidem	7,266	0.168%	12,045	0.277%	2,710	0.062%	26,730	0.618%	34,637	0.798%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Psychiatry: Stimulants</i>										
amphetamine	14,505	0.336%	24,703	0.569%	244	0.006%	391	0.009%	28,833	0.664%
armodafinil	80	0.002%	338	0.008%	*****	<0.001%	11	<0.001%	253	0.006%
dexmethylphenidate	137	0.003%	487	0.011%	11	<0.001%	21	<0.001%	363	0.008%
dextroamphetamine	14,729	0.341%	25,014	0.576%	240	0.006%	387	0.009%	29,260	0.674%
lisdexamfetamine	2,323	0.054%	8,857	0.204%	60	0.001%	123	0.003%	7,114	0.164%
methamphetamine	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
methylphenidate	1,441	0.033%	4,488	0.103%	70	0.002%	106	0.002%	3,738	0.086%
modafinil	116	0.003%	495	0.011%	*****	<0.001%	11	<0.001%	320	0.007%
pitolisant	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
solriamfetol	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
viloxazine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
<i>Reproductive and Urologic Agents</i>										
bremelanotide	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
doxylamine succinate and pyridoxine	16,537	0.383%	36,087	0.831%	13,270	0.306%	2,619	0.061%	7,047	0.162%
drospirenone and ethinyl estradiol	1,332	0.031%	18,256	0.421%	75	0.002%	75	0.002%	24,083	0.555%
elagolix	*****	<0.001%	84	0.002%	*****	<0.001%	0	0.000%	19	<0.001%
etonogestrel and ethinyl estradiol	1,252	0.029%	19,171	0.442%	177	0.004%	630	0.015%	106,443	2.452%
flibanserin	*****	<0.001%	18	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
hydroxyprogesterone caproate	664	0.015%	65	0.001%	5,429	0.125%	3,677	0.085%	7,552	0.174%
levonorgestrel, intrauterine devices	127	0.003%	1,300	0.030%	216	0.005%	2,818	0.065%	292,594	6.741%
lutropin alfa	0	0.000%	171	0.004%	*****	<0.001%	0	0.000%	0	0.000%
mifepristone	0	0.000%	276	0.006%	72	0.002%	70	0.002%	97	0.002%
relugolix	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
ulipristal	*****	<0.001%	313	0.007%	17	<0.001%	13	<0.001%	1,398	0.032%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Live-Birth Deliveries with Relaxed Enrollment Requirements (N = 5,289,819)										
<i>Analgesics, Anesthesia, and Drugs of Abuse</i>										
acamprosate	*****	<0.001%	118	0.002%	*****	<0.001%	*****	<0.001%	45	0.001%
cocaine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
duloxetine	4,920	0.093%	8,551	0.162%	222	0.004%	525	0.010%	10,120	0.191%
eltrombopag	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%	15	<0.001%
milnaciprin	38	0.001%	210	0.004%	*****	<0.001%	*****	<0.001%	93	0.002%
naltrexone	121	0.002%	1,958	0.037%	58	0.001%	77	0.001%	926	0.018%
nicotine	765	0.015%	4,185	0.079%	3,905	0.074%	4,114	0.078%	8,192	0.155%
pregabalin	659	0.013%	1,645	0.031%	50	0.001%	99	0.002%	1,498	0.028%
remimazolam	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
varenicline	64	0.001%	2,706	0.051%	171	0.003%	161	0.003%	1,343	0.025%
<i>Cardiac and Hematologic Agents</i>										
ambrisentan	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
asparaginase	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
denosumab	*****	<0.001%	*****	<0.001%	*****	<0.001%	38	0.001%	32	0.001%
eculizumab	24	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	54	0.001%
lenalidomide	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
mavacamten	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
midostaurin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
ofatumumab	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
ravulizumab-cwvz	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
romiplostim	0	0.000%	*****	<0.001%	*****	<0.001%	*****	<0.001%	12	<0.001%
tafamidis	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
vericiguat	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
<i>Metabolic Agents</i>										
alirocumab	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
bempedoic acid	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
burosumab-twza	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
canagliflozin	68	0.001%	350	0.007%	*****	<0.001%	*****	<0.001%	123	0.002%
dapagliflozin	28	0.001%	164	0.003%	*****	<0.001%	*****	<0.001%	59	0.001%
ertugliflozin	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
evinacumab-dgnb	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
evolocumab	0	0.000%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
exetanide	49	0.001%	354	0.007%	11	<0.001%	*****	<0.001%	110	0.002%
inclisiran	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
insulin aspart	8,086	0.154%	746	0.014%	655	0.012%	8,713	0.166%	16,059	0.304%
insulin detemir	3,845	0.073%	734	0.014%	598	0.011%	8,245	0.157%	11,518	0.218%
insulin nph	10,415	0.198%	596	0.011%	1,469	0.028%	43,184	0.820%	47,645	0.901%
lomitapide	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
metreleptin	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
phentermine and topiramate	*****	<0.001%	51	0.001%	0	0.000%	*****	<0.001%	17	<0.001%
semaglutide	45	0.001%	241	0.005%	*****	<0.001%	11	<0.001%	171	0.003%
sitagliptin	225	0.004%	911	0.017%	21	<0.001%	28	0.001%	469	0.009%
<i>Neurological Agents: Epilepsies and Related Disorders</i>										
abobotulinumtoxin-a	*****	<0.001%	12	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
diroximel fumarate	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
efgartigimod alfa	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
fremanezumab-vfrm	*****	<0.001%	64	0.001%	0	0.000%	*****	<0.001%	33	0.001%
inebilizumab	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
levetiracetam	6,449	0.123%	1,215	0.023%	443	0.008%	1,298	0.025%	10,316	0.195%
monomethyl fumarate	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
natalizumab	27	0.001%	188	0.004%	*****	<0.001%	*****	<0.001%	188	0.004%
stiripentol	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Neurological Agents: Migraine</i>										
dimethyl fumarate	64	0.001%	187	0.004%	0	0.000%	14	<0.001%	192	0.004%
fenfluramine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
interferon beta-1a	30	0.001%	299	0.006%	*****	<0.001%	24	<0.001%	297	0.006%
interferon beta-1b	*****	<0.001%	74	0.001%	0	0.000%	*****	<0.001%	47	0.001%
naratriptan	68	0.001%	649	0.012%	29	0.001%	24	<0.001%	289	0.005%
ocrelizumab	0	0.000%	19	<0.001%	*****	<0.001%	0	0.000%	84	0.002%
risdiplam	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
sumatriptan	2,272	0.043%	17,951	0.339%	3,247	0.061%	2,274	0.043%	14,421	0.273%
ubrogepant	12	<0.001%	91	0.002%	*****	<0.001%	*****	<0.001%	43	0.001%
<i>Neurological Agents: Multiple Sclerosis</i>										
daclizumab	0	0.000%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
eptinezumab-jjmr	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
erenumab-aooe	41	0.001%	226	0.004%	*****	<0.001%	*****	<0.001%	109	0.002%
eslicarbazepine	29	0.001%	15	<0.001%	*****	<0.001%	*****	<0.001%	40	0.001%
fampiridine	*****	<0.001%	19	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
fingolimod	26	<0.001%	93	0.002%	*****	<0.001%	*****	<0.001%	61	0.001%
galcanezumab	27	0.001%	175	0.003%	*****	<0.001%	*****	<0.001%	73	0.001%
inotersen	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
lamotrigine	11,121	0.211%	8,696	0.164%	451	0.009%	1,147	0.022%	17,005	0.321%
lasmiditan	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
nusinersen	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
ozanimod	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%
patisiran	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
ponesimod	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
rimegepant	11	<0.001%	85	0.002%	0	0.000%	*****	<0.001%	41	0.001%
siponimod	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
teriflunomide	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Neurological Agents: Other</i>										
alemtuzumab	0	0.000%	*****	<0.001%	0	0.000%	*****	<0.001%	36	0.001%
amifampridine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
atogepant	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
cannabidiol	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
cenobamate	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
cladribine	0	0.000%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
lacosamide	417	0.008%	98	0.002%	14	<0.001%	75	0.001%	595	0.011%
satralizumab-mwge	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
<i>Dermatology</i>										
abrocitinib	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
acitretin	0	0.000%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
afamelanotide	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
alefacept	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%
brodalumab	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
cyclosporine	612	0.012%	1,625	0.031%	142	0.003%	176	0.003%	1,018	0.019%
dupilumab	88	0.002%	141	0.003%	*****	<0.001%	*****	<0.001%	125	0.002%
efalizumab	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%
tretinoin	*****	<0.001%	26	<0.001%	*****	<0.001%	*****	<0.001%	34	0.001%
guselkumab	*****	<0.001%	15	<0.001%	0	0.000%	*****	<0.001%	18	<0.001%
ixekizumab	12	<0.001%	29	0.001%	0	0.000%	*****	<0.001%	26	<0.001%
pimecrolimus	55	0.001%	903	0.017%	277	0.005%	276	0.005%	557	0.011%
risankizumab	*****	<0.001%	19	<0.001%	0	0.000%	0	0.000%	15	<0.001%
tildrakizumab-asmn	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%	*****	<0.001%
tralokinumab, tralokinumab-ldrm	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
tretinoin	*****	<0.001%	33	0.001%	*****	<0.001%	*****	<0.001%	40	0.001%
ustekinumab	371	0.007%	110	0.002%	*****	<0.001%	11	<0.001%	428	0.008%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Gastroenterology and Hepatology</i>										
certolizumab pegol	726	0.014%	182	0.003%	27	0.001%	116	0.002%	982	0.019%
odevixibat	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
prucalopride succinate	*****	<0.001%	17	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
vedolizumab	378	0.007%	20	<0.001%	*****	<0.001%	14	<0.001%	405	0.008%
zinc acetate	11	<0.001%	0	0.000%	0	0.000%	*****	<0.001%	13	<0.001%
<i>Immunology</i>										
abatacept	15	<0.001%	92	0.002%	*****	<0.001%	*****	<0.001%	57	0.001%
adalimumab	1,933	0.037%	942	0.018%	22	<0.001%	92	0.002%	2,313	0.044%
anifrolumab-fnia	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
apremilast	17	<0.001%	110	0.002%	*****	<0.001%	*****	<0.001%	42	0.001%
belatacept	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
belimumab	14	<0.001%	58	0.001%	0	0.000%	*****	<0.001%	18	<0.001%
benralizumab	*****	<0.001%	13	<0.001%	0	0.000%	*****	<0.001%	14	<0.001%
dornase alfa	125	0.002%	24	<0.001%	*****	<0.001%	14	<0.001%	141	0.003%
etanercept	588	0.011%	836	0.016%	11	<0.001%	47	0.001%	1,002	0.019%
infliximab	1,578	0.030%	269	0.005%	30	0.001%	60	0.001%	1,659	0.031%
leflunomide	14	<0.001%	62	0.001%	*****	<0.001%	*****	<0.001%	58	0.001%
mepolizumab	13	<0.001%	18	<0.001%	0	0.000%	*****	<0.001%	19	<0.001%
mycophenolate	57	0.001%	191	0.004%	*****	<0.001%	*****	<0.001%	288	0.005%
omalizumab	343	0.007%	226	0.004%	12	<0.001%	22	<0.001%	361	0.007%
rilonacept	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
sarilumab	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
sirolimus	11	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%	18	<0.001%
tacrolimus	547	0.010%	1,086	0.021%	210	0.004%	247	0.005%	999	0.019%
tocilizumab	15	<0.001%	64	0.001%	14	<0.001%	50	0.001%	63	0.001%
tofacitinib	22	<0.001%	52	0.001%	0	0.000%	*****	<0.001%	41	0.001%
upadacitinib	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Infectious Disease</i>										
ansuvimab-zykl	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
artesunate	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
brincidofovir	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
cilastatin and imipenem	0	0.000%	17	<0.001%	13	<0.001%	12	<0.001%	18	<0.001%
delafloxacin meglumine	0	0.000%	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%
efavirenz	41	0.001%	60	0.001%	*****	<0.001%	*****	<0.001%	100	0.002%
emtricitabine and tenofovir	2,029	0.039%	338	0.006%	111	0.002%	382	0.007%	3,012	0.057%
fexinidazole	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
ibalizumab-uiyk	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
lamivudine	576	0.011%	76	0.001%	57	0.001%	181	0.003%	1,054	0.020%
lefamulin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
miltefosine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
nifurtimox	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
remdesivir	0	0.000%	14	<0.001%	114	0.002%	543	0.010%	80	0.002%
ribavirin	*****	<0.001%	13	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
tecovirimat	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
telavancin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
clarithromycin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
zanamivir	0	0.000%	160	0.003%	148	0.003%	178	0.003%	72	0.001%
<i>Miscellaneous</i>										
gadobenate dimeglumine	0	0.000%	820	0.016%	65	0.001%	61	0.001%	1,269	0.024%
gadodiamide	0	0.000%	47	0.001%	*****	<0.001%	*****	<0.001%	55	0.001%
gadopentetate dimeglumine	0	0.000%	69	0.001%	*****	<0.001%	*****	<0.001%	68	0.001%
gadoterate meglumine	0	0.000%	528	0.010%	46	0.001%	30	0.001%	841	0.016%
gadoversetamide	*****	<0.001%	45	0.001%	*****	<0.001%	*****	<0.001%	38	0.001%
gadoxetate disodium	0	0.000%	47	0.001%	*****	<0.001%	*****	<0.001%	79	0.001%
ibrexafungerp	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Oncology</i>										
bevacizumab	*****	<0.001%	92	0.002%	15	<0.001%	21	<0.001%	130	0.002%
imatinib	*****	<0.001%	17	<0.001%	*****	<0.001%	*****	<0.001%	43	0.001%
ipilimumab	0	0.000%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
nilotinib	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%	12	<0.001%
pertuzumab	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%	87	0.002%
regorafenib	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
sonidegib	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
trastuzumab	*****	<0.001%	21	<0.001%	0	0.000%	*****	<0.001%	143	0.003%
trastuzumab emtansine	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%	*****	<0.001%
vismodegib	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
<i>Inborn Errors</i>										
agalsidase beta	13	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	15	<0.001%
alglucosidase alfa	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%	*****	<0.001%
avalglucosidase alfa	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
cholic acid	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
elosulfase alfa	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
galsulfase	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
idursulfase	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
laronidase	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
migalastat	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
n-carbamyl-L-glutamic acid	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
pegvaliase-pqpz	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%
sapropterin	53	0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%	62	0.001%
taliglucerase alfa	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%	*****	<0.001%
triheptanoin	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
vestronidase alfa-vjbk	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>Psychiatry: Antidepressants</i>										
amitriptyline	1,786	0.034%	8,715	0.165%	532	0.010%	680	0.013%	4,725	0.089%
amoxapine	0	0.000%	*****	<0.001%	*****	<0.001%	*****	<0.001%	*****	<0.001%
brexanolone	0	0.000%	0	0.000%	0	0.000%	0	0.000%	12	<0.001%
bupropion	17,686	0.336%	25,309	0.478%	2,459	0.046%	4,666	0.089%	40,780	0.771%
citalopram	15,625	0.297%	22,308	0.422%	1,650	0.031%	4,179	0.079%	44,790	0.847%
clomipramine	96	0.002%	201	0.004%	*****	<0.001%	*****	<0.001%	165	0.003%
desipramine	31	0.001%	143	0.003%	*****	<0.001%	*****	<0.001%	76	0.001%
desvenlafaxine	1,218	0.023%	2,240	0.042%	33	0.001%	121	0.002%	2,574	0.049%
doxepin	236	0.004%	1,400	0.026%	97	0.002%	114	0.002%	740	0.014%
escitalopram	23,316	0.443%	28,370	0.536%	1,792	0.034%	5,521	0.105%	66,767	1.262%
fluoxetine	21,668	0.412%	23,818	0.450%	2,134	0.040%	5,591	0.106%	55,068	1.041%
fluvoxamine	500	0.009%	531	0.010%	15	<0.001%	57	0.001%	871	0.016%
imipramine	64	0.001%	294	0.006%	*****	<0.001%	17	<0.001%	182	0.003%
isocarboxazid	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
levomilnacipran	50	0.001%	134	0.003%	*****	<0.001%	*****	<0.001%	95	0.002%
lurasidone	1,624	0.031%	1,964	0.037%	577	0.011%	989	0.019%	4,028	0.076%
maprotiline	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
mirtazapine	1,017	0.019%	3,534	0.067%	298	0.006%	543	0.010%	3,273	0.062%
nefazodone	28	0.001%	25	<0.001%	*****	<0.001%	*****	<0.001%	36	0.001%
nortriptyline	478	0.009%	2,844	0.054%	125	0.002%	193	0.004%	1,562	0.030%
paroxetine	1,694	0.032%	8,129	0.154%	193	0.004%	461	0.009%	9,769	0.185%
protriptyline	*****	<0.001%	33	0.001%	*****	<0.001%	0	0.000%	11	<0.001%
quazepam	0	0.000%	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%
selegiline	*****	<0.001%	17	<0.001%	0	0.000%	*****	<0.001%	15	<0.001%
sertraline	63,263	1.202%	39,488	0.746%	9,776	0.185%	32,209	0.612%	244,764	4.627%
tranylcypromine	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
trazodone	4,414	0.084%	17,678	0.334%	826	0.016%	1,680	0.032%	11,604	0.219%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
trimipramine	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%
venlafaxine	8,655	0.164%	10,977	0.208%	335	0.006%	759	0.014%	16,148	0.305%
vilazodone	396	0.008%	867	0.016%	16	<0.001%	30	0.001%	777	0.015%
vortioxetine	267	0.005%	824	0.016%	19	<0.001%	36	0.001%	731	0.014%
<i>Psychiatry: Antipsychotics</i>										
aripiprazole	2,476	0.047%	6,404	0.121%	252	0.005%	556	0.011%	6,932	0.131%
asenapine	51	0.001%	159	0.003%	11	<0.001%	16	<0.001%	130	0.002%
brexpiprazole	97	0.002%	197	0.004%	*****	<0.001%	*****	<0.001%	203	0.004%
clozapine	62	0.001%	13	<0.001%	*****	<0.001%	*****	<0.001%	82	0.002%
iloperidone	*****	<0.001%	19	<0.001%	*****	<0.001%	*****	<0.001%	17	<0.001%
olanzapine	808	0.015%	1,600	0.030%	189	0.004%	447	0.008%	2,772	0.052%
paliperidone	80	0.002%	179	0.003%	*****	<0.001%	32	0.001%	276	0.005%
phenelzine	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
quetiapine	5,055	0.096%	7,512	0.142%	491	0.009%	1,242	0.024%	10,218	0.193%
risperidone	701	0.013%	2,309	0.044%	133	0.003%	336	0.006%	2,591	0.049%
ziprasidone	410	0.008%	1,050	0.020%	71	0.001%	70	0.001%	970	0.018%
<i>Psychiatry: Sedatives and Hypnotics</i>										
daridorexant	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
esketamine	0	0.000%	*****	<0.001%	0	0.000%	*****	<0.001%	*****	<0.001%
eszopiclone	313	0.006%	1,857	0.035%	92	0.002%	186	0.004%	829	0.016%
lemborexant	*****	<0.001%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
temazepam	192	0.004%	1,634	0.031%	65	0.001%	138	0.003%	882	0.017%
triazolam	23	<0.001%	836	0.016%	77	0.001%	42	0.001%	637	0.012%
zolpidem	8,599	0.163%	14,213	0.269%	3,312	0.063%	33,004	0.627%	39,624	0.749%
<i>Psychiatry: Stimulants</i>										
amphetamine	16,643	0.316%	28,626	0.541%	335	0.006%	526	0.010%	28,122	0.532%
armodafinil	93	0.002%	380	0.007%	*****	<0.001%	11	<0.001%	224	0.004%
dexmethylphenidate	152	0.003%	559	0.011%	11	<0.001%	21	<0.001%	323	0.006%

Table 2a. Pregnancy Episodes with Exposure(s) of Interest in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹ (continued)

Exposure(s) of Interest ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
dextroamphetamine	16,889	0.321%	28,997	0.548%	329	0.006%	520	0.010%	28,525	0.539%
lisdexamfetamine	2,677	0.051%	10,122	0.191%	81	0.002%	152	0.003%	6,444	0.122%
methamphetamine	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
methylphenidate	1,636	0.031%	5,204	0.098%	83	0.002%	131	0.002%	3,387	0.064%
modafinil	129	0.002%	577	0.011%	*****	<0.001%	15	<0.001%	284	0.005%
pitolisant	0	0.000%	*****	<0.001%	*****	<0.001%	0	0.000%	*****	<0.001%
solriamfetol	*****	<0.001%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
viloxazine	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
Reproductive and Urologic Agents										
bremelanotide	0	0.000%	*****	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
doxylamine succinate and pyridoxine	19,284	0.366%	42,850	0.810%	16,308	0.308%	3,274	0.062%	8,336	0.158%
drospirenone and ethinyl estradiol	1,397	0.027%	20,422	0.386%	91	0.002%	108	0.002%	21,813	0.412%
elagolix	*****	<0.001%	91	0.002%	*****	<0.001%	0	0.000%	11	<0.001%
etonogestrel and ethinyl estradiol	1,349	0.026%	21,964	0.415%	217	0.004%	1,022	0.019%	98,377	1.860%
flibanserin	*****	<0.001%	19	<0.001%	0	0.000%	0	0.000%	*****	<0.001%
hydroxyprogesterone caproate	801	0.015%	93	0.002%	6,787	0.128%	4,683	0.089%	9,663	0.183%
levonorgestrel, intrauterine devices	135	0.003%	1,568	0.030%	263	0.005%	3,608	0.069%	227,866	4.308%
lutropin alfa	0	0.000%	195	0.004%	*****	<0.001%	0	0.000%	0	0.000%
mifepristone	0	0.000%	318	0.006%	89	0.002%	85	0.002%	*****	<0.001%
relugolix	0	0.000%	0	0.000%	0	0.000%	0	0.000%	*****	<0.001%
ulipristal	*****	<0.001%	418	0.008%	23	<0.001%	17	<0.001%	1,456	0.028%

¹Pregnancy is defined as a pregnancy that resulted in a live birth delivery identified using the method specified in the overview section of this report.

²The Pre-Pregnancy and Post-Delivery Periods consist of 90 days in the "Live Birth Delivery" cohort and 60 days in the "Live Birth Deliveries with Relaxed Enrollment Requirements" cohort.

³Displayed percentages represent the number of pregnancy episodes with evidence of the exposure of interest as a proportion of all pregnancy episodes.

*****Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

Table 2b. Pregnancy Episodes with Evidence of Apremilast in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹, by Year of Delivery

Apremilast ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Live-Birth Deliveries										
2008 (N = 93,329)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2009 (N = 234,472)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2010 (N = 227,977)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2011 (N = 212,526)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2012 (N = 204,699)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2013 (N = 202,954)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2014 (N = 223,487)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2015 (N = 315,422)										
apremilast	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****
2016 (N = 419,532)										
apremilast	13	0.003%	12	0.003%	*****	*****	*****	*****	*****	*****
2017 (N = 709,989)										
apremilast	30	0.004%	30	0.004%	30	0.004%	*****	*****	*****	*****
2018 (N = 717,150)										
apremilast	35	0.005%	26	0.004%	23	0.003%	*****	*****	*****	*****
2019 (N = 234,291)										
apremilast	21	0.009%	13	0.006%	13	0.006%	*****	*****	*****	*****
2020 (N = 222,642)										
apremilast	32	0.014%	30	0.013%	29	0.013%	14	0.006%	*****	*****
2021 (N = 232,434)										
apremilast	34	0.015%	31	0.013%	30	0.013%	*****	*****	*****	*****
2022 (N = 89,682)										
apremilast	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****
Live-Birth Deliveries with Relaxed Enrollment Requirements										
2008 (N = 157,931)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2009 (N = 283,211)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2010 (N = 259,915)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2011 (N = 244,618)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%

Table 2b. Pregnancy Episodes with Evidence of Apremilast in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹, by Year of Delivery

Apremilast ³	Use in the Pre-Pregnancy Period ²		Use During Any Trimester		Use in First Trimester		Use in Second Trimester		Use in Third Trimester	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
<i>2012 (N = 235,680)</i>										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
<i>2013 (N = 242,884)</i>										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
<i>2014 (N = 290,131)</i>										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
<i>2015 (N = 412,834)</i>										
apremilast	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****
<i>2016 (N = 592,987)</i>										
apremilast	*****	*****	14	0.002%	*****	*****	*****	*****	*****	*****
<i>2017 (N = 863,263)</i>										
apremilast	27	0.003%	34	0.004%	34	0.004%	*****	*****	*****	*****
<i>2018 (N = 821,927)</i>										
apremilast	32	0.004%	30	0.004%	27	0.003%	*****	*****	*****	*****
<i>2019 (N = 268,253)</i>										
apremilast	19	0.007%	15	0.006%	15	0.006%	*****	*****	*****	*****
<i>2020 (N = 255,173)</i>										
apremilast	32	0.013%	32	0.013%	31	0.012%	15	0.006%	*****	*****
<i>2021 (N = 261,102)</i>										
apremilast	33	0.013%	34	0.013%	33	0.013%	*****	*****	*****	*****
<i>2022 (N = 99,910)</i>										
apremilast	*****	*****	*****	*****	*****	*****	*****	*****	*****	*****

Table 2b. Pregnancy Episodes with Evidence of Apremilast in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹, by Year of Delivery (continued)

Apremilast ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
Live-Birth Deliveries										
2008 (N = 93,329)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2009 (N = 234,472)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2010 (N = 227,977)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2011 (N = 212,526)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2012 (N = 204,699)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2013 (N = 202,954)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2014 (N = 223,487)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2015 (N = 315,422)										
apremilast	0	0.000%	*****	*****	0	0.000%	*****	*****	*****	*****
2016 (N = 419,532)										
apremilast	*****	*****	*****	*****	0	0.000%	0	0.000%	*****	*****
2017 (N = 709,989)										
apremilast	*****	*****	24	0.003%	0	0.000%	0	0.000%	11	0.002%
2018 (N = 717,150)										
apremilast	*****	*****	17	0.002%	0	0.000%	*****	*****	19	0.003%
2019 (N = 234,291)										
apremilast	*****	*****	*****	*****	0	0.000%	0	0.000%	*****	*****
2020 (N = 222,642)										
apremilast	*****	*****	15	0.007%	*****	*****	0	0.000%	*****	*****
2021 (N = 232,434)										
apremilast	*****	*****	19	0.008%	0	0.000%	*****	*****	*****	*****
2022 (N = 89,682)										
apremilast	*****	*****	*****	*****	0	0.000%	0	0.000%	*****	*****
Live-Birth Deliveries with Relaxed Enrollment Requirements										
2008 (N = 157,931)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2009 (N = 283,211)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2010 (N = 259,915)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2011 (N = 244,618)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%

Table 2b. Pregnancy Episodes with Evidence of Apremilast in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹, by Year of Delivery (continued)

Apremilast ³	Use in All Trimesters		Use Only During First Trimester		Use Only During Second Trimester		Use Only During Third Trimester		Use in the Post-Delivery Period ²	
	Number	Percent	Number	Percent	Number	Percent	Number	Percent	Number	Percent
2012 (N = 235,680)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2013 (N = 242,884)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2014 (N = 290,131)										
apremilast	0	0.000%	0	0.000%	0	0.000%	0	0.000%	0	0.000%
2015 (N = 412,834)										
apremilast	0	0.000%	*****	*****	0	0.000%	*****	*****	*****	*****
2016 (N = 592,987)										
apremilast	*****	*****	12	0.002%	0	0.000%	0	0.000%	*****	*****
2017 (N = 863,263)										
apremilast	*****	*****	26	0.003%	0	0.000%	0	0.000%	*****	*****
2018 (N = 821,927)										
apremilast	*****	*****	20	0.002%	0	0.000%	*****	*****	13	0.002%
2019 (N = 268,253)										
apremilast	*****	*****	*****	*****	0	0.000%	0	0.000%	*****	*****
2020 (N = 255,173)										
apremilast	*****	*****	16	0.006%	*****	*****	0	0.000%	*****	*****
2021 (N = 261,102)										
apremilast	*****	*****	22	0.008%	0	0.000%	*****	*****	*****	*****
2022 (N = 99,910)										
apremilast	*****	*****	*****	*****	0	0.000%	0	0.000%	*****	*****

¹Pregnancy is defined as a pregnancy that resulted in a live birth delivery identified using the method specified in the overview section of this report.

²The Pre-Pregnancy and Post-Delivery Periods consist of 90 days in the "Live Birth Delivery" cohort and 60 days in the "Live Birth Deliveries with Relaxed Enrollment Requirements" cohort.

³Displayed percentages represent the number of pregnancy episodes with evidence of the exposure of interest as a proportion of all pregnancy episodes.

*****Data are not presented in these cells due to a small sample size or to assure a small cell cannot be recalculated through the cells presented.

Table 3. Summary of Episode Level Cohort Attrition in the Sentinel Distributed Database (SDD) from January 1, 2008 to June 30, 2022¹

	Live-Birth Deliveries		Live-Birth Deliveries with Relaxed Enrollment Requirements	
	Remaining	Excluded	Remaining	Excluded
Members meeting enrollment and demographic requirements				
Enrolled at any point during the query period	368,156,637	N/A	368,156,637	N/A
Had required coverage type (medical and/or drug coverage)	270,964,727	97,191,910	270,964,727	97,191,910
Enrolled during specified age range	216,367,272	54,597,455	216,367,272	54,597,455
Had requestable medical charts	216,367,272	0	216,367,272	0
Met demographic requirements (sex, race, and Hispanic origin)	111,080,779	105,286,493	111,080,779	105,286,493
Members with a valid index event				
Had a live birth delivery claim during the query period	8,315,985	102,764,794	8,315,985	102,764,794
Live birth deliveries with a valid index date				
Total number of live birth deliveries during the query period	12,399,766	N/A	12,399,766	N/A
Live birth delivery recorded during specified age range	11,870,983	528,783	11,870,983	528,783
Pregnancy episode recorded during the query period	9,004,261	2,866,722	9,013,199	2,857,784
Pregnancy episodes with required pre/post-index history				
Had sufficient pre-index continuous enrollment	4,340,586	4,663,675	6,909,057	2,104,142
Had sufficient post-pregnancy start date continuous enrollment	4,340,586	0	5,292,229	1,616,828
Met inclusion and exclusion criteria ²	4,340,586	0	5,289,819	2,410
<i>Evidence of any Pregnancy Outcome</i>	N/A	N/A	N/A	2,410
Pregnancy episodes with required post-index follow-up				
Had sufficient post-index continuous enrollment	4,340,586	0	5,289,819	0
Number of pregnancy episodes	4,340,586	N/A	5,289,819	N/A
Final cohort				
Number of members	3,812,622	N/A	4,632,968	N/A

¹Pregnancy is defined as a pregnancy that resulted in a live birth delivery identified using the method specified in the overview section of this report.

Appendix A. Dates of Available Data for Each Data Partner (DP) as of Request Distribution Date (January 12, 2023)

DP ID	Start Date	End Date ¹
DP01	01/01/2007	05/31/2022
DP02	01/01/2008	04/30/2022
DP03	01/01/2014	12/31/2018
DP04	01/01/2008	06/30/2022
DP05	01/01/2006	6/30/2022

¹End Date represents the earliest of: (1) query end date, or (2) last day of the most recent month for which all of a Data Partner's data tables (enrollment, dispensing, etc.) have at least 80% of the record count relative to the prior month.

Appendix B. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Codes Used to Define Gestational Age Algorithm in this Request

			Code	
Code ¹	Duration	Description	Category	Code Type
Gestational Age				
O481	294	Prolonged pregnancy	Diagnosis	ICD-10-CM
P0822	294	Prolonged gestation of newborn	Diagnosis	ICD-10-CM
Z3A49	301	Greater than 42 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
O480	287	Post-term pregnancy	Diagnosis	ICD-10-CM
P0821	287	Post-term newborn	Diagnosis	ICD-10-CM
Z3A42	298	42 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
Z3A41	291	41 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
Z3A40	284	40 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
Z3A39	277	39 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
Z3A38	270	38 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
Z3A37	263	37 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
P0739	256	Preterm newborn, gestational age 36 completed weeks	Diagnosis	ICD-10-CM
Z3A36	256	36 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
P0738	249	Preterm newborn, gestational age 35 completed weeks	Diagnosis	ICD-10-CM
Z3A35	249	35 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
P0737	242	Preterm newborn, gestational age 34 completed weeks	Diagnosis	ICD-10-CM
Z3A34	242	34 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
P0736	235	Preterm newborn, gestational age 33 completed weeks	Diagnosis	ICD-10-CM
Z3A33	235	33 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
P0735	228	Preterm newborn, gestational age 32 completed weeks	Diagnosis	ICD-10-CM
Z3A32	228	32 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
P0734	221	Preterm newborn, gestational age 31 completed weeks	Diagnosis	ICD-10-CM
Z3A31	221	31 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
P0733	214	Preterm newborn, gestational age 30 completed weeks	Diagnosis	ICD-10-CM
Z3A30	214	30 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
P0732	207	Preterm newborn, gestational age 29 completed weeks	Diagnosis	ICD-10-CM
Z3A29	207	29 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
P0731	200	Preterm newborn, gestational age 28 completed weeks	Diagnosis	ICD-10-CM
Z3A28	200	28 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
P0726	193	Extreme immaturity of newborn, gestational age 27 completed weeks	Diagnosis	ICD-10-CM
Z3A27	193	27 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
P0725	186	Extreme immaturity of newborn, gestational age 26 completed weeks	Diagnosis	ICD-10-CM
Z3A26	186	26 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
P0724	179	Extreme immaturity of newborn, gestational age 25 completed weeks	Diagnosis	ICD-10-CM
Z3A25	179	25 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
P0723	172	Extreme immaturity of newborn, gestational age 24 completed weeks	Diagnosis	ICD-10-CM
Z3A24	172	24 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
P0722	165	Extreme immaturity of newborn, gestational age 23 completed weeks	Diagnosis	ICD-10-CM
Z3A23	165	23 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
P0721	158	Extreme immaturity of newborn, gestational age less than 23 completed weeks	Diagnosis	ICD-10-CM
Z3A22	158	22 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
Z3A21	151	21 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
Z3A20	144	20 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
P0720	196	Extreme immaturity of newborn, unspecified weeks of gestation	Diagnosis	ICD-10-CM

Appendix B. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Codes Used to Define Gestational Age Algorithm in this Request

Code¹	Duration	Description	Code Category	Code Type
O6013X0	245	Preterm labor second trimester with preterm delivery third trimester	Diagnosis	ICD-10-CM
O6013X1	245	Preterm labor second trimester with preterm delivery third trimester	Diagnosis	ICD-10-CM
O6013X2	245	Preterm labor second trimester with preterm delivery third trimester	Diagnosis	ICD-10-CM
O6013X3	245	Preterm labor second trimester with preterm delivery third trimester	Diagnosis	ICD-10-CM
O6013X4	245	Preterm labor second trimester with preterm delivery third trimester	Diagnosis	ICD-10-CM
O6013X5	245	Preterm labor second trimester with preterm delivery third trimester	Diagnosis	ICD-10-CM
O6013X9	245	Preterm labor second trimester with preterm delivery third trimester	Diagnosis	ICD-10-CM
O6014X0	245	Preterm labor third trimester with preterm delivery third trimester	Diagnosis	ICD-10-CM
O6014X1	245	Preterm labor third trimester with preterm delivery third trimester	Diagnosis	ICD-10-CM
O6014X2	245	Preterm labor third trimester with preterm delivery third trimester	Diagnosis	ICD-10-CM
O6014X3	245	Preterm labor third trimester with preterm delivery third trimester	Diagnosis	ICD-10-CM
O6014X4	245	Preterm labor third trimester with preterm delivery third trimester	Diagnosis	ICD-10-CM
O6014X5	245	Preterm labor third trimester with preterm delivery third trimester	Diagnosis	ICD-10-CM
O6014X9	245	Preterm labor third trimester with preterm delivery third trimester	Diagnosis	ICD-10-CM
P0730	245	Preterm newborn, unspecified weeks of gestation	Diagnosis	ICD-10-CM
O6012X0	168	Preterm labor second trimester with preterm delivery second trimester	Diagnosis	ICD-10-CM
O6012X1	168	Preterm labor second trimester with preterm delivery second trimester	Diagnosis	ICD-10-CM
O6012X2	168	Preterm labor second trimester with preterm delivery second trimester	Diagnosis	ICD-10-CM
O6012X3	168	Preterm labor second trimester with preterm delivery second trimester	Diagnosis	ICD-10-CM
O6012X4	168	Preterm labor second trimester with preterm delivery second trimester	Diagnosis	ICD-10-CM
O6012X5	168	Preterm labor second trimester with preterm delivery second trimester	Diagnosis	ICD-10-CM
O6012X9	168	Preterm labor second trimester with preterm delivery second trimester	Diagnosis	ICD-10-CM
64520	294	Prolonged pregnancy	Diagnosis	ICD-9-CM
64521	294	Prolonged pregnancy	Diagnosis	ICD-9-CM
64523	294	Prolonged pregnancy	Diagnosis	ICD-9-CM
76528	252	35-36 completed weeks of gestation	Diagnosis	ICD-9-CM
76622	294	Prolonged gestation of infant	Diagnosis	ICD-9-CM
64510	287	Post term pregnancy	Diagnosis	ICD-9-CM
64511	287	Post term pregnancy	Diagnosis	ICD-9-CM
64513	287	Post term pregnancy	Diagnosis	ICD-9-CM
76527	238	33-34 completed weeks of gestation	Diagnosis	ICD-9-CM
76621	287	Post-term infant	Diagnosis	ICD-9-CM
76526	224	31-32 completed weeks of gestation	Diagnosis	ICD-9-CM
76525	210	29-30 completed weeks of gestation	Diagnosis	ICD-9-CM
76524	196	27-28 completed weeks of gestation	Diagnosis	ICD-9-CM
76523	182	25-26 completed weeks of gestation	Diagnosis	ICD-9-CM
76521	168	Less than 24 completed weeks of gestation	Diagnosis	ICD-9-CM
76522	168	24 completed weeks of gestation	Diagnosis	ICD-9-CM
76500	196	Extreme immaturity, by weight	Diagnosis	ICD-9-CM
76501	196	Extreme immaturity, by weight	Diagnosis	ICD-9-CM
76502	196	Extreme immaturity, by weight	Diagnosis	ICD-9-CM
76503	196	Extreme immaturity, by weight	Diagnosis	ICD-9-CM
76504	196	Extreme immaturity, by weight	Diagnosis	ICD-9-CM
76505	196	Extreme immaturity, by weight	Diagnosis	ICD-9-CM
76506	196	Extreme immaturity, by weight	Diagnosis	ICD-9-CM

Appendix B. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Codes Used to Define Gestational Age Algorithm in this Request

Code ¹	Duration	Description	Code	
			Category	Code Type
76507	196	Extreme immaturity, by weight	Diagnosis	ICD-9-CM
76508	196	Extreme immaturity, by weight	Diagnosis	ICD-9-CM
76509	196	Extreme immaturity, by weight	Diagnosis	ICD-9-CM
64421	245	Early onset of delivery, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
76510	245	Other preterm infants, by weight	Diagnosis	ICD-9-CM
76511	245	Other preterm infants, by weight	Diagnosis	ICD-9-CM
76512	245	Other preterm infants, by weight	Diagnosis	ICD-9-CM
76513	245	Other preterm infants, by weight	Diagnosis	ICD-9-CM
76514	245	Other preterm infants, by weight	Diagnosis	ICD-9-CM
76515	245	Other preterm infants, by weight	Diagnosis	ICD-9-CM
76516	245	Other preterm infants, by weight	Diagnosis	ICD-9-CM
76517	245	Other preterm infants, by weight	Diagnosis	ICD-9-CM
76518	245	Other preterm infants, by weight	Diagnosis	ICD-9-CM
76519	245	Other preterm infants, by weight	Diagnosis	ICD-9-CM
76520	245	Unspecified weeks of gestation	Diagnosis	ICD-9-CM

¹If multiple codes for specific weeks of gestation (Z codes), preterm delivery, and/or postterm delivery are available, the ICD-10 algorithm for gestational age prioritizes the following codes:

- (1) **Codes that specify weeks of gestation, including all Z codes ranging from 20 weeks through ≥ 42 weeks of gestation in one week increments, and codes that indicate preterm delivery with weeks of gestation specified in one week increments (other than Z codes).** If multiple codes are observed, codes indicating longer gestational age are prioritized over those indicating shorter gestational age. We assumed the approximate mid-point of the specified gestational age [e.g., assumption of 263 days (37 weeks and 4 days) for 37 weeks gestation].
- (2) **Codes that indicate preterm delivery without specifying weeks of gestation.** If multiple codes are observed, codes with more specificity (e.g., preterm delivery, 2nd trimester of pregnancy or 'extreme immaturity') are prioritized over those with less specificity (e.g., preterm newborn, unspecified weeks of gestation). Further, codes indicating longer gestational age are prioritized over those indicating shorter gestational age.
- (3) **Codes that indicate postterm delivery without specifying weeks of gestation.** If multiple codes are observed, codes indicating longer gestational age are prioritized over those indicating shorter gestational age.

If no codes for preterm or postterm delivery are observed, then the default assumption for gestational age is 273 days. However, this assumption is user specified and can be modified.

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
Live Birth Delivery			
0W8NXZZ	Division of Female Perineum, External Approach	Procedure	ICD-10-PCS
10900ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception, Open Approach	Procedure	ICD-10-PCS
10903ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception, Percutaneous Approach	Procedure	ICD-10-PCS
10904ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
10907ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
10908ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
10D00Z0	Extraction of Products of Conception, Classical, Open Approach	Procedure	ICD-10-PCS
10D00Z1	Extraction of Products of Conception, Low Cervical, Open Approach	Procedure	ICD-10-PCS
10D00Z2	Extraction of Products of Conception, Extraperitoneal, Open Approach	Procedure	ICD-10-PCS
10D07Z3	Extraction of Products of Conception, Low Forceps, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
10D07Z4	Extraction of Products of Conception, Mid Forceps, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
10D07Z5	Extraction of Products of Conception, High Forceps, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
10D07Z6	Extraction of Products of Conception, Vacuum, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
10D07Z7	Extraction of Products of Conception, Internal Version, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
10D07Z8	Extraction of Products of Conception, Other, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
10E0XZZ	Delivery of Products of Conception, External Approach	Procedure	ICD-10-PCS
10S07ZZ	Reposition Products of Conception, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
O1002	Pre-existing essential hypertension complicating childbirth	Diagnosis	ICD-10-CM
O1012	Pre-existing hypertensive heart disease complicating childbirth	Diagnosis	ICD-10-CM
O1022	Pre-existing hypertensive chronic kidney disease complicating childbirth	Diagnosis	ICD-10-CM
O1032	Pre-existing hypertensive heart and chronic kidney disease complicating childbirth	Diagnosis	ICD-10-CM
O1042	Pre-existing secondary hypertension complicating childbirth	Diagnosis	ICD-10-CM
O1092	Unspecified pre-existing hypertension complicating childbirth	Diagnosis	ICD-10-CM
O114	Pre-existing hypertension with pre-eclampsia, complicating childbirth	Diagnosis	ICD-10-CM
O1204	Gestational edema, complicating childbirth	Diagnosis	ICD-10-CM
O1214	Gestational proteinuria, complicating childbirth	Diagnosis	ICD-10-CM
O1224	Gestational edema with proteinuria, complicating childbirth	Diagnosis	ICD-10-CM
O134	Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating childbirth	Diagnosis	ICD-10-CM
O1404	Mild to moderate pre-eclampsia, complicating childbirth	Diagnosis	ICD-10-CM
O1414	Severe pre-eclampsia complicating childbirth	Diagnosis	ICD-10-CM
O1424	HELLP syndrome, complicating childbirth	Diagnosis	ICD-10-CM
O1494	Unspecified pre-eclampsia, complicating childbirth	Diagnosis	ICD-10-CM
O164	Unspecified maternal hypertension, complicating childbirth	Diagnosis	ICD-10-CM
O2402	Pre-existing type 1 diabetes mellitus, in childbirth	Diagnosis	ICD-10-CM
O2412	Pre-existing type 2 diabetes mellitus, in childbirth	Diagnosis	ICD-10-CM
O2432	Unspecified pre-existing diabetes mellitus in childbirth	Diagnosis	ICD-10-CM
O24420	Gestational diabetes mellitus in childbirth, diet controlled	Diagnosis	ICD-10-CM
O24424	Gestational diabetes mellitus in childbirth, insulin controlled	Diagnosis	ICD-10-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
O24425	Gestational diabetes mellitus in childbirth, controlled by oral hypoglycemic drugs	Diagnosis	ICD-10-CM
O24429	Gestational diabetes mellitus in childbirth, unspecified control	Diagnosis	ICD-10-CM
O2482	Other pre-existing diabetes mellitus in childbirth	Diagnosis	ICD-10-CM
O2492	Unspecified diabetes mellitus in childbirth	Diagnosis	ICD-10-CM
O252	Malnutrition in childbirth	Diagnosis	ICD-10-CM
O2662	Liver and biliary tract disorders in childbirth	Diagnosis	ICD-10-CM
O2672	Subluxation of symphysis (pubis) in childbirth	Diagnosis	ICD-10-CM
O6012X0	Preterm labor second trimester with preterm delivery second trimester, not applicable or unspecified	Diagnosis	ICD-10-CM
O6012X1	Preterm labor second trimester with preterm delivery second trimester, fetus 1	Diagnosis	ICD-10-CM
O6012X2	Preterm labor second trimester with preterm delivery second trimester, fetus 2	Diagnosis	ICD-10-CM
O6012X3	Preterm labor second trimester with preterm delivery second trimester, fetus 3	Diagnosis	ICD-10-CM
O6012X4	Preterm labor second trimester with preterm delivery second trimester, fetus 4	Diagnosis	ICD-10-CM
O6012X5	Preterm labor second trimester with preterm delivery second trimester, fetus 5	Diagnosis	ICD-10-CM
O6012X9	Preterm labor second trimester with preterm delivery second trimester, other fetus	Diagnosis	ICD-10-CM
O6013X0	Preterm labor second trimester with preterm delivery third trimester, not applicable or unspecified	Diagnosis	ICD-10-CM
O6013X1	Preterm labor second trimester with preterm delivery third trimester, fetus 1	Diagnosis	ICD-10-CM
O6013X2	Preterm labor second trimester with preterm delivery third trimester, fetus 2	Diagnosis	ICD-10-CM
O6013X3	Preterm labor second trimester with preterm delivery third trimester, fetus 3	Diagnosis	ICD-10-CM
O6013X4	Preterm labor second trimester with preterm delivery third trimester, fetus 4	Diagnosis	ICD-10-CM
O6013X5	Preterm labor second trimester with preterm delivery third trimester, fetus 5	Diagnosis	ICD-10-CM
O6013X9	Preterm labor second trimester with preterm delivery third trimester, other fetus	Diagnosis	ICD-10-CM
O6014X0	Preterm labor third trimester with preterm delivery third trimester, not applicable or unspecified	Diagnosis	ICD-10-CM
O6014X1	Preterm labor third trimester with preterm delivery third trimester, fetus 1	Diagnosis	ICD-10-CM
O6014X2	Preterm labor third trimester with preterm delivery third trimester, fetus 2	Diagnosis	ICD-10-CM
O6014X3	Preterm labor third trimester with preterm delivery third trimester, fetus 3	Diagnosis	ICD-10-CM
O6014X4	Preterm labor third trimester with preterm delivery third trimester, fetus 4	Diagnosis	ICD-10-CM
O6014X5	Preterm labor third trimester with preterm delivery third trimester, fetus 5	Diagnosis	ICD-10-CM
O6014X9	Preterm labor third trimester with preterm delivery third trimester, other fetus	Diagnosis	ICD-10-CM
O6022X0	Term delivery with preterm labor, second trimester, not applicable or unspecified	Diagnosis	ICD-10-CM
O6022X1	Term delivery with preterm labor, second trimester, fetus 1	Diagnosis	ICD-10-CM
O6022X2	Term delivery with preterm labor, second trimester, fetus 2	Diagnosis	ICD-10-CM
O6022X3	Term delivery with preterm labor, second trimester, fetus 3	Diagnosis	ICD-10-CM
O6022X4	Term delivery with preterm labor, second trimester, fetus 4	Diagnosis	ICD-10-CM
O6022X5	Term delivery with preterm labor, second trimester, fetus 5	Diagnosis	ICD-10-CM
O6022X9	Term delivery with preterm labor, second trimester, other fetus	Diagnosis	ICD-10-CM
O6023X0	Term delivery with preterm labor, third trimester, not applicable or unspecified	Diagnosis	ICD-10-CM
O6023X1	Term delivery with preterm labor, third trimester, fetus 1	Diagnosis	ICD-10-CM
O6023X2	Term delivery with preterm labor, third trimester, fetus 2	Diagnosis	ICD-10-CM
O6023X3	Term delivery with preterm labor, third trimester, fetus 3	Diagnosis	ICD-10-CM
O6023X4	Term delivery with preterm labor, third trimester, fetus 4	Diagnosis	ICD-10-CM
O6023X5	Term delivery with preterm labor, third trimester, fetus 5	Diagnosis	ICD-10-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
O6023X9	Term delivery with preterm labor, third trimester, other fetus	Diagnosis	ICD-10-CM
O632	Delayed delivery of second twin, triplet, etc	Diagnosis	ICD-10-CM
O670	Intrapartum hemorrhage with coagulation defect	Diagnosis	ICD-10-CM
O678	Other intrapartum hemorrhage	Diagnosis	ICD-10-CM
O679	Intrapartum hemorrhage, unspecified	Diagnosis	ICD-10-CM
O68	Labor and delivery complicated by abnormality of fetal acid-base balance	Diagnosis	ICD-10-CM
O690XX0	Labor and delivery complicated by prolapse of cord, not applicable or unspecified	Diagnosis	ICD-10-CM
O690XX1	Labor and delivery complicated by prolapse of cord, fetus 1	Diagnosis	ICD-10-CM
O690XX2	Labor and delivery complicated by prolapse of cord, fetus 2	Diagnosis	ICD-10-CM
O690XX3	Labor and delivery complicated by prolapse of cord, fetus 3	Diagnosis	ICD-10-CM
O690XX4	Labor and delivery complicated by prolapse of cord, fetus 4	Diagnosis	ICD-10-CM
O690XX5	Labor and delivery complicated by prolapse of cord, fetus 5	Diagnosis	ICD-10-CM
O690XX9	Labor and delivery complicated by prolapse of cord, other fetus	Diagnosis	ICD-10-CM
O691XX0	Labor and delivery complicated by cord around neck, with compression, not applicable or unspecified	Diagnosis	ICD-10-CM
O691XX1	Labor and delivery complicated by cord around neck, with compression, fetus 1	Diagnosis	ICD-10-CM
O691XX2	Labor and delivery complicated by cord around neck, with compression, fetus 2	Diagnosis	ICD-10-CM
O691XX3	Labor and delivery complicated by cord around neck, with compression, fetus 3	Diagnosis	ICD-10-CM
O691XX4	Labor and delivery complicated by cord around neck, with compression, fetus 4	Diagnosis	ICD-10-CM
O691XX5	Labor and delivery complicated by cord around neck, with compression, fetus 5	Diagnosis	ICD-10-CM
O691XX9	Labor and delivery complicated by cord around neck, with compression, other fetus	Diagnosis	ICD-10-CM
O692XX0	Labor and delivery complicated by other cord entanglement, with compression, not applicable or unspecified	Diagnosis	ICD-10-CM
O692XX1	Labor and delivery complicated by other cord entanglement, with compression, fetus 1	Diagnosis	ICD-10-CM
O692XX2	Labor and delivery complicated by other cord entanglement, with compression, fetus 2	Diagnosis	ICD-10-CM
O692XX3	Labor and delivery complicated by other cord entanglement, with compression, fetus 3	Diagnosis	ICD-10-CM
O692XX4	Labor and delivery complicated by other cord entanglement, with compression, fetus 4	Diagnosis	ICD-10-CM
O692XX5	Labor and delivery complicated by other cord entanglement, with compression, fetus 5	Diagnosis	ICD-10-CM
O692XX9	Labor and delivery complicated by other cord entanglement, with compression, other fetus	Diagnosis	ICD-10-CM
O693XX0	Labor and delivery complicated by short cord, not applicable or unspecified	Diagnosis	ICD-10-CM
O693XX1	Labor and delivery complicated by short cord, fetus 1	Diagnosis	ICD-10-CM
O693XX2	Labor and delivery complicated by short cord, fetus 2	Diagnosis	ICD-10-CM
O693XX3	Labor and delivery complicated by short cord, fetus 3	Diagnosis	ICD-10-CM
O693XX4	Labor and delivery complicated by short cord, fetus 4	Diagnosis	ICD-10-CM
O693XX5	Labor and delivery complicated by short cord, fetus 5	Diagnosis	ICD-10-CM
O693XX9	Labor and delivery complicated by short cord, other fetus	Diagnosis	ICD-10-CM
O694XX0	Labor and delivery complicated by vasa previa, not applicable or unspecified	Diagnosis	ICD-10-CM
O694XX1	Labor and delivery complicated by vasa previa, fetus 1	Diagnosis	ICD-10-CM
O694XX2	Labor and delivery complicated by vasa previa, fetus 2	Diagnosis	ICD-10-CM
O694XX3	Labor and delivery complicated by vasa previa, fetus 3	Diagnosis	ICD-10-CM
O694XX4	Labor and delivery complicated by vasa previa, fetus 4	Diagnosis	ICD-10-CM
O694XX5	Labor and delivery complicated by vasa previa, fetus 5	Diagnosis	ICD-10-CM
O694XX9	Labor and delivery complicated by vasa previa, other fetus	Diagnosis	ICD-10-CM
O695XX0	Labor and delivery complicated by vascular lesion of cord, not applicable or unspecified	Diagnosis	ICD-10-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
O695XX1	Labor and delivery complicated by vascular lesion of cord, fetus 1	Diagnosis	ICD-10-CM
O695XX2	Labor and delivery complicated by vascular lesion of cord, fetus 2	Diagnosis	ICD-10-CM
O695XX3	Labor and delivery complicated by vascular lesion of cord, fetus 3	Diagnosis	ICD-10-CM
O695XX4	Labor and delivery complicated by vascular lesion of cord, fetus 4	Diagnosis	ICD-10-CM
O695XX5	Labor and delivery complicated by vascular lesion of cord, fetus 5	Diagnosis	ICD-10-CM
O695XX9	Labor and delivery complicated by vascular lesion of cord, other fetus	Diagnosis	ICD-10-CM
O6981X0	Labor and delivery complicated by cord around neck, without compression, not applicable or unspecified	Diagnosis	ICD-10-CM
O6981X1	Labor and delivery complicated by cord around neck, without compression, fetus 1	Diagnosis	ICD-10-CM
O6981X2	Labor and delivery complicated by cord around neck, without compression, fetus 2	Diagnosis	ICD-10-CM
O6981X3	Labor and delivery complicated by cord around neck, without compression, fetus 3	Diagnosis	ICD-10-CM
O6981X4	Labor and delivery complicated by cord around neck, without compression, fetus 4	Diagnosis	ICD-10-CM
O6981X5	Labor and delivery complicated by cord around neck, without compression, fetus 5	Diagnosis	ICD-10-CM
O6981X9	Labor and delivery complicated by cord around neck, without compression, other fetus	Diagnosis	ICD-10-CM
O6982X0	Labor and delivery complicated by other cord entanglement, without compression, not applicable or unspecified	Diagnosis	ICD-10-CM
O6982X1	Labor and delivery complicated by other cord entanglement, without compression, fetus 1	Diagnosis	ICD-10-CM
O6982X2	Labor and delivery complicated by other cord entanglement, without compression, fetus 2	Diagnosis	ICD-10-CM
O6982X3	Labor and delivery complicated by other cord entanglement, without compression, fetus 3	Diagnosis	ICD-10-CM
O6982X4	Labor and delivery complicated by other cord entanglement, without compression, fetus 4	Diagnosis	ICD-10-CM
O6982X5	Labor and delivery complicated by other cord entanglement, without compression, fetus 5	Diagnosis	ICD-10-CM
O6982X9	Labor and delivery complicated by other cord entanglement, without compression, other fetus	Diagnosis	ICD-10-CM
O6989X0	Labor and delivery complicated by other cord complications, not applicable or unspecified	Diagnosis	ICD-10-CM
O6989X1	Labor and delivery complicated by other cord complications, fetus 1	Diagnosis	ICD-10-CM
O6989X2	Labor and delivery complicated by other cord complications, fetus 2	Diagnosis	ICD-10-CM
O6989X3	Labor and delivery complicated by other cord complications, fetus 3	Diagnosis	ICD-10-CM
O6989X4	Labor and delivery complicated by other cord complications, fetus 4	Diagnosis	ICD-10-CM
O6989X5	Labor and delivery complicated by other cord complications, fetus 5	Diagnosis	ICD-10-CM
O6989X9	Labor and delivery complicated by other cord complications, other fetus	Diagnosis	ICD-10-CM
O699XX0	Labor and delivery complicated by cord complication, unspecified, not applicable or unspecified	Diagnosis	ICD-10-CM
O699XX1	Labor and delivery complicated by cord complication, unspecified, fetus 1	Diagnosis	ICD-10-CM
O699XX2	Labor and delivery complicated by cord complication, unspecified, fetus 2	Diagnosis	ICD-10-CM
O699XX3	Labor and delivery complicated by cord complication, unspecified, fetus 3	Diagnosis	ICD-10-CM
O699XX4	Labor and delivery complicated by cord complication, unspecified, fetus 4	Diagnosis	ICD-10-CM
O699XX5	Labor and delivery complicated by cord complication, unspecified, fetus 5	Diagnosis	ICD-10-CM
O699XX9	Labor and delivery complicated by cord complication, unspecified, other fetus	Diagnosis	ICD-10-CM
O700	First degree perineal laceration during delivery	Diagnosis	ICD-10-CM
O701	Second degree perineal laceration during delivery	Diagnosis	ICD-10-CM
O7020	Third degree perineal laceration during delivery, unspecified	Diagnosis	ICD-10-CM
O7021	Third degree perineal laceration during delivery, IIIa	Diagnosis	ICD-10-CM
O7022	Third degree perineal laceration during delivery, IIIb	Diagnosis	ICD-10-CM
O7023	Third degree perineal laceration during delivery, IIIc	Diagnosis	ICD-10-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
0703	Fourth degree perineal laceration during delivery	Diagnosis	ICD-10-CM
0704	Anal sphincter tear complicating delivery, not associated with third degree laceration	Diagnosis	ICD-10-CM
0709	Perineal laceration during delivery, unspecified	Diagnosis	ICD-10-CM
0740	Aspiration pneumonitis due to anesthesia during labor and delivery	Diagnosis	ICD-10-CM
0741	Other pulmonary complications of anesthesia during labor and delivery	Diagnosis	ICD-10-CM
0742	Cardiac complications of anesthesia during labor and delivery	Diagnosis	ICD-10-CM
0743	Central nervous system complications of anesthesia during labor and delivery	Diagnosis	ICD-10-CM
0744	Toxic reaction to local anesthesia during labor and delivery	Diagnosis	ICD-10-CM
0745	Spinal and epidural anesthesia-induced headache during labor and delivery	Diagnosis	ICD-10-CM
0746	Other complications of spinal and epidural anesthesia during labor and delivery	Diagnosis	ICD-10-CM
0747	Failed or difficult intubation for anesthesia during labor and delivery	Diagnosis	ICD-10-CM
0748	Other complications of anesthesia during labor and delivery	Diagnosis	ICD-10-CM
0749	Complication of anesthesia during labor and delivery, unspecified	Diagnosis	ICD-10-CM
0750	Maternal distress during labor and delivery	Diagnosis	ICD-10-CM
0751	Shock during or following labor and delivery	Diagnosis	ICD-10-CM
0755	Delayed delivery after artificial rupture of membranes	Diagnosis	ICD-10-CM
07581	Maternal exhaustion complicating labor and delivery	Diagnosis	ICD-10-CM
07582	Onset (spontaneous) of labor after 37 completed weeks of gestation but before 39 completed weeks gestation, with delivery by (planned) cesarean section	Diagnosis	ICD-10-CM
07589	Other specified complications of labor and delivery	Diagnosis	ICD-10-CM
0759	Complication of labor and delivery, unspecified	Diagnosis	ICD-10-CM
076	Abnormality in fetal heart rate and rhythm complicating labor and delivery	Diagnosis	ICD-10-CM
0770	Labor and delivery complicated by meconium in amniotic fluid	Diagnosis	ICD-10-CM
0778	Labor and delivery complicated by other evidence of fetal stress	Diagnosis	ICD-10-CM
0779	Labor and delivery complicated by fetal stress, unspecified	Diagnosis	ICD-10-CM
080	Encounter for full-term uncomplicated delivery	Diagnosis	ICD-10-CM
082	Encounter for cesarean delivery without indication	Diagnosis	ICD-10-CM
08802	Air embolism in childbirth	Diagnosis	ICD-10-CM
08812	Amniotic fluid embolism in childbirth	Diagnosis	ICD-10-CM
08822	Thromboembolism in childbirth	Diagnosis	ICD-10-CM
08832	Pyemic and septic embolism in childbirth	Diagnosis	ICD-10-CM
08882	Other embolism in childbirth	Diagnosis	ICD-10-CM
09802	Tuberculosis complicating childbirth	Diagnosis	ICD-10-CM
09812	Syphilis complicating childbirth	Diagnosis	ICD-10-CM
09822	Gonorrhea complicating childbirth	Diagnosis	ICD-10-CM
09832	Other infections with a predominantly sexual mode of transmission complicating childbirth	Diagnosis	ICD-10-CM
09842	Viral hepatitis complicating childbirth	Diagnosis	ICD-10-CM
09852	Other viral diseases complicating childbirth	Diagnosis	ICD-10-CM
09862	Protozoal diseases complicating childbirth	Diagnosis	ICD-10-CM
09872	Human immunodeficiency virus [HIV] disease complicating childbirth	Diagnosis	ICD-10-CM
09882	Other maternal infectious and parasitic diseases complicating childbirth	Diagnosis	ICD-10-CM
09892	Unspecified maternal infectious and parasitic disease complicating childbirth	Diagnosis	ICD-10-CM
09902	Anemia complicating childbirth	Diagnosis	ICD-10-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
O9912	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating childbirth	Diagnosis	ICD-10-CM
O99214	Obesity complicating childbirth	Diagnosis	ICD-10-CM
O99284	Endocrine, nutritional and metabolic diseases complicating childbirth	Diagnosis	ICD-10-CM
O99314	Alcohol use complicating childbirth	Diagnosis	ICD-10-CM
O99324	Drug use complicating childbirth	Diagnosis	ICD-10-CM
O99334	Smoking (tobacco) complicating childbirth	Diagnosis	ICD-10-CM
O99344	Other mental disorders complicating childbirth	Diagnosis	ICD-10-CM
O99354	Diseases of the nervous system complicating childbirth	Diagnosis	ICD-10-CM
O9942	Diseases of the circulatory system complicating childbirth	Diagnosis	ICD-10-CM
O9952	Diseases of the respiratory system complicating childbirth	Diagnosis	ICD-10-CM
O9962	Diseases of the digestive system complicating childbirth	Diagnosis	ICD-10-CM
O9972	Diseases of the skin and subcutaneous tissue complicating childbirth	Diagnosis	ICD-10-CM
O99814	Abnormal glucose complicating childbirth	Diagnosis	ICD-10-CM
O99824	Streptococcus B carrier state complicating childbirth	Diagnosis	ICD-10-CM
O99834	Other infection carrier state complicating childbirth	Diagnosis	ICD-10-CM
O99844	Bariatric surgery status complicating childbirth	Diagnosis	ICD-10-CM
O9A12	Malignant neoplasm complicating childbirth	Diagnosis	ICD-10-CM
O9A22	Injury, poisoning and certain other consequences of external causes complicating childbirth	Diagnosis	ICD-10-CM
O9A32	Physical abuse complicating childbirth	Diagnosis	ICD-10-CM
O9A42	Sexual abuse complicating childbirth	Diagnosis	ICD-10-CM
O9A52	Psychological abuse complicating childbirth	Diagnosis	ICD-10-CM
P030	Newborn affected by breech delivery and extraction	Diagnosis	ICD-10-CM
P032	Newborn affected by forceps delivery	Diagnosis	ICD-10-CM
P033	Newborn affected by delivery by vacuum extractor [ventouse]	Diagnosis	ICD-10-CM
P034	Newborn affected by Cesarean delivery	Diagnosis	ICD-10-CM
P035	Newborn affected by precipitate delivery	Diagnosis	ICD-10-CM
P0700	Extremely low birth weight newborn, unspecified weight	Diagnosis	ICD-10-CM
P0701	Extremely low birth weight newborn, less than 500 grams	Diagnosis	ICD-10-CM
P0702	Extremely low birth weight newborn, 500-749 grams	Diagnosis	ICD-10-CM
P0703	Extremely low birth weight newborn, 750-999 grams	Diagnosis	ICD-10-CM
P0710	Other low birth weight newborn, unspecified weight	Diagnosis	ICD-10-CM
P0714	Other low birth weight newborn, 1000-1249 grams	Diagnosis	ICD-10-CM
P0715	Other low birth weight newborn, 1250-1499 grams	Diagnosis	ICD-10-CM
P0716	Other low birth weight newborn, 1500-1749 grams	Diagnosis	ICD-10-CM
P0717	Other low birth weight newborn, 1750-1999 grams	Diagnosis	ICD-10-CM
P0718	Other low birth weight newborn, 2000-2499 grams	Diagnosis	ICD-10-CM
P0720	Extreme immaturity of newborn, unspecified weeks of gestation	Diagnosis	ICD-10-CM
P0721	Extreme immaturity of newborn, gestational age less than 23 completed weeks	Diagnosis	ICD-10-CM
P0722	Extreme immaturity of newborn, gestational age 23 completed weeks	Diagnosis	ICD-10-CM
P0723	Extreme immaturity of newborn, gestational age 24 completed weeks	Diagnosis	ICD-10-CM
P0724	Extreme immaturity of newborn, gestational age 25 completed weeks	Diagnosis	ICD-10-CM
P0725	Extreme immaturity of newborn, gestational age 26 completed weeks	Diagnosis	ICD-10-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
P0726	Extreme immaturity of newborn, gestational age 27 completed weeks	Diagnosis	ICD-10-CM
P0730	Preterm newborn, unspecified weeks of gestation	Diagnosis	ICD-10-CM
P0731	Preterm newborn, gestational age 28 completed weeks	Diagnosis	ICD-10-CM
P0732	Preterm newborn, gestational age 29 completed weeks	Diagnosis	ICD-10-CM
P0733	Preterm newborn, gestational age 30 completed weeks	Diagnosis	ICD-10-CM
P0734	Preterm newborn, gestational age 31 completed weeks	Diagnosis	ICD-10-CM
P0735	Preterm newborn, gestational age 32 completed weeks	Diagnosis	ICD-10-CM
P0736	Preterm newborn, gestational age 33 completed weeks	Diagnosis	ICD-10-CM
P0737	Preterm newborn, gestational age 34 completed weeks	Diagnosis	ICD-10-CM
P0738	Preterm newborn, gestational age 35 completed weeks	Diagnosis	ICD-10-CM
P0739	Preterm newborn, gestational age 36 completed weeks	Diagnosis	ICD-10-CM
P0821	Post-term newborn	Diagnosis	ICD-10-CM
P0822	Prolonged gestation of newborn	Diagnosis	ICD-10-CM
Z370	Single live birth	Diagnosis	ICD-10-CM
Z372	Twins, both liveborn	Diagnosis	ICD-10-CM
Z373	Twins, one liveborn and one stillborn	Diagnosis	ICD-10-CM
Z3750	Multiple births, unspecified, all liveborn	Diagnosis	ICD-10-CM
Z3751	Triplets, all liveborn	Diagnosis	ICD-10-CM
Z3752	Quadruplets, all liveborn	Diagnosis	ICD-10-CM
Z3753	Quintuplets, all liveborn	Diagnosis	ICD-10-CM
Z3754	Sextuplets, all liveborn	Diagnosis	ICD-10-CM
Z3759	Other multiple births, all liveborn	Diagnosis	ICD-10-CM
Z3760	Multiple births, unspecified, some liveborn	Diagnosis	ICD-10-CM
Z3761	Triplets, some liveborn	Diagnosis	ICD-10-CM
Z3762	Quadruplets, some liveborn	Diagnosis	ICD-10-CM
Z3763	Quintuplets, some liveborn	Diagnosis	ICD-10-CM
Z3764	Sextuplets, some liveborn	Diagnosis	ICD-10-CM
Z3769	Other multiple births, some liveborn	Diagnosis	ICD-10-CM
Z379	Outcome of delivery, unspecified	Diagnosis	ICD-10-CM
Z3800	Single liveborn infant, delivered vaginally	Diagnosis	ICD-10-CM
Z3801	Single liveborn infant, delivered by cesarean	Diagnosis	ICD-10-CM
Z381	Single liveborn infant, born outside hospital	Diagnosis	ICD-10-CM
Z382	Single liveborn infant, unspecified as to place of birth	Diagnosis	ICD-10-CM
Z3830	Twin liveborn infant, delivered vaginally	Diagnosis	ICD-10-CM
Z3831	Twin liveborn infant, delivered by cesarean	Diagnosis	ICD-10-CM
Z384	Twin liveborn infant, born outside hospital	Diagnosis	ICD-10-CM
Z385	Twin liveborn infant, unspecified as to place of birth	Diagnosis	ICD-10-CM
Z3861	Triplet liveborn infant, delivered vaginally	Diagnosis	ICD-10-CM
Z3862	Triplet liveborn infant, delivered by cesarean	Diagnosis	ICD-10-CM
Z3863	Quadruplet liveborn infant, delivered vaginally	Diagnosis	ICD-10-CM
Z3864	Quadruplet liveborn infant, delivered by cesarean	Diagnosis	ICD-10-CM
Z3865	Quintuplet liveborn infant, delivered vaginally	Diagnosis	ICD-10-CM
Z3866	Quintuplet liveborn infant, delivered by cesarean	Diagnosis	ICD-10-CM
Z3868	Other multiple liveborn infant, delivered vaginally	Diagnosis	ICD-10-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
Z3869	Other multiple liveborn infant, delivered by cesarean	Diagnosis	ICD-10-CM
Z387	Other multiple liveborn infant, born outside hospital	Diagnosis	ICD-10-CM
Z388	Other multiple liveborn infant, unspecified as to place of birth	Diagnosis	ICD-10-CM
59400	Routine obstetric care including antepartum care, vaginal delivery (with or without episiotomy, and/or forceps) and postpartum care	Procedure	CPT-4
59409	Vaginal delivery only (with or without episiotomy and/or forceps);	Procedure	CPT-4
59410	Vaginal delivery only (with or without episiotomy and/or forceps); including postpartum care	Procedure	CPT-4
59510	Routine obstetric care including antepartum care, cesarean delivery, and postpartum care	Procedure	CPT-4
59514	Cesarean delivery only;	Procedure	CPT-4
59515	Cesarean delivery only; including postpartum care	Procedure	CPT-4
59610	Routine obstetric care including antepartum care, vaginal delivery (with or without episiotomy, and/or forceps) and postpartum care, after previous cesarean delivery	Procedure	CPT-4
59612	Vaginal delivery only, after previous cesarean delivery (with or without episiotomy and/or forceps);	Procedure	CPT-4
59614	Vaginal delivery only, after previous cesarean delivery (with or without episiotomy and/or forceps); including postpartum care	Procedure	CPT-4
59618	Routine obstetric care including antepartum care, cesarean delivery, and postpartum care, following attempted vaginal delivery after previous cesarean delivery	Procedure	CPT-4
59620	Cesarean delivery only, following attempted vaginal delivery after previous cesarean delivery;	Procedure	CPT-4
59622	Cesarean delivery only, following attempted vaginal delivery after previous cesarean delivery; including postpartum care	Procedure	CPT-4
650	Normal delivery	Diagnosis	ICD-9-CM
7630	Fetus or newborn affected by breech delivery and extraction	Diagnosis	ICD-9-CM
7632	Fetus or newborn affected by forceps delivery	Diagnosis	ICD-9-CM
7633	Fetus or newborn affected by delivery by vacuum extractor	Diagnosis	ICD-9-CM
7634	Fetus or newborn affected by cesarean delivery	Diagnosis	ICD-9-CM
7636	Fetus or newborn affected by precipitate delivery	Diagnosis	ICD-9-CM
7680	Fetal death from asphyxia or anoxia before onset of labor or at unspecified time	Diagnosis	ICD-9-CM
7681	Fetal death from asphyxia or anoxia during labor	Diagnosis	ICD-9-CM
64101	Placenta previa without hemorrhage, with delivery	Diagnosis	ICD-9-CM
64111	Hemorrhage from placenta previa, with delivery	Diagnosis	ICD-9-CM
64121	Premature separation of placenta, with delivery	Diagnosis	ICD-9-CM
64131	Antepartum hemorrhage associated with coagulation defects, with delivery	Diagnosis	ICD-9-CM
64181	Other antepartum hemorrhage, with delivery	Diagnosis	ICD-9-CM
64191	Unspecified antepartum hemorrhage, with delivery	Diagnosis	ICD-9-CM
64201	Benign essential hypertension with delivery	Diagnosis	ICD-9-CM
64202	Benign essential hypertension, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64211	Hypertension secondary to renal disease, with delivery	Diagnosis	ICD-9-CM
64212	Hypertension secondary to renal disease, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64221	Other pre-existing hypertension, with delivery	Diagnosis	ICD-9-CM
64222	Other pre-existing hypertension, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
64231	Transient hypertension of pregnancy, with delivery	Diagnosis	ICD-9-CM
64232	Transient hypertension of pregnancy, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64241	Mild or unspecified pre-eclampsia, with delivery	Diagnosis	ICD-9-CM
64242	Mild or unspecified pre-eclampsia, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64251	Severe pre-eclampsia, with delivery	Diagnosis	ICD-9-CM
64252	Severe pre-eclampsia, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64261	Eclampsia, with delivery	Diagnosis	ICD-9-CM
64262	Eclampsia, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64271	Pre-eclampsia or eclampsia superimposed on pre-existing hypertension, with delivery	Diagnosis	ICD-9-CM
64272	Pre-eclampsia or eclampsia superimposed on pre-existing hypertension, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64291	Unspecified hypertension, with delivery	Diagnosis	ICD-9-CM
64292	Unspecified hypertension, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64301	Mild hyperemesis gravidarum, delivered	Diagnosis	ICD-9-CM
64311	Hyperemesis gravidarum with metabolic disturbance, delivered	Diagnosis	ICD-9-CM
64321	Late vomiting of pregnancy, delivered	Diagnosis	ICD-9-CM
64381	Other vomiting complicating pregnancy, delivered	Diagnosis	ICD-9-CM
64391	Unspecified vomiting of pregnancy, delivered	Diagnosis	ICD-9-CM
64421	Early onset of delivery, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
64501	Prolonged pregnancy, with delivery	Diagnosis	ICD-9-CM
64511	Post term pregnancy, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
64521	Prolonged pregnancy, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
64523	Prolonged pregnancy, antepartum condition or complication	Diagnosis	ICD-9-CM
64601	Papyraceous fetus, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
64611	Edema or excessive weight gain in pregnancy, with delivery, with or without mention of antepartum complication	Diagnosis	ICD-9-CM
64612	Edema or excessive weight gain in pregnancy, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64621	Unspecified renal disease in pregnancy, with delivery	Diagnosis	ICD-9-CM
64622	Unspecified renal disease in pregnancy, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64631	Pregnancy complication, recurrent pregnancy loss, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
64641	Peripheral neuritis in pregnancy, with delivery	Diagnosis	ICD-9-CM
64642	Peripheral neuritis in pregnancy, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64651	Asymptomatic bacteriuria in pregnancy, with delivery	Diagnosis	ICD-9-CM
64652	Asymptomatic bacteriuria in pregnancy, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64661	Infections of genitourinary tract in pregnancy, with delivery	Diagnosis	ICD-9-CM
64662	Infections of genitourinary tract in pregnancy, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64671	Liver and biliary tract disorders in pregnancy, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
64681	Other specified complication of pregnancy, with delivery	Diagnosis	ICD-9-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
64682	Other specified complications of pregnancy, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64691	Unspecified complication of pregnancy, with delivery	Diagnosis	ICD-9-CM
64701	Maternal syphilis, complicating pregnancy, with delivery	Diagnosis	ICD-9-CM
64702	Maternal syphilis, complicating pregnancy, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64711	Maternal gonorrhea with delivery	Diagnosis	ICD-9-CM
64712	Maternal gonorrhea, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64721	Other maternal venereal diseases with delivery	Diagnosis	ICD-9-CM
64722	Other maternal venereal diseases with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64731	Maternal tuberculosis with delivery	Diagnosis	ICD-9-CM
64732	Maternal tuberculosis with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64741	Maternal malaria with delivery	Diagnosis	ICD-9-CM
64742	Maternal malaria with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64751	Maternal rubella with delivery	Diagnosis	ICD-9-CM
64752	Maternal rubella with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64761	Other maternal viral disease with delivery	Diagnosis	ICD-9-CM
64762	Other maternal viral disease with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64781	Other specified maternal infectious and parasitic disease with delivery	Diagnosis	ICD-9-CM
64782	Other specified maternal infectious and parasitic disease with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64791	Unspecified maternal infection or infestation with delivery	Diagnosis	ICD-9-CM
64792	Unspecified maternal infection or infestation with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64801	Maternal diabetes mellitus with delivery	Diagnosis	ICD-9-CM
64802	Maternal diabetes mellitus with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64811	Maternal thyroid dysfunction with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
64812	Maternal thyroid dysfunction with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64821	Maternal anemia, with delivery	Diagnosis	ICD-9-CM
64822	Maternal anemia with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64831	Maternal drug dependence, with delivery	Diagnosis	ICD-9-CM
64832	Maternal drug dependence, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64841	Maternal mental disorders, with delivery	Diagnosis	ICD-9-CM
64842	Maternal mental disorders, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64851	Maternal congenital cardiovascular disorders, with delivery	Diagnosis	ICD-9-CM
64852	Maternal congenital cardiovascular disorders, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64861	Other maternal cardiovascular diseases, with delivery	Diagnosis	ICD-9-CM
64862	Other maternal cardiovascular diseases, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64871	Bone and joint disorders of maternal back, pelvis, and lower limbs, with delivery	Diagnosis	ICD-9-CM
64872	Bone and joint disorders of maternal back, pelvis, and lower limbs, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
64881	Abnormal maternal glucose tolerance, with delivery	Diagnosis	ICD-9-CM
64882	Abnormal maternal glucose tolerance, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64891	Other current maternal conditions classifiable elsewhere, with delivery	Diagnosis	ICD-9-CM
64892	Other current maternal conditions classifiable elsewhere, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
64901	Tobacco use disorder complicating pregnancy, childbirth, or the puerperium, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
64902	Tobacco use disorder complicating pregnancy, childbirth, or the puerperium, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
64911	Obesity complicating pregnancy, childbirth, or the puerperium, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
64912	Obesity complicating pregnancy, childbirth, or the puerperium, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
64921	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
64922	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
64931	Coagulation defects complicating pregnancy, childbirth, or the puerperium, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
64932	Coagulation defects complicating pregnancy, childbirth, or the puerperium, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
64941	Epilepsy complicating pregnancy, childbirth, or the puerperium, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
64942	Epilepsy complicating pregnancy, childbirth, or the puerperium, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
64951	Spotting complicating pregnancy, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
64961	Uterine size date discrepancy, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
64962	Uterine size date discrepancy, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
64971	Cervical shortening, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
64981	Onset (spontaneous) of labor after 37 completed weeks of gestation but before 39 completed weeks gestation, with delivery by (planned) cesarean section, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
64982	Onset (spontaneous) of labor after 37 completed weeks of gestation but before 39 completed weeks gestation, with delivery by (planned) cesarean section, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
65101	Twin pregnancy, delivered	Diagnosis	ICD-9-CM
65111	Triplet pregnancy, delivered	Diagnosis	ICD-9-CM
65121	Quadruplet pregnancy, delivered	Diagnosis	ICD-9-CM
65131	Twin pregnancy with fetal loss and retention of one fetus, delivered	Diagnosis	ICD-9-CM
65141	Triplet pregnancy with fetal loss and retention of one or more, delivered	Diagnosis	ICD-9-CM
65151	Quadruplet pregnancy with fetal loss and retention of one or more, delivered	Diagnosis	ICD-9-CM
65161	Other multiple pregnancy with fetal loss and retention of one or more fetus(es), delivered	Diagnosis	ICD-9-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
65171	Multiple gestation following (elective) fetal reduction, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
65181	Other specified multiple gestation, delivered	Diagnosis	ICD-9-CM
65191	Unspecified multiple gestation, delivered	Diagnosis	ICD-9-CM
65201	Unstable lie of fetus, delivered	Diagnosis	ICD-9-CM
65211	Breech or other malpresentation successfully converted to cephalic presentation, delivered	Diagnosis	ICD-9-CM
65221	Breech presentation without mention of version, delivered	Diagnosis	ICD-9-CM
65231	Transverse or oblique fetal presentation, delivered	Diagnosis	ICD-9-CM
65241	Fetal face or brow presentation, delivered	Diagnosis	ICD-9-CM
65251	High fetal head at term, delivered	Diagnosis	ICD-9-CM
65261	Multiple gestation with malpresentation of one fetus or more, delivered	Diagnosis	ICD-9-CM
65271	Prolapsed arm of fetus, delivered	Diagnosis	ICD-9-CM
65281	Other specified malposition or malpresentation of fetus, delivered	Diagnosis	ICD-9-CM
65291	Unspecified malposition or malpresentation of fetus, delivered	Diagnosis	ICD-9-CM
65301	Major abnormality of bony pelvis, not further specified, delivered	Diagnosis	ICD-9-CM
65311	Generally contracted pelvis in pregnancy, delivered	Diagnosis	ICD-9-CM
65321	Inlet contraction of pelvis in pregnancy, delivered	Diagnosis	ICD-9-CM
65331	Outlet contraction of pelvis in pregnancy, delivered	Diagnosis	ICD-9-CM
65341	Fetopelvic disproportion, delivered	Diagnosis	ICD-9-CM
65351	Unusually large fetus causing disproportion, delivered	Diagnosis	ICD-9-CM
65361	Hydrocephalic fetus causing disproportion, delivered	Diagnosis	ICD-9-CM
65371	Other fetal abnormality causing disproportion, delivered	Diagnosis	ICD-9-CM
65381	Fetal disproportion of other origin, delivered	Diagnosis	ICD-9-CM
65391	Unspecified fetal disproportion, delivered	Diagnosis	ICD-9-CM
65401	Congenital abnormalities of pregnant uterus, delivered	Diagnosis	ICD-9-CM
65402	Congenital abnormalities of pregnant uterus, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
65411	Tumors of body of uterus, delivered	Diagnosis	ICD-9-CM
65412	Tumors of body of uterus, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
65421	Previous cesarean delivery, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
65431	Retroverted and incarcerated gravid uterus, delivered	Diagnosis	ICD-9-CM
65432	Retroverted and incarcerated gravid uterus, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
65441	Other abnormalities in shape or position of gravid uterus and of neighboring structures, delivered	Diagnosis	ICD-9-CM
65442	Other abnormalities in shape or position of gravid uterus and of neighboring structures, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
65451	Cervical incompetence, delivered	Diagnosis	ICD-9-CM
65452	Cervical incompetence, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
65461	Other congenital or acquired abnormality of cervix, with delivery	Diagnosis	ICD-9-CM
65462	Other congenital or acquired abnormality of cervix, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
65471	Congenital or acquired abnormality of vagina, with delivery	Diagnosis	ICD-9-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
65472	Congenital or acquired abnormality of vagina, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
65481	Congenital or acquired abnormality of vulva, with delivery	Diagnosis	ICD-9-CM
65482	Congenital or acquired abnormality of vulva, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
65491	Other and unspecified abnormality of organs and soft tissues of pelvis, with delivery	Diagnosis	ICD-9-CM
65492	Other and unspecified abnormality of organs and soft tissues of pelvis, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
65501	Central nervous system malformation in fetus, with delivery	Diagnosis	ICD-9-CM
65511	Chromosomal abnormality in fetus, affecting management of mother, with delivery	Diagnosis	ICD-9-CM
65521	Hereditary disease in family possibly affecting fetus, affecting management of mother, with delivery	Diagnosis	ICD-9-CM
65531	Suspected damage to fetus from viral disease in mother, affecting management of mother, with delivery	Diagnosis	ICD-9-CM
65541	Suspected damage to fetus from other disease in mother, affecting management of mother, with delivery	Diagnosis	ICD-9-CM
65551	Suspected damage to fetus from drugs, affecting management of mother, delivered	Diagnosis	ICD-9-CM
65561	Suspected damage to fetus from radiation, affecting management of mother, delivered	Diagnosis	ICD-9-CM
65571	Decreased fetal movements, affecting management of mother, delivered	Diagnosis	ICD-9-CM
65581	Other known or suspected fetal abnormality, not elsewhere classified, affecting management of mother, delivery	Diagnosis	ICD-9-CM
65591	Unspecified fetal abnormality affecting management of mother, delivery	Diagnosis	ICD-9-CM
65601	Fetal-maternal hemorrhage, with delivery	Diagnosis	ICD-9-CM
65611	Rhesus isoimmunization affecting management of mother, delivered	Diagnosis	ICD-9-CM
65621	Isoimmunization from other and unspecified blood-group incompatibility, affecting management of mother, delivered	Diagnosis	ICD-9-CM
65631	Fetal distress affecting management of mother, delivered	Diagnosis	ICD-9-CM
65641	Intrauterine death affecting management of mother, delivered	Diagnosis	ICD-9-CM
65651	Poor fetal growth, affecting management of mother, delivered	Diagnosis	ICD-9-CM
65661	Excessive fetal growth affecting management of mother, delivered	Diagnosis	ICD-9-CM
65671	Other placental conditions affecting management of mother, delivered	Diagnosis	ICD-9-CM
65681	Other specified fetal and placental problems affecting management of mother, delivered	Diagnosis	ICD-9-CM
65691	Unspecified fetal and placental problem affecting management of mother, delivered	Diagnosis	ICD-9-CM
65701	Polyhydramnios, with delivery	Diagnosis	ICD-9-CM
65801	Oligohydramnios, delivered	Diagnosis	ICD-9-CM
65811	Premature rupture of membranes in pregnancy, delivered	Diagnosis	ICD-9-CM
65821	Delayed delivery after spontaneous or unspecified rupture of membranes, delivered	Diagnosis	ICD-9-CM
65831	Delayed delivery after artificial rupture of membranes, delivered	Diagnosis	ICD-9-CM
65841	Infection of amniotic cavity, delivered	Diagnosis	ICD-9-CM
65881	Other problem associated with amniotic cavity and membranes, delivered	Diagnosis	ICD-9-CM
65891	Unspecified problem associated with amniotic cavity and membranes, delivered	Diagnosis	ICD-9-CM
65901	Failed mechanical induction of labor, delivered	Diagnosis	ICD-9-CM
65911	Failed medical or unspecified induction of labor, delivered	Diagnosis	ICD-9-CM
65921	Unspecified maternal pyrexia during labor, delivered	Diagnosis	ICD-9-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
65931	Generalized infection during labor, delivered	Diagnosis	ICD-9-CM
65941	Grand multiparity, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
65951	Elderly primigravida, delivered	Diagnosis	ICD-9-CM
65961	Elderly multigravida, delivered, with mention of antepartum condition	Diagnosis	ICD-9-CM
65971	Abnormality in fetal heart rate or rhythm, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
65981	Other specified indication for care or intervention related to labor and delivery, delivered	Diagnosis	ICD-9-CM
65991	Unspecified indication for care or intervention related to labor and delivery, delivered	Diagnosis	ICD-9-CM
66001	Obstruction caused by malposition of fetus at onset of labor, delivered	Diagnosis	ICD-9-CM
66011	Obstruction by bony pelvis during labor and delivery, delivered	Diagnosis	ICD-9-CM
66021	Obstruction by abnormal pelvic soft tissues during labor and delivery, delivered	Diagnosis	ICD-9-CM
66031	Deep transverse arrest and persistent occipitoposterior position during labor and deliver, delivered	Diagnosis	ICD-9-CM
66041	Shoulder (girdle) dystocia during labor and deliver, delivered	Diagnosis	ICD-9-CM
66051	Locked twins, delivered	Diagnosis	ICD-9-CM
66061	Unspecified failed trial of labor, delivered	Diagnosis	ICD-9-CM
66071	Unspecified failed forceps or vacuum extractor, delivered	Diagnosis	ICD-9-CM
66081	Other causes of obstructed labor, delivered	Diagnosis	ICD-9-CM
66091	Unspecified obstructed labor, with delivery	Diagnosis	ICD-9-CM
66101	Primary uterine inertia, with delivery	Diagnosis	ICD-9-CM
66111	Secondary uterine inertia, with delivery	Diagnosis	ICD-9-CM
66121	Other and unspecified uterine inertia, with delivery	Diagnosis	ICD-9-CM
66131	Precipitate labor, with delivery	Diagnosis	ICD-9-CM
66141	Hypertonic, incoordinate, or prolonged uterine contractions, with delivery	Diagnosis	ICD-9-CM
66191	Unspecified abnormality of labor, with delivery	Diagnosis	ICD-9-CM
66201	Prolonged first stage of labor, delivered	Diagnosis	ICD-9-CM
66211	Unspecified prolonged labor, delivered	Diagnosis	ICD-9-CM
66221	Prolonged second stage of labor, delivered	Diagnosis	ICD-9-CM
66231	Delayed delivery of second twin, triplet, etc., delivered	Diagnosis	ICD-9-CM
66301	Prolapse of cord, complicating labor and delivery, delivered	Diagnosis	ICD-9-CM
66311	Cord around neck, with compression, complicating labor and delivery, delivered	Diagnosis	ICD-9-CM
66321	Other and unspecified cord entanglement, with compression, complicating labor and delivery, delivered	Diagnosis	ICD-9-CM
66331	Other and unspecified cord entanglement, without mention of compression, complicating labor and delivery, delivered	Diagnosis	ICD-9-CM
66341	Short cord complicating labor and delivery, delivered	Diagnosis	ICD-9-CM
66351	Vasa previa complicating labor and delivery, delivered	Diagnosis	ICD-9-CM
66361	Vascular lesions of cord complicating labor and delivery, delivered	Diagnosis	ICD-9-CM
66381	Other umbilical cord complications during labor and delivery, delivered	Diagnosis	ICD-9-CM
66391	Unspecified umbilical cord complication during labor and delivery, delivered	Diagnosis	ICD-9-CM
66401	First-degree perineal laceration, with delivery	Diagnosis	ICD-9-CM
66411	Second-degree perineal laceration, with delivery	Diagnosis	ICD-9-CM
66421	Third-degree perineal laceration, with delivery	Diagnosis	ICD-9-CM
66431	Fourth-degree perineal laceration, with delivery	Diagnosis	ICD-9-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
66441	Unspecified perineal laceration, with delivery	Diagnosis	ICD-9-CM
66451	Vulvar and perineal hematoma, with delivery	Diagnosis	ICD-9-CM
66461	Anal sphincter tear complicating delivery, not associated with third-degree perineal laceration, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
66481	Other specified trauma to perineum and vulva, with delivery	Diagnosis	ICD-9-CM
66491	Unspecified trauma to perineum and vulva, with delivery	Diagnosis	ICD-9-CM
66501	Rupture of uterus before onset of labor, with delivery	Diagnosis	ICD-9-CM
66511	Rupture of uterus during labor, with delivery	Diagnosis	ICD-9-CM
66522	Inversion of uterus, delivered with postpartum complication	Diagnosis	ICD-9-CM
66531	Laceration of cervix, with delivery	Diagnosis	ICD-9-CM
66541	High vaginal laceration, with delivery	Diagnosis	ICD-9-CM
66551	Other injury to pelvic organs, with delivery	Diagnosis	ICD-9-CM
66561	Damage to pelvic joints and ligaments, with delivery	Diagnosis	ICD-9-CM
66571	Pelvic hematoma, with delivery	Diagnosis	ICD-9-CM
66572	Pelvic hematoma, delivered with postpartum complication	Diagnosis	ICD-9-CM
66581	Other specified obstetrical trauma, with delivery	Diagnosis	ICD-9-CM
66582	Other specified obstetrical trauma, delivered, with postpartum	Diagnosis	ICD-9-CM
66591	Unspecified obstetrical trauma, with delivery	Diagnosis	ICD-9-CM
66592	Unspecified obstetrical trauma, delivered, with postpartum complication	Diagnosis	ICD-9-CM
66602	Third-stage postpartum hemorrhage, with delivery	Diagnosis	ICD-9-CM
66612	Other immediate postpartum hemorrhage, with delivery	Diagnosis	ICD-9-CM
66622	Delayed and secondary postpartum hemorrhage, with delivery	Diagnosis	ICD-9-CM
66632	Postpartum coagulation defects, with delivery	Diagnosis	ICD-9-CM
66702	Retained placenta without hemorrhage, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
66712	Retained portions of placenta or membranes, without hemorrhage, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
66801	Pulmonary complications of the administration of anesthesia or other sedation in labor and delivery, delivered	Diagnosis	ICD-9-CM
66802	Pulmonary complications of the administration of anesthesia or other sedation in labor and delivery, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
66811	Cardiac complications of the administration of anesthesia or other sedation in labor and delivery, delivered	Diagnosis	ICD-9-CM
66812	Cardiac complications of the administration of anesthesia or other sedation in labor and delivery, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
66821	Central nervous system complications of the administration of anesthesia or other sedation in labor and delivery, delivered	Diagnosis	ICD-9-CM
66822	Central nervous system complications of the administration of anesthesia or other sedation in labor and delivery, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
66881	Other complications of the administration of anesthesia or other sedation in labor and delivery, delivered	Diagnosis	ICD-9-CM
66882	Other complications of the administration of anesthesia or other sedation in labor and delivery, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
66891	Unspecified complication of the administration of anesthesia or other sedation in labor and delivery, delivered	Diagnosis	ICD-9-CM
66892	Unspecified complication of the administration of anesthesia or other sedation in labor and delivery, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
66901	Maternal distress, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
66902	Maternal distress, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
66911	Shock during or following labor and delivery, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
66912	Shock during or following labor and delivery, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
66921	Maternal hypotension syndrome, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
66922	Maternal hypotension syndrome, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
66932	Acute kidney failure following labor and delivery, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
66941	Other complications of obstetrical surgery and procedures, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
66942	Other complications of obstetrical surgery and procedures, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
66951	Forceps or vacuum extractor delivery without mention of indication, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
66961	Breech extraction, without mention of indication, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
66971	Cesarean delivery, without mention of indication, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
66981	Other complication of labor and delivery, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
66982	Other complication of labor and delivery, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
66991	Unspecified complication of labor and delivery, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
66992	Unspecified complication of labor and delivery, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67002	Major puerperal infection, unspecified, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
67012	Puerperal endometritis, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
67022	Puerperal sepsis, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
67032	Puerperal septic thrombophlebitis, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
67082	Other major puerperal infection, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
67101	Varicose veins of legs, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67102	Varicose veins of legs, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67111	Varicose veins of vulva and perineum, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
67112	Varicose veins of vulva and perineum, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67121	Superficial thrombophlebitis with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67122	Superficial thrombophlebitis with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67131	Deep phlebothrombosis, antepartum, with delivery	Diagnosis	ICD-9-CM
67142	Deep phlebothrombosis, postpartum, with delivery	Diagnosis	ICD-9-CM
67151	Other phlebitis and thrombosis with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67152	Other phlebitis and thrombosis with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67181	Other venous complication, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67182	Other venous complication, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67191	Unspecified venous complication, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67192	Unspecified venous complication, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67202	Puerperal pyrexia of unknown origin, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
67301	Obstetrical air embolism, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67302	Obstetrical air embolism, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67311	Amniotic fluid embolism, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67312	Amniotic fluid embolism, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67321	Obstetrical blood-clot embolism, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67322	Obstetrical blood-clot embolism, with mention of postpartum complication	Diagnosis	ICD-9-CM
67331	Obstetrical pyemic and septic embolism, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67332	Obstetrical pyemic and septic embolism, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67381	Other obstetrical pulmonary embolism, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67382	Other obstetrical pulmonary embolism, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67401	Cerebrovascular disorder, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67402	Cerebrovascular disorder, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67412	Disruption of cesarean wound, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67422	Disruption of perineal wound, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67432	Other complication of obstetrical surgical wounds, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67442	Placental polyp, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67451	Peripartum cardiomyopathy, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67452	Peripartum cardiomyopathy, delivered, with mention of postpartum condition	Diagnosis	ICD-9-CM
67482	Other complication of puerperium, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67492	Unspecified complications of puerperium, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
67501	Infection of nipple associated with childbirth, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67502	Infection of nipple associated with childbirth, delivered with mention of postpartum complication	Diagnosis	ICD-9-CM
67511	Abscess of breast associated with childbirth, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67512	Abscess of breast associated with childbirth, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
67521	Nonpurulent mastitis, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67522	Nonpurulent mastitis, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
67581	Other specified infection of the breast and nipple associated with childbirth, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67582	Other specified infection of the breast and nipple associated with childbirth, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
67591	Unspecified infection of the breast and nipple, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67592	Unspecified infection of the breast and nipple, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
67601	Retracted nipple, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67602	Retracted nipple, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
67611	Cracked nipple, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67612	Cracked nipple, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
67621	Engorgement of breasts, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67622	Engorgement of breasts, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
67631	Other and unspecified disorder of breast associated with childbirth, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67632	Other and unspecified disorder of breast associated with childbirth, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
67641	Failure of lactation, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67642	Failure of lactation, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67651	Suppressed lactation, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67652	Suppressed lactation, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67661	Galactorrhea, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67662	Galactorrhea, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67681	Other disorder of lactation, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67682	Other disorder of lactation, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67691	Unspecified disorder of lactation, with delivery, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
72	Forceps, vacuum, and breech delivery	Procedure	ICD-9-CM
73	Other procedures inducing or assisting delivery	Procedure	ICD-9-CM
720	Low forceps operation	Procedure	ICD-9-CM
721	Low forceps operation with episiotomy	Procedure	ICD-9-CM
722	Mid forceps operation	Procedure	ICD-9-CM
723	High forceps operation	Procedure	ICD-9-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
724	Forceps rotation of fetal head	Procedure	ICD-9-CM
725	Breech extraction	Procedure	ICD-9-CM
726	Forceps application to aftercoming head	Procedure	ICD-9-CM
727	Vacuum extraction	Procedure	ICD-9-CM
728	Other specified instrumental delivery	Procedure	ICD-9-CM
729	Unspecified instrumental delivery	Procedure	ICD-9-CM
730	Artificial rupture of membranes	Procedure	ICD-9-CM
731	Other surgical induction of labor	Procedure	ICD-9-CM
732	Internal and combined version and extraction	Procedure	ICD-9-CM
733	Failed forceps	Procedure	ICD-9-CM
734	Medical induction of labor	Procedure	ICD-9-CM
735	Manually assisted delivery	Procedure	ICD-9-CM
736	Episiotomy	Procedure	ICD-9-CM
738	Operations on fetus to facilitate delivery	Procedure	ICD-9-CM
739	Other operations assisting delivery	Procedure	ICD-9-CM
740	Classical cesarean section	Procedure	ICD-9-CM
741	Low cervical cesarean section	Procedure	ICD-9-CM
742	Extraperitoneal cesarean section	Procedure	ICD-9-CM
744	Cesarean section of other specified type	Procedure	ICD-9-CM
749	Cesarean section of unspecified type	Procedure	ICD-9-CM
7221	Mid forceps operation with episiotomy	Procedure	ICD-9-CM
7229	Other mid forceps operation	Procedure	ICD-9-CM
7231	High forceps operation with episiotomy	Procedure	ICD-9-CM
7239	Other high forceps operation	Procedure	ICD-9-CM
7251	Partial breech extraction with forceps to aftercoming head	Procedure	ICD-9-CM
7252	Other partial breech extraction	Procedure	ICD-9-CM
7253	Total breech extraction with forceps to aftercoming head	Procedure	ICD-9-CM
7254	Other total breech extraction	Procedure	ICD-9-CM
7271	Vacuum extraction with episiotomy	Procedure	ICD-9-CM
7279	Other vacuum extraction	Procedure	ICD-9-CM
7301	Induction of labor by artificial rupture of membranes	Procedure	ICD-9-CM
7309	Other artificial rupture of membranes	Procedure	ICD-9-CM
7321	Internal and combined version without extraction	Procedure	ICD-9-CM
7322	Internal and combined version with extraction	Procedure	ICD-9-CM
7351	Manual rotation of fetal head	Procedure	ICD-9-CM
7359	Other manually assisted delivery	Procedure	ICD-9-CM
7391	External version to assist delivery	Procedure	ICD-9-CM
7392	Replacement of prolapsed umbilical cord	Procedure	ICD-9-CM
7393	Incision of cervix to assist delivery	Procedure	ICD-9-CM
7394	Pubiotomy to assist delivery	Procedure	ICD-9-CM
7399	Other operations to assist delivery	Procedure	ICD-9-CM
7499	Other cesarean section of unspecified type	Procedure	ICD-9-CM
67692	Unspecified disorder of lactation, with delivery, with mention of postpartum complication	Diagnosis	ICD-9-CM
67801	Fetal hematologic conditions, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
67811	Fetal conjoined twins, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67901	Maternal complications from in utero procedure, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67902	Maternal complications from in utero procedure, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
67911	Fetal complications from in utero procedure, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
67912	Fetal complications from in utero procedure, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
V27	Outcome of delivery	Diagnosis	ICD-9-CM
V270	Outcome of delivery, single liveborn	Diagnosis	ICD-9-CM
V271	Outcome of delivery, single stillborn	Diagnosis	ICD-9-CM
V272	Outcome of delivery, twins, both liveborn	Diagnosis	ICD-9-CM
V273	Outcome of delivery, twins, one liveborn and one stillborn	Diagnosis	ICD-9-CM
V274	Outcome of delivery, twins, both stillborn	Diagnosis	ICD-9-CM
V275	Outcome of delivery, other multiple birth, all liveborn	Diagnosis	ICD-9-CM
V276	Outcome of delivery, other multiple birth, some liveborn	Diagnosis	ICD-9-CM
V277	Outcome of delivery, other multiple birth, all stillborn	Diagnosis	ICD-9-CM
V279	Outcome of delivery, unspecified	Diagnosis	ICD-9-CM
V30	Single liveborn	Diagnosis	ICD-9-CM
V300	Single liveborn, born in hospital	Diagnosis	ICD-9-CM
V3000	Single liveborn, born in hospital, delivered without mention of cesarean delivery	Diagnosis	ICD-9-CM
V3001	Single liveborn, born in hospital, delivered by cesarean delivery	Diagnosis	ICD-9-CM
V301	Single liveborn, born before admission to hospital	Diagnosis	ICD-9-CM
V302	Single liveborn, born outside hospital and not hospitalized	Diagnosis	ICD-9-CM
V31	Twin birth, mate liveborn	Diagnosis	ICD-9-CM
V310	Twin, mate liveborn, born in hospital	Diagnosis	ICD-9-CM
V3100	Twin, mate liveborn, born in hospital, delivered without mention of cesarean delivery	Diagnosis	ICD-9-CM
V3101	Twin, mate liveborn, born in hospital, delivered by cesarean delivery	Diagnosis	ICD-9-CM
V311	Twin birth, mate liveborn, born before admission to hospital	Diagnosis	ICD-9-CM
V312	Twin birth, mate liveborn, born outside hospital and not hospitalized	Diagnosis	ICD-9-CM
V32	Twin birth, mate stillborn	Diagnosis	ICD-9-CM
V320	Twin, mate stillborn, born in hospital	Diagnosis	ICD-9-CM
V3200	Twin, mate stillborn, born in hospital, delivered without mention of cesarean delivery	Diagnosis	ICD-9-CM
V3201	Twin, mate stillborn, born in hospital, delivered by cesarean delivery	Diagnosis	ICD-9-CM
V321	Twin birth, mate stillborn, born before admission to hospital	Diagnosis	ICD-9-CM
V322	Twin birth, mate stillborn, born outside hospital and not hospitalized	Diagnosis	ICD-9-CM
V33	Twin birth, unspecified whether mate liveborn or stillborn	Diagnosis	ICD-9-CM
V330	Twin, unspecified, born in hospital	Diagnosis	ICD-9-CM
V3300	Twin, unspecified whether mate stillborn or liveborn, born in hospital, delivered without mention of cesarean delivery	Diagnosis	ICD-9-CM
V3301	Twin, unspecified whether mate stillborn or liveborn, born in hospital, delivered by cesarean delivery	Diagnosis	ICD-9-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
V331	Twin birth, unspecified whether mate liveborn or stillborn, born before admission to hospital	Diagnosis	ICD-9-CM
V332	Twin birth, unspecified whether mate liveborn or stillborn, born outside hospital and not hospitalized	Diagnosis	ICD-9-CM
V34	Other multiple birth (three or more), mates all liveborn	Diagnosis	ICD-9-CM
V340	Other multiple, mates all liveborn, born in hospital	Diagnosis	ICD-9-CM
V3400	Other multiple, mates all liveborn, born in hospital, delivered without mention of cesarean delivery	Diagnosis	ICD-9-CM
V3401	Other multiple, mates all liveborn, born in hospital, delivered by cesarean delivery	Diagnosis	ICD-9-CM
V341	Other multiple birth (three or more), mates all liveborn, born before admission to hospital	Diagnosis	ICD-9-CM
V342	Other multiple birth (three or more), mates all liveborn, born outside hospital and not hospitalized	Diagnosis	ICD-9-CM
V35	Other multiple birth (three or more), mates all stillborn	Diagnosis	ICD-9-CM
V350	Other multiple, mates all stillborn, born in hospital	Diagnosis	ICD-9-CM
V3500	Other multiple, mates all stillborn, born in hospital, delivered without mention of cesarean delivery	Diagnosis	ICD-9-CM
V3501	Other multiple, mates all stillborn, born in hospital, delivered by cesarean delivery	Diagnosis	ICD-9-CM
V351	Other multiple birth (three or more), mates all stillborn, born before admission to hospital	Diagnosis	ICD-9-CM
V352	Other multiple birth (three or more), mates all stillborn, born outside of hospital and not hospitalized	Diagnosis	ICD-9-CM
V36	Other multiple birth (three or more), mates liveborn and stillborn	Diagnosis	ICD-9-CM
V360	Other multiple, mates liveborn and stillborn, born in hospital	Diagnosis	ICD-9-CM
V3600	Other multiple, mates liveborn and stillborn, born in hospital, delivered without mention of cesarean delivery	Diagnosis	ICD-9-CM
V3601	Other multiple, mates liveborn and stillborn, born in hospital, delivered by cesarean delivery	Diagnosis	ICD-9-CM
V361	Other multiple birth (three or more), mates liveborn and stillborn, born before admission to hospital	Diagnosis	ICD-9-CM
V362	Other multiple birth (three or more), mates liveborn and stillborn, born outside hospital and not hospitalized	Diagnosis	ICD-9-CM
V37	Other multiple birth (three or more), unspecified whether mates liveborn or stillborn	Diagnosis	ICD-9-CM
V370	Other multiple, unspecified whether mates stillborn or liveborn, born in hospital	Diagnosis	ICD-9-CM
V3700	Other multiple, unspecified whether mates stillborn or liveborn, born in hospital, delivered without mention of cesarean delivery	Diagnosis	ICD-9-CM
V3701	Other multiple, unspecified whether mates stillborn or liveborn, born in hospital, delivered by cesarean delivery	Diagnosis	ICD-9-CM
V371	Other multiple birth (three or more), unspecified whether mates liveborn or stillborn, born before admission to hospital	Diagnosis	ICD-9-CM
V372	Other multiple birth (three or more), unspecified whether mates liveborn or stillborn, born outside of hospital	Diagnosis	ICD-9-CM
V39	Liveborn, unspecified whether single, twin, or multiple	Diagnosis	ICD-9-CM
V390	Other liveborn, unspecified whether single, twin, or multiple, born in hospital	Diagnosis	ICD-9-CM
V3900	Liveborn infant, unspecified whether single, twin, or multiple, born in hospital, delivered without mention of cesarean delivery	Diagnosis	ICD-9-CM

Appendix C. List of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes Used to Define Live Birth Delivery in this Request

Code	Description	Code Category	Code Type
V3901	Liveborn infant, unspecified whether single, twin, or multiple, born in hospital, delivered by cesarean	Diagnosis	ICD-9-CM
V391	Liveborn, unspecified whether single, twin or multiple, born before admission to hospital	Diagnosis	ICD-9-CM
V392	Liveborn, unspecified whether single, twin or multiple, born outside hospital and not hospitalized	Diagnosis	ICD-9-CM

Appendix D. List of Healthcare Common Procedure Coding System, Level II (HCPCS) and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Exposures in this Request

Code	Description	Code Category	Code Type
Analgesics, Anesthesia, and Drugs of Abuse			
C9046	Cocaine HCl nasal solution for topical administration, 1 mg	Procedure	HCPCS
G2073	Medication assisted treatment, naltrexone; weekly bundle including dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology testing if performed (provision of the services by a Medicare-enrolled opioid treatment program)	Procedure	HCPCS
J2212	Injection, methylnaltrexone, 0.1 mg	Procedure	HCPCS
J2315	Injection, naltrexone, depot form, 1 mg	Procedure	HCPCS
Cardiac and Hematological Agents			
C9052	Injection, ravulizumab-cwvz, 10 mg	Procedure	HCPCS
C9236	Injection, eculizumab, 10 mg	Procedure	HCPCS
C9245	Injection, romiplostim, 10 mcg	Procedure	HCPCS
C9260	Injection, ofatumumab, 10 mg	Procedure	HCPCS
C9272	Injection, denosumab, 1 mg	Procedure	HCPCS
C9289	Injection, asparaginase Erwinia chrysanthemi, 1,000 IU	Procedure	HCPCS
J0897	Injection, denosumab, 1 mg	Procedure	HCPCS
J1300	Injection, eculizumab, 10 mg	Procedure	HCPCS
J1303	Injection, ravulizumab-cwvz, 10 mg	Procedure	HCPCS
J2796	Injection, romiplostim, 10 mcg	Procedure	HCPCS
J9019	Injection, asparaginase (Erwinaze), 1,000 IU	Procedure	HCPCS
J9020	Injection, asparaginase, not otherwise specified, 10,000 units	Procedure	HCPCS
J9021	Injection, asparaginase, recombinant, (Rylaze), 0.1 mg	Procedure	HCPCS
J9302	Injection, ofatumumab, 10 mg	Procedure	HCPCS
XW033C6	Introduction of Eculizumab into Peripheral Vein, Percutaneous Approach, New Technology Group 6	Procedure	ICD-10-PCS
XW043C6	Introduction of Eculizumab into Central Vein, Percutaneous Approach, New Technology Group 6	Procedure	ICD-10-PCS
Metabolic Agents			
C9079	Injection, evinacumab-dgnb, 5 mg	Procedure	HCPCS
J0584	Injection, burosumab-twza, 1 mg	Procedure	HCPCS
J1305	Injection, evinacumab-dgnb, 5 mg	Procedure	HCPCS
J1306	Injection, inclisiran, 1 mg	Procedure	HCPCS
S5551	Insulin, most rapid onset (Lispro or Aspart); 5 units	Procedure	HCPCS
S5552	Insulin, intermediate acting (NPH or LENTE); 5 units	Procedure	HCPCS
Neurological Agents: Epilepsies and Related Disorders			
C9040	Injection, fremanezumab-vfrm, 1 mg	Procedure	HCPCS
C9126	Injection natalizumab per 5 mg	Procedure	HCPCS
C9238	Injection, levetiracetam, 10 mg	Procedure	HCPCS
J0586	Injection, abobotulinumtoxinA, 5 units	Procedure	HCPCS
J1823	Injection, inebilizumab-cdon, 1 mg	Procedure	HCPCS
J1953	Injection, levetiracetam, 10 mg	Procedure	HCPCS
J2323	Injection, natalizumab, 1 mg	Procedure	HCPCS
J3031	Injection, fremanezumab-vfrm, 1 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered)	Procedure	HCPCS
J9332	Injection, efgartigimod alfa-fcab, 2 mg	Procedure	HCPCS

Appendix D. List of Healthcare Common Procedure Coding System, Level II (HCPCS) and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Exposures in this Request

Code	Description	Code Category	Code Type
Q4079	Injection, natalizumab, 1 mg	Procedure	HCPCS
XW03398	Introduction of Inebilizumab-cdon into Peripheral Vein, Percutaneous Approach, New Technology Group 8	Procedure	ICD-10-PCS
XW04398	Introduction of Inebilizumab-cdon into Central Vein, Percutaneous Approach, New Technology Group 8	Procedure	ICD-10-PCS
Neurological Agents: Migraine			
C9494	Injection, ocrelizumab, 1 mg	Procedure	HCPCS
J1825	Injection, interferon beta-1a, 33 mcg	Procedure	HCPCS
J1826	Injection, interferon beta-1a, 30 mcg	Procedure	HCPCS
J1830	Injection interferon beta-1b, 0.25 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered)	Procedure	HCPCS
J2350	Injection, ocrelizumab, 1 mg	Procedure	HCPCS
J3030	Injection, sumatriptan succinate, 6 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered)	Procedure	HCPCS
Q3025	Injection, interferon beta-1a, 11 mcg for intramuscular use	Procedure	HCPCS
Q3026	Injection, interferon beta-1a, 11 mcg for subcutaneous use	Procedure	HCPCS
Q3027	Injection, interferon beta-1a, 1 mcg for intramuscular use	Procedure	HCPCS
Q3028	Injection, interferon beta-1a, 1 mcg for subcutaneous use	Procedure	HCPCS
Neurological Agents: Multiple Sclerosis			
C9036	Injection, patisiran, 0.1 mg	Procedure	HCPCS
C9063	Injection, eptinezumab-jjmr, 1 mg	Procedure	HCPCS
C9489	Injection, nusinersen, 0.1 mg	Procedure	HCPCS
J0222	Injection, patisiran, 0.1 mg	Procedure	HCPCS
J2326	Injection, nusinersen, 0.1 mg	Procedure	HCPCS
J3032	Injection, eptinezumab-jjmr, 1 mg	Procedure	HCPCS
J7513	Daclizumab, parenteral, 25 mg	Procedure	HCPCS
Neurological Agents: Other			
C9110	Injection, alemtuzumab, per 10 mg/ ml	Procedure	HCPCS
C9254	Injection, lacosamide, 1 mg	Procedure	HCPCS
C9419	Injection, cladribine, per 1 mg, brand name	Procedure	HCPCS
J0202	Injection, alemtuzumab, 1 mg	Procedure	HCPCS
J9010	Injection, alemtuzumab, 10 mg	Procedure	HCPCS
J9065	Injection, cladribine, per 1 mg	Procedure	HCPCS
Q9979	Injection, Alemtuzumab, 1 mg	Procedure	HCPCS
S0087	Injection, alemtuzumab, 30 mg	Procedure	HCPCS
XW01397	Introduction of Satralizumab-mwge into Subcutaneous Tissue, Percutaneous Approach, New Technology Group 7	Procedure	ICD-10-PCS
Dermatology			
C9029	Injection, guselkumab, 1 mg	Procedure	HCPCS
C9211	Injection, alefacept, for intravenous use, per 7.5 mg	Procedure	HCPCS
C9212	Injection, alefacept, for intramuscular use, per 7.5 mg	Procedure	HCPCS
C9261	Injection, ustekinumab, 1 mg	Procedure	HCPCS
C9438	Cyclosporine, oral, 100 mg, brand name	Procedure	HCPCS
C9487	Ustekinumab, for intravenous injection, 1 mg	Procedure	HCPCS

Appendix D. List of Healthcare Common Procedure Coding System, Level II (HCPCS) and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Exposures in this Request

Code	Description	Code	
		Category	Code Type
J0215	Injection, alefacept, 0.5 mg	Procedure	HCPCS
J1628	Injection, guselkumab, 1 mg	Procedure	HCPCS
J3245	Injection, tildrakizumab, 1 mg	Procedure	HCPCS
J3357	Ustekinumab, for subcutaneous injection, 1 mg	Procedure	HCPCS
J3358	Ustekinumab, for intravenous injection, 1 mg	Procedure	HCPCS
J7352	Afamelanotide implant, 1 mg	Procedure	HCPCS
J7502	Cyclosporine, oral, 100 mg	Procedure	HCPCS
J7515	Cyclosporine, oral, 25 mg	Procedure	HCPCS
J7516	Cyclosporine, parenteral, 250 mg	Procedure	HCPCS
K0122	Cyclosporine, parenteral, 250 mg	Procedure	HCPCS
Q9989	Ustekinumab, for intravenous injection, 1 mg	Procedure	HCPCS
S0117	Tretinoin, topical, 5 g	Procedure	HCPCS
S0162	Injection, efalizumab, 125 mg	Procedure	HCPCS
S0193	Injection alefacept, 7.5 mg (includes dose packaging)	Procedure	HCPCS
Gastroenterology and Hepatology			
C9026	Injection, vedolizumab, 1 mg	Procedure	HCPCS
C9249	Injection, certolizumab pegol, 1 mg	Procedure	HCPCS
J0717	Injection, certolizumab pegol, 1 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered)	Procedure	HCPCS
J0718	Injection, certolizumab pegol, 1 mg	Procedure	HCPCS
J3380	Injection, vedolizumab, 1 mg	Procedure	HCPCS
Immunology			
C9006	Injection, tacrolimus, per 5 mg (1 amp)	Procedure	HCPCS
C9020	Sirolimus tablet, 1 mg	Procedure	HCPCS
C9086	Injection, anifrolumab-fnia, 1 mg	Procedure	HCPCS
C9106	Sirolimus, per 1 mg/ml	Procedure	HCPCS
C9217	Injection, omalizumab, per 5 mg	Procedure	HCPCS
C9219	Mycophenolic acid, oral, per 180 mg	Procedure	HCPCS
C9230	Injection, abatacept, per 10 mg	Procedure	HCPCS
C9264	Injection, tocilizumab, 1 mg	Procedure	HCPCS
C9286	Injection, belatacept, 1 mg	Procedure	HCPCS
C9466	Injection, benralizumab, 1 mg	Procedure	HCPCS
C9473	Injection, mepolizumab, 1 mg	Procedure	HCPCS
J0129	Injection, abatacept, 10 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered)	Procedure	HCPCS
J0135	Injection, adalimumab, 20 mg	Procedure	HCPCS
J0485	Injection, belatacept, 1 mg	Procedure	HCPCS
J0490	Injection, belimumab, 10 mg	Procedure	HCPCS
J0491	Injection, anifrolumab-fnia, 1 mg	Procedure	HCPCS
J0517	Injection, benralizumab, 1 mg	Procedure	HCPCS
J1438	Injection, etanercept, 25 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered)	Procedure	HCPCS
J1745	Injection, infliximab, excludes biosimilar, 10 mg	Procedure	HCPCS
J2182	Injection, mepolizumab, 1 mg	Procedure	HCPCS
J2357	Injection, omalizumab, 5 mg	Procedure	HCPCS

Appendix D. List of Healthcare Common Procedure Coding System, Level II (HCPCS) and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Exposures in this Request

Code	Description	Code	
		Category	Code Type
J2793	Injection, rilonacept, 1 mg	Procedure	HCPCS
J3262	Injection, tocilizumab, 1 mg	Procedure	HCPCS
J7503	Tacrolimus, extended release, (Envarsus XR), oral, 0.25 mg	Procedure	HCPCS
J7507	Tacrolimus, immediate release, oral, 1 mg	Procedure	HCPCS
J7508	Tacrolimus, extended release, (Astagraf XL), oral, 0.1 mg	Procedure	HCPCS
J7517	Mycophenolate mofetil, oral, 250 mg	Procedure	HCPCS
J7518	Mycophenolic acid, oral, 180 mg	Procedure	HCPCS
J7520	Sirolimus, oral, 1 mg	Procedure	HCPCS
J7525	Tacrolimus, parenteral, 5 mg	Procedure	HCPCS
J7639	Dornase alfa, inhalation solution, FDA-approved final product, noncompounded, administered through DME, unit dose form, per mg	Procedure	HCPCS
K0412	Mycophenolate mofetil, oral, 250 mg (CellCept)	Procedure	HCPCS
K0514	Dornase alpha, inhalation solution administered through DME, unit dose form, per milligram	Procedure	HCPCS
M0249	Intravenous infusion, tocilizumab, for hospitalized adults and pediatric patients (2 years of age and older) with COVID-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation (ECMO) only, includes infusion and post administration monitoring, first dose	Procedure	HCPCS
M0250	Intravenous infusion, tocilizumab, for hospitalized adults and pediatric patients (2 years of age and older) with COVID-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation (ECMO) only, includes infusion and post administration monitoring, second dose	Procedure	HCPCS
Q0249	Injection, tocilizumab, for hospitalized adults and pediatric patients (2 years of age and older) with COVID-19 who are receiving systemic corticosteroids and require supplemental oxygen, non-invasive or invasive mechanical ventilation, or extracorporeal membrane oxygenation (ECMO) only, 1 mg	Procedure	HCPCS
Q2044	Injection, belimumab, 10 mg	Procedure	HCPCS
Q5102	Injection, infliximab, biosimilar, 10 mg	Procedure	HCPCS
Q5103	Injection, infliximab-dyyb, biosimilar, (Inflectra), 10 mg	Procedure	HCPCS
Q5104	Injection, infliximab-abda, biosimilar, (Renflexis), 10 mg	Procedure	HCPCS
Q5109	Injection, infliximab-qbt, biosimilar, (Ixifi), 10 mg	Procedure	HCPCS
Q5121	Injection, infliximab-axxq, biosimilar, (AVSOLA), 10 mg	Procedure	HCPCS
S0107	Injection, omalizumab, 25 mg	Procedure	HCPCS
XW033G5	Introduction of Sarilumab into Peripheral Vein, Percutaneous Approach, New Technology Group 5	Procedure	ICD-10-PCS
XW033H5	Introduction of Tocilizumab into Peripheral Vein, Percutaneous Approach, New Technology Group 5	Procedure	ICD-10-PCS
XW043G5	Introduction of Sarilumab into Central Vein, Percutaneous Approach, New Technology Group 5	Procedure	ICD-10-PCS
XW043H5	Introduction of Tocilizumab into Central Vein, Percutaneous Approach, New Technology Group 5	Procedure	ICD-10-PCS

Appendix D. List of Healthcare Common Procedure Coding System, Level II (HCPCS) and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Exposures in this Request

Code	Description	Code Category	Code Type
Infectious Disease			
C9054	Injection, lefamulin (Xenleta), 1 mg	Procedure	HCPCS
C9258	Injection, telavancin, 10 mg	Procedure	HCPCS
C9462	Injection, delafloxacin, 1 mg	Procedure	HCPCS
G9018	Zanamivir, inhalation powder, administered through inhaler, per 10 mg (for use in a Medicare-approved demonstration project)	Procedure	HCPCS
G9034	Zanamivir, inhalation powder, administered through inhaler, brand, per 10 mg (for use in a Medicare-approved demonstration project)	Procedure	HCPCS
J0248	Injection, remdesivir, 1 mg	Procedure	HCPCS
J0691	Injection, lefamulin, 1 mg	Procedure	HCPCS
J0742	Injection, imipenem 4 mg, cilastatin 4 mg and relebactam 2 mg	Procedure	HCPCS
J0743	Injection, cilastatin sodium; imipenem, per 250 mg	Procedure	HCPCS
J1746	Injection, ibalizumab-uiyk, 10 mg	Procedure	HCPCS
J3095	Injection, telavancin, 10 mg	Procedure	HCPCS
XW03366	Introduction of Lefamulin Anti-infective into Peripheral Vein, Percutaneous Approach, New Technology Group 6	Procedure	ICD-10-PCS
XW033E5	Introduction of Remdesivir Anti-infective into Peripheral Vein, Percutaneous Approach, New Technology Group 5	Procedure	ICD-10-PCS
XW033U5	Introduction of Imipenem-cilastatin-relebactam Anti-infective into Peripheral Vein, Percutaneous Approach, New Technology Group 5	Procedure	ICD-10-PCS
XW04366	Introduction of Lefamulin Anti-infective into Central Vein, Percutaneous Approach, New Technology Group 6	Procedure	ICD-10-PCS
XW043E5	Introduction of Remdesivir Anti-infective into Central Vein, Percutaneous Approach, New Technology Group 5	Procedure	ICD-10-PCS
XW043U5	Introduction of Imipenem-cilastatin-relebactam Anti-infective into Central Vein, Percutaneous Approach, New Technology Group 5	Procedure	ICD-10-PCS
XW0DX66	Introduction of Lefamulin Anti-infective into Mouth and Pharynx, External Approach, New Technology Group 6	Procedure	ICD-10-PCS
Miscellaneous			
A9575	Injection, gadoterate meglumine, 0.1 ml	Procedure	HCPCS
A9577	Injection, gadobenate dimeglumine (MultiHance), per ml	Procedure	HCPCS
A9578	Injection, gadobenate dimeglumine (MultiHance multipack), per ml	Procedure	HCPCS
A9581	Injection, gadoxetate disodium, 1 ml	Procedure	HCPCS
C9246	Injection, gadoxetate disodium, per ml	Procedure	HCPCS
Oncology			
C9131	Injection, ado-trastuzumab emtansine, 1 mg	Procedure	HCPCS
C9214	Injection, bevacizumab, per 10 mg	Procedure	HCPCS
C9257	Injection, bevacizumab, 0.25 mg	Procedure	HCPCS
C9284	Injection, ipilimumab, 1 mg	Procedure	HCPCS
C9292	Injection, pertuzumab, 10 mg	Procedure	HCPCS
J9035	Injection, bevacizumab, 10 mg	Procedure	HCPCS
J9228	Injection, ipilimumab, 1 mg	Procedure	HCPCS
J9306	Injection, pertuzumab, 1 mg	Procedure	HCPCS
J9316	Injection, pertuzumab, trastuzumab, and hyaluronidase-zzxf, per 10 mg	Procedure	HCPCS
J9354	Injection, ado-trastuzumab emtansine, 1 mg	Procedure	HCPCS
J9355	Injection, trastuzumab, excludes biosimilar, 10 mg	Procedure	HCPCS

Appendix D. List of Healthcare Common Procedure Coding System, Level II (HCPCS) and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Exposures in this Request

Code	Description	Code	
		Category	Code Type
J9356	Injection, trastuzumab, 10 mg and hyaluronidase-oysk	Procedure	HCPCS
J9358	Injection, fam-trastuzumab deruxtecan-nxki, 1 mg	Procedure	HCPCS
Q2024	Injection, bevacizumab, 0.25 mg	Procedure	HCPCS
Q5107	Injection, bevacizumab-awwb, biosimilar, (Mvasi), 10 mg	Procedure	HCPCS
Q5112	Injection, trastuzumab-dttb, biosimilar, (Ontruzant), 10 mg	Procedure	HCPCS
Q5113	Injection, trastuzumab-pkrb, biosimilar, (Herzuma), 10 mg	Procedure	HCPCS
Q5114	Injection, Trastuzumab-dkst, biosimilar, (Ogivri), 10 mg	Procedure	HCPCS
Q5116	Injection, trastuzumab-qyyp, biosimilar, (Trazimera), 10 mg	Procedure	HCPCS
Q5117	Injection, trastuzumab-anns, biosimilar, (Kanjinti), 10 mg	Procedure	HCPCS
Q5118	Injection, bevacizumab-bvzr, biosimilar, (Zirabev), 10 mg	Procedure	HCPCS
S0088	Imatinib, 100 mg	Procedure	HCPCS
S0116	Bevacizumab, 100 mg	Procedure	HCPCS
Inborn Errors			
C9022	Injection, elosulfase alfa, 1 mg	Procedure	HCPCS
C9085	Injection, avalglucosidase alfa-ngpt, 4 mg	Procedure	HCPCS
C9208	Injection, agalsidase beta, per 1 mg	Procedure	HCPCS
C9209	Injection, laronidase, per 2.9 mg	Procedure	HCPCS
C9224	Injection, galsulfase, per 5 mg	Procedure	HCPCS
C9232	Injection, idursulfase, 1 mg	Procedure	HCPCS
C9234	Injection, alglucosidase alfa, 10 mg	Procedure	HCPCS
C9277	Injection, alglucosidase alfa (Lumizyme), 1 mg	Procedure	HCPCS
C9294	Injection, taliglucerase alfa, 10 units	Procedure	HCPCS
J0180	Injection, agalsidase beta, 1 mg	Procedure	HCPCS
J0219	Injection, avalglucosidase alfa-ngpt, 4 mg	Procedure	HCPCS
J0220	Injection, alglucosidase alfa, 10 mg, not otherwise specified	Procedure	HCPCS
J0221	Injection, alglucosidase alfa, (Lumizyme), 10 mg	Procedure	HCPCS
J1322	Injection, elosulfase alfa, 1 mg	Procedure	HCPCS
J1458	Injection, galsulfase, 1 mg	Procedure	HCPCS
J1743	Injection, idursulfase, 1 mg	Procedure	HCPCS
J1931	Injection, laronidase, 0.1 mg	Procedure	HCPCS
J3060	Injection, taliglucerase alfa, 10 units	Procedure	HCPCS
J3397	Injection, vestronidase alfa-vjbk, 1 mg	Procedure	HCPCS
S0147	Injection, alglucosidase alfa, 20 mg	Procedure	HCPCS
S0158	Injection, laronidase, 0.58 mg	Procedure	HCPCS
S0159	Injection, agalsidase beta, 35 mg	Procedure	HCPCS
Psychiatry: Antidepressants			
C9055	Injection, brexanolone, 1 mg	Procedure	HCPCS
J1320	Injection, amitriptyline HCl, up to 20 mg	Procedure	HCPCS
J1632	Injection, brexanolone, 1 mg	Procedure	HCPCS
J3270	Injection, imipramine hcl, up to 25 mg	Procedure	HCPCS
S0106	Bupropion HCl sustained release tablet, 150 mg, per bottle of 60 tablets	Procedure	HCPCS
XW03306	Introduction of Brexanolone into Peripheral Vein, Percutaneous Approach, New Technology Group 6	Procedure	ICD-10-PCS
XW04306	Introduction of Brexanolone into Central Vein, Percutaneous Approach, New Technology Group 6	Procedure	ICD-10-PCS

Appendix D. List of Healthcare Common Procedure Coding System, Level II (HCPCS) and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Exposures in this Request

Code	Description	Code Category	Code Type
Psychiatry: Antipsychotics			
C9035	Injection, aripiprazole lauroxil (Aristada Initio), 1 mg	Procedure	HCPCS
C9037	Injection, risperidone (Perseris), 0.5 mg	Procedure	HCPCS
C9125	Injection, risperidone, per 12.5 mg	Procedure	HCPCS
C9204	Injection, ziprasidone mesylate injection, per 20 mg	Procedure	HCPCS
C9255	Injection, paliperidone palmitate, 1 mg	Procedure	HCPCS
C9470	Injection, aripiprazole lauroxil, 1 mg	Procedure	HCPCS
J0400	Injection, aripiprazole, intramuscular, 0.25 mg	Procedure	HCPCS
J0401	Injection, aripiprazole, extended release, 1 mg	Procedure	HCPCS
J1942	Injection, aripiprazole lauroxil, 1 mg	Procedure	HCPCS
J1943	Injection, aripiprazole lauroxil, (Aristada Initio), 1 mg	Procedure	HCPCS
J1944	Injection, aripiprazole lauroxil, (Aristada), 1 mg	Procedure	HCPCS
J2358	Injection, olanzapine, long-acting, 1 mg	Procedure	HCPCS
J2426	Injection, paliperidone palmitate extended release, 1 mg	Procedure	HCPCS
J2794	Injection, risperidone (RISPERDAL CONSTA), 0.5 mg	Procedure	HCPCS
J2798	Injection, risperidone, (Perseris), 0.5 mg	Procedure	HCPCS
J3486	Injection, ziprasidone mesylate, 10 mg	Procedure	HCPCS
S0136	Clozapine, 25 mg	Procedure	HCPCS
S0163	Injection, risperidone, long acting, 12.5 mg	Procedure	HCPCS
S0166	Injection, olanzapine, 2.5 mg	Procedure	HCPCS
Psychiatry: Sedatives and Hypnotics			
G2082	Office or other outpatient visit for the evaluation and management of an established patient that requires the supervision of a physician or other qualified health care professional and provision of up to 56 mg of esketamine nasal self administration, includes 2 hours post administration observation	Procedure	HCPCS
G2083	Office or other outpatient visit for the evaluation and management of an established patient that requires the supervision of a physician or other qualified health care professional and provision of greater than 56 mg esketamine nasal self administration, includes 2 hours post administration observation	Procedure	HCPCS
S0013	Esketamine, nasal spray, 1 mg	Procedure	HCPCS
XW097M5	Introduction of Esketamine Hydrochloride into Nose, Via Natural or Artificial Opening, New Technology Group 5	Procedure	ICD-10-PCS
Psychiatry: Stimulants			
S0160	Dextroamphetamine sulfate, 5 mg	Procedure	HCPCS
Reproductive and Urologic Agents			
A4260	Levonorgestrel (contraceptive) implants system, including implants and supplies	Procedure	HCPCS
J1725	Injection, hydroxyprogesterone caproate, 1 mg	Procedure	HCPCS
J1726	Injection, hydroxyprogesterone caproate, (Makena), 10 mg	Procedure	HCPCS
J1729	Injection, hydroxyprogesterone caproate, not otherwise specified, 10 mg	Procedure	HCPCS
J1739	Injection, hydroxyprogesterone caproate 125 mg/ml	Procedure	HCPCS
J7295	Ethinyl estradiol and etonogestrel 0.015 mg, 0.12 mg per 24 hours; monthly vaginal ring, ea	Procedure	HCPCS
J7296	Levonorgestrel-releasing intrauterine contraceptive system, (Kyleena), 19.5 mg	Procedure	HCPCS
J7297	Levonorgestrel-releasing intrauterine contraceptive system (Liletta), 52 mg	Procedure	HCPCS
J7298	Levonorgestrel-releasing intrauterine contraceptive system (Mirena), 52 mg	Procedure	HCPCS
J7301	Levonorgestrel-releasing intrauterine contraceptive system (Skyla), 13.5 mg	Procedure	HCPCS
J7302	Levonorgestrel-releasing intrauterine contraceptive system, 52 mg	Procedure	HCPCS

Appendix D. List of Healthcare Common Procedure Coding System, Level II (HCPCS) and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Exposures in this Request

Code	Description	Code	
		Category	Code Type
J7306	Levonorgestrel (contraceptive) implant system, including implants and supplies	Procedure	HCPCS
J7307	Etonogestrel (contraceptive) implant system, including implant and supplies	Procedure	HCPCS
Q0090	Levonorgestrel-releasing intrauterine contraceptive system, (Skyla), 13.5 mg	Procedure	HCPCS
Q9984	Levonorgestrel-releasing intrauterine contraceptive system (Kyleena), 19.5 mg	Procedure	HCPCS
Q9985	Injection, hydroxyprogesterone caproate, not otherwise specified, 10 mg	Procedure	HCPCS
Q9986	Injection, hydroxyprogesterone caproate (Makena), 10 mg	Procedure	HCPCS
S0180	Etonogestrel (contraceptive) implant system, including implant and supplies	Procedure	HCPCS
S0190	Mifepristone, oral, 200 mg	Procedure	HCPCS
S4980	Levonorgestrel - releasing intrauterine system, each	Procedure	HCPCS
S4981	Insertion of levonorgestrel-releasing intrauterine system	Procedure	HCPCS

Appendix E. List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request

Non-Proprietary Name	Proprietary Name
Analgesics, Anesthesia, and Drugs of Abuse	
acamprosate calcium	Campral
acamprosate calcium	Campral Dose Pak
acamprosate calcium	acamprosate
cocaine HCl	Goprelto
cocaine HCl	Numbrino
cocaine HCl	cocaine
duloxetine HCl	Cymbalta
duloxetine HCl	Drizalma Sprinkle
duloxetine HCl	Irenka
duloxetine HCl	duloxetine
eltrombopag olamine	Promacta
methylnaltrexone bromide	Relistor
milnacipran HCl	Savella
morphine sulfate/naltrexone HCl	Embeda
naltrexone HCl	Depade
naltrexone HCl	Revia
naltrexone HCl	naltrexone
naltrexone HCl/bupropion HCl	Contrave
naltrexone microspheres	Vivitrol
nicotine	NTS Step 1
nicotine	NTS Step 2
nicotine	Nicoderm CQ
nicotine	Nicotrol
nicotine	Nicotrol NS
nicotine	nicotine
nicotine polacrilex	Commit
nicotine polacrilex	Nicorelief
nicotine polacrilex	Nicorette
nicotine polacrilex	Nicorette Refill
nicotine polacrilex	Quit 2
nicotine polacrilex	Quit 4
nicotine polacrilex	Stop Smoking Aid
nicotine polacrilex	Thrive Nicotine
nicotine polacrilex	nicotine (polacrilex)
pregabalin	Lyrica
pregabalin	Lyrica CR
pregabalin	pregabalin
remimazolam besylate	Byfavo
varenicline tartrate	Chantix
varenicline tartrate	Chantix Continuing Month Box
varenicline tartrate	Chantix Continuing Month Pak
varenicline tartrate	Chantix Starting Month Box

Appendix E. List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request

Non-Proprietary Name	Proprietary Name
varenicline tartrate	Chantix Starting Month Pak
varenicline tartrate	Tyrvaya
varenicline tartrate	varenicline
Cardiac and Hematological Agents	
ambrisentan	Letairis
ambrisentan	ambrisentan
asparaginase	Elspar
asparaginase (Erwinia chrysanthemi)	Erwinase
asparaginase (Erwinia chrysanthemi)	Erwinaze
asparaginase Erwinia chrysanthemi (recombinant)-rywn	Rylaze
denosumab	Prolia
denosumab	Xgeva
eculizumab	Soliris
lenalidomide	Revlimid
lenalidomide	lenalidomide
mavacamten	Camzyos
midostaurin	Rydapt
ofatumumab	Arzerra
ofatumumab	Kesimpta Pen
ravulizumab-cwvz	Ultomiris
romiplostim	Nplate
tafamidis	Vyndamax
tafamidis meglumine	Vyndaqel
vericiguat	Verquvo
Metabolic Agents	
alirocumab	Praluent Pen
alirocumab	Praluent Syringe
bempedoic acid	Nexletol
bempedoic acid/ezetimibe	Nexlizet
burosumab-twza	Crysvita
canagliflozin	Invokana
canagliflozin/metformin HCl	Invokamet
canagliflozin/metformin HCl	Invokamet XR
dapagliflozin propanediol	Farxiga
dapagliflozin propanediol/metformin HCl	Xigduo XR
dapagliflozin propanediol/saxagliptin HCl	Qtern
ertugliflozin pidolate	Steglatro
ertugliflozin pidolate/metformin HCl	Segluromet
ertugliflozin pidolate/sitagliptin phosphate	Steglujan
evinacumab-dgnb	Evkeeza
evolocumab	Repatha Pushtronex
evolocumab	Repatha SureClick
evolocumab	Repatha Syringe

Appendix E. List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request

Non-Proprietary Name	Proprietary Name
exenatide	Byetta
exenatide microspheres	Bydureon
exenatide microspheres	Bydureon BCise
inlisiran sodium	Leqvio
insulin NPH human isophane	Humulin N NPH Insulin KwikPen
insulin NPH human isophane	Humulin N NPH U-100 Insulin
insulin NPH human isophane	Humulin N Pen
insulin NPH human isophane	Novolin N Flexpen
insulin NPH human isophane	Novolin N InnoLet
insulin NPH human isophane	Novolin N NPH U-100 Insulin
insulin NPH human isophane	Novolin N PenFill
insulin NPH human isophane/insulin regular, human	Humulin 50/50
insulin NPH human isophane/insulin regular, human	Humulin 70/30 Insulin Pen
insulin NPH human isophane/insulin regular, human	Humulin 70/30 U-100 Insulin
insulin NPH human isophane/insulin regular, human	Humulin 70/30 U-100 KwikPen
insulin NPH human isophane/insulin regular, human	Novolin 70-30 FlexPen U-100
insulin NPH human isophane/insulin regular, human	Novolin 70/30 InnoLet Insulin
insulin NPH human isophane/insulin regular, human	Novolin 70/30 PenFill
insulin NPH human isophane/insulin regular, human	Novolin 70/30 U-100 Insulin
insulin aspart	Novolog Flexpen U-100 Insulin
insulin aspart	Novolog PenFill U-100 Insulin
insulin aspart	Novolog U-100 Insulin aspart
insulin aspart	insulin aspart U-100
insulin aspart (niacinamide)	Fiasp FlexTouch U-100 Insulin
insulin aspart (niacinamide)	Fiasp Penfill U-100 Insulin
insulin aspart (niacinamide)	Fiasp U-100 Insulin
insulin aspart protamine human/insulin aspart	Novolog Mix 70-30 U-100 Insulin
insulin aspart protamine human/insulin aspart	Novolog Mix 70-30FlexPen U-100
insulin aspart protamine human/insulin aspart	insulin asp prt-insulin aspart
insulin detemir	Levemir FlexTouch U-100 Insulin
insulin detemir	Levemir Flexpen
insulin detemir	Levemir U-100 Insulin
lomitapide mesylate	Juxtapid
metreleptin	Myalept
phentermine HCl/topiramate	Qsymia
semaglutide	Ozempic
semaglutide	Rybelsus
semaglutide	Wegovy
sitagliptin phosphate	Januvia
sitagliptin phosphate/metformin HCl	Janumet
sitagliptin phosphate/metformin HCl	Janumet XR
sitagliptin phosphate/simvastatin	Juvisync

Appendix E. List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request

Non-Proprietary Name	Proprietary Name
Neurological Agents: Epilepsies and Related Disorders	
abobotulinumtoxinA	Dysport
diroximel fumarate	Vumerity
efgartigimod alfa-fcab	Vyvgart
fremanezumab-vfrm	Ajovy Autoinjector
fremanezumab-vfrm	Ajovy Syringe
inebilizumab-cdon	Uplizna
levetiracetam	Elepsia XR
levetiracetam	Keppra
levetiracetam	Keppra XR
levetiracetam	Roweepra
levetiracetam	Roweepra XR
levetiracetam	Spritam
levetiracetam	levetiracetam
levetiracetam in sodium chloride, iso-osmotic	levetiracetam in NaCl (iso-os)
monomethyl fumarate	Bafiertam
natalizumab	Tysabri
stiripentol	Diacomit
Neurological Agents: Migraine	
dimethyl fumarate	Tecfidera
dimethyl fumarate	dimethyl fumarate
fenfluramine HCl	Fintepla
interferon beta-1a	Avonex
interferon beta-1a/albumin human	Avonex (with albumin)
interferon beta-1a/albumin human	Rebif (with albumin)
interferon beta-1a/albumin human	Rebif Rebidose
interferon beta-1a/albumin human	Rebif Titration Pack
interferon beta-1b	Betaseron
interferon beta-1b	Extavia
naratriptan HCl	Amerge
naratriptan HCl	naratriptan
ocrelizumab	Ocrevus
peginterferon beta-1a	Plegridy
risdiplam	Evrysdi
sumatriptan	Imitrex
sumatriptan	Tosymra
sumatriptan	sumatriptan
sumatriptan succinate	Alsuma
sumatriptan succinate	Imitrex
sumatriptan succinate	Imitrex STATdose Pen
sumatriptan succinate	Imitrex STATdose Refill
sumatriptan succinate	Onzetra Xsail
sumatriptan succinate	Sumavel DosePro

Appendix E. List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request

Non-Proprietary Name	Proprietary Name
sumatriptan succinate	Zecuity
sumatriptan succinate	Zembrace Symtouch
sumatriptan succinate	sumatriptan succinate
sumatriptan succinate/naproxen sodium	Treximet
sumatriptan succinate/naproxen sodium	sumatriptan-naproxen
ubrogepant	Ubrelvy
Neurological Agents: Multiple Sclerosis	
daclizumab	Zenapax
daclizumab	Zinbryta
dalfampridine	Ampyra
dalfampridine	dalfampridine
eptinezumab-jjmr	Vyepti
erenumab-aooe	Aimovig Autoinjector
erenumab-aooe	Aimovig Autoinjector (2 Pack)
eslicarbazepine acetate	Aptiom
fingolimod HCl	Gilenya
fingolimod lauryl sulfate	Tascenso ODT
galcanezumab-gnlm	Emgality Pen
galcanezumab-gnlm	Emgality Syringe
inotersen sodium	Tegsedi
lamotrigine	Lamictal
lamotrigine	Lamictal ODT
lamotrigine	Lamictal ODT Starter (Blue)
lamotrigine	Lamictal ODT Starter (Green)
lamotrigine	Lamictal ODT Starter (Orange)
lamotrigine	Lamictal Starter (Blue) Kit
lamotrigine	Lamictal Starter (Green) Kit
lamotrigine	Lamictal Starter (Orange) Kit
lamotrigine	Lamictal XR
lamotrigine	Lamictal XR Starter (Blue)
lamotrigine	Lamictal XR Starter (Green)
lamotrigine	Lamictal XR Starter (Orange)
lamotrigine	Subvenite
lamotrigine	Subvenite Starter (Blue) Kit
lamotrigine	Subvenite Starter (Green) Kit
lamotrigine	Subvenite Starter (Orange) Kit
lamotrigine	lamotrigine
lasmiditan succinate	Reyvow
nusinersen sodium/PF	Spinraza (PF)
ozanimod hydrochloride	Zeposia
ozanimod hydrochloride	Zeposia Starter Kit
ozanimod hydrochloride	Zeposia Starter Pack
patisiran sodium, lipid complex	Onpattro

Appendix E. List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request

Non-Proprietary Name	Proprietary Name
ponesimod	Ponvory
ponesimod	Ponvory 14-Day Starter Pack
rimegepant sulfate	Nurtec ODT
siponimod	Mayzent
siponimod	Mayzent Starter(for 1mg maint)
siponimod	Mayzent Starter(for 2mg maint)
teriflunomide	Aubagio
Neurological Agents: Other	
alemtuzumab	Campath
alemtuzumab	Lemtrada
amifampridine	Ruzurgi
amifampridine phosphate	Firdapse
atogepant	Qulipta
cannabidiol (CBD)	Epidiolex
cenobamate	Xcopri
cenobamate	Xcopri Maintenance Pack
cenobamate	Xcopri Titration Pack
cladribine	Leustatin
cladribine	Mavenclad (10 tablet pack)
cladribine	Mavenclad (4 tablet pack)
cladribine	Mavenclad (5 tablet pack)
cladribine	Mavenclad (6 tablet pack)
cladribine	Mavenclad (7 tablet pack)
cladribine	Mavenclad (8 tablet pack)
cladribine	Mavenclad (9 tablet pack)
cladribine	cladribine
lacosamide	Vimpat
lacosamide	lacosamide
satralizumab-mwge	Enspryng
Dermatology	
abrocitinib	Cibinqo
acitretin	Soriatane
acitretin	acitretin
acitretin/emollient combination no. 26	Soriatane CK
afamelanotide acetate	Scenesse
alefacept	Amevive
brodalumab	Siliq
cyclosporine	Cequa
cyclosporine	Restasis
cyclosporine	Restasis MultiDose
cyclosporine	Sandimmune
cyclosporine	Verkazia
cyclosporine	cyclosporine

Appendix E. List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request

Non-Proprietary Name	Proprietary Name
cyclosporine, modified	Gengraf
cyclosporine, modified	Neoral
cyclosporine, modified	cyclosporine modified
cyclosporine/chondroitin sulfate A sodium	Cyclosporine in Klarity
dupilumab	Dupixent Pen
dupilumab	Dupixent Syringe
efalizumab	Raptiva
fluocinolone acetonide/tretinoin/hydroquinone	Tri-Luma
guselkumab	Tremfya
ixekizumab	Taltz Autoinjector
ixekizumab	Taltz Autoinjector (2 Pack)
ixekizumab	Taltz Autoinjector (3 Pack)
ixekizumab	Taltz Syringe
ixekizumab	Taltz Syringe (2 Pack)
ixekizumab	Taltz Syringe (3 Pack)
pimecrolimus	Elidel
pimecrolimus	pimecrolimus
risankizumab-rzaa	Skyrizi
tildrakizumab-asmn	Ilumya
tralokinumab-ldrm	Adbry
tretinoin/emollient base	Renova
ustekinumab	Stelara
Gastroenterology and Hepatology	
certolizumab pegol	Cimzia
certolizumab pegol	Cimzia Powder for Reconst
certolizumab pegol	Cimzia Starter Kit
odevixibat	Bylvay
prucalopride succinate	Motegrity
vedolizumab	Entyvio
zinc acetate	Galzin
zinc acetate	Wilzin
Immunology	
abatacept	Orencia
abatacept	Orencia ClickJect
abatacept/maltose	Orencia (with maltose)
adalimumab	Humira
adalimumab	Humira Pediatric Crohns Start
adalimumab	Humira Pen
adalimumab	Humira Pen Crohns-UC-HS Start
adalimumab	Humira Pen Psor-Uveits-Adol HS
adalimumab	Humira(CF)
adalimumab	Humira(CF) Pedi Crohns Starter
adalimumab	Humira(CF) Pen

Appendix E. List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request

Non-Proprietary Name	Proprietary Name
adalimumab	Humira(CF) Pen Crohns-UC-HS
adalimumab	Humira(CF) Pen Pediatric UC
adalimumab	Humira(CF) Pen Psor-Uv-Adol HS
anifrolumab-fnia	Saphnelo
apremilast	Otezla
apremilast	Otezla Starter
belatacept	Nulojix
belimumab	Benlysta
benralizumab	Fasenra
benralizumab	Fasenra Pen
dornase alfa	Pulmozyme
etanercept	Enbrel
etanercept	Enbrel Mini
etanercept	Enbrel SureClick
infliximab	Remicade
infliximab	infliximab
infliximab-abda	Renflexis
infliximab-axxq	Avsola
infliximab-dyyb	Inflectra
leflunomide	Arava
leflunomide	leflunomide
mepolizumab	Nucala
mycophenolate mofetil	CellCept
mycophenolate mofetil	mycophenolate mofetil
mycophenolate mofetil HCl	CellCept Intravenous
mycophenolate mofetil HCl	mycophenolate mofetil (HCl)
mycophenolate sodium	Myfortic
mycophenolate sodium	mycophenolate sodium
omalizumab	Xolair
rilonacept	Arcalyst
sarilumab	Kevzara
sirolimus	Hyftor
sirolimus	Rapamune
sirolimus	sirolimus
tacrolimus	Astagraf XL
tacrolimus	Envarsus XR
tacrolimus	Hecoria
tacrolimus	Prograf
tacrolimus	Protopic
tacrolimus	tacrolimus
tacrolimus in vehicle base no.238	tacrolimus-vehicle base no.238
tacrolimus/hyaluronate sodium/niacinamide	Oxianujo (with hyaluronate)
tacrolimus/hyaluronate sodium/niacinamide	tacrolimus-hyaluronate-niacin

Appendix E. List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request

Non-Proprietary Name	Proprietary Name
tacrolimus/niacinamide	Oxianujo
tacrolimus/niacinamide	tacrolimus-niacinamide
tocilizumab	Actemra
tocilizumab	Actemra ACTPen
tofacitinib citrate	Xeljanz
tofacitinib citrate	Xeljanz XR
upadacitinib	Rinvoq
Infectious Disease	
Ansuvimab-zykl	Ebanga
abacavir sulfate/dolutegravir sodium/lamivudine	Triumeq
abacavir sulfate/dolutegravir sodium/lamivudine	Triumeq PD
abacavir sulfate/lamivudine	Epzicom
abacavir sulfate/lamivudine	abacavir-lamivudine
abacavir sulfate/lamivudine/zidovudine	Trizivir
abacavir sulfate/lamivudine/zidovudine	abacavir-lamivudine-zidovudine
artesunate	artesunate
bictegravir sodium/emtricitabine/tenofovir alafenamide fumar	Biktarvy
brincidofovir	Tembexa
darunavir eth/cobicistat/emtricitabine/tenofovir alafenamide	Symtuza
delafloxacin meglumine	Baxdela
diluent for artesunate (sodium phosphate)	diluent for artesunate
diluent for lefamulin(10mM citrate buffered 0.9 % sod chlor)	Diluent for lefamulin(Xenleta)
dolutegravir sodium/lamivudine	Dovato
doravirine/lamivudine/tenofovir disoproxil fumarate	Delstrigo
efavirenz	Sustiva
efavirenz	efavirenz
efavirenz/emtricitabine/tenofovir disoproxil fumarate	Atripla
efavirenz/emtricitabine/tenofovir disoproxil fumarate	efavirenz-emtricitabin-tenofov
efavirenz/lamivudine/tenofovir disoproxil fumarate	Symfi
efavirenz/lamivudine/tenofovir disoproxil fumarate	Symfi Lo
efavirenz/lamivudine/tenofovir disoproxil fumarate	efavirenz-lamivu-tenofov disop
elvitegravir/cobicistat/emtricitabine/tenofovir alafenamide	Genvoya
elvitegravir/cobicistat/emtricitabine/tenofovir disoproxil	Stribild
emtricitabine/rilpivirine HCl/tenofovir alafenamide fumarate	Odefsey
emtricitabine/rilpivirine HCl/tenofovir disoproxil fumarate	Complera
emtricitabine/tenofovir alafenamide fumarate	Descovy
emtricitabine/tenofovir disoproxil fumarate	Truvada
emtricitabine/tenofovir disoproxil fumarate	emtricitabine-tenofovir (TDF)
fexinidazole	Fexinidazole
ibalizumab-uiyk	Trogarzo
imipenem/cilastatin sodium	Primaxin IM
imipenem/cilastatin sodium	Primaxin IV
imipenem/cilastatin sodium	imipenem-cilastatin

Appendix E. List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request

Non-Proprietary Name	Proprietary Name
imipenem/cilastatin sodium/relebactam	Recarbrio
lamivudine	Epivir
lamivudine	Epivir HBV
lamivudine	lamivudine
lamivudine/tenofovir disoproxil fumarate	Cimduo
lamivudine/tenofovir disoproxil fumarate	Temixys
lamivudine/zidovudine	Combivir
lamivudine/zidovudine	lamivudine-zidovudine
lefamulin acetate	Xenleta
miltefosine	Impavido
nifurtimox	Lampit
remdesivir	Veklury
remdesivir	remdesivir
ribavirin	Copegus
ribavirin	Moderiba
ribavirin	Moderiba Dose Pack
ribavirin	RIBATAB Dose Pack
ribavirin	Rebetol
ribavirin	Ribasphere
ribavirin	Ribasphere RibaPak
ribavirin	Virazole
ribavirin	ribavirin
tecovirimat	Tpoxx (National Stockpile)
telavancin HCl	Vibativ
vonoprazan fumarate/amoxicillin trihydrate/clarithromycin	Voquezna Triple Pak
zanamivir	Relenza Diskhaler
Miscellaneous	
gadobenate dimeglumine	Multihance
gadobenate dimeglumine	Multihance Multipack
gadodiamide	Omniscan
gadodiamide	Omniscan Pre-Pak
gadodiamide	Omniscan SafePak
gadodiamide in 0.9 % sodium chloride	Omniscan Prefill Plus
gadopentetate dimeglumine	Magnevist
gadoterate meglumine	Clariscan (meglumine)
gadoterate meglumine	Dotarem
gadoversetamide	OptiMARK
gadoxetate disodium	Eovist
ibrexafungerp citrate	Brexafemme
Oncology	
ado-trastuzumab emtansine	Kadcyla
bevacizumab	Avastin
bevacizumab	bevacizumab

Appendix E. List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request

Non-Proprietary Name	Proprietary Name
bevacizumab-awwb	Mvasi
bevacizumab-bvzr	Zirabev
bevacizumab-maly	Alymsys
fam-trastuzumab deruxtecan-nxki	Enhertu
imatinib mesylate	Gleevec
imatinib mesylate	imatinib
ipilimumab	Yervoy
nilotinib HCl	Tasigna
pertuzumab	Perjeta
pertuzumab-trastuzumab-hyaluronidase-zzxf	Phesgo
regorafenib	Stivarga
sonidegib phosphate	Odomzo
trastuzumab	Herceptin
trastuzumab-anns	Kanjinti
trastuzumab-dkst	Ogivri
trastuzumab-dttb	Ontruzant
trastuzumab-hyaluronidase-oysk	Herceptin Hylecta
trastuzumab-pkrb	Herzuma
trastuzumab-qyyp	Trazimera
vismodegib	Erivedge
Inborn Errors	
agalsidase beta	Fabrazyme
alglucosidase alfa	Lumizyme
alglucosidase alfa	Myozyme
avalglucosidase alfa-ngpt	Nexviazyme
carglumic acid	Carbaglu
carglumic acid	carglumic acid
cholic acid	Cholbam
elosulfase alfa	Vimizim
galsulfase	Naglazyme
idursulfase	Elaprase
laronidase	Aldurazyme
migalastat HCl	Galafold
pegvaliase-pqpz	Palynziq
sapropterin dihydrochloride	Kuvan
sapropterin dihydrochloride	sapropterin
taliglucerase alfa	Elelyso
triheptanoin	Dojolvi
vestronidase alfa-vjbk	Mepsevii
Psychiatry: Antidepressants	
amitriptyline HCl	amitriptyline
amitriptyline HCl/chlordiazepoxide	Limbitrol
amitriptyline HCl/chlordiazepoxide	Limbitrol DS

Appendix E. List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request

Non-Proprietary Name	Proprietary Name
amitriptyline HCl/chlordiazepoxide	amitriptyline-chlordiazepoxide
amoxapine	amoxapine
brexanolone	Zulresso
bupropion HBr	Aplenzin
bupropion HCl	Budeprion SR
bupropion HCl	Budeprion XL
bupropion HCl	Buproban
bupropion HCl	Forfivo XL
bupropion HCl	Wellbutrin
bupropion HCl	Wellbutrin SR
bupropion HCl	Wellbutrin XL
bupropion HCl	Zyban
bupropion HCl	bupropion HCl
bupropion HCl	bupropion HCl (smoking deter)
bupropion HCl/dietary supplement combination no.15	Appbutamone-D
bupropion HCl/dietary supplement combination no.16	Appbutamone
citalopram hydrobromide	Celexa
citalopram hydrobromide	citalopram
clomipramine HCl	Anafranil
clomipramine HCl	clomipramine
desipramine HCl	Norpramin
desipramine HCl	desipramine
desvenlafaxine	Khedezla
desvenlafaxine	desvenlafaxine
desvenlafaxine fumarate	desvenlafaxine fumarate
desvenlafaxine succinate	Pristiq
desvenlafaxine succinate	desvenlafaxine succinate
doxepin HCl	Silenor
doxepin HCl	doxepin
escitalopram oxalate	Lexapro
escitalopram oxalate	escitalopram oxalate
fluoxetine HCl	Prozac
fluoxetine HCl	Prozac Weekly
fluoxetine HCl	Rapiflux
fluoxetine HCl	Sarafem
fluoxetine HCl	Selfemra
fluoxetine HCl	fluoxetine
fluoxetine HCl/dietary supplement no.17	Gaboxetine
fluoxetine HCl/dietary supplement no.8	Sentroxetine
fluvoxamine maleate	Luvox CR
fluvoxamine maleate	fluvoxamine
imipramine HCl	Tofranil
imipramine HCl	imipramine HCl

Appendix E. List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request

Non-Proprietary Name	Proprietary Name
imipramine pamoate	Tofranil-PM
imipramine pamoate	imipramine pamoate
isocarboxazid	Marplan
levomilnacipran HCl	Fetzima
lurasidone HCl	Latuda
maprotiline HCl	maprotiline
mirtazapine	Remeron
mirtazapine	Remeron SolTab
mirtazapine	mirtazapine
naltrexone HCl/bupropion HCl	Contrave
nefazodone HCl	Serzone
nefazodone HCl	nefazodone
nortriptyline HCl	Pamelor
nortriptyline HCl	nortriptyline
olanzapine/fluoxetine HCl	Symbyax
olanzapine/fluoxetine HCl	olanzapine-fluoxetine
paroxetine HCl	Paxil
paroxetine HCl	Paxil CR
paroxetine HCl	paroxetine HCl
paroxetine mesylate	Brisdelle
paroxetine mesylate	Pexeva
paroxetine mesylate	paroxetine mesylate(menop.sym)
perphenazine/amitriptyline HCl	Duo-Vil 2-10
perphenazine/amitriptyline HCl	Duo-Vil 2-25
perphenazine/amitriptyline HCl	perphenazine-amitriptyline
protriptyline HCl	Vivactil
protriptyline HCl	protriptyline
quazepam	Doral
quazepam	quazepam
selegiline	Emsam
selegiline HCl	Eldepryl
selegiline HCl	Zelapar
selegiline HCl	selegiline HCl
sertraline HCl	Zoloft
sertraline HCl	sertraline
tranylcypromine sulfate	Parnate
tranylcypromine sulfate	tranylcypromine
trazodone HCl	Desyrel
trazodone HCl	Oleptro ER
trazodone HCl	trazodone
trazodone HCl/dietary supplement no.8	Trazamine
trimipramine maleate	Surmontil
trimipramine maleate	trimipramine

Appendix E. List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request

Non-Proprietary Name	Proprietary Name
venlafaxine HCl	Effexor
venlafaxine HCl	Effexor XR
venlafaxine HCl	venlafaxine
venlafaxine besylate	venlafaxine besylate
vilazodone HCl	Viibryd
vortioxetine hydrobromide	Brintellix
vortioxetine hydrobromide	Trintellix
Psychiatry: Antipsychotics	
aripiprazole	Abilify
aripiprazole	Abilify Discmelt
aripiprazole	Abilify Maintena
aripiprazole	Abilify MyCite
aripiprazole	Abilify MyCite Maintenance Kit
aripiprazole	Abilify MyCite Starter Kit
aripiprazole	aripiprazole
aripiprazole lauroxil	Aristada
aripiprazole lauroxil, submicronized	Aristada Initio
asenapine	Secuado
asenapine maleate	Saphris
asenapine maleate	Saphris (black cherry)
asenapine maleate	asenapine maleate
brexpiprazole	Rexulti
clozapine	Clozaril
clozapine	FazaClo
clozapine	Versacloz
clozapine	clozapine
iloperidone	Fanapt
olanzapine	Zyprexa
olanzapine	Zyprexa Zydis
olanzapine	olanzapine
olanzapine pamoate	Zyprexa Relprevv
olanzapine/fluoxetine HCl	Symbyax
olanzapine/fluoxetine HCl	olanzapine-fluoxetine
olanzapine/samidorphan malate	Lybalvi
paliperidone	Invega
paliperidone	paliperidone
paliperidone palmitate	Invega Hafyera
paliperidone palmitate	Invega Sustenna
paliperidone palmitate	Invega Trinza
phenelzine sulfate	Nardil
phenelzine sulfate	phenelzine
quetiapine fumarate	Seroquel
quetiapine fumarate	Seroquel XR

Appendix E. List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request

Non-Proprietary Name	Proprietary Name
quetiapine fumarate	quetiapine
risperidone	Perseris
risperidone	Risperdal
risperidone	Risperdal M-TAB
risperidone	risperidone
risperidone microspheres	Risperdal Consta
ziprasidone HCl	Geodon
ziprasidone HCl	ziprasidone HCl
ziprasidone mesylate	Geodon
ziprasidone mesylate	ziprasidone mesylate

Psychiatry: Sedatives and Hypnotics

daridorexant HCl	Quviviq
esketamine HCl	Spravato
eszopiclone	Lunesta
eszopiclone	eszopiclone
lemborexant	Dayvigo
temazepam	Restoril
temazepam	temazepam
temazepam/dietary supplement no.8	Strazepam
triazolam	Halcion
triazolam	triazolam
zolpidem tartrate	Ambien
zolpidem tartrate	Ambien CR
zolpidem tartrate	Edluar
zolpidem tartrate	Intermezzo
zolpidem tartrate	Zolpimist
zolpidem tartrate	zolpidem

Psychiatry: Stimulants

amphetamine	Adzenys ER
amphetamine	Adzenys XR-ODT
amphetamine	Dyanavel XR
amphetamine	amphetamine
amphetamine sulfate	Evekeo
amphetamine sulfate	Evekeo ODT
amphetamine sulfate	amphetamine sulfate
armodafinil	Nuvigil
armodafinil	armodafinil
dexmethylphenidate HCl	Focalin
dexmethylphenidate HCl	Focalin XR
dexmethylphenidate HCl	dexmethylphenidate
dextroamphetamine sulf-saccharate/amphetamine sulf-aspartate	Adderall

Appendix E. List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request

Non-Proprietary Name	Proprietary Name
dextroamphetamine sulf-saccharate/amphetamine sulf-aspartate	Adderall XR
dextroamphetamine sulf-saccharate/amphetamine sulf-aspartate	Mydayis
dextroamphetamine sulf-saccharate/amphetamine sulf-aspartate	dextroamphetamine-amphetamine
dextroamphetamine sulfate	Dexedrine
dextroamphetamine sulfate	Dexedrine Spansule
dextroamphetamine sulfate	DextroStat
dextroamphetamine sulfate	Liquadd
dextroamphetamine sulfate	ProCentra
dextroamphetamine sulfate	Zenzedi
dextroamphetamine sulfate	dextroamphetamine sulfate
lisdexamfetamine dimesylate	Vyvanse
methamphetamine HCl	Desoxyn
methamphetamine HCl	methamphetamine
methylphenidate	Cotempla XR-ODT
methylphenidate	Daytrana
methylphenidate	methylphenidate
methylphenidate HCl	Adhansia XR
methylphenidate HCl	Aptensio XR
methylphenidate HCl	Concerta
methylphenidate HCl	Jornay PM
methylphenidate HCl	Metadate CD
methylphenidate HCl	Metadate ER
methylphenidate HCl	Methylin
methylphenidate HCl	Methylin ER
methylphenidate HCl	QuilliChew ER
methylphenidate HCl	Quillivant XR
methylphenidate HCl	Relexxii
methylphenidate HCl	Ritalin
methylphenidate HCl	Ritalin LA
methylphenidate HCl	Ritalin SR
methylphenidate HCl	methylphenidate HCl
modafinil	Provigil
modafinil	modafinil
pitolisant HCl	Wakix
serdexmethylphenidate chloride/dexmethylphenidate HCl	Azstarys
solriamfetol HCl	Sunosi
viloxazine HCl	Qelbree
Reproductive and Urologic Agents	
bremelanotide acetate	Vyleesi
doxylamine succinate/pyridoxine HCl (vitamin B6)	Bonjesta

Appendix E. List of Non-Proprietary and Proprietary Names of Medical Products Used to Define Exposures in this Request

Non-Proprietary Name	Proprietary Name
doxylamine succinate/pyridoxine HCl (vitamin B6)	Diclegis
doxylamine succinate/pyridoxine HCl (vitamin B6)	doxylamine-pyridoxine (vit B6)
drospirenone/ethinyl estradiol/levomefolate calcium	Beyaz
drospirenone/ethinyl estradiol/levomefolate calcium	Rajani
drospirenone/ethinyl estradiol/levomefolate calcium	Safyral
drospirenone/ethinyl estradiol/levomefolate calcium	Tydemy
drospirenone/ethinyl estradiol/levomefolate calcium	drospirenone-e.estradiol-lm.FA
elagolix sodium	Orilissa
elagolix sodium/estradiol/norethindrone acetate	Oriahnn
ethinyl estradiol/drospirenone	Gianvi (28)
ethinyl estradiol/drospirenone	Jasmiel (28)
ethinyl estradiol/drospirenone	Lo-Zumandimine (28)
ethinyl estradiol/drospirenone	Loryna (28)
ethinyl estradiol/drospirenone	Nikki (28)
ethinyl estradiol/drospirenone	Ocella
ethinyl estradiol/drospirenone	Syeda
ethinyl estradiol/drospirenone	Vestura (28)
ethinyl estradiol/drospirenone	YAZ (28)
ethinyl estradiol/drospirenone	Yasmin (28)
ethinyl estradiol/drospirenone	Zarah
ethinyl estradiol/drospirenone	Zumandimine (28)
ethinyl estradiol/drospirenone	drospirenone-ethinyl estradiol
etonogestrel/ethinyl estradiol	EluRyng
etonogestrel/ethinyl estradiol	NuvaRing
etonogestrel/ethinyl estradiol	etonogestrel-ethinyl estradiol
flibanserin	Addyi
hydroxyprogesterone caproate	Makena
hydroxyprogesterone caproate	hydroxyprogesterone cap(ppres)
hydroxyprogesterone caproate	hydroxyprogesterone caproate
hydroxyprogesterone caproate/PF	Makena
hydroxyprogesterone caproate/PF	Makena (PF)
hydroxyprogesterone caproate/PF	hydroxyprogest(PF)(preg presv)
levonorgestrel	Kyleena
levonorgestrel	Liletta
levonorgestrel	Mirena
levonorgestrel	Skyla
lutropin alfa	Luveris
mifepristone	Korlym
mifepristone	Mifeprex
mifepristone	mifepristone
relugolix	Orgovyx
relugolix/estradiol/norethindrone acetate	Myfembree
ulipristal acetate	Ella

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
Cardiovascular and Other Vascular Diseases			
00.40	Procedure on single vessel	Procedure	ICD-9-CM
00.41	Procedure on two vessels	Procedure	ICD-9-CM
00.42	Procedure on three vessels	Procedure	ICD-9-CM
00.43	Procedure on four or more vessels	Procedure	ICD-9-CM
00.44	Procedure on vessel bifurcation	Procedure	ICD-9-CM
00.45	Insertion of one vascular stent	Procedure	ICD-9-CM
00.46	Insertion of two vascular stents	Procedure	ICD-9-CM
00.47	Insertion of three vascular stents	Procedure	ICD-9-CM
00.48	Insertion of four or more vascular stents	Procedure	ICD-9-CM
00.66	Percutaneous transluminal coronary angioplasty [PTCA]	Procedure	ICD-9-CM
0210083	Bypass Coronary Artery, One Artery from Coronary Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0210088	Bypass Coronary Artery, One Artery from Right Internal Mammary with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0210089	Bypass Coronary Artery, One Artery from Left Internal Mammary with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021008C	Bypass Coronary Artery, One Artery from Thoracic Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021008F	Bypass Coronary Artery, One Artery from Abdominal Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021008W	Bypass Coronary Artery, One Artery from Aorta with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0210093	Bypass Coronary Artery, One Artery from Coronary Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
0210098	Bypass Coronary Artery, One Artery from Right Internal Mammary with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
0210099	Bypass Coronary Artery, One Artery from Left Internal Mammary with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021009C	Bypass Coronary Artery, One Artery from Thoracic Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021009F	Bypass Coronary Artery, One Artery from Abdominal Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021009W	Bypass Coronary Artery, One Artery from Aorta with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
02100A3	Bypass Coronary Artery, One Artery from Coronary Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02100A8	Bypass Coronary Artery, One Artery from Right Internal Mammary with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02100A9	Bypass Coronary Artery, One Artery from Left Internal Mammary with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02100AC	Bypass Coronary Artery, One Artery from Thoracic Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02100AF	Bypass Coronary Artery, One Artery from Abdominal Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02100AW	Bypass Coronary Artery, One Artery from Aorta with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02100J3	Bypass Coronary Artery, One Artery from Coronary Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02100J8	Bypass Coronary Artery, One Artery from Right Internal Mammary with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02100J9	Bypass Coronary Artery, One Artery from Left Internal Mammary with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02100JC	Bypass Coronary Artery, One Artery from Thoracic Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02100JF	Bypass Coronary Artery, One Artery from Abdominal Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02100JW	Bypass Coronary Artery, One Artery from Aorta with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02100K3	Bypass Coronary Artery, One Artery from Coronary Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02100K8	Bypass Coronary Artery, One Artery from Right Internal Mammary with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02100K9	Bypass Coronary Artery, One Artery from Left Internal Mammary with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02100KC	Bypass Coronary Artery, One Artery from Thoracic Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02100KF	Bypass Coronary Artery, One Artery from Abdominal Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02100KW	Bypass Coronary Artery, One Artery from Aorta with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02100Z3	Bypass Coronary Artery, One Artery from Coronary Artery, Open Approach	Procedure	ICD-10-PCS
02100Z8	Bypass Coronary Artery, One Artery from Right Internal Mammary, Open Approach	Procedure	ICD-10-PCS
02100Z9	Bypass Coronary Artery, One Artery from Left Internal Mammary, Open Approach	Procedure	ICD-10-PCS
02100ZC	Bypass Coronary Artery, One Artery from Thoracic Artery, Open Approach	Procedure	ICD-10-PCS
02100ZF	Bypass Coronary Artery, One Artery from Abdominal Artery, Open Approach	Procedure	ICD-10-PCS
0210344	Bypass Coronary Artery, One Artery from Coronary Vein with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02103D4	Bypass Coronary Artery, One Artery from Coronary Vein with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
0210444	Bypass Coronary Artery, One Artery from Coronary Vein with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0210483	Bypass Coronary Artery, One Artery from Coronary Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0210488	Bypass Coronary Artery, One Artery from Right Internal Mammary with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0210489	Bypass Coronary Artery, One Artery from Left Internal Mammary with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021048C	Bypass Coronary Artery, One Artery from Thoracic Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021048F	Bypass Coronary Artery, One Artery from Abdominal Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021048W	Bypass Coronary Artery, One Artery from Aorta with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0210493	Bypass Coronary Artery, One Artery from Coronary Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0210498	Bypass Coronary Artery, One Artery from Right Internal Mammary with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0210499	Bypass Coronary Artery, One Artery from Left Internal Mammary with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021049C	Bypass Coronary Artery, One Artery from Thoracic Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021049F	Bypass Coronary Artery, One Artery from Abdominal Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021049W	Bypass Coronary Artery, One Artery from Aorta with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104A3	Bypass Coronary Artery, One Artery from Coronary Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104A8	Bypass Coronary Artery, One Artery from Right Internal Mammary with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104A9	Bypass Coronary Artery, One Artery from Left Internal Mammary with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104AC	Bypass Coronary Artery, One Artery from Thoracic Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104AF	Bypass Coronary Artery, One Artery from Abdominal Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104AW	Bypass Coronary Artery, One Artery from Aorta with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104D4	Bypass Coronary Artery, One Artery from Coronary Vein with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104J3	Bypass Coronary Artery, One Artery from Coronary Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104J8	Bypass Coronary Artery, One Artery from Right Internal Mammary with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02104J9	Bypass Coronary Artery, One Artery from Left Internal Mammary with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104JC	Bypass Coronary Artery, One Artery from Thoracic Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104JF	Bypass Coronary Artery, One Artery from Abdominal Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104JW	Bypass Coronary Artery, One Artery from Aorta with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104K3	Bypass Coronary Artery, One Artery from Coronary Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104K8	Bypass Coronary Artery, One Artery from Right Internal Mammary with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104K9	Bypass Coronary Artery, One Artery from Left Internal Mammary with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104KC	Bypass Coronary Artery, One Artery from Thoracic Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104KF	Bypass Coronary Artery, One Artery from Abdominal Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104KW	Bypass Coronary Artery, One Artery from Aorta with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104Z3	Bypass Coronary Artery, One Artery from Coronary Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104Z8	Bypass Coronary Artery, One Artery from Right Internal Mammary, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104Z9	Bypass Coronary Artery, One Artery from Left Internal Mammary, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104ZC	Bypass Coronary Artery, One Artery from Thoracic Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104ZF	Bypass Coronary Artery, One Artery from Abdominal Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0211083	Bypass Coronary Artery, Two Arteries from Coronary Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0211088	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0211089	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021108C	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021108F	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021108W	Bypass Coronary Artery, Two Arteries from Aorta with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0211093	Bypass Coronary Artery, Two Arteries from Coronary Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
0211098	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
0211099	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021109C	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021109F	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021109W	Bypass Coronary Artery, Two Arteries from Aorta with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
02110A3	Bypass Coronary Artery, Two Arteries from Coronary Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02110A8	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02110A9	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02110AC	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02110AF	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02110AW	Bypass Coronary Artery, Two Arteries from Aorta with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02110J3	Bypass Coronary Artery, Two Arteries from Coronary Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02110J8	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02110J9	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02110JC	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02110JF	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02110JW	Bypass Coronary Artery, Two Arteries from Aorta with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02110K3	Bypass Coronary Artery, Two Arteries from Coronary Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02110K8	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02110K9	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02110KC	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02110KF	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02110KW	Bypass Coronary Artery, Two Arteries from Aorta with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02110Z3	Bypass Coronary Artery, Two Arteries from Coronary Artery, Open Approach	Procedure	ICD-10-PCS
02110Z8	Bypass Coronary Artery, Two Arteries from Right Internal Mammary, Open Approach	Procedure	ICD-10-PCS
02110Z9	Bypass Coronary Artery, Two Arteries from Left Internal Mammary, Open Approach	Procedure	ICD-10-PCS
02110ZC	Bypass Coronary Artery, Two Arteries from Thoracic Artery, Open Approach	Procedure	ICD-10-PCS
02110ZF	Bypass Coronary Artery, Two Arteries from Abdominal Artery, Open Approach	Procedure	ICD-10-PCS
0211344	Bypass Coronary Artery, Two Arteries from Coronary Vein with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02113D4	Bypass Coronary Artery, Two Arteries from Coronary Vein with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
0211444	Bypass Coronary Artery, Two Arteries from Coronary Vein with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0211483	Bypass Coronary Artery, Two Arteries from Coronary Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0211488	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0211489	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021148C	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021148F	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021148W	Bypass Coronary Artery, Two Arteries from Aorta with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0211493	Bypass Coronary Artery, Two Arteries from Coronary Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0211498	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0211499	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021149C	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021149F	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021149W	Bypass Coronary Artery, Two Arteries from Aorta with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02114A3	Bypass Coronary Artery, Two Arteries from Coronary Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114A8	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114A9	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114AC	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114AF	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114AW	Bypass Coronary Artery, Two Arteries from Aorta with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114D4	Bypass Coronary Artery, Two Arteries from Coronary Vein with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114J3	Bypass Coronary Artery, Two Arteries from Coronary Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114J8	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114J9	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114JC	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114JF	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114JW	Bypass Coronary Artery, Two Arteries from Aorta with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114K3	Bypass Coronary Artery, Two Arteries from Coronary Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114K8	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114K9	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114KC	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114KF	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114KW	Bypass Coronary Artery, Two Arteries from Aorta with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114Z3	Bypass Coronary Artery, Two Arteries from Coronary Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114Z8	Bypass Coronary Artery, Two Arteries from Right Internal Mammary, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02114Z9	Bypass Coronary Artery, Two Arteries from Left Internal Mammary, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114ZC	Bypass Coronary Artery, Two Arteries from Thoracic Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114ZF	Bypass Coronary Artery, Two Arteries from Abdominal Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0212083	Bypass Coronary Artery, Three Arteries from Coronary Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0212088	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0212089	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021208C	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021208F	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021208W	Bypass Coronary Artery, Three Arteries from Aorta with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0212093	Bypass Coronary Artery, Three Arteries from Coronary Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
0212098	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
0212099	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021209C	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021209F	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021209W	Bypass Coronary Artery, Three Arteries from Aorta with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
02120A3	Bypass Coronary Artery, Three Arteries from Coronary Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02120A8	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02120A9	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02120AC	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02120AF	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02120AW	Bypass Coronary Artery, Three Arteries from Aorta with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02120J3	Bypass Coronary Artery, Three Arteries from Coronary Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02120J8	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02120J9	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02120JC	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02120JF	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02120JW	Bypass Coronary Artery, Three Arteries from Aorta with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02120K3	Bypass Coronary Artery, Three Arteries from Coronary Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02120K8	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02120K9	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02120KC	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02120KF	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02120KW	Bypass Coronary Artery, Three Arteries from Aorta with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02120Z3	Bypass Coronary Artery, Three Arteries from Coronary Artery, Open Approach	Procedure	ICD-10-PCS
02120Z8	Bypass Coronary Artery, Three Arteries from Right Internal Mammary, Open Approach	Procedure	ICD-10-PCS
02120Z9	Bypass Coronary Artery, Three Arteries from Left Internal Mammary, Open Approach	Procedure	ICD-10-PCS
02120ZC	Bypass Coronary Artery, Three Arteries from Thoracic Artery, Open Approach	Procedure	ICD-10-PCS
02120ZF	Bypass Coronary Artery, Three Arteries from Abdominal Artery, Open Approach	Procedure	ICD-10-PCS
0212344	Bypass Coronary Artery, Three Arteries from Coronary Vein with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02123D4	Bypass Coronary Artery, Three Arteries from Coronary Vein with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
0212444	Bypass Coronary Artery, Three Arteries from Coronary Vein with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0212483	Bypass Coronary Artery, Three Arteries from Coronary Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0212488	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0212489	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
021248C	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021248F	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021248W	Bypass Coronary Artery, Three Arteries from Aorta with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0212493	Bypass Coronary Artery, Three Arteries from Coronary Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0212498	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0212499	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021249C	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021249F	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021249W	Bypass Coronary Artery, Three Arteries from Aorta with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124A3	Bypass Coronary Artery, Three Arteries from Coronary Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124A8	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124A9	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124AC	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124AF	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124AW	Bypass Coronary Artery, Three Arteries from Aorta with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124D4	Bypass Coronary Artery, Three Arteries from Coronary Vein with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124J3	Bypass Coronary Artery, Three Arteries from Coronary Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124J8	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124J9	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124JC	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124JF	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02124JW	Bypass Coronary Artery, Three Arteries from Aorta with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124K3	Bypass Coronary Artery, Three Arteries from Coronary Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124K8	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124K9	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124KC	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124KF	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124KW	Bypass Coronary Artery, Three Arteries from Aorta with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124Z3	Bypass Coronary Artery, Three Arteries from Coronary Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124Z8	Bypass Coronary Artery, Three Arteries from Right Internal Mammary, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124Z9	Bypass Coronary Artery, Three Arteries from Left Internal Mammary, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124ZC	Bypass Coronary Artery, Three Arteries from Thoracic Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124ZF	Bypass Coronary Artery, Three Arteries from Abdominal Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0213083	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0213088	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0213089	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021308C	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021308F	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021308W	Bypass Coronary Artery, Four or More Arteries from Aorta with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0213093	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
0213098	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
0213099	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
021309C	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021309F	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021309W	Bypass Coronary Artery, Four or More Arteries from Aorta with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
02130A3	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02130A8	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02130A9	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02130AC	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02130AF	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02130AW	Bypass Coronary Artery, Four or More Arteries from Aorta with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02130J3	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02130J8	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02130J9	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02130JC	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02130JF	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02130JW	Bypass Coronary Artery, Four or More Arteries from Aorta with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02130K3	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02130K8	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02130K9	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02130KC	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02130KF	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02130KW	Bypass Coronary Artery, Four or More Arteries from Aorta with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02130Z3	Bypass Coronary Artery, Four or More Arteries from Coronary Artery, Open Approach	Procedure	ICD-10-PCS
02130Z8	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary, Open Approach	Procedure	ICD-10-PCS
02130Z9	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary, Open Approach	Procedure	ICD-10-PCS
02130ZC	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery, Open Approach	Procedure	ICD-10-PCS
02130ZF	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery, Open Approach	Procedure	ICD-10-PCS
0213344	Bypass Coronary Artery, Four or More Arteries from Coronary Vein with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02133D4	Bypass Coronary Artery, Four or More Arteries from Coronary Vein with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
0213444	Bypass Coronary Artery, Four or More Arteries from Coronary Vein with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0213483	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0213488	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0213489	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021348C	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021348F	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021348W	Bypass Coronary Artery, Four or More Arteries from Aorta with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0213493	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0213498	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0213499	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021349C	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021349F	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021349W	Bypass Coronary Artery, Four or More Arteries from Aorta with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134A3	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134A8	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02134A9	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134AC	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134AF	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134AW	Bypass Coronary Artery, Four or More Arteries from Aorta with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134D4	Bypass Coronary Artery, Four or More Arteries from Coronary Vein with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134J3	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134J8	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134J9	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134JC	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134JF	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134JW	Bypass Coronary Artery, Four or More Arteries from Aorta with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134K3	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134K8	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134K9	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134KC	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134KF	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134KW	Bypass Coronary Artery, Four or More Arteries from Aorta with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134Z3	Bypass Coronary Artery, Four or More Arteries from Coronary Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134Z8	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134Z9	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134ZC	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02134ZF	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0270046	Dilation of Coronary Artery, One Artery, Bifurcation, with Drug-eluting Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
027004Z	Dilation of Coronary Artery, One Artery with Drug-eluting Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
0270056	Dilation of Coronary Artery, One Artery, Bifurcation, with Two Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027005Z	Dilation of Coronary Artery, One Artery with Two Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
0270066	Dilation of Coronary Artery, One Artery, Bifurcation, with Three Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027006Z	Dilation of Coronary Artery, One Artery with Three Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
0270076	Dilation of Coronary Artery, One Artery, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027007Z	Dilation of Coronary Artery, One Artery with Four or More Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02700D6	Dilation of Coronary Artery, One Artery, Bifurcation, with Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02700DZ	Dilation of Coronary Artery, One Artery with Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02700E6	Dilation of Coronary Artery, One Artery, Bifurcation, with Two Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02700EZ	Dilation of Coronary Artery, One Artery with Two Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02700F6	Dilation of Coronary Artery, One Artery, Bifurcation, with Three Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02700FZ	Dilation of Coronary Artery, One Artery with Three Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02700G6	Dilation of Coronary Artery, One Artery, Bifurcation, with Four or More Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02700GZ	Dilation of Coronary Artery, One Artery with Four or More Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02700T6	Dilation of Coronary Artery, One Artery, Bifurcation, with Radioactive Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02700TZ	Dilation of Coronary Artery, One Artery with Radioactive Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02700Z6	Dilation of Coronary Artery, One Artery, Bifurcation, Open Approach	Procedure	ICD-10-PCS
02700ZZ	Dilation of Coronary Artery, One Artery, Open Approach	Procedure	ICD-10-PCS
0270346	Dilation of Coronary Artery, One Artery, Bifurcation, with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
027034Z	Dilation of Coronary Artery, One Artery with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
0270356	Dilation of Coronary Artery, One Artery, Bifurcation, with Two Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027035Z	Dilation of Coronary Artery, One Artery with Two Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
0270366	Dilation of Coronary Artery, One Artery, Bifurcation, with Three Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027036Z	Dilation of Coronary Artery, One Artery with Three Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
0270376	Dilation of Coronary Artery, One Artery, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027037Z	Dilation of Coronary Artery, One Artery with Four or More Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02703D6	Dilation of Coronary Artery, One Artery, Bifurcation, with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02703DZ	Dilation of Coronary Artery, One Artery with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02703E6	Dilation of Coronary Artery, One Artery, Bifurcation, with Two Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02703EZ	Dilation of Coronary Artery, One Artery with Two Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02703F6	Dilation of Coronary Artery, One Artery, Bifurcation, with Three Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02703FZ	Dilation of Coronary Artery, One Artery with Three Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02703G6	Dilation of Coronary Artery, One Artery, Bifurcation, with Four or More Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02703GZ	Dilation of Coronary Artery, One Artery with Four or More Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02703T6	Dilation of Coronary Artery, One Artery, Bifurcation, with Radioactive Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02703TZ	Dilation of Coronary Artery, One Artery with Radioactive Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02703Z6	Dilation of Coronary Artery, One Artery, Bifurcation, Percutaneous Approach	Procedure	ICD-10-PCS
02703ZZ	Dilation of Coronary Artery, One Artery, Percutaneous Approach	Procedure	ICD-10-PCS
0270446	Dilation of Coronary Artery, One Artery, Bifurcation, with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027044Z	Dilation of Coronary Artery, One Artery with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0270456	Dilation of Coronary Artery, One Artery, Bifurcation, with Two Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
027045Z	Dilation of Coronary Artery, One Artery with Two Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0270466	Dilation of Coronary Artery, One Artery, Bifurcation, with Three Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027046Z	Dilation of Coronary Artery, One Artery with Three Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0270476	Dilation of Coronary Artery, One Artery, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027047Z	Dilation of Coronary Artery, One Artery with Four or More Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704D6	Dilation of Coronary Artery, One Artery, Bifurcation, with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704DZ	Dilation of Coronary Artery, One Artery with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704E6	Dilation of Coronary Artery, One Artery, Bifurcation, with Two Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704EZ	Dilation of Coronary Artery, One Artery with Two Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704F6	Dilation of Coronary Artery, One Artery, Bifurcation, with Three Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704FZ	Dilation of Coronary Artery, One Artery with Three Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704G6	Dilation of Coronary Artery, One Artery, Bifurcation, with Four or More Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704GZ	Dilation of Coronary Artery, One Artery with Four or More Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704T6	Dilation of Coronary Artery, One Artery, Bifurcation, with Radioactive Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704TZ	Dilation of Coronary Artery, One Artery with Radioactive Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704Z6	Dilation of Coronary Artery, One Artery, Bifurcation, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704ZZ	Dilation of Coronary Artery, One Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0271046	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
027104Z	Dilation of Coronary Artery, Two Arteries with Drug-eluting Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
0271056	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027105Z	Dilation of Coronary Artery, Two Arteries with Two Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0271066	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027106Z	Dilation of Coronary Artery, Two Arteries with Three Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
0271076	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027107Z	Dilation of Coronary Artery, Two Arteries with Four or More Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02710D6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02710DZ	Dilation of Coronary Artery, Two Arteries with Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02710E6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Two Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02710EZ	Dilation of Coronary Artery, Two Arteries with Two Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02710F6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Three Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02710FZ	Dilation of Coronary Artery, Two Arteries with Three Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02710G6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Four or More Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02710GZ	Dilation of Coronary Artery, Two Arteries with Four or More Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02710T6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Radioactive Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02710TZ	Dilation of Coronary Artery, Two Arteries with Radioactive Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02710Z6	Dilation of Coronary Artery, Two Arteries, Bifurcation, Open Approach	Procedure	ICD-10-PCS
02710ZZ	Dilation of Coronary Artery, Two Arteries, Open Approach	Procedure	ICD-10-PCS
0271346	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
027134Z	Dilation of Coronary Artery, Two Arteries with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
0271356	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027135Z	Dilation of Coronary Artery, Two Arteries with Two Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
0271366	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027136Z	Dilation of Coronary Artery, Two Arteries with Three Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0271376	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027137Z	Dilation of Coronary Artery, Two Arteries with Four or More Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02713D6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02713DZ	Dilation of Coronary Artery, Two Arteries with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02713E6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Two Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02713EZ	Dilation of Coronary Artery, Two Arteries with Two Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02713F6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Three Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02713FZ	Dilation of Coronary Artery, Two Arteries with Three Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02713G6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Four or More Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02713GZ	Dilation of Coronary Artery, Two Arteries with Four or More Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02713T6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Radioactive Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02713TZ	Dilation of Coronary Artery, Two Arteries with Radioactive Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02713Z6	Dilation of Coronary Artery, Two Arteries, Bifurcation, Percutaneous Approach	Procedure	ICD-10-PCS
02713ZZ	Dilation of Coronary Artery, Two Arteries, Percutaneous Approach	Procedure	ICD-10-PCS
0271446	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027144Z	Dilation of Coronary Artery, Two Arteries with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0271456	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027145Z	Dilation of Coronary Artery, Two Arteries with Two Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0271466	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027146Z	Dilation of Coronary Artery, Two Arteries with Three Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0271476	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027147Z	Dilation of Coronary Artery, Two Arteries with Four or More Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02714D6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714DZ	Dilation of Coronary Artery, Two Arteries with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714E6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Two Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714EZ	Dilation of Coronary Artery, Two Arteries with Two Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714F6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Three Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714FZ	Dilation of Coronary Artery, Two Arteries with Three Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714G6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Four or More Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714GZ	Dilation of Coronary Artery, Two Arteries with Four or More Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714T6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Radioactive Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714TZ	Dilation of Coronary Artery, Two Arteries with Radioactive Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714Z6	Dilation of Coronary Artery, Two Arteries, Bifurcation, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714ZZ	Dilation of Coronary Artery, Two Arteries, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0272046	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
027204Z	Dilation of Coronary Artery, Three Arteries with Drug-eluting Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
0272056	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027205Z	Dilation of Coronary Artery, Three Arteries with Two Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
0272066	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027206Z	Dilation of Coronary Artery, Three Arteries with Three Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
0272076	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027207Z	Dilation of Coronary Artery, Three Arteries with Four or More Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02720D6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02720DZ	Dilation of Coronary Artery, Three Arteries with Intraluminal Device, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02720E6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Two Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02720EZ	Dilation of Coronary Artery, Three Arteries with Two Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02720F6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Three Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02720FZ	Dilation of Coronary Artery, Three Arteries with Three Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02720G6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Four or More Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02720GZ	Dilation of Coronary Artery, Three Arteries with Four or More Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02720T6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Radioactive Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02720TZ	Dilation of Coronary Artery, Three Arteries with Radioactive Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02720Z6	Dilation of Coronary Artery, Three Arteries, Bifurcation, Open Approach	Procedure	ICD-10-PCS
02720ZZ	Dilation of Coronary Artery, Three Arteries, Open Approach	Procedure	ICD-10-PCS
0272346	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
027234Z	Dilation of Coronary Artery, Three Arteries with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
0272356	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027235Z	Dilation of Coronary Artery, Three Arteries with Two Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
0272366	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027236Z	Dilation of Coronary Artery, Three Arteries with Three Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
0272376	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027237Z	Dilation of Coronary Artery, Three Arteries with Four or More Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02723D6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02723DZ	Dilation of Coronary Artery, Three Arteries with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02723E6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Two Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02723EZ	Dilation of Coronary Artery, Three Arteries with Two Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02723F6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Three Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02723FZ	Dilation of Coronary Artery, Three Arteries with Three Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02723G6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Four or More Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02723GZ	Dilation of Coronary Artery, Three Arteries with Four or More Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02723T6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Radioactive Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02723TZ	Dilation of Coronary Artery, Three Arteries with Radioactive Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02723Z6	Dilation of Coronary Artery, Three Arteries, Bifurcation, Percutaneous Approach	Procedure	ICD-10-PCS
02723ZZ	Dilation of Coronary Artery, Three Arteries, Percutaneous Approach	Procedure	ICD-10-PCS
0272446	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027244Z	Dilation of Coronary Artery, Three Arteries with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0272456	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027245Z	Dilation of Coronary Artery, Three Arteries with Two Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0272466	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027246Z	Dilation of Coronary Artery, Three Arteries with Three Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0272476	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027247Z	Dilation of Coronary Artery, Three Arteries with Four or More Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724D6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724DZ	Dilation of Coronary Artery, Three Arteries with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724E6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Two Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724EZ	Dilation of Coronary Artery, Three Arteries with Two Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724F6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Three Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724FZ	Dilation of Coronary Artery, Three Arteries with Three Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02724G6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Four or More Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724GZ	Dilation of Coronary Artery, Three Arteries with Four or More Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724T6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Radioactive Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724TZ	Dilation of Coronary Artery, Three Arteries with Radioactive Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724Z6	Dilation of Coronary Artery, Three Arteries, Bifurcation, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724ZZ	Dilation of Coronary Artery, Three Arteries, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0273046	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
027304Z	Dilation of Coronary Artery, Four or More Arteries with Drug-eluting Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
0273056	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027305Z	Dilation of Coronary Artery, Four or More Arteries with Two Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
0273066	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027306Z	Dilation of Coronary Artery, Four or More Arteries with Three Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
0273076	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027307Z	Dilation of Coronary Artery, Four or More Arteries with Four or More Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02730D6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02730DZ	Dilation of Coronary Artery, Four or More Arteries with Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02730E6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Two Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02730EZ	Dilation of Coronary Artery, Four or More Arteries with Two Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02730F6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Three Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02730FZ	Dilation of Coronary Artery, Four or More Arteries with Three Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02730G6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Four or More Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02730GZ	Dilation of Coronary Artery, Four or More Arteries with Four or More Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02730T6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Radioactive Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02730TZ	Dilation of Coronary Artery, Four or More Arteries with Radioactive Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02730Z6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, Open Approach	Procedure	ICD-10-PCS
02730ZZ	Dilation of Coronary Artery, Four or More Arteries, Open Approach	Procedure	ICD-10-PCS
0273346	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
027334Z	Dilation of Coronary Artery, Four or More Arteries with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
0273356	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027335Z	Dilation of Coronary Artery, Four or More Arteries with Two Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
0273366	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027336Z	Dilation of Coronary Artery, Four or More Arteries with Three Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
0273376	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027337Z	Dilation of Coronary Artery, Four or More Arteries with Four or More Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02733D6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02733DZ	Dilation of Coronary Artery, Four or More Arteries with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02733E6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Two Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02733EZ	Dilation of Coronary Artery, Four or More Arteries with Two Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02733F6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Three Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02733FZ	Dilation of Coronary Artery, Four or More Arteries with Three Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02733G6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Four or More Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02733GZ	Dilation of Coronary Artery, Four or More Arteries with Four or More Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02733T6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Radioactive Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02733TZ	Dilation of Coronary Artery, Four or More Arteries with Radioactive Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02733Z6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, Percutaneous Approach	Procedure	ICD-10-PCS
02733ZZ	Dilation of Coronary Artery, Four or More Arteries, Percutaneous Approach	Procedure	ICD-10-PCS
0273446	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027344Z	Dilation of Coronary Artery, Four or More Arteries with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0273456	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027345Z	Dilation of Coronary Artery, Four or More Arteries with Two Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0273466	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027346Z	Dilation of Coronary Artery, Four or More Arteries with Three Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0273476	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027347Z	Dilation of Coronary Artery, Four or More Arteries with Four or More Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734D6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734DZ	Dilation of Coronary Artery, Four or More Arteries with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734E6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Two Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734EZ	Dilation of Coronary Artery, Four or More Arteries with Two Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734F6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Three Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734FZ	Dilation of Coronary Artery, Four or More Arteries with Three Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734G6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Four or More Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734GZ	Dilation of Coronary Artery, Four or More Arteries with Four or More Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734T6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Radioactive Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734TZ	Dilation of Coronary Artery, Four or More Arteries with Radioactive Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02734Z6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734ZZ	Dilation of Coronary Artery, Four or More Arteries, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02C00Z6	Extirpation of Matter from Coronary Artery, One Artery, Bifurcation, Open Approach	Procedure	ICD-10-PCS
02C00ZZ	Extirpation of Matter from Coronary Artery, One Artery, Open Approach	Procedure	ICD-10-PCS
02C03Z6	Extirpation of Matter from Coronary Artery, One Artery, Bifurcation, Percutaneous Approach	Procedure	ICD-10-PCS
02C03ZZ	Extirpation of Matter from Coronary Artery, One Artery, Percutaneous Approach	Procedure	ICD-10-PCS
02C04Z6	Extirpation of Matter from Coronary Artery, One Artery, Bifurcation, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02C04ZZ	Extirpation of Matter from Coronary Artery, One Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02C10Z6	Extirpation of Matter from Coronary Artery, Two Arteries, Bifurcation, Open Approach	Procedure	ICD-10-PCS
02C10ZZ	Extirpation of Matter from Coronary Artery, Two Arteries, Open Approach	Procedure	ICD-10-PCS
02C13Z6	Extirpation of Matter from Coronary Artery, Two Arteries, Bifurcation, Percutaneous Approach	Procedure	ICD-10-PCS
02C13ZZ	Extirpation of Matter from Coronary Artery, Two Arteries, Percutaneous Approach	Procedure	ICD-10-PCS
02C14Z6	Extirpation of Matter from Coronary Artery, Two Arteries, Bifurcation, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02C14ZZ	Extirpation of Matter from Coronary Artery, Two Arteries, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02C20Z6	Extirpation of Matter from Coronary Artery, Three Arteries, Bifurcation, Open Approach	Procedure	ICD-10-PCS
02C20ZZ	Extirpation of Matter from Coronary Artery, Three Arteries, Open Approach	Procedure	ICD-10-PCS
02C23Z6	Extirpation of Matter from Coronary Artery, Three Arteries, Bifurcation, Percutaneous Approach	Procedure	ICD-10-PCS
02C23ZZ	Extirpation of Matter from Coronary Artery, Three Arteries, Percutaneous Approach	Procedure	ICD-10-PCS
02C24Z6	Extirpation of Matter from Coronary Artery, Three Arteries, Bifurcation, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02C24ZZ	Extirpation of Matter from Coronary Artery, Three Arteries, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02C30Z6	Extirpation of Matter from Coronary Artery, Four or More Arteries, Bifurcation, Open Approach	Procedure	ICD-10-PCS
02C30ZZ	Extirpation of Matter from Coronary Artery, Four or More Arteries, Open Approach	Procedure	ICD-10-PCS
02C33Z6	Extirpation of Matter from Coronary Artery, Four or More Arteries, Bifurcation, Percutaneous Approach	Procedure	ICD-10-PCS
02C33ZZ	Extirpation of Matter from Coronary Artery, Four or More Arteries, Percutaneous Approach	Procedure	ICD-10-PCS
02C34Z6	Extirpation of Matter from Coronary Artery, Four or More Arteries, Bifurcation, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02C34ZZ	Extirpation of Matter from Coronary Artery, Four or More Arteries, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02Q50ZZ	Repair Atrial Septum, Open Approach	Procedure	ICD-10-PCS
02QM0ZZ	Repair Ventricular Septum, Open Approach	Procedure	ICD-10-PCS
02U507Z	Supplement Atrial Septum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02U50JZ	Supplement Atrial Septum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02U53JZ	Supplement Atrial Septum with Synthetic Substitute, Percutaneous Approach	Procedure	ICD-10-PCS
02UM07Z	Supplement Ventricular Septum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02UM0JZ	Supplement Ventricular Septum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02UM3JZ	Supplement Ventricular Septum with Synthetic Substitute, Percutaneous Approach	Procedure	ICD-10-PCS
17.55	Transluminal coronary atherectomy	Procedure	ICD-9-CM
33647	Repair of atrial septal defect and ventricular septal defect, with direct or patch closure	Procedure	CPT-4
33720	Repair sinus of Valsalva aneurysm, with cardiopulmonary bypass	Procedure	CPT-4
33741	Transcatheter atrial septostomy (TAS) for congenital cardiac anomalies to create effective atrial flow, including all imaging guidance by the proceduralist, when performed, any method (eg, Rashkind, Sang-Park, balloon, cutting balloon, blade)	Procedure	CPT-4
33745	Transcatheter intracardiac shunt (TIS) creation by stent placement for congenital cardiac anomalies to establish effective intracardiac flow, including all imaging guidance by the proceduralist, when performed, left and right heart diagnostic cardiac cath	Procedure	CPT-4
33746	Transcatheter intracardiac shunt (TIS) creation by stent placement for congenital cardiac anomalies to establish effective intracardiac flow, including all imaging guidance by the proceduralist, when performed, left and right heart diagnostic cardiac cath	Procedure	CPT-4
33924	Ligation and takedown of a systemic-to-pulmonary artery shunt, performed in conjunction with a congenital heart procedure (List separately in addition to code for primary procedure)	Procedure	CPT-4
35.50	Repair of unspecified septal defect of heart with prosthesis	Procedure	ICD-9-CM
35.51	Repair of atrial septal defect with prosthesis, open technique	Procedure	ICD-9-CM
35.52	Repair of atrial septal defect with prosthesis, closed technique	Procedure	ICD-9-CM
35.53	Repair of ventricular septal defect with prosthesis, open technique	Procedure	ICD-9-CM
35.54	Repair of endocardial cushion defect with prosthesis	Procedure	ICD-9-CM
35.60	Repair of unspecified septal defect of heart with tissue graft	Procedure	ICD-9-CM
35.61	Repair of atrial septal defect with tissue graft	Procedure	ICD-9-CM
35.62	Repair of ventricular septal defect with tissue graft	Procedure	ICD-9-CM
35.70	Other and unspecified repair of unspecified septal defect of heart	Procedure	ICD-9-CM
35.71	Other and unspecified repair of atrial septal defect	Procedure	ICD-9-CM
35.72	Other and unspecified repair of ventricular septal defect	Procedure	ICD-9-CM
35.91	Interatrial transposition of venous return	Procedure	ICD-9-CM
35.98	Other operations on septa of heart	Procedure	ICD-9-CM
36.03	Open chest coronary artery angioplasty	Procedure	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
36.04	Intracoronary artery thrombolytic infusion	Procedure	ICD-9-CM
36.06	Insertion of non-drug-eluting coronary artery stent(s)	Procedure	ICD-9-CM
36.07	Insertion of drug-eluting coronary artery stent(s)	Procedure	ICD-9-CM
36.09	Other removal of coronary artery obstruction	Procedure	ICD-9-CM
36.10	Aortocoronary bypass for heart revascularization, not otherwise specified	Procedure	ICD-9-CM
36.11	(Aorto)coronary bypass of one coronary artery	Procedure	ICD-9-CM
36.12	(Aorto)coronary bypass of two coronary arteries	Procedure	ICD-9-CM
36.13	(Aorto)coronary bypass of three coronary arteries	Procedure	ICD-9-CM
36.14	(Aorto)coronary bypass of four or more coronary arteries	Procedure	ICD-9-CM
36.15	Single internal mammary-coronary artery bypass	Procedure	ICD-9-CM
36.16	Double internal mammary-coronary artery bypass	Procedure	ICD-9-CM
36.17	Abdominal-coronary artery bypass	Procedure	ICD-9-CM
36.19	Other bypass anastomosis for heart revascularization	Procedure	ICD-9-CM
36.39	Other heart revascularization	Procedure	ICD-9-CM
398.91	Rheumatic heart failure (congestive)	Diagnosis	ICD-9-CM
3E07017	Introduction of Other Thrombolytic into Coronary Artery, Open Approach	Procedure	ICD-10-PCS
3E070PZ	Introduction of Platelet Inhibitor into Coronary Artery, Open Approach	Procedure	ICD-10-PCS
3E07317	Introduction of Other Thrombolytic into Coronary Artery, Percutaneous Approach	Procedure	ICD-10-PCS
3E073PZ	Introduction of Platelet Inhibitor into Coronary Artery, Percutaneous Approach	Procedure	ICD-10-PCS
402.00	Malignant hypertensive heart disease without heart failure	Diagnosis	ICD-9-CM
402.01	Malignant hypertensive heart disease with heart failure	Diagnosis	ICD-9-CM
402.10	Benign hypertensive heart disease without heart failure	Diagnosis	ICD-9-CM
402.11	Benign hypertensive heart disease with heart failure	Diagnosis	ICD-9-CM
402.90	Unspecified hypertensive heart disease without heart failure	Diagnosis	ICD-9-CM
402.91	Hypertensive heart disease, unspecified, with heart failure	Diagnosis	ICD-9-CM
404.01	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.03	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.11	Hypertensive heart and chronic kidney disease, benign, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.13	Hypertensive heart and chronic kidney disease, benign, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.91	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.93	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
410.00	Acute myocardial infarction of anterolateral wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.01	Acute myocardial infarction of anterolateral wall, initial episode of care	Diagnosis	ICD-9-CM
410.02	Acute myocardial infarction of anterolateral wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.10	Acute myocardial infarction of other anterior wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.11	Acute myocardial infarction of other anterior wall, initial episode of care	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
410.12	Acute myocardial infarction of other anterior wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.20	Acute myocardial infarction of inferolateral wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.21	Acute myocardial infarction of inferolateral wall, initial episode of care	Diagnosis	ICD-9-CM
410.22	Acute myocardial infarction of inferolateral wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.30	Acute myocardial infarction of inferoposterior wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.31	Acute myocardial infarction of inferoposterior wall, initial episode of care	Diagnosis	ICD-9-CM
410.32	Acute myocardial infarction of inferoposterior wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.40	Acute myocardial infarction of other inferior wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.41	Acute myocardial infarction of other inferior wall, initial episode of care	Diagnosis	ICD-9-CM
410.42	Acute myocardial infarction of other inferior wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.50	Acute myocardial infarction of other lateral wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.51	Acute myocardial infarction of other lateral wall, initial episode of care	Diagnosis	ICD-9-CM
410.52	Acute myocardial infarction of other lateral wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.60	Acute myocardial infarction, true posterior wall infarction, episode of care unspecified	Diagnosis	ICD-9-CM
410.61	Acute myocardial infarction, true posterior wall infarction, initial episode of care	Diagnosis	ICD-9-CM
410.62	Acute myocardial infarction, true posterior wall infarction, subsequent episode of care	Diagnosis	ICD-9-CM
410.70	Acute myocardial infarction, subendocardial infarction, episode of care unspecified	Diagnosis	ICD-9-CM
410.71	Acute myocardial infarction, subendocardial infarction, initial episode of care	Diagnosis	ICD-9-CM
410.72	Acute myocardial infarction, subendocardial infarction, subsequent episode of care	Diagnosis	ICD-9-CM
410.80	Acute myocardial infarction of other specified sites, episode of care unspecified	Diagnosis	ICD-9-CM
410.81	Acute myocardial infarction of other specified sites, initial episode of care	Diagnosis	ICD-9-CM
410.82	Acute myocardial infarction of other specified sites, subsequent episode of care	Diagnosis	ICD-9-CM
410.90	Acute myocardial infarction, unspecified site, episode of care unspecified	Diagnosis	ICD-9-CM
410.91	Acute myocardial infarction, unspecified site, initial episode of care	Diagnosis	ICD-9-CM
410.92	Acute myocardial infarction, unspecified site, subsequent episode of care	Diagnosis	ICD-9-CM
411.0	Postmyocardial infarction syndrome	Diagnosis	ICD-9-CM
411.1	Intermediate coronary syndrome	Diagnosis	ICD-9-CM
411.81	Acute coronary occlusion without myocardial infarction	Diagnosis	ICD-9-CM
411.89	Other acute and subacute form of ischemic heart disease	Diagnosis	ICD-9-CM
412	Old myocardial infarction	Diagnosis	ICD-9-CM
413.0	Angina decubitus	Diagnosis	ICD-9-CM
413.1	Prinzmetal angina	Diagnosis	ICD-9-CM
413.9	Other and unspecified angina pectoris	Diagnosis	ICD-9-CM
414.00	Coronary atherosclerosis of unspecified type of vessel, native or graft	Diagnosis	ICD-9-CM
414.01	Coronary atherosclerosis of native coronary artery	Diagnosis	ICD-9-CM
414.02	Coronary atherosclerosis of autologous vein bypass graft	Diagnosis	ICD-9-CM
414.03	Coronary atherosclerosis of nonautologous biological bypass graft	Diagnosis	ICD-9-CM
414.04	Coronary atherosclerosis of artery bypass graft	Diagnosis	ICD-9-CM
414.05	Coronary atherosclerosis of unspecified type of bypass graft	Diagnosis	ICD-9-CM
414.06	Coronary atherosclerosis, of native coronary artery of transplanted heart	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
414.07	Coronary atherosclerosis, of bypass graft (artery) (vein) of transplanted heart	Diagnosis	ICD-9-CM
414.11	Aneurysm of coronary vessels	Diagnosis	ICD-9-CM
414.12	Dissection of coronary artery	Diagnosis	ICD-9-CM
414.2	Chronic total occlusion of coronary artery	Diagnosis	ICD-9-CM
414.3	Coronary atherosclerosis due to lipid rich plaque	Diagnosis	ICD-9-CM
414.4	Coronary atherosclerosis due to calcified coronary lesion	Diagnosis	ICD-9-CM
414.8	Other specified forms of chronic ischemic heart disease	Diagnosis	ICD-9-CM
414.9	Unspecified chronic ischemic heart disease	Diagnosis	ICD-9-CM
416.0	Primary pulmonary hypertension	Diagnosis	ICD-9-CM
416.1	Kyphoscoliotic heart disease	Diagnosis	ICD-9-CM
425.11	Hypertrophic obstructive cardiomyopathy	Diagnosis	ICD-9-CM
425.18	Other hypertrophic cardiomyopathy	Diagnosis	ICD-9-CM
425.2	Obscure cardiomyopathy of Africa	Diagnosis	ICD-9-CM
425.4	Other primary cardiomyopathies	Diagnosis	ICD-9-CM
425.5	Alcoholic cardiomyopathy	Diagnosis	ICD-9-CM
425.7	Nutritional and metabolic cardiomyopathy	Diagnosis	ICD-9-CM
425.8	Cardiomyopathy in other diseases classified elsewhere	Diagnosis	ICD-9-CM
425.9	Unspecified secondary cardiomyopathy	Diagnosis	ICD-9-CM
427.1	Paroxysmal ventricular tachycardia	Diagnosis	ICD-9-CM
427.41	Ventricular fibrillation	Diagnosis	ICD-9-CM
427.42	Ventricular flutter	Diagnosis	ICD-9-CM
427.5	Cardiac arrest	Diagnosis	ICD-9-CM
428.0	Congestive heart failure, unspecified	Diagnosis	ICD-9-CM
428.1	Left heart failure	Diagnosis	ICD-9-CM
428.20	Unspecified systolic heart failure	Diagnosis	ICD-9-CM
428.21	Acute systolic heart failure	Diagnosis	ICD-9-CM
428.22	Chronic systolic heart failure	Diagnosis	ICD-9-CM
428.23	Acute on chronic systolic heart failure	Diagnosis	ICD-9-CM
428.30	Unspecified diastolic heart failure	Diagnosis	ICD-9-CM
428.31	Acute diastolic heart failure	Diagnosis	ICD-9-CM
428.32	Chronic diastolic heart failure	Diagnosis	ICD-9-CM
428.33	Acute on chronic diastolic heart failure	Diagnosis	ICD-9-CM
428.40	Unspecified combined systolic and diastolic heart failure	Diagnosis	ICD-9-CM
428.41	Acute combined systolic and diastolic heart failure	Diagnosis	ICD-9-CM
428.42	Chronic combined systolic and diastolic heart failure	Diagnosis	ICD-9-CM
428.43	Acute on chronic combined systolic and diastolic heart failure	Diagnosis	ICD-9-CM
428.9	Unspecified heart failure	Diagnosis	ICD-9-CM
429.2	Unspecified cardiovascular disease	Diagnosis	ICD-9-CM
429.4	Functional disturbances following cardiac surgery	Diagnosis	ICD-9-CM
429.5	Rupture of chordae tendineae	Diagnosis	ICD-9-CM
429.6	Rupture of papillary muscle	Diagnosis	ICD-9-CM
429.71	Acquired cardiac septal defect	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
429.79	Other certain sequelae of myocardial infarction, not elsewhere classified	Diagnosis	ICD-9-CM
429.81	Other disorders of papillary muscle	Diagnosis	ICD-9-CM
429.82	Hyperkinetic heart disease	Diagnosis	ICD-9-CM
429.89	Other ill-defined heart disease	Diagnosis	ICD-9-CM
429.9	Unspecified heart disease	Diagnosis	ICD-9-CM
430	Subarachnoid hemorrhage	Diagnosis	ICD-9-CM
431	Intracerebral hemorrhage	Diagnosis	ICD-9-CM
432.0	Nontraumatic extradural hemorrhage	Diagnosis	ICD-9-CM
432.1	Subdural hemorrhage	Diagnosis	ICD-9-CM
432.9	Unspecified intracranial hemorrhage	Diagnosis	ICD-9-CM
433.00	Occlusion and stenosis of basilar artery without mention of cerebral infarction	Diagnosis	ICD-9-CM
433.01	Occlusion and stenosis of basilar artery with cerebral infarction	Diagnosis	ICD-9-CM
433.10	Occlusion and stenosis of carotid artery without mention of cerebral infarction	Diagnosis	ICD-9-CM
433.20	Occlusion and stenosis of vertebral artery without mention of cerebral infarction	Diagnosis	ICD-9-CM
433.30	Occlusion and stenosis of multiple and bilateral precerebral arteries without mention of cerebral infarction	Diagnosis	ICD-9-CM
433.80	Occlusion and stenosis of other specified precerebral artery without mention of cerebral infarction	Diagnosis	ICD-9-CM
433.90	Occlusion and stenosis of unspecified precerebral artery without mention of cerebral infarction	Diagnosis	ICD-9-CM
433.91	Occlusion and stenosis of unspecified precerebral artery with cerebral infarction	Diagnosis	ICD-9-CM
434.00	Cerebral thrombosis without mention of cerebral infarction	Diagnosis	ICD-9-CM
434.01	Cerebral thrombosis with cerebral infarction	Diagnosis	ICD-9-CM
434.10	Cerebral embolism without mention of cerebral infarction	Diagnosis	ICD-9-CM
434.11	Cerebral embolism with cerebral infarction	Diagnosis	ICD-9-CM
434.90	Unspecified cerebral artery occlusion without mention of cerebral infarction	Diagnosis	ICD-9-CM
434.91	Unspecified cerebral artery occlusion with cerebral infarction	Diagnosis	ICD-9-CM
436	Acute, but ill-defined, cerebrovascular disease	Diagnosis	ICD-9-CM
437.1	Other generalized ischemic cerebrovascular disease	Diagnosis	ICD-9-CM
437.8	Other ill-defined cerebrovascular disease	Diagnosis	ICD-9-CM
440.0	Atherosclerosis of aorta	Diagnosis	ICD-9-CM
440.1	Atherosclerosis of renal artery	Diagnosis	ICD-9-CM
440.20	Atherosclerosis of native arteries of the extremities, unspecified	Diagnosis	ICD-9-CM
440.21	Atherosclerosis of native arteries of the extremities with intermittent claudication	Diagnosis	ICD-9-CM
440.22	Atherosclerosis of native arteries of the extremities with rest pain	Diagnosis	ICD-9-CM
440.23	Atherosclerosis of native arteries of the extremities with ulceration	Diagnosis	ICD-9-CM
440.24	Atherosclerosis of native arteries of the extremities with gangrene	Diagnosis	ICD-9-CM
440.29	Other atherosclerosis of native arteries of the extremities	Diagnosis	ICD-9-CM
440.30	Atherosclerosis of unspecified bypass graft of extremities	Diagnosis	ICD-9-CM
440.31	Atherosclerosis of autologous vein bypass graft of extremities	Diagnosis	ICD-9-CM
440.32	Atherosclerosis of nonautologous biological bypass graft of extremities	Diagnosis	ICD-9-CM
440.4	Chronic total occlusion of artery of the extremities	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
440.8	Atherosclerosis of other specified arteries	Diagnosis	ICD-9-CM
440.9	Generalized and unspecified atherosclerosis	Diagnosis	ICD-9-CM
441.00	Dissecting aortic aneurysm (any part), unspecified site	Diagnosis	ICD-9-CM
441.01	Dissecting aortic aneurysm (any part), thoracic	Diagnosis	ICD-9-CM
441.02	Dissecting aortic aneurysm (any part), abdominal	Diagnosis	ICD-9-CM
441.03	Dissecting aortic aneurysm (any part), thoracoabdominal	Diagnosis	ICD-9-CM
441.1	Thoracic aneurysm, ruptured	Diagnosis	ICD-9-CM
441.2	Thoracic aneurysm without mention of rupture	Diagnosis	ICD-9-CM
441.3	Abdominal aneurysm, ruptured	Diagnosis	ICD-9-CM
441.4	Abdominal aneurysm without mention of rupture	Diagnosis	ICD-9-CM
441.5	Aortic aneurysm of unspecified site, ruptured	Diagnosis	ICD-9-CM
441.6	Thoracoabdominal aneurysm, ruptured	Diagnosis	ICD-9-CM
441.7	Thoracoabdominal aneurysm without mention of rupture	Diagnosis	ICD-9-CM
441.9	Aortic aneurysm of unspecified site without mention of rupture	Diagnosis	ICD-9-CM
442.0	Aneurysm of artery of upper extremity	Diagnosis	ICD-9-CM
442.1	Aneurysm of renal artery	Diagnosis	ICD-9-CM
442.2	Aneurysm of iliac artery	Diagnosis	ICD-9-CM
442.3	Aneurysm of artery of lower extremity	Diagnosis	ICD-9-CM
442.81	Aneurysm of artery of neck	Diagnosis	ICD-9-CM
442.82	Aneurysm of subclavian artery	Diagnosis	ICD-9-CM
442.83	Aneurysm of splenic artery	Diagnosis	ICD-9-CM
442.84	Aneurysm of other visceral artery	Diagnosis	ICD-9-CM
442.89	Aneurysm of other specified artery	Diagnosis	ICD-9-CM
442.9	Other aneurysm of unspecified site	Diagnosis	ICD-9-CM
443.1	Thromboangiitis obliterans (Buerger's disease)	Diagnosis	ICD-9-CM
443.21	Dissection of carotid artery	Diagnosis	ICD-9-CM
443.22	Dissection of iliac artery	Diagnosis	ICD-9-CM
443.23	Dissection of renal artery	Diagnosis	ICD-9-CM
443.24	Dissection of vertebral artery	Diagnosis	ICD-9-CM
443.29	Dissection of other artery	Diagnosis	ICD-9-CM
443.89	Other peripheral vascular disease	Diagnosis	ICD-9-CM
443.9	Unspecified peripheral vascular disease	Diagnosis	ICD-9-CM
444.01	Saddle embolus of abdominal aorta	Diagnosis	ICD-9-CM
444.09	Other arterial embolism and thrombosis of abdominal aorta	Diagnosis	ICD-9-CM
444.1	Embolism and thrombosis of thoracic aorta	Diagnosis	ICD-9-CM
444.21	Embolism and thrombosis of arteries of upper extremity	Diagnosis	ICD-9-CM
444.22	Embolism and thrombosis of arteries of lower extremity	Diagnosis	ICD-9-CM
444.81	Embolism and thrombosis of iliac artery	Diagnosis	ICD-9-CM
444.89	Embolism and thrombosis of other specified artery	Diagnosis	ICD-9-CM
444.9	Embolism and thrombosis of unspecified artery	Diagnosis	ICD-9-CM
445.01	Atheroembolism of upper extremity	Diagnosis	ICD-9-CM
445.02	Atheroembolism of lower extremity	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
445.81	Atheroembolism of kidney	Diagnosis	ICD-9-CM
445.89	Atheroembolism of other site	Diagnosis	ICD-9-CM
447.0	Arteriovenous fistula, acquired	Diagnosis	ICD-9-CM
447.1	Stricture of artery	Diagnosis	ICD-9-CM
447.2	Rupture of artery	Diagnosis	ICD-9-CM
447.3	Hyperplasia of renal artery	Diagnosis	ICD-9-CM
447.4	Celiac artery compression syndrome	Diagnosis	ICD-9-CM
447.5	Necrosis of artery	Diagnosis	ICD-9-CM
447.6	Unspecified arteritis	Diagnosis	ICD-9-CM
447.70	Aortic ectasia, unspecified site	Diagnosis	ICD-9-CM
447.71	Thoracic aortic ectasia	Diagnosis	ICD-9-CM
447.72	Abdominal aortic ectasia	Diagnosis	ICD-9-CM
447.73	Thoracoabdominal aortic ectasia	Diagnosis	ICD-9-CM
447.8	Other specified disorders of arteries and arterioles	Diagnosis	ICD-9-CM
447.9	Unspecified disorders of arteries and arterioles	Diagnosis	ICD-9-CM
448.0	Hereditary hemorrhagic telangiectasia	Diagnosis	ICD-9-CM
449	Septic arterial embolism	Diagnosis	ICD-9-CM
453.2	Other venous embolism and thrombosis, of inferior vena cava	Diagnosis	ICD-9-CM
453.77	Chronic venous embolism and thrombosis of other thoracic veins	Diagnosis	ICD-9-CM
453.87	Acute venous embolism and thrombosis of other thoracic veins	Diagnosis	ICD-9-CM
459.10	Postphlebotic syndrome without complications	Diagnosis	ICD-9-CM
459.11	Postphlebotic syndrome with ulcer	Diagnosis	ICD-9-CM
459.12	Postphlebotic syndrome with inflammation	Diagnosis	ICD-9-CM
459.13	Postphlebotic syndrome with ulcer and inflammation	Diagnosis	ICD-9-CM
459.19	Postphlebotic syndrome with other complication	Diagnosis	ICD-9-CM
745.0	Bulbus cordis anomalies and anomalies of cardiac septal closure, common truncus	Diagnosis	ICD-9-CM
745.10	Complete transposition of great vessels	Diagnosis	ICD-9-CM
745.11	Transposition of great vessels, double outlet right ventricle	Diagnosis	ICD-9-CM
745.12	Corrected transposition of great vessels	Diagnosis	ICD-9-CM
745.19	Other transposition of great vessels	Diagnosis	ICD-9-CM
745.2	Tetralogy of Fallot	Diagnosis	ICD-9-CM
745.3	Bulbus cordis anomalies and anomalies of cardiac septal closure, common ventricle	Diagnosis	ICD-9-CM
745.4	Ventricular septal defect	Diagnosis	ICD-9-CM
745.5	Ostium secundum type atrial septal defect	Diagnosis	ICD-9-CM
745.60	Unspecified type congenital endocardial cushion defect	Diagnosis	ICD-9-CM
745.61	Ostium primum defect	Diagnosis	ICD-9-CM
745.69	Other congenital endocardial cushion defect	Diagnosis	ICD-9-CM
745.7	Cor biloculare	Diagnosis	ICD-9-CM
745.8	Other bulbus cordis anomalies and anomalies of cardiac septal closure	Diagnosis	ICD-9-CM
745.9	Unspecified congenital defect of septal closure	Diagnosis	ICD-9-CM
746.00	Unspecified congenital pulmonary valve anomaly	Diagnosis	ICD-9-CM
746.01	Congenital atresia of pulmonary valve	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
746.02	Congenital stenosis of pulmonary valve	Diagnosis	ICD-9-CM
746.09	Other congenital anomalies of pulmonary valve	Diagnosis	ICD-9-CM
746.1	Congenital tricuspid atresia and stenosis	Diagnosis	ICD-9-CM
746.2	Ebstein's anomaly	Diagnosis	ICD-9-CM
746.3	Congenital stenosis of aortic valve	Diagnosis	ICD-9-CM
746.4	Congenital insufficiency of aortic valve	Diagnosis	ICD-9-CM
746.5	Congenital mitral stenosis	Diagnosis	ICD-9-CM
746.6	Congenital mitral insufficiency	Diagnosis	ICD-9-CM
746.7	Hypoplastic left heart syndrome	Diagnosis	ICD-9-CM
746.81	Congenital subaortic stenosis	Diagnosis	ICD-9-CM
746.82	Cor triatriatum	Diagnosis	ICD-9-CM
746.83	Congenital infundibular pulmonic stenosis	Diagnosis	ICD-9-CM
746.84	Congenital obstructive anomalies of heart, not elsewhere classified	Diagnosis	ICD-9-CM
746.85	Congenital coronary artery anomaly	Diagnosis	ICD-9-CM
746.86	Congenital heart block	Diagnosis	ICD-9-CM
746.87	Congenital malposition of heart and cardiac apex	Diagnosis	ICD-9-CM
746.89	Other specified congenital anomaly of heart	Diagnosis	ICD-9-CM
746.9	Unspecified congenital anomaly of heart	Diagnosis	ICD-9-CM
747.0	Patent ductus arteriosus	Diagnosis	ICD-9-CM
747.10	Coarctation of aorta (preductal) (postductal)	Diagnosis	ICD-9-CM
747.11	Congenital interruption of aortic arch	Diagnosis	ICD-9-CM
747.20	Unspecified congenital anomaly of aorta	Diagnosis	ICD-9-CM
747.21	Congenital anomaly of aortic arch	Diagnosis	ICD-9-CM
747.22	Congenital atresia and stenosis of aorta	Diagnosis	ICD-9-CM
747.29	Other congenital anomaly of aorta	Diagnosis	ICD-9-CM
747.31	Pulmonary artery coarctation and atresia	Diagnosis	ICD-9-CM
747.32	Pulmonary arteriovenous malformation	Diagnosis	ICD-9-CM
747.39	Other anomalies of pulmonary artery and pulmonary circulation	Diagnosis	ICD-9-CM
747.41	Total congenital anomalous pulmonary venous connection	Diagnosis	ICD-9-CM
747.42	Partial congenital anomalous pulmonary venous connection	Diagnosis	ICD-9-CM
747.49	Other congenital anomalies of great veins	Diagnosis	ICD-9-CM
747.83	Persistent fetal circulation	Diagnosis	ICD-9-CM
75572	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology (including 3D image postprocessing, assessment of cardiac function, and evaluation of venous structures, if performed)	Procedure	CPT-4
75573	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology in the setting of congenital heart disease (including 3D image postprocessing, assessment of LV cardiac function, RV structure and function and evaluation)	Procedure	CPT-4
758.0	Down's syndrome	Diagnosis	ICD-9-CM
758.1	Patau's syndrome	Diagnosis	ICD-9-CM
758.2	Edwards' syndrome	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
758.32	Velo-cardio-facial syndrome	Diagnosis	ICD-9-CM
759.82	Marfan's syndrome	Diagnosis	ICD-9-CM
759.89	Other specified multiple congenital anomalies, so described	Diagnosis	ICD-9-CM
93303	Transthoracic echocardiography for congenital cardiac anomalies, complete	Procedure	CPT-4
93304	Transthoracic echocardiography for congenital cardiac anomalies, follow-up or limited	Procedure	CPT-4
93315	Transesophageal echocardiography for congenital cardiac anomalies, including probe placement, image acquisition, interpretation and report	Procedure	CPT-4
93316	Transesophageal echocardiography for congenital cardiac anomalies, placement of transesophageal probe only, image acquisition, interpretation and report only	Procedure	CPT-4
93317	Transesophageal echocardiography for congenital cardiac anomalies	Procedure	CPT-4
93530	Right heart catheterization, for congenital cardiac anomalies	Procedure	CPT-4
93531	Combined right heart catheterization and retrograde left heart catheterization, for congenital cardiac anomalies	Procedure	CPT-4
93532	Combined right heart catheterization and transseptal left heart catheterization through intact septum with or without retrograde left heart catheterization, for congenital cardiac anomalies	Procedure	CPT-4
93533	Combined right heart catheterization and transseptal left heart catheterization through existing septal opening, with or without retrograde left heart catheterization, for congenital cardiac anomalies	Procedure	CPT-4
93563	Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report, for selective coronary angiography during congenital heart catheterization (List separately in addition to code for primary procedure)	Procedure	CPT-4
93564	Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report, for selective opacification of aortocoronary venous or arterial bypass graft(s) (eg, aortocoronary saphenous vein, free radial artery, or free ma	Procedure	CPT-4
93580	Percutaneous transcatheter closure of congenital interatrial communication (ie, Fontan fenestration, atrial septal defect) with implant	Procedure	CPT-4
93581	Percutaneous transcatheter closure of a congenital ventricular septal defect with implant	Procedure	CPT-4
996.03	Mechanical complication due to coronary bypass graft	Diagnosis	ICD-9-CM
996.83	Complications of transplanted heart	Diagnosis	ICD-9-CM
997.1	Cardiac complications	Diagnosis	ICD-9-CM
G8451	Beta-blocker therapy for lvef < 40% not prescribed for reasons documented by the clinician (e.g., low blood pressure, fluid overload, asthma, patients recently treated with an intravenous positive inotropic agent, allergy, intolerance, other medical reasons, patient declined, other patient reasons, or other reasons attributable to the healthcare system)	Procedure	HCPCS
G8694	Left ventricular ejection fraction (lvef) < 40%	Procedure	HCPCS
G8738	Left ventricular ejection fraction (lvef) < 40% or documentation of severely or moderately depressed left ventricular systolic function	Procedure	HCPCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
G8923	Left ventricular ejection fraction (lvef) < 40% or documentation of moderately or severely depressed left ventricular systolic function	Procedure	HCPCS
G8934	Left ventricular ejection fraction (lvef) <40% or documentation of moderately or severely depressed left ventricular systolic function	Procedure	HCPCS
I09.81	Rheumatic heart failure	Diagnosis	ICD-10-CM
I11	Hypertensive heart disease	Diagnosis	ICD-10-CM
I11.0	Hypertensive heart disease with heart failure	Diagnosis	ICD-10-CM
I11.9	Hypertensive heart disease without heart failure	Diagnosis	ICD-10-CM
I13.0	Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease	Diagnosis	ICD-10-CM
I20.0	Unstable angina	Diagnosis	ICD-10-CM
I20.1	Angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I20.8	Other forms of angina pectoris	Diagnosis	ICD-10-CM
I20.9	Angina pectoris, unspecified	Diagnosis	ICD-10-CM
I21.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery	Diagnosis	ICD-10-CM
I21.02	ST elevation (STEMI) myocardial infarction involving left anterior descending coronary artery	Diagnosis	ICD-10-CM
I21.09	ST elevation (STEMI) myocardial infarction involving other coronary artery of anterior wall	Diagnosis	ICD-10-CM
I21.11	ST elevation (STEMI) myocardial infarction involving right coronary artery	Diagnosis	ICD-10-CM
I21.19	ST elevation (STEMI) myocardial infarction involving other coronary artery of inferior wall	Diagnosis	ICD-10-CM
I21.21	ST elevation (STEMI) myocardial infarction involving left circumflex coronary artery	Diagnosis	ICD-10-CM
I21.29	ST elevation (STEMI) myocardial infarction involving other sites	Diagnosis	ICD-10-CM
I21.3	ST elevation (STEMI) myocardial infarction of unspecified site	Diagnosis	ICD-10-CM
I21.4	Non-ST elevation (NSTEMI) myocardial infarction	Diagnosis	ICD-10-CM
I21.9	Acute myocardial infarction, unspecified	Diagnosis	ICD-10-CM
I21.A1	Myocardial infarction type 2	Diagnosis	ICD-10-CM
I21.A9	Other myocardial infarction type	Diagnosis	ICD-10-CM
I22.0	Subsequent ST elevation (STEMI) myocardial infarction of anterior wall	Diagnosis	ICD-10-CM
I22.1	Subsequent ST elevation (STEMI) myocardial infarction of inferior wall	Diagnosis	ICD-10-CM
I22.2	Subsequent non-ST elevation (NSTEMI) myocardial infarction	Diagnosis	ICD-10-CM
I22.8	Subsequent ST elevation (STEMI) myocardial infarction of other sites	Diagnosis	ICD-10-CM
I22.9	Subsequent ST elevation (STEMI) myocardial infarction of unspecified site	Diagnosis	ICD-10-CM
I23.0	Hemopericardium as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.1	Atrial septal defect as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.2	Ventricular septal defect as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.3	Rupture of cardiac wall without hemopericardium as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I23.4	Rupture of chordae tendineae as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.5	Rupture of papillary muscle as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.6	Thrombosis of atrium, auricular appendage, and ventricle as current complications following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.7	Postinfarction angina	Diagnosis	ICD-10-CM
I23.8	Other current complications following acute myocardial infarction	Diagnosis	ICD-10-CM
I24	Other acute ischemic heart diseases	Diagnosis	ICD-10-CM
I24.0	Acute coronary thrombosis not resulting in myocardial infarction	Diagnosis	ICD-10-CM
I24.1	Dressler's syndrome	Diagnosis	ICD-10-CM
I24.8	Other forms of acute ischemic heart disease	Diagnosis	ICD-10-CM
I24.9	Acute ischemic heart disease, unspecified	Diagnosis	ICD-10-CM
I25	Chronic ischemic heart disease	Diagnosis	ICD-10-CM
I25.1	Atherosclerotic heart disease of native coronary artery	Diagnosis	ICD-10-CM
I25.10	Atherosclerotic heart disease of native coronary artery without angina pectoris	Diagnosis	ICD-10-CM
I25.11	Atherosclerotic heart disease of native coronary artery with angina pectoris	Diagnosis	ICD-10-CM
I25.110	Atherosclerotic heart disease of native coronary artery with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.111	Atherosclerotic heart disease of native coronary artery with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.118	Atherosclerotic heart disease of native coronary artery with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.119	Atherosclerotic heart disease of native coronary artery with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.2	Old myocardial infarction	Diagnosis	ICD-10-CM
I25.4	Coronary artery aneurysm and dissection	Diagnosis	ICD-10-CM
I25.41	Coronary artery aneurysm	Diagnosis	ICD-10-CM
I25.42	Coronary artery dissection	Diagnosis	ICD-10-CM
I25.5	Ischemic cardiomyopathy	Diagnosis	ICD-10-CM
I25.6	Silent myocardial ischemia	Diagnosis	ICD-10-CM
I25.7	Atherosclerosis of coronary artery bypass graft(s) and coronary artery of transplanted heart with angina pectoris	Diagnosis	ICD-10-CM
I25.70	Atherosclerosis of coronary artery bypass graft(s), unspecified, with angina pectoris	Diagnosis	ICD-10-CM
I25.700	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.701	Atherosclerosis of coronary artery bypass graft(s), unspecified, with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.708	Atherosclerosis of coronary artery bypass graft(s), unspecified, with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.709	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unspecified angina pectoris	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I25.71	Atherosclerosis of autologous vein coronary artery bypass graft(s) with angina pectoris	Diagnosis	ICD-10-CM
I25.710	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.711	Atherosclerosis of autologous vein coronary artery bypass graft(s) with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.718	Atherosclerosis of autologous vein coronary artery bypass graft(s) with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.719	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.72	Atherosclerosis of autologous artery coronary artery bypass graft(s) with angina pectoris	Diagnosis	ICD-10-CM
I25.720	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.721	Atherosclerosis of autologous artery coronary artery bypass graft(s) with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.728	Atherosclerosis of autologous artery coronary artery bypass graft(s) with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.729	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.73	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with angina pectoris	Diagnosis	ICD-10-CM
I25.730	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.731	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.738	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.739	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.75	Atherosclerosis of native coronary artery of transplanted heart with angina pectoris	Diagnosis	ICD-10-CM
I25.750	Atherosclerosis of native coronary artery of transplanted heart with unstable angina	Diagnosis	ICD-10-CM
I25.751	Atherosclerosis of native coronary artery of transplanted heart with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.758	Atherosclerosis of native coronary artery of transplanted heart with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.759	Atherosclerosis of native coronary artery of transplanted heart with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.76	Atherosclerosis of bypass graft of coronary artery of transplanted heart with angina pectoris	Diagnosis	ICD-10-CM
I25.760	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unstable angina	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I25.761	Atherosclerosis of bypass graft of coronary artery of transplanted heart with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.768	Atherosclerosis of bypass graft of coronary artery of transplanted heart with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.769	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.79	Atherosclerosis of other coronary artery bypass graft(s) with angina pectoris	Diagnosis	ICD-10-CM
I25.790	Atherosclerosis of other coronary artery bypass graft(s) with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.791	Atherosclerosis of other coronary artery bypass graft(s) with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.798	Atherosclerosis of other coronary artery bypass graft(s) with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.799	Atherosclerosis of other coronary artery bypass graft(s) with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.8	Other forms of chronic ischemic heart disease	Diagnosis	ICD-10-CM
I25.81	Atherosclerosis of other coronary vessels without angina pectoris	Diagnosis	ICD-10-CM
I25.810	Atherosclerosis of coronary artery bypass graft(s) without angina pectoris	Diagnosis	ICD-10-CM
I25.811	Atherosclerosis of native coronary artery of transplanted heart without angina pectoris	Diagnosis	ICD-10-CM
I25.812	Atherosclerosis of bypass graft of coronary artery of transplanted heart without angina pectoris	Diagnosis	ICD-10-CM
I25.82	Chronic total occlusion of coronary artery	Diagnosis	ICD-10-CM
I25.83	Coronary atherosclerosis due to lipid rich plaque	Diagnosis	ICD-10-CM
I25.84	Coronary atherosclerosis due to calcified coronary lesion	Diagnosis	ICD-10-CM
I25.89	Other forms of chronic ischemic heart disease	Diagnosis	ICD-10-CM
I25.9	Chronic ischemic heart disease, unspecified	Diagnosis	ICD-10-CM
I27	Other pulmonary heart diseases	Diagnosis	ICD-10-CM
I27.0	Primary pulmonary hypertension	Diagnosis	ICD-10-CM
I27.1	Kyphoscoliotic heart disease	Diagnosis	ICD-10-CM
I42	Cardiomyopathy	Diagnosis	ICD-10-CM
I42.0	Dilated cardiomyopathy	Diagnosis	ICD-10-CM
I42.1	Obstructive hypertrophic cardiomyopathy	Diagnosis	ICD-10-CM
I42.2	Other hypertrophic cardiomyopathy	Diagnosis	ICD-10-CM
I42.5	Other restrictive cardiomyopathy	Diagnosis	ICD-10-CM
I42.6	Alcoholic cardiomyopathy	Diagnosis	ICD-10-CM
I42.7	Cardiomyopathy due to drug and external agent	Diagnosis	ICD-10-CM
I42.8	Other cardiomyopathies	Diagnosis	ICD-10-CM
I42.9	Cardiomyopathy, unspecified	Diagnosis	ICD-10-CM
I43	Cardiomyopathy in diseases classified elsewhere	Diagnosis	ICD-10-CM
I46.2	Cardiac arrest due to underlying cardiac condition	Diagnosis	ICD-10-CM
I46.8	Cardiac arrest due to other underlying condition	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I46.9	Cardiac arrest, cause unspecified	Diagnosis	ICD-10-CM
I47.2	Ventricular tachycardia	Diagnosis	ICD-10-CM
I49.01	Ventricular fibrillation	Diagnosis	ICD-10-CM
I49.02	Ventricular flutter	Diagnosis	ICD-10-CM
I50	Heart failure	Diagnosis	ICD-10-CM
I50.1	Left ventricular failure, unspecified	Diagnosis	ICD-10-CM
I50.2	Systolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.20	Unspecified systolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.21	Acute systolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.22	Chronic systolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.23	Acute on chronic systolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.3	Diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.30	Unspecified diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.31	Acute diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.32	Chronic diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.33	Acute on chronic diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.4	Combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.40	Unspecified combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.41	Acute combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.42	Chronic combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.43	Acute on chronic combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.8	Other heart failure	Diagnosis	ICD-10-CM
I50.81	Right heart failure	Diagnosis	ICD-10-CM
I50.810	Right heart failure, unspecified	Diagnosis	ICD-10-CM
I50.811	Acute right heart failure	Diagnosis	ICD-10-CM
I50.812	Chronic right heart failure	Diagnosis	ICD-10-CM
I50.813	Acute on chronic right heart failure	Diagnosis	ICD-10-CM
I50.814	Right heart failure due to left heart failure	Diagnosis	ICD-10-CM
I50.82	Biventricular heart failure	Diagnosis	ICD-10-CM
I50.83	High output heart failure	Diagnosis	ICD-10-CM
I50.84	End stage heart failure	Diagnosis	ICD-10-CM
I50.89	Other heart failure	Diagnosis	ICD-10-CM
I50.9	Heart failure, unspecified	Diagnosis	ICD-10-CM
I51	Complications and ill-defined descriptions of heart disease	Diagnosis	ICD-10-CM
I51.8	Other ill-defined heart diseases	Diagnosis	ICD-10-CM
I51.89	Other ill-defined heart diseases	Diagnosis	ICD-10-CM
I51.9	Heart disease, unspecified	Diagnosis	ICD-10-CM
I52	Other heart disorders in diseases classified elsewhere	Diagnosis	ICD-10-CM
I60.00	Nontraumatic subarachnoid hemorrhage from unspecified carotid siphon and bifurcation	Diagnosis	ICD-10-CM
I60.01	Nontraumatic subarachnoid hemorrhage from right carotid siphon and bifurcation	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I60.02	Nontraumatic subarachnoid hemorrhage from left carotid siphon and bifurcation	Diagnosis	ICD-10-CM
I60.10	Nontraumatic subarachnoid hemorrhage from unspecified middle cerebral artery	Diagnosis	ICD-10-CM
I60.11	Nontraumatic subarachnoid hemorrhage from right middle cerebral artery	Diagnosis	ICD-10-CM
I60.12	Nontraumatic subarachnoid hemorrhage from left middle cerebral artery	Diagnosis	ICD-10-CM
I60.2	Nontraumatic subarachnoid hemorrhage from anterior communicating artery	Diagnosis	ICD-10-CM
I60.20	Nontraumatic subarachnoid hemorrhage from unspecified anterior communicating artery	Diagnosis	ICD-10-CM
I60.21	Nontraumatic subarachnoid hemorrhage from right anterior communicating artery	Diagnosis	ICD-10-CM
I60.22	Nontraumatic subarachnoid hemorrhage from left anterior communicating artery	Diagnosis	ICD-10-CM
I60.30	Nontraumatic subarachnoid hemorrhage from unspecified posterior communicating artery	Diagnosis	ICD-10-CM
I60.31	Nontraumatic subarachnoid hemorrhage from right posterior communicating artery	Diagnosis	ICD-10-CM
I60.32	Nontraumatic subarachnoid hemorrhage from left posterior communicating artery	Diagnosis	ICD-10-CM
I60.4	Nontraumatic subarachnoid hemorrhage from basilar artery	Diagnosis	ICD-10-CM
I60.50	Nontraumatic subarachnoid hemorrhage from unspecified vertebral artery	Diagnosis	ICD-10-CM
I60.51	Nontraumatic subarachnoid hemorrhage from right vertebral artery	Diagnosis	ICD-10-CM
I60.52	Nontraumatic subarachnoid hemorrhage from left vertebral artery	Diagnosis	ICD-10-CM
I60.6	Nontraumatic subarachnoid hemorrhage from other intracranial arteries	Diagnosis	ICD-10-CM
I60.7	Nontraumatic subarachnoid hemorrhage from unspecified intracranial artery	Diagnosis	ICD-10-CM
I60.8	Other nontraumatic subarachnoid hemorrhage	Diagnosis	ICD-10-CM
I60.9	Nontraumatic subarachnoid hemorrhage, unspecified	Diagnosis	ICD-10-CM
I61.0	Nontraumatic intracerebral hemorrhage in hemisphere, subcortical	Diagnosis	ICD-10-CM
I61.1	Nontraumatic intracerebral hemorrhage in hemisphere, cortical	Diagnosis	ICD-10-CM
I61.2	Nontraumatic intracerebral hemorrhage in hemisphere, unspecified	Diagnosis	ICD-10-CM
I61.3	Nontraumatic intracerebral hemorrhage in brain stem	Diagnosis	ICD-10-CM
I61.4	Nontraumatic intracerebral hemorrhage in cerebellum	Diagnosis	ICD-10-CM
I61.5	Nontraumatic intracerebral hemorrhage, intraventricular	Diagnosis	ICD-10-CM
I61.6	Nontraumatic intracerebral hemorrhage, multiple localized	Diagnosis	ICD-10-CM
I61.8	Other nontraumatic intracerebral hemorrhage	Diagnosis	ICD-10-CM
I61.9	Nontraumatic intracerebral hemorrhage, unspecified	Diagnosis	ICD-10-CM
I62.00	Nontraumatic subdural hemorrhage, unspecified	Diagnosis	ICD-10-CM
I62.01	Nontraumatic acute subdural hemorrhage	Diagnosis	ICD-10-CM
I62.02	Nontraumatic subacute subdural hemorrhage	Diagnosis	ICD-10-CM
I62.03	Nontraumatic chronic subdural hemorrhage	Diagnosis	ICD-10-CM
I62.1	Nontraumatic extradural hemorrhage	Diagnosis	ICD-10-CM
I62.9	Nontraumatic intracranial hemorrhage, unspecified	Diagnosis	ICD-10-CM
I63.00	Cerebral infarction due to thrombosis of unspecified precerebral artery	Diagnosis	ICD-10-CM
I63.10	Cerebral infarction due to embolism of unspecified precerebral artery	Diagnosis	ICD-10-CM
I63.20	Cerebral infarction due to unspecified occlusion or stenosis of unspecified precerebral arteries	Diagnosis	ICD-10-CM
I63.22	Cerebral infarction due to unspecified occlusion or stenosis of basilar artery	Diagnosis	ICD-10-CM
I63.30	Cerebral infarction due to thrombosis of unspecified cerebral artery	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I63.40	Cerebral infarction due to embolism of unspecified cerebral artery	Diagnosis	ICD-10-CM
I63.50	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebral artery	Diagnosis	ICD-10-CM
I63.8	Other cerebral infarction	Diagnosis	ICD-10-CM
I63.81	Other cerebral infarction due to occlusion or stenosis of small artery	Diagnosis	ICD-10-CM
I63.89	Other cerebral infarction	Diagnosis	ICD-10-CM
I65.01	Occlusion and stenosis of right vertebral artery	Diagnosis	ICD-10-CM
I65.02	Occlusion and stenosis of left vertebral artery	Diagnosis	ICD-10-CM
I65.03	Occlusion and stenosis of bilateral vertebral arteries	Diagnosis	ICD-10-CM
I65.09	Occlusion and stenosis of unspecified vertebral artery	Diagnosis	ICD-10-CM
I65.1	Occlusion and stenosis of basilar artery	Diagnosis	ICD-10-CM
I65.21	Occlusion and stenosis of right carotid artery	Diagnosis	ICD-10-CM
I65.22	Occlusion and stenosis of left carotid artery	Diagnosis	ICD-10-CM
I65.23	Occlusion and stenosis of bilateral carotid arteries	Diagnosis	ICD-10-CM
I65.29	Occlusion and stenosis of unspecified carotid artery	Diagnosis	ICD-10-CM
I65.8	Occlusion and stenosis of other precerebral arteries	Diagnosis	ICD-10-CM
I65.9	Occlusion and stenosis of unspecified precerebral artery	Diagnosis	ICD-10-CM
I66.01	Occlusion and stenosis of right middle cerebral artery	Diagnosis	ICD-10-CM
I66.02	Occlusion and stenosis of left middle cerebral artery	Diagnosis	ICD-10-CM
I66.03	Occlusion and stenosis of bilateral middle cerebral arteries	Diagnosis	ICD-10-CM
I66.09	Occlusion and stenosis of unspecified middle cerebral artery	Diagnosis	ICD-10-CM
I66.11	Occlusion and stenosis of right anterior cerebral artery	Diagnosis	ICD-10-CM
I66.12	Occlusion and stenosis of left anterior cerebral artery	Diagnosis	ICD-10-CM
I66.13	Occlusion and stenosis of bilateral anterior cerebral arteries	Diagnosis	ICD-10-CM
I66.19	Occlusion and stenosis of unspecified anterior cerebral artery	Diagnosis	ICD-10-CM
I66.21	Occlusion and stenosis of right posterior cerebral artery	Diagnosis	ICD-10-CM
I66.22	Occlusion and stenosis of left posterior cerebral artery	Diagnosis	ICD-10-CM
I66.23	Occlusion and stenosis of bilateral posterior cerebral arteries	Diagnosis	ICD-10-CM
I66.29	Occlusion and stenosis of unspecified posterior cerebral artery	Diagnosis	ICD-10-CM
I66.3	Occlusion and stenosis of cerebellar arteries	Diagnosis	ICD-10-CM
I66.8	Occlusion and stenosis of other cerebral arteries	Diagnosis	ICD-10-CM
I66.9	Occlusion and stenosis of unspecified cerebral artery	Diagnosis	ICD-10-CM
I67.89	Other cerebrovascular disease	Diagnosis	ICD-10-CM
I70	Atherosclerosis	Diagnosis	ICD-10-CM
I70.0	Atherosclerosis of aorta	Diagnosis	ICD-10-CM
I70.1	Atherosclerosis of renal artery	Diagnosis	ICD-10-CM
I70.2	Atherosclerosis of native arteries of the extremities	Diagnosis	ICD-10-CM
I70.20	Unspecified atherosclerosis of native arteries of extremities	Diagnosis	ICD-10-CM
I70.201	Unspecified atherosclerosis of native arteries of extremities, right leg	Diagnosis	ICD-10-CM
I70.202	Unspecified atherosclerosis of native arteries of extremities, left leg	Diagnosis	ICD-10-CM
I70.203	Unspecified atherosclerosis of native arteries of extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.208	Unspecified atherosclerosis of native arteries of extremities, other extremity	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.209	Unspecified atherosclerosis of native arteries of extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.21	Atherosclerosis of native arteries of extremities with intermittent claudication	Diagnosis	ICD-10-CM
I70.211	Atherosclerosis of native arteries of extremities with intermittent claudication, right leg	Diagnosis	ICD-10-CM
I70.212	Atherosclerosis of native arteries of extremities with intermittent claudication, left leg	Diagnosis	ICD-10-CM
I70.213	Atherosclerosis of native arteries of extremities with intermittent claudication, bilateral legs	Diagnosis	ICD-10-CM
I70.218	Atherosclerosis of native arteries of extremities with intermittent claudication, other extremity	Diagnosis	ICD-10-CM
I70.219	Atherosclerosis of native arteries of extremities with intermittent claudication, unspecified extremity	Diagnosis	ICD-10-CM
I70.22	Atherosclerosis of native arteries of extremities with rest pain	Diagnosis	ICD-10-CM
I70.221	Atherosclerosis of native arteries of extremities with rest pain, right leg	Diagnosis	ICD-10-CM
I70.222	Atherosclerosis of native arteries of extremities with rest pain, left leg	Diagnosis	ICD-10-CM
I70.223	Atherosclerosis of native arteries of extremities with rest pain, bilateral legs	Diagnosis	ICD-10-CM
I70.228	Atherosclerosis of native arteries of extremities with rest pain, other extremity	Diagnosis	ICD-10-CM
I70.229	Atherosclerosis of native arteries of extremities with rest pain, unspecified extremity	Diagnosis	ICD-10-CM
I70.23	Atherosclerosis of native arteries of right leg with ulceration	Diagnosis	ICD-10-CM
I70.231	Atherosclerosis of native arteries of right leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.232	Atherosclerosis of native arteries of right leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.233	Atherosclerosis of native arteries of right leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.234	Atherosclerosis of native arteries of right leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.235	Atherosclerosis of native arteries of right leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.238	Atherosclerosis of native arteries of right leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.239	Atherosclerosis of native arteries of right leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.24	Atherosclerosis of native arteries of left leg with ulceration	Diagnosis	ICD-10-CM
I70.241	Atherosclerosis of native arteries of left leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.242	Atherosclerosis of native arteries of left leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.243	Atherosclerosis of native arteries of left leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.244	Atherosclerosis of native arteries of left leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.245	Atherosclerosis of native arteries of left leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.248	Atherosclerosis of native arteries of left leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.249	Atherosclerosis of native arteries of left leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.25	Atherosclerosis of native arteries of other extremities with ulceration	Diagnosis	ICD-10-CM
I70.26	Atherosclerosis of native arteries of extremities with gangrene	Diagnosis	ICD-10-CM
I70.261	Atherosclerosis of native arteries of extremities with gangrene, right leg	Diagnosis	ICD-10-CM
I70.262	Atherosclerosis of native arteries of extremities with gangrene, left leg	Diagnosis	ICD-10-CM
I70.263	Atherosclerosis of native arteries of extremities with gangrene, bilateral legs	Diagnosis	ICD-10-CM
I70.268	Atherosclerosis of native arteries of extremities with gangrene, other extremity	Diagnosis	ICD-10-CM
I70.269	Atherosclerosis of native arteries of extremities with gangrene, unspecified extremity	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.29	Other atherosclerosis of native arteries of extremities	Diagnosis	ICD-10-CM
I70.291	Other atherosclerosis of native arteries of extremities, right leg	Diagnosis	ICD-10-CM
I70.292	Other atherosclerosis of native arteries of extremities, left leg	Diagnosis	ICD-10-CM
I70.293	Other atherosclerosis of native arteries of extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.298	Other atherosclerosis of native arteries of extremities, other extremity	Diagnosis	ICD-10-CM
I70.299	Other atherosclerosis of native arteries of extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.3	Atherosclerosis of unspecified type of bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.30	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.301	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.302	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.303	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.308	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.309	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.31	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication	Diagnosis	ICD-10-CM
I70.311	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, right leg	Diagnosis	ICD-10-CM
I70.312	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, left leg	Diagnosis	ICD-10-CM
I70.313	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, bilateral legs	Diagnosis	ICD-10-CM
I70.318	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, other extremity	Diagnosis	ICD-10-CM
I70.319	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, unspecified extremity	Diagnosis	ICD-10-CM
I70.32	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain	Diagnosis	ICD-10-CM
I70.321	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, right leg	Diagnosis	ICD-10-CM
I70.322	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, left leg	Diagnosis	ICD-10-CM
I70.323	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, bilateral legs	Diagnosis	ICD-10-CM
I70.328	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, other extremity	Diagnosis	ICD-10-CM
I70.329	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, unspecified extremity	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.33	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration	Diagnosis	ICD-10-CM
I70.331	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.332	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.333	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.334	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.335	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.338	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.339	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.34	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration	Diagnosis	ICD-10-CM
I70.341	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.342	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.343	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.344	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.345	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.348	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.349	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.35	Atherosclerosis of unspecified type of bypass graft(s) of other extremity with ulceration	Diagnosis	ICD-10-CM
I70.36	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene	Diagnosis	ICD-10-CM
I70.361	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, right leg	Diagnosis	ICD-10-CM
I70.362	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, left leg	Diagnosis	ICD-10-CM
I70.363	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, bilateral legs	Diagnosis	ICD-10-CM
I70.368	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, other extremity	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.369	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, unspecified extremity	Diagnosis	ICD-10-CM
I70.39	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.391	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.392	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.393	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.398	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.399	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.4	Atherosclerosis of autologous vein bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.40	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.401	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.402	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.403	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.408	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.409	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.41	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication	Diagnosis	ICD-10-CM
I70.411	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, right leg	Diagnosis	ICD-10-CM
I70.412	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, left leg	Diagnosis	ICD-10-CM
I70.413	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, bilateral legs	Diagnosis	ICD-10-CM
I70.418	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, other extremity	Diagnosis	ICD-10-CM
I70.419	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, unspecified extremity	Diagnosis	ICD-10-CM
I70.42	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain	Diagnosis	ICD-10-CM
I70.421	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, right leg	Diagnosis	ICD-10-CM
I70.422	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, left leg	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.423	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, bilateral legs	Diagnosis	ICD-10-CM
I70.428	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, other extremity	Diagnosis	ICD-10-CM
I70.429	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, unspecified extremity	Diagnosis	ICD-10-CM
I70.43	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration	Diagnosis	ICD-10-CM
I70.431	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.432	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.433	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.434	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.435	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.438	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.439	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.44	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration	Diagnosis	ICD-10-CM
I70.441	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.442	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.443	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.444	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.445	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.448	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.449	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.45	Atherosclerosis of autologous vein bypass graft(s) of other extremity with ulceration	Diagnosis	ICD-10-CM
I70.46	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene	Diagnosis	ICD-10-CM
I70.461	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, right leg	Diagnosis	ICD-10-CM
I70.462	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, left leg	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.463	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, bilateral legs	Diagnosis	ICD-10-CM
I70.468	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, other extremity	Diagnosis	ICD-10-CM
I70.469	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, unspecified extremity	Diagnosis	ICD-10-CM
I70.49	Other atherosclerosis of autologous vein bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.491	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.492	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.493	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.498	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.499	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.5	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.50	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.501	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.502	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.503	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.508	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.509	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.51	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities intermittent claudication	Diagnosis	ICD-10-CM
I70.511	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, right leg	Diagnosis	ICD-10-CM
I70.512	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, left leg	Diagnosis	ICD-10-CM
I70.513	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, bilateral legs	Diagnosis	ICD-10-CM
I70.518	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, other extremity	Diagnosis	ICD-10-CM
I70.519	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, unspecified extremity	Diagnosis	ICD-10-CM
I70.52	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.521	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, right leg	Diagnosis	ICD-10-CM
I70.522	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, left leg	Diagnosis	ICD-10-CM
I70.523	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, bilateral legs	Diagnosis	ICD-10-CM
I70.528	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, other extremity	Diagnosis	ICD-10-CM
I70.529	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, unspecified extremity	Diagnosis	ICD-10-CM
I70.53	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration	Diagnosis	ICD-10-CM
I70.531	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.532	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.533	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.534	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.535	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.538	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.539	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.54	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration	Diagnosis	ICD-10-CM
I70.541	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.542	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.543	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.544	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.545	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.548	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.549	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of unspecified site	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.55	Atherosclerosis of nonautologous biological bypass graft(s) of other extremity with ulceration	Diagnosis	ICD-10-CM
I70.56	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene	Diagnosis	ICD-10-CM
I70.561	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, right leg	Diagnosis	ICD-10-CM
I70.562	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, left leg	Diagnosis	ICD-10-CM
I70.563	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, bilateral legs	Diagnosis	ICD-10-CM
I70.568	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, other extremity	Diagnosis	ICD-10-CM
I70.569	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, unspecified extremity	Diagnosis	ICD-10-CM
I70.59	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.591	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.592	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.593	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.598	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.599	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.6	Atherosclerosis of nonbiological bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.60	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.601	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.602	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.603	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.608	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.609	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.61	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication	Diagnosis	ICD-10-CM
I70.611	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, right leg	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.612	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, left leg	Diagnosis	ICD-10-CM
I70.613	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, bilateral legs	Diagnosis	ICD-10-CM
I70.618	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, other extremity	Diagnosis	ICD-10-CM
I70.619	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, unspecified extremity	Diagnosis	ICD-10-CM
I70.62	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain	Diagnosis	ICD-10-CM
I70.621	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, right leg	Diagnosis	ICD-10-CM
I70.622	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, left leg	Diagnosis	ICD-10-CM
I70.623	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, bilateral legs	Diagnosis	ICD-10-CM
I70.628	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, other extremity	Diagnosis	ICD-10-CM
I70.629	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, unspecified extremity	Diagnosis	ICD-10-CM
I70.63	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration	Diagnosis	ICD-10-CM
I70.631	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.632	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.633	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.634	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.635	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.638	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.639	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.64	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration	Diagnosis	ICD-10-CM
I70.641	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.642	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.643	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.644	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.645	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.648	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.649	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.65	Atherosclerosis of nonbiological bypass graft(s) of other extremity with ulceration	Diagnosis	ICD-10-CM
I70.66	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene	Diagnosis	ICD-10-CM
I70.661	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, right leg	Diagnosis	ICD-10-CM
I70.662	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, left leg	Diagnosis	ICD-10-CM
I70.663	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, bilateral legs	Diagnosis	ICD-10-CM
I70.668	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, other extremity	Diagnosis	ICD-10-CM
I70.669	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, unspecified extremity	Diagnosis	ICD-10-CM
I70.69	Other atherosclerosis of nonbiological bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.691	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.692	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.693	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.698	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.699	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.7	Atherosclerosis of other type of bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.70	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.701	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.702	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.703	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.708	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.709	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.71	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication	Diagnosis	ICD-10-CM
I70.711	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, right leg	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.712	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, left leg	Diagnosis	ICD-10-CM
I70.713	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, bilateral legs	Diagnosis	ICD-10-CM
I70.718	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, other extremity	Diagnosis	ICD-10-CM
I70.719	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, unspecified extremity	Diagnosis	ICD-10-CM
I70.72	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain	Diagnosis	ICD-10-CM
I70.721	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, right leg	Diagnosis	ICD-10-CM
I70.722	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, left leg	Diagnosis	ICD-10-CM
I70.723	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, bilateral legs	Diagnosis	ICD-10-CM
I70.728	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, other extremity	Diagnosis	ICD-10-CM
I70.729	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, unspecified extremity	Diagnosis	ICD-10-CM
I70.73	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration	Diagnosis	ICD-10-CM
I70.731	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.732	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.733	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.734	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.735	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.738	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.739	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.74	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration	Diagnosis	ICD-10-CM
I70.741	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.742	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.743	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.744	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.745	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of other part of foot	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.748	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.749	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.75	Atherosclerosis of other type of bypass graft(s) of other extremity with ulceration	Diagnosis	ICD-10-CM
I70.76	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene	Diagnosis	ICD-10-CM
I70.761	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, right leg	Diagnosis	ICD-10-CM
I70.762	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, left leg	Diagnosis	ICD-10-CM
I70.763	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, bilateral legs	Diagnosis	ICD-10-CM
I70.768	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, other extremity	Diagnosis	ICD-10-CM
I70.769	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, unspecified extremity	Diagnosis	ICD-10-CM
I70.79	Other atherosclerosis of other type of bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.791	Other atherosclerosis of other type of bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.792	Other atherosclerosis of other type of bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.793	Other atherosclerosis of other type of bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.798	Other atherosclerosis of other type of bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.799	Other atherosclerosis of other type of bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.8	Atherosclerosis of other arteries	Diagnosis	ICD-10-CM
I70.9	Other and unspecified atherosclerosis	Diagnosis	ICD-10-CM
I70.90	Unspecified atherosclerosis	Diagnosis	ICD-10-CM
I70.91	Generalized atherosclerosis	Diagnosis	ICD-10-CM
I70.92	Chronic total occlusion of artery of the extremities	Diagnosis	ICD-10-CM
I71	Aortic aneurysm and dissection	Diagnosis	ICD-10-CM
I71.0	Dissection of aorta	Diagnosis	ICD-10-CM
I71.00	Dissection of unspecified site of aorta	Diagnosis	ICD-10-CM
I71.01	Dissection of thoracic aorta	Diagnosis	ICD-10-CM
I71.02	Dissection of abdominal aorta	Diagnosis	ICD-10-CM
I71.03	Dissection of thoracoabdominal aorta	Diagnosis	ICD-10-CM
I71.1	Thoracic aortic aneurysm, ruptured	Diagnosis	ICD-10-CM
I71.2	Thoracic aortic aneurysm, without rupture	Diagnosis	ICD-10-CM
I71.3	Abdominal aortic aneurysm, ruptured	Diagnosis	ICD-10-CM
I71.4	Abdominal aortic aneurysm, without rupture	Diagnosis	ICD-10-CM
I71.5	Thoracoabdominal aortic aneurysm, ruptured	Diagnosis	ICD-10-CM
I71.6	Thoracoabdominal aortic aneurysm, without rupture	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I71.8	Aortic aneurysm of unspecified site, ruptured	Diagnosis	ICD-10-CM
I71.9	Aortic aneurysm of unspecified site, without rupture	Diagnosis	ICD-10-CM
I72	Other aneurysm	Diagnosis	ICD-10-CM
I72.0	Aneurysm of carotid artery	Diagnosis	ICD-10-CM
I72.1	Aneurysm of artery of upper extremity	Diagnosis	ICD-10-CM
I72.2	Aneurysm of renal artery	Diagnosis	ICD-10-CM
I72.3	Aneurysm of iliac artery	Diagnosis	ICD-10-CM
I72.4	Aneurysm of artery of lower extremity	Diagnosis	ICD-10-CM
I72.5	Aneurysm of other precerebral arteries	Diagnosis	ICD-10-CM
I72.6	Aneurysm of vertebral artery	Diagnosis	ICD-10-CM
I72.8	Aneurysm of other specified arteries	Diagnosis	ICD-10-CM
I72.9	Aneurysm of unspecified site	Diagnosis	ICD-10-CM
I73	Other peripheral vascular diseases	Diagnosis	ICD-10-CM
I73.1	Thromboangiitis obliterans [Buerger's disease]	Diagnosis	ICD-10-CM
I73.89	Other specified peripheral vascular diseases	Diagnosis	ICD-10-CM
I73.9	Peripheral vascular disease, unspecified	Diagnosis	ICD-10-CM
I74	Arterial embolism and thrombosis	Diagnosis	ICD-10-CM
I74.0	Embolism and thrombosis of abdominal aorta	Diagnosis	ICD-10-CM
I74.01	Saddle embolus of abdominal aorta	Diagnosis	ICD-10-CM
I74.09	Other arterial embolism and thrombosis of abdominal aorta	Diagnosis	ICD-10-CM
I74.1	Embolism and thrombosis of other and unspecified parts of aorta	Diagnosis	ICD-10-CM
I74.10	Embolism and thrombosis of unspecified parts of aorta	Diagnosis	ICD-10-CM
I74.11	Embolism and thrombosis of thoracic aorta	Diagnosis	ICD-10-CM
I74.19	Embolism and thrombosis of other parts of aorta	Diagnosis	ICD-10-CM
I74.2	Embolism and thrombosis of arteries of the upper extremities	Diagnosis	ICD-10-CM
I74.3	Embolism and thrombosis of arteries of the lower extremities	Diagnosis	ICD-10-CM
I74.4	Embolism and thrombosis of arteries of extremities, unspecified	Diagnosis	ICD-10-CM
I74.5	Embolism and thrombosis of iliac artery	Diagnosis	ICD-10-CM
I74.8	Embolism and thrombosis of other arteries	Diagnosis	ICD-10-CM
I74.9	Embolism and thrombosis of unspecified artery	Diagnosis	ICD-10-CM
I75	Atheroembolism	Diagnosis	ICD-10-CM
I75.0	Atheroembolism of extremities	Diagnosis	ICD-10-CM
I75.01	Atheroembolism of upper extremity	Diagnosis	ICD-10-CM
I75.011	Atheroembolism of right upper extremity	Diagnosis	ICD-10-CM
I75.012	Atheroembolism of left upper extremity	Diagnosis	ICD-10-CM
I75.013	Atheroembolism of bilateral upper extremities	Diagnosis	ICD-10-CM
I75.019	Atheroembolism of unspecified upper extremity	Diagnosis	ICD-10-CM
I75.02	Atheroembolism of lower extremity	Diagnosis	ICD-10-CM
I75.021	Atheroembolism of right lower extremity	Diagnosis	ICD-10-CM
I75.022	Atheroembolism of left lower extremity	Diagnosis	ICD-10-CM
I75.023	Atheroembolism of bilateral lower extremities	Diagnosis	ICD-10-CM
I75.029	Atheroembolism of unspecified lower extremity	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I75.8	Atheroembolism of other sites	Diagnosis	ICD-10-CM
I75.81	Atheroembolism of kidney	Diagnosis	ICD-10-CM
I75.89	Atheroembolism of other site	Diagnosis	ICD-10-CM
I76	Septic arterial embolism	Diagnosis	ICD-10-CM
I77	Other disorders of arteries and arterioles	Diagnosis	ICD-10-CM
I77.0	Arteriovenous fistula, acquired	Diagnosis	ICD-10-CM
I77.1	Stricture of artery	Diagnosis	ICD-10-CM
I77.2	Rupture of artery	Diagnosis	ICD-10-CM
I77.3	Arterial fibromuscular dysplasia	Diagnosis	ICD-10-CM
I77.4	Celiac artery compression syndrome	Diagnosis	ICD-10-CM
I77.5	Necrosis of artery	Diagnosis	ICD-10-CM
I77.6	Arteritis, unspecified	Diagnosis	ICD-10-CM
I77.7	Other arterial dissection	Diagnosis	ICD-10-CM
I77.70	Dissection of unspecified artery	Diagnosis	ICD-10-CM
I77.71	Dissection of carotid artery	Diagnosis	ICD-10-CM
I77.72	Dissection of iliac artery	Diagnosis	ICD-10-CM
I77.73	Dissection of renal artery	Diagnosis	ICD-10-CM
I77.74	Dissection of vertebral artery	Diagnosis	ICD-10-CM
I77.75	Dissection of other precerebral arteries	Diagnosis	ICD-10-CM
I77.76	Dissection of artery of upper extremity	Diagnosis	ICD-10-CM
I77.77	Dissection of artery of lower extremity	Diagnosis	ICD-10-CM
I77.79	Dissection of other specified artery	Diagnosis	ICD-10-CM
I77.8	Other specified disorders of arteries and arterioles	Diagnosis	ICD-10-CM
I77.81	Aortic ectasia	Diagnosis	ICD-10-CM
I77.810	Thoracic aortic ectasia	Diagnosis	ICD-10-CM
I77.811	Abdominal aortic ectasia	Diagnosis	ICD-10-CM
I77.812	Thoracoabdominal aortic ectasia	Diagnosis	ICD-10-CM
I77.819	Aortic ectasia, unspecified site	Diagnosis	ICD-10-CM
I77.89	Other specified disorders of arteries and arterioles	Diagnosis	ICD-10-CM
I77.9	Disorder of arteries and arterioles, unspecified	Diagnosis	ICD-10-CM
I78	Diseases of capillaries	Diagnosis	ICD-10-CM
I78.0	Hereditary hemorrhagic telangiectasia	Diagnosis	ICD-10-CM
I82.21	Embolism and thrombosis of superior vena cava	Diagnosis	ICD-10-CM
I82.210	Acute embolism and thrombosis of superior vena cava	Diagnosis	ICD-10-CM
I82.211	Chronic embolism and thrombosis of superior vena cava	Diagnosis	ICD-10-CM
I82.22	Embolism and thrombosis of inferior vena cava	Diagnosis	ICD-10-CM
I82.220	Acute embolism and thrombosis of inferior vena cava	Diagnosis	ICD-10-CM
I82.221	Chronic embolism and thrombosis of inferior vena cava	Diagnosis	ICD-10-CM
I87.00	Postthrombotic syndrome without complications	Diagnosis	ICD-10-CM
I87.001	Postthrombotic syndrome without complications of right lower extremity	Diagnosis	ICD-10-CM
I87.002	Postthrombotic syndrome without complications of left lower extremity	Diagnosis	ICD-10-CM
I87.003	Postthrombotic syndrome without complications of bilateral lower extremity	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I87.009	Postthrombotic syndrome without complications of unspecified extremity	Diagnosis	ICD-10-CM
I87.01	Postthrombotic syndrome with ulcer	Diagnosis	ICD-10-CM
I87.011	Postthrombotic syndrome with ulcer of right lower extremity	Diagnosis	ICD-10-CM
I87.012	Postthrombotic syndrome with ulcer of left lower extremity	Diagnosis	ICD-10-CM
I87.013	Postthrombotic syndrome with ulcer of bilateral lower extremity	Diagnosis	ICD-10-CM
I87.019	Postthrombotic syndrome with ulcer of unspecified lower extremity	Diagnosis	ICD-10-CM
I87.02	Postthrombotic syndrome with inflammation	Diagnosis	ICD-10-CM
I87.021	Postthrombotic syndrome with inflammation of right lower extremity	Diagnosis	ICD-10-CM
I87.022	Postthrombotic syndrome with inflammation of left lower extremity	Diagnosis	ICD-10-CM
I87.023	Postthrombotic syndrome with inflammation of bilateral lower extremity	Diagnosis	ICD-10-CM
I87.029	Postthrombotic syndrome with inflammation of unspecified lower extremity	Diagnosis	ICD-10-CM
I87.03	Postthrombotic syndrome with ulcer and inflammation	Diagnosis	ICD-10-CM
I87.031	Postthrombotic syndrome with ulcer and inflammation of right lower extremity	Diagnosis	ICD-10-CM
I87.032	Postthrombotic syndrome with ulcer and inflammation of left lower extremity	Diagnosis	ICD-10-CM
I87.033	Postthrombotic syndrome with ulcer and inflammation of bilateral lower extremity	Diagnosis	ICD-10-CM
I87.039	Postthrombotic syndrome with ulcer and inflammation of unspecified lower extremity	Diagnosis	ICD-10-CM
I87.09	Postthrombotic syndrome with other complications	Diagnosis	ICD-10-CM
I87.091	Postthrombotic syndrome with other complications of right lower extremity	Diagnosis	ICD-10-CM
I87.092	Postthrombotic syndrome with other complications of left lower extremity	Diagnosis	ICD-10-CM
I87.093	Postthrombotic syndrome with other complications of bilateral lower extremity	Diagnosis	ICD-10-CM
I87.099	Postthrombotic syndrome with other complications of unspecified lower extremity	Diagnosis	ICD-10-CM
I97.13	Postprocedural heart failure	Diagnosis	ICD-10-CM
I97.130	Postprocedural heart failure following cardiac surgery	Diagnosis	ICD-10-CM
I97.131	Postprocedural heart failure following other surgery	Diagnosis	ICD-10-CM
P29.3	Persistent fetal circulation	Diagnosis	ICD-10-CM
P29.38	Oth cardiovasc disorders originating in the perinatal period	Diagnosis	ICD-10-CM
P29.8	Other persistent fetal circulation	Diagnosis	ICD-10-CM
Q20	Congenital malformations of cardiac chambers and connections	Diagnosis	ICD-10-CM
Q20.0	Common arterial trunk	Diagnosis	ICD-10-CM
Q20.1	Double outlet right ventricle	Diagnosis	ICD-10-CM
Q20.2	Double outlet left ventricle	Diagnosis	ICD-10-CM
Q20.3	Discordant ventriculoarterial connection	Diagnosis	ICD-10-CM
Q20.4	Double inlet ventricle	Diagnosis	ICD-10-CM
Q20.5	Discordant atrioventricular connection	Diagnosis	ICD-10-CM
Q20.6	Isomerism of atrial appendages	Diagnosis	ICD-10-CM
Q20.8	Oth congenital malform of cardiac chambers and connections	Diagnosis	ICD-10-CM
Q20.9	Congenital malform of cardiac chambers and connections, unsp	Diagnosis	ICD-10-CM
Q21	Congenital malformations of cardiac septa	Diagnosis	ICD-10-CM
Q21.0	Ventricular septal defect	Diagnosis	ICD-10-CM
Q21.1	Atrial septal defect	Diagnosis	ICD-10-CM
Q21.2	Atrioventricular septal defect	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
Q21.3	Tetralogy of Fallot	Diagnosis	ICD-10-CM
Q21.4	Aortopulmonary septal defect	Diagnosis	ICD-10-CM
Q21.8	Other congenital malformations of cardiac septa	Diagnosis	ICD-10-CM
Q21.9	Congenital malformation of cardiac septum, unspecified	Diagnosis	ICD-10-CM
Q22	Congenital malformations of pulmonary and tricuspid valves	Diagnosis	ICD-10-CM
Q22.0	Pulmonary valve atresia	Diagnosis	ICD-10-CM
Q22.1	Congenital pulmonary valve stenosis	Diagnosis	ICD-10-CM
Q22.2	Congenital pulmonary valve insufficiency	Diagnosis	ICD-10-CM
Q22.3	Other congenital malformations of pulmonary valve	Diagnosis	ICD-10-CM
Q22.4	Congenital tricuspid stenosis	Diagnosis	ICD-10-CM
Q22.5	Ebstein's anomaly	Diagnosis	ICD-10-CM
Q22.6	Hypoplastic right heart syndrome	Diagnosis	ICD-10-CM
Q22.8	Other congenital malformations of tricuspid valve	Diagnosis	ICD-10-CM
Q22.9	Congenital malformation of tricuspid valve, unspecified	Diagnosis	ICD-10-CM
Q23	Congenital malformations of aortic and mitral valves	Diagnosis	ICD-10-CM
Q23.0	Congenital stenosis of aortic valve	Diagnosis	ICD-10-CM
Q23.1	Congenital insufficiency of aortic valve	Diagnosis	ICD-10-CM
Q23.2	Congenital mitral stenosis	Diagnosis	ICD-10-CM
Q23.3	Congenital mitral insufficiency	Diagnosis	ICD-10-CM
Q23.4	Hypoplastic left heart syndrome	Diagnosis	ICD-10-CM
Q23.8	Other congenital malformations of aortic and mitral valves	Diagnosis	ICD-10-CM
Q23.9	Congenital malformation of aortic and mitral valves, unsp	Diagnosis	ICD-10-CM
Q24	Other congenital malformations of heart	Diagnosis	ICD-10-CM
Q24.0	Dextrocardia	Diagnosis	ICD-10-CM
Q24.1	Levocardia	Diagnosis	ICD-10-CM
Q24.2	Cor triatriatum	Diagnosis	ICD-10-CM
Q24.3	Pulmonary infundibular stenosis	Diagnosis	ICD-10-CM
Q24.4	Congenital subaortic stenosis	Diagnosis	ICD-10-CM
Q24.5	Malformation of coronary vessels	Diagnosis	ICD-10-CM
Q24.6	Congenital heart block	Diagnosis	ICD-10-CM
Q24.8	Other specified congenital malformations of heart	Diagnosis	ICD-10-CM
Q24.9	Congenital malformation of heart, unspecified	Diagnosis	ICD-10-CM
Q25.0	Patent ductus arteriosus	Diagnosis	ICD-10-CM
Q25.1	Coarctation of aorta	Diagnosis	ICD-10-CM
Q25.21	Interruption of aortic arch	Diagnosis	ICD-10-CM
Q25.29	Other atresia of aorta	Diagnosis	ICD-10-CM
Q25.3	Supravalvular aortic stenosis	Diagnosis	ICD-10-CM
Q25.40	Congenital malformation of aorta unspecified	Diagnosis	ICD-10-CM
Q25.41	Absence and aplasia of aorta	Diagnosis	ICD-10-CM
Q25.42	Hypoplasia of aorta	Diagnosis	ICD-10-CM
Q25.43	Congenital aneurysm of aorta	Diagnosis	ICD-10-CM
Q25.44	Congenital dilation of aorta	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
Q25.45	Double aortic arch	Diagnosis	ICD-10-CM
Q25.46	Tortuous aortic arch	Diagnosis	ICD-10-CM
Q25.47	Right aortic arch	Diagnosis	ICD-10-CM
Q25.48	Anomalous origin of subclavian artery	Diagnosis	ICD-10-CM
Q25.49	Other congenital malformations of aorta	Diagnosis	ICD-10-CM
Q25.5	Atresia of pulmonary artery	Diagnosis	ICD-10-CM
Q25.6	Stenosis of pulmonary artery	Diagnosis	ICD-10-CM
Q25.71	Coarctation of pulmonary artery	Diagnosis	ICD-10-CM
Q25.72	Congenital pulmonary arteriovenous malformation	Diagnosis	ICD-10-CM
Q25.79	Other congenital malformations of pulmonary artery	Diagnosis	ICD-10-CM
Q25.8	Other congenital malformations of other great arteries	Diagnosis	ICD-10-CM
Q25.9	Congenital malformation of great arteries, unspecified	Diagnosis	ICD-10-CM
Q26.0	Congenital stenosis of vena cava	Diagnosis	ICD-10-CM
Q26.1	Persistent left superior vena cava	Diagnosis	ICD-10-CM
Q26.2	Total anomalous pulmonary venous connection	Diagnosis	ICD-10-CM
Q26.3	Partial anomalous pulmonary venous connection	Diagnosis	ICD-10-CM
Q26.4	Anomalous pulmonary venous connection, unspecified	Diagnosis	ICD-10-CM
Q87.40	Marfan's syndrome, unspecified	Diagnosis	ICD-10-CM
Q87.41	Marfan's syndrome with cardiovascular manifestations	Diagnosis	ICD-10-CM
Q87.410	Marfan's syndrome with aortic dilation	Diagnosis	ICD-10-CM
Q87.418	Marfan's syndrome with other cardiovascular manifestations	Diagnosis	ICD-10-CM
Q87.82	Arterial tortuosity syndrome	Diagnosis	ICD-10-CM
Q90.0	Trisomy 21, nonmosaicism (meiotic nondisjunction)	Diagnosis	ICD-10-CM
Q90.1	Trisomy 21, mosaicism (mitotic nondisjunction)	Diagnosis	ICD-10-CM
Q90.2	Trisomy 21, translocation	Diagnosis	ICD-10-CM
Q90.9	Down syndrome, unspecified	Diagnosis	ICD-10-CM
Q91.0	Trisomy 18, nonmosaicism (meiotic nondisjunction)	Diagnosis	ICD-10-CM
Q91.1	Trisomy 18, mosaicism (mitotic nondisjunction)	Diagnosis	ICD-10-CM
Q91.2	Trisomy 18, translocation	Diagnosis	ICD-10-CM
Q91.3	Trisomy 18, unspecified	Diagnosis	ICD-10-CM
Q91.4	Trisomy 13, nonmosaicism (meiotic nondisjunction)	Diagnosis	ICD-10-CM
Q91.5	Trisomy 13, mosaicism (mitotic nondisjunction)	Diagnosis	ICD-10-CM
Q91.6	Trisomy 13, translocation	Diagnosis	ICD-10-CM
Q91.7	Trisomy 13, unspecified	Diagnosis	ICD-10-CM
Q93.81	Velo-cardio-facial syndrome	Diagnosis	ICD-10-CM
Q93.82	Williams syndrome	Diagnosis	ICD-10-CM
T82.211A	Breakdown (mechanical) of coronary artery bypass graft, initial encounter	Diagnosis	ICD-10-CM
T82.212A	Displacement of coronary artery bypass graft, initial encounter	Diagnosis	ICD-10-CM
T82.213A	Leakage of coronary artery bypass graft, initial encounter	Diagnosis	ICD-10-CM
T82.218A	Other mechanical complication of coronary artery bypass graft, initial encounter	Diagnosis	ICD-10-CM
T86.22	Heart transplant failure	Diagnosis	ICD-10-CM
V45.81	Postprocedural aortocoronary bypass status	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
V45.82	Postprocedural percutaneous transluminal coronary angioplasty status	Diagnosis	ICD-9-CM
Z95.1	Presence of aortocoronary bypass graft	Diagnosis	ICD-10-CM
Z95.5	Presence of coronary angioplasty implant and graft	Diagnosis	ICD-10-CM
Z98.61	Coronary angioplasty status	Diagnosis	ICD-10-CM
Cardiovascular Disease			
00.40	Procedure on single vessel	Procedure	ICD-9-CM
00.41	Procedure on two vessels	Procedure	ICD-9-CM
00.42	Procedure on three vessels	Procedure	ICD-9-CM
00.43	Procedure on four or more vessels	Procedure	ICD-9-CM
00.44	Procedure on vessel bifurcation	Procedure	ICD-9-CM
00.45	Insertion of one vascular stent	Procedure	ICD-9-CM
00.46	Insertion of two vascular stents	Procedure	ICD-9-CM
00.47	Insertion of three vascular stents	Procedure	ICD-9-CM
00.48	Insertion of four or more vascular stents	Procedure	ICD-9-CM
00.66	Percutaneous transluminal coronary angioplasty [PTCA]	Procedure	ICD-9-CM
0210083	Bypass Coronary Artery, One Artery from Coronary Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0210088	Bypass Coronary Artery, One Artery from Right Internal Mammary with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0210089	Bypass Coronary Artery, One Artery from Left Internal Mammary with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021008C	Bypass Coronary Artery, One Artery from Thoracic Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021008F	Bypass Coronary Artery, One Artery from Abdominal Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021008W	Bypass Coronary Artery, One Artery from Aorta with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0210093	Bypass Coronary Artery, One Artery from Coronary Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
0210098	Bypass Coronary Artery, One Artery from Right Internal Mammary with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
0210099	Bypass Coronary Artery, One Artery from Left Internal Mammary with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021009C	Bypass Coronary Artery, One Artery from Thoracic Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021009F	Bypass Coronary Artery, One Artery from Abdominal Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021009W	Bypass Coronary Artery, One Artery from Aorta with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
02100A3	Bypass Coronary Artery, One Artery from Coronary Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02100A8	Bypass Coronary Artery, One Artery from Right Internal Mammary with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02100A9	Bypass Coronary Artery, One Artery from Left Internal Mammary with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02100AC	Bypass Coronary Artery, One Artery from Thoracic Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02100AF	Bypass Coronary Artery, One Artery from Abdominal Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02100AW	Bypass Coronary Artery, One Artery from Aorta with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02100J3	Bypass Coronary Artery, One Artery from Coronary Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02100J8	Bypass Coronary Artery, One Artery from Right Internal Mammary with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02100J9	Bypass Coronary Artery, One Artery from Left Internal Mammary with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02100JC	Bypass Coronary Artery, One Artery from Thoracic Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02100JF	Bypass Coronary Artery, One Artery from Abdominal Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02100JW	Bypass Coronary Artery, One Artery from Aorta with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02100K3	Bypass Coronary Artery, One Artery from Coronary Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02100K8	Bypass Coronary Artery, One Artery from Right Internal Mammary with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02100K9	Bypass Coronary Artery, One Artery from Left Internal Mammary with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02100KC	Bypass Coronary Artery, One Artery from Thoracic Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02100KF	Bypass Coronary Artery, One Artery from Abdominal Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02100KW	Bypass Coronary Artery, One Artery from Aorta with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02100Z3	Bypass Coronary Artery, One Artery from Coronary Artery, Open Approach	Procedure	ICD-10-PCS
02100Z8	Bypass Coronary Artery, One Artery from Right Internal Mammary, Open Approach	Procedure	ICD-10-PCS
02100Z9	Bypass Coronary Artery, One Artery from Left Internal Mammary, Open Approach	Procedure	ICD-10-PCS
02100ZC	Bypass Coronary Artery, One Artery from Thoracic Artery, Open Approach	Procedure	ICD-10-PCS
02100ZF	Bypass Coronary Artery, One Artery from Abdominal Artery, Open Approach	Procedure	ICD-10-PCS
0210344	Bypass Coronary Artery, One Artery from Coronary Vein with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02103D4	Bypass Coronary Artery, One Artery from Coronary Vein with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
0210444	Bypass Coronary Artery, One Artery from Coronary Vein with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0210483	Bypass Coronary Artery, One Artery from Coronary Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0210488	Bypass Coronary Artery, One Artery from Right Internal Mammary with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0210489	Bypass Coronary Artery, One Artery from Left Internal Mammary with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021048C	Bypass Coronary Artery, One Artery from Thoracic Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021048F	Bypass Coronary Artery, One Artery from Abdominal Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021048W	Bypass Coronary Artery, One Artery from Aorta with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0210493	Bypass Coronary Artery, One Artery from Coronary Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0210498	Bypass Coronary Artery, One Artery from Right Internal Mammary with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0210499	Bypass Coronary Artery, One Artery from Left Internal Mammary with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021049C	Bypass Coronary Artery, One Artery from Thoracic Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021049F	Bypass Coronary Artery, One Artery from Abdominal Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021049W	Bypass Coronary Artery, One Artery from Aorta with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104A3	Bypass Coronary Artery, One Artery from Coronary Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104A8	Bypass Coronary Artery, One Artery from Right Internal Mammary with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104A9	Bypass Coronary Artery, One Artery from Left Internal Mammary with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104AC	Bypass Coronary Artery, One Artery from Thoracic Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104AF	Bypass Coronary Artery, One Artery from Abdominal Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104AW	Bypass Coronary Artery, One Artery from Aorta with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104D4	Bypass Coronary Artery, One Artery from Coronary Vein with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02104J3	Bypass Coronary Artery, One Artery from Coronary Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104J8	Bypass Coronary Artery, One Artery from Right Internal Mammary with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104J9	Bypass Coronary Artery, One Artery from Left Internal Mammary with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104JC	Bypass Coronary Artery, One Artery from Thoracic Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104JF	Bypass Coronary Artery, One Artery from Abdominal Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104JW	Bypass Coronary Artery, One Artery from Aorta with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104K3	Bypass Coronary Artery, One Artery from Coronary Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104K8	Bypass Coronary Artery, One Artery from Right Internal Mammary with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104K9	Bypass Coronary Artery, One Artery from Left Internal Mammary with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104KC	Bypass Coronary Artery, One Artery from Thoracic Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104KF	Bypass Coronary Artery, One Artery from Abdominal Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104KW	Bypass Coronary Artery, One Artery from Aorta with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104Z3	Bypass Coronary Artery, One Artery from Coronary Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104Z8	Bypass Coronary Artery, One Artery from Right Internal Mammary, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104Z9	Bypass Coronary Artery, One Artery from Left Internal Mammary, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104ZC	Bypass Coronary Artery, One Artery from Thoracic Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02104ZF	Bypass Coronary Artery, One Artery from Abdominal Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0211083	Bypass Coronary Artery, Two Arteries from Coronary Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0211088	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0211089	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021108C	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
021108F	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021108W	Bypass Coronary Artery, Two Arteries from Aorta with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0211093	Bypass Coronary Artery, Two Arteries from Coronary Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
0211098	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
0211099	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021109C	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021109F	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021109W	Bypass Coronary Artery, Two Arteries from Aorta with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
02110A3	Bypass Coronary Artery, Two Arteries from Coronary Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02110A8	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02110A9	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02110AC	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02110AF	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02110AW	Bypass Coronary Artery, Two Arteries from Aorta with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02110J3	Bypass Coronary Artery, Two Arteries from Coronary Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02110J8	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02110J9	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02110JC	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02110JF	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02110JW	Bypass Coronary Artery, Two Arteries from Aorta with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02110K3	Bypass Coronary Artery, Two Arteries from Coronary Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02110K8	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02110K9	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02110KC	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02110KF	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02110KW	Bypass Coronary Artery, Two Arteries from Aorta with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02110Z3	Bypass Coronary Artery, Two Arteries from Coronary Artery, Open Approach	Procedure	ICD-10-PCS
02110Z8	Bypass Coronary Artery, Two Arteries from Right Internal Mammary, Open Approach	Procedure	ICD-10-PCS
02110Z9	Bypass Coronary Artery, Two Arteries from Left Internal Mammary, Open Approach	Procedure	ICD-10-PCS
02110ZC	Bypass Coronary Artery, Two Arteries from Thoracic Artery, Open Approach	Procedure	ICD-10-PCS
02110ZF	Bypass Coronary Artery, Two Arteries from Abdominal Artery, Open Approach	Procedure	ICD-10-PCS
0211344	Bypass Coronary Artery, Two Arteries from Coronary Vein with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02113D4	Bypass Coronary Artery, Two Arteries from Coronary Vein with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
0211444	Bypass Coronary Artery, Two Arteries from Coronary Vein with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0211483	Bypass Coronary Artery, Two Arteries from Coronary Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0211488	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0211489	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021148C	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021148F	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021148W	Bypass Coronary Artery, Two Arteries from Aorta with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0211493	Bypass Coronary Artery, Two Arteries from Coronary Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0211498	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0211499	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021149C	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
021149F	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021149W	Bypass Coronary Artery, Two Arteries from Aorta with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114A3	Bypass Coronary Artery, Two Arteries from Coronary Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114A8	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114A9	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114AC	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114AF	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114AW	Bypass Coronary Artery, Two Arteries from Aorta with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114D4	Bypass Coronary Artery, Two Arteries from Coronary Vein with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114J3	Bypass Coronary Artery, Two Arteries from Coronary Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114J8	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114J9	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114JC	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114JF	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114JW	Bypass Coronary Artery, Two Arteries from Aorta with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114K3	Bypass Coronary Artery, Two Arteries from Coronary Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114K8	Bypass Coronary Artery, Two Arteries from Right Internal Mammary with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114K9	Bypass Coronary Artery, Two Arteries from Left Internal Mammary with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114KC	Bypass Coronary Artery, Two Arteries from Thoracic Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114KF	Bypass Coronary Artery, Two Arteries from Abdominal Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114KW	Bypass Coronary Artery, Two Arteries from Aorta with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02114Z3	Bypass Coronary Artery, Two Arteries from Coronary Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114Z8	Bypass Coronary Artery, Two Arteries from Right Internal Mammary, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114Z9	Bypass Coronary Artery, Two Arteries from Left Internal Mammary, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114ZC	Bypass Coronary Artery, Two Arteries from Thoracic Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02114ZF	Bypass Coronary Artery, Two Arteries from Abdominal Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0212083	Bypass Coronary Artery, Three Arteries from Coronary Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0212088	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0212089	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021208C	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021208F	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021208W	Bypass Coronary Artery, Three Arteries from Aorta with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0212093	Bypass Coronary Artery, Three Arteries from Coronary Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
0212098	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
0212099	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021209C	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021209F	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021209W	Bypass Coronary Artery, Three Arteries from Aorta with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
02120A3	Bypass Coronary Artery, Three Arteries from Coronary Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02120A8	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02120A9	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02120AC	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02120AF	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02120AW	Bypass Coronary Artery, Three Arteries from Aorta with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02120J3	Bypass Coronary Artery, Three Arteries from Coronary Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02120J8	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02120J9	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02120JC	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02120JF	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02120JW	Bypass Coronary Artery, Three Arteries from Aorta with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02120K3	Bypass Coronary Artery, Three Arteries from Coronary Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02120K8	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02120K9	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02120KC	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02120KF	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02120KW	Bypass Coronary Artery, Three Arteries from Aorta with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02120Z3	Bypass Coronary Artery, Three Arteries from Coronary Artery, Open Approach	Procedure	ICD-10-PCS
02120Z8	Bypass Coronary Artery, Three Arteries from Right Internal Mammary, Open Approach	Procedure	ICD-10-PCS
02120Z9	Bypass Coronary Artery, Three Arteries from Left Internal Mammary, Open Approach	Procedure	ICD-10-PCS
02120ZC	Bypass Coronary Artery, Three Arteries from Thoracic Artery, Open Approach	Procedure	ICD-10-PCS
02120ZF	Bypass Coronary Artery, Three Arteries from Abdominal Artery, Open Approach	Procedure	ICD-10-PCS
0212344	Bypass Coronary Artery, Three Arteries from Coronary Vein with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02123D4	Bypass Coronary Artery, Three Arteries from Coronary Vein with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
0212444	Bypass Coronary Artery, Three Arteries from Coronary Vein with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0212483	Bypass Coronary Artery, Three Arteries from Coronary Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0212488	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0212489	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021248C	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021248F	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021248W	Bypass Coronary Artery, Three Arteries from Aorta with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0212493	Bypass Coronary Artery, Three Arteries from Coronary Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0212498	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0212499	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021249C	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021249F	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021249W	Bypass Coronary Artery, Three Arteries from Aorta with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124A3	Bypass Coronary Artery, Three Arteries from Coronary Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124A8	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124A9	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124AC	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124AF	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124AW	Bypass Coronary Artery, Three Arteries from Aorta with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124D4	Bypass Coronary Artery, Three Arteries from Coronary Vein with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124J3	Bypass Coronary Artery, Three Arteries from Coronary Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124J8	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124J9	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02124JC	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124JF	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124JW	Bypass Coronary Artery, Three Arteries from Aorta with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124K3	Bypass Coronary Artery, Three Arteries from Coronary Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124K8	Bypass Coronary Artery, Three Arteries from Right Internal Mammary with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124K9	Bypass Coronary Artery, Three Arteries from Left Internal Mammary with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124KC	Bypass Coronary Artery, Three Arteries from Thoracic Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124KF	Bypass Coronary Artery, Three Arteries from Abdominal Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124KW	Bypass Coronary Artery, Three Arteries from Aorta with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124Z3	Bypass Coronary Artery, Three Arteries from Coronary Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124Z8	Bypass Coronary Artery, Three Arteries from Right Internal Mammary, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124Z9	Bypass Coronary Artery, Three Arteries from Left Internal Mammary, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124ZC	Bypass Coronary Artery, Three Arteries from Thoracic Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02124ZF	Bypass Coronary Artery, Three Arteries from Abdominal Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0213083	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0213088	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0213089	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021308C	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021308F	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
021308W	Bypass Coronary Artery, Four or More Arteries from Aorta with Zooplastic Tissue, Open Approach	Procedure	ICD-10-PCS
0213093	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0213098	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
0213099	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021309C	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021309F	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
021309W	Bypass Coronary Artery, Four or More Arteries from Aorta with Autologous Venous Tissue, Open Approach	Procedure	ICD-10-PCS
02130A3	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02130A8	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02130A9	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02130AC	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02130AF	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02130AW	Bypass Coronary Artery, Four or More Arteries from Aorta with Autologous Arterial Tissue, Open Approach	Procedure	ICD-10-PCS
02130J3	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02130J8	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02130J9	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02130JC	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02130JF	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02130JW	Bypass Coronary Artery, Four or More Arteries from Aorta with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02130K3	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02130K8	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02130K9	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02130KC	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02130KF	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02130KW	Bypass Coronary Artery, Four or More Arteries from Aorta with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02130Z3	Bypass Coronary Artery, Four or More Arteries from Coronary Artery, Open Approach	Procedure	ICD-10-PCS
02130Z8	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary, Open Approach	Procedure	ICD-10-PCS
02130Z9	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary, Open Approach	Procedure	ICD-10-PCS
02130ZC	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery, Open Approach	Procedure	ICD-10-PCS
02130ZF	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery, Open Approach	Procedure	ICD-10-PCS
0213344	Bypass Coronary Artery, Four or More Arteries from Coronary Vein with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02133D4	Bypass Coronary Artery, Four or More Arteries from Coronary Vein with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
0213444	Bypass Coronary Artery, Four or More Arteries from Coronary Vein with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0213483	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0213488	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0213489	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021348C	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021348F	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021348W	Bypass Coronary Artery, Four or More Arteries from Aorta with Zooplastic Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0213493	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0213498	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0213499	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021349C	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021349F	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
021349W	Bypass Coronary Artery, Four or More Arteries from Aorta with Autologous Venous Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02134A3	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134A8	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134A9	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134AC	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134AF	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134AW	Bypass Coronary Artery, Four or More Arteries from Aorta with Autologous Arterial Tissue, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134D4	Bypass Coronary Artery, Four or More Arteries from Coronary Vein with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134J3	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134J8	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134J9	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134JC	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134JF	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134JW	Bypass Coronary Artery, Four or More Arteries from Aorta with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134K3	Bypass Coronary Artery, Four or More Arteries from Coronary Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134K8	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134K9	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134KC	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134KF	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134KW	Bypass Coronary Artery, Four or More Arteries from Aorta with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134Z3	Bypass Coronary Artery, Four or More Arteries from Coronary Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134Z8	Bypass Coronary Artery, Four or More Arteries from Right Internal Mammary, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02134Z9	Bypass Coronary Artery, Four or More Arteries from Left Internal Mammary, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134ZC	Bypass Coronary Artery, Four or More Arteries from Thoracic Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02134ZF	Bypass Coronary Artery, Four or More Arteries from Abdominal Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0270046	Dilation of Coronary Artery, One Artery, Bifurcation, with Drug-eluting Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
027004Z	Dilation of Coronary Artery, One Artery with Drug-eluting Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
0270056	Dilation of Coronary Artery, One Artery, Bifurcation, with Two Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027005Z	Dilation of Coronary Artery, One Artery with Two Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
0270066	Dilation of Coronary Artery, One Artery, Bifurcation, with Three Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027006Z	Dilation of Coronary Artery, One Artery with Three Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
0270076	Dilation of Coronary Artery, One Artery, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027007Z	Dilation of Coronary Artery, One Artery with Four or More Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02700D6	Dilation of Coronary Artery, One Artery, Bifurcation, with Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02700DZ	Dilation of Coronary Artery, One Artery with Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02700E6	Dilation of Coronary Artery, One Artery, Bifurcation, with Two Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02700EZ	Dilation of Coronary Artery, One Artery with Two Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02700F6	Dilation of Coronary Artery, One Artery, Bifurcation, with Three Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02700FZ	Dilation of Coronary Artery, One Artery with Three Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02700G6	Dilation of Coronary Artery, One Artery, Bifurcation, with Four or More Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02700GZ	Dilation of Coronary Artery, One Artery with Four or More Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02700T6	Dilation of Coronary Artery, One Artery, Bifurcation, with Radioactive Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02700TZ	Dilation of Coronary Artery, One Artery with Radioactive Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02700Z6	Dilation of Coronary Artery, One Artery, Bifurcation, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02700ZZ	Dilation of Coronary Artery, One Artery, Open Approach	Procedure	ICD-10-PCS
0270346	Dilation of Coronary Artery, One Artery, Bifurcation, with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
027034Z	Dilation of Coronary Artery, One Artery with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
0270356	Dilation of Coronary Artery, One Artery, Bifurcation, with Two Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027035Z	Dilation of Coronary Artery, One Artery with Two Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
0270366	Dilation of Coronary Artery, One Artery, Bifurcation, with Three Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027036Z	Dilation of Coronary Artery, One Artery with Three Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
0270376	Dilation of Coronary Artery, One Artery, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027037Z	Dilation of Coronary Artery, One Artery with Four or More Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02703D6	Dilation of Coronary Artery, One Artery, Bifurcation, with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02703DZ	Dilation of Coronary Artery, One Artery with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02703E6	Dilation of Coronary Artery, One Artery, Bifurcation, with Two Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02703EZ	Dilation of Coronary Artery, One Artery with Two Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02703F6	Dilation of Coronary Artery, One Artery, Bifurcation, with Three Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02703FZ	Dilation of Coronary Artery, One Artery with Three Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02703G6	Dilation of Coronary Artery, One Artery, Bifurcation, with Four or More Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02703GZ	Dilation of Coronary Artery, One Artery with Four or More Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02703T6	Dilation of Coronary Artery, One Artery, Bifurcation, with Radioactive Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02703TZ	Dilation of Coronary Artery, One Artery with Radioactive Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02703Z6	Dilation of Coronary Artery, One Artery, Bifurcation, Percutaneous Approach	Procedure	ICD-10-PCS
02703ZZ	Dilation of Coronary Artery, One Artery, Percutaneous Approach	Procedure	ICD-10-PCS
0270446	Dilation of Coronary Artery, One Artery, Bifurcation, with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
027044Z	Dilation of Coronary Artery, One Artery with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0270456	Dilation of Coronary Artery, One Artery, Bifurcation, with Two Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027045Z	Dilation of Coronary Artery, One Artery with Two Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0270466	Dilation of Coronary Artery, One Artery, Bifurcation, with Three Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027046Z	Dilation of Coronary Artery, One Artery with Three Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0270476	Dilation of Coronary Artery, One Artery, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027047Z	Dilation of Coronary Artery, One Artery with Four or More Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704D6	Dilation of Coronary Artery, One Artery, Bifurcation, with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704DZ	Dilation of Coronary Artery, One Artery with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704E6	Dilation of Coronary Artery, One Artery, Bifurcation, with Two Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704EZ	Dilation of Coronary Artery, One Artery with Two Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704F6	Dilation of Coronary Artery, One Artery, Bifurcation, with Three Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704FZ	Dilation of Coronary Artery, One Artery with Three Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704G6	Dilation of Coronary Artery, One Artery, Bifurcation, with Four or More Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704GZ	Dilation of Coronary Artery, One Artery with Four or More Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704T6	Dilation of Coronary Artery, One Artery, Bifurcation, with Radioactive Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704TZ	Dilation of Coronary Artery, One Artery with Radioactive Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704Z6	Dilation of Coronary Artery, One Artery, Bifurcation, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02704ZZ	Dilation of Coronary Artery, One Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0271046	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
027104Z	Dilation of Coronary Artery, Two Arteries with Drug-eluting Intraluminal Device, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0271056	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027105Z	Dilation of Coronary Artery, Two Arteries with Two Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
0271066	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027106Z	Dilation of Coronary Artery, Two Arteries with Three Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
0271076	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027107Z	Dilation of Coronary Artery, Two Arteries with Four or More Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02710D6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02710DZ	Dilation of Coronary Artery, Two Arteries with Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02710E6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Two Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02710EZ	Dilation of Coronary Artery, Two Arteries with Two Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02710F6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Three Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02710FZ	Dilation of Coronary Artery, Two Arteries with Three Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02710G6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Four or More Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02710GZ	Dilation of Coronary Artery, Two Arteries with Four or More Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02710T6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Radioactive Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02710TZ	Dilation of Coronary Artery, Two Arteries with Radioactive Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02710Z6	Dilation of Coronary Artery, Two Arteries, Bifurcation, Open Approach	Procedure	ICD-10-PCS
02710ZZ	Dilation of Coronary Artery, Two Arteries, Open Approach	Procedure	ICD-10-PCS
0271346	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
027134Z	Dilation of Coronary Artery, Two Arteries with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
0271356	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027135Z	Dilation of Coronary Artery, Two Arteries with Two Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0271366	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027136Z	Dilation of Coronary Artery, Two Arteries with Three Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
0271376	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027137Z	Dilation of Coronary Artery, Two Arteries with Four or More Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02713D6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02713DZ	Dilation of Coronary Artery, Two Arteries with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02713E6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Two Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02713EZ	Dilation of Coronary Artery, Two Arteries with Two Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02713F6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Three Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02713FZ	Dilation of Coronary Artery, Two Arteries with Three Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02713G6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Four or More Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02713GZ	Dilation of Coronary Artery, Two Arteries with Four or More Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02713T6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Radioactive Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02713TZ	Dilation of Coronary Artery, Two Arteries with Radioactive Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02713Z6	Dilation of Coronary Artery, Two Arteries, Bifurcation, Percutaneous Approach	Procedure	ICD-10-PCS
02713ZZ	Dilation of Coronary Artery, Two Arteries, Percutaneous Approach	Procedure	ICD-10-PCS
0271446	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027144Z	Dilation of Coronary Artery, Two Arteries with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0271456	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027145Z	Dilation of Coronary Artery, Two Arteries with Two Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0271466	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027146Z	Dilation of Coronary Artery, Two Arteries with Three Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0271476	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027147Z	Dilation of Coronary Artery, Two Arteries with Four or More Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714D6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714DZ	Dilation of Coronary Artery, Two Arteries with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714E6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Two Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714EZ	Dilation of Coronary Artery, Two Arteries with Two Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714F6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Three Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714FZ	Dilation of Coronary Artery, Two Arteries with Three Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714G6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Four or More Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714GZ	Dilation of Coronary Artery, Two Arteries with Four or More Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714T6	Dilation of Coronary Artery, Two Arteries, Bifurcation, with Radioactive Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714TZ	Dilation of Coronary Artery, Two Arteries with Radioactive Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714Z6	Dilation of Coronary Artery, Two Arteries, Bifurcation, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02714ZZ	Dilation of Coronary Artery, Two Arteries, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0272046	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
027204Z	Dilation of Coronary Artery, Three Arteries with Drug-eluting Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
0272056	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027205Z	Dilation of Coronary Artery, Three Arteries with Two Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
0272066	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027206Z	Dilation of Coronary Artery, Three Arteries with Three Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
0272076	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
027207Z	Dilation of Coronary Artery, Three Arteries with Four or More Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02720D6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02720DZ	Dilation of Coronary Artery, Three Arteries with Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02720E6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Two Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02720EZ	Dilation of Coronary Artery, Three Arteries with Two Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02720F6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Three Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02720FZ	Dilation of Coronary Artery, Three Arteries with Three Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02720G6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Four or More Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02720GZ	Dilation of Coronary Artery, Three Arteries with Four or More Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02720T6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Radioactive Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02720TZ	Dilation of Coronary Artery, Three Arteries with Radioactive Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02720Z6	Dilation of Coronary Artery, Three Arteries, Bifurcation, Open Approach	Procedure	ICD-10-PCS
02720ZZ	Dilation of Coronary Artery, Three Arteries, Open Approach	Procedure	ICD-10-PCS
0272346	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
027234Z	Dilation of Coronary Artery, Three Arteries with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
0272356	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027235Z	Dilation of Coronary Artery, Three Arteries with Two Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
0272366	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027236Z	Dilation of Coronary Artery, Three Arteries with Three Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
0272376	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027237Z	Dilation of Coronary Artery, Three Arteries with Four or More Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02723D6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02723DZ	Dilation of Coronary Artery, Three Arteries with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02723E6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Two Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02723EZ	Dilation of Coronary Artery, Three Arteries with Two Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02723F6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Three Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02723FZ	Dilation of Coronary Artery, Three Arteries with Three Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02723G6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Four or More Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02723GZ	Dilation of Coronary Artery, Three Arteries with Four or More Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02723T6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Radioactive Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02723TZ	Dilation of Coronary Artery, Three Arteries with Radioactive Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02723Z6	Dilation of Coronary Artery, Three Arteries, Bifurcation, Percutaneous Approach	Procedure	ICD-10-PCS
02723ZZ	Dilation of Coronary Artery, Three Arteries, Percutaneous Approach	Procedure	ICD-10-PCS
0272446	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027244Z	Dilation of Coronary Artery, Three Arteries with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0272456	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027245Z	Dilation of Coronary Artery, Three Arteries with Two Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0272466	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027246Z	Dilation of Coronary Artery, Three Arteries with Three Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0272476	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027247Z	Dilation of Coronary Artery, Three Arteries with Four or More Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724D6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724DZ	Dilation of Coronary Artery, Three Arteries with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724E6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Two Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02724EZ	Dilation of Coronary Artery, Three Arteries with Two Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724F6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Three Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724FZ	Dilation of Coronary Artery, Three Arteries with Three Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724G6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Four or More Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724GZ	Dilation of Coronary Artery, Three Arteries with Four or More Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724T6	Dilation of Coronary Artery, Three Arteries, Bifurcation, with Radioactive Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724TZ	Dilation of Coronary Artery, Three Arteries with Radioactive Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724Z6	Dilation of Coronary Artery, Three Arteries, Bifurcation, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02724ZZ	Dilation of Coronary Artery, Three Arteries, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0273046	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
027304Z	Dilation of Coronary Artery, Four or More Arteries with Drug-eluting Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
0273056	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027305Z	Dilation of Coronary Artery, Four or More Arteries with Two Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
0273066	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027306Z	Dilation of Coronary Artery, Four or More Arteries with Three Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
0273076	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
027307Z	Dilation of Coronary Artery, Four or More Arteries with Four or More Drug-eluting Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02730D6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02730DZ	Dilation of Coronary Artery, Four or More Arteries with Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02730E6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Two Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02730EZ	Dilation of Coronary Artery, Four or More Arteries with Two Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02730F6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Three Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02730FZ	Dilation of Coronary Artery, Four or More Arteries with Three Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02730G6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Four or More Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02730GZ	Dilation of Coronary Artery, Four or More Arteries with Four or More Intraluminal Devices, Open Approach	Procedure	ICD-10-PCS
02730T6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Radioactive Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02730TZ	Dilation of Coronary Artery, Four or More Arteries with Radioactive Intraluminal Device, Open Approach	Procedure	ICD-10-PCS
02730Z6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, Open Approach	Procedure	ICD-10-PCS
02730ZZ	Dilation of Coronary Artery, Four or More Arteries, Open Approach	Procedure	ICD-10-PCS
0273346	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
027334Z	Dilation of Coronary Artery, Four or More Arteries with Drug-eluting Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
0273356	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027335Z	Dilation of Coronary Artery, Four or More Arteries with Two Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
0273366	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027336Z	Dilation of Coronary Artery, Four or More Arteries with Three Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
0273376	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
027337Z	Dilation of Coronary Artery, Four or More Arteries with Four or More Drug-eluting Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02733D6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02733DZ	Dilation of Coronary Artery, Four or More Arteries with Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02733E6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Two Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02733EZ	Dilation of Coronary Artery, Four or More Arteries with Two Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02733F6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Three Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02733FZ	Dilation of Coronary Artery, Four or More Arteries with Three Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02733G6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Four or More Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02733GZ	Dilation of Coronary Artery, Four or More Arteries with Four or More Intraluminal Devices, Percutaneous Approach	Procedure	ICD-10-PCS
02733T6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Radioactive Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02733TZ	Dilation of Coronary Artery, Four or More Arteries with Radioactive Intraluminal Device, Percutaneous Approach	Procedure	ICD-10-PCS
02733Z6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, Percutaneous Approach	Procedure	ICD-10-PCS
02733ZZ	Dilation of Coronary Artery, Four or More Arteries, Percutaneous Approach	Procedure	ICD-10-PCS
0273446	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027344Z	Dilation of Coronary Artery, Four or More Arteries with Drug-eluting Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0273456	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Two Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027345Z	Dilation of Coronary Artery, Four or More Arteries with Two Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0273466	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Three Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027346Z	Dilation of Coronary Artery, Four or More Arteries with Three Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0273476	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Four or More Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
027347Z	Dilation of Coronary Artery, Four or More Arteries with Four or More Drug-eluting Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734D6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734DZ	Dilation of Coronary Artery, Four or More Arteries with Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734E6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Two Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734EZ	Dilation of Coronary Artery, Four or More Arteries with Two Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734F6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Three Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734FZ	Dilation of Coronary Artery, Four or More Arteries with Three Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734G6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Four or More Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02734GZ	Dilation of Coronary Artery, Four or More Arteries with Four or More Intraluminal Devices, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734T6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, with Radioactive Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734TZ	Dilation of Coronary Artery, Four or More Arteries with Radioactive Intraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734Z6	Dilation of Coronary Artery, Four or More Arteries, Bifurcation, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02734ZZ	Dilation of Coronary Artery, Four or More Arteries, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02C00Z6	Extirpation of Matter from Coronary Artery, One Artery, Bifurcation, Open Approach	Procedure	ICD-10-PCS
02C00ZZ	Extirpation of Matter from Coronary Artery, One Artery, Open Approach	Procedure	ICD-10-PCS
02C03Z6	Extirpation of Matter from Coronary Artery, One Artery, Bifurcation, Percutaneous Approach	Procedure	ICD-10-PCS
02C03ZZ	Extirpation of Matter from Coronary Artery, One Artery, Percutaneous Approach	Procedure	ICD-10-PCS
02C04Z6	Extirpation of Matter from Coronary Artery, One Artery, Bifurcation, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02C04ZZ	Extirpation of Matter from Coronary Artery, One Artery, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02C10Z6	Extirpation of Matter from Coronary Artery, Two Arteries, Bifurcation, Open	Procedure	ICD-10-PCS
02C10ZZ	Extirpation of Matter from Coronary Artery, Two Arteries, Open Approach	Procedure	ICD-10-PCS
02C13Z6	Extirpation of Matter from Coronary Artery, Two Arteries, Bifurcation, Percutaneous Approach	Procedure	ICD-10-PCS
02C13ZZ	Extirpation of Matter from Coronary Artery, Two Arteries, Percutaneous Approach	Procedure	ICD-10-PCS
02C14Z6	Extirpation of Matter from Coronary Artery, Two Arteries, Bifurcation, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02C14ZZ	Extirpation of Matter from Coronary Artery, Two Arteries, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02C20Z6	Extirpation of Matter from Coronary Artery, Three Arteries, Bifurcation, Open Approach	Procedure	ICD-10-PCS
02C20ZZ	Extirpation of Matter from Coronary Artery, Three Arteries, Open Approach	Procedure	ICD-10-PCS
02C23Z6	Extirpation of Matter from Coronary Artery, Three Arteries, Bifurcation, Percutaneous Approach	Procedure	ICD-10-PCS
02C23ZZ	Extirpation of Matter from Coronary Artery, Three Arteries, Percutaneous Approach	Procedure	ICD-10-PCS
02C24Z6	Extirpation of Matter from Coronary Artery, Three Arteries, Bifurcation, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02C24ZZ	Extirpation of Matter from Coronary Artery, Three Arteries, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02C30Z6	Extirpation of Matter from Coronary Artery, Four or More Arteries, Bifurcation, Open Approach	Procedure	ICD-10-PCS
02C30ZZ	Extirpation of Matter from Coronary Artery, Four or More Arteries, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
02C33Z6	Extirpation of Matter from Coronary Artery, Four or More Arteries, Bifurcation, Percutaneous Approach	Procedure	ICD-10-PCS
02C33ZZ	Extirpation of Matter from Coronary Artery, Four or More Arteries, Percutaneous Approach	Procedure	ICD-10-PCS
02C34Z6	Extirpation of Matter from Coronary Artery, Four or More Arteries, Bifurcation, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
02C34ZZ	Extirpation of Matter from Coronary Artery, Four or More Arteries, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
17.55	Transluminal coronary atherectomy	Procedure	ICD-9-CM
36.03	Open chest coronary artery angioplasty	Procedure	ICD-9-CM
36.04	Intracoronary artery thrombolytic infusion	Procedure	ICD-9-CM
36.06	Insertion of non-drug-eluting coronary artery stent(s)	Procedure	ICD-9-CM
36.07	Insertion of drug-eluting coronary artery stent(s)	Procedure	ICD-9-CM
36.09	Other removal of coronary artery obstruction	Procedure	ICD-9-CM
36.10	Aortocoronary bypass for heart revascularization, not otherwise specified	Procedure	ICD-9-CM
36.11	(Aorto)coronary bypass of one coronary artery	Procedure	ICD-9-CM
36.12	(Aorto)coronary bypass of two coronary arteries	Procedure	ICD-9-CM
36.13	(Aorto)coronary bypass of three coronary arteries	Procedure	ICD-9-CM
36.14	(Aorto)coronary bypass of four or more coronary arteries	Procedure	ICD-9-CM
36.15	Single internal mammary-coronary artery bypass	Procedure	ICD-9-CM
36.16	Double internal mammary-coronary artery bypass	Procedure	ICD-9-CM
36.17	Abdominal-coronary artery bypass	Procedure	ICD-9-CM
36.19	Other bypass anastomosis for heart revascularization	Procedure	ICD-9-CM
36.39	Other heart revascularization	Procedure	ICD-9-CM
398.91	Rheumatic heart failure (congestive)	Diagnosis	ICD-9-CM
3E07017	Introduction of Other Thrombolytic into Coronary Artery, Open Approach	Procedure	ICD-10-PCS
3E070PZ	Introduction of Platelet Inhibitor into Coronary Artery, Open Approach	Procedure	ICD-10-PCS
3E07317	Introduction of Other Thrombolytic into Coronary Artery, Percutaneous Approach	Procedure	ICD-10-PCS
3E073PZ	Introduction of Platelet Inhibitor into Coronary Artery, Percutaneous Approach	Procedure	ICD-10-PCS
402.00	Malignant hypertensive heart disease without heart failure	Diagnosis	ICD-9-CM
402.01	Malignant hypertensive heart disease with heart failure	Diagnosis	ICD-9-CM
402.10	Benign hypertensive heart disease without heart failure	Diagnosis	ICD-9-CM
402.11	Benign hypertensive heart disease with heart failure	Diagnosis	ICD-9-CM
402.90	Unspecified hypertensive heart disease without heart failure	Diagnosis	ICD-9-CM
402.91	Hypertensive heart disease, unspecified, with heart failure	Diagnosis	ICD-9-CM
404.01	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.03	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.11	Hypertensive heart and chronic kidney disease, benign, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
404.13	Hypertensive heart and chronic kidney disease, benign, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.91	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.93	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
410.00	Acute myocardial infarction of anterolateral wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.01	Acute myocardial infarction of anterolateral wall, initial episode of care	Diagnosis	ICD-9-CM
410.02	Acute myocardial infarction of anterolateral wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.10	Acute myocardial infarction of other anterior wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.11	Acute myocardial infarction of other anterior wall, initial episode of care	Diagnosis	ICD-9-CM
410.12	Acute myocardial infarction of other anterior wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.20	Acute myocardial infarction of inferolateral wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.21	Acute myocardial infarction of inferolateral wall, initial episode of care	Diagnosis	ICD-9-CM
410.22	Acute myocardial infarction of inferolateral wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.30	Acute myocardial infarction of inferoposterior wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.31	Acute myocardial infarction of inferoposterior wall, initial episode of care	Diagnosis	ICD-9-CM
410.32	Acute myocardial infarction of inferoposterior wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.40	Acute myocardial infarction of other inferior wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.41	Acute myocardial infarction of other inferior wall, initial episode of care	Diagnosis	ICD-9-CM
410.42	Acute myocardial infarction of other inferior wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.50	Acute myocardial infarction of other lateral wall, episode of care unspecified	Diagnosis	ICD-9-CM
410.51	Acute myocardial infarction of other lateral wall, initial episode of care	Diagnosis	ICD-9-CM
410.52	Acute myocardial infarction of other lateral wall, subsequent episode of care	Diagnosis	ICD-9-CM
410.60	Acute myocardial infarction, true posterior wall infarction, episode of care unspecified	Diagnosis	ICD-9-CM
410.61	Acute myocardial infarction, true posterior wall infarction, initial episode of care	Diagnosis	ICD-9-CM
410.62	Acute myocardial infarction, true posterior wall infarction, subsequent episode of care	Diagnosis	ICD-9-CM
410.70	Acute myocardial infarction, subendocardial infarction, episode of care unspecified	Diagnosis	ICD-9-CM
410.71	Acute myocardial infarction, subendocardial infarction, initial episode of care	Diagnosis	ICD-9-CM
410.72	Acute myocardial infarction, subendocardial infarction, subsequent episode of care	Diagnosis	ICD-9-CM
410.80	Acute myocardial infarction of other specified sites, episode of care unspecified	Diagnosis	ICD-9-CM
410.81	Acute myocardial infarction of other specified sites, initial episode of care	Diagnosis	ICD-9-CM
410.82	Acute myocardial infarction of other specified sites, subsequent episode of care	Diagnosis	ICD-9-CM
410.90	Acute myocardial infarction, unspecified site, episode of care unspecified	Diagnosis	ICD-9-CM
410.91	Acute myocardial infarction, unspecified site, initial episode of care	Diagnosis	ICD-9-CM
410.92	Acute myocardial infarction, unspecified site, subsequent episode of care	Diagnosis	ICD-9-CM
411.0	Postmyocardial infarction syndrome	Diagnosis	ICD-9-CM
411.1	Intermediate coronary syndrome	Diagnosis	ICD-9-CM
411.81	Acute coronary occlusion without myocardial infarction	Diagnosis	ICD-9-CM
411.89	Other acute and subacute form of ischemic heart disease	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
412	Old myocardial infarction	Diagnosis	ICD-9-CM
413.0	Angina decubitus	Diagnosis	ICD-9-CM
413.1	Prinzmetal angina	Diagnosis	ICD-9-CM
413.9	Other and unspecified angina pectoris	Diagnosis	ICD-9-CM
414.00	Coronary atherosclerosis of unspecified type of vessel, native or graft	Diagnosis	ICD-9-CM
414.01	Coronary atherosclerosis of native coronary artery	Diagnosis	ICD-9-CM
414.02	Coronary atherosclerosis of autologous vein bypass graft	Diagnosis	ICD-9-CM
414.03	Coronary atherosclerosis of nonautologous biological bypass graft	Diagnosis	ICD-9-CM
414.04	Coronary atherosclerosis of artery bypass graft	Diagnosis	ICD-9-CM
414.05	Coronary atherosclerosis of unspecified type of bypass graft	Diagnosis	ICD-9-CM
414.06	Coronary atherosclerosis, of native coronary artery of transplanted heart	Diagnosis	ICD-9-CM
414.07	Coronary atherosclerosis, of bypass graft (artery) (vein) of transplanted heart	Diagnosis	ICD-9-CM
414.11	Aneurysm of coronary vessels	Diagnosis	ICD-9-CM
414.12	Dissection of coronary artery	Diagnosis	ICD-9-CM
414.2	Chronic total occlusion of coronary artery	Diagnosis	ICD-9-CM
414.3	Coronary atherosclerosis due to lipid rich plaque	Diagnosis	ICD-9-CM
414.4	Coronary atherosclerosis due to calcified coronary lesion	Diagnosis	ICD-9-CM
414.8	Other specified forms of chronic ischemic heart disease	Diagnosis	ICD-9-CM
414.9	Unspecified chronic ischemic heart disease	Diagnosis	ICD-9-CM
416.1	Kyphoscoliotic heart disease	Diagnosis	ICD-9-CM
425.11	Hypertrophic obstructive cardiomyopathy	Diagnosis	ICD-9-CM
425.18	Other hypertrophic cardiomyopathy	Diagnosis	ICD-9-CM
425.2	Obscure cardiomyopathy of Africa	Diagnosis	ICD-9-CM
425.4	Other primary cardiomyopathies	Diagnosis	ICD-9-CM
425.5	Alcoholic cardiomyopathy	Diagnosis	ICD-9-CM
425.7	Nutritional and metabolic cardiomyopathy	Diagnosis	ICD-9-CM
425.8	Cardiomyopathy in other diseases classified elsewhere	Diagnosis	ICD-9-CM
425.9	Unspecified secondary cardiomyopathy	Diagnosis	ICD-9-CM
427.1	Paroxysmal ventricular tachycardia	Diagnosis	ICD-9-CM
427.41	Ventricular fibrillation	Diagnosis	ICD-9-CM
427.42	Ventricular flutter	Diagnosis	ICD-9-CM
427.5	Cardiac arrest	Diagnosis	ICD-9-CM
428.0	Congestive heart failure, unspecified	Diagnosis	ICD-9-CM
428.1	Left heart failure	Diagnosis	ICD-9-CM
428.20	Unspecified systolic heart failure	Diagnosis	ICD-9-CM
428.21	Acute systolic heart failure	Diagnosis	ICD-9-CM
428.22	Chronic systolic heart failure	Diagnosis	ICD-9-CM
428.23	Acute on chronic systolic heart failure	Diagnosis	ICD-9-CM
428.30	Unspecified diastolic heart failure	Diagnosis	ICD-9-CM
428.31	Acute diastolic heart failure	Diagnosis	ICD-9-CM
428.32	Chronic diastolic heart failure	Diagnosis	ICD-9-CM
428.33	Acute on chronic diastolic heart failure	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
428.40	Unspecified combined systolic and diastolic heart failure	Diagnosis	ICD-9-CM
428.41	Acute combined systolic and diastolic heart failure	Diagnosis	ICD-9-CM
428.42	Chronic combined systolic and diastolic heart failure	Diagnosis	ICD-9-CM
428.43	Acute on chronic combined systolic and diastolic heart failure	Diagnosis	ICD-9-CM
428.9	Unspecified heart failure	Diagnosis	ICD-9-CM
429.2	Unspecified cardiovascular disease	Diagnosis	ICD-9-CM
429.4	Functional disturbances following cardiac surgery	Diagnosis	ICD-9-CM
429.5	Rupture of chordae tendineae	Diagnosis	ICD-9-CM
429.6	Rupture of papillary muscle	Diagnosis	ICD-9-CM
429.71	Acquired cardiac septal defect	Diagnosis	ICD-9-CM
429.79	Other certain sequelae of myocardial infarction, not elsewhere classified	Diagnosis	ICD-9-CM
429.81	Other disorders of papillary muscle	Diagnosis	ICD-9-CM
429.82	Hyperkinetic heart disease	Diagnosis	ICD-9-CM
429.89	Other ill-defined heart disease	Diagnosis	ICD-9-CM
429.9	Unspecified heart disease	Diagnosis	ICD-9-CM
430	Subarachnoid hemorrhage	Diagnosis	ICD-9-CM
431	Intracerebral hemorrhage	Diagnosis	ICD-9-CM
432.0	Nontraumatic extradural hemorrhage	Diagnosis	ICD-9-CM
432.1	Subdural hemorrhage	Diagnosis	ICD-9-CM
432.9	Unspecified intracranial hemorrhage	Diagnosis	ICD-9-CM
433.00	Occlusion and stenosis of basilar artery without mention of cerebral infarction	Diagnosis	ICD-9-CM
433.10	Occlusion and stenosis of carotid artery without mention of cerebral infarction	Diagnosis	ICD-9-CM
433.20	Occlusion and stenosis of vertebral artery without mention of cerebral infarction	Diagnosis	ICD-9-CM
433.30	Occlusion and stenosis of multiple and bilateral precerebral arteries without mention of cerebral infarction	Diagnosis	ICD-9-CM
433.80	Occlusion and stenosis of other specified precerebral artery without mention of cerebral infarction	Diagnosis	ICD-9-CM
433.90	Occlusion and stenosis of unspecified precerebral artery without mention of cerebral infarction	Diagnosis	ICD-9-CM
434.00	Cerebral thrombosis without mention of cerebral infarction	Diagnosis	ICD-9-CM
434.10	Cerebral embolism without mention of cerebral infarction	Diagnosis	ICD-9-CM
434.90	Unspecified cerebral artery occlusion without mention of cerebral infarction	Diagnosis	ICD-9-CM
436	Acute, but ill-defined, cerebrovascular disease	Diagnosis	ICD-9-CM
437.1	Other generalized ischemic cerebrovascular disease	Diagnosis	ICD-9-CM
437.8	Other ill-defined cerebrovascular disease	Diagnosis	ICD-9-CM
440.0	Atherosclerosis of aorta	Diagnosis	ICD-9-CM
996.03	Mechanical complication due to coronary bypass graft	Diagnosis	ICD-9-CM
996.83	Complications of transplanted heart	Diagnosis	ICD-9-CM
997.1	Cardiac complications	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
G8451	Beta-blocker therapy for lvef < 40% not prescribed for reasons documented by the clinician (e.g., low blood pressure, fluid overload, asthma, patients recently treated with an intravenous positive inotropic agent, allergy, intolerance, other medical reasons, patient declined, other patient reasons, or other reasons attributable to the healthcare system)	Procedure	HCPCS
G8694	Left ventricular ejection fraction (lvef) < 40%	Procedure	HCPCS
G8738	Left ventricular ejection fraction (lvef) < 40% or documentation of severely or moderately depressed left ventricular systolic function	Procedure	HCPCS
G8923	Left ventricular ejection fraction (lvef) < 40% or documentation of moderately or severely depressed left ventricular systolic function	Procedure	HCPCS
G8934	Left ventricular ejection fraction (lvef) < 40% or documentation of moderately or severely depressed left ventricular systolic function	Procedure	HCPCS
I09.81	Rheumatic heart failure	Diagnosis	ICD-10-CM
I11	Hypertensive heart disease	Diagnosis	ICD-10-CM
I11.0	Hypertensive heart disease with heart failure	Diagnosis	ICD-10-CM
I11.9	Hypertensive heart disease without heart failure	Diagnosis	ICD-10-CM
I13.0	Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease	Diagnosis	ICD-10-CM
I20.0	Unstable angina	Diagnosis	ICD-10-CM
I20.1	Angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I20.8	Other forms of angina pectoris	Diagnosis	ICD-10-CM
I20.9	Angina pectoris, unspecified	Diagnosis	ICD-10-CM
I21.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery	Diagnosis	ICD-10-CM
I21.02	ST elevation (STEMI) myocardial infarction involving left anterior descending coronary artery	Diagnosis	ICD-10-CM
I21.09	ST elevation (STEMI) myocardial infarction involving other coronary artery of anterior wall	Diagnosis	ICD-10-CM
I21.11	ST elevation (STEMI) myocardial infarction involving right coronary artery	Diagnosis	ICD-10-CM
I21.19	ST elevation (STEMI) myocardial infarction involving other coronary artery of inferior wall	Diagnosis	ICD-10-CM
I21.21	ST elevation (STEMI) myocardial infarction involving left circumflex coronary artery	Diagnosis	ICD-10-CM
I21.29	ST elevation (STEMI) myocardial infarction involving other sites	Diagnosis	ICD-10-CM
I21.3	ST elevation (STEMI) myocardial infarction of unspecified site	Diagnosis	ICD-10-CM
I21.4	Non-ST elevation (NSTEMI) myocardial infarction	Diagnosis	ICD-10-CM
I21.9	Acute myocardial infarction, unspecified	Diagnosis	ICD-10-CM
I21.A1	Myocardial infarction type 2	Diagnosis	ICD-10-CM
I21.A9	Other myocardial infarction type	Diagnosis	ICD-10-CM
I22.0	Subsequent ST elevation (STEMI) myocardial infarction of anterior wall	Diagnosis	ICD-10-CM
I22.1	Subsequent ST elevation (STEMI) myocardial infarction of inferior wall	Diagnosis	ICD-10-CM
I22.2	Subsequent non-ST elevation (NSTEMI) myocardial infarction	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I22.8	Subsequent ST elevation (STEMI) myocardial infarction of other sites	Diagnosis	ICD-10-CM
I22.9	Subsequent ST elevation (STEMI) myocardial infarction of unspecified site	Diagnosis	ICD-10-CM
I23.0	Hemopericardium as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.1	Atrial septal defect as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.2	Ventricular septal defect as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.3	Rupture of cardiac wall without hemopericardium as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.4	Rupture of chordae tendineae as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.5	Rupture of papillary muscle as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.6	Thrombosis of atrium, auricular appendage, and ventricle as current complications following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.7	Postinfarction angina	Diagnosis	ICD-10-CM
I23.8	Other current complications following acute myocardial infarction	Diagnosis	ICD-10-CM
I24	Other acute ischemic heart diseases	Diagnosis	ICD-10-CM
I24.0	Acute coronary thrombosis not resulting in myocardial infarction	Diagnosis	ICD-10-CM
I24.1	Dressler's syndrome	Diagnosis	ICD-10-CM
I24.8	Other forms of acute ischemic heart disease	Diagnosis	ICD-10-CM
I24.9	Acute ischemic heart disease, unspecified	Diagnosis	ICD-10-CM
I25	Chronic ischemic heart disease	Diagnosis	ICD-10-CM
I25.1	Atherosclerotic heart disease of native coronary artery	Diagnosis	ICD-10-CM
I25.10	Atherosclerotic heart disease of native coronary artery without angina pectoris	Diagnosis	ICD-10-CM
I25.11	Atherosclerotic heart disease of native coronary artery with angina pectoris	Diagnosis	ICD-10-CM
I25.110	Atherosclerotic heart disease of native coronary artery with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.111	Atherosclerotic heart disease of native coronary artery with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.118	Atherosclerotic heart disease of native coronary artery with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.119	Atherosclerotic heart disease of native coronary artery with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.2	Old myocardial infarction	Diagnosis	ICD-10-CM
I25.4	Coronary artery aneurysm and dissection	Diagnosis	ICD-10-CM
I25.41	Coronary artery aneurysm	Diagnosis	ICD-10-CM
I25.42	Coronary artery dissection	Diagnosis	ICD-10-CM
I25.5	Ischemic cardiomyopathy	Diagnosis	ICD-10-CM
I25.6	Silent myocardial ischemia	Diagnosis	ICD-10-CM
I25.7	Atherosclerosis of coronary artery bypass graft(s) and coronary artery of transplanted heart with angina pectoris	Diagnosis	ICD-10-CM
I25.70	Atherosclerosis of coronary artery bypass graft(s), unspecified, with angina pectoris	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I25.700	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.701	Atherosclerosis of coronary artery bypass graft(s), unspecified, with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.708	Atherosclerosis of coronary artery bypass graft(s), unspecified, with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.709	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.71	Atherosclerosis of autologous vein coronary artery bypass graft(s) with angina pectoris	Diagnosis	ICD-10-CM
I25.710	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.711	Atherosclerosis of autologous vein coronary artery bypass graft(s) with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.718	Atherosclerosis of autologous vein coronary artery bypass graft(s) with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.719	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.72	Atherosclerosis of autologous artery coronary artery bypass graft(s) with angina pectoris	Diagnosis	ICD-10-CM
I25.720	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.721	Atherosclerosis of autologous artery coronary artery bypass graft(s) with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.728	Atherosclerosis of autologous artery coronary artery bypass graft(s) with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.729	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.73	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with angina pectoris	Diagnosis	ICD-10-CM
I25.730	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.731	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.738	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.739	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.75	Atherosclerosis of native coronary artery of transplanted heart with angina pectoris	Diagnosis	ICD-10-CM
I25.750	Atherosclerosis of native coronary artery of transplanted heart with unstable angina	Diagnosis	ICD-10-CM
I25.751	Atherosclerosis of native coronary artery of transplanted heart with angina pectoris with documented spasm	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I25.758	Atherosclerosis of native coronary artery of transplanted heart with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.759	Atherosclerosis of native coronary artery of transplanted heart with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.76	Atherosclerosis of bypass graft of coronary artery of transplanted heart with angina pectoris	Diagnosis	ICD-10-CM
I25.760	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unstable angina	Diagnosis	ICD-10-CM
I25.761	Atherosclerosis of bypass graft of coronary artery of transplanted heart with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.768	Atherosclerosis of bypass graft of coronary artery of transplanted heart with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.769	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.79	Atherosclerosis of other coronary artery bypass graft(s) with angina pectoris	Diagnosis	ICD-10-CM
I25.790	Atherosclerosis of other coronary artery bypass graft(s) with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.791	Atherosclerosis of other coronary artery bypass graft(s) with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.798	Atherosclerosis of other coronary artery bypass graft(s) with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.799	Atherosclerosis of other coronary artery bypass graft(s) with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.8	Other forms of chronic ischemic heart disease	Diagnosis	ICD-10-CM
I25.81	Atherosclerosis of other coronary vessels without angina pectoris	Diagnosis	ICD-10-CM
I25.810	Atherosclerosis of coronary artery bypass graft(s) without angina pectoris	Diagnosis	ICD-10-CM
I25.811	Atherosclerosis of native coronary artery of transplanted heart without angina pectoris	Diagnosis	ICD-10-CM
I25.812	Atherosclerosis of bypass graft of coronary artery of transplanted heart without angina pectoris	Diagnosis	ICD-10-CM
I25.82	Chronic total occlusion of coronary artery	Diagnosis	ICD-10-CM
I25.83	Coronary atherosclerosis due to lipid rich plaque	Diagnosis	ICD-10-CM
I25.84	Coronary atherosclerosis due to calcified coronary lesion	Diagnosis	ICD-10-CM
I25.89	Other forms of chronic ischemic heart disease	Diagnosis	ICD-10-CM
I25.9	Chronic ischemic heart disease, unspecified	Diagnosis	ICD-10-CM
I27.1	Kyphoscoliotic heart disease	Diagnosis	ICD-10-CM
I42	Cardiomyopathy	Diagnosis	ICD-10-CM
I42.0	Dilated cardiomyopathy	Diagnosis	ICD-10-CM
I42.1	Obstructive hypertrophic cardiomyopathy	Diagnosis	ICD-10-CM
I42.2	Other hypertrophic cardiomyopathy	Diagnosis	ICD-10-CM
I42.5	Other restrictive cardiomyopathy	Diagnosis	ICD-10-CM
I42.6	Alcoholic cardiomyopathy	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I42.7	Cardiomyopathy due to drug and external agent	Diagnosis	ICD-10-CM
I42.8	Other cardiomyopathies	Diagnosis	ICD-10-CM
I42.9	Cardiomyopathy, unspecified	Diagnosis	ICD-10-CM
I43	Cardiomyopathy in diseases classified elsewhere	Diagnosis	ICD-10-CM
I46.2	Cardiac arrest due to underlying cardiac condition	Diagnosis	ICD-10-CM
I46.8	Cardiac arrest due to other underlying condition	Diagnosis	ICD-10-CM
I46.9	Cardiac arrest, cause unspecified	Diagnosis	ICD-10-CM
I47.2	Ventricular tachycardia	Diagnosis	ICD-10-CM
I49.01	Ventricular fibrillation	Diagnosis	ICD-10-CM
I49.02	Ventricular flutter	Diagnosis	ICD-10-CM
I50	Heart failure	Diagnosis	ICD-10-CM
I50.1	Left ventricular failure, unspecified	Diagnosis	ICD-10-CM
I50.2	Systolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.20	Unspecified systolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.21	Acute systolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.22	Chronic systolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.23	Acute on chronic systolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.3	Diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.30	Unspecified diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.31	Acute diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.32	Chronic diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.33	Acute on chronic diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.4	Combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.40	Unspecified combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.41	Acute combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.42	Chronic combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.43	Acute on chronic combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.8	Other heart failure	Diagnosis	ICD-10-CM
I50.81	Right heart failure	Diagnosis	ICD-10-CM
I50.810	Right heart failure, unspecified	Diagnosis	ICD-10-CM
I50.811	Acute right heart failure	Diagnosis	ICD-10-CM
I50.812	Chronic right heart failure	Diagnosis	ICD-10-CM
I50.813	Acute on chronic right heart failure	Diagnosis	ICD-10-CM
I50.814	Right heart failure due to left heart failure	Diagnosis	ICD-10-CM
I50.82	Biventricular heart failure	Diagnosis	ICD-10-CM
I50.83	High output heart failure	Diagnosis	ICD-10-CM
I50.84	End stage heart failure	Diagnosis	ICD-10-CM
I50.89	Other heart failure	Diagnosis	ICD-10-CM
I50.9	Heart failure, unspecified	Diagnosis	ICD-10-CM
I51	Complications and ill-defined descriptions of heart disease	Diagnosis	ICD-10-CM
I51.8	Other ill-defined heart diseases	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I51.89	Other ill-defined heart diseases	Diagnosis	ICD-10-CM
I51.9	Heart disease, unspecified	Diagnosis	ICD-10-CM
I52	Other heart disorders in diseases classified elsewhere	Diagnosis	ICD-10-CM
I60.00	Nontraumatic subarachnoid hemorrhage from unspecified carotid siphon and bifurcation	Diagnosis	ICD-10-CM
I60.01	Nontraumatic subarachnoid hemorrhage from right carotid siphon and bifurcation	Diagnosis	ICD-10-CM
I60.02	Nontraumatic subarachnoid hemorrhage from left carotid siphon and bifurcation	Diagnosis	ICD-10-CM
I60.10	Nontraumatic subarachnoid hemorrhage from unspecified middle cerebral artery	Diagnosis	ICD-10-CM
I60.11	Nontraumatic subarachnoid hemorrhage from right middle cerebral artery	Diagnosis	ICD-10-CM
I60.12	Nontraumatic subarachnoid hemorrhage from left middle cerebral artery	Diagnosis	ICD-10-CM
I60.2	Nontraumatic subarachnoid hemorrhage from anterior communicating artery	Diagnosis	ICD-10-CM
I60.30	Nontraumatic subarachnoid hemorrhage from unspecified posterior communicating artery	Diagnosis	ICD-10-CM
I60.31	Nontraumatic subarachnoid hemorrhage from right posterior communicating artery	Diagnosis	ICD-10-CM
I60.32	Nontraumatic subarachnoid hemorrhage from left posterior communicating artery	Diagnosis	ICD-10-CM
I60.4	Nontraumatic subarachnoid hemorrhage from basilar artery	Diagnosis	ICD-10-CM
I60.50	Nontraumatic subarachnoid hemorrhage from unspecified vertebral artery	Diagnosis	ICD-10-CM
I60.51	Nontraumatic subarachnoid hemorrhage from right vertebral artery	Diagnosis	ICD-10-CM
I60.52	Nontraumatic subarachnoid hemorrhage from left vertebral artery	Diagnosis	ICD-10-CM
I60.6	Nontraumatic subarachnoid hemorrhage from other intracranial arteries	Diagnosis	ICD-10-CM
I60.7	Nontraumatic subarachnoid hemorrhage from unspecified intracranial artery	Diagnosis	ICD-10-CM
I60.8	Other nontraumatic subarachnoid hemorrhage	Diagnosis	ICD-10-CM
I60.9	Nontraumatic subarachnoid hemorrhage, unspecified	Diagnosis	ICD-10-CM
I61.0	Nontraumatic intracerebral hemorrhage in hemisphere, subcortical	Diagnosis	ICD-10-CM
I61.1	Nontraumatic intracerebral hemorrhage in hemisphere, cortical	Diagnosis	ICD-10-CM
I61.2	Nontraumatic intracerebral hemorrhage in hemisphere, unspecified	Diagnosis	ICD-10-CM
I61.3	Nontraumatic intracerebral hemorrhage in brain stem	Diagnosis	ICD-10-CM
I61.4	Nontraumatic intracerebral hemorrhage in cerebellum	Diagnosis	ICD-10-CM
I61.5	Nontraumatic intracerebral hemorrhage, intraventricular	Diagnosis	ICD-10-CM
I61.6	Nontraumatic intracerebral hemorrhage, multiple localized	Diagnosis	ICD-10-CM
I61.8	Other nontraumatic intracerebral hemorrhage	Diagnosis	ICD-10-CM
I61.9	Nontraumatic intracerebral hemorrhage, unspecified	Diagnosis	ICD-10-CM
I62.00	Nontraumatic subdural hemorrhage, unspecified	Diagnosis	ICD-10-CM
I62.01	Nontraumatic acute subdural hemorrhage	Diagnosis	ICD-10-CM
I62.02	Nontraumatic subacute subdural hemorrhage	Diagnosis	ICD-10-CM
I62.03	Nontraumatic chronic subdural hemorrhage	Diagnosis	ICD-10-CM
I62.1	Nontraumatic extradural hemorrhage	Diagnosis	ICD-10-CM
I62.9	Nontraumatic intracranial hemorrhage, unspecified	Diagnosis	ICD-10-CM
I65.01	Occlusion and stenosis of right vertebral artery	Diagnosis	ICD-10-CM
I65.02	Occlusion and stenosis of left vertebral artery	Diagnosis	ICD-10-CM
I65.03	Occlusion and stenosis of bilateral vertebral arteries	Diagnosis	ICD-10-CM
I65.09	Occlusion and stenosis of unspecified vertebral artery	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I65.1	Occlusion and stenosis of basilar artery	Diagnosis	ICD-10-CM
I65.21	Occlusion and stenosis of right carotid artery	Diagnosis	ICD-10-CM
I65.22	Occlusion and stenosis of left carotid artery	Diagnosis	ICD-10-CM
I65.23	Occlusion and stenosis of bilateral carotid arteries	Diagnosis	ICD-10-CM
I65.29	Occlusion and stenosis of unspecified carotid artery	Diagnosis	ICD-10-CM
I65.8	Occlusion and stenosis of other precerebral arteries	Diagnosis	ICD-10-CM
I65.9	Occlusion and stenosis of unspecified precerebral artery	Diagnosis	ICD-10-CM
I66.01	Occlusion and stenosis of right middle cerebral artery	Diagnosis	ICD-10-CM
I66.02	Occlusion and stenosis of left middle cerebral artery	Diagnosis	ICD-10-CM
I66.03	Occlusion and stenosis of bilateral middle cerebral arteries	Diagnosis	ICD-10-CM
I66.09	Occlusion and stenosis of unspecified middle cerebral artery	Diagnosis	ICD-10-CM
I66.11	Occlusion and stenosis of right anterior cerebral artery	Diagnosis	ICD-10-CM
I66.12	Occlusion and stenosis of left anterior cerebral artery	Diagnosis	ICD-10-CM
I66.13	Occlusion and stenosis of bilateral anterior cerebral arteries	Diagnosis	ICD-10-CM
I66.19	Occlusion and stenosis of unspecified anterior cerebral artery	Diagnosis	ICD-10-CM
I66.21	Occlusion and stenosis of right posterior cerebral artery	Diagnosis	ICD-10-CM
I66.22	Occlusion and stenosis of left posterior cerebral artery	Diagnosis	ICD-10-CM
I66.23	Occlusion and stenosis of bilateral posterior cerebral arteries	Diagnosis	ICD-10-CM
I66.29	Occlusion and stenosis of unspecified posterior cerebral artery	Diagnosis	ICD-10-CM
I66.3	Occlusion and stenosis of cerebellar arteries	Diagnosis	ICD-10-CM
I66.8	Occlusion and stenosis of other cerebral arteries	Diagnosis	ICD-10-CM
I66.9	Occlusion and stenosis of unspecified cerebral artery	Diagnosis	ICD-10-CM
I67.89	Other cerebrovascular disease	Diagnosis	ICD-10-CM
I70.0	Atherosclerosis of aorta	Diagnosis	ICD-10-CM
I97.13	Postprocedural heart failure	Diagnosis	ICD-10-CM
I97.130	Postprocedural heart failure following cardiac surgery	Diagnosis	ICD-10-CM
I97.131	Postprocedural heart failure following other surgery	Diagnosis	ICD-10-CM
T82.211A	Breakdown (mechanical) of coronary artery bypass graft, initial encounter	Diagnosis	ICD-10-CM
T82.212A	Displacement of coronary artery bypass graft, initial encounter	Diagnosis	ICD-10-CM
T82.213A	Leakage of coronary artery bypass graft, initial encounter	Diagnosis	ICD-10-CM
T82.218A	Other mechanical complication of coronary artery bypass graft, initial encounter	Diagnosis	ICD-10-CM
T86.22	Heart transplant failure	Diagnosis	ICD-10-CM
V45.81	Postprocedural aortocoronary bypass status	Diagnosis	ICD-9-CM
V45.82	Postprocedural percutaneous transluminal coronary angioplasty status	Diagnosis	ICD-9-CM
Z95.1	Presence of aortocoronary bypass graft	Diagnosis	ICD-10-CM
Z95.5	Presence of coronary angioplasty implant and graft	Diagnosis	ICD-10-CM
Z98.61	Coronary angioplasty status	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
Congenital Heart Disease			
02Q50ZZ	Repair Atrial Septum, Open Approach	Procedure	ICD-10-PCS
02QM0ZZ	Repair Ventricular Septum, Open Approach	Procedure	ICD-10-PCS
02U507Z	Supplement Atrial Septum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02U50JZ	Supplement Atrial Septum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02U53JZ	Supplement Atrial Septum with Synthetic Substitute, Percutaneous Approach	Procedure	ICD-10-PCS
02UM07Z	Supplement Ventricular Septum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
02UM0JZ	Supplement Ventricular Septum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
02UM3JZ	Supplement Ventricular Septum with Synthetic Substitute, Percutaneous Approach	Procedure	ICD-10-PCS
33647	Repair of atrial septal defect and ventricular septal defect, with direct or patch closure	Procedure	CPT-4
33720	Repair sinus of Valsalva aneurysm, with cardiopulmonary bypass	Procedure	CPT-4
33741	Transcatheter atrial septostomy (TAS) for congenital cardiac anomalies to create effective atrial flow, including all imaging guidance by the proceduralist, when performed, any method (eg, Rashkind, Sang-Park, balloon, cutting balloon, blade)	Procedure	CPT-4
33745	Transcatheter intracardiac shunt (TIS) creation by stent placement for congenital cardiac anomalies to establish effective intracardiac flow, including all imaging guidance by the proceduralist, when performed, left and right heart diagnostic cardiac cath	Procedure	CPT-4
33746	Transcatheter intracardiac shunt (TIS) creation by stent placement for congenital cardiac anomalies to establish effective intracardiac flow, including all imaging guidance by the proceduralist, when performed, left and right heart diagnostic cardiac cath	Procedure	CPT-4
33924	Ligation and takedown of a systemic-to-pulmonary artery shunt, performed in conjunction with a congenital heart procedure (List separately in addition to code for primary procedure)	Procedure	CPT-4
35.50	Repair of unspecified septal defect of heart with prosthesis	Procedure	ICD-9-CM
35.51	Repair of atrial septal defect with prosthesis, open technique	Procedure	ICD-9-CM
35.52	Repair of atrial septal defect with prosthesis, closed technique	Procedure	ICD-9-CM
35.53	Repair of ventricular septal defect with prosthesis, open technique	Procedure	ICD-9-CM
35.54	Repair of endocardial cushion defect with prosthesis	Procedure	ICD-9-CM
35.60	Repair of unspecified septal defect of heart with tissue graft	Procedure	ICD-9-CM
35.61	Repair of atrial septal defect with tissue graft	Procedure	ICD-9-CM
35.62	Repair of ventricular septal defect with tissue graft	Procedure	ICD-9-CM
35.70	Other and unspecified repair of unspecified septal defect of heart	Procedure	ICD-9-CM
35.71	Other and unspecified repair of atrial septal defect	Procedure	ICD-9-CM
35.72	Other and unspecified repair of ventricular septal defect	Procedure	ICD-9-CM
35.91	Interatrial transposition of venous return	Procedure	ICD-9-CM
35.98	Other operations on septa of heart	Procedure	ICD-9-CM
745.0	Bulbus cordis anomalies and anomalies of cardiac septal closure, common truncus	Diagnosis	ICD-9-CM
745.10	Complete transposition of great vessels	Diagnosis	ICD-9-CM
745.11	Transposition of great vessels, double outlet right ventricle	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
745.12	Corrected transposition of great vessels	Diagnosis	ICD-9-CM
745.19	Other transposition of great vessels	Diagnosis	ICD-9-CM
745.2	Tetralogy of Fallot	Diagnosis	ICD-9-CM
745.3	Bulbus cordis anomalies and anomalies of cardiac septal closure, common ventricle	Diagnosis	ICD-9-CM
745.4	Ventricular septal defect	Diagnosis	ICD-9-CM
745.5	Ostium secundum type atrial septal defect	Diagnosis	ICD-9-CM
745.60	Unspecified type congenital endocardial cushion defect	Diagnosis	ICD-9-CM
745.61	Ostium primum defect	Diagnosis	ICD-9-CM
745.69	Other congenital endocardial cushion defect	Diagnosis	ICD-9-CM
745.7	Cor biloculare	Diagnosis	ICD-9-CM
745.8	Other bulbus cordis anomalies and anomalies of cardiac septal closure	Diagnosis	ICD-9-CM
745.9	Unspecified congenital defect of septal closure	Diagnosis	ICD-9-CM
746.00	Unspecified congenital pulmonary valve anomaly	Diagnosis	ICD-9-CM
746.01	Congenital atresia of pulmonary valve	Diagnosis	ICD-9-CM
746.02	Congenital stenosis of pulmonary valve	Diagnosis	ICD-9-CM
746.09	Other congenital anomalies of pulmonary valve	Diagnosis	ICD-9-CM
746.1	Congenital tricuspid atresia and stenosis	Diagnosis	ICD-9-CM
746.2	Ebstein's anomaly	Diagnosis	ICD-9-CM
746.3	Congenital stenosis of aortic valve	Diagnosis	ICD-9-CM
746.4	Congenital insufficiency of aortic valve	Diagnosis	ICD-9-CM
746.5	Congenital mitral stenosis	Diagnosis	ICD-9-CM
746.6	Congenital mitral insufficiency	Diagnosis	ICD-9-CM
746.7	Hypoplastic left heart syndrome	Diagnosis	ICD-9-CM
746.81	Congenital subaortic stenosis	Diagnosis	ICD-9-CM
746.82	Cor triatriatum	Diagnosis	ICD-9-CM
746.83	Congenital infundibular pulmonic stenosis	Diagnosis	ICD-9-CM
746.84	Congenital obstructive anomalies of heart, not elsewhere classified	Diagnosis	ICD-9-CM
746.85	Congenital coronary artery anomaly	Diagnosis	ICD-9-CM
746.86	Congenital heart block	Diagnosis	ICD-9-CM
746.87	Congenital malposition of heart and cardiac apex	Diagnosis	ICD-9-CM
746.89	Other specified congenital anomaly of heart	Diagnosis	ICD-9-CM
746.9	Unspecified congenital anomaly of heart	Diagnosis	ICD-9-CM
747.0	Patent ductus arteriosus	Diagnosis	ICD-9-CM
747.10	Coarctation of aorta (preductal) (postductal)	Diagnosis	ICD-9-CM
747.11	Congenital interruption of aortic arch	Diagnosis	ICD-9-CM
747.20	Unspecified congenital anomaly of aorta	Diagnosis	ICD-9-CM
747.21	Congenital anomaly of aortic arch	Diagnosis	ICD-9-CM
747.22	Congenital atresia and stenosis of aorta	Diagnosis	ICD-9-CM
747.29	Other congenital anomaly of aorta	Diagnosis	ICD-9-CM
747.31	Pulmonary artery coarctation and atresia	Diagnosis	ICD-9-CM
747.32	Pulmonary arteriovenous malformation	Diagnosis	ICD-9-CM
747.39	Other anomalies of pulmonary artery and pulmonary circulation	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
747.41	Total congenital anomalous pulmonary venous connection	Diagnosis	ICD-9-CM
747.42	Partial congenital anomalous pulmonary venous connection	Diagnosis	ICD-9-CM
747.49	Other congenital anomalies of great veins	Diagnosis	ICD-9-CM
747.83	Persistent fetal circulation	Diagnosis	ICD-9-CM
75572	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology (including 3D image postprocessing, assessment of cardiac function, and evaluation of venous structures, if performed)	Procedure	CPT-4
75573	Computed tomography, heart, with contrast material, for evaluation of cardiac structure and morphology in the setting of congenital heart disease (including 3D image postprocessing, assessment of LV cardiac function, RV structure and function and evaluation)	Procedure	CPT-4
758.0	Down's syndrome	Diagnosis	ICD-9-CM
758.1	Patau's syndrome	Diagnosis	ICD-9-CM
758.2	Edwards' syndrome	Diagnosis	ICD-9-CM
758.32	Velo-cardio-facial syndrome	Diagnosis	ICD-9-CM
759.82	Marfan's syndrome	Diagnosis	ICD-9-CM
759.89	Other specified multiple congenital anomalies, so described	Diagnosis	ICD-9-CM
93303	Transthoracic echocardiography for congenital cardiac anomalies, complete	Procedure	CPT-4
93304	Transthoracic echocardiography for congenital cardiac anomalies, follow-up or limited	Procedure	CPT-4
93315	Transesophageal echocardiography for congenital cardiac anomalies, including probe placement, image acquisition, interpretation and report	Procedure	CPT-4
93316	Transesophageal echocardiography for congenital cardiac anomalies, placement of transesophageal probe only, image acquisition, interpretation and report only	Procedure	CPT-4
93317	Transesophageal echocardiography for congenital cardiac anomalies	Procedure	CPT-4
93530	Right heart catheterization, for congenital cardiac anomalies	Procedure	CPT-4
93531	Combined right heart catheterization and retrograde left heart catheterization, for congenital cardiac anomalies	Procedure	CPT-4
93532	Combined right heart catheterization and transseptal left heart catheterization through intact septum with or without retrograde left heart catheterization, for congenital cardiac anomalies	Procedure	CPT-4
93533	Combined right heart catheterization and transseptal left heart catheterization through existing septal opening, with or without retrograde left heart catheterization, for congenital cardiac anomalies	Procedure	CPT-4
93563	Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report, for selective coronary angiography during congenital heart catheterization (List separately in addition to code for primary procedure)	Procedure	CPT-4
93564	Injection procedure during cardiac catheterization including imaging supervision, interpretation, and report, for selective opacification of aortocoronary venous or arterial bypass graft(s) (eg, aortocoronary saphenous vein, free radial artery, or free	Procedure	CPT-4

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
93580	Percutaneous transcatheter closure of congenital interatrial communication (ie, Fontan fenestration, atrial septal defect) with implant	Procedure	CPT-4
93581	Percutaneous transcatheter closure of a congenital ventricular septal defect with implant	Procedure	CPT-4
P29.3	Persistent fetal circulation	Diagnosis	ICD-10-CM
P29.38	Oth cardiovasc disorders originating in the perinatal period	Diagnosis	ICD-10-CM
P29.8	Other persistent fetal circulation	Diagnosis	ICD-10-CM
Q20	Congenital malformations of cardiac chambers and connections	Diagnosis	ICD-10-CM
Q20.0	Common arterial trunk	Diagnosis	ICD-10-CM
Q20.1	Double outlet right ventricle	Diagnosis	ICD-10-CM
Q20.2	Double outlet left ventricle	Diagnosis	ICD-10-CM
Q20.3	Discordant ventriculoarterial connection	Diagnosis	ICD-10-CM
Q20.4	Double inlet ventricle	Diagnosis	ICD-10-CM
Q20.5	Discordant atrioventricular connection	Diagnosis	ICD-10-CM
Q20.6	Isomerism of atrial appendages	Diagnosis	ICD-10-CM
Q20.8	Oth congenital malform of cardiac chambers and connections	Diagnosis	ICD-10-CM
Q20.9	Congenital malform of cardiac chambers and connections, unsp	Diagnosis	ICD-10-CM
Q21	Congenital malformations of cardiac septa	Diagnosis	ICD-10-CM
Q21.0	Ventricular septal defect	Diagnosis	ICD-10-CM
Q21.1	Atrial septal defect	Diagnosis	ICD-10-CM
Q21.2	Atrioventricular septal defect	Diagnosis	ICD-10-CM
Q21.3	Tetralogy of Fallot	Diagnosis	ICD-10-CM
Q21.4	Aortopulmonary septal defect	Diagnosis	ICD-10-CM
Q21.8	Other congenital malformations of cardiac septa	Diagnosis	ICD-10-CM
Q21.9	Congenital malformation of cardiac septum, unspecified	Diagnosis	ICD-10-CM
Q22	Congenital malformations of pulmonary and tricuspid valves	Diagnosis	ICD-10-CM
Q22.0	Pulmonary valve atresia	Diagnosis	ICD-10-CM
Q22.1	Congenital pulmonary valve stenosis	Diagnosis	ICD-10-CM
Q22.2	Congenital pulmonary valve insufficiency	Diagnosis	ICD-10-CM
Q22.3	Other congenital malformations of pulmonary valve	Diagnosis	ICD-10-CM
Q22.4	Congenital tricuspid stenosis	Diagnosis	ICD-10-CM
Q22.5	Ebstein's anomaly	Diagnosis	ICD-10-CM
Q22.6	Hypoplastic right heart syndrome	Diagnosis	ICD-10-CM
Q22.8	Other congenital malformations of tricuspid valve	Diagnosis	ICD-10-CM
Q22.9	Congenital malformation of tricuspid valve, unspecified	Diagnosis	ICD-10-CM
Q23	Congenital malformations of aortic and mitral valves	Diagnosis	ICD-10-CM
Q23.0	Congenital stenosis of aortic valve	Diagnosis	ICD-10-CM
Q23.1	Congenital insufficiency of aortic valve	Diagnosis	ICD-10-CM
Q23.2	Congenital mitral stenosis	Diagnosis	ICD-10-CM
Q23.3	Congenital mitral insufficiency	Diagnosis	ICD-10-CM
Q23.4	Hypoplastic left heart syndrome	Diagnosis	ICD-10-CM
Q23.8	Other congenital malformations of aortic and mitral valves	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
Q23.9	Congenital malformation of aortic and mitral valves, unsp	Diagnosis	ICD-10-CM
Q24	Other congenital malformations of heart	Diagnosis	ICD-10-CM
Q24.0	Dextrocardia	Diagnosis	ICD-10-CM
Q24.1	Levocardia	Diagnosis	ICD-10-CM
Q24.2	Cor triatriatum	Diagnosis	ICD-10-CM
Q24.3	Pulmonary infundibular stenosis	Diagnosis	ICD-10-CM
Q24.4	Congenital subaortic stenosis	Diagnosis	ICD-10-CM
Q24.5	Malformation of coronary vessels	Diagnosis	ICD-10-CM
Q24.6	Congenital heart block	Diagnosis	ICD-10-CM
Q24.8	Other specified congenital malformations of heart	Diagnosis	ICD-10-CM
Q24.9	Congenital malformation of heart, unspecified	Diagnosis	ICD-10-CM
Q25.0	Patent ductus arteriosus	Diagnosis	ICD-10-CM
Q25.1	Coarctation of aorta	Diagnosis	ICD-10-CM
Q25.21	Interruption of aortic arch	Diagnosis	ICD-10-CM
Q25.29	Other atresia of aorta	Diagnosis	ICD-10-CM
Q25.3	Supravalvular aortic stenosis	Diagnosis	ICD-10-CM
Q25.40	Congenital malformation of aorta unspecified	Diagnosis	ICD-10-CM
Q25.41	Absence and aplasia of aorta	Diagnosis	ICD-10-CM
Q25.42	Hypoplasia of aorta	Diagnosis	ICD-10-CM
Q25.43	Congenital aneurysm of aorta	Diagnosis	ICD-10-CM
Q25.44	Congenital dilation of aorta	Diagnosis	ICD-10-CM
Q25.45	Double aortic arch	Diagnosis	ICD-10-CM
Q25.46	Tortuous aortic arch	Diagnosis	ICD-10-CM
Q25.47	Right aortic arch	Diagnosis	ICD-10-CM
Q25.48	Anomalous origin of subclavian artery	Diagnosis	ICD-10-CM
Q25.49	Other congenital malformations of aorta	Diagnosis	ICD-10-CM
Q25.5	Atresia of pulmonary artery	Diagnosis	ICD-10-CM
Q25.6	Stenosis of pulmonary artery	Diagnosis	ICD-10-CM
Q25.71	Coarctation of pulmonary artery	Diagnosis	ICD-10-CM
Q25.72	Congenital pulmonary arteriovenous malformation	Diagnosis	ICD-10-CM
Q25.79	Other congenital malformations of pulmonary artery	Diagnosis	ICD-10-CM
Q25.8	Other congenital malformations of other great arteries	Diagnosis	ICD-10-CM
Q25.9	Congenital malformation of great arteries, unspecified	Diagnosis	ICD-10-CM
Q26.0	Congenital stenosis of vena cava	Diagnosis	ICD-10-CM
Q26.1	Persistent left superior vena cava	Diagnosis	ICD-10-CM
Q26.2	Total anomalous pulmonary venous connection	Diagnosis	ICD-10-CM
Q26.3	Partial anomalous pulmonary venous connection	Diagnosis	ICD-10-CM
Q26.4	Anomalous pulmonary venous connection, unspecified	Diagnosis	ICD-10-CM
Q87.40	Marfan's syndrome, unspecified	Diagnosis	ICD-10-CM
Q87.41	Marfan's syndrome with cardiovascular manifestations	Diagnosis	ICD-10-CM
Q87.410	Marfan's syndrome with aortic dilation	Diagnosis	ICD-10-CM
Q87.418	Marfan's syndrome with other cardiovascular manifestations	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
Q87.82	Arterial tortuosity syndrome	Diagnosis	ICD-10-CM
Q90.0	Trisomy 21, nonmosaicism (meiotic nondisjunction)	Diagnosis	ICD-10-CM
Q90.1	Trisomy 21, mosaicism (mitotic nondisjunction)	Diagnosis	ICD-10-CM
Q90.2	Trisomy 21, translocation	Diagnosis	ICD-10-CM
Q90.9	Down syndrome, unspecified	Diagnosis	ICD-10-CM
Q91.0	Trisomy 18, nonmosaicism (meiotic nondisjunction)	Diagnosis	ICD-10-CM
Q91.1	Trisomy 18, mosaicism (mitotic nondisjunction)	Diagnosis	ICD-10-CM
Q91.2	Trisomy 18, translocation	Diagnosis	ICD-10-CM
Q91.3	Trisomy 18, unspecified	Diagnosis	ICD-10-CM
Q91.4	Trisomy 13, nonmosaicism (meiotic nondisjunction)	Diagnosis	ICD-10-CM
Q91.5	Trisomy 13, mosaicism (mitotic nondisjunction)	Diagnosis	ICD-10-CM
Q91.6	Trisomy 13, translocation	Diagnosis	ICD-10-CM
Q91.7	Trisomy 13, unspecified	Diagnosis	ICD-10-CM
Q93.81	Velo-cardio-facial syndrome	Diagnosis	ICD-10-CM
Q93.82	Williams syndrome	Diagnosis	ICD-10-CM
Immunological Diseases			
042	Human immunodeficiency virus [HIV]	Diagnosis	ICD-9-CM
079.53	Human immunodeficiency virus, type 2 (HIV 2), in conditions classified elsewhere and of unspecified site	Diagnosis	ICD-9-CM
260	Kwashiorkor	Diagnosis	ICD-9-CM
261	Nutritional marasmus	Diagnosis	ICD-9-CM
262	Other severe protein-calorie malnutrition	Diagnosis	ICD-9-CM
277.2	Other disorders of purine and pyrimidine metabolism	Diagnosis	ICD-9-CM
277.6	Other deficiencies of circulating enzymes	Diagnosis	ICD-9-CM
277.89	Other specified disorders of metabolism	Diagnosis	ICD-9-CM
279	Unspecified hypogammaglobulinemia	Diagnosis	ICD-9-CM
279.01	Selective IgA immunodeficiency	Diagnosis	ICD-9-CM
279.02	Selective IgM immunodeficiency	Diagnosis	ICD-9-CM
279.03	Other selective immunoglobulin deficiencies	Diagnosis	ICD-9-CM
279.04	Congenital hypogammaglobulinemia	Diagnosis	ICD-9-CM
279.05	Immunodeficiency with increased IgM	Diagnosis	ICD-9-CM
279.06	Common variable immunodeficiency	Diagnosis	ICD-9-CM
279.09	Other deficiency of humoral immunity	Diagnosis	ICD-9-CM
279.1	Unspecified immunodeficiency with predominant T-cell defect	Diagnosis	ICD-9-CM
279.11	DiGeorge's syndrome	Diagnosis	ICD-9-CM
279.12	Wiskott-Aldrich syndrome	Diagnosis	ICD-9-CM
279.13	Nezelof's syndrome	Diagnosis	ICD-9-CM
279.19	Other deficiency of cell-mediated immunity	Diagnosis	ICD-9-CM
279.2	Combined immunity deficiency	Diagnosis	ICD-9-CM
279.3	Unspecified immunity deficiency	Diagnosis	ICD-9-CM
279.41	Autoimmune lymphoproliferative syndrome	Diagnosis	ICD-9-CM
279.5	Graft-versus-host disease, unspecified	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
279.51	Acute graft-versus-host disease	Diagnosis	ICD-9-CM
279.52	Chronic graft-versus-host disease	Diagnosis	ICD-9-CM
279.53	Acute on chronic graft-versus-host disease	Diagnosis	ICD-9-CM
279.8	Other specified disorders involving the immune mechanism	Diagnosis	ICD-9-CM
288.01	Congenital neutropenia	Diagnosis	ICD-9-CM
288.02	Cyclic neutropenia	Diagnosis	ICD-9-CM
288.1	Functional disorders of polymorphonuclear neutrophils	Diagnosis	ICD-9-CM
288.4	Hemophagocytic syndromes	Diagnosis	ICD-9-CM
289.52	Splenic sequestration	Diagnosis	ICD-9-CM
759	Congenital anomalies of spleen	Diagnosis	ICD-9-CM
B20	Human immunodeficiency virus [HIV] disease	Diagnosis	ICD-10-CM
B97.35	Human immunodeficiency virus, type 2 [HIV 2] as the cause of diseases classified elsewhere	Diagnosis	ICD-10-CM
D57.02	Hb-SS disease with splenic sequestration	Diagnosis	ICD-10-CM
D57.212	Sickle-cell/Hb-C disease with splenic sequestration	Diagnosis	ICD-10-CM
D57.412	Sickle-cell thalassemia with splenic sequestration	Diagnosis	ICD-10-CM
D57.812	Other sickle-cell disorders with splenic sequestration	Diagnosis	ICD-10-CM
D70.0	Congenital agranulocytosis	Diagnosis	ICD-10-CM
D70.4	Cyclic neutropenia	Diagnosis	ICD-10-CM
D71	Functional disorders of polymorphonuclear neutrophils	Diagnosis	ICD-10-CM
D76.1	Hemophagocytic lymphohistiocytosis	Diagnosis	ICD-10-CM
D76.2	Hemophagocytic syndrome, infection-associated	Diagnosis	ICD-10-CM
D76.3	Other histiocytosis syndromes	Diagnosis	ICD-10-CM
D80.0	Hereditary hypogammaglobulinemia	Diagnosis	ICD-10-CM
D80.1	Nonfamilial hypogammaglobulinemia	Diagnosis	ICD-10-CM
D80.2	Selective deficiency of immunoglobulin A [IgA]	Diagnosis	ICD-10-CM
D80.3	Selective deficiency of immunoglobulin G [IgG] subclasses	Diagnosis	ICD-10-CM
D80.4	Selective deficiency of immunoglobulin M [IgM]	Diagnosis	ICD-10-CM
D80.5	Immunodeficiency with increased immunoglobulin M [IgM]	Diagnosis	ICD-10-CM
D80.6	Antibody deficiency with near-normal immunoglobulins or with hyperimmunoglobulinemia	Diagnosis	ICD-10-CM
D80.8	Other immunodeficiencies with predominantly antibody defects	Diagnosis	ICD-10-CM
D80.9	Immunodeficiency with predominantly antibody defects, unspecified	Diagnosis	ICD-10-CM
D81.0	Severe combined immunodeficiency [SCID] with reticular dysgenesis	Diagnosis	ICD-10-CM
D81.1	Severe combined immunodeficiency [SCID] with low T- and B-cell numbers	Diagnosis	ICD-10-CM
D81.2	Severe combined immunodeficiency [SCID] with low or normal B-cell numbers	Diagnosis	ICD-10-CM
D81.3	Adenosine deaminase [ADA] deficiency	Diagnosis	ICD-10-CM
D81.30	Adenosine deaminase deficiency, unspecified	Diagnosis	ICD-10-CM
D81.31	Adenosine deaminase deficiency with severe combined immunodeficiency	Diagnosis	ICD-10-CM
D81.32	Adenosine deaminase 2 deficiency	Diagnosis	ICD-10-CM
D81.39	Other adenosine deaminase deficiency	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
D81.4	Nezelof's syndrome	Diagnosis	ICD-10-CM
D81.5	Purine nucleoside phosphorylase [PNP] deficiency	Diagnosis	ICD-10-CM
D81.6	Major histocompatibility complex class I deficiency	Diagnosis	ICD-10-CM
D81.7	Major histocompatibility complex class II deficiency	Diagnosis	ICD-10-CM
D81.89	Other combined immunodeficiencies	Diagnosis	ICD-10-CM
D81.9	Combined immunodeficiency, unspecified	Diagnosis	ICD-10-CM
D82.0	Wiskott-Aldrich syndrome	Diagnosis	ICD-10-CM
D82.1	Di George's syndrome	Diagnosis	ICD-10-CM
D82.2	Immunodeficiency with short-limbed stature	Diagnosis	ICD-10-CM
D82.3	Immunodeficiency following hereditary defective response to Epstein-Barr virus	Diagnosis	ICD-10-CM
D82.4	Hyperimmunoglobulin E [IgE] syndrome	Diagnosis	ICD-10-CM
D82.8	Immunodeficiency associated with other specified major defects	Diagnosis	ICD-10-CM
D82.9	Immunodeficiency associated with major defect, unspecified	Diagnosis	ICD-10-CM
D83.0	Common variable immunodeficiency with predominant abnormalities of B-cell numbers and function	Diagnosis	ICD-10-CM
D83.1	Common variable immunodeficiency with predominant immunoregulatory T-cell disorders	Diagnosis	ICD-10-CM
D83.2	Common variable immunodeficiency with autoantibodies to B- or T-cells	Diagnosis	ICD-10-CM
D83.8	Other common variable immunodeficiencies	Diagnosis	ICD-10-CM
D83.9	Common variable immunodeficiency, unspecified	Diagnosis	ICD-10-CM
D84.0	Lymphocyte function antigen-1 [LFA-1] defect	Diagnosis	ICD-10-CM
D84.1	Defects in the complement system	Diagnosis	ICD-10-CM
D84.8	Other specified immunodeficiencies	Diagnosis	ICD-10-CM
D84.9	Immunodeficiency, unspecified	Diagnosis	ICD-10-CM
D89.3	Immune reconstitution syndrome	Diagnosis	ICD-10-CM
D89.810	Acute graft-versus-host disease	Diagnosis	ICD-10-CM
D89.811	Chronic graft-versus-host disease	Diagnosis	ICD-10-CM
D89.812	Acute on chronic graft-versus-host disease	Diagnosis	ICD-10-CM
D89.813	Graft-versus-host disease, unspecified	Diagnosis	ICD-10-CM
D89.82	Autoimmune lymphoproliferative syndrome [ALPS]	Diagnosis	ICD-10-CM
E40	Kwashiorkor	Diagnosis	ICD-10-CM
E41	Nutritional marasmus	Diagnosis	ICD-10-CM
E42	Marasmic kwashiorkor	Diagnosis	ICD-10-CM
E43	Unspecified severe protein-calorie malnutrition	Diagnosis	ICD-10-CM
E80.3	Defects of catalase and peroxidase	Diagnosis	ICD-10-CM
O98.7	Human immunodeficiency virus [HIV] disease complicating pregnancy, childbirth and the puerperium	Diagnosis	ICD-10-CM
O98.71	Human immunodeficiency virus [HIV] disease complicating pregnancy	Diagnosis	ICD-10-CM
O98.711	Human immunodeficiency virus [HIV] disease complicating pregnancy, first trimester	Diagnosis	ICD-10-CM
O98.712	Human immunodeficiency virus [HIV] disease complicating pregnancy, second trimester	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
O98.713	Human immunodeficiency virus [HIV] disease complicating pregnancy, third trimester	Diagnosis	ICD-10-CM
O98.719	Human immunodeficiency virus [HIV] disease complicating pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O98.72	Human immunodeficiency virus [HIV] disease complicating childbirth	Diagnosis	ICD-10-CM
O98.73	Human immunodeficiency virus [HIV] disease complicating the puerperium	Diagnosis	ICD-10-CM
Q89.01	Asplenia (congenital)	Diagnosis	ICD-10-CM
Q89.09	Congenital malformations of spleen	Diagnosis	ICD-10-CM
V08	Asymptomatic human immunodeficiency virus (HIV) infection status	Diagnosis	ICD-9-CM
Z21	Asymptomatic human immunodeficiency virus [HIV] infection status	Diagnosis	ICD-10-CM
Human Immunodeficiency Virus (HIV) Infection			
042	Human immunodeficiency virus [HIV]	Diagnosis	ICD-9-CM
079.53	Human immunodeficiency virus, type 2 (HIV 2), in conditions classified elsewhere and of unspecified site	Diagnosis	ICD-9-CM
B20	Human immunodeficiency virus [HIV] disease	Diagnosis	ICD-10-CM
B97.35	Human immunodeficiency virus, type 2 [HIV 2] as the cause of diseases classified elsewhere	Diagnosis	ICD-10-CM
D89.3	Immune reconstitution syndrome	Diagnosis	ICD-10-CM
O98.7	Human immunodeficiency virus [HIV] disease complicating pregnancy, childbirth and the puerperium	Diagnosis	ICD-10-CM
O98.71	Human immunodeficiency virus [HIV] disease complicating pregnancy	Diagnosis	ICD-10-CM
O98.711	Human immunodeficiency virus [HIV] disease complicating pregnancy, first trimester	Diagnosis	ICD-10-CM
O98.712	Human immunodeficiency virus [HIV] disease complicating pregnancy, second trimester	Diagnosis	ICD-10-CM
O98.713	Human immunodeficiency virus [HIV] disease complicating pregnancy, third trimester	Diagnosis	ICD-10-CM
O98.719	Human immunodeficiency virus [HIV] disease complicating pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O98.72	Human immunodeficiency virus [HIV] disease complicating childbirth	Diagnosis	ICD-10-CM
O98.73	Human immunodeficiency virus [HIV] disease complicating the puerperium	Diagnosis	ICD-10-CM
V08	Asymptomatic human immunodeficiency virus (HIV) infection status	Diagnosis	ICD-9-CM
Z21	Asymptomatic human immunodeficiency virus [HIV] infection status	Diagnosis	ICD-10-CM
Renal Disease: Chronic Kidney Disease			
0505F	Hemodialysis plan of care documented (ESRD, P-ESRD)	Procedure	CPT-2
0507F	Peritoneal dialysis plan of care documented (ESRD)	Procedure	CPT-2
249.40	Secondary diabetes mellitus with renal manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.41	Secondary diabetes mellitus with renal manifestations, uncontrolled	Diagnosis	ICD-9-CM
250.40	Diabetes with renal manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.41	Diabetes with renal manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.42	Diabetes with renal manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
250.43	Diabetes with renal manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
35686	Creation of distal arteriovenous fistula during lower extremity bypass surgery (non-hemodialysis) (List separately in addition to code for primary procedure)	Procedure	CPT-4
35875	Thrombectomy of arterial or venous graft (other than hemodialysis graft or fistula);	Procedure	CPT-4
35876	Thrombectomy of arterial or venous graft (other than hemodialysis graft or fistula); with revision of arterial or venous graft	Procedure	CPT-4
36488	Placement of central venous catheter (subclavian, jugular, or other vein) (eg, for central venous pressure, hyperalimentation, hemodialysis, or chemotherapy); percutaneous, age 2 years or under	Procedure	CPT-4
36489	Placement of central venous catheter (subclavian, jugular, or other vein) (eg, for central venous pressure, hyperalimentation, hemodialysis, or chemotherapy); percutaneous, over age 2	Procedure	CPT-4
36490	Placement of central venous catheter (subclavian, jugular, or other vein) (eg, for central venous pressure, hyperalimentation, hemodialysis, or chemotherapy); cutdown, age 2 years or under	Procedure	CPT-4
36491	Placement of central venous catheter (subclavian, jugular, or other vein) (eg, for central venous pressure, hyperalimentation, hemodialysis, or chemotherapy); cutdown, over age 2	Procedure	CPT-4
36800	Insertion of cannula for hemodialysis, other purpose (separate procedure); vein to vein	Procedure	CPT-4
36810	Insertion of cannula for hemodialysis, other purpose (separate procedure); arteriovenous, external (Scribner type)	Procedure	CPT-4
36815	Insertion of cannula for hemodialysis, other purpose (separate procedure); arteriovenous, external revision, or closure	Procedure	CPT-4
36818	Arteriovenous anastomosis, open; by upper arm cephalic vein transposition	Procedure	CPT-4
36819	Arteriovenous anastomosis, open; by upper arm basilic vein transposition	Procedure	CPT-4
36820	Arteriovenous anastomosis, open; by forearm vein transposition	Procedure	CPT-4
36821	Arteriovenous anastomosis, open; direct, any site (eg, Cimino type) (separate procedure)	Procedure	CPT-4
36838	Distal revascularization and interval ligation (DRIL), upper extremity hemodialysis access (steal syndrome)	Procedure	CPT-4
36901	Introduction of needle(s) and/or catheter(s), dialysis circuit, with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, radiological supervision and interpretation and image documentation and report;	Procedure	CPT-4

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
36902	Introduction of needle(s) and/or catheter(s), dialysis circuit, with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, radiological supervision and interpretation and image documentation and report; with transluminal balloon angioplasty, peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary	Procedure	CPT-4
36903	Introduction of needle(s) and/or catheter(s), dialysis circuit, with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, radiological supervision and interpretation and image documentation and report; with transcatheter placement of intravascular stent(s), peripheral dialysis segment, including all imaging and radiological supervision and interpretation	Procedure	CPT-4
36904	Percutaneous transluminal mechanical thrombectomy and/or infusion for thrombolysis, dialysis circuit, any method, including all imaging and radiological supervision and interpretation, diagnostic angiography, fluoroscopic guidance, catheter placement(s), and intraprocedural pharmacological thrombolytic injection(s);	Procedure	CPT-4
36905	Percutaneous transluminal mechanical thrombectomy and/or infusion for thrombolysis, dialysis circuit, any method, including all imaging and radiological supervision and interpretation, diagnostic angiography, fluoroscopic guidance, catheter placement(s), and intraprocedural pharmacological thrombolytic injection(s); with transluminal balloon angioplasty, peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty	Procedure	CPT-4
36906	Percutaneous transluminal mechanical thrombectomy and/or infusion for thrombolysis, dialysis circuit, any method, including all imaging and radiological supervision and interpretation, diagnostic angiography, fluoroscopic guidance, catheter placement(s), and intraprocedural pharmacological thrombolytic injection(s); with transcatheter placement of intravascular stent(s), peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the stenting, and all angioplasty within the peripheral dialysis circuit	Procedure	CPT-4
36907	Transluminal balloon angioplasty, central dialysis segment, performed through dialysis circuit, including all imaging and radiological supervision and interpretation required to perform the angioplasty (List separately in addition to code for primary procedure)	Procedure	CPT-4

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
36908	Transcatheter placement of intravascular stent(s), central dialysis segment, performed through dialysis circuit, including all imaging and radiological supervision and interpretation required to perform the stenting, and all angioplasty in the central dialysis segment (List separately in addition to code for primary procedure)	Procedure	CPT-4
36909	Dialysis circuit permanent vascular embolization or occlusion (including main circuit or any accessory veins), endovascular, including all imaging and radiological supervision and interpretation necessary to complete the intervention (List separately in addition to code for primary procedure)	Procedure	CPT-4
37607	Ligation or banding of angioaccess arteriovenous fistula	Procedure	CPT-4
403.00	Hypertensive chronic kidney disease, malignant, with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
403.01	Hypertensive chronic kidney disease, malignant, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
403.10	Hypertensive chronic kidney disease, benign, with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
403.11	Hypertensive chronic kidney disease, benign, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
403.90	Hypertensive chronic kidney disease, unspecified, with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
403.91	Hypertensive chronic kidney disease, unspecified, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.00	Hypertensive heart and chronic kidney disease, malignant, without heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.01	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.02	Hypertensive heart and chronic kidney disease, malignant, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.03	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.10	Hypertensive heart and chronic kidney disease, benign, without heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.11	Hypertensive heart and chronic kidney disease, benign, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.12	Hypertensive heart and chronic kidney disease, benign, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.13	Hypertensive heart and chronic kidney disease, benign, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.90	Hypertensive heart and chronic kidney disease, unspecified, without heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.91	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
404.92	Hypertensive heart and chronic kidney disease, unspecified, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.93	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
4052F	Hemodialysis via functioning arteriovenous (AV) fistula (ESRD)	Procedure	CPT-2
4053F	Hemodialysis via functioning arteriovenous (AV) graft (ESRD)	Procedure	CPT-2
4054F	Hemodialysis via catheter (ESRD)	Procedure	CPT-2
4055F	Patient receiving peritoneal dialysis (ESRD)	Procedure	CPT-2
49324	Laparoscopy, surgical; with insertion of tunneled intraperitoneal catheter	Procedure	CPT-4
49325	Laparoscopy, surgical; with revision of previously placed intraperitoneal cannula or catheter, with removal of intraluminal obstructive material if performed	Procedure	CPT-4
49418	Insertion of tunneled intraperitoneal catheter (eg, dialysis, intraperitoneal chemotherapy instillation, management of ascites), complete procedure, including imaging guidance, catheter placement, contrast injection when performed, and radiological supervision and interpretation, percutaneous	Procedure	CPT-4
49419	Insertion of tunneled intraperitoneal catheter, with subcutaneous port (ie, totally implantable)	Procedure	CPT-4
49421	Insertion of tunneled intraperitoneal catheter for dialysis, open	Procedure	CPT-4
49422	Removal of tunneled intraperitoneal catheter	Procedure	CPT-4
49435	Insertion of subcutaneous extension to intraperitoneal cannula or catheter with remote chest exit site (List separately in addition to code for primary procedure)	Procedure	CPT-4
572.4	Hepatorenal syndrome	Diagnosis	ICD-9-CM
581.0	Nephrotic syndrome with lesion of proliferative glomerulonephritis	Diagnosis	ICD-9-CM
581.1	Nephrotic syndrome with lesion of membranous glomerulonephritis	Diagnosis	ICD-9-CM
581.2	Nephrotic syndrome with lesion of membranoproliferative glomerulonephritis	Diagnosis	ICD-9-CM
581.3	Nephrotic syndrome with lesion of minimal change glomerulonephritis	Diagnosis	ICD-9-CM
581.81	Nephrotic syndrome with other specified pathological lesion in kidney in diseases classified elsewhere	Diagnosis	ICD-9-CM
581.89	Other nephrotic syndrome with specified pathological lesion in kidney	Diagnosis	ICD-9-CM
581.9	Nephrotic syndrome with unspecified pathological lesion in kidney	Diagnosis	ICD-9-CM
582.0	Chronic glomerulonephritis with lesion of proliferative glomerulonephritis	Diagnosis	ICD-9-CM
582.1	Chronic glomerulonephritis with lesion of membranous glomerulonephritis	Diagnosis	ICD-9-CM
582.2	Chronic glomerulonephritis with lesion of membranoproliferative glomerulonephritis	Diagnosis	ICD-9-CM
582.4	Chronic glomerulonephritis with lesion of rapidly progressive glomerulonephritis	Diagnosis	ICD-9-CM
582.81	Chronic glomerulonephritis with other specified pathological lesion in kidney in diseases classified elsewhere	Diagnosis	ICD-9-CM
582.89	Other chronic glomerulonephritis with specified pathological lesion in kidney	Diagnosis	ICD-9-CM
582.9	Chronic glomerulonephritis with unspecified pathological lesion in kidney	Diagnosis	ICD-9-CM
583.0	Nephritis and nephropathy, not specified as acute or chronic, with lesion of proliferative glomerulonephritis	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
583.1	Nephritis and nephropathy, not specified as acute or chronic, with lesion of membranous glomerulonephritis	Diagnosis	ICD-9-CM
583.2	Nephritis and nephropathy, not specified as acute or chronic, with lesion of membranoproliferative glomerulonephritis	Diagnosis	ICD-9-CM
583.4	Nephritis and nephropathy, not specified as acute or chronic, with lesion of rapidly progressive glomerulonephritis	Diagnosis	ICD-9-CM
583.81	Nephritis and nephropathy, not specified as acute or chronic, with other specified pathological lesion in kidney, in diseases classified elsewhere	Diagnosis	ICD-9-CM
583.89	Other nephritis and nephropathy, not specified as acute or chronic, with specified pathological lesion in kidney	Diagnosis	ICD-9-CM
583.9	Nephritis and nephropathy, not specified as acute or chronic, with unspecified pathological lesion in kidney	Diagnosis	ICD-9-CM
585.1	Chronic kidney disease, Stage I	Diagnosis	ICD-9-CM
585.2	Chronic kidney disease, Stage II (mild)	Diagnosis	ICD-9-CM
585.3	Chronic kidney disease, Stage III (moderate)	Diagnosis	ICD-9-CM
585.4	Chronic kidney disease, Stage IV (severe)	Diagnosis	ICD-9-CM
585.5	Chronic kidney disease, Stage V	Diagnosis	ICD-9-CM
585.6	End stage renal disease	Diagnosis	ICD-9-CM
585.9	Chronic kidney disease, unspecified	Diagnosis	ICD-9-CM
586	Unspecified renal failure	Diagnosis	ICD-9-CM
587	Unspecified renal sclerosis	Diagnosis	ICD-9-CM
588.0	Renal osteodystrophy	Diagnosis	ICD-9-CM
588.1	Nephrogenic diabetes insipidus	Diagnosis	ICD-9-CM
588.81	Secondary hyperparathyroidism (of renal origin)	Diagnosis	ICD-9-CM
588.89	Other specified disorders resulting from impaired renal function	Diagnosis	ICD-9-CM
588.9	Unspecified disorder resulting from impaired renal function	Diagnosis	ICD-9-CM
590.00	Chronic pyelonephritis without lesion of renal medullary necrosis	Diagnosis	ICD-9-CM
590.01	Chronic pyelonephritis with lesion of renal medullary necrosis	Diagnosis	ICD-9-CM
590.80	Unspecified pyelonephritis	Diagnosis	ICD-9-CM
590.81	Pyelitis or pyelonephritis in diseases classified elsewhere	Diagnosis	ICD-9-CM
590.9	Unspecified infection of kidney	Diagnosis	ICD-9-CM
591	Hydronephrosis	Diagnosis	ICD-9-CM
592.9	Unspecified urinary calculus	Diagnosis	ICD-9-CM
593.3	Stricture or kinking of ureter	Diagnosis	ICD-9-CM
593.4	Other ureteric obstruction	Diagnosis	ICD-9-CM
593.5	Hydroureter	Diagnosis	ICD-9-CM
593.70	Vesicoureteral reflux, unspecified or without reflux nephropathy	Diagnosis	ICD-9-CM
593.71	Vesicoureteral reflux with reflux nephropathy, unilateral	Diagnosis	ICD-9-CM
593.72	Vesicoureteral reflux with reflux nephropathy, bilateral	Diagnosis	ICD-9-CM
593.73	Vesicoureteral reflux with reflux nephropathy, NOS	Diagnosis	ICD-9-CM
593.82	Ureteral fistula	Diagnosis	ICD-9-CM
593.89	Other specified disorder of kidney and ureter	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
593.9	Unspecified disorder of kidney and ureter	Diagnosis	ICD-9-CM
599.60	Urinary obstruction, unspecified	Diagnosis	ICD-9-CM
599.69	Urinary obstruction, not elsewhere classified	Diagnosis	ICD-9-CM
753.12	Congenital polycystic kidney, unspecified type	Diagnosis	ICD-9-CM
753.13	Congenital polycystic kidney, autosomal dominant	Diagnosis	ICD-9-CM
753.14	Congenital polycystic kidney, autosomal recessive	Diagnosis	ICD-9-CM
753.15	Congenital renal dysplasia	Diagnosis	ICD-9-CM
753.16	Congenital medullary cystic kidney	Diagnosis	ICD-9-CM
753.17	Congenital medullary sponge kidney	Diagnosis	ICD-9-CM
753.19	Other specified congenital cystic kidney disease	Diagnosis	ICD-9-CM
753.20	Unspecified obstructive defect of renal pelvis and ureter	Diagnosis	ICD-9-CM
753.21	Congenital obstruction of ureteropelvic junction	Diagnosis	ICD-9-CM
753.22	Congenital obstruction of ureterovesical junction	Diagnosis	ICD-9-CM
753.23	Congenital ureterocele	Diagnosis	ICD-9-CM
753.29	Other obstructive defect of renal pelvis and ureter	Diagnosis	ICD-9-CM
794.4	Nonspecific abnormal results of kidney function study	Diagnosis	ICD-9-CM
90935	Hemodialysis procedure with single evaluation by a physician or other qualified health care professional	Procedure	CPT-4
90937	Hemodialysis procedure requiring repeated evaluation(s) with or without substantial revision of dialysis prescription	Procedure	CPT-4
90939	Hemodialysis access flow study to determine blood flow in grafts and arteriovenous fistulae by an indicator dilution method, hook-up; transcutaneous measurement and disconnection	Procedure	CPT-4
90940	Hemodialysis access flow study to determine blood flow in grafts and arteriovenous fistulae by an indicator method	Procedure	CPT-4
90941	Hemodialysis, For Acute Renal Failure And Or Intoxication,	Procedure	CPT-4
90942	Hemodialysis, For Acute Renal Failure And Or Intoxication,	Procedure	CPT-4
90943	Hemodialysis, For Acute Renal Failure And Or Intoxication,	Procedure	CPT-4
90944	Hemodialysis, For Acute Renal Failure And Or Intoxication,	Procedure	CPT-4
90945	Dialysis procedure other than hemodialysis (eg, peritoneal dialysis, hemofiltration, or other continuous renal replacement therapies), with single evaluation by a physician or other qualified health care professional	Procedure	CPT-4
90947	Dialysis procedure other than hemodialysis (eg, peritoneal dialysis, hemofiltration, or other continuous renal replacement therapies) requiring repeated evaluations by a physician or other qualified health care professional, with or without substantial revision of dialysis prescription	Procedure	CPT-4
90951	End-stage renal disease (ESRD) related services monthly, for patients younger than 2 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 4 or more face-to-face visits by a physician or other qualified health care professional per month	Procedure	CPT-4

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
90952	End-stage renal disease (ESRD) related services monthly, for patients younger than 2 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 2-3 face-to-face visits by a physician or other qualified health care professional per month	Procedure	CPT-4
90953	End-stage renal disease (ESRD) related services monthly, for patients younger than 2 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 1 face-to-face visit by a physician or other qualified health care professional per month	Procedure	CPT-4
90954	End-stage renal disease (ESRD) related services monthly, for patients 2-11 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 4 or more face-to-face visits by a physician or other qualified health care professional per month	Procedure	CPT-4
90955	End-stage renal disease (ESRD) related services monthly, for patients 2-11 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 2-3 face-to-face visits by a physician or other qualified health care professional per month	Procedure	CPT-4
90956	End-stage renal disease (ESRD) related services monthly, for patients 2-11 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 1 face-to-face visit by a physician or other qualified health care professional per month	Procedure	CPT-4
90957	End-stage renal disease (ESRD) related services monthly, for patients 12-19 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 4 or more face-to-face visits by a physician or other qualified health care professional per month	Procedure	CPT-4
90958	End-stage renal disease (ESRD) related services monthly, for patients 12-19 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 2-3 face-to-face visits by a physician or other qualified health care professional per month	Procedure	CPT-4
90959	End-stage renal disease (ESRD) related services monthly, for patients 12-19 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents; with 1 face-to-face visit by a physician or other qualified health care professional per month	Procedure	CPT-4
90960	End-stage renal disease (ESRD) related services monthly, for patients 20 years of age and older; with 4 or more face-to-face visits by a physician or other qualified health care professional per month	Procedure	CPT-4
90961	End-stage renal disease (ESRD) related services monthly, for patients 20 years of age and older; with 2-3 face-to-face visits by a physician or other qualified health care professional per month	Procedure	CPT-4
90962	End-stage renal disease (ESRD) related services monthly, for patients 20 years of age and older; with 1 face-to-face visit by a physician or other qualified health care professional per month	Procedure	CPT-4

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
90963	End-stage renal disease (ESRD) related services for home dialysis per full month, for patients younger than 2 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents	Procedure	CPT-4
90964	End-stage renal disease (ESRD) related services for home dialysis per full month, for patients 2-11 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents	Procedure	CPT-4
90965	End-stage renal disease (ESRD) related services for home dialysis per full month, for patients 12-19 years of age to include monitoring for the adequacy of nutrition, assessment of growth and development, and counseling of parents	Procedure	CPT-4
90966	End-stage renal disease (ESRD) related services for home dialysis per full month, for patients 20 years of age and older	Procedure	CPT-4
90967	End-stage renal disease (ESRD) related services for dialysis less than a full month of service, per day; for patients younger than 2 years of age	Procedure	CPT-4
90968	End-stage renal disease (ESRD) related services for dialysis less than a full month of service, per day; for patients 2-11 years of age	Procedure	CPT-4
90969	End-stage renal disease (ESRD) related services for dialysis less than a full month of service, per day; for patients 12-19 years of age	Procedure	CPT-4
90970	End-stage renal disease (ESRD) related services for dialysis less than a full month of service, per day; for patients 20 years of age and older	Procedure	CPT-4
90976	Peritoneal Dialysis For End-stage Renal Disease (esrd),	Procedure	CPT-4
90977	Peritoneal Dialysis For End-stage Renal Disease (esrd),	Procedure	CPT-4
90978	Peritoneal Dialysis For End-stage Renal Disease (esrd),	Procedure	CPT-4
90979	Peritoneal Dialysis For End-stage Renal Disease (esrd),	Procedure	CPT-4
90982	Peritoneal Dialysis For End-stage Renal Disease (esrd),	Procedure	CPT-4
90983	Peritoneal Dialysis For End-stage Renal Disease (esrd),	Procedure	CPT-4
90984	Peritoneal Dialysis For End-stage Renal Disease (esrd),	Procedure	CPT-4
90985	Peritoneal Dialysis For End-stage Renal Disease (esrd),	Procedure	CPT-4
90988	Supervision Of Hemodialysis In Hospital Or Other Facility (excluding Home Dialysis), On Monthly Basis	Procedure	CPT-4
90990	Hemodialysis Training And/or Counseling	Procedure	CPT-4
90991	Home Hemodialysis Care, Outpatient, For Those Services Either Provided By The Physician Primarily Responsible	Procedure	CPT-4
90992	Peritoneal Dialysis Training And/or Counseling	Procedure	CPT-4
90994	Supervision Of Chronic Ambulatory Peritoneal Dialysis (capd), Home Or Out-patient (monthly)	Procedure	CPT-4
90999	Unlisted dialysis procedure, inpatient or outpatient	Procedure	CPT-4
93985	Duplex scan of arterial inflow and venous outflow for preoperative vessel assessment prior to creation of hemodialysis access; complete bilateral study	Procedure	CPT-4
93986	Duplex scan of arterial inflow and venous outflow for preoperative vessel assessment prior to creation of hemodialysis access; complete unilateral study	Procedure	CPT-4
93990	Duplex scan of hemodialysis access (including arterial inflow, body of access and venous outflow)	Procedure	CPT-4

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
93998	Unlisted noninvasive vascular diagnostic study	Procedure	CPT-4
99512	Home visit for hemodialysis	Procedure	CPT-4
99559	Home infusion of peritoneal dialysis, per visit	Procedure	CPT-4
A4653	Peritoneal dialysis catheter anchoring device, belt, each	Procedure	HCPCS
A4680	Activated carbon filter for hemodialysis, each	Procedure	HCPCS
A4690	Dialyzer (artificial kidneys), all types, all sizes, for hemodialysis, each	Procedure	HCPCS
A4706	Bicarbonate concentrate, solution, for hemodialysis, per gallon	Procedure	HCPCS
A4707	Bicarbonate concentrate, powder, for hemodialysis, per packet	Procedure	HCPCS
A4708	Acetate concentrate solution, for hemodialysis, per gallon	Procedure	HCPCS
A4709	Acid concentrate, solution, for hemodialysis, per gallon	Procedure	HCPCS
A4714	Treated water (deionized, distilled, or reverse osmosis) for peritoneal dialysis, per gallon	Procedure	HCPCS
A4719	"Y set" tubing for peritoneal dialysis	Procedure	HCPCS
A4720	Dialysate solution, any concentration of dextrose, fluid volume greater than 249 cc, but less than or equal to 999 cc, for peritoneal dialysis	Procedure	HCPCS
A4721	Dialysate solution, any concentration of dextrose, fluid volume greater than 999 cc but less than or equal to 1999 cc, for peritoneal dialysis	Procedure	HCPCS
A4722	Dialysate solution, any concentration of dextrose, fluid volume greater than 1999 cc but less than or equal to 2999 cc, for peritoneal dialysis	Procedure	HCPCS
A4723	Dialysate solution, any concentration of dextrose, fluid volume greater than 2999 cc but less than or equal to 3999 cc, for peritoneal dialysis	Procedure	HCPCS
A4724	Dialysate solution, any concentration of dextrose, fluid volume greater than 3999 cc but less than or equal to 4999 cc, for peritoneal dialysis	Procedure	HCPCS
A4725	Dialysate solution, any concentration of dextrose, fluid volume greater than 4999 cc but less than or equal to 5999 cc, for peritoneal dialysis	Procedure	HCPCS
A4726	Dialysate solution, any concentration of dextrose, fluid volume greater than 5999 cc, for peritoneal dialysis	Procedure	HCPCS
A4730	Fistula cannulation set for hemodialysis, each	Procedure	HCPCS
A4740	Shunt accessory, for hemodialysis, any type, each	Procedure	HCPCS
A4750	Blood tubing, arterial or venous, for hemodialysis, each	Procedure	HCPCS
A4755	Blood tubing, arterial and venous combined, for hemodialysis, each	Procedure	HCPCS
A4760	Dialysate solution test kit, for peritoneal dialysis, any type, each	Procedure	HCPCS
A4765	Dialysate concentrate, powder, additive for peritoneal dialysis, per packet	Procedure	HCPCS
A4766	Dialysate concentrate, solution, additive for peritoneal dialysis, per 10 ml	Procedure	HCPCS
A4801	Heparin, any type, for hemodialysis, per 1000 units	Procedure	HCPCS
A4802	Protamine sulfate, for hemodialysis, per 50 mg	Procedure	HCPCS
A4820	Hemodialysis kit supplies	Procedure	HCPCS
A4860	Disposable catheter tips for peritoneal dialysis, per 10	Procedure	HCPCS
A4870	Plumbing and/or electrical work for home hemodialysis equipment	Procedure	HCPCS
A4890	Contracts, repair and maintenance, for hemodialysis equipment	Procedure	HCPCS
A4900	Continuous ambulatory peritoneal dialysis (capd) supply kit	Procedure	HCPCS
A4901	Continuous cycling peritoneal dialysis (ccpd) supply kit	Procedure	HCPCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
A4905	Intermittent peritoneal dialysis (ipd) supply kit	Procedure	HCPCS
A4918	Venous pressure clamp, for hemodialysis, each	Procedure	HCPCS
B50W	Plain Radiography / Dialysis Shunt/Fistula	Procedure	ICD-10-PCS
B50W0ZZ	Plain Radiography of Dialysis Shunt/Fistula using High Osmolar Contrast	Procedure	ICD-10-PCS
B50W1ZZ	Plain Radiography of Dialysis Shunt/Fistula using Low Osmolar Contrast	Procedure	ICD-10-PCS
B50WYZZ	Plain Radiography of Dialysis Shunt/Fistula using Other Contrast	Procedure	ICD-10-PCS
B51W	Fluoroscopy / Dialysis Shunt/Fistula	Procedure	ICD-10-PCS
B51W0ZA	Fluoroscopy of Dialysis Shunt/Fistula using High Osmolar Contrast, Guidance	Procedure	ICD-10-PCS
B51W0ZZ	Fluoroscopy of Dialysis Shunt/Fistula using High Osmolar Contrast	Procedure	ICD-10-PCS
B51W1ZA	Fluoroscopy of Dialysis Shunt/Fistula using Low Osmolar Contrast, Guidance	Procedure	ICD-10-PCS
B51W1ZZ	Fluoroscopy of Dialysis Shunt/Fistula using Low Osmolar Contrast	Procedure	ICD-10-PCS
B51WYZA	Fluoroscopy of Dialysis Shunt/Fistula using Other Contrast, Guidance	Procedure	ICD-10-PCS
B51WYZZ	Fluoroscopy of Dialysis Shunt/Fistula using Other Contrast	Procedure	ICD-10-PCS
B51WZZA	Fluoroscopy of Dialysis Shunt/Fistula, Guidance	Procedure	ICD-10-PCS
B51WZZZ	Fluoroscopy of Dialysis Shunt/Fistula	Procedure	ICD-10-PCS
C1750	Catheter, hemodialysis/peritoneal, long-term	Procedure	HCPCS
C1751	Catheter, infusion, inserted peripherally, centrally or midline (other than hemodialysis)	Procedure	HCPCS
C1752	Catheter, hemodialysis/peritoneal, short-term	Procedure	HCPCS
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy	Diagnosis	ICD-10-CM
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication	Diagnosis	ICD-10-CM
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E10.21	Type 1 diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E11.21	Type 2 diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E13.21	Other specified diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E13.29	Other specified diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E1520	Heparin infusion pump for hemodialysis	Procedure	HCPCS
E1530	Air bubble detector for hemodialysis, each, replacement	Procedure	HCPCS
E1540	Pressure alarm for hemodialysis, each, replacement	Procedure	HCPCS
E1550	Bath conductivity meter for hemodialysis, each	Procedure	HCPCS
E1560	Blood leak detector for hemodialysis, each, replacement	Procedure	HCPCS
E1575	Transducer protectors/fluid barriers, for hemodialysis, any size, per 10	Procedure	HCPCS
E1580	Unipuncture control system for hemodialysis	Procedure	HCPCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E1590	Hemodialysis machine	Procedure	HCPCS
E1592	Automatic intermittent peritoneal dialysis system	Procedure	HCPCS
E1594	Cycler dialysis machine for peritoneal dialysis	Procedure	HCPCS
E1600	Delivery and/or installation charges for hemodialysis equipment	Procedure	HCPCS
E1610	Reverse osmosis water purification system, for hemodialysis	Procedure	HCPCS
E1615	Deionizer water purification system, for hemodialysis	Procedure	HCPCS
E1620	Blood pump for hemodialysis, replacement	Procedure	HCPCS
E1625	Water softening system, for hemodialysis	Procedure	HCPCS
E1630	Reciprocating peritoneal dialysis system	Procedure	HCPCS
E1634	Peritoneal dialysis clamps, each	Procedure	HCPCS
E1636	Sorbent cartridges, for hemodialysis, per 10	Procedure	HCPCS
E1638	Heating pad, for peritoneal dialysis, any size, each	Procedure	HCPCS
E1640	Replacement components for hemodialysis and/or peritoneal dialysis machines that are owned or being purchased by the patient	Procedure	HCPCS
G0365	Vessel mapping of vessels for hemodialysis access (services for preoperative vessel mapping prior to creation of hemodialysis access using an autogenous hemodialysis conduit, including arterial inflow and venous outflow)	Procedure	HCPCS
G0392	Transluminal balloon angioplasty, percutaneous; for maintenance of hemodialysis access, arteriovenous fistula or graft; arterial	Procedure	HCPCS
G0393	Transluminal balloon angioplasty, percutaneous; for maintenance of hemodialysis access, arteriovenous fistula or graft; venous	Procedure	HCPCS
G8081	ESRD patient requiring hemodialysis vascular access documented to have received autogenous AV fistula	Procedure	HCPCS
G8082	ESRD patient requiring hemodialysis documented to have received vascular access other than autogenous AV fistula	Procedure	HCPCS
G8085	ESRD patient requiring hemodialysis vascular access was not an eligible candidate for autogenous AV fistula	Procedure	HCPCS
G8714	Hemodialysis treatment performed exactly 3 times per week > 90 days	Procedure	HCPCS
G8715	Hemodialysis treatment performed less than 3 times per week or greater than 3 times per week	Procedure	HCPCS
G8727	Patient receiving hemodialysis, peritoneal dialysis or kidney transplantation	Procedure	HCPCS
G8956	Patient receiving maintenance hemodialysis in an outpatient dialysis facility	Procedure	HCPCS
G8957	Patient not receiving maintenance hemodialysis in an outpatient dialysis facility	Procedure	HCPCS
G9239	Documentation of reasons for patient initiating maintenance hemodialysis with a catheter as the mode of vascular access (e.g., patient has a maturing arteriovenous fistula (AVF)/arteriovenous graft (AVG), time limited trial of hemodialysis, other medical reasons, patient declined AVF/AVG, other patient reasons, patient followed by reporting nephrologist for fewer than 90 days, other system reasons)	Procedure	HCPCS
G9240	Patient whose mode of vascular access is a catheter at the time maintenance hemodialysis is initiated	Procedure	HCPCS
G9241	Patient whose mode of vascular access is not a catheter at the time maintenance hemodialysis is initiated	Procedure	HCPCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
G9264	Documentation of patient receiving maintenance hemodialysis for greater than or equal to 90 days with a catheter for documented reasons (e.g., other medical reasons, patient declined arteriovenous fistula (AVF)/arteriovenous graft (AVG), other patient reasons)	Procedure	HCPCS
G9265	Patient receiving maintenance hemodialysis for greater than or equal to 90 days with a catheter as the mode of vascular access	Procedure	HCPCS
G9266	Patient receiving maintenance hemodialysis for greater than or equal to 90 days without a catheter as the mode of vascular access	Procedure	HCPCS
G9523	Patient discontinued from hemodialysis or peritoneal dialysis	Procedure	HCPCS
I12.0	Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease	Diagnosis	ICD-10-CM
I12.9	Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.0	Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.1	Hypertensive heart and chronic kidney disease without heart failure	Diagnosis	ICD-10-CM
I13.10	Hypertensive heart and chronic kidney disease without heart failure, with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.11	Hypertensive heart and chronic kidney disease without heart failure, with stage 5 chronic kidney disease, or end stage renal disease	Diagnosis	ICD-10-CM
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease	Diagnosis	ICD-10-CM
K0610	Peritoneal dialysis clamp, each	Procedure	HCPCS
K76.7	Hepatorenal syndrome	Diagnosis	ICD-10-CM
M32.14	Glomerular disease in systemic lupus erythematosus	Diagnosis	ICD-10-CM
M32.15	Tubulo-interstitial nephropathy in systemic lupus erythematosus	Diagnosis	ICD-10-CM
M35.04	Sicca syndrome with tubulo-interstitial nephropathy	Diagnosis	ICD-10-CM
N01.0	Rapidly progressive nephritic syndrome with minor glomerular abnormality	Diagnosis	ICD-10-CM
N01.1	Rapidly progressive nephritic syndrome with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N01.2	Rapidly progressive nephritic syndrome with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N01.3	Rapidly progressive nephritic syndrome with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N01.4	Rapidly progressive nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N01.5	Rapidly progressive nephritic syndrome with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N01.6	Rapidly progressive nephritic syndrome with dense deposit disease	Diagnosis	ICD-10-CM
N01.7	Rapidly progressive nephritic syndrome with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N01.8	Rapidly progressive nephritic syndrome with other morphologic changes	Diagnosis	ICD-10-CM
N01.9	Rapidly progressive nephritic syndrome with unspecified morphologic changes	Diagnosis	ICD-10-CM
N02.0	Recurrent and persistent hematuria with minor glomerular abnormality	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
N02.1	Recurrent and persistent hematuria with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N02.2	Recurrent and persistent hematuria with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N02.3	Recurrent and persistent hematuria with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N02.4	Recurrent and persistent hematuria with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N02.5	Recurrent and persistent hematuria with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N02.6	Recurrent and persistent hematuria with dense deposit disease	Diagnosis	ICD-10-CM
N02.7	Recurrent and persistent hematuria with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N02.8	Recurrent and persistent hematuria with other morphologic changes	Diagnosis	ICD-10-CM
N02.9	Recurrent and persistent hematuria with unspecified morphologic changes	Diagnosis	ICD-10-CM
N03.0	Chronic nephritic syndrome with minor glomerular abnormality	Diagnosis	ICD-10-CM
N03.1	Chronic nephritic syndrome with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N03.2	Chronic nephritic syndrome with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N03.3	Chronic nephritic syndrome with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N03.4	Chronic nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N03.5	Chronic nephritic syndrome with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N03.6	Chronic nephritic syndrome with dense deposit disease	Diagnosis	ICD-10-CM
N03.7	Chronic nephritic syndrome with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N03.8	Chronic nephritic syndrome with other morphologic changes	Diagnosis	ICD-10-CM
N03.9	Chronic nephritic syndrome with unspecified morphologic changes	Diagnosis	ICD-10-CM
N04.0	Nephrotic syndrome with minor glomerular abnormality	Diagnosis	ICD-10-CM
N04.1	Nephrotic syndrome with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N04.2	Nephrotic syndrome with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N04.3	Nephrotic syndrome with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N04.4	Nephrotic syndrome with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N04.5	Nephrotic syndrome with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N04.6	Nephrotic syndrome with dense deposit disease	Diagnosis	ICD-10-CM
N04.7	Nephrotic syndrome with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N04.8	Nephrotic syndrome with other morphologic changes	Diagnosis	ICD-10-CM
N04.9	Nephrotic syndrome with unspecified morphologic changes	Diagnosis	ICD-10-CM
N05.0	Unspecified nephritic syndrome with minor glomerular abnormality	Diagnosis	ICD-10-CM
N05.1	Unspecified nephritic syndrome with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N05.2	Unspecified nephritic syndrome with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N05.3	Unspecified nephritic syndrome with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N05.4	Unspecified nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N05.5	Unspecified nephritic syndrome with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N05.6	Unspecified nephritic syndrome with dense deposit disease	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
N05.7	Unspecified nephritic syndrome with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N05.8	Unspecified nephritic syndrome with other morphologic changes	Diagnosis	ICD-10-CM
N05.9	Unspecified nephritic syndrome with unspecified morphologic changes	Diagnosis	ICD-10-CM
N06.0	Isolated proteinuria with minor glomerular abnormality	Diagnosis	ICD-10-CM
N06.1	Isolated proteinuria with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N06.2	Isolated proteinuria with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N06.3	Isolated proteinuria with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N06.4	Isolated proteinuria with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N06.5	Isolated proteinuria with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N06.6	Isolated proteinuria with dense deposit disease	Diagnosis	ICD-10-CM
N06.7	Isolated proteinuria with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N06.8	Isolated proteinuria with other morphologic lesion	Diagnosis	ICD-10-CM
N06.9	Isolated proteinuria with unspecified morphologic lesion	Diagnosis	ICD-10-CM
N07.0	Hereditary nephropathy, not elsewhere classified with minor glomerular abnormality	Diagnosis	ICD-10-CM
N07.1	Hereditary nephropathy, not elsewhere classified with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N07.2	Hereditary nephropathy, not elsewhere classified with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N07.3	Hereditary nephropathy, not elsewhere classified with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N07.4	Hereditary nephropathy, not elsewhere classified with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N07.5	Hereditary nephropathy, not elsewhere classified with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N07.6	Hereditary nephropathy, not elsewhere classified with dense deposit disease	Diagnosis	ICD-10-CM
N07.7	Hereditary nephropathy, not elsewhere classified with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N07.8	Hereditary nephropathy, not elsewhere classified with other morphologic lesions	Diagnosis	ICD-10-CM
N07.9	Hereditary nephropathy, not elsewhere classified with unspecified morphologic lesions	Diagnosis	ICD-10-CM
N08	Glomerular disorders in diseases classified elsewhere	Diagnosis	ICD-10-CM
N11.0	Nonobstructive reflux-associated chronic pyelonephritis	Diagnosis	ICD-10-CM
N11.1	Chronic obstructive pyelonephritis	Diagnosis	ICD-10-CM
N11.8	Other chronic tubulo-interstitial nephritis	Diagnosis	ICD-10-CM
N11.9	Chronic tubulo-interstitial nephritis, unspecified	Diagnosis	ICD-10-CM
N12	Tubulo-interstitial nephritis, not specified as acute or chronic	Diagnosis	ICD-10-CM
N13.0	Hydronephrosis with ureteropelvic junction obstruction	Diagnosis	ICD-10-CM
N13.4	Hydroureter	Diagnosis	ICD-10-CM
N13.5	Crossing vessel and stricture of ureter without hydronephrosis	Diagnosis	ICD-10-CM
N13.6	Pyonephrosis	Diagnosis	ICD-10-CM
N13.70	Vesicoureteral-reflux, unspecified	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
N13.71	Vesicoureteral-reflux without reflux nephropathy	Diagnosis	ICD-10-CM
N13.721	Vesicoureteral-reflux with reflux nephropathy without hydroureter, unilateral	Diagnosis	ICD-10-CM
N13.722	Vesicoureteral-reflux with reflux nephropathy without hydroureter, bilateral	Diagnosis	ICD-10-CM
N13.729	Vesicoureteral-reflux with reflux nephropathy without hydroureter, unspecified	Diagnosis	ICD-10-CM
N13.731	Vesicoureteral-reflux with reflux nephropathy with hydroureter, unilateral	Diagnosis	ICD-10-CM
N13.732	Vesicoureteral-reflux with reflux nephropathy with hydroureter, bilateral	Diagnosis	ICD-10-CM
N13.739	Vesicoureteral-reflux with reflux nephropathy with hydroureter, unspecified	Diagnosis	ICD-10-CM
N13.8	Other obstructive and reflux uropathy	Diagnosis	ICD-10-CM
N13.9	Obstructive and reflux uropathy, unspecified	Diagnosis	ICD-10-CM
N14.0	Analgesic nephropathy	Diagnosis	ICD-10-CM
N14.1	Nephropathy induced by other drugs, medicaments and biological substances	Diagnosis	ICD-10-CM
N14.2	Nephropathy induced by unspecified drug, medicament or biological substance	Diagnosis	ICD-10-CM
N14.3	Nephropathy induced by heavy metals	Diagnosis	ICD-10-CM
N14.4	Toxic nephropathy, not elsewhere classified	Diagnosis	ICD-10-CM
N15.0	Balkan nephropathy	Diagnosis	ICD-10-CM
N15.8	Other specified renal tubulo-interstitial diseases	Diagnosis	ICD-10-CM
N15.9	Renal tubulo-interstitial disease, unspecified	Diagnosis	ICD-10-CM
N16	Renal tubulo-interstitial disorders in diseases classified elsewhere	Diagnosis	ICD-10-CM
N18.1	Chronic kidney disease, stage 1	Diagnosis	ICD-10-CM
N18.2	Chronic kidney disease, stage 2 (mild)	Diagnosis	ICD-10-CM
N18.3	Chronic kidney disease, stage 3 (moderate)	Diagnosis	ICD-10-CM
N18.30	Chronic kidney disease, stage 3 unspecified	Diagnosis	ICD-10-CM
N18.31	Chronic kidney disease, stage 3a	Diagnosis	ICD-10-CM
N18.32	Chronic kidney disease, stage 3b	Diagnosis	ICD-10-CM
N18.4	Chronic kidney disease, stage 4 (severe)	Diagnosis	ICD-10-CM
N18.5	Chronic kidney disease, stage 5	Diagnosis	ICD-10-CM
N18.6	End stage renal disease	Diagnosis	ICD-10-CM
N18.9	Chronic kidney disease, unspecified	Diagnosis	ICD-10-CM
N19	Unspecified kidney failure	Diagnosis	ICD-10-CM
N25.0	Renal osteodystrophy	Diagnosis	ICD-10-CM
N25.1	Nephrogenic diabetes insipidus	Diagnosis	ICD-10-CM
N25.81	Secondary hyperparathyroidism of renal origin	Diagnosis	ICD-10-CM
N25.89	Other disorders resulting from impaired renal tubular function	Diagnosis	ICD-10-CM
N25.9	Disorder resulting from impaired renal tubular function, unspecified	Diagnosis	ICD-10-CM
N26.1	Atrophy of kidney (terminal)	Diagnosis	ICD-10-CM
N26.9	Renal sclerosis, unspecified	Diagnosis	ICD-10-CM
N28.89	Other specified disorders of kidney and ureter	Diagnosis	ICD-10-CM
N28.9	Disorder of kidney and ureter, unspecified	Diagnosis	ICD-10-CM
N29	Other disorders of kidney and ureter in diseases classified elsewhere	Diagnosis	ICD-10-CM
O10.2	Pre-existing hypertensive chronic kidney disease complicating pregnancy, childbirth and the puerperium	Diagnosis	ICD-10-CM
O10.21	Pre-existing hypertensive chronic kidney disease complicating pregnancy	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
O10.211	Pre-existing hypertensive chronic kidney disease complicating pregnancy, first trimester	Diagnosis	ICD-10-CM
O10.212	Pre-existing hypertensive chronic kidney disease complicating pregnancy, second trimester	Diagnosis	ICD-10-CM
O10.213	Pre-existing hypertensive chronic kidney disease complicating pregnancy, third trimester	Diagnosis	ICD-10-CM
O10.219	Pre-existing hypertensive chronic kidney disease complicating pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O10.22	Pre-existing hypertensive chronic kidney disease complicating childbirth	Diagnosis	ICD-10-CM
O10.23	Pre-existing hypertensive chronic kidney disease complicating the puerperium	Diagnosis	ICD-10-CM
O10.3	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, childbirth and the puerperium	Diagnosis	ICD-10-CM
O10.31	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy	Diagnosis	ICD-10-CM
O10.311	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, first trimester	Diagnosis	ICD-10-CM
O10.312	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, second trimester	Diagnosis	ICD-10-CM
O10.313	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, third trimester	Diagnosis	ICD-10-CM
O10.319	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O10.32	Pre-existing hypertensive heart and chronic kidney disease complicating childbirth	Diagnosis	ICD-10-CM
O10.33	Pre-existing hypertensive heart and chronic kidney disease complicating the puerperium	Diagnosis	ICD-10-CM
Q61.02	Congenital multiple renal cysts	Diagnosis	ICD-10-CM
Q61.11	Cystic dilatation of collecting ducts	Diagnosis	ICD-10-CM
Q61.19	Other polycystic kidney, infantile type	Diagnosis	ICD-10-CM
Q61.2	Polycystic kidney, adult type	Diagnosis	ICD-10-CM
Q61.3	Polycystic kidney, unspecified	Diagnosis	ICD-10-CM
Q61.4	Renal dysplasia	Diagnosis	ICD-10-CM
Q61.5	Medullary cystic kidney	Diagnosis	ICD-10-CM
Q61.8	Other cystic kidney diseases	Diagnosis	ICD-10-CM
Q62.0	Congenital hydronephrosis	Diagnosis	ICD-10-CM
Q62.10	Congenital occlusion of ureter, unspecified	Diagnosis	ICD-10-CM
Q62.11	Congenital occlusion of ureteropelvic junction	Diagnosis	ICD-10-CM
Q62.12	Congenital occlusion of ureterovesical orifice	Diagnosis	ICD-10-CM
Q62.2	Congenital megaureter	Diagnosis	ICD-10-CM
Q62.31	Congenital ureterocele, orthotopic	Diagnosis	ICD-10-CM
Q62.32	Cecoureterocele	Diagnosis	ICD-10-CM
Q62.39	Other obstructive defects of renal pelvis and ureter	Diagnosis	ICD-10-CM
R94.4	Abnormal results of kidney function studies	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
S9335	Home therapy, hemodialysis; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing services coded separately), per diem	Procedure	HCPCS
S9339	Home therapy; peritoneal dialysis, administrative services, professional pharmacy services, care coordination and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem	Procedure	HCPCS
V45.11	Renal dialysis status	Diagnosis	ICD-9-CM
V45.12	Noncompliance with renal dialysis	Diagnosis	ICD-9-CM
V56.0	Encounter for extracorporeal dialysis	Diagnosis	ICD-9-CM
V56.1	Fitting and adjustment of extracorporeal dialysis catheter	Diagnosis	ICD-9-CM
V56.2	Fitting and adjustment of peritoneal dialysis catheter	Diagnosis	ICD-9-CM
V56.31	Encounter for adequacy testing for hemodialysis	Diagnosis	ICD-9-CM
V56.32	Encounter for adequacy testing for peritoneal dialysis	Diagnosis	ICD-9-CM
V56.8	Encounter other dialysis	Diagnosis	ICD-9-CM
Z49.0	Preparatory care for renal dialysis	Diagnosis	ICD-10-CM
Z49.01	Encounter for fitting and adjustment of extracorporeal dialysis catheter	Diagnosis	ICD-10-CM
Z49.02	Encounter for fitting and adjustment of peritoneal dialysis catheter	Diagnosis	ICD-10-CM
Z49.3	Encounter for adequacy testing for dialysis	Diagnosis	ICD-10-CM
Z49.31	Encounter for adequacy testing for hemodialysis	Diagnosis	ICD-10-CM
Z49.32	Encounter for adequacy testing for peritoneal dialysis	Diagnosis	ICD-10-CM
Z91.15	Patient's noncompliance with renal dialysis	Diagnosis	ICD-10-CM
Z99.2	Dependence on renal dialysis	Diagnosis	ICD-10-CM
Rheumatic Diseases			
099.3	Reiter's disease	Diagnosis	ICD-9-CM
135	Sarcoidosis	Diagnosis	ICD-9-CM
136.1	Behcet's syndrome	Diagnosis	ICD-9-CM
277.30	Amyloidosis, unspecified	Diagnosis	ICD-9-CM
277.31	Familial Mediterranean fever	Diagnosis	ICD-9-CM
277.39	Other amyloidosis	Diagnosis	ICD-9-CM
279.8	Other specified disorders involving the immune mechanism	Diagnosis	ICD-9-CM
323.9	Unspecified causes of encephalitis, myelitis, and encephalomyelitis	Diagnosis	ICD-9-CM
340	Multiple sclerosis	Diagnosis	ICD-9-CM
341.0	Neuromyelitis optica	Diagnosis	ICD-9-CM
341.1	Schilder's disease	Diagnosis	ICD-9-CM
341.20	Acute (transverse) myelitis NOS	Diagnosis	ICD-9-CM
341.21	Acute (transverse) myelitis in conditions classified elsewhere	Diagnosis	ICD-9-CM
341.22	Idiopathic transverse myelitis	Diagnosis	ICD-9-CM
341.8	Other demyelinating diseases of central nervous system	Diagnosis	ICD-9-CM
357.1	Polyneuropathy in collagen vascular disease	Diagnosis	ICD-9-CM
357.3	Polyneuropathy in malignant disease	Diagnosis	ICD-9-CM
357.4	Polyneuropathy in other diseases classified elsewhere	Diagnosis	ICD-9-CM
357.7	Polyneuropathy due to other toxic agents	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
357.81	Chronic inflammatory demyelinating polyneuritis	Diagnosis	ICD-9-CM
357.82	Critical illness polyneuropathy	Diagnosis	ICD-9-CM
357.89	Other inflammatory and toxic neuropathy	Diagnosis	ICD-9-CM
357.9	Unspecified inflammatory and toxic neuropathy	Diagnosis	ICD-9-CM
359.6	Symptomatic inflammatory myopathy in diseases classified elsewhere	Diagnosis	ICD-9-CM
373.34	Discoid lupus erythematosus of eyelid	Diagnosis	ICD-9-CM
446.0	Polyarteritis nodosa	Diagnosis	ICD-9-CM
446.1	Acute febrile mucocutaneous lymph node syndrome (MCLS)	Diagnosis	ICD-9-CM
446.20	Unspecified hypersensitivity angiitis	Diagnosis	ICD-9-CM
446.21	Goodpasture's syndrome	Diagnosis	ICD-9-CM
446.29	Other specified hypersensitivity angiitis	Diagnosis	ICD-9-CM
446.3	Lethal midline granuloma	Diagnosis	ICD-9-CM
446.4	Wegener's granulomatosis	Diagnosis	ICD-9-CM
446.5	Giant cell arteritis	Diagnosis	ICD-9-CM
446.6	Thrombotic microangiopathy	Diagnosis	ICD-9-CM
446.7	Takayasu's disease	Diagnosis	ICD-9-CM
447.5	Necrosis of artery	Diagnosis	ICD-9-CM
495.9	Unspecified allergic alveolitis and pneumonitis	Diagnosis	ICD-9-CM
516.0	Pulmonary alveolar proteinosis	Diagnosis	ICD-9-CM
516.2	Pulmonary alveolar microlithiasis	Diagnosis	ICD-9-CM
516.30	Idiopathic interstitial pneumonia, not otherwise specified	Diagnosis	ICD-9-CM
516.31	Idiopathic pulmonary fibrosis	Diagnosis	ICD-9-CM
516.32	Idiopathic non-specific interstitial pneumonitis	Diagnosis	ICD-9-CM
516.33	Acute interstitial pneumonitis	Diagnosis	ICD-9-CM
516.34	Respiratory bronchiolitis interstitial lung disease	Diagnosis	ICD-9-CM
516.35	Idiopathic lymphoid interstitial pneumonia	Diagnosis	ICD-9-CM
516.36	Cryptogenic organizing pneumonia	Diagnosis	ICD-9-CM
516.37	Desquamative interstitial pneumonia	Diagnosis	ICD-9-CM
516.4	Lymphangioleiomyomatosis	Diagnosis	ICD-9-CM
516.5	Adult pulmonary Langerhans cell histiocytosis	Diagnosis	ICD-9-CM
516.61	Neuroendocrine cell hyperplasia of infancy	Diagnosis	ICD-9-CM
516.62	Pulmonary interstitial glycogenosis	Diagnosis	ICD-9-CM
516.63	Surfactant mutations of the lung	Diagnosis	ICD-9-CM
516.64	Alveolar capillary dysplasia with vein misalignment	Diagnosis	ICD-9-CM
516.69	Other interstitial lung diseases of childhood	Diagnosis	ICD-9-CM
516.8	Other specified alveolar and parietoalveolar pneumonopathies	Diagnosis	ICD-9-CM
517.2	Lung involvement in systemic sclerosis	Diagnosis	ICD-9-CM
517.8	Lung involvement in other diseases classified elsewhere	Diagnosis	ICD-9-CM
535.70	Eosinophilic gastritis without mention of hemorrhage	Diagnosis	ICD-9-CM
535.71	Eosinophilic gastritis with hemorrhage	Diagnosis	ICD-9-CM
555.0	Regional enteritis of small intestine	Diagnosis	ICD-9-CM
555.1	Regional enteritis of large intestine	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
555.2	Regional enteritis of small intestine with large intestine	Diagnosis	ICD-9-CM
555.9	Regional enteritis of unspecified site	Diagnosis	ICD-9-CM
556.0	Ulcerative (chronic) enterocolitis	Diagnosis	ICD-9-CM
556.1	Ulcerative (chronic) ileocolitis	Diagnosis	ICD-9-CM
556.2	Ulcerative (chronic) proctitis	Diagnosis	ICD-9-CM
556.3	Ulcerative (chronic) proctosigmoiditis	Diagnosis	ICD-9-CM
556.4	Pseudopolyposis of colon	Diagnosis	ICD-9-CM
556.5	Left sided ulcerative (chronic) colitis	Diagnosis	ICD-9-CM
556.6	Universal ulcerative (chronic) colitis	Diagnosis	ICD-9-CM
556.8	Other ulcerative colitis	Diagnosis	ICD-9-CM
556.9	Unspecified ulcerative colitis	Diagnosis	ICD-9-CM
557.1	Chronic vascular insufficiency of intestine	Diagnosis	ICD-9-CM
558.41	Eosinophilic gastroenteritis	Diagnosis	ICD-9-CM
558.42	Eosinophilic colitis	Diagnosis	ICD-9-CM
694.3	Impetigo herpetiformis	Diagnosis	ICD-9-CM
695.4	Lupus erythematosus	Diagnosis	ICD-9-CM
696.0	Psoriatic arthropathy	Diagnosis	ICD-9-CM
696.1	Other psoriasis	Diagnosis	ICD-9-CM
696.2	Parapsoriasis	Diagnosis	ICD-9-CM
701.0	Circumscribed scleroderma	Diagnosis	ICD-9-CM
710.0	Systemic lupus erythematosus	Diagnosis	ICD-9-CM
710.1	Systemic sclerosis	Diagnosis	ICD-9-CM
710.2	Sicca syndrome	Diagnosis	ICD-9-CM
710.3	Dermatomyositis	Diagnosis	ICD-9-CM
710.4	Polymyositis	Diagnosis	ICD-9-CM
710.5	Eosinophilia myalgia syndrome	Diagnosis	ICD-9-CM
710.8	Other specified diffuse disease of connective tissue	Diagnosis	ICD-9-CM
710.9	Unspecified diffuse connective tissue disease	Diagnosis	ICD-9-CM
711.10	Arthropathy associated with Reiter's disease and nonspecific urethritis, site unspecified	Diagnosis	ICD-9-CM
711.11	Arthropathy associated with Reiter's disease and nonspecific urethritis, shoulder region	Diagnosis	ICD-9-CM
711.12	Arthropathy associated with Reiter's disease and nonspecific urethritis, upper arm	Diagnosis	ICD-9-CM
711.13	Arthropathy associated with Reiter's disease and nonspecific urethritis, forearm	Diagnosis	ICD-9-CM
711.14	Arthropathy associated with Reiter's disease and nonspecific urethritis, hand	Diagnosis	ICD-9-CM
711.15	Arthropathy associated with Reiter's disease and nonspecific urethritis, pelvic region and thigh	Diagnosis	ICD-9-CM
711.16	Arthropathy associated with Reiter's disease and nonspecific urethritis, lower leg	Diagnosis	ICD-9-CM
711.17	Arthropathy associated with Reiter's disease and nonspecific urethritis, ankle and foot	Diagnosis	ICD-9-CM
711.18	Arthropathy associated with Reiter's disease and nonspecific urethritis, other specified site	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
711.19	Arthropathy associated with Reiter's disease and nonspecific urethritis, multiple sites	Diagnosis	ICD-9-CM
711.20	Arthropathy in Behcet's syndrome, site unspecified	Diagnosis	ICD-9-CM
711.21	Arthropathy in Behcet's syndrome, shoulder region	Diagnosis	ICD-9-CM
711.22	Arthropathy in Behcet's syndrome, upper arm	Diagnosis	ICD-9-CM
711.23	Arthropathy in Behcet's syndrome, forearm	Diagnosis	ICD-9-CM
711.24	Arthropathy in Behcet's syndrome, hand	Diagnosis	ICD-9-CM
711.25	Arthropathy in Behcet's syndrome, pelvic region and thigh	Diagnosis	ICD-9-CM
711.26	Arthropathy in Behcet's syndrome, lower leg	Diagnosis	ICD-9-CM
711.27	Arthropathy in Behcet's syndrome, ankle and foot	Diagnosis	ICD-9-CM
711.28	Arthropathy in Behcet's syndrome, other specified sites	Diagnosis	ICD-9-CM
711.29	Arthropathy in Behcet's syndrome, multiple sites	Diagnosis	ICD-9-CM
711.30	Postdysenteric arthropathy, site unspecified	Diagnosis	ICD-9-CM
711.31	Postdysenteric arthropathy, shoulder region	Diagnosis	ICD-9-CM
711.32	Postdysenteric arthropathy, upper arm	Diagnosis	ICD-9-CM
711.33	Postdysenteric arthropathy, forearm	Diagnosis	ICD-9-CM
711.34	Postdysenteric arthropathy, hand	Diagnosis	ICD-9-CM
711.35	Postdysenteric arthropathy, pelvic region and thigh	Diagnosis	ICD-9-CM
711.36	Postdysenteric arthropathy, lower leg	Diagnosis	ICD-9-CM
711.37	Postdysenteric arthropathy, ankle and foot	Diagnosis	ICD-9-CM
711.38	Postdysenteric arthropathy, other specified sites	Diagnosis	ICD-9-CM
711.39	Postdysenteric arthropathy, multiple sites	Diagnosis	ICD-9-CM
713.1	Arthropathy associated with gastrointestinal conditions other than infections	Diagnosis	ICD-9-CM
714.0	Rheumatoid arthritis	Diagnosis	ICD-9-CM
714.1	Felty's syndrome	Diagnosis	ICD-9-CM
714.2	Other rheumatoid arthritis with visceral or systemic involvement	Diagnosis	ICD-9-CM
714.30	Polyarticular juvenile rheumatoid arthritis, chronic or unspecified	Diagnosis	ICD-9-CM
714.31	Polyarticular juvenile rheumatoid arthritis, acute	Diagnosis	ICD-9-CM
714.32	Pauciarticular juvenile rheumatoid arthritis	Diagnosis	ICD-9-CM
714.33	Monoarticular juvenile rheumatoid arthritis	Diagnosis	ICD-9-CM
714.4	Chronic postrheumatic arthropathy	Diagnosis	ICD-9-CM
714.81	Rheumatoid lung	Diagnosis	ICD-9-CM
714.89	Other specified inflammatory polyarthropathies	Diagnosis	ICD-9-CM
714.9	Unspecified inflammatory polyarthropathy	Diagnosis	ICD-9-CM
720.0	Ankylosing spondylitis	Diagnosis	ICD-9-CM
725	Polymyalgia rheumatica	Diagnosis	ICD-9-CM
D86.0	Sarcoidosis of lung	Diagnosis	ICD-10-CM
D86.1	Sarcoidosis of lymph nodes	Diagnosis	ICD-10-CM
D86.2	Sarcoidosis of lung with sarcoidosis of lymph nodes	Diagnosis	ICD-10-CM
D86.3	Sarcoidosis of skin	Diagnosis	ICD-10-CM
D86.81	Sarcoid meningitis	Diagnosis	ICD-10-CM
D86.82	Multiple cranial nerve palsies in sarcoidosis	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
D86.83	Sarcoid iridocyclitis	Diagnosis	ICD-10-CM
D86.84	Sarcoid pyelonephritis	Diagnosis	ICD-10-CM
D86.85	Sarcoid myocarditis	Diagnosis	ICD-10-CM
D86.86	Sarcoid arthropathy	Diagnosis	ICD-10-CM
D86.87	Sarcoid myositis	Diagnosis	ICD-10-CM
D86.89	Sarcoidosis of other sites	Diagnosis	ICD-10-CM
D86.9	Sarcoidosis, unspecified	Diagnosis	ICD-10-CM
E85.0	Non-neuropathic heredofamilial amyloidosis	Diagnosis	ICD-10-CM
E85.1	Neuropathic heredofamilial amyloidosis	Diagnosis	ICD-10-CM
E85.2	Heredofamilial amyloidosis, unspecified	Diagnosis	ICD-10-CM
E85.3	Secondary systemic amyloidosis	Diagnosis	ICD-10-CM
E85.4	Organ-limited amyloidosis	Diagnosis	ICD-10-CM
E85.81	Light chain (AL) amyloidosis	Diagnosis	ICD-10-CM
E85.82	Wild-type transthyretin-related (ATTR) amyloidosis	Diagnosis	ICD-10-CM
E85.89	Other amyloidosis	Diagnosis	ICD-10-CM
E85.9	Amyloidosis, unspecified	Diagnosis	ICD-10-CM
G35	Multiple sclerosis	Diagnosis	ICD-10-CM
G36.0	Neuromyelitis optica [Devic]	Diagnosis	ICD-10-CM
G37.0	Diffuse sclerosis of central nervous system	Diagnosis	ICD-10-CM
G37.1	Central demyelination of corpus callosum	Diagnosis	ICD-10-CM
G37.2	Central pontine myelinolysis	Diagnosis	ICD-10-CM
G37.3	Acute transverse myelitis in demyelinating disease of central nervous system	Diagnosis	ICD-10-CM
G37.4	Subacute necrotizing myelitis of central nervous system	Diagnosis	ICD-10-CM
G37.5	Concentric sclerosis [Balo] of central nervous system	Diagnosis	ICD-10-CM
G37.8	Other specified demyelinating diseases of central nervous system	Diagnosis	ICD-10-CM
G61.81	Chronic inflammatory demyelinating polyneuropathy	Diagnosis	ICD-10-CM
G61.82	Multifocal motor neuropathies (inflammatory)	Diagnosis	ICD-10-CM
G61.89	Other inflammatory polyneuropathies	Diagnosis	ICD-10-CM
G61.9	Inflammatory polyneuropathy, unspecified	Diagnosis	ICD-10-CM
G62.2	Polyneuropathy due to other toxic agents	Diagnosis	ICD-10-CM
G62.81	Critical illness polyneuropathy	Diagnosis	ICD-10-CM
G63	Polyneuropathy in diseases classified elsewhere	Diagnosis	ICD-10-CM
H01.12	Discoid lupus erythematosus of eyelid	Diagnosis	ICD-10-CM
H01.121	Discoid lupus erythematosus of right upper eyelid	Diagnosis	ICD-10-CM
H01.122	Discoid lupus erythematosus of right lower eyelid	Diagnosis	ICD-10-CM
H01.123	Discoid lupus erythematosus of right eye, unspecified eyelid	Diagnosis	ICD-10-CM
H01.124	Discoid lupus erythematosus of left upper eyelid	Diagnosis	ICD-10-CM
H01.125	Discoid lupus erythematosus of left lower eyelid	Diagnosis	ICD-10-CM
H01.126	Discoid lupus erythematosus of left eye, unspecified eyelid	Diagnosis	ICD-10-CM
H01.129	Discoid lupus erythematosus of unspecified eye, unspecified eyelid	Diagnosis	ICD-10-CM
I40.0	Infective myocarditis	Diagnosis	ICD-10-CM
I40.1	Isolated myocarditis	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I40.8	Other acute myocarditis	Diagnosis	ICD-10-CM
I40.9	Acute myocarditis, unspecified	Diagnosis	ICD-10-CM
I41	Myocarditis in diseases classified elsewhere	Diagnosis	ICD-10-CM
J67.9	Hypersensitivity pneumonitis due to unspecified organic dust	Diagnosis	ICD-10-CM
J84.01	Alveolar proteinosis	Diagnosis	ICD-10-CM
J84.02	Pulmonary alveolar microlithiasis	Diagnosis	ICD-10-CM
J84.09	Other alveolar and parieto-alveolar conditions	Diagnosis	ICD-10-CM
J84.111	Idiopathic interstitial pneumonia, not otherwise specified	Diagnosis	ICD-10-CM
J84.112	Idiopathic pulmonary fibrosis	Diagnosis	ICD-10-CM
J84.113	Idiopathic non-specific interstitial pneumonitis	Diagnosis	ICD-10-CM
J84.114	Acute interstitial pneumonitis	Diagnosis	ICD-10-CM
J84.115	Respiratory bronchiolitis interstitial lung disease	Diagnosis	ICD-10-CM
J84.116	Cryptogenic organizing pneumonia	Diagnosis	ICD-10-CM
J84.117	Desquamative interstitial pneumonia	Diagnosis	ICD-10-CM
J84.2	Lymphoid interstitial pneumonia	Diagnosis	ICD-10-CM
J84.81	Lymphangioleiomyomatosis	Diagnosis	ICD-10-CM
J84.82	Adult pulmonary Langerhans cell histiocytosis	Diagnosis	ICD-10-CM
J84.83	Surfactant mutations of the lung	Diagnosis	ICD-10-CM
J84.841	Neuroendocrine cell hyperplasia of infancy	Diagnosis	ICD-10-CM
J84.842	Pulmonary interstitial glycogenosis	Diagnosis	ICD-10-CM
J84.843	Alveolar capillary dysplasia with vein misalignment	Diagnosis	ICD-10-CM
J84.848	Other interstitial lung diseases of childhood	Diagnosis	ICD-10-CM
K50.00	Crohn's disease of small intestine without complications	Diagnosis	ICD-10-CM
K50.011	Crohn's disease of small intestine with rectal bleeding	Diagnosis	ICD-10-CM
K50.012	Crohn's disease of small intestine with intestinal obstruction	Diagnosis	ICD-10-CM
K50.013	Crohn's disease of small intestine with fistula	Diagnosis	ICD-10-CM
K50.014	Crohn's disease of small intestine with abscess	Diagnosis	ICD-10-CM
K50.018	Crohn's disease of small intestine with other complication	Diagnosis	ICD-10-CM
K50.019	Crohn's disease of small intestine with unspecified complications	Diagnosis	ICD-10-CM
K50.10	Crohn's disease of large intestine without complications	Diagnosis	ICD-10-CM
K50.111	Crohn's disease of large intestine with rectal bleeding	Diagnosis	ICD-10-CM
K50.112	Crohn's disease of large intestine with intestinal obstruction	Diagnosis	ICD-10-CM
K50.113	Crohn's disease of large intestine with fistula	Diagnosis	ICD-10-CM
K50.114	Crohn's disease of large intestine with abscess	Diagnosis	ICD-10-CM
K50.118	Crohn's disease of large intestine with other complication	Diagnosis	ICD-10-CM
K50.119	Crohn's disease of large intestine with unspecified complications	Diagnosis	ICD-10-CM
K50.80	Crohn's disease of both small and large intestine without complications	Diagnosis	ICD-10-CM
K50.811	Crohn's disease of both small and large intestine with rectal bleeding	Diagnosis	ICD-10-CM
K50.812	Crohn's disease of both small and large intestine with intestinal obstruction	Diagnosis	ICD-10-CM
K50.813	Crohn's disease of both small and large intestine with fistula	Diagnosis	ICD-10-CM
K50.814	Crohn's disease of both small and large intestine with abscess	Diagnosis	ICD-10-CM
K50.818	Crohn's disease of both small and large intestine with other complication	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
K50.819	Crohn's disease of both small and large intestine with unspecified complications	Diagnosis	ICD-10-CM
K50.90	Crohn's disease, unspecified, without complications	Diagnosis	ICD-10-CM
K50.911	Crohn's disease, unspecified, with rectal bleeding	Diagnosis	ICD-10-CM
K50.912	Crohn's disease, unspecified, with intestinal obstruction	Diagnosis	ICD-10-CM
K50.913	Crohn's disease, unspecified, with fistula	Diagnosis	ICD-10-CM
K50.914	Crohn's disease, unspecified, with abscess	Diagnosis	ICD-10-CM
K50.918	Crohn's disease, unspecified, with other complication	Diagnosis	ICD-10-CM
K50.919	Crohn's disease, unspecified, with unspecified complications	Diagnosis	ICD-10-CM
K51.00	Ulcerative (chronic) pancolitis without complications	Diagnosis	ICD-10-CM
K51.011	Ulcerative (chronic) pancolitis with rectal bleeding	Diagnosis	ICD-10-CM
K51.012	Ulcerative (chronic) pancolitis with intestinal obstruction	Diagnosis	ICD-10-CM
K51.013	Ulcerative (chronic) pancolitis with fistula	Diagnosis	ICD-10-CM
K51.014	Ulcerative (chronic) pancolitis with abscess	Diagnosis	ICD-10-CM
K51.018	Ulcerative (chronic) pancolitis with other complication	Diagnosis	ICD-10-CM
K51.019	Ulcerative (chronic) pancolitis with unspecified complications	Diagnosis	ICD-10-CM
K51.20	Ulcerative (chronic) proctitis without complications	Diagnosis	ICD-10-CM
K51.211	Ulcerative (chronic) proctitis with rectal bleeding	Diagnosis	ICD-10-CM
K51.212	Ulcerative (chronic) proctitis with intestinal obstruction	Diagnosis	ICD-10-CM
K51.213	Ulcerative (chronic) proctitis with fistula	Diagnosis	ICD-10-CM
K51.214	Ulcerative (chronic) proctitis with abscess	Diagnosis	ICD-10-CM
K51.218	Ulcerative (chronic) proctitis with other complication	Diagnosis	ICD-10-CM
K51.219	Ulcerative (chronic) proctitis with unspecified complications	Diagnosis	ICD-10-CM
K51.30	Ulcerative (chronic) rectosigmoiditis without complications	Diagnosis	ICD-10-CM
K51.311	Ulcerative (chronic) rectosigmoiditis with rectal bleeding	Diagnosis	ICD-10-CM
K51.312	Ulcerative (chronic) rectosigmoiditis with intestinal obstruction	Diagnosis	ICD-10-CM
K51.313	Ulcerative (chronic) rectosigmoiditis with fistula	Diagnosis	ICD-10-CM
K51.314	Ulcerative (chronic) rectosigmoiditis with abscess	Diagnosis	ICD-10-CM
K51.318	Ulcerative (chronic) rectosigmoiditis with other complication	Diagnosis	ICD-10-CM
K51.319	Ulcerative (chronic) rectosigmoiditis with unspecified complications	Diagnosis	ICD-10-CM
K51.40	Inflammatory polyps of colon without complications	Diagnosis	ICD-10-CM
K51.411	Inflammatory polyps of colon with rectal bleeding	Diagnosis	ICD-10-CM
K51.412	Inflammatory polyps of colon with intestinal obstruction	Diagnosis	ICD-10-CM
K51.413	Inflammatory polyps of colon with fistula	Diagnosis	ICD-10-CM
K51.414	Inflammatory polyps of colon with abscess	Diagnosis	ICD-10-CM
K51.418	Inflammatory polyps of colon with other complication	Diagnosis	ICD-10-CM
K51.419	Inflammatory polyps of colon with unspecified complications	Diagnosis	ICD-10-CM
K51.50	Left sided colitis without complications	Diagnosis	ICD-10-CM
K51.511	Left sided colitis with rectal bleeding	Diagnosis	ICD-10-CM
K51.512	Left sided colitis with intestinal obstruction	Diagnosis	ICD-10-CM
K51.513	Left sided colitis with fistula	Diagnosis	ICD-10-CM
K51.514	Left sided colitis with abscess	Diagnosis	ICD-10-CM
K51.518	Left sided colitis with other complication	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
K51.519	Left sided colitis with unspecified complications	Diagnosis	ICD-10-CM
K51.80	Other ulcerative colitis without complications	Diagnosis	ICD-10-CM
K51.811	Other ulcerative colitis with rectal bleeding	Diagnosis	ICD-10-CM
K51.812	Other ulcerative colitis with intestinal obstruction	Diagnosis	ICD-10-CM
K51.813	Other ulcerative colitis with fistula	Diagnosis	ICD-10-CM
K51.814	Other ulcerative colitis with abscess	Diagnosis	ICD-10-CM
K51.818	Other ulcerative colitis with other complication	Diagnosis	ICD-10-CM
K51.819	Other ulcerative colitis with unspecified complications	Diagnosis	ICD-10-CM
K51.90	Ulcerative colitis, unspecified, without complications	Diagnosis	ICD-10-CM
K51.911	Ulcerative colitis, unspecified with rectal bleeding	Diagnosis	ICD-10-CM
K51.912	Ulcerative colitis, unspecified with intestinal obstruction	Diagnosis	ICD-10-CM
K51.913	Ulcerative colitis, unspecified with fistula	Diagnosis	ICD-10-CM
K51.914	Ulcerative colitis, unspecified with abscess	Diagnosis	ICD-10-CM
K51.918	Ulcerative colitis, unspecified with other complication	Diagnosis	ICD-10-CM
K51.919	Ulcerative colitis, unspecified with unspecified complications	Diagnosis	ICD-10-CM
K52.0	Gastroenteritis and colitis due to radiation	Diagnosis	ICD-10-CM
K52.1	Toxic gastroenteritis and colitis	Diagnosis	ICD-10-CM
K52.21	Allergic and dietetic gastroenteritis and colitis ,Food protein-induced enterocolitis syndrome	Diagnosis	ICD-10-CM
K52.22	Allergic and dietetic gastroenteritis and colitis,Food protein-induced enteropathy	Diagnosis	ICD-10-CM
K52.29	Allergic and dietetic gastroenteritis and colitis,Other allergic and dietetic gastroenteritis and colitis	Diagnosis	ICD-10-CM
K52.81	Eosinophilic gastritis or gastroenteritis	Diagnosis	ICD-10-CM
K52.82	Eosinophilic colitis	Diagnosis	ICD-10-CM
K52.89	Other specified noninfective gastroenteritis and colitis	Diagnosis	ICD-10-CM
K52.9	Noninfective gastroenteritis and colitis, unspecified	Diagnosis	ICD-10-CM
K55.011	Acute (reversible) ischemia of small intestine,Focal (segmental) acute (reversible) ischemia of small intestine	Diagnosis	ICD-10-CM
K55.012	Acute (reversible) ischemia of small intestine,Diffuse acute (reversible) ischemia of small intestine	Diagnosis	ICD-10-CM
K55.019	Acute (reversible) ischemia of small intestine,extent unspecified	Diagnosis	ICD-10-CM
K55.1	Chronic vascular disorders of intestine	Diagnosis	ICD-10-CM
K55.9	Vascular disorder of intestine, unspecified	Diagnosis	ICD-10-CM
L40	Psoriasis	Diagnosis	ICD-10-CM
L40.0	Psoriasis vulgaris	Diagnosis	ICD-10-CM
L40.1	Generalized pustular psoriasis	Diagnosis	ICD-10-CM
L40.4	Guttate psoriasis	Diagnosis	ICD-10-CM
L40.5	Arthropathic psoriasis	Diagnosis	ICD-10-CM
L40.50	Arthropathic psoriasis, unspecified	Diagnosis	ICD-10-CM
L40.52	Psoriatic arthritis mutilans	Diagnosis	ICD-10-CM
L40.8	Other psoriasis	Diagnosis	ICD-10-CM
L40.9	Psoriasis, unspecified	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
L41	Parapsoriasis	Diagnosis	ICD-10-CM
L41.3	Small plaque parapsoriasis	Diagnosis	ICD-10-CM
L41.4	Large plaque parapsoriasis	Diagnosis	ICD-10-CM
L41.5	Retiform parapsoriasis	Diagnosis	ICD-10-CM
L41.8	Other parapsoriasis	Diagnosis	ICD-10-CM
L41.9	Parapsoriasis, unspecified	Diagnosis	ICD-10-CM
L93	Lupus erythematosus	Diagnosis	ICD-10-CM
L93.0	Discoid lupus erythematosus	Diagnosis	ICD-10-CM
L93.1	Subacute cutaneous lupus erythematosus	Diagnosis	ICD-10-CM
L93.2	Other local lupus erythematosus	Diagnosis	ICD-10-CM
L94.0	Localized scleroderma [morphea]	Diagnosis	ICD-10-CM
L94.1	Linear scleroderma	Diagnosis	ICD-10-CM
M02	Postinfective and reactive arthropathies	Diagnosis	ICD-10-CM
M02.0	Arthropathy following intestinal bypass	Diagnosis	ICD-10-CM
M02.00	Arthropathy following intestinal bypass, unspecified site	Diagnosis	ICD-10-CM
M02.01	Arthropathy following intestinal bypass, shoulder	Diagnosis	ICD-10-CM
M02.011	Arthropathy following intestinal bypass, right shoulder	Diagnosis	ICD-10-CM
M02.012	Arthropathy following intestinal bypass, left shoulder	Diagnosis	ICD-10-CM
M02.019	Arthropathy following intestinal bypass, unspecified shoulder	Diagnosis	ICD-10-CM
M02.02	Arthropathy following intestinal bypass, elbow	Diagnosis	ICD-10-CM
M02.021	Arthropathy following intestinal bypass, right elbow	Diagnosis	ICD-10-CM
M02.022	Arthropathy following intestinal bypass, left elbow	Diagnosis	ICD-10-CM
M02.029	Arthropathy following intestinal bypass, unspecified elbow	Diagnosis	ICD-10-CM
M02.03	Arthropathy following intestinal bypass, wrist	Diagnosis	ICD-10-CM
M02.031	Arthropathy following intestinal bypass, right wrist	Diagnosis	ICD-10-CM
M02.032	Arthropathy following intestinal bypass, left wrist	Diagnosis	ICD-10-CM
M02.039	Arthropathy following intestinal bypass, unspecified wrist	Diagnosis	ICD-10-CM
M02.04	Arthropathy following intestinal bypass, hand	Diagnosis	ICD-10-CM
M02.041	Arthropathy following intestinal bypass, right hand	Diagnosis	ICD-10-CM
M02.042	Arthropathy following intestinal bypass, left hand	Diagnosis	ICD-10-CM
M02.049	Arthropathy following intestinal bypass, unspecified hand	Diagnosis	ICD-10-CM
M02.05	Arthropathy following intestinal bypass, hip	Diagnosis	ICD-10-CM
M02.051	Arthropathy following intestinal bypass, right hip	Diagnosis	ICD-10-CM
M02.052	Arthropathy following intestinal bypass, left hip	Diagnosis	ICD-10-CM
M02.059	Arthropathy following intestinal bypass, unspecified hip	Diagnosis	ICD-10-CM
M02.06	Arthropathy following intestinal bypass, knee	Diagnosis	ICD-10-CM
M02.061	Arthropathy following intestinal bypass, right knee	Diagnosis	ICD-10-CM
M02.062	Arthropathy following intestinal bypass, left knee	Diagnosis	ICD-10-CM
M02.069	Arthropathy following intestinal bypass, unspecified knee	Diagnosis	ICD-10-CM
M02.07	Arthropathy following intestinal bypass, ankle and foot	Diagnosis	ICD-10-CM
M02.071	Arthropathy following intestinal bypass, right ankle and foot	Diagnosis	ICD-10-CM
M02.072	Arthropathy following intestinal bypass, left ankle and foot	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M02.079	Arthropathy following intestinal bypass, unspecified ankle and foot	Diagnosis	ICD-10-CM
M02.08	Arthropathy following intestinal bypass, vertebrae	Diagnosis	ICD-10-CM
M02.09	Arthropathy following intestinal bypass, multiple sites	Diagnosis	ICD-10-CM
M02.1	Postdysenteric arthropathy	Diagnosis	ICD-10-CM
M02.10	Postdysenteric arthropathy, unspecified site	Diagnosis	ICD-10-CM
M02.11	Postdysenteric arthropathy, shoulder	Diagnosis	ICD-10-CM
M02.111	Postdysenteric arthropathy, right shoulder	Diagnosis	ICD-10-CM
M02.112	Postdysenteric arthropathy, left shoulder	Diagnosis	ICD-10-CM
M02.119	Postdysenteric arthropathy, unspecified shoulder	Diagnosis	ICD-10-CM
M02.12	Postdysenteric arthropathy, elbow	Diagnosis	ICD-10-CM
M02.121	Postdysenteric arthropathy, right elbow	Diagnosis	ICD-10-CM
M02.122	Postdysenteric arthropathy, left elbow	Diagnosis	ICD-10-CM
M02.129	Postdysenteric arthropathy, unspecified elbow	Diagnosis	ICD-10-CM
M02.13	Postdysenteric arthropathy, wrist	Diagnosis	ICD-10-CM
M02.131	Postdysenteric arthropathy, right wrist	Diagnosis	ICD-10-CM
M02.132	Postdysenteric arthropathy, left wrist	Diagnosis	ICD-10-CM
M02.139	Postdysenteric arthropathy, unspecified wrist	Diagnosis	ICD-10-CM
M02.14	Postdysenteric arthropathy, hand	Diagnosis	ICD-10-CM
M02.141	Postdysenteric arthropathy, right hand	Diagnosis	ICD-10-CM
M02.142	Postdysenteric arthropathy, left hand	Diagnosis	ICD-10-CM
M02.149	Postdysenteric arthropathy, unspecified hand	Diagnosis	ICD-10-CM
M02.15	Postdysenteric arthropathy, hip	Diagnosis	ICD-10-CM
M02.151	Postdysenteric arthropathy, right hip	Diagnosis	ICD-10-CM
M02.152	Postdysenteric arthropathy, left hip	Diagnosis	ICD-10-CM
M02.159	Postdysenteric arthropathy, unspecified hip	Diagnosis	ICD-10-CM
M02.16	Postdysenteric arthropathy, knee	Diagnosis	ICD-10-CM
M02.161	Postdysenteric arthropathy, right knee	Diagnosis	ICD-10-CM
M02.162	Postdysenteric arthropathy, left knee	Diagnosis	ICD-10-CM
M02.169	Postdysenteric arthropathy, unspecified knee	Diagnosis	ICD-10-CM
M02.17	Postdysenteric arthropathy, ankle and foot	Diagnosis	ICD-10-CM
M02.171	Postdysenteric arthropathy, right ankle and foot	Diagnosis	ICD-10-CM
M02.172	Postdysenteric arthropathy, left ankle and foot	Diagnosis	ICD-10-CM
M02.179	Postdysenteric arthropathy, unspecified ankle and foot	Diagnosis	ICD-10-CM
M02.18	Postdysenteric arthropathy, vertebrae	Diagnosis	ICD-10-CM
M02.19	Postdysenteric arthropathy, multiple sites	Diagnosis	ICD-10-CM
M02.2	Postimmunization arthropathy	Diagnosis	ICD-10-CM
M02.20	Postimmunization arthropathy, unspecified site	Diagnosis	ICD-10-CM
M02.21	Postimmunization arthropathy, shoulder	Diagnosis	ICD-10-CM
M02.211	Postimmunization arthropathy, right shoulder	Diagnosis	ICD-10-CM
M02.212	Postimmunization arthropathy, left shoulder	Diagnosis	ICD-10-CM
M02.219	Postimmunization arthropathy, unspecified shoulder	Diagnosis	ICD-10-CM
M02.22	Postimmunization arthropathy, elbow	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M02.221	Postimmunization arthropathy, right elbow	Diagnosis	ICD-10-CM
M02.222	Postimmunization arthropathy, left elbow	Diagnosis	ICD-10-CM
M02.229	Postimmunization arthropathy, unspecified elbow	Diagnosis	ICD-10-CM
M02.23	Postimmunization arthropathy, wrist	Diagnosis	ICD-10-CM
M02.231	Postimmunization arthropathy, right wrist	Diagnosis	ICD-10-CM
M02.232	Postimmunization arthropathy, left wrist	Diagnosis	ICD-10-CM
M02.239	Postimmunization arthropathy, unspecified wrist	Diagnosis	ICD-10-CM
M02.24	Postimmunization arthropathy, hand	Diagnosis	ICD-10-CM
M02.241	Postimmunization arthropathy, right hand	Diagnosis	ICD-10-CM
M02.242	Postimmunization arthropathy, left hand	Diagnosis	ICD-10-CM
M02.249	Postimmunization arthropathy, unspecified hand	Diagnosis	ICD-10-CM
M02.25	Postimmunization arthropathy, hip	Diagnosis	ICD-10-CM
M02.251	Postimmunization arthropathy, right hip	Diagnosis	ICD-10-CM
M02.252	Postimmunization arthropathy, left hip	Diagnosis	ICD-10-CM
M02.259	Postimmunization arthropathy, unspecified hip	Diagnosis	ICD-10-CM
M02.26	Postimmunization arthropathy, knee	Diagnosis	ICD-10-CM
M02.261	Postimmunization arthropathy, right knee	Diagnosis	ICD-10-CM
M02.262	Postimmunization arthropathy, left knee	Diagnosis	ICD-10-CM
M02.269	Postimmunization arthropathy, unspecified knee	Diagnosis	ICD-10-CM
M02.27	Postimmunization arthropathy, ankle and foot	Diagnosis	ICD-10-CM
M02.271	Postimmunization arthropathy, right ankle and foot	Diagnosis	ICD-10-CM
M02.272	Postimmunization arthropathy, left ankle and foot	Diagnosis	ICD-10-CM
M02.279	Postimmunization arthropathy, unspecified ankle and foot	Diagnosis	ICD-10-CM
M02.28	Postimmunization arthropathy, vertebrae	Diagnosis	ICD-10-CM
M02.29	Postimmunization arthropathy, multiple sites	Diagnosis	ICD-10-CM
M02.3	Reiter's disease	Diagnosis	ICD-10-CM
M02.30	Reiter's disease, unspecified site	Diagnosis	ICD-10-CM
M02.31	Reiter's disease, shoulder	Diagnosis	ICD-10-CM
M02.311	Reiter's disease, right shoulder	Diagnosis	ICD-10-CM
M02.312	Reiter's disease, left shoulder	Diagnosis	ICD-10-CM
M02.319	Reiter's disease, unspecified shoulder	Diagnosis	ICD-10-CM
M02.32	Reiter's disease, elbow	Diagnosis	ICD-10-CM
M02.321	Reiter's disease, right elbow	Diagnosis	ICD-10-CM
M02.322	Reiter's disease, left elbow	Diagnosis	ICD-10-CM
M02.329	Reiter's disease, unspecified elbow	Diagnosis	ICD-10-CM
M02.33	Reiter's disease, wrist	Diagnosis	ICD-10-CM
M02.331	Reiter's disease, right wrist	Diagnosis	ICD-10-CM
M02.332	Reiter's disease, left wrist	Diagnosis	ICD-10-CM
M02.339	Reiter's disease, unspecified wrist	Diagnosis	ICD-10-CM
M02.34	Reiter's disease, hand	Diagnosis	ICD-10-CM
M02.341	Reiter's disease, right hand	Diagnosis	ICD-10-CM
M02.342	Reiter's disease, left hand	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M02.349	Reiter's disease, unspecified hand	Diagnosis	ICD-10-CM
M02.35	Reiter's disease, hip	Diagnosis	ICD-10-CM
M02.351	Reiter's disease, right hip	Diagnosis	ICD-10-CM
M02.352	Reiter's disease, left hip	Diagnosis	ICD-10-CM
M02.359	Reiter's disease, unspecified hip	Diagnosis	ICD-10-CM
M02.36	Reiter's disease, knee	Diagnosis	ICD-10-CM
M02.361	Reiter's disease, right knee	Diagnosis	ICD-10-CM
M02.362	Reiter's disease, left knee	Diagnosis	ICD-10-CM
M02.369	Reiter's disease, unspecified knee	Diagnosis	ICD-10-CM
M02.37	Reiter's disease, ankle and foot	Diagnosis	ICD-10-CM
M02.371	Reiter's disease, right ankle and foot	Diagnosis	ICD-10-CM
M02.372	Reiter's disease, left ankle and foot	Diagnosis	ICD-10-CM
M02.379	Reiter's disease, unspecified ankle and foot	Diagnosis	ICD-10-CM
M02.38	Reiter's disease, vertebrae	Diagnosis	ICD-10-CM
M02.39	Reiter's disease, multiple sites	Diagnosis	ICD-10-CM
M02.8	Other reactive arthropathies	Diagnosis	ICD-10-CM
M02.80	Other reactive arthropathies, unspecified site	Diagnosis	ICD-10-CM
M02.81	Other reactive arthropathies, shoulder	Diagnosis	ICD-10-CM
M02.811	Other reactive arthropathies, right shoulder	Diagnosis	ICD-10-CM
M02.812	Other reactive arthropathies, left shoulder	Diagnosis	ICD-10-CM
M02.819	Other reactive arthropathies, unspecified shoulder	Diagnosis	ICD-10-CM
M02.82	Other reactive arthropathies, elbow	Diagnosis	ICD-10-CM
M02.821	Other reactive arthropathies, right elbow	Diagnosis	ICD-10-CM
M02.822	Other reactive arthropathies, left elbow	Diagnosis	ICD-10-CM
M02.829	Other reactive arthropathies, unspecified elbow	Diagnosis	ICD-10-CM
M02.83	Other reactive arthropathies, wrist	Diagnosis	ICD-10-CM
M02.831	Other reactive arthropathies, right wrist	Diagnosis	ICD-10-CM
M02.832	Other reactive arthropathies, left wrist	Diagnosis	ICD-10-CM
M02.839	Other reactive arthropathies, unspecified wrist	Diagnosis	ICD-10-CM
M02.84	Other reactive arthropathies, hand	Diagnosis	ICD-10-CM
M02.841	Other reactive arthropathies, right hand	Diagnosis	ICD-10-CM
M02.842	Other reactive arthropathies, left hand	Diagnosis	ICD-10-CM
M02.849	Other reactive arthropathies, unspecified hand	Diagnosis	ICD-10-CM
M02.85	Other reactive arthropathies, hip	Diagnosis	ICD-10-CM
M02.851	Other reactive arthropathies, right hip	Diagnosis	ICD-10-CM
M02.852	Other reactive arthropathies, left hip	Diagnosis	ICD-10-CM
M02.859	Other reactive arthropathies, unspecified hip	Diagnosis	ICD-10-CM
M02.86	Other reactive arthropathies, knee	Diagnosis	ICD-10-CM
M02.861	Other reactive arthropathies, right knee	Diagnosis	ICD-10-CM
M02.862	Other reactive arthropathies, left knee	Diagnosis	ICD-10-CM
M02.869	Other reactive arthropathies, unspecified knee	Diagnosis	ICD-10-CM
M02.87	Other reactive arthropathies, ankle and foot	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M02.871	Other reactive arthropathies, right ankle and foot	Diagnosis	ICD-10-CM
M02.872	Other reactive arthropathies, left ankle and foot	Diagnosis	ICD-10-CM
M02.879	Other reactive arthropathies, unspecified ankle and foot	Diagnosis	ICD-10-CM
M02.88	Other reactive arthropathies, vertebrae	Diagnosis	ICD-10-CM
M02.89	Other reactive arthropathies, multiple sites	Diagnosis	ICD-10-CM
M02.9	Reactive arthropathy, unspecified	Diagnosis	ICD-10-CM
M04	Autoinflammatory syndromes	Diagnosis	ICD-10-CM
M04.1	Periodic fever syndromes	Diagnosis	ICD-10-CM
M04.2	Cryopyrin-associated periodic syndromes	Diagnosis	ICD-10-CM
M04.8	Other autoinflammatory syndromes	Diagnosis	ICD-10-CM
M04.9	Autoinflammatory syndrome, unspecified	Diagnosis	ICD-10-CM
M05	Rheumatoid arthritis with rheumatoid factor	Diagnosis	ICD-10-CM
M05.0	Felty's syndrome	Diagnosis	ICD-10-CM
M05.00	Felty's syndrome, unspecified site	Diagnosis	ICD-10-CM
M05.01	Felty's syndrome, shoulder	Diagnosis	ICD-10-CM
M05.011	Felty's syndrome, right shoulder	Diagnosis	ICD-10-CM
M05.012	Felty's syndrome, left shoulder	Diagnosis	ICD-10-CM
M05.019	Felty's syndrome, unspecified shoulder	Diagnosis	ICD-10-CM
M05.02	Felty's syndrome, elbow	Diagnosis	ICD-10-CM
M05.021	Felty's syndrome, right elbow	Diagnosis	ICD-10-CM
M05.022	Felty's syndrome, left elbow	Diagnosis	ICD-10-CM
M05.029	Felty's syndrome, unspecified elbow	Diagnosis	ICD-10-CM
M05.03	Felty's syndrome, wrist	Diagnosis	ICD-10-CM
M05.031	Felty's syndrome, right wrist	Diagnosis	ICD-10-CM
M05.032	Felty's syndrome, left wrist	Diagnosis	ICD-10-CM
M05.039	Felty's syndrome, unspecified wrist	Diagnosis	ICD-10-CM
M05.04	Felty's syndrome, hand	Diagnosis	ICD-10-CM
M05.041	Felty's syndrome, right hand	Diagnosis	ICD-10-CM
M05.042	Felty's syndrome, left hand	Diagnosis	ICD-10-CM
M05.049	Felty's syndrome, unspecified hand	Diagnosis	ICD-10-CM
M05.05	Felty's syndrome, hip	Diagnosis	ICD-10-CM
M05.051	Felty's syndrome, right hip	Diagnosis	ICD-10-CM
M05.052	Felty's syndrome, left hip	Diagnosis	ICD-10-CM
M05.059	Felty's syndrome, unspecified hip	Diagnosis	ICD-10-CM
M05.06	Felty's syndrome, knee	Diagnosis	ICD-10-CM
M05.061	Felty's syndrome, right knee	Diagnosis	ICD-10-CM
M05.062	Felty's syndrome, left knee	Diagnosis	ICD-10-CM
M05.069	Felty's syndrome, unspecified knee	Diagnosis	ICD-10-CM
M05.07	Felty's syndrome, ankle and foot	Diagnosis	ICD-10-CM
M05.071	Felty's syndrome, right ankle and foot	Diagnosis	ICD-10-CM
M05.072	Felty's syndrome, left ankle and foot	Diagnosis	ICD-10-CM
M05.079	Felty's syndrome, unspecified ankle and foot	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M05.09	Felty's syndrome, multiple sites	Diagnosis	ICD-10-CM
M05.1	Rheumatoid lung disease with rheumatoid arthritis	Diagnosis	ICD-10-CM
M05.10	Rheumatoid lung disease with rheumatoid arthritis of unspecified site	Diagnosis	ICD-10-CM
M05.11	Rheumatoid lung disease with rheumatoid arthritis of shoulder	Diagnosis	ICD-10-CM
M05.111	Rheumatoid lung disease with rheumatoid arthritis of right shoulder	Diagnosis	ICD-10-CM
M05.112	Rheumatoid lung disease with rheumatoid arthritis of left shoulder	Diagnosis	ICD-10-CM
M05.119	Rheumatoid lung disease with rheumatoid arthritis of unspecified shoulder	Diagnosis	ICD-10-CM
M05.12	Rheumatoid lung disease with rheumatoid arthritis of elbow	Diagnosis	ICD-10-CM
M05.121	Rheumatoid lung disease with rheumatoid arthritis of right elbow	Diagnosis	ICD-10-CM
M05.122	Rheumatoid lung disease with rheumatoid arthritis of left elbow	Diagnosis	ICD-10-CM
M05.129	Rheumatoid lung disease with rheumatoid arthritis of unspecified elbow	Diagnosis	ICD-10-CM
M05.13	Rheumatoid lung disease with rheumatoid arthritis of wrist	Diagnosis	ICD-10-CM
M05.131	Rheumatoid lung disease with rheumatoid arthritis of right wrist	Diagnosis	ICD-10-CM
M05.132	Rheumatoid lung disease with rheumatoid arthritis of left wrist	Diagnosis	ICD-10-CM
M05.139	Rheumatoid lung disease with rheumatoid arthritis of unspecified wrist	Diagnosis	ICD-10-CM
M05.14	Rheumatoid lung disease with rheumatoid arthritis of hand	Diagnosis	ICD-10-CM
M05.141	Rheumatoid lung disease with rheumatoid arthritis of right hand	Diagnosis	ICD-10-CM
M05.142	Rheumatoid lung disease with rheumatoid arthritis of left hand	Diagnosis	ICD-10-CM
M05.149	Rheumatoid lung disease with rheumatoid arthritis of unspecified hand	Diagnosis	ICD-10-CM
M05.15	Rheumatoid lung disease with rheumatoid arthritis of hip	Diagnosis	ICD-10-CM
M05.151	Rheumatoid lung disease with rheumatoid arthritis of right hip	Diagnosis	ICD-10-CM
M05.152	Rheumatoid lung disease with rheumatoid arthritis of left hip	Diagnosis	ICD-10-CM
M05.159	Rheumatoid lung disease with rheumatoid arthritis of unspecified hip	Diagnosis	ICD-10-CM
M05.16	Rheumatoid lung disease with rheumatoid arthritis of knee	Diagnosis	ICD-10-CM
M05.161	Rheumatoid lung disease with rheumatoid arthritis of right knee	Diagnosis	ICD-10-CM
M05.162	Rheumatoid lung disease with rheumatoid arthritis of left knee	Diagnosis	ICD-10-CM
M05.169	Rheumatoid lung disease with rheumatoid arthritis of unspecified knee	Diagnosis	ICD-10-CM
M05.17	Rheumatoid lung disease with rheumatoid arthritis of ankle and foot	Diagnosis	ICD-10-CM
M05.171	Rheumatoid lung disease with rheumatoid arthritis of right ankle and foot	Diagnosis	ICD-10-CM
M05.172	Rheumatoid lung disease with rheumatoid arthritis of left ankle and foot	Diagnosis	ICD-10-CM
M05.179	Rheumatoid lung disease with rheumatoid arthritis of unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.19	Rheumatoid lung disease with rheumatoid arthritis of multiple sites	Diagnosis	ICD-10-CM
M05.2	Rheumatoid vasculitis with rheumatoid arthritis	Diagnosis	ICD-10-CM
M05.20	Rheumatoid vasculitis with rheumatoid arthritis of unspecified site	Diagnosis	ICD-10-CM
M05.21	Rheumatoid vasculitis with rheumatoid arthritis of shoulder	Diagnosis	ICD-10-CM
M05.211	Rheumatoid vasculitis with rheumatoid arthritis of right shoulder	Diagnosis	ICD-10-CM
M05.212	Rheumatoid vasculitis with rheumatoid arthritis of left shoulder	Diagnosis	ICD-10-CM
M05.219	Rheumatoid vasculitis with rheumatoid arthritis of unspecified shoulder	Diagnosis	ICD-10-CM
M05.22	Rheumatoid vasculitis with rheumatoid arthritis of elbow	Diagnosis	ICD-10-CM
M05.221	Rheumatoid vasculitis with rheumatoid arthritis of right elbow	Diagnosis	ICD-10-CM
M05.222	Rheumatoid vasculitis with rheumatoid arthritis of left elbow	Diagnosis	ICD-10-CM
M05.229	Rheumatoid vasculitis with rheumatoid arthritis of unspecified elbow	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M05.23	Rheumatoid vasculitis with rheumatoid arthritis of wrist	Diagnosis	ICD-10-CM
M05.231	Rheumatoid vasculitis with rheumatoid arthritis of right wrist	Diagnosis	ICD-10-CM
M05.232	Rheumatoid vasculitis with rheumatoid arthritis of left wrist	Diagnosis	ICD-10-CM
M05.239	Rheumatoid vasculitis with rheumatoid arthritis of unspecified wrist	Diagnosis	ICD-10-CM
M05.24	Rheumatoid vasculitis with rheumatoid arthritis of hand	Diagnosis	ICD-10-CM
M05.241	Rheumatoid vasculitis with rheumatoid arthritis of right hand	Diagnosis	ICD-10-CM
M05.242	Rheumatoid vasculitis with rheumatoid arthritis of left hand	Diagnosis	ICD-10-CM
M05.249	Rheumatoid vasculitis with rheumatoid arthritis of unspecified hand	Diagnosis	ICD-10-CM
M05.25	Rheumatoid vasculitis with rheumatoid arthritis of hip	Diagnosis	ICD-10-CM
M05.251	Rheumatoid vasculitis with rheumatoid arthritis of right hip	Diagnosis	ICD-10-CM
M05.252	Rheumatoid vasculitis with rheumatoid arthritis of left hip	Diagnosis	ICD-10-CM
M05.259	Rheumatoid vasculitis with rheumatoid arthritis of unspecified hip	Diagnosis	ICD-10-CM
M05.26	Rheumatoid vasculitis with rheumatoid arthritis of knee	Diagnosis	ICD-10-CM
M05.261	Rheumatoid vasculitis with rheumatoid arthritis of right knee	Diagnosis	ICD-10-CM
M05.262	Rheumatoid vasculitis with rheumatoid arthritis of left knee	Diagnosis	ICD-10-CM
M05.269	Rheumatoid vasculitis with rheumatoid arthritis of unspecified knee	Diagnosis	ICD-10-CM
M05.27	Rheumatoid vasculitis with rheumatoid arthritis of ankle and foot	Diagnosis	ICD-10-CM
M05.271	Rheumatoid vasculitis with rheumatoid arthritis of right ankle and foot	Diagnosis	ICD-10-CM
M05.272	Rheumatoid vasculitis with rheumatoid arthritis of left ankle and foot	Diagnosis	ICD-10-CM
M05.279	Rheumatoid vasculitis with rheumatoid arthritis of unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.29	Rheumatoid vasculitis with rheumatoid arthritis of multiple sites	Diagnosis	ICD-10-CM
M05.3	Rheumatoid heart disease with rheumatoid arthritis	Diagnosis	ICD-10-CM
M05.30	Rheumatoid heart disease with rheumatoid arthritis of unspecified site	Diagnosis	ICD-10-CM
M05.31	Rheumatoid heart disease with rheumatoid arthritis of shoulder	Diagnosis	ICD-10-CM
M05.311	Rheumatoid heart disease with rheumatoid arthritis of right shoulder	Diagnosis	ICD-10-CM
M05.312	Rheumatoid heart disease with rheumatoid arthritis of left shoulder	Diagnosis	ICD-10-CM
M05.319	Rheumatoid heart disease with rheumatoid arthritis of unspecified shoulder	Diagnosis	ICD-10-CM
M05.32	Rheumatoid heart disease with rheumatoid arthritis of elbow	Diagnosis	ICD-10-CM
M05.321	Rheumatoid heart disease with rheumatoid arthritis of right elbow	Diagnosis	ICD-10-CM
M05.322	Rheumatoid heart disease with rheumatoid arthritis of left elbow	Diagnosis	ICD-10-CM
M05.329	Rheumatoid heart disease with rheumatoid arthritis of unspecified elbow	Diagnosis	ICD-10-CM
M05.33	Rheumatoid heart disease with rheumatoid arthritis of wrist	Diagnosis	ICD-10-CM
M05.331	Rheumatoid heart disease with rheumatoid arthritis of right wrist	Diagnosis	ICD-10-CM
M05.332	Rheumatoid heart disease with rheumatoid arthritis of left wrist	Diagnosis	ICD-10-CM
M05.339	Rheumatoid heart disease with rheumatoid arthritis of unspecified wrist	Diagnosis	ICD-10-CM
M05.34	Rheumatoid heart disease with rheumatoid arthritis of hand	Diagnosis	ICD-10-CM
M05.341	Rheumatoid heart disease with rheumatoid arthritis of right hand	Diagnosis	ICD-10-CM
M05.342	Rheumatoid heart disease with rheumatoid arthritis of left hand	Diagnosis	ICD-10-CM
M05.349	Rheumatoid heart disease with rheumatoid arthritis of unspecified hand	Diagnosis	ICD-10-CM
M05.35	Rheumatoid heart disease with rheumatoid arthritis of hip	Diagnosis	ICD-10-CM
M05.351	Rheumatoid heart disease with rheumatoid arthritis of right hip	Diagnosis	ICD-10-CM
M05.352	Rheumatoid heart disease with rheumatoid arthritis of left hip	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M05.359	Rheumatoid heart disease with rheumatoid arthritis of unspecified hip	Diagnosis	ICD-10-CM
M05.36	Rheumatoid heart disease with rheumatoid arthritis of knee	Diagnosis	ICD-10-CM
M05.361	Rheumatoid heart disease with rheumatoid arthritis of right knee	Diagnosis	ICD-10-CM
M05.362	Rheumatoid heart disease with rheumatoid arthritis of left knee	Diagnosis	ICD-10-CM
M05.369	Rheumatoid heart disease with rheumatoid arthritis of unspecified knee	Diagnosis	ICD-10-CM
M05.37	Rheumatoid heart disease with rheumatoid arthritis of ankle and foot	Diagnosis	ICD-10-CM
M05.371	Rheumatoid heart disease with rheumatoid arthritis of right ankle and foot	Diagnosis	ICD-10-CM
M05.372	Rheumatoid heart disease with rheumatoid arthritis of left ankle and foot	Diagnosis	ICD-10-CM
M05.379	Rheumatoid heart disease with rheumatoid arthritis of unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.39	Rheumatoid heart disease with rheumatoid arthritis of multiple sites	Diagnosis	ICD-10-CM
M05.4	Rheumatoid myopathy with rheumatoid arthritis	Diagnosis	ICD-10-CM
M05.40	Rheumatoid myopathy with rheumatoid arthritis of unspecified site	Diagnosis	ICD-10-CM
M05.41	Rheumatoid myopathy with rheumatoid arthritis of shoulder	Diagnosis	ICD-10-CM
M05.411	Rheumatoid myopathy with rheumatoid arthritis of right shoulder	Diagnosis	ICD-10-CM
M05.412	Rheumatoid myopathy with rheumatoid arthritis of left shoulder	Diagnosis	ICD-10-CM
M05.419	Rheumatoid myopathy with rheumatoid arthritis of unspecified shoulder	Diagnosis	ICD-10-CM
M05.42	Rheumatoid myopathy with rheumatoid arthritis of elbow	Diagnosis	ICD-10-CM
M05.421	Rheumatoid myopathy with rheumatoid arthritis of right elbow	Diagnosis	ICD-10-CM
M05.422	Rheumatoid myopathy with rheumatoid arthritis of left elbow	Diagnosis	ICD-10-CM
M05.429	Rheumatoid myopathy with rheumatoid arthritis of unspecified elbow	Diagnosis	ICD-10-CM
M05.43	Rheumatoid myopathy with rheumatoid arthritis of wrist	Diagnosis	ICD-10-CM
M05.431	Rheumatoid myopathy with rheumatoid arthritis of right wrist	Diagnosis	ICD-10-CM
M05.432	Rheumatoid myopathy with rheumatoid arthritis of left wrist	Diagnosis	ICD-10-CM
M05.439	Rheumatoid myopathy with rheumatoid arthritis of unspecified wrist	Diagnosis	ICD-10-CM
M05.44	Rheumatoid myopathy with rheumatoid arthritis of hand	Diagnosis	ICD-10-CM
M05.441	Rheumatoid myopathy with rheumatoid arthritis of right hand	Diagnosis	ICD-10-CM
M05.442	Rheumatoid myopathy with rheumatoid arthritis of left hand	Diagnosis	ICD-10-CM
M05.449	Rheumatoid myopathy with rheumatoid arthritis of unspecified hand	Diagnosis	ICD-10-CM
M05.45	Rheumatoid myopathy with rheumatoid arthritis of hip	Diagnosis	ICD-10-CM
M05.451	Rheumatoid myopathy with rheumatoid arthritis of right hip	Diagnosis	ICD-10-CM
M05.452	Rheumatoid myopathy with rheumatoid arthritis of left hip	Diagnosis	ICD-10-CM
M05.459	Rheumatoid myopathy with rheumatoid arthritis of unspecified hip	Diagnosis	ICD-10-CM
M05.46	Rheumatoid myopathy with rheumatoid arthritis of knee	Diagnosis	ICD-10-CM
M05.461	Rheumatoid myopathy with rheumatoid arthritis of right knee	Diagnosis	ICD-10-CM
M05.462	Rheumatoid myopathy with rheumatoid arthritis of left knee	Diagnosis	ICD-10-CM
M05.469	Rheumatoid myopathy with rheumatoid arthritis of unspecified knee	Diagnosis	ICD-10-CM
M05.47	Rheumatoid myopathy with rheumatoid arthritis of ankle and foot	Diagnosis	ICD-10-CM
M05.471	Rheumatoid myopathy with rheumatoid arthritis of right ankle and foot	Diagnosis	ICD-10-CM
M05.472	Rheumatoid myopathy with rheumatoid arthritis of left ankle and foot	Diagnosis	ICD-10-CM
M05.479	Rheumatoid myopathy with rheumatoid arthritis of unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.49	Rheumatoid myopathy with rheumatoid arthritis of multiple sites	Diagnosis	ICD-10-CM
M05.5	Rheumatoid polyneuropathy with rheumatoid arthritis	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M05.50	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified site	Diagnosis	ICD-10-CM
M05.51	Rheumatoid polyneuropathy with rheumatoid arthritis of shoulder	Diagnosis	ICD-10-CM
M05.511	Rheumatoid polyneuropathy with rheumatoid arthritis of right shoulder	Diagnosis	ICD-10-CM
M05.512	Rheumatoid polyneuropathy with rheumatoid arthritis of left shoulder	Diagnosis	ICD-10-CM
M05.519	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified shoulder	Diagnosis	ICD-10-CM
M05.52	Rheumatoid polyneuropathy with rheumatoid arthritis of elbow	Diagnosis	ICD-10-CM
M05.521	Rheumatoid polyneuropathy with rheumatoid arthritis of right elbow	Diagnosis	ICD-10-CM
M05.522	Rheumatoid polyneuropathy with rheumatoid arthritis of left elbow	Diagnosis	ICD-10-CM
M05.529	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified elbow	Diagnosis	ICD-10-CM
M05.53	Rheumatoid polyneuropathy with rheumatoid arthritis of wrist	Diagnosis	ICD-10-CM
M05.531	Rheumatoid polyneuropathy with rheumatoid arthritis of right wrist	Diagnosis	ICD-10-CM
M05.532	Rheumatoid polyneuropathy with rheumatoid arthritis of left wrist	Diagnosis	ICD-10-CM
M05.539	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified wrist	Diagnosis	ICD-10-CM
M05.54	Rheumatoid polyneuropathy with rheumatoid arthritis of hand	Diagnosis	ICD-10-CM
M05.541	Rheumatoid polyneuropathy with rheumatoid arthritis of right hand	Diagnosis	ICD-10-CM
M05.542	Rheumatoid polyneuropathy with rheumatoid arthritis of left hand	Diagnosis	ICD-10-CM
M05.549	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified hand	Diagnosis	ICD-10-CM
M05.55	Rheumatoid polyneuropathy with rheumatoid arthritis of hip	Diagnosis	ICD-10-CM
M05.551	Rheumatoid polyneuropathy with rheumatoid arthritis of right hip	Diagnosis	ICD-10-CM
M05.552	Rheumatoid polyneuropathy with rheumatoid arthritis of left hip	Diagnosis	ICD-10-CM
M05.559	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified hip	Diagnosis	ICD-10-CM
M05.56	Rheumatoid polyneuropathy with rheumatoid arthritis of knee	Diagnosis	ICD-10-CM
M05.561	Rheumatoid polyneuropathy with rheumatoid arthritis of right knee	Diagnosis	ICD-10-CM
M05.562	Rheumatoid polyneuropathy with rheumatoid arthritis of left knee	Diagnosis	ICD-10-CM
M05.569	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified knee	Diagnosis	ICD-10-CM
M05.57	Rheumatoid polyneuropathy with rheumatoid arthritis of ankle and foot	Diagnosis	ICD-10-CM
M05.571	Rheumatoid polyneuropathy with rheumatoid arthritis of right ankle and foot	Diagnosis	ICD-10-CM
M05.572	Rheumatoid polyneuropathy with rheumatoid arthritis of left ankle and foot	Diagnosis	ICD-10-CM
M05.579	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.59	Rheumatoid polyneuropathy with rheumatoid arthritis of multiple sites	Diagnosis	ICD-10-CM
M05.6	Rheumatoid arthritis with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.60	Rheumatoid arthritis of unspecified site with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.61	Rheumatoid arthritis of shoulder with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.611	Rheumatoid arthritis of right shoulder with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.612	Rheumatoid arthritis of left shoulder with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.619	Rheumatoid arthritis of unspecified shoulder with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.62	Rheumatoid arthritis of elbow with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.621	Rheumatoid arthritis of right elbow with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.622	Rheumatoid arthritis of left elbow with involvement of other organs and systems	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M05.629	Rheumatoid arthritis of unspecified elbow with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.63	Rheumatoid arthritis of wrist with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.631	Rheumatoid arthritis of right wrist with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.632	Rheumatoid arthritis of left wrist with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.639	Rheumatoid arthritis of unspecified wrist with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.64	Rheumatoid arthritis of hand with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.641	Rheumatoid arthritis of right hand with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.642	Rheumatoid arthritis of left hand with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.649	Rheumatoid arthritis of unspecified hand with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.65	Rheumatoid arthritis of hip with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.651	Rheumatoid arthritis of right hip with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.652	Rheumatoid arthritis of left hip with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.659	Rheumatoid arthritis of unspecified hip with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.66	Rheumatoid arthritis of knee with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.661	Rheumatoid arthritis of right knee with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.662	Rheumatoid arthritis of left knee with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.669	Rheumatoid arthritis of unspecified knee with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.67	Rheumatoid arthritis of ankle and foot with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.671	Rheumatoid arthritis of right ankle and foot with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.672	Rheumatoid arthritis of left ankle and foot with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.679	Rheumatoid arthritis of unspecified ankle and foot with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.69	Rheumatoid arthritis of multiple sites with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.7	Rheumatoid arthritis with rheumatoid factor without organ or systems involvement	Diagnosis	ICD-10-CM
M05.70	Rheumatoid arthritis with rheumatoid factor of unspecified site without organ or systems involvement	Diagnosis	ICD-10-CM
M05.71	Rheumatoid arthritis with rheumatoid factor of shoulder without organ or systems involvement	Diagnosis	ICD-10-CM
M05.711	Rheumatoid arthritis with rheumatoid factor of right shoulder without organ or systems involvement	Diagnosis	ICD-10-CM
M05.712	Rheumatoid arthritis with rheumatoid factor of left shoulder without organ or systems involvement	Diagnosis	ICD-10-CM
M05.719	Rheumatoid arthritis with rheumatoid factor of unspecified shoulder without organ or systems involvement	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M05.72	Rheumatoid arthritis with rheumatoid factor of elbow without organ or systems involvement	Diagnosis	ICD-10-CM
M05.721	Rheumatoid arthritis with rheumatoid factor of right elbow without organ or systems involvement	Diagnosis	ICD-10-CM
M05.722	Rheumatoid arthritis with rheumatoid factor of left elbow without organ or systems involvement	Diagnosis	ICD-10-CM
M05.729	Rheumatoid arthritis with rheumatoid factor of unspecified elbow without organ or systems involvement	Diagnosis	ICD-10-CM
M05.73	Rheumatoid arthritis with rheumatoid factor of wrist without organ or systems involvement	Diagnosis	ICD-10-CM
M05.731	Rheumatoid arthritis with rheumatoid factor of right wrist without organ or systems involvement	Diagnosis	ICD-10-CM
M05.732	Rheumatoid arthritis with rheumatoid factor of left wrist without organ or systems involvement	Diagnosis	ICD-10-CM
M05.739	Rheumatoid arthritis with rheumatoid factor of unspecified wrist without organ or systems involvement	Diagnosis	ICD-10-CM
M05.74	Rheumatoid arthritis with rheumatoid factor of hand without organ or systems involvement	Diagnosis	ICD-10-CM
M05.741	Rheumatoid arthritis with rheumatoid factor of right hand without organ or systems involvement	Diagnosis	ICD-10-CM
M05.742	Rheumatoid arthritis with rheumatoid factor of left hand without organ or systems involvement	Diagnosis	ICD-10-CM
M05.749	Rheumatoid arthritis with rheumatoid factor of unspecified hand without organ or systems involvement	Diagnosis	ICD-10-CM
M05.75	Rheumatoid arthritis with rheumatoid factor of hip without organ or systems involvement	Diagnosis	ICD-10-CM
M05.751	Rheumatoid arthritis with rheumatoid factor of right hip without organ or systems involvement	Diagnosis	ICD-10-CM
M05.752	Rheumatoid arthritis with rheumatoid factor of left hip without organ or systems involvement	Diagnosis	ICD-10-CM
M05.759	Rheumatoid arthritis with rheumatoid factor of unspecified hip without organ or systems involvement	Diagnosis	ICD-10-CM
M05.76	Rheumatoid arthritis with rheumatoid factor of knee without organ or systems involvement	Diagnosis	ICD-10-CM
M05.761	Rheumatoid arthritis with rheumatoid factor of right knee without organ or systems involvement	Diagnosis	ICD-10-CM
M05.762	Rheumatoid arthritis with rheumatoid factor of left knee without organ or systems involvement	Diagnosis	ICD-10-CM
M05.769	Rheumatoid arthritis with rheumatoid factor of unspecified knee without organ or systems involvement	Diagnosis	ICD-10-CM
M05.77	Rheumatoid arthritis with rheumatoid factor of ankle and foot without organ or systems involvement	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M05.771	Rheumatoid arthritis with rheumatoid factor of right ankle and foot without organ or systems involvement	Diagnosis	ICD-10-CM
M05.772	Rheumatoid arthritis with rheumatoid factor of left ankle and foot without organ or systems involvement	Diagnosis	ICD-10-CM
M05.779	Rheumatoid arthritis with rheumatoid factor of unspecified ankle and foot without organ or systems involvement	Diagnosis	ICD-10-CM
M05.79	Rheumatoid arthritis with rheumatoid factor of multiple sites without organ or systems involvement	Diagnosis	ICD-10-CM
M05.8	Other rheumatoid arthritis with rheumatoid factor	Diagnosis	ICD-10-CM
M05.80	Other rheumatoid arthritis with rheumatoid factor of unspecified site	Diagnosis	ICD-10-CM
M05.81	Other rheumatoid arthritis with rheumatoid factor of shoulder	Diagnosis	ICD-10-CM
M05.811	Other rheumatoid arthritis with rheumatoid factor of right shoulder	Diagnosis	ICD-10-CM
M05.812	Other rheumatoid arthritis with rheumatoid factor of left shoulder	Diagnosis	ICD-10-CM
M05.819	Other rheumatoid arthritis with rheumatoid factor of unspecified shoulder	Diagnosis	ICD-10-CM
M05.82	Other rheumatoid arthritis with rheumatoid factor of elbow	Diagnosis	ICD-10-CM
M05.821	Other rheumatoid arthritis with rheumatoid factor of right elbow	Diagnosis	ICD-10-CM
M05.822	Other rheumatoid arthritis with rheumatoid factor of left elbow	Diagnosis	ICD-10-CM
M05.829	Other rheumatoid arthritis with rheumatoid factor of unspecified elbow	Diagnosis	ICD-10-CM
M05.83	Other rheumatoid arthritis with rheumatoid factor of wrist	Diagnosis	ICD-10-CM
M05.831	Other rheumatoid arthritis with rheumatoid factor of right wrist	Diagnosis	ICD-10-CM
M05.832	Other rheumatoid arthritis with rheumatoid factor of left wrist	Diagnosis	ICD-10-CM
M05.839	Other rheumatoid arthritis with rheumatoid factor of unspecified wrist	Diagnosis	ICD-10-CM
M05.84	Other rheumatoid arthritis with rheumatoid factor of hand	Diagnosis	ICD-10-CM
M05.841	Other rheumatoid arthritis with rheumatoid factor of right hand	Diagnosis	ICD-10-CM
M05.842	Other rheumatoid arthritis with rheumatoid factor of left hand	Diagnosis	ICD-10-CM
M05.849	Other rheumatoid arthritis with rheumatoid factor of unspecified hand	Diagnosis	ICD-10-CM
M05.85	Other rheumatoid arthritis with rheumatoid factor of hip	Diagnosis	ICD-10-CM
M05.851	Other rheumatoid arthritis with rheumatoid factor of right hip	Diagnosis	ICD-10-CM
M05.852	Other rheumatoid arthritis with rheumatoid factor of left hip	Diagnosis	ICD-10-CM
M05.859	Other rheumatoid arthritis with rheumatoid factor of unspecified hip	Diagnosis	ICD-10-CM
M05.86	Other rheumatoid arthritis with rheumatoid factor of knee	Diagnosis	ICD-10-CM
M05.861	Other rheumatoid arthritis with rheumatoid factor of right knee	Diagnosis	ICD-10-CM
M05.862	Other rheumatoid arthritis with rheumatoid factor of left knee	Diagnosis	ICD-10-CM
M05.869	Other rheumatoid arthritis with rheumatoid factor of unspecified knee	Diagnosis	ICD-10-CM
M05.87	Other rheumatoid arthritis with rheumatoid factor of ankle and foot	Diagnosis	ICD-10-CM
M05.871	Other rheumatoid arthritis with rheumatoid factor of right ankle and foot	Diagnosis	ICD-10-CM
M05.872	Other rheumatoid arthritis with rheumatoid factor of left ankle and foot	Diagnosis	ICD-10-CM
M05.879	Other rheumatoid arthritis with rheumatoid factor of unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.89	Other rheumatoid arthritis with rheumatoid factor of multiple sites	Diagnosis	ICD-10-CM
M05.9	Rheumatoid arthritis with rheumatoid factor, unspecified	Diagnosis	ICD-10-CM
M06	Other rheumatoid arthritis	Diagnosis	ICD-10-CM
M06.0	Rheumatoid arthritis without rheumatoid factor	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M06.00	Rheumatoid arthritis without rheumatoid factor, unspecified site	Diagnosis	ICD-10-CM
M06.01	Rheumatoid arthritis without rheumatoid factor, shoulder	Diagnosis	ICD-10-CM
M06.011	Rheumatoid arthritis without rheumatoid factor, right shoulder	Diagnosis	ICD-10-CM
M06.012	Rheumatoid arthritis without rheumatoid factor, left shoulder	Diagnosis	ICD-10-CM
M06.019	Rheumatoid arthritis without rheumatoid factor, unspecified shoulder	Diagnosis	ICD-10-CM
M06.02	Rheumatoid arthritis without rheumatoid factor, elbow	Diagnosis	ICD-10-CM
M06.021	Rheumatoid arthritis without rheumatoid factor, right elbow	Diagnosis	ICD-10-CM
M06.022	Rheumatoid arthritis without rheumatoid factor, left elbow	Diagnosis	ICD-10-CM
M06.029	Rheumatoid arthritis without rheumatoid factor, unspecified elbow	Diagnosis	ICD-10-CM
M06.03	Rheumatoid arthritis without rheumatoid factor, wrist	Diagnosis	ICD-10-CM
M06.031	Rheumatoid arthritis without rheumatoid factor, right wrist	Diagnosis	ICD-10-CM
M06.032	Rheumatoid arthritis without rheumatoid factor, left wrist	Diagnosis	ICD-10-CM
M06.039	Rheumatoid arthritis without rheumatoid factor, unspecified wrist	Diagnosis	ICD-10-CM
M06.04	Rheumatoid arthritis without rheumatoid factor, hand	Diagnosis	ICD-10-CM
M06.041	Rheumatoid arthritis without rheumatoid factor, right hand	Diagnosis	ICD-10-CM
M06.042	Rheumatoid arthritis without rheumatoid factor, left hand	Diagnosis	ICD-10-CM
M06.049	Rheumatoid arthritis without rheumatoid factor, unspecified hand	Diagnosis	ICD-10-CM
M06.05	Rheumatoid arthritis without rheumatoid factor, hip	Diagnosis	ICD-10-CM
M06.051	Rheumatoid arthritis without rheumatoid factor, right hip	Diagnosis	ICD-10-CM
M06.052	Rheumatoid arthritis without rheumatoid factor, left hip	Diagnosis	ICD-10-CM
M06.059	Rheumatoid arthritis without rheumatoid factor, unspecified hip	Diagnosis	ICD-10-CM
M06.06	Rheumatoid arthritis without rheumatoid factor, knee	Diagnosis	ICD-10-CM
M06.061	Rheumatoid arthritis without rheumatoid factor, right knee	Diagnosis	ICD-10-CM
M06.062	Rheumatoid arthritis without rheumatoid factor, left knee	Diagnosis	ICD-10-CM
M06.069	Rheumatoid arthritis without rheumatoid factor, unspecified knee	Diagnosis	ICD-10-CM
M06.07	Rheumatoid arthritis without rheumatoid factor, ankle and foot	Diagnosis	ICD-10-CM
M06.071	Rheumatoid arthritis without rheumatoid factor, right ankle and foot	Diagnosis	ICD-10-CM
M06.072	Rheumatoid arthritis without rheumatoid factor, left ankle and foot	Diagnosis	ICD-10-CM
M06.079	Rheumatoid arthritis without rheumatoid factor, unspecified ankle and foot	Diagnosis	ICD-10-CM
M06.08	Rheumatoid arthritis without rheumatoid factor, vertebrae	Diagnosis	ICD-10-CM
M06.09	Rheumatoid arthritis without rheumatoid factor, multiple sites	Diagnosis	ICD-10-CM
M06.1	Adult-onset Still's disease	Diagnosis	ICD-10-CM
M06.2	Rheumatoid bursitis	Diagnosis	ICD-10-CM
M06.20	Rheumatoid bursitis, unspecified site	Diagnosis	ICD-10-CM
M06.21	Rheumatoid bursitis, shoulder	Diagnosis	ICD-10-CM
M06.211	Rheumatoid bursitis, right shoulder	Diagnosis	ICD-10-CM
M06.212	Rheumatoid bursitis, left shoulder	Diagnosis	ICD-10-CM
M06.219	Rheumatoid bursitis, unspecified shoulder	Diagnosis	ICD-10-CM
M06.22	Rheumatoid bursitis, elbow	Diagnosis	ICD-10-CM
M06.221	Rheumatoid bursitis, right elbow	Diagnosis	ICD-10-CM
M06.222	Rheumatoid bursitis, left elbow	Diagnosis	ICD-10-CM
M06.229	Rheumatoid bursitis, unspecified elbow	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M06.23	Rheumatoid bursitis, wrist	Diagnosis	ICD-10-CM
M06.231	Rheumatoid bursitis, right wrist	Diagnosis	ICD-10-CM
M06.232	Rheumatoid bursitis, left wrist	Diagnosis	ICD-10-CM
M06.239	Rheumatoid bursitis, unspecified wrist	Diagnosis	ICD-10-CM
M06.24	Rheumatoid bursitis, hand	Diagnosis	ICD-10-CM
M06.241	Rheumatoid bursitis, right hand	Diagnosis	ICD-10-CM
M06.242	Rheumatoid bursitis, left hand	Diagnosis	ICD-10-CM
M06.249	Rheumatoid bursitis, unspecified hand	Diagnosis	ICD-10-CM
M06.25	Rheumatoid bursitis, hip	Diagnosis	ICD-10-CM
M06.251	Rheumatoid bursitis, right hip	Diagnosis	ICD-10-CM
M06.252	Rheumatoid bursitis, left hip	Diagnosis	ICD-10-CM
M06.259	Rheumatoid bursitis, unspecified hip	Diagnosis	ICD-10-CM
M06.26	Rheumatoid bursitis, knee	Diagnosis	ICD-10-CM
M06.261	Rheumatoid bursitis, right knee	Diagnosis	ICD-10-CM
M06.262	Rheumatoid bursitis, left knee	Diagnosis	ICD-10-CM
M06.269	Rheumatoid bursitis, unspecified knee	Diagnosis	ICD-10-CM
M06.27	Rheumatoid bursitis, ankle and foot	Diagnosis	ICD-10-CM
M06.271	Rheumatoid bursitis, right ankle and foot	Diagnosis	ICD-10-CM
M06.272	Rheumatoid bursitis, left ankle and foot	Diagnosis	ICD-10-CM
M06.279	Rheumatoid bursitis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M06.28	Rheumatoid bursitis, vertebrae	Diagnosis	ICD-10-CM
M06.29	Rheumatoid bursitis, multiple sites	Diagnosis	ICD-10-CM
M06.3	Rheumatoid nodule	Diagnosis	ICD-10-CM
M06.30	Rheumatoid nodule, unspecified site	Diagnosis	ICD-10-CM
M06.31	Rheumatoid nodule, shoulder	Diagnosis	ICD-10-CM
M06.311	Rheumatoid nodule, right shoulder	Diagnosis	ICD-10-CM
M06.312	Rheumatoid nodule, left shoulder	Diagnosis	ICD-10-CM
M06.319	Rheumatoid nodule, unspecified shoulder	Diagnosis	ICD-10-CM
M06.32	Rheumatoid nodule, elbow	Diagnosis	ICD-10-CM
M06.321	Rheumatoid nodule, right elbow	Diagnosis	ICD-10-CM
M06.322	Rheumatoid nodule, left elbow	Diagnosis	ICD-10-CM
M06.329	Rheumatoid nodule, unspecified elbow	Diagnosis	ICD-10-CM
M06.33	Rheumatoid nodule, wrist	Diagnosis	ICD-10-CM
M06.331	Rheumatoid nodule, right wrist	Diagnosis	ICD-10-CM
M06.332	Rheumatoid nodule, left wrist	Diagnosis	ICD-10-CM
M06.339	Rheumatoid nodule, unspecified wrist	Diagnosis	ICD-10-CM
M06.34	Rheumatoid nodule, hand	Diagnosis	ICD-10-CM
M06.341	Rheumatoid nodule, right hand	Diagnosis	ICD-10-CM
M06.342	Rheumatoid nodule, left hand	Diagnosis	ICD-10-CM
M06.349	Rheumatoid nodule, unspecified hand	Diagnosis	ICD-10-CM
M06.35	Rheumatoid nodule, hip	Diagnosis	ICD-10-CM
M06.351	Rheumatoid nodule, right hip	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M06.352	Rheumatoid nodule, left hip	Diagnosis	ICD-10-CM
M06.359	Rheumatoid nodule, unspecified hip	Diagnosis	ICD-10-CM
M06.36	Rheumatoid nodule, knee	Diagnosis	ICD-10-CM
M06.361	Rheumatoid nodule, right knee	Diagnosis	ICD-10-CM
M06.362	Rheumatoid nodule, left knee	Diagnosis	ICD-10-CM
M06.369	Rheumatoid nodule, unspecified knee	Diagnosis	ICD-10-CM
M06.37	Rheumatoid nodule, ankle and foot	Diagnosis	ICD-10-CM
M06.371	Rheumatoid nodule, right ankle and foot	Diagnosis	ICD-10-CM
M06.372	Rheumatoid nodule, left ankle and foot	Diagnosis	ICD-10-CM
M06.379	Rheumatoid nodule, unspecified ankle and foot	Diagnosis	ICD-10-CM
M06.38	Rheumatoid nodule, vertebrae	Diagnosis	ICD-10-CM
M06.39	Rheumatoid nodule, multiple sites	Diagnosis	ICD-10-CM
M06.4	Inflammatory polyarthropathy	Diagnosis	ICD-10-CM
M06.8	Other specified rheumatoid arthritis	Diagnosis	ICD-10-CM
M06.80	Other specified rheumatoid arthritis, unspecified site	Diagnosis	ICD-10-CM
M06.81	Other specified rheumatoid arthritis, shoulder	Diagnosis	ICD-10-CM
M06.811	Other specified rheumatoid arthritis, right shoulder	Diagnosis	ICD-10-CM
M06.812	Other specified rheumatoid arthritis, left shoulder	Diagnosis	ICD-10-CM
M06.819	Other specified rheumatoid arthritis, unspecified shoulder	Diagnosis	ICD-10-CM
M06.82	Other specified rheumatoid arthritis, elbow	Diagnosis	ICD-10-CM
M06.821	Other specified rheumatoid arthritis, right elbow	Diagnosis	ICD-10-CM
M06.822	Other specified rheumatoid arthritis, left elbow	Diagnosis	ICD-10-CM
M06.829	Other specified rheumatoid arthritis, unspecified elbow	Diagnosis	ICD-10-CM
M06.83	Other specified rheumatoid arthritis, wrist	Diagnosis	ICD-10-CM
M06.831	Other specified rheumatoid arthritis, right wrist	Diagnosis	ICD-10-CM
M06.832	Other specified rheumatoid arthritis, left wrist	Diagnosis	ICD-10-CM
M06.839	Other specified rheumatoid arthritis, unspecified wrist	Diagnosis	ICD-10-CM
M06.84	Other specified rheumatoid arthritis, hand	Diagnosis	ICD-10-CM
M06.841	Other specified rheumatoid arthritis, right hand	Diagnosis	ICD-10-CM
M06.842	Other specified rheumatoid arthritis, left hand	Diagnosis	ICD-10-CM
M06.849	Other specified rheumatoid arthritis, unspecified hand	Diagnosis	ICD-10-CM
M06.85	Other specified rheumatoid arthritis, hip	Diagnosis	ICD-10-CM
M06.851	Other specified rheumatoid arthritis, right hip	Diagnosis	ICD-10-CM
M06.852	Other specified rheumatoid arthritis, left hip	Diagnosis	ICD-10-CM
M06.859	Other specified rheumatoid arthritis, unspecified hip	Diagnosis	ICD-10-CM
M06.86	Other specified rheumatoid arthritis, knee	Diagnosis	ICD-10-CM
M06.861	Other specified rheumatoid arthritis, right knee	Diagnosis	ICD-10-CM
M06.862	Other specified rheumatoid arthritis, left knee	Diagnosis	ICD-10-CM
M06.869	Other specified rheumatoid arthritis, unspecified knee	Diagnosis	ICD-10-CM
M06.87	Other specified rheumatoid arthritis, ankle and foot	Diagnosis	ICD-10-CM
M06.871	Other specified rheumatoid arthritis, right ankle and foot	Diagnosis	ICD-10-CM
M06.872	Other specified rheumatoid arthritis, left ankle and foot	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M06.879	Other specified rheumatoid arthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M06.88	Other specified rheumatoid arthritis, vertebrae	Diagnosis	ICD-10-CM
M06.89	Other specified rheumatoid arthritis, multiple sites	Diagnosis	ICD-10-CM
M06.9	Rheumatoid arthritis, unspecified	Diagnosis	ICD-10-CM
M08	Juvenile arthritis	Diagnosis	ICD-10-CM
M08.0	Unspecified juvenile rheumatoid arthritis	Diagnosis	ICD-10-CM
M08.00	Unspecified juvenile rheumatoid arthritis of unspecified site	Diagnosis	ICD-10-CM
M08.01	Unspecified juvenile rheumatoid arthritis, shoulder	Diagnosis	ICD-10-CM
M08.011	Unspecified juvenile rheumatoid arthritis, right shoulder	Diagnosis	ICD-10-CM
M08.012	Unspecified juvenile rheumatoid arthritis, left shoulder	Diagnosis	ICD-10-CM
M08.019	Unspecified juvenile rheumatoid arthritis, unspecified shoulder	Diagnosis	ICD-10-CM
M08.02	Unspecified juvenile rheumatoid arthritis of elbow	Diagnosis	ICD-10-CM
M08.021	Unspecified juvenile rheumatoid arthritis, right elbow	Diagnosis	ICD-10-CM
M08.022	Unspecified juvenile rheumatoid arthritis, left elbow	Diagnosis	ICD-10-CM
M08.029	Unspecified juvenile rheumatoid arthritis, unspecified elbow	Diagnosis	ICD-10-CM
M08.03	Unspecified juvenile rheumatoid arthritis, wrist	Diagnosis	ICD-10-CM
M08.031	Unspecified juvenile rheumatoid arthritis, right wrist	Diagnosis	ICD-10-CM
M08.032	Unspecified juvenile rheumatoid arthritis, left wrist	Diagnosis	ICD-10-CM
M08.039	Unspecified juvenile rheumatoid arthritis, unspecified wrist	Diagnosis	ICD-10-CM
M08.04	Unspecified juvenile rheumatoid arthritis, hand	Diagnosis	ICD-10-CM
M08.041	Unspecified juvenile rheumatoid arthritis, right hand	Diagnosis	ICD-10-CM
M08.042	Unspecified juvenile rheumatoid arthritis, left hand	Diagnosis	ICD-10-CM
M08.049	Unspecified juvenile rheumatoid arthritis, unspecified hand	Diagnosis	ICD-10-CM
M08.05	Unspecified juvenile rheumatoid arthritis, hip	Diagnosis	ICD-10-CM
M08.051	Unspecified juvenile rheumatoid arthritis, right hip	Diagnosis	ICD-10-CM
M08.052	Unspecified juvenile rheumatoid arthritis, left hip	Diagnosis	ICD-10-CM
M08.059	Unspecified juvenile rheumatoid arthritis, unspecified hip	Diagnosis	ICD-10-CM
M08.06	Unspecified juvenile rheumatoid arthritis, knee	Diagnosis	ICD-10-CM
M08.061	Unspecified juvenile rheumatoid arthritis, right knee	Diagnosis	ICD-10-CM
M08.062	Unspecified juvenile rheumatoid arthritis, left knee	Diagnosis	ICD-10-CM
M08.069	Unspecified juvenile rheumatoid arthritis, unspecified knee	Diagnosis	ICD-10-CM
M08.07	Unspecified juvenile rheumatoid arthritis, ankle and foot	Diagnosis	ICD-10-CM
M08.071	Unspecified juvenile rheumatoid arthritis, right ankle and foot	Diagnosis	ICD-10-CM
M08.072	Unspecified juvenile rheumatoid arthritis, left ankle and foot	Diagnosis	ICD-10-CM
M08.079	Unspecified juvenile rheumatoid arthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M08.08	Unspecified juvenile rheumatoid arthritis, vertebrae	Diagnosis	ICD-10-CM
M08.09	Unspecified juvenile rheumatoid arthritis, multiple sites	Diagnosis	ICD-10-CM
M08.1	Juvenile ankylosing spondylitis	Diagnosis	ICD-10-CM
M08.2	Juvenile rheumatoid arthritis with systemic onset	Diagnosis	ICD-10-CM
M08.20	Juvenile rheumatoid arthritis with systemic onset, unspecified site	Diagnosis	ICD-10-CM
M08.21	Juvenile rheumatoid arthritis with systemic onset, shoulder	Diagnosis	ICD-10-CM
M08.211	Juvenile rheumatoid arthritis with systemic onset, right shoulder	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M08.212	Juvenile rheumatoid arthritis with systemic onset, left shoulder	Diagnosis	ICD-10-CM
M08.219	Juvenile rheumatoid arthritis with systemic onset, unspecified shoulder	Diagnosis	ICD-10-CM
M08.22	Juvenile rheumatoid arthritis with systemic onset, elbow	Diagnosis	ICD-10-CM
M08.221	Juvenile rheumatoid arthritis with systemic onset, right elbow	Diagnosis	ICD-10-CM
M08.222	Juvenile rheumatoid arthritis with systemic onset, left elbow	Diagnosis	ICD-10-CM
M08.229	Juvenile rheumatoid arthritis with systemic onset, unspecified elbow	Diagnosis	ICD-10-CM
M08.23	Juvenile rheumatoid arthritis with systemic onset, wrist	Diagnosis	ICD-10-CM
M08.231	Juvenile rheumatoid arthritis with systemic onset, right wrist	Diagnosis	ICD-10-CM
M08.232	Juvenile rheumatoid arthritis with systemic onset, left wrist	Diagnosis	ICD-10-CM
M08.239	Juvenile rheumatoid arthritis with systemic onset, unspecified wrist	Diagnosis	ICD-10-CM
M08.24	Juvenile rheumatoid arthritis with systemic onset, hand	Diagnosis	ICD-10-CM
M08.241	Juvenile rheumatoid arthritis with systemic onset, right hand	Diagnosis	ICD-10-CM
M08.242	Juvenile rheumatoid arthritis with systemic onset, left hand	Diagnosis	ICD-10-CM
M08.249	Juvenile rheumatoid arthritis with systemic onset, unspecified hand	Diagnosis	ICD-10-CM
M08.25	Juvenile rheumatoid arthritis with systemic onset, hip	Diagnosis	ICD-10-CM
M08.251	Juvenile rheumatoid arthritis with systemic onset, right hip	Diagnosis	ICD-10-CM
M08.252	Juvenile rheumatoid arthritis with systemic onset, left hip	Diagnosis	ICD-10-CM
M08.259	Juvenile rheumatoid arthritis with systemic onset, unspecified hip	Diagnosis	ICD-10-CM
M08.26	Juvenile rheumatoid arthritis with systemic onset, knee	Diagnosis	ICD-10-CM
M08.261	Juvenile rheumatoid arthritis with systemic onset, right knee	Diagnosis	ICD-10-CM
M08.262	Juvenile rheumatoid arthritis with systemic onset, left knee	Diagnosis	ICD-10-CM
M08.269	Juvenile rheumatoid arthritis with systemic onset, unspecified knee	Diagnosis	ICD-10-CM
M08.27	Juvenile rheumatoid arthritis with systemic onset, ankle and foot	Diagnosis	ICD-10-CM
M08.271	Juvenile rheumatoid arthritis with systemic onset, right ankle and foot	Diagnosis	ICD-10-CM
M08.272	Juvenile rheumatoid arthritis with systemic onset, left ankle and foot	Diagnosis	ICD-10-CM
M08.279	Juvenile rheumatoid arthritis with systemic onset, unspecified ankle and foot	Diagnosis	ICD-10-CM
M08.28	Juvenile rheumatoid arthritis with systemic onset, vertebrae	Diagnosis	ICD-10-CM
M08.29	Juvenile rheumatoid arthritis with systemic onset, multiple sites	Diagnosis	ICD-10-CM
M08.3	Juvenile rheumatoid polyarthritis (seronegative)	Diagnosis	ICD-10-CM
M08.4	Pauciarticular juvenile rheumatoid arthritis	Diagnosis	ICD-10-CM
M08.40	Pauciarticular juvenile rheumatoid arthritis, unspecified site	Diagnosis	ICD-10-CM
M08.41	Pauciarticular juvenile rheumatoid arthritis, shoulder	Diagnosis	ICD-10-CM
M08.411	Pauciarticular juvenile rheumatoid arthritis, right shoulder	Diagnosis	ICD-10-CM
M08.412	Pauciarticular juvenile rheumatoid arthritis, left shoulder	Diagnosis	ICD-10-CM
M08.419	Pauciarticular juvenile rheumatoid arthritis, unspecified shoulder	Diagnosis	ICD-10-CM
M08.42	Pauciarticular juvenile rheumatoid arthritis, elbow	Diagnosis	ICD-10-CM
M08.421	Pauciarticular juvenile rheumatoid arthritis, right elbow	Diagnosis	ICD-10-CM
M08.422	Pauciarticular juvenile rheumatoid arthritis, left elbow	Diagnosis	ICD-10-CM
M08.429	Pauciarticular juvenile rheumatoid arthritis, unspecified elbow	Diagnosis	ICD-10-CM
M08.43	Pauciarticular juvenile rheumatoid arthritis, wrist	Diagnosis	ICD-10-CM
M08.431	Pauciarticular juvenile rheumatoid arthritis, right wrist	Diagnosis	ICD-10-CM
M08.432	Pauciarticular juvenile rheumatoid arthritis, left wrist	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M08.439	Pauciarticular juvenile rheumatoid arthritis, unspecified wrist	Diagnosis	ICD-10-CM
M08.44	Pauciarticular juvenile rheumatoid arthritis, hand	Diagnosis	ICD-10-CM
M08.441	Pauciarticular juvenile rheumatoid arthritis, right hand	Diagnosis	ICD-10-CM
M08.442	Pauciarticular juvenile rheumatoid arthritis, left hand	Diagnosis	ICD-10-CM
M08.449	Pauciarticular juvenile rheumatoid arthritis, unspecified hand	Diagnosis	ICD-10-CM
M08.45	Pauciarticular juvenile rheumatoid arthritis, hip	Diagnosis	ICD-10-CM
M08.451	Pauciarticular juvenile rheumatoid arthritis, right hip	Diagnosis	ICD-10-CM
M08.452	Pauciarticular juvenile rheumatoid arthritis, left hip	Diagnosis	ICD-10-CM
M08.459	Pauciarticular juvenile rheumatoid arthritis, unspecified hip	Diagnosis	ICD-10-CM
M08.46	Pauciarticular juvenile rheumatoid arthritis, knee	Diagnosis	ICD-10-CM
M08.461	Pauciarticular juvenile rheumatoid arthritis, right knee	Diagnosis	ICD-10-CM
M08.462	Pauciarticular juvenile rheumatoid arthritis, left knee	Diagnosis	ICD-10-CM
M08.469	Pauciarticular juvenile rheumatoid arthritis, unspecified knee	Diagnosis	ICD-10-CM
M08.47	Pauciarticular juvenile rheumatoid arthritis, ankle and foot	Diagnosis	ICD-10-CM
M08.471	Pauciarticular juvenile rheumatoid arthritis, right ankle and foot	Diagnosis	ICD-10-CM
M08.472	Pauciarticular juvenile rheumatoid arthritis, left ankle and foot	Diagnosis	ICD-10-CM
M08.479	Pauciarticular juvenile rheumatoid arthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M08.48	Pauciarticular juvenile rheumatoid arthritis, vertebrae	Diagnosis	ICD-10-CM
M08.8	Other juvenile arthritis	Diagnosis	ICD-10-CM
M08.80	Other juvenile arthritis, unspecified site	Diagnosis	ICD-10-CM
M08.81	Other juvenile arthritis, shoulder	Diagnosis	ICD-10-CM
M08.811	Other juvenile arthritis, right shoulder	Diagnosis	ICD-10-CM
M08.812	Other juvenile arthritis, left shoulder	Diagnosis	ICD-10-CM
M08.819	Other juvenile arthritis, unspecified shoulder	Diagnosis	ICD-10-CM
M08.82	Other juvenile arthritis, elbow	Diagnosis	ICD-10-CM
M08.821	Other juvenile arthritis, right elbow	Diagnosis	ICD-10-CM
M08.822	Other juvenile arthritis, left elbow	Diagnosis	ICD-10-CM
M08.829	Other juvenile arthritis, unspecified elbow	Diagnosis	ICD-10-CM
M08.83	Other juvenile arthritis, wrist	Diagnosis	ICD-10-CM
M08.831	Other juvenile arthritis, right wrist	Diagnosis	ICD-10-CM
M08.832	Other juvenile arthritis, left wrist	Diagnosis	ICD-10-CM
M08.839	Other juvenile arthritis, unspecified wrist	Diagnosis	ICD-10-CM
M08.84	Other juvenile arthritis, hand	Diagnosis	ICD-10-CM
M08.841	Other juvenile arthritis, right hand	Diagnosis	ICD-10-CM
M08.842	Other juvenile arthritis, left hand	Diagnosis	ICD-10-CM
M08.849	Other juvenile arthritis, unspecified hand	Diagnosis	ICD-10-CM
M08.85	Other juvenile arthritis, hip	Diagnosis	ICD-10-CM
M08.851	Other juvenile arthritis, right hip	Diagnosis	ICD-10-CM
M08.852	Other juvenile arthritis, left hip	Diagnosis	ICD-10-CM
M08.859	Other juvenile arthritis, unspecified hip	Diagnosis	ICD-10-CM
M08.86	Other juvenile arthritis, knee	Diagnosis	ICD-10-CM
M08.861	Other juvenile arthritis, right knee	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M08.862	Other juvenile arthritis, left knee	Diagnosis	ICD-10-CM
M08.869	Other juvenile arthritis, unspecified knee	Diagnosis	ICD-10-CM
M08.87	Other juvenile arthritis, ankle and foot	Diagnosis	ICD-10-CM
M08.871	Other juvenile arthritis, right ankle and foot	Diagnosis	ICD-10-CM
M08.872	Other juvenile arthritis, left ankle and foot	Diagnosis	ICD-10-CM
M08.879	Other juvenile arthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M08.88	Other juvenile arthritis, other specified site	Diagnosis	ICD-10-CM
M08.89	Other juvenile arthritis, multiple sites	Diagnosis	ICD-10-CM
M08.9	Juvenile arthritis, unspecified	Diagnosis	ICD-10-CM
M08.90	Juvenile arthritis, unspecified, unspecified site	Diagnosis	ICD-10-CM
M08.91	Juvenile arthritis, unspecified, shoulder	Diagnosis	ICD-10-CM
M08.911	Juvenile arthritis, unspecified, right shoulder	Diagnosis	ICD-10-CM
M08.912	Juvenile arthritis, unspecified, left shoulder	Diagnosis	ICD-10-CM
M08.919	Juvenile arthritis, unspecified, unspecified shoulder	Diagnosis	ICD-10-CM
M08.92	Juvenile arthritis, unspecified, elbow	Diagnosis	ICD-10-CM
M08.921	Juvenile arthritis, unspecified, right elbow	Diagnosis	ICD-10-CM
M08.922	Juvenile arthritis, unspecified, left elbow	Diagnosis	ICD-10-CM
M08.929	Juvenile arthritis, unspecified, unspecified elbow	Diagnosis	ICD-10-CM
M08.93	Juvenile arthritis, unspecified, wrist	Diagnosis	ICD-10-CM
M08.931	Juvenile arthritis, unspecified, right wrist	Diagnosis	ICD-10-CM
M08.932	Juvenile arthritis, unspecified, left wrist	Diagnosis	ICD-10-CM
M08.939	Juvenile arthritis, unspecified, unspecified wrist	Diagnosis	ICD-10-CM
M08.94	Juvenile arthritis, unspecified, hand	Diagnosis	ICD-10-CM
M08.941	Juvenile arthritis, unspecified, right hand	Diagnosis	ICD-10-CM
M08.942	Juvenile arthritis, unspecified, left hand	Diagnosis	ICD-10-CM
M08.949	Juvenile arthritis, unspecified, unspecified hand	Diagnosis	ICD-10-CM
M08.95	Juvenile arthritis, unspecified, hip	Diagnosis	ICD-10-CM
M08.951	Juvenile arthritis, unspecified, right hip	Diagnosis	ICD-10-CM
M08.952	Juvenile arthritis, unspecified, left hip	Diagnosis	ICD-10-CM
M08.959	Juvenile arthritis, unspecified, unspecified hip	Diagnosis	ICD-10-CM
M08.96	Juvenile arthritis, unspecified, knee	Diagnosis	ICD-10-CM
M08.961	Juvenile arthritis, unspecified, right knee	Diagnosis	ICD-10-CM
M08.962	Juvenile arthritis, unspecified, left knee	Diagnosis	ICD-10-CM
M08.969	Juvenile arthritis, unspecified, unspecified knee	Diagnosis	ICD-10-CM
M08.97	Juvenile arthritis, unspecified, ankle and foot	Diagnosis	ICD-10-CM
M08.971	Juvenile arthritis, unspecified, right ankle and foot	Diagnosis	ICD-10-CM
M08.972	Juvenile arthritis, unspecified, left ankle and foot	Diagnosis	ICD-10-CM
M08.979	Juvenile arthritis, unspecified, unspecified ankle and foot	Diagnosis	ICD-10-CM
M08.98	Juvenile arthritis, unspecified, vertebrae	Diagnosis	ICD-10-CM
M08.99	Juvenile arthritis, unspecified, multiple sites	Diagnosis	ICD-10-CM
M12.00	Chronic posttraumatic arthropathy [Jaccoud], unspecified site	Diagnosis	ICD-10-CM
M30.0	Polyarteritis nodosa	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M30.1	Polyarteritis with lung involvement [Churg-Strauss]	Diagnosis	ICD-10-CM
M30.2	Juvenile polyarteritis	Diagnosis	ICD-10-CM
M30.3	Mucocutaneous lymph node syndrome [Kawasaki]	Diagnosis	ICD-10-CM
M30.8	Other conditions related to polyarteritis nodosa	Diagnosis	ICD-10-CM
M31.0	Hypersensitivity angiitis	Diagnosis	ICD-10-CM
M31.1	Thrombotic microangiopathy	Diagnosis	ICD-10-CM
M31.2	Lethal midline granuloma	Diagnosis	ICD-10-CM
M31.30	Wegener's granulomatosis without renal involvement	Diagnosis	ICD-10-CM
M31.31	Wegener's granulomatosis with renal involvement	Diagnosis	ICD-10-CM
M31.4	Aortic arch syndrome [Takayasu]	Diagnosis	ICD-10-CM
M31.5	Giant cell arteritis with polymyalgia rheumatica	Diagnosis	ICD-10-CM
M31.6	Other giant cell arteritis	Diagnosis	ICD-10-CM
M31.7	Microscopic polyangiitis	Diagnosis	ICD-10-CM
M31.8	Other specified necrotizing vasculopathies	Diagnosis	ICD-10-CM
M31.9	Necrotizing vasculopathy, unspecified	Diagnosis	ICD-10-CM
M32	Systemic lupus erythematosus (SLE)	Diagnosis	ICD-10-CM
M32.0	Drug-induced systemic lupus erythematosus	Diagnosis	ICD-10-CM
M32.1	Systemic lupus erythematosus with organ or system involvement	Diagnosis	ICD-10-CM
M32.10	Systemic lupus erythematosus, organ or system involvement unspecified	Diagnosis	ICD-10-CM
M32.11	Endocarditis in systemic lupus erythematosus	Diagnosis	ICD-10-CM
M32.12	Pericarditis in systemic lupus erythematosus	Diagnosis	ICD-10-CM
M32.13	Lung involvement in systemic lupus erythematosus	Diagnosis	ICD-10-CM
M32.14	Glomerular disease in systemic lupus erythematosus	Diagnosis	ICD-10-CM
M32.15	Tubulo-interstitial nephropathy in systemic lupus erythematosus	Diagnosis	ICD-10-CM
M32.19	Other organ or system involvement in systemic lupus erythematosus	Diagnosis	ICD-10-CM
M32.8	Other forms of systemic lupus erythematosus	Diagnosis	ICD-10-CM
M32.9	Systemic lupus erythematosus, unspecified	Diagnosis	ICD-10-CM
M33.00	Juvenile dermatopolymyositis, organ involvement unspecified	Diagnosis	ICD-10-CM
M33.01	Juvenile dermatopolymyositis with respiratory involvement	Diagnosis	ICD-10-CM
M33.02	Juvenile dermatopolymyositis with myopathy	Diagnosis	ICD-10-CM
M33.09	Juvenile dermatopolymyositis with other organ involvement	Diagnosis	ICD-10-CM
M33.10	Other dermatopolymyositis, organ involvement unspecified	Diagnosis	ICD-10-CM
M33.11	Other dermatopolymyositis with respiratory involvement	Diagnosis	ICD-10-CM
M33.12	Other dermatopolymyositis with myopathy	Diagnosis	ICD-10-CM
M33.13	Other dermatomyositis without myopathy	Diagnosis	ICD-10-CM
M33.19	Other dermatopolymyositis with other organ involvement	Diagnosis	ICD-10-CM
M33.20	Polymyositis, organ involvement unspecified	Diagnosis	ICD-10-CM
M33.21	Polymyositis with respiratory involvement	Diagnosis	ICD-10-CM
M33.22	Polymyositis with myopathy	Diagnosis	ICD-10-CM
M33.29	Polymyositis with other organ involvement	Diagnosis	ICD-10-CM
M33.90	Dermatopolymyositis, unspecified, organ involvement unspecified	Diagnosis	ICD-10-CM
M33.91	Dermatopolymyositis, unspecified with respiratory involvement	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M33.92	Dermatopolymyositis, unspecified with myopathy	Diagnosis	ICD-10-CM
M33.93	Dermatopolymyositis, unspecified without myopathy	Diagnosis	ICD-10-CM
M33.99	Dermatopolymyositis, unspecified with other organ involvement	Diagnosis	ICD-10-CM
M34	Systemic sclerosis [scleroderma]	Diagnosis	ICD-10-CM
M34.0	Systemic sclerosis [scleroderma], Progressive systemic sclerosis	Diagnosis	ICD-10-CM
M34.1	Systemic sclerosis [scleroderma] , CR(E)ST syndrome	Diagnosis	ICD-10-CM
M34.2	Systemic sclerosis induced by drug and chemical	Diagnosis	ICD-10-CM
M34.81	Systemic sclerosis with lung involvement	Diagnosis	ICD-10-CM
M34.82	Systemic sclerosis with myopathy	Diagnosis	ICD-10-CM
M34.83	Systemic sclerosis with polyneuropathy	Diagnosis	ICD-10-CM
M34.89	Other systemic sclerosis	Diagnosis	ICD-10-CM
M34.9	Systemic sclerosis, unspecified	Diagnosis	ICD-10-CM
M35.0	Sicca syndrome [Sjogren]	Diagnosis	ICD-10-CM
M35.00	Sicca syndrome, unspecified	Diagnosis	ICD-10-CM
M35.01	Sicca syndrome with keratoconjunctivitis	Diagnosis	ICD-10-CM
M35.02	Sicca syndrome with lung involvement	Diagnosis	ICD-10-CM
M35.03	Sicca syndrome with myopathy	Diagnosis	ICD-10-CM
M35.04	Sicca syndrome with tubulo-interstitial nephropathy	Diagnosis	ICD-10-CM
M35.09	Sicca syndrome with other organ involvement	Diagnosis	ICD-10-CM
M35.1	Other overlap syndromes	Diagnosis	ICD-10-CM
M35.2	Behcet's disease	Diagnosis	ICD-10-CM
M35.3	Polymyalgia rheumatica	Diagnosis	ICD-10-CM
M35.4	Diffuse (eosinophilic) fasciitis	Diagnosis	ICD-10-CM
M35.5	Multifocal fibrosclerosis	Diagnosis	ICD-10-CM
M35.6	Relapsing panniculitis [weber-christian]	Diagnosis	ICD-10-CM
M35.8	Other specified systemic involvement of connective tissue	Diagnosis	ICD-10-CM
M35.9	Systemic involvement of connective tissue, unspecified	Diagnosis	ICD-10-CM
M36.0	Dermato(poly)myositis in neoplastic disease	Diagnosis	ICD-10-CM
M36.8	Systemic disorders of connective tissue in other diseases classified elsewhere	Diagnosis	ICD-10-CM
M45	Ankylosing spondylitis	Diagnosis	ICD-10-CM
M45.0	Ankylosing spondylitis of multiple sites in spine	Diagnosis	ICD-10-CM
M45.1	Ankylosing spondylitis of occipito-atlanto-axial region	Diagnosis	ICD-10-CM
M45.2	Ankylosing spondylitis of cervical region	Diagnosis	ICD-10-CM
M45.3	Ankylosing spondylitis of cervicothoracic region	Diagnosis	ICD-10-CM
M45.4	Ankylosing spondylitis of thoracic region	Diagnosis	ICD-10-CM
M45.5	Ankylosing spondylitis of thoracolumbar region	Diagnosis	ICD-10-CM
M45.6	Ankylosing spondylitis lumbar region	Diagnosis	ICD-10-CM
M45.7	Ankylosing spondylitis of lumbosacral region	Diagnosis	ICD-10-CM
M45.8	Ankylosing spondylitis sacral and sacrococcygeal region	Diagnosis	ICD-10-CM
M45.9	Ankylosing spondylitis of unspecified sites in spine	Diagnosis	ICD-10-CM
M46.00	Spinal enthesopathy, site unspecified	Diagnosis	ICD-10-CM
M46.01	Spinal enthesopathy, occipito-atlanto-axial region	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
M46.02	Spinal enthesopathy, cervical region	Diagnosis	ICD-10-CM
M46.03	Spinal enthesopathy, cervicothoracic region	Diagnosis	ICD-10-CM
M46.04	Spinal enthesopathy, thoracic region	Diagnosis	ICD-10-CM
M46.05	Spinal enthesopathy, thoracolumbar region	Diagnosis	ICD-10-CM
M46.06	Spinal enthesopathy, lumbar region	Diagnosis	ICD-10-CM
M46.07	Spinal enthesopathy, lumbosacral region	Diagnosis	ICD-10-CM
M46.08	Spinal enthesopathy, sacral and sacrococcygeal region	Diagnosis	ICD-10-CM
M46.09	Spinal enthesopathy, multiple sites in spine	Diagnosis	ICD-10-CM
M46.1	Sacroiliitis, not elsewhere classified	Diagnosis	ICD-10-CM
Endocrine Disorders			
0D16079	Bypass Stomach to Duodenum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1607A	Bypass Stomach to Jejunum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1607B	Bypass Stomach to Ileum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1607L	Bypass Stomach to Transverse Colon with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D160J9	Bypass Stomach to Duodenum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D160JA	Bypass Stomach to Jejunum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D160JB	Bypass Stomach to Ileum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D160JL	Bypass Stomach to Transverse Colon with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D160K9	Bypass Stomach to Duodenum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D160KA	Bypass Stomach to Jejunum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D160KB	Bypass Stomach to Ileum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D160KL	Bypass Stomach to Transverse Colon with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D160Z9	Bypass Stomach to Duodenum, Open Approach	Procedure	ICD-10-PCS
0D160ZA	Bypass Stomach to Jejunum, Open Approach	Procedure	ICD-10-PCS
0D160ZB	Bypass Stomach to Ileum, Open Approach	Procedure	ICD-10-PCS
0D160ZL	Bypass Stomach to Transverse Colon, Open Approach	Procedure	ICD-10-PCS
0D16479	Bypass Stomach to Duodenum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1647A	Bypass Stomach to Jejunum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1647B	Bypass Stomach to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1647L	Bypass Stomach to Transverse Colon with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164J9	Bypass Stomach to Duodenum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164JA	Bypass Stomach to Jejunum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164JB	Bypass Stomach to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0D164JL	Bypass Stomach to Transverse Colon with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164K9	Bypass Stomach to Duodenum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164KA	Bypass Stomach to Jejunum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164KB	Bypass Stomach to Ileum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164KL	Bypass Stomach to Transverse Colon with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164Z9	Bypass Stomach to Duodenum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164ZA	Bypass Stomach to Jejunum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164ZB	Bypass Stomach to Ileum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164ZL	Bypass Stomach to Transverse Colon, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D16879	Bypass Stomach to Duodenum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1687A	Bypass Stomach to Jejunum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1687B	Bypass Stomach to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1687L	Bypass Stomach to Transverse Colon with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168J9	Bypass Stomach to Duodenum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168JA	Bypass Stomach to Jejunum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168JB	Bypass Stomach to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168JL	Bypass Stomach to Transverse Colon with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168K9	Bypass Stomach to Duodenum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168KA	Bypass Stomach to Jejunum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168KB	Bypass Stomach to Ileum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168KL	Bypass Stomach to Transverse Colon with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168Z9	Bypass Stomach to Duodenum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168ZA	Bypass Stomach to Jejunum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168ZB	Bypass Stomach to Ileum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168ZL	Bypass Stomach to Transverse Colon, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0D19079	Bypass Duodenum to Duodenum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1907A	Bypass Duodenum to Jejunum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1907B	Bypass Duodenum to Ileum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D190J9	Bypass Duodenum to Duodenum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D190JA	Bypass Duodenum to Jejunum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D190JB	Bypass Duodenum to Ileum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D190K9	Bypass Duodenum to Duodenum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D190KA	Bypass Duodenum to Jejunum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D190KB	Bypass Duodenum to Ileum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D190Z9	Bypass Duodenum to Duodenum, Open Approach	Procedure	ICD-10-PCS
0D190ZA	Bypass Duodenum to Jejunum, Open Approach	Procedure	ICD-10-PCS
0D190ZB	Bypass Duodenum to Ileum, Open Approach	Procedure	ICD-10-PCS
0D19479	Bypass Duodenum to Duodenum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1947A	Bypass Duodenum to Jejunum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1947B	Bypass Duodenum to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194J9	Bypass Duodenum to Duodenum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194JA	Bypass Duodenum to Jejunum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194JB	Bypass Duodenum to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194K9	Bypass Duodenum to Duodenum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194KA	Bypass Duodenum to Jejunum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194KB	Bypass Duodenum to Ileum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194Z9	Bypass Duodenum to Duodenum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194ZA	Bypass Duodenum to Jejunum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194ZB	Bypass Duodenum to Ileum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D19879	Bypass Duodenum to Duodenum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1987A	Bypass Duodenum to Jejunum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1987B	Bypass Duodenum to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198J9	Bypass Duodenum to Duodenum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0D198JA	Bypass Duodenum to Jejunum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198JB	Bypass Duodenum to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198K9	Bypass Duodenum to Duodenum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198KA	Bypass Duodenum to Jejunum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198KB	Bypass Duodenum to Ileum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198Z9	Bypass Duodenum to Duodenum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198ZA	Bypass Duodenum to Jejunum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198ZB	Bypass Duodenum to Ileum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A07A	Bypass Jejunum to Jejunum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1A07B	Bypass Jejunum to Ileum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1A0JA	Bypass Jejunum to Jejunum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D1A0JB	Bypass Jejunum to Ileum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D1A0KA	Bypass Jejunum to Jejunum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1A0KB	Bypass Jejunum to Ileum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1A0ZA	Bypass Jejunum to Jejunum, Open Approach	Procedure	ICD-10-PCS
0D1A0ZB	Bypass Jejunum to Ileum, Open Approach	Procedure	ICD-10-PCS
0D1A47A	Bypass Jejunum to Jejunum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A47B	Bypass Jejunum to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A4JA	Bypass Jejunum to Jejunum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A4JB	Bypass Jejunum to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A4KA	Bypass Jejunum to Jejunum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A4KB	Bypass Jejunum to Ileum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A4ZA	Bypass Jejunum to Jejunum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A4ZB	Bypass Jejunum to Ileum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A87A	Bypass Jejunum to Jejunum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A87B	Bypass Jejunum to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A8JA	Bypass Jejunum to Jejunum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0D1A8JB	Bypass Jejunum to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A8KA	Bypass Jejunum to Jejunum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A8KB	Bypass Jejunum to Ileum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A8ZA	Bypass Jejunum to Jejunum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A8ZB	Bypass Jejunum to Ileum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1B07B	Bypass Ileum to Ileum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1B0JB	Bypass Ileum to Ileum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D1B0KB	Bypass Ileum to Ileum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1B0ZB	Bypass Ileum to Ileum, Open Approach	Procedure	ICD-10-PCS
0D1B47B	Bypass Ileum to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1B4JB	Bypass Ileum to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1B4KB	Bypass Ileum to Ileum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1B4ZB	Bypass Ileum to Ileum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1B87B	Bypass Ileum to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1B8JB	Bypass Ileum to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1B8KB	Bypass Ileum to Ileum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1B8ZB	Bypass Ileum to Ileum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1B8ZH	Bypass Ileum to Cecum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0DB60Z3	Excision of Stomach, Open Approach, Vertical	Procedure	ICD-10-PCS
0DB60ZZ	Excision of Stomach, Open Approach	Procedure	ICD-10-PCS
0DB63Z3	Excision of Stomach, Percutaneous Approach, Vertical	Procedure	ICD-10-PCS
0DB63ZZ	Excision of Stomach, Percutaneous Approach	Procedure	ICD-10-PCS
0DB67Z3	Excision of Stomach, Via Natural or Artificial Opening, Vertical	Procedure	ICD-10-PCS
0DB67ZZ	Excision of Stomach, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0DB68Z3	Excision of Stomach, Via Natural or Artificial Opening Endoscopic, Vertical	Procedure	ICD-10-PCS
0DB80ZZ	Excision of Small Intestine, Open Approach	Procedure	ICD-10-PCS
0DBB0ZZ	Excision of Ileum, Open Approach	Procedure	ICD-10-PCS
0DV64CZ	Restriction of Stomach with Extraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0F190Z3	Bypass Common Bile Duct to Duodenum, Open Approach	Procedure	ICD-10-PCS
0TRB07Z	Replacement of Bladder with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
249.00	Secondary diabetes mellitus without mention of complication, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.01	Secondary diabetes mellitus without mention of complication, uncontrolled	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
249.10	Secondary diabetes mellitus with ketoacidosis, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.11	Secondary diabetes mellitus with ketoacidosis, uncontrolled	Diagnosis	ICD-9-CM
249.20	Secondary diabetes mellitus with hyperosmolarity, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.21	Secondary diabetes mellitus with hyperosmolarity, uncontrolled	Diagnosis	ICD-9-CM
249.30	Secondary diabetes mellitus with other coma, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.31	Secondary diabetes mellitus with other coma, uncontrolled	Diagnosis	ICD-9-CM
249.40	Secondary diabetes mellitus with renal manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.41	Secondary diabetes mellitus with renal manifestations, uncontrolled	Diagnosis	ICD-9-CM
249.50	Secondary diabetes mellitus with ophthalmic manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.51	Secondary diabetes mellitus with ophthalmic manifestations, uncontrolled	Diagnosis	ICD-9-CM
249.60	Secondary diabetes mellitus with neurological manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.61	Secondary diabetes mellitus with neurological manifestations, uncontrolled	Diagnosis	ICD-9-CM
249.70	Secondary diabetes mellitus with peripheral circulatory disorders, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.71	Secondary diabetes mellitus with peripheral circulatory disorders, uncontrolled	Diagnosis	ICD-9-CM
249.80	Secondary diabetes mellitus with other specified manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.81	Secondary diabetes mellitus with other specified manifestations, uncontrolled	Diagnosis	ICD-9-CM
249.90	Secondary diabetes mellitus with unspecified complication, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.91	Secondary diabetes mellitus with unspecified complication, uncontrolled	Diagnosis	ICD-9-CM
250.00	Diabetes mellitus without mention of complication, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.01	Diabetes mellitus without mention of complication, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.02	Diabetes mellitus without mention of complication, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.03	Diabetes mellitus without mention of complication, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.10	Diabetes with ketoacidosis, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.11	Diabetes with ketoacidosis, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.12	Diabetes with ketoacidosis, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.13	Diabetes with ketoacidosis, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.20	Diabetes with hyperosmolarity, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.21	Diabetes with hyperosmolarity, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
250.22	Diabetes with hyperosmolarity, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.23	Diabetes with hyperosmolarity, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.30	Diabetes with other coma, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.31	Diabetes with other coma, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.32	Diabetes with other coma, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.33	Diabetes with other coma, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.40	Diabetes with renal manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.41	Diabetes with renal manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.42	Diabetes with renal manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.43	Diabetes with renal manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.50	Diabetes with ophthalmic manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.51	Diabetes with ophthalmic manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.52	Diabetes with ophthalmic manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.53	Diabetes with ophthalmic manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.60	Diabetes with neurological manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.61	Diabetes with neurological manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.62	Diabetes with neurological manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.63	Diabetes with neurological manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.70	Diabetes with peripheral circulatory disorders, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.71	Diabetes with peripheral circulatory disorders, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.72	Diabetes with peripheral circulatory disorders, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.73	Diabetes with peripheral circulatory disorders, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.80	Diabetes with other specified manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.81	Diabetes with other specified manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.82	Diabetes with other specified manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.83	Diabetes with other specified manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.90	Diabetes with unspecified complication, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.91	Diabetes with unspecified complication, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.92	Diabetes with unspecified complication, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
250.93	Diabetes with unspecified complication, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
251.1	Other specified hypoglycemia	Diagnosis	ICD-9-CM
278.00	Obesity, unspecified	Diagnosis	ICD-9-CM
278.01	Morbid obesity	Diagnosis	ICD-9-CM
278.03	Obesity hypoventilation syndrome	Diagnosis	ICD-9-CM
353.5	Neuralgic amyotrophy	Diagnosis	ICD-9-CM
355.9	Mononeuritis of unspecified site	Diagnosis	ICD-9-CM
357.2	Polyneuropathy in diabetes	Diagnosis	ICD-9-CM
362.01	Background diabetic retinopathy	Diagnosis	ICD-9-CM
362.02	Proliferative diabetic retinopathy	Diagnosis	ICD-9-CM
362.03	Nonproliferative diabetic retinopathy NOS	Diagnosis	ICD-9-CM
362.04	Mild nonproliferative diabetic retinopathy	Diagnosis	ICD-9-CM
362.05	Moderate nonproliferative diabetic retinopathy	Diagnosis	ICD-9-CM
362.06	Severe nonproliferative diabetic retinopathy	Diagnosis	ICD-9-CM
362.07	Diabetic macular edema	Diagnosis	ICD-9-CM
366.41	Diabetic cataract	Diagnosis	ICD-9-CM
43.6	Partial gastrectomy with anastomosis to duodenum	Procedure	ICD-9-CM
43.7	Partial gastrectomy with anastomosis to jejunum	Procedure	ICD-9-CM
43.81	Partial gastrectomy with jejunal transposition	Procedure	ICD-9-CM
43.89	Open and other partial gastrectomy	Procedure	ICD-9-CM
43644	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and Roux-en-Y gastroenterostomy (roux limb 150 cm or less)	Procedure	CPT-4
43645	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and small intestine reconstruction to limit absorption	Procedure	CPT-4
43770	Laparoscopy, surgical, gastric restrictive procedure; placement of adjustable gastric restrictive device (eg, gastric band and subcutaneous port components)	Procedure	CPT-4
43842	Gastric restrictive procedure, without gastric bypass, for morbid obesity; vertical-banded gastroplasty	Procedure	CPT-4
43843	Gastric restrictive procedure, without gastric bypass, for morbid obesity; other than vertical-banded gastroplasty	Procedure	CPT-4
43845	Gastric restrictive procedure with partial gastrectomy, pylorus-preserving duodenoileostomy and ileoileostomy (50 to 100 cm common channel) to limit absorption (biliopancreatic diversion with duodenal switch)	Procedure	CPT-4
43846	Gastric restrictive procedure, with gastric bypass for morbid obesity; with short limb (150 cm or less) Roux-en-Y gastroenterostomy	Procedure	CPT-4
43847	Gastric restrictive procedure, with gastric bypass for morbid obesity; with small intestine reconstruction to limit absorption	Procedure	CPT-4
44.31	High gastric bypass	Procedure	ICD-9-CM
44.38	Laparoscopic gastroenterostomy	Procedure	ICD-9-CM
44.39	Other gastroenterostomy without gastrectomy	Procedure	ICD-9-CM
44.68	Laparoscopic gastroplasty	Procedure	ICD-9-CM
44.95	Laparoscopic gastric restrictive procedure	Procedure	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
45.33	Local excision of lesion or tissue of small intestine, except duodenum	Procedure	ICD-9-CM
45.61	Multiple segmental resection of small intestine	Procedure	ICD-9-CM
45.62	Other partial resection of small intestine	Procedure	ICD-9-CM
539.01	Infection due to gastric band procedure	Diagnosis	ICD-9-CM
539.09	Other complications of gastric band procedure	Diagnosis	ICD-9-CM
539.81	Infection due to other bariatric procedure	Diagnosis	ICD-9-CM
539.89	Other complications of other bariatric procedure	Diagnosis	ICD-9-CM
648.00	Maternal diabetes mellitus, complicating pregnancy, childbirth, or the puerperium, unspecified as to episode of care	Diagnosis	ICD-9-CM
648.01	Maternal diabetes mellitus with delivery	Diagnosis	ICD-9-CM
648.02	Maternal diabetes mellitus with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
648.03	Maternal diabetes mellitus, antepartum	Diagnosis	ICD-9-CM
648.04	Maternal diabetes mellitus, complicating pregnancy, childbirth, or the puerperium, postpartum condition or complication	Diagnosis	ICD-9-CM
648.81	Abnormal maternal glucose tolerance, with delivery	Diagnosis	ICD-9-CM
648.82	Abnormal maternal glucose tolerance, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
648.83	Abnormal maternal glucose tolerance, antepartum	Diagnosis	ICD-9-CM
648.84	Abnormal maternal glucose tolerance complicating pregnancy, childbirth, or the puerperium, postpartum condition or complication	Diagnosis	ICD-9-CM
649.10	Obesity complicating pregnancy, childbirth, or the puerperium, unspecified as to episode of care or not applicable	Diagnosis	ICD-9-CM
649.11	Obesity complicating pregnancy, childbirth, or the puerperium, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
649.12	Obesity complicating pregnancy, childbirth, or the puerperium, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
649.13	Obesity complicating pregnancy, childbirth, or the puerperium, antepartum condition or complication	Diagnosis	ICD-9-CM
649.14	Obesity complicating pregnancy, childbirth, or the puerperium, postpartum condition or complication	Diagnosis	ICD-9-CM
649.20	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium, unspecified as to episode of care or not applicable	Diagnosis	ICD-9-CM
649.21	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
649.22	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
649.23	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium, antepartum condition or complication	Diagnosis	ICD-9-CM
649.24	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium, postpartum condition or complication	Diagnosis	ICD-9-CM
E08	Diabetes mellitus due to underlying condition	Diagnosis	ICD-10-CM
E08.0	Diabetes mellitus due to underlying condition with hyperosmolarity	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E08.00	Diabetes mellitus due to underlying condition with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	Diagnosis	ICD-10-CM
E08.01	Diabetes mellitus due to underlying condition with hyperosmolarity with coma	Diagnosis	ICD-10-CM
E08.1	Diabetes mellitus due to underlying condition with ketoacidosis	Diagnosis	ICD-10-CM
E08.10	Diabetes mellitus due to underlying condition with ketoacidosis without coma	Diagnosis	ICD-10-CM
E08.11	Diabetes mellitus due to underlying condition with ketoacidosis with coma	Diagnosis	ICD-10-CM
E08.2	Diabetes mellitus due to underlying condition with kidney complications	Diagnosis	ICD-10-CM
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy	Diagnosis	ICD-10-CM
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication	Diagnosis	ICD-10-CM
E08.3	Diabetes mellitus due to underlying condition with ophthalmic complications	Diagnosis	ICD-10-CM
E08.31	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy	Diagnosis	ICD-10-CM
E08.311	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E08.319	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E08.32	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E08.321	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E08.3211	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E08.3212	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E08.3213	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3219	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.329	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E08.3291	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E08.3292	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E08.3293	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3299	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.33	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E08.331	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E08.3311	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E08.3312	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E08.3313	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3319	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.339	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E08.3391	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E08.3392	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E08.3393	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3399	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.34	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E08.341	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E08.3411	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E08.3412	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E08.3413	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3419	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.349	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E08.3491	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E08.3492	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E08.3493	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3499	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E08.35	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E08.351	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E08.3511	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E08.3512	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E08.3513	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3519	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.352	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula	Diagnosis	ICD-10-CM
E08.3521	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM
E08.3522	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E08.3523	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E08.3529	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E08.353	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula	Diagnosis	ICD-10-CM
E08.3531	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E08.3532	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E08.3533	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E08.3539	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E08.354	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment	Diagnosis	ICD-10-CM
E08.3541	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM
E08.3542	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E08.3543	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E08.3549	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	Diagnosis	ICD-10-CM
E08.355	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E08.3551	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E08.3552	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E08.3553	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E08.3559	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM
E08.359	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E08.3591	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E08.3592	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E08.3593	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3599	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.36	Diabetes mellitus due to underlying condition with diabetic cataract	Diagnosis	ICD-10-CM
E08.37	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment	Diagnosis	ICD-10-CM
E08.37X1	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E08.37X2	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E08.37X3	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM
E08.37X9	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM
E08.39	Diabetes mellitus due to underlying condition with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E08.4	Diabetes mellitus due to underlying condition with neurological complications	Diagnosis	ICD-10-CM
E08.40	Diabetes mellitus due to underlying condition with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E08.41	Diabetes mellitus due to underlying condition with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E08.42	Diabetes mellitus due to underlying condition with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E08.43	Diabetes mellitus due to underlying condition with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E08.44	Diabetes mellitus due to underlying condition with diabetic amyotrophy	Diagnosis	ICD-10-CM
E08.49	Diabetes mellitus due to underlying condition with other diabetic neurological complication	Diagnosis	ICD-10-CM
E08.5	Diabetes mellitus due to underlying condition with circulatory complications	Diagnosis	ICD-10-CM
E08.51	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E08.52	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E08.59	Diabetes mellitus due to underlying condition with other circulatory complications	Diagnosis	ICD-10-CM
E08.6	Diabetes mellitus due to underlying condition with other specified complications	Diagnosis	ICD-10-CM
E08.61	Diabetes mellitus due to underlying condition with diabetic arthropathy	Diagnosis	ICD-10-CM
E08.610	Diabetes mellitus due to underlying condition with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E08.618	Diabetes mellitus due to underlying condition with other diabetic arthropathy	Diagnosis	ICD-10-CM
E08.62	Diabetes mellitus due to underlying condition with skin complications	Diagnosis	ICD-10-CM
E08.620	Diabetes mellitus due to underlying condition with diabetic dermatitis	Diagnosis	ICD-10-CM
E08.621	Diabetes mellitus due to underlying condition with foot ulcer	Diagnosis	ICD-10-CM
E08.622	Diabetes mellitus due to underlying condition with other skin ulcer	Diagnosis	ICD-10-CM
E08.628	Diabetes mellitus due to underlying condition with other skin complications	Diagnosis	ICD-10-CM
E08.63	Diabetes mellitus due to underlying condition with oral complications	Diagnosis	ICD-10-CM
E08.630	Diabetes mellitus due to underlying condition with periodontal disease	Diagnosis	ICD-10-CM
E08.638	Diabetes mellitus due to underlying condition with other oral complications	Diagnosis	ICD-10-CM
E08.64	Diabetes mellitus due to underlying condition with hypoglycemia	Diagnosis	ICD-10-CM
E08.641	Diabetes mellitus due to underlying condition with hypoglycemia with coma	Diagnosis	ICD-10-CM
E08.649	Diabetes mellitus due to underlying condition with hypoglycemia without coma	Diagnosis	ICD-10-CM
E08.65	Diabetes mellitus due to underlying condition with hyperglycemia	Diagnosis	ICD-10-CM
E08.69	Diabetes mellitus due to underlying condition with other specified complication	Diagnosis	ICD-10-CM
E08.8	Diabetes mellitus due to underlying condition with unspecified complications	Diagnosis	ICD-10-CM
E08.9	Diabetes mellitus due to underlying condition without complications	Diagnosis	ICD-10-CM
E09	Drug or chemical induced diabetes mellitus	Diagnosis	ICD-10-CM
E09.0	Drug or chemical induced diabetes mellitus with hyperosmolarity	Diagnosis	ICD-10-CM
E09.00	Drug or chemical induced diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	Diagnosis	ICD-10-CM
E09.01	Drug or chemical induced diabetes mellitus with hyperosmolarity with coma	Diagnosis	ICD-10-CM
E09.1	Drug or chemical induced diabetes mellitus with ketoacidosis	Diagnosis	ICD-10-CM
E09.10	Drug or chemical induced diabetes mellitus with ketoacidosis without coma	Diagnosis	ICD-10-CM
E09.11	Drug or chemical induced diabetes mellitus with ketoacidosis with coma	Diagnosis	ICD-10-CM
E09.2	Drug or chemical induced diabetes mellitus with kidney complications	Diagnosis	ICD-10-CM
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E09.3	Drug or chemical induced diabetes mellitus with ophthalmic complications	Diagnosis	ICD-10-CM
E09.31	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E09.311	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.319	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.32	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E09.321	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.3211	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E09.3212	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E09.3213	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3219	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.329	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.3291	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E09.3292	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E09.3293	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3299	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.33	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E09.331	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.3311	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E09.3312	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E09.3313	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3319	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.339	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.3391	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E09.3392	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E09.3393	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3399	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.34	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E09.341	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.3411	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E09.3412	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E09.3413	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3419	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.349	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.3491	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E09.3492	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E09.3493	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3499	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.35	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E09.351	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.3511	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E09.3512	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E09.3513	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3519	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.352	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E09.3521	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM
E09.3522	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E09.3523	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E09.3529	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E09.353	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula	Diagnosis	ICD-10-CM
E09.3531	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E09.3532	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E09.3533	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E09.3539	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E09.354	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment	Diagnosis	ICD-10-CM
E09.3541	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM
E09.3542	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E09.3543	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E09.3549	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	Diagnosis	ICD-10-CM
E09.355	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E09.3551	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E09.3552	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E09.3553	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E09.3559	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E09.359	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.3591	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E09.3592	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E09.3593	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3599	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.36	Drug or chemical induced diabetes mellitus with diabetic cataract	Diagnosis	ICD-10-CM
E09.37	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment	Diagnosis	ICD-10-CM
E09.37X1	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E09.37X2	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E09.37X3	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM
E09.37X9	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM
E09.39	Drug or chemical induced diabetes mellitus with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E09.4	Drug or chemical induced diabetes mellitus with neurological complications	Diagnosis	ICD-10-CM
E09.40	Drug or chemical induced diabetes mellitus with neurological complications with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E09.41	Drug or chemical induced diabetes mellitus with neurological complications with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E09.42	Drug or chemical induced diabetes mellitus with neurological complications with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E09.43	Drug or chemical induced diabetes mellitus with neurological complications with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E09.44	Drug or chemical induced diabetes mellitus with neurological complications with diabetic amyotrophy	Diagnosis	ICD-10-CM
E09.49	Drug or chemical induced diabetes mellitus with neurological complications with other diabetic neurological complication	Diagnosis	ICD-10-CM
E09.5	Drug or chemical induced diabetes mellitus with circulatory complications	Diagnosis	ICD-10-CM
E09.51	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E09.52	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E09.59	Drug or chemical induced diabetes mellitus with other circulatory complications	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E09.6	Drug or chemical induced diabetes mellitus with other specified complications	Diagnosis	ICD-10-CM
E09.61	Drug or chemical induced diabetes mellitus with diabetic arthropathy	Diagnosis	ICD-10-CM
E09.610	Drug or chemical induced diabetes mellitus with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E09.618	Drug or chemical induced diabetes mellitus with other diabetic arthropathy	Diagnosis	ICD-10-CM
E09.62	Drug or chemical induced diabetes mellitus with skin complications	Diagnosis	ICD-10-CM
E09.620	Drug or chemical induced diabetes mellitus with diabetic dermatitis	Diagnosis	ICD-10-CM
E09.621	Drug or chemical induced diabetes mellitus with foot ulcer	Diagnosis	ICD-10-CM
E09.622	Drug or chemical induced diabetes mellitus with other skin ulcer	Diagnosis	ICD-10-CM
E09.628	Drug or chemical induced diabetes mellitus with other skin complications	Diagnosis	ICD-10-CM
E09.63	Drug or chemical induced diabetes mellitus with oral complications	Diagnosis	ICD-10-CM
E09.630	Drug or chemical induced diabetes mellitus with periodontal disease	Diagnosis	ICD-10-CM
E09.638	Drug or chemical induced diabetes mellitus with other oral complications	Diagnosis	ICD-10-CM
E09.64	Drug or chemical induced diabetes mellitus with hypoglycemia	Diagnosis	ICD-10-CM
E09.641	Drug or chemical induced diabetes mellitus with hypoglycemia with coma	Diagnosis	ICD-10-CM
E09.649	Drug or chemical induced diabetes mellitus with hypoglycemia without coma	Diagnosis	ICD-10-CM
E09.65	Drug or chemical induced diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E09.69	Drug or chemical induced diabetes mellitus with other specified complication	Diagnosis	ICD-10-CM
E09.8	Drug or chemical induced diabetes mellitus with unspecified complications	Diagnosis	ICD-10-CM
E09.9	Drug or chemical induced diabetes mellitus without complications	Diagnosis	ICD-10-CM
E10.1	Type 1 diabetes mellitus with ketoacidosis	Diagnosis	ICD-10-CM
E10.10	Type 1 diabetes mellitus with ketoacidosis without coma	Diagnosis	ICD-10-CM
E10.11	Type 1 diabetes mellitus with ketoacidosis with coma	Diagnosis	ICD-10-CM
E10.2	Type 1 diabetes mellitus with kidney complications	Diagnosis	ICD-10-CM
E10.21	Type 1 diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E10.3	Type 1 diabetes mellitus with ophthalmic complications	Diagnosis	ICD-10-CM
E10.31	Type 1 diabetes mellitus with unspecified diabetic retinopathy	Diagnosis	ICD-10-CM
E10.311	Type 1 diabetes mellitus with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.319	Type 1 diabetes mellitus with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.32	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E10.321	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.3211	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E10.3212	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E10.3213	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3219	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E10.329	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.3291	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E10.3292	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E10.3293	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3299	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.33	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E10.331	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.3311	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E10.3312	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E10.3313	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3319	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.339	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.3391	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E10.3392	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E10.3393	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3399	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.34	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E10.341	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.3411	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E10.3412	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E10.3413	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3419	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E10.349	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.3491	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E10.3492	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E10.3493	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3499	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.35	Type 1 diabetes mellitus with proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E10.351	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.3511	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E10.3512	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E10.3513	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3519	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.352	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula	Diagnosis	ICD-10-CM
E10.3521	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM
E10.3522	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E10.3523	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E10.3529	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E10.353	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula	Diagnosis	ICD-10-CM
E10.3531	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E10.3532	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E10.3533	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E10.3539	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E10.354	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E10.3541	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM
E10.3542	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E10.3543	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E10.3549	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified	Diagnosis	ICD-10-CM
E10.355	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E10.3551	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E10.3552	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E10.3553	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E10.3559	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM
E10.359	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.3591	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E10.3592	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E10.3593	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3599	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.36	Type 1 diabetes mellitus with diabetic cataract	Diagnosis	ICD-10-CM
E10.37	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment	Diagnosis	ICD-10-CM
E10.37X1	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E10.37X2	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E10.37X3	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM
E10.37X9	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM
E10.39	Type 1 diabetes mellitus with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E10.4	Type 1 diabetes mellitus with neurological complications	Diagnosis	ICD-10-CM
E10.40	Type 1 diabetes mellitus with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E10.41	Type 1 diabetes mellitus with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E10.42	Type 1 diabetes mellitus with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E10.43	Type 1 diabetes mellitus with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E10.44	Type 1 diabetes mellitus with diabetic amyotrophy	Diagnosis	ICD-10-CM
E10.49	Type 1 diabetes mellitus with other diabetic neurological complication	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E10.5	Type 1 diabetes mellitus with circulatory complications	Diagnosis	ICD-10-CM
E10.51	Type 1 diabetes mellitus with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E10.52	Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E10.59	Type 1 diabetes mellitus with other circulatory complications	Diagnosis	ICD-10-CM
E10.6	Type 1 diabetes mellitus with other specified complications	Diagnosis	ICD-10-CM
E10.61	Type 1 diabetes mellitus with diabetic arthropathy	Diagnosis	ICD-10-CM
E10.610	Type 1 diabetes mellitus with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E10.618	Type 1 diabetes mellitus with other diabetic arthropathy	Diagnosis	ICD-10-CM
E10.62	Type 1 diabetes mellitus with skin complications	Diagnosis	ICD-10-CM
E10.620	Type 1 diabetes mellitus with diabetic dermatitis	Diagnosis	ICD-10-CM
E10.621	Type 1 diabetes mellitus with foot ulcer	Diagnosis	ICD-10-CM
E10.622	Type 1 diabetes mellitus with other skin ulcer	Diagnosis	ICD-10-CM
E10.628	Type 1 diabetes mellitus with other skin complications	Diagnosis	ICD-10-CM
E10.63	Type 1 diabetes mellitus with oral complications	Diagnosis	ICD-10-CM
E10.630	Type 1 diabetes mellitus with periodontal disease	Diagnosis	ICD-10-CM
E10.638	Type 1 diabetes mellitus with other oral complications	Diagnosis	ICD-10-CM
E10.64	Type 1 diabetes mellitus with hypoglycemia	Diagnosis	ICD-10-CM
E10.641	Type 1 diabetes mellitus with hypoglycemia with coma	Diagnosis	ICD-10-CM
E10.649	Type 1 diabetes mellitus with hypoglycemia without coma	Diagnosis	ICD-10-CM
E10.65	Type 1 diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E10.69	Type 1 diabetes mellitus with other specified complication	Diagnosis	ICD-10-CM
E10.8	Type 1 diabetes mellitus with unspecified complications	Diagnosis	ICD-10-CM
E10.9	Type 1 diabetes mellitus without complications	Diagnosis	ICD-10-CM
E11.0	Type 2 diabetes mellitus with hyperosmolarity	Diagnosis	ICD-10-CM
E11.00	Type 2 diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	Diagnosis	ICD-10-CM
E11.01	Type 2 diabetes mellitus with hyperosmolarity with coma	Diagnosis	ICD-10-CM
E11.1	Type 2 diabetes mellitus with ketoacidosis	Diagnosis	ICD-10-CM
E11.10	Type 2 diabetes mellitus with ketoacidosis without coma	Diagnosis	ICD-10-CM
E11.11	Type 2 diabetes mellitus with ketoacidosis with coma	Diagnosis	ICD-10-CM
E11.2	Type 2 diabetes mellitus with kidney complications	Diagnosis	ICD-10-CM
E11.21	Type 2 diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E11.3	Type 2 diabetes mellitus with ophthalmic complications	Diagnosis	ICD-10-CM
E11.31	Type 2 diabetes mellitus with unspecified diabetic retinopathy	Diagnosis	ICD-10-CM
E11.311	Type 2 diabetes mellitus with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E11.319	Type 2 diabetes mellitus with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.32	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E11.321	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E11.3211	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E11.3212	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E11.3213	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3219	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.329	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.3291	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E11.3292	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E11.3293	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3299	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.33	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E11.331	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E11.3311	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E11.3312	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E11.3313	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3319	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.339	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.3391	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E11.3392	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E11.3393	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3399	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.34	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E11.341	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E11.3411	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E11.3412	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E11.3413	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3419	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.349	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.3491	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E11.3492	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E11.3493	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3499	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.35	Type 2 diabetes mellitus with proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E11.351	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E11.3511	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E11.3512	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E11.3513	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3519	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.352	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula	Diagnosis	ICD-10-CM
E11.3521	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM
E11.3522	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E11.3523	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E11.3529	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E11.353	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula	Diagnosis	ICD-10-CM
E11.3531	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E11.3532	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E11.3533	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E11.3539	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E11.354	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment	Diagnosis	ICD-10-CM
E11.3541	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM
E11.3542	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E11.3543	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E11.3549	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified	Diagnosis	ICD-10-CM
E11.355	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E11.3551	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E11.3552	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E11.3553	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E11.3559	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM
E11.359	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.3591	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E11.3592	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E11.3593	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3599	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.36	Type 2 diabetes mellitus with diabetic cataract	Diagnosis	ICD-10-CM
E11.37	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment	Diagnosis	ICD-10-CM
E11.37X1	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E11.37X2	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E11.37X3	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM
E11.37X9	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E11.39	Type 2 diabetes mellitus with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E11.4	Type 2 diabetes mellitus with neurological complications	Diagnosis	ICD-10-CM
E11.40	Type 2 diabetes mellitus with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E11.41	Type 2 diabetes mellitus with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E11.42	Type 2 diabetes mellitus with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E11.43	Type 2 diabetes mellitus with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E11.44	Type 2 diabetes mellitus with diabetic amyotrophy	Diagnosis	ICD-10-CM
E11.49	Type 2 diabetes mellitus with other diabetic neurological complication	Diagnosis	ICD-10-CM
E11.5	Type 2 diabetes mellitus with circulatory complications	Diagnosis	ICD-10-CM
E11.51	Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E11.52	Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E11.59	Type 2 diabetes mellitus with other circulatory complications	Diagnosis	ICD-10-CM
E11.6	Type 2 diabetes mellitus with other specified complications	Diagnosis	ICD-10-CM
E11.61	Type 2 diabetes mellitus with diabetic arthropathy	Diagnosis	ICD-10-CM
E11.610	Type 2 diabetes mellitus with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E11.618	Type 2 diabetes mellitus with other diabetic arthropathy	Diagnosis	ICD-10-CM
E11.62	Type 2 diabetes mellitus with skin complications	Diagnosis	ICD-10-CM
E11.620	Type 2 diabetes mellitus with diabetic dermatitis	Diagnosis	ICD-10-CM
E11.621	Type 2 diabetes mellitus with foot ulcer	Diagnosis	ICD-10-CM
E11.622	Type 2 diabetes mellitus with other skin ulcer	Diagnosis	ICD-10-CM
E11.628	Type 2 diabetes mellitus with other skin complications	Diagnosis	ICD-10-CM
E11.63	Type 2 diabetes mellitus with oral complications	Diagnosis	ICD-10-CM
E11.630	Type 2 diabetes mellitus with periodontal disease	Diagnosis	ICD-10-CM
E11.638	Type 2 diabetes mellitus with other oral complications	Diagnosis	ICD-10-CM
E11.64	Type 2 diabetes mellitus with hypoglycemia	Diagnosis	ICD-10-CM
E11.641	Type 2 diabetes mellitus with hypoglycemia with coma	Diagnosis	ICD-10-CM
E11.649	Type 2 diabetes mellitus with hypoglycemia without coma	Diagnosis	ICD-10-CM
E11.65	Type 2 diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E11.69	Type 2 diabetes mellitus with other specified complication	Diagnosis	ICD-10-CM
E11.8	Type 2 diabetes mellitus with unspecified complications	Diagnosis	ICD-10-CM
E11.9	Type 2 diabetes mellitus without complications	Diagnosis	ICD-10-CM
E13.0	Other specified diabetes mellitus with hyperosmolarity	Diagnosis	ICD-10-CM
E13.00	Other specified diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	Diagnosis	ICD-10-CM
E13.01	Other specified diabetes mellitus with hyperosmolarity with coma	Diagnosis	ICD-10-CM
E13.1	Other specified diabetes mellitus with ketoacidosis	Diagnosis	ICD-10-CM
E13.10	Other specified diabetes mellitus with ketoacidosis without coma	Diagnosis	ICD-10-CM
E13.11	Other specified diabetes mellitus with ketoacidosis with coma	Diagnosis	ICD-10-CM
E13.2	Other specified diabetes mellitus with kidney complications	Diagnosis	ICD-10-CM
E13.21	Other specified diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E13.29	Other specified diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E13.3	Other specified diabetes mellitus with ophthalmic complications	Diagnosis	ICD-10-CM
E13.31	Other specified diabetes mellitus with unspecified diabetic retinopathy	Diagnosis	ICD-10-CM
E13.311	Other specified diabetes mellitus with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.319	Other specified diabetes mellitus with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.32	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E13.321	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.3211	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E13.3212	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E13.3213	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3219	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.329	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.3291	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E13.3292	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E13.3293	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3299	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.33	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E13.331	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.3311	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E13.3312	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E13.3313	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3319	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.339	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E13.3391	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E13.3392	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E13.3393	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3399	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.34	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E13.341	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.3411	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E13.3412	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E13.3413	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3419	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.349	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.3491	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E13.3492	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E13.3493	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3499	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.35	Other specified diabetes mellitus with proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E13.351	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.3511	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E13.3512	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E13.3513	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3519	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.352	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E13.3521	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM
E13.3522	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E13.3523	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E13.3529	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E13.353	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula	Diagnosis	ICD-10-CM
E13.3531	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E13.3532	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E13.3533	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E13.3539	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E13.354	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment	Diagnosis	ICD-10-CM
E13.3541	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM
E13.3542	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E13.3543	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E13.3549	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	Diagnosis	ICD-10-CM
E13.355	Other specified diabetes mellitus with stable proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E13.3551	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E13.3552	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E13.3553	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E13.3559	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E13.359	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.3591	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E13.3592	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E13.3593	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3599	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.36	Other specified diabetes mellitus with diabetic cataract	Diagnosis	ICD-10-CM
E13.37	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment	Diagnosis	ICD-10-CM
E13.37X1	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E13.37X2	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E13.37X3	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM
E13.37X9	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM
E13.39	Other specified diabetes mellitus with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E13.4	Other specified diabetes mellitus with neurological complications	Diagnosis	ICD-10-CM
E13.40	Other specified diabetes mellitus with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E13.41	Other specified diabetes mellitus with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E13.42	Other specified diabetes mellitus with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E13.43	Other specified diabetes mellitus with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E13.44	Other specified diabetes mellitus with diabetic amyotrophy	Diagnosis	ICD-10-CM
E13.49	Other specified diabetes mellitus with other diabetic neurological complication	Diagnosis	ICD-10-CM
E13.5	Other specified diabetes mellitus with circulatory complications	Diagnosis	ICD-10-CM
E13.51	Other specified diabetes mellitus with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E13.52	Other specified diabetes mellitus with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E13.59	Other specified diabetes mellitus with other circulatory complications	Diagnosis	ICD-10-CM
E13.6	Other specified diabetes mellitus with other specified complications	Diagnosis	ICD-10-CM
E13.61	Other specified diabetes mellitus with diabetic arthropathy	Diagnosis	ICD-10-CM
E13.610	Other specified diabetes mellitus with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E13.618	Other specified diabetes mellitus with other diabetic arthropathy	Diagnosis	ICD-10-CM
E13.62	Other specified diabetes mellitus with skin complications	Diagnosis	ICD-10-CM
E13.620	Other specified diabetes mellitus with diabetic dermatitis	Diagnosis	ICD-10-CM
E13.621	Other specified diabetes mellitus with foot ulcer	Diagnosis	ICD-10-CM
E13.622	Other specified diabetes mellitus with other skin ulcer	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E13.628	Other specified diabetes mellitus with other skin complications	Diagnosis	ICD-10-CM
E13.63	Other specified diabetes mellitus with oral complications	Diagnosis	ICD-10-CM
E13.630	Other specified diabetes mellitus with periodontal disease	Diagnosis	ICD-10-CM
E13.638	Other specified diabetes mellitus with other oral complications	Diagnosis	ICD-10-CM
E13.64	Other specified diabetes mellitus with hypoglycemia	Diagnosis	ICD-10-CM
E13.641	Other specified diabetes mellitus with hypoglycemia with coma	Diagnosis	ICD-10-CM
E13.649	Other specified diabetes mellitus with hypoglycemia without coma	Diagnosis	ICD-10-CM
E13.65	Other specified diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E13.69	Other specified diabetes mellitus with other specified complication	Diagnosis	ICD-10-CM
E13.8	Other specified diabetes mellitus with unspecified complications	Diagnosis	ICD-10-CM
E13.9	Other specified diabetes mellitus without complications	Diagnosis	ICD-10-CM
E66.01	Morbid (severe) obesity due to excess calories	Diagnosis	ICD-10-CM
E66.09	Other obesity due to excess calories	Diagnosis	ICD-10-CM
E66.1	Drug-induced obesity	Diagnosis	ICD-10-CM
E66.2	Morbid (severe) obesity with alveolar hypoventilation	Diagnosis	ICD-10-CM
E66.8	Other obesity	Diagnosis	ICD-10-CM
E66.9	Obesity, unspecified	Diagnosis	ICD-10-CM
K95.01	Infection due to gastric band procedure	Diagnosis	ICD-10-CM
K95.09	Other complications of gastric band procedure	Diagnosis	ICD-10-CM
K95.81	Infection due to other bariatric procedure	Diagnosis	ICD-10-CM
K95.89	Other complications of other bariatric procedure	Diagnosis	ICD-10-CM
O24.0	Pre-existing type 1 diabetes mellitus, in pregnancy, childbirth and the puerperium	Diagnosis	ICD-10-CM
O24.01	Pre-existing type 1 diabetes mellitus, in pregnancy	Diagnosis	ICD-10-CM
O24.011	Pre-existing type 1 diabetes mellitus, in pregnancy, first trimester	Diagnosis	ICD-10-CM
O24.012	Pre-existing type 1 diabetes mellitus, in pregnancy, second trimester	Diagnosis	ICD-10-CM
O24.013	Pre-existing type 1 diabetes mellitus, in pregnancy, third trimester	Diagnosis	ICD-10-CM
O24.019	Pre-existing type 1 diabetes mellitus, in pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O24.02	Pre-existing type 1 diabetes mellitus, in childbirth	Diagnosis	ICD-10-CM
O24.03	Pre-existing type 1 diabetes mellitus, in the puerperium	Diagnosis	ICD-10-CM
O24.1	Pre-existing type 2 diabetes mellitus, in pregnancy, childbirth and the puerperium	Diagnosis	ICD-10-CM
O24.11	Pre-existing type 2 diabetes mellitus, in pregnancy	Diagnosis	ICD-10-CM
O24.111	Pre-existing type 2 diabetes mellitus, in pregnancy, first trimester	Diagnosis	ICD-10-CM
O24.112	Pre-existing type 2 diabetes mellitus, in pregnancy, second trimester	Diagnosis	ICD-10-CM
O24.113	Pre-existing type 2 diabetes mellitus, in pregnancy, third trimester	Diagnosis	ICD-10-CM
O24.119	Pre-existing type 2 diabetes mellitus, in pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O24.12	Pre-existing type 2 diabetes mellitus, in childbirth	Diagnosis	ICD-10-CM
O24.13	Pre-existing type 2 diabetes mellitus, in the puerperium	Diagnosis	ICD-10-CM
O24.3	Unspecified pre-existing diabetes mellitus in pregnancy, childbirth and the puerperium	Diagnosis	ICD-10-CM
O24.31	Unspecified pre-existing diabetes mellitus in pregnancy	Diagnosis	ICD-10-CM
O24.311	Unspecified pre-existing diabetes mellitus in pregnancy, first trimester	Diagnosis	ICD-10-CM
O24.312	Unspecified pre-existing diabetes mellitus in pregnancy, second trimester	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
O24.313	Unspecified pre-existing diabetes mellitus in pregnancy, third trimester	Diagnosis	ICD-10-CM
O24.319	Unspecified pre-existing diabetes mellitus in pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O24.32	Unspecified pre-existing diabetes mellitus in childbirth	Diagnosis	ICD-10-CM
O24.33	Unspecified pre-existing diabetes mellitus in the puerperium	Diagnosis	ICD-10-CM
O24.41	Gestational diabetes mellitus in pregnancy	Diagnosis	ICD-10-CM
O24.410	Gestational diabetes mellitus in pregnancy, diet controlled	Diagnosis	ICD-10-CM
O24.414	Gestational diabetes mellitus in pregnancy, insulin controlled	Diagnosis	ICD-10-CM
O24.415	Gestational diabetes mellitus in pregnancy, controlled by oral hypoglycemic drugs	Diagnosis	ICD-10-CM
O24.419	Gestational diabetes mellitus in pregnancy, unspecified control	Diagnosis	ICD-10-CM
O24.42	Gestational diabetes mellitus in childbirth	Diagnosis	ICD-10-CM
O24.420	Gestational diabetes mellitus in childbirth, diet controlled	Diagnosis	ICD-10-CM
O24.424	Gestational diabetes mellitus in childbirth, insulin controlled	Diagnosis	ICD-10-CM
O24.425	Gestational diabetes mellitus in childbirth, controlled by oral hypoglycemic drugs	Diagnosis	ICD-10-CM
O24.429	Gestational diabetes mellitus in childbirth, unspecified control	Diagnosis	ICD-10-CM
O24.43	Gestational diabetes mellitus in the puerperium	Diagnosis	ICD-10-CM
O24.430	Gestational diabetes mellitus in the puerperium, diet controlled	Diagnosis	ICD-10-CM
O24.434	Gestational diabetes mellitus in the puerperium, insulin controlled	Diagnosis	ICD-10-CM
O24.435	Gestational diabetes mellitus in puerperium, controlled by oral hypoglycemic drugs	Diagnosis	ICD-10-CM
O24.439	Gestational diabetes mellitus in the puerperium, unspecified control	Diagnosis	ICD-10-CM
O24.811	Other pre-existing diabetes mellitus in pregnancy, first trimester	Diagnosis	ICD-10-CM
O24.812	Other pre-existing diabetes mellitus in pregnancy, second trimester	Diagnosis	ICD-10-CM
O24.813	Other pre-existing diabetes mellitus in pregnancy, third trimester	Diagnosis	ICD-10-CM
O24.819	Other pre-existing diabetes mellitus in pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O24.82	Other pre-existing diabetes mellitus in childbirth	Diagnosis	ICD-10-CM
O24.83	Other pre-existing diabetes mellitus in the puerperium	Diagnosis	ICD-10-CM
O24.9	Unspecified diabetes mellitus in pregnancy, childbirth and the puerperium	Diagnosis	ICD-10-CM
O24.91	Unspecified diabetes mellitus in pregnancy	Diagnosis	ICD-10-CM
O24.911	Unspecified diabetes mellitus in pregnancy, first trimester	Diagnosis	ICD-10-CM
O24.912	Unspecified diabetes mellitus in pregnancy, second trimester	Diagnosis	ICD-10-CM
O24.913	Unspecified diabetes mellitus in pregnancy, third trimester	Diagnosis	ICD-10-CM
O24.919	Unspecified diabetes mellitus in pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O24.92	Unspecified diabetes mellitus in childbirth	Diagnosis	ICD-10-CM
O24.93	Unspecified diabetes mellitus in the puerperium	Diagnosis	ICD-10-CM
O99.210	Obesity complicating pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O99.211	Obesity complicating pregnancy, first trimester	Diagnosis	ICD-10-CM
O99.212	Obesity complicating pregnancy, second trimester	Diagnosis	ICD-10-CM
O99.213	Obesity complicating pregnancy, third trimester	Diagnosis	ICD-10-CM
O99.214	Obesity complicating childbirth	Diagnosis	ICD-10-CM
O99.215	Obesity complicating the puerperium	Diagnosis	ICD-10-CM
O99.840	Bariatric surgery status complicating pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O99.841	Bariatric surgery status complicating pregnancy, first trimester	Diagnosis	ICD-10-CM
O99.842	Bariatric surgery status complicating pregnancy, second trimester	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
099.843	Bariatric surgery status complicating pregnancy, third trimester	Diagnosis	ICD-10-CM
099.844	Bariatric surgery status complicating childbirth	Diagnosis	ICD-10-CM
099.845	Bariatric surgery status complicating the puerperium	Diagnosis	ICD-10-CM
V45.86	Bariatric surgery status	Diagnosis	ICD-9-CM
V85.30	Body Mass Index 30.0-30.9, adult	Diagnosis	ICD-9-CM
V85.31	Body Mass Index 31.0-31.9, adult	Diagnosis	ICD-9-CM
V85.32	Body Mass Index 32.0-32.9, adult	Diagnosis	ICD-9-CM
V85.33	Body Mass Index 33.0-33.9, adult	Diagnosis	ICD-9-CM
V85.34	Body Mass Index 34.0-34.9, adult	Diagnosis	ICD-9-CM
V85.35	Body Mass Index 35.0-35.9, adult	Diagnosis	ICD-9-CM
V85.36	Body Mass Index 36.0-36.9, adult	Diagnosis	ICD-9-CM
V85.37	Body Mass Index 37.0-37.9, adult	Diagnosis	ICD-9-CM
V85.38	Body Mass Index 38.0-38.9, adult	Diagnosis	ICD-9-CM
V85.39	Body Mass Index 39.0-39.9, adult	Diagnosis	ICD-9-CM
V85.41	Body Mass Index 40.0-44.9, adult	Diagnosis	ICD-9-CM
V85.42	Body Mass Index 45.0-49.9, adult	Diagnosis	ICD-9-CM
V85.43	Body Mass Index 50.0-59.9, adult	Diagnosis	ICD-9-CM
V85.44	Body Mass Index 60.0-69.9, adult	Diagnosis	ICD-9-CM
V85.45	Body Mass Index 70 and over, adult	Diagnosis	ICD-9-CM
Z68.30	Body mass index (BMI) 30.0-30.9, adult	Diagnosis	ICD-10-CM
Z68.31	Body mass index (BMI) 31.0-31.9, adult	Diagnosis	ICD-10-CM
Z68.32	Body mass index (BMI) 32.0-32.9, adult	Diagnosis	ICD-10-CM
Z68.33	Body mass index (BMI) 33.0-33.9, adult	Diagnosis	ICD-10-CM
Z68.34	Body mass index (BMI) 34.0-34.9, adult	Diagnosis	ICD-10-CM
Z68.35	Body mass index (BMI) 35.0-35.9, adult	Diagnosis	ICD-10-CM
Z68.36	Body mass index (BMI) 36.0-36.9, adult	Diagnosis	ICD-10-CM
Z68.37	Body mass index (BMI) 37.0-37.9, adult	Diagnosis	ICD-10-CM
Z68.38	Body mass index (BMI) 38.0-38.9, adult	Diagnosis	ICD-10-CM
Z68.39	Body mass index (BMI) 39.0-39.9, adult	Diagnosis	ICD-10-CM
Z68.41	Body mass index (BMI) 40.0-44.9, adult	Diagnosis	ICD-10-CM
Z68.42	Body mass index (BMI) 45.0-49.9, adult	Diagnosis	ICD-10-CM
Z68.43	Body mass index (BMI) 50.0-59.9, adult	Diagnosis	ICD-10-CM
Z68.44	Body mass index (BMI) 60.0-69.9, adult	Diagnosis	ICD-10-CM
Z68.45	Body mass index (BMI) 70 or greater, adult	Diagnosis	ICD-10-CM
Z9884	Bariatric surgery status	Diagnosis	ICD-10-CM
Obesity			
0D16079	Bypass Stomach to Duodenum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1607A	Bypass Stomach to Jejunum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1607B	Bypass Stomach to Ileum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1607L	Bypass Stomach to Transverse Colon with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D160J9	Bypass Stomach to Duodenum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0D160JA	Bypass Stomach to Jejunum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D160JB	Bypass Stomach to Ileum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D160JL	Bypass Stomach to Transverse Colon with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D160K9	Bypass Stomach to Duodenum with Nonautologous Tissue Substitute, Open	Procedure	ICD-10-PCS
0D160KA	Bypass Stomach to Jejunum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D160KB	Bypass Stomach to Ileum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D160KL	Bypass Stomach to Transverse Colon with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D160Z9	Bypass Stomach to Duodenum, Open Approach	Procedure	ICD-10-PCS
0D160ZA	Bypass Stomach to Jejunum, Open Approach	Procedure	ICD-10-PCS
0D160ZB	Bypass Stomach to Ileum, Open Approach	Procedure	ICD-10-PCS
0D160ZL	Bypass Stomach to Transverse Colon, Open Approach	Procedure	ICD-10-PCS
0D16479	Bypass Stomach to Duodenum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1647A	Bypass Stomach to Jejunum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1647B	Bypass Stomach to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1647L	Bypass Stomach to Transverse Colon with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164J9	Bypass Stomach to Duodenum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164JA	Bypass Stomach to Jejunum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164JB	Bypass Stomach to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164JL	Bypass Stomach to Transverse Colon with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164K9	Bypass Stomach to Duodenum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164KA	Bypass Stomach to Jejunum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164KB	Bypass Stomach to Ileum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164KL	Bypass Stomach to Transverse Colon with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164Z9	Bypass Stomach to Duodenum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164ZA	Bypass Stomach to Jejunum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164ZB	Bypass Stomach to Ileum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164ZL	Bypass Stomach to Transverse Colon, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D16879	Bypass Stomach to Duodenum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0D1687A	Bypass Stomach to Jejunum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1687B	Bypass Stomach to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1687L	Bypass Stomach to Transverse Colon with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168J9	Bypass Stomach to Duodenum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168JA	Bypass Stomach to Jejunum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168JB	Bypass Stomach to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168JL	Bypass Stomach to Transverse Colon with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168K9	Bypass Stomach to Duodenum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168KA	Bypass Stomach to Jejunum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168KB	Bypass Stomach to Ileum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168KL	Bypass Stomach to Transverse Colon with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168Z9	Bypass Stomach to Duodenum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168ZA	Bypass Stomach to Jejunum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168ZB	Bypass Stomach to Ileum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168ZL	Bypass Stomach to Transverse Colon, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D19079	Bypass Duodenum to Duodenum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1907A	Bypass Duodenum to Jejunum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1907B	Bypass Duodenum to Ileum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D190J9	Bypass Duodenum to Duodenum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D190JA	Bypass Duodenum to Jejunum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D190JB	Bypass Duodenum to Ileum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D190K9	Bypass Duodenum to Duodenum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D190KA	Bypass Duodenum to Jejunum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D190KB	Bypass Duodenum to Ileum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D190Z9	Bypass Duodenum to Duodenum, Open Approach	Procedure	ICD-10-PCS
0D190ZA	Bypass Duodenum to Jejunum, Open Approach	Procedure	ICD-10-PCS
0D190ZB	Bypass Duodenum to Ileum, Open Approach	Procedure	ICD-10-PCS
0D19479	Bypass Duodenum to Duodenum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0D1947A	Bypass Duodenum to Jejunum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1947B	Bypass Duodenum to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194J9	Bypass Duodenum to Duodenum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194JA	Bypass Duodenum to Jejunum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194JB	Bypass Duodenum to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194K9	Bypass Duodenum to Duodenum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194KA	Bypass Duodenum to Jejunum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194KB	Bypass Duodenum to Ileum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194Z9	Bypass Duodenum to Duodenum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194ZA	Bypass Duodenum to Jejunum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194ZB	Bypass Duodenum to Ileum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D19879	Bypass Duodenum to Duodenum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1987A	Bypass Duodenum to Jejunum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1987B	Bypass Duodenum to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198J9	Bypass Duodenum to Duodenum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198JA	Bypass Duodenum to Jejunum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198JB	Bypass Duodenum to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198K9	Bypass Duodenum to Duodenum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198KA	Bypass Duodenum to Jejunum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198KB	Bypass Duodenum to Ileum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198Z9	Bypass Duodenum to Duodenum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198ZA	Bypass Duodenum to Jejunum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198ZB	Bypass Duodenum to Ileum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A07A	Bypass Jejunum to Jejunum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1A07B	Bypass Jejunum to Ileum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0D1A0JA	Bypass Jejunum to Jejunum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D1A0JB	Bypass Jejunum to Ileum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D1A0KA	Bypass Jejunum to Jejunum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1A0KB	Bypass Jejunum to Ileum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1A0ZA	Bypass Jejunum to Jejunum, Open Approach	Procedure	ICD-10-PCS
0D1A0ZB	Bypass Jejunum to Ileum, Open Approach	Procedure	ICD-10-PCS
0D1A47A	Bypass Jejunum to Jejunum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A47B	Bypass Jejunum to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A4JA	Bypass Jejunum to Jejunum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A4JB	Bypass Jejunum to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A4KA	Bypass Jejunum to Jejunum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A4KB	Bypass Jejunum to Ileum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A4ZA	Bypass Jejunum to Jejunum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A4ZB	Bypass Jejunum to Ileum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A87A	Bypass Jejunum to Jejunum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A87B	Bypass Jejunum to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A8JA	Bypass Jejunum to Jejunum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A8JB	Bypass Jejunum to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A8KA	Bypass Jejunum to Jejunum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A8KB	Bypass Jejunum to Ileum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A8ZA	Bypass Jejunum to Jejunum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A8ZB	Bypass Jejunum to Ileum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1B07B	Bypass Ileum to Ileum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1B0JB	Bypass Ileum to Ileum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D1B0KB	Bypass Ileum to Ileum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1B0ZB	Bypass Ileum to Ileum, Open Approach	Procedure	ICD-10-PCS
0D1B47B	Bypass Ileum to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1B4JB	Bypass Ileum to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
0D1B4KB	Bypass Ileum to Ileum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1B4ZB	Bypass Ileum to Ileum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1B87B	Bypass Ileum to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1B8JB	Bypass Ileum to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1B8KB	Bypass Ileum to Ileum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1B8ZB	Bypass Ileum to Ileum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1B8ZH	Bypass Ileum to Cecum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0DB60Z3	Excision of Stomach, Open Approach, Vertical	Procedure	ICD-10-PCS
0DB60ZZ	Excision of Stomach, Open Approach	Procedure	ICD-10-PCS
0DB63Z3	Excision of Stomach, Percutaneous Approach, Vertical	Procedure	ICD-10-PCS
0DB63ZZ	Excision of Stomach, Percutaneous Approach	Procedure	ICD-10-PCS
0DB67Z3	Excision of Stomach, Via Natural or Artificial Opening, Vertical	Procedure	ICD-10-PCS
0DB67ZZ	Excision of Stomach, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0DB68Z3	Excision of Stomach, Via Natural or Artificial Opening Endoscopic, Vertical	Procedure	ICD-10-PCS
0DB80ZZ	Excision of Small Intestine, Open Approach	Procedure	ICD-10-PCS
0DBB0ZZ	Excision of Ileum, Open Approach	Procedure	ICD-10-PCS
0DV64CZ	Restriction of Stomach with Extraluminal Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0F190Z3	Bypass Common Bile Duct to Duodenum, Open Approach	Procedure	ICD-10-PCS
0TRB07Z	Replacement of Bladder with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
278.00	Obesity, unspecified	Diagnosis	ICD-9-CM
278.01	Morbid obesity	Diagnosis	ICD-9-CM
278.03	Obesity hypoventilation syndrome	Diagnosis	ICD-9-CM
43.6	Partial gastrectomy with anastomosis to duodenum	Procedure	ICD-9-CM
43.7	Partial gastrectomy with anastomosis to jejunum	Procedure	ICD-9-CM
43.81	Partial gastrectomy with jejunal transposition	Procedure	ICD-9-CM
43.89	Open and other partial gastrectomy	Procedure	ICD-9-CM
43644	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and Roux-en-Y gastroenterostomy (roux limb 150 cm or less)	Procedure	CPT-4
43645	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and small intestine reconstruction to limit absorption	Procedure	CPT-4
43770	Laparoscopy, surgical, gastric restrictive procedure; placement of adjustable gastric restrictive device (eg, gastric band and subcutaneous port components)	Procedure	CPT-4
43842	Gastric restrictive procedure, without gastric bypass, for morbid obesity; vertical-banded gastroplasty	Procedure	CPT-4
43843	Gastric restrictive procedure, without gastric bypass, for morbid obesity; other than vertical-banded gastroplasty	Procedure	CPT-4

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
43845	Gastric restrictive procedure with partial gastrectomy, pylorus-preserving duodenoileostomy and ileoileostomy (50 to 100 cm common channel) to limit absorption (biliopancreatic diversion with duodenal switch)	Procedure	CPT-4
43846	Gastric restrictive procedure, with gastric bypass for morbid obesity; with short limb (150 cm or less) Roux-en-Y gastroenterostomy	Procedure	CPT-4
43847	Gastric restrictive procedure, with gastric bypass for morbid obesity; with small intestine reconstruction to limit absorption	Procedure	CPT-4
44.31	High gastric bypass	Procedure	ICD-9-CM
44.38	Laparoscopic gastroenterostomy	Procedure	ICD-9-CM
44.39	Other gastroenterostomy without gastrectomy	Procedure	ICD-9-CM
44.68	Laparoscopic gastropasty	Procedure	ICD-9-CM
44.95	Laparoscopic gastric restrictive procedure	Procedure	ICD-9-CM
45.33	Local excision of lesion or tissue of small intestine, except duodenum	Procedure	ICD-9-CM
45.61	Multiple segmental resection of small intestine	Procedure	ICD-9-CM
45.62	Other partial resection of small intestine	Procedure	ICD-9-CM
539.01	Infection due to gastric band procedure	Diagnosis	ICD-9-CM
539.09	Other complications of gastric band procedure	Diagnosis	ICD-9-CM
539.81	Infection due to other bariatric procedure	Diagnosis	ICD-9-CM
539.89	Other complications of other bariatric procedure	Diagnosis	ICD-9-CM
649.10	Obesity complicating pregnancy, childbirth, or the puerperium, unspecified as to episode of care or not applicable	Diagnosis	ICD-9-CM
649.11	Obesity complicating pregnancy, childbirth, or the puerperium, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
649.12	Obesity complicating pregnancy, childbirth, or the puerperium, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
649.13	Obesity complicating pregnancy, childbirth, or the puerperium, antepartum condition or complication	Diagnosis	ICD-9-CM
649.14	Obesity complicating pregnancy, childbirth, or the puerperium, postpartum condition or complication	Diagnosis	ICD-9-CM
649.20	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium, unspecified as to episode of care or not applicable	Diagnosis	ICD-9-CM
649.21	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
649.22	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
649.23	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium, antepartum condition or complication	Diagnosis	ICD-9-CM
649.24	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium, postpartum condition or complication	Diagnosis	ICD-9-CM
E66.01	Morbid (severe) obesity due to excess calories	Diagnosis	ICD-10-CM
E66.09	Other obesity due to excess calories	Diagnosis	ICD-10-CM
E66.1	Drug-induced obesity	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E66.2	Morbid (severe) obesity with alveolar hypoventilation	Diagnosis	ICD-10-CM
E66.8	Other obesity	Diagnosis	ICD-10-CM
E66.9	Obesity, unspecified	Diagnosis	ICD-10-CM
K95.01	Infection due to gastric band procedure	Diagnosis	ICD-10-CM
K95.09	Other complications of gastric band procedure	Diagnosis	ICD-10-CM
K95.81	Infection due to other bariatric procedure	Diagnosis	ICD-10-CM
K95.89	Other complications of other bariatric procedure	Diagnosis	ICD-10-CM
O99.210	Obesity complicating pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O99.211	Obesity complicating pregnancy, first trimester	Diagnosis	ICD-10-CM
O99.212	Obesity complicating pregnancy, second trimester	Diagnosis	ICD-10-CM
O99.213	Obesity complicating pregnancy, third trimester	Diagnosis	ICD-10-CM
O99.214	Obesity complicating childbirth	Diagnosis	ICD-10-CM
O99.215	Obesity complicating the puerperium	Diagnosis	ICD-10-CM
O99.840	Bariatric surgery status complicating pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O99.841	Bariatric surgery status complicating pregnancy, first trimester	Diagnosis	ICD-10-CM
O99.842	Bariatric surgery status complicating pregnancy, second trimester	Diagnosis	ICD-10-CM
O99.843	Bariatric surgery status complicating pregnancy, third trimester	Diagnosis	ICD-10-CM
O99.844	Bariatric surgery status complicating childbirth	Diagnosis	ICD-10-CM
O99.845	Bariatric surgery status complicating the puerperium	Diagnosis	ICD-10-CM
V45.86	Bariatric surgery status	Diagnosis	ICD-9-CM
V85.30	Body Mass Index 30.0-30.9, adult	Diagnosis	ICD-9-CM
V85.31	Body Mass Index 31.0-31.9, adult	Diagnosis	ICD-9-CM
V85.32	Body Mass Index 32.0-32.9, adult	Diagnosis	ICD-9-CM
V85.33	Body Mass Index 33.0-33.9, adult	Diagnosis	ICD-9-CM
V85.34	Body Mass Index 34.0-34.9, adult	Diagnosis	ICD-9-CM
V85.35	Body Mass Index 35.0-35.9, adult	Diagnosis	ICD-9-CM
V85.36	Body Mass Index 36.0-36.9, adult	Diagnosis	ICD-9-CM
V85.37	Body Mass Index 37.0-37.9, adult	Diagnosis	ICD-9-CM
V85.38	Body Mass Index 38.0-38.9, adult	Diagnosis	ICD-9-CM
V85.39	Body Mass Index 39.0-39.9, adult	Diagnosis	ICD-9-CM
V85.41	Body Mass Index 40.0-44.9, adult	Diagnosis	ICD-9-CM
V85.42	Body Mass Index 45.0-49.9, adult	Diagnosis	ICD-9-CM
V85.43	Body Mass Index 50.0-59.9, adult	Diagnosis	ICD-9-CM
V85.44	Body Mass Index 60.0-69.9, adult	Diagnosis	ICD-9-CM
V85.45	Body Mass Index 70 and over, adult	Diagnosis	ICD-9-CM
Z68.30	Body mass index (BMI) 30.0-30.9, adult	Diagnosis	ICD-10-CM
Z68.31	Body mass index (BMI) 31.0-31.9, adult	Diagnosis	ICD-10-CM
Z68.32	Body mass index (BMI) 32.0-32.9, adult	Diagnosis	ICD-10-CM
Z68.33	Body mass index (BMI) 33.0-33.9, adult	Diagnosis	ICD-10-CM
Z68.34	Body mass index (BMI) 34.0-34.9, adult	Diagnosis	ICD-10-CM
Z68.35	Body mass index (BMI) 35.0-35.9, adult	Diagnosis	ICD-10-CM
Z68.36	Body mass index (BMI) 36.0-36.9, adult	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
Z68.37	Body mass index (BMI) 37.0-37.9, adult	Diagnosis	ICD-10-CM
Z68.38	Body mass index (BMI) 38.0-38.9, adult	Diagnosis	ICD-10-CM
Z68.39	Body mass index (BMI) 39.0-39.9, adult	Diagnosis	ICD-10-CM
Z68.41	Body mass index (BMI) 40.0-44.9, adult	Diagnosis	ICD-10-CM
Z68.42	Body mass index (BMI) 45.0-49.9, adult	Diagnosis	ICD-10-CM
Z68.43	Body mass index (BMI) 50.0-59.9, adult	Diagnosis	ICD-10-CM
Z68.44	Body mass index (BMI) 60.0-69.9, adult	Diagnosis	ICD-10-CM
Z68.45	Body mass index (BMI) 70 or greater, adult	Diagnosis	ICD-10-CM
Z9884	Bariatric surgery status	Diagnosis	ICD-10-CM
Smoking			
1034F	Current tobacco smoker (CAD, CAP, COPD, PV) (DM)	Procedure	CPT-2
305.1	Nondependent tobacco use disorder	Diagnosis	ICD-9-CM
4001F	Tobacco use cessation intervention, pharmacologic therapy (COPD, CAD, CAP, PV, Asthma) (DM) (PV)	Procedure	CPT-2
4004F	Patient screened for tobacco use and received tobacco cessation intervention (counseling, pharmacotherapy, or both), if identified as a tobacco user (PV, CAD)	Procedure	CPT-2
649	Tobacco use disorder complicating pregnancy, childbirth, or the puerperium, unspecified as to episode of care or not applicable	Diagnosis	ICD-9-CM
649.01	Tobacco use disorder complicating pregnancy, childbirth, or the puerperium, delivered, with or without mention of antepartum condition	Diagnosis	ICD-9-CM
649.02	Tobacco use disorder complicating pregnancy, childbirth, or the puerperium, delivered, with mention of postpartum complication	Diagnosis	ICD-9-CM
649.03	Tobacco use disorder complicating pregnancy, childbirth, or the puerperium, antepartum condition or complication	Diagnosis	ICD-9-CM
649.04	Tobacco use disorder complicating pregnancy, childbirth, or the puerperium, postpartum condition or complication	Diagnosis	ICD-9-CM
989.84	Toxic effect of tobacco	Diagnosis	ICD-9-CM
99406	Smoking and tobacco use cessation counseling visit; intermediate, greater than 3 minutes up to 10 minutes	Procedure	CPT-4
99407	Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes	Procedure	CPT-4
F17.200	Nicotine dependence, unspecified, uncomplicated	Diagnosis	ICD-10-CM
F17.201	Nicotine dependence, unspecified, in remission	Diagnosis	ICD-10-CM
F17.21	Nicotine dependence, cigarettes	Diagnosis	ICD-10-CM
F17.210	Nicotine dependence, cigarettes, uncomplicated	Diagnosis	ICD-10-CM
F17.211	Nicotine dependence, cigarettes, in remission	Diagnosis	ICD-10-CM
F17.213	Nicotine dependence, cigarettes, with withdrawal	Diagnosis	ICD-10-CM
F17.218	Nicotine dependence, cigarettes, with other nicotine-induced disorders	Diagnosis	ICD-10-CM
F17.219	Nicotine dependence, cigarettes, with unspecified nicotine-induced disorders	Diagnosis	ICD-10-CM
F17.22	Nicotine dependence, chewing tobacco	Diagnosis	ICD-10-CM
F17.220	Nicotine dependence, chewing tobacco, uncomplicated	Diagnosis	ICD-10-CM
F17.221	Nicotine dependence, chewing tobacco, in remission	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
F17.223	Nicotine dependence, chewing tobacco, with withdrawal	Diagnosis	ICD-10-CM
F17.228	Nicotine dependence, chewing tobacco, with other nicotine-induced disorders	Diagnosis	ICD-10-CM
F17.229	Nicotine dependence, chewing tobacco, with unspecified nicotine-induced disorders	Diagnosis	ICD-10-CM
F17.29	Nicotine dependence, other tobacco product	Diagnosis	ICD-10-CM
F17.290	Nicotine dependence, other tobacco product, uncomplicated	Diagnosis	ICD-10-CM
F17.291	Nicotine dependence, other tobacco product, in remission	Diagnosis	ICD-10-CM
F17.293	Nicotine dependence, other tobacco product, with withdrawal	Diagnosis	ICD-10-CM
F17.298	Nicotine dependence, other tobacco product, with other nicotine-induced disorders	Diagnosis	ICD-10-CM
F17.299	Nicotine dependence, other tobacco product, with unspecified nicotine-induced disorders	Diagnosis	ICD-10-CM
G0436	Smoking and tobacco cessation counseling visit for the asymptomatic patient; intermediate, greater than 3 minutes, up to 10 minutes	Procedure	HCPCS
G9016	Smoking cessation counseling, individual, in the absence of or in addition to any other evaluation and management service, per session (6-10 minutes) [demo project code only]	Procedure	HCPCS
G9276	Documentation that patient is a current tobacco user	Procedure	HCPCS
G9458	Patient documented as tobacco user and received tobacco cessation intervention (must include at least one of the following: advice given to quit smoking or tobacco use, counseling on the benefits of quitting smoking or tobacco use, assistance with or referral to external smoking or tobacco cessation support programs, or current enrollment in smoking or tobacco use cessation program) if identified as a tobacco user	Procedure	HCPCS
O99.330	Smoking (tobacco) complicating pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O99.331	Smoking (tobacco) complicating pregnancy, first trimester	Diagnosis	ICD-10-CM
O99.332	Smoking (tobacco) complicating pregnancy, second trimester	Diagnosis	ICD-10-CM
O99.333	Smoking (tobacco) complicating pregnancy, third trimester	Diagnosis	ICD-10-CM
O99.334	Smoking (tobacco) complicating childbirth	Diagnosis	ICD-10-CM
O99.335	Smoking (tobacco) complicating the puerperium	Diagnosis	ICD-10-CM
S4995	Smoking cessation gum	Procedure	HCPCS
S9075	Smoking cessation treatment	Procedure	HCPCS
S9453	Smoking cessation classes, nonphysician provider, per session	Procedure	HCPCS
T65.21	Toxic effect of chewing tobacco	Diagnosis	ICD-10-CM
T65.211	Toxic effect of chewing tobacco, accidental (unintentional)	Diagnosis	ICD-10-CM
T65.211A	Toxic effect of chewing tobacco, accidental (unintentional), initial encounter	Diagnosis	ICD-10-CM
T65.212	Toxic effect of chewing tobacco, intentional self-harm	Diagnosis	ICD-10-CM
T65.212A	Toxic effect of chewing tobacco, intentional self-harm, initial encounter	Diagnosis	ICD-10-CM
T65.213	Toxic effect of chewing tobacco, assault	Diagnosis	ICD-10-CM
T65.213A	Toxic effect of chewing tobacco, assault, initial encounter	Diagnosis	ICD-10-CM
T65.214	Toxic effect of chewing tobacco, undetermined	Diagnosis	ICD-10-CM
T65.214A	Toxic effect of chewing tobacco, undetermined, initial encounter	Diagnosis	ICD-10-CM
T65.221A	Toxic effect of tobacco cigarettes, accidental (unintentional), initial encounter	Diagnosis	ICD-10-CM
T65.222A	Toxic effect of tobacco cigarettes, intentional self-harm, initial encounter	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
T65.223A	Toxic effect of tobacco cigarettes, assault, initial encounter	Diagnosis	ICD-10-CM
T65.224A	Toxic effect of tobacco cigarettes, undetermined, initial encounter	Diagnosis	ICD-10-CM
T65.291A	Toxic effect of other tobacco and nicotine, accidental (unintentional), initial encounter	Diagnosis	ICD-10-CM
T65.292A	Toxic effect of other tobacco and nicotine, intentional self-harm, initial encounter	Diagnosis	ICD-10-CM
T65.293A	Toxic effect of other tobacco and nicotine, assault, initial encounter	Diagnosis	ICD-10-CM
T65.294A	Toxic effect of other tobacco and nicotine, undetermined, initial encounter	Diagnosis	ICD-10-CM
V15.82	Personal history of tobacco use, presenting hazards to health	Diagnosis	ICD-9-CM
Z71.6	Tobacco abuse counseling	Diagnosis	ICD-10-CM
Z72.0	Tobacco use	Diagnosis	ICD-10-CM
Z87.891	Personal history of nicotine dependence	Diagnosis	ICD-10-CM
Cancer			
140.0	Malignant neoplasm of upper lip, vermilion border	Diagnosis	ICD-9-CM
140.1	Malignant neoplasm of lower lip, vermilion border	Diagnosis	ICD-9-CM
140.3	Malignant neoplasm of upper lip, inner aspect	Diagnosis	ICD-9-CM
140.4	Malignant neoplasm of lower lip, inner aspect	Diagnosis	ICD-9-CM
140.5	Malignant neoplasm of lip, inner aspect, unspecified as to upper or lower	Diagnosis	ICD-9-CM
140.6	Malignant neoplasm of commissure of lip	Diagnosis	ICD-9-CM
140.8	Malignant neoplasm of other sites of lip	Diagnosis	ICD-9-CM
140.9	Malignant neoplasm of lip, vermilion border, unspecified as to upper or lower	Diagnosis	ICD-9-CM
141.0	Malignant neoplasm of base of tongue	Diagnosis	ICD-9-CM
141.1	Malignant neoplasm of dorsal surface of tongue	Diagnosis	ICD-9-CM
141.2	Malignant neoplasm of tip and lateral border of tongue	Diagnosis	ICD-9-CM
141.3	Malignant neoplasm of ventral surface of tongue	Diagnosis	ICD-9-CM
141.4	Malignant neoplasm of anterior two-thirds of tongue, part unspecified	Diagnosis	ICD-9-CM
141.5	Malignant neoplasm of junctional zone of tongue	Diagnosis	ICD-9-CM
141.6	Malignant neoplasm of lingual tonsil	Diagnosis	ICD-9-CM
141.8	Malignant neoplasm of other sites of tongue	Diagnosis	ICD-9-CM
141.9	Malignant neoplasm of tongue, unspecified site	Diagnosis	ICD-9-CM
142.0	Malignant neoplasm of parotid gland	Diagnosis	ICD-9-CM
142.1	Malignant neoplasm of submandibular gland	Diagnosis	ICD-9-CM
142.2	Malignant neoplasm of sublingual gland	Diagnosis	ICD-9-CM
142.8	Malignant neoplasm of other major salivary glands	Diagnosis	ICD-9-CM
142.9	Malignant neoplasm of salivary gland, unspecified	Diagnosis	ICD-9-CM
143.0	Malignant neoplasm of upper gum	Diagnosis	ICD-9-CM
143.1	Malignant neoplasm of lower gum	Diagnosis	ICD-9-CM
143.8	Malignant neoplasm of other sites of gum	Diagnosis	ICD-9-CM
143.9	Malignant neoplasm of gum, unspecified site	Diagnosis	ICD-9-CM
144.0	Malignant neoplasm of anterior portion of floor of mouth	Diagnosis	ICD-9-CM
144.1	Malignant neoplasm of lateral portion of floor of mouth	Diagnosis	ICD-9-CM
144.8	Malignant neoplasm of other sites of floor of mouth	Diagnosis	ICD-9-CM
144.9	Malignant neoplasm of floor of mouth, part unspecified	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
145.0	Malignant neoplasm of cheek mucosa	Diagnosis	ICD-9-CM
145.1	Malignant neoplasm of vestibule of mouth	Diagnosis	ICD-9-CM
145.2	Malignant neoplasm of hard palate	Diagnosis	ICD-9-CM
145.3	Malignant neoplasm of soft palate	Diagnosis	ICD-9-CM
145.4	Malignant neoplasm of uvula	Diagnosis	ICD-9-CM
145.5	Malignant neoplasm of palate, unspecified	Diagnosis	ICD-9-CM
145.6	Malignant neoplasm of retromolar area	Diagnosis	ICD-9-CM
145.8	Malignant neoplasm of other specified parts of mouth	Diagnosis	ICD-9-CM
145.9	Malignant neoplasm of mouth, unspecified site	Diagnosis	ICD-9-CM
146.0	Malignant neoplasm of tonsil	Diagnosis	ICD-9-CM
146.1	Malignant neoplasm of tonsillar fossa	Diagnosis	ICD-9-CM
146.2	Malignant neoplasm of tonsillar pillars (anterior) (posterior)	Diagnosis	ICD-9-CM
146.3	Malignant neoplasm of vallecula	Diagnosis	ICD-9-CM
146.4	Malignant neoplasm of anterior aspect of epiglottis	Diagnosis	ICD-9-CM
146.5	Malignant neoplasm of junctional region of oropharynx	Diagnosis	ICD-9-CM
146.6	Malignant neoplasm of lateral wall of oropharynx	Diagnosis	ICD-9-CM
146.7	Malignant neoplasm of posterior wall of oropharynx	Diagnosis	ICD-9-CM
146.8	Malignant neoplasm of other specified sites of oropharynx	Diagnosis	ICD-9-CM
146.9	Malignant neoplasm of oropharynx, unspecified site	Diagnosis	ICD-9-CM
147.0	Malignant neoplasm of superior wall of nasopharynx	Diagnosis	ICD-9-CM
147.1	Malignant neoplasm of posterior wall of nasopharynx	Diagnosis	ICD-9-CM
147.2	Malignant neoplasm of lateral wall of nasopharynx	Diagnosis	ICD-9-CM
147.3	Malignant neoplasm of anterior wall of nasopharynx	Diagnosis	ICD-9-CM
147.8	Malignant neoplasm of other specified sites of nasopharynx	Diagnosis	ICD-9-CM
147.9	Malignant neoplasm of nasopharynx, unspecified site	Diagnosis	ICD-9-CM
148.0	Malignant neoplasm of postcricoid region of hypopharynx	Diagnosis	ICD-9-CM
148.1	Malignant neoplasm of pyriform sinus	Diagnosis	ICD-9-CM
148.2	Malignant neoplasm of aryepiglottic fold, hypopharyngeal aspect	Diagnosis	ICD-9-CM
148.3	Malignant neoplasm of posterior hypopharyngeal wall	Diagnosis	ICD-9-CM
148.8	Malignant neoplasm of other specified sites of hypopharynx	Diagnosis	ICD-9-CM
148.9	Malignant neoplasm of hypopharynx, unspecified site	Diagnosis	ICD-9-CM
149.0	Malignant neoplasm of pharynx, unspecified	Diagnosis	ICD-9-CM
149.1	Malignant neoplasm of Waldeyer's ring	Diagnosis	ICD-9-CM
149.8	Malignant neoplasm of other sites within the lip and oral cavity	Diagnosis	ICD-9-CM
149.9	Malignant neoplasm of ill-defined sites of lip and oral cavity	Diagnosis	ICD-9-CM
150.0	Malignant neoplasm of cervical esophagus	Diagnosis	ICD-9-CM
150.1	Malignant neoplasm of thoracic esophagus	Diagnosis	ICD-9-CM
150.2	Malignant neoplasm of abdominal esophagus	Diagnosis	ICD-9-CM
150.3	Malignant neoplasm of upper third of esophagus	Diagnosis	ICD-9-CM
150.4	Malignant neoplasm of middle third of esophagus	Diagnosis	ICD-9-CM
150.5	Malignant neoplasm of lower third of esophagus	Diagnosis	ICD-9-CM
150.8	Malignant neoplasm of other specified part of esophagus	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
150.9	Malignant neoplasm of esophagus, unspecified site	Diagnosis	ICD-9-CM
151.0	Malignant neoplasm of cardia	Diagnosis	ICD-9-CM
151.1	Malignant neoplasm of pylorus	Diagnosis	ICD-9-CM
151.2	Malignant neoplasm of pyloric antrum	Diagnosis	ICD-9-CM
151.3	Malignant neoplasm of fundus of stomach	Diagnosis	ICD-9-CM
151.4	Malignant neoplasm of body of stomach	Diagnosis	ICD-9-CM
151.5	Malignant neoplasm of lesser curvature of stomach, unspecified	Diagnosis	ICD-9-CM
151.6	Malignant neoplasm of greater curvature of stomach, unspecified	Diagnosis	ICD-9-CM
151.8	Malignant neoplasm of other specified sites of stomach	Diagnosis	ICD-9-CM
151.9	Malignant neoplasm of stomach, unspecified site	Diagnosis	ICD-9-CM
152.0	Malignant neoplasm of duodenum	Diagnosis	ICD-9-CM
152.1	Malignant neoplasm of jejunum	Diagnosis	ICD-9-CM
152.2	Malignant neoplasm of ileum	Diagnosis	ICD-9-CM
152.3	Malignant neoplasm of Meckel's diverticulum	Diagnosis	ICD-9-CM
152.8	Malignant neoplasm of other specified sites of small intestine	Diagnosis	ICD-9-CM
152.9	Malignant neoplasm of small intestine, unspecified site	Diagnosis	ICD-9-CM
153.0	Malignant neoplasm of hepatic flexure	Diagnosis	ICD-9-CM
153.1	Malignant neoplasm of transverse colon	Diagnosis	ICD-9-CM
153.2	Malignant neoplasm of descending colon	Diagnosis	ICD-9-CM
153.3	Malignant neoplasm of sigmoid colon	Diagnosis	ICD-9-CM
153.4	Malignant neoplasm of cecum	Diagnosis	ICD-9-CM
153.5	Malignant neoplasm of appendix	Diagnosis	ICD-9-CM
153.6	Malignant neoplasm of ascending colon	Diagnosis	ICD-9-CM
153.7	Malignant neoplasm of splenic flexure	Diagnosis	ICD-9-CM
153.8	Malignant neoplasm of other specified sites of large intestine	Diagnosis	ICD-9-CM
153.9	Malignant neoplasm of colon, unspecified site	Diagnosis	ICD-9-CM
154.0	Malignant neoplasm of rectosigmoid junction	Diagnosis	ICD-9-CM
154.1	Malignant neoplasm of rectum	Diagnosis	ICD-9-CM
154.2	Malignant neoplasm of anal canal	Diagnosis	ICD-9-CM
154.3	Malignant neoplasm of anus, unspecified site	Diagnosis	ICD-9-CM
154.8	Malignant neoplasm of other sites of rectum, rectosigmoid junction, and anus	Diagnosis	ICD-9-CM
155.0	Malignant neoplasm of liver, primary	Diagnosis	ICD-9-CM
155.1	Malignant neoplasm of intrahepatic bile ducts	Diagnosis	ICD-9-CM
155.2	Malignant neoplasm of liver, not specified as primary or secondary	Diagnosis	ICD-9-CM
156.0	Malignant neoplasm of gallbladder	Diagnosis	ICD-9-CM
156.1	Malignant neoplasm of extrahepatic bile ducts	Diagnosis	ICD-9-CM
156.2	Malignant neoplasm of ampulla of Vater	Diagnosis	ICD-9-CM
156.8	Malignant neoplasm of other specified sites of gallbladder and extrahepatic bile ducts	Diagnosis	ICD-9-CM
156.9	Malignant neoplasm of biliary tract, part unspecified site	Diagnosis	ICD-9-CM
157.0	Malignant neoplasm of head of pancreas	Diagnosis	ICD-9-CM
157.1	Malignant neoplasm of body of pancreas	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
157.2	Malignant neoplasm of tail of pancreas	Diagnosis	ICD-9-CM
157.3	Malignant neoplasm of pancreatic duct	Diagnosis	ICD-9-CM
157.4	Malignant neoplasm of islets of Langerhans	Diagnosis	ICD-9-CM
157.8	Malignant neoplasm of other specified sites of pancreas	Diagnosis	ICD-9-CM
157.9	Malignant neoplasm of pancreas, part unspecified	Diagnosis	ICD-9-CM
158.0	Malignant neoplasm of retroperitoneum	Diagnosis	ICD-9-CM
158.8	Malignant neoplasm of specified parts of peritoneum	Diagnosis	ICD-9-CM
158.9	Malignant neoplasm of peritoneum, unspecified	Diagnosis	ICD-9-CM
159.0	Malignant neoplasm of intestinal tract, part unspecified	Diagnosis	ICD-9-CM
159.1	Malignant neoplasm of spleen, not elsewhere classified	Diagnosis	ICD-9-CM
159.8	Malignant neoplasm of other sites of digestive system and intra-abdominal organs	Diagnosis	ICD-9-CM
159.9	Malignant neoplasm of ill-defined sites of digestive organs and peritoneum	Diagnosis	ICD-9-CM
160.0	Malignant neoplasm of nasal cavities	Diagnosis	ICD-9-CM
160.1	Malignant neoplasm of auditory tube, middle ear, and mastoid air cells	Diagnosis	ICD-9-CM
160.2	Malignant neoplasm of maxillary sinus	Diagnosis	ICD-9-CM
160.3	Malignant neoplasm of ethmoidal sinus	Diagnosis	ICD-9-CM
160.4	Malignant neoplasm of frontal sinus	Diagnosis	ICD-9-CM
160.5	Malignant neoplasm of sphenoidal sinus	Diagnosis	ICD-9-CM
160.8	Malignant neoplasm of other sites of nasal cavities, middle ear, and accessory sinuses	Diagnosis	ICD-9-CM
160.9	Malignant neoplasm of site of nasal cavities, middle ear, and accessory sinus, unspecified site	Diagnosis	ICD-9-CM
161.0	Malignant neoplasm of glottis	Diagnosis	ICD-9-CM
161.1	Malignant neoplasm of supraglottis	Diagnosis	ICD-9-CM
161.2	Malignant neoplasm of subglottis	Diagnosis	ICD-9-CM
161.3	Malignant neoplasm of laryngeal cartilages	Diagnosis	ICD-9-CM
161.8	Malignant neoplasm of other specified sites of larynx	Diagnosis	ICD-9-CM
161.9	Malignant neoplasm of larynx, unspecified site	Diagnosis	ICD-9-CM
162.0	Malignant neoplasm of trachea	Diagnosis	ICD-9-CM
162.2	Malignant neoplasm of main bronchus	Diagnosis	ICD-9-CM
162.3	Malignant neoplasm of upper lobe, bronchus, or lung	Diagnosis	ICD-9-CM
162.4	Malignant neoplasm of middle lobe, bronchus, or lung	Diagnosis	ICD-9-CM
162.5	Malignant neoplasm of lower lobe, bronchus, or lung	Diagnosis	ICD-9-CM
162.8	Malignant neoplasm of other parts of bronchus or lung	Diagnosis	ICD-9-CM
162.9	Malignant neoplasm of bronchus and lung, unspecified site	Diagnosis	ICD-9-CM
163.0	Malignant neoplasm of parietal pleura	Diagnosis	ICD-9-CM
163.1	Malignant neoplasm of visceral pleura	Diagnosis	ICD-9-CM
163.8	Malignant neoplasm of other specified sites of pleura	Diagnosis	ICD-9-CM
163.9	Malignant neoplasm of pleura, unspecified site	Diagnosis	ICD-9-CM
164.0	Malignant neoplasm of thymus	Diagnosis	ICD-9-CM
164.1	Malignant neoplasm of heart	Diagnosis	ICD-9-CM
164.2	Malignant neoplasm of anterior mediastinum	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
164.3	Malignant neoplasm of posterior mediastinum	Diagnosis	ICD-9-CM
164.8	Malignant neoplasm of other parts of mediastinum	Diagnosis	ICD-9-CM
164.9	Malignant neoplasm of mediastinum, part unspecified	Diagnosis	ICD-9-CM
165.0	Malignant neoplasm of upper respiratory tract, part unspecified	Diagnosis	ICD-9-CM
165.8	Malignant neoplasm of other sites within the respiratory system and intrathoracic organs	Diagnosis	ICD-9-CM
165.9	Malignant neoplasm of ill-defined sites within the respiratory system	Diagnosis	ICD-9-CM
170.0	Malignant neoplasm of bones of skull and face, except mandible	Diagnosis	ICD-9-CM
170.1	Malignant neoplasm of mandible	Diagnosis	ICD-9-CM
170.2	Malignant neoplasm of vertebral column, excluding sacrum and coccyx	Diagnosis	ICD-9-CM
170.3	Malignant neoplasm of ribs, sternum, and clavicle	Diagnosis	ICD-9-CM
170.4	Malignant neoplasm of scapula and long bones of upper limb	Diagnosis	ICD-9-CM
170.5	Malignant neoplasm of short bones of upper limb	Diagnosis	ICD-9-CM
170.6	Malignant neoplasm of pelvic bones, sacrum, and coccyx	Diagnosis	ICD-9-CM
170.7	Malignant neoplasm of long bones of lower limb	Diagnosis	ICD-9-CM
170.8	Malignant neoplasm of short bones of lower limb	Diagnosis	ICD-9-CM
170.9	Malignant neoplasm of bone and articular cartilage, site unspecified	Diagnosis	ICD-9-CM
171.0	Malignant neoplasm of connective and other soft tissue of head, face, and neck	Diagnosis	ICD-9-CM
171.2	Malignant neoplasm of connective and other soft tissue of upper limb, including shoulder	Diagnosis	ICD-9-CM
171.3	Malignant neoplasm of connective and other soft tissue of lower limb, including hip	Diagnosis	ICD-9-CM
171.4	Malignant neoplasm of connective and other soft tissue of thorax	Diagnosis	ICD-9-CM
171.5	Malignant neoplasm of connective and other soft tissue of abdomen	Diagnosis	ICD-9-CM
171.6	Malignant neoplasm of connective and other soft tissue of pelvis	Diagnosis	ICD-9-CM
171.7	Malignant neoplasm of connective and other soft tissue of trunk, unspecified site	Diagnosis	ICD-9-CM
171.8	Malignant neoplasm of other specified sites of connective and other soft tissue	Diagnosis	ICD-9-CM
171.9	Malignant neoplasm of connective and other soft tissue, site unspecified	Diagnosis	ICD-9-CM
172.0	Malignant melanoma of skin of lip	Diagnosis	ICD-9-CM
172.1	Malignant melanoma of skin of eyelid, including canthus	Diagnosis	ICD-9-CM
172.2	Malignant melanoma of skin of ear and external auditory canal	Diagnosis	ICD-9-CM
172.3	Malignant melanoma of skin of other and unspecified parts of face	Diagnosis	ICD-9-CM
172.4	Malignant melanoma of skin of scalp and neck	Diagnosis	ICD-9-CM
172.5	Malignant melanoma of skin of trunk, except scrotum	Diagnosis	ICD-9-CM
172.6	Malignant melanoma of skin of upper limb, including shoulder	Diagnosis	ICD-9-CM
172.7	Malignant melanoma of skin of lower limb, including hip	Diagnosis	ICD-9-CM
172.8	Malignant melanoma of other specified sites of skin	Diagnosis	ICD-9-CM
172.9	Melanoma of skin, site unspecified	Diagnosis	ICD-9-CM
174.0	Malignant neoplasm of nipple and areola of female breast	Diagnosis	ICD-9-CM
174.1	Malignant neoplasm of central portion of female breast	Diagnosis	ICD-9-CM
174.2	Malignant neoplasm of upper-inner quadrant of female breast	Diagnosis	ICD-9-CM
174.3	Malignant neoplasm of lower-inner quadrant of female breast	Diagnosis	ICD-9-CM
174.4	Malignant neoplasm of upper-outer quadrant of female breast	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
174.5	Malignant neoplasm of lower-outer quadrant of female breast	Diagnosis	ICD-9-CM
174.6	Malignant neoplasm of axillary tail of female breast	Diagnosis	ICD-9-CM
174.8	Malignant neoplasm of other specified sites of female breast	Diagnosis	ICD-9-CM
174.9	Malignant neoplasm of breast (female), unspecified site	Diagnosis	ICD-9-CM
175.0	Malignant neoplasm of nipple and areola of male breast	Diagnosis	ICD-9-CM
175.9	Malignant neoplasm of other and unspecified sites of male breast	Diagnosis	ICD-9-CM
176.0	Kaposi's sarcoma of skin	Diagnosis	ICD-9-CM
176.1	Kaposi's sarcoma of soft tissue	Diagnosis	ICD-9-CM
176.2	Kaposi's sarcoma of palate	Diagnosis	ICD-9-CM
176.3	Kaposi's sarcoma of gastrointestinal sites	Diagnosis	ICD-9-CM
176.4	Kaposi's sarcoma of lung	Diagnosis	ICD-9-CM
176.5	Kaposi's sarcoma of lymph nodes	Diagnosis	ICD-9-CM
176.8	Kaposi's sarcoma of other specified sites	Diagnosis	ICD-9-CM
176.9	Kaposi's sarcoma of unspecified site	Diagnosis	ICD-9-CM
179	Malignant neoplasm of uterus, part unspecified	Diagnosis	ICD-9-CM
180.0	Malignant neoplasm of endocervix	Diagnosis	ICD-9-CM
180.1	Malignant neoplasm of exocervix	Diagnosis	ICD-9-CM
180.8	Malignant neoplasm of other specified sites of cervix	Diagnosis	ICD-9-CM
180.9	Malignant neoplasm of cervix uteri, unspecified site	Diagnosis	ICD-9-CM
181	Malignant neoplasm of placenta	Diagnosis	ICD-9-CM
182.0	Malignant neoplasm of corpus uteri, except isthmus	Diagnosis	ICD-9-CM
182.1	Malignant neoplasm of isthmus	Diagnosis	ICD-9-CM
182.8	Malignant neoplasm of other specified sites of body of uterus	Diagnosis	ICD-9-CM
183.0	Malignant neoplasm of ovary	Diagnosis	ICD-9-CM
183.2	Malignant neoplasm of fallopian tube	Diagnosis	ICD-9-CM
183.3	Malignant neoplasm of broad ligament of uterus	Diagnosis	ICD-9-CM
183.4	Malignant neoplasm of parametrium of uterus	Diagnosis	ICD-9-CM
183.5	Malignant neoplasm of round ligament of uterus	Diagnosis	ICD-9-CM
183.8	Malignant neoplasm of other specified sites of uterine adnexa	Diagnosis	ICD-9-CM
183.9	Malignant neoplasm of uterine adnexa, unspecified site	Diagnosis	ICD-9-CM
184.0	Malignant neoplasm of vagina	Diagnosis	ICD-9-CM
184.1	Malignant neoplasm of labia majora	Diagnosis	ICD-9-CM
184.2	Malignant neoplasm of labia minora	Diagnosis	ICD-9-CM
184.3	Malignant neoplasm of clitoris	Diagnosis	ICD-9-CM
184.4	Malignant neoplasm of vulva, unspecified site	Diagnosis	ICD-9-CM
184.8	Malignant neoplasm of other specified sites of female genital organs	Diagnosis	ICD-9-CM
184.9	Malignant neoplasm of female genital organ, site unspecified	Diagnosis	ICD-9-CM
185	Malignant neoplasm of prostate	Diagnosis	ICD-9-CM
186.0	Malignant neoplasm of undescended testis	Diagnosis	ICD-9-CM
186.9	Malignant neoplasm of other and unspecified testis	Diagnosis	ICD-9-CM
187.1	Malignant neoplasm of prepuce	Diagnosis	ICD-9-CM
187.2	Malignant neoplasm of glans penis	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
187.3	Malignant neoplasm of body of penis	Diagnosis	ICD-9-CM
187.4	Malignant neoplasm of penis, part unspecified	Diagnosis	ICD-9-CM
187.5	Malignant neoplasm of epididymis	Diagnosis	ICD-9-CM
187.6	Malignant neoplasm of spermatic cord	Diagnosis	ICD-9-CM
187.7	Malignant neoplasm of scrotum	Diagnosis	ICD-9-CM
187.8	Malignant neoplasm of other specified sites of male genital organs	Diagnosis	ICD-9-CM
187.9	Malignant neoplasm of male genital organ, site unspecified	Diagnosis	ICD-9-CM
188.0	Malignant neoplasm of trigone of urinary bladder	Diagnosis	ICD-9-CM
188.1	Malignant neoplasm of dome of urinary bladder	Diagnosis	ICD-9-CM
188.2	Malignant neoplasm of lateral wall of urinary bladder	Diagnosis	ICD-9-CM
188.3	Malignant neoplasm of anterior wall of urinary bladder	Diagnosis	ICD-9-CM
188.4	Malignant neoplasm of posterior wall of urinary bladder	Diagnosis	ICD-9-CM
188.5	Malignant neoplasm of bladder neck	Diagnosis	ICD-9-CM
188.6	Malignant neoplasm of ureteric orifice	Diagnosis	ICD-9-CM
188.7	Malignant neoplasm of urachus	Diagnosis	ICD-9-CM
188.8	Malignant neoplasm of other specified sites of bladder	Diagnosis	ICD-9-CM
188.9	Malignant neoplasm of bladder, part unspecified	Diagnosis	ICD-9-CM
189.0	Malignant neoplasm of kidney, except pelvis	Diagnosis	ICD-9-CM
189.1	Malignant neoplasm of renal pelvis	Diagnosis	ICD-9-CM
189.2	Malignant neoplasm of ureter	Diagnosis	ICD-9-CM
189.3	Malignant neoplasm of urethra	Diagnosis	ICD-9-CM
189.4	Malignant neoplasm of paraurethral glands	Diagnosis	ICD-9-CM
189.8	Malignant neoplasm of other specified sites of urinary organs	Diagnosis	ICD-9-CM
189.9	Malignant neoplasm of urinary organ, site unspecified	Diagnosis	ICD-9-CM
190.0	Malignant neoplasm of eyeball, except conjunctiva, cornea, retina, and choroid	Diagnosis	ICD-9-CM
190.1	Malignant neoplasm of orbit	Diagnosis	ICD-9-CM
190.2	Malignant neoplasm of lacrimal gland	Diagnosis	ICD-9-CM
190.3	Malignant neoplasm of conjunctiva	Diagnosis	ICD-9-CM
190.4	Malignant neoplasm of cornea	Diagnosis	ICD-9-CM
190.5	Malignant neoplasm of retina	Diagnosis	ICD-9-CM
190.6	Malignant neoplasm of choroid	Diagnosis	ICD-9-CM
190.7	Malignant neoplasm of lacrimal duct	Diagnosis	ICD-9-CM
190.8	Malignant neoplasm of other specified sites of eye	Diagnosis	ICD-9-CM
190.9	Malignant neoplasm of eye, part unspecified	Diagnosis	ICD-9-CM
191.0	Malignant neoplasm of cerebrum, except lobes and ventricles	Diagnosis	ICD-9-CM
191.1	Malignant neoplasm of frontal lobe of brain	Diagnosis	ICD-9-CM
191.2	Malignant neoplasm of temporal lobe of brain	Diagnosis	ICD-9-CM
191.3	Malignant neoplasm of parietal lobe of brain	Diagnosis	ICD-9-CM
191.4	Malignant neoplasm of occipital lobe of brain	Diagnosis	ICD-9-CM
191.5	Malignant neoplasm of ventricles of brain	Diagnosis	ICD-9-CM
191.6	Malignant neoplasm of cerebellum NOS	Diagnosis	ICD-9-CM
191.7	Malignant neoplasm of brain stem	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
191.8	Malignant neoplasm of other parts of brain	Diagnosis	ICD-9-CM
191.9	Malignant neoplasm of brain, unspecified site	Diagnosis	ICD-9-CM
192.0	Malignant neoplasm of cranial nerves	Diagnosis	ICD-9-CM
192.1	Malignant neoplasm of cerebral meninges	Diagnosis	ICD-9-CM
192.2	Malignant neoplasm of spinal cord	Diagnosis	ICD-9-CM
192.3	Malignant neoplasm of spinal meninges	Diagnosis	ICD-9-CM
192.8	Malignant neoplasm of other specified sites of nervous system	Diagnosis	ICD-9-CM
192.9	Malignant neoplasm of nervous system, part unspecified	Diagnosis	ICD-9-CM
193	Malignant neoplasm of thyroid gland	Diagnosis	ICD-9-CM
194.0	Malignant neoplasm of adrenal gland	Diagnosis	ICD-9-CM
194.1	Malignant neoplasm of parathyroid gland	Diagnosis	ICD-9-CM
194.3	Malignant neoplasm of pituitary gland and craniopharyngeal duct	Diagnosis	ICD-9-CM
194.4	Malignant neoplasm of pineal gland	Diagnosis	ICD-9-CM
194.5	Malignant neoplasm of carotid body	Diagnosis	ICD-9-CM
194.6	Malignant neoplasm of aortic body and other paraganglia	Diagnosis	ICD-9-CM
194.8	Malignant neoplasm of other endocrine glands and related structures	Diagnosis	ICD-9-CM
194.9	Malignant neoplasm of endocrine gland, site unspecified	Diagnosis	ICD-9-CM
195.0	Malignant neoplasm of head, face, and neck	Diagnosis	ICD-9-CM
195.1	Malignant neoplasm of thorax	Diagnosis	ICD-9-CM
195.2	Malignant neoplasm of abdomen	Diagnosis	ICD-9-CM
195.3	Malignant neoplasm of pelvis	Diagnosis	ICD-9-CM
195.4	Malignant neoplasm of upper limb	Diagnosis	ICD-9-CM
195.5	Malignant neoplasm of lower limb	Diagnosis	ICD-9-CM
195.8	Malignant neoplasm of other specified sites	Diagnosis	ICD-9-CM
196.0	Secondary and unspecified malignant neoplasm of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
196.1	Secondary and unspecified malignant neoplasm of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
196.2	Secondary and unspecified malignant neoplasm of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
196.3	Secondary and unspecified malignant neoplasm of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
196.5	Secondary and unspecified malignant neoplasm of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
196.6	Secondary and unspecified malignant neoplasm of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
196.8	Secondary and unspecified malignant neoplasm of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
196.9	Secondary and unspecified malignant neoplasm of lymph nodes, site unspecified	Diagnosis	ICD-9-CM
197.0	Secondary malignant neoplasm of lung	Diagnosis	ICD-9-CM
197.1	Secondary malignant neoplasm of mediastinum	Diagnosis	ICD-9-CM
197.2	Secondary malignant neoplasm of pleura	Diagnosis	ICD-9-CM
197.3	Secondary malignant neoplasm of other respiratory organs	Diagnosis	ICD-9-CM
197.4	Secondary malignant neoplasm of small intestine including duodenum	Diagnosis	ICD-9-CM
197.5	Secondary malignant neoplasm of large intestine and rectum	Diagnosis	ICD-9-CM
197.6	Secondary malignant neoplasm of retroperitoneum and peritoneum	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
197.7	Secondary malignant neoplasm of liver	Diagnosis	ICD-9-CM
197.8	Secondary malignant neoplasm of other digestive organs and spleen	Diagnosis	ICD-9-CM
198.0	Secondary malignant neoplasm of kidney	Diagnosis	ICD-9-CM
198.1	Secondary malignant neoplasm of other urinary organs	Diagnosis	ICD-9-CM
198.2	Secondary malignant neoplasm of skin	Diagnosis	ICD-9-CM
198.3	Secondary malignant neoplasm of brain and spinal cord	Diagnosis	ICD-9-CM
198.4	Secondary malignant neoplasm of other parts of nervous system	Diagnosis	ICD-9-CM
198.5	Secondary malignant neoplasm of bone and bone marrow	Diagnosis	ICD-9-CM
198.6	Secondary malignant neoplasm of ovary	Diagnosis	ICD-9-CM
198.7	Secondary malignant neoplasm of adrenal gland	Diagnosis	ICD-9-CM
198.81	Secondary malignant neoplasm of breast	Diagnosis	ICD-9-CM
198.82	Secondary malignant neoplasm of genital organs	Diagnosis	ICD-9-CM
198.89	Secondary malignant neoplasm of other specified sites	Diagnosis	ICD-9-CM
199.0	Disseminated malignant neoplasm	Diagnosis	ICD-9-CM
199.1	Other malignant neoplasm of unspecified site	Diagnosis	ICD-9-CM
199.2	Malignant neoplasm associated with transplanted organ	Diagnosis	ICD-9-CM
200.00	Reticulosarcoma, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
200.01	Reticulosarcoma of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
200.02	Reticulosarcoma of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
200.03	Reticulosarcoma of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
200.04	Reticulosarcoma of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
200.05	Reticulosarcoma of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
200.06	Reticulosarcoma of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
200.07	Reticulosarcoma of spleen	Diagnosis	ICD-9-CM
200.08	Reticulosarcoma of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
200.10	Lymphosarcoma, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
200.11	Lymphosarcoma of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
200.12	Lymphosarcoma of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
200.13	Lymphosarcoma of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
200.14	Lymphosarcoma of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
200.15	Lymphosarcoma of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
200.16	Lymphosarcoma of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
200.17	Lymphosarcoma of spleen	Diagnosis	ICD-9-CM
200.18	Lymphosarcoma of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
200.20	Burkitt's tumor or lymphoma, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
200.21	Burkitt's tumor or lymphoma of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
200.22	Burkitt's tumor or lymphoma of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
200.23	Burkitt's tumor or lymphoma of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
200.24	Burkitt's tumor or lymphoma of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
200.25	Burkitt's tumor or lymphoma of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
200.26	Burkitt's tumor or lymphoma of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
200.27	Burkitt's tumor or lymphoma of spleen	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
200.28	Burkitt's tumor or lymphoma of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
200.30	Marginal zone lymphoma, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
200.31	Marginal zone lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
200.32	Marginal zone lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-9-CM
200.33	Marginal zone lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
200.34	Marginal zone lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
200.35	Marginal zone lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
200.36	Marginal zone lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-9-CM
200.37	Marginal zone lymphoma, spleen	Diagnosis	ICD-9-CM
200.38	Marginal zone lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-9-CM
200.40	Mantle cell lymphoma, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
200.41	Mantle cell lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
200.42	Mantle cell lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-9-CM
200.43	Mantle cell lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
200.44	Mantle cell lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
200.45	Mantle cell lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
200.46	Mantle cell lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-9-CM
200.47	Mantle cell lymphoma, spleen	Diagnosis	ICD-9-CM
200.48	Mantle cell lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-9-CM
200.50	Primary central nervous system lymphoma, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
200.51	Primary central nervous system lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
200.52	Primary central nervous system lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-9-CM
200.53	Primary central nervous system lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
200.54	Primary central nervous system lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
200.55	Primary central nervous system lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
200.56	Primary central nervous system lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-9-CM
200.57	Primary central nervous system lymphoma, spleen	Diagnosis	ICD-9-CM
200.58	Primary central nervous system lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-9-CM
200.60	Anaplastic large cell lymphoma, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
200.61	Anaplastic large cell lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
200.62	Anaplastic large cell lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-9-CM
200.63	Anaplastic large cell lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
200.64	Anaplastic large cell lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
200.65	Anaplastic large cell lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
200.66	Anaplastic large cell lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-9-CM
200.67	Anaplastic large cell lymphoma, spleen	Diagnosis	ICD-9-CM
200.68	Anaplastic large cell lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-9-CM
200.70	Large cell lymphoma, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
200.71	Large cell lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
200.72	Large cell lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
200.73	Large cell lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
200.74	Large cell lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
200.75	Large cell lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
200.76	Large cell lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-9-CM
200.77	Large cell lymphoma, spleen	Diagnosis	ICD-9-CM
200.78	Large cell lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-9-CM
200.80	Other named variants, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
200.81	Other named variants of lymphosarcoma and reticulosarcoma of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
200.82	Other named variants of lymphosarcoma and reticulosarcoma of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
200.83	Other named variants of lymphosarcoma and reticulosarcoma of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
200.84	Other named variants of lymphosarcoma and reticulosarcoma of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
200.85	Other named variants of lymphosarcoma and reticulosarcoma of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
200.86	Other named variants of lymphosarcoma and reticulosarcoma of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
200.87	Other named variants of lymphosarcoma and reticulosarcoma of spleen	Diagnosis	ICD-9-CM
200.88	Other named variants of lymphosarcoma and reticulosarcoma of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
201.00	Hodgkin's paraganuloma, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
201.01	Hodgkin's paraganuloma of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
201.02	Hodgkin's paraganuloma of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
201.03	Hodgkin's paraganuloma of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
201.04	Hodgkin's paraganuloma of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
201.05	Hodgkin's paraganuloma of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
201.06	Hodgkin's paraganuloma of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
201.07	Hodgkin's paraganuloma of spleen	Diagnosis	ICD-9-CM
201.08	Hodgkin's paraganuloma of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
201.10	Hodgkin's granuloma, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
201.11	Hodgkin's granuloma of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
201.12	Hodgkin's granuloma of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
201.13	Hodgkin's granuloma of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
201.14	Hodgkin's granuloma of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
201.15	Hodgkin's granuloma of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
201.16	Hodgkin's granuloma of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
201.17	Hodgkin's granuloma of spleen	Diagnosis	ICD-9-CM
201.18	Hodgkin's granuloma of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
201.20	Hodgkin's sarcoma, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
201.21	Hodgkin's sarcoma of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
201.22	Hodgkin's sarcoma of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
201.23	Hodgkin's sarcoma of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
201.24	Hodgkin's sarcoma of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
201.25	Hodgkin's sarcoma of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
201.26	Hodgkin's sarcoma of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
201.27	Hodgkin's sarcoma of spleen	Diagnosis	ICD-9-CM
201.28	Hodgkin's sarcoma of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
201.40	Hodgkin's disease, lymphocytic-histiocytic predominance, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
201.41	Hodgkin's disease, lymphocytic-histiocytic predominance of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
201.42	Hodgkin's disease, lymphocytic-histiocytic predominance of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
201.43	Hodgkin's disease, lymphocytic-histiocytic predominance of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
201.44	Hodgkin's disease, lymphocytic-histiocytic predominance of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
201.45	Hodgkin's disease, lymphocytic-histiocytic predominance of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
201.46	Hodgkin's disease, lymphocytic-histiocytic predominance of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
201.47	Hodgkin's disease, lymphocytic-histiocytic predominance of spleen	Diagnosis	ICD-9-CM
201.48	Hodgkin's disease, lymphocytic-histiocytic predominance of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
201.50	Hodgkin's disease, nodular sclerosis, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
201.51	Hodgkin's disease, nodular sclerosis, of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
201.52	Hodgkin's disease, nodular sclerosis, of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
201.53	Hodgkin's disease, nodular sclerosis, of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
201.54	Hodgkin's disease, nodular sclerosis, of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
201.55	Hodgkin's disease, nodular sclerosis, of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
201.56	Hodgkin's disease, nodular sclerosis, of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
201.57	Hodgkin's disease, nodular sclerosis, of spleen	Diagnosis	ICD-9-CM
201.58	Hodgkin's disease, nodular sclerosis, of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
201.60	Hodgkin's disease, mixed cellularity, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
201.61	Hodgkin's disease, mixed cellularity, involving lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
201.62	Hodgkin's disease, mixed cellularity, of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
201.63	Hodgkin's disease, mixed cellularity, of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
201.64	Hodgkin's disease, mixed cellularity, of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
201.65	Hodgkin's disease, mixed cellularity, of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
201.66	Hodgkin's disease, mixed cellularity, of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
201.67	Hodgkin's disease, mixed cellularity, of spleen	Diagnosis	ICD-9-CM
201.68	Hodgkin's disease, mixed cellularity, of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
201.70	Hodgkin's disease, lymphocytic depletion, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
201.71	Hodgkin's disease, lymphocytic depletion, of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
201.72	Hodgkin's disease, lymphocytic depletion, of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
201.73	Hodgkin's disease, lymphocytic depletion, of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
201.74	Hodgkin's disease, lymphocytic depletion, of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
201.75	Hodgkin's disease, lymphocytic depletion, of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
201.76	Hodgkin's disease, lymphocytic depletion, of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
201.77	Hodgkin's disease, lymphocytic depletion, of spleen	Diagnosis	ICD-9-CM
201.78	Hodgkin's disease, lymphocytic depletion, of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
201.90	Hodgkin's disease, unspecified type, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
201.91	Hodgkin's disease, unspecified type, of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
201.92	Hodgkin's disease, unspecified type, of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
201.93	Hodgkin's disease, unspecified type, of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
201.94	Hodgkin's disease, unspecified type, of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
201.95	Hodgkin's disease, unspecified type, of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
201.96	Hodgkin's disease, unspecified type, of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
201.97	Hodgkin's disease, unspecified type, of spleen	Diagnosis	ICD-9-CM
201.98	Hodgkin's disease, unspecified type, of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
202.00	Nodular lymphoma, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
202.01	Nodular lymphoma of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
202.02	Nodular lymphoma of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
202.03	Nodular lymphoma of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
202.04	Nodular lymphoma of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
202.05	Nodular lymphoma of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
202.06	Nodular lymphoma of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
202.07	Nodular lymphoma of spleen	Diagnosis	ICD-9-CM
202.08	Nodular lymphoma of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
202.10	Mycosis fungoides, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
202.11	Mycosis fungoides of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
202.12	Mycosis fungoides of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
202.13	Mycosis fungoides of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
202.14	Mycosis fungoides of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
202.15	Mycosis fungoides of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
202.16	Mycosis fungoides of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
202.17	Mycosis fungoides of spleen	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
202.18	Mycosis fungoides of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
202.20	Sezary's disease, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
202.21	Sezary's disease of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
202.22	Sezary's disease of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
202.23	Sezary's disease of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
202.24	Sezary's disease of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
202.25	Sezary's disease of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
202.26	Sezary's disease of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
202.27	Sezary's disease of spleen	Diagnosis	ICD-9-CM
202.28	Sezary's disease of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
202.30	Malignant histiocytosis, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
202.31	Malignant histiocytosis of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
202.32	Malignant histiocytosis of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
202.33	Malignant histiocytosis of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
202.34	Malignant histiocytosis of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
202.35	Malignant histiocytosis of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
202.36	Malignant histiocytosis of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
202.37	Malignant histiocytosis of spleen	Diagnosis	ICD-9-CM
202.38	Malignant histiocytosis of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
202.40	Leukemic reticuloendotheliosis, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
202.41	Leukemic reticuloendotheliosis of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
202.42	Leukemic reticuloendotheliosis of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
202.43	Leukemic reticuloendotheliosis of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
202.44	Leukemic reticuloendotheliosis of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
202.45	Leukemic reticuloendotheliosis of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
202.46	Leukemic reticuloendotheliosis of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
202.47	Leukemic reticuloendotheliosis of spleen	Diagnosis	ICD-9-CM
202.48	Leukemic reticuloendotheliosis of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
202.50	Letterer-Siwe disease, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
202.51	Letterer-Siwe disease of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
202.52	Letterer-Siwe disease of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
202.53	Letterer-Siwe disease of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
202.54	Letterer-Siwe disease of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
202.55	Letterer-Siwe disease of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
202.56	Letterer-Siwe disease of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
202.57	Letterer-Siwe disease of spleen	Diagnosis	ICD-9-CM
202.58	Letterer-Siwe disease of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
202.60	Malignant mast cell tumors, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
202.61	Malignant mast cell tumors of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
202.62	Malignant mast cell tumors of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
202.63	Malignant mast cell tumors of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
202.64	Malignant mast cell tumors of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
202.65	Malignant mast cell tumors of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
202.66	Malignant mast cell tumors of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
202.67	Malignant mast cell tumors of spleen	Diagnosis	ICD-9-CM
202.68	Malignant mast cell tumors of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
202.70	Peripheral T-cell lymphoma, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
202.71	Peripheral T-cell lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
202.72	Peripheral T-cell lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-9-CM
202.73	Peripheral T-cell lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
202.74	Peripheral T-cell lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
202.75	Peripheral T-cell lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
202.76	Peripheral T-cell lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-9-CM
202.77	Peripheral T-cell lymphoma, spleen	Diagnosis	ICD-9-CM
202.78	Peripheral T-cell lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-9-CM
202.80	Other malignant lymphomas, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
202.81	Other malignant lymphomas of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
202.82	Other malignant lymphomas of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
202.83	Other malignant lymphomas of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
202.84	Other malignant lymphomas of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
202.85	Other malignant lymphomas of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
202.86	Other malignant lymphomas of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
202.87	Other malignant lymphomas of spleen	Diagnosis	ICD-9-CM
202.88	Other malignant lymphomas of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
202.90	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue, unspecified site, extranodal and solid organ sites	Diagnosis	ICD-9-CM
202.91	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue of lymph nodes of head, face, and neck	Diagnosis	ICD-9-CM
202.92	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue of intrathoracic lymph nodes	Diagnosis	ICD-9-CM
202.93	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue of intra-abdominal lymph nodes	Diagnosis	ICD-9-CM
202.94	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue of lymph nodes of axilla and upper limb	Diagnosis	ICD-9-CM
202.95	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue of lymph nodes of inguinal region and lower limb	Diagnosis	ICD-9-CM
202.96	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue of intrapelvic lymph nodes	Diagnosis	ICD-9-CM
202.97	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue of spleen	Diagnosis	ICD-9-CM
202.98	Other and unspecified malignant neoplasms of lymphoid and histiocytic tissue of lymph nodes of multiple sites	Diagnosis	ICD-9-CM
203.00	Multiple myeloma, without mention of having achieved remission	Diagnosis	ICD-9-CM
203.01	Multiple myeloma in remission	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
203.02	Multiple myeloma, in relapse	Diagnosis	ICD-9-CM
203.10	Plasma cell leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
203.11	Plasma cell leukemia in remission	Diagnosis	ICD-9-CM
203.12	Plasma cell leukemia, in relapse	Diagnosis	ICD-9-CM
203.80	Other immunoproliferative neoplasms, without mention of having achieved remission	Diagnosis	ICD-9-CM
203.81	Other immunoproliferative neoplasms in remission	Diagnosis	ICD-9-CM
203.82	Other immunoproliferative neoplasms, in relapse	Diagnosis	ICD-9-CM
204.00	Acute lymphoid leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
204.01	Acute lymphoid leukemia in remission	Diagnosis	ICD-9-CM
204.02	Acute lymphoid leukemia, in relapse	Diagnosis	ICD-9-CM
204.10	Chronic lymphoid leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
204.11	Chronic lymphoid leukemia in remission	Diagnosis	ICD-9-CM
204.12	Chronic lymphoid leukemia, in relapse	Diagnosis	ICD-9-CM
204.20	Subacute lymphoid leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
204.21	Subacute lymphoid leukemia in remission	Diagnosis	ICD-9-CM
204.22	Subacute lymphoid leukemia, in relapse	Diagnosis	ICD-9-CM
204.80	Other lymphoid leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
204.81	Other lymphoid leukemia in remission	Diagnosis	ICD-9-CM
204.82	Other lymphoid leukemia, in relapse	Diagnosis	ICD-9-CM
204.90	Unspecified lymphoid leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
204.91	Unspecified lymphoid leukemia in remission	Diagnosis	ICD-9-CM
204.92	Unspecified lymphoid leukemia, in relapse	Diagnosis	ICD-9-CM
205.00	Acute myeloid leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
205.01	Acute myeloid leukemia in remission	Diagnosis	ICD-9-CM
205.02	Acute myeloid leukemia, in relapse	Diagnosis	ICD-9-CM
205.10	Chronic myeloid leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
205.11	Chronic myeloid leukemia in remission	Diagnosis	ICD-9-CM
205.12	Chronic myeloid leukemia, in relapse	Diagnosis	ICD-9-CM
205.20	Subacute myeloid leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
205.21	Subacute myeloid leukemia in remission	Diagnosis	ICD-9-CM
205.22	Subacute myeloid leukemia, in relapse	Diagnosis	ICD-9-CM
205.30	Myeloid sarcoma, without mention of having achieved remission	Diagnosis	ICD-9-CM
205.31	Myeloid sarcoma in remission	Diagnosis	ICD-9-CM
205.32	Myeloid sarcoma, in relapse	Diagnosis	ICD-9-CM
205.80	Other myeloid leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
205.81	Other myeloid leukemia in remission	Diagnosis	ICD-9-CM
205.82	Other myeloid leukemia, in relapse	Diagnosis	ICD-9-CM
205.90	Unspecified myeloid leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
205.91	Unspecified myeloid leukemia in remission	Diagnosis	ICD-9-CM
205.92	Unspecified myeloid leukemia, in relapse	Diagnosis	ICD-9-CM
206.00	Acute monocytic leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
206.01	Acute monocytic leukemia in remission	Diagnosis	ICD-9-CM
206.02	Acute monocytic leukemia, in relapse	Diagnosis	ICD-9-CM
206.10	Chronic monocytic leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
206.11	Chronic monocytic leukemia in remission	Diagnosis	ICD-9-CM
206.12	Chronic monocytic leukemia, in relapse	Diagnosis	ICD-9-CM
206.20	Subacute monocytic leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
206.21	Subacute monocytic leukemia in remission	Diagnosis	ICD-9-CM
206.22	Subacute monocytic leukemia, in relapse	Diagnosis	ICD-9-CM
206.80	Other monocytic leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
206.81	Other monocytic leukemia in remission	Diagnosis	ICD-9-CM
206.82	Other monocytic leukemia, in relapse	Diagnosis	ICD-9-CM
206.90	Unspecified monocytic leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
206.91	Unspecified monocytic leukemia in remission	Diagnosis	ICD-9-CM
206.92	Unspecified monocytic leukemia, in relapse	Diagnosis	ICD-9-CM
207.00	Acute erythremia and erythroleukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
207.01	Acute erythremia and erythroleukemia in remission	Diagnosis	ICD-9-CM
207.02	Acute erythremia and erythroleukemia, in relapse	Diagnosis	ICD-9-CM
207.10	Chronic erythremia, without mention of having achieved remission	Diagnosis	ICD-9-CM
207.11	Chronic erythremia in remission	Diagnosis	ICD-9-CM
207.12	Chronic erythremia, in relapse	Diagnosis	ICD-9-CM
207.20	Megakaryocytic leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
207.21	Megakaryocytic leukemia in remission	Diagnosis	ICD-9-CM
207.22	Megakaryocytic leukemia, in relapse	Diagnosis	ICD-9-CM
207.80	Other specified leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
207.81	Other specified leukemia in remission	Diagnosis	ICD-9-CM
207.82	Other specified leukemia, in relapse	Diagnosis	ICD-9-CM
208.00	Acute leukemia of unspecified cell type, without mention of having achieved remission	Diagnosis	ICD-9-CM
208.01	Acute leukemia of unspecified cell type in remission	Diagnosis	ICD-9-CM
208.02	Acute leukemia of unspecified cell type, in relapse	Diagnosis	ICD-9-CM
208.10	Chronic leukemia of unspecified cell type, without mention of having achieved remission	Diagnosis	ICD-9-CM
208.11	Chronic leukemia of unspecified cell type in remission	Diagnosis	ICD-9-CM
208.12	Chronic leukemia of unspecified cell type, in relapse	Diagnosis	ICD-9-CM
208.20	Subacute leukemia of unspecified cell type, without mention of having achieved remission	Diagnosis	ICD-9-CM
208.21	Subacute leukemia of unspecified cell type in remission	Diagnosis	ICD-9-CM
208.22	Subacute leukemia of unspecified cell type, in relapse	Diagnosis	ICD-9-CM
208.80	Other leukemia of unspecified cell type, without mention of having achieved remission	Diagnosis	ICD-9-CM
208.81	Other leukemia of unspecified cell type in remission	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
208.82	Other leukemia of unspecified cell type, in relapse	Diagnosis	ICD-9-CM
208.90	Unspecified leukemia, without mention of having achieved remission	Diagnosis	ICD-9-CM
208.91	Unspecified leukemia in remission	Diagnosis	ICD-9-CM
208.92	Unspecified leukemia, in relapse	Diagnosis	ICD-9-CM
209.00	Malignant carcinoid tumor of the small intestine, unspecified portion	Diagnosis	ICD-9-CM
209.01	Malignant carcinoid tumor of the duodenum	Diagnosis	ICD-9-CM
209.02	Malignant carcinoid tumor of the jejunum	Diagnosis	ICD-9-CM
209.03	Malignant carcinoid tumor of the ileum	Diagnosis	ICD-9-CM
209.10	Malignant carcinoid tumor of the large intestine, unspecified portion	Diagnosis	ICD-9-CM
209.11	Malignant carcinoid tumor of the appendix	Diagnosis	ICD-9-CM
209.12	Malignant carcinoid tumor of the cecum	Diagnosis	ICD-9-CM
209.13	Malignant carcinoid tumor of the ascending colon	Diagnosis	ICD-9-CM
209.14	Malignant carcinoid tumor of the transverse colon	Diagnosis	ICD-9-CM
209.15	Malignant carcinoid tumor of the descending colon	Diagnosis	ICD-9-CM
209.16	Malignant carcinoid tumor of the sigmoid colon	Diagnosis	ICD-9-CM
209.17	Malignant carcinoid tumor of the rectum	Diagnosis	ICD-9-CM
209.20	Malignant carcinoid tumor of unknown primary site	Diagnosis	ICD-9-CM
209.21	Malignant carcinoid tumor of the bronchus and lung	Diagnosis	ICD-9-CM
209.22	Malignant carcinoid tumor of the thymus	Diagnosis	ICD-9-CM
209.23	Malignant carcinoid tumor of the stomach	Diagnosis	ICD-9-CM
209.24	Malignant carcinoid tumor of the kidney	Diagnosis	ICD-9-CM
209.25	Malignant carcinoid tumor of foregut, not otherwise specified	Diagnosis	ICD-9-CM
209.26	Malignant carcinoid tumor of midgut, not otherwise specified	Diagnosis	ICD-9-CM
209.27	Malignant carcinoid tumor of hindgut, not otherwise specified	Diagnosis	ICD-9-CM
209.29	Malignant carcinoid tumor of other sites	Diagnosis	ICD-9-CM
209.30	Malignant poorly differentiated neuroendocrine carcinoma, any site	Diagnosis	ICD-9-CM
209.31	Merkel cell carcinoma of the face	Diagnosis	ICD-9-CM
209.32	Merkel cell carcinoma of the scalp and neck	Diagnosis	ICD-9-CM
209.33	Merkel cell carcinoma of the upper limb	Diagnosis	ICD-9-CM
209.34	Merkel cell carcinoma of the lower limb	Diagnosis	ICD-9-CM
209.35	Merkel cell carcinoma of the trunk	Diagnosis	ICD-9-CM
209.36	Merkel cell carcinoma of other sites	Diagnosis	ICD-9-CM
209.70	Secondary neuroendocrine tumor, unspecified site	Diagnosis	ICD-9-CM
209.71	Secondary neuroendocrine tumor of distant lymph nodes	Diagnosis	ICD-9-CM
209.72	Secondary neuroendocrine tumor of liver	Diagnosis	ICD-9-CM
209.73	Secondary neuroendocrine tumor of bone	Diagnosis	ICD-9-CM
209.74	Secondary neuroendocrine tumor of peritoneum	Diagnosis	ICD-9-CM
209.75	Secondary Merkel cell carcinoma	Diagnosis	ICD-9-CM
209.79	Secondary neuroendocrine tumor of other sites	Diagnosis	ICD-9-CM
238.4	Neoplasm of uncertain behavior of polycythemia vera	Diagnosis	ICD-9-CM
238.79	Other lymphatic and hematopoietic tissues	Diagnosis	ICD-9-CM
273.3	Macroglobulinemia	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C00	Malignant neoplasm of lip	Diagnosis	ICD-10-CM
C00.0	Malignant neoplasm of external upper lip	Diagnosis	ICD-10-CM
C00.1	Malignant neoplasm of external lower lip	Diagnosis	ICD-10-CM
C00.2	Malignant neoplasm of external lip, unspecified	Diagnosis	ICD-10-CM
C00.3	Malignant neoplasm of upper lip, inner aspect	Diagnosis	ICD-10-CM
C00.4	Malignant neoplasm of lower lip, inner aspect	Diagnosis	ICD-10-CM
C00.5	Malignant neoplasm of lip, unspecified, inner aspect	Diagnosis	ICD-10-CM
C00.6	Malignant neoplasm of commissure of lip, unspecified	Diagnosis	ICD-10-CM
C00.8	Malignant neoplasm of overlapping sites of lip	Diagnosis	ICD-10-CM
C00.9	Malignant neoplasm of lip, unspecified	Diagnosis	ICD-10-CM
C01	Malignant neoplasm of base of tongue	Diagnosis	ICD-10-CM
C02	Malignant neoplasm of other and unspecified parts of tongue	Diagnosis	ICD-10-CM
C02.0	Malignant neoplasm of dorsal surface of tongue	Diagnosis	ICD-10-CM
C02.1	Malignant neoplasm of border of tongue	Diagnosis	ICD-10-CM
C02.2	Malignant neoplasm of ventral surface of tongue	Diagnosis	ICD-10-CM
C02.3	Malignant neoplasm of anterior two-thirds of tongue, part unspecified	Diagnosis	ICD-10-CM
C02.4	Malignant neoplasm of lingual tonsil	Diagnosis	ICD-10-CM
C02.8	Malignant neoplasm of overlapping sites of tongue	Diagnosis	ICD-10-CM
C02.9	Malignant neoplasm of tongue, unspecified	Diagnosis	ICD-10-CM
C03	Malignant neoplasm of gum	Diagnosis	ICD-10-CM
C03.0	Malignant neoplasm of upper gum	Diagnosis	ICD-10-CM
C03.1	Malignant neoplasm of lower gum	Diagnosis	ICD-10-CM
C03.9	Malignant neoplasm of gum, unspecified	Diagnosis	ICD-10-CM
C04	Malignant neoplasm of floor of mouth	Diagnosis	ICD-10-CM
C04.0	Malignant neoplasm of anterior floor of mouth	Diagnosis	ICD-10-CM
C04.1	Malignant neoplasm of lateral floor of mouth	Diagnosis	ICD-10-CM
C04.8	Malignant neoplasm of overlapping sites of floor of mouth	Diagnosis	ICD-10-CM
C04.9	Malignant neoplasm of floor of mouth, unspecified	Diagnosis	ICD-10-CM
C05	Malignant neoplasm of palate	Diagnosis	ICD-10-CM
C05.0	Malignant neoplasm of hard palate	Diagnosis	ICD-10-CM
C05.1	Malignant neoplasm of soft palate	Diagnosis	ICD-10-CM
C05.2	Malignant neoplasm of uvula	Diagnosis	ICD-10-CM
C05.8	Malignant neoplasm of overlapping sites of palate	Diagnosis	ICD-10-CM
C05.9	Malignant neoplasm of palate, unspecified	Diagnosis	ICD-10-CM
C06	Malignant neoplasm of other and unspecified parts of mouth	Diagnosis	ICD-10-CM
C06.0	Malignant neoplasm of cheek mucosa	Diagnosis	ICD-10-CM
C06.1	Malignant neoplasm of vestibule of mouth	Diagnosis	ICD-10-CM
C06.2	Malignant neoplasm of retromolar area	Diagnosis	ICD-10-CM
C06.8	Malignant neoplasm of overlapping sites of other and unspecified parts of mouth	Diagnosis	ICD-10-CM
C06.80	Malignant neoplasm of overlapping sites of unspecified parts of mouth	Diagnosis	ICD-10-CM
C06.89	Malignant neoplasm of overlapping sites of other parts of mouth	Diagnosis	ICD-10-CM
C06.9	Malignant neoplasm of mouth, unspecified	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C07	Malignant neoplasm of parotid gland	Diagnosis	ICD-10-CM
C08	Malignant neoplasm of other and unspecified major salivary glands	Diagnosis	ICD-10-CM
C08.0	Malignant neoplasm of submandibular gland	Diagnosis	ICD-10-CM
C08.1	Malignant neoplasm of sublingual gland	Diagnosis	ICD-10-CM
C08.9	Malignant neoplasm of major salivary gland, unspecified	Diagnosis	ICD-10-CM
C09	Malignant neoplasm of tonsil	Diagnosis	ICD-10-CM
C09.0	Malignant neoplasm of tonsillar fossa	Diagnosis	ICD-10-CM
C09.1	Malignant neoplasm of tonsillar pillar (anterior) (posterior)	Diagnosis	ICD-10-CM
C09.8	Malignant neoplasm of overlapping sites of tonsil	Diagnosis	ICD-10-CM
C09.9	Malignant neoplasm of tonsil, unspecified	Diagnosis	ICD-10-CM
C10	Malignant neoplasm of oropharynx	Diagnosis	ICD-10-CM
C10.0	Malignant neoplasm of vallecula	Diagnosis	ICD-10-CM
C10.1	Malignant neoplasm of anterior surface of epiglottis	Diagnosis	ICD-10-CM
C10.2	Malignant neoplasm of lateral wall of oropharynx	Diagnosis	ICD-10-CM
C10.3	Malignant neoplasm of posterior wall of oropharynx	Diagnosis	ICD-10-CM
C10.4	Malignant neoplasm of branchial cleft	Diagnosis	ICD-10-CM
C10.8	Malignant neoplasm of overlapping sites of oropharynx	Diagnosis	ICD-10-CM
C10.9	Malignant neoplasm of oropharynx, unspecified	Diagnosis	ICD-10-CM
C11	Malignant neoplasm of nasopharynx	Diagnosis	ICD-10-CM
C11.0	Malignant neoplasm of superior wall of nasopharynx	Diagnosis	ICD-10-CM
C11.1	Malignant neoplasm of posterior wall of nasopharynx	Diagnosis	ICD-10-CM
C11.2	Malignant neoplasm of lateral wall of nasopharynx	Diagnosis	ICD-10-CM
C11.3	Malignant neoplasm of anterior wall of nasopharynx	Diagnosis	ICD-10-CM
C11.8	Malignant neoplasm of overlapping sites of nasopharynx	Diagnosis	ICD-10-CM
C11.9	Malignant neoplasm of nasopharynx, unspecified	Diagnosis	ICD-10-CM
C12	Malignant neoplasm of pyriform sinus	Diagnosis	ICD-10-CM
C13	Malignant neoplasm of hypopharynx	Diagnosis	ICD-10-CM
C13.0	Malignant neoplasm of postcricoid region	Diagnosis	ICD-10-CM
C13.1	Malignant neoplasm of aryepiglottic fold, hypopharyngeal aspect	Diagnosis	ICD-10-CM
C13.2	Malignant neoplasm of posterior wall of hypopharynx	Diagnosis	ICD-10-CM
C13.8	Malignant neoplasm of overlapping sites of hypopharynx	Diagnosis	ICD-10-CM
C13.9	Malignant neoplasm of hypopharynx, unspecified	Diagnosis	ICD-10-CM
C14	Malignant neoplasm of other and ill-defined sites in the lip, oral cavity and pharynx	Diagnosis	ICD-10-CM
C14.0	Malignant neoplasm of pharynx, unspecified	Diagnosis	ICD-10-CM
C14.2	Malignant neoplasm of Waldeyer's ring	Diagnosis	ICD-10-CM
C14.8	Malignant neoplasm of overlapping sites of lip, oral cavity and pharynx	Diagnosis	ICD-10-CM
C15	Malignant neoplasm of esophagus	Diagnosis	ICD-10-CM
C15.3	Malignant neoplasm of upper third of esophagus	Diagnosis	ICD-10-CM
C15.4	Malignant neoplasm of middle third of esophagus	Diagnosis	ICD-10-CM
C15.5	Malignant neoplasm of lower third of esophagus	Diagnosis	ICD-10-CM
C15.8	Malignant neoplasm of overlapping sites of esophagus	Diagnosis	ICD-10-CM
C15.9	Malignant neoplasm of esophagus, unspecified	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C16	Malignant neoplasm of stomach	Diagnosis	ICD-10-CM
C16.0	Malignant neoplasm of cardia	Diagnosis	ICD-10-CM
C16.1	Malignant neoplasm of fundus of stomach	Diagnosis	ICD-10-CM
C16.2	Malignant neoplasm of body of stomach	Diagnosis	ICD-10-CM
C16.3	Malignant neoplasm of pyloric antrum	Diagnosis	ICD-10-CM
C16.4	Malignant neoplasm of pylorus	Diagnosis	ICD-10-CM
C16.5	Malignant neoplasm of lesser curvature of stomach, unspecified	Diagnosis	ICD-10-CM
C16.6	Malignant neoplasm of greater curvature of stomach, unspecified	Diagnosis	ICD-10-CM
C16.8	Malignant neoplasm of overlapping sites of stomach	Diagnosis	ICD-10-CM
C16.9	Malignant neoplasm of stomach, unspecified	Diagnosis	ICD-10-CM
C17	Malignant neoplasm of small intestine	Diagnosis	ICD-10-CM
C17.0	Malignant neoplasm of duodenum	Diagnosis	ICD-10-CM
C17.1	Malignant neoplasm of jejunum	Diagnosis	ICD-10-CM
C17.2	Malignant neoplasm of ileum	Diagnosis	ICD-10-CM
C17.3	Meckel's diverticulum, malignant	Diagnosis	ICD-10-CM
C17.8	Malignant neoplasm of overlapping sites of small intestine	Diagnosis	ICD-10-CM
C17.9	Malignant neoplasm of small intestine, unspecified	Diagnosis	ICD-10-CM
C18	Malignant neoplasm of colon	Diagnosis	ICD-10-CM
C18.0	Malignant neoplasm of cecum	Diagnosis	ICD-10-CM
C18.1	Malignant neoplasm of appendix	Diagnosis	ICD-10-CM
C18.2	Malignant neoplasm of ascending colon	Diagnosis	ICD-10-CM
C18.3	Malignant neoplasm of hepatic flexure	Diagnosis	ICD-10-CM
C18.4	Malignant neoplasm of transverse colon	Diagnosis	ICD-10-CM
C18.5	Malignant neoplasm of splenic flexure	Diagnosis	ICD-10-CM
C18.6	Malignant neoplasm of descending colon	Diagnosis	ICD-10-CM
C18.7	Malignant neoplasm of sigmoid colon	Diagnosis	ICD-10-CM
C18.8	Malignant neoplasm of overlapping sites of colon	Diagnosis	ICD-10-CM
C18.9	Malignant neoplasm of colon, unspecified	Diagnosis	ICD-10-CM
C19	Malignant neoplasm of rectosigmoid junction	Diagnosis	ICD-10-CM
C20	Malignant neoplasm of rectum	Diagnosis	ICD-10-CM
C21	Malignant neoplasm of anus and anal canal	Diagnosis	ICD-10-CM
C21.0	Malignant neoplasm of anus, unspecified	Diagnosis	ICD-10-CM
C21.1	Malignant neoplasm of anal canal	Diagnosis	ICD-10-CM
C21.2	Malignant neoplasm of cloacogenic zone	Diagnosis	ICD-10-CM
C21.8	Malignant neoplasm of overlapping sites of rectum, anus and anal canal	Diagnosis	ICD-10-CM
C22	Malignant neoplasm of liver and intrahepatic bile ducts	Diagnosis	ICD-10-CM
C22.0	Liver cell carcinoma	Diagnosis	ICD-10-CM
C22.1	Intrahepatic bile duct carcinoma	Diagnosis	ICD-10-CM
C22.2	Hepatoblastoma	Diagnosis	ICD-10-CM
C22.3	Angiosarcoma of liver	Diagnosis	ICD-10-CM
C22.4	Other sarcomas of liver	Diagnosis	ICD-10-CM
C22.7	Other specified carcinomas of liver	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C22.8	Malignant neoplasm of liver, primary, unspecified as to type	Diagnosis	ICD-10-CM
C22.9	Malignant neoplasm of liver, not specified as primary or secondary	Diagnosis	ICD-10-CM
C23	Malignant neoplasm of gallbladder	Diagnosis	ICD-10-CM
C24	Malignant neoplasm of other and unspecified parts of biliary tract	Diagnosis	ICD-10-CM
C24.0	Malignant neoplasm of extrahepatic bile duct	Diagnosis	ICD-10-CM
C24.1	Malignant neoplasm of ampulla of Vater	Diagnosis	ICD-10-CM
C24.8	Malignant neoplasm of overlapping sites of biliary tract	Diagnosis	ICD-10-CM
C24.9	Malignant neoplasm of biliary tract, unspecified	Diagnosis	ICD-10-CM
C25	Malignant neoplasm of pancreas	Diagnosis	ICD-10-CM
C25.0	Malignant neoplasm of head of pancreas	Diagnosis	ICD-10-CM
C25.1	Malignant neoplasm of body of pancreas	Diagnosis	ICD-10-CM
C25.2	Malignant neoplasm of tail of pancreas	Diagnosis	ICD-10-CM
C25.3	Malignant neoplasm of pancreatic duct	Diagnosis	ICD-10-CM
C25.4	Malignant neoplasm of endocrine pancreas	Diagnosis	ICD-10-CM
C25.7	Malignant neoplasm of other parts of pancreas	Diagnosis	ICD-10-CM
C25.8	Malignant neoplasm of overlapping sites of pancreas	Diagnosis	ICD-10-CM
C25.9	Malignant neoplasm of pancreas, unspecified	Diagnosis	ICD-10-CM
C26	Malignant neoplasm of other and ill-defined digestive organs	Diagnosis	ICD-10-CM
C26.0	Malignant neoplasm of intestinal tract, part unspecified	Diagnosis	ICD-10-CM
C26.1	Malignant neoplasm of spleen	Diagnosis	ICD-10-CM
C26.9	Malignant neoplasm of ill-defined sites within the digestive system	Diagnosis	ICD-10-CM
C30	Malignant neoplasm of nasal cavity and middle ear	Diagnosis	ICD-10-CM
C30.0	Malignant neoplasm of nasal cavity	Diagnosis	ICD-10-CM
C30.1	Malignant neoplasm of middle ear	Diagnosis	ICD-10-CM
C31	Malignant neoplasm of accessory sinuses	Diagnosis	ICD-10-CM
C31.0	Malignant neoplasm of maxillary sinus	Diagnosis	ICD-10-CM
C31.1	Malignant neoplasm of ethmoidal sinus	Diagnosis	ICD-10-CM
C31.2	Malignant neoplasm of frontal sinus	Diagnosis	ICD-10-CM
C31.3	Malignant neoplasm of sphenoid sinus	Diagnosis	ICD-10-CM
C31.8	Malignant neoplasm of overlapping sites of accessory sinuses	Diagnosis	ICD-10-CM
C31.9	Malignant neoplasm of accessory sinus, unspecified	Diagnosis	ICD-10-CM
C32	Malignant neoplasm of larynx	Diagnosis	ICD-10-CM
C32.0	Malignant neoplasm of glottis	Diagnosis	ICD-10-CM
C32.1	Malignant neoplasm of supraglottis	Diagnosis	ICD-10-CM
C32.2	Malignant neoplasm of subglottis	Diagnosis	ICD-10-CM
C32.3	Malignant neoplasm of laryngeal cartilage	Diagnosis	ICD-10-CM
C32.8	Malignant neoplasm of overlapping sites of larynx	Diagnosis	ICD-10-CM
C32.9	Malignant neoplasm of larynx, unspecified	Diagnosis	ICD-10-CM
C33	Malignant neoplasm of trachea	Diagnosis	ICD-10-CM
C34	Malignant neoplasm of bronchus and lung	Diagnosis	ICD-10-CM
C34.0	Malignant neoplasm of main bronchus	Diagnosis	ICD-10-CM
C34.00	Malignant neoplasm of unspecified main bronchus	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C34.01	Malignant neoplasm of right main bronchus	Diagnosis	ICD-10-CM
C34.02	Malignant neoplasm of left main bronchus	Diagnosis	ICD-10-CM
C34.1	Malignant neoplasm of upper lobe, bronchus or lung	Diagnosis	ICD-10-CM
C34.10	Malignant neoplasm of upper lobe, unspecified bronchus or lung	Diagnosis	ICD-10-CM
C34.11	Malignant neoplasm of upper lobe, right bronchus or lung	Diagnosis	ICD-10-CM
C34.12	Malignant neoplasm of upper lobe, left bronchus or lung	Diagnosis	ICD-10-CM
C34.2	Malignant neoplasm of middle lobe, bronchus or lung	Diagnosis	ICD-10-CM
C34.3	Malignant neoplasm of lower lobe, bronchus or lung	Diagnosis	ICD-10-CM
C34.30	Malignant neoplasm of lower lobe, unspecified bronchus or lung	Diagnosis	ICD-10-CM
C34.31	Malignant neoplasm of lower lobe, right bronchus or lung	Diagnosis	ICD-10-CM
C34.32	Malignant neoplasm of lower lobe, left bronchus or lung	Diagnosis	ICD-10-CM
C34.8	Malignant neoplasm of overlapping sites of bronchus and lung	Diagnosis	ICD-10-CM
C34.80	Malignant neoplasm of overlapping sites of unspecified bronchus and lung	Diagnosis	ICD-10-CM
C34.81	Malignant neoplasm of overlapping sites of right bronchus and lung	Diagnosis	ICD-10-CM
C34.82	Malignant neoplasm of overlapping sites of left bronchus and lung	Diagnosis	ICD-10-CM
C34.9	Malignant neoplasm of unspecified part of bronchus or lung	Diagnosis	ICD-10-CM
C34.90	Malignant neoplasm of unspecified part of unspecified bronchus or lung	Diagnosis	ICD-10-CM
C34.91	Malignant neoplasm of unspecified part of right bronchus or lung	Diagnosis	ICD-10-CM
C34.92	Malignant neoplasm of unspecified part of left bronchus or lung	Diagnosis	ICD-10-CM
C37	Malignant neoplasm of thymus	Diagnosis	ICD-10-CM
C38	Malignant neoplasm of heart, mediastinum and pleura	Diagnosis	ICD-10-CM
C38.0	Malignant neoplasm of heart	Diagnosis	ICD-10-CM
C38.1	Malignant neoplasm of anterior mediastinum	Diagnosis	ICD-10-CM
C38.2	Malignant neoplasm of posterior mediastinum	Diagnosis	ICD-10-CM
C38.3	Malignant neoplasm of mediastinum, part unspecified	Diagnosis	ICD-10-CM
C38.4	Malignant neoplasm of pleura	Diagnosis	ICD-10-CM
C38.8	Malignant neoplasm of overlapping sites of heart, mediastinum and pleura	Diagnosis	ICD-10-CM
C39	Malignant neoplasm of other and ill-defined sites in the respiratory system and intrathoracic organs	Diagnosis	ICD-10-CM
C39.0	Malignant neoplasm of upper respiratory tract, part unspecified	Diagnosis	ICD-10-CM
C39.9	Malignant neoplasm of lower respiratory tract, part unspecified	Diagnosis	ICD-10-CM
C40	Malignant neoplasm of bone and articular cartilage of limbs	Diagnosis	ICD-10-CM
C40.0	Malignant neoplasm of scapula and long bones of upper limb	Diagnosis	ICD-10-CM
C40.00	Malignant neoplasm of scapula and long bones of unspecified upper limb	Diagnosis	ICD-10-CM
C40.01	Malignant neoplasm of scapula and long bones of right upper limb	Diagnosis	ICD-10-CM
C40.02	Malignant neoplasm of scapula and long bones of left upper limb	Diagnosis	ICD-10-CM
C40.1	Malignant neoplasm of short bones of upper limb	Diagnosis	ICD-10-CM
C40.10	Malignant neoplasm of short bones of unspecified upper limb	Diagnosis	ICD-10-CM
C40.11	Malignant neoplasm of short bones of right upper limb	Diagnosis	ICD-10-CM
C40.12	Malignant neoplasm of short bones of left upper limb	Diagnosis	ICD-10-CM
C40.2	Malignant neoplasm of long bones of lower limb	Diagnosis	ICD-10-CM
C40.20	Malignant neoplasm of long bones of unspecified lower limb	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C40.21	Malignant neoplasm of long bones of right lower limb	Diagnosis	ICD-10-CM
C40.22	Malignant neoplasm of long bones of left lower limb	Diagnosis	ICD-10-CM
C40.3	Malignant neoplasm of short bones of lower limb	Diagnosis	ICD-10-CM
C40.30	Malignant neoplasm of short bones of unspecified lower limb	Diagnosis	ICD-10-CM
C40.31	Malignant neoplasm of short bones of right lower limb	Diagnosis	ICD-10-CM
C40.32	Malignant neoplasm of short bones of left lower limb	Diagnosis	ICD-10-CM
C40.8	Malignant neoplasm of overlapping sites of bone and articular cartilage of limb	Diagnosis	ICD-10-CM
C40.80	Malignant neoplasm of overlapping sites of bone and articular cartilage of unspecified limb	Diagnosis	ICD-10-CM
C40.81	Malignant neoplasm of overlapping sites of bone and articular cartilage of right limb	Diagnosis	ICD-10-CM
C40.82	Malignant neoplasm of overlapping sites of bone and articular cartilage of left limb	Diagnosis	ICD-10-CM
C40.9	Malignant neoplasm of unspecified bones and articular cartilage of limb	Diagnosis	ICD-10-CM
C40.90	Malignant neoplasm of unspecified bones and articular cartilage of unspecified limb	Diagnosis	ICD-10-CM
C40.91	Malignant neoplasm of unspecified bones and articular cartilage of right limb	Diagnosis	ICD-10-CM
C40.92	Malignant neoplasm of unspecified bones and articular cartilage of left limb	Diagnosis	ICD-10-CM
C41	Malignant neoplasm of bone and articular cartilage of other and unspecified sites	Diagnosis	ICD-10-CM
C41.0	Malignant neoplasm of bones of skull and face	Diagnosis	ICD-10-CM
C41.1	Malignant neoplasm of mandible	Diagnosis	ICD-10-CM
C41.2	Malignant neoplasm of vertebral column	Diagnosis	ICD-10-CM
C41.3	Malignant neoplasm of ribs, sternum and clavicle	Diagnosis	ICD-10-CM
C41.4	Malignant neoplasm of pelvic bones, sacrum and coccyx	Diagnosis	ICD-10-CM
C41.9	Malignant neoplasm of bone and articular cartilage, unspecified	Diagnosis	ICD-10-CM
C43	Malignant melanoma of skin	Diagnosis	ICD-10-CM
C43.0	Malignant melanoma of lip	Diagnosis	ICD-10-CM
C43.1	Malignant melanoma of eyelid, including canthus	Diagnosis	ICD-10-CM
C43.10	Malignant melanoma of unspecified eyelid, including canthus	Diagnosis	ICD-10-CM
C43.11	Malignant melanoma of right eyelid, including canthus	Diagnosis	ICD-10-CM
C43.111	Malignant melanoma of right upper eyelid, including canthus	Diagnosis	ICD-10-CM
C43.112	Malignant melanoma of right lower eyelid, including canthus	Diagnosis	ICD-10-CM
C43.12	Malignant melanoma of left eyelid, including canthus	Diagnosis	ICD-10-CM
C43.121	Malignant melanoma of left upper eyelid, including canthus	Diagnosis	ICD-10-CM
C43.122	Malignant melanoma of left lower eyelid, including canthus	Diagnosis	ICD-10-CM
C43.2	Malignant melanoma of ear and external auricular canal	Diagnosis	ICD-10-CM
C43.20	Malignant melanoma of unspecified ear and external auricular canal	Diagnosis	ICD-10-CM
C43.21	Malignant melanoma of right ear and external auricular canal	Diagnosis	ICD-10-CM
C43.22	Malignant melanoma of left ear and external auricular canal	Diagnosis	ICD-10-CM
C43.3	Malignant melanoma of other and unspecified parts of face	Diagnosis	ICD-10-CM
C43.30	Malignant melanoma of unspecified part of face	Diagnosis	ICD-10-CM
C43.31	Malignant melanoma of nose	Diagnosis	ICD-10-CM
C43.39	Malignant melanoma of other parts of face	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C43.4	Malignant melanoma of scalp and neck	Diagnosis	ICD-10-CM
C43.5	Malignant melanoma of trunk	Diagnosis	ICD-10-CM
C43.51	Malignant melanoma of anal skin	Diagnosis	ICD-10-CM
C43.52	Malignant melanoma of skin of breast	Diagnosis	ICD-10-CM
C43.59	Malignant melanoma of other part of trunk	Diagnosis	ICD-10-CM
C43.6	Malignant melanoma of upper limb, including shoulder	Diagnosis	ICD-10-CM
C43.60	Malignant melanoma of unspecified upper limb, including shoulder	Diagnosis	ICD-10-CM
C43.61	Malignant melanoma of right upper limb, including shoulder	Diagnosis	ICD-10-CM
C43.62	Malignant melanoma of left upper limb, including shoulder	Diagnosis	ICD-10-CM
C43.7	Malignant melanoma of lower limb, including hip	Diagnosis	ICD-10-CM
C43.70	Malignant melanoma of unspecified lower limb, including hip	Diagnosis	ICD-10-CM
C43.71	Malignant melanoma of right lower limb, including hip	Diagnosis	ICD-10-CM
C43.72	Malignant melanoma of left lower limb, including hip	Diagnosis	ICD-10-CM
C43.8	Malignant melanoma of overlapping sites of skin	Diagnosis	ICD-10-CM
C43.9	Malignant melanoma of skin, unspecified	Diagnosis	ICD-10-CM
C45	Mesothelioma	Diagnosis	ICD-10-CM
C45.0	Mesothelioma of pleura	Diagnosis	ICD-10-CM
C45.1	Mesothelioma of peritoneum	Diagnosis	ICD-10-CM
C45.2	Mesothelioma of pericardium	Diagnosis	ICD-10-CM
C45.7	Mesothelioma of other sites	Diagnosis	ICD-10-CM
C45.9	Mesothelioma, unspecified	Diagnosis	ICD-10-CM
C46	Kaposi's sarcoma	Diagnosis	ICD-10-CM
C46.0	Kaposi's sarcoma of skin	Diagnosis	ICD-10-CM
C46.1	Kaposi's sarcoma of soft tissue	Diagnosis	ICD-10-CM
C46.2	Kaposi's sarcoma of palate	Diagnosis	ICD-10-CM
C46.3	Kaposi's sarcoma of lymph nodes	Diagnosis	ICD-10-CM
C46.4	Kaposi's sarcoma of gastrointestinal sites	Diagnosis	ICD-10-CM
C46.5	Kaposi's sarcoma of lung	Diagnosis	ICD-10-CM
C46.50	Kaposi's sarcoma of unspecified lung	Diagnosis	ICD-10-CM
C46.51	Kaposi's sarcoma of right lung	Diagnosis	ICD-10-CM
C46.52	Kaposi's sarcoma of left lung	Diagnosis	ICD-10-CM
C46.7	Kaposi's sarcoma of other sites	Diagnosis	ICD-10-CM
C46.9	Kaposi's sarcoma, unspecified	Diagnosis	ICD-10-CM
C47	Malignant neoplasm of peripheral nerves and autonomic nervous system	Diagnosis	ICD-10-CM
C47.0	Malignant neoplasm of peripheral nerves of head, face and neck	Diagnosis	ICD-10-CM
C47.1	Malignant neoplasm of peripheral nerves of upper limb, including shoulder	Diagnosis	ICD-10-CM
C47.10	Malignant neoplasm of peripheral nerves of unspecified upper limb, including shoulder	Diagnosis	ICD-10-CM
C47.11	Malignant neoplasm of peripheral nerves of right upper limb, including shoulder	Diagnosis	ICD-10-CM
C47.12	Malignant neoplasm of peripheral nerves of left upper limb, including shoulder	Diagnosis	ICD-10-CM
C47.2	Malignant neoplasm of peripheral nerves of lower limb, including hip	Diagnosis	ICD-10-CM
C47.20	Malignant neoplasm of peripheral nerves of unspecified lower limb, including hip	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C47.21	Malignant neoplasm of peripheral nerves of right lower limb, including hip	Diagnosis	ICD-10-CM
C47.22	Malignant neoplasm of peripheral nerves of left lower limb, including hip	Diagnosis	ICD-10-CM
C47.3	Malignant neoplasm of peripheral nerves of thorax	Diagnosis	ICD-10-CM
C47.4	Malignant neoplasm of peripheral nerves of abdomen	Diagnosis	ICD-10-CM
C47.5	Malignant neoplasm of peripheral nerves of pelvis	Diagnosis	ICD-10-CM
C47.6	Malignant neoplasm of peripheral nerves of trunk, unspecified	Diagnosis	ICD-10-CM
C47.8	Malignant neoplasm of overlapping sites of peripheral nerves and autonomic nervous system	Diagnosis	ICD-10-CM
C47.9	Malignant neoplasm of peripheral nerves and autonomic nervous system, unspecified	Diagnosis	ICD-10-CM
C48	Malignant neoplasm of retroperitoneum and peritoneum	Diagnosis	ICD-10-CM
C48.0	Malignant neoplasm of retroperitoneum	Diagnosis	ICD-10-CM
C48.1	Malignant neoplasm of specified parts of peritoneum	Diagnosis	ICD-10-CM
C48.2	Malignant neoplasm of peritoneum, unspecified	Diagnosis	ICD-10-CM
C48.8	Malignant neoplasm of overlapping sites of retroperitoneum and peritoneum	Diagnosis	ICD-10-CM
C49	Malignant neoplasm of other connective and soft tissue	Diagnosis	ICD-10-CM
C49.0	Malignant neoplasm of connective and soft tissue of head, face and neck	Diagnosis	ICD-10-CM
C49.1	Malignant neoplasm of connective and soft tissue of upper limb, including shoulder	Diagnosis	ICD-10-CM
C49.10	Malignant neoplasm of connective and soft tissue of unspecified upper limb, including shoulder	Diagnosis	ICD-10-CM
C49.11	Malignant neoplasm of connective and soft tissue of right upper limb, including shoulder	Diagnosis	ICD-10-CM
C49.12	Malignant neoplasm of connective and soft tissue of left upper limb, including shoulder	Diagnosis	ICD-10-CM
C49.2	Malignant neoplasm of connective and soft tissue of lower limb, including hip	Diagnosis	ICD-10-CM
C49.20	Malignant neoplasm of connective and soft tissue of unspecified lower limb, including hip	Diagnosis	ICD-10-CM
C49.21	Malignant neoplasm of connective and soft tissue of right lower limb, including hip	Diagnosis	ICD-10-CM
C49.22	Malignant neoplasm of connective and soft tissue of left lower limb, including hip	Diagnosis	ICD-10-CM
C49.3	Malignant neoplasm of connective and soft tissue of thorax	Diagnosis	ICD-10-CM
C49.4	Malignant neoplasm of connective and soft tissue of abdomen	Diagnosis	ICD-10-CM
C49.5	Malignant neoplasm of connective and soft tissue of pelvis	Diagnosis	ICD-10-CM
C49.6	Malignant neoplasm of connective and soft tissue of trunk, unspecified	Diagnosis	ICD-10-CM
C49.8	Malignant neoplasm of overlapping sites of connective and soft tissue	Diagnosis	ICD-10-CM
C49.9	Malignant neoplasm of connective and soft tissue, unspecified	Diagnosis	ICD-10-CM
C49.A	Gastrointestinal stromal tumor	Diagnosis	ICD-10-CM
C49.A0	Gastrointestinal stromal tumor, unspecified site	Diagnosis	ICD-10-CM
C49.A1	Gastrointestinal stromal tumor of esophagus	Diagnosis	ICD-10-CM
C49.A2	Gastrointestinal stromal tumor of stomach	Diagnosis	ICD-10-CM
C49.A3	Gastrointestinal stromal tumor of small intestine	Diagnosis	ICD-10-CM
C49.A4	Gastrointestinal stromal tumor of large intestine	Diagnosis	ICD-10-CM
C49.A5	Gastrointestinal stromal tumor of rectum	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C49.A9	Gastrointestinal stromal tumor of other sites	Diagnosis	ICD-10-CM
C4A	Merkel cell carcinoma	Diagnosis	ICD-10-CM
C4A.0	Merkel cell carcinoma of lip	Diagnosis	ICD-10-CM
C4A.1	Merkel cell carcinoma of eyelid, including canthus	Diagnosis	ICD-10-CM
C4A.10	Merkel cell carcinoma of unspecified eyelid, including canthus	Diagnosis	ICD-10-CM
C4A.11	Merkel cell carcinoma of right eyelid, including canthus	Diagnosis	ICD-10-CM
C4A.111	Merkel cell carcinoma of right upper eyelid, including canthus	Diagnosis	ICD-10-CM
C4A.112	Merkel cell carcinoma of right lower eyelid, including canthus	Diagnosis	ICD-10-CM
C4A.12	Merkel cell carcinoma of left eyelid, including canthus	Diagnosis	ICD-10-CM
C4A.121	Merkel cell carcinoma of left upper eyelid, including canthus	Diagnosis	ICD-10-CM
C4A.122	Merkel cell carcinoma of left lower eyelid, including canthus	Diagnosis	ICD-10-CM
C4A.2	Merkel cell carcinoma of ear and external auricular canal	Diagnosis	ICD-10-CM
C4A.20	Merkel cell carcinoma of unspecified ear and external auricular canal	Diagnosis	ICD-10-CM
C4A.21	Merkel cell carcinoma of right ear and external auricular canal	Diagnosis	ICD-10-CM
C4A.22	Merkel cell carcinoma of left ear and external auricular canal	Diagnosis	ICD-10-CM
C4A.3	Merkel cell carcinoma of other and unspecified parts of face	Diagnosis	ICD-10-CM
C4A.30	Merkel cell carcinoma of unspecified part of face	Diagnosis	ICD-10-CM
C4A.31	Merkel cell carcinoma of nose	Diagnosis	ICD-10-CM
C4A.39	Merkel cell carcinoma of other parts of face	Diagnosis	ICD-10-CM
C4A.4	Merkel cell carcinoma of scalp and neck	Diagnosis	ICD-10-CM
C4A.5	Merkel cell carcinoma of trunk	Diagnosis	ICD-10-CM
C4A.51	Merkel cell carcinoma of anal skin	Diagnosis	ICD-10-CM
C4A.52	Merkel cell carcinoma of skin of breast	Diagnosis	ICD-10-CM
C4A.59	Merkel cell carcinoma of other part of trunk	Diagnosis	ICD-10-CM
C4A.6	Merkel cell carcinoma of upper limb, including shoulder	Diagnosis	ICD-10-CM
C4A.60	Merkel cell carcinoma of unspecified upper limb, including shoulder	Diagnosis	ICD-10-CM
C4A.61	Merkel cell carcinoma of right upper limb, including shoulder	Diagnosis	ICD-10-CM
C4A.62	Merkel cell carcinoma of left upper limb, including shoulder	Diagnosis	ICD-10-CM
C4A.7	Merkel cell carcinoma of lower limb, including hip	Diagnosis	ICD-10-CM
C4A.70	Merkel cell carcinoma of unspecified lower limb, including hip	Diagnosis	ICD-10-CM
C4A.71	Merkel cell carcinoma of right lower limb, including hip	Diagnosis	ICD-10-CM
C4A.72	Merkel cell carcinoma of left lower limb, including hip	Diagnosis	ICD-10-CM
C4A.8	Merkel cell carcinoma of overlapping sites	Diagnosis	ICD-10-CM
C4A.9	Merkel cell carcinoma, unspecified	Diagnosis	ICD-10-CM
C50	Malignant neoplasm of breast	Diagnosis	ICD-10-CM
C50.0	Malignant neoplasm of nipple and areola	Diagnosis	ICD-10-CM
C50.01	Malignant neoplasm of nipple and areola, female	Diagnosis	ICD-10-CM
C50.011	Malignant neoplasm of nipple and areola, right female breast	Diagnosis	ICD-10-CM
C50.012	Malignant neoplasm of nipple and areola, left female breast	Diagnosis	ICD-10-CM
C50.019	Malignant neoplasm of nipple and areola, unspecified female breast	Diagnosis	ICD-10-CM
C50.02	Malignant neoplasm of nipple and areola, male	Diagnosis	ICD-10-CM
C50.021	Malignant neoplasm of nipple and areola, right male breast	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C50.022	Malignant neoplasm of nipple and areola, left male breast	Diagnosis	ICD-10-CM
C50.029	Malignant neoplasm of nipple and areola, unspecified male breast	Diagnosis	ICD-10-CM
C50.1	Malignant neoplasm of central portion of breast	Diagnosis	ICD-10-CM
C50.11	Malignant neoplasm of central portion of breast, female	Diagnosis	ICD-10-CM
C50.111	Malignant neoplasm of central portion of right female breast	Diagnosis	ICD-10-CM
C50.112	Malignant neoplasm of central portion of left female breast	Diagnosis	ICD-10-CM
C50.119	Malignant neoplasm of central portion of unspecified female breast	Diagnosis	ICD-10-CM
C50.12	Malignant neoplasm of central portion of breast, male	Diagnosis	ICD-10-CM
C50.121	Malignant neoplasm of central portion of right male breast	Diagnosis	ICD-10-CM
C50.122	Malignant neoplasm of central portion of left male breast	Diagnosis	ICD-10-CM
C50.129	Malignant neoplasm of central portion of unspecified male breast	Diagnosis	ICD-10-CM
C50.2	Malignant neoplasm of upper-inner quadrant of breast	Diagnosis	ICD-10-CM
C50.21	Malignant neoplasm of upper-inner quadrant of breast, female	Diagnosis	ICD-10-CM
C50.211	Malignant neoplasm of upper-inner quadrant of right female breast	Diagnosis	ICD-10-CM
C50.212	Malignant neoplasm of upper-inner quadrant of left female breast	Diagnosis	ICD-10-CM
C50.219	Malignant neoplasm of upper-inner quadrant of unspecified female breast	Diagnosis	ICD-10-CM
C50.22	Malignant neoplasm of upper-inner quadrant of breast, male	Diagnosis	ICD-10-CM
C50.221	Malignant neoplasm of upper-inner quadrant of right male breast	Diagnosis	ICD-10-CM
C50.222	Malignant neoplasm of upper-inner quadrant of left male breast	Diagnosis	ICD-10-CM
C50.229	Malignant neoplasm of upper-inner quadrant of unspecified male breast	Diagnosis	ICD-10-CM
C50.3	Malignant neoplasm of lower-inner quadrant of breast	Diagnosis	ICD-10-CM
C50.31	Malignant neoplasm of lower-inner quadrant of breast, female	Diagnosis	ICD-10-CM
C50.311	Malignant neoplasm of lower-inner quadrant of right female breast	Diagnosis	ICD-10-CM
C50.312	Malignant neoplasm of lower-inner quadrant of left female breast	Diagnosis	ICD-10-CM
C50.319	Malignant neoplasm of lower-inner quadrant of unspecified female breast	Diagnosis	ICD-10-CM
C50.32	Malignant neoplasm of lower-inner quadrant of breast, male	Diagnosis	ICD-10-CM
C50.321	Malignant neoplasm of lower-inner quadrant of right male breast	Diagnosis	ICD-10-CM
C50.322	Malignant neoplasm of lower-inner quadrant of left male breast	Diagnosis	ICD-10-CM
C50.329	Malignant neoplasm of lower-inner quadrant of unspecified male breast	Diagnosis	ICD-10-CM
C50.4	Malignant neoplasm of upper-outer quadrant of breast	Diagnosis	ICD-10-CM
C50.41	Malignant neoplasm of upper-outer quadrant of breast, female	Diagnosis	ICD-10-CM
C50.411	Malignant neoplasm of upper-outer quadrant of right female breast	Diagnosis	ICD-10-CM
C50.412	Malignant neoplasm of upper-outer quadrant of left female breast	Diagnosis	ICD-10-CM
C50.419	Malignant neoplasm of upper-outer quadrant of unspecified female breast	Diagnosis	ICD-10-CM
C50.42	Malignant neoplasm of upper-outer quadrant of breast, male	Diagnosis	ICD-10-CM
C50.421	Malignant neoplasm of upper-outer quadrant of right male breast	Diagnosis	ICD-10-CM
C50.422	Malignant neoplasm of upper-outer quadrant of left male breast	Diagnosis	ICD-10-CM
C50.429	Malignant neoplasm of upper-outer quadrant of unspecified male breast	Diagnosis	ICD-10-CM
C50.5	Malignant neoplasm of lower-outer quadrant of breast	Diagnosis	ICD-10-CM
C50.51	Malignant neoplasm of lower-outer quadrant of breast, female	Diagnosis	ICD-10-CM
C50.511	Malignant neoplasm of lower-outer quadrant of right female breast	Diagnosis	ICD-10-CM
C50.512	Malignant neoplasm of lower-outer quadrant of left female breast	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C50.519	Malignant neoplasm of lower-outer quadrant of unspecified female breast	Diagnosis	ICD-10-CM
C50.52	Malignant neoplasm of lower-outer quadrant of breast, male	Diagnosis	ICD-10-CM
C50.521	Malignant neoplasm of lower-outer quadrant of right male breast	Diagnosis	ICD-10-CM
C50.522	Malignant neoplasm of lower-outer quadrant of left male breast	Diagnosis	ICD-10-CM
C50.529	Malignant neoplasm of lower-outer quadrant of unspecified male breast	Diagnosis	ICD-10-CM
C50.6	Malignant neoplasm of axillary tail of breast	Diagnosis	ICD-10-CM
C50.61	Malignant neoplasm of axillary tail of breast, female	Diagnosis	ICD-10-CM
C50.611	Malignant neoplasm of axillary tail of right female breast	Diagnosis	ICD-10-CM
C50.612	Malignant neoplasm of axillary tail of left female breast	Diagnosis	ICD-10-CM
C50.619	Malignant neoplasm of axillary tail of unspecified female breast	Diagnosis	ICD-10-CM
C50.62	Malignant neoplasm of axillary tail of breast, male	Diagnosis	ICD-10-CM
C50.621	Malignant neoplasm of axillary tail of right male breast	Diagnosis	ICD-10-CM
C50.622	Malignant neoplasm of axillary tail of left male breast	Diagnosis	ICD-10-CM
C50.629	Malignant neoplasm of axillary tail of unspecified male breast	Diagnosis	ICD-10-CM
C50.8	Malignant neoplasm of overlapping sites of breast	Diagnosis	ICD-10-CM
C50.81	Malignant neoplasm of overlapping sites of breast, female	Diagnosis	ICD-10-CM
C50.811	Malignant neoplasm of overlapping sites of right female breast	Diagnosis	ICD-10-CM
C50.812	Malignant neoplasm of overlapping sites of left female breast	Diagnosis	ICD-10-CM
C50.819	Malignant neoplasm of overlapping sites of unspecified female breast	Diagnosis	ICD-10-CM
C50.82	Malignant neoplasm of overlapping sites of breast, male	Diagnosis	ICD-10-CM
C50.821	Malignant neoplasm of overlapping sites of right male breast	Diagnosis	ICD-10-CM
C50.822	Malignant neoplasm of overlapping sites of left male breast	Diagnosis	ICD-10-CM
C50.829	Malignant neoplasm of overlapping sites of unspecified male breast	Diagnosis	ICD-10-CM
C50.9	Malignant neoplasm of breast of unspecified site	Diagnosis	ICD-10-CM
C50.91	Malignant neoplasm of breast of unspecified site, female	Diagnosis	ICD-10-CM
C50.911	Malignant neoplasm of unspecified site of right female breast	Diagnosis	ICD-10-CM
C50.912	Malignant neoplasm of unspecified site of left female breast	Diagnosis	ICD-10-CM
C50.919	Malignant neoplasm of unspecified site of unspecified female breast	Diagnosis	ICD-10-CM
C50.92	Malignant neoplasm of breast of unspecified site, male	Diagnosis	ICD-10-CM
C50.921	Malignant neoplasm of unspecified site of right male breast	Diagnosis	ICD-10-CM
C50.922	Malignant neoplasm of unspecified site of left male breast	Diagnosis	ICD-10-CM
C50.929	Malignant neoplasm of unspecified site of unspecified male breast	Diagnosis	ICD-10-CM
C51	Malignant neoplasm of vulva	Diagnosis	ICD-10-CM
C51.0	Malignant neoplasm of labium majus	Diagnosis	ICD-10-CM
C51.1	Malignant neoplasm of labium minus	Diagnosis	ICD-10-CM
C51.2	Malignant neoplasm of clitoris	Diagnosis	ICD-10-CM
C51.8	Malignant neoplasm of overlapping sites of vulva	Diagnosis	ICD-10-CM
C51.9	Malignant neoplasm of vulva, unspecified	Diagnosis	ICD-10-CM
C52	Malignant neoplasm of vagina	Diagnosis	ICD-10-CM
C53	Malignant neoplasm of cervix uteri	Diagnosis	ICD-10-CM
C53.0	Malignant neoplasm of endocervix	Diagnosis	ICD-10-CM
C53.1	Malignant neoplasm of exocervix	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C53.8	Malignant neoplasm of overlapping sites of cervix uteri	Diagnosis	ICD-10-CM
C53.9	Malignant neoplasm of cervix uteri, unspecified	Diagnosis	ICD-10-CM
C54	Malignant neoplasm of corpus uteri	Diagnosis	ICD-10-CM
C54.0	Malignant neoplasm of isthmus uteri	Diagnosis	ICD-10-CM
C54.1	Malignant neoplasm of endometrium	Diagnosis	ICD-10-CM
C54.2	Malignant neoplasm of myometrium	Diagnosis	ICD-10-CM
C54.3	Malignant neoplasm of fundus uteri	Diagnosis	ICD-10-CM
C54.8	Malignant neoplasm of overlapping sites of corpus uteri	Diagnosis	ICD-10-CM
C54.9	Malignant neoplasm of corpus uteri, unspecified	Diagnosis	ICD-10-CM
C55	Malignant neoplasm of uterus, part unspecified	Diagnosis	ICD-10-CM
C56	Malignant neoplasm of ovary	Diagnosis	ICD-10-CM
C56.1	Malignant neoplasm of right ovary	Diagnosis	ICD-10-CM
C56.2	Malignant neoplasm of left ovary	Diagnosis	ICD-10-CM
C56.9	Malignant neoplasm of unspecified ovary	Diagnosis	ICD-10-CM
C57	Malignant neoplasm of other and unspecified female genital organs	Diagnosis	ICD-10-CM
C57.0	Malignant neoplasm of fallopian tube	Diagnosis	ICD-10-CM
C57.00	Malignant neoplasm of unspecified fallopian tube	Diagnosis	ICD-10-CM
C57.01	Malignant neoplasm of right fallopian tube	Diagnosis	ICD-10-CM
C57.02	Malignant neoplasm of left fallopian tube	Diagnosis	ICD-10-CM
C57.1	Malignant neoplasm of broad ligament	Diagnosis	ICD-10-CM
C57.10	Malignant neoplasm of unspecified broad ligament	Diagnosis	ICD-10-CM
C57.11	Malignant neoplasm of right broad ligament	Diagnosis	ICD-10-CM
C57.12	Malignant neoplasm of left broad ligament	Diagnosis	ICD-10-CM
C57.2	Malignant neoplasm of round ligament	Diagnosis	ICD-10-CM
C57.20	Malignant neoplasm of unspecified round ligament	Diagnosis	ICD-10-CM
C57.21	Malignant neoplasm of right round ligament	Diagnosis	ICD-10-CM
C57.22	Malignant neoplasm of left round ligament	Diagnosis	ICD-10-CM
C57.3	Malignant neoplasm of parametrium	Diagnosis	ICD-10-CM
C57.4	Malignant neoplasm of uterine adnexa, unspecified	Diagnosis	ICD-10-CM
C57.7	Malignant neoplasm of other specified female genital organs	Diagnosis	ICD-10-CM
C57.8	Malignant neoplasm of overlapping sites of female genital organs	Diagnosis	ICD-10-CM
C57.9	Malignant neoplasm of female genital organ, unspecified	Diagnosis	ICD-10-CM
C58	Malignant neoplasm of placenta	Diagnosis	ICD-10-CM
C60	Malignant neoplasm of penis	Diagnosis	ICD-10-CM
C60.0	Malignant neoplasm of prepuce	Diagnosis	ICD-10-CM
C60.1	Malignant neoplasm of glans penis	Diagnosis	ICD-10-CM
C60.2	Malignant neoplasm of body of penis	Diagnosis	ICD-10-CM
C60.8	Malignant neoplasm of overlapping sites of penis	Diagnosis	ICD-10-CM
C60.9	Malignant neoplasm of penis, unspecified	Diagnosis	ICD-10-CM
C61	Malignant neoplasm of prostate	Diagnosis	ICD-10-CM
C62	Malignant neoplasm of testis	Diagnosis	ICD-10-CM
C62.0	Malignant neoplasm of undescended testis	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C62.00	Malignant neoplasm of unspecified undescended testis	Diagnosis	ICD-10-CM
C62.01	Malignant neoplasm of undescended right testis	Diagnosis	ICD-10-CM
C62.02	Malignant neoplasm of undescended left testis	Diagnosis	ICD-10-CM
C62.1	Malignant neoplasm of descended testis	Diagnosis	ICD-10-CM
C62.10	Malignant neoplasm of unspecified descended testis	Diagnosis	ICD-10-CM
C62.11	Malignant neoplasm of descended right testis	Diagnosis	ICD-10-CM
C62.12	Malignant neoplasm of descended left testis	Diagnosis	ICD-10-CM
C62.9	Malignant neoplasm of testis, unspecified whether descended or undescended	Diagnosis	ICD-10-CM
C62.90	Malignant neoplasm of unspecified testis, unspecified whether descended or undescended	Diagnosis	ICD-10-CM
C62.91	Malignant neoplasm of right testis, unspecified whether descended or undescended	Diagnosis	ICD-10-CM
C62.92	Malignant neoplasm of left testis, unspecified whether descended or undescended	Diagnosis	ICD-10-CM
C63	Malignant neoplasm of other and unspecified male genital organs	Diagnosis	ICD-10-CM
C63.0	Malignant neoplasm of epididymis	Diagnosis	ICD-10-CM
C63.00	Malignant neoplasm of unspecified epididymis	Diagnosis	ICD-10-CM
C63.01	Malignant neoplasm of right epididymis	Diagnosis	ICD-10-CM
C63.02	Malignant neoplasm of left epididymis	Diagnosis	ICD-10-CM
C63.1	Malignant neoplasm of spermatic cord	Diagnosis	ICD-10-CM
C63.10	Malignant neoplasm of unspecified spermatic cord	Diagnosis	ICD-10-CM
C63.11	Malignant neoplasm of right spermatic cord	Diagnosis	ICD-10-CM
C63.12	Malignant neoplasm of left spermatic cord	Diagnosis	ICD-10-CM
C63.2	Malignant neoplasm of scrotum	Diagnosis	ICD-10-CM
C63.7	Malignant neoplasm of other specified male genital organs	Diagnosis	ICD-10-CM
C63.8	Malignant neoplasm of overlapping sites of male genital organs	Diagnosis	ICD-10-CM
C63.9	Malignant neoplasm of male genital organ, unspecified	Diagnosis	ICD-10-CM
C64	Malignant neoplasm of kidney, except renal pelvis	Diagnosis	ICD-10-CM
C64.1	Malignant neoplasm of right kidney, except renal pelvis	Diagnosis	ICD-10-CM
C64.2	Malignant neoplasm of left kidney, except renal pelvis	Diagnosis	ICD-10-CM
C64.9	Malignant neoplasm of unspecified kidney, except renal pelvis	Diagnosis	ICD-10-CM
C65	Malignant neoplasm of renal pelvis	Diagnosis	ICD-10-CM
C65.1	Malignant neoplasm of right renal pelvis	Diagnosis	ICD-10-CM
C65.2	Malignant neoplasm of left renal pelvis	Diagnosis	ICD-10-CM
C65.9	Malignant neoplasm of unspecified renal pelvis	Diagnosis	ICD-10-CM
C66	Malignant neoplasm of ureter	Diagnosis	ICD-10-CM
C66.1	Malignant neoplasm of right ureter	Diagnosis	ICD-10-CM
C66.2	Malignant neoplasm of left ureter	Diagnosis	ICD-10-CM
C66.9	Malignant neoplasm of unspecified ureter	Diagnosis	ICD-10-CM
C67	Malignant neoplasm of bladder	Diagnosis	ICD-10-CM
C67.0	Malignant neoplasm of trigone of bladder	Diagnosis	ICD-10-CM
C67.1	Malignant neoplasm of dome of bladder	Diagnosis	ICD-10-CM
C67.2	Malignant neoplasm of lateral wall of bladder	Diagnosis	ICD-10-CM
C67.3	Malignant neoplasm of anterior wall of bladder	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C67.4	Malignant neoplasm of posterior wall of bladder	Diagnosis	ICD-10-CM
C67.5	Malignant neoplasm of bladder neck	Diagnosis	ICD-10-CM
C67.6	Malignant neoplasm of ureteric orifice	Diagnosis	ICD-10-CM
C67.7	Malignant neoplasm of urachus	Diagnosis	ICD-10-CM
C67.8	Malignant neoplasm of overlapping sites of bladder	Diagnosis	ICD-10-CM
C67.9	Malignant neoplasm of bladder, unspecified	Diagnosis	ICD-10-CM
C68	Malignant neoplasm of other and unspecified urinary organs	Diagnosis	ICD-10-CM
C68.0	Malignant neoplasm of urethra	Diagnosis	ICD-10-CM
C68.1	Malignant neoplasm of paraurethral glands	Diagnosis	ICD-10-CM
C68.8	Malignant neoplasm of overlapping sites of urinary organs	Diagnosis	ICD-10-CM
C68.9	Malignant neoplasm of urinary organ, unspecified	Diagnosis	ICD-10-CM
C69	Malignant neoplasm of eye and adnexa	Diagnosis	ICD-10-CM
C69.0	Malignant neoplasm of conjunctiva	Diagnosis	ICD-10-CM
C69.00	Malignant neoplasm of unspecified conjunctiva	Diagnosis	ICD-10-CM
C69.01	Malignant neoplasm of right conjunctiva	Diagnosis	ICD-10-CM
C69.02	Malignant neoplasm of left conjunctiva	Diagnosis	ICD-10-CM
C69.1	Malignant neoplasm of cornea	Diagnosis	ICD-10-CM
C69.10	Malignant neoplasm of unspecified cornea	Diagnosis	ICD-10-CM
C69.11	Malignant neoplasm of right cornea	Diagnosis	ICD-10-CM
C69.12	Malignant neoplasm of left cornea	Diagnosis	ICD-10-CM
C69.2	Malignant neoplasm of retina	Diagnosis	ICD-10-CM
C69.20	Malignant neoplasm of unspecified retina	Diagnosis	ICD-10-CM
C69.21	Malignant neoplasm of right retina	Diagnosis	ICD-10-CM
C69.22	Malignant neoplasm of left retina	Diagnosis	ICD-10-CM
C69.3	Malignant neoplasm of choroid	Diagnosis	ICD-10-CM
C69.30	Malignant neoplasm of unspecified choroid	Diagnosis	ICD-10-CM
C69.31	Malignant neoplasm of right choroid	Diagnosis	ICD-10-CM
C69.32	Malignant neoplasm of left choroid	Diagnosis	ICD-10-CM
C69.4	Malignant neoplasm of ciliary body	Diagnosis	ICD-10-CM
C69.40	Malignant neoplasm of unspecified ciliary body	Diagnosis	ICD-10-CM
C69.41	Malignant neoplasm of right ciliary body	Diagnosis	ICD-10-CM
C69.42	Malignant neoplasm of left ciliary body	Diagnosis	ICD-10-CM
C69.5	Malignant neoplasm of lacrimal gland and duct	Diagnosis	ICD-10-CM
C69.50	Malignant neoplasm of unspecified lacrimal gland and duct	Diagnosis	ICD-10-CM
C69.51	Malignant neoplasm of right lacrimal gland and duct	Diagnosis	ICD-10-CM
C69.52	Malignant neoplasm of left lacrimal gland and duct	Diagnosis	ICD-10-CM
C69.6	Malignant neoplasm of orbit	Diagnosis	ICD-10-CM
C69.60	Malignant neoplasm of unspecified orbit	Diagnosis	ICD-10-CM
C69.61	Malignant neoplasm of right orbit	Diagnosis	ICD-10-CM
C69.62	Malignant neoplasm of left orbit	Diagnosis	ICD-10-CM
C69.8	Malignant neoplasm of overlapping sites of eye and adnexa	Diagnosis	ICD-10-CM
C69.80	Malignant neoplasm of overlapping sites of unspecified eye and adnexa	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C69.81	Malignant neoplasm of overlapping sites of right eye and adnexa	Diagnosis	ICD-10-CM
C69.82	Malignant neoplasm of overlapping sites of left eye and adnexa	Diagnosis	ICD-10-CM
C69.9	Malignant neoplasm of unspecified site of eye	Diagnosis	ICD-10-CM
C69.90	Malignant neoplasm of unspecified site of unspecified eye	Diagnosis	ICD-10-CM
C69.91	Malignant neoplasm of unspecified site of right eye	Diagnosis	ICD-10-CM
C69.92	Malignant neoplasm of unspecified site of left eye	Diagnosis	ICD-10-CM
C70	Malignant neoplasm of meninges	Diagnosis	ICD-10-CM
C70.0	Malignant neoplasm of cerebral meninges	Diagnosis	ICD-10-CM
C70.1	Malignant neoplasm of spinal meninges	Diagnosis	ICD-10-CM
C70.9	Malignant neoplasm of meninges, unspecified	Diagnosis	ICD-10-CM
C71	Malignant neoplasm of brain	Diagnosis	ICD-10-CM
C71.0	Malignant neoplasm of cerebrum, except lobes and ventricles	Diagnosis	ICD-10-CM
C71.1	Malignant neoplasm of frontal lobe	Diagnosis	ICD-10-CM
C71.2	Malignant neoplasm of temporal lobe	Diagnosis	ICD-10-CM
C71.3	Malignant neoplasm of parietal lobe	Diagnosis	ICD-10-CM
C71.4	Malignant neoplasm of occipital lobe	Diagnosis	ICD-10-CM
C71.5	Malignant neoplasm of cerebral ventricle	Diagnosis	ICD-10-CM
C71.6	Malignant neoplasm of cerebellum	Diagnosis	ICD-10-CM
C71.7	Malignant neoplasm of brain stem	Diagnosis	ICD-10-CM
C71.8	Malignant neoplasm of overlapping sites of brain	Diagnosis	ICD-10-CM
C71.9	Malignant neoplasm of brain, unspecified	Diagnosis	ICD-10-CM
C72	Malignant neoplasm of spinal cord, cranial nerves and other parts of central nervous system	Diagnosis	ICD-10-CM
C72.0	Malignant neoplasm of spinal cord	Diagnosis	ICD-10-CM
C72.1	Malignant neoplasm of cauda equina	Diagnosis	ICD-10-CM
C72.2	Malignant neoplasm of olfactory nerve	Diagnosis	ICD-10-CM
C72.20	Malignant neoplasm of unspecified olfactory nerve	Diagnosis	ICD-10-CM
C72.21	Malignant neoplasm of right olfactory nerve	Diagnosis	ICD-10-CM
C72.22	Malignant neoplasm of left olfactory nerve	Diagnosis	ICD-10-CM
C72.3	Malignant neoplasm of optic nerve	Diagnosis	ICD-10-CM
C72.30	Malignant neoplasm of unspecified optic nerve	Diagnosis	ICD-10-CM
C72.31	Malignant neoplasm of right optic nerve	Diagnosis	ICD-10-CM
C72.32	Malignant neoplasm of left optic nerve	Diagnosis	ICD-10-CM
C72.4	Malignant neoplasm of acoustic nerve	Diagnosis	ICD-10-CM
C72.40	Malignant neoplasm of unspecified acoustic nerve	Diagnosis	ICD-10-CM
C72.41	Malignant neoplasm of right acoustic nerve	Diagnosis	ICD-10-CM
C72.42	Malignant neoplasm of left acoustic nerve	Diagnosis	ICD-10-CM
C72.5	Malignant neoplasm of other and unspecified cranial nerves	Diagnosis	ICD-10-CM
C72.50	Malignant neoplasm of unspecified cranial nerve	Diagnosis	ICD-10-CM
C72.59	Malignant neoplasm of other cranial nerves	Diagnosis	ICD-10-CM
C72.9	Malignant neoplasm of central nervous system, unspecified	Diagnosis	ICD-10-CM
C73	Malignant neoplasm of thyroid gland	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C74	Malignant neoplasm of adrenal gland	Diagnosis	ICD-10-CM
C74.0	Malignant neoplasm of cortex of adrenal gland	Diagnosis	ICD-10-CM
C74.00	Malignant neoplasm of cortex of unspecified adrenal gland	Diagnosis	ICD-10-CM
C74.01	Malignant neoplasm of cortex of right adrenal gland	Diagnosis	ICD-10-CM
C74.02	Malignant neoplasm of cortex of left adrenal gland	Diagnosis	ICD-10-CM
C74.1	Malignant neoplasm of medulla of adrenal gland	Diagnosis	ICD-10-CM
C74.10	Malignant neoplasm of medulla of unspecified adrenal gland	Diagnosis	ICD-10-CM
C74.11	Malignant neoplasm of medulla of right adrenal gland	Diagnosis	ICD-10-CM
C74.12	Malignant neoplasm of medulla of left adrenal gland	Diagnosis	ICD-10-CM
C74.9	Malignant neoplasm of unspecified part of adrenal gland	Diagnosis	ICD-10-CM
C74.90	Malignant neoplasm of unspecified part of unspecified adrenal gland	Diagnosis	ICD-10-CM
C74.91	Malignant neoplasm of unspecified part of right adrenal gland	Diagnosis	ICD-10-CM
C74.92	Malignant neoplasm of unspecified part of left adrenal gland	Diagnosis	ICD-10-CM
C75	Malignant neoplasm of other endocrine glands and related structures	Diagnosis	ICD-10-CM
C75.0	Malignant neoplasm of parathyroid gland	Diagnosis	ICD-10-CM
C75.1	Malignant neoplasm of pituitary gland	Diagnosis	ICD-10-CM
C75.2	Malignant neoplasm of craniopharyngeal duct	Diagnosis	ICD-10-CM
C75.3	Malignant neoplasm of pineal gland	Diagnosis	ICD-10-CM
C75.4	Malignant neoplasm of carotid body	Diagnosis	ICD-10-CM
C75.5	Malignant neoplasm of aortic body and other paraganglia	Diagnosis	ICD-10-CM
C75.8	Malignant neoplasm with pluriglandular involvement, unspecified	Diagnosis	ICD-10-CM
C75.9	Malignant neoplasm of endocrine gland, unspecified	Diagnosis	ICD-10-CM
C76	Malignant neoplasm of other and ill-defined sites	Diagnosis	ICD-10-CM
C76.0	Malignant neoplasm of head, face and neck	Diagnosis	ICD-10-CM
C76.1	Malignant neoplasm of thorax	Diagnosis	ICD-10-CM
C76.2	Malignant neoplasm of abdomen	Diagnosis	ICD-10-CM
C76.3	Malignant neoplasm of pelvis	Diagnosis	ICD-10-CM
C76.4	Malignant neoplasm of upper limb	Diagnosis	ICD-10-CM
C76.40	Malignant neoplasm of unspecified upper limb	Diagnosis	ICD-10-CM
C76.41	Malignant neoplasm of right upper limb	Diagnosis	ICD-10-CM
C76.42	Malignant neoplasm of left upper limb	Diagnosis	ICD-10-CM
C76.5	Malignant neoplasm of lower limb	Diagnosis	ICD-10-CM
C76.50	Malignant neoplasm of unspecified lower limb	Diagnosis	ICD-10-CM
C76.51	Malignant neoplasm of right lower limb	Diagnosis	ICD-10-CM
C76.52	Malignant neoplasm of left lower limb	Diagnosis	ICD-10-CM
C76.8	Malignant neoplasm of other specified ill-defined sites	Diagnosis	ICD-10-CM
C77	Secondary and unspecified malignant neoplasm of lymph nodes	Diagnosis	ICD-10-CM
C77.0	Secondary and unspecified malignant neoplasm of lymph nodes of head, face and neck	Diagnosis	ICD-10-CM
C77.1	Secondary and unspecified malignant neoplasm of intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C77.2	Secondary and unspecified malignant neoplasm of intra-abdominal lymph nodes	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C77.3	Secondary and unspecified malignant neoplasm of axilla and upper limb lymph nodes	Diagnosis	ICD-10-CM
C77.4	Secondary and unspecified malignant neoplasm of inguinal and lower limb lymph nodes	Diagnosis	ICD-10-CM
C77.5	Secondary and unspecified malignant neoplasm of intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C77.8	Secondary and unspecified malignant neoplasm of lymph nodes of multiple regions	Diagnosis	ICD-10-CM
C77.9	Secondary and unspecified malignant neoplasm of lymph node, unspecified	Diagnosis	ICD-10-CM
C78	Secondary malignant neoplasm of respiratory and digestive organs	Diagnosis	ICD-10-CM
C78.0	Secondary malignant neoplasm of lung	Diagnosis	ICD-10-CM
C78.00	Secondary malignant neoplasm of unspecified lung	Diagnosis	ICD-10-CM
C78.01	Secondary malignant neoplasm of right lung	Diagnosis	ICD-10-CM
C78.02	Secondary malignant neoplasm of left lung	Diagnosis	ICD-10-CM
C78.1	Secondary malignant neoplasm of mediastinum	Diagnosis	ICD-10-CM
C78.2	Secondary malignant neoplasm of pleura	Diagnosis	ICD-10-CM
C78.3	Secondary malignant neoplasm of other and unspecified respiratory organs	Diagnosis	ICD-10-CM
C78.30	Secondary malignant neoplasm of unspecified respiratory organ	Diagnosis	ICD-10-CM
C78.39	Secondary malignant neoplasm of other respiratory organs	Diagnosis	ICD-10-CM
C78.4	Secondary malignant neoplasm of small intestine	Diagnosis	ICD-10-CM
C78.5	Secondary malignant neoplasm of large intestine and rectum	Diagnosis	ICD-10-CM
C78.6	Secondary malignant neoplasm of retroperitoneum and peritoneum	Diagnosis	ICD-10-CM
C78.7	Secondary malignant neoplasm of liver and intrahepatic bile duct	Diagnosis	ICD-10-CM
C78.8	Secondary malignant neoplasm of other and unspecified digestive organs	Diagnosis	ICD-10-CM
C78.80	Secondary malignant neoplasm of unspecified digestive organ	Diagnosis	ICD-10-CM
C78.89	Secondary malignant neoplasm of other digestive organs	Diagnosis	ICD-10-CM
C79	Secondary malignant neoplasm of other and unspecified sites	Diagnosis	ICD-10-CM
C79.0	Secondary malignant neoplasm of kidney and renal pelvis	Diagnosis	ICD-10-CM
C79.00	Secondary malignant neoplasm of unspecified kidney and renal pelvis	Diagnosis	ICD-10-CM
C79.01	Secondary malignant neoplasm of right kidney and renal pelvis	Diagnosis	ICD-10-CM
C79.02	Secondary malignant neoplasm of left kidney and renal pelvis	Diagnosis	ICD-10-CM
C79.1	Secondary malignant neoplasm of bladder and other and unspecified urinary organs	Diagnosis	ICD-10-CM
C79.10	Secondary malignant neoplasm of unspecified urinary organs	Diagnosis	ICD-10-CM
C79.11	Secondary malignant neoplasm of bladder	Diagnosis	ICD-10-CM
C79.19	Secondary malignant neoplasm of other urinary organs	Diagnosis	ICD-10-CM
C79.2	Secondary malignant neoplasm of skin	Diagnosis	ICD-10-CM
C79.3	Secondary malignant neoplasm of brain and cerebral meninges	Diagnosis	ICD-10-CM
C79.31	Secondary malignant neoplasm of brain	Diagnosis	ICD-10-CM
C79.32	Secondary malignant neoplasm of cerebral meninges	Diagnosis	ICD-10-CM
C79.4	Secondary malignant neoplasm of other and unspecified parts of nervous system	Diagnosis	ICD-10-CM
C79.40	Secondary malignant neoplasm of unspecified part of nervous system	Diagnosis	ICD-10-CM
C79.49	Secondary malignant neoplasm of other parts of nervous system	Diagnosis	ICD-10-CM
C79.5	Secondary malignant neoplasm of bone and bone marrow	Diagnosis	ICD-10-CM
C79.51	Secondary malignant neoplasm of bone	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C79.52	Secondary malignant neoplasm of bone marrow	Diagnosis	ICD-10-CM
C79.6	Secondary malignant neoplasm of ovary	Diagnosis	ICD-10-CM
C79.60	Secondary malignant neoplasm of unspecified ovary	Diagnosis	ICD-10-CM
C79.61	Secondary malignant neoplasm of right ovary	Diagnosis	ICD-10-CM
C79.62	Secondary malignant neoplasm of left ovary	Diagnosis	ICD-10-CM
C79.7	Secondary malignant neoplasm of adrenal gland	Diagnosis	ICD-10-CM
C79.70	Secondary malignant neoplasm of unspecified adrenal gland	Diagnosis	ICD-10-CM
C79.71	Secondary malignant neoplasm of right adrenal gland	Diagnosis	ICD-10-CM
C79.72	Secondary malignant neoplasm of left adrenal gland	Diagnosis	ICD-10-CM
C79.8	Secondary malignant neoplasm of other specified sites	Diagnosis	ICD-10-CM
C79.81	Secondary malignant neoplasm of breast	Diagnosis	ICD-10-CM
C79.82	Secondary malignant neoplasm of genital organs	Diagnosis	ICD-10-CM
C79.89	Secondary malignant neoplasm of other specified sites	Diagnosis	ICD-10-CM
C79.9	Secondary malignant neoplasm of unspecified site	Diagnosis	ICD-10-CM
C7A	Malignant neuroendocrine tumors	Diagnosis	ICD-10-CM
C7A.0	Malignant carcinoid tumors	Diagnosis	ICD-10-CM
C7A.00	Malignant carcinoid tumor of unspecified site	Diagnosis	ICD-10-CM
C7A.01	Malignant carcinoid tumors of the small intestine	Diagnosis	ICD-10-CM
C7A.010	Malignant carcinoid tumor of the duodenum	Diagnosis	ICD-10-CM
C7A.011	Malignant carcinoid tumor of the jejunum	Diagnosis	ICD-10-CM
C7A.012	Malignant carcinoid tumor of the ileum	Diagnosis	ICD-10-CM
C7A.019	Malignant carcinoid tumor of the small intestine, unspecified portion	Diagnosis	ICD-10-CM
C7A.02	Malignant carcinoid tumors of the appendix, large intestine, and rectum	Diagnosis	ICD-10-CM
C7A.020	Malignant carcinoid tumor of the appendix	Diagnosis	ICD-10-CM
C7A.021	Malignant carcinoid tumor of the cecum	Diagnosis	ICD-10-CM
C7A.022	Malignant carcinoid tumor of the ascending colon	Diagnosis	ICD-10-CM
C7A.023	Malignant carcinoid tumor of the transverse colon	Diagnosis	ICD-10-CM
C7A.024	Malignant carcinoid tumor of the descending colon	Diagnosis	ICD-10-CM
C7A.025	Malignant carcinoid tumor of the sigmoid colon	Diagnosis	ICD-10-CM
C7A.026	Malignant carcinoid tumor of the rectum	Diagnosis	ICD-10-CM
C7A.029	Malignant carcinoid tumor of the large intestine, unspecified portion	Diagnosis	ICD-10-CM
C7A.09	Malignant carcinoid tumors of other sites	Diagnosis	ICD-10-CM
C7A.090	Malignant carcinoid tumor of the bronchus and lung	Diagnosis	ICD-10-CM
C7A.091	Malignant carcinoid tumor of the thymus	Diagnosis	ICD-10-CM
C7A.092	Malignant carcinoid tumor of the stomach	Diagnosis	ICD-10-CM
C7A.093	Malignant carcinoid tumor of the kidney	Diagnosis	ICD-10-CM
C7A.094	Malignant carcinoid tumor of the foregut, unspecified	Diagnosis	ICD-10-CM
C7A.095	Malignant carcinoid tumor of the midgut, unspecified	Diagnosis	ICD-10-CM
C7A.096	Malignant carcinoid tumor of the hindgut, unspecified	Diagnosis	ICD-10-CM
C7A.098	Malignant carcinoid tumors of other sites	Diagnosis	ICD-10-CM
C7A.1	Malignant poorly differentiated neuroendocrine tumors	Diagnosis	ICD-10-CM
C7A.8	Other malignant neuroendocrine tumors	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C7B	Secondary neuroendocrine tumors	Diagnosis	ICD-10-CM
C7B.0	Secondary carcinoid tumors	Diagnosis	ICD-10-CM
C7B.00	Secondary carcinoid tumors, unspecified site	Diagnosis	ICD-10-CM
C7B.01	Secondary carcinoid tumors of distant lymph nodes	Diagnosis	ICD-10-CM
C7B.02	Secondary carcinoid tumors of liver	Diagnosis	ICD-10-CM
C7B.03	Secondary carcinoid tumors of bone	Diagnosis	ICD-10-CM
C7B.04	Secondary carcinoid tumors of peritoneum	Diagnosis	ICD-10-CM
C7B.09	Secondary carcinoid tumors of other sites	Diagnosis	ICD-10-CM
C7B.1	Secondary Merkel cell carcinoma	Diagnosis	ICD-10-CM
C7B.8	Other secondary neuroendocrine tumors	Diagnosis	ICD-10-CM
C80	Malignant neoplasm without specification of site	Diagnosis	ICD-10-CM
C80.0	Disseminated malignant neoplasm, unspecified	Diagnosis	ICD-10-CM
C80.1	Malignant (primary) neoplasm, unspecified	Diagnosis	ICD-10-CM
C80.2	Malignant neoplasm associated with transplanted organ	Diagnosis	ICD-10-CM
C81	Hodgkin lymphoma	Diagnosis	ICD-10-CM
C81.0	Nodular lymphocyte predominant Hodgkin lymphoma	Diagnosis	ICD-10-CM
C81.00	Nodular lymphocyte predominant Hodgkin lymphoma, unspecified site	Diagnosis	ICD-10-CM
C81.01	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C81.02	Nodular lymphocyte predominant Hodgkin lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C81.03	Nodular lymphocyte predominant Hodgkin lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C81.04	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C81.05	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C81.06	Nodular lymphocyte predominant Hodgkin lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C81.07	Nodular lymphocyte predominant Hodgkin lymphoma, spleen	Diagnosis	ICD-10-CM
C81.08	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C81.09	Nodular lymphocyte predominant Hodgkin lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C81.1	Nodular sclerosis Hodgkin lymphoma	Diagnosis	ICD-10-CM
C81.10	Nodular sclerosis Hodgkin lymphoma, unspecified site	Diagnosis	ICD-10-CM
C81.11	Nodular sclerosis Hodgkin lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C81.12	Nodular sclerosis Hodgkin lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C81.13	Nodular sclerosis Hodgkin lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C81.14	Nodular sclerosis Hodgkin lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C81.15	Nodular sclerosis Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C81.16	Nodular sclerosis Hodgkin lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C81.17	Nodular sclerosis Hodgkin lymphoma, spleen	Diagnosis	ICD-10-CM
C81.18	Nodular sclerosis Hodgkin lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C81.19	Nodular sclerosis Hodgkin lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C81.2	Mixed cellularity Hodgkin lymphoma	Diagnosis	ICD-10-CM
C81.20	Mixed cellularity Hodgkin lymphoma, unspecified site	Diagnosis	ICD-10-CM
C81.21	Mixed cellularity Hodgkin lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C81.22	Mixed cellularity Hodgkin lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C81.23	Mixed cellularity Hodgkin lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C81.24	Mixed cellularity Hodgkin lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C81.25	Mixed cellularity Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C81.26	Mixed cellularity Hodgkin lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C81.27	Mixed cellularity Hodgkin lymphoma, spleen	Diagnosis	ICD-10-CM
C81.28	Mixed cellularity Hodgkin lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C81.29	Mixed cellularity Hodgkin lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C81.3	Lymphocyte depleted Hodgkin lymphoma	Diagnosis	ICD-10-CM
C81.30	Lymphocyte depleted Hodgkin lymphoma, unspecified site	Diagnosis	ICD-10-CM
C81.31	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C81.32	Lymphocyte depleted Hodgkin lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C81.33	Lymphocyte depleted Hodgkin lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C81.34	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C81.35	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C81.36	Lymphocyte depleted Hodgkin lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C81.37	Lymphocyte depleted Hodgkin lymphoma, spleen	Diagnosis	ICD-10-CM
C81.38	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C81.39	Lymphocyte depleted Hodgkin lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C81.4	Lymphocyte-rich Hodgkin lymphoma	Diagnosis	ICD-10-CM
C81.40	Lymphocyte-rich Hodgkin lymphoma, unspecified site	Diagnosis	ICD-10-CM
C81.41	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C81.42	Lymphocyte-rich Hodgkin lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C81.43	Lymphocyte-rich Hodgkin lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C81.44	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C81.45	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C81.46	Lymphocyte-rich Hodgkin lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C81.47	Lymphocyte-rich Hodgkin lymphoma, spleen	Diagnosis	ICD-10-CM
C81.48	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C81.49	Lymphocyte-rich Hodgkin lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C81.7	Other Hodgkin lymphoma	Diagnosis	ICD-10-CM
C81.70	Other Hodgkin lymphoma, unspecified site	Diagnosis	ICD-10-CM
C81.71	Other Hodgkin lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C81.72	Other Hodgkin lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C81.73	Other Hodgkin lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C81.74	Other Hodgkin lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C81.75	Other Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C81.76	Other Hodgkin lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C81.77	Other Hodgkin lymphoma, spleen	Diagnosis	ICD-10-CM
C81.78	Other Hodgkin lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C81.79	Other Hodgkin lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C81.9	Hodgkin lymphoma, unspecified	Diagnosis	ICD-10-CM
C81.90	Hodgkin lymphoma, unspecified, unspecified site	Diagnosis	ICD-10-CM
C81.91	Hodgkin lymphoma, unspecified, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C81.92	Hodgkin lymphoma, unspecified, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C81.93	Hodgkin lymphoma, unspecified, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C81.94	Hodgkin lymphoma, unspecified, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C81.95	Hodgkin lymphoma, unspecified, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C81.96	Hodgkin lymphoma, unspecified, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C81.97	Hodgkin lymphoma, unspecified, spleen	Diagnosis	ICD-10-CM
C81.98	Hodgkin lymphoma, unspecified, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C81.99	Hodgkin lymphoma, unspecified, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C82	Follicular lymphoma	Diagnosis	ICD-10-CM
C82.0	Follicular lymphoma grade I	Diagnosis	ICD-10-CM
C82.00	Follicular lymphoma grade I, unspecified site	Diagnosis	ICD-10-CM
C82.01	Follicular lymphoma grade I, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C82.02	Follicular lymphoma grade I, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C82.03	Follicular lymphoma grade I, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C82.04	Follicular lymphoma grade I, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C82.05	Follicular lymphoma grade I, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C82.06	Follicular lymphoma grade I, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C82.07	Follicular lymphoma grade I, spleen	Diagnosis	ICD-10-CM
C82.08	Follicular lymphoma grade I, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C82.09	Follicular lymphoma grade I, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C82.1	Follicular lymphoma grade II	Diagnosis	ICD-10-CM
C82.10	Follicular lymphoma grade II, unspecified site	Diagnosis	ICD-10-CM
C82.11	Follicular lymphoma grade II, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C82.12	Follicular lymphoma grade II, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C82.13	Follicular lymphoma grade II, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C82.14	Follicular lymphoma grade II, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C82.15	Follicular lymphoma grade II, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C82.16	Follicular lymphoma grade II, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C82.17	Follicular lymphoma grade II, spleen	Diagnosis	ICD-10-CM
C82.18	Follicular lymphoma grade II, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C82.19	Follicular lymphoma grade II, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C82.2	Follicular lymphoma grade III, unspecified	Diagnosis	ICD-10-CM
C82.20	Follicular lymphoma grade III, unspecified, unspecified site	Diagnosis	ICD-10-CM
C82.21	Follicular lymphoma grade III, unspecified, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C82.22	Follicular lymphoma grade III, unspecified, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C82.23	Follicular lymphoma grade III, unspecified, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C82.24	Follicular lymphoma grade III, unspecified, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C82.25	Follicular lymphoma grade III, unspecified, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C82.26	Follicular lymphoma grade III, unspecified, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C82.27	Follicular lymphoma grade III, unspecified, spleen	Diagnosis	ICD-10-CM
C82.28	Follicular lymphoma grade III, unspecified, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C82.29	Follicular lymphoma grade III, unspecified, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C82.3	Follicular lymphoma grade IIIa	Diagnosis	ICD-10-CM
C82.30	Follicular lymphoma grade IIIa, unspecified site	Diagnosis	ICD-10-CM
C82.31	Follicular lymphoma grade IIIa, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C82.32	Follicular lymphoma grade IIIa, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C82.33	Follicular lymphoma grade IIIa, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C82.34	Follicular lymphoma grade IIIa, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C82.35	Follicular lymphoma grade IIIa, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C82.36	Follicular lymphoma grade IIIa, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C82.37	Follicular lymphoma grade IIIa, spleen	Diagnosis	ICD-10-CM
C82.38	Follicular lymphoma grade IIIa, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C82.39	Follicular lymphoma grade IIIa, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C82.4	Follicular lymphoma grade IIIb	Diagnosis	ICD-10-CM
C82.40	Follicular lymphoma grade IIIb, unspecified site	Diagnosis	ICD-10-CM
C82.41	Follicular lymphoma grade IIIb, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C82.42	Follicular lymphoma grade IIIb, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C82.43	Follicular lymphoma grade IIIb, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C82.44	Follicular lymphoma grade IIIb, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C82.45	Follicular lymphoma grade IIIb, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C82.46	Follicular lymphoma grade IIIb, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C82.47	Follicular lymphoma grade IIIb, spleen	Diagnosis	ICD-10-CM
C82.48	Follicular lymphoma grade IIIb, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C82.49	Follicular lymphoma grade IIIb, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C82.5	Diffuse follicle center lymphoma	Diagnosis	ICD-10-CM
C82.50	Diffuse follicle center lymphoma, unspecified site	Diagnosis	ICD-10-CM
C82.51	Diffuse follicle center lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C82.52	Diffuse follicle center lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C82.53	Diffuse follicle center lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C82.54	Diffuse follicle center lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C82.55	Diffuse follicle center lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C82.56	Diffuse follicle center lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C82.57	Diffuse follicle center lymphoma, spleen	Diagnosis	ICD-10-CM
C82.58	Diffuse follicle center lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C82.59	Diffuse follicle center lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C82.6	Cutaneous follicle center lymphoma	Diagnosis	ICD-10-CM
C82.60	Cutaneous follicle center lymphoma, unspecified site	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C82.61	Cutaneous follicle center lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C82.62	Cutaneous follicle center lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C82.63	Cutaneous follicle center lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C82.64	Cutaneous follicle center lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C82.65	Cutaneous follicle center lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C82.66	Cutaneous follicle center lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C82.67	Cutaneous follicle center lymphoma, spleen	Diagnosis	ICD-10-CM
C82.68	Cutaneous follicle center lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C82.69	Cutaneous follicle center lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C82.8	Other types of follicular lymphoma	Diagnosis	ICD-10-CM
C82.80	Other types of follicular lymphoma, unspecified site	Diagnosis	ICD-10-CM
C82.81	Other types of follicular lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C82.82	Other types of follicular lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C82.83	Other types of follicular lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C82.84	Other types of follicular lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C82.85	Other types of follicular lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C82.86	Other types of follicular lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C82.87	Other types of follicular lymphoma, spleen	Diagnosis	ICD-10-CM
C82.88	Other types of follicular lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C82.89	Other types of follicular lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C82.9	Follicular lymphoma, unspecified	Diagnosis	ICD-10-CM
C82.90	Follicular lymphoma, unspecified, unspecified site	Diagnosis	ICD-10-CM
C82.91	Follicular lymphoma, unspecified, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C82.92	Follicular lymphoma, unspecified, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C82.93	Follicular lymphoma, unspecified, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C82.94	Follicular lymphoma, unspecified, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C82.95	Follicular lymphoma, unspecified, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C82.96	Follicular lymphoma, unspecified, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C82.97	Follicular lymphoma, unspecified, spleen	Diagnosis	ICD-10-CM
C82.98	Follicular lymphoma, unspecified, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C82.99	Follicular lymphoma, unspecified, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C83	Non-follicular lymphoma	Diagnosis	ICD-10-CM
C83.0	Small cell B-cell lymphoma	Diagnosis	ICD-10-CM
C83.00	Small cell B-cell lymphoma, unspecified site	Diagnosis	ICD-10-CM
C83.01	Small cell B-cell lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C83.02	Small cell B-cell lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C83.03	Small cell B-cell lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C83.04	Small cell B-cell lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C83.05	Small cell B-cell lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C83.06	Small cell B-cell lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C83.07	Small cell B-cell lymphoma, spleen	Diagnosis	ICD-10-CM
C83.08	Small cell B-cell lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C83.09	Small cell B-cell lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C83.1	Mantle cell lymphoma	Diagnosis	ICD-10-CM
C83.10	Mantle cell lymphoma, unspecified site	Diagnosis	ICD-10-CM
C83.11	Mantle cell lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C83.12	Mantle cell lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C83.13	Mantle cell lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C83.14	Mantle cell lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C83.15	Mantle cell lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C83.16	Mantle cell lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C83.17	Mantle cell lymphoma, spleen	Diagnosis	ICD-10-CM
C83.18	Mantle cell lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C83.19	Mantle cell lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C83.3	Diffuse large B-cell lymphoma	Diagnosis	ICD-10-CM
C83.30	Diffuse large B-cell lymphoma, unspecified site	Diagnosis	ICD-10-CM
C83.31	Diffuse large B-cell lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C83.32	Diffuse large B-cell lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C83.33	Diffuse large B-cell lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C83.34	Diffuse large B-cell lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C83.35	Diffuse large B-cell lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C83.36	Diffuse large B-cell lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C83.37	Diffuse large B-cell lymphoma, spleen	Diagnosis	ICD-10-CM
C83.38	Diffuse large B-cell lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C83.39	Diffuse large B-cell lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C83.5	Lymphoblastic (diffuse) lymphoma	Diagnosis	ICD-10-CM
C83.50	Lymphoblastic (diffuse) lymphoma, unspecified site	Diagnosis	ICD-10-CM
C83.51	Lymphoblastic (diffuse) lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C83.52	Lymphoblastic (diffuse) lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C83.53	Lymphoblastic (diffuse) lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C83.54	Lymphoblastic (diffuse) lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C83.55	Lymphoblastic (diffuse) lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C83.56	Lymphoblastic (diffuse) lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C83.57	Lymphoblastic (diffuse) lymphoma, spleen	Diagnosis	ICD-10-CM
C83.58	Lymphoblastic (diffuse) lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C83.59	Lymphoblastic (diffuse) lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C83.7	Burkitt lymphoma	Diagnosis	ICD-10-CM
C83.70	Burkitt lymphoma, unspecified site	Diagnosis	ICD-10-CM
C83.71	Burkitt lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C83.72	Burkitt lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C83.73	Burkitt lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C83.74	Burkitt lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C83.75	Burkitt lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C83.76	Burkitt lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C83.77	Burkitt lymphoma, spleen	Diagnosis	ICD-10-CM
C83.78	Burkitt lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C83.79	Burkitt lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C83.8	Other non-follicular lymphoma	Diagnosis	ICD-10-CM
C83.80	Other non-follicular lymphoma, unspecified site	Diagnosis	ICD-10-CM
C83.81	Other non-follicular lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C83.82	Other non-follicular lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C83.83	Other non-follicular lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C83.84	Other non-follicular lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C83.85	Other non-follicular lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C83.86	Other non-follicular lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C83.87	Other non-follicular lymphoma, spleen	Diagnosis	ICD-10-CM
C83.88	Other non-follicular lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C83.89	Other non-follicular lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C83.9	Non-follicular (diffuse) lymphoma, unspecified	Diagnosis	ICD-10-CM
C83.90	Non-follicular (diffuse) lymphoma, unspecified, unspecified site	Diagnosis	ICD-10-CM
C83.91	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C83.92	Non-follicular (diffuse) lymphoma, unspecified, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C83.93	Non-follicular (diffuse) lymphoma, unspecified, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C83.94	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C83.95	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C83.96	Non-follicular (diffuse) lymphoma, unspecified, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C83.97	Non-follicular (diffuse) lymphoma, unspecified, spleen	Diagnosis	ICD-10-CM
C83.98	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C83.99	Non-follicular (diffuse) lymphoma, unspecified, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C84	Mature T/NK-cell lymphomas	Diagnosis	ICD-10-CM
C84.0	Mycosis fungoides	Diagnosis	ICD-10-CM
C84.00	Mycosis fungoides, unspecified site	Diagnosis	ICD-10-CM
C84.01	Mycosis fungoides, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C84.02	Mycosis fungoides, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C84.03	Mycosis fungoides, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C84.04	Mycosis fungoides, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C84.05	Mycosis fungoides, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C84.06	Mycosis fungoides, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C84.07	Mycosis fungoides, spleen	Diagnosis	ICD-10-CM
C84.08	Mycosis fungoides, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C84.09	Mycosis fungoides, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C84.1	Sezary disease	Diagnosis	ICD-10-CM
C84.10	Sezary disease, unspecified site	Diagnosis	ICD-10-CM
C84.11	Sezary disease, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C84.12	Sezary disease, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C84.13	Sezary disease, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C84.14	Sezary disease, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C84.15	Sezary disease, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C84.16	Sezary disease, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C84.17	Sezary disease, spleen	Diagnosis	ICD-10-CM
C84.18	Sezary disease, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C84.19	Sezary disease, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C84.4	Peripheral T-cell lymphoma, not classified	Diagnosis	ICD-10-CM
C84.40	Peripheral T-cell lymphoma, not classified, unspecified site	Diagnosis	ICD-10-CM
C84.41	Peripheral T-cell lymphoma, not classified, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C84.42	Peripheral T-cell lymphoma, not classified, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C84.43	Peripheral T-cell lymphoma, not classified, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C84.44	Peripheral T-cell lymphoma, not classified, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C84.45	Peripheral T-cell lymphoma, not classified, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C84.46	Peripheral T-cell lymphoma, not classified, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C84.47	Peripheral T-cell lymphoma, not classified, spleen	Diagnosis	ICD-10-CM
C84.48	Peripheral T-cell lymphoma, not classified, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C84.49	Peripheral T-cell lymphoma, not classified, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C84.6	Anaplastic large cell lymphoma, ALK-positive	Diagnosis	ICD-10-CM
C84.60	Anaplastic large cell lymphoma, ALK-positive, unspecified site	Diagnosis	ICD-10-CM
C84.61	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C84.62	Anaplastic large cell lymphoma, ALK-positive, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C84.63	Anaplastic large cell lymphoma, ALK-positive, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C84.64	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C84.65	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C84.66	Anaplastic large cell lymphoma, ALK-positive, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C84.67	Anaplastic large cell lymphoma, ALK-positive, spleen	Diagnosis	ICD-10-CM
C84.68	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C84.69	Anaplastic large cell lymphoma, ALK-positive, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C84.7	Anaplastic large cell lymphoma, ALK-negative	Diagnosis	ICD-10-CM
C84.70	Anaplastic large cell lymphoma, ALK-negative, unspecified site	Diagnosis	ICD-10-CM
C84.71	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C84.72	Anaplastic large cell lymphoma, ALK-negative, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C84.73	Anaplastic large cell lymphoma, ALK-negative, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C84.74	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C84.75	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C84.76	Anaplastic large cell lymphoma, ALK-negative, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C84.77	Anaplastic large cell lymphoma, ALK-negative, spleen	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C84.78	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C84.79	Anaplastic large cell lymphoma, ALK-negative, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C84.9	Mature T/NK-cell lymphomas, unspecified	Diagnosis	ICD-10-CM
C84.90	Mature T/NK-cell lymphomas, unspecified, unspecified site	Diagnosis	ICD-10-CM
C84.91	Mature T/NK-cell lymphomas, unspecified, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C84.92	Mature T/NK-cell lymphomas, unspecified, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C84.93	Mature T/NK-cell lymphomas, unspecified, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C84.94	Mature T/NK-cell lymphomas, unspecified, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C84.95	Mature T/NK-cell lymphomas, unspecified, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C84.96	Mature T/NK-cell lymphomas, unspecified, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C84.97	Mature T/NK-cell lymphomas, unspecified, spleen	Diagnosis	ICD-10-CM
C84.98	Mature T/NK-cell lymphomas, unspecified, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C84.99	Mature T/NK-cell lymphomas, unspecified, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C84.A	Cutaneous T-cell lymphoma, unspecified	Diagnosis	ICD-10-CM
C84.A0	Cutaneous T-cell lymphoma, unspecified, unspecified site	Diagnosis	ICD-10-CM
C84.A1	Cutaneous T-cell lymphoma, unspecified lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C84.A2	Cutaneous T-cell lymphoma, unspecified, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C84.A3	Cutaneous T-cell lymphoma, unspecified, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C84.A4	Cutaneous T-cell lymphoma, unspecified, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C84.A5	Cutaneous T-cell lymphoma, unspecified, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C84.A6	Cutaneous T-cell lymphoma, unspecified, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C84.A7	Cutaneous T-cell lymphoma, unspecified, spleen	Diagnosis	ICD-10-CM
C84.A8	Cutaneous T-cell lymphoma, unspecified, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C84.A9	Cutaneous T-cell lymphoma, unspecified, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C84.Z	Other mature T/NK-cell lymphomas	Diagnosis	ICD-10-CM
C84.Z0	Other mature T/NK-cell lymphomas, unspecified site	Diagnosis	ICD-10-CM
C84.Z1	Other mature T/NK-cell lymphomas, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C84.Z2	Other mature T/NK-cell lymphomas, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C84.Z3	Other mature T/NK-cell lymphomas, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C84.Z4	Other mature T/NK-cell lymphomas, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C84.Z5	Other mature T/NK-cell lymphomas, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C84.Z6	Other mature T/NK-cell lymphomas, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C84.Z7	Other mature T/NK-cell lymphomas, spleen	Diagnosis	ICD-10-CM
C84.Z8	Other mature T/NK-cell lymphomas, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C84.Z9	Other mature T/NK-cell lymphomas, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C85	Other specified and unspecified types of non-Hodgkin lymphoma	Diagnosis	ICD-10-CM
C85.1	Unspecified B-cell lymphoma	Diagnosis	ICD-10-CM
C85.10	Unspecified B-cell lymphoma, unspecified site	Diagnosis	ICD-10-CM
C85.11	Unspecified B-cell lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C85.12	Unspecified B-cell lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C85.13	Unspecified B-cell lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C85.14	Unspecified B-cell lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C85.15	Unspecified B-cell lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C85.16	Unspecified B-cell lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C85.17	Unspecified B-cell lymphoma, spleen	Diagnosis	ICD-10-CM
C85.18	Unspecified B-cell lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C85.19	Unspecified B-cell lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C85.2	Mediastinal (thymic) large B-cell lymphoma	Diagnosis	ICD-10-CM
C85.20	Mediastinal (thymic) large B-cell lymphoma, unspecified site	Diagnosis	ICD-10-CM
C85.21	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C85.22	Mediastinal (thymic) large B-cell lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C85.23	Mediastinal (thymic) large B-cell lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C85.24	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C85.25	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C85.26	Mediastinal (thymic) large B-cell lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C85.27	Mediastinal (thymic) large B-cell lymphoma, spleen	Diagnosis	ICD-10-CM
C85.28	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C85.29	Mediastinal (thymic) large B-cell lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C85.8	Other specified types of non-Hodgkin lymphoma	Diagnosis	ICD-10-CM
C85.80	Other specified types of non-Hodgkin lymphoma, unspecified site	Diagnosis	ICD-10-CM
C85.81	Other specified types of non-Hodgkin lymphoma, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C85.82	Other specified types of non-Hodgkin lymphoma, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C85.83	Other specified types of non-Hodgkin lymphoma, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C85.84	Other specified types of non-Hodgkin lymphoma, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C85.85	Other specified types of non-Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C85.86	Other specified types of non-Hodgkin lymphoma, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C85.87	Other specified types of non-Hodgkin lymphoma, spleen	Diagnosis	ICD-10-CM
C85.88	Other specified types of non-Hodgkin lymphoma, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C85.89	Other specified types of non-Hodgkin lymphoma, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C85.9	Non-Hodgkin lymphoma, unspecified	Diagnosis	ICD-10-CM
C85.90	Non-Hodgkin lymphoma, unspecified, unspecified site	Diagnosis	ICD-10-CM
C85.91	Non-Hodgkin lymphoma, unspecified, lymph nodes of head, face, and neck	Diagnosis	ICD-10-CM
C85.92	Non-Hodgkin lymphoma, unspecified, intrathoracic lymph nodes	Diagnosis	ICD-10-CM
C85.93	Non-Hodgkin lymphoma, unspecified, intra-abdominal lymph nodes	Diagnosis	ICD-10-CM
C85.94	Non-Hodgkin lymphoma, unspecified, lymph nodes of axilla and upper limb	Diagnosis	ICD-10-CM
C85.95	Non-Hodgkin lymphoma, unspecified, lymph nodes of inguinal region and lower limb	Diagnosis	ICD-10-CM
C85.96	Non-Hodgkin lymphoma, unspecified, intrapelvic lymph nodes	Diagnosis	ICD-10-CM
C85.97	Non-Hodgkin lymphoma, unspecified, spleen	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C85.98	Non-Hodgkin lymphoma, unspecified, lymph nodes of multiple sites	Diagnosis	ICD-10-CM
C85.99	Non-Hodgkin lymphoma, unspecified, extranodal and solid organ sites	Diagnosis	ICD-10-CM
C86	Other specified types of T/NK-cell lymphoma	Diagnosis	ICD-10-CM
C86.0	Extranodal NK/T-cell lymphoma, nasal type	Diagnosis	ICD-10-CM
C86.1	Hepatosplenic T-cell lymphoma	Diagnosis	ICD-10-CM
C86.2	Enteropathy-type (intestinal) T-cell lymphoma	Diagnosis	ICD-10-CM
C86.3	Subcutaneous panniculitis-like T-cell lymphoma	Diagnosis	ICD-10-CM
C86.4	Blastic NK-cell lymphoma	Diagnosis	ICD-10-CM
C86.5	Angioimmunoblastic T-cell lymphoma	Diagnosis	ICD-10-CM
C86.6	Primary cutaneous CD30-positive T-cell proliferations	Diagnosis	ICD-10-CM
C88	Malignant immunoproliferative diseases and certain other B-cell lymphomas	Diagnosis	ICD-10-CM
C88.0	Waldenstrom macroglobulinemia	Diagnosis	ICD-10-CM
C88.2	Heavy chain disease	Diagnosis	ICD-10-CM
C88.3	Immunoproliferative small intestinal disease	Diagnosis	ICD-10-CM
C88.4	Extranodal marginal zone B-cell lymphoma of mucosa-associated lymphoid tissue [MALT-lymphoma]	Diagnosis	ICD-10-CM
C88.8	Other malignant immunoproliferative diseases	Diagnosis	ICD-10-CM
C88.9	Malignant immunoproliferative disease, unspecified	Diagnosis	ICD-10-CM
C90	Multiple myeloma and malignant plasma cell neoplasms	Diagnosis	ICD-10-CM
C90.0	Multiple myeloma	Diagnosis	ICD-10-CM
C90.00	Multiple myeloma not having achieved remission	Diagnosis	ICD-10-CM
C90.01	Multiple myeloma in remission	Diagnosis	ICD-10-CM
C90.02	Multiple myeloma in relapse	Diagnosis	ICD-10-CM
C90.1	Plasma cell leukemia	Diagnosis	ICD-10-CM
C90.10	Plasma cell leukemia not having achieved remission	Diagnosis	ICD-10-CM
C90.11	Plasma cell leukemia in remission	Diagnosis	ICD-10-CM
C90.12	Plasma cell leukemia in relapse	Diagnosis	ICD-10-CM
C90.2	Extramedullary plasmacytoma	Diagnosis	ICD-10-CM
C90.20	Extramedullary plasmacytoma not having achieved remission	Diagnosis	ICD-10-CM
C90.21	Extramedullary plasmacytoma in remission	Diagnosis	ICD-10-CM
C90.22	Extramedullary plasmacytoma in relapse	Diagnosis	ICD-10-CM
C90.3	Solitary plasmacytoma	Diagnosis	ICD-10-CM
C90.30	Solitary plasmacytoma not having achieved remission	Diagnosis	ICD-10-CM
C90.31	Solitary plasmacytoma in remission	Diagnosis	ICD-10-CM
C90.32	Solitary plasmacytoma in relapse	Diagnosis	ICD-10-CM
C91	Lymphoid leukemia	Diagnosis	ICD-10-CM
C91.0	Acute lymphoblastic leukemia [ALL]	Diagnosis	ICD-10-CM
C91.00	Acute lymphoblastic leukemia not having achieved remission	Diagnosis	ICD-10-CM
C91.01	Acute lymphoblastic leukemia, in remission	Diagnosis	ICD-10-CM
C91.02	Acute lymphoblastic leukemia, in relapse	Diagnosis	ICD-10-CM
C91.1	Chronic lymphocytic leukemia of B-cell type	Diagnosis	ICD-10-CM
C91.10	Chronic lymphocytic leukemia of B-cell type not having achieved remission	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C91.11	Chronic lymphocytic leukemia of B-cell type in remission	Diagnosis	ICD-10-CM
C91.12	Chronic lymphocytic leukemia of B-cell type in relapse	Diagnosis	ICD-10-CM
C91.3	Prolymphocytic leukemia of B-cell type	Diagnosis	ICD-10-CM
C91.30	Prolymphocytic leukemia of B-cell type not having achieved remission	Diagnosis	ICD-10-CM
C91.31	Prolymphocytic leukemia of B-cell type, in remission	Diagnosis	ICD-10-CM
C91.32	Prolymphocytic leukemia of B-cell type, in relapse	Diagnosis	ICD-10-CM
C91.4	Hairy cell leukemia	Diagnosis	ICD-10-CM
C91.40	Hairy cell leukemia not having achieved remission	Diagnosis	ICD-10-CM
C91.41	Hairy cell leukemia, in remission	Diagnosis	ICD-10-CM
C91.42	Hairy cell leukemia, in relapse	Diagnosis	ICD-10-CM
C91.5	Adult T-cell lymphoma/leukemia (HTLV-1-associated)	Diagnosis	ICD-10-CM
C91.50	Adult T-cell lymphoma/leukemia (HTLV-1-associated) not having achieved remission	Diagnosis	ICD-10-CM
C91.51	Adult T-cell lymphoma/leukemia (HTLV-1-associated), in remission	Diagnosis	ICD-10-CM
C91.52	Adult T-cell lymphoma/leukemia (HTLV-1-associated), in relapse	Diagnosis	ICD-10-CM
C91.6	Prolymphocytic leukemia of T-cell type	Diagnosis	ICD-10-CM
C91.60	Prolymphocytic leukemia of T-cell type not having achieved remission	Diagnosis	ICD-10-CM
C91.61	Prolymphocytic leukemia of T-cell type, in remission	Diagnosis	ICD-10-CM
C91.62	Prolymphocytic leukemia of T-cell type, in relapse	Diagnosis	ICD-10-CM
C91.9	Lymphoid leukemia, unspecified	Diagnosis	ICD-10-CM
C91.90	Lymphoid leukemia, unspecified not having achieved remission	Diagnosis	ICD-10-CM
C91.91	Lymphoid leukemia, unspecified, in remission	Diagnosis	ICD-10-CM
C91.92	Lymphoid leukemia, unspecified, in relapse	Diagnosis	ICD-10-CM
C91.A	Mature B-cell leukemia Burkitt-type	Diagnosis	ICD-10-CM
C91.A0	Mature B-cell leukemia Burkitt-type not having achieved remission	Diagnosis	ICD-10-CM
C91.A1	Mature B-cell leukemia Burkitt-type, in remission	Diagnosis	ICD-10-CM
C91.A2	Mature B-cell leukemia Burkitt-type, in relapse	Diagnosis	ICD-10-CM
C91.Z	Other lymphoid leukemia	Diagnosis	ICD-10-CM
C91.Z0	Other lymphoid leukemia not having achieved remission	Diagnosis	ICD-10-CM
C91.Z1	Other lymphoid leukemia, in remission	Diagnosis	ICD-10-CM
C91.Z2	Other lymphoid leukemia, in relapse	Diagnosis	ICD-10-CM
C92	Myeloid leukemia	Diagnosis	ICD-10-CM
C92.0	Acute myeloblastic leukemia	Diagnosis	ICD-10-CM
C92.00	Acute myeloblastic leukemia, not having achieved remission	Diagnosis	ICD-10-CM
C92.01	Acute myeloblastic leukemia, in remission	Diagnosis	ICD-10-CM
C92.02	Acute myeloblastic leukemia, in relapse	Diagnosis	ICD-10-CM
C92.1	Chronic myeloid leukemia, BCR/ABL-positive	Diagnosis	ICD-10-CM
C92.10	Chronic myeloid leukemia, BCR/ABL-positive, not having achieved remission	Diagnosis	ICD-10-CM
C92.11	Chronic myeloid leukemia, BCR/ABL-positive, in remission	Diagnosis	ICD-10-CM
C92.12	Chronic myeloid leukemia, BCR/ABL-positive, in relapse	Diagnosis	ICD-10-CM
C92.2	Atypical chronic myeloid leukemia, BCR/ABL-negative	Diagnosis	ICD-10-CM
C92.20	Atypical chronic myeloid leukemia, BCR/ABL-negative, not having achieved remission	Diagnosis	ICD-10-CM
C92.21	Atypical chronic myeloid leukemia, BCR/ABL-negative, in remission	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C92.22	Atypical chronic myeloid leukemia, BCR/ABL-negative, in relapse	Diagnosis	ICD-10-CM
C92.3	Myeloid sarcoma	Diagnosis	ICD-10-CM
C92.30	Myeloid sarcoma, not having achieved remission	Diagnosis	ICD-10-CM
C92.31	Myeloid sarcoma, in remission	Diagnosis	ICD-10-CM
C92.32	Myeloid sarcoma, in relapse	Diagnosis	ICD-10-CM
C92.4	Acute promyelocytic leukemia	Diagnosis	ICD-10-CM
C92.40	Acute promyelocytic leukemia, not having achieved remission	Diagnosis	ICD-10-CM
C92.41	Acute promyelocytic leukemia, in remission	Diagnosis	ICD-10-CM
C92.42	Acute promyelocytic leukemia, in relapse	Diagnosis	ICD-10-CM
C92.5	Acute myelomonocytic leukemia	Diagnosis	ICD-10-CM
C92.50	Acute myelomonocytic leukemia, not having achieved remission	Diagnosis	ICD-10-CM
C92.51	Acute myelomonocytic leukemia, in remission	Diagnosis	ICD-10-CM
C92.52	Acute myelomonocytic leukemia, in relapse	Diagnosis	ICD-10-CM
C92.6	Acute myeloid leukemia with 11q23-abnormality	Diagnosis	ICD-10-CM
C92.60	Acute myeloid leukemia with 11q23-abnormality not having achieved remission	Diagnosis	ICD-10-CM
C92.61	Acute myeloid leukemia with 11q23-abnormality in remission	Diagnosis	ICD-10-CM
C92.62	Acute myeloid leukemia with 11q23-abnormality in relapse	Diagnosis	ICD-10-CM
C92.9	Myeloid leukemia, unspecified	Diagnosis	ICD-10-CM
C92.90	Myeloid leukemia, unspecified, not having achieved remission	Diagnosis	ICD-10-CM
C92.91	Myeloid leukemia, unspecified in remission	Diagnosis	ICD-10-CM
C92.92	Myeloid leukemia, unspecified in relapse	Diagnosis	ICD-10-CM
C92.A	Acute myeloid leukemia with multilineage dysplasia	Diagnosis	ICD-10-CM
C92.A0	Acute myeloid leukemia with multilineage dysplasia, not having achieved remission	Diagnosis	ICD-10-CM
C92.A1	Acute myeloid leukemia with multilineage dysplasia, in remission	Diagnosis	ICD-10-CM
C92.A2	Acute myeloid leukemia with multilineage dysplasia, in relapse	Diagnosis	ICD-10-CM
C92.Z	Other myeloid leukemia	Diagnosis	ICD-10-CM
C92.Z0	Other myeloid leukemia not having achieved remission	Diagnosis	ICD-10-CM
C92.Z1	Other myeloid leukemia, in remission	Diagnosis	ICD-10-CM
C92.Z2	Other myeloid leukemia, in relapse	Diagnosis	ICD-10-CM
C93	Monocytic leukemia	Diagnosis	ICD-10-CM
C93.0	Acute monoblastic/monocytic leukemia	Diagnosis	ICD-10-CM
C93.00	Acute monoblastic/monocytic leukemia, not having achieved remission	Diagnosis	ICD-10-CM
C93.01	Acute monoblastic/monocytic leukemia, in remission	Diagnosis	ICD-10-CM
C93.02	Acute monoblastic/monocytic leukemia, in relapse	Diagnosis	ICD-10-CM
C93.1	Chronic myelomonocytic leukemia	Diagnosis	ICD-10-CM
C93.10	Chronic myelomonocytic leukemia not having achieved remission	Diagnosis	ICD-10-CM
C93.11	Chronic myelomonocytic leukemia, in remission	Diagnosis	ICD-10-CM
C93.12	Chronic myelomonocytic leukemia, in relapse	Diagnosis	ICD-10-CM
C93.3	Juvenile myelomonocytic leukemia	Diagnosis	ICD-10-CM
C93.30	Juvenile myelomonocytic leukemia, not having achieved remission	Diagnosis	ICD-10-CM
C93.31	Juvenile myelomonocytic leukemia, in remission	Diagnosis	ICD-10-CM
C93.32	Juvenile myelomonocytic leukemia, in relapse	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C93.9	Monocytic leukemia, unspecified	Diagnosis	ICD-10-CM
C93.90	Monocytic leukemia, unspecified, not having achieved remission	Diagnosis	ICD-10-CM
C93.91	Monocytic leukemia, unspecified in remission	Diagnosis	ICD-10-CM
C93.92	Monocytic leukemia, unspecified in relapse	Diagnosis	ICD-10-CM
C93.Z	Other monocytic leukemia	Diagnosis	ICD-10-CM
C93.Z0	Other monocytic leukemia, not having achieved remission	Diagnosis	ICD-10-CM
C93.Z1	Other monocytic leukemia, in remission	Diagnosis	ICD-10-CM
C93.Z2	Other monocytic leukemia, in relapse	Diagnosis	ICD-10-CM
C94	Other leukemias of specified cell type	Diagnosis	ICD-10-CM
C94.0	Acute erythroid leukemia	Diagnosis	ICD-10-CM
C94.00	Acute erythroid leukemia, not having achieved remission	Diagnosis	ICD-10-CM
C94.01	Acute erythroid leukemia, in remission	Diagnosis	ICD-10-CM
C94.02	Acute erythroid leukemia, in relapse	Diagnosis	ICD-10-CM
C94.2	Acute megakaryoblastic leukemia	Diagnosis	ICD-10-CM
C94.20	Acute megakaryoblastic leukemia not having achieved remission	Diagnosis	ICD-10-CM
C94.21	Acute megakaryoblastic leukemia, in remission	Diagnosis	ICD-10-CM
C94.22	Acute megakaryoblastic leukemia, in relapse	Diagnosis	ICD-10-CM
C94.3	Mast cell leukemia	Diagnosis	ICD-10-CM
C94.30	Mast cell leukemia not having achieved remission	Diagnosis	ICD-10-CM
C94.31	Mast cell leukemia, in remission	Diagnosis	ICD-10-CM
C94.32	Mast cell leukemia, in relapse	Diagnosis	ICD-10-CM
C94.4	Acute panmyelosis with myelofibrosis	Diagnosis	ICD-10-CM
C94.40	Acute panmyelosis with myelofibrosis not having achieved remission	Diagnosis	ICD-10-CM
C94.41	Acute panmyelosis with myelofibrosis, in remission	Diagnosis	ICD-10-CM
C94.42	Acute panmyelosis with myelofibrosis, in relapse	Diagnosis	ICD-10-CM
C94.6	Myelodysplastic disease, not classified	Diagnosis	ICD-10-CM
C94.8	Other specified leukemias	Diagnosis	ICD-10-CM
C94.80	Other specified leukemias not having achieved remission	Diagnosis	ICD-10-CM
C94.81	Other specified leukemias, in remission	Diagnosis	ICD-10-CM
C94.82	Other specified leukemias, in relapse	Diagnosis	ICD-10-CM
C95	Leukemia of unspecified cell type	Diagnosis	ICD-10-CM
C95.0	Acute leukemia of unspecified cell type	Diagnosis	ICD-10-CM
C95.00	Acute leukemia of unspecified cell type not having achieved remission	Diagnosis	ICD-10-CM
C95.01	Acute leukemia of unspecified cell type, in remission	Diagnosis	ICD-10-CM
C95.02	Acute leukemia of unspecified cell type, in relapse	Diagnosis	ICD-10-CM
C95.1	Chronic leukemia of unspecified cell type	Diagnosis	ICD-10-CM
C95.10	Chronic leukemia of unspecified cell type not having achieved remission	Diagnosis	ICD-10-CM
C95.11	Chronic leukemia of unspecified cell type, in remission	Diagnosis	ICD-10-CM
C95.12	Chronic leukemia of unspecified cell type, in relapse	Diagnosis	ICD-10-CM
C95.9	Leukemia, unspecified	Diagnosis	ICD-10-CM
C95.90	Leukemia, unspecified not having achieved remission	Diagnosis	ICD-10-CM
C95.91	Leukemia, unspecified, in remission	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
C95.92	Leukemia, unspecified, in relapse	Diagnosis	ICD-10-CM
C96	Other and unspecified malignant neoplasms of lymphoid, hematopoietic and related tissue	Diagnosis	ICD-10-CM
C96.0	Multifocal and multisystemic (disseminated) Langerhans-cell histiocytosis	Diagnosis	ICD-10-CM
C96.2	Malignant mast cell neoplasm	Diagnosis	ICD-10-CM
C96.20	Malignant mast cell neoplasm, unspecified	Diagnosis	ICD-10-CM
C96.21	Aggressive systemic mastocytosis	Diagnosis	ICD-10-CM
C96.22	Mast cell sarcoma	Diagnosis	ICD-10-CM
C96.29	Other malignant mast cell neoplasm	Diagnosis	ICD-10-CM
C96.4	Sarcoma of dendritic cells (accessory cells)	Diagnosis	ICD-10-CM
C96.5	Multifocal and unisystemic Langerhans-cell histiocytosis	Diagnosis	ICD-10-CM
C96.6	Unifocal Langerhans-cell histiocytosis	Diagnosis	ICD-10-CM
C96.9	Malignant neoplasm of lymphoid, hematopoietic and related tissue, unspecified	Diagnosis	ICD-10-CM
C96.A	Histiocytic sarcoma	Diagnosis	ICD-10-CM
C96.Z	Other specified malignant neoplasms of lymphoid, hematopoietic and related tissue	Diagnosis	ICD-10-CM
D03.0	Melanoma in situ of lip	Diagnosis	ICD-10-CM
D03.10	Melanoma in situ of unspecified eyelid, including canthus	Diagnosis	ICD-10-CM
D03.11	Melanoma in situ of right eyelid, including canthus	Diagnosis	ICD-10-CM
D03.12	Melanoma in situ of left eyelid, including canthus	Diagnosis	ICD-10-CM
D03.20	Melanoma in situ of unspecified ear and external auricular canal	Diagnosis	ICD-10-CM
D03.21	Melanoma in situ of right ear and external auricular canal	Diagnosis	ICD-10-CM
D03.22	Melanoma in situ of left ear and external auricular canal	Diagnosis	ICD-10-CM
D03.30	Melanoma in situ of unspecified part of face	Diagnosis	ICD-10-CM
D03.39	Melanoma in situ of other parts of face	Diagnosis	ICD-10-CM
D03.4	Melanoma in situ of scalp and neck	Diagnosis	ICD-10-CM
D03.51	Melanoma in situ of anal skin	Diagnosis	ICD-10-CM
D03.52	Melanoma in situ of breast (skin) (soft tissue)	Diagnosis	ICD-10-CM
D03.59	Melanoma in situ of other part of trunk	Diagnosis	ICD-10-CM
D03.60	Melanoma in situ of unspecified upper limb, including shoulder	Diagnosis	ICD-10-CM
D03.61	Melanoma in situ of right upper limb, including shoulder	Diagnosis	ICD-10-CM
D03.62	Melanoma in situ of left upper limb, including shoulder	Diagnosis	ICD-10-CM
D03.70	Melanoma in situ of unspecified lower limb, including hip	Diagnosis	ICD-10-CM
D03.71	Melanoma in situ of right lower limb, including hip	Diagnosis	ICD-10-CM
D03.72	Melanoma in situ of left lower limb, including hip	Diagnosis	ICD-10-CM
D03.8	Melanoma in situ of other sites	Diagnosis	ICD-10-CM
D03.9	Melanoma in situ, unspecified	Diagnosis	ICD-10-CM
D45	Polycythemia vera	Diagnosis	ICD-10-CM
O9A.1	Malignant neoplasm complicating pregnancy, childbirth and the puerperium	Diagnosis	ICD-10-CM
O9A.11	Malignant neoplasm complicating pregnancy	Diagnosis	ICD-10-CM
O9A.111	Malignant neoplasm complicating pregnancy, first trimester	Diagnosis	ICD-10-CM
O9A.112	Malignant neoplasm complicating pregnancy, second trimester	Diagnosis	ICD-10-CM
O9A.113	Malignant neoplasm complicating pregnancy, third trimester	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
09A.119	Malignant neoplasm complicating pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
09A.12	Malignant neoplasm complicating childbirth	Diagnosis	ICD-10-CM
09A.13	Malignant neoplasm complicating the puerperium	Diagnosis	ICD-10-CM
R97.21	Rising PSA following treatment for malignant neoplasm of prostate	Diagnosis	ICD-10-CM
Diabetes Mellitus			
249.00	Secondary diabetes mellitus without mention of complication, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.01	Secondary diabetes mellitus without mention of complication, uncontrolled	Diagnosis	ICD-9-CM
249.10	Secondary diabetes mellitus with ketoacidosis, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.11	Secondary diabetes mellitus with ketoacidosis, uncontrolled	Diagnosis	ICD-9-CM
249.20	Secondary diabetes mellitus with hyperosmolarity, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.21	Secondary diabetes mellitus with hyperosmolarity, uncontrolled	Diagnosis	ICD-9-CM
249.30	Secondary diabetes mellitus with other coma, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.31	Secondary diabetes mellitus with other coma, uncontrolled	Diagnosis	ICD-9-CM
249.40	Secondary diabetes mellitus with renal manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.41	Secondary diabetes mellitus with renal manifestations, uncontrolled	Diagnosis	ICD-9-CM
249.50	Secondary diabetes mellitus with ophthalmic manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.51	Secondary diabetes mellitus with ophthalmic manifestations, uncontrolled	Diagnosis	ICD-9-CM
249.60	Secondary diabetes mellitus with neurological manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.61	Secondary diabetes mellitus with neurological manifestations, uncontrolled	Diagnosis	ICD-9-CM
249.70	Secondary diabetes mellitus with peripheral circulatory disorders, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.71	Secondary diabetes mellitus with peripheral circulatory disorders, uncontrolled	Diagnosis	ICD-9-CM
249.80	Secondary diabetes mellitus with other specified manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.81	Secondary diabetes mellitus with other specified manifestations, uncontrolled	Diagnosis	ICD-9-CM
249.90	Secondary diabetes mellitus with unspecified complication, not stated as uncontrolled, or unspecified	Diagnosis	ICD-9-CM
249.91	Secondary diabetes mellitus with unspecified complication, uncontrolled	Diagnosis	ICD-9-CM
250.00	Diabetes mellitus without mention of complication, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.01	Diabetes mellitus without mention of complication, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.02	Diabetes mellitus without mention of complication, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
250.03	Diabetes mellitus without mention of complication, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.10	Diabetes with ketoacidosis, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.11	Diabetes with ketoacidosis, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.12	Diabetes with ketoacidosis, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.13	Diabetes with ketoacidosis, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.20	Diabetes with hyperosmolarity, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.21	Diabetes with hyperosmolarity, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.22	Diabetes with hyperosmolarity, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.23	Diabetes with hyperosmolarity, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.30	Diabetes with other coma, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.31	Diabetes with other coma, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.32	Diabetes with other coma, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.33	Diabetes with other coma, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.40	Diabetes with renal manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.41	Diabetes with renal manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.42	Diabetes with renal manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.43	Diabetes with renal manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.50	Diabetes with ophthalmic manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.51	Diabetes with ophthalmic manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.52	Diabetes with ophthalmic manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.53	Diabetes with ophthalmic manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.60	Diabetes with neurological manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.61	Diabetes with neurological manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.62	Diabetes with neurological manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.63	Diabetes with neurological manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.70	Diabetes with peripheral circulatory disorders, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.71	Diabetes with peripheral circulatory disorders, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.72	Diabetes with peripheral circulatory disorders, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.73	Diabetes with peripheral circulatory disorders, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.80	Diabetes with other specified manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
250.81	Diabetes with other specified manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.82	Diabetes with other specified manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.83	Diabetes with other specified manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
250.90	Diabetes with unspecified complication, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-9-CM
250.91	Diabetes with unspecified complication, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-9-CM
250.92	Diabetes with unspecified complication, type II or unspecified type, uncontrolled	Diagnosis	ICD-9-CM
250.93	Diabetes with unspecified complication, type I [juvenile type], uncontrolled	Diagnosis	ICD-9-CM
251.1	Other specified hypoglycemia	Diagnosis	ICD-9-CM
353.5	Neuralgic amyotrophy	Diagnosis	ICD-9-CM
355.9	Mononeuritis of unspecified site	Diagnosis	ICD-9-CM
357.2	Polyneuropathy in diabetes	Diagnosis	ICD-9-CM
362.01	Background diabetic retinopathy	Diagnosis	ICD-9-CM
362.02	Proliferative diabetic retinopathy	Diagnosis	ICD-9-CM
362.03	Nonproliferative diabetic retinopathy NOS	Diagnosis	ICD-9-CM
362.04	Mild nonproliferative diabetic retinopathy	Diagnosis	ICD-9-CM
362.05	Moderate nonproliferative diabetic retinopathy	Diagnosis	ICD-9-CM
362.06	Severe nonproliferative diabetic retinopathy	Diagnosis	ICD-9-CM
362.07	Diabetic macular edema	Diagnosis	ICD-9-CM
366.41	Diabetic cataract	Diagnosis	ICD-9-CM
648.00	Maternal diabetes mellitus, complicating pregnancy, childbirth, or the puerperium, unspecified as to episode of care	Diagnosis	ICD-9-CM
648.01	Maternal diabetes mellitus with delivery	Diagnosis	ICD-9-CM
648.02	Maternal diabetes mellitus with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
648.03	Maternal diabetes mellitus, antepartum	Diagnosis	ICD-9-CM
648.04	Maternal diabetes mellitus, complicating pregnancy, childbirth, or the puerperium, postpartum condition or complication	Diagnosis	ICD-9-CM
648.81	Abnormal maternal glucose tolerance, with delivery	Diagnosis	ICD-9-CM
648.82	Abnormal maternal glucose tolerance, with delivery, with current postpartum complication	Diagnosis	ICD-9-CM
648.83	Abnormal maternal glucose tolerance, antepartum	Diagnosis	ICD-9-CM
648.84	Abnormal maternal glucose tolerance complicating pregnancy, childbirth, or the puerperium, postpartum condition or complication	Diagnosis	ICD-9-CM
E08	Diabetes mellitus due to underlying condition	Diagnosis	ICD-10-CM
E08.0	Diabetes mellitus due to underlying condition with hyperosmolarity	Diagnosis	ICD-10-CM
E08.00	Diabetes mellitus due to underlying condition with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	Diagnosis	ICD-10-CM
E08.01	Diabetes mellitus due to underlying condition with hyperosmolarity with coma	Diagnosis	ICD-10-CM
E08.1	Diabetes mellitus due to underlying condition with ketoacidosis	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E08.10	Diabetes mellitus due to underlying condition with ketoacidosis without coma	Diagnosis	ICD-10-CM
E08.11	Diabetes mellitus due to underlying condition with ketoacidosis with coma	Diagnosis	ICD-10-CM
E08.2	Diabetes mellitus due to underlying condition with kidney complications	Diagnosis	ICD-10-CM
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy	Diagnosis	ICD-10-CM
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication	Diagnosis	ICD-10-CM
E08.3	Diabetes mellitus due to underlying condition with ophthalmic complications	Diagnosis	ICD-10-CM
E08.31	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy	Diagnosis	ICD-10-CM
E08.311	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E08.319	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E08.32	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E08.321	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E08.3211	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E08.3212	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E08.3213	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3219	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.329	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E08.3291	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E08.3292	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E08.3293	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3299	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.33	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E08.331	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E08.3311	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E08.3312	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E08.3313	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3319	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.339	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E08.3391	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E08.3392	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E08.3393	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3399	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.34	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E08.341	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E08.3411	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E08.3412	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E08.3413	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3419	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.349	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E08.3491	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E08.3492	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E08.3493	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3499	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.35	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E08.351	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E08.3511	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E08.3512	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E08.3513	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3519	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.352	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula	Diagnosis	ICD-10-CM
E08.3521	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM
E08.3522	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E08.3523	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E08.3529	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E08.353	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula	Diagnosis	ICD-10-CM
E08.3531	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E08.3532	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E08.3533	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E08.3539	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E08.354	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment	Diagnosis	ICD-10-CM
E08.3541	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM
E08.3542	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E08.3543	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E08.3549	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E08.355	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E08.3551	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E08.3552	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E08.3553	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E08.3559	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM
E08.359	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E08.3591	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E08.3592	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E08.3593	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3599	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.36	Diabetes mellitus due to underlying condition with diabetic cataract	Diagnosis	ICD-10-CM
E08.37	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment	Diagnosis	ICD-10-CM
E08.37X1	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E08.37X2	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E08.37X3	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM
E08.37X9	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM
E08.39	Diabetes mellitus due to underlying condition with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E08.4	Diabetes mellitus due to underlying condition with neurological complications	Diagnosis	ICD-10-CM
E08.40	Diabetes mellitus due to underlying condition with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E08.41	Diabetes mellitus due to underlying condition with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E08.42	Diabetes mellitus due to underlying condition with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E08.43	Diabetes mellitus due to underlying condition with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E08.44	Diabetes mellitus due to underlying condition with diabetic amyotrophy	Diagnosis	ICD-10-CM
E08.49	Diabetes mellitus due to underlying condition with other diabetic neurological complication	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E08.5	Diabetes mellitus due to underlying condition with circulatory complications	Diagnosis	ICD-10-CM
E08.51	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E08.52	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E08.59	Diabetes mellitus due to underlying condition with other circulatory complications	Diagnosis	ICD-10-CM
E08.6	Diabetes mellitus due to underlying condition with other specified complications	Diagnosis	ICD-10-CM
E08.61	Diabetes mellitus due to underlying condition with diabetic arthropathy	Diagnosis	ICD-10-CM
E08.610	Diabetes mellitus due to underlying condition with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E08.618	Diabetes mellitus due to underlying condition with other diabetic arthropathy	Diagnosis	ICD-10-CM
E08.62	Diabetes mellitus due to underlying condition with skin complications	Diagnosis	ICD-10-CM
E08.620	Diabetes mellitus due to underlying condition with diabetic dermatitis	Diagnosis	ICD-10-CM
E08.621	Diabetes mellitus due to underlying condition with foot ulcer	Diagnosis	ICD-10-CM
E08.622	Diabetes mellitus due to underlying condition with other skin ulcer	Diagnosis	ICD-10-CM
E08.628	Diabetes mellitus due to underlying condition with other skin complications	Diagnosis	ICD-10-CM
E08.63	Diabetes mellitus due to underlying condition with oral complications	Diagnosis	ICD-10-CM
E08.630	Diabetes mellitus due to underlying condition with periodontal disease	Diagnosis	ICD-10-CM
E08.638	Diabetes mellitus due to underlying condition with other oral complications	Diagnosis	ICD-10-CM
E08.64	Diabetes mellitus due to underlying condition with hypoglycemia	Diagnosis	ICD-10-CM
E08.641	Diabetes mellitus due to underlying condition with hypoglycemia with coma	Diagnosis	ICD-10-CM
E08.649	Diabetes mellitus due to underlying condition with hypoglycemia without coma	Diagnosis	ICD-10-CM
E08.65	Diabetes mellitus due to underlying condition with hyperglycemia	Diagnosis	ICD-10-CM
E08.69	Diabetes mellitus due to underlying condition with other specified complication	Diagnosis	ICD-10-CM
E08.8	Diabetes mellitus due to underlying condition with unspecified complications	Diagnosis	ICD-10-CM
E08.9	Diabetes mellitus due to underlying condition without complications	Diagnosis	ICD-10-CM
E09	Drug or chemical induced diabetes mellitus	Diagnosis	ICD-10-CM
E09.0	Drug or chemical induced diabetes mellitus with hyperosmolarity	Diagnosis	ICD-10-CM
E09.00	Drug or chemical induced diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	Diagnosis	ICD-10-CM
E09.01	Drug or chemical induced diabetes mellitus with hyperosmolarity with coma	Diagnosis	ICD-10-CM
E09.1	Drug or chemical induced diabetes mellitus with ketoacidosis	Diagnosis	ICD-10-CM
E09.10	Drug or chemical induced diabetes mellitus with ketoacidosis without coma	Diagnosis	ICD-10-CM
E09.11	Drug or chemical induced diabetes mellitus with ketoacidosis with coma	Diagnosis	ICD-10-CM
E09.2	Drug or chemical induced diabetes mellitus with kidney complications	Diagnosis	ICD-10-CM
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E09.3	Drug or chemical induced diabetes mellitus with ophthalmic complications	Diagnosis	ICD-10-CM
E09.31	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy	Diagnosis	ICD-10-CM
E09.311	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E09.319	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.32	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E09.321	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.3211	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E09.3212	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E09.3213	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3219	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.329	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.3291	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E09.3292	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E09.3293	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3299	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.33	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E09.331	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.3311	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E09.3312	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E09.3313	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3319	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.339	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.3391	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E09.3392	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E09.3393	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3399	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.34	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E09.341	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.3411	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E09.3412	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E09.3413	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3419	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.349	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.3491	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E09.3492	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E09.3493	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3499	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.35	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E09.351	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.3511	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E09.3512	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E09.3513	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3519	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.352	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula	Diagnosis	ICD-10-CM
E09.3521	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E09.3522	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E09.3523	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E09.3529	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E09.353	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula	Diagnosis	ICD-10-CM
E09.3531	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E09.3532	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E09.3533	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E09.3539	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E09.354	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment	Diagnosis	ICD-10-CM
E09.3541	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM
E09.3542	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E09.3543	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E09.3549	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	Diagnosis	ICD-10-CM
E09.355	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E09.3551	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E09.3552	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E09.3553	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E09.3559	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM
E09.359	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E09.3591	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E09.3592	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E09.3593	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3599	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.36	Drug or chemical induced diabetes mellitus with diabetic cataract	Diagnosis	ICD-10-CM
E09.37	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment	Diagnosis	ICD-10-CM
E09.37X1	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E09.37X2	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E09.37X3	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM
E09.37X9	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM
E09.39	Drug or chemical induced diabetes mellitus with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E09.4	Drug or chemical induced diabetes mellitus with neurological complications	Diagnosis	ICD-10-CM
E09.40	Drug or chemical induced diabetes mellitus with neurological complications with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E09.41	Drug or chemical induced diabetes mellitus with neurological complications with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E09.42	Drug or chemical induced diabetes mellitus with neurological complications with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E09.43	Drug or chemical induced diabetes mellitus with neurological complications with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E09.44	Drug or chemical induced diabetes mellitus with neurological complications with diabetic amyotrophy	Diagnosis	ICD-10-CM
E09.49	Drug or chemical induced diabetes mellitus with neurological complications with other diabetic neurological complication	Diagnosis	ICD-10-CM
E09.5	Drug or chemical induced diabetes mellitus with circulatory complications	Diagnosis	ICD-10-CM
E09.51	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E09.52	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E09.59	Drug or chemical induced diabetes mellitus with other circulatory complications	Diagnosis	ICD-10-CM
E09.6	Drug or chemical induced diabetes mellitus with other specified complications	Diagnosis	ICD-10-CM
E09.61	Drug or chemical induced diabetes mellitus with diabetic arthropathy	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E09.610	Drug or chemical induced diabetes mellitus with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E09.618	Drug or chemical induced diabetes mellitus with other diabetic arthropathy	Diagnosis	ICD-10-CM
E09.62	Drug or chemical induced diabetes mellitus with skin complications	Diagnosis	ICD-10-CM
E09.620	Drug or chemical induced diabetes mellitus with diabetic dermatitis	Diagnosis	ICD-10-CM
E09.621	Drug or chemical induced diabetes mellitus with foot ulcer	Diagnosis	ICD-10-CM
E09.622	Drug or chemical induced diabetes mellitus with other skin ulcer	Diagnosis	ICD-10-CM
E09.628	Drug or chemical induced diabetes mellitus with other skin complications	Diagnosis	ICD-10-CM
E09.63	Drug or chemical induced diabetes mellitus with oral complications	Diagnosis	ICD-10-CM
E09.630	Drug or chemical induced diabetes mellitus with periodontal disease	Diagnosis	ICD-10-CM
E09.638	Drug or chemical induced diabetes mellitus with other oral complications	Diagnosis	ICD-10-CM
E09.64	Drug or chemical induced diabetes mellitus with hypoglycemia	Diagnosis	ICD-10-CM
E09.641	Drug or chemical induced diabetes mellitus with hypoglycemia with coma	Diagnosis	ICD-10-CM
E09.649	Drug or chemical induced diabetes mellitus with hypoglycemia without coma	Diagnosis	ICD-10-CM
E09.65	Drug or chemical induced diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E09.69	Drug or chemical induced diabetes mellitus with other specified complication	Diagnosis	ICD-10-CM
E09.8	Drug or chemical induced diabetes mellitus with unspecified complications	Diagnosis	ICD-10-CM
E09.9	Drug or chemical induced diabetes mellitus without complications	Diagnosis	ICD-10-CM
E10.1	Type 1 diabetes mellitus with ketoacidosis	Diagnosis	ICD-10-CM
E10.10	Type 1 diabetes mellitus with ketoacidosis without coma	Diagnosis	ICD-10-CM
E10.11	Type 1 diabetes mellitus with ketoacidosis with coma	Diagnosis	ICD-10-CM
E10.2	Type 1 diabetes mellitus with kidney complications	Diagnosis	ICD-10-CM
E10.21	Type 1 diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E10.3	Type 1 diabetes mellitus with ophthalmic complications	Diagnosis	ICD-10-CM
E10.31	Type 1 diabetes mellitus with unspecified diabetic retinopathy	Diagnosis	ICD-10-CM
E10.311	Type 1 diabetes mellitus with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.319	Type 1 diabetes mellitus with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.32	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E10.321	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.3211	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E10.3212	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E10.3213	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3219	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.329	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E10.3291	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E10.3292	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E10.3293	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3299	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.33	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E10.331	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.3311	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E10.3312	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E10.3313	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3319	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.339	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.3391	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E10.3392	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E10.3393	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3399	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.34	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E10.341	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.3411	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E10.3412	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E10.3413	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3419	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.349	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E10.3491	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E10.3492	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E10.3493	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3499	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.35	Type 1 diabetes mellitus with proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E10.351	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.3511	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E10.3512	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E10.3513	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3519	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.352	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula	Diagnosis	ICD-10-CM
E10.3521	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM
E10.3522	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E10.3523	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E10.3529	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E10.353	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula	Diagnosis	ICD-10-CM
E10.3531	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E10.3532	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E10.3533	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E10.3539	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E10.354	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment	Diagnosis	ICD-10-CM
E10.3541	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E10.3542	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E10.3543	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E10.3549	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified	Diagnosis	ICD-10-CM
E10.355	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E10.3551	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E10.3552	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E10.3553	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E10.3559	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM
E10.359	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.3591	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E10.3592	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E10.3593	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3599	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.36	Type 1 diabetes mellitus with diabetic cataract	Diagnosis	ICD-10-CM
E10.37	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment	Diagnosis	ICD-10-CM
E10.37X1	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E10.37X2	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E10.37X3	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM
E10.37X9	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM
E10.39	Type 1 diabetes mellitus with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E10.4	Type 1 diabetes mellitus with neurological complications	Diagnosis	ICD-10-CM
E10.40	Type 1 diabetes mellitus with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E10.41	Type 1 diabetes mellitus with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E10.42	Type 1 diabetes mellitus with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E10.43	Type 1 diabetes mellitus with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E10.44	Type 1 diabetes mellitus with diabetic amyotrophy	Diagnosis	ICD-10-CM
E10.49	Type 1 diabetes mellitus with other diabetic neurological complication	Diagnosis	ICD-10-CM
E10.5	Type 1 diabetes mellitus with circulatory complications	Diagnosis	ICD-10-CM
E10.51	Type 1 diabetes mellitus with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E10.52	Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E10.59	Type 1 diabetes mellitus with other circulatory complications	Diagnosis	ICD-10-CM
E10.6	Type 1 diabetes mellitus with other specified complications	Diagnosis	ICD-10-CM
E10.61	Type 1 diabetes mellitus with diabetic arthropathy	Diagnosis	ICD-10-CM
E10.610	Type 1 diabetes mellitus with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E10.618	Type 1 diabetes mellitus with other diabetic arthropathy	Diagnosis	ICD-10-CM
E10.62	Type 1 diabetes mellitus with skin complications	Diagnosis	ICD-10-CM
E10.620	Type 1 diabetes mellitus with diabetic dermatitis	Diagnosis	ICD-10-CM
E10.621	Type 1 diabetes mellitus with foot ulcer	Diagnosis	ICD-10-CM
E10.622	Type 1 diabetes mellitus with other skin ulcer	Diagnosis	ICD-10-CM
E10.628	Type 1 diabetes mellitus with other skin complications	Diagnosis	ICD-10-CM
E10.63	Type 1 diabetes mellitus with oral complications	Diagnosis	ICD-10-CM
E10.630	Type 1 diabetes mellitus with periodontal disease	Diagnosis	ICD-10-CM
E10.638	Type 1 diabetes mellitus with other oral complications	Diagnosis	ICD-10-CM
E10.64	Type 1 diabetes mellitus with hypoglycemia	Diagnosis	ICD-10-CM
E10.641	Type 1 diabetes mellitus with hypoglycemia with coma	Diagnosis	ICD-10-CM
E10.649	Type 1 diabetes mellitus with hypoglycemia without coma	Diagnosis	ICD-10-CM
E10.65	Type 1 diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E10.69	Type 1 diabetes mellitus with other specified complication	Diagnosis	ICD-10-CM
E10.8	Type 1 diabetes mellitus with unspecified complications	Diagnosis	ICD-10-CM
E10.9	Type 1 diabetes mellitus without complications	Diagnosis	ICD-10-CM
E11.0	Type 2 diabetes mellitus with hyperosmolarity	Diagnosis	ICD-10-CM
E11.00	Type 2 diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	Diagnosis	ICD-10-CM
E11.01	Type 2 diabetes mellitus with hyperosmolarity with coma	Diagnosis	ICD-10-CM
E11.1	Type 2 diabetes mellitus with ketoacidosis	Diagnosis	ICD-10-CM
E11.10	Type 2 diabetes mellitus with ketoacidosis without coma	Diagnosis	ICD-10-CM
E11.11	Type 2 diabetes mellitus with ketoacidosis with coma	Diagnosis	ICD-10-CM
E11.2	Type 2 diabetes mellitus with kidney complications	Diagnosis	ICD-10-CM
E11.21	Type 2 diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E11.3	Type 2 diabetes mellitus with ophthalmic complications	Diagnosis	ICD-10-CM
E11.31	Type 2 diabetes mellitus with unspecified diabetic retinopathy	Diagnosis	ICD-10-CM
E11.311	Type 2 diabetes mellitus with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E11.319	Type 2 diabetes mellitus with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.32	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E11.321	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E11.3211	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E11.3212	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E11.3213	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3219	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.329	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.3291	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E11.3292	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E11.3293	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3299	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.33	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E11.331	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E11.3311	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E11.3312	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E11.3313	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3319	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.339	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.3391	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E11.3392	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E11.3393	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3399	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.34	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E11.341	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E11.3411	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E11.3412	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E11.3413	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3419	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.349	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.3491	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E11.3492	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E11.3493	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3499	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.35	Type 2 diabetes mellitus with proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E11.351	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E11.3511	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E11.3512	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E11.3513	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3519	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.352	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula	Diagnosis	ICD-10-CM
E11.3521	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM
E11.3522	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E11.3523	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E11.3529	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E11.353	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula	Diagnosis	ICD-10-CM
E11.3531	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E11.3532	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E11.3533	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E11.3539	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E11.354	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment	Diagnosis	ICD-10-CM
E11.3541	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM
E11.3542	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E11.3543	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E11.3549	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified	Diagnosis	ICD-10-CM
E11.355	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E11.3551	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E11.3552	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E11.3553	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E11.3559	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM
E11.359	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.3591	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E11.3592	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E11.3593	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3599	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.36	Type 2 diabetes mellitus with diabetic cataract	Diagnosis	ICD-10-CM
E11.37	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment	Diagnosis	ICD-10-CM
E11.37X1	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E11.37X2	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E11.37X3	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM
E11.37X9	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM
E11.39	Type 2 diabetes mellitus with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E11.4	Type 2 diabetes mellitus with neurological complications	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E11.40	Type 2 diabetes mellitus with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E11.41	Type 2 diabetes mellitus with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E11.42	Type 2 diabetes mellitus with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E11.43	Type 2 diabetes mellitus with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E11.44	Type 2 diabetes mellitus with diabetic amyotrophy	Diagnosis	ICD-10-CM
E11.49	Type 2 diabetes mellitus with other diabetic neurological complication	Diagnosis	ICD-10-CM
E11.5	Type 2 diabetes mellitus with circulatory complications	Diagnosis	ICD-10-CM
E11.51	Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E11.52	Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E11.59	Type 2 diabetes mellitus with other circulatory complications	Diagnosis	ICD-10-CM
E11.6	Type 2 diabetes mellitus with other specified complications	Diagnosis	ICD-10-CM
E11.61	Type 2 diabetes mellitus with diabetic arthropathy	Diagnosis	ICD-10-CM
E11.610	Type 2 diabetes mellitus with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E11.618	Type 2 diabetes mellitus with other diabetic arthropathy	Diagnosis	ICD-10-CM
E11.62	Type 2 diabetes mellitus with skin complications	Diagnosis	ICD-10-CM
E11.620	Type 2 diabetes mellitus with diabetic dermatitis	Diagnosis	ICD-10-CM
E11.621	Type 2 diabetes mellitus with foot ulcer	Diagnosis	ICD-10-CM
E11.622	Type 2 diabetes mellitus with other skin ulcer	Diagnosis	ICD-10-CM
E11.628	Type 2 diabetes mellitus with other skin complications	Diagnosis	ICD-10-CM
E11.63	Type 2 diabetes mellitus with oral complications	Diagnosis	ICD-10-CM
E11.630	Type 2 diabetes mellitus with periodontal disease	Diagnosis	ICD-10-CM
E11.638	Type 2 diabetes mellitus with other oral complications	Diagnosis	ICD-10-CM
E11.64	Type 2 diabetes mellitus with hypoglycemia	Diagnosis	ICD-10-CM
E11.641	Type 2 diabetes mellitus with hypoglycemia with coma	Diagnosis	ICD-10-CM
E11.649	Type 2 diabetes mellitus with hypoglycemia without coma	Diagnosis	ICD-10-CM
E11.65	Type 2 diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E11.69	Type 2 diabetes mellitus with other specified complication	Diagnosis	ICD-10-CM
E11.8	Type 2 diabetes mellitus with unspecified complications	Diagnosis	ICD-10-CM
E11.9	Type 2 diabetes mellitus without complications	Diagnosis	ICD-10-CM
E13.0	Other specified diabetes mellitus with hyperosmolarity	Diagnosis	ICD-10-CM
E13.00	Other specified diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	Diagnosis	ICD-10-CM
E13.01	Other specified diabetes mellitus with hyperosmolarity with coma	Diagnosis	ICD-10-CM
E13.1	Other specified diabetes mellitus with ketoacidosis	Diagnosis	ICD-10-CM
E13.10	Other specified diabetes mellitus with ketoacidosis without coma	Diagnosis	ICD-10-CM
E13.11	Other specified diabetes mellitus with ketoacidosis with coma	Diagnosis	ICD-10-CM
E13.2	Other specified diabetes mellitus with kidney complications	Diagnosis	ICD-10-CM
E13.21	Other specified diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E13.29	Other specified diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E13.3	Other specified diabetes mellitus with ophthalmic complications	Diagnosis	ICD-10-CM
E13.31	Other specified diabetes mellitus with unspecified diabetic retinopathy	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E13.311	Other specified diabetes mellitus with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.319	Other specified diabetes mellitus with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.32	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E13.321	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.3211	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E13.3212	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E13.3213	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3219	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.329	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.3291	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E13.3292	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E13.3293	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3299	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.33	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E13.331	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.3311	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E13.3312	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E13.3313	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3319	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.339	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.3391	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E13.3392	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E13.3393	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3399	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.34	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E13.341	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.3411	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E13.3412	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E13.3413	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3419	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.349	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.3491	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E13.3492	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E13.3493	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3499	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.35	Other specified diabetes mellitus with proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E13.351	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.3511	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E13.3512	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E13.3513	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3519	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.352	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula	Diagnosis	ICD-10-CM
E13.3521	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E13.3522	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E13.3523	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E13.3529	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E13.353	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula	Diagnosis	ICD-10-CM
E13.3531	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E13.3532	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E13.3533	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E13.3539	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E13.354	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment	Diagnosis	ICD-10-CM
E13.3541	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM
E13.3542	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E13.3543	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E13.3549	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	Diagnosis	ICD-10-CM
E13.355	Other specified diabetes mellitus with stable proliferative diabetic retinopathy	Diagnosis	ICD-10-CM
E13.3551	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E13.3552	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E13.3553	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E13.3559	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM
E13.359	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E13.3591	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E13.3592	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E13.3593	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3599	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.36	Other specified diabetes mellitus with diabetic cataract	Diagnosis	ICD-10-CM
E13.37	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment	Diagnosis	ICD-10-CM
E13.37X1	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E13.37X2	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E13.37X3	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM
E13.37X9	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM
E13.39	Other specified diabetes mellitus with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E13.4	Other specified diabetes mellitus with neurological complications	Diagnosis	ICD-10-CM
E13.40	Other specified diabetes mellitus with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E13.41	Other specified diabetes mellitus with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E13.42	Other specified diabetes mellitus with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E13.43	Other specified diabetes mellitus with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E13.44	Other specified diabetes mellitus with diabetic amyotrophy	Diagnosis	ICD-10-CM
E13.49	Other specified diabetes mellitus with other diabetic neurological complication	Diagnosis	ICD-10-CM
E13.5	Other specified diabetes mellitus with circulatory complications	Diagnosis	ICD-10-CM
E13.51	Other specified diabetes mellitus with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E13.52	Other specified diabetes mellitus with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E13.59	Other specified diabetes mellitus with other circulatory complications	Diagnosis	ICD-10-CM
E13.6	Other specified diabetes mellitus with other specified complications	Diagnosis	ICD-10-CM
E13.61	Other specified diabetes mellitus with diabetic arthropathy	Diagnosis	ICD-10-CM
E13.610	Other specified diabetes mellitus with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E13.618	Other specified diabetes mellitus with other diabetic arthropathy	Diagnosis	ICD-10-CM
E13.62	Other specified diabetes mellitus with skin complications	Diagnosis	ICD-10-CM
E13.620	Other specified diabetes mellitus with diabetic dermatitis	Diagnosis	ICD-10-CM
E13.621	Other specified diabetes mellitus with foot ulcer	Diagnosis	ICD-10-CM
E13.622	Other specified diabetes mellitus with other skin ulcer	Diagnosis	ICD-10-CM
E13.628	Other specified diabetes mellitus with other skin complications	Diagnosis	ICD-10-CM
E13.63	Other specified diabetes mellitus with oral complications	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
E13.630	Other specified diabetes mellitus with periodontal disease	Diagnosis	ICD-10-CM
E13.638	Other specified diabetes mellitus with other oral complications	Diagnosis	ICD-10-CM
E13.64	Other specified diabetes mellitus with hypoglycemia	Diagnosis	ICD-10-CM
E13.641	Other specified diabetes mellitus with hypoglycemia with coma	Diagnosis	ICD-10-CM
E13.649	Other specified diabetes mellitus with hypoglycemia without coma	Diagnosis	ICD-10-CM
E13.65	Other specified diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E13.69	Other specified diabetes mellitus with other specified complication	Diagnosis	ICD-10-CM
E13.8	Other specified diabetes mellitus with unspecified complications	Diagnosis	ICD-10-CM
E13.9	Other specified diabetes mellitus without complications	Diagnosis	ICD-10-CM
O24.0	Pre-existing type 1 diabetes mellitus, in pregnancy, childbirth and the puerperium	Diagnosis	ICD-10-CM
O24.01	Pre-existing type 1 diabetes mellitus, in pregnancy	Diagnosis	ICD-10-CM
O24.011	Pre-existing type 1 diabetes mellitus, in pregnancy, first trimester	Diagnosis	ICD-10-CM
O24.012	Pre-existing type 1 diabetes mellitus, in pregnancy, second trimester	Diagnosis	ICD-10-CM
O24.013	Pre-existing type 1 diabetes mellitus, in pregnancy, third trimester	Diagnosis	ICD-10-CM
O24.019	Pre-existing type 1 diabetes mellitus, in pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O24.02	Pre-existing type 1 diabetes mellitus, in childbirth	Diagnosis	ICD-10-CM
O24.03	Pre-existing type 1 diabetes mellitus, in the puerperium	Diagnosis	ICD-10-CM
O24.1	Pre-existing type 2 diabetes mellitus, in pregnancy, childbirth and the puerperium	Diagnosis	ICD-10-CM
O24.11	Pre-existing type 2 diabetes mellitus, in pregnancy	Diagnosis	ICD-10-CM
O24.111	Pre-existing type 2 diabetes mellitus, in pregnancy, first trimester	Diagnosis	ICD-10-CM
O24.112	Pre-existing type 2 diabetes mellitus, in pregnancy, second trimester	Diagnosis	ICD-10-CM
O24.113	Pre-existing type 2 diabetes mellitus, in pregnancy, third trimester	Diagnosis	ICD-10-CM
O24.119	Pre-existing type 2 diabetes mellitus, in pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O24.12	Pre-existing type 2 diabetes mellitus, in childbirth	Diagnosis	ICD-10-CM
O24.13	Pre-existing type 2 diabetes mellitus, in the puerperium	Diagnosis	ICD-10-CM
O24.3	Unspecified pre-existing diabetes mellitus in pregnancy, childbirth and the puerperium	Diagnosis	ICD-10-CM
O24.31	Unspecified pre-existing diabetes mellitus in pregnancy	Diagnosis	ICD-10-CM
O24.311	Unspecified pre-existing diabetes mellitus in pregnancy, first trimester	Diagnosis	ICD-10-CM
O24.312	Unspecified pre-existing diabetes mellitus in pregnancy, second trimester	Diagnosis	ICD-10-CM
O24.313	Unspecified pre-existing diabetes mellitus in pregnancy, third trimester	Diagnosis	ICD-10-CM
O24.319	Unspecified pre-existing diabetes mellitus in pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O24.32	Unspecified pre-existing diabetes mellitus in childbirth	Diagnosis	ICD-10-CM
O24.33	Unspecified pre-existing diabetes mellitus in the puerperium	Diagnosis	ICD-10-CM
O24.41	Gestational diabetes mellitus in pregnancy	Diagnosis	ICD-10-CM
O24.410	Gestational diabetes mellitus in pregnancy, diet controlled	Diagnosis	ICD-10-CM
O24.414	Gestational diabetes mellitus in pregnancy, insulin controlled	Diagnosis	ICD-10-CM
O24.415	Gestational diabetes mellitus in pregnancy, controlled by oral hypoglycemic drugs	Diagnosis	ICD-10-CM
O24.419	Gestational diabetes mellitus in pregnancy, unspecified control	Diagnosis	ICD-10-CM
O24.42	Gestational diabetes mellitus in childbirth	Diagnosis	ICD-10-CM
O24.420	Gestational diabetes mellitus in childbirth, diet controlled	Diagnosis	ICD-10-CM
O24.424	Gestational diabetes mellitus in childbirth, insulin controlled	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
O24.425	Gestational diabetes mellitus in childbirth, controlled by oral hypoglycemic drugs	Diagnosis	ICD-10-CM
O24.429	Gestational diabetes mellitus in childbirth, unspecified control	Diagnosis	ICD-10-CM
O24.43	Gestational diabetes mellitus in the puerperium	Diagnosis	ICD-10-CM
O24.430	Gestational diabetes mellitus in the puerperium, diet controlled	Diagnosis	ICD-10-CM
O24.434	Gestational diabetes mellitus in the puerperium, insulin controlled	Diagnosis	ICD-10-CM
O24.435	Gestational diabetes mellitus in puerperium, controlled by oral hypoglycemic drugs	Diagnosis	ICD-10-CM
O24.439	Gestational diabetes mellitus in the puerperium, unspecified control	Diagnosis	ICD-10-CM
O24.811	Other pre-existing diabetes mellitus in pregnancy, first trimester	Diagnosis	ICD-10-CM
O24.812	Other pre-existing diabetes mellitus in pregnancy, second trimester	Diagnosis	ICD-10-CM
O24.813	Other pre-existing diabetes mellitus in pregnancy, third trimester	Diagnosis	ICD-10-CM
O24.819	Other pre-existing diabetes mellitus in pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O24.82	Other pre-existing diabetes mellitus in childbirth	Diagnosis	ICD-10-CM
O24.83	Other pre-existing diabetes mellitus in the puerperium	Diagnosis	ICD-10-CM
O24.9	Unspecified diabetes mellitus in pregnancy, childbirth and the puerperium	Diagnosis	ICD-10-CM
O24.91	Unspecified diabetes mellitus in pregnancy	Diagnosis	ICD-10-CM
O24.911	Unspecified diabetes mellitus in pregnancy, first trimester	Diagnosis	ICD-10-CM
O24.912	Unspecified diabetes mellitus in pregnancy, second trimester	Diagnosis	ICD-10-CM
O24.913	Unspecified diabetes mellitus in pregnancy, third trimester	Diagnosis	ICD-10-CM
O24.919	Unspecified diabetes mellitus in pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O24.92	Unspecified diabetes mellitus in childbirth	Diagnosis	ICD-10-CM
O24.93	Unspecified diabetes mellitus in the puerperium	Diagnosis	ICD-10-CM
Immunosuppression			
260	Kwashiorkor	Diagnosis	ICD-9-CM
261	Nutritional marasmus	Diagnosis	ICD-9-CM
262	Other severe protein-calorie malnutrition	Diagnosis	ICD-9-CM
277.2	Other disorders of purine and pyrimidine metabolism	Diagnosis	ICD-9-CM
277.6	Other deficiencies of circulating enzymes	Diagnosis	ICD-9-CM
277.89	Other specified disorders of metabolism	Diagnosis	ICD-9-CM
279	Unspecified hypogammaglobulinemia	Diagnosis	ICD-9-CM
279.01	Selective IgA immunodeficiency	Diagnosis	ICD-9-CM
279.02	Selective IgM immunodeficiency	Diagnosis	ICD-9-CM
279.03	Other selective immunoglobulin deficiencies	Diagnosis	ICD-9-CM
279.04	Congenital hypogammaglobulinemia	Diagnosis	ICD-9-CM
279.05	Immunodeficiency with increased IgM	Diagnosis	ICD-9-CM
279.06	Common variable immunodeficiency	Diagnosis	ICD-9-CM
279.09	Other deficiency of humoral immunity	Diagnosis	ICD-9-CM
279.1	Unspecified immunodeficiency with predominant T-cell defect	Diagnosis	ICD-9-CM
279.11	DiGeorge's syndrome	Diagnosis	ICD-9-CM
279.12	Wiskott-Aldrich syndrome	Diagnosis	ICD-9-CM
279.13	Nezelof's syndrome	Diagnosis	ICD-9-CM
279.19	Other deficiency of cell-mediated immunity	Diagnosis	ICD-9-CM
279.2	Combined immunity deficiency	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
279.3	Unspecified immunity deficiency	Diagnosis	ICD-9-CM
279.41	Autoimmune lymphoproliferative syndrome	Diagnosis	ICD-9-CM
279.5	Graft-versus-host disease, unspecified	Diagnosis	ICD-9-CM
279.51	Acute graft-versus-host disease	Diagnosis	ICD-9-CM
279.52	Chronic graft-versus-host disease	Diagnosis	ICD-9-CM
279.53	Acute on chronic graft-versus-host disease	Diagnosis	ICD-9-CM
279.8	Other specified disorders involving the immune mechanism	Diagnosis	ICD-9-CM
288.01	Congenital neutropenia	Diagnosis	ICD-9-CM
288.02	Cyclic neutropenia	Diagnosis	ICD-9-CM
288.1	Functional disorders of polymorphonuclear neutrophils	Diagnosis	ICD-9-CM
288.4	Hemophagocytic syndromes	Diagnosis	ICD-9-CM
289.52	Splenic sequestration	Diagnosis	ICD-9-CM
759	Congenital anomalies of spleen	Diagnosis	ICD-9-CM
D57.02	Hb-SS disease with splenic sequestration	Diagnosis	ICD-10-CM
D57.212	Sickle-cell/Hb-C disease with splenic sequestration	Diagnosis	ICD-10-CM
D57.412	Sickle-cell thalassemia with splenic sequestration	Diagnosis	ICD-10-CM
D57.812	Other sickle-cell disorders with splenic sequestration	Diagnosis	ICD-10-CM
D70.0	Congenital agranulocytosis	Diagnosis	ICD-10-CM
D70.4	Cyclic neutropenia	Diagnosis	ICD-10-CM
D71	Functional disorders of polymorphonuclear neutrophils	Diagnosis	ICD-10-CM
D76.1	Hemophagocytic lymphohistiocytosis	Diagnosis	ICD-10-CM
D76.2	Hemophagocytic syndrome, infection-associated	Diagnosis	ICD-10-CM
D76.3	Other histiocytosis syndromes	Diagnosis	ICD-10-CM
D80.0	Hereditary hypogammaglobulinemia	Diagnosis	ICD-10-CM
D80.1	Nonfamilial hypogammaglobulinemia	Diagnosis	ICD-10-CM
D80.2	Selective deficiency of immunoglobulin A [IgA]	Diagnosis	ICD-10-CM
D80.3	Selective deficiency of immunoglobulin G [IgG] subclasses	Diagnosis	ICD-10-CM
D80.4	Selective deficiency of immunoglobulin M [IgM]	Diagnosis	ICD-10-CM
D80.5	Immunodeficiency with increased immunoglobulin M [IgM]	Diagnosis	ICD-10-CM
D80.6	Antibody deficiency with near-normal immunoglobulins or with hyperimmunoglobulinemia	Diagnosis	ICD-10-CM
D80.8	Other immunodeficiencies with predominantly antibody defects	Diagnosis	ICD-10-CM
D80.9	Immunodeficiency with predominantly antibody defects, unspecified	Diagnosis	ICD-10-CM
D81.0	Severe combined immunodeficiency [SCID] with reticular dysgenesis	Diagnosis	ICD-10-CM
D81.1	Severe combined immunodeficiency [SCID] with low T- and B-cell numbers	Diagnosis	ICD-10-CM
D81.2	Severe combined immunodeficiency [SCID] with low or normal B-cell numbers	Diagnosis	ICD-10-CM
D81.3	Adenosine deaminase [ADA] deficiency	Diagnosis	ICD-10-CM
D81.30	Adenosine deaminase deficiency, unspecified	Diagnosis	ICD-10-CM
D81.31	Adenosine deaminase deficiency with severe combined immunodeficiency	Diagnosis	ICD-10-CM
D81.32	Adenosine deaminase 2 deficiency	Diagnosis	ICD-10-CM
D81.39	Other adenosine deaminase deficiency	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
D81.4	Nezelof's syndrome	Diagnosis	ICD-10-CM
D81.5	Purine nucleoside phosphorylase [PNP] deficiency	Diagnosis	ICD-10-CM
D81.6	Major histocompatibility complex class I deficiency	Diagnosis	ICD-10-CM
D81.7	Major histocompatibility complex class II deficiency	Diagnosis	ICD-10-CM
D81.89	Other combined immunodeficiencies	Diagnosis	ICD-10-CM
D81.9	Combined immunodeficiency, unspecified	Diagnosis	ICD-10-CM
D82.0	Wiskott-Aldrich syndrome	Diagnosis	ICD-10-CM
D82.1	Di George's syndrome	Diagnosis	ICD-10-CM
D82.2	Immunodeficiency with short-limbed stature	Diagnosis	ICD-10-CM
D82.3	Immunodeficiency following hereditary defective response to Epstein-Barr virus	Diagnosis	ICD-10-CM
D82.4	Hyperimmunoglobulin E [IgE] syndrome	Diagnosis	ICD-10-CM
D82.8	Immunodeficiency associated with other specified major defects	Diagnosis	ICD-10-CM
D82.9	Immunodeficiency associated with major defect, unspecified	Diagnosis	ICD-10-CM
D83.0	Common variable immunodeficiency with predominant abnormalities of B-cell numbers and function	Diagnosis	ICD-10-CM
D83.1	Common variable immunodeficiency with predominant immunoregulatory T-cell disorders	Diagnosis	ICD-10-CM
D83.2	Common variable immunodeficiency with autoantibodies to B- or T-cells	Diagnosis	ICD-10-CM
D83.8	Other common variable immunodeficiencies	Diagnosis	ICD-10-CM
D83.9	Common variable immunodeficiency, unspecified	Diagnosis	ICD-10-CM
D84.0	Lymphocyte function antigen-1 [LFA-1] defect	Diagnosis	ICD-10-CM
D84.1	Defects in the complement system	Diagnosis	ICD-10-CM
D84.8	Other specified immunodeficiencies	Diagnosis	ICD-10-CM
D84.9	Immunodeficiency, unspecified	Diagnosis	ICD-10-CM
D89.810	Acute graft-versus-host disease	Diagnosis	ICD-10-CM
D89.811	Chronic graft-versus-host disease	Diagnosis	ICD-10-CM
D89.812	Acute on chronic graft-versus-host disease	Diagnosis	ICD-10-CM
D89.813	Graft-versus-host disease, unspecified	Diagnosis	ICD-10-CM
D89.82	Autoimmune lymphoproliferative syndrome [ALPS]	Diagnosis	ICD-10-CM
E40	Kwashiorkor	Diagnosis	ICD-10-CM
E41	Nutritional marasmus	Diagnosis	ICD-10-CM
E42	Marasmic kwashiorkor	Diagnosis	ICD-10-CM
E43	Unspecified severe protein-calorie malnutrition	Diagnosis	ICD-10-CM
E80.3	Defects of catalase and peroxidase	Diagnosis	ICD-10-CM
Q89.01	Asplenia (congenital)	Diagnosis	ICD-10-CM
Q89.09	Congenital malformations of spleen	Diagnosis	ICD-10-CM
Respiratory Diseases			
277.02	Cystic fibrosis with pulmonary manifestations	Diagnosis	ICD-9-CM
277.03	Cystic fibrosis with gastrointestinal manifestations	Diagnosis	ICD-9-CM
277.09	Cystic fibrosis with other manifestations	Diagnosis	ICD-9-CM
327.24	Idiopathic sleep related nonobstructive alveolar hypoventilation	Diagnosis	ICD-9-CM
327.26	Sleep related hypoventilation/hypoxemia in conditions classifiable elsewhere	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
327.29	Other organic sleep apnea	Diagnosis	ICD-9-CM
491	Simple chronic bronchitis	Diagnosis	ICD-9-CM
491.1	Mucopurulent chronic bronchitis	Diagnosis	ICD-9-CM
491.2	Obstructive chronic bronchitis, without exacerbation	Diagnosis	ICD-9-CM
491.21	Obstructive chronic bronchitis, with (acute) exacerbation	Diagnosis	ICD-9-CM
491.22	Obstructive chronic bronchitis with acute bronchitis	Diagnosis	ICD-9-CM
491.8	Other chronic bronchitis	Diagnosis	ICD-9-CM
491.9	Unspecified chronic bronchitis	Diagnosis	ICD-9-CM
492	Emphysematous bleb	Diagnosis	ICD-9-CM
492.8	Other emphysema	Diagnosis	ICD-9-CM
493	Extrinsic asthma, unspecified	Diagnosis	ICD-9-CM
493.01	Extrinsic asthma with status asthmaticus	Diagnosis	ICD-9-CM
493.02	Extrinsic asthma, with (acute) exacerbation	Diagnosis	ICD-9-CM
493.1	Intrinsic asthma, unspecified	Diagnosis	ICD-9-CM
493.11	Intrinsic asthma with status asthmaticus	Diagnosis	ICD-9-CM
493.12	Intrinsic asthma, with (acute) exacerbation	Diagnosis	ICD-9-CM
493.2	Chronic obstructive asthma, unspecified	Diagnosis	ICD-9-CM
493.21	Chronic obstructive asthma with status asthmaticus	Diagnosis	ICD-9-CM
493.22	Chronic obstructive asthma, with (acute) exacerbation	Diagnosis	ICD-9-CM
493.81	Exercise induced bronchospasm	Diagnosis	ICD-9-CM
493.82	Cough variant asthma	Diagnosis	ICD-9-CM
493.9	Asthma, unspecified, unspecified status	Diagnosis	ICD-9-CM
493.91	Asthma, unspecified with status asthmaticus	Diagnosis	ICD-9-CM
493.92	Asthma, unspecified, with (acute) exacerbation	Diagnosis	ICD-9-CM
494	Bronchiectasis without acute exacerbation	Diagnosis	ICD-9-CM
494.1	Bronchiectasis with acute exacerbation	Diagnosis	ICD-9-CM
496	Chronic airway obstruction, not elsewhere classified	Diagnosis	ICD-9-CM
501	Asbestosis	Diagnosis	ICD-9-CM
502	Pneumoconiosis due to other silica or silicates	Diagnosis	ICD-9-CM
503	Pneumoconiosis due to other inorganic dust	Diagnosis	ICD-9-CM
505	Unspecified pneumoconiosis	Diagnosis	ICD-9-CM
508.1	Chronic and other pulmonary manifestations due to radiation	Diagnosis	ICD-9-CM
508.2	Respiratory conditions due to smoke inhalation	Diagnosis	ICD-9-CM
508.8	Respiratory conditions due to other specified external agents	Diagnosis	ICD-9-CM
508.9	Respiratory conditions due to unspecified external agent	Diagnosis	ICD-9-CM
511	Pleurisy without mention of effusion or current tuberculosis	Diagnosis	ICD-9-CM
515	Postinflammatory pulmonary fibrosis	Diagnosis	ICD-9-CM
516.3	Idiopathic interstitial pneumonia, not otherwise specified	Diagnosis	ICD-9-CM
516.32	Idiopathic non-specific interstitial pneumonitis	Diagnosis	ICD-9-CM
516.34	Respiratory bronchiolitis interstitial lung disease	Diagnosis	ICD-9-CM
516.37	Desquamative interstitial pneumonia	Diagnosis	ICD-9-CM
516.5	Adult pulmonary Langerhans cell histiocytosis	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
516.61	Neuroendocrine cell hyperplasia of infancy	Diagnosis	ICD-9-CM
516.62	Pulmonary interstitial glycogenosis	Diagnosis	ICD-9-CM
516.64	Alveolar capillary dysplasia with vein misalignment	Diagnosis	ICD-9-CM
516.69	Other interstitial lung diseases of childhood	Diagnosis	ICD-9-CM
516.8	Other specified alveolar and parietoalveolar pneumonopathies	Diagnosis	ICD-9-CM
516.9	Unspecified alveolar and parietoalveolar pneumonopathy	Diagnosis	ICD-9-CM
518.1	Interstitial emphysema	Diagnosis	ICD-9-CM
518.2	Compensatory emphysema	Diagnosis	ICD-9-CM
518.3	Pulmonary eosinophilia	Diagnosis	ICD-9-CM
518.6	Allergic bronchopulmonary aspergillosis	Diagnosis	ICD-9-CM
518.89	Other diseases of lung, not elsewhere classified	Diagnosis	ICD-9-CM
519.9	Unspecified disease of respiratory system	Diagnosis	ICD-9-CM
770.2	Interstitial emphysema and related conditions of newborn	Diagnosis	ICD-9-CM
770.7	Chronic respiratory disease arising in the perinatal period	Diagnosis	ICD-9-CM
B44.81	Allergic bronchopulmonary aspergillosis	Diagnosis	ICD-10-CM
E84.0	Cystic fibrosis with pulmonary manifestations	Diagnosis	ICD-10-CM
E84.1	Cystic fibrosis with intestinal manifestations	Diagnosis	ICD-10-CM
E84.19	Cystic fibrosis with other intestinal manifestations	Diagnosis	ICD-10-CM
E84.8	Cystic fibrosis with other manifestations	Diagnosis	ICD-10-CM
G4734	Idio sleep related nonobstructive alveolar hypoventilation	Diagnosis	ICD-10-CM
G4736	Sleep related hypoventilation in conditions classd elswahr	Diagnosis	ICD-10-CM
G4739	Other sleep apnea	Diagnosis	ICD-10-CM
J40	Bronchitis, not specified as acute or chronic	Diagnosis	ICD-10-CM
J41.0	Simple chronic bronchitis	Diagnosis	ICD-10-CM
J41.1	Mucopurulent chronic bronchitis	Diagnosis	ICD-10-CM
J41.8	Mixed simple and mucopurulent chronic bronchitis	Diagnosis	ICD-10-CM
J42	Unspecified chronic bronchitis	Diagnosis	ICD-10-CM
J43	Emphysema	Diagnosis	ICD-10-CM
J43.0	Unilateral pulmonary emphysema [MacLeod's syndrome]	Diagnosis	ICD-10-CM
J43.1	Panlobular emphysema	Diagnosis	ICD-10-CM
J43.2	Centrilobular emphysema	Diagnosis	ICD-10-CM
J43.8	Other emphysema	Diagnosis	ICD-10-CM
J43.9	Emphysema, unspecified	Diagnosis	ICD-10-CM
J44	Other chronic obstructive pulmonary disease	Diagnosis	ICD-10-CM
J44.0	Chronic obstructive pulmonary disease with (acute) lower respiratory infection	Diagnosis	ICD-10-CM
J44.1	Chronic obstructive pulmonary disease with (acute) exacerbation	Diagnosis	ICD-10-CM
J44.9	Chronic obstructive pulmonary disease, unspecified	Diagnosis	ICD-10-CM
J45	Asthma	Diagnosis	ICD-10-CM
J45.2	Mild intermittent asthma	Diagnosis	ICD-10-CM
J45.20	Mild intermittent asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.21	Mild intermittent asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.22	Mild intermittent asthma with status asthmaticus	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
J45.3	Mild persistent asthma	Diagnosis	ICD-10-CM
J45.30	Mild persistent asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.31	Mild persistent asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.32	Mild persistent asthma with status asthmaticus	Diagnosis	ICD-10-CM
J45.4	Moderate persistent asthma	Diagnosis	ICD-10-CM
J45.40	Moderate persistent asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.41	Moderate persistent asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.42	Moderate persistent asthma with status asthmaticus	Diagnosis	ICD-10-CM
J45.5	Severe persistent asthma	Diagnosis	ICD-10-CM
J45.50	Severe persistent asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.51	Severe persistent asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.52	Severe persistent asthma with status asthmaticus	Diagnosis	ICD-10-CM
J45.9	Other and unspecified asthma	Diagnosis	ICD-10-CM
J45.90	Unspecified asthma	Diagnosis	ICD-10-CM
J45.901	Unspecified asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.902	Unspecified asthma with status asthmaticus	Diagnosis	ICD-10-CM
J45.909	Unspecified asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.99	Other asthma	Diagnosis	ICD-10-CM
J45.990	Exercise induced bronchospasm	Diagnosis	ICD-10-CM
J45.991	Cough variant asthma	Diagnosis	ICD-10-CM
J45.998	Other asthma	Diagnosis	ICD-10-CM
J47.0	Bronchiectasis with acute lower respiratory infection	Diagnosis	ICD-10-CM
J47.1	Bronchiectasis with (acute) exacerbation	Diagnosis	ICD-10-CM
J47.9	Bronchiectasis, uncomplicated	Diagnosis	ICD-10-CM
J61	Pneumoconiosis due to asbestos and other mineral fibers	Diagnosis	ICD-10-CM
J62	Pneumoconiosis due to dust containing silica	Diagnosis	ICD-10-CM
J62.8	Pneumoconiosis due to other dust containing silica	Diagnosis	ICD-10-CM
J63	Pneumoconiosis due to other inorganic dusts	Diagnosis	ICD-10-CM
J63.6	Pneumoconiosis due to other specified inorganic dusts	Diagnosis	ICD-10-CM
J65	Pneumoconiosis associated with tuberculosis	Diagnosis	ICD-10-CM
J70	Respiratory conditions due to other external agents	Diagnosis	ICD-10-CM
J70.1	Chronic and other pulmonary manifestations due to radiatio	Diagnosis	ICD-10-CM
J70.3	Chronic drug-induced interstitial lung disorders	Diagnosis	ICD-10-CM
J70.4	Drug-induced interstitial lung disorders, unspecified	Diagnosis	ICD-10-CM
J70.5	Respiratory conditions due to smoke inhalation	Diagnosis	ICD-10-CM
J70.8	Respiratory conditions due to oth external agents	Diagnosis	ICD-10-CM
J70.9	Respiratory conditions due to unspecified external agent	Diagnosis	ICD-10-CM
J82	Pulmonary eosinophilia, not elsewhere classified	Diagnosis	ICD-10-CM
J82.8	Pulmonary eosinophilia, not elsewhere classified	Diagnosis	ICD-10-CM
J82.89	Other pulmonary eosinophilia, not elsewhere classified	Diagnosis	ICD-10-CM
J84	Other interstitial pulmonary diseases	Diagnosis	ICD-10-CM
J84.0	Alveolar and parieto-alveolar conditions	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
J84.09	Other alveolar and parieto-alveolar conditions	Diagnosis	ICD-10-CM
J84.1	Other interstitial pulmonary diseases with fibrosis	Diagnosis	ICD-10-CM
J84.10	Pulmonary fibrosis, unspecified	Diagnosis	ICD-10-CM
J84.111	Idiopathic interstitial pneumonia, not otherwise specified	Diagnosis	ICD-10-CM
J84.113	Idiopathic non-specific interstitial pneumonitis	Diagnosis	ICD-10-CM
J84.115	Respiratory bronchiolitis interstitial lung disease	Diagnosis	ICD-10-CM
J84.117	Desquamative interstitial pneumonia	Diagnosis	ICD-10-CM
J84.17	Oth interstit pulmon dis w fibrosis in dis classd elswhr	Diagnosis	ICD-10-CM
J84.170	Interstit lung dis w progr fibrotic phenotype dis classd e	Diagnosis	ICD-10-CM
J84.178	Oth interstit pulmon dis with fibrosis in dis classd elswh	Diagnosis	ICD-10-CM
J84.8	Other specified interstitial pulmonary diseases	Diagnosis	ICD-10-CM
J84.82	Adult pulmonary Langerhans cell histiocytosis	Diagnosis	ICD-10-CM
J84.84	Other interstitial lung diseases of childhood	Diagnosis	ICD-10-CM
J84.841	Neuroendocrine cell hyperplasia of infancy	Diagnosis	ICD-10-CM
J84.842	Pulmonary interstitial glycogenosis	Diagnosis	ICD-10-CM
J84.843	Alveolar capillary dysplasia with vein misalignment	Diagnosis	ICD-10-CM
J84.848	Other interstitial lung diseases of childhood	Diagnosis	ICD-10-CM
J84.89	Other specified interstitial pulmonary diseases	Diagnosis	ICD-10-CM
J84.9	Interstitial pulmonary disease, unspecified	Diagnosis	ICD-10-CM
J91	Pleural effusion in conditions classified elsewhere	Diagnosis	ICD-10-CM
J92.0	Pleural plaque with presence of asbestos	Diagnosis	ICD-10-CM
J96.1	Chronic respiratory failure	Diagnosis	ICD-10-CM
J98.2	Interstitial emphysema	Diagnosis	ICD-10-CM
J98.3	Compensatory emphysema	Diagnosis	ICD-10-CM
J98.3	compensatory emphysema	Diagnosis	ICD-10-CM
J98.4	other disorders of lung	Diagnosis	ICD-10-CM
J98.9	Respiratory disease (chronic) NOS	Diagnosis	ICD-10-CM
P25	Interstitial emphysema and related conditions originating in the perinatal period	Diagnosis	ICD-10-CM
P25.0	Interstitial emphysema originating in the perinatal period	Diagnosis	ICD-10-CM
P25.8	Other conditions related to interstitial emphysema originating in the perinatal period	Diagnosis	ICD-10-CM
P27	Chronic respiratory disease originating in the perinatal period	Diagnosis	ICD-10-CM
P27.0	Wilson-Mikity syndrome	Diagnosis	ICD-10-CM
P27.1	Bronchopulmonary dysplasia origin in the perinatal period	Diagnosis	ICD-10-CM
P27.8	Oth chronic resp diseases origin in the perinatal period	Diagnosis	ICD-10-CM
P27.9	Unsp chronic resp disease origin in the perinatal period	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
Other Chronic Respiratory Diseases			
277.02	Cystic fibrosis with pulmonary manifestations	Diagnosis	ICD-9-CM
277.03	Cystic fibrosis with gastrointestinal manifestations	Diagnosis	ICD-9-CM
277.09	Cystic fibrosis with other manifestations	Diagnosis	ICD-9-CM
327.24	Idiopathic sleep related nonobstructive alveolar hypoventilation	Diagnosis	ICD-9-CM
327.26	Sleep related hypoventilation/hypoxemia in conditions classifiable elsewhere	Diagnosis	ICD-9-CM
327.29	Other organic sleep apnea	Diagnosis	ICD-9-CM
491	Simple chronic bronchitis	Diagnosis	ICD-9-CM
491.1	Mucopurulent chronic bronchitis	Diagnosis	ICD-9-CM
491.8	Other chronic bronchitis	Diagnosis	ICD-9-CM
491.9	Unspecified chronic bronchitis	Diagnosis	ICD-9-CM
492	Emphysematous bleb	Diagnosis	ICD-9-CM
492.8	Other emphysema	Diagnosis	ICD-9-CM
494	Bronchiectasis without acute exacerbation	Diagnosis	ICD-9-CM
494.1	Bronchiectasis with acute exacerbation	Diagnosis	ICD-9-CM
501	Asbestosis	Diagnosis	ICD-9-CM
502	Pneumoconiosis due to other silica or silicates	Diagnosis	ICD-9-CM
503	Pneumoconiosis due to other inorganic dust	Diagnosis	ICD-9-CM
505	Unspecified pneumoconiosis	Diagnosis	ICD-9-CM
508.1	Chronic and other pulmonary manifestations due to radiation	Diagnosis	ICD-9-CM
508.2	Respiratory conditions due to smoke inhalation	Diagnosis	ICD-9-CM
508.8	Respiratory conditions due to other specified external agents	Diagnosis	ICD-9-CM
508.9	Respiratory conditions due to unspecified external agent	Diagnosis	ICD-9-CM
511	Pleurisy without mention of effusion or current tuberculosis	Diagnosis	ICD-9-CM
515	Postinflammatory pulmonary fibrosis	Diagnosis	ICD-9-CM
516.3	Idiopathic interstitial pneumonia, not otherwise specified	Diagnosis	ICD-9-CM
516.32	Idiopathic non-specific interstitial pneumonitis	Diagnosis	ICD-9-CM
516.34	Respiratory bronchiolitis interstitial lung disease	Diagnosis	ICD-9-CM
516.37	Desquamative interstitial pneumonia	Diagnosis	ICD-9-CM
516.5	Adult pulmonary Langerhans cell histiocytosis	Diagnosis	ICD-9-CM
516.61	Neuroendocrine cell hyperplasia of infancy	Diagnosis	ICD-9-CM
516.62	Pulmonary interstitial glycogenosis	Diagnosis	ICD-9-CM
516.64	Alveolar capillary dysplasia with vein misalignment	Diagnosis	ICD-9-CM
516.69	Other interstitial lung diseases of childhood	Diagnosis	ICD-9-CM
516.8	Other specified alveolar and parietoalveolar pneumonopathies	Diagnosis	ICD-9-CM
516.9	Unspecified alveolar and parietoalveolar pneumonopathy	Diagnosis	ICD-9-CM
518.1	Interstitial emphysema	Diagnosis	ICD-9-CM
518.2	Compensatory emphysema	Diagnosis	ICD-9-CM
518.3	Pulmonary eosinophilia	Diagnosis	ICD-9-CM
518.6	Allergic bronchopulmonary aspergillosis	Diagnosis	ICD-9-CM
518.89	Other diseases of lung, not elsewhere classified	Diagnosis	ICD-9-CM
519.9	Unspecified disease of respiratory system	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
770.7	Chronic respiratory disease arising in the perinatal period	Diagnosis	ICD-9-CM
B44.81	Allergic bronchopulmonary aspergillosis	Diagnosis	ICD-10-CM
E84.0	Cystic fibrosis with pulmonary manifestations	Diagnosis	ICD-10-CM
E84.1	Cystic fibrosis with intestinal manifestations	Diagnosis	ICD-10-CM
E84.19	Cystic fibrosis with other intestinal manifestations	Diagnosis	ICD-10-CM
E84.8	Cystic fibrosis with other manifestations	Diagnosis	ICD-10-CM
G4734	Idio sleep related nonobstructive alveolar hypoventilation	Diagnosis	ICD-10-CM
G4736	Sleep related hypoventilation in conditions classd elswhr	Diagnosis	ICD-10-CM
G4739	Other sleep apnea	Diagnosis	ICD-10-CM
J40	Bronchitis, not specified as acute or chronic	Diagnosis	ICD-10-CM
J41.0	Simple chronic bronchitis	Diagnosis	ICD-10-CM
J41.1	Mucopurulent chronic bronchitis	Diagnosis	ICD-10-CM
J41.8	Mixed simple and mucopurulent chronic bronchitis	Diagnosis	ICD-10-CM
J42	Unspecified chronic bronchitis	Diagnosis	ICD-10-CM
J43	Emphysema	Diagnosis	ICD-10-CM
J43.0	Unilateral pulmonary emphysema [MacLeod's syndrome]	Diagnosis	ICD-10-CM
J43.1	Panlobular emphysema	Diagnosis	ICD-10-CM
J43.2	Centrilobular emphysema	Diagnosis	ICD-10-CM
J43.8	Other emphysema	Diagnosis	ICD-10-CM
J43.9	Emphysema, unspecified	Diagnosis	ICD-10-CM
J44	Other chronic obstructive pulmonary disease	Diagnosis	ICD-10-CM
J47.0	Bronchiectasis with acute lower respiratory infection	Diagnosis	ICD-10-CM
J47.1	Bronchiectasis with (acute) exacerbation	Diagnosis	ICD-10-CM
J47.9	Bronchiectasis, uncomplicated	Diagnosis	ICD-10-CM
J61	Pneumoconiosis due to asbestos and other mineral fibers	Diagnosis	ICD-10-CM
J62	Pneumoconiosis due to dust containing silica	Diagnosis	ICD-10-CM
J62.8	Pneumoconiosis due to other dust containing silica	Diagnosis	ICD-10-CM
J63	Pneumoconiosis due to other inorganic dusts	Diagnosis	ICD-10-CM
J63.6	Pneumoconiosis due to other specified inorganic dusts	Diagnosis	ICD-10-CM
J65	Pneumoconiosis associated with tuberculosis	Diagnosis	ICD-10-CM
J70	Respiratory conditions due to other external agents	Diagnosis	ICD-10-CM
J70.1	Chronic and other pulmonary manifestations due to radiatio	Diagnosis	ICD-10-CM
J70.3	Chronic drug-induced interstitial lung disorders	Diagnosis	ICD-10-CM
J70.4	Drug-induced interstitial lung disorders, unspecified	Diagnosis	ICD-10-CM
J70.5	Respiratory conditions due to smoke inhalation	Diagnosis	ICD-10-CM
J70.8	Respiratory conditions due to oth external agents	Diagnosis	ICD-10-CM
J70.9	Respiratory conditions due to unspecified external agent	Diagnosis	ICD-10-CM
J82	Pulmonary eosinophilia, not elsewhere classified	Diagnosis	ICD-10-CM
J82.8	Pulmonary eosinophilia, not elsewhere classified	Diagnosis	ICD-10-CM
J82.89	Other pulmonary eosinophilia, not elsewhere classified	Diagnosis	ICD-10-CM
J84	Other interstitial pulmonary diseases	Diagnosis	ICD-10-CM
J84.0	Alveolar and parieto-alveolar conditions	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
J84.09	Other alveolar and parieto-alveolar conditions	Diagnosis	ICD-10-CM
J84.1	Other interstitial pulmonary diseases with fibrosis	Diagnosis	ICD-10-CM
J84.10	Pulmonary fibrosis, unspecified	Diagnosis	ICD-10-CM
J84.111	Idiopathic interstitial pneumonia, not otherwise specified	Diagnosis	ICD-10-CM
J84.113	Idiopathic non-specific interstitial pneumonitis	Diagnosis	ICD-10-CM
J84.115	Respiratory bronchiolitis interstitial lung disease	Diagnosis	ICD-10-CM
J84.117	Desquamative interstitial pneumonia	Diagnosis	ICD-10-CM
J84.17	Oth interstit pulmon dis w fibrosis in dis classd elswhr	Diagnosis	ICD-10-CM
J84.170	Interstit lung dis w progr fibrotic phenotype dis classd e	Diagnosis	ICD-10-CM
J84.178	Oth interstit pulmon dis with fibrosis in dis classd elswh	Diagnosis	ICD-10-CM
J84.8	Other specified interstitial pulmonary diseases	Diagnosis	ICD-10-CM
J84.82	Adult pulmonary Langerhans cell histiocytosis	Diagnosis	ICD-10-CM
J84.84	Other interstitial lung diseases of childhood	Diagnosis	ICD-10-CM
J84.841	Neuroendocrine cell hyperplasia of infancy	Diagnosis	ICD-10-CM
J84.842	Pulmonary interstitial glycogenosis	Diagnosis	ICD-10-CM
J84.843	Alveolar capillary dysplasia with vein misalignment	Diagnosis	ICD-10-CM
J84.848	Other interstitial lung diseases of childhood	Diagnosis	ICD-10-CM
J84.89	Other specified interstitial pulmonary diseases	Diagnosis	ICD-10-CM
J84.9	Interstitial pulmonary disease, unspecified	Diagnosis	ICD-10-CM
J91	Pleural effusion in conditions classified elsewhere	Diagnosis	ICD-10-CM
J92.0	Pleural plaque with presence of asbestos	Diagnosis	ICD-10-CM
J96.1	Chronic respiratory failure	Diagnosis	ICD-10-CM
J98.2	Interstitial emphysema	Diagnosis	ICD-10-CM
J98.3	compensatory emphysema	Diagnosis	ICD-10-CM
J98.4	other disorders of lung	Diagnosis	ICD-10-CM
J98.9	Respiratory disease (chronic) NOS	Diagnosis	ICD-10-CM
P25	Interstitial emphysema and related conditions originating in the perinatal period	Diagnosis	ICD-10-CM
P27	Chronic respiratory disease originating in the perinatal period	Diagnosis	ICD-10-CM
P27.0	Wilson-Mikity syndrome	Diagnosis	ICD-10-CM
P27.1	Bronchopulmonary dysplasia origin in the perinatal period	Diagnosis	ICD-10-CM
P27.8	Oth chronic resp diseases origin in the perinatal period	Diagnosis	ICD-10-CM
P27.9	Unsp chronic resp disease origin in the perinatal period	Diagnosis	ICD-10-CM
Sickle Cell Disease			
282.41	Sickle-cell thalassemia without crisis	Diagnosis	ICD-9-CM
282.42	Sickle-cell thalassemia with crisis	Diagnosis	ICD-9-CM
282.5	Sickle-cell trait	Diagnosis	ICD-9-CM
282.6	Sickle-cell disease, unspecified	Diagnosis	ICD-9-CM
282.61	Hb-SS disease without crisis	Diagnosis	ICD-9-CM
282.62	Hb-SS disease with crisis	Diagnosis	ICD-9-CM
282.63	Sickle-cell/Hb-C disease without crisis	Diagnosis	ICD-9-CM
282.64	Sickle-cell/Hb-C disease with crisis	Diagnosis	ICD-9-CM
282.68	Other sickle-cell disease without crisis	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
282.69	Other sickle-cell disease with crisis	Diagnosis	ICD-9-CM
D57	Sickle-cell disorders	Diagnosis	ICD-10-CM
D57.0	Hb-SS disease with crisis	Diagnosis	ICD-10-CM
D57.00	Hb-SS disease with crisis, unspecified	Diagnosis	ICD-10-CM
D57.01	Hb-SS disease with acute chest syndrome	Diagnosis	ICD-10-CM
D57.02	Hb-SS disease with splenic sequestration	Diagnosis	ICD-10-CM
D57.03	Hb-SS disease with cerebral vascular involvement	Diagnosis	ICD-10-CM
D57.09	Hb-SS disease with crisis with other specified complication	Diagnosis	ICD-10-CM
D57.1	Sickle-cell disease without crisis	Diagnosis	ICD-10-CM
D57.2	Sickle-cell/Hb-C disease	Diagnosis	ICD-10-CM
D57.20	Sickle-cell/Hb-C disease without crisis	Diagnosis	ICD-10-CM
D57.21	Sickle-cell/Hb-C disease with crisis	Diagnosis	ICD-10-CM
D57.211	Sickle-cell/Hb-C disease with acute chest syndrome	Diagnosis	ICD-10-CM
D57.212	Sickle-cell/Hb-C disease with splenic sequestration	Diagnosis	ICD-10-CM
D57.213	Sickle-cell/Hb-C disease with cerebral vascular involvement	Diagnosis	ICD-10-CM
D57.218	Sickle-cell/Hb-C disease with crisis with other specified complication	Diagnosis	ICD-10-CM
D57.219	Sickle-cell/Hb-C disease with crisis, unspecified	Diagnosis	ICD-10-CM
D57.3	Sickle-cell trait	Diagnosis	ICD-10-CM
D57.4	Sickle-cell thalassemia	Diagnosis	ICD-10-CM
D57.40	Sickle-cell thalassemia without crisis	Diagnosis	ICD-10-CM
D57.41	Sickle-cell thalassemia with crisis	Diagnosis	ICD-10-CM
D57.411	Sickle-cell thalassemia with acute chest syndrome	Diagnosis	ICD-10-CM
D57.412	Sickle-cell thalassemia with splenic sequestration	Diagnosis	ICD-10-CM
D57.413	Sickle-cell thalassemia with cerebral vascular involvement	Diagnosis	ICD-10-CM
D57.418	Sickle-cell thalassemia with crisis with other specified complication	Diagnosis	ICD-10-CM
D57.419	Sickle-cell thalassemia with crisis, unspecified	Diagnosis	ICD-10-CM
D57.42	Sickle-cell thalassemia beta zero without crisis	Diagnosis	ICD-10-CM
D57.431	Sickle-cell thalassemia beta zero with acute chest syndrome	Diagnosis	ICD-10-CM
D57.432	Sickle-cell thalassemia beta zero with splenic sequestration	Diagnosis	ICD-10-CM
D57.433	Sickle-cell thalassemia beta zero with cereb vascular invl	Diagnosis	ICD-10-CM
D57.438	Sickle-cell thalassemia beta zero with crisis with oth comp	Diagnosis	ICD-10-CM
D57.439	Sickle-cell thalassemia beta zero with crisis, unspecified	Diagnosis	ICD-10-CM
D57.44	Sickle-cell thalassemia beta plus without crisis	Diagnosis	ICD-10-CM
D57.451	Sickle-cell thalassemia beta plus with acute chest syndrome	Diagnosis	ICD-10-CM
D57.452	Sickle-cell thalassemia beta plus with splenic sequestration	Diagnosis	ICD-10-CM
D57.453	Sickle-cell thalassemia beta plus with cereb vascular invl	Diagnosis	ICD-10-CM
D57.458	Sickle-cell thalassemia beta plus with crisis with oth comp	Diagnosis	ICD-10-CM
D57.459	Sickle-cell thalassemia beta plus with crisis, unspecified	Diagnosis	ICD-10-CM
D57.8	Other sickle-cell disorders	Diagnosis	ICD-10-CM
D57.80	Other sickle-cell disorders without crisis	Diagnosis	ICD-10-CM
D57.81	Other sickle-cell disorders with crisis	Diagnosis	ICD-10-CM
D57.811	Other sickle-cell disorders with acute chest syndrome	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
D57.812	Other sickle-cell disorders with splenic sequestration	Diagnosis	ICD-10-CM
D57.813	Other sickle-cell disorders with cerebral vascular invl	Diagnosis	ICD-10-CM
D57.818	Other sickle cell disorders with crisis with other specified complication	Diagnosis	ICD-10-CM
D57.819	Other sickle-cell disorders with crisis, unspecified	Diagnosis	ICD-10-CM
J0791	Injection, crizanlizumab-tmca, 5 mg	Procedure	HCPCS
Mental Disorders			
296.2	Major depressive disorder, single episode, unspecified	Diagnosis	ICD-9-CM
296.21	Major depressive disorder, single episode, mild	Diagnosis	ICD-9-CM
296.22	Major depressive disorder, single episode, moderate	Diagnosis	ICD-9-CM
296.23	Major depressive disorder, single episode, severe, without mention of psychotic behavior	Diagnosis	ICD-9-CM
296.24	Major depressive disorder, single episode, severe, specified as with psychotic behavior	Diagnosis	ICD-9-CM
296.25	Major depressive disorder, single episode, in partial or unspecified remission	Diagnosis	ICD-9-CM
296.26	Major depressive disorder, single episode in full remission	Diagnosis	ICD-9-CM
296.3	Major depressive disorder, recurrent episode, unspecified	Diagnosis	ICD-9-CM
296.31	Major depressive disorder, recurrent episode, mild	Diagnosis	ICD-9-CM
296.32	Major depressive disorder, recurrent episode, moderate	Diagnosis	ICD-9-CM
296.33	Major depressive disorder, recurrent episode, severe, without mention of psychotic behavior	Diagnosis	ICD-9-CM
296.34	Major depressive disorder, recurrent episode, severe, specified as with psychotic behavior	Diagnosis	ICD-9-CM
296.35	Major depressive disorder, recurrent episode, in partial or unspecified remission	Diagnosis	ICD-9-CM
296.36	Major depressive disorder, recurrent episode, in full remission	Diagnosis	ICD-9-CM
296.5	Bipolar I disorder, most recent episode (or current) depressed, unspecified	Diagnosis	ICD-9-CM
296.51	Bipolar I disorder, most recent episode (or current) depressed, mild	Diagnosis	ICD-9-CM
296.52	Bipolar I disorder, most recent episode (or current) depressed, moderate	Diagnosis	ICD-9-CM
296.53	Bipolar I disorder, most recent episode (or current) depressed, severe, without mention of psychotic behavior	Diagnosis	ICD-9-CM
296.54	Bipolar I disorder, most recent episode (or current) depressed, severe, specified as with psychotic behavior	Diagnosis	ICD-9-CM
296.55	Bipolar I disorder, most recent episode (or current) depressed, in partial or unspecified remission	Diagnosis	ICD-9-CM
296.56	Bipolar I disorder, most recent episode (or current) depressed, in full remission	Diagnosis	ICD-9-CM
296.6	Bipolar I disorder, most recent episode (or current) mixed, unspecified	Diagnosis	ICD-9-CM
296.61	Bipolar I disorder, most recent episode (or current) mixed, mild	Diagnosis	ICD-9-CM
296.62	Bipolar I disorder, most recent episode (or current) mixed, moderate	Diagnosis	ICD-9-CM
296.63	Bipolar I disorder, most recent episode (or current) mixed, severe, without mention of psychotic behavior	Diagnosis	ICD-9-CM
296.64	Bipolar I disorder, most recent episode (or current) mixed, severe, specified as with psychotic behavior	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
296.65	Bipolar I disorder, most recent episode (or current) mixed, in partial or unspecified remission	Diagnosis	ICD-9-CM
296.66	Bipolar I disorder, most recent episode (or current) mixed, in full remission	Diagnosis	ICD-9-CM
296.89	Other and unspecified bipolar disorders	Diagnosis	ICD-9-CM
296.99	Other specified episodic mood disorder	Diagnosis	ICD-9-CM
298	Depressive type psychosis	Diagnosis	ICD-9-CM
300.4	Dysthymic disorder	Diagnosis	ICD-9-CM
301.12	Chronic depressive personality disorder	Diagnosis	ICD-9-CM
309	Adjustment disorder with depressed mood	Diagnosis	ICD-9-CM
309.1	Prolonged depressive reaction as adjustment reaction	Diagnosis	ICD-9-CM
309.28	Adjustment disorder with mixed anxiety and depressed mood	Diagnosis	ICD-9-CM
311	Depressive disorder, not elsewhere classified	Diagnosis	ICD-9-CM
F31.30	Bipolar disorder, current episode depressed, mild or moderate severity, unspecified	Diagnosis	ICD-10-CM
F31.31	Bipolar disorder, current episode depressed, mild	Diagnosis	ICD-10-CM
F31.32	Bipolar disorder, current episode depressed, moderate	Diagnosis	ICD-10-CM
F31.4	Bipolar disorder, current episode depressed, severe, without psychotic features	Diagnosis	ICD-10-CM
F31.5	Bipolar disorder, current episode depressed, severe, with psychotic features	Diagnosis	ICD-10-CM
F31.60	Bipolar disorder, current episode mixed, unspecified	Diagnosis	ICD-10-CM
F31.61	Bipolar disorder, current episode mixed, mild	Diagnosis	ICD-10-CM
F31.62	Bipolar disorder, current episode mixed, moderate	Diagnosis	ICD-10-CM
F31.63	Bipolar disorder, current episode mixed, severe, without psychotic features	Diagnosis	ICD-10-CM
F31.64	Bipolar disorder, current episode mixed, severe, with psychotic features	Diagnosis	ICD-10-CM
F31.75	Bipolar disorder, in partial remission, most recent episode depressed	Diagnosis	ICD-10-CM
F31.76	Bipolar disorder, in full remission, most recent episode depressed	Diagnosis	ICD-10-CM
F31.77	Bipolar disorder, in partial remission, most recent episode mixed	Diagnosis	ICD-10-CM
F31.78	Bipolar disorder, in full remission, most recent episode mixed	Diagnosis	ICD-10-CM
F31.81	Bipolar II disorder	Diagnosis	ICD-10-CM
F32.0	Major depressive disorder, single episode, mild	Diagnosis	ICD-10-CM
F32.1	Major depressive disorder, single episode, moderate	Diagnosis	ICD-10-CM
F32.2	Major depressive disorder, single episode, severe without psychotic features	Diagnosis	ICD-10-CM
F32.3	Major depressive disorder, single episode, severe with psychotic features	Diagnosis	ICD-10-CM
F32.4	Major depressive disorder, single episode, in partial remission	Diagnosis	ICD-10-CM
F32.5	Major depressive disorder, single episode, in full remission	Diagnosis	ICD-10-CM
F32.9	Major depressive disorder, single episode, unspecified	Diagnosis	ICD-10-CM
F33.0	Major depressive disorder, recurrent, mild	Diagnosis	ICD-10-CM
F33.1	Major depressive disorder, recurrent, moderate	Diagnosis	ICD-10-CM
F33.2	Major depressive disorder, recurrent severe without psychotic features	Diagnosis	ICD-10-CM
F33.3	Major depressive disorder, recurrent, severe with psychotic symptoms	Diagnosis	ICD-10-CM
F33.40	Major depressive disorder, recurrent, in remission, unspecified	Diagnosis	ICD-10-CM
F33.41	Major depressive disorder, recurrent, in partial remission	Diagnosis	ICD-10-CM
F33.42	Major depressive disorder, recurrent, in full remission	Diagnosis	ICD-10-CM
F33.8	Other recurrent depressive disorders	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
F33.9	Major depressive disorder, recurrent, unspecified	Diagnosis	ICD-10-CM
F34.1	Dysthymic disorder	Diagnosis	ICD-10-CM
F43.21	Adjustment disorder with depressed mood	Diagnosis	ICD-10-CM
F43.23	Adjustment disorder with mixed anxiety and depressed mood	Diagnosis	ICD-10-CM
Hypertension			
362.11	Hypertensive retinopathy	Diagnosis	ICD-9-CM
401	Essential hypertension, malignant	Diagnosis	ICD-9-CM
401.1	Essential hypertension, benign	Diagnosis	ICD-9-CM
401.9	Unspecified essential hypertension	Diagnosis	ICD-9-CM
402	Malignant hypertensive heart disease without heart failure	Diagnosis	ICD-9-CM
402.01	Malignant hypertensive heart disease with heart failure	Diagnosis	ICD-9-CM
402.1	Benign hypertensive heart disease without heart failure	Diagnosis	ICD-9-CM
402.11	Benign hypertensive heart disease with heart failure	Diagnosis	ICD-9-CM
402.9	Unspecified hypertensive heart disease without heart failure	Diagnosis	ICD-9-CM
402.91	Hypertensive heart disease, unspecified, with heart failure	Diagnosis	ICD-9-CM
403	Hypertensive chronic kidney disease, malignant, with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
403.01	Hypertensive chronic kidney disease, malignant, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
403.1	Hypertensive chronic kidney disease, benign, with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
403.11	Hypertensive chronic kidney disease, benign, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
403.9	Hypertensive chronic kidney disease, unspecified, with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
403.91	Hypertensive chronic kidney disease, unspecified, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404	Hypertensive heart and chronic kidney disease, malignant, without heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.01	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.02	Hypertensive heart and chronic kidney disease, malignant, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.03	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.1	Hypertensive heart and chronic kidney disease, benign, without heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.11	Hypertensive heart and chronic kidney disease, benign, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.12	Hypertensive heart and chronic kidney disease, benign, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
404.13	Hypertensive heart and chronic kidney disease, benign, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.9	Hypertensive heart and chronic kidney disease, unspecified, without heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.91	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-9-CM
404.92	Hypertensive heart and chronic kidney disease, unspecified, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
404.93	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-9-CM
405.01	Secondary renovascular hypertension, malignant	Diagnosis	ICD-9-CM
405.09	Other secondary hypertension, malignant	Diagnosis	ICD-9-CM
405.11	Secondary renovascular hypertension, benign	Diagnosis	ICD-9-CM
405.19	Other secondary hypertension, benign	Diagnosis	ICD-9-CM
405.91	Secondary renovascular hypertension, unspecified	Diagnosis	ICD-9-CM
405.99	Other secondary hypertension, unspecified	Diagnosis	ICD-9-CM
437.2	Hypertensive encephalopathy	Diagnosis	ICD-9-CM
H35.031	Hypertensive retinopathy, right eye	Diagnosis	ICD-10-CM
H35.032	Hypertensive retinopathy, left eye	Diagnosis	ICD-10-CM
H35.033	Hypertensive retinopathy, bilateral	Diagnosis	ICD-10-CM
H35.039	Hypertensive retinopathy, unspecified eye	Diagnosis	ICD-10-CM
I10	Essential (primary) hypertension	Diagnosis	ICD-10-CM
I11.0	Hypertensive heart disease with heart failure	Diagnosis	ICD-10-CM
I11.9	Hypertensive heart disease without heart failure	Diagnosis	ICD-10-CM
I12.0	Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease	Diagnosis	ICD-10-CM
I12.9	Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.0	Hyp hrt & chr kdny dis w hrt fail and stg 1-4/unsp chr kdny	Diagnosis	ICD-10-CM
I13.1	Hypertensive heart and chronic kidney disease without heart failure	Diagnosis	ICD-10-CM
I13.10	Hypertensive heart and chronic kidney disease without heart failure, with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.11	Hypertensive heart and chronic kidney disease without heart failure, with stage 5 chronic kidney disease, or end stage renal disease	Diagnosis	ICD-10-CM
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease	Diagnosis	ICD-10-CM
I15.0	Renovascular hypertension	Diagnosis	ICD-10-CM
I15.1	Hypertension secondary to other renal disorders	Diagnosis	ICD-10-CM
I15.2	Hypertension secondary to endocrine disorders	Diagnosis	ICD-10-CM
I15.8	Other secondary hypertension	Diagnosis	ICD-10-CM
I15.9	Secondary hypertension, unspecified	Diagnosis	ICD-10-CM
I16.0	Hypertensive urgency	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I16.1	Hypertensive emergency	Diagnosis	ICD-10-CM
I16.9	Hypertensive crisis, unspecified	Diagnosis	ICD-10-CM
I67.4	Hypertensive encephalopathy	Diagnosis	ICD-10-CM
N26.2	Page kidney	Diagnosis	ICD-10-CM
Other Vascular Diseases			
416.0	Primary pulmonary hypertension	Diagnosis	ICD-9-CM
430	Subarachnoid hemorrhage	Diagnosis	ICD-9-CM
433.01	Occlusion and stenosis of basilar artery with cerebral infarction	Diagnosis	ICD-9-CM
433.91	Occlusion and stenosis of unspecified precerebral artery with cerebral infarction	Diagnosis	ICD-9-CM
434.01	Cerebral thrombosis with cerebral infarction	Diagnosis	ICD-9-CM
434.11	Cerebral embolism with cerebral infarction	Diagnosis	ICD-9-CM
434.91	Unspecified cerebral artery occlusion with cerebral infarction	Diagnosis	ICD-9-CM
440.0	Atherosclerosis of aorta	Diagnosis	ICD-9-CM
440.1	Atherosclerosis of renal artery	Diagnosis	ICD-9-CM
440.20	Atherosclerosis of native arteries of the extremities, unspecified	Diagnosis	ICD-9-CM
440.21	Atherosclerosis of native arteries of the extremities with intermittent claudication	Diagnosis	ICD-9-CM
440.22	Atherosclerosis of native arteries of the extremities with rest pain	Diagnosis	ICD-9-CM
440.23	Atherosclerosis of native arteries of the extremities with ulceration	Diagnosis	ICD-9-CM
440.24	Atherosclerosis of native arteries of the extremities with gangrene	Diagnosis	ICD-9-CM
440.29	Other atherosclerosis of native arteries of the extremities	Diagnosis	ICD-9-CM
440.30	Atherosclerosis of unspecified bypass graft of extremities	Diagnosis	ICD-9-CM
440.31	Atherosclerosis of autologous vein bypass graft of extremities	Diagnosis	ICD-9-CM
440.32	Atherosclerosis of nonautologous biological bypass graft of extremities	Diagnosis	ICD-9-CM
440.4	Chronic total occlusion of artery of the extremities	Diagnosis	ICD-9-CM
440.8	Atherosclerosis of other specified arteries	Diagnosis	ICD-9-CM
440.9	Generalized and unspecified atherosclerosis	Diagnosis	ICD-9-CM
441.00	Dissecting aortic aneurysm (any part), unspecified site	Diagnosis	ICD-9-CM
441.01	Dissecting aortic aneurysm (any part), thoracic	Diagnosis	ICD-9-CM
441.02	Dissecting aortic aneurysm (any part), abdominal	Diagnosis	ICD-9-CM
441.03	Dissecting aortic aneurysm (any part), thoracoabdominal	Diagnosis	ICD-9-CM
441.1	Thoracic aneurysm, ruptured	Diagnosis	ICD-9-CM
441.2	Thoracic aneurysm without mention of rupture	Diagnosis	ICD-9-CM
441.3	Abdominal aneurysm, ruptured	Diagnosis	ICD-9-CM
441.4	Abdominal aneurysm without mention of rupture	Diagnosis	ICD-9-CM
441.5	Aortic aneurysm of unspecified site, ruptured	Diagnosis	ICD-9-CM
441.6	Thoracoabdominal aneurysm, ruptured	Diagnosis	ICD-9-CM
441.7	Thoracoabdominal aneurysm without mention of rupture	Diagnosis	ICD-9-CM
441.9	Aortic aneurysm of unspecified site without mention of rupture	Diagnosis	ICD-9-CM
442.0	Aneurysm of artery of upper extremity	Diagnosis	ICD-9-CM
442.1	Aneurysm of renal artery	Diagnosis	ICD-9-CM
442.2	Aneurysm of iliac artery	Diagnosis	ICD-9-CM
442.3	Aneurysm of artery of lower extremity	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
442.81	Aneurysm of artery of neck	Diagnosis	ICD-9-CM
442.82	Aneurysm of subclavian artery	Diagnosis	ICD-9-CM
442.83	Aneurysm of splenic artery	Diagnosis	ICD-9-CM
442.84	Aneurysm of other visceral artery	Diagnosis	ICD-9-CM
442.89	Aneurysm of other specified artery	Diagnosis	ICD-9-CM
442.9	Other aneurysm of unspecified site	Diagnosis	ICD-9-CM
443.1	Thromboangiitis obliterans (Buerger's disease)	Diagnosis	ICD-9-CM
443.21	Dissection of carotid artery	Diagnosis	ICD-9-CM
443.22	Dissection of iliac artery	Diagnosis	ICD-9-CM
443.23	Dissection of renal artery	Diagnosis	ICD-9-CM
443.24	Dissection of vertebral artery	Diagnosis	ICD-9-CM
443.29	Dissection of other artery	Diagnosis	ICD-9-CM
443.89	Other peripheral vascular disease	Diagnosis	ICD-9-CM
443.9	Unspecified peripheral vascular disease	Diagnosis	ICD-9-CM
444.01	Saddle embolus of abdominal aorta	Diagnosis	ICD-9-CM
444.09	Other arterial embolism and thrombosis of abdominal aorta	Diagnosis	ICD-9-CM
444.1	Embolism and thrombosis of thoracic aorta	Diagnosis	ICD-9-CM
444.21	Embolism and thrombosis of arteries of upper extremity	Diagnosis	ICD-9-CM
444.22	Embolism and thrombosis of arteries of lower extremity	Diagnosis	ICD-9-CM
444.81	Embolism and thrombosis of iliac artery	Diagnosis	ICD-9-CM
444.89	Embolism and thrombosis of other specified artery	Diagnosis	ICD-9-CM
444.9	Embolism and thrombosis of unspecified artery	Diagnosis	ICD-9-CM
445.01	Atheroembolism of upper extremity	Diagnosis	ICD-9-CM
445.02	Atheroembolism of lower extremity	Diagnosis	ICD-9-CM
445.81	Atheroembolism of kidney	Diagnosis	ICD-9-CM
445.89	Atheroembolism of other site	Diagnosis	ICD-9-CM
447.0	Arteriovenous fistula, acquired	Diagnosis	ICD-9-CM
447.1	Stricture of artery	Diagnosis	ICD-9-CM
447.2	Rupture of artery	Diagnosis	ICD-9-CM
447.3	Hyperplasia of renal artery	Diagnosis	ICD-9-CM
447.4	Celiac artery compression syndrome	Diagnosis	ICD-9-CM
447.5	Necrosis of artery	Diagnosis	ICD-9-CM
447.6	Unspecified arteritis	Diagnosis	ICD-9-CM
447.70	Aortic ectasia, unspecified site	Diagnosis	ICD-9-CM
447.71	Thoracic aortic ectasia	Diagnosis	ICD-9-CM
447.72	Abdominal aortic ectasia	Diagnosis	ICD-9-CM
447.73	Thoracoabdominal aortic ectasia	Diagnosis	ICD-9-CM
447.8	Other specified disorders of arteries and arterioles	Diagnosis	ICD-9-CM
447.9	Unspecified disorders of arteries and arterioles	Diagnosis	ICD-9-CM
448.0	Hereditary hemorrhagic telangiectasia	Diagnosis	ICD-9-CM
449	Septic arterial embolism	Diagnosis	ICD-9-CM
453.2	Other venous embolism and thrombosis, of inferior vena cava	Diagnosis	ICD-9-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
453.77	Chronic venous embolism and thrombosis of other thoracic veins	Diagnosis	ICD-9-CM
453.87	Acute venous embolism and thrombosis of other thoracic veins	Diagnosis	ICD-9-CM
459.10	Postphlebitic syndrome without complications	Diagnosis	ICD-9-CM
459.11	Postphlebitic syndrome with ulcer	Diagnosis	ICD-9-CM
459.12	Postphlebitic syndrome with inflammation	Diagnosis	ICD-9-CM
459.13	Postphlebitic syndrome with ulcer and inflammation	Diagnosis	ICD-9-CM
459.19	Postphlebitic syndrome with other complication	Diagnosis	ICD-9-CM
I27	Other pulmonary heart diseases	Diagnosis	ICD-10-CM
I27.0	Primary pulmonary hypertension	Diagnosis	ICD-10-CM
I60.2	Nontraumatic subarachnoid hemorrhage from anterior communicating artery	Diagnosis	ICD-10-CM
I60.20	Nontraumatic subarachnoid hemorrhage from unspecified anterior communicating artery	Diagnosis	ICD-10-CM
I60.21	Nontraumatic subarachnoid hemorrhage from right anterior communicating artery	Diagnosis	ICD-10-CM
I60.22	Nontraumatic subarachnoid hemorrhage from left anterior communicating artery	Diagnosis	ICD-10-CM
I63.00	Cerebral infarction due to thrombosis of unspecified precerebral artery	Diagnosis	ICD-10-CM
I63.10	Cerebral infarction due to embolism of unspecified precerebral artery	Diagnosis	ICD-10-CM
I63.20	Cerebral infarction due to unspecified occlusion or stenosis of unspecified precerebral arteries	Diagnosis	ICD-10-CM
I63.22	Cerebral infarction due to unspecified occlusion or stenosis of basilar artery	Diagnosis	ICD-10-CM
I63.30	Cerebral infarction due to thrombosis of unspecified cerebral artery	Diagnosis	ICD-10-CM
I63.40	Cerebral infarction due to embolism of unspecified cerebral artery	Diagnosis	ICD-10-CM
I63.50	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebral artery	Diagnosis	ICD-10-CM
I63.8	Other cerebral infarction	Diagnosis	ICD-10-CM
I63.81	Other cerebral infarction due to occlusion or stenosis of small artery	Diagnosis	ICD-10-CM
I63.89	Other cerebral infarction	Diagnosis	ICD-10-CM
I70	Atherosclerosis	Diagnosis	ICD-10-CM
I70.0	Atherosclerosis of aorta	Diagnosis	ICD-10-CM
I70.1	Atherosclerosis of renal artery	Diagnosis	ICD-10-CM
I70.2	Atherosclerosis of native arteries of the extremities	Diagnosis	ICD-10-CM
I70.20	Unspecified atherosclerosis of native arteries of extremities	Diagnosis	ICD-10-CM
I70.201	Unspecified atherosclerosis of native arteries of extremities, right leg	Diagnosis	ICD-10-CM
I70.202	Unspecified atherosclerosis of native arteries of extremities, left leg	Diagnosis	ICD-10-CM
I70.203	Unspecified atherosclerosis of native arteries of extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.208	Unspecified atherosclerosis of native arteries of extremities, other extremity	Diagnosis	ICD-10-CM
I70.209	Unspecified atherosclerosis of native arteries of extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.21	Atherosclerosis of native arteries of extremities with intermittent claudication	Diagnosis	ICD-10-CM
I70.211	Atherosclerosis of native arteries of extremities with intermittent claudication, right leg	Diagnosis	ICD-10-CM
I70.212	Atherosclerosis of native arteries of extremities with intermittent claudication, left leg	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.213	Atherosclerosis of native arteries of extremities with intermittent claudication, bilateral legs	Diagnosis	ICD-10-CM
I70.218	Atherosclerosis of native arteries of extremities with intermittent claudication, other extremity	Diagnosis	ICD-10-CM
I70.219	Atherosclerosis of native arteries of extremities with intermittent claudication, unspecified extremity	Diagnosis	ICD-10-CM
I70.22	Atherosclerosis of native arteries of extremities with rest pain	Diagnosis	ICD-10-CM
I70.221	Atherosclerosis of native arteries of extremities with rest pain, right leg	Diagnosis	ICD-10-CM
I70.222	Atherosclerosis of native arteries of extremities with rest pain, left leg	Diagnosis	ICD-10-CM
I70.223	Atherosclerosis of native arteries of extremities with rest pain, bilateral legs	Diagnosis	ICD-10-CM
I70.228	Atherosclerosis of native arteries of extremities with rest pain, other extremity	Diagnosis	ICD-10-CM
I70.229	Atherosclerosis of native arteries of extremities with rest pain, unspecified extremity	Diagnosis	ICD-10-CM
I70.23	Atherosclerosis of native arteries of right leg with ulceration	Diagnosis	ICD-10-CM
I70.231	Atherosclerosis of native arteries of right leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.232	Atherosclerosis of native arteries of right leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.233	Atherosclerosis of native arteries of right leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.234	Atherosclerosis of native arteries of right leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.235	Atherosclerosis of native arteries of right leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.238	Atherosclerosis of native arteries of right leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.239	Atherosclerosis of native arteries of right leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.24	Atherosclerosis of native arteries of left leg with ulceration	Diagnosis	ICD-10-CM
I70.241	Atherosclerosis of native arteries of left leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.242	Atherosclerosis of native arteries of left leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.243	Atherosclerosis of native arteries of left leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.244	Atherosclerosis of native arteries of left leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.245	Atherosclerosis of native arteries of left leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.248	Atherosclerosis of native arteries of left leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.249	Atherosclerosis of native arteries of left leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.25	Atherosclerosis of native arteries of other extremities with ulceration	Diagnosis	ICD-10-CM
I70.26	Atherosclerosis of native arteries of extremities with gangrene	Diagnosis	ICD-10-CM
I70.261	Atherosclerosis of native arteries of extremities with gangrene, right leg	Diagnosis	ICD-10-CM
I70.262	Atherosclerosis of native arteries of extremities with gangrene, left leg	Diagnosis	ICD-10-CM
I70.263	Atherosclerosis of native arteries of extremities with gangrene, bilateral legs	Diagnosis	ICD-10-CM
I70.268	Atherosclerosis of native arteries of extremities with gangrene, other extremity	Diagnosis	ICD-10-CM
I70.269	Atherosclerosis of native arteries of extremities with gangrene, unspecified extremity	Diagnosis	ICD-10-CM
I70.29	Other atherosclerosis of native arteries of extremities	Diagnosis	ICD-10-CM
I70.291	Other atherosclerosis of native arteries of extremities, right leg	Diagnosis	ICD-10-CM
I70.292	Other atherosclerosis of native arteries of extremities, left leg	Diagnosis	ICD-10-CM
I70.293	Other atherosclerosis of native arteries of extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.298	Other atherosclerosis of native arteries of extremities, other extremity	Diagnosis	ICD-10-CM
I70.299	Other atherosclerosis of native arteries of extremities, unspecified extremity	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.3	Atherosclerosis of unspecified type of bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.30	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.301	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.302	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.303	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.308	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.309	Unspecified atherosclerosis of unspecified type of bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.31	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication	Diagnosis	ICD-10-CM
I70.311	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, right leg	Diagnosis	ICD-10-CM
I70.312	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, left leg	Diagnosis	ICD-10-CM
I70.313	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, bilateral legs	Diagnosis	ICD-10-CM
I70.318	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, other extremity	Diagnosis	ICD-10-CM
I70.319	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with intermittent claudication, unspecified extremity	Diagnosis	ICD-10-CM
I70.32	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain	Diagnosis	ICD-10-CM
I70.321	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, right leg	Diagnosis	ICD-10-CM
I70.322	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, left leg	Diagnosis	ICD-10-CM
I70.323	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, bilateral legs	Diagnosis	ICD-10-CM
I70.328	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, other extremity	Diagnosis	ICD-10-CM
I70.329	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with rest pain, unspecified extremity	Diagnosis	ICD-10-CM
I70.33	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration	Diagnosis	ICD-10-CM
I70.331	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.332	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of calf	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.333	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.334	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.335	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.338	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.339	Atherosclerosis of unspecified type of bypass graft(s) of the right leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.34	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration	Diagnosis	ICD-10-CM
I70.341	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.342	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.343	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.344	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.345	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.348	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.349	Atherosclerosis of unspecified type of bypass graft(s) of the left leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.35	Atherosclerosis of unspecified type of bypass graft(s) of other extremity with ulceration	Diagnosis	ICD-10-CM
I70.36	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene	Diagnosis	ICD-10-CM
I70.361	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, right leg	Diagnosis	ICD-10-CM
I70.362	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, left leg	Diagnosis	ICD-10-CM
I70.363	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, bilateral legs	Diagnosis	ICD-10-CM
I70.368	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, other extremity	Diagnosis	ICD-10-CM
I70.369	Atherosclerosis of unspecified type of bypass graft(s) of the extremities with gangrene, unspecified extremity	Diagnosis	ICD-10-CM
I70.39	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.391	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.392	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.393	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.398	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.399	Other atherosclerosis of unspecified type of bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.4	Atherosclerosis of autologous vein bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.40	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.401	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.402	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.403	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.408	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.409	Unspecified atherosclerosis of autologous vein bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.41	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication	Diagnosis	ICD-10-CM
I70.411	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, right leg	Diagnosis	ICD-10-CM
I70.412	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, left leg	Diagnosis	ICD-10-CM
I70.413	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, bilateral legs	Diagnosis	ICD-10-CM
I70.418	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, other extremity	Diagnosis	ICD-10-CM
I70.419	Atherosclerosis of autologous vein bypass graft(s) of the extremities with intermittent claudication, unspecified extremity	Diagnosis	ICD-10-CM
I70.42	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain	Diagnosis	ICD-10-CM
I70.421	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, right leg	Diagnosis	ICD-10-CM
I70.422	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, left leg	Diagnosis	ICD-10-CM
I70.423	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, bilateral legs	Diagnosis	ICD-10-CM
I70.428	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, other extremity	Diagnosis	ICD-10-CM
I70.429	Atherosclerosis of autologous vein bypass graft(s) of the extremities with rest pain, unspecified extremity	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.43	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration	Diagnosis	ICD-10-CM
I70.431	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.432	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.433	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.434	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.435	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.438	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.439	Atherosclerosis of autologous vein bypass graft(s) of the right leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.44	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration	Diagnosis	ICD-10-CM
I70.441	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.442	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.443	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.444	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.445	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.448	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.449	Atherosclerosis of autologous vein bypass graft(s) of the left leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.45	Atherosclerosis of autologous vein bypass graft(s) of other extremity with ulceration	Diagnosis	ICD-10-CM
I70.46	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene	Diagnosis	ICD-10-CM
I70.461	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, right leg	Diagnosis	ICD-10-CM
I70.462	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, left leg	Diagnosis	ICD-10-CM
I70.463	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, bilateral legs	Diagnosis	ICD-10-CM
I70.468	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, other extremity	Diagnosis	ICD-10-CM
I70.469	Atherosclerosis of autologous vein bypass graft(s) of the extremities with gangrene, unspecified extremity	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.49	Other atherosclerosis of autologous vein bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.491	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.492	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.493	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.498	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.499	Other atherosclerosis of autologous vein bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.5	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.50	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.501	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.502	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.503	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.508	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.509	Unspecified atherosclerosis of nonautologous biological bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.51	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities intermittent claudication	Diagnosis	ICD-10-CM
I70.511	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, right leg	Diagnosis	ICD-10-CM
I70.512	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, left leg	Diagnosis	ICD-10-CM
I70.513	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, bilateral legs	Diagnosis	ICD-10-CM
I70.518	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, other extremity	Diagnosis	ICD-10-CM
I70.519	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with intermittent claudication, unspecified extremity	Diagnosis	ICD-10-CM
I70.52	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain	Diagnosis	ICD-10-CM
I70.521	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, right leg	Diagnosis	ICD-10-CM
I70.522	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, left leg	Diagnosis	ICD-10-CM
I70.523	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, bilateral legs	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.528	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, other extremity	Diagnosis	ICD-10-CM
I70.529	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with rest pain, unspecified extremity	Diagnosis	ICD-10-CM
I70.53	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration	Diagnosis	ICD-10-CM
I70.531	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.532	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.533	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.534	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.535	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.538	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.539	Atherosclerosis of nonautologous biological bypass graft(s) of the right leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.54	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration	Diagnosis	ICD-10-CM
I70.541	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.542	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.543	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.544	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.545	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.548	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.549	Atherosclerosis of nonautologous biological bypass graft(s) of the left leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.55	Atherosclerosis of nonautologous biological bypass graft(s) of other extremity with ulceration	Diagnosis	ICD-10-CM
I70.56	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene	Diagnosis	ICD-10-CM
I70.561	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, right leg	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.562	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, left leg	Diagnosis	ICD-10-CM
I70.563	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, bilateral legs	Diagnosis	ICD-10-CM
I70.568	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, other extremity	Diagnosis	ICD-10-CM
I70.569	Atherosclerosis of nonautologous biological bypass graft(s) of the extremities with gangrene, unspecified extremity	Diagnosis	ICD-10-CM
I70.59	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.591	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.592	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.593	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.598	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.599	Other atherosclerosis of nonautologous biological bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.6	Atherosclerosis of nonbiological bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.60	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.601	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.602	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.603	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.608	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.609	Unspecified atherosclerosis of nonbiological bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.61	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication	Diagnosis	ICD-10-CM
I70.611	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, right leg	Diagnosis	ICD-10-CM
I70.612	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, left leg	Diagnosis	ICD-10-CM
I70.613	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, bilateral legs	Diagnosis	ICD-10-CM
I70.618	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, other extremity	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.619	Atherosclerosis of nonbiological bypass graft(s) of the extremities with intermittent claudication, unspecified extremity	Diagnosis	ICD-10-CM
I70.62	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain	Diagnosis	ICD-10-CM
I70.621	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, right leg	Diagnosis	ICD-10-CM
I70.622	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, left leg	Diagnosis	ICD-10-CM
I70.623	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, bilateral legs	Diagnosis	ICD-10-CM
I70.628	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, other extremity	Diagnosis	ICD-10-CM
I70.629	Atherosclerosis of nonbiological bypass graft(s) of the extremities with rest pain, unspecified extremity	Diagnosis	ICD-10-CM
I70.63	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration	Diagnosis	ICD-10-CM
I70.631	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.632	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.633	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.634	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.635	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.638	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.639	Atherosclerosis of nonbiological bypass graft(s) of the right leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.64	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration	Diagnosis	ICD-10-CM
I70.641	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.642	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.643	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.644	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.645	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.648	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.649	Atherosclerosis of nonbiological bypass graft(s) of the left leg with ulceration of unspecified site	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.65	Atherosclerosis of nonbiological bypass graft(s) of other extremity with ulceration	Diagnosis	ICD-10-CM
I70.66	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene	Diagnosis	ICD-10-CM
I70.661	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, right leg	Diagnosis	ICD-10-CM
I70.662	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, left leg	Diagnosis	ICD-10-CM
I70.663	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, bilateral legs	Diagnosis	ICD-10-CM
I70.668	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, other extremity	Diagnosis	ICD-10-CM
I70.669	Atherosclerosis of nonbiological bypass graft(s) of the extremities with gangrene, unspecified extremity	Diagnosis	ICD-10-CM
I70.69	Other atherosclerosis of nonbiological bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.691	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.692	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.693	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.698	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.699	Other atherosclerosis of nonbiological bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.7	Atherosclerosis of other type of bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.70	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.701	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.702	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.703	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.708	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.709	Unspecified atherosclerosis of other type of bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.71	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication	Diagnosis	ICD-10-CM
I70.711	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, right leg	Diagnosis	ICD-10-CM
I70.712	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, left leg	Diagnosis	ICD-10-CM
I70.713	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, bilateral legs	Diagnosis	ICD-10-CM
I70.718	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, other extremity	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.719	Atherosclerosis of other type of bypass graft(s) of the extremities with intermittent claudication, unspecified extremity	Diagnosis	ICD-10-CM
I70.72	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain	Diagnosis	ICD-10-CM
I70.721	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, right leg	Diagnosis	ICD-10-CM
I70.722	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, left leg	Diagnosis	ICD-10-CM
I70.723	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, bilateral legs	Diagnosis	ICD-10-CM
I70.728	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, other extremity	Diagnosis	ICD-10-CM
I70.729	Atherosclerosis of other type of bypass graft(s) of the extremities with rest pain, unspecified extremity	Diagnosis	ICD-10-CM
I70.73	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration	Diagnosis	ICD-10-CM
I70.731	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.732	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.733	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.734	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.735	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.738	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.739	Atherosclerosis of other type of bypass graft(s) of the right leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.74	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration	Diagnosis	ICD-10-CM
I70.741	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of thigh	Diagnosis	ICD-10-CM
I70.742	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of calf	Diagnosis	ICD-10-CM
I70.743	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of ankle	Diagnosis	ICD-10-CM
I70.744	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of heel and midfoot	Diagnosis	ICD-10-CM
I70.745	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of other part of foot	Diagnosis	ICD-10-CM
I70.748	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of other part of lower leg	Diagnosis	ICD-10-CM
I70.749	Atherosclerosis of other type of bypass graft(s) of the left leg with ulceration of unspecified site	Diagnosis	ICD-10-CM
I70.75	Atherosclerosis of other type of bypass graft(s) of other extremity with ulceration	Diagnosis	ICD-10-CM
I70.76	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I70.761	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, right leg	Diagnosis	ICD-10-CM
I70.762	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, left leg	Diagnosis	ICD-10-CM
I70.763	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, bilateral legs	Diagnosis	ICD-10-CM
I70.768	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, other extremity	Diagnosis	ICD-10-CM
I70.769	Atherosclerosis of other type of bypass graft(s) of the extremities with gangrene, unspecified extremity	Diagnosis	ICD-10-CM
I70.79	Other atherosclerosis of other type of bypass graft(s) of the extremities	Diagnosis	ICD-10-CM
I70.791	Other atherosclerosis of other type of bypass graft(s) of the extremities, right leg	Diagnosis	ICD-10-CM
I70.792	Other atherosclerosis of other type of bypass graft(s) of the extremities, left leg	Diagnosis	ICD-10-CM
I70.793	Other atherosclerosis of other type of bypass graft(s) of the extremities, bilateral legs	Diagnosis	ICD-10-CM
I70.798	Other atherosclerosis of other type of bypass graft(s) of the extremities, other extremity	Diagnosis	ICD-10-CM
I70.799	Other atherosclerosis of other type of bypass graft(s) of the extremities, unspecified extremity	Diagnosis	ICD-10-CM
I70.8	Atherosclerosis of other arteries	Diagnosis	ICD-10-CM
I70.9	Other and unspecified atherosclerosis	Diagnosis	ICD-10-CM
I70.90	Unspecified atherosclerosis	Diagnosis	ICD-10-CM
I70.91	Generalized atherosclerosis	Diagnosis	ICD-10-CM
I70.92	Chronic total occlusion of artery of the extremities	Diagnosis	ICD-10-CM
I71	Aortic aneurysm and dissection	Diagnosis	ICD-10-CM
I71.0	Dissection of aorta	Diagnosis	ICD-10-CM
I71.00	Dissection of unspecified site of aorta	Diagnosis	ICD-10-CM
I71.01	Dissection of thoracic aorta	Diagnosis	ICD-10-CM
I71.02	Dissection of abdominal aorta	Diagnosis	ICD-10-CM
I71.03	Dissection of thoracoabdominal aorta	Diagnosis	ICD-10-CM
I71.1	Thoracic aortic aneurysm, ruptured	Diagnosis	ICD-10-CM
I71.2	Thoracic aortic aneurysm, without rupture	Diagnosis	ICD-10-CM
I71.3	Abdominal aortic aneurysm, ruptured	Diagnosis	ICD-10-CM
I71.4	Abdominal aortic aneurysm, without rupture	Diagnosis	ICD-10-CM
I71.5	Thoracoabdominal aortic aneurysm, ruptured	Diagnosis	ICD-10-CM
I71.6	Thoracoabdominal aortic aneurysm, without rupture	Diagnosis	ICD-10-CM
I71.8	Aortic aneurysm of unspecified site, ruptured	Diagnosis	ICD-10-CM
I71.9	Aortic aneurysm of unspecified site, without rupture	Diagnosis	ICD-10-CM
I72	Other aneurysm	Diagnosis	ICD-10-CM
I72.0	Aneurysm of carotid artery	Diagnosis	ICD-10-CM
I72.1	Aneurysm of artery of upper extremity	Diagnosis	ICD-10-CM
I72.2	Aneurysm of renal artery	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I72.3	Aneurysm of iliac artery	Diagnosis	ICD-10-CM
I72.4	Aneurysm of artery of lower extremity	Diagnosis	ICD-10-CM
I72.5	Aneurysm of other precerebral arteries	Diagnosis	ICD-10-CM
I72.6	Aneurysm of vertebral artery	Diagnosis	ICD-10-CM
I72.8	Aneurysm of other specified arteries	Diagnosis	ICD-10-CM
I72.9	Aneurysm of unspecified site	Diagnosis	ICD-10-CM
I73	Other peripheral vascular diseases	Diagnosis	ICD-10-CM
I73.1	Thromboangiitis obliterans [Buerger's disease]	Diagnosis	ICD-10-CM
I73.89	Other specified peripheral vascular diseases	Diagnosis	ICD-10-CM
I73.9	Peripheral vascular disease, unspecified	Diagnosis	ICD-10-CM
I74	Arterial embolism and thrombosis	Diagnosis	ICD-10-CM
I74.0	Embolism and thrombosis of abdominal aorta	Diagnosis	ICD-10-CM
I74.01	Saddle embolus of abdominal aorta	Diagnosis	ICD-10-CM
I74.09	Other arterial embolism and thrombosis of abdominal aorta	Diagnosis	ICD-10-CM
I74.1	Embolism and thrombosis of other and unspecified parts of aorta	Diagnosis	ICD-10-CM
I74.10	Embolism and thrombosis of unspecified parts of aorta	Diagnosis	ICD-10-CM
I74.11	Embolism and thrombosis of thoracic aorta	Diagnosis	ICD-10-CM
I74.19	Embolism and thrombosis of other parts of aorta	Diagnosis	ICD-10-CM
I74.2	Embolism and thrombosis of arteries of the upper extremities	Diagnosis	ICD-10-CM
I74.3	Embolism and thrombosis of arteries of the lower extremities	Diagnosis	ICD-10-CM
I74.4	Embolism and thrombosis of arteries of extremities, unspecified	Diagnosis	ICD-10-CM
I74.5	Embolism and thrombosis of iliac artery	Diagnosis	ICD-10-CM
I74.8	Embolism and thrombosis of other arteries	Diagnosis	ICD-10-CM
I74.9	Embolism and thrombosis of unspecified artery	Diagnosis	ICD-10-CM
I75	Atheroembolism	Diagnosis	ICD-10-CM
I75.0	Atheroembolism of extremities	Diagnosis	ICD-10-CM
I75.01	Atheroembolism of upper extremity	Diagnosis	ICD-10-CM
I75.011	Atheroembolism of right upper extremity	Diagnosis	ICD-10-CM
I75.012	Atheroembolism of left upper extremity	Diagnosis	ICD-10-CM
I75.013	Atheroembolism of bilateral upper extremities	Diagnosis	ICD-10-CM
I75.019	Atheroembolism of unspecified upper extremity	Diagnosis	ICD-10-CM
I75.02	Atheroembolism of lower extremity	Diagnosis	ICD-10-CM
I75.021	Atheroembolism of right lower extremity	Diagnosis	ICD-10-CM
I75.022	Atheroembolism of left lower extremity	Diagnosis	ICD-10-CM
I75.023	Atheroembolism of bilateral lower extremities	Diagnosis	ICD-10-CM
I75.029	Atheroembolism of unspecified lower extremity	Diagnosis	ICD-10-CM
I75.8	Atheroembolism of other sites	Diagnosis	ICD-10-CM
I75.81	Atheroembolism of kidney	Diagnosis	ICD-10-CM
I75.89	Atheroembolism of other site	Diagnosis	ICD-10-CM
I76	Septic arterial embolism	Diagnosis	ICD-10-CM
I77	Other disorders of arteries and arterioles	Diagnosis	ICD-10-CM
I77.0	Arteriovenous fistula, acquired	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I77.1	Stricture of artery	Diagnosis	ICD-10-CM
I77.2	Rupture of artery	Diagnosis	ICD-10-CM
I77.3	Arterial fibromuscular dysplasia	Diagnosis	ICD-10-CM
I77.4	Celiac artery compression syndrome	Diagnosis	ICD-10-CM
I77.5	Necrosis of artery	Diagnosis	ICD-10-CM
I77.6	Arteritis, unspecified	Diagnosis	ICD-10-CM
I77.7	Other arterial dissection	Diagnosis	ICD-10-CM
I77.70	Dissection of unspecified artery	Diagnosis	ICD-10-CM
I77.71	Dissection of carotid artery	Diagnosis	ICD-10-CM
I77.72	Dissection of iliac artery	Diagnosis	ICD-10-CM
I77.73	Dissection of renal artery	Diagnosis	ICD-10-CM
I77.74	Dissection of vertebral artery	Diagnosis	ICD-10-CM
I77.75	Dissection of other precerebral arteries	Diagnosis	ICD-10-CM
I77.76	Dissection of artery of upper extremity	Diagnosis	ICD-10-CM
I77.77	Dissection of artery of lower extremity	Diagnosis	ICD-10-CM
I77.79	Dissection of other specified artery	Diagnosis	ICD-10-CM
I77.8	Other specified disorders of arteries and arterioles	Diagnosis	ICD-10-CM
I77.81	Aortic ectasia	Diagnosis	ICD-10-CM
I77.810	Thoracic aortic ectasia	Diagnosis	ICD-10-CM
I77.811	Abdominal aortic ectasia	Diagnosis	ICD-10-CM
I77.812	Thoracoabdominal aortic ectasia	Diagnosis	ICD-10-CM
I77.819	Aortic ectasia, unspecified site	Diagnosis	ICD-10-CM
I77.89	Other specified disorders of arteries and arterioles	Diagnosis	ICD-10-CM
I77.9	Disorder of arteries and arterioles, unspecified	Diagnosis	ICD-10-CM
I78	Diseases of capillaries	Diagnosis	ICD-10-CM
I78.0	Hereditary hemorrhagic telangiectasia	Diagnosis	ICD-10-CM
I82.21	Embolism and thrombosis of superior vena cava	Diagnosis	ICD-10-CM
I82.210	Acute embolism and thrombosis of superior vena cava	Diagnosis	ICD-10-CM
I82.211	Chronic embolism and thrombosis of superior vena cava	Diagnosis	ICD-10-CM
I82.22	Embolism and thrombosis of inferior vena cava	Diagnosis	ICD-10-CM
I82.220	Acute embolism and thrombosis of inferior vena cava	Diagnosis	ICD-10-CM
I82.221	Chronic embolism and thrombosis of inferior vena cava	Diagnosis	ICD-10-CM
I87.00	Postthrombotic syndrome without complications	Diagnosis	ICD-10-CM
I87.001	Postthrombotic syndrome without complications of right lower extremity	Diagnosis	ICD-10-CM
I87.002	Postthrombotic syndrome without complications of left lower extremity	Diagnosis	ICD-10-CM
I87.003	Postthrombotic syndrome without complications of bilateral lower extremity	Diagnosis	ICD-10-CM
I87.009	Postthrombotic syndrome without complications of unspecified extremity	Diagnosis	ICD-10-CM
I87.01	Postthrombotic syndrome with ulcer	Diagnosis	ICD-10-CM
I87.011	Postthrombotic syndrome with ulcer of right lower extremity	Diagnosis	ICD-10-CM
I87.012	Postthrombotic syndrome with ulcer of left lower extremity	Diagnosis	ICD-10-CM
I87.013	Postthrombotic syndrome with ulcer of bilateral lower extremity	Diagnosis	ICD-10-CM
I87.019	Postthrombotic syndrome with ulcer of unspecified lower extremity	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
I87.02	Postthrombotic syndrome with inflammation	Diagnosis	ICD-10-CM
I87.021	Postthrombotic syndrome with inflammation of right lower extremity	Diagnosis	ICD-10-CM
I87.022	Postthrombotic syndrome with inflammation of left lower extremity	Diagnosis	ICD-10-CM
I87.023	Postthrombotic syndrome with inflammation of bilateral lower extremity	Diagnosis	ICD-10-CM
I87.029	Postthrombotic syndrome with inflammation of unspecified lower extremity	Diagnosis	ICD-10-CM
I87.03	Postthrombotic syndrome with ulcer and inflammation	Diagnosis	ICD-10-CM
I87.031	Postthrombotic syndrome with ulcer and inflammation of right lower extremity	Diagnosis	ICD-10-CM
I87.032	Postthrombotic syndrome with ulcer and inflammation of left lower extremity	Diagnosis	ICD-10-CM
I87.033	Postthrombotic syndrome with ulcer and inflammation of bilateral lower extremity	Diagnosis	ICD-10-CM
I87.039	Postthrombotic syndrome with ulcer and inflammation of unspecified lower extremity	Diagnosis	ICD-10-CM
I87.09	Postthrombotic syndrome with other complications	Diagnosis	ICD-10-CM
I87.091	Postthrombotic syndrome with other complications of right lower extremity	Diagnosis	ICD-10-CM
I87.092	Postthrombotic syndrome with other complications of left lower extremity	Diagnosis	ICD-10-CM
I87.093	Postthrombotic syndrome with other complications of bilateral lower extremity	Diagnosis	ICD-10-CM
I87.099	Postthrombotic syndrome with other complications of unspecified lower extremity	Diagnosis	ICD-10-CM
Chronic Obstructive Pulmonary Disease (COPD)			
491	Simple chronic bronchitis	Diagnosis	ICD-9-CM
491.1	Mucopurulent chronic bronchitis	Diagnosis	ICD-9-CM
491.2	Obstructive chronic bronchitis, without exacerbation	Diagnosis	ICD-9-CM
491.21	Obstructive chronic bronchitis, with (acute) exacerbation	Diagnosis	ICD-9-CM
491.22	Obstructive chronic bronchitis with acute bronchitis	Diagnosis	ICD-9-CM
491.8	Other chronic bronchitis	Diagnosis	ICD-9-CM
491.9	Unspecified chronic bronchitis	Diagnosis	ICD-9-CM
492	Emphysematous bleb	Diagnosis	ICD-9-CM
492.8	Other emphysema	Diagnosis	ICD-9-CM
493.2	Chronic obstructive asthma, unspecified	Diagnosis	ICD-9-CM
493.21	Chronic obstructive asthma with status asthmaticus	Diagnosis	ICD-9-CM
493.22	Chronic obstructive asthma, with (acute) exacerbation	Diagnosis	ICD-9-CM
496	Chronic airway obstruction, not elsewhere classified	Diagnosis	ICD-9-CM
518.1	Interstitial emphysema	Diagnosis	ICD-9-CM
518.2	Compensatory emphysema	Diagnosis	ICD-9-CM
770.2	Interstitial emphysema and related conditions of newborn	Diagnosis	ICD-9-CM
J40	Bronchitis, not specified as acute or chronic	Diagnosis	ICD-10-CM
J41.0	Simple chronic bronchitis	Diagnosis	ICD-10-CM
J41.1	Mucopurulent chronic bronchitis	Diagnosis	ICD-10-CM
J41.8	Mixed simple and mucopurulent chronic bronchitis	Diagnosis	ICD-10-CM
J42	Unspecified chronic bronchitis	Diagnosis	ICD-10-CM
J43	Emphysema	Diagnosis	ICD-10-CM
J43.0	Unilateral pulmonary emphysema [MacLeod's syndrome]	Diagnosis	ICD-10-CM
J43.1	Panlobular emphysema	Diagnosis	ICD-10-CM
J43.2	Centrilobular emphysema	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
J43.8	Other emphysema	Diagnosis	ICD-10-CM
J43.9	Emphysema, unspecified	Diagnosis	ICD-10-CM
J44.0	Chronic obstructive pulmonary disease with (acute) lower respiratory infection	Diagnosis	ICD-10-CM
J44.1	Chronic obstructive pulmonary disease with (acute) exacerbation	Diagnosis	ICD-10-CM
J44.9	Chronic obstructive pulmonary disease, unspecified	Diagnosis	ICD-10-CM
J98.2	Interstitial emphysema	Diagnosis	ICD-10-CM
J98.3	Compensatory emphysema	Diagnosis	ICD-10-CM
P25	Interstitial emphysema and related conditions originating in the perinatal period	Diagnosis	ICD-10-CM
P25.0	Interstitial emphysema originating in the perinatal period	Diagnosis	ICD-10-CM
P25.8	Other conditions related to interstitial emphysema originating in the perinatal period	Diagnosis	ICD-10-CM
Asthma			
493	Extrinsic asthma, unspecified	Diagnosis	ICD-9-CM
493.01	Extrinsic asthma with status asthmaticus	Diagnosis	ICD-9-CM
493.02	Extrinsic asthma, with (acute) exacerbation	Diagnosis	ICD-9-CM
493.1	Intrinsic asthma, unspecified	Diagnosis	ICD-9-CM
493.11	Intrinsic asthma with status asthmaticus	Diagnosis	ICD-9-CM
493.12	Intrinsic asthma, with (acute) exacerbation	Diagnosis	ICD-9-CM
493.81	Exercise induced bronchospasm	Diagnosis	ICD-9-CM
493.82	Cough variant asthma	Diagnosis	ICD-9-CM
493.9	Asthma, unspecified, unspecified status	Diagnosis	ICD-9-CM
493.91	Asthma, unspecified with status asthmaticus	Diagnosis	ICD-9-CM
493.92	Asthma, unspecified, with (acute) exacerbation	Diagnosis	ICD-9-CM
J45	Asthma	Diagnosis	ICD-10-CM
J45.2	Mild intermittent asthma	Diagnosis	ICD-10-CM
J45.20	Mild intermittent asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.21	Mild intermittent asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.22	Mild intermittent asthma with status asthmaticus	Diagnosis	ICD-10-CM
J45.3	Mild persistent asthma	Diagnosis	ICD-10-CM
J45.30	Mild persistent asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.31	Mild persistent asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.32	Mild persistent asthma with status asthmaticus	Diagnosis	ICD-10-CM
J45.4	Moderate persistent asthma	Diagnosis	ICD-10-CM
J45.40	Moderate persistent asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.41	Moderate persistent asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.42	Moderate persistent asthma with status asthmaticus	Diagnosis	ICD-10-CM
J45.5	Severe persistent asthma	Diagnosis	ICD-10-CM
J45.50	Severe persistent asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.51	Severe persistent asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.52	Severe persistent asthma with status asthmaticus	Diagnosis	ICD-10-CM
J45.9	Other and unspecified asthma	Diagnosis	ICD-10-CM
J45.90	Unspecified asthma	Diagnosis	ICD-10-CM

Appendix F. List of Current Procedural Terminology, Fourth Edition (CPT-4), Current Procedural Terminology, Second Edition (CPT-2), Healthcare Common Procedure Coding System, Level II (HCPCS), International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), and International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS) Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Category	Code Type
J45.901	Unspecified asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.902	Unspecified asthma with status asthmaticus	Diagnosis	ICD-10-CM
J45.909	Unspecified asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.99	Other asthma	Diagnosis	ICD-10-CM
J45.990	Exercise induced bronchospasm	Diagnosis	ICD-10-CM
J45.991	Cough variant asthma	Diagnosis	ICD-10-CM
J45.998	Other asthma	Diagnosis	ICD-10-CM

Appendix G. Specifications Defining Parameters for this Request

This request executed the Cohort Identification and Descriptive Analysis (CIDA) Pregnancy tool 12.0.0 to assess product utilization with pregnancy postmarketing requirement(s) and/or commitment(s) (PMRs/PMCs) among live birth deliveries during the pregnancy episode in the Sentinel Distributed Database (SDD).

Query period (bound by the delivery date): January 1, 2008 - June 30, 2022

Coverage requirement: Medical & Drug Coverage

Enrollment gap: 45 days

Age groups (calculated at delivery date): 10-17, 18-24, 25-34, 35-44, 45-54 years

Sex: Female only

Stratifications_Run01: Trimester, MOI Name, Pre/Term/Post/None, Enrollment/Coverage eligible

Stratifications_Run02: Trimester, MOI Name, Pre/Term/Post/None, Enrollment/Coverage eligible, Year

Output by gestational week: No

Restrictions: ASO; Demographic restrictions

Envelope macro: Reclassify encounters during inpatient stay as inpatient

Freeze data: No

Pregnancy Episode Creation

Scenario	Delivery Definition	Pregnancy Cohort Definition	Delivery Care Setting	Delivery Washout Period	Enrollment Required Pre-Delivery (ENRDAYS)	Pre-pregnancy period (relative to pregnancy start date) (PREPREGDAYS)	Post-delivery period (relative to delivery date)	Pregnancy Duration Definition (Pre/PostTerm Codes)	Pre/Post-Term Code Evaluation Window Relative to Delivery Date	Pregnancy Duration in Absence of Pre/Post-Term Codes
1	Use Pregnancy Algorithm Codes*	Cohort includes all valid pregnancy episodes during the query period	Inpatient hospital stay, any diagnosis position	301 for all pregnancy outcomes	391 (301 max preg + 90 cov)	90	90	Use Pregnancy Algorithm Codes*	7 days (recommended by MEPREP algorithm)	273 days (recommended by MEPREP algorithm)
2	Use Pregnancy Algorithm Codes*	Cohort includes all valid pregnancy episodes during the query period	Inpatient hospital stay, any diagnosis position	180 for all pregnancy outcomes	180	60	60	Use Pregnancy Algorithm Codes*	7 days (recommended by MEPREP algorithm)	273 days (recommended by MEPREP algorithm)

ICD-9, ICD-10, HCPCS, and CPT codes are provided by Optum360.

National Drug Codes (NDCs) are checked against First Data Bank's "FDB MedKnowledge®"

MOI: Medical Products of Interest

ASO: Administrative Services Only

MEPREP: Medication Exposure in Pregnancy Risk Evaluation Program

Appendix G. Specifications Defining Parameters for this Request (continued)

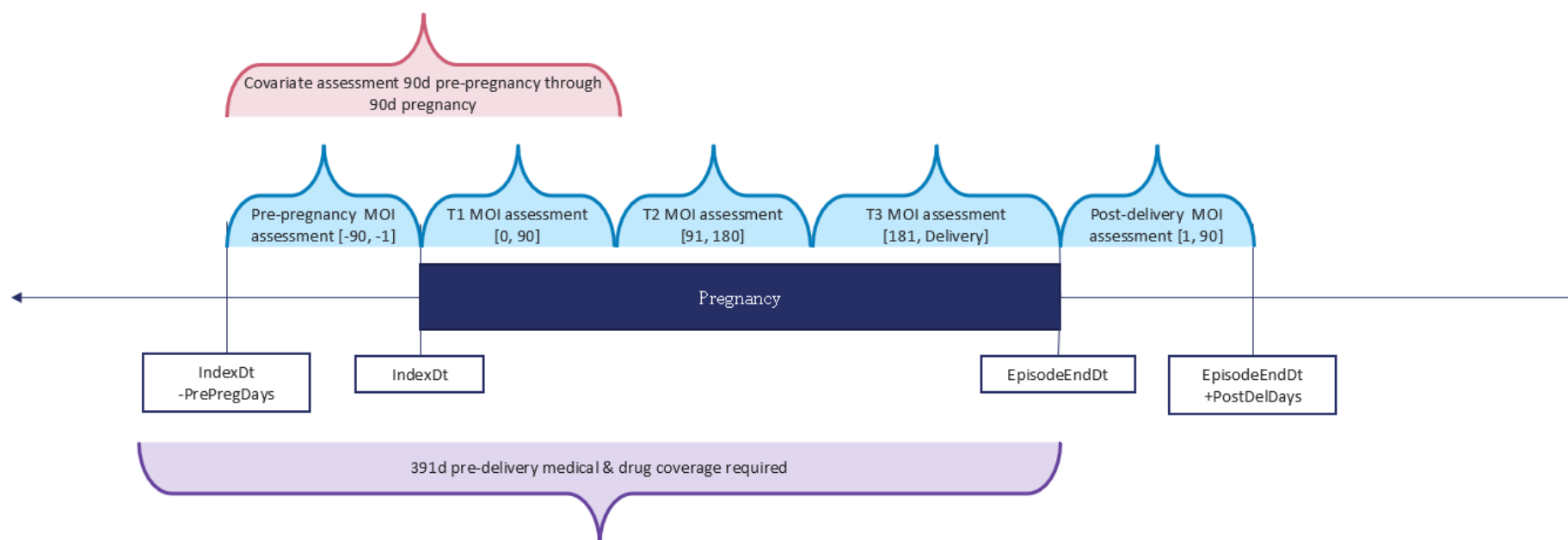
Medical Product of Interest (MOI) Exposure Episode Creation								
Scenario	MOI	Cohort Definition	Incident MOI washout period	MOI episode gap	Blackout period (relative to pregnancy start)	Remove MOI on delivery date	Care setting	Principal diagnosis position
1	See MOI list*	All valid MOI exposure episodes during pregnancy episode	0	0 days	0	Do not exclude MOIs with Adate equivalent to pregnancy delivery date	Any	N/A
2	See MOI list*	All valid MOI exposure episodes during pregnancy episode	0	0 days	0	Do not exclude MOIs with Adate equivalent to pregnancy delivery date	Any	N/A
ICD-9, ICD-10, HCPCS, and CPT codes are provided by Optum360. NDC codes are checked against First Data Bank's "FDB MedKnowledge®"								

Appendix G. Specifications Defining Parameters for this Request (continued)

Inclusion/Exclusion Criteria									
Scenario	Inclusion/ Exclusion group	Criteria	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	Exclude evidence of days supply if inclusion/ exclusion evaluation period includes dispensings	Number of instances the criteria should be found in evaluation period	Forced supply to attach to dispensings
1	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A	N/A
2	Delivery	Exclusion: Enforced enrollment during evaluation window	Inpatient hospital stay	Any (IP* in input files)	0	120	N/A	1	N/A
ICD-9, ICD-10, HCPCS, and CPT codes are provided by Optum360. NDC codes are checked against First Data Bank's "FDB MedKnowledge®"									

Appendix H. Design Diagrams for this Request

Design Diagram for Main Cohort

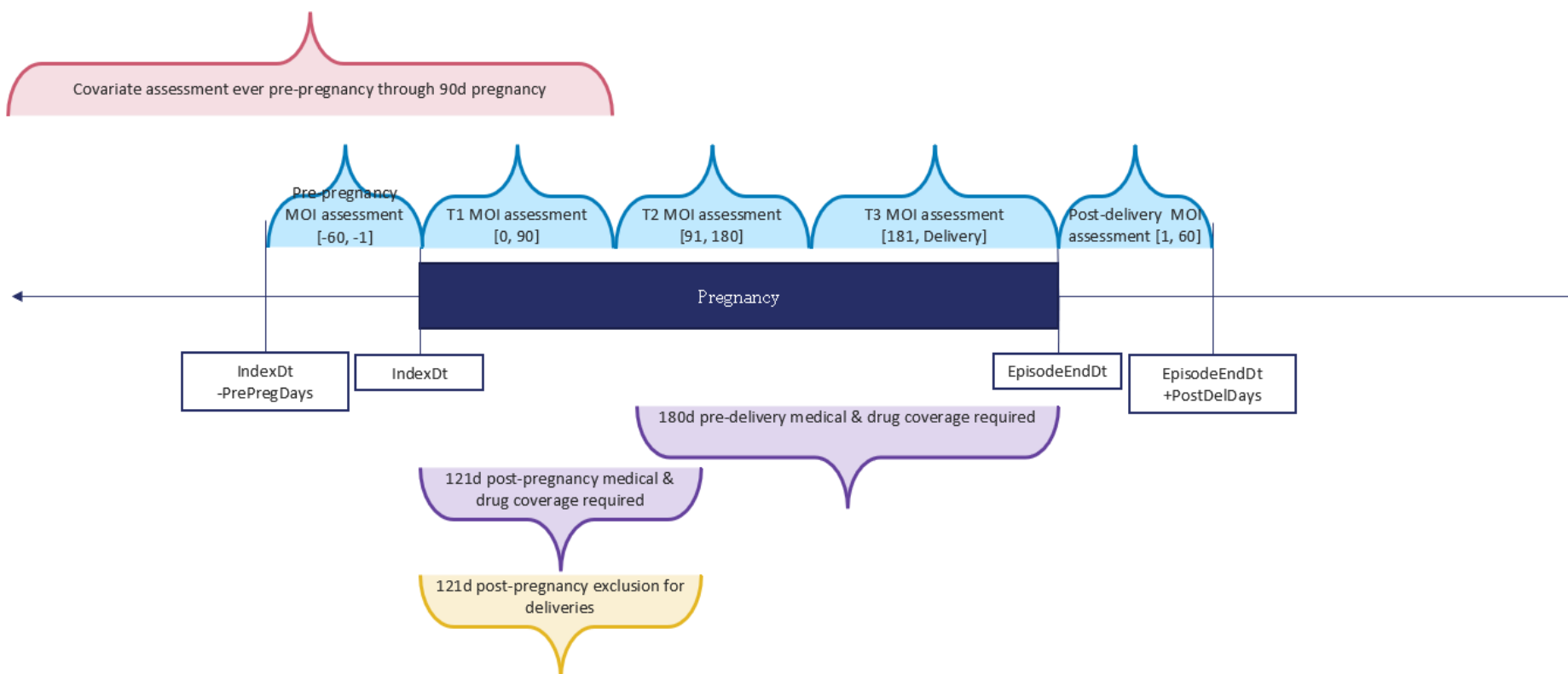


¹MOI: Medical Products of Interest

²MEPREP: Medication Exposure in Pregnancy Risk Evaluation Program

Appendix H. Design Diagrams for this Request

Design Diagram for Sensitivity Cohort



Appendix H. Design Diagrams for this Request

Figure 1. Diagram to identify a pregnancy episode and assess medical product utilization

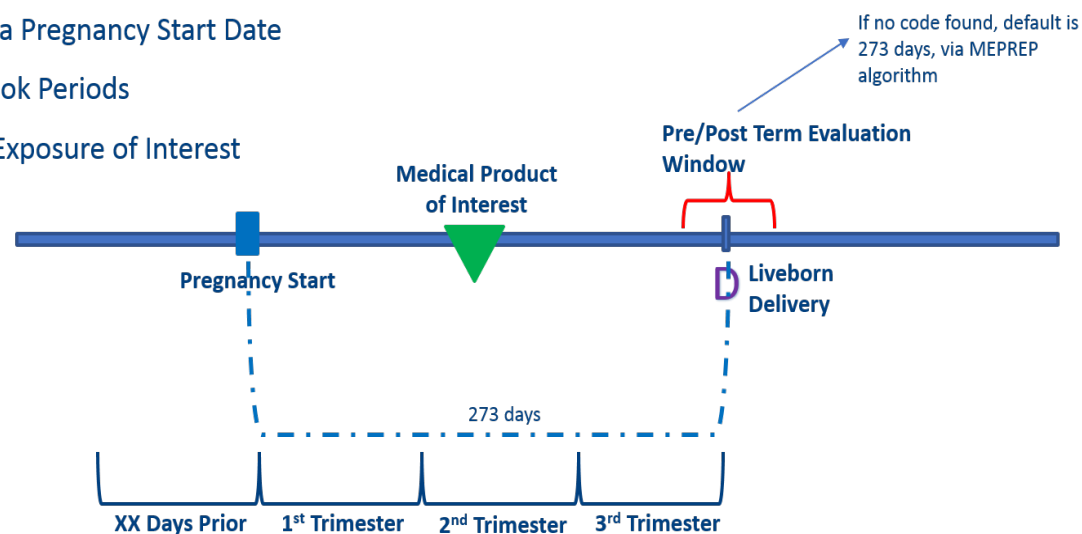
Patient A

Step 1: Identify Delivery

Step 2: Establish a Pregnancy Start Date

Step 3: Define Look Periods

Step 4: Look for Exposure of Interest



Gestational age is not documented in claims data: It must be *derived*.

[Li et al. 2013. *Pharmacoepi Drug Safety*]

Appendix H. Design Diagrams for this Request

Figure 2. Establishing a pregnancy episode matched against a comparator episode without evidence of a live-birth delivery

