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).

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Overview for Request: cder_sir_wp011

Request ID: cder_sir_wp011_nsdp_v01

Request Description: In this report, we performed signal identification for Biktarvy® (bictegravir/emtricitabine/tenofovir alafenamide, BIC/FTC/TAF) by monitoring non-pregnancy and non-cancer outcomes among new users of Biktarvy® in the Sentinel Distributed Database (SDD).
Sentinel Routine Querying Module: Cohort Identification and Descriptive Analysis (CIDA) module, version 13.2.1, with the Signal Identification (SI) module.

Data Source: We distributed this query to 13 Sentinel Data Partners on October 23, 2024. The study period included data from February 8, 2018 to May 31, 2024. See Appendix A for a list of dates of available data for each Data Partner.

Study Design: We conducted this signal identification assessment using a self-controlled risk interval design to identify incident outcomes and temporal clusters of incident outcomes following initiation of treatment with BIC/FTC/TAF in Tree-Only Scan and Tree-Temporal Scan analyses. We identified all valid episodes of new BIC/FTC/TAF use among those of all ages at the time of treatment initiation and screened for the occurrence of incident health outcomes of interest (HOIs) during pertinent risk and control windows. The Tree-Only Scan analysis used a fixed risk window and pre-treatment control window of the same lengths: the risk window was from 1 to 28 days post-treatment initiation and the pre-treatment control window was -56 days to -29 days prior to treatment initiation. There was also a Tree-Temporal Scan analysis with a variable risk window from days 1 to 183 post-treatment initiation to identify temporal clusters of incident outcomes. This is a Type 3 Signal Identification analysis in the Query Request Package (QRP) documentation.

Exposure of Interest: We defined the exposure of interest, BIC/FTC/TAF, using National Drug Codes (NDCs). NDCs were queried in the dispensing and procedure tables in the Sentinel Common Data Model (SCDM) format. All valid and qualifying treatment dispensings (index exposures) were evaluated; cohort re-entry was allowed. Please see Appendix C for generic and brand names of medical products used to define the exposure in this request.

Cohort Eligibility Criteria: We required members to be enrolled in health plans with medical and drug coverage for at least 456 days prior to the index date (400 days for the Tree-Temporal Scan cohort), during which gaps in coverage of up to 45 days were allowed and treated as continuous enrollment. The following age groups were included in the cohort: 0-11, 12-17, 18-24, 25-34, 35-44, 45-54, 55-64, 65-74, and 75+ years. We defined incident exposure as no evidence of BIC/FTC/TAF in the previous 456 days for the Tree-Only Scan cohort and in the previous 184 days for the Tree-Temporal Scan cohort. The Tree-Only and Tree-Temporal Scan cohorts additionally required 28 and 183 days of post-exposure continuous enrollment, respectively. In both groups, we excluded treatment episodes wiht evidence of ongoing pregnancy ([-183, 28] or [-183, 183] days around index, respectively), recent delivery ([-56, 28] or [0, 183] days around index, respectively), exposure to contraindicated drugs, or malignancy ([-456, 0] or [-400, 0] days around index, respectively).
Exclusion criteria were defined using Current Procedural Terminology, Fourth Edition (CPT-4), HCPCS, International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), and NDC codes. See Appendix D for diagnosis and procedure codes, Appendix E for generic and brand names of medical products used to define exclusion criteria.

Overview for Request: cder_sir_wp011

Baseline Characteristics: We evaluated the following demographic characteristics on the index date: age, sex, race, ethnicity, and year of treatment initiation. We additionally evaluated the following characteristics:

- Components of HIV Severity assessed during days [-400, 0] around treatment initiation:
  - Either [[CD4+ cell count less than 500 or <15% CD4+ cells]] or both [[an HIV (B20) diagnosis and a diagnosis for an opportunistic infection listed in CDC's "Guidelines for the Prevention and Treatment of Opportunistic Infections in Adults and Adolescents with HIV"[1]]], or
  - Either [[CD4+ cell count less than 500 or <15% CD4+ cells]] or both [[an HIV (B20) diagnosis and a diagnosis for an oppotunistic infection as above except certain infections deemed less likely to be opportunistic (including bacterial enteric infections, Chagas disease, community-acquired pneumonia, Hepatitis B, Hepatitis C, Herpes Simplex, Human Herpesvirus 8, Human Papillomavirus, leishmaniasis, malaria, M-pox, syphilis, and Varicella-zoster)]].
- Evidence of antiretroviral use assessed during days [-400, -1] around treatment initiation
- Evidence of any diagnosis for the following CMS Chronic Conditions Warehouse chronic comorbidities[2] assessed [-400, -1] around treatment initiation:
  - Acute myocardial infarction, Alzheimer's disease, anemia, asthma, atrial fibrillation or flutter, benign prostatic hyperplasia, breast cancer, colorectal cancer, endometrial cancer, lung cancer, prostate cancer, urologic cancer, cataracts, chronic kidney disease, chronic obstructive pulmonary disorder, depression, bipoloar, or other mood disorders, diabetes, glaucoma, heart failure and non-ischemic heart disease, hip/pelvic fracture, hyperlipidemia, hypertension, hypothyroidism, ischemic heart disease, non-Alzheimer's dementia, osteoporosis, Parkinson's disease and secondary parkinsonism, rheumatoid arthritis/osteoarthritis, stroke/transient ischemic attack, and hepatic disorders
- Combined Comorbidity Score[3] assessed during days [-400, -1] around treatment initiation
- Healthcare utilization assessed during days [-400, -1] around treatment initiation

Please see Appendix F for a list of CPT-4, CPT-2, HCPCS, and ICD-10-PCS procedure codes along with ICD-10-CM diagnosis codes, and Appendix F for a list of generic and brand names used to define characteristics in this request.

Outcome Assessment via Signal Identification: We evaluated new HOIs using a hierarchical tree based on ICD-10-CM diagnosis codes. We trimmed our tree to exclude outcomes that are unlikely to be drug-related (such as those with long induction and latency windows like neoplasms; or those caused by external factors). Chapters beginning with C (neoplasms), D* (neoplasms), O (pregnancy), P (perinatal), Q (congenital malformations), V-Y* were excluded. The asterisk * indicates some exceptions, for example, neoplasms of uncertain behavior of lymphoid, hematopoietic, and related tissue (D47), falls (W00-W19), intentional self-harm (X71-X83) are retained on the tree as they may be related to drug exposures.

In our primary Tree-Only and Tree-Temporal Scan analyses, we identified incident HOIs occurring in the inpatient or emergency department settings. In our sensitivity analyses, we identified HOIs occurring in the inpatient, emergency department, or ambulatory settings. An outcome was considered to be incident if there was no evidence of an outcome with the same first 3 digits of the ICD-10-CM code in the prior 400 days in any setting. We identified signals in the overall cohorts as well as in sub-populations defined by evidence of prior antiretroviral use.

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Tree-Based Scan Statistics: Potential signals were identified via the TreeScan™ software (version 2.1.1). TreeScan™ is a data-mining software that implements tree-based scan statistics. The software determined whether there were statistically significant elevations in the frequencies of incident outcomes post-treatment initiation and temporal clustering of outcomes in the post-treatment period after adjusting for multiple testing. For our Tree-Only Scan analyses that compared the incidence of outcomes in post-treatment risk windows with those in pre-treatment control windows, we used a conditional Bernoulli model to calculate the log likelihood ratio for every 3rd-5th level node of the outcome tree. For our Tree-Temporal Scan analyses that identified temporal clusters of incident HOIs in the variable 183-day post-treatment risk window, we used a Tree-Temporal Scan Statistic conditioned on node and time. See Appendices B.1 and B.2 for calculation of test statistics.

Please see **Appendices H-J for the specifications of parameters used in this request and design diagrams.**

Limitations: Statistical signals identified in these analyses do not imply causal relationships between treatments and outcomes, and require further evaluation. Algorithms to define exposures, outcomes, exclusion criteria, and baseline characteristics are imperfect and may be misclassified. Therefore, data should be interpreted with this limitation in mind.

Notes: Please contact the Sentinel Operations Center (info@sentinelsystem.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.sentinelsystem.org/projects/SENTINEL/repos/sentinel-routine-querying-tool-documentation/browse).

[1]National Institutes of Health, Centers for Disease Control and Prevention, HIV Medicine Association, and Infectious Diseases Society of America. "Guidelines for the Prevention and Treatment of Opportunistic Infections in Adults and Adolescents with HIV," October 8, 2024. https://clinicalinfo.hiv.gov/en/guidelines/hiv-clinical-guidelines-adult-and-adolescent-opportunistic-infections/whats-new.

[2]Chronic Conditions Warehouse. "30 CCW Chronic Conditions Algorithms," February 2023. https://www2.ccwdata.org/web/guest/condition-categories-chronic.

[3]Gagne, Joshua J., Robert J. Glynn, Jerry Avorn, Raisa Levin, and Sebastian Schneeweiss. "A Combined Comorbidity Score Predicted Mortality in Elderly Patients Better than Existing Scores." *Journal of Clinical Epidemiology* 64, no. 7 (July 2011): 749–59.

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Table 1a. Characteristics of BIC/FTC/TAF Tree-Only Cohort in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024

	BIC/FTC/TAF Tree-Only Cohort	
Patient Characteristics	**Number/Mean**	**Percent/ Standard Deviation[1]**
Unique patients	114,403	N/A
Episodes	115,824	100.0%
Demographic Characteristics		
Age (years)	47.4	12.6
Age		
0-11 years	222	0.2%
12-17 years	755	0.7%
18-24 years	6,234	5.4%
25-34 years	19,382	16.7%
35-44 years	20,939	18.1%
45-54 years	29,038	25.1%
55-64 years	28,907	25.0%
65-74 years	8,756	7.6%
≥ 75 years	1,591	1.4%
Sex		
Female	30,755	26.9%
Male	83,648	73.1%
Race[2]		
American Indian or Alaska Native	1,082	0.9%
Asian	1,752	1.5%
Black or African American	44,931	39.3%
Multi-racial	762	0.7%
Native Hawaiian or Other Pacific Islander	198	0.2%
Unknown	32,255	28.2%
White	33,423	29.2%
Hispanic origin		
Yes	15,131	13.2%
No	78,593	68.7%
Unknown	20,679	18.1%
Year		
2018	26,516	22.9%
2019	35,246	30.4%
2020	21,129	18.2%
2021	21,894	18.9%
2022	5,790	5.0%

Table 1a. Characteristics of BIC/FTC/TAF Tree-Only Cohort in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024

	BIC/FTC/TAF Tree-Only Cohort	
Patient Characteristics	**Number/Mean**	**Percent/ Standard Deviation[1]**
2023	4,913	4.2%
2024	336	0.3%
Health Characteristics		
Low CD4+ Cell Count (CD4+ Count <500 or <15% CD4+ Cells)	34	0.0%
B20 HIV diagnosis	101,995	88.1%
Opportunistic infections, definition A[3]	35,938	31.0%
(Low CD4+ Cell Count) OR (B20 HIV Diagnosis AND Definition A Opportunistic Infections)	33,769	29.2%
Opportunistic infections, definition B[3]	8,193	7.1%
(Low CD4+ Cell Count) OR (B20 HIV Diagnosis AND Definition B Opportunistic Infections)	8,023	6.9%
Acute Myocardial Infarction	1,876	1.6%
Alzheimers Disease	172	0.1%
Anemia	16,130	13.9%
Asthma	13,480	11.6%
Atrial Fibrillation or Flutter	2,452	2.1%
Benign Prostatic Hyperplasia	6,389	5.5%
Breast Cancer	177	0.2%
Colorectal Cancer	374	0.3%
Endometrial Cancer	43	0.0%
Lung Cancer	50	0.0%
Prostate Cancer	149	0.1%
Urologic Cancer	45	0.0%
Cataract	7,861	6.8%
Chronic Kidney Disease	10,089	8.7%
Chronic Obstructive Pulmonary Disorder	13,121	11.3%
Depression Bipolar or Other Mood Disorders	33,810	29.2%
Diabetes	16,818	14.5%
Glaucoma	4,384	3.8%
Heart Failure and Non-Ischemic Heart Disease	5,360	4.6%
Hip Pelvic Fracture	399	0.3%
Hyperlipidemia	35,219	30.4%
Hypertension	41,073	35.5%
Hypothyroidism	5,587	4.8%
Ischemic Heart Disease	7,892	6.8%

Table 1a. Characteristics of BIC/FTC/TAF Tree-Only Cohort in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024

	BIC/FTC/TAF Tree-Only Cohort	
Patient Characteristics	**Number/Mean**	**Percent/ Standard Deviation[1]**
Non-Alzheimers Dementia	1,916	1.7%
Osteoporosis	2,562	2.2%
Parkinsons	362	0.3%
Rheumatoid Arthritis Osteoarthritis	16,950	14.6%
Stroke Transient Ischemic Attack	3,738	3.2%
Hepatic Disorders	19,039	16.4%
Medical Product Use		
Prior antiretroviral use	85,627	73.9%
Health Service Utilization Intensity Metrics		
Mean number of ambulatory encounters	18.6	33.2
Mean number of emergency room encounters	1.2	3.0
Mean number of non-acute institutional encounters	0.1	0.5
Mean number of other ambulatory encounters	14.4	40.3
Mean number of filled prescriptions	46.0	47.1
Mean number of generics dispensed	9.4	7.3
Mean number of unique drug classes dispensed	8.2	6.2

[1]Value represents standard deviation where no % follows the value.

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

[3]Definition A Includes all infections listed in CDC's "Guidelines for the Prevention and Treatment of Opportunistic Infections in Adults and Adolescents with HIV." Definition B excludes certain infections deemed less likely to be opportunistic (including bacterial enteric infections, Chagas disease, community-acquired pneumonia, Hepatitis B, Hepatitis C, Herpes Simplex, Human Herpesvirus 8, Human Papillomavirus, leishmaniasis, malaria, M-pox, syphilis, and Varicella-zoster). See Appendix F for all diagnosis and procedure codes used to define both defintions of opportunistic infections.

Table 1b. Characteristics of BIC/FTC/TAF Tree-Temporal Cohort in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024

	BIC/FTC/TAF Tree-Temporal Cohort	
Patient Characteristics	**Number/Mean**	**Percent/ Standard Deviation[1]**
Unique patients	103,402	N/A
Episodes	108,915	100.0%
Demographic Characteristics		
Age (years)	47.5	12.4
Age		
0-11 years	200	0.2%
12-17 years	639	0.6%
18-24 years	5,420	5.0%
25-34 years	18,139	16.7%
35-44 years	19,802	18.2%
45-54 years	27,719	25.5%
55-64 years	27,101	24.9%
65-74 years	8,417	7.7%
≥ 75 years	1,478	1.4%
Sex		
Female	27,651	26.7%
Male	75,751	73.3%
Race[2]		
American Indian or Alaska Native	972	0.9%
Asian	1,576	1.5%
Black or African American	40,592	39.3%
Multi-racial	677	0.7%
Native Hawaiian or Other Pacific Islander	190	0.2%
Unknown	28,646	27.7%
White	30,749	29.7%
Hispanic origin		
Yes	13,637	13.2%
No	71,548	69.2%
Unknown	18,217	17.6%
Year		
2018	25,113	23.1%
2019	33,910	31.1%
2020	23,149	21.3%
2021	17,295	15.9%
2022	6,101	5.6%

Table 1b. Characteristics of BIC/FTC/TAF Tree-Temporal Cohort in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024

	BIC/FTC/TAF Tree-Temporal Cohort	
Patient Characteristics	**Number/Mean**	**Percent/ Standard Deviation[1]**
2023	3,347	3.1%
2024	0	0.0%
Health Characteristics		
Low CD4+ Cell Count (CD4+ Count <500 or <15% CD4+ Cells)	31	0.0%
B20 HIV diagnosis	96,537	88.6%
Opportunistic infections, definition A[3]	33,831	31.1%
(Low CD4+ Cell Count) OR (B20 HIV Diagnosis AND Definition A Opportunistic Infections)	31,908	29.3%
Opportunistic infections, definition B[3]	7,614	7.0%
(Low CD4+ Cell Count) OR (B20 HIV Diagnosis AND Definition B Opportunistic Infections)	7,449	6.8%
Acute Myocardial Infarction	1,715	1.6%
Alzheimers Disease	160	0.1%
Anemia	14,828	13.6%
Asthma	12,637	11.6%
Atrial Fibrillation or Flutter	2,238	2.1%
Benign Prostatic Hyperplasia	6,017	5.5%
Breast Cancer	175	0.2%
Colorectal Cancer	362	0.3%
Endometrial Cancer	42	0.0%
Lung Cancer	49	0.0%
Prostate Cancer	152	0.1%
Urologic Cancer	51	0.0%
Cataract	7,418	6.8%
Chronic Kidney Disease	9,263	8.5%
Chronic Obstructive Pulmonary Disorder	12,276	11.3%
Depression Bipolar or Other Mood Disorders	32,051	29.4%
Diabetes	15,722	14.4%
Glaucoma	4,133	3.8%
Heart Failure and Non-Ischemic Heart Disease	4,859	4.5%
Hip Pelvic Fracture	363	0.3%
Hyperlipidemia	32,974	30.3%
Hypertension	38,508	35.4%
Hypothyroidism	5,219	4.8%
Ischemic Heart Disease	7,282	6.7%

Table 1b. Characteristics of BIC/FTC/TAF Tree-Temporal Cohort in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024

	BIC/FTC/TAF Tree-Temporal Cohort	
Patient Characteristics	**Number/Mean**	**Percent/ Standard Deviation[1]**
Non-Alzheimers Dementia	1,757	1.6%
Osteoporosis	2,467	2.3%
Parkinsons	325	0.3%
Rheumatoid Arthritis Osteoarthritis	15,901	14.6%
Stroke Transient Ischemic Attack	3,430	3.1%
Hepatic Disorders	17,924	16.5%
Medical Product Use		
Prior antiretroviral use	83,972	77.1%
Health Service Utilization Intensity Metrics		
Mean number of ambulatory encounters	18.5	33.3
Mean number of emergency room encounters	1.2	3.0
Mean number of non-acute institutional encounters	0.1	0.4
Mean number of other ambulatory encounters	14.2	39.7
Mean number of filled prescriptions	45.6	47.1
Mean number of generics dispensed	9.4	7.2
Mean number of unique drug classes dispensed	8.2	6.2

[1]Value represents standard deviation where no % follows the value.

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

[3]Definition A Includes all infections listed in CDC's "Guidelines for the Prevention and Treatment of Opportunistic Infections in Adults and Adolescents with HIV." Definition B excludes certain infections deemed less likely to be opportunistic (including bacterial enteric infections, Chagas disease, community-acquired pneumonia, Hepatitis B, Hepatitis C, Herpes Simplex, Human Herpesvirus 8, Human Papillomavirus, leishmaniasis, malaria, M-pox, syphilis, and Varicella-zoster). See Appendix F for all diagnosis and procedure codes used to define both defintions of opportunistic infections.

Table 2a. Signal Identification Outcome Assessment[1], via Conditional Bernoulli Tree-Based Scan Statistic[2] among BIC/FTC/TAF Initiators in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024, P-Value ≤ 0.05

Node Name	Node ID	Node Level	Total Node Outcomes in Risk and Control Windows	Node Outcomes in Risk Window	Expected Node Outcomes in Risk Window	Relative Risk	Test Statistic[2]	P-Value
Inpatient or Emergency Department Setting								
Immune reconstitution syndrome	D893ngrp	5	51	41	21.2	1.94	16.13	0.001
Immune reconstitution syndrome	D893grp	4	51	41	21.2	1.94	16.13	0.001
Infection due to other mycobacteria	A31grp	3	65	48	27.02	1.78	13.93	0.001
Other disorders involving the immune mechanism, not elsewhere classified	D89grp	3	95	62	39.49	1.57	10.82	0.004
Disseminated mycobacterium avium-intracellulare complex (DMAC)	A312ngrp	5	35	27	14.55	1.86	9.19	0.016
Disseminated mycobacterium avium-intracellulare complex (DMAC)	A312grp	4	35	27	14.55	1.86	9.19	0.016
Inpatient, Emergency Department, or Outpatient Setting								
Gonococcal infection	A54grp	3	714	508	337.01	1.51	84.28	0.001
Other and unspecified syphilis	A53grp	3	1379	843	650.88	1.3	54.22	0.001
Syphilis, unspecified	A539grp	4	1132	699	534.3	1.31	48.52	0.001
Syphilis, unspecified	A539ngrp	5	1132	699	534.3	1.31	48.52	0.001
Disorders of refraction and accommodation	H52grp	3	1750	1029	825.99	1.25	47.69	0.001
Late syphilis, latent	A528grp	4	239	185	112.81	1.64	45.73	0.001
Late syphilis, latent	A528ngrp	5	239	185	112.81	1.64	45.73	0.001
Gonococcal infection, unspecified	A549grp	4	432	302	203.9	1.48	45.63	0.001
Gonococcal infection, unspecified	A549ngrp	5	432	302	203.9	1.48	45.63	0.001
Gonococcal infection of anus and rectum	A546ngrp	5	122	104	57.58	1.81	38.55	0.001
Gonococcal infection of anus and rectum	A546grp	4	122	104	57.58	1.81	38.55	0.001
Late syphilis	A52grp	3	350	244	165.2	1.48	36.31	0.001
Abnormal findings in specimens from digestive organs and abdominal cavity	R85grp	3	362	241	170.86	1.41	27.62	0.001
Abnormal cytologic smear of anus	R8561grp	5	337	225	159.06	1.42	26.23	0.001
Abnormal cytologic smear of anus	R856grp	4	338	225	159.53	1.41	25.77	0.001
Reaction to severe stress, and adjustment disorders	F43grp	3	1149	662	542.32	1.22	25.14	0.001
Gonococcal pharyngitis	A545grp	4	86	70	40.59	1.73	21.46	0.001
Gonococcal pharyngitis	A545ngrp	5	86	70	40.59	1.73	21.46	0.001

Table 2a. Signal Identification Outcome Assessment[1], via Conditional Bernoulli Tree-Based Scan Statistic[2] among BIC/FTC/TAF Initiators in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024, P-Value ≤ 0.05

Node Name	Node ID	Node Level	Total Node Outcomes in Risk and Control Windows	Node Outcomes in Risk Window	Expected Node Outcomes in Risk Window	Relative Risk	Test Statistic[2]	P-Value
Presbyopia	H524grp	4	409	257	193.05	1.33	20.20	0.001
Presbyopia	H524ngrp	5	409	257	193.05	1.33	20.20	0.001
Immune reconstitution syndrome	D893ngrp	5	64	54	30.21	1.79	19.20	0.001
Immune reconstitution syndrome	D893grp	4	64	54	30.21	1.79	19.20	0.001
Adjustment disorders	F432grp	4	608	363	286.97	1.27	19.15	0.001
Astigmatism	H522grp	4	549	330	259.13	1.27	18.44	0.001
Chlamydial infection of anus and rectum	A563ngrp	5	83	66	39.18	1.69	18.33	0.001
Chlamydial infection of anus and rectum	A563grp	4	83	66	39.18	1.69	18.33	0.001
Other abnormal immunological findings in serum	R76grp	3	478	290	225.61	1.29	17.48	0.001
Other sexually transmitted chlamydial diseases	A56grp	3	145	103	68.44	1.51	16.90	0.001
Age-related cataract	H25grp	3	787	452	371.46	1.22	16.59	0.001
Infection due to other mycobacteria	A31grp	3	95	72	44.84	1.61	16.17	0.001
Regular astigmatism	H5222grp	5	391	240	184.55	1.3	15.85	0.001
Chlamydial infection, unspecified	A749grp	4	216	143	101.95	1.4	15.83	0.001
Chlamydial infection, unspecified	A749ngrp	5	216	143	101.95	1.4	15.83	0.001
Other diseases caused by chlamydiae	A74grp	3	218	144	102.9	1.4	15.72	0.001
Nonspecific reaction to test for tuberculosis	R761grp	4	228	149	107.62	1.39	15.22	0.001
Early syphilis, latent	A515grp	4	88	66	41.54	1.59	14.12	0.001
Early syphilis, latent	A515ngrp	5	88	66	41.54	1.59	14.12	0.001
Major depressive disorder, recurrent	F33grp	3	1115	614	526.28	1.17	13.90	0.001
Generalized anxiety disorder	F411grp	4	446	264	210.51	1.25	12.91	0.001
Generalized anxiety disorder	F411ngrp	5	446	264	210.51	1.25	12.91	0.001
Disorders of lacrimal system	H04grp	3	477	280	225.14	1.24	12.69	0.001
Other disorders of lacrimal gland	H041grp	4	448	264	211.45	1.25	12.40	0.001
Dry eye syndrome	H0412grp	5	448	264	211.45	1.25	12.40	0.001
Disseminated mycobacterium avium-intracellulare complex (DMAC)	A312ngrp	5	46	38	21.71	1.75	12.39	0.001
Disseminated mycobacterium avium-intracellulare complex (DMAC)	A312grp	4	46	38	21.71	1.75	12.39	0.001
Open angle with borderline findings, low risk	H4001grp	5	159	106	75.05	1.41	12.24	0.001

Table 2a. Signal Identification Outcome Assessment[1], via Conditional Bernoulli Tree-Based Scan Statistic[2] among BIC/FTC/TAF Initiators in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024, P-Value ≤ 0.05

Node Name	Node ID	Node Level	Total Node Outcomes in Risk and Control Windows	Node Outcomes in Risk Window	Expected Node Outcomes in Risk Window	Relative Risk	Test Statistic[2]	P-Value
Nonspecific reaction to cell mediated immunity measurement of gamma interferon antigen response without active tuberculosis	R7612grp	5	106	75	50.03	1.5	12.05	0.002
Abnormal findings in specimens from female genital organs	R87grp	3	272	168	128.38	1.31	11.63	0.005
Seborrheic keratosis	L82grp	3	347	208	163.78	1.27	11.34	0.006
Major depressive disorder, recurrent, moderate	F331grp	4	442	258	208.62	1.24	11.09	0.006
Major depressive disorder, recurrent, moderate	F331ngrp	5	442	258	208.62	1.24	11.09	0.006
Adjustment disorder with mixed anxiety and depressed mood	F4323grp	5	172	111	81.18	1.37	10.46	0.014
Other disorders of bone density and structure	M85grp	3	402	235	189.74	1.24	10.24	0.015
Age-related nuclear cataract	H251grp	4	502	287	236.94	1.21	10.03	0.016
Other specified disorders of bone density and structure	M858grp	4	379	222	178.89	1.24	9.86	0.017
Abnormal cytological findings in specimens from female genital organs	R876grp	4	208	130	98.18	1.32	9.82	0.017
Abnormal cytological findings in specimens from cervix uteri	R8761grp	5	199	124	93.93	1.32	9.16	0.038

[1]Outcomes were assessed at the 3, 4, and 5th level with a 400-day washout using the hierarchical ICD-10-CM tree structure.

[2]Conditional Bernoulli log likelihood ratio (LLR) based test statistic. See Appendix B.1 for more information.

Table 2b. Signal Identification Outcome Assessment[1], via Conditional Bernoulli Tree-Based Scan Statistic[2] among BIC/FTC/TAF Initiators in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024, P-Value ≤ 0.05, by Evidence of Prior Antiretroviral Use

Node Name	Node ID	Node Level	Total Node Outcomes in Risk and Control Windows	Node Outcomes in Risk Window	Expected Node Outcomes in Risk Window	Relative Risk	Test Statistic[2]	P-Value
Inpatient or Emergency Department Setting								
With Evidence of Prior Antiretroviral Use								
N/A[3]								
Without Evidence of Prior Antiretroviral Use								
Immune reconstitution syndrome	D893grp	4	35	33	13.64	2.42	24.44	0.001
Immune reconstitution syndrome	D893ngrp	5	35	33	13.64	2.42	24.44	0.001
Other disorders involving the immune mechanism, not elsewhere classified	D89grp	3	52	41	20.27	2.03	17.26	0.001
Infection due to other mycobacteria	A31grp	3	44	32	17.15	1.87	10.31	0.005
Syndrome of inappropriate secretion of antidiuretic hormone	E222ngrp	5	73	46	28.45	1.62	8.60	0.022
Hyperfunction of pituitary gland	E22grp	3	73	46	28.45	1.62	8.60	0.022
Syndrome of inappropriate secretion of antidiuretic hormone	E222grp	4	73	46	28.45	1.62	8.60	0.022
Dermatophytosis	B35grp	3	89	54	34.69	1.56	8.55	0.025
Inpatient, Emergency Department, or Outpatient Setting								
With Evidence of Prior Antiretroviral Use								
Gonococcal infection	A54grp	3	345	237	167.71	1.41	28.50	0.001
Disorders of refraction and accommodation	H52grp	3	1300	761	631.96	1.21	25.97	0.001
Gonococcal infection, unspecified	A549grp	4	215	146	104.52	1.4	16.35	0.001
Gonococcal infection, unspecified	A549ngrp	5	215	146	104.52	1.4	16.35	0.001
Other and unspecified syphilis	A53grp	3	578	345	280.98	1.23	14.32	0.002
Gonococcal infection of anus and rectum	A546ngrp	5	58	47	28.2	1.67	13.06	0.002
Gonococcal infection of anus and rectum	A546grp	4	58	47	28.2	1.67	13.06	0.002
Presbyopia	H524grp	4	337	208	163.82	1.27	11.70	0.004
Presbyopia	H524ngrp	5	337	208	163.82	1.27	11.70	0.004
Astigmatism	H522grp	4	387	233	188.13	1.24	10.49	0.012
Regular astigmatism	H5222grp	5	273	170	132.71	1.28	10.29	0.013
Syphilis, unspecified	A539grp	4	487	285	236.74	1.2	9.64	0.024
Syphilis, unspecified	A539ngrp	5	487	285	236.74	1.2	9.64	0.024
Age-related cataract	H25grp	3	677	384	329.11	1.17	8.97	0.040
Without Evidence of Prior Antiretroviral Use								

Table 2b. Signal Identification Outcome Assessment[1], via Conditional Bernoulli Tree-Based Scan Statistic[2] among BIC/FTC/TAF Initiators in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024, P-Value ≤ 0.05, by Evidence of Prior Antiretroviral Use

Node Name	Node ID	Node Level	Total Node Outcomes in Risk and Control Windows	Node Outcomes in Risk Window	Expected Node Outcomes in Risk Window	Relative Risk	Test Statistic[2]	P-Value
Gonococcal infection	A54grp	3	369	271	163.99	1.66	64.142837	0.001
Late syphilis, latent	A528grp	4	178	145	79.11	1.84	51.773399	0.001
Late syphilis, latent	A528ngrp	5	178	145	79.11	1.84	51.773399	0.001
Other and unspecified syphilis	A53grp	3	801	498	355.99	1.41	51.34434	0.001
Syphilis, unspecified	A539ngrp	5	645	414	286.66	1.45	51.255739	0.001
Syphilis, unspecified	A539grp	4	645	414	286.66	1.45	51.255739	0.001
Late syphilis	A52grp	3	252	185	112	1.66	43.636864	0.001
Abnormal cytologic smear of anus	R8561grp	5	73	67	32.44	2.07	37.159342	0.001
Abnormal findings in specimens from digestive organs and abdominal cavity	R85grp	3	78	70	34.67	2.02	35.714917	0.001
Abnormal cytological findings in specimens from digestive organs and abdominal cavity	R856grp	4	74	67	32.89	2.04	35.319699	0.001
Gonococcal infection, unspecified	A549ngrp	5	217	156	96.44	1.62	33.576289	0.001
Gonococcal infection, unspecified	A549grp	4	217	156	96.44	1.62	33.576289	0.001
Other abnormal immunological findings in serum	R76grp	3	223	157	99.11	1.59	30.765404	0.001
Reaction to severe stress, and adjustment disorders	F43grp	3	463	289	205.77	1.41	30.35861	0.001
Gonococcal infection of anus and rectum	A546grp	4	64	57	28.44	2.01	28.271152	0.001
Gonococcal infection of anus and rectum	A546ngrp	5	64	57	28.44	2.01	28.271152	0.001
Adjustment disorders	F432grp	4	287	189	127.55	1.48	26.734874	0.001
Immune reconstitution syndrome	D893ngrp	5	43	41	19.11	2.15	26.35094	0.001
Immune reconstitution syndrome	D893grp	4	43	41	19.11	2.15	26.35094	0.001
Nonspecific reaction to test for tuberculosis	R761grp	4	96	77	42.67	1.81	25.887908	0.001
Chlamydial infection of anus and rectum	A563grp	4	46	42	20.44	2.06	22.835632	0.001
Chlamydial infection of anus and rectum	A563ngrp	5	46	42	20.44	2.06	22.835632	0.001
Vitamin D deficiency, unspecified	E559grp	4	375	229	166.66	1.38	20.975504	0.001
Vitamin D deficiency, unspecified	E559ngrp	5	375	229	166.66	1.38	20.975504	0.001
Disorders of refraction and accommodation	H52grp	3	450	268	199.99	1.34	20.806128	0.001
Gonococcal pharyngitis	A545grp	4	43	39	19.11	2.04	20.683293	0.001
Gonococcal pharyngitis	A545ngrp	5	43	39	19.11	2.04	20.683293	0.001
Vitamin D deficiency	E55grp	3	376	229	167.11	1.37	20.620323	0.001

Table 2b. Signal Identification Outcome Assessment[1], via Conditional Bernoulli Tree-Based Scan Statistic[2] among BIC/FTC/TAF Initiators in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024, P-Value ≤ 0.05, by Evidence of Prior Antiretroviral Use

Node Name	Node ID	Node Level	Total Node Outcomes in Risk and Control Windows	Node Outcomes in Risk Window	Expected Node Outcomes in Risk Window	Relative Risk	Test Statistic[2]	P-Value
Chlamydial infection, unspecified	A749ngrp	5	134	96	59.55	1.61	20.323519	0.001
Chlamydial infection, unspecified	A749grp	4	134	96	59.55	1.61	20.323519	0.001
Other diseases caused by chlamydiae	A74grp	3	135	96	60	1.6	19.659355	0.001
Nonspecific reaction to cell mediated immunity measurement of gamma interferon antigen response without active tuberculosis	R7612grp	5	46	40	20.44	1.96	18.165126	0.001
Other sexually transmitted chlamydial diseases	A56grp	3	83	63	36.89	1.71	17.035291	0.001
Early syphilis, latent	A515ngrp	5	36	32	16	2	15.751816	0.001
Early syphilis, latent	A515grp	4	36	32	16	2	15.751816	0.001
Infection due to other mycobacteria	A31grp	3	65	51	28.89	1.77	15.737596	0.001
Depressive episode	F32grp	3	613	340	272.44	1.25	15.09745	0.001
Major depressive disorder, recurrent	F33grp	3	381	221	169.33	1.31	14.162385	0.001
Abnormal findings in specimens from female genital organs	R87grp	3	74	54	32.89	1.64	12.379947	0.001
Disseminated mycobacterium avium-intracellulare complex (DMAC)	A312grp	4	36	30	16	1.88	11.641312	0.002
Disseminated mycobacterium avium-intracellulare complex (DMAC)	A312ngrp	5	36	30	16	1.88	11.641312	0.002
Cytomegaloviral disease	B25grp	3	121	80	53.78	1.49	11.524391	0.002
Abnormal cytological findings in specimens from female genital organs	R876grp	4	61	45	27.11	1.66	10.805319	0.003
Other disorders involving the immune mechanism, not elsewhere classified	D89grp	3	87	60	38.67	1.55	10.655637	0.004
Adjustment disorder with mixed anxiety and depressed mood	F4323grp	5	89	61	39.55	1.54	10.51664	0.005
Abnormal cytological findings in specimens from cervix uteri	R8761grp	5	60	44	26.67	1.65	10.300916	0.008
Major depressive disorder, recurrent, moderate	F331ngrp	5	152	95	67.55	1.41	10.009496	0.009
Major depressive disorder, recurrent, moderate	F331grp	4	152	95	67.55	1.41	10.009496	0.009
Sleep disorders	G47grp	3	283	162	125.77	1.29	9.355415	0.023
Other specified abnormal immunological findings in serum	R768grp	4	119	76	52.89	1.44	9.075038	0.027
Other specified abnormal immunological findings in serum	R768ngrp	5	119	76	52.89	1.44	9.075038	0.027
Nonspecific reaction to tuberculin skin test without active tuberculosis	R7611grp	5	50	37	22.22	1.67	9.000426	0.031

Table 2b. Signal Identification Outcome Assessment[1], via Conditional Bernoulli Tree-Based Scan Statistic[2] among BIC/FTC/TAF Initiators in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024, P-Value ≤ 0.05, by Evidence of Prior Antiretroviral Use

Node Name	Node ID	Node Level	Total Node Outcomes in Risk and Control Windows	Node Outcomes in Risk Window	Expected Node Outcomes in Risk Window	Relative Risk	Test Statistic[2]	P-Value

[1]Outcomes were assessed at the 3, 4, and 5th level with a 400-day washout using the hierarchical ICD-10-CM tree structure.

[2]Conditional Bernoulli log likelihood ratio (LLR) based test statistic. See Appendix B.1 for more information.

[3]In this analysis there were no outcome nodes that met the 0.05 p-value threshold.

N/A: Not applicable

Table 3a. Signal Identification Outcome Assessment[1], via Conditional Tree-Temporal Scan Statistic[2] Conditioned on Node and Time among BIC/FTC/TAF Initiators in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024, P-Value ≤ 0.05

Node Name	Node ID	Node Level	Total Node Outcomes	Time Window	Cases in Window	Expected Cases	Relative Risk	Test Statistic[2]	P-Value
Inpatient or Emergency Department Setting									
Cytomegaloviral disease	B25grp	3	121	1 to 32	70	24.69	5.36	27.64665	0.001
Pneumocystosis	B59grp	3	201	1 to 15	61	20.32	3.89	26.380148	0.001
Pneumocystosis	B59nngrp	5	201	1 to 15	61	20.32	3.89	26.380148	0.001
Pneumocystosis	B59ngrp	4	201	1 to 15	61	20.32	3.89	26.380148	0.001
Sepsis, unspecified organism	A419ngrp	5	927	5 to 17	142	80.84	1.9	18.852883	0.001
Sepsis, unspecified organism	A419grp	4	927	5 to 17	142	80.84	1.9	18.852883	0.001
Other cytomegaloviral diseases	B258grp	4	46	2 to 32	31	9.05	8.44	16.211644	0.003
Other cytomegaloviral diseases	B258ngrp	5	46	2 to 32	31	9.05	8.44	16.211644	0.003
Other sepsis	A41grp	3	1208	4 to 17	174	113.2	1.64	14.014988	0.007
Immune reconstitution syndrome	D893ngrp	5	65	5 to 41	39	14.69	5.14	13.771631	0.009
Immune reconstitution syndrome	D893grp	4	65	5 to 41	39	14.69	5.14	13.771631	0.009
Infection due to other mycobacteria	A31grp	3	99	4 to 24	36	13.43	3.65	12.93	0.024
Inpatient, Emergency Department, or Outpatient Setting									
Other and unspecified syphilis	A53grp	3	2116	1 to 15	535	206.95	3.15	180.20	0.001
Gonococcal infection	A54grp	3	1344	2 to 8	256	61.88	4.92	169.45	0.001
Syphilis, unspecified	A539grp	4	1806	1 to 15	456	176.63	3.14	153.20	0.001
Syphilis, unspecified	A539ngrp	5	1806	1 to 15	456	176.63	3.14	153.20	0.001
Gonococcal infection, unspecified	A549ngrp	5	835	2 to 7	145	32.47	5.23	104.46	0.001
Gonococcal infection, unspecified	A549grp	4	835	2 to 7	145	32.47	5.23	104.46	0.001
Human Immunodeficiency Virus (HIV Disease)	B20nngrp	5	3128	1 to 42	1210	806.81	1.82	87.38	0.001
Human Immunodeficiency Virus (HIV Disease)	B20ngrp	4	3128	1 to 42	1210	806.81	1.82	87.38	0.001
Human Immunodeficiency Virus (HIV Disease)	B20grp	3	3128	1 to 42	1210	806.81	1.82	87.38	0.001
Late syphilis	A52grp	3	491	1 to 17	153	53.36	3.72	61.54	0.001
Late syphilis, latent	A528grp	4	327	1 to 28	157	57.68	4.32	57.91	0.001
Late syphilis, latent	A528ngrp	5	327	1 to 28	157	57.68	4.32	57.91	0.001
Gonococcal infection of anus and rectum	A546ngrp	5	216	2 to 8	56	9.94	7.27	50.73	0.001
Gonococcal infection of anus and rectum	A546grp	4	216	2 to 8	56	9.94	7.27	50.73	0.001
Latent syphilis, unspecified as early or late	A530ngrp	5	310	1 to 30	129	58.28	3.08	31.79	0.001
Latent syphilis, unspecified as early or late	A530grp	4	310	1 to 30	129	58.28	3.08	31.79	0.001
Pneumocystosis	B59grp	3	280	1 to 15	78	27.38	3.57	31.03	0.001
Pneumocystosis	B59ngrp	4	280	1 to 15	78	27.38	3.57	31.03	0.001

Table 3a. Signal Identification Outcome Assessment[1], via Conditional Tree-Temporal Scan Statistic[2] Conditioned on Node and Time among BIC/FTC/TAF Initiators in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024, P-Value ≤ 0.05

Node Name	Node ID	Node Level	Total Node Outcomes	Time Window	Cases in Window	Expected Cases	Relative Risk	Test Statistic[2]	P-Value
Pneumocystosis	B59nngrp	5	280	1 to 15	78	27.38	3.57	31.03	0.001
Cytomegaloviral disease	B25grp	3	239	1 to 22	86	33.48	3.45	28.61	0.001
Other diseases caused by chlamydiae	A74grp	3	405	1 to 7	59	18.59	3.55	27.73	0.001
Chlamydial infection, unspecified	A749grp	4	394	1 to 7	58	18.09	3.59	27.67	0.001
Chlamydial infection, unspecified	A749ngrp	5	394	1 to 7	58	18.09	3.59	27.67	0.001
Gonococcal pharyngitis	A545ngrp	5	168	3 to 7	30	5.54	6.39	26.22	0.001
Gonococcal pharyngitis	A545grp	4	168	3 to 7	30	5.54	6.39	26.22	0.001
Early syphilis	A51grp	3	592	2 to 9	77	30.47	2.76	24.85	0.001
Other abnormal immunological findings in serum	R76grp	3	993	2 to 43	367	255.37	1.7	21.47	0.001
Candidal stomatitis	B370ngrp	5	590	2 to 14	102	49.39	2.29	21.37	0.001
Candidal stomatitis	B370grp	4	590	2 to 14	102	49.39	2.29	21.37	0.001
Nonspecific reaction to test for tuberculosis	R761grp	4	466	2 to 23	121	64.44	2.19	19.68	0.001
Nonspecific reaction to cell mediated immunity measurement of gamma interferon antigen response without active tuberculosis	R7612grp	5	198	1 to 20	62	24.98	3.16	19.34	0.001
Immune reconstitution syndrome	D893grp	4	104	5 to 29	47	16.49	4.38	18.72	0.001
Immune reconstitution syndrome	D893ngrp	5	104	5 to 29	47	16.49	4.38	18.72	0.001
Early syphilis, latent	A515grp	4	197	2 to 8	33	9.07	4.17	18.69	0.001
Early syphilis, latent	A515ngrp	5	197	2 to 8	33	9.07	4.17	18.69	0.001
Sepsis, unspecified organism	A419grp	4	1257	4 to 19	200	127.15	1.68	17.74	0.001
Sepsis, unspecified organism	A419ngrp	5	1257	4 to 19	200	127.15	1.68	17.74	0.001
Other cytomegaloviral diseases	B258grp	4	73	2 to 32	40	13.98	5.12	16.03	0.002
Other cytomegaloviral diseases	B258ngrp	5	73	2 to 32	40	13.98	5.12	16.03	0.002
Other sepsis	A41grp	3	1549	8 to 17	155	97.22	1.66	14.52	0.004
Candidiasis	B37grp	3	1507	1 to 17	235	163.77	1.52	13.64	0.013
Disseminated mycobacterium avium-intracellulare complex (DMAC)	A312ngrp	5	63	4 to 25	28	8.66	5.02	13.53	0.018
Disseminated mycobacterium avium-intracellulare complex (DMAC)	A312grp	4	63	4 to 25	28	8.66	5.02	13.53	0.018
Unspecified severe protein-calorie malnutrition	E43grp	3	516	1 to 20	111	65.1	1.9	13.33	0.022
Unspecified severe protein-calorie malnutrition	E43nngrp	5	516	1 to 20	111	65.1	1.9	13.33	0.022
Unspecified severe protein-calorie malnutrition	E43ngrp	4	516	1 to 20	111	65.1	1.9	13.33	0.022

Table 3a. Signal Identification Outcome Assessment[1], via Conditional Tree-Temporal Scan Statistic[2] Conditioned on Node and Time among BIC/FTC/TAF Initiators in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024, P-Value ≤ 0.05

Node Name	Node ID	Node Level	Total Node Outcomes	Time Window	Cases in Window	Expected Cases	Relative Risk	Test Statistic[2]	P-Value
Infection due to other mycobacteria	A31grp	3	185	6 to 28	58	27.05	2.67	13.30	0.022
Cytomegaloviral disease, unspecified	B259grp	4	145	1 to 20	44	18.29	3.02	12.91	0.026
Cytomegaloviral disease, unspecified	B259ngrp	5	145	1 to 20	44	18.29	3.02	12.91	0.026
Other disorders involving the immune mechanism, not elsewhere classified	D89grp	3	322	8 to 34	94	53.03	2.09	12.84	0.029
Other sexually transmitted chlamydial diseases	A56grp	3	325	3 to 11	44	18.37	2.62	12.81	0.029

[1]Outcomes were assessed at the 3,4, and 5th level with a 400-day washout using the hierarchical ICD-10-CM tree structure.

[2]Log likelihood ratio (LLR) based test statistic conditioned on Node and Time. See Appendix B.2 for more information.

Table 3b. Signal Identification Outcome Assessment[1], via Conditional Tree-Temporal Scan Statistic[2] Conditioned on Node and Time among BIC/FTC/TAF Initiators in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024, P-Value ≤ 0.05, by Evidence of Prior Antiretroviral Use

Node Name	Node ID	Node Level	Total Node Outcomes	Time Window	Cases in Window	Expected Cases	Relative Risk	Test Statistic[2]	P-Value
Inpatient or Emergency Department Setting									
With Evidence of Prior Antiretroviral Use									
N/A[3]									
Without Evidence of Prior Antiretroviral Use									
Pneumocystosis	B59nngrp	5	84	1 to 15	45	11.57	7.28	27.71	0.001
Pneumocystosis	B59grp	3	84	1 to 15	45	11.57	7.28	27.71	0.001
Pneumocystosis	B59ngrp	4	84	1 to 15	45	11.57	7.28	27.71	0.001
Cytomegaloviral disease	B25grp	3	62	1 to 32	48	16.07	9.85	20.62	0.001
Sepsis, unspecified organism	A419ngrp	5	277	5 to 17	68	31.84	2.53	15.46	0.001
Sepsis, unspecified organism	A419grp	4	277	5 to 17	68	31.84	2.53	15.46	0.001
Candidiasis	B37grp	3	180	1 to 17	60	27.65	2.77	14.14	0.001
Other sepsis	A41grp	3	355	2 to 17	90	50.68	2.06	12.39	0.014
Candidal stomatitis	B370grp	4	96	1 to 17	37	14.75	3.47	11.79	0.026
Candidal stomatitis	B370ngrp	5	96	1 to 17	37	14.75	3.47	11.79	0.026
Hyperfunction of pituitary gland	E22grp	3	66	4 to 11	19	4.92	5.05	11.59	0.032
Syndrome of inappropriate secretion of antidiuretic hormon	E222grp	4	66	4 to 11	19	4.92	5.05	11.59	0.032
Syndrome of inappropriate secretion of antidiuretic hormon	E222ngrp	5	66	4 to 11	19	4.92	5.05	11.59	0.032
Late syphilis	A52grp	3	39	1 to 11	17	4.02	6.75	11.53	0.035
Inpatient, Emergency Department, or Outpatient Setting									
With Evidence of Prior Antiretroviral Use									
Gonococcal infection	A54grp	3	800	2 to 8	146	33.58	5.13	102.18	0.001
Other and unspecified syphilis	A53grp	3	1272	1 to 9	186	67.93	3.06	69.30	0.001
Gonococcal infection, unspecified	A549ngrp	5	492	2 to 10	102	25.53	4.8	64.83	0.001
Gonococcal infection, unspecified	A549grp	4	492	2 to 10	102	25.53	4.8	64.83	0.001
Syphilis, unspecified	A539ngrp	5	1094	1 to 9	154	58.43	2.92	53.69	0.001
Syphilis, unspecified	A539grp	4	1094	1 to 9	154	58.43	2.92	53.69	0.001
Gonococcal infection of anus and rectum	A546ngrp	5	133	2 to 8	35	5.58	8.17	34.83	0.001
Gonococcal infection of anus and rectum	A546grp	4	133	2 to 8	35	5.58	8.17	34.83	0.001
Latent syphilis, unspecified as early or late	A530ngrp	5	178	6 to 10	26	5.48	5.39	19.94	0.001
Latent syphilis, unspecified as early or late	A530grp	4	178	6 to 10	26	5.48	5.39	19.94	0.001
Disorders of refraction and accommodation	H52grp	3	3705	1 to 22	603	479.15	1.31	14.80	0.004
Gonococcal pharyngitis	A545ngrp	5	93	4 to 8	16	2.93	6.4	14.10	0.009

Table 3b. Signal Identification Outcome Assessment[1], via Conditional Tree-Temporal Scan Statistic[2] Conditioned on Node and Time among BIC/FTC/TAF Initiators in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024, P-Value ≤ 0.05, by Evidence of Prior Antiretroviral Use

Node Name	Node ID	Node Level	Total Node Outcomes	Time Window	Cases in Window	Expected Cases	Relative Risk	Test Statistic[2]	P-Value
Gonococcal pharyngitis	A545grp	4	93	4 to 8	16	2.93	6.4	14.10	0.009
Early syphilis	A51grp	3	400	2 to 9	45	18.78	2.58	13.11	0.027
Without Evidence of Prior Antiretroviral Use									
Other and unspecified syphilis	A53grp	3	844	1 to 17	297	118.84	3.36	94.03	0.001
Syphilis, unspecified	A539grp	4	712	1 to 17	259	100.26	3.53	87.19	0.001
Syphilis, unspecified	A539ngrp	5	712	1 to 17	259	100.26	3.53	87.19	0.001
Human Immunodeficiency Virus (HIV Disease)	B20ngrp	4	1571	1 to 35	680	423.57	2.09	65.78	0.001
Human Immunodeficiency Virus (HIV Disease)	B20nngrp	5	1571	1 to 35	680	423.57	2.09	65.78	0.001
Human Immunodeficiency Virus (HIV Disease)	B20grp	3	1571	1 to 35	680	423.57	2.09	65.78	0.001
Gonococcal infection	A54grp	3	544	2 to 7	101	28.03	4.26	56.52	0.001
Late syphilis	A52grp	3	248	1 to 15	104	31.65	4.97	51.39	0.001
Late syphilis, latent	A528ngrp	5	185	1 to 15	82	23.61	5.47	43.71	0.001
Late syphilis, latent	A528grp	4	185	1 to 15	82	23.61	5.47	43.71	0.001
Gonococcal infection, unspecified	A549ngrp	5	343	2 to 7	64	17.67	4.26	36.04	0.001
Gonococcal infection, unspecified	A549grp	4	343	2 to 7	64	17.67	4.26	36.04	0.001
Candidal stomatitis	B370grp	4	202	1 to 14	73	24.19	4.18	31.84	0.001
Candidal stomatitis	B370ngrp	5	202	1 to 14	73	24.19	4.18	31.84	0.001
Pneumocystosis	B59nngrp	5	116	1 to 15	54	14.81	5.97	30.69	0.001
Pneumocystosis	B59ngrp	4	116	1 to 15	54	14.81	5.97	30.69	0.001
Pneumocystosis	B59grp	3	116	1 to 15	54	14.81	5.97	30.69	0.001
Candidiasis	B37grp	3	446	1 to 14	117	53.4	2.63	28.19	0.001
Other abnormal immunological findings in serum	R76grp	3	306	5 to 29	122	59.99	2.73	24.61	0.001
Cytomegaloviral disease	B25grp	3	110	1 to 31	69	26.42	5.34	23.67	0.001
Other diseases caused by chlamydiae	A74grp	3	170	1 to 7	37	10.29	4.34	20.64	0.001
Chlamydial infection, unspecified	A749ngrp	5	166	1 to 7	36	10.05	4.32	19.99	0.001
Chlamydial infection, unspecified	A749grp	4	166	1 to 7	36	10.05	4.32	19.99	0.001
Gonococcal infection of anus and rectum	A546grp	4	83	3 to 12	29	6.83	6	19.75	0.001
Gonococcal infection of anus and rectum	A546ngrp	5	83	3 to 12	29	6.83	6	19.75	0.001
Nonspecific reaction to test for tuberculosis	R761grp	4	120	5 to 23	50	18.31	3.98	18.54	0.001
Sepsis, unspecified organism	A419grp	4	357	2 to 17	94	47.06	2.36	18.11	0.001
Sepsis, unspecified organism	A419ngrp	5	357	2 to 17	94	47.06	2.36	18.11	0.001
Other sepsis	A41grp	3	438	2 to 17	106	57.73	2.11	16.15	0.002

Table 3b. Signal Identification Outcome Assessment[1], via Conditional Tree-Temporal Scan Statistic[2] Conditioned on Node and Time among BIC/FTC/TAF Initiators in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024, P-Value ≤ 0.05, by Evidence of Prior Antiretroviral Use

Node Name	Node ID	Node Level	Total Node Outcomes	Time Window	Cases in Window	Expected Cases	Relative Risk	Test Statistic[2]	P-Value
Other anemias	D64grp	3	622	1 to 41	269	188.39	1.76	15.24	0.002
Gonococcal pharyngitis	A545ngrp	5	75	3 to 5	13	1.7	9.11	15.17	0.002
Gonococcal pharyngitis	A545grp	4	75	3 to 5	13	1.7	9.11	15.17	0.002
Latent syphilis, unspecified as early or late	A530ngrp	5	132	12 to 30	47	18.77	3.34	14.92	0.002
Latent syphilis, unspecified as early or late	A530grp	4	132	12 to 30	47	18.77	3.34	14.92	0.002
Anemia, unspecified	D649grp	4	603	1 to 41	259	182.64	1.74	14.14	0.004
Anemia, unspecified	D649ngrp	5	603	1 to 41	259	182.64	1.74	14.14	0.004
Other cytomegaloviral diseases	B258ngrp	5	34	2 to 32	27	8.08	12.39	13.66	0.007
Other cytomegaloviral diseases	B258grp	4	34	2 to 32	27	8.08	12.39	13.66	0.007
Early syphilis, latent	A515grp	4	45	2 to 8	15	2.72	7.78	13.32	0.011
Early syphilis, latent	A515ngrp	5	45	2 to 8	15	2.72	7.78	13.32	0.011
Early syphilis	A51grp	3	192	4 to 8	28	8.79	3.57	13.24	0.011
:ed immunity measurement of gamma interferon antigen re	R7612grp	5	62	6 to 23	28	8.98	4.87	12.81	0.017
Nausea and vomiting	R11grp	3	844	1 to 4	57	26.94	2.22	12.67	0.023
;yndrome of inappropriate secretion of antidiuretic hormon	E222grp	4	70	4 to 11	19	4.74	5.14	12.11	0.037
;yndrome of inappropriate secretion of antidiuretic hormon	E222ngrp	5	70	4 to 11	19	4.74	5.14	12.11	0.037
Unspecified severe protein-calorie malnutrition	E43nngrp	5	168	1 to 8	32	11.68	3.16	11.94	0.042
Unspecified severe protein-calorie malnutrition	E43grp	3	168	1 to 8	32	11.68	3.16	11.94	0.042
Unspecified severe protein-calorie malnutrition	E43ngrp	4	168	1 to 8	32	11.68	3.16	11.94	0.042

[1]Outcomes were assessed at the 3,4, and 5th level with a 400-day washout using the hierarchical ICD-10-CM tree structure.

[2]Log likelihood ratio (LLR) based test statistic conditioned on Node and Time. See Appendix B.2 for more information.

[3]In this analysis there were no outcome nodes that met the 0.05 p-value threshold.

N/A: Not applicable

Table 4. Summary of Episode Level Cohort Attrition in the Sentinel Distributed Database (SDD) from February 8, 2018 to May 31, 2024

	BIC/FTC/TAF Tree-Only Cohort		BIC/FTC/TAF Tree-Temporal Cohort	
	Remaining	Excluded	Remaining	Excluded
Members meeting enrollment and demographic requirements				
Enrolled at any point during the query period	331,413,643	N/A	317,954,857	N/A
Had required coverage type (medical and/or drug coverage)	247,888,426	83,525,217	236,855,583	81,099,274
Enrolled during specified age range	247,882,191	6,235	236,838,218	17,365
Had requestable medical charts	247,882,191	0	236,838,218	0
Met demographic requirements (sex, race, and Hispanic origin)	247,809,260	72,931	236,776,044	62,174
Members with a valid index event				
Had any cohort-defining claim during the query period	289,418	247,519,842	261,511	236,514,533
Cohort episodes with a valid index date				
Total number of claims with cohort-identifying codes during the query period in the specified age range	4,309,313	N/A	3,695,814	N/A
Claim recorded during current look period	4,309,313	0	3,695,814	0
Episode defining index claim recorded during the query period	296,117	4,013,196	281,170	3,414,644
Cohort episodes with required pre-index history				
Had sufficient pre-index continuous enrollment	133,630	162,487	137,276	143,894
Met inclusion and exclusion criteria[2]	117,473	16,157	120,163	17,113
Evidence of BIC/FTC/TAF contraindications	N/A	3,749	N/A	3,543
Evidence of pregnancy delivery	N/A	456	N/A	322
Evidence of malignancy	N/A	9,808	N/A	9,585
Evidence of ongoing pregnancy	N/A	3,483	N/A	4,975
Had sufficient post-index continuous enrollment	115,824	1,649	108,915	11,248
Final cohort				
Number of members	114,403	N/A	103,402	N/A
Number of episodes	115,824	N/A	108,915	N/A

[1]Cohorts are formed by first evaluating enrollment and demographic requirements as well as index events among members, then evaluating index dates, pre-index history, and post-index follow-up among episodes. Because of this, the number remaining often increases from the member- to episode-level steps.

[2]Episodes can meet multiple inclusion and/or exclusion criteria; therefore, the total number of episodes excluded overall may not equal the sum of all episodes in each criterion.

N/A: Not applicable

Appendix A. Dates of Available Data for Each Data Partner (DP) as of Request Distribution Date (October 23, 2024)

				Cohort Selection End Date	
Masked DP ID	DP Start Date	DP End Date[1]	Cohort Selection Start Date	Tree-Only Cohort	Tree-Temporal Cohort
DP01	01/01/2007	02/29/2024	02/08/2018	01/31/2024	07/31/2023
DP02	01/01/2008	12/31/2023	02/08/2018	11/30/2023	06/30/2023
DP03	01/01/2004	03/31/2024	02/08/2018	02/29/2024	08/31/2023
DP04	01/01/2000	04/30/2024	02/08/2018	03/31/2024	09/30/2023
DP05	01/01/2006	02/29/2024	02/08/2018	01/31/2024	07/31/2023
DP06	01/01/2008	05/31/2024	02/08/2018	04/30/2024	10/31/2023
DP07	01/01/2000	01/31/2024	02/08/2018	12/31/2023	07/31/2023
DP08	01/01/2000	01/31/2024	02/08/2018	12/31/2023	07/31/2023
DP09	01/01/2000	04/30/2024	02/08/2018	03/31/2024	09/30/2023
DP10	01/01/2000	04/30/2024	02/08/2018	03/31/2024	09/30/2023
DP11	01/01/2014	12/31/2021	02/08/2018	11/30/2021	06/30/2021
DP12	01/01/2005	07/31/2022	02/08/2018	06/30/2022	12/31/2021
DP13	01/01/2010	12/31/2023	02/08/2018	11/30/2023	06/30/2023

[1]End 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.1. Calculation of the Tree-Only Test Statistic for Conditional Bernoulli Probability Model

The log likelihood ratio (LLR) based test statistic T can be calculated as:

$$LLR = \ln\left(\frac{\left(\frac{c_G}{c_G + n_G}\right)^{c_G}\left(\frac{n_G}{c_G + n_G}\right)^{n_G}}{\left(\frac{C}{C+N}\right)^{c_G}\left(\frac{N}{C+N}\right)^{n_G}}\right) I\left(\frac{c_G}{c_G + n_G} > \frac{C}{C+N}\right)$$

$$T = \max_G LLR(G)$$

Where:

T = Tree-based scan statistic
C_G = cases in the risk window for a given node G
n_G = cases in the control window for a given node G
C = total number of cases in the risk window in all nodes
N = total number of cases in the control window in all nodes
G = node of interest

[1]**Expression in blue: This is the maximum likelihood estimation. It takes the form of a Bernoulli probability model. The numerator of the equation is based on the observed data. The denominator of the equation is based on the expectation under the null hypothesis. If the observed data "fit" the pattern of the null hypothesis, then this expression would be 1. The "log" of the function is for mathematical convenience. The ln (1) = 0.**

[2]**Expression in green: This is an indication function. It means that a log-likelihood ratio (LLR) is ONLY recorded if there are more observed cases than expected. So, a LLR is only calculated among nodes on the tree when the LLR would normally exceed 0 (or the likelihood ratio would exceed 1).**

[3]**Expression in red: The Log Likelihood Ratio is calculated for every position (node) on the tree including each individual diagnosis code and groupings of codes. For any dataset (i.e., across all nodes of the tree), the test statistic for that dataset is the maximum across all the nodes.**

Appendix B.2. Calculation for the Tree-Temporal Scan Statistic Conditioned on Node and Time

The log likelihood ratio (LLR) based test statistic T can be calculated as:

$$LLR = \left(c_G \ln \frac{c_G}{u_G} + ((C+N) - c_G) \ln \left(\frac{(C+N) - c_G}{(C+N) - u_G}\right)\right) I(c_G > u_G)$$

$$T = \max_G LLR(G) \qquad u_G = (C)\left(\frac{c_G + n_G}{C+N}\right)$$

Where:

T = Tree-based scan statistic
C_G = cases in node G that are in the variable risk window
n_G = cases in node G that are NOT in the variable risk window
C = total number of cases in the variable risk window for all nodes
N = total number of cases NOT in the variable risk window for all
G = node of interest
u_G = expected number of cases in the variable risk window in node G

[1]**Expression in blue: This is the maximum likelihood estimation.**

[2]**Expression in green: This is an indication function. It means that a log-likelihood ratio (LLR) is ONLY recorded if there are more observed cases than expected. So, a LLR is only calculated among nodes on the tree when the LLR would normally exceed 0 (or the likelihood ratio would exceed 1).**

[3]**Expression in red: The Log Likelihood Ratio is calculated for every position (node) on the tree including each individual diagnosis code and groupings of codes. For any dataset (i.e., across all nodes of the tree), the test statistic for that dataset is the maximum across all the nodes.**

Appendix C. Generic and Brand Names of Medical Products Used to Define Exposure in this Request

Generic Name	Brand Name
BIC/FTC/TAF	
bictegravir sodium/emtricitabine/tenofovir alafenamide fumar	Biktarvy

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
	Pregnancy and Delivery		
O09.01	Supervision of pregnancy with history of infertility, first trimester	ICD-10-CM	Diagnosis
O09.02	Supervision of pregnancy with history of infertility, second trimester	ICD-10-CM	Diagnosis
O09.03	Supervision of pregnancy with history of infertility, third trimester	ICD-10-CM	Diagnosis
O09.11	Supervision of pregnancy with history of ectopic pregnancy, first trimester	ICD-10-CM	Diagnosis
O09.12	Supervision of pregnancy with history of ectopic pregnancy, second trimester	ICD-10-CM	Diagnosis
O09.13	Supervision of pregnancy with history of ectopic pregnancy, third trimester	ICD-10-CM	Diagnosis
O09.211	Supervision of pregnancy with history of pre-term labor, first trimester	ICD-10-CM	Diagnosis
O09.212	Supervision of pregnancy with history of pre-term labor, second trimester	ICD-10-CM	Diagnosis
O09.213	Supervision of pregnancy with history of pre-term labor, third trimester	ICD-10-CM	Diagnosis
O09.291	Supervision of pregnancy with other poor reproductive or obstetric history, first trimester	ICD-10-CM	Diagnosis
O09.292	Supervision of pregnancy with other poor reproductive or obstetric history, second trimester	ICD-10-CM	Diagnosis
O09.293	Supervision of pregnancy with other poor reproductive or obstetric history, third trimester	ICD-10-CM	Diagnosis
O09.31	Supervision of pregnancy with insufficient antenatal care, first trimester	ICD-10-CM	Diagnosis
O09.32	Supervision of pregnancy with insufficient antenatal care, second trimester	ICD-10-CM	Diagnosis
O09.33	Supervision of pregnancy with insufficient antenatal care, third trimester	ICD-10-CM	Diagnosis
O09.41	Supervision of pregnancy with grand multiparity, first trimester	ICD-10-CM	Diagnosis
O09.42	Supervision of pregnancy with grand multiparity, second trimester	ICD-10-CM	Diagnosis
O09.43	Supervision of pregnancy with grand multiparity, third trimester	ICD-10-CM	Diagnosis
O09.511	Supervision of elderly primigravida, first trimester	ICD-10-CM	Diagnosis
O09.512	Supervision of elderly primigravida, second trimester	ICD-10-CM	Diagnosis
O09.513	Supervision of elderly primigravida, third trimester	ICD-10-CM	Diagnosis
O09.521	Supervision of elderly multigravida, first trimester	ICD-10-CM	Diagnosis
O09.522	Supervision of elderly multigravida, second trimester	ICD-10-CM	Diagnosis
O09.523	Supervision of elderly multigravida, third trimester	ICD-10-CM	Diagnosis
O09.611	Supervision of young primigravida, first trimester	ICD-10-CM	Diagnosis
O09.612	Supervision of young primigravida, second trimester	ICD-10-CM	Diagnosis
O09.613	Supervision of young primigravida, third trimester	ICD-10-CM	Diagnosis
O09.621	Supervision of young multigravida, first trimester	ICD-10-CM	Diagnosis
O09.622	Supervision of young multigravida, second trimester	ICD-10-CM	Diagnosis
O09.623	Supervision of young multigravida, third trimester	ICD-10-CM	Diagnosis
O09.71	Supervision of high risk pregnancy due to social problems, first trimester	ICD-10-CM	Diagnosis
O09.72	Supervision of high risk pregnancy due to social problems, second trimester	ICD-10-CM	Diagnosis
O09.73	Supervision of high risk pregnancy due to social problems, third trimester	ICD-10-CM	Diagnosis
O09.811	Supervision of pregnancy resulting from assisted reproductive technology, first trimester	ICD-10-CM	Diagnosis
O09.812	Supervision of pregnancy resulting from assisted reproductive technology, second trimester	ICD-10-CM	Diagnosis
O09.813	Supervision of pregnancy resulting from assisted reproductive technology, third trimester	ICD-10-CM	Diagnosis
O09.821	Supervision of pregnancy with history of in utero procedure during previous pregnancy, first trimester	ICD-10-CM	Diagnosis
O09.822	Supervision of pregnancy with history of in utero procedure during previous pregnancy, second trimester	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
O09.823	Supervision of pregnancy with history of in utero procedure during previous pregnancy, third trimester	ICD-10-CM	Diagnosis
O09.891	Supervision of other high risk pregnancies, first trimester	ICD-10-CM	Diagnosis
O09.892	Supervision of other high risk pregnancies, second trimester	ICD-10-CM	Diagnosis
O09.893	Supervision of other high risk pregnancies, third trimester	ICD-10-CM	Diagnosis
O09.91	Supervision of high risk pregnancy, unspecified, first trimester	ICD-10-CM	Diagnosis
O09.92	Supervision of high risk pregnancy, unspecified, second trimester	ICD-10-CM	Diagnosis
O09.93	Supervision of high risk pregnancy, unspecified, third trimester	ICD-10-CM	Diagnosis
O09.A1	Supervision of pregnancy with history of molar pregnancy, first trimester	ICD-10-CM	Diagnosis
O09.A2	Supervision of pregnancy with history of molar pregnancy, second trimester	ICD-10-CM	Diagnosis
O09.A3	Supervision of pregnancy with history of molar pregnancy, third trimester	ICD-10-CM	Diagnosis
O10.011	Pre-existing essential hypertension complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O10.012	Pre-existing essential hypertension complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O10.013	Pre-existing essential hypertension complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O10.111	Pre-existing hypertensive heart disease complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O10.112	Pre-existing hypertensive heart disease complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O10.113	Pre-existing hypertensive heart disease complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O10.211	Pre-existing hypertensive chronic kidney disease complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O10.212	Pre-existing hypertensive chronic kidney disease complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O10.213	Pre-existing hypertensive chronic kidney disease complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O10.311	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O10.312	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O10.313	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O10.411	Pre-existing secondary hypertension complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O10.412	Pre-existing secondary hypertension complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O10.413	Pre-existing secondary hypertension complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O10.911	Unspecified pre-existing hypertension complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O10.912	Unspecified pre-existing hypertension complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O10.913	Unspecified pre-existing hypertension complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O11.1	Pre-existing hypertension with pre-eclampsia, first trimester	ICD-10-CM	Diagnosis
O11.2	Pre-existing hypertension with pre-eclampsia, second trimester	ICD-10-CM	Diagnosis
O11.3	Pre-existing hypertension with pre-eclampsia, third trimester	ICD-10-CM	Diagnosis
O12.01	Gestational edema, first trimester	ICD-10-CM	Diagnosis
O12.02	Gestational edema, second trimester	ICD-10-CM	Diagnosis
O12.03	Gestational edema, third trimester	ICD-10-CM	Diagnosis
O12.11	Gestational proteinuria, first trimester	ICD-10-CM	Diagnosis
O12.12	Gestational proteinuria, second trimester	ICD-10-CM	Diagnosis
O12.13	Gestational proteinuria, third trimester	ICD-10-CM	Diagnosis
O12.21	Gestational edema with proteinuria, first trimester	ICD-10-CM	Diagnosis
O12.22	Gestational edema with proteinuria, second trimester	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
O12.23	Gestational edema with proteinuria, third trimester	ICD-10-CM	Diagnosis
O13.1	Gestational [pregnancy-induced] hypertension without significant proteinuria, first trimester	ICD-10-CM	Diagnosis
O13.2	Gestational [pregnancy-induced] hypertension without significant proteinuria, second trimester	ICD-10-CM	Diagnosis
O13.3	Gestational [pregnancy-induced] hypertension without significant proteinuria, third trimester	ICD-10-CM	Diagnosis
O14.02	Mild to moderate pre-eclampsia, second trimester	ICD-10-CM	Diagnosis
O14.03	Mild to moderate pre-eclampsia, third trimester	ICD-10-CM	Diagnosis
O14.12	Severe pre-eclampsia, second trimester	ICD-10-CM	Diagnosis
O14.13	Severe pre-eclampsia, third trimester	ICD-10-CM	Diagnosis
O14.22	HELLP syndrome (HELLP), second trimester	ICD-10-CM	Diagnosis
O14.23	HELLP syndrome (HELLP), third trimester	ICD-10-CM	Diagnosis
O14.92	Unspecified pre-eclampsia, second trimester	ICD-10-CM	Diagnosis
O14.93	Unspecified pre-eclampsia, third trimester	ICD-10-CM	Diagnosis
O15.02	Eclampsia complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O15.03	Eclampsia complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O16.1	Unspecified maternal hypertension, first trimester	ICD-10-CM	Diagnosis
O16.2	Unspecified maternal hypertension, second trimester	ICD-10-CM	Diagnosis
O16.3	Unspecified maternal hypertension, third trimester	ICD-10-CM	Diagnosis
O22.01	Varicose veins of lower extremity in pregnancy, first trimester	ICD-10-CM	Diagnosis
O22.02	Varicose veins of lower extremity in pregnancy, second trimester	ICD-10-CM	Diagnosis
O22.03	Varicose veins of lower extremity in pregnancy, third trimester	ICD-10-CM	Diagnosis
O22.11	Genital varices in pregnancy, first trimester	ICD-10-CM	Diagnosis
O22.12	Genital varices in pregnancy, second trimester	ICD-10-CM	Diagnosis
O22.13	Genital varices in pregnancy, third trimester	ICD-10-CM	Diagnosis
O22.21	Superficial thrombophlebitis in pregnancy, first trimester	ICD-10-CM	Diagnosis
O22.22	Superficial thrombophlebitis in pregnancy, second trimester	ICD-10-CM	Diagnosis
O22.23	Superficial thrombophlebitis in pregnancy, third trimester	ICD-10-CM	Diagnosis
O22.31	Deep phlebothrombosis in pregnancy, first trimester	ICD-10-CM	Diagnosis
O22.32	Deep phlebothrombosis in pregnancy, second trimester	ICD-10-CM	Diagnosis
O22.33	Deep phlebothrombosis in pregnancy, third trimester	ICD-10-CM	Diagnosis
O22.41	Hemorrhoids in pregnancy, first trimester	ICD-10-CM	Diagnosis
O22.42	Hemorrhoids in pregnancy, second trimester	ICD-10-CM	Diagnosis
O22.43	Hemorrhoids in pregnancy, third trimester	ICD-10-CM	Diagnosis
O22.51	Cerebral venous thrombosis in pregnancy, first trimester	ICD-10-CM	Diagnosis
O22.52	Cerebral venous thrombosis in pregnancy, second trimester	ICD-10-CM	Diagnosis
O22.53	Cerebral venous thrombosis in pregnancy, third trimester	ICD-10-CM	Diagnosis
O22.8X1	Other venous complications in pregnancy, first trimester	ICD-10-CM	Diagnosis
O22.8X2	Other venous complications in pregnancy, second trimester	ICD-10-CM	Diagnosis
O22.8X3	Other venous complications in pregnancy, third trimester	ICD-10-CM	Diagnosis
O22.91	Venous complication in pregnancy, unspecified, first trimester	ICD-10-CM	Diagnosis
O22.92	Venous complication in pregnancy, unspecified, second trimester	ICD-10-CM	Diagnosis
O22.93	Venous complication in pregnancy, unspecified, third trimester	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
O23.01	Infections of kidney in pregnancy, first trimester	ICD-10-CM	Diagnosis
O23.02	Infections of kidney in pregnancy, second trimester	ICD-10-CM	Diagnosis
O23.03	Infections of kidney in pregnancy, third trimester	ICD-10-CM	Diagnosis
O23.11	Infections of bladder in pregnancy, first trimester	ICD-10-CM	Diagnosis
O23.12	Infections of bladder in pregnancy, second trimester	ICD-10-CM	Diagnosis
O23.13	Infections of bladder in pregnancy, third trimester	ICD-10-CM	Diagnosis
O23.21	Infections of urethra in pregnancy, first trimester	ICD-10-CM	Diagnosis
O23.22	Infections of urethra in pregnancy, second trimester	ICD-10-CM	Diagnosis
O23.23	Infections of urethra in pregnancy, third trimester	ICD-10-CM	Diagnosis
O23.31	Infections of other parts of urinary tract in pregnancy, first trimester	ICD-10-CM	Diagnosis
O23.32	Infections of other parts of urinary tract in pregnancy, second trimester	ICD-10-CM	Diagnosis
O23.33	Infections of other parts of urinary tract in pregnancy, third trimester	ICD-10-CM	Diagnosis
O23.41	Unspecified infection of urinary tract in pregnancy, first trimester	ICD-10-CM	Diagnosis
O23.42	Unspecified infection of urinary tract in pregnancy, second trimester	ICD-10-CM	Diagnosis
O23.43	Unspecified infection of urinary tract in pregnancy, third trimester	ICD-10-CM	Diagnosis
O23.511	Infections of cervix in pregnancy, first trimester	ICD-10-CM	Diagnosis
O23.512	Infections of cervix in pregnancy, second trimester	ICD-10-CM	Diagnosis
O23.513	Infections of cervix in pregnancy, third trimester	ICD-10-CM	Diagnosis
O23.521	Salpingo-oophoritis in pregnancy, first trimester	ICD-10-CM	Diagnosis
O23.522	Salpingo-oophoritis in pregnancy, second trimester	ICD-10-CM	Diagnosis
O23.523	Salpingo-oophoritis in pregnancy, third trimester	ICD-10-CM	Diagnosis
O23.591	Infection of other part of genital tract in pregnancy, first trimester	ICD-10-CM	Diagnosis
O23.592	Infection of other part of genital tract in pregnancy, second trimester	ICD-10-CM	Diagnosis
O23.593	Infection of other part of genital tract in pregnancy, third trimester	ICD-10-CM	Diagnosis
O23.91	Unspecified genitourinary tract infection in pregnancy, first trimester	ICD-10-CM	Diagnosis
O23.92	Unspecified genitourinary tract infection in pregnancy, second trimester	ICD-10-CM	Diagnosis
O23.93	Unspecified genitourinary tract infection in pregnancy, third trimester	ICD-10-CM	Diagnosis
O24.011	Pre-existing type 1 diabetes mellitus, in pregnancy, first trimester	ICD-10-CM	Diagnosis
O24.012	Pre-existing type 1 diabetes mellitus, in pregnancy, second trimester	ICD-10-CM	Diagnosis
O24.013	Pre-existing type 1 diabetes mellitus, in pregnancy, third trimester	ICD-10-CM	Diagnosis
O24.111	Pre-existing type 2 diabetes mellitus, in pregnancy, first trimester	ICD-10-CM	Diagnosis
O24.112	Pre-existing type 2 diabetes mellitus, in pregnancy, second trimester	ICD-10-CM	Diagnosis
O24.113	Pre-existing type 2 diabetes mellitus, in pregnancy, third trimester	ICD-10-CM	Diagnosis
O24.311	Unspecified pre-existing diabetes mellitus in pregnancy, first trimester	ICD-10-CM	Diagnosis
O24.312	Unspecified pre-existing diabetes mellitus in pregnancy, second trimester	ICD-10-CM	Diagnosis
O24.313	Unspecified pre-existing diabetes mellitus in pregnancy, third trimester	ICD-10-CM	Diagnosis
O24.811	Other pre-existing diabetes mellitus in pregnancy, first trimester	ICD-10-CM	Diagnosis
O24.812	Other pre-existing diabetes mellitus in pregnancy, second trimester	ICD-10-CM	Diagnosis
O24.813	Other pre-existing diabetes mellitus in pregnancy, third trimester	ICD-10-CM	Diagnosis
O24.911	Unspecified diabetes mellitus in pregnancy, first trimester	ICD-10-CM	Diagnosis
O24.912	Unspecified diabetes mellitus in pregnancy, second trimester	ICD-10-CM	Diagnosis
O24.913	Unspecified diabetes mellitus in pregnancy, third trimester	ICD-10-CM	Diagnosis
O25.11	Malnutrition in pregnancy, first trimester	ICD-10-CM	Diagnosis
O25.12	Malnutrition in pregnancy, second trimester	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
O25.13	Malnutrition in pregnancy, third trimester	ICD-10-CM	Diagnosis
O26.01	Excessive weight gain in pregnancy, first trimester	ICD-10-CM	Diagnosis
O26.02	Excessive weight gain in pregnancy, second trimester	ICD-10-CM	Diagnosis
O26.03	Excessive weight gain in pregnancy, third trimester	ICD-10-CM	Diagnosis
O26.11	Low weight gain in pregnancy, first trimester	ICD-10-CM	Diagnosis
O26.12	Low weight gain in pregnancy, second trimester	ICD-10-CM	Diagnosis
O26.13	Low weight gain in pregnancy, third trimester	ICD-10-CM	Diagnosis
O26.21	Pregnancy care for patient with recurrent pregnancy loss, first trimester	ICD-10-CM	Diagnosis
O26.22	Pregnancy care for patient with recurrent pregnancy loss, second trimester	ICD-10-CM	Diagnosis
O26.23	Pregnancy care for patient with recurrent pregnancy loss, third trimester	ICD-10-CM	Diagnosis
O26.31	Retained intrauterine contraceptive device in pregnancy, first trimester	ICD-10-CM	Diagnosis
O26.32	Retained intrauterine contraceptive device in pregnancy, second trimester	ICD-10-CM	Diagnosis
O26.33	Retained intrauterine contraceptive device in pregnancy, third trimester	ICD-10-CM	Diagnosis
O26.41	Herpes gestationis, first trimester	ICD-10-CM	Diagnosis
O26.42	Herpes gestationis, second trimester	ICD-10-CM	Diagnosis
O26.43	Herpes gestationis, third trimester	ICD-10-CM	Diagnosis
O26.51	Maternal hypotension syndrome, first trimester	ICD-10-CM	Diagnosis
O26.52	Maternal hypotension syndrome, second trimester	ICD-10-CM	Diagnosis
O26.53	Maternal hypotension syndrome, third trimester	ICD-10-CM	Diagnosis
O26.611	Liver and biliary tract disorders in pregnancy, first trimester	ICD-10-CM	Diagnosis
O26.612	Liver and biliary tract disorders in pregnancy, second trimester	ICD-10-CM	Diagnosis
O26.613	Liver and biliary tract disorders in pregnancy, third trimester	ICD-10-CM	Diagnosis
O26.711	Subluxation of symphysis (pubis) in pregnancy, first trimester	ICD-10-CM	Diagnosis
O26.712	Subluxation of symphysis (pubis) in pregnancy, second trimester	ICD-10-CM	Diagnosis
O26.713	Subluxation of symphysis (pubis) in pregnancy, third trimester	ICD-10-CM	Diagnosis
O26.811	Pregnancy related exhaustion and fatigue, first trimester	ICD-10-CM	Diagnosis
O26.812	Pregnancy related exhaustion and fatigue, second trimester	ICD-10-CM	Diagnosis
O26.813	Pregnancy related exhaustion and fatigue, third trimester	ICD-10-CM	Diagnosis
O26.821	Pregnancy related peripheral neuritis, first trimester	ICD-10-CM	Diagnosis
O26.822	Pregnancy related peripheral neuritis, second trimester	ICD-10-CM	Diagnosis
O26.823	Pregnancy related peripheral neuritis, third trimester	ICD-10-CM	Diagnosis
O26.831	Pregnancy related renal disease, first trimester	ICD-10-CM	Diagnosis
O26.832	Pregnancy related renal disease, second trimester	ICD-10-CM	Diagnosis
O26.833	Pregnancy related renal disease, third trimester	ICD-10-CM	Diagnosis
O26.841	Uterine size-date discrepancy, first trimester	ICD-10-CM	Diagnosis
O26.842	Uterine size-date discrepancy, second trimester	ICD-10-CM	Diagnosis
O26.843	Uterine size-date discrepancy, third trimester	ICD-10-CM	Diagnosis
O26.851	Spotting complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O26.852	Spotting complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O26.853	Spotting complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O26.872	Cervical shortening, second trimester	ICD-10-CM	Diagnosis
O26.873	Cervical shortening, third trimester	ICD-10-CM	Diagnosis
O26.891	Other specified pregnancy related conditions, first trimester	ICD-10-CM	Diagnosis
O26.892	Other specified pregnancy related conditions, second trimester	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
O26.893	Other specified pregnancy related conditions, third trimester	ICD-10-CM	Diagnosis
O26.91	Pregnancy related conditions, unspecified, first trimester	ICD-10-CM	Diagnosis
O26.92	Pregnancy related conditions, unspecified, second trimester	ICD-10-CM	Diagnosis
O26.93	Pregnancy related conditions, unspecified, third trimester	ICD-10-CM	Diagnosis
O29.011	Aspiration pneumonitis due to anesthesia during pregnancy, first trimester	ICD-10-CM	Diagnosis
O29.012	Aspiration pneumonitis due to anesthesia during pregnancy, second trimester	ICD-10-CM	Diagnosis
O29.013	Aspiration pneumonitis due to anesthesia during pregnancy, third trimester	ICD-10-CM	Diagnosis
O29.021	Pressure collapse of lung due to anesthesia during pregnancy, first trimester	ICD-10-CM	Diagnosis
O29.022	Pressure collapse of lung due to anesthesia during pregnancy, second trimester	ICD-10-CM	Diagnosis
O29.023	Pressure collapse of lung due to anesthesia during pregnancy, third trimester	ICD-10-CM	Diagnosis
O29.091	Other pulmonary complications of anesthesia during pregnancy, first trimester	ICD-10-CM	Diagnosis
O29.092	Other pulmonary complications of anesthesia during pregnancy, second trimester	ICD-10-CM	Diagnosis
O29.093	Other pulmonary complications of anesthesia during pregnancy, third trimester	ICD-10-CM	Diagnosis
O29.111	Cardiac arrest due to anesthesia during pregnancy, first trimester	ICD-10-CM	Diagnosis
O29.112	Cardiac arrest due to anesthesia during pregnancy, second trimester	ICD-10-CM	Diagnosis
O29.113	Cardiac arrest due to anesthesia during pregnancy, third trimester	ICD-10-CM	Diagnosis
O29.121	Cardiac failure due to anesthesia during pregnancy, first trimester	ICD-10-CM	Diagnosis
O29.122	Cardiac failure due to anesthesia during pregnancy, second trimester	ICD-10-CM	Diagnosis
O29.123	Cardiac failure due to anesthesia during pregnancy, third trimester	ICD-10-CM	Diagnosis
O29.191	Other cardiac complications of anesthesia during pregnancy, first trimester	ICD-10-CM	Diagnosis
O29.192	Other cardiac complications of anesthesia during pregnancy, second trimester	ICD-10-CM	Diagnosis
O29.193	Other cardiac complications of anesthesia during pregnancy, third trimester	ICD-10-CM	Diagnosis
O29.211	Cerebral anoxia due to anesthesia during pregnancy, first trimester	ICD-10-CM	Diagnosis
O29.212	Cerebral anoxia due to anesthesia during pregnancy, second trimester	ICD-10-CM	Diagnosis
O29.213	Cerebral anoxia due to anesthesia during pregnancy, third trimester	ICD-10-CM	Diagnosis
O29.291	Other central nervous system complications of anesthesia during pregnancy, first trimester	ICD-10-CM	Diagnosis
O29.292	Other central nervous system complications of anesthesia during pregnancy, second trimester	ICD-10-CM	Diagnosis
O29.293	Other central nervous system complications of anesthesia during pregnancy, third trimester	ICD-10-CM	Diagnosis
O29.3X1	Toxic reaction to local anesthesia during pregnancy, first trimester	ICD-10-CM	Diagnosis
O29.3X2	Toxic reaction to local anesthesia during pregnancy, second trimester	ICD-10-CM	Diagnosis
O29.3X3	Toxic reaction to local anesthesia during pregnancy, third trimester	ICD-10-CM	Diagnosis
O29.41	Spinal and epidural anesthesia induced headache during pregnancy, first trimester	ICD-10-CM	Diagnosis
O29.42	Spinal and epidural anesthesia induced headache during pregnancy, second trimester	ICD-10-CM	Diagnosis
O29.43	Spinal and epidural anesthesia induced headache during pregnancy, third trimester	ICD-10-CM	Diagnosis
O29.5X1	Other complications of spinal and epidural anesthesia during pregnancy, first trimester	ICD-10-CM	Diagnosis
O29.5X2	Other complications of spinal and epidural anesthesia during pregnancy, second trimester	ICD-10-CM	Diagnosis
O29.5X3	Other complications of spinal and epidural anesthesia during pregnancy, third trimester	ICD-10-CM	Diagnosis
O29.61	Failed or difficult intubation for anesthesia during pregnancy, first trimester	ICD-10-CM	Diagnosis
O29.62	Failed or difficult intubation for anesthesia during pregnancy, second trimester	ICD-10-CM	Diagnosis
O29.63	Failed or difficult intubation for anesthesia during pregnancy, third trimester	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
O29.8X1	Other complications of anesthesia during pregnancy, first trimester	ICD-10-CM	Diagnosis
O29.8X2	Other complications of anesthesia during pregnancy, second trimester	ICD-10-CM	Diagnosis
O29.8X3	Other complications of anesthesia during pregnancy, third trimester	ICD-10-CM	Diagnosis
O29.91	Unspecified complication of anesthesia during pregnancy, first trimester	ICD-10-CM	Diagnosis
O29.92	Unspecified complication of anesthesia during pregnancy, second trimester	ICD-10-CM	Diagnosis
O29.93	Unspecified complication of anesthesia during pregnancy, third trimester	ICD-10-CM	Diagnosis
O30.001	Twin pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, first trimester	ICD-10-CM	Diagnosis
O30.002	Twin pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, second trimester	ICD-10-CM	Diagnosis
O30.003	Twin pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, third trimester	ICD-10-CM	Diagnosis
O30.011	Twin pregnancy, monochorionic/monoamniotic, first trimester	ICD-10-CM	Diagnosis
O30.012	Twin pregnancy, monochorionic/monoamniotic, second trimester	ICD-10-CM	Diagnosis
O30.013	Twin pregnancy, monochorionic/monoamniotic, third trimester	ICD-10-CM	Diagnosis
O30.021	Conjoined twin pregnancy, first trimester	ICD-10-CM	Diagnosis
O30.022	Conjoined twin pregnancy, second trimester	ICD-10-CM	Diagnosis
O30.023	Conjoined twin pregnancy, third trimester	ICD-10-CM	Diagnosis
O30.031	Twin pregnancy, monochorionic/diamniotic, first trimester	ICD-10-CM	Diagnosis
O30.032	Twin pregnancy, monochorionic/diamniotic, second trimester	ICD-10-CM	Diagnosis
O30.033	Twin pregnancy, monochorionic/diamniotic, third trimester	ICD-10-CM	Diagnosis
O30.041	Twin pregnancy, dichorionic/diamniotic, first trimester	ICD-10-CM	Diagnosis
O30.042	Twin pregnancy, dichorionic/diamniotic, second trimester	ICD-10-CM	Diagnosis
O30.043	Twin pregnancy, dichorionic/diamniotic, third trimester	ICD-10-CM	Diagnosis
O30.091	Twin pregnancy, unable to determine number of placenta and number of amniotic sacs, first trimester	ICD-10-CM	Diagnosis
O30.092	Twin pregnancy, unable to determine number of placenta and number of amniotic sacs, second trimester	ICD-10-CM	Diagnosis
O30.093	Twin pregnancy, unable to determine number of placenta and number of amniotic sacs, third trimester	ICD-10-CM	Diagnosis
O30.101	Triplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, first trimester	ICD-10-CM	Diagnosis
O30.102	Triplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, second trimester	ICD-10-CM	Diagnosis
O30.103	Triplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, third trimester	ICD-10-CM	Diagnosis
O30.111	Triplet pregnancy with two or more monochorionic fetuses, first trimester	ICD-10-CM	Diagnosis
O30.112	Triplet pregnancy with two or more monochorionic fetuses, second trimester	ICD-10-CM	Diagnosis
O30.113	Triplet pregnancy with two or more monochorionic fetuses, third trimester	ICD-10-CM	Diagnosis
O30.121	Triplet pregnancy with two or more monoamniotic fetuses, first trimester	ICD-10-CM	Diagnosis
O30.122	Triplet pregnancy with two or more monoamniotic fetuses, second trimester	ICD-10-CM	Diagnosis
O30.123	Triplet pregnancy with two or more monoamniotic fetuses, third trimester	ICD-10-CM	Diagnosis
O30.131	Triplet pregnancy, trichorionic/triamniotic, first trimester	ICD-10-CM	Diagnosis
O30.132	Triplet pregnancy, trichorionic/triamniotic, second trimester	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O30.133	Triplet pregnancy, trichorionic/triamniotic, third trimester	ICD-10-CM	Diagnosis
O30.191	Triplet pregnancy, unable to determine number of placenta and number of amniotic sacs, first trimester	ICD-10-CM	Diagnosis
O30.192	Triplet pregnancy, unable to determine number of placenta and number of amniotic sacs, second trimester	ICD-10-CM	Diagnosis
O30.193	Triplet pregnancy, unable to determine number of placenta and number of amniotic sacs, third trimester	ICD-10-CM	Diagnosis
O30.201	Quadruplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, first trimester	ICD-10-CM	Diagnosis
O30.202	Quadruplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, second trimester	ICD-10-CM	Diagnosis
O30.203	Quadruplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, third trimester	ICD-10-CM	Diagnosis
O30.211	Quadruplet pregnancy with two or more monochorionic fetuses, first trimester	ICD-10-CM	Diagnosis
O30.212	Quadruplet pregnancy with two or more monochorionic fetuses, second trimester	ICD-10-CM	Diagnosis
O30.213	Quadruplet pregnancy with two or more monochorionic fetuses, third trimester	ICD-10-CM	Diagnosis
O30.221	Quadruplet pregnancy with two or more monoamniotic fetuses, first trimester	ICD-10-CM	Diagnosis
O30.222	Quadruplet pregnancy with two or more monoamniotic fetuses, second trimester	ICD-10-CM	Diagnosis
O30.223	Quadruplet pregnancy with two or more monoamniotic fetuses, third trimester	ICD-10-CM	Diagnosis
O30.231	Quadruplet pregnancy, quadrachorionic/quadra-amniotic, first trimester	ICD-10-CM	Diagnosis
O30.232	Quadruplet pregnancy, quadrachorionic/quadra-amniotic, second trimester	ICD-10-CM	Diagnosis
O30.233	Quadruplet pregnancy, quadrachorionic/quadra-amniotic, third trimester	ICD-10-CM	Diagnosis
O30.291	Quadruplet pregnancy, unable to determine number of placenta and number of amniotic sacs, first trimester	ICD-10-CM	Diagnosis
O30.292	Quadruplet pregnancy, unable to determine number of placenta and number of amniotic sacs, second trimester	ICD-10-CM	Diagnosis
O30.293	Quadruplet pregnancy, unable to determine number of placenta and number of amniotic sacs, third trimester	ICD-10-CM	Diagnosis
O30.801	Other specified multiple gestation, unspecified number of placenta and unspecified number of amniotic sacs, first trimester	ICD-10-CM	Diagnosis
O30.802	Other specified multiple gestation, unspecified number of placenta and unspecified number of amniotic sacs, second trimester	ICD-10-CM	Diagnosis
O30.803	Other specified multiple gestation, unspecified number of placenta and unspecified number of amniotic sacs, third trimester	ICD-10-CM	Diagnosis
O30.811	Other specified multiple gestation with two or more monochorionic fetuses, first trimester	ICD-10-CM	Diagnosis
O30.812	Other specified multiple gestation with two or more monochorionic fetuses, second trimester	ICD-10-CM	Diagnosis
O30.813	Other specified multiple gestation with two or more monochorionic fetuses, third trimester	ICD-10-CM	Diagnosis
O30.821	Other specified multiple gestation with two or more monoamniotic fetuses, first trimester	ICD-10-CM	Diagnosis
O30.822	Other specified multiple gestation with two or more monoamniotic fetuses, second trimester	ICD-10-CM	Diagnosis
O30.823	Other specified multiple gestation with two or more monoamniotic fetuses, third trimester	ICD-10-CM	Diagnosis
O30.831	Other specified multiple gestation, number of chorions and amnions are both equal to the number of fetuses, first trimester	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O30.832	Other specified multiple gestation, number of chorions and amnions are both equal to the number of fetuses, second trimester	ICD-10-CM	Diagnosis
O30.833	Other specified multiple gestation, number of chorions and amnions are both equal to the number of fetuses, third trimester	ICD-10-CM	Diagnosis
O30.891	Other specified multiple gestation, unable to determine number of placenta and number of amniotic sacs, first trimester	ICD-10-CM	Diagnosis
O30.892	Other specified multiple gestation, unable to determine number of placenta and number of amniotic sacs, second trimester	ICD-10-CM	Diagnosis
O30.893	Other specified multiple gestation, unable to determine number of placenta and number of amniotic sacs, third trimester	ICD-10-CM	Diagnosis
O30.91	Multiple gestation, unspecified, first trimester	ICD-10-CM	Diagnosis
O30.92	Multiple gestation, unspecified, second trimester	ICD-10-CM	Diagnosis
O30.93	Multiple gestation, unspecified, third trimester	ICD-10-CM	Diagnosis
O31.01X0	Papyraceous fetus, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.01X1	Papyraceous fetus, first trimester, fetus 1	ICD-10-CM	Diagnosis
O31.01X2	Papyraceous fetus, first trimester, fetus 2	ICD-10-CM	Diagnosis
O31.01X3	Papyraceous fetus, first trimester, fetus 3	ICD-10-CM	Diagnosis
O31.01X4	Papyraceous fetus, first trimester, fetus 4	ICD-10-CM	Diagnosis
O31.01X5	Papyraceous fetus, first trimester, fetus 5	ICD-10-CM	Diagnosis
O31.01X9	Papyraceous fetus, first trimester, other fetus	ICD-10-CM	Diagnosis
O31.02X0	Papyraceous fetus, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.02X1	Papyraceous fetus, second trimester, fetus 1	ICD-10-CM	Diagnosis
O31.02X2	Papyraceous fetus, second trimester, fetus 2	ICD-10-CM	Diagnosis
O31.02X3	Papyraceous fetus, second trimester, fetus 3	ICD-10-CM	Diagnosis
O31.02X4	Papyraceous fetus, second trimester, fetus 4	ICD-10-CM	Diagnosis
O31.02X5	Papyraceous fetus, second trimester, fetus 5	ICD-10-CM	Diagnosis
O31.02X9	Papyraceous fetus, second trimester, other fetus	ICD-10-CM	Diagnosis
O31.03X0	Papyraceous fetus, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.03X1	Papyraceous fetus, third trimester, fetus 1	ICD-10-CM	Diagnosis
O31.03X2	Papyraceous fetus, third trimester, fetus 2	ICD-10-CM	Diagnosis
O31.03X3	Papyraceous fetus, third trimester, fetus 3	ICD-10-CM	Diagnosis
O31.03X4	Papyraceous fetus, third trimester, fetus 4	ICD-10-CM	Diagnosis
O31.03X5	Papyraceous fetus, third trimester, fetus 5	ICD-10-CM	Diagnosis
O31.03X9	Papyraceous fetus, third trimester, other fetus	ICD-10-CM	Diagnosis
O31.11X0	Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.11X1	Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, fetus 1	ICD-10-CM	Diagnosis
O31.11X2	Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, fetus 2	ICD-10-CM	Diagnosis
O31.11X3	Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, fetus 3	ICD-10-CM	Diagnosis
O31.11X4	Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, fetus 4	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O31.11X5	Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, fetus 5	ICD-10-CM	Diagnosis
O31.11X9	Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, other fetus	ICD-10-CM	Diagnosis
O31.12X0	Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.12X1	Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, fetus 1	ICD-10-CM	Diagnosis
O31.12X2	Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, fetus 2	ICD-10-CM	Diagnosis
O31.12X3	Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, fetus 3	ICD-10-CM	Diagnosis
O31.12X4	Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, fetus 4	ICD-10-CM	Diagnosis
O31.12X5	Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, fetus 5	ICD-10-CM	Diagnosis
O31.12X9	Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, other fetus	ICD-10-CM	Diagnosis
O31.13X0	Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.13X1	Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, fetus 1	ICD-10-CM	Diagnosis
O31.13X2	Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, fetus 2	ICD-10-CM	Diagnosis
O31.13X3	Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, fetus 3	ICD-10-CM	Diagnosis
O31.13X4	Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, fetus 4	ICD-10-CM	Diagnosis
O31.13X5	Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, fetus 5	ICD-10-CM	Diagnosis
O31.13X9	Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, other fetus	ICD-10-CM	Diagnosis
O31.21X0	Continuing pregnancy after intrauterine death of one fetus or more, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.21X1	Continuing pregnancy after intrauterine death of one fetus or more, first trimester, fetus 1	ICD-10-CM	Diagnosis
O31.21X2	Continuing pregnancy after intrauterine death of one fetus or more, first trimester, fetus 2	ICD-10-CM	Diagnosis
O31.21X3	Continuing pregnancy after intrauterine death of one fetus or more, first trimester, fetus 3	ICD-10-CM	Diagnosis
O31.21X4	Continuing pregnancy after intrauterine death of one fetus or more, first trimester, fetus 4	ICD-10-CM	Diagnosis
O31.21X5	Continuing pregnancy after intrauterine death of one fetus or more, first trimester, fetus 5	ICD-10-CM	Diagnosis
O31.21X9	Continuing pregnancy after intrauterine death of one fetus or more, first trimester, other fetus	ICD-10-CM	Diagnosis
O31.22X0	Continuing pregnancy after intrauterine death of one fetus or more, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O31.22X1	Continuing pregnancy after intrauterine death of one fetus or more, second trimester, fetus 1	ICD-10-CM	Diagnosis
O31.22X2	Continuing pregnancy after intrauterine death of one fetus or more, second trimester, fetus 2	ICD-10-CM	Diagnosis
O31.22X3	Continuing pregnancy after intrauterine death of one fetus or more, second trimester, fetus 3	ICD-10-CM	Diagnosis
O31.22X4	Continuing pregnancy after intrauterine death of one fetus or more, second trimester, fetus 4	ICD-10-CM	Diagnosis
O31.22X5	Continuing pregnancy after intrauterine death of one fetus or more, second trimester, fetus 5	ICD-10-CM	Diagnosis
O31.22X9	Continuing pregnancy after intrauterine death of one fetus or more, second trimester, other fetus	ICD-10-CM	Diagnosis
O31.23X0	Continuing pregnancy after intrauterine death of one fetus or more, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.23X1	Continuing pregnancy after intrauterine death of one fetus or more, third trimester, fetus 1	ICD-10-CM	Diagnosis
O31.23X2	Continuing pregnancy after intrauterine death of one fetus or more, third trimester, fetus 2	ICD-10-CM	Diagnosis
O31.23X3	Continuing pregnancy after intrauterine death of one fetus or more, third trimester, fetus 3	ICD-10-CM	Diagnosis
O31.23X4	Continuing pregnancy after intrauterine death of one fetus or more, third trimester, fetus 4	ICD-10-CM	Diagnosis
O31.23X5	Continuing pregnancy after intrauterine death of one fetus or more, third trimester, fetus 5	ICD-10-CM	Diagnosis
O31.23X9	Continuing pregnancy after intrauterine death of one fetus or more, third trimester, other fetus	ICD-10-CM	Diagnosis
O31.31X0	Continuing pregnancy after elective fetal reduction of one fetus or more, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.31X1	Continuing pregnancy after elective fetal reduction of one fetus or more, first trimester, fetus 1	ICD-10-CM	Diagnosis
O31.31X2	Continuing pregnancy after elective fetal reduction of one fetus or more, first trimester, fetus 2	ICD-10-CM	Diagnosis
O31.31X3	Continuing pregnancy after elective fetal reduction of one fetus or more, first trimester, fetus 3	ICD-10-CM	Diagnosis
O31.31X4	Continuing pregnancy after elective fetal reduction of one fetus or more, first trimester, fetus 4	ICD-10-CM	Diagnosis
O31.31X5	Continuing pregnancy after elective fetal reduction of one fetus or more, first trimester, fetus 5	ICD-10-CM	Diagnosis
O31.31X9	Continuing pregnancy after elective fetal reduction of one fetus or more, first trimester, other fetus	ICD-10-CM	Diagnosis
O31.32X0	Continuing pregnancy after elective fetal reduction of one fetus or more, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.32X1	Continuing pregnancy after elective fetal reduction of one fetus or more, second trimester, fetus 1	ICD-10-CM	Diagnosis
O31.32X2	Continuing pregnancy after elective fetal reduction of one fetus or more, second trimester, fetus 2	ICD-10-CM	Diagnosis
O31.32X3	Continuing pregnancy after elective fetal reduction of one fetus or more, second trimester, fetus 3	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O31.32X4	Continuing pregnancy after elective fetal reduction of one fetus or more, second trimester, fetus 4	ICD-10-CM	Diagnosis
O31.32X5	Continuing pregnancy after elective fetal reduction of one fetus or more, second trimester, fetus 5	ICD-10-CM	Diagnosis
O31.32X9	Continuing pregnancy after elective fetal reduction of one fetus or more, second trimester, other fetus	ICD-10-CM	Diagnosis
O31.33X0	Continuing pregnancy after elective fetal reduction of one fetus or more, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.33X1	Continuing pregnancy after elective fetal reduction of one fetus or more, third trimester, fetus 1	ICD-10-CM	Diagnosis
O31.33X2	Continuing pregnancy after elective fetal reduction of one fetus or more, third trimester, fetus 2	ICD-10-CM	Diagnosis
O31.33X3	Continuing pregnancy after elective fetal reduction of one fetus or more, third trimester, fetus 3	ICD-10-CM	Diagnosis
O31.33X4	Continuing pregnancy after elective fetal reduction of one fetus or more, third trimester, fetus 4	ICD-10-CM	Diagnosis
O31.33X5	Continuing pregnancy after elective fetal reduction of one fetus or more, third trimester, fetus 5	ICD-10-CM	Diagnosis
O31.33X9	Continuing pregnancy after elective fetal reduction of one fetus or more, third trimester, other fetus	ICD-10-CM	Diagnosis
O31.8X10	Other complications specific to multiple gestation, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.8X11	Other complications specific to multiple gestation, first trimester, fetus 1	ICD-10-CM	Diagnosis
O31.8X12	Other complications specific to multiple gestation, first trimester, fetus 2	ICD-10-CM	Diagnosis
O31.8X13	Other complications specific to multiple gestation, first trimester, fetus 3	ICD-10-CM	Diagnosis
O31.8X14	Other complications specific to multiple gestation, first trimester, fetus 4	ICD-10-CM	Diagnosis
O31.8X15	Other complications specific to multiple gestation, first trimester, fetus 5	ICD-10-CM	Diagnosis
O31.8X19	Other complications specific to multiple gestation, first trimester, other fetus	ICD-10-CM	Diagnosis
O31.8X20	Other complications specific to multiple gestation, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.8X21	Other complications specific to multiple gestation, second trimester, fetus 1	ICD-10-CM	Diagnosis
O31.8X22	Other complications specific to multiple gestation, second trimester, fetus 2	ICD-10-CM	Diagnosis
O31.8X23	Other complications specific to multiple gestation, second trimester, fetus 3	ICD-10-CM	Diagnosis
O31.8X24	Other complications specific to multiple gestation, second trimester, fetus 4	ICD-10-CM	Diagnosis
O31.8X25	Other complications specific to multiple gestation, second trimester, fetus 5	ICD-10-CM	Diagnosis
O31.8X29	Other complications specific to multiple gestation, second trimester, other fetus	ICD-10-CM	Diagnosis
O31.8X30	Other complications specific to multiple gestation, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.8X31	Other complications specific to multiple gestation, third trimester, fetus 1	ICD-10-CM	Diagnosis
O31.8X32	Other complications specific to multiple gestation, third trimester, fetus 2	ICD-10-CM	Diagnosis
O31.8X33	Other complications specific to multiple gestation, third trimester, fetus 3	ICD-10-CM	Diagnosis
O31.8X34	Other complications specific to multiple gestation, third trimester, fetus 4	ICD-10-CM	Diagnosis
O31.8X35	Other complications specific to multiple gestation, third trimester, fetus 5	ICD-10-CM	Diagnosis
O31.8X39	Other complications specific to multiple gestation, third trimester, other fetus	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
O34.01	Maternal care for unspecified congenital malformation of uterus, first trimester	ICD-10-CM	Diagnosis
O34.02	Maternal care for unspecified congenital malformation of uterus, second trimester	ICD-10-CM	Diagnosis
O34.03	Maternal care for unspecified congenital malformation of uterus, third trimester	ICD-10-CM	Diagnosis
O34.11	Maternal care for benign tumor of corpus uteri, first trimester	ICD-10-CM	Diagnosis
O34.12	Maternal care for benign tumor of corpus uteri, second trimester	ICD-10-CM	Diagnosis
O34.13	Maternal care for benign tumor of corpus uteri, third trimester	ICD-10-CM	Diagnosis
O34.31	Maternal care for cervical incompetence, first trimester	ICD-10-CM	Diagnosis
O34.32	Maternal care for cervical incompetence, second trimester	ICD-10-CM	Diagnosis
O34.33	Maternal care for cervical incompetence, third trimester	ICD-10-CM	Diagnosis
O34.41	Maternal care for other abnormalities of cervix, first trimester	ICD-10-CM	Diagnosis
O34.42	Maternal care for other abnormalities of cervix, second trimester	ICD-10-CM	Diagnosis
O34.43	Maternal care for other abnormalities of cervix, third trimester	ICD-10-CM	Diagnosis
O34.511	Maternal care for incarceration of gravid uterus, first trimester	ICD-10-CM	Diagnosis
O34.512	Maternal care for incarceration of gravid uterus, second trimester	ICD-10-CM	Diagnosis
O34.513	Maternal care for incarceration of gravid uterus, third trimester	ICD-10-CM	Diagnosis
O34.521	Maternal care for prolapse of gravid uterus, first trimester	ICD-10-CM	Diagnosis
O34.522	Maternal care for prolapse of gravid uterus, second trimester	ICD-10-CM	Diagnosis
O34.523	Maternal care for prolapse of gravid uterus, third trimester	ICD-10-CM	Diagnosis
O34.531	Maternal care for retroversion of gravid uterus, first trimester	ICD-10-CM	Diagnosis
O34.532	Maternal care for retroversion of gravid uterus, second trimester	ICD-10-CM	Diagnosis
O34.533	Maternal care for retroversion of gravid uterus, third trimester	ICD-10-CM	Diagnosis
O34.591	Maternal care for other abnormalities of gravid uterus, first trimester	ICD-10-CM	Diagnosis
O34.592	Maternal care for other abnormalities of gravid uterus, second trimester	ICD-10-CM	Diagnosis
O34.593	Maternal care for other abnormalities of gravid uterus, third trimester	ICD-10-CM	Diagnosis
O34.61	Maternal care for abnormality of vagina, first trimester	ICD-10-CM	Diagnosis
O34.62	Maternal care for abnormality of vagina, second trimester	ICD-10-CM	Diagnosis
O34.63	Maternal care for abnormality of vagina, third trimester	ICD-10-CM	Diagnosis
O34.71	Maternal care for abnormality of vulva and perineum, first trimester	ICD-10-CM	Diagnosis
O34.72	Maternal care for abnormality of vulva and perineum, second trimester	ICD-10-CM	Diagnosis
O34.73	Maternal care for abnormality of vulva and perineum, third trimester	ICD-10-CM	Diagnosis
O34.81	Maternal care for other abnormalities of pelvic organs, first trimester	ICD-10-CM	Diagnosis
O34.82	Maternal care for other abnormalities of pelvic organs, second trimester	ICD-10-CM	Diagnosis
O34.83	Maternal care for other abnormalities of pelvic organs, third trimester	ICD-10-CM	Diagnosis
O34.91	Maternal care for abnormality of pelvic organ, unspecified, first trimester	ICD-10-CM	Diagnosis
O34.92	Maternal care for abnormality of pelvic organ, unspecified, second trimester	ICD-10-CM	Diagnosis
O34.93	Maternal care for abnormality of pelvic organ, unspecified, third trimester	ICD-10-CM	Diagnosis
O36.0110	Maternal care for anti-D [Rh] antibodies, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.0111	Maternal care for anti-D [Rh] antibodies, first trimester, fetus 1	ICD-10-CM	Diagnosis
O36.0112	Maternal care for anti-D [Rh] antibodies, first trimester, fetus 2	ICD-10-CM	Diagnosis
O36.0113	Maternal care for anti-D [Rh] antibodies, first trimester, fetus 3	ICD-10-CM	Diagnosis
O36.0114	Maternal care for anti-D [Rh] antibodies, first trimester, fetus 4	ICD-10-CM	Diagnosis
O36.0115	Maternal care for anti-D [Rh] antibodies, first trimester, fetus 5	ICD-10-CM	Diagnosis
O36.0119	Maternal care for anti-D [Rh] antibodies, first trimester, other fetus	ICD-10-CM	Diagnosis
O36.0120	Maternal care for anti-D [Rh] antibodies, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O36.0121	Maternal care for anti-D [Rh] antibodies, second trimester, fetus 1	ICD-10-CM	Diagnosis
O36.0122	Maternal care for anti-D [Rh] antibodies, second trimester, fetus 2	ICD-10-CM	Diagnosis
O36.0123	Maternal care for anti-D [Rh] antibodies, second trimester, fetus 3	ICD-10-CM	Diagnosis
O36.0124	Maternal care for anti-D [Rh] antibodies, second trimester, fetus 4	ICD-10-CM	Diagnosis
O36.0125	Maternal care for anti-D [Rh] antibodies, second trimester, fetus 5	ICD-10-CM	Diagnosis
O36.0129	Maternal care for anti-D [Rh] antibodies, second trimester, other fetus	ICD-10-CM	Diagnosis
O36.0130	Maternal care for anti-D [Rh] antibodies, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.0131	Maternal care for anti-D [Rh] antibodies, third trimester, fetus 1	ICD-10-CM	Diagnosis
O36.0132	Maternal care for anti-D [Rh] antibodies, third trimester, fetus 2	ICD-10-CM	Diagnosis
O36.0133	Maternal care for anti-D [Rh] antibodies, third trimester, fetus 3	ICD-10-CM	Diagnosis
O36.0134	Maternal care for anti-D [Rh] antibodies, third trimester, fetus 4	ICD-10-CM	Diagnosis
O36.0135	Maternal care for anti-D [Rh] antibodies, third trimester, fetus 5	ICD-10-CM	Diagnosis
O36.0139	Maternal care for anti-D [Rh] antibodies, third trimester, other fetus	ICD-10-CM	Diagnosis
O36.0910	Maternal care for other rhesus isoimmunization, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.0911	Maternal care for other rhesus isoimmunization, first trimester, fetus 1	ICD-10-CM	Diagnosis
O36.0912	Maternal care for other rhesus isoimmunization, first trimester, fetus 2	ICD-10-CM	Diagnosis
O36.0913	Maternal care for other rhesus isoimmunization, first trimester, fetus 3	ICD-10-CM	Diagnosis
O36.0914	Maternal care for other rhesus isoimmunization, first trimester, fetus 4	ICD-10-CM	Diagnosis
O36.0915	Maternal care for other rhesus isoimmunization, first trimester, fetus 5	ICD-10-CM	Diagnosis
O36.0919	Maternal care for other rhesus isoimmunization, first trimester, other fetus	ICD-10-CM	Diagnosis
O36.0920	Maternal care for other rhesus isoimmunization, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.0921	Maternal care for other rhesus isoimmunization, second trimester, fetus 1	ICD-10-CM	Diagnosis
O36.0922	Maternal care for other rhesus isoimmunization, second trimester, fetus 2	ICD-10-CM	Diagnosis
O36.0923	Maternal care for other rhesus isoimmunization, second trimester, fetus 3	ICD-10-CM	Diagnosis
O36.0924	Maternal care for other rhesus isoimmunization, second trimester, fetus 4	ICD-10-CM	Diagnosis
O36.0925	Maternal care for other rhesus isoimmunization, second trimester, fetus 5	ICD-10-CM	Diagnosis
O36.0929	Maternal care for other rhesus isoimmunization, second trimester, other fetus	ICD-10-CM	Diagnosis
O36.0930	Maternal care for other rhesus isoimmunization, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.0931	Maternal care for other rhesus isoimmunization, third trimester, fetus 1	ICD-10-CM	Diagnosis
O36.0932	Maternal care for other rhesus isoimmunization, third trimester, fetus 2	ICD-10-CM	Diagnosis
O36.0933	Maternal care for other rhesus isoimmunization, third trimester, fetus 3	ICD-10-CM	Diagnosis
O36.0934	Maternal care for other rhesus isoimmunization, third trimester, fetus 4	ICD-10-CM	Diagnosis
O36.0935	Maternal care for other rhesus isoimmunization, third trimester, fetus 5	ICD-10-CM	Diagnosis
O36.0939	Maternal care for other rhesus isoimmunization, third trimester, other fetus	ICD-10-CM	Diagnosis
O36.1110	Maternal care for Anti-A sensitization, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.1111	Maternal care for Anti-A sensitization, first trimester, fetus 1	ICD-10-CM	Diagnosis
O36.1112	Maternal care for Anti-A sensitization, first trimester, fetus 2	ICD-10-CM	Diagnosis
O36.1113	Maternal care for Anti-A sensitization, first trimester, fetus 3	ICD-10-CM	Diagnosis
O36.1114	Maternal care for Anti-A sensitization, first trimester, fetus 4	ICD-10-CM	Diagnosis
O36.1115	Maternal care for Anti-A sensitization, first trimester, fetus 5	ICD-10-CM	Diagnosis
O36.1119	Maternal care for Anti-A sensitization, first trimester, other fetus	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O36.1120	Maternal care for Anti-A sensitization, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.1121	Maternal care for Anti-A sensitization, second trimester, fetus 1	ICD-10-CM	Diagnosis
O36.1122	Maternal care for Anti-A sensitization, second trimester, fetus 2	ICD-10-CM	Diagnosis
O36.1123	Maternal care for Anti-A sensitization, second trimester, fetus 3	ICD-10-CM	Diagnosis
O36.1124	Maternal care for Anti-A sensitization, second trimester, fetus 4	ICD-10-CM	Diagnosis
O36.1125	Maternal care for Anti-A sensitization, second trimester, fetus 5	ICD-10-CM	Diagnosis
O36.1129	Maternal care for Anti-A sensitization, second trimester, other fetus	ICD-10-CM	Diagnosis
O36.1130	Maternal care for Anti-A sensitization, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.1131	Maternal care for Anti-A sensitization, third trimester, fetus 1	ICD-10-CM	Diagnosis
O36.1132	Maternal care for Anti-A sensitization, third trimester, fetus 2	ICD-10-CM	Diagnosis
O36.1133	Maternal care for Anti-A sensitization, third trimester, fetus 3	ICD-10-CM	Diagnosis
O36.1134	Maternal care for Anti-A sensitization, third trimester, fetus 4	ICD-10-CM	Diagnosis
O36.1135	Maternal care for Anti-A sensitization, third trimester, fetus 5	ICD-10-CM	Diagnosis
O36.1139	Maternal care for Anti-A sensitization, third trimester, other fetus	ICD-10-CM	Diagnosis
O36.1910	Maternal care for other isoimmunization, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.1911	Maternal care for other isoimmunization, first trimester, fetus 1	ICD-10-CM	Diagnosis
O36.1912	Maternal care for other isoimmunization, first trimester, fetus 2	ICD-10-CM	Diagnosis
O36.1913	Maternal care for other isoimmunization, first trimester, fetus 3	ICD-10-CM	Diagnosis
O36.1914	Maternal care for other isoimmunization, first trimester, fetus 4	ICD-10-CM	Diagnosis
O36.1915	Maternal care for other isoimmunization, first trimester, fetus 5	ICD-10-CM	Diagnosis
O36.1919	Maternal care for other isoimmunization, first trimester, other fetus	ICD-10-CM	Diagnosis
O36.1920	Maternal care for other isoimmunization, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.1921	Maternal care for other isoimmunization, second trimester, fetus 1	ICD-10-CM	Diagnosis
O36.1922	Maternal care for other isoimmunization, second trimester, fetus 2	ICD-10-CM	Diagnosis
O36.1923	Maternal care for other isoimmunization, second trimester, fetus 3	ICD-10-CM	Diagnosis
O36.1924	Maternal care for other isoimmunization, second trimester, fetus 4	ICD-10-CM	Diagnosis
O36.1925	Maternal care for other isoimmunization, second trimester, fetus 5	ICD-10-CM	Diagnosis
O36.1929	Maternal care for other isoimmunization, second trimester, other fetus	ICD-10-CM	Diagnosis
O36.1930	Maternal care for other isoimmunization, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.1931	Maternal care for other isoimmunization, third trimester, fetus 1	ICD-10-CM	Diagnosis
O36.1932	Maternal care for other isoimmunization, third trimester, fetus 2	ICD-10-CM	Diagnosis
O36.1933	Maternal care for other isoimmunization, third trimester, fetus 3	ICD-10-CM	Diagnosis
O36.1934	Maternal care for other isoimmunization, third trimester, fetus 4	ICD-10-CM	Diagnosis
O36.1935	Maternal care for other isoimmunization, third trimester, fetus 5	ICD-10-CM	Diagnosis
O36.1939	Maternal care for other isoimmunization, third trimester, other fetus	ICD-10-CM	Diagnosis
O36.21X0	Maternal care for hydrops fetalis, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.21X1	Maternal care for hydrops fetalis, first trimester, fetus 1	ICD-10-CM	Diagnosis
O36.21X2	Maternal care for hydrops fetalis, first trimester, fetus 2	ICD-10-CM	Diagnosis
O36.21X3	Maternal care for hydrops fetalis, first trimester, fetus 3	ICD-10-CM	Diagnosis
O36.21X4	Maternal care for hydrops fetalis, first trimester, fetus 4	ICD-10-CM	Diagnosis
O36.21X5	Maternal care for hydrops fetalis, first trimester, fetus 5	ICD-10-CM	Diagnosis
O36.21X9	Maternal care for hydrops fetalis, first trimester, other fetus	ICD-10-CM	Diagnosis
O36.22X0	Maternal care for hydrops fetalis, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.22X1	Maternal care for hydrops fetalis, second trimester, fetus 1	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O36.22X2	Maternal care for hydrops fetalis, second trimester, fetus 2	ICD-10-CM	Diagnosis
O36.22X3	Maternal care for hydrops fetalis, second trimester, fetus 3	ICD-10-CM	Diagnosis
O36.22X4	Maternal care for hydrops fetalis, second trimester, fetus 4	ICD-10-CM	Diagnosis
O36.22X5	Maternal care for hydrops fetalis, second trimester, fetus 5	ICD-10-CM	Diagnosis
O36.22X9	Maternal care for hydrops fetalis, second trimester, other fetus	ICD-10-CM	Diagnosis
O36.23X0	Maternal care for hydrops fetalis, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.23X1	Maternal care for hydrops fetalis, third trimester, fetus 1	ICD-10-CM	Diagnosis
O36.23X2	Maternal care for hydrops fetalis, third trimester, fetus 2	ICD-10-CM	Diagnosis
O36.23X3	Maternal care for hydrops fetalis, third trimester, fetus 3	ICD-10-CM	Diagnosis
O36.23X4	Maternal care for hydrops fetalis, third trimester, fetus 4	ICD-10-CM	Diagnosis
O36.23X5	Maternal care for hydrops fetalis, third trimester, fetus 5	ICD-10-CM	Diagnosis
O36.23X9	Maternal care for hydrops fetalis, third trimester, other fetus	ICD-10-CM	Diagnosis
O36.5110	Maternal care for known or suspected placental insufficiency, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.5111	Maternal care for known or suspected placental insufficiency, first trimester, fetus 1	ICD-10-CM	Diagnosis
O36.5112	Maternal care for known or suspected placental insufficiency, first trimester, fetus 2	ICD-10-CM	Diagnosis
O36.5113	Maternal care for known or suspected placental insufficiency, first trimester, fetus 3	ICD-10-CM	Diagnosis
O36.5114	Maternal care for known or suspected placental insufficiency, first trimester, fetus 4	ICD-10-CM	Diagnosis
O36.5115	Maternal care for known or suspected placental insufficiency, first trimester, fetus 5	ICD-10-CM	Diagnosis
O36.5119	Maternal care for known or suspected placental insufficiency, first trimester, other fetus	ICD-10-CM	Diagnosis
O36.5120	Maternal care for known or suspected placental insufficiency, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.5121	Maternal care for known or suspected placental insufficiency, second trimester, fetus 1	ICD-10-CM	Diagnosis
O36.5122	Maternal care for known or suspected placental insufficiency, second trimester, fetus 2	ICD-10-CM	Diagnosis
O36.5123	Maternal care for known or suspected placental insufficiency, second trimester, fetus 3	ICD-10-CM	Diagnosis
O36.5124	Maternal care for known or suspected placental insufficiency, second trimester, fetus 4	ICD-10-CM	Diagnosis
O36.5125	Maternal care for known or suspected placental insufficiency, second trimester, fetus 5	ICD-10-CM	Diagnosis
O36.5129	Maternal care for known or suspected placental insufficiency, second trimester, other fetus	ICD-10-CM	Diagnosis
O36.5130	Maternal care for known or suspected placental insufficiency, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.5131	Maternal care for known or suspected placental insufficiency, third trimester, fetus 1	ICD-10-CM	Diagnosis
O36.5132	Maternal care for known or suspected placental insufficiency, third trimester, fetus 2	ICD-10-CM	Diagnosis
O36.5133	Maternal care for known or suspected placental insufficiency, third trimester, fetus 3	ICD-10-CM	Diagnosis
O36.5134	Maternal care for known or suspected placental insufficiency, third trimester, fetus 4	ICD-10-CM	Diagnosis
O36.5135	Maternal care for known or suspected placental insufficiency, third trimester, fetus 5	ICD-10-CM	Diagnosis
O36.5139	Maternal care for known or suspected placental insufficiency, third trimester, other fetus	ICD-10-CM	Diagnosis
O36.5910	Maternal care for other known or suspected poor fetal growth, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.5911	Maternal care for other known or suspected poor fetal growth, first trimester, fetus 1	ICD-10-CM	Diagnosis
O36.5912	Maternal care for other known or suspected poor fetal growth, first trimester, fetus 2	ICD-10-CM	Diagnosis
O36.5913	Maternal care for other known or suspected poor fetal growth, first trimester, fetus 3	ICD-10-CM	Diagnosis
O36.5914	Maternal care for other known or suspected poor fetal growth, first trimester, fetus 4	ICD-10-CM	Diagnosis
O36.5915	Maternal care for other known or suspected poor fetal growth, first trimester, fetus 5	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O36.5919	Maternal care for other known or suspected poor fetal growth, first trimester, other fetus	ICD-10-CM	Diagnosis
O36.5920	Maternal care for other known or suspected poor fetal growth, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.5921	Maternal care for other known or suspected poor fetal growth, second trimester, fetus 1	ICD-10-CM	Diagnosis
O36.5922	Maternal care for other known or suspected poor fetal growth, second trimester, fetus 2	ICD-10-CM	Diagnosis
O36.5923	Maternal care for other known or suspected poor fetal growth, second trimester, fetus 3	ICD-10-CM	Diagnosis
O36.5924	Maternal care for other known or suspected poor fetal growth, second trimester, fetus 4	ICD-10-CM	Diagnosis
O36.5925	Maternal care for other known or suspected poor fetal growth, second trimester, fetus 5	ICD-10-CM	Diagnosis
O36.5929	Maternal care for other known or suspected poor fetal growth, second trimester, other fetus	ICD-10-CM	Diagnosis
O36.5930	Maternal care for other known or suspected poor fetal growth, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.5931	Maternal care for other known or suspected poor fetal growth, third trimester, fetus 1	ICD-10-CM	Diagnosis
O36.5932	Maternal care for other known or suspected poor fetal growth, third trimester, fetus 2	ICD-10-CM	Diagnosis
O36.5933	Maternal care for other known or suspected poor fetal growth, third trimester, fetus 3	ICD-10-CM	Diagnosis
O36.5934	Maternal care for other known or suspected poor fetal growth, third trimester, fetus 4	ICD-10-CM	Diagnosis
O36.5935	Maternal care for other known or suspected poor fetal growth, third trimester, fetus 5	ICD-10-CM	Diagnosis
O36.5939	Maternal care for other known or suspected poor fetal growth, third trimester, other fetus	ICD-10-CM	Diagnosis
O36.61X0	Maternal care for excessive fetal growth, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.61X1	Maternal care for excessive fetal growth, first trimester, fetus 1	ICD-10-CM	Diagnosis
O36.61X2	Maternal care for excessive fetal growth, first trimester, fetus 2	ICD-10-CM	Diagnosis
O36.61X3	Maternal care for excessive fetal growth, first trimester, fetus 3	ICD-10-CM	Diagnosis
O36.61X4	Maternal care for excessive fetal growth, first trimester, fetus 4	ICD-10-CM	Diagnosis
O36.61X5	Maternal care for excessive fetal growth, first trimester, fetus 5	ICD-10-CM	Diagnosis
O36.61X9	Maternal care for excessive fetal growth, first trimester, other fetus	ICD-10-CM	Diagnosis
O36.62X0	Maternal care for excessive fetal growth, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.62X1	Maternal care for excessive fetal growth, second trimester, fetus 1	ICD-10-CM	Diagnosis
O36.62X2	Maternal care for excessive fetal growth, second trimester, fetus 2	ICD-10-CM	Diagnosis
O36.62X3	Maternal care for excessive fetal growth, second trimester, fetus 3	ICD-10-CM	Diagnosis
O36.62X4	Maternal care for excessive fetal growth, second trimester, fetus 4	ICD-10-CM	Diagnosis
O36.62X5	Maternal care for excessive fetal growth, second trimester, fetus 5	ICD-10-CM	Diagnosis
O36.62X9	Maternal care for excessive fetal growth, second trimester, other fetus	ICD-10-CM	Diagnosis
O36.63X0	Maternal care for excessive fetal growth, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.63X1	Maternal care for excessive fetal growth, third trimester, fetus 1	ICD-10-CM	Diagnosis
O36.63X2	Maternal care for excessive fetal growth, third trimester, fetus 2	ICD-10-CM	Diagnosis
O36.63X3	Maternal care for excessive fetal growth, third trimester, fetus 3	ICD-10-CM	Diagnosis
O36.63X4	Maternal care for excessive fetal growth, third trimester, fetus 4	ICD-10-CM	Diagnosis
O36.63X5	Maternal care for excessive fetal growth, third trimester, fetus 5	ICD-10-CM	Diagnosis
O36.63X9	Maternal care for excessive fetal growth, third trimester, other fetus	ICD-10-CM	Diagnosis
O36.71X0	Maternal care for viable fetus in abdominal pregnancy, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.71X1	Maternal care for viable fetus in abdominal pregnancy, first trimester, fetus 1	ICD-10-CM	Diagnosis
O36.71X2	Maternal care for viable fetus in abdominal pregnancy, first trimester, fetus 2	ICD-10-CM	Diagnosis
O36.71X3	Maternal care for viable fetus in abdominal pregnancy, first trimester, fetus 3	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O36.71X4	Maternal care for viable fetus in abdominal pregnancy, first trimester, fetus 4	ICD-10-CM	Diagnosis
O36.71X5	Maternal care for viable fetus in abdominal pregnancy, first trimester, fetus 5	ICD-10-CM	Diagnosis
O36.71X9	Maternal care for viable fetus in abdominal pregnancy, first trimester, other fetus	ICD-10-CM	Diagnosis
O36.72X0	Maternal care for viable fetus in abdominal pregnancy, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.72X1	Maternal care for viable fetus in abdominal pregnancy, second trimester, fetus 1	ICD-10-CM	Diagnosis
O36.72X2	Maternal care for viable fetus in abdominal pregnancy, second trimester, fetus 2	ICD-10-CM	Diagnosis
O36.72X3	Maternal care for viable fetus in abdominal pregnancy, second trimester, fetus 3	ICD-10-CM	Diagnosis
O36.72X4	Maternal care for viable fetus in abdominal pregnancy, second trimester, fetus 4	ICD-10-CM	Diagnosis
O36.72X5	Maternal care for viable fetus in abdominal pregnancy, second trimester, fetus 5	ICD-10-CM	Diagnosis
O36.72X9	Maternal care for viable fetus in abdominal pregnancy, second trimester, other fetus	ICD-10-CM	Diagnosis
O36.73X0	Maternal care for viable fetus in abdominal pregnancy, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.73X1	Maternal care for viable fetus in abdominal pregnancy, third trimester, fetus 1	ICD-10-CM	Diagnosis
O36.73X2	Maternal care for viable fetus in abdominal pregnancy, third trimester, fetus 2	ICD-10-CM	Diagnosis
O36.73X3	Maternal care for viable fetus in abdominal pregnancy, third trimester, fetus 3	ICD-10-CM	Diagnosis
O36.73X4	Maternal care for viable fetus in abdominal pregnancy, third trimester, fetus 4	ICD-10-CM	Diagnosis
O36.73X5	Maternal care for viable fetus in abdominal pregnancy, third trimester, fetus 5	ICD-10-CM	Diagnosis
O36.73X9	Maternal care for viable fetus in abdominal pregnancy, third trimester, other fetus	ICD-10-CM	Diagnosis
O36.8120	Decreased fetal movements, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.8121	Decreased fetal movements, second trimester, fetus 1	ICD-10-CM	Diagnosis
O36.8122	Decreased fetal movements, second trimester, fetus 2	ICD-10-CM	Diagnosis
O36.8123	Decreased fetal movements, second trimester, fetus 3	ICD-10-CM	Diagnosis
O36.8124	Decreased fetal movements, second trimester, fetus 4	ICD-10-CM	Diagnosis
O36.8125	Decreased fetal movements, second trimester, fetus 5	ICD-10-CM	Diagnosis
O36.8129	Decreased fetal movements, second trimester, other fetus	ICD-10-CM	Diagnosis
O36.8130	Decreased fetal movements, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.8131	Decreased fetal movements, third trimester, fetus 1	ICD-10-CM	Diagnosis
O36.8132	Decreased fetal movements, third trimester, fetus 2	ICD-10-CM	Diagnosis
O36.8133	Decreased fetal movements, third trimester, fetus 3	ICD-10-CM	Diagnosis
O36.8134	Decreased fetal movements, third trimester, fetus 4	ICD-10-CM	Diagnosis
O36.8135	Decreased fetal movements, third trimester, fetus 5	ICD-10-CM	Diagnosis
O36.8139	Decreased fetal movements, third trimester, other fetus	ICD-10-CM	Diagnosis
O36.8210	Fetal anemia and thrombocytopenia, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.8211	Fetal anemia and thrombocytopenia, first trimester, fetus 1	ICD-10-CM	Diagnosis
O36.8212	Fetal anemia and thrombocytopenia, first trimester, fetus 2	ICD-10-CM	Diagnosis
O36.8213	Fetal anemia and thrombocytopenia, first trimester, fetus 3	ICD-10-CM	Diagnosis
O36.8214	Fetal anemia and thrombocytopenia, first trimester, fetus 4	ICD-10-CM	Diagnosis
O36.8215	Fetal anemia and thrombocytopenia, first trimester, fetus 5	ICD-10-CM	Diagnosis
O36.8219	Fetal anemia and thrombocytopenia, first trimester, other fetus	ICD-10-CM	Diagnosis
O36.8220	Fetal anemia and thrombocytopenia, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.8221	Fetal anemia and thrombocytopenia, second trimester, fetus 1	ICD-10-CM	Diagnosis
O36.8222	Fetal anemia and thrombocytopenia, second trimester, fetus 2	ICD-10-CM	Diagnosis
O36.8223	Fetal anemia and thrombocytopenia, second trimester, fetus 3	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O36.8224	Fetal anemia and thrombocytopenia, second trimester, fetus 4	ICD-10-CM	Diagnosis
O36.8225	Fetal anemia and thrombocytopenia, second trimester, fetus 5	ICD-10-CM	Diagnosis
O36.8229	Fetal anemia and thrombocytopenia, second trimester, other fetus	ICD-10-CM	Diagnosis
O36.8230	Fetal anemia and thrombocytopenia, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.8231	Fetal anemia and thrombocytopenia, third trimester, fetus 1	ICD-10-CM	Diagnosis
O36.8232	Fetal anemia and thrombocytopenia, third trimester, fetus 2	ICD-10-CM	Diagnosis
O36.8233	Fetal anemia and thrombocytopenia, third trimester, fetus 3	ICD-10-CM	Diagnosis
O36.8234	Fetal anemia and thrombocytopenia, third trimester, fetus 4	ICD-10-CM	Diagnosis
O36.8235	Fetal anemia and thrombocytopenia, third trimester, fetus 5	ICD-10-CM	Diagnosis
O36.8239	Fetal anemia and thrombocytopenia, third trimester, other fetus	ICD-10-CM	Diagnosis
O36.8310	Maternal care for abnormalities of the fetal heart rate or rhythm, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.8311	Maternal care for abnormalities of the fetal heart rate or rhythm, first trimester, fetus 1	ICD-10-CM	Diagnosis
O36.8312	Maternal care for abnormalities of the fetal heart rate or rhythm, first trimester, fetus 2	ICD-10-CM	Diagnosis
O36.8313	Maternal care for abnormalities of the fetal heart rate or rhythm, first trimester, fetus 3	ICD-10-CM	Diagnosis
O36.8314	Maternal care for abnormalities of the fetal heart rate or rhythm, first trimester, fetus 4	ICD-10-CM	Diagnosis
O36.8315	Maternal care for abnormalities of the fetal heart rate or rhythm, first trimester, fetus 5	ICD-10-CM	Diagnosis
O36.8320	Maternal care for abnormalities of the fetal heart rate or rhythm, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.8321	Maternal care for abnormalities of the fetal heart rate or rhythm, second trimester, fetus 1	ICD-10-CM	Diagnosis
O36.8322	Maternal care for abnormalities of the fetal heart rate or rhythm, second trimester, fetus 2	ICD-10-CM	Diagnosis
O36.8323	Maternal care for abnormalities of the fetal heart rate or rhythm, second trimester, fetus 3	ICD-10-CM	Diagnosis
O36.8324	Maternal care for abnormalities of the fetal heart rate or rhythm, second trimester, fetus 4	ICD-10-CM	Diagnosis
O36.8325	Maternal care for abnormalities of the fetal heart rate or rhythm, second trimester, fetus 5	ICD-10-CM	Diagnosis
O36.8329	Maternal care for abnormalities of the fetal heart rate or rhythm, second trimester, other fetus	ICD-10-CM	Diagnosis
O36.8330	Maternal care for abnormalities of the fetal heart rate or rhythm, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.8331	Maternal care for abnormalities of the fetal heart rate or rhythm, third trimester, fetus 1	ICD-10-CM	Diagnosis
O36.8332	Maternal care for abnormalities of the fetal heart rate or rhythm, third trimester, fetus 2	ICD-10-CM	Diagnosis
O36.8333	Maternal care for abnormalities of the fetal heart rate or rhythm, third trimester, fetus 3	ICD-10-CM	Diagnosis
O36.8334	Maternal care for abnormalities of the fetal heart rate or rhythm, third trimester, fetus 4	ICD-10-CM	Diagnosis
O36.8335	Maternal care for abnormalities of the fetal heart rate or rhythm, third trimester, fetus 5	ICD-10-CM	Diagnosis
O36.8339	Maternal care for abnormalities of the fetal heart rate or rhythm, third trimester, other fetus	ICD-10-CM	Diagnosis
O36.8910	Maternal care for other specified fetal problems, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.8911	Maternal care for other specified fetal problems, first trimester, fetus 1	ICD-10-CM	Diagnosis
O36.8912	Maternal care for other specified fetal problems, first trimester, fetus 2	ICD-10-CM	Diagnosis
O36.8913	Maternal care for other specified fetal problems, first trimester, fetus 3	ICD-10-CM	Diagnosis
O36.8914	Maternal care for other specified fetal problems, first trimester, fetus 4	ICD-10-CM	Diagnosis
O36.8915	Maternal care for other specified fetal problems, first trimester, fetus 5	ICD-10-CM	Diagnosis
O36.8919	Maternal care for other specified fetal problems, first trimester, other fetus	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O36.8920	Maternal care for other specified fetal problems, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.8921	Maternal care for other specified fetal problems, second trimester, fetus 1	ICD-10-CM	Diagnosis
O36.8922	Maternal care for other specified fetal problems, second trimester, fetus 2	ICD-10-CM	Diagnosis
O36.8923	Maternal care for other specified fetal problems, second trimester, fetus 3	ICD-10-CM	Diagnosis
O36.8924	Maternal care for other specified fetal problems, second trimester, fetus 4	ICD-10-CM	Diagnosis
O36.8925	Maternal care for other specified fetal problems, second trimester, fetus 5	ICD-10-CM	Diagnosis
O36.8929	Maternal care for other specified fetal problems, second trimester, other fetus	ICD-10-CM	Diagnosis
O36.8930	Maternal care for other specified fetal problems, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.8931	Maternal care for other specified fetal problems, third trimester, fetus 1	ICD-10-CM	Diagnosis
O36.8932	Maternal care for other specified fetal problems, third trimester, fetus 2	ICD-10-CM	Diagnosis
O36.8933	Maternal care for other specified fetal problems, third trimester, fetus 3	ICD-10-CM	Diagnosis
O36.8934	Maternal care for other specified fetal problems, third trimester, fetus 4	ICD-10-CM	Diagnosis
O36.8935	Maternal care for other specified fetal problems, third trimester, fetus 5	ICD-10-CM	Diagnosis
O36.8939	Maternal care for other specified fetal problems, third trimester, other fetus	ICD-10-CM	Diagnosis
O36.91X0	Maternal care for fetal problem, unspecified, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.91X1	Maternal care for fetal problem, unspecified, first trimester, fetus 1	ICD-10-CM	Diagnosis
O36.91X2	Maternal care for fetal problem, unspecified, first trimester, fetus 2	ICD-10-CM	Diagnosis
O36.91X3	Maternal care for fetal problem, unspecified, first trimester, fetus 3	ICD-10-CM	Diagnosis
O36.91X4	Maternal care for fetal problem, unspecified, first trimester, fetus 4	ICD-10-CM	Diagnosis
O36.91X5	Maternal care for fetal problem, unspecified, first trimester, fetus 5	ICD-10-CM	Diagnosis
O36.91X9	Maternal care for fetal problem, unspecified, first trimester, other fetus	ICD-10-CM	Diagnosis
O36.92X0	Maternal care for fetal problem, unspecified, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.92X1	Maternal care for fetal problem, unspecified, second trimester, fetus 1	ICD-10-CM	Diagnosis
O36.92X2	Maternal care for fetal problem, unspecified, second trimester, fetus 2	ICD-10-CM	Diagnosis
O36.92X3	Maternal care for fetal problem, unspecified, second trimester, fetus 3	ICD-10-CM	Diagnosis
O36.92X4	Maternal care for fetal problem, unspecified, second trimester, fetus 4	ICD-10-CM	Diagnosis
O36.92X5	Maternal care for fetal problem, unspecified, second trimester, fetus 5	ICD-10-CM	Diagnosis
O36.92X9	Maternal care for fetal problem, unspecified, second trimester, other fetus	ICD-10-CM	Diagnosis
O36.93X0	Maternal care for fetal problem, unspecified, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.93X1	Maternal care for fetal problem, unspecified, third trimester, fetus 1	ICD-10-CM	Diagnosis
O36.93X2	Maternal care for fetal problem, unspecified, third trimester, fetus 2	ICD-10-CM	Diagnosis
O36.93X3	Maternal care for fetal problem, unspecified, third trimester, fetus 3	ICD-10-CM	Diagnosis
O36.93X4	Maternal care for fetal problem, unspecified, third trimester, fetus 4	ICD-10-CM	Diagnosis
O36.93X5	Maternal care for fetal problem, unspecified, third trimester, fetus 5	ICD-10-CM	Diagnosis
O36.93X9	Maternal care for fetal problem, unspecified, third trimester, other fetus	ICD-10-CM	Diagnosis
O40.1XX0	Polyhydramnios, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O40.1XX1	Polyhydramnios, first trimester, fetus 1	ICD-10-CM	Diagnosis
O40.1XX2	Polyhydramnios, first trimester, fetus 2	ICD-10-CM	Diagnosis
O40.1XX3	Polyhydramnios, first trimester, fetus 3	ICD-10-CM	Diagnosis
O40.1XX4	Polyhydramnios, first trimester, fetus 4	ICD-10-CM	Diagnosis
O40.1XX5	Polyhydramnios, first trimester, fetus 5	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O40.1XX9	Polyhydramnios, first trimester, other fetus	ICD-10-CM	Diagnosis
O40.2XX0	Polyhydramnios, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O40.2XX1	Polyhydramnios, second trimester, fetus 1	ICD-10-CM	Diagnosis
O40.2XX2	Polyhydramnios, second trimester, fetus 2	ICD-10-CM	Diagnosis
O40.2XX3	Polyhydramnios, second trimester, fetus 3	ICD-10-CM	Diagnosis
O40.2XX4	Polyhydramnios, second trimester, fetus 4	ICD-10-CM	Diagnosis
O40.2XX5	Polyhydramnios, second trimester, fetus 5	ICD-10-CM	Diagnosis
O40.2XX9	Polyhydramnios, second trimester, other fetus	ICD-10-CM	Diagnosis
O40.3XX0	Polyhydramnios, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O40.3XX1	Polyhydramnios, third trimester, fetus 1	ICD-10-CM	Diagnosis
O40.3XX2	Polyhydramnios, third trimester, fetus 2	ICD-10-CM	Diagnosis
O40.3XX3	Polyhydramnios, third trimester, fetus 3	ICD-10-CM	Diagnosis
O40.3XX4	Polyhydramnios, third trimester, fetus 4	ICD-10-CM	Diagnosis
O40.3XX5	Polyhydramnios, third trimester, fetus 5	ICD-10-CM	Diagnosis
O40.3XX9	Polyhydramnios, third trimester, other fetus	ICD-10-CM	Diagnosis
O41.01X0	Oligohydramnios, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.01X1	Oligohydramnios, first trimester, fetus 1	ICD-10-CM	Diagnosis
O41.01X2	Oligohydramnios, first trimester, fetus 2	ICD-10-CM	Diagnosis
O41.01X3	Oligohydramnios, first trimester, fetus 3	ICD-10-CM	Diagnosis
O41.01X4	Oligohydramnios, first trimester, fetus 4	ICD-10-CM	Diagnosis
O41.01X5	Oligohydramnios, first trimester, fetus 5	ICD-10-CM	Diagnosis
O41.01X9	Oligohydramnios, first trimester, other fetus	ICD-10-CM	Diagnosis
O41.02X0	Oligohydramnios, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.02X1	Oligohydramnios, second trimester, fetus 1	ICD-10-CM	Diagnosis
O41.02X2	Oligohydramnios, second trimester, fetus 2	ICD-10-CM	Diagnosis
O41.02X3	Oligohydramnios, second trimester, fetus 3	ICD-10-CM	Diagnosis
O41.02X4	Oligohydramnios, second trimester, fetus 4	ICD-10-CM	Diagnosis
O41.02X5	Oligohydramnios, second trimester, fetus 5	ICD-10-CM	Diagnosis
O41.02X9	Oligohydramnios, second trimester, other fetus	ICD-10-CM	Diagnosis
O41.03X0	Oligohydramnios, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.03X1	Oligohydramnios, third trimester, fetus 1	ICD-10-CM	Diagnosis
O41.03X2	Oligohydramnios, third trimester, fetus 2	ICD-10-CM	Diagnosis
O41.03X3	Oligohydramnios, third trimester, fetus 3	ICD-10-CM	Diagnosis
O41.03X4	Oligohydramnios, third trimester, fetus 4	ICD-10-CM	Diagnosis
O41.03X5	Oligohydramnios, third trimester, fetus 5	ICD-10-CM	Diagnosis
O41.03X9	Oligohydramnios, third trimester, other fetus	ICD-10-CM	Diagnosis
O41.1010	Infection of amniotic sac and membranes, unspecified, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.1011	Infection of amniotic sac and membranes, unspecified, first trimester, fetus 1	ICD-10-CM	Diagnosis
O41.1012	Infection of amniotic sac and membranes, unspecified, first trimester, fetus 2	ICD-10-CM	Diagnosis
O41.1013	Infection of amniotic sac and membranes, unspecified, first trimester, fetus 3	ICD-10-CM	Diagnosis
O41.1014	Infection of amniotic sac and membranes, unspecified, first trimester, fetus 4	ICD-10-CM	Diagnosis
O41.1015	Infection of amniotic sac and membranes, unspecified, first trimester, fetus 5	ICD-10-CM	Diagnosis
O41.1019	Infection of amniotic sac and membranes, unspecified, first trimester, other fetus	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
O41.1020	Infection of amniotic sac and membranes, unspecified, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.1021	Infection of amniotic sac and membranes, unspecified, second trimester, fetus 1	ICD-10-CM	Diagnosis
O41.1022	Infection of amniotic sac and membranes, unspecified, second trimester, fetus 2	ICD-10-CM	Diagnosis
O41.1023	Infection of amniotic sac and membranes, unspecified, second trimester, fetus 3	ICD-10-CM	Diagnosis
O41.1024	Infection of amniotic sac and membranes, unspecified, second trimester, fetus 4	ICD-10-CM	Diagnosis
O41.1025	Infection of amniotic sac and membranes, unspecified, second trimester, fetus 5	ICD-10-CM	Diagnosis
O41.1029	Infection of amniotic sac and membranes, unspecified, second trimester, other fetus	ICD-10-CM	Diagnosis
O41.1030	Infection of amniotic sac and membranes, unspecified, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.1031	Infection of amniotic sac and membranes, unspecified, third trimester, fetus 1	ICD-10-CM	Diagnosis
O41.1032	Infection of amniotic sac and membranes, unspecified, third trimester, fetus 2	ICD-10-CM	Diagnosis
O41.1033	Infection of amniotic sac and membranes, unspecified, third trimester, fetus 3	ICD-10-CM	Diagnosis
O41.1034	Infection of amniotic sac and membranes, unspecified, third trimester, fetus 4	ICD-10-CM	Diagnosis
O41.1035	Infection of amniotic sac and membranes, unspecified, third trimester, fetus 5	ICD-10-CM	Diagnosis
O41.1039	Infection of amniotic sac and membranes, unspecified, third trimester, other fetus	ICD-10-CM	Diagnosis
O41.1210	Chorioamnionitis, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.1211	Chorioamnionitis, first trimester, fetus 1	ICD-10-CM	Diagnosis
O41.1212	Chorioamnionitis, first trimester, fetus 2	ICD-10-CM	Diagnosis
O41.1213	Chorioamnionitis, first trimester, fetus 3	ICD-10-CM	Diagnosis
O41.1214	Chorioamnionitis, first trimester, fetus 4	ICD-10-CM	Diagnosis
O41.1215	Chorioamnionitis, first trimester, fetus 5	ICD-10-CM	Diagnosis
O41.1219	Chorioamnionitis, first trimester, other fetus	ICD-10-CM	Diagnosis
O41.1220	Chorioamnionitis, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.1221	Chorioamnionitis, second trimester, fetus 1	ICD-10-CM	Diagnosis
O41.1222	Chorioamnionitis, second trimester, fetus 2	ICD-10-CM	Diagnosis
O41.1223	Chorioamnionitis, second trimester, fetus 3	ICD-10-CM	Diagnosis
O41.1224	Chorioamnionitis, second trimester, fetus 4	ICD-10-CM	Diagnosis
O41.1225	Chorioamnionitis, second trimester, fetus 5	ICD-10-CM	Diagnosis
O41.1229	Chorioamnionitis, second trimester, other fetus	ICD-10-CM	Diagnosis
O41.1230	Chorioamnionitis, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.1231	Chorioamnionitis, third trimester, fetus 1	ICD-10-CM	Diagnosis
O41.1232	Chorioamnionitis, third trimester, fetus 2	ICD-10-CM	Diagnosis
O41.1233	Chorioamnionitis, third trimester, fetus 3	ICD-10-CM	Diagnosis
O41.1234	Chorioamnionitis, third trimester, fetus 4	ICD-10-CM	Diagnosis
O41.1235	Chorioamnionitis, third trimester, fetus 5	ICD-10-CM	Diagnosis
O41.1239	Chorioamnionitis, third trimester, other fetus	ICD-10-CM	Diagnosis
O41.1410	Placentitis, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.1411	Placentitis, first trimester, fetus 1	ICD-10-CM	Diagnosis
O41.1412	Placentitis, first trimester, fetus 2	ICD-10-CM	Diagnosis
O41.1413	Placentitis, first trimester, fetus 3	ICD-10-CM	Diagnosis
O41.1414	Placentitis, first trimester, fetus 4	ICD-10-CM	Diagnosis
O41.1415	Placentitis, first trimester, fetus 5	ICD-10-CM	Diagnosis
O41.1419	Placentitis, first trimester, other fetus	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
O41.1420	Placentitis, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.1421	Placentitis, second trimester, fetus 1	ICD-10-CM	Diagnosis
O41.1422	Placentitis, second trimester, fetus 2	ICD-10-CM	Diagnosis
O41.1423	Placentitis, second trimester, fetus 3	ICD-10-CM	Diagnosis
O41.1424	Placentitis, second trimester, fetus 4	ICD-10-CM	Diagnosis
O41.1425	Placentitis, second trimester, fetus 5	ICD-10-CM	Diagnosis
O41.1429	Placentitis, second trimester, other fetus	ICD-10-CM	Diagnosis
O41.1430	Placentitis, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.1431	Placentitis, third trimester, fetus 1	ICD-10-CM	Diagnosis
O41.1432	Placentitis, third trimester, fetus 2	ICD-10-CM	Diagnosis
O41.1433	Placentitis, third trimester, fetus 3	ICD-10-CM	Diagnosis
O41.1434	Placentitis, third trimester, fetus 4	ICD-10-CM	Diagnosis
O41.1435	Placentitis, third trimester, fetus 5	ICD-10-CM	Diagnosis
O41.1439	Placentitis, third trimester, other fetus	ICD-10-CM	Diagnosis
O41.8X10	Other specified disorders of amniotic fluid and membranes, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.8X11	Other specified disorders of amniotic fluid and membranes, first trimester, fetus 1	ICD-10-CM	Diagnosis
O41.8X12	Other specified disorders of amniotic fluid and membranes, first trimester, fetus 2	ICD-10-CM	Diagnosis
O41.8X13	Other specified disorders of amniotic fluid and membranes, first trimester, fetus 3	ICD-10-CM	Diagnosis
O41.8X14	Other specified disorders of amniotic fluid and membranes, first trimester, fetus 4	ICD-10-CM	Diagnosis
O41.8X15	Other specified disorders of amniotic fluid and membranes, first trimester, fetus 5	ICD-10-CM	Diagnosis
O41.8X19	Other specified disorders of amniotic fluid and membranes, first trimester, other fetus	ICD-10-CM	Diagnosis
O41.8X20	Other specified disorders of amniotic fluid and membranes, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.8X21	Other specified disorders of amniotic fluid and membranes, second trimester, fetus 1	ICD-10-CM	Diagnosis
O41.8X22	Other specified disorders of amniotic fluid and membranes, second trimester, fetus 2	ICD-10-CM	Diagnosis
O41.8X23	Other specified disorders of amniotic fluid and membranes, second trimester, fetus 3	ICD-10-CM	Diagnosis
O41.8X24	Other specified disorders of amniotic fluid and membranes, second trimester, fetus 4	ICD-10-CM	Diagnosis
O41.8X25	Other specified disorders of amniotic fluid and membranes, second trimester, fetus 5	ICD-10-CM	Diagnosis
O41.8X29	Other specified disorders of amniotic fluid and membranes, second trimester, other fetus	ICD-10-CM	Diagnosis
O41.8X30	Other specified disorders of amniotic fluid and membranes, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.8X31	Other specified disorders of amniotic fluid and membranes, third trimester, fetus 1	ICD-10-CM	Diagnosis
O41.8X32	Other specified disorders of amniotic fluid and membranes, third trimester, fetus 2	ICD-10-CM	Diagnosis
O41.8X33	Other specified disorders of amniotic fluid and membranes, third trimester, fetus 3	ICD-10-CM	Diagnosis
O41.8X34	Other specified disorders of amniotic fluid and membranes, third trimester, fetus 4	ICD-10-CM	Diagnosis
O41.8X35	Other specified disorders of amniotic fluid and membranes, third trimester, fetus 5	ICD-10-CM	Diagnosis
O41.8X39	Other specified disorders of amniotic fluid and membranes, third trimester, other fetus	ICD-10-CM	Diagnosis
O41.91X0	Disorder of amniotic fluid and membranes, unspecified, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.91X1	Disorder of amniotic fluid and membranes, unspecified, first trimester, fetus 1	ICD-10-CM	Diagnosis
O41.91X2	Disorder of amniotic fluid and membranes, unspecified, first trimester, fetus 2	ICD-10-CM	Diagnosis
O41.91X3	Disorder of amniotic fluid and membranes, unspecified, first trimester, fetus 3	ICD-10-CM	Diagnosis
O41.91X4	Disorder of amniotic fluid and membranes, unspecified, first trimester, fetus 4	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
O41.91X5	Disorder of amniotic fluid and membranes, unspecified, first trimester, fetus 5	ICD-10-CM	Diagnosis
O41.91X9	Disorder of amniotic fluid and membranes, unspecified, first trimester, other fetus	ICD-10-CM	Diagnosis
O41.92X0	Disorder of amniotic fluid and membranes, unspecified, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.92X1	Disorder of amniotic fluid and membranes, unspecified, second trimester, fetus 1	ICD-10-CM	Diagnosis
O41.92X2	Disorder of amniotic fluid and membranes, unspecified, second trimester, fetus 2	ICD-10-CM	Diagnosis
O41.92X3	Disorder of amniotic fluid and membranes, unspecified, second trimester, fetus 3	ICD-10-CM	Diagnosis
O41.92X4	Disorder of amniotic fluid and membranes, unspecified, second trimester, fetus 4	ICD-10-CM	Diagnosis
O41.92X5	Disorder of amniotic fluid and membranes, unspecified, second trimester, fetus 5	ICD-10-CM	Diagnosis
O41.92X9	Disorder of amniotic fluid and membranes, unspecified, second trimester, other fetus	ICD-10-CM	Diagnosis
O41.93X0	Disorder of amniotic fluid and membranes, unspecified, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.93X1	Disorder of amniotic fluid and membranes, unspecified, third trimester, fetus 1	ICD-10-CM	Diagnosis
O41.93X2	Disorder of amniotic fluid and membranes, unspecified, third trimester, fetus 2	ICD-10-CM	Diagnosis
O41.93X3	Disorder of amniotic fluid and membranes, unspecified, third trimester, fetus 3	ICD-10-CM	Diagnosis
O41.93X4	Disorder of amniotic fluid and membranes, unspecified, third trimester, fetus 4	ICD-10-CM	Diagnosis
O41.93X5	Disorder of amniotic fluid and membranes, unspecified, third trimester, fetus 5	ICD-10-CM	Diagnosis
O41.93X9	Disorder of amniotic fluid and membranes, unspecified, third trimester, other fetus	ICD-10-CM	Diagnosis
O42.011	Preterm premature rupture of membranes, onset of labor within 24 hours of rupture, first trimester	ICD-10-CM	Diagnosis
O42.012	Preterm premature rupture of membranes, onset of labor within 24 hours of rupture, second trimester	ICD-10-CM	Diagnosis
O42.013	Preterm premature rupture of membranes, onset of labor within 24 hours of rupture, third trimester	ICD-10-CM	Diagnosis
O42.019	Preterm premature rupture of membranes, onset of labor within 24 hours of rupture, unspecified trimester	ICD-10-CM	Diagnosis
O42.02	Full-term premature rupture of membranes, onset of labor within 24 hours of rupture	ICD-10-CM	Diagnosis
O42.111	Preterm premature rupture of membranes, onset of labor more than 24 hours following rupture, first trimester	ICD-10-CM	Diagnosis
O42.112	Preterm premature rupture of membranes, onset of labor more than 24 hours following rupture, second trimester	ICD-10-CM	Diagnosis
O42.113	Preterm premature rupture of membranes, onset of labor more than 24 hours following rupture, third trimester	ICD-10-CM	Diagnosis
O42.119	Preterm premature rupture of membranes, onset of labor more than 24 hours following rupture, unspecified trimester	ICD-10-CM	Diagnosis
O42.12	Full-term premature rupture of membranes, onset of labor more than 24 hours following rupture	ICD-10-CM	Diagnosis
O42.911	Preterm premature rupture of membranes, unspecified as to length of time between rupture and onset of labor, first trimester	ICD-10-CM	Diagnosis
O42.912	Preterm premature rupture of membranes, unspecified as to length of time between rupture and onset of labor, second trimester	ICD-10-CM	Diagnosis
O42.913	Preterm premature rupture of membranes, unspecified as to length of time between rupture and onset of labor, third trimester	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
O42.919	Preterm premature rupture of membranes, unspecified as to length of time between rupture and onset of labor, unspecified trimester	ICD-10-CM	Diagnosis
O42.92	Full-term premature rupture of membranes, unspecified as to length of time between rupture and onset of labor	ICD-10-CM	Diagnosis
O43.011	Fetomaternal placental transfusion syndrome, first trimester	ICD-10-CM	Diagnosis
O43.012	Fetomaternal placental transfusion syndrome, second trimester	ICD-10-CM	Diagnosis
O43.013	Fetomaternal placental transfusion syndrome, third trimester	ICD-10-CM	Diagnosis
O43.021	Fetus-to-fetus placental transfusion syndrome, first trimester	ICD-10-CM	Diagnosis
O43.022	Fetus-to-fetus placental transfusion syndrome, second trimester	ICD-10-CM	Diagnosis
O43.023	Fetus-to-fetus placental transfusion syndrome, third trimester	ICD-10-CM	Diagnosis
O43.101	Malformation of placenta, unspecified, first trimester	ICD-10-CM	Diagnosis
O43.102	Malformation of placenta, unspecified, second trimester	ICD-10-CM	Diagnosis
O43.103	Malformation of placenta, unspecified, third trimester	ICD-10-CM	Diagnosis
O43.111	Circumvallate placenta, first trimester	ICD-10-CM	Diagnosis
O43.112	Circumvallate placenta, second trimester	ICD-10-CM	Diagnosis
O43.113	Circumvallate placenta, third trimester	ICD-10-CM	Diagnosis
O43.121	Velamentous insertion of umbilical cord, first trimester	ICD-10-CM	Diagnosis
O43.122	Velamentous insertion of umbilical cord, second trimester	ICD-10-CM	Diagnosis
O43.123	Velamentous insertion of umbilical cord, third trimester	ICD-10-CM	Diagnosis
O43.191	Other malformation of placenta, first trimester	ICD-10-CM	Diagnosis
O43.192	Other malformation of placenta, second trimester	ICD-10-CM	Diagnosis
O43.193	Other malformation of placenta, third trimester	ICD-10-CM	Diagnosis
O43.211	Placenta accreta, first trimester	ICD-10-CM	Diagnosis
O43.212	Placenta accreta, second trimester	ICD-10-CM	Diagnosis
O43.213	Placenta accreta, third trimester	ICD-10-CM	Diagnosis
O43.221	Placenta increta, first trimester	ICD-10-CM	Diagnosis
O43.222	Placenta increta, second trimester	ICD-10-CM	Diagnosis
O43.223	Placenta increta, third trimester	ICD-10-CM	Diagnosis
O43.231	Placenta percreta, first trimester	ICD-10-CM	Diagnosis
O43.232	Placenta percreta, second trimester	ICD-10-CM	Diagnosis
O43.233	Placenta percreta, third trimester	ICD-10-CM	Diagnosis
O43.811	Placental infarction, first trimester	ICD-10-CM	Diagnosis
O43.812	Placental infarction, second trimester	ICD-10-CM	Diagnosis
O43.813	Placental infarction, third trimester	ICD-10-CM	Diagnosis
O43.891	Other placental disorders, first trimester	ICD-10-CM	Diagnosis
O43.892	Other placental disorders, second trimester	ICD-10-CM	Diagnosis
O43.893	Other placental disorders, third trimester	ICD-10-CM	Diagnosis
O43.91	Unspecified placental disorder, first trimester	ICD-10-CM	Diagnosis
O43.92	Unspecified placental disorder, second trimester	ICD-10-CM	Diagnosis
O43.93	Unspecified placental disorder, third trimester	ICD-10-CM	Diagnosis
O44.01	Complete placenta previa NOS or without hemorrhage, first trimester	ICD-10-CM	Diagnosis
O44.02	Complete placenta previa NOS or without hemorrhage, second trimester	ICD-10-CM	Diagnosis
O44.03	Complete placenta previa NOS or without hemorrhage, third trimester	ICD-10-CM	Diagnosis
O44.11	Complete placenta previa with hemorrhage, first trimester	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
O44.12	Complete placenta previa with hemorrhage, second trimester	ICD-10-CM	Diagnosis
O44.13	Complete placenta previa with hemorrhage, third trimester	ICD-10-CM	Diagnosis
O44.21	Partial placenta previa NOS or without hemorrhage, first trimester	ICD-10-CM	Diagnosis
O44.22	Partial placenta previa NOS or without hemorrhage, second trimester	ICD-10-CM	Diagnosis
O44.23	Partial placenta previa NOS or without hemorrhage, third trimester	ICD-10-CM	Diagnosis
O44.31	Partial placenta previa with hemorrhage, first trimester	ICD-10-CM	Diagnosis
O44.32	Partial placenta previa with hemorrhage, second trimester	ICD-10-CM	Diagnosis
O44.33	Partial placenta previa with hemorrhage, third trimester	ICD-10-CM	Diagnosis
O44.41	Low lying placenta NOS or without hemorrhage, first trimester	ICD-10-CM	Diagnosis
O44.42	Low lying placenta NOS or without hemorrhage, second trimester	ICD-10-CM	Diagnosis
O44.43	Low lying placenta NOS or without hemorrhage, third trimester	ICD-10-CM	Diagnosis
O44.51	Low lying placenta with hemorrhage, first trimester	ICD-10-CM	Diagnosis
O44.52	Low lying placenta with hemorrhage, second trimester	ICD-10-CM	Diagnosis
O44.53	Low lying placenta with hemorrhage, third trimester	ICD-10-CM	Diagnosis
O45.001	Premature separation of placenta with coagulation defect, unspecified, first trimester	ICD-10-CM	Diagnosis
O45.002	Premature separation of placenta with coagulation defect, unspecified, second trimester	ICD-10-CM	Diagnosis
O45.003	Premature separation of placenta with coagulation defect, unspecified, third trimester	ICD-10-CM	Diagnosis
O45.011	Premature separation of placenta with afibrinogenemia, first trimester	ICD-10-CM	Diagnosis
O45.012	Premature separation of placenta with afibrinogenemia, second trimester	ICD-10-CM	Diagnosis
O45.013	Premature separation of placenta with afibrinogenemia, third trimester	ICD-10-CM	Diagnosis
O45.021	Premature separation of placenta with disseminated intravascular coagulation, first trimester	ICD-10-CM	Diagnosis
O45.022	Premature separation of placenta with disseminated intravascular coagulation, second trimester	ICD-10-CM	Diagnosis
O45.023	Premature separation of placenta with disseminated intravascular coagulation, third trimester	ICD-10-CM	Diagnosis
O45.091	Premature separation of placenta with other coagulation defect, first trimester	ICD-10-CM	Diagnosis
O45.092	Premature separation of placenta with other coagulation defect, second trimester	ICD-10-CM	Diagnosis
O45.093	Premature separation of placenta with other coagulation defect, third trimester	ICD-10-CM	Diagnosis
O45.8X1	Other premature separation of placenta, first trimester	ICD-10-CM	Diagnosis
O45.8X2	Other premature separation of placenta, second trimester	ICD-10-CM	Diagnosis
O45.8X3	Other premature separation of placenta, third trimester	ICD-10-CM	Diagnosis
O45.91	Premature separation of placenta, unspecified, first trimester	ICD-10-CM	Diagnosis
O45.92	Premature separation of placenta, unspecified, second trimester	ICD-10-CM	Diagnosis
O45.93	Premature separation of placenta, unspecified, third trimester	ICD-10-CM	Diagnosis
O46.001	Antepartum hemorrhage with coagulation defect, unspecified, first trimester	ICD-10-CM	Diagnosis
O46.002	Antepartum hemorrhage with coagulation defect, unspecified, second trimester	ICD-10-CM	Diagnosis
O46.003	Antepartum hemorrhage with coagulation defect, unspecified, third trimester	ICD-10-CM	Diagnosis
O46.011	Antepartum hemorrhage with afibrinogenemia, first trimester	ICD-10-CM	Diagnosis
O46.012	Antepartum hemorrhage with afibrinogenemia, second trimester	ICD-10-CM	Diagnosis
O46.013	Antepartum hemorrhage with afibrinogenemia, third trimester	ICD-10-CM	Diagnosis
O46.021	Antepartum hemorrhage with disseminated intravascular coagulation, first trimester	ICD-10-CM	Diagnosis
O46.022	Antepartum hemorrhage with disseminated intravascular coagulation, second trimester	ICD-10-CM	Diagnosis
O46.023	Antepartum hemorrhage with disseminated intravascular coagulation, third trimester	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O46.091	Antepartum hemorrhage with other coagulation defect, first trimester	ICD-10-CM	Diagnosis
O46.092	Antepartum hemorrhage with other coagulation defect, second trimester	ICD-10-CM	Diagnosis
O46.093	Antepartum hemorrhage with other coagulation defect, third trimester	ICD-10-CM	Diagnosis
O46.8X1	Other antepartum hemorrhage, first trimester	ICD-10-CM	Diagnosis
O46.8X2	Other antepartum hemorrhage, second trimester	ICD-10-CM	Diagnosis
O46.8X3	Other antepartum hemorrhage, third trimester	ICD-10-CM	Diagnosis
O46.91	Antepartum hemorrhage, unspecified, first trimester	ICD-10-CM	Diagnosis
O46.92	Antepartum hemorrhage, unspecified, second trimester	ICD-10-CM	Diagnosis
O46.93	Antepartum hemorrhage, unspecified, third trimester	ICD-10-CM	Diagnosis
O47.02	False labor before 37 completed weeks of gestation, second trimester	ICD-10-CM	Diagnosis
O47.03	False labor before 37 completed weeks of gestation, third trimester	ICD-10-CM	Diagnosis
O47.1	False labor at or after 37 completed weeks of gestation	ICD-10-CM	Diagnosis
O48.0	Post-term pregnancy	ICD-10-CM	Diagnosis
O48.1	Prolonged pregnancy	ICD-10-CM	Diagnosis
O60.02	Preterm labor without delivery, second trimester	ICD-10-CM	Diagnosis
O60.03	Preterm labor without delivery, third trimester	ICD-10-CM	Diagnosis
O60.10X0	Preterm labor with preterm delivery, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O71.02	Rupture of uterus before onset of labor, second trimester	ICD-10-CM	Diagnosis
O71.03	Rupture of uterus before onset of labor, third trimester	ICD-10-CM	Diagnosis
O75.82	Onset (spontaneous) of labor after 37 completed weeks of gestation but before 39 completed weeks gestation, with delivery by (planned) cesarean section	ICD-10-CM	Diagnosis
O88.011	Air embolism in pregnancy, first trimester	ICD-10-CM	Diagnosis
O88.012	Air embolism in pregnancy, second trimester	ICD-10-CM	Diagnosis
O88.013	Air embolism in pregnancy, third trimester	ICD-10-CM	Diagnosis
O88.111	Amniotic fluid embolism in pregnancy, first trimester	ICD-10-CM	Diagnosis
O88.112	Amniotic fluid embolism in pregnancy, second trimester	ICD-10-CM	Diagnosis
O88.113	Amniotic fluid embolism in pregnancy, third trimester	ICD-10-CM	Diagnosis
O88.211	Thromboembolism in pregnancy, first trimester	ICD-10-CM	Diagnosis
O88.212	Thromboembolism in pregnancy, second trimester	ICD-10-CM	Diagnosis
O88.213	Thromboembolism in pregnancy, third trimester	ICD-10-CM	Diagnosis
O88.311	Pyemic and septic embolism in pregnancy, first trimester	ICD-10-CM	Diagnosis
O88.312	Pyemic and septic embolism in pregnancy, second trimester	ICD-10-CM	Diagnosis
O88.313	Pyemic and septic embolism in pregnancy, third trimester	ICD-10-CM	Diagnosis
O88.811	Other embolism in pregnancy, first trimester	ICD-10-CM	Diagnosis
O88.812	Other embolism in pregnancy, second trimester	ICD-10-CM	Diagnosis
O88.813	Other embolism in pregnancy, third trimester	ICD-10-CM	Diagnosis
O91.011	Infection of nipple associated with pregnancy, first trimester	ICD-10-CM	Diagnosis
O91.012	Infection of nipple associated with pregnancy, second trimester	ICD-10-CM	Diagnosis
O91.013	Infection of nipple associated with pregnancy, third trimester	ICD-10-CM	Diagnosis
O91.111	Abscess of breast associated with pregnancy, first trimester	ICD-10-CM	Diagnosis
O91.112	Abscess of breast associated with pregnancy, second trimester	ICD-10-CM	Diagnosis
O91.113	Abscess of breast associated with pregnancy, third trimester	ICD-10-CM	Diagnosis
O91.211	Nonpurulent mastitis associated with pregnancy, first trimester	ICD-10-CM	Diagnosis
O91.212	Nonpurulent mastitis associated with pregnancy, second trimester	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O91.213	Nonpurulent mastitis associated with pregnancy, third trimester	ICD-10-CM	Diagnosis
O92.011	Retracted nipple associated with pregnancy, first trimester	ICD-10-CM	Diagnosis
O92.012	Retracted nipple associated with pregnancy, second trimester	ICD-10-CM	Diagnosis
O92.013	Retracted nipple associated with pregnancy, third trimester	ICD-10-CM	Diagnosis
O92.111	Cracked nipple associated with pregnancy, first trimester	ICD-10-CM	Diagnosis
O92.112	Cracked nipple associated with pregnancy, second trimester	ICD-10-CM	Diagnosis
O92.113	Cracked nipple associated with pregnancy, third trimester	ICD-10-CM	Diagnosis
O98.011	Tuberculosis complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O98.012	Tuberculosis complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O98.013	Tuberculosis complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O98.111	Syphilis complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O98.112	Syphilis complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O98.113	Syphilis complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O98.211	Gonorrhea complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O98.212	Gonorrhea complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O98.213	Gonorrhea complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O98.311	Other infections with a predominantly sexual mode of transmission complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O98.312	Other infections with a predominantly sexual mode of transmission complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O98.313	Other infections with a predominantly sexual mode of transmission complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O98.411	Viral hepatitis complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O98.412	Viral hepatitis complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O98.413	Viral hepatitis complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O98.511	Other viral diseases complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O98.512	Other viral diseases complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O98.513	Other viral diseases complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O98.611	Protozoal diseases complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O98.612	Protozoal diseases complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O98.613	Protozoal diseases complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O98.711	Human immunodeficiency virus [HIV] disease complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O98.712	Human immunodeficiency virus [HIV] disease complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O98.713	Human immunodeficiency virus [HIV] disease complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O98.811	Other maternal infectious and parasitic diseases complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O98.812	Other maternal infectious and parasitic diseases complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O98.813	Other maternal infectious and parasitic diseases complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O98.911	Unspecified maternal infectious and parasitic disease complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O98.912	Unspecified maternal infectious and parasitic disease complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O98.913	Unspecified maternal infectious and parasitic disease complicating pregnancy, third trimester	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
O99.011	Anemia complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O99.012	Anemia complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O99.013	Anemia complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O99.111	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O99.112	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O99.113	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O99.211	Obesity complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O99.212	Obesity complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O99.213	Obesity complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O99.281	Endocrine, nutritional and metabolic diseases complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O99.282	Endocrine, nutritional and metabolic diseases complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O99.283	Endocrine, nutritional and metabolic diseases complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O99.311	Alcohol use complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O99.312	Alcohol use complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O99.313	Alcohol use complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O99.321	Drug use complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O99.322	Drug use complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O99.323	Drug use complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O99.331	Smoking (tobacco) complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O99.332	Smoking (tobacco) complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O99.333	Smoking (tobacco) complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O99.341	Other mental disorders complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O99.342	Other mental disorders complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O99.343	Other mental disorders complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O99.351	Diseases of the nervous system complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O99.352	Diseases of the nervous system complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O99.353	Diseases of the nervous system complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O99.411	Diseases of the circulatory system complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O99.412	Diseases of the circulatory system complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O99.413	Diseases of the circulatory system complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O99.511	Diseases of the respiratory system complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O99.512	Diseases of the respiratory system complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O99.513	Diseases of the respiratory system complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O99.611	Diseases of the digestive system complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O99.612	Diseases of the digestive system complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O99.613	Diseases of the digestive system complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O99.711	Diseases of the skin and subcutaneous tissue complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O99.712	Diseases of the skin and subcutaneous tissue complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O99.713	Diseases of the skin and subcutaneous tissue complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O99.841	Bariatric surgery status complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O99.842	Bariatric surgery status complicating pregnancy, second trimester	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O99.843	Bariatric surgery status complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O9A.111	Malignant neoplasm complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O9A.112	Malignant neoplasm complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O9A.113	Malignant neoplasm complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O9A.211	Injury, poisoning and certain other consequences of external causes complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O9A.212	Injury, poisoning and certain other consequences of external causes complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O9A.213	Injury, poisoning and certain other consequences of external causes complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O9A.311	Physical abuse complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O9A.312	Physical abuse complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O9A.313	Physical abuse complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O9A.411	Sexual abuse complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O9A.412	Sexual abuse complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O9A.413	Sexual abuse complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O9A.511	Psychological abuse complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O9A.512	Psychological abuse complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O9A.513	Psychological abuse complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
P07.00	Extremely low birth weight newborn, unspecified weight	ICD-10-CM	Diagnosis
P07.01	Extremely low birth weight newborn, less than 500 grams	ICD-10-CM	Diagnosis
P07.02	Extremely low birth weight newborn, 500-749 grams	ICD-10-CM	Diagnosis
P07.03	Extremely low birth weight newborn, 750-999 grams	ICD-10-CM	Diagnosis
P07.10	Other low birth weight newborn, unspecified weight	ICD-10-CM	Diagnosis
P07.14	Other low birth weight newborn, 1000-1249 grams	ICD-10-CM	Diagnosis
P07.15	Other low birth weight newborn, 1250-1499 grams	ICD-10-CM	Diagnosis
P07.16	Other low birth weight newborn, 1500-1749 grams	ICD-10-CM	Diagnosis
P07.17	Other low birth weight newborn, 1750-1999 grams	ICD-10-CM	Diagnosis
P07.18	Other low birth weight newborn, 2000-2499 grams	ICD-10-CM	Diagnosis
P07.20	Extreme immaturity of newborn, unspecified weeks of gestation	ICD-10-CM	Diagnosis
P07.21	Extreme immaturity of newborn, gestational age less than 23 completed weeks	ICD-10-CM	Diagnosis
P07.22	Extreme immaturity of newborn, gestational age 23 completed weeks	ICD-10-CM	Diagnosis
P07.23	Extreme immaturity of newborn, gestational age 24 completed weeks	ICD-10-CM	Diagnosis
P07.24	Extreme immaturity of newborn, gestational age 25 completed weeks	ICD-10-CM	Diagnosis
P07.25	Extreme immaturity of newborn, gestational age 26 completed weeks	ICD-10-CM	Diagnosis
P07.26	Extreme immaturity of newborn, gestational age 27 completed weeks	ICD-10-CM	Diagnosis
P07.30	Preterm newborn, unspecified weeks of gestation	ICD-10-CM	Diagnosis
P07.31	Preterm newborn, gestational age 28 completed weeks	ICD-10-CM	Diagnosis
P07.32	Preterm newborn, gestational age 29 completed weeks	ICD-10-CM	Diagnosis
P07.33	Preterm newborn, gestational age 30 completed weeks	ICD-10-CM	Diagnosis
P07.34	Preterm newborn, gestational age 31 completed weeks	ICD-10-CM	Diagnosis
P07.35	Preterm newborn, gestational age 32 completed weeks	ICD-10-CM	Diagnosis
P07.36	Preterm newborn, gestational age 33 completed weeks	ICD-10-CM	Diagnosis
P07.37	Preterm newborn, gestational age 34 completed weeks	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
P07.38	Preterm newborn, gestational age 35 completed weeks	ICD-10-CM	Diagnosis
P07.39	Preterm newborn, gestational age 36 completed weeks	ICD-10-CM	Diagnosis
P08.22	Prolonged gestation of newborn	ICD-10-CM	Diagnosis
Z34.01	Encounter for supervision of normal first pregnancy, first trimester	ICD-10-CM	Diagnosis
Z34.02	Encounter for supervision of normal first pregnancy, second trimester	ICD-10-CM	Diagnosis
Z34.03	Encounter for supervision of normal first pregnancy, third trimester	ICD-10-CM	Diagnosis
Z34.81	Encounter for supervision of other normal pregnancy, first trimester	ICD-10-CM	Diagnosis
Z34.82	Encounter for supervision of other normal pregnancy, second trimester	ICD-10-CM	Diagnosis
Z34.83	Encounter for supervision of other normal pregnancy, third trimester	ICD-10-CM	Diagnosis
Z34.91	Encounter for supervision of normal pregnancy, unspecified, first trimester	ICD-10-CM	Diagnosis
Z34.92	Encounter for supervision of normal pregnancy, unspecified, second trimester	ICD-10-CM	Diagnosis
Z34.93	Encounter for supervision of normal pregnancy, unspecified, third trimester	ICD-10-CM	Diagnosis
Z3A.01	Less than 8 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.08	8 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.09	9 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.10	10 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.11	11 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.12	12 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.13	13 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.14	14 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.15	15 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.16	16 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.17	17 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.18	18 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.19	19 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.20	20 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.21	21 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.22	22 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.23	23 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.24	24 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.25	25 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.26	26 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.27	27 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.28	28 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.29	29 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.30	30 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.31	31 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.32	32 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.33	33 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.34	34 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.35	35 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.36	36 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.37	37 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.38	38 weeks gestation of pregnancy	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
Z3A.39	39 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.40	40 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.41	41 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.42	42 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
Z3A.49	Greater than 42 weeks gestation of pregnancy	ICD-10-CM	Diagnosis
58321	ARTIFICIAL INSEMINATION; INTRA-CERVICAL	CPT-4	Procedure
58322	ARTIFICIAL INSEMINATION	CPT-4	Procedure
58974	TRANSFER OF EMBRYO	CPT-4	Procedure
58976	Gamete, zygote, or embryo intrafallopian transfer	CPT-4	Procedure
59015	Chorionic villus sampling, any method	CPT-4	Procedure
76801	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, first trimester (< 14 weeks 0 days), transabdominal approach; single or first gestation	CPT-4	Procedure
76802	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, first trimester (< 14 weeks 0 days), transabdominal approach; each additional gestation	CPT-4	Procedure
76805	Complete Ultrasounds (Maternal and Fetal Evaluation); Second and Third Trimesters (Single or First Gestation)	CPT-4	Procedure
76810	Complete Ultrasounds (Maternal and Fetal Evaluation); Second and Third Trimesters (Each Additional Gestation)	CPT-4	Procedure
76811	Detailed fetal anatomic examination (single or first gestation)	CPT-4	Procedure
76812	Detailed fetal anatomic examination (Each additional Gestation)	CPT-4	Procedure
76813	Nuchal Translucency Measurement (Single or First Gestation)	CPT-4	Procedure
76814	Nuchal Translucency Measurement (Each Additional Gestation)	CPT-4	Procedure
81420	Fetal aneuploidy genomic sequence analysis, cell-free fetal DNA	CPT-4	Procedure
81507	Fetal aneuploidy (trisomy 21, 18, and 13) DNA sequence analysis of selected regions using maternal plasma algorithm reported as a risk score for each trisomy	CPT-4	Procedure
82106	Alpha-fetoprotein, amniotic	CPT-4	Procedure
82677	Assay of estriol	CPT-4	Procedure
82950	Glucose; post glucose dose (includes glucose)	CPT-4	Procedure
82951	Glucose; tolerance test (GTT), 3 specimens (includes glucose)	CPT-4	Procedure
82952	Glucose tolerance test, additional beyond 3 specimens	CPT-4	Procedure
84163	PAPP-A serum test	CPT-4	Procedure
86336	Inhibin A	CPT-4	Procedure
87081	Group B streptococcus screening (genital)	CPT-4	Procedure
S4011	IN VITRO FERTILIZATION;	HCPCS	Procedure
S4013	COMPLETE CYCLE GIFT CASE RATE	HCPCS	Procedure
S4014	COMPLETE CYCLE ZIFT CASE RATE	HCPCS	Procedure
S4015	COMPLETE IVF CYCLE CASE RATE NOS	HCPCS	Procedure
S4016	FROZEN IVF CYCLE CASE RATE	HCPCS	Procedure
S4035	STIMULATED INTRAUTERINE INSEMINATION (IUI), CASE RATE	HCPCS	Procedure
S4037	Cryopreserved embryo transfer, case rate	HCPCS	Procedure
O10.02	Pre-existing essential hypertension complicating childbirth	ICD-10-CM	Diagnosis
O10.12	Pre-existing hypertensive heart disease complicating childbirth	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O10.22	Pre-existing hypertensive chronic kidney disease complicating childbirth	ICD-10-CM	Diagnosis
O10.32	Pre-existing hypertensive heart and chronic kidney disease complicating childbirth	ICD-10-CM	Diagnosis
O10.42	Pre-existing secondary hypertension complicating childbirth	ICD-10-CM	Diagnosis
O10.92	Unspecified pre-existing hypertension complicating childbirth	ICD-10-CM	Diagnosis
O11.4	Pre-existing hypertension with pre-eclampsia, complicating childbirth	ICD-10-CM	Diagnosis
O12.04	Gestational edema, complicating childbirth	ICD-10-CM	Diagnosis
O12.14	Gestational proteinuria, complicating childbirth	ICD-10-CM	Diagnosis
O12.24	Gestational edema with proteinuria, complicating childbirth	ICD-10-CM	Diagnosis
O13.4	Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating childbirth	ICD-10-CM	Diagnosis
O14.04	Mild to moderate pre-eclampsia, complicating childbirth	ICD-10-CM	Diagnosis
O14.14	Severe pre-eclampsia complicating childbirth	ICD-10-CM	Diagnosis
O14.24	HELLP syndrome, complicating childbirth	ICD-10-CM	Diagnosis
O14.94	Unspecified pre-eclampsia, complicating childbirth	ICD-10-CM	Diagnosis
O16.4	Unspecified maternal hypertension, complicating childbirth	ICD-10-CM	Diagnosis
O24.02	Pre-existing type 1 diabetes mellitus, in childbirth	ICD-10-CM	Diagnosis
O24.12	Pre-existing type 2 diabetes mellitus, in childbirth	ICD-10-CM	Diagnosis
O24.32	Unspecified pre-existing diabetes mellitus in childbirth	ICD-10-CM	Diagnosis
O24.420	Gestational diabetes mellitus in childbirth, diet controlled	ICD-10-CM	Diagnosis
O24.424	Gestational diabetes mellitus in childbirth, insulin controlled	ICD-10-CM	Diagnosis
O24.425	Gestational diabetes mellitus in childbirth, controlled by oral hypoglycemic drugs	ICD-10-CM	Diagnosis
O24.429	Gestational diabetes mellitus in childbirth, unspecified control	ICD-10-CM	Diagnosis
O24.82	Other pre-existing diabetes mellitus in childbirth	ICD-10-CM	Diagnosis
O24.92	Unspecified diabetes mellitus in childbirth	ICD-10-CM	Diagnosis
O25.2	Malnutrition in childbirth	ICD-10-CM	Diagnosis
O26.62	Liver and biliary tract disorders in childbirth	ICD-10-CM	Diagnosis
O26.72	Subluxation of symphysis (pubis) in childbirth	ICD-10-CM	Diagnosis
O60.12X0	Preterm labor second trimester with preterm delivery second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O60.12X1	Preterm labor second trimester with preterm delivery second trimester, fetus 1	ICD-10-CM	Diagnosis
O60.12X2	Preterm labor second trimester with preterm delivery second trimester, fetus 2	ICD-10-CM	Diagnosis
O60.12X3	Preterm labor second trimester with preterm delivery second trimester, fetus 3	ICD-10-CM	Diagnosis
O60.12X4	Preterm labor second trimester with preterm delivery second trimester, fetus 4	ICD-10-CM	Diagnosis
O60.12X5	Preterm labor second trimester with preterm delivery second trimester, fetus 5	ICD-10-CM	Diagnosis
O60.12X9	Preterm labor second trimester with preterm delivery second trimester, other fetus	ICD-10-CM	Diagnosis
O60.13X0	Preterm labor second trimester with preterm delivery third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O60.13X1	Preterm labor second trimester with preterm delivery third trimester, fetus 1	ICD-10-CM	Diagnosis
O60.13X2	Preterm labor second trimester with preterm delivery third trimester, fetus 2	ICD-10-CM	Diagnosis
O60.13X3	Preterm labor second trimester with preterm delivery third trimester, fetus 3	ICD-10-CM	Diagnosis
O60.13X4	Preterm labor second trimester with preterm delivery third trimester, fetus 4	ICD-10-CM	Diagnosis
O60.13X5	Preterm labor second trimester with preterm delivery third trimester, fetus 5	ICD-10-CM	Diagnosis
O60.13X9	Preterm labor second trimester with preterm delivery third trimester, other fetus	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O60.14X0	Preterm labor third trimester with preterm delivery third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O60.14X1	Preterm labor third trimester with preterm delivery third trimester, fetus 1	ICD-10-CM	Diagnosis
O60.14X2	Preterm labor third trimester with preterm delivery third trimester, fetus 2	ICD-10-CM	Diagnosis
O60.14X3	Preterm labor third trimester with preterm delivery third trimester, fetus 3	ICD-10-CM	Diagnosis
O60.14X4	Preterm labor third trimester with preterm delivery third trimester, fetus 4	ICD-10-CM	Diagnosis
O60.14X5	Preterm labor third trimester with preterm delivery third trimester, fetus 5	ICD-10-CM	Diagnosis
O60.14X9	Preterm labor third trimester with preterm delivery third trimester, other fetus	ICD-10-CM	Diagnosis
O60.22X0	Term delivery with preterm labor, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O60.22X1	Term delivery with preterm labor, second trimester, fetus 1	ICD-10-CM	Diagnosis
O60.22X2	Term delivery with preterm labor, second trimester, fetus 2	ICD-10-CM	Diagnosis
O60.22X3	Term delivery with preterm labor, second trimester, fetus 3	ICD-10-CM	Diagnosis
O60.22X4	Term delivery with preterm labor, second trimester, fetus 4	ICD-10-CM	Diagnosis
O60.22X5	Term delivery with preterm labor, second trimester, fetus 5	ICD-10-CM	Diagnosis
O60.22X9	Term delivery with preterm labor, second trimester, other fetus	ICD-10-CM	Diagnosis
O60.23X0	Term delivery with preterm labor, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O60.23X1	Term delivery with preterm labor, third trimester, fetus 1	ICD-10-CM	Diagnosis
O60.23X2	Term delivery with preterm labor, third trimester, fetus 2	ICD-10-CM	Diagnosis
O60.23X3	Term delivery with preterm labor, third trimester, fetus 3	ICD-10-CM	Diagnosis
O60.23X4	Term delivery with preterm labor, third trimester, fetus 4	ICD-10-CM	Diagnosis
O60.23X5	Term delivery with preterm labor, third trimester, fetus 5	ICD-10-CM	Diagnosis
O60.23X9	Term delivery with preterm labor, third trimester, other fetus	ICD-10-CM	Diagnosis
O63.2	Delayed delivery of second twin, triplet, etc.	ICD-10-CM	Diagnosis
O67.0	Intrapartum hemorrhage with coagulation defect	ICD-10-CM	Diagnosis
O67.8	Other intrapartum hemorrhage	ICD-10-CM	Diagnosis
O67.9	Intrapartum hemorrhage, unspecified	ICD-10-CM	Diagnosis
O68	Labor and delivery complicated by abnormality of fetal acid-base balance	ICD-10-CM	Diagnosis
O69.0XX0	Labor and delivery complicated by prolapse of cord, not applicable or unspecified	ICD-10-CM	Diagnosis
O69.0XX1	Labor and delivery complicated by prolapse of cord, fetus 1	ICD-10-CM	Diagnosis
O69.0XX2	Labor and delivery complicated by prolapse of cord, fetus 2	ICD-10-CM	Diagnosis
O69.0XX3	Labor and delivery complicated by prolapse of cord, fetus 3	ICD-10-CM	Diagnosis
O69.0XX4	Labor and delivery complicated by prolapse of cord, fetus 4	ICD-10-CM	Diagnosis
O69.0XX5	Labor and delivery complicated by prolapse of cord, fetus 5	ICD-10-CM	Diagnosis
O69.0XX9	Labor and delivery complicated by prolapse of cord, other fetus	ICD-10-CM	Diagnosis
O69.1XX0	Labor and delivery complicated by cord around neck, with compression, not applicable or unspecified	ICD-10-CM	Diagnosis
O69.1XX1	Labor and delivery complicated by cord around neck, with compression, fetus 1	ICD-10-CM	Diagnosis
O69.1XX2	Labor and delivery complicated by cord around neck, with compression, fetus 2	ICD-10-CM	Diagnosis
O69.1XX3	Labor and delivery complicated by cord around neck, with compression, fetus 3	ICD-10-CM	Diagnosis
O69.1XX4	Labor and delivery complicated by cord around neck, with compression, fetus 4	ICD-10-CM	Diagnosis
O69.1XX5	Labor and delivery complicated by cord around neck, with compression, fetus 5	ICD-10-CM	Diagnosis
O69.1XX9	Labor and delivery complicated by cord around neck, with compression, other fetus	ICD-10-CM	Diagnosis
O69.2XX0	Labor and delivery complicated by other cord entanglement, with compression, not applicable or unspecified	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
O69.2XX1	Labor and delivery complicated by other cord entanglement, with compression, fetus 1	ICD-10-CM	Diagnosis
O69.2XX2	Labor and delivery complicated by other cord entanglement, with compression, fetus 2	ICD-10-CM	Diagnosis
O69.2XX3	Labor and delivery complicated by other cord entanglement, with compression, fetus 3	ICD-10-CM	Diagnosis
O69.2XX4	Labor and delivery complicated by other cord entanglement, with compression, fetus 4	ICD-10-CM	Diagnosis
O69.2XX5	Labor and delivery complicated by other cord entanglement, with compression, fetus 5	ICD-10-CM	Diagnosis
O69.2XX9	Labor and delivery complicated by other cord entanglement, with compression, other fetus	ICD-10-CM	Diagnosis
O69.3XX0	Labor and delivery complicated by short cord, not applicable or unspecified	ICD-10-CM	Diagnosis
O69.3XX1	Labor and delivery complicated by short cord, fetus 1	ICD-10-CM	Diagnosis
O69.3XX2	Labor and delivery complicated by short cord, fetus 2	ICD-10-CM	Diagnosis
O69.3XX3	Labor and delivery complicated by short cord, fetus 3	ICD-10-CM	Diagnosis
O69.3XX4	Labor and delivery complicated by short cord, fetus 4	ICD-10-CM	Diagnosis
O69.3XX5	Labor and delivery complicated by short cord, fetus 5	ICD-10-CM	Diagnosis
O69.3XX9	Labor and delivery complicated by short cord, other fetus	ICD-10-CM	Diagnosis
O69.4XX0	Labor and delivery complicated by vasa previa, not applicable or unspecified	ICD-10-CM	Diagnosis
O69.4XX1	Labor and delivery complicated by vasa previa, fetus 1	ICD-10-CM	Diagnosis
O69.4XX2	Labor and delivery complicated by vasa previa, fetus 2	ICD-10-CM	Diagnosis
O69.4XX3	Labor and delivery complicated by vasa previa, fetus 3	ICD-10-CM	Diagnosis
O69.4XX4	Labor and delivery complicated by vasa previa, fetus 4	ICD-10-CM	Diagnosis
O69.4XX5	Labor and delivery complicated by vasa previa, fetus 5	ICD-10-CM	Diagnosis
O69.4XX9	Labor and delivery complicated by vasa previa, other fetus	ICD-10-CM	Diagnosis
O69.5XX0	Labor and delivery complicated by vascular lesion of cord, not applicable or unspecified	ICD-10-CM	Diagnosis
O69.5XX1	Labor and delivery complicated by vascular lesion of cord, fetus 1	ICD-10-CM	Diagnosis
O69.5XX2	Labor and delivery complicated by vascular lesion of cord, fetus 2	ICD-10-CM	Diagnosis
O69.5XX3	Labor and delivery complicated by vascular lesion of cord, fetus 3	ICD-10-CM	Diagnosis
O69.5XX4	Labor and delivery complicated by vascular lesion of cord, fetus 4	ICD-10-CM	Diagnosis
O69.5XX5	Labor and delivery complicated by vascular lesion of cord, fetus 5	ICD-10-CM	Diagnosis
O69.5XX9	Labor and delivery complicated by vascular lesion of cord, other fetus	ICD-10-CM	Diagnosis
O69.81X0	Labor and delivery complicated by cord around neck, without compression, not applicable or unspecified	ICD-10-CM	Diagnosis
O69.81X1	Labor and delivery complicated by cord around neck, without compression, fetus 1	ICD-10-CM	Diagnosis
O69.81X2	Labor and delivery complicated by cord around neck, without compression, fetus 2	ICD-10-CM	Diagnosis
O69.81X3	Labor and delivery complicated by cord around neck, without compression, fetus 3	ICD-10-CM	Diagnosis
O69.81X4	Labor and delivery complicated by cord around neck, without compression, fetus 4	ICD-10-CM	Diagnosis
O69.81X5	Labor and delivery complicated by cord around neck, without compression, fetus 5	ICD-10-CM	Diagnosis
O69.81X9	Labor and delivery complicated by cord around neck, without compression, other fetus	ICD-10-CM	Diagnosis
O69.82X0	Labor and delivery complicated by other cord entanglement, without compression, not applicable or unspecified	ICD-10-CM	Diagnosis
O69.82X1	Labor and delivery complicated by other cord entanglement, without compression, fetus 1	ICD-10-CM	Diagnosis
O69.82X2	Labor and delivery complicated by other cord entanglement, without compression, fetus 2	ICD-10-CM	Diagnosis
O69.82X3	Labor and delivery complicated by other cord entanglement, without compression, fetus 3	ICD-10-CM	Diagnosis
O69.82X4	Labor and delivery complicated by other cord entanglement, without compression, fetus 4	ICD-10-CM	Diagnosis
O69.82X5	Labor and delivery complicated by other cord entanglement, without compression, fetus 5	ICD-10-CM	Diagnosis
O69.82X9	Labor and delivery complicated by other cord entanglement, without compression, other fetus	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
O69.89X0	Labor and delivery complicated by other cord complications, not applicable or unspecified	ICD-10-CM	Diagnosis
O69.89X1	Labor and delivery complicated by other cord complications, fetus 1	ICD-10-CM	Diagnosis
O69.89X2	Labor and delivery complicated by other cord complications, fetus 2	ICD-10-CM	Diagnosis
O69.89X3	Labor and delivery complicated by other cord complications, fetus 3	ICD-10-CM	Diagnosis
O69.89X4	Labor and delivery complicated by other cord complications, fetus 4	ICD-10-CM	Diagnosis
O69.89X5	Labor and delivery complicated by other cord complications, fetus 5	ICD-10-CM	Diagnosis
O69.89X9	Labor and delivery complicated by other cord complications, other fetus	ICD-10-CM	Diagnosis
O69.9XX0	Labor and delivery complicated by cord complication, unspecified, not applicable or unspecified	ICD-10-CM	Diagnosis
O69.9XX1	Labor and delivery complicated by cord complication, unspecified, fetus 1	ICD-10-CM	Diagnosis
O69.9XX2	Labor and delivery complicated by cord complication, unspecified, fetus 2	ICD-10-CM	Diagnosis
O69.9XX3	Labor and delivery complicated by cord complication, unspecified, fetus 3	ICD-10-CM	Diagnosis
O69.9XX4	Labor and delivery complicated by cord complication, unspecified, fetus 4	ICD-10-CM	Diagnosis
O69.9XX5	Labor and delivery complicated by cord complication, unspecified, fetus 5	ICD-10-CM	Diagnosis
O69.9XX9	Labor and delivery complicated by cord complication, unspecified, other fetus	ICD-10-CM	Diagnosis
O70.0	First degree perineal laceration during delivery	ICD-10-CM	Diagnosis
O70.1	Second degree perineal laceration during delivery	ICD-10-CM	Diagnosis
O70.20	Third degree perineal laceration during delivery, unspecified	ICD-10-CM	Diagnosis
O70.21	Third degree perineal laceration during delivery, IIIa	ICD-10-CM	Diagnosis
O70.22	Third degree perineal laceration during delivery, IIIb	ICD-10-CM	Diagnosis
O70.23	Third degree perineal laceration during delivery, IIIc	ICD-10-CM	Diagnosis
O70.3	Fourth degree perineal laceration during delivery	ICD-10-CM	Diagnosis
O70.4	Anal sphincter tear complicating delivery, not associated with third degree laceration	ICD-10-CM	Diagnosis
O70.9	Perineal laceration during delivery, unspecified	ICD-10-CM	Diagnosis
O74.0	Aspiration pneumonitis due to anesthesia during labor and delivery	ICD-10-CM	Diagnosis
O74.1	Other pulmonary complications of anesthesia during labor and delivery	ICD-10-CM	Diagnosis
O74.2	Cardiac complications of anesthesia during labor and delivery	ICD-10-CM	Diagnosis
O74.3	Central nervous system complications of anesthesia during labor and delivery	ICD-10-CM	Diagnosis
O74.4	Toxic reaction to local anesthesia during labor and delivery	ICD-10-CM	Diagnosis
O74.5	Spinal and epidural anesthesia-induced headache during labor and delivery	ICD-10-CM	Diagnosis
O74.6	Other complications of spinal and epidural anesthesia during labor and delivery	ICD-10-CM	Diagnosis
O74.7	Failed or difficult intubation for anesthesia during labor and delivery	ICD-10-CM	Diagnosis
O74.8	Other complications of anesthesia during labor and delivery	ICD-10-CM	Diagnosis
O74.9	Complication of anesthesia during labor and delivery, unspecified	ICD-10-CM	Diagnosis
O75.0	Maternal distress during labor and delivery	ICD-10-CM	Diagnosis
O75.1	Shock during or following labor and delivery	ICD-10-CM	Diagnosis
O75.5	Delayed delivery after artificial rupture of membranes	ICD-10-CM	Diagnosis
O75.81	Maternal exhaustion complicating labor and delivery	ICD-10-CM	Diagnosis
O75.82	Onset (spontaneous) of labor after 37 completed weeks of gestation but before 39 completed weeks gestation, with delivery by (planned) cesarean section	ICD-10-CM	Diagnosis
O75.89	Other specified complications of labor and delivery	ICD-10-CM	Diagnosis
O75.9	Complication of labor and delivery, unspecified	ICD-10-CM	Diagnosis
O76	Abnormality in fetal heart rate and rhythm complicating labor and delivery	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
O77.0	Labor and delivery complicated by meconium in amniotic fluid	ICD-10-CM	Diagnosis
O77.8	Labor and delivery complicated by other evidence of fetal stress	ICD-10-CM	Diagnosis
O77.9	Labor and delivery complicated by fetal stress, unspecified	ICD-10-CM	Diagnosis
O80	Encounter for full-term uncomplicated delivery	ICD-10-CM	Diagnosis
O82	Encounter for cesarean delivery without indication	ICD-10-CM	Diagnosis
O88.02	Air embolism in childbirth	ICD-10-CM	Diagnosis
O88.12	Amniotic fluid embolism in childbirth	ICD-10-CM	Diagnosis
O88.22	Thromboembolism in childbirth	ICD-10-CM	Diagnosis
O88.32	Pyemic and septic embolism in childbirth	ICD-10-CM	Diagnosis
O88.82	Other embolism in childbirth	ICD-10-CM	Diagnosis
O98.02	Tuberculosis complicating childbirth	ICD-10-CM	Diagnosis
O98.12	Syphilis complicating childbirth	ICD-10-CM	Diagnosis
O98.22	Gonorrhea complicating childbirth	ICD-10-CM	Diagnosis
O98.32	Other infections with a predominantly sexual mode of transmission complicating childbirth	ICD-10-CM	Diagnosis
O98.42	Viral hepatitis complicating childbirth	ICD-10-CM	Diagnosis
O98.52	Other viral diseases complicating childbirth	ICD-10-CM	Diagnosis
O98.62	Protozoal diseases complicating childbirth	ICD-10-CM	Diagnosis
O98.72	Human immunodeficiency virus [HIV] disease complicating childbirth	ICD-10-CM	Diagnosis
O98.82	Other maternal infectious and parasitic diseases complicating childbirth	ICD-10-CM	Diagnosis
O98.92	Unspecified maternal infectious and parasitic disease complicating childbirth	ICD-10-CM	Diagnosis
O99.02	Anemia complicating childbirth	ICD-10-CM	Diagnosis
O99.12	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating childbirth	ICD-10-CM	Diagnosis
O99.214	Obesity complicating childbirth	ICD-10-CM	Diagnosis
O99.284	Endocrine, nutritional and metabolic diseases complicating childbirth	ICD-10-CM	Diagnosis
O99.314	Alcohol use complicating childbirth	ICD-10-CM	Diagnosis
O99.324	Drug use complicating childbirth	ICD-10-CM	Diagnosis
O99.334	Smoking (tobacco) complicating childbirth	ICD-10-CM	Diagnosis
O99.344	Other mental disorders complicating childbirth	ICD-10-CM	Diagnosis
O99.354	Diseases of the nervous system complicating childbirth	ICD-10-CM	Diagnosis
O99.42	Diseases of the circulatory system complicating childbirth	ICD-10-CM	Diagnosis
O99.52	Diseases of the respiratory system complicating childbirth	ICD-10-CM	Diagnosis
O99.62	Diseases of the digestive system complicating childbirth	ICD-10-CM	Diagnosis
O99.72	Diseases of the skin and subcutaneous tissue complicating childbirth	ICD-10-CM	Diagnosis
O99.814	Abnormal glucose complicating childbirth	ICD-10-CM	Diagnosis
O99.824	Streptococcus B carrier state complicating childbirth	ICD-10-CM	Diagnosis
O99.834	Other infection carrier state complicating childbirth	ICD-10-CM	Diagnosis
O99.844	Bariatric surgery status complicating childbirth	ICD-10-CM	Diagnosis
O9A.12	Malignant neoplasm complicating childbirth	ICD-10-CM	Diagnosis
O9A.22	Injury, poisoning and certain other consequences of external causes complicating childbirth	ICD-10-CM	Diagnosis
O9A.32	Physical abuse complicating childbirth	ICD-10-CM	Diagnosis
O9A.42	Sexual abuse complicating childbirth	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
O9A.52	Psychological abuse complicating childbirth	ICD-10-CM	Diagnosis
P03.0	Newborn affected by breech delivery and extraction	ICD-10-CM	Diagnosis
P03.2	Newborn affected by forceps delivery	ICD-10-CM	Diagnosis
P03.3	Newborn affected by delivery by vacuum extractor [ventouse]	ICD-10-CM	Diagnosis
P03.4	Newborn affected by Cesarean delivery	ICD-10-CM	Diagnosis
P03.5	Newborn affected by precipitate delivery	ICD-10-CM	Diagnosis
P07.00	Extremely low birth weight newborn, unspecified weight	ICD-10-CM	Diagnosis
P07.01	Extremely low birth weight newborn, less than 500 grams	ICD-10-CM	Diagnosis
P07.02	Extremely low birth weight newborn, 500-749 grams	ICD-10-CM	Diagnosis
P07.03	Extremely low birth weight newborn, 750-999 grams	ICD-10-CM	Diagnosis
P07.10	Other low birth weight newborn, unspecified weight	ICD-10-CM	Diagnosis
P07.14	Other low birth weight newborn, 1000-1249 grams	ICD-10-CM	Diagnosis
P07.15	Other low birth weight newborn, 1250-1499 grams	ICD-10-CM	Diagnosis
P07.16	Other low birth weight newborn, 1500-1749 grams	ICD-10-CM	Diagnosis
P07.17	Other low birth weight newborn, 1750-1999 grams	ICD-10-CM	Diagnosis
P07.18	Other low birth weight newborn, 2000-2499 grams	ICD-10-CM	Diagnosis
P07.20	Extreme immaturity of newborn, unspecified weeks of gestation	ICD-10-CM	Diagnosis
P07.21	Extreme immaturity of newborn, gestational age less than 23 completed weeks	ICD-10-CM	Diagnosis
P07.22	Extreme immaturity of newborn, gestational age 23 completed weeks	ICD-10-CM	Diagnosis
P07.23	Extreme immaturity of newborn, gestational age 24 completed weeks	ICD-10-CM	Diagnosis
P07.24	Extreme immaturity of newborn, gestational age 25 completed weeks	ICD-10-CM	Diagnosis
P07.25	Extreme immaturity of newborn, gestational age 26 completed weeks	ICD-10-CM	Diagnosis
P07.26	Extreme immaturity of newborn, gestational age 27 completed weeks	ICD-10-CM	Diagnosis
P07.30	Preterm newborn, unspecified weeks of gestation	ICD-10-CM	Diagnosis
P07.31	Preterm newborn, gestational age 28 completed weeks	ICD-10-CM	Diagnosis
P07.32	Preterm newborn, gestational age 29 completed weeks	ICD-10-CM	Diagnosis
P07.33	Preterm newborn, gestational age 30 completed weeks	ICD-10-CM	Diagnosis
P07.34	Preterm newborn, gestational age 31 completed weeks	ICD-10-CM	Diagnosis
P07.35	Preterm newborn, gestational age 32 completed weeks	ICD-10-CM	Diagnosis
P07.36	Preterm newborn, gestational age 33 completed weeks	ICD-10-CM	Diagnosis
P07.37	Preterm newborn, gestational age 34 completed weeks	ICD-10-CM	Diagnosis
P07.38	Preterm newborn, gestational age 35 completed weeks	ICD-10-CM	Diagnosis
P07.39	Preterm newborn, gestational age 36 completed weeks	ICD-10-CM	Diagnosis
P08.21	Post-term newborn	ICD-10-CM	Diagnosis
P08.22	Prolonged gestation of newborn	ICD-10-CM	Diagnosis
Z37.0	Single live birth	ICD-10-CM	Diagnosis
Z37.2	Twins, both liveborn	ICD-10-CM	Diagnosis
Z37.50	Multiple births, unspecified, all liveborn	ICD-10-CM	Diagnosis
Z37.51	Triplets, all liveborn	ICD-10-CM	Diagnosis
Z37.52	Quadruplets, all liveborn	ICD-10-CM	Diagnosis
Z37.53	Quintuplets, all liveborn	ICD-10-CM	Diagnosis
Z37.54	Sextuplets, all liveborn	ICD-10-CM	Diagnosis
Z37.59	Other multiple births, all liveborn	ICD-10-CM	Diagnosis
Z37.9	Outcome of delivery, unspecified	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
Z38.00	Single liveborn infant, delivered vaginally	ICD-10-CM	Diagnosis
Z38.01	Single liveborn infant, delivered by cesarean	ICD-10-CM	Diagnosis
Z38.1	Single liveborn infant, born outside hospital	ICD-10-CM	Diagnosis
Z38.2	Single liveborn infant, unspecified as to place of birth	ICD-10-CM	Diagnosis
Z38.30	Twin liveborn infant, delivered vaginally	ICD-10-CM	Diagnosis
Z38.31	Twin liveborn infant, delivered by cesarean	ICD-10-CM	Diagnosis
Z38.4	Twin liveborn infant, born outside hospital	ICD-10-CM	Diagnosis
Z38.5	Twin liveborn infant, unspecified as to place of birth	ICD-10-CM	Diagnosis
Z38.61	Triplet liveborn infant, delivered vaginally	ICD-10-CM	Diagnosis
Z38.62	Triplet liveborn infant, delivered by cesarean	ICD-10-CM	Diagnosis
Z38.63	Quadruplet liveborn infant, delivered vaginally	ICD-10-CM	Diagnosis
Z38.64	Quadruplet liveborn infant, delivered by cesarean	ICD-10-CM	Diagnosis
Z38.65	Quintuplet liveborn infant, delivered vaginally	ICD-10-CM	Diagnosis
Z38.66	Quintuplet liveborn infant, delivered by cesarean	ICD-10-CM	Diagnosis
Z38.68	Other multiple liveborn infant, delivered vaginally	ICD-10-CM	Diagnosis
Z38.69	Other multiple liveborn infant, delivered by cesarean	ICD-10-CM	Diagnosis
Z38.7	Other multiple liveborn infant, born outside hospital	ICD-10-CM	Diagnosis
Z38.8	Other multiple liveborn infant, unspecified as to place of birth	ICD-10-CM	Diagnosis
59400	Routine obstetric care including antepartum care, vaginal delivery (with or without episiotomy, and/or forceps) and postpartum care	CPT-4	Procedure
59409	Vaginal delivery only (with or without episiotomy and/or forceps);	CPT-4	Procedure
59410	Vaginal delivery only (with or without episiotomy and/or forceps); including postpartum care	CPT-4	Procedure
59510	Routine obstetric care including antepartum care, cesarean delivery, and postpartum care	CPT-4	Procedure
59514	Cesarean delivery only;	CPT-4	Procedure
59515	Cesarean delivery only; including postpartum care	CPT-4	Procedure
59610	Routine obstetric care including antepartum care, vaginal delivery (with or without episiotomy, and/or forceps) and postpartum care, after previous cesarean delivery	CPT-4	Procedure
59612	Vaginal delivery only, after previous cesarean delivery (with or without episiotomy and/or forceps);	CPT-4	Procedure
59614	Vaginal delivery only, after previous cesarean delivery (with or without episiotomy and/or forceps); including postpartum care	CPT-4	Procedure
59618	Routine obstetric care including antepartum care, cesarean delivery, and postpartum care, following attempted vaginal delivery after previous cesarean delivery	CPT-4	Procedure
59620	Cesarean delivery only, following attempted vaginal delivery after previous cesarean delivery;	CPT-4	Procedure
59622	Cesarean delivery only, following attempted vaginal delivery after previous cesarean delivery; including postpartum care	CPT-4	Procedure
0W8NXZZ	Division of Female Perineum, External Approach	ICD-10-PCS	Procedure
10900ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception, Open Approach	ICD-10-PCS	Procedure
10903ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception, Percutaneous Approach	ICD-10-PCS	Procedure
10904ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception, Percutaneous Endoscopic Approach	ICD-10-PCS	Procedure

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Code	Description	Code Type	Code Category
10907ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
10908ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
10D00Z0	Extraction of Products of Conception, High, Open Approach	ICD-10-PCS	Procedure
10D00Z1	Extraction of Products of Conception, Low, Open Approach	ICD-10-PCS	Procedure
10D00Z2	Extraction of Products of Conception, Extraperitoneal, Open Approach	ICD-10-PCS	Procedure
10D07Z3	Extraction of Products of Conception, Low Forceps, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
10D07Z4	Extraction of Products of Conception, Mid Forceps, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
10D07Z5	Extraction of Products of Conception, High Forceps, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
10D07Z6	Extraction of Products of Conception, Vacuum, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
10D07Z7	Extraction of Products of Conception, Internal Version, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
10D07Z8	Extraction of Products of Conception, Other, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
10E0XZZ	Delivery of Products of Conception, External Approach	ICD-10-PCS	Procedure
10S07ZZ	Reposition Products of Conception, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
O00	Ectopic pregnancy	ICD-10-CM	Diagnosis
O00.0	Abdominal pregnancy	ICD-10-CM	Diagnosis
O00.00	Abdominal pregnancy without intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.01	Abdominal pregnancy with intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.1	Tubal pregnancy	ICD-10-CM	Diagnosis
O00.10	Tubal pregnancy without intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.101	Right tubal pregnancy without intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.102	Left tubal pregnancy without intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.109	Unspecified tubal pregnancy without intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.11	Tubal pregnancy with intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.111	Right tubal pregnancy with intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.112	Left tubal pregnancy with intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.119	Unspecified tubal pregnancy with intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.2	Ovarian pregnancy	ICD-10-CM	Diagnosis
O00.20	Ovarian pregnancy without intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.201	Right ovarian pregnancy without intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.202	Left ovarian pregnancy without intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.209	Unspecified ovarian pregnancy without intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.21	Ovarian pregnancy with intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.211	Right ovarian pregnancy with intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.212	Left ovarian pregnancy with intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.219	Unspecified ovarian pregnancy with intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.8	Other ectopic pregnancy	ICD-10-CM	Diagnosis
O00.80	Other ectopic pregnancy without intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.81	Other ectopic pregnancy with intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.9	Ectopic pregnancy, unspecified	ICD-10-CM	Diagnosis
O00.90	Unspecified ectopic pregnancy without intrauterine pregnancy	ICD-10-CM	Diagnosis
O00.91	Unspecified ectopic pregnancy with intrauterine pregnancy	ICD-10-CM	Diagnosis
O01	Hydatidiform mole	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O01.0	Classical hydatidiform mole	ICD-10-CM	Diagnosis
O01.1	Incomplete and partial hydatidiform mole	ICD-10-CM	Diagnosis
O01.9	Hydatidiform mole, unspecified	ICD-10-CM	Diagnosis
O02.0	Blighted ovum and nonhydatidiform mole	ICD-10-CM	Diagnosis
O02.1	Missed abortion	ICD-10-CM	Diagnosis
O02.89	Other abnormal products of conception	ICD-10-CM	Diagnosis
O02.9	Abnormal product of conception, unspecified	ICD-10-CM	Diagnosis
O03	Spontaneous abortion	ICD-10-CM	Diagnosis
O03.0	Genital tract and pelvic infection following incomplete spontaneous abortion	ICD-10-CM	Diagnosis
O03.1	Delayed or excessive hemorrhage following incomplete spontaneous abortion	ICD-10-CM	Diagnosis
O03.2	Embolism following incomplete spontaneous abortion	ICD-10-CM	Diagnosis
O03.30	Unspecified complication following incomplete spontaneous abortion	ICD-10-CM	Diagnosis
O03.31	Shock following incomplete spontaneous abortion	ICD-10-CM	Diagnosis
O03.32	Renal failure following incomplete spontaneous abortion	ICD-10-CM	Diagnosis
O03.33	Metabolic disorder following incomplete spontaneous abortion	ICD-10-CM	Diagnosis
O03.34	Damage to pelvic organs following incomplete spontaneous abortion	ICD-10-CM	Diagnosis
O03.35	Other venous complications following incomplete spontaneous abortion	ICD-10-CM	Diagnosis
O03.36	Cardiac arrest following incomplete spontaneous abortion	ICD-10-CM	Diagnosis
O03.37	Sepsis following incomplete spontaneous abortion	ICD-10-CM	Diagnosis
O03.38	Urinary tract infection following incomplete spontaneous abortion	ICD-10-CM	Diagnosis
O03.39	Incomplete spontaneous abortion with other complications	ICD-10-CM	Diagnosis
O03.4	Incomplete spontaneous abortion without complication	ICD-10-CM	Diagnosis
O03.5	Genital tract and pelvic infection following complete or unspecified spontaneous abortion	ICD-10-CM	Diagnosis
O03.6	Delayed or excessive hemorrhage following complete or unspecified spontaneous abortion	ICD-10-CM	Diagnosis
O03.7	Embolism following complete or unspecified spontaneous abortion	ICD-10-CM	Diagnosis
O03.80	Unspecified complication following complete or unspecified spontaneous abortion	ICD-10-CM	Diagnosis
O03.81	Shock following complete or unspecified spontaneous abortion	ICD-10-CM	Diagnosis
O03.82	Renal failure following complete or unspecified spontaneous abortion	ICD-10-CM	Diagnosis
O03.83	Metabolic disorder following complete or unspecified spontaneous abortion	ICD-10-CM	Diagnosis
O03.84	Damage to pelvic organs following complete or unspecified spontaneous abortion	ICD-10-CM	Diagnosis
O03.85	Other venous complications following complete or unspecified spontaneous abortion	ICD-10-CM	Diagnosis
O03.86	Cardiac arrest following complete or unspecified spontaneous abortion	ICD-10-CM	Diagnosis
O03.87	Sepsis following complete or unspecified spontaneous abortion	ICD-10-CM	Diagnosis
O03.88	Urinary tract infection following complete or unspecified spontaneous abortion	ICD-10-CM	Diagnosis
O03.89	Complete or unspecified spontaneous abortion with other complications	ICD-10-CM	Diagnosis
O03.9	Complete or unspecified spontaneous abortion without complication	ICD-10-CM	Diagnosis
O04	Complications following (induced) termination of pregnancy	ICD-10-CM	Diagnosis
O04.5	Genital tract and pelvic infection following (induced) termination of pregnancy	ICD-10-CM	Diagnosis
O04.6	Delayed or excessive hemorrhage following (induced) termination of pregnancy	ICD-10-CM	Diagnosis
O04.7	Embolism following (induced) termination of pregnancy	ICD-10-CM	Diagnosis
O04.8	(Induced) termination of pregnancy with other and unspecified complications	ICD-10-CM	Diagnosis
O04.80	(Induced) termination of pregnancy with unspecified complications	ICD-10-CM	Diagnosis
O04.81	Shock following (induced) termination of pregnancy	ICD-10-CM	Diagnosis
O04.82	Renal failure following (induced) termination of pregnancy	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O04.83	Metabolic disorder following (induced) termination of pregnancy	ICD-10-CM	Diagnosis
O04.84	Damage to pelvic organs following (induced) termination of pregnancy	ICD-10-CM	Diagnosis
O04.85	Other venous complications following (induced) termination of pregnancy	ICD-10-CM	Diagnosis
O04.86	Cardiac arrest following (induced) termination of pregnancy	ICD-10-CM	Diagnosis
O04.87	Sepsis following (induced) termination of pregnancy	ICD-10-CM	Diagnosis
O04.88	Urinary tract infection following (induced) termination of pregnancy	ICD-10-CM	Diagnosis
O04.89	(Induced) termination of pregnancy with other complications	ICD-10-CM	Diagnosis
O08.0	Genital tract and pelvic infection following ectopic and molar pregnancy	ICD-10-CM	Diagnosis
O08.1	Delayed or excessive hemorrhage following ectopic and molar pregnancy	ICD-10-CM	Diagnosis
O08.2	Embolism following ectopic and molar pregnancy	ICD-10-CM	Diagnosis
O08.3	Shock following ectopic and molar pregnancy	ICD-10-CM	Diagnosis
O08.4	Renal failure following ectopic and molar pregnancy	ICD-10-CM	Diagnosis
O08.5	Metabolic disorders following an ectopic and molar pregnancy	ICD-10-CM	Diagnosis
O08.6	Damage to pelvic organs and tissues following an ectopic and molar pregnancy	ICD-10-CM	Diagnosis
O08.7	Other venous complications following an ectopic and molar pregnancy	ICD-10-CM	Diagnosis
O08.81	Cardiac arrest following an ectopic and molar pregnancy	ICD-10-CM	Diagnosis
O08.82	Sepsis following ectopic and molar pregnancy	ICD-10-CM	Diagnosis
O08.83	Urinary tract infection following an ectopic and molar pregnancy	ICD-10-CM	Diagnosis
O08.89	Other complications following an ectopic and molar pregnancy	ICD-10-CM	Diagnosis
O08.9	Unspecified complication following an ectopic and molar pregnancy	ICD-10-CM	Diagnosis
O31.00X0	Papyraceous fetus, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.00X1	Papyraceous fetus, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O31.00X2	Papyraceous fetus, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O31.00X3	Papyraceous fetus, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O31.00X4	Papyraceous fetus, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O31.00X5	Papyraceous fetus, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O31.00X9	Papyraceous fetus, unspecified trimester, other fetus	ICD-10-CM	Diagnosis
O31.02X0	Papyraceous fetus, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.02X1	Papyraceous fetus, second trimester, fetus 1	ICD-10-CM	Diagnosis
O31.02X2	Papyraceous fetus, second trimester, fetus 2	ICD-10-CM	Diagnosis
O31.02X3	Papyraceous fetus, second trimester, fetus 3	ICD-10-CM	Diagnosis
O31.02X4	Papyraceous fetus, second trimester, fetus 4	ICD-10-CM	Diagnosis
O31.02X5	Papyraceous fetus, second trimester, fetus 5	ICD-10-CM	Diagnosis
O31.02X9	Papyraceous fetus, second trimester, other fetus	ICD-10-CM	Diagnosis
O31.03X0	Papyraceous fetus, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.03X1	Papyraceous fetus, third trimester, fetus 1	ICD-10-CM	Diagnosis
O31.03X2	Papyraceous fetus, third trimester, fetus 2	ICD-10-CM	Diagnosis
O31.03X3	Papyraceous fetus, third trimester, fetus 3	ICD-10-CM	Diagnosis
O31.03X4	Papyraceous fetus, third trimester, fetus 4	ICD-10-CM	Diagnosis
O31.03X5	Papyraceous fetus, third trimester, fetus 5	ICD-10-CM	Diagnosis
O31.03X9	Papyraceous fetus, third trimester, other fetus	ICD-10-CM	Diagnosis
O31.10X0	Continuing pregnancy after spontaneous abortion of one fetus or more, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O31.10X1	Continuing pregnancy after spontaneous abortion of one fetus or more, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O31.10X2	Continuing pregnancy after spontaneous abortion of one fetus or more, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O31.10X3	Continuing pregnancy after spontaneous abortion of one fetus or more, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O31.10X4	Continuing pregnancy after spontaneous abortion of one fetus or more, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O31.10X5	Continuing pregnancy after spontaneous abortion of one fetus or more, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O31.10X9	Continuing pregnancy after spontaneous abortion of one fetus or more, unspecified trimester, other fetus	ICD-10-CM	Diagnosis
O31.11X0	Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.11X1	Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, fetus 1	ICD-10-CM	Diagnosis
O31.11X2	Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, fetus 2	ICD-10-CM	Diagnosis
O31.11X3	Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, fetus 3	ICD-10-CM	Diagnosis
O31.11X4	Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, fetus 4	ICD-10-CM	Diagnosis
O31.11X5	Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, fetus 5	ICD-10-CM	Diagnosis
O31.11X9	Continuing pregnancy after spontaneous abortion of one fetus or more, first trimester, other fetus	ICD-10-CM	Diagnosis
O31.12X0	Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.12X1	Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, fetus 1	ICD-10-CM	Diagnosis
O31.12X2	Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, fetus 2	ICD-10-CM	Diagnosis
O31.12X3	Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, fetus 3	ICD-10-CM	Diagnosis
O31.12X4	Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, fetus 4	ICD-10-CM	Diagnosis
O31.12X5	Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, fetus 5	ICD-10-CM	Diagnosis
O31.12X9	Continuing pregnancy after spontaneous abortion of one fetus or more, second trimester, other fetus	ICD-10-CM	Diagnosis
O31.13X0	Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.13X1	Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, fetus 1	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O31.13X2	Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, fetus 2	ICD-10-CM	Diagnosis
O31.13X3	Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, fetus 3	ICD-10-CM	Diagnosis
O31.13X4	Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, fetus 4	ICD-10-CM	Diagnosis
O31.13X5	Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, fetus 5	ICD-10-CM	Diagnosis
O31.13X9	Continuing pregnancy after spontaneous abortion of one fetus or more, third trimester, other fetus	ICD-10-CM	Diagnosis
O31.2	Continuing pregnancy after intrauterine death of one fetus or more	ICD-10-CM	Diagnosis
O31.20X0	Continuing pregnancy after intrauterine death of one fetus or more, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.20X1	Continuing pregnancy after intrauterine death of one fetus or more, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O31.20X2	Continuing pregnancy after intrauterine death of one fetus or more, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O31.20X3	Continuing pregnancy after intrauterine death of one fetus or more, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O31.20X4	Continuing pregnancy after intrauterine death of one fetus or more, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O31.20X5	Continuing pregnancy after intrauterine death of one fetus or more, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O31.20X9	Continuing pregnancy after intrauterine death of one fetus or more, unspecified trimester, other fetus	ICD-10-CM	Diagnosis
O31.22X0	Continuing pregnancy after intrauterine death of one fetus or more, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.22X1	Continuing pregnancy after intrauterine death of one fetus or more, second trimester, fetus 1	ICD-10-CM	Diagnosis
O31.22X2	Continuing pregnancy after intrauterine death of one fetus or more, second trimester, fetus 2	ICD-10-CM	Diagnosis
O31.22X3	Continuing pregnancy after intrauterine death of one fetus or more, second trimester, fetus 3	ICD-10-CM	Diagnosis
O31.22X4	Continuing pregnancy after intrauterine death of one fetus or more, second trimester, fetus 4	ICD-10-CM	Diagnosis
O31.22X5	Continuing pregnancy after intrauterine death of one fetus or more, second trimester, fetus 5	ICD-10-CM	Diagnosis
O31.22X9	Continuing pregnancy after intrauterine death of one fetus or more, second trimester, other fetus	ICD-10-CM	Diagnosis
O31.23X1	Continuing pregnancy after intrauterine death of one fetus or more, third trimester, fetus 1	ICD-10-CM	Diagnosis
O31.23X2	Continuing pregnancy after intrauterine death of one fetus or more, third trimester, fetus 2	ICD-10-CM	Diagnosis
O31.23X3	Continuing pregnancy after intrauterine death of one fetus or more, third trimester, fetus 3	ICD-10-CM	Diagnosis
O31.23X4	Continuing pregnancy after intrauterine death of one fetus or more, third trimester, fetus 4	ICD-10-CM	Diagnosis
O31.23X5	Continuing pregnancy after intrauterine death of one fetus or more, third trimester, fetus 5	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
O36.4	Maternal care for intrauterine death	ICD-10-CM	Diagnosis
O36.4XX0	Maternal care for intrauterine death, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.4XX1	Maternal care for intrauterine death, fetus 1	ICD-10-CM	Diagnosis
O36.4XX2	Maternal care for intrauterine death, fetus 2	ICD-10-CM	Diagnosis
O36.4XX3	Maternal care for intrauterine death, fetus 3	ICD-10-CM	Diagnosis
O36.4XX4	Maternal care for intrauterine death, fetus 4	ICD-10-CM	Diagnosis
O36.4XX5	Maternal care for intrauterine death, fetus 5	ICD-10-CM	Diagnosis
O36.4XX9	Maternal care for intrauterine death, other fetus	ICD-10-CM	Diagnosis
O60.10X1	Preterm labor with preterm delivery, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O60.10X2	Preterm labor with preterm delivery, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O60.10X3	Preterm labor with preterm delivery, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O60.10X4	Preterm labor with preterm delivery, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O60.10X5	Preterm labor with preterm delivery, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O60.10X9	Preterm labor with preterm delivery, unspecified trimester, other fetus	ICD-10-CM	Diagnosis
O60.20X0	Term delivery with preterm labor, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O60.20X1	Term delivery with preterm labor, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O60.20X2	Term delivery with preterm labor, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O60.20X3	Term delivery with preterm labor, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O60.20X4	Term delivery with preterm labor, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O60.20X5	Term delivery with preterm labor, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O60.20X9	Term delivery with preterm labor, unspecified trimester, other fetus	ICD-10-CM	Diagnosis
P95	Stillbirth	ICD-10-CM	Diagnosis
Z33.2	Encounter for elective termination of pregnancy	ICD-10-CM	Diagnosis
Z37.1	Single stillbirth	ICD-10-CM	Diagnosis
Z37.3	Twins, one liveborn and one stillborn	ICD-10-CM	Diagnosis
Z37.4	Twins, both stillborn	ICD-10-CM	Diagnosis
Z37.60	Multiple births, unspecified, some liveborn	ICD-10-CM	Diagnosis
Z37.61	Triplets, some liveborn	ICD-10-CM	Diagnosis
Z37.62	Quadruplets, some liveborn	ICD-10-CM	Diagnosis
Z37.63	Quintuplets, some liveborn	ICD-10-CM	Diagnosis
Z37.64	Sextuplets, some liveborn	ICD-10-CM	Diagnosis
Z37.69	Other multiple births, some liveborn	ICD-10-CM	Diagnosis
Z37.7	Other multiple births, all stillborn	ICD-10-CM	Diagnosis
88016	Necropsy (autopsy), gross examination only; macerated stillborn	CPT-4	Procedure
01965	Anesthesia for incomplete or missed abortion procedures	CPT-4	Procedure
59812	Treatment of incomplete abortion, any trimester, completed surgically	CPT-4	Procedure
59820	Treatment of incomplete abortion completed surgically, first trimester	CPT-4	Procedure
59821	Treatment of incomplete abortion completed surgically, second trimester	CPT-4	Procedure
59830	Treatment of septic abortion, completed surgically	CPT-4	Procedure
01964	ANESTHESIA FOR ABORTION PROCEDURES	CPT-4	Procedure
01966	Anesthesia for induced abortion procedures	CPT-4	Procedure
59840	INDUCED ABORTION, BY DILATION AND CURETTAGE	CPT-4	Procedure
59841	INDUCED ABORTION, BY DILATION AND EVACUATION	CPT-4	Procedure
59850	INDUCED ABORTION, BY ONE OR MORE INTRAAMNIOTIC INJECTIONS	CPT-4	Procedure

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Code	Description	Code Type	Code Category
59851	INDUCED ABORTION, BY ONE OR MORE INTRAAMNIOTIC INJECTIONS, WITH DILATION AND CURETTAGE AND/OR EVACUATION	CPT-4	Procedure
59852	INDUCED ABORTION, BY ONE OR MORE INTRAAMNIOTIC INJECTIONS, WITH	CPT-4	Procedure
59855	INDUCED ABORTION, BY ONE OR MORE VAGINAL SUPPOSITORIES	CPT-4	Procedure
59856	INDUCED ABORTION, BY ONE OR MORE VAGINAL SUPPOSITORIES, WITH DILATION AND CURETTAGE AND/OR EVACUATION	CPT-4	Procedure
59857	INDUCED ABORTION, BY ONE OR MORE VAGINAL SUPPOSITORIES, WITH HYSTEROTOMY	CPT-4	Procedure
S0190	Mifepristone, oral, 200 mg	HCPCS	Procedure
S0191	Misoprostol, oral, 200 mcg	HCPCS	Procedure
S0199	Medically induced abortion by oral ingestion of medication including all associated services and supplies (e.g., patient counseling, office visits, confirmation of pregnancy by HCG, ultrasound to confirm duration of pregnancy, ultrasound to confirm completion of abortion) except drugs	HCPCS	Procedure
S2260	Induced abortion, 17 to 24 weeks	HCPCS	Procedure
S2265	Induced abortion, 25 to 28 weeks	HCPCS	Procedure
S2266	Induced abortion, 29 to 31 weeks	HCPCS	Procedure
S2267	Induced abortion, 32 weeks or greater	HCPCS	Procedure
S2262	Abortion for maternal indication, 25 weeks or greater	HCPCS	Procedure
59100	Surgical treatment of ectopic pregnancy: tubal or ovarian, requiring salpingectomy and/or oophorectomy, abdominal or vaginal approach	CPT-4	Procedure
59120	Surgical treatment of ectopic pregnancy; tubal or ovarian, requiring salpingectomy and/or oophorectomy, abdominal or vaginal approach	CPT-4	Procedure
59121	Surgical treatment of ectopic pregnancy; tubal or ovarian, without salpingectomy and/or oophorectomy	CPT-4	Procedure
59125	Surgical Treatment Of Ectopic Pregnancy	CPT-4	Procedure
59126	Surgical Treatment Of Ectopic Pregnancy	CPT-4	Procedure
59130	Surgical treatment of ectopic pregnancy; abdominal pregnancy	CPT-4	Procedure
59135	Surgical treatment of ectopic pregnancy; interstitial, uterine pregnancy requiring total hysterectomy	CPT-4	Procedure
59136	Surgical treatment of ectopic pregnancy; interstitial, uterine pregnancy with partial resection of uterus	CPT-4	Procedure
59140	Surgical treatment of ectopic pregnancy; cervical, with evacuation	CPT-4	Procedure
59150	Laparoscopic treatment of ectopic pregnancy; without salpingectomy and/or oophorectomy	CPT-4	Procedure
59151	Laparoscopic treatment of ectopic pregnancy; with salpingectomy and/or oophorectomy	CPT-4	Procedure
59870	Evacuation and curettage of uterus for hydatidiform mole	CPT-4	Procedure
66.02	Salpingostomy	ICD-9-CM	Procedure
66.62	Salpingectomy with removal of tubal pregnancy	ICD-9-CM	Procedure
69.01	Dilation and curettage for termination of pregnancy	ICD-9-CM	Procedure
69.51	Aspiration curettage of uterus for termination of pregnancy	ICD-9-CM	Procedure
69.93	Insertion of laminaria	ICD-9-CM	Procedure
72.79	Other vacuum extraction	ICD-9-CM	Procedure
73.8	Operations on fetus to facilitate delivery	ICD-9-CM	Procedure
74.3	Removal of extratubal ectopic pregnancy	ICD-9-CM	Procedure

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Code	Description	Code Type	Code Category
74.91	Hysterotomy to terminate pregnancy	ICD-9-CM	Procedure
75.0	Intra-amniotic injection for abortion	ICD-9-CM	Procedure
96.49	Other genitourinary instillation	ICD-9-CM	Procedure
10A00ZZ	Abortion of Products of Conception, Open Approach	ICD-10-PCS	Procedure
10A03ZZ	Abortion of Products of Conception, Percutaneous Approach	ICD-10-PCS	Procedure
10A04ZZ	Abortion of Products of Conception, Percutaneous Endoscopic Approach	ICD-10-PCS	Procedure
10A07Z6	Abortion of Products of Conception, Vacuum, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
10A07ZW	Abortion of Products of Conception, Laminaria, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
10A07ZX	Abortion of Products of Conception, Abortifacient, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
10A07ZZ	Abortion of Products of Conception, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
10A08ZZ	Abortion of Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
10D27ZZ	Extraction of Products of Conception, Ectopic, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
10D28ZZ	Extraction of Products of Conception, Ectopic, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
10T20ZZ	Resection of Products of Conception, Ectopic, Open Approach	ICD-10-PCS	Procedure
10T23ZZ	Resection of Products of Conception, Ectopic, Percutaneous Approach	ICD-10-PCS	Procedure
10T24ZZ	Resection of Products of Conception, Ectopic, Percutaneous Endoscopic Approach	ICD-10-PCS	Procedure
10T27ZZ	Resection of Products of Conception, Ectopic, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
10T28ZZ	Resection of Products of Conception, Ectopic, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
	Malignancy		
C15.3	Malignant neoplasm of upper third of esophagus	ICD-10-CM	Diagnosis
C15.4	Malignant neoplasm of middle third of esophagus	ICD-10-CM	Diagnosis
C15.5	Malignant neoplasm of lower third of esophagus	ICD-10-CM	Diagnosis
C15.8	Malignant neoplasm of overlapping sites of esophagus	ICD-10-CM	Diagnosis
C15.9	Malignant neoplasm of esophagus, unspecified	ICD-10-CM	Diagnosis
C18.0	Malignant neoplasm of cecum	ICD-10-CM	Diagnosis
C18.1	Malignant neoplasm of appendix	ICD-10-CM	Diagnosis
C18.2	Malignant neoplasm of ascending colon	ICD-10-CM	Diagnosis
C18.3	Malignant neoplasm of hepatic flexure	ICD-10-CM	Diagnosis
C18.4	Malignant neoplasm of transverse colon	ICD-10-CM	Diagnosis
C18.5	Malignant neoplasm of splenic flexure	ICD-10-CM	Diagnosis
C18.6	Malignant neoplasm of descending colon	ICD-10-CM	Diagnosis
C18.7	Malignant neoplasm of sigmoid colon	ICD-10-CM	Diagnosis
C18.8	Malignant neoplasm of overlapping sites of colon	ICD-10-CM	Diagnosis
C18.9	Malignant neoplasm of colon, unspecified	ICD-10-CM	Diagnosis
C19	Malignant neoplasm of rectosigmoid junction	ICD-10-CM	Diagnosis
C20	Malignant neoplasm of rectum	ICD-10-CM	Diagnosis
C21.0	Malignant neoplasm of anus, unspecified	ICD-10-CM	Diagnosis
C21.1	Malignant neoplasm of anal canal	ICD-10-CM	Diagnosis
C21.2	Malignant neoplasm of cloacogenic zone	ICD-10-CM	Diagnosis
C21.8	Malignant neoplasm of overlapping sites of rectum, anus and anal canal	ICD-10-CM	Diagnosis
C22.3	Angiosarcoma of liver	ICD-10-CM	Diagnosis
C22.4	Other sarcomas of liver	ICD-10-CM	Diagnosis
C22.7	Other specified carcinomas of liver	ICD-10-CM	Diagnosis
C22.8	Malignant neoplasm of liver, primary, unspecified as to type	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
C25.0	Malignant neoplasm of head of pancreas	ICD-10-CM	Diagnosis
C25.1	Malignant neoplasm of body of pancreas	ICD-10-CM	Diagnosis
C25.2	Malignant neoplasm of tail of pancreas	ICD-10-CM	Diagnosis
C25.3	Malignant neoplasm of pancreatic duct	ICD-10-CM	Diagnosis
C25.4	Malignant neoplasm of endocrine pancreas	ICD-10-CM	Diagnosis
C25.7	Malignant neoplasm of other parts of pancreas	ICD-10-CM	Diagnosis
C25.8	Malignant neoplasm of overlapping sites of pancreas	ICD-10-CM	Diagnosis
C25.9	Malignant neoplasm of pancreas, unspecified	ICD-10-CM	Diagnosis
C34.00	Malignant neoplasm of unspecified main bronchus	ICD-10-CM	Diagnosis
C34.01	Malignant neoplasm of right main bronchus	ICD-10-CM	Diagnosis
C34.02	Malignant neoplasm of left main bronchus	ICD-10-CM	Diagnosis
C34.10	Malignant neoplasm of upper lobe, unspecified bronchus or lung	ICD-10-CM	Diagnosis
C34.11	Malignant neoplasm of upper lobe, right bronchus or lung	ICD-10-CM	Diagnosis
C34.12	Malignant neoplasm of upper lobe, left bronchus or lung	ICD-10-CM	Diagnosis
C34.2	Malignant neoplasm of middle lobe, bronchus or lung	ICD-10-CM	Diagnosis
C34.30	Malignant neoplasm of lower lobe, unspecified bronchus or lung	ICD-10-CM	Diagnosis
C34.31	Malignant neoplasm of lower lobe, right bronchus or lung	ICD-10-CM	Diagnosis
C34.32	Malignant neoplasm of lower lobe, left bronchus or lung	ICD-10-CM	Diagnosis
C34.80	Malignant neoplasm of overlapping sites of unspecified bronchus and lung	ICD-10-CM	Diagnosis
C34.81	Malignant neoplasm of overlapping sites of right bronchus and lung	ICD-10-CM	Diagnosis
C34.82	Malignant neoplasm of overlapping sites of left bronchus and lung	ICD-10-CM	Diagnosis
C34.90	Malignant neoplasm of unspecified part of unspecified bronchus or lung	ICD-10-CM	Diagnosis
C34.91	Malignant neoplasm of unspecified part of right bronchus or lung	ICD-10-CM	Diagnosis
C34.92	Malignant neoplasm of unspecified part of left bronchus or lung	ICD-10-CM	Diagnosis
C43.0	Malignant melanoma of lip	ICD-10-CM	Diagnosis
C43.10	Malignant melanoma of unspecified eyelid, including canthus	ICD-10-CM	Diagnosis
C43.11	Malignant melanoma of right eyelid, including canthus	ICD-10-CM	Diagnosis
C43.12	Malignant melanoma of left eyelid, including canthus	ICD-10-CM	Diagnosis
C43.20	Malignant melanoma of unspecified ear and external auricular canal	ICD-10-CM	Diagnosis
C43.21	Malignant melanoma of right ear and external auricular canal	ICD-10-CM	Diagnosis
C43.22	Malignant melanoma of left ear and external auricular canal	ICD-10-CM	Diagnosis
C43.30	Malignant melanoma of unspecified part of face	ICD-10-CM	Diagnosis
C43.31	Malignant melanoma of nose	ICD-10-CM	Diagnosis
C43.39	Malignant melanoma of other parts of face	ICD-10-CM	Diagnosis
C43.4	Malignant melanoma of scalp and neck	ICD-10-CM	Diagnosis
C43.51	Malignant melanoma of anal skin	ICD-10-CM	Diagnosis
C43.52	Malignant melanoma of skin of breast	ICD-10-CM	Diagnosis
C43.59	Malignant melanoma of other part of trunk	ICD-10-CM	Diagnosis
C43.60	Malignant melanoma of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
C43.61	Malignant melanoma of right upper limb, including shoulder	ICD-10-CM	Diagnosis
C43.62	Malignant melanoma of left upper limb, including shoulder	ICD-10-CM	Diagnosis
C43.70	Malignant melanoma of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
C43.71	Malignant melanoma of right lower limb, including hip	ICD-10-CM	Diagnosis
C43.72	Malignant melanoma of left lower limb, including hip	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
C43.8	Malignant melanoma of overlapping sites of skin	ICD-10-CM	Diagnosis
C43.9	Malignant melanoma of skin, unspecified	ICD-10-CM	Diagnosis
C50.011	Malignant neoplasm of nipple and areola, right female breast	ICD-10-CM	Diagnosis
C50.012	Malignant neoplasm of nipple and areola, left female breast	ICD-10-CM	Diagnosis
C50.019	Malignant neoplasm of nipple and areola, unspecified female breast	ICD-10-CM	Diagnosis
C50.021	Malignant neoplasm of nipple and areola, right male breast	ICD-10-CM	Diagnosis
C50.022	Malignant neoplasm of nipple and areola, left male breast	ICD-10-CM	Diagnosis
C50.029	Malignant neoplasm of nipple and areola, unspecified male breast	ICD-10-CM	Diagnosis
C50.111	Malignant neoplasm of central portion of right female breast	ICD-10-CM	Diagnosis
C50.112	Malignant neoplasm of central portion of left female breast	ICD-10-CM	Diagnosis
C50.119	Malignant neoplasm of central portion of unspecified female breast	ICD-10-CM	Diagnosis
C50.121	Malignant neoplasm of central portion of right male breast	ICD-10-CM	Diagnosis
C50.122	Malignant neoplasm of central portion of left male breast	ICD-10-CM	Diagnosis
C50.129	Malignant neoplasm of central portion of unspecified male breast	ICD-10-CM	Diagnosis
C50.211	Malignant neoplasm of upper-inner quadrant of right female breast	ICD-10-CM	Diagnosis
C50.212	Malignant neoplasm of upper-inner quadrant of left female breast	ICD-10-CM	Diagnosis
C50.219	Malignant neoplasm of upper-inner quadrant of unspecified female breast	ICD-10-CM	Diagnosis
C50.221	Malignant neoplasm of upper-inner quadrant of right male breast	ICD-10-CM	Diagnosis
C50.222	Malignant neoplasm of upper-inner quadrant of left male breast	ICD-10-CM	Diagnosis
C50.229	Malignant neoplasm of upper-inner quadrant of unspecified male breast	ICD-10-CM	Diagnosis
C50.311	Malignant neoplasm of lower-inner quadrant of right female breast	ICD-10-CM	Diagnosis
C50.312	Malignant neoplasm of lower-inner quadrant of left female breast	ICD-10-CM	Diagnosis
C50.319	Malignant neoplasm of lower-inner quadrant of unspecified female breast	ICD-10-CM	Diagnosis
C50.321	Malignant neoplasm of lower-inner quadrant of right male breast	ICD-10-CM	Diagnosis
C50.322	Malignant neoplasm of lower-inner quadrant of left male breast	ICD-10-CM	Diagnosis
C50.329	Malignant neoplasm of lower-inner quadrant of unspecified male breast	ICD-10-CM	Diagnosis
C50.411	Malignant neoplasm of upper-outer quadrant of right female breast	ICD-10-CM	Diagnosis
C50.412	Malignant neoplasm of upper-outer quadrant of left female breast	ICD-10-CM	Diagnosis
C50.419	Malignant neoplasm of upper-outer quadrant of unspecified female breast	ICD-10-CM	Diagnosis
C50.421	Malignant neoplasm of upper-outer quadrant of right male breast	ICD-10-CM	Diagnosis
C50.422	Malignant neoplasm of upper-outer quadrant of left male breast	ICD-10-CM	Diagnosis
C50.429	Malignant neoplasm of upper-outer quadrant of unspecified male breast	ICD-10-CM	Diagnosis
C50.511	Malignant neoplasm of lower-outer quadrant of right female breast	ICD-10-CM	Diagnosis
C50.512	Malignant neoplasm of lower-outer quadrant of left female breast	ICD-10-CM	Diagnosis
C50.519	Malignant neoplasm of lower-outer quadrant of unspecified female breast	ICD-10-CM	Diagnosis
C50.521	Malignant neoplasm of lower-outer quadrant of right male breast	ICD-10-CM	Diagnosis
C50.522	Malignant neoplasm of lower-outer quadrant of left male breast	ICD-10-CM	Diagnosis
C50.529	Malignant neoplasm of lower-outer quadrant of unspecified male breast	ICD-10-CM	Diagnosis
C50.611	Malignant neoplasm of axillary tail of right female breast	ICD-10-CM	Diagnosis
C50.612	Malignant neoplasm of axillary tail of left female breast	ICD-10-CM	Diagnosis
C50.619	Malignant neoplasm of axillary tail of unspecified female breast	ICD-10-CM	Diagnosis
C50.621	Malignant neoplasm of axillary tail of right male breast	ICD-10-CM	Diagnosis
C50.622	Malignant neoplasm of axillary tail of left male breast	ICD-10-CM	Diagnosis
C50.629	Malignant neoplasm of axillary tail of unspecified male breast	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
C50.811	Malignant neoplasm of overlapping sites of right female breast	ICD-10-CM	Diagnosis
C50.812	Malignant neoplasm of overlapping sites of left female breast	ICD-10-CM	Diagnosis
C50.819	Malignant neoplasm of overlapping sites of unspecified female breast	ICD-10-CM	Diagnosis
C50.821	Malignant neoplasm of overlapping sites of right male breast	ICD-10-CM	Diagnosis
C50.822	Malignant neoplasm of overlapping sites of left male breast	ICD-10-CM	Diagnosis
C50.829	Malignant neoplasm of overlapping sites of unspecified male breast	ICD-10-CM	Diagnosis
C50.911	Malignant neoplasm of unspecified site of right female breast	ICD-10-CM	Diagnosis
C50.912	Malignant neoplasm of unspecified site of left female breast	ICD-10-CM	Diagnosis
C50.919	Malignant neoplasm of unspecified site of unspecified female breast	ICD-10-CM	Diagnosis
C50.921	Malignant neoplasm of unspecified site of right male breast	ICD-10-CM	Diagnosis
C50.922	Malignant neoplasm of unspecified site of left male breast	ICD-10-CM	Diagnosis
C50.929	Malignant neoplasm of unspecified site of unspecified male breast	ICD-10-CM	Diagnosis
C53.0	Malignant neoplasm of endocervix	ICD-10-CM	Diagnosis
C53.1	Malignant neoplasm of exocervix	ICD-10-CM	Diagnosis
C53.8	Malignant neoplasm of overlapping sites of cervix uteri	ICD-10-CM	Diagnosis
C53.9	Malignant neoplasm of cervix uteri, unspecified	ICD-10-CM	Diagnosis
C54.0	Malignant neoplasm of isthmus uteri	ICD-10-CM	Diagnosis
C54.1	Malignant neoplasm of endometrium	ICD-10-CM	Diagnosis
C54.2	Malignant neoplasm of myometrium	ICD-10-CM	Diagnosis
C54.3	Malignant neoplasm of fundus uteri	ICD-10-CM	Diagnosis
C54.8	Malignant neoplasm of overlapping sites of corpus uteri	ICD-10-CM	Diagnosis
C54.9	Malignant neoplasm of corpus uteri, unspecified	ICD-10-CM	Diagnosis
C55	Malignant neoplasm of uterus, part unspecified	ICD-10-CM	Diagnosis
C61	Malignant neoplasm of prostate	ICD-10-CM	Diagnosis
C64.1	Malignant neoplasm of right kidney, except renal pelvis	ICD-10-CM	Diagnosis
C64.2	Malignant neoplasm of left kidney, except renal pelvis	ICD-10-CM	Diagnosis
C64.9	Malignant neoplasm of unspecified kidney, except renal pelvis	ICD-10-CM	Diagnosis
C65.1	Malignant neoplasm of right renal pelvis	ICD-10-CM	Diagnosis
C65.2	Malignant neoplasm of left renal pelvis	ICD-10-CM	Diagnosis
C65.9	Malignant neoplasm of unspecified renal pelvis	ICD-10-CM	Diagnosis
C67.0	Malignant neoplasm of trigone of bladder	ICD-10-CM	Diagnosis
C67.1	Malignant neoplasm of dome of bladder	ICD-10-CM	Diagnosis
C67.2	Malignant neoplasm of lateral wall of bladder	ICD-10-CM	Diagnosis
C67.3	Malignant neoplasm of anterior wall of bladder	ICD-10-CM	Diagnosis
C67.4	Malignant neoplasm of posterior wall of bladder	ICD-10-CM	Diagnosis
C67.5	Malignant neoplasm of bladder neck	ICD-10-CM	Diagnosis
C67.6	Malignant neoplasm of ureteric orifice	ICD-10-CM	Diagnosis
C67.7	Malignant neoplasm of urachus	ICD-10-CM	Diagnosis
C67.8	Malignant neoplasm of overlapping sites of bladder	ICD-10-CM	Diagnosis
C67.9	Malignant neoplasm of bladder, unspecified	ICD-10-CM	Diagnosis
C73	Malignant neoplasm of thyroid gland	ICD-10-CM	Diagnosis
C74.00	Malignant neoplasm of cortex of unspecified adrenal gland	ICD-10-CM	Diagnosis
C74.01	Malignant neoplasm of cortex of right adrenal gland	ICD-10-CM	Diagnosis
C74.02	Malignant neoplasm of cortex of left adrenal gland	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
C74.10	Malignant neoplasm of medulla of unspecified adrenal gland	ICD-10-CM	Diagnosis
C74.11	Malignant neoplasm of medulla of right adrenal gland	ICD-10-CM	Diagnosis
C74.12	Malignant neoplasm of medulla of left adrenal gland	ICD-10-CM	Diagnosis
C74.90	Malignant neoplasm of unspecified part of unspecified adrenal gland	ICD-10-CM	Diagnosis
C74.91	Malignant neoplasm of unspecified part of right adrenal gland	ICD-10-CM	Diagnosis
C74.92	Malignant neoplasm of unspecified part of left adrenal gland	ICD-10-CM	Diagnosis
C75.0	Malignant neoplasm of parathyroid gland	ICD-10-CM	Diagnosis
C75.1	Malignant neoplasm of pituitary gland	ICD-10-CM	Diagnosis
C75.2	Malignant neoplasm of craniopharyngeal duct	ICD-10-CM	Diagnosis
C75.3	Malignant neoplasm of pineal gland	ICD-10-CM	Diagnosis
C75.4	Malignant neoplasm of carotid body	ICD-10-CM	Diagnosis
C75.5	Malignant neoplasm of aortic body and other paraganglia	ICD-10-CM	Diagnosis
C75.8	Malignant neoplasm with pluriglandular involvement, unspecified	ICD-10-CM	Diagnosis
C75.9	Malignant neoplasm of endocrine gland, unspecified	ICD-10-CM	Diagnosis
C82.00	Follicular lymphoma grade I, unspecified site	ICD-10-CM	Diagnosis
C82.01	Follicular lymphoma grade I, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.02	Follicular lymphoma grade I, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.03	Follicular lymphoma grade I, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C82.04	Follicular lymphoma grade I, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.05	Follicular lymphoma grade I, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.06	Follicular lymphoma grade I, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C82.07	Follicular lymphoma grade I, spleen	ICD-10-CM	Diagnosis
C82.08	Follicular lymphoma grade I, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.09	Follicular lymphoma grade I, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C82.10	Follicular lymphoma grade II, unspecified site	ICD-10-CM	Diagnosis
C82.11	Follicular lymphoma grade II, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.12	Follicular lymphoma grade II, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.13	Follicular lymphoma grade II, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C82.14	Follicular lymphoma grade II, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.15	Follicular lymphoma grade II, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.16	Follicular lymphoma grade II, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C82.17	Follicular lymphoma grade II, spleen	ICD-10-CM	Diagnosis
C82.18	Follicular lymphoma grade II, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.19	Follicular lymphoma grade II, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C82.20	Follicular lymphoma grade III, unspecified, unspecified site	ICD-10-CM	Diagnosis
C82.21	Follicular lymphoma grade III, unspecified, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.22	Follicular lymphoma grade III, unspecified, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.23	Follicular lymphoma grade III, unspecified, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C82.24	Follicular lymphoma grade III, unspecified, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.25	Follicular lymphoma grade III, unspecified, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.26	Follicular lymphoma grade III, unspecified, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C82.27	Follicular lymphoma grade III, unspecified, spleen	ICD-10-CM	Diagnosis
C82.28	Follicular lymphoma grade III, unspecified, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.29	Follicular lymphoma grade III, unspecified, extranodal and solid organ sites	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
C82.30	Follicular lymphoma grade IIIa, unspecified site	ICD-10-CM	Diagnosis
C82.31	Follicular lymphoma grade IIIa, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.32	Follicular lymphoma grade IIIa, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.33	Follicular lymphoma grade IIIa, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C82.34	Follicular lymphoma grade IIIa, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.35	Follicular lymphoma grade IIIa, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.36	Follicular lymphoma grade IIIa, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C82.37	Follicular lymphoma grade IIIa, spleen	ICD-10-CM	Diagnosis
C82.38	Follicular lymphoma grade IIIa, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.39	Follicular lymphoma grade IIIa, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C82.40	Follicular lymphoma grade IIIb, unspecified site	ICD-10-CM	Diagnosis
C82.41	Follicular lymphoma grade IIIb, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.42	Follicular lymphoma grade IIIb, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.43	Follicular lymphoma grade IIIb, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C82.44	Follicular lymphoma grade IIIb, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.45	Follicular lymphoma grade IIIb, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.46	Follicular lymphoma grade IIIb, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C82.47	Follicular lymphoma grade IIIb, spleen	ICD-10-CM	Diagnosis
C82.48	Follicular lymphoma grade IIIb, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.49	Follicular lymphoma grade IIIb, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C82.50	Diffuse follicle center lymphoma, unspecified site	ICD-10-CM	Diagnosis
C82.51	Diffuse follicle center lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.52	Diffuse follicle center lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.53	Diffuse follicle center lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C82.54	Diffuse follicle center lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.55	Diffuse follicle center lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.56	Diffuse follicle center lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C82.57	Diffuse follicle center lymphoma, spleen	ICD-10-CM	Diagnosis
C82.58	Diffuse follicle center lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.59	Diffuse follicle center lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C82.60	Cutaneous follicle center lymphoma, unspecified site	ICD-10-CM	Diagnosis
C82.61	Cutaneous follicle center lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.62	Cutaneous follicle center lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.63	Cutaneous follicle center lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C82.64	Cutaneous follicle center lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.65	Cutaneous follicle center lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.66	Cutaneous follicle center lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C82.67	Cutaneous follicle center lymphoma, spleen	ICD-10-CM	Diagnosis
C82.68	Cutaneous follicle center lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.69	Cutaneous follicle center lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C82.80	Other types of follicular lymphoma, unspecified site	ICD-10-CM	Diagnosis
C82.81	Other types of follicular lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.82	Other types of follicular lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.83	Other types of follicular lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
C82.84	Other types of follicular lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.85	Other types of follicular lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.86	Other types of follicular lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C82.87	Other types of follicular lymphoma, spleen	ICD-10-CM	Diagnosis
C82.88	Other types of follicular lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.89	Other types of follicular lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C82.90	Follicular lymphoma, unspecified, unspecified site	ICD-10-CM	Diagnosis
C82.91	Follicular lymphoma, unspecified, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C82.92	Follicular lymphoma, unspecified, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C82.93	Follicular lymphoma, unspecified, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C82.94	Follicular lymphoma, unspecified, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C82.95	Follicular lymphoma, unspecified, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C82.96	Follicular lymphoma, unspecified, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C82.97	Follicular lymphoma, unspecified, spleen	ICD-10-CM	Diagnosis
C82.98	Follicular lymphoma, unspecified, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C82.99	Follicular lymphoma, unspecified, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C83.00	Small cell B-cell lymphoma, unspecified site	ICD-10-CM	Diagnosis
C83.01	Small cell B-cell lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C83.02	Small cell B-cell lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C83.03	Small cell B-cell lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C83.04	Small cell B-cell lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C83.05	Small cell B-cell lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C83.06	Small cell B-cell lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C83.07	Small cell B-cell lymphoma, spleen	ICD-10-CM	Diagnosis
C83.08	Small cell B-cell lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C83.09	Small cell B-cell lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C83.10	Mantle cell lymphoma, unspecified site	ICD-10-CM	Diagnosis
C83.11	Mantle cell lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C83.12	Mantle cell lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C83.13	Mantle cell lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C83.14	Mantle cell lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C83.15	Mantle cell lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C83.16	Mantle cell lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C83.17	Mantle cell lymphoma, spleen	ICD-10-CM	Diagnosis
C83.18	Mantle cell lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C83.19	Mantle cell lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C83.30	Diffuse large B-cell lymphoma, unspecified site	ICD-10-CM	Diagnosis
C83.31	Diffuse large B-cell lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C83.32	Diffuse large B-cell lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C83.33	Diffuse large B-cell lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C83.34	Diffuse large B-cell lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C83.35	Diffuse large B-cell lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C83.36	Diffuse large B-cell lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C83.37	Diffuse large B-cell lymphoma, spleen	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
C83.38	Diffuse large B-cell lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C83.39	Diffuse large B-cell lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C83.50	Lymphoblastic (diffuse) lymphoma, unspecified site	ICD-10-CM	Diagnosis
C83.51	Lymphoblastic (diffuse) lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C83.52	Lymphoblastic (diffuse) lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C83.53	Lymphoblastic (diffuse) lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C83.54	Lymphoblastic (diffuse) lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C83.55	Lymphoblastic (diffuse) lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C83.56	Lymphoblastic (diffuse) lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C83.57	Lymphoblastic (diffuse) lymphoma, spleen	ICD-10-CM	Diagnosis
C83.58	Lymphoblastic (diffuse) lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C83.59	Lymphoblastic (diffuse) lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C83.70	Burkitt lymphoma, unspecified site	ICD-10-CM	Diagnosis
C83.71	Burkitt lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C83.72	Burkitt lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C83.73	Burkitt lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C83.74	Burkitt lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C83.75	Burkitt lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C83.76	Burkitt lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C83.77	Burkitt lymphoma, spleen	ICD-10-CM	Diagnosis
C83.78	Burkitt lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C83.79	Burkitt lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C83.80	Other non-follicular lymphoma, unspecified site	ICD-10-CM	Diagnosis
C83.81	Other non-follicular lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C83.82	Other non-follicular lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C83.83	Other non-follicular lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C83.84	Other non-follicular lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C83.85	Other non-follicular lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C83.86	Other non-follicular lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C83.87	Other non-follicular lymphoma, spleen	ICD-10-CM	Diagnosis
C83.88	Other non-follicular lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C83.89	Other non-follicular lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C83.90	Non-follicular (diffuse) lymphoma, unspecified, unspecified site	ICD-10-CM	Diagnosis
C83.91	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C83.92	Non-follicular (diffuse) lymphoma, unspecified, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C83.93	Non-follicular (diffuse) lymphoma, unspecified, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C83.94	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C83.95	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C83.96	Non-follicular (diffuse) lymphoma, unspecified, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C83.97	Non-follicular (diffuse) lymphoma, unspecified, spleen	ICD-10-CM	Diagnosis
C83.98	Non-follicular (diffuse) lymphoma, unspecified, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C83.99	Non-follicular (diffuse) lymphoma, unspecified, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C84.00	Mycosis fungoides, unspecified site	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
C84.01	Mycosis fungoides, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C84.02	Mycosis fungoides, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C84.03	Mycosis fungoides, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C84.04	Mycosis fungoides, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C84.05	Mycosis fungoides, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C84.06	Mycosis fungoides, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C84.07	Mycosis fungoides, spleen	ICD-10-CM	Diagnosis
C84.08	Mycosis fungoides, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C84.09	Mycosis fungoides, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C84.10	Sezary disease, unspecified site	ICD-10-CM	Diagnosis
C84.11	Sezary disease, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C84.12	Sezary disease, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C84.13	Sezary disease, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C84.14	Sezary disease, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C84.15	Sezary disease, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C84.16	Sezary disease, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C84.17	Sezary disease, spleen	ICD-10-CM	Diagnosis
C84.18	Sezary disease, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C84.19	Sezary disease, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C84.60	Anaplastic large cell lymphoma, ALK-positive, unspecified site	ICD-10-CM	Diagnosis
C84.61	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C84.62	Anaplastic large cell lymphoma, ALK-positive, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C84.63	Anaplastic large cell lymphoma, ALK-positive, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C84.64	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C84.65	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C84.66	Anaplastic large cell lymphoma, ALK-positive, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C84.67	Anaplastic large cell lymphoma, ALK-positive, spleen	ICD-10-CM	Diagnosis
C84.68	Anaplastic large cell lymphoma, ALK-positive, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C84.69	Anaplastic large cell lymphoma, ALK-positive, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C84.70	Anaplastic large cell lymphoma, ALK-negative, unspecified site	ICD-10-CM	Diagnosis
C84.71	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C84.72	Anaplastic large cell lymphoma, ALK-negative, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C84.73	Anaplastic large cell lymphoma, ALK-negative, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C84.74	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C84.75	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C84.76	Anaplastic large cell lymphoma, ALK-negative, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C84.77	Anaplastic large cell lymphoma, ALK-negative, spleen	ICD-10-CM	Diagnosis
C84.78	Anaplastic large cell lymphoma, ALK-negative, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C84.79	Anaplastic large cell lymphoma, ALK-negative, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C84.90	Mature T/NK-cell lymphomas, unspecified, unspecified site	ICD-10-CM	Diagnosis
C84.91	Mature T/NK-cell lymphomas, unspecified, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C84.92	Mature T/NK-cell lymphomas, unspecified, intrathoracic lymph nodes	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
C84.93	Mature T/NK-cell lymphomas, unspecified, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C84.94	Mature T/NK-cell lymphomas, unspecified, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C84.95	Mature T/NK-cell lymphomas, unspecified, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C84.96	Mature T/NK-cell lymphomas, unspecified, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C84.97	Mature T/NK-cell lymphomas, unspecified, spleen	ICD-10-CM	Diagnosis
C84.98	Mature T/NK-cell lymphomas, unspecified, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C84.99	Mature T/NK-cell lymphomas, unspecified, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C84.A0	Cutaneous T-cell lymphoma, unspecified, unspecified site	ICD-10-CM	Diagnosis
C84.A1	Cutaneous T-cell lymphoma, unspecified lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C84.A2	Cutaneous T-cell lymphoma, unspecified, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C84.A3	Cutaneous T-cell lymphoma, unspecified, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C84.A4	Cutaneous T-cell lymphoma, unspecified, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C84.A5	Cutaneous T-cell lymphoma, unspecified, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C84.A6	Cutaneous T-cell lymphoma, unspecified, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C84.A7	Cutaneous T-cell lymphoma, unspecified, spleen	ICD-10-CM	Diagnosis
C84.A8	Cutaneous T-cell lymphoma, unspecified, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C84.A9	Cutaneous T-cell lymphoma, unspecified, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C84.Z0	Other mature T/NK-cell lymphomas, unspecified site	ICD-10-CM	Diagnosis
C84.Z1	Other mature T/NK-cell lymphomas, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C84.Z2	Other mature T/NK-cell lymphomas, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C84.Z3	Other mature T/NK-cell lymphomas, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C84.Z4	Other mature T/NK-cell lymphomas, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C84.Z5	Other mature T/NK-cell lymphomas, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C84.Z6	Other mature T/NK-cell lymphomas, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C84.Z7	Other mature T/NK-cell lymphomas, spleen	ICD-10-CM	Diagnosis
C84.Z8	Other mature T/NK-cell lymphomas, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C84.Z9	Other mature T/NK-cell lymphomas, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C85.10	Unspecified B-cell lymphoma, unspecified site	ICD-10-CM	Diagnosis
C85.11	Unspecified B-cell lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C85.12	Unspecified B-cell lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C85.13	Unspecified B-cell lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C85.14	Unspecified B-cell lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C85.15	Unspecified B-cell lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C85.16	Unspecified B-cell lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C85.17	Unspecified B-cell lymphoma, spleen	ICD-10-CM	Diagnosis
C85.18	Unspecified B-cell lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C85.19	Unspecified B-cell lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C85.20	Mediastinal (thymic) large B-cell lymphoma, unspecified site	ICD-10-CM	Diagnosis
C85.21	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C85.22	Mediastinal (thymic) large B-cell lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C85.23	Mediastinal (thymic) large B-cell lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C85.24	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C85.25	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
C85.26	Mediastinal (thymic) large B-cell lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C85.27	Mediastinal (thymic) large B-cell lymphoma, spleen	ICD-10-CM	Diagnosis
C85.28	Mediastinal (thymic) large B-cell lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C85.29	Mediastinal (thymic) large B-cell lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C85.80	Other specified types of non-Hodgkin lymphoma, unspecified site	ICD-10-CM	Diagnosis
C85.81	Other specified types of non-Hodgkin lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C85.82	Other specified types of non-Hodgkin lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C85.83	Other specified types of non-Hodgkin lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C85.84	Other specified types of non-Hodgkin lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C85.85	Other specified types of non-Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C85.86	Other specified types of non-Hodgkin lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C85.87	Other specified types of non-Hodgkin lymphoma, spleen	ICD-10-CM	Diagnosis
C85.88	Other specified types of non-Hodgkin lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C85.89	Other specified types of non-Hodgkin lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C85.90	Non-Hodgkin lymphoma, unspecified, unspecified site	ICD-10-CM	Diagnosis
C85.91	Non-Hodgkin lymphoma, unspecified, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C85.92	Non-Hodgkin lymphoma, unspecified, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C85.93	Non-Hodgkin lymphoma, unspecified, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C85.94	Non-Hodgkin lymphoma, unspecified, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C85.95	Non-Hodgkin lymphoma, unspecified, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C85.96	Non-Hodgkin lymphoma, unspecified, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C85.97	Non-Hodgkin lymphoma, unspecified, spleen	ICD-10-CM	Diagnosis
C85.98	Non-Hodgkin lymphoma, unspecified, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C85.99	Non-Hodgkin lymphoma, unspecified, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C86.0	Extranodal NK/T-cell lymphoma, nasal type	ICD-10-CM	Diagnosis
C86.1	Hepatosplenic T-cell lymphoma	ICD-10-CM	Diagnosis
C86.2	Enteropathy-type (intestinal) T-cell lymphoma	ICD-10-CM	Diagnosis
C86.3	Subcutaneous panniculitis-like T-cell lymphoma	ICD-10-CM	Diagnosis
C86.4	Blastic NK-cell lymphoma	ICD-10-CM	Diagnosis
C86.5	Angioimmunoblastic T-cell lymphoma	ICD-10-CM	Diagnosis
C86.6	Primary cutaneous CD30-positive T-cell proliferations	ICD-10-CM	Diagnosis
C88.4	Extranodal marginal zone B-cell lymphoma of mucosa-associated lymphoid tissue [MALT-lymphoma]	ICD-10-CM	Diagnosis
C90.10	Plasma cell leukemia not having achieved remission	ICD-10-CM	Diagnosis
C90.11	Plasma cell leukemia in remission	ICD-10-CM	Diagnosis
C91.00	Acute lymphoblastic leukemia not having achieved remission	ICD-10-CM	Diagnosis
C91.01	Acute lymphoblastic leukemia, in remission	ICD-10-CM	Diagnosis
C91.10	Chronic lymphocytic leukemia of B-cell type not having achieved remission	ICD-10-CM	Diagnosis
C91.11	Chronic lymphocytic leukemia of B-cell type in remission	ICD-10-CM	Diagnosis
C91.30	Prolymphocytic leukemia of B-cell type not having achieved remission	ICD-10-CM	Diagnosis
C91.31	Prolymphocytic leukemia of B-cell type, in remission	ICD-10-CM	Diagnosis
C91.40	Hairy cell leukemia not having achieved remission	ICD-10-CM	Diagnosis
C91.41	Hairy cell leukemia, in remission	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
C91.50	Adult T-cell lymphoma/leukemia (HTLV-1-associated) not having achieved remission	ICD-10-CM	Diagnosis
C91.51	Adult T-cell lymphoma/leukemia (HTLV-1-associated), in remission	ICD-10-CM	Diagnosis
C91.60	Prolymphocytic leukemia of T-cell type not having achieved remission	ICD-10-CM	Diagnosis
C91.61	Prolymphocytic leukemia of T-cell type, in remission	ICD-10-CM	Diagnosis
C91.90	Lymphoid leukemia, unspecified not having achieved remission	ICD-10-CM	Diagnosis
C91.91	Lymphoid leukemia, unspecified, in remission	ICD-10-CM	Diagnosis
C91.A0	Mature B-cell leukemia Burkitt-type not having achieved remission	ICD-10-CM	Diagnosis
C91.A1	Mature B-cell leukemia Burkitt-type, in remission	ICD-10-CM	Diagnosis
C91.Z0	Other lymphoid leukemia not having achieved remission	ICD-10-CM	Diagnosis
C91.Z1	Other lymphoid leukemia, in remission	ICD-10-CM	Diagnosis
C92.00	Acute myeloblastic leukemia, not having achieved remission	ICD-10-CM	Diagnosis
C92.01	Acute myeloblastic leukemia, in remission	ICD-10-CM	Diagnosis
C92.10	Chronic myeloid leukemia, BCR/ABL-positive, not having achieved remission	ICD-10-CM	Diagnosis
C92.11	Chronic myeloid leukemia, BCR/ABL-positive, in remission	ICD-10-CM	Diagnosis
C92.20	Atypical chronic myeloid leukemia, BCR/ABL-negative, not having achieved remission	ICD-10-CM	Diagnosis
C92.21	Atypical chronic myeloid leukemia, BCR/ABL-negative, in remission	ICD-10-CM	Diagnosis
C92.30	Myeloid sarcoma, not having achieved remission	ICD-10-CM	Diagnosis
C92.31	Myeloid sarcoma, in remission	ICD-10-CM	Diagnosis
C92.40	Acute promyelocytic leukemia, not having achieved remission	ICD-10-CM	Diagnosis
C92.41	Acute promyelocytic leukemia, in remission	ICD-10-CM	Diagnosis
C92.50	Acute myelomonocytic leukemia, not having achieved remission	ICD-10-CM	Diagnosis
C92.51	Acute myelomonocytic leukemia, in remission	ICD-10-CM	Diagnosis
C92.60	Acute myeloid leukemia with 11q23-abnormality not having achieved remission	ICD-10-CM	Diagnosis
C92.61	Acute myeloid leukemia with 11q23-abnormality in remission	ICD-10-CM	Diagnosis
C92.90	Myeloid leukemia, unspecified, not having achieved remission	ICD-10-CM	Diagnosis
C92.91	Myeloid leukemia, unspecified in remission	ICD-10-CM	Diagnosis
C92.A0	Acute myeloid leukemia with multilineage dysplasia, not having achieved remission	ICD-10-CM	Diagnosis
C92.A1	Acute myeloid leukemia with multilineage dysplasia, in remission	ICD-10-CM	Diagnosis
C92.Z0	Other myeloid leukemia not having achieved remission	ICD-10-CM	Diagnosis
C92.Z1	Other myeloid leukemia, in remission	ICD-10-CM	Diagnosis
C93.00	Acute monoblastic/monocytic leukemia, not having achieved remission	ICD-10-CM	Diagnosis
C93.01	Acute monoblastic/monocytic leukemia, in remission	ICD-10-CM	Diagnosis
C93.10	Chronic myelomonocytic leukemia not having achieved remission	ICD-10-CM	Diagnosis
C93.11	Chronic myelomonocytic leukemia, in remission	ICD-10-CM	Diagnosis
C93.30	Juvenile myelomonocytic leukemia, not having achieved remission	ICD-10-CM	Diagnosis
C93.31	Juvenile myelomonocytic leukemia, in remission	ICD-10-CM	Diagnosis
C93.90	Monocytic leukemia, unspecified, not having achieved remission	ICD-10-CM	Diagnosis
C93.91	Monocytic leukemia, unspecified in remission	ICD-10-CM	Diagnosis
C93.Z0	Other monocytic leukemia, not having achieved remission	ICD-10-CM	Diagnosis
C93.Z1	Other monocytic leukemia, in remission	ICD-10-CM	Diagnosis
C94.00	Acute erythroid leukemia, not having achieved remission	ICD-10-CM	Diagnosis
C94.01	Acute erythroid leukemia, in remission	ICD-10-CM	Diagnosis
C94.20	Acute megakaryoblastic leukemia not having achieved remission	ICD-10-CM	Diagnosis
C94.21	Acute megakaryoblastic leukemia, in remission	ICD-10-CM	Diagnosis

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
C94.30	Mast cell leukemia not having achieved remission	ICD-10-CM	Diagnosis
C94.31	Mast cell leukemia, in remission	ICD-10-CM	Diagnosis
C94.80	Other specified leukemias not having achieved remission	ICD-10-CM	Diagnosis
C94.81	Other specified leukemias, in remission	ICD-10-CM	Diagnosis
C95.00	Acute leukemia of unspecified cell type not having achieved remission	ICD-10-CM	Diagnosis
C95.01	Acute leukemia of unspecified cell type, in remission	ICD-10-CM	Diagnosis
C95.10	Chronic leukemia of unspecified cell type not having achieved remission	ICD-10-CM	Diagnosis
C95.11	Chronic leukemia of unspecified cell type, in remission	ICD-10-CM	Diagnosis
C95.90	Leukemia, unspecified not having achieved remission	ICD-10-CM	Diagnosis
C95.91	Leukemia, unspecified, in remission	ICD-10-CM	Diagnosis
C96.4	Sarcoma of dendritic cells (accessory cells)	ICD-10-CM	Diagnosis
C96.9	Malignant neoplasm of lymphoid, hematopoietic and related tissue, unspecified	ICD-10-CM	Diagnosis
C96.Z	Other specified malignant neoplasms of lymphoid, hematopoietic and related tissue	ICD-10-CM	Diagnosis
D03.0	Melanoma in situ of lip	ICD-10-CM	Diagnosis
D03.10	Melanoma in situ of unspecified eyelid, including canthus	ICD-10-CM	Diagnosis
D03.11	Melanoma in situ of right eyelid, including canthus	ICD-10-CM	Diagnosis
D03.12	Melanoma in situ of left eyelid, including canthus	ICD-10-CM	Diagnosis
D03.20	Melanoma in situ of unspecified ear and external auricular canal	ICD-10-CM	Diagnosis
D03.21	Melanoma in situ of right ear and external auricular canal	ICD-10-CM	Diagnosis
D03.22	Melanoma in situ of left ear and external auricular canal	ICD-10-CM	Diagnosis
D03.30	Melanoma in situ of unspecified part of face	ICD-10-CM	Diagnosis
D03.39	Melanoma in situ of other parts of face	ICD-10-CM	Diagnosis
D03.4	Melanoma in situ of scalp and neck	ICD-10-CM	Diagnosis
D03.51	Melanoma in situ of anal skin	ICD-10-CM	Diagnosis
D03.52	Melanoma in situ of breast (skin) (soft tissue)	ICD-10-CM	Diagnosis
D03.59	Melanoma in situ of other part of trunk	ICD-10-CM	Diagnosis
D03.60	Melanoma in situ of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
D03.61	Melanoma in situ of right upper limb, including shoulder	ICD-10-CM	Diagnosis
D03.62	Melanoma in situ of left upper limb, including shoulder	ICD-10-CM	Diagnosis
D03.70	Melanoma in situ of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
D03.71	Melanoma in situ of right lower limb, including hip	ICD-10-CM	Diagnosis
D03.72	Melanoma in situ of left lower limb, including hip	ICD-10-CM	Diagnosis
D03.8	Melanoma in situ of other sites	ICD-10-CM	Diagnosis
D03.9	Melanoma in situ, unspecified	ICD-10-CM	Diagnosis
0073T	Compensator-based beam modulation treatment delivery of inverse planned treatment using 3 or more high resolution (milled or cast) compensator convergent beam modulated fields, per treatment session	CPT-3	Procedure
0182T	High dose rate electronic brachytherapy, per fraction	CPT-3	Procedure
0190T	Placement of intraocular radiation source applicator (List separately in addition to primary procedure)	CPT-3	Procedure
0347T	Placement of interstitial device(s) in bone for radiostereometric analysis (RSA)	CPT-3	Procedure
19296	Placement of radiotherapy afterloading expandable catheter (single or multichannel) into the breast for interstitial radioelement application following partial mastectomy, includes imaging guidance; on date separate from partial mastectomy	CPT-4	Procedure

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
19297	Placement of radiotherapy afterloading expandable catheter (single or multichannel) into the breast for interstitial radioelement application following partial mastectomy, includes imaging guidance; concurrent with partial mastectomy (List separately in addition to code for primary procedure)	CPT-4	Procedure
19298	Placement of radiotherapy after loading brachytherapy catheters (multiple tube and button type) into the breast for interstitial radioelement application following (at the time of or subsequent to) partial mastectomy, includes imaging guidance	CPT-4	Procedure
20555	Placement of needles or catheters into muscle and/or soft tissue for subsequent interstitial radioelement application (at the time of or subsequent to the procedure)	CPT-4	Procedure
32553	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), percutaneous, intra-thoracic, single or multiple	CPT-4	Procedure
32701	Thoracic target(s) delineation for stereotactic body radiation therapy (SRS/SBRT), (photon or particle beam), entire course of treatment	CPT-4	Procedure
49327	Laparoscopy, surgical; with placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), intra-abdominal, intrapelvic, and/or retroperitoneum, including imaging guidance, if performed, single or multiple (List separately in addition to code for primary procedure)	CPT-4	Procedure
49411	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), percutaneous, intra-abdominal, intra-pelvic (except prostate), and/or retroperitoneum, single or multiple	CPT-4	Procedure
49412	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), open, intra-abdominal, intrapelvic, and/or retroperitoneum, including image guidance, if performed, single or multiple (List separately in addition to code for primary procedure)	CPT-4	Procedure
51720	Bladder instillation of anticarcinogenic agent (including retention time)	CPT-4	Procedure
53220	Excision or fulguration of carcinoma of urethra	CPT-4	Procedure
55860	Exposure of prostate, any approach, for insertion of radioactive substance;	CPT-4	Procedure
55862	EXPOS PROSTATE-INSRT RADIOACT; W/LYMPH NODE BX	CPT-4	Procedure
55865	EXPOSURE PROSTATE-INSRT RADIOACT; W/BILAT LYMPH	CPT-4	Procedure
55875	Transperineal placement of needles or catheters into prostate for interstitial radioelement application, with or without cystoscopy	CPT-4	Procedure
55876	Placement of interstitial device(s) for radiation therapy guidance (eg, fiducial markers, dosimeter), prostate (via needle, any approach), single or multiple	CPT-4	Procedure
55920	Placement of needles or catheters into pelvic organs and/or genitalia (except prostate) for subsequent interstitial radioelement application	CPT-4	Procedure
57155	Insertion of uterine tandem and/or vaginal ovoids for clinical brachytherapy	CPT-4	Procedure
58240	Pelvic exenteration for gynecologic malignancy, with total abdominal hysterectomy or cervicectomy, with or without removal of tube(s), with or without removal of ovary(s), with removal of bladder and ureteral transplantations, and/or abdominoperineal resection of rectum and colon and colstomy, or any combination thereof	CPT-4	Procedure
58346	Insertion of Heyman capsules for clinical brachytherapy	CPT-4	Procedure

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Code	Description	Code Type	Code Category
58943	Oophorectomy, partial or total, unilateral or bilateral; for ovarian, tubal or primary peritoneal malignancy, with para-aortic and pelvic lymph node biopsies, peritoneal washings, peritoneal biopsies, diaphragmatic assessments, with or without salpingectomy(s), with or without omentectomy	CPT-4	Procedure
58950	Resection of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy;	CPT-4	Procedure
58951	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy; with total abdominal hysterectomy, pelvic and limited para-aortic lymphadenectomy	CPT-4	Procedure
58952	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy; with radical dissection for debulking (ie, radical excision or destruction, intra-abdominal or retroperitoneal tumors)	CPT-4	Procedure
58956	Bilateral salpingo-oophorectomy with total omentectomy, total abdominal hysterectomy for malignancy	CPT-4	Procedure
58957	Resection (tumor debulking) of recurrent ovarian, tubal, primary peritoneal, uterine malignancy (intra-abdominal, retroperitoneal tumors), with omentectomy, if performed;	CPT-4	Procedure
58958	Resection (tumor debulking) of recurrent ovarian, tubal, primary peritoneal, uterine malignancy (intra-abdominal, retroperitoneal tumors), with omentectomy, if performed; with pelvic lymphadenectomy and limited para-aortic lymphadenectomy	CPT-4	Procedure
58960	Laparotomy, for staging or restaging of overian, tubal or primary peritoneal malignancy (second look), with or with omenectomy, peritoneal washing, biopsy of abdominal and pelvic peritoneam, diaphragmatic assessment with pelvic and limited para-aortic lymphadenectomy	CPT-4	Procedure
60252	THYROIDECTOMY TOT/SUBTL-MALIG; W/LTD NECK DISSEC	CPT-4	Procedure
60254	Thyroidectomy, total or subtotal for malignancy; with radical neck dissection	CPT-4	Procedure
61517	Implantation of brain intracavitary chemotherapy agent (List separately in addition to code for primary procedure)	CPT-4	Procedure
61770	Stereotactic localization, including burr hole(s), with insertion of catheter(s) or probe(s) for placement of radiation source	CPT-4	Procedure
61793	Stereotactic radiosurgery (particle beam, gamma ray or linear accelerator), one or more sessions	CPT-4	Procedure
67218	Destruction of localized lesion of retina (eg, macular edema, tumors), 1 or more sessions; radiation by implantation of source (includes removal of source)	CPT-4	Procedure
76873	Ultrasound, transrectal; prostate volume study for brachytherapy treatment planning (separate procedure)	CPT-4	Procedure
76950	Ultrasonic guidance for placement of radiation therapy fields	CPT-4	Procedure
76960	Ultrasonic guidance for placement of radiation therapy fields, except for B-scan echography	CPT-4	Procedure
76965	Ultrasonic guidance for interstitial radioelement application	CPT-4	Procedure
77014	Computed tomography guidance for placement of radiation therapy fields	CPT-4	Procedure
77261	Therapeutic radiology treatment planning; simple	CPT-4	Procedure
77262	Therapeutic radiology treatment planning; intermediate	CPT-4	Procedure
77263	Therapeutic radiology treatment planning; complex	CPT-4	Procedure
77280	Therapeutic radiology simulation-aided field setting; simple	CPT-4	Procedure

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Code	Description	Code Type	Code Category
77285	Therapeutic radiology simulation-aided field setting; intermediate	CPT-4	Procedure
77290	Therapeutic radiology simulation-aided field setting; complex	CPT-4	Procedure
77295	THERAP RAD SIMULATION-AIDED FIELD SETTING; 3-D	CPT-4	Procedure
77299	Unlisted procedure, therapeutic radiology clinical treatment planning	CPT-4	Procedure
77300	Basic radiation dosimetry calculation, central axis depth dose, TDF, NSD, gap calculation, off axis factor, tissue inhomogeneity factors, as required during course of treatment, only when prescribed by the treating physician	CPT-4	Procedure
77301	Intensity modulated radiotherapy plan, including dose-volume histograms for target and critical structure partial tolerance specifications	CPT-4	Procedure
77305	Teletherapy, isodose plan (whether hand or computer calculated); simple (1 or 2 parallel opposed unmodified ports directed to a single area of interest)	CPT-4	Procedure
77306	Teletherapy isodose plan; simple (1 or 2 unmodified ports directed to a single area of interest), includes basic dosimetry calculation(s)	CPT-4	Procedure
77307	Teletherapy isodose plan; complex (multiple treatment areas, tangential ports, the use of wedges, blocking, rotational beam, or special beam considerations), includes basic dosimetry calculation(s)	CPT-4	Procedure
77310	Teletherapy, isodose plan (whether hand or computer calculated); intermediate (3 or more treatment ports directed to a single area of interest)	CPT-4	Procedure
77315	Teletherapy, isodose plan (whether hand or computer calculated); complex (mantle or inverted Y, tangential ports, the use of wedges, compensators, complex blocking, rotational beam, or special beam considerations)	CPT-4	Procedure
77316	Brachytherapy isodose plan; simple (calculation[s] made from 1 to 4 sources, or remote afterloading brachytherapy, 1 channel), includes basic dosimetry calculation(s)	CPT-4	Procedure
77317	Brachytherapy isodose plan; intermediate (calculation[s] made from 5 to 10 sources, or remote afterloading brachytherapy, 2-12 channels), includes basic dosimetry calculation(s)	CPT-4	Procedure
77318	Brachytherapy isodose plan; complex (calculation[s] made from over 10 sources, or remote afterloading brachytherapy, over 12 channels), includes basic dosimetry calculation(s)	CPT-4	Procedure
77321	Special teletherapy port plan, particles, hemibody, total body	CPT-4	Procedure
77326	Brachytherapy isodose calculation; simple (calculation made from single plane, one to four sources/ ribbon application, remote afterloading brachytherapy, 1 to 8 sources)	CPT-4	Procedure
77327	Brachytherapy isodose calculation; intermediate (multiplane dosage calculations, application involving 5 to 10 sources/ribbons, remote afterloading brachytherapy, 9 to 12 sources)	CPT-4	Procedure
77328	Brachytherapy isodose calculation; complex (multiplane isodose plan, volume implant calculations, over 10 sources/ribbons used, special spatial reconstruction, remote afterloading brachytherapy, over 12 sources)	CPT-4	Procedure
77331	Special dosimetry (eg, TLD, microdosimetry) (specify), only when prescribed by the treating physician	CPT-4	Procedure
77332	Treatment devices, design and construction; simple (simple block, simple bolus)	CPT-4	Procedure
77333	Treatment devices, design and construction; intermediate (multiple blocks, stents, bite blocks, special bolus)	CPT-4	Procedure

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Code	Description	Code Type	Code Category
77334	Treatment devices, design and construction; complex (irregular blocks, special shields, compensators, wedges, molds or casts)	CPT-4	Procedure
77336	Continuing medical physics consultation, including assessment of treatment parameters, quality assurance of dose delivery, and review of patient treatment documentation in support of the radiation oncologist, reported per week of therapy	CPT-4	Procedure
77338	Multi-leaf collimator (MLC) device(s) for intensity modulated radiation therapy (IMRT), design and construction per IMRT plan	CPT-4	Procedure
77370	Special medical radiation physics consultation	CPT-4	Procedure
77371	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; multi-source Cobalt 60 based	CPT-4	Procedure
77372	Radiation treatment delivery, stereotactic radiosurgery (SRS), complete course of treatment of cranial lesion(s) consisting of 1 session; linear accelerator based	CPT-4	Procedure
77373	Stereotactic body radiation therapy, treatment delivery, per fraction to 1 or more lesions, including image guidance, entire course not to exceed 5 fractions	CPT-4	Procedure
77380	Proton beam delivery to a single treatment area, single port, custom block, with or without compensation, with treatment set-up and verification images	CPT-4	Procedure
77381	Proton beam treatment to one or two treatment areas, two or more ports, two or more custom blocks, and two or more compensators, with treatment set-up and verification images	CPT-4	Procedure
77385	Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; simple	CPT-4	Procedure
77386	Intensity modulated radiation treatment delivery (IMRT), includes guidance and tracking, when performed; complex	CPT-4	Procedure
77387	Guidance for localization of target volume for delivery of radiation treatment, includes intrafraction tracking, when performed	CPT-4	Procedure
77399	Unlisted procedure, medical radiation physics, dosimetry and treatment devices, and special services	CPT-4	Procedure
77401	Radiation treatment delivery, superficial and/or ortho voltage	CPT-4	Procedure
77402	Radiation treatment delivery, => 1 MeV; simple	CPT-4	Procedure
77403	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks; 6-10 MeV	CPT-4	Procedure
77404	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks; 11-19 MeV	CPT-4	Procedure
77406	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks; 20 MeV or greater	CPT-4	Procedure
77407	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks; up to 5 MeV	CPT-4	Procedure
77408	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks; 6-10 MeV	CPT-4	Procedure
77409	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks; 11-19 MeV	CPT-4	Procedure
77411	Radiation treatment delivery, 2 separate treatment areas, 3 or more ports on a single treatment area, use of multiple blocks; 20 MeV or greater	CPT-4	Procedure

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Code	Description	Code Type	Code Category
77412	Radiation treatment delivery, three or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, special particle beam (eg, electron or neutrons); up to 5 MeV	CPT-4	Procedure
77413	Radiation treatment delivery, three or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, special particle beam (eg, electron or neutrons); 6-10 MeV	CPT-4	Procedure
77414	Radiation treatment delivery, 3 or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 11-19 MeV	CPT-4	Procedure
77416	Radiation treatment delivery, three or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, special particle beam (eg, electron or neutrons); 20 MeV or greater	CPT-4	Procedure
77417	Therapeutic radiology port film(s)	CPT-4	Procedure
77418	Intensity modulated treatment delivery, single or multiple fields/arcs, via narrow spatially and temporally modulated beams, binary, dynamic MLC, per treatment session	CPT-4	Procedure
77419	Weekly radiation therapy management; conformal	CPT-4	Procedure
77420	WK RAD THERAP MGMT; SIMPL	CPT-4	Procedure
77421	Stereoscopic X-ray guidance for localization of target volume for the delivery of radiation therapy	CPT-4	Procedure
77422	High energy neutron radiation treatment delivery; single treatment area using a single port or parallel-opposed ports with no blocks or simple blocking	CPT-4	Procedure
77423	High energy neutron radiation treatment delivery, 1 or more isocenter(s) with coplanar or non-coplanar geometry with blocking and/or wedge, and/or compensator(s)	CPT-4	Procedure
77424	Intraoperative radiation treatment delivery, x-ray, single treatment session	CPT-4	Procedure
77425	Intraoperative radiation treatment delivery, electrons, single treatment session	CPT-4	Procedure
77427	Radiation treatment management, 5 treatments	CPT-4	Procedure
77430	WK RAD THERAP MGMT; COMPLX	CPT-4	Procedure
77431	Radiation therapy management with complete course of therapy consisting of 1 or 2 fractions only	CPT-4	Procedure
77432	Stereotactic radiation treatment management of cranial lesion(s) (complete course of treatment consisting of 1 session)	CPT-4	Procedure
77435	Stereotactic body radiation therapy, treatment management, per treatment course, to 1 or more lesions, including image guidance, entire course not to exceed 5 fractions	CPT-4	Procedure
77469	Intraoperative radiation treatment management	CPT-4	Procedure
77470	Special treatment procedure (eg, total body irradiation, hemibody irradiation, per oral, vaginal cone irradiation)	CPT-4	Procedure
77499	Unlisted procedure, therapeutic radiology treatment management	CPT-4	Procedure
77520	Proton treatment delivery; simple, without compensation	CPT-4	Procedure
77522	Proton treatment delivery; simple, with compensation	CPT-4	Procedure
77523	Proton treatment delivery; intermediate	CPT-4	Procedure
77525	Proton treatment delivery; complex	CPT-4	Procedure
77600	Hyperthermia, externally generated; superficial (ie, heating to a depth of 4 cm or less)	CPT-4	Procedure
77605	Hyperthermia, externally generated; deep (ie, heating to depths greater than 4 cm)	CPT-4	Procedure
77610	Hyperthermia generated by interstitial probe(s); 5 or fewer interstitial applicators	CPT-4	Procedure
77615	Hyperthermia generated by interstitial probe(s); more than 5 interstitial applicators	CPT-4	Procedure

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Code	Description	Code Type	Code Category
77620	Hyperthermia generated by intracavitary probe(s)	CPT-4	Procedure
77750	Infusion or instillation of radioelement solution	CPT-4	Procedure
77761	Intracavitary radioelement application; simple	CPT-4	Procedure
77762	Intracavitary radiation source application; intermediate	CPT-4	Procedure
77763	Intracavitary radioelement application; complex	CPT-4	Procedure
77776	Interstitial radiation source application; simple	CPT-4	Procedure
77777	Interstitial radioelement application; intermediate	CPT-4	Procedure
77778	Interstitial radioelement application; complex	CPT-4	Procedure
77781	Remote afterloading high intensity brachytherapy; 1-4 source positions or catheters	CPT-4	Procedure
77782	Remote afterloading high intensity brachytherapy; 5-8 source positions or catheters	CPT-4	Procedure
77783	Remote afterloading high intensity brachytherapy; 9-12 source positions or catheters	CPT-4	Procedure
77784	Remote afterloading high intensity brachytherapy; over 12 source positions or catheters	CPT-4	Procedure
77785	Remote afterloading high dose rate radionuclide brachytherapy; 1 channel	CPT-4	Procedure
77786	Remote afterloading high dose rate radionuclide brachytherapy; 2-12 channels	CPT-4	Procedure
77787	Remote afterloading high dose rate radionuclide brachytherapy; over 12 channels	CPT-4	Procedure
77789	Surface application of radioelement	CPT-4	Procedure
77790	Supervision, handling, loading of radioelement	CPT-4	Procedure
77799	Unlisted procedure, clinical brachytherapy	CPT-4	Procedure
78015	Thyroid carcinoma metastases imaging; limited area (eg, neck and chest only)	CPT-4	Procedure
78016	Thyroid carcinoma metastases imaging; with additional studies (eg, urinary recovery)	CPT-4	Procedure
78018	Thyroid carcinoma metastases imaging; whole body	CPT-4	Procedure
78020	Thyroid carcinoma metastases uptake (List separately in addition to code for primary procedure)	CPT-4	Procedure
79200	Intracavitary radioactive colloid therapy	CPT-4	Procedure
79300	Radiopharmaceutical therapy, by interstitial radioactive colloid administration	CPT-4	Procedure
79440	INTRA-ARTICULAR RADIOPHARM THERAP	CPT-4	Procedure
79999	Radiopharmaceutical therapy, unlisted procedure	CPT-4	Procedure
90586	Bacillus Calmette-Guerin vaccine (BCG) for bladder cancer, live, for intravesical use	CPT-4	Procedure
92974	Transcatheter placement of radiation delivery device for subsequent coronary intravascular brachytherapy (List separately in addition to code for primary procedure)	CPT-4	Procedure
96400	Chemotherapy administration, subcutaneous or intramuscular, with or without local anesthesia	CPT-4	Procedure
96401	Chemotherapy administration, subcutaneous or intramuscular; non-hormonal anti-neoplastic	CPT-4	Procedure
96402	Chemotherapy administration, subcutaneous or intramuscular; hormonal anti-neoplastic	CPT-4	Procedure
96405	Chemotherapy administration, intralesional; up to and including 7 lesions	CPT-4	Procedure
96406	Chemotherapy administration, intralesional; more than 7 lesions	CPT-4	Procedure
96408	Chemotherapy administration, intravenous; push technique	CPT-4	Procedure
96409	Chemotherapy administration; intravenous, push technique, single or initial substance/drug	CPT-4	Procedure
96410	Chemotherapy administration, intravenous; infusion technique, up to one hour	CPT-4	Procedure
96411	Chemotherapy administration; intravenous, push technique, each additional substance/drug (List separately in addition to code for primary procedure)	CPT-4	Procedure

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Code	Description	Code Type	Code Category
96412	Chemotherapy administration, intravenous; infusion technique, one to 8 hours, each additional hour (List separately in addition to code for primary procedure)	CPT-4	Procedure
96413	Chemotherapy administration, intravenous infusion technique; up to 1 hour, single or initial substance/drug	CPT-4	Procedure
96414	Chemotherapy administration, intravenous; infusion technique, initiation of prolonged infusion (more than 8 hours), requiring the use of a portable or implantable pump	CPT-4	Procedure
96415	Chemotherapy administration, intravenous infusion technique; each additional hour (List separately in addition to code for primary procedure)	CPT-4	Procedure
96416	Chemotherapy administration, intravenous infusion technique; initiation of prolonged chemotherapy infusion (more than 8 hours), requiring use of a portable or implantable pump	CPT-4	Procedure
96417	Chemotherapy administration, intravenous infusion technique; each additional sequential infusion (different substance/drug), up to 1 hour (List separately in addition to code for primary procedure)	CPT-4	Procedure
96420	CHEMOTX ADMIN INTRA-ART; PUSH TECH	CPT-4	Procedure
96422	CHEMOTX ADMIN INTRA-ART; INFUSION TECH TO 1 HR	CPT-4	Procedure
96423	Chemotherapy administration, intra-arterial; infusion technique, each additional hour up to 8 hours (List separately in addition to code for primary procedure)	CPT-4	Procedure
96425	Chemotherapy administration, intra-arterial; infusion technique, initiation of prolonged infusion (more than 8 hours), requiring the use of a portable or implantable pump	CPT-4	Procedure
96440	CHEMOTX-PLEURAL CAVITY-REQ & INCL THORACENTESIS	CPT-4	Procedure
96445	Chemotherapy administration into peritoneal cavity, requiring and including peritoneocentesis	CPT-4	Procedure
96446	Chemotherapy administration into the peritoneal cavity via indwelling port or catheter	CPT-4	Procedure
96450	Chemotherapy administration, into CNS (eg, intrathecal), requiring and including spinal puncture	CPT-4	Procedure
96520	Refilling and maintenance of portable pump	CPT-4	Procedure
96521	Refilling and maintenance of portable pump	CPT-4	Procedure
96522	Refilling and maintenance of implantable pump or reservoir for drug delivery, systemic (eg, intravenous, intra-arterial)	CPT-4	Procedure
96523	Irrigation of implanted venous access device for drug delivery systems	CPT-4	Procedure
96530	Refilling and maintenance of implantable pump or reservoir for drug delivery, systemic (eg, intravenous, intra-arterial)	CPT-4	Procedure
96542	CHEMOTX INJ SUBARACH/INTRAVENTRIC-1/MX AGENTS	CPT-4	Procedure
96545	Provision of chemotherapy agent	CPT-4	Procedure
96549	UNLISTED CHEMOTX PROC	CPT-4	Procedure
99555	Home infusion for chemotherapy, per visit	CPT-4	Procedure
A4555	Electrode/transducer for use with electrical stimulation device used for cancer treatment, replacement only	HCPCS	Procedure
A4650	Implantable radiation dosimeter, each	HCPCS	Procedure
C8953	Chemotherapy administration, intravenous; push technique	HCPCS	Procedure
C8954	Chemotherapy administration, intravenous; infusion technique, up to one hour	HCPCS	Procedure
C8955	Chemotherapy administration, intravenous; infusion technique, each additional hour (List separately in addition to C8954)	HCPCS	Procedure

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Code	Description	Code Type	Code Category
C9021	Injection, obinutuzumab, 10 mg	HCPCS	Procedure
C9025	Injection, ramucirumab, 5 mg	HCPCS	Procedure
C9131	Injection, ado-trastuzumab emtansine, 1 mg	HCPCS	Procedure
C9259	Injection, pralatrexate, 1 mg	HCPCS	Procedure
C9260	Injection, ofatumumab, 10 mg	HCPCS	Procedure
C9262	Fludarabine phosphate, oral, 1 mg	HCPCS	Procedure
C9265	Injection, romidepsin, 1 mg	HCPCS	Procedure
C9273	Sipuleucel-T, minimum of 50 million autologous CD54+ cells activated with PAP-GM-CSF, including leukapheresis and all other preparatory procedures, per infusion	HCPCS	Procedure
C9276	Injection, cabazitaxel, 1 mg	HCPCS	Procedure
C9280	Injection, eribulin mesylate, 1 mg	HCPCS	Procedure
C9284	Injection, ipilimumab, 1 mg	HCPCS	Procedure
C9287	Injection, brentuximab vedotin, 1 mg	HCPCS	Procedure
C9289	Injection, asparaginase Erwinia chrysanthemi, 1,000 IU	HCPCS	Procedure
C9292	Injection, pertuzumab, 10 mg	HCPCS	Procedure
C9295	Injection, carfilzomib, 1 mg	HCPCS	Procedure
C9296	Injection, ziv-aflibercept, 1 mg	HCPCS	Procedure
C9297	Injection, omacetaxine mepesuccinate, 0.01 mg	HCPCS	Procedure
C9414	Etoposide; oral, 50 mg, brand name	HCPCS	Procedure
C9415	Doxorubicin HCl, 10 mg, brand name	HCPCS	Procedure
C9416	BCG (intravesical) per instillation, brand name	HCPCS	Procedure
C9417	Bleomycin sulfate, 15 units, brand name	HCPCS	Procedure
C9418	Cisplatin, powder or solution, per 10 mg, brand name	HCPCS	Procedure
C9419	Injection, cladribine, per 1 mg, brand name	HCPCS	Procedure
C9420	Cyclophosphamide, 100 mg, brand name	HCPCS	Procedure
C9421	Cyclophosphamide, lyophilized, 100 mg, brand name	HCPCS	Procedure
C9422	Cytarabine, 100 mg, brand name	HCPCS	Procedure
C9423	Dacarbazine, 100 mg, brand name	HCPCS	Procedure
C9424	Daunorubicin, 10 mg	HCPCS	Procedure
C9425	Etoposide, 10 mg, brand name	HCPCS	Procedure
C9426	Floxuridine, 500 mg, brand name	HCPCS	Procedure
C9427	Ifosfamide, 1 gm, brand name	HCPCS	Procedure
C9428	Mesna, 200 mg, brand name	HCPCS	Procedure
C9429	Idarubicin HCl, 5 mg, brand name	HCPCS	Procedure
C9430	Leuprolide acetate, per 1 mg, brand name	HCPCS	Procedure
C9431	Paclitaxel, 30 mg, brand name	HCPCS	Procedure
C9432	Mitomycin, 5 mg, brand name	HCPCS	Procedure
C9433	Thiotepa, 15 mg, brand name	HCPCS	Procedure
C9434	Supply of radiopharmaceutical diagnostic imaging agent, Gallium Ga 67, per mci, brand name	HCPCS	Procedure
C9435	Injection, gonadorelin HCl, brand name, per 100 mcg	HCPCS	Procedure
C9436	Azathioprine, parenteral, brand name, per 100 mg	HCPCS	Procedure
C9437	Carmustine, brand name, 100 mg	HCPCS	Procedure
C9442	Injection, belinostat, 10 mg	HCPCS	Procedure

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
C9725	Placement of endorectal intracavitary applicator for high intensity brachytherapy	HCPCS	Procedure
C9726	Placement and removal (if performed) of applicator into breast for intraoperative radiation therapy, add-on to primary breast procedure	HCPCS	Procedure
C9728	Placement of interstitial device(s) for radiation therapy/surgery guidance (e.g., fiducial markers, dosimeter), for other than the following sites (any approach): abdomen, pelvis, prostate, retroperitoneum, thorax, single or multiple	HCPCS	Procedure
D4381	localized delivery of antimicrobial agents via a controlled release vehicle into diseased crevicular tissue, per tooth	HCPCS	Procedure
D5983	radiation carrier	HCPCS	Procedure
D5984	radiation shield	HCPCS	Procedure
D5985	radiation cone locator	HCPCS	Procedure
E0766	Electrical stimulation device used for cancer treatment, includes all accessories, any type	HCPCS	Procedure
G0210	PET imaging whole body; diagnosis; lung cancer, nonsmall cell	HCPCS	Procedure
G0211	PET imaging whole body; initial staging; lung cancer; nonsmall cell	HCPCS	Procedure
G0212	PET imaging whole body; restaging; lung cancer; nonsmall	HCPCS	Procedure
G0215	PET imaging whole body; restaging; colorectal cancer	HCPCS	Procedure
G0223	PET imaging whole body or regional; diagnosis; head and neck cancer; excluding thyroid and CNS cancers	HCPCS	Procedure
G0224	PET imaging whole body or regional; initial staging; head and neck cancer; excluding thyroid and CNS cancers	HCPCS	Procedure
G0225	PET imaging whole body or regional; restaging; head and neck cancer, excluding thyroid and CNS cancers	HCPCS	Procedure
G0226	PET imaging whole body; diagnosis; esophageal cancer	HCPCS	Procedure
G0227	PET imaging whole body; initial staging; esophageal cancer	HCPCS	Procedure
G0228	PET imaging whole body; restaging; esophageal cancer	HCPCS	Procedure
G0231	PET, whole body, for recurrence of colorectal or colorectal metastatic cancer; gamma cameras only	HCPCS	Procedure
G0233	PET, whole body, for recurrence of melanoma; gamma cameras only	HCPCS	Procedure
G0234	PET, regional or whole body, for solitary pulmonary nodule following CT or for initial staging of pathologically diagnosed nonsmall cell lung cancer; gamma cameras only	HCPCS	Procedure
G0252	PET imaging, full and partial-ring PET scanners only, for initial diagnosis of breast cancer and/or surgical planning for breast cancer (e.g., initial staging of axillary lymph nodes)	HCPCS	Procedure
G0253	PET imaging for breast cancer, full and partial-ring PET scanners only, staging/restaging of local regional recurrence or distant metastases (i.e., staging/restaging after or prior to course of treatment)	HCPCS	Procedure
G0254	PET imaging for breast cancer, full and partial ring PET scanners only, evaluation of response to treatment, performed during course of treatment	HCPCS	Procedure
G0292	Administration(s) of experimental drug(s) only in a medicare qualifying clinical trial (includes administration for chemotherapy and other types of therapy via infusion and/or other than infusion), per day	HCPCS	Procedure
G0296	Counseling visit to discuss need for lung cancer screening using low dose CT scan (LDCT) (service is for eligibility determination and shared decision making)	HCPCS	Procedure
G0355	Chemotherapy administration, subcutaneous or intramuscular nonhormonal antineoplastic	HCPCS	Procedure

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
G0359	Chemotherapy administration, intravenous infusion technique; up to one hour, single or initial substance/drug	HCPCS	Procedure
G0361	Initiation of prolonged chemotherapy infusion (more than eight hours), requiring use of a portable or implantable pump	HCPCS	Procedure
G0458	Low dose rate (LDR) prostate brachytherapy services, composite rate	HCPCS	Procedure
G0464	Colorectal cancer screening; stool-based DNA and fecal occult hemoglobin (e.g., KRAS, NDRG4 and BMP3)	HCPCS	Procedure
G6001	Ultrasonic guidance for placement of radiation therapy fields	HCPCS	Procedure
G6002	Stereoscopic x-ray guidance for localization of target volume for the delivery of radiation therapy	HCPCS	Procedure
G6003	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: up to 5 mev	HCPCS	Procedure
G6004	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: 6-10 mev	HCPCS	Procedure
G6005	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: 11-19 mev	HCPCS	Procedure
G6006	Radiation treatment delivery, single treatment area, single port or parallel opposed ports, simple blocks or no blocks: 20 mev or greater	HCPCS	Procedure
G6007	Radiation treatment delivery, two separate treatment areas, three or more ports on a single treatment area, use of multiple blocks: up to 5 mev	HCPCS	Procedure
G6008	Radiation treatment delivery, two separate treatment areas, three or more ports on a single treatment area, use of multiple blocks: 6-10 mev	HCPCS	Procedure
G6009	Radiation treatment delivery, two separate treatment areas, three or more ports on a single treatment area, use of multiple blocks: 11-19 mev	HCPCS	Procedure
G6010	Radiation treatment delivery, two separate treatment areas, three or more ports on a single treatment area, use of multiple blocks: 20 mev or greater	HCPCS	Procedure
G6011	Radiation treatment delivery, three or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; up to 5 mev	HCPCS	Procedure
G6012	Radiation treatment delivery, three or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 6-10 mev	HCPCS	Procedure
G6013	Radiation treatment delivery, three or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 11-19 mev	HCPCS	Procedure
G6014	Radiation treatment delivery, three or more separate treatment areas, custom blocking, tangential ports, wedges, rotational beam, compensators, electron beam; 20 mev or greater	HCPCS	Procedure
G6015	Intensity modulated treatment delivery, single or multiple fields/arcs,via narrow spatially and temporally modulated beams, binary, dynamic MLC, per treatment session	HCPCS	Procedure
G6016	Compensator-based beam modulation treatment delivery of inverse planned treatment using three or more high resolution (milled or cast) compensator, convergent beam modulated fields, per treatment session	HCPCS	Procedure
G6017	Intra-fraction localization and tracking of target or patient motion during delivery of radiation therapy (e.g., 3D positional tracking, gating, 3D surface tracking), each fraction of treatment	HCPCS	Procedure

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Code	Description	Code Type	Code Category
G8371	Chemotherapy documented as not received or prescribed for Stage III colon cancer patients	HCPCS	Procedure
G8372	Chemotherapy documented as received or prescribed for Stage III colon cancer patients	HCPCS	Procedure
G8373	Chemotherapy plan documented prior to chemotherapy administration	HCPCS	Procedure
G8374	Chemotherapy plan not documented prior to chemotherapy administration	HCPCS	Procedure
G8376	Clinician documentation that breast cancer patient was not eligible for tamoxifen or aromatase inhibitor therapy measure	HCPCS	Procedure
G8377	Clinician documentation that colon cancer patient is not eligible for chemotherapy measure	HCPCS	Procedure
G8379	Documentation of radiation therapy recommended within 12 months of first office visit	HCPCS	Procedure
G8380	For patients with ER or PR positive, Stage IC-III breast cancer, clinician did not document that the patient received or was prescribed tamoxifen or aromatase inhibitor	HCPCS	Procedure
G8381	For patients with ER or PR positive, Stage IC-III breast cancer, clinician documented or prescribed that the patient is receiving tamoxifen or aromatase inhibitor	HCPCS	Procedure
G8389	Myelodysplastic syndrome (MDS) patients with no documentation of iron stores prior to receiving erythropoietin therapy	HCPCS	Procedure
G8464	Clinician documented that prostate cancer patient is not an eligible candidate for adjuvant hormonal therapy; low or intermediate risk of recurrence or risk of recurrence not determined	HCPCS	Procedure
G8465	High or very high risk of recurrence of prostate cancer	HCPCS	Procedure
G8518	Clinical stage prior to surgery for lung cancer and esophageal cancer resection was recorded	HCPCS	Procedure
G8519	Clinician documented that patient was not eligible for clinical stage prior to surgery for lung cancer and esophageal cancer resection measure	HCPCS	Procedure
G8520	Clinician stage prior to surgery for lung cancer and esophageal cancer resection was not recorded, reason not specified	HCPCS	Procedure
G8875	Clinician diagnosed breast cancer preoperatively by a minimally invasive biopsy method	HCPCS	Procedure
G8881	Stage of breast cancer is greater than T1N0M0 or T2N0M0	HCPCS	Procedure
G8927	Adjuvant chemotherapy referred, prescribed or previously received for AJCC stage III, colon cancer	HCPCS	Procedure
G8944	AJCC melanoma cancer stage 0 through IIC melanoma	HCPCS	Procedure
G9021	Chemotherapy assessment for nausea and/or vomiting, patient reported, performed at the time of chemotherapy administration; assessment Level 1: not at all (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9022	Chemotherapy assessment for nausea and/or vomiting, patient reported, performed at the time of chemotherapy administration; assessment Level 2: a little (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9023	Chemotherapy assessment for nausea and/or vomiting, patient reported, performed at the time of chemotherapy administration; assessment Level 3: quite a bit (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9024	Chemotherapy assessment for nausea and/or vomiting, patient reported, performed at the time of chemotherapy administration; assessment Level 4: very much (for use in a Medicare-approved demonstration project)	HCPCS	Procedure

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Code	Description	Code Type	Code Category
G9025	Chemotherapy assessment for pain, patient reported, performed at the time of chemotherapy administration; assessment Level 1: not at all (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9026	Chemotherapy assessment for pain, patient reported, performed at the time of chemotherapy administration; assessment Level 2: a little (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9027	Chemotherapy assessment for pain, patient reported, performed at the time of chemotherapy administration; assessment Level 3: quite a bit (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9028	Chemotherapy assessment for pain, patient reported, performed at the time of chemotherapy administration; assessment Level 4: very much (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9029	Chemotherapy assessment for lack of energy (fatigue), patient reported, performed at the time of chemotherapy administration; assessment Level 1: not at all (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9030	Chemotherapy assessment for lack of energy (fatigue), patient reported, performed at the time of chemotherapy administration; assessment Level 2: a little (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9031	Chemotherapy assessment for lack of energy (fatigue), patient reported, performed at the time of chemotherapy administration, assessment Level 3: quite a bit (for use in a Medicare approved demonstration project)	HCPCS	Procedure
G9032	Chemotherapy assessment for lack of energy (fatigue), patient reported, performed at the time of chemotherapy administration, assessment Level 4: very much (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9050	Oncology; primary focus of visit; work-up, evaluation, or staging at the time of cancer diagnosis or recurrence (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9051	Oncology; primary focus of visit; treatment decision-making after disease is staged or restaged, discussion of treatment options, supervising/coordinating active cancer-directed therapy or managing consequences of cancer-directed therapy (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9052	Oncology; primary focus of visit; surveillance for disease recurrence for patient who has completed definitive cancer-directed therapy and currently lacks evidence of recurrent disease; cancer-directed therapy might be considered in the future (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9053	Oncology; primary focus of visit; expectant management of patient with evidence of cancer for whom no cancer-directed therapy is being administered or arranged at present; cancer-directed therapy might be considered in the future (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9054	Oncology; primary focus of visit; supervising, coordinating or managing care of patient with terminal cancer or for whom other medical illness prevents further cancer treatment; includes symptom management, end-of-life care planning, management of palliative therapies (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9055	Oncology; primary focus of visit; other, unspecified service not otherwise listed (for use in a Medicare-approved demonstration project)	HCPCS	Procedure

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Code	Description	Code Type	Code Category
G9056	Oncology; practice guidelines; management adheres to guidelines (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9057	Oncology; practice guidelines; management differs from guidelines as a result of patient enrollment in an institutional review board-approved clinical trial (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9058	Oncology; practice guidelines; management differs from guidelines because the treating physician disagrees with guideline recommendations (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9059	Oncology; practice guidelines; management differs from guidelines because the patient, after being offered treatment consistent with guidelines, has opted for alternative treatment or management, including no treatment (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9060	Oncology; practice guidelines; management differs from guidelines for reason(s) associated with patient comorbid illness or performance status not factored into guidelines (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9061	Oncology; practice guidelines; patient's condition not addressed by available guidelines (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9062	Oncology; practice guidelines; management differs from guidelines for other reason(s) not listed (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9063	Oncology; disease status; limited to nonsmall cell lung cancer; extent of disease initially established as Stage I (prior to neoadjuvant therapy, if any) with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9064	Oncology; disease status; limited to nonsmall cell lung cancer; extent of disease initially established as Stage II (prior to neoadjuvant therapy, if any) with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9065	Oncology; disease status; limited to nonsmall cell lung cancer; extent of disease initially established as Stage III a (prior to neoadjuvant therapy, if any) with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9066	Oncology; disease status; limited to nonsmall cell lung cancer; Stage III B-IV at diagnosis, metastatic, locally recurrent, or progressive (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9067	Oncology; disease status; limited to nonsmall cell lung cancer; extent of disease unknown, staging in progress, or not listed (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9069	Oncology; disease status; small cell lung cancer, limited to small cell and combined small cell/nonsmall cell; extensive Stage at diagnosis, metastatic, locally recurrent, or progressive (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9070	Oncology; disease status; small cell lung cancer, limited to small cell and combined small cell/nonsmall; extent of disease unknown, staging in progress, or not listed (for use in a Medicare-approved demonstration project)	HCPCS	Procedure

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Code	Description	Code Type	Code Category
G9071	Oncology; disease status; invasive female breast cancer (does not include ductal carcinoma in situ); adenocarcinoma as predominant cell type; Stage I or Stage IIA-IIB; or T3, N1, M0; and ER and/or PR positive; with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9072	Oncology; disease status; invasive female breast cancer (does not include ductal carcinoma in situ); adenocarcinoma as predominant cell type; Stage I, or Stage IIA-IIB; or T3, N1, M0; and ER and PR negative; with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9073	Oncology; disease status; invasive female breast cancer (does not include ductal carcinoma in situ); adenocarcinoma as predominant cell type; Stage IIIA-IIIB; and not T3, N1, M0; and ER and/or PR positive; with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9074	Oncology; disease status; invasive female breast cancer (does not include ductal carcinoma in situ); adenocarcinoma as predominant cell type; Stage IIIA-IIIB; and not T3, N1, M0; and ER and PR negative; with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9075	Oncology; disease status; invasive female breast cancer (does not include ductal carcinoma in situ); adenocarcinoma as predominant cell type; M1 at diagnosis, metastatic, locally recurrent, or progressive (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9076	Oncology; disease status; invasive female breast cancer (does not include ductal carcinoma in situ); adenocarcinoma as predominant cell type; extent of disease unknown, under evaluation, presurgical or not listed (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9077	Oncology; disease status; prostate cancer, limited to adenocarcinoma as predominant cell type; T1-T2c and Gleason 2-7 and PSA < or equal to 20 at diagnosis with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9078	Oncology; disease status; prostate cancer, limited to adenocarcinoma as predominant cell type; T2 or T3a Gleason 8-10 or PSA > 20 at diagnosis with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9079	Oncology; disease status; prostate cancer, limited to adenocarcinoma as predominant cell type; T3b-T4, any N; any T, N1 at diagnosis with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9080	Oncology; disease status; prostate cancer, limited to adenocarcinoma; after initial treatment with rising PSA or failure of PSA decline (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9081	Oncology; disease status; prostate cancer, limited to adenocarcinoma, non-castrate, incompetely castrate; clinical metastases or M1 at diagnosis (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9082	Oncology; disease status; prostate cancer, limited to adenocarcinoma; castrate; clinical metastases or M1 at diagnosis (for use in a Medicare-approved demonstration project)	HCPCS	Procedure

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Code	Description	Code Type	Code Category
G9083	Oncology; disease status; prostate cancer, limited to adenocarcinoma; extent of disease unknown, staging in progress, or not listed (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9084	Oncology; disease status; colon cancer, limited to invasive cancer, adenocarcinoma as predominant cell type; extent of disease initially established as T1-3, N0, M0 with no evidence of disease progression, recurrence or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9085	Oncology; disease status; colon cancer, limited to invasive cancer, adenocarcinoma as predominant cell type; extent of disease initially established as T4, N0, M0 with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9086	Oncology; disease status; colon cancer, limited to invasive cancer, adenocarcinoma as predominant cell type; extent of disease initially established as T1-4, N1-2, M0 with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9087	Oncology; disease status; colon cancer, limited to invasive cancer, adenocarcinoma as predominant cell type; M1 at diagnosis, metastatic, locally recurrent, or progressive with current clinical, radiologic, or biochemical evidence of disease (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9088	Oncology; disease status; colon cancer, limited to invasive cancer, adenocarcinoma as predominant cell type; M1 at diagnosis, metastatic, locally recurrent, or progressive without current clinical, radiologic, or biochemical evidence of disease (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9089	Oncology; disease status; colon cancer, limited to invasive cancer, adenocarcinoma as predominant cell type; extent of disease unknown, staging in progress or not listed (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9090	Oncology; disease status; rectal cancer, limited to invasive cancer, adenocarcinoma as predominant cell type; extent of disease initially established as T1-2, N0, M0 (prior to neoadjuvant therapy, if any) with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9091	Oncology; disease status; rectal cancer, limited to invasive cancer, adenocarcinoma as predominant cell type; extent of disease initially established as T3, N0, M0 (prior to neoadjuvant therapy, if any) with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9092	Oncology; disease status; rectal cancer, limited to invasive cancer, adenocarcinoma as predominant cell type; extent of disease initially established as T1-3, N1-2, M0 (prior to neoadjuvant therapy, if any) with no evidence of disease progression, recurrence or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9093	Oncology; disease status; rectal cancer, limited to invasive cancer, adenocarcinoma as predominant cell type; extent of disease initially established as T4, any N, M0 (prior to neoadjuvant therapy, if any) with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure

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Code	Description	Code Type	Code Category
G9094	Oncology; disease status; rectal cancer, limited to invasive cancer, adenocarcinoma as predominant cell type; M1 at diagnosis, metastatic, locally recurrent, or progressive (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9095	Oncology; disease status; rectal cancer, limited to invasive cancer, adenocarcinoma as predominant cell type; extent of disease unknown, staging in progress or not listed (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9096	Oncology; disease status; esophageal cancer, limited to adenocarcinoma or squamous cell carcinoma as predominant cell type; extent of disease initially established as T1-T3, N0-N1 or NX (prior to neoadjuvant therapy, if any) with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9097	Oncology; disease status; esophageal cancer, limited to adenocarcinoma or squamous cell carcinoma as predominant cell type; extent of disease initially established as T4, any N, M0 (prior to neoadjuvant therapy, if any) with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9098	Oncology; disease status; esophageal cancer, limited to adenocarcinoma or squamous cell carcinoma as predominant cell type; M1 at diagnosis, metastatic, locally recurrent, or progressive (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9099	Oncology; disease status; esophageal cancer, limited to adenocarcinoma or squamous cell carcinoma as predominant cell type; extent of disease unknown, staging in progress, or not listed (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9100	Oncology; disease status; gastric cancer, limited to adenocarcinoma as predominant cell type; post R0 resection (with or without neoadjuvant therapy) with no evidence of disease recurrence, progression, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9101	Oncology; disease status; gastric cancer, limited to adenocarcinoma as predominant cell type; post R1 or R2 resection (with or without neoadjuvant therapy) with no evidence of disease progression, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9102	Oncology; disease status; gastric cancer, limited to adenocarcinoma as predominant cell type; clinical or pathologic M0, unresectable with no evidence of disease progression, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9103	Oncology; disease status; gastric cancer, limited to adenocarcinoma as predominant cell type; clinical or pathologic M1 at diagnosis, metastatic, locally recurrent, or progressive (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9104	Oncology; disease status; gastric cancer, limited to adenocarcinoma as predominant cell type; extent of disease unknown, staging in progress, or not listed (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9105	Oncology; disease status; pancreatic cancer, limited to adenocarcinoma as predominant cell type; post R0 resection without evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9106	Oncology; disease status; pancreatic cancer, limited to adenocarcinoma; post R1 or R2 resection with no evidence of disease progression, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure

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Code	Description	Code Type	Code Category
G9107	Oncology; disease status; pancreatic cancer, limited to adenocarcinoma; unresectable at diagnosis, M1 at diagnosis, metastatic, locally recurrent, or progressive (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9108	Oncology; disease status; pancreatic cancer, limited to adenocarcinoma; extent of disease unknown, staging in progress, or not listed (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9109	Oncology; disease status; head and neck cancer, limited to cancers of oral cavity, pharynx and larynx with squamous cell as predominant cell type; extent of disease initially established as T1-T2 and N0, M0 (prior to neoadjuvant therapy, if any) with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9110	Oncology; disease status; head and neck cancer, limited to cancers of oral cavity, pharynx and larynx with squamous cell as predominant cell type; extent of disease initially established as T3-4 and/or N1-3, M0 (prior to neoadjuvant therapy, if any) with no evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9111	Oncology; disease status; head and neck cancer, limited to cancers of oral cavity, pharynx and larynx with squamous cell as predominant cell type; M1 at diagnosis, metastatic, locally recurrent, or progressive (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9112	Oncology; disease status; head and neck cancer, limited to cancers of oral cavity, pharynx and larynx with squamous cell as predominant cell type; extent of disease unknown, staging in progress, or not listed (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9113	Oncology; disease status; ovarian cancer, limited to epithelial cancer; pathologic Stage IA-B (Grade 1) without evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9114	Oncology; disease status; ovarian cancer, limited to epithelial cancer; pathologic Stage IA-B (Grade 2-3); or Stage IC (all grades); or Stage II; without evidence of disease progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9115	Oncology; disease status; ovarian cancer, limited to epithelial cancer; pathologic Stage III-IV; without evidence of progression, recurrence, or metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9116	Oncology; disease status; ovarian cancer, limited to epithelial cancer; evidence of disease progression, or recurrence, and/or platinum resistance (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9117	Oncology; disease status; ovarian cancer, limited to epithelial cancer; extent of disease unknown, staging in progress, or not listed (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9123	Oncology; disease status; chronic myelogenous leukemia, limited to Philadelphia chromosome positive and/or BCR-ABL positive; chronic phase not in hematologic, cytogenetic, or molecular remission (for use in a Medicare-approved demonstration project)	HCPCS	Procedure

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
G9124	Oncology; disease status; chronic myelogenous leukemia, limited to Philadelphia chromosome positive and /or BCR-ABL positive; accelerated phase not in hematologic cytogenetic, or molecular remission (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9125	Oncology; disease status; chronic myelogenous leukemia, limited to Philadelphia chromosome positive and/or BCR-ABL positive; blast phase not in hematologic, cytogenetic, or molecular remission (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9128	Oncology; disease status; limited to multiple myeloma, systemic disease; smoldering, Stage I (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9129	Oncology; disease status; limited to multiple myeloma, systemic disease; Stage II or higher (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9130	Oncology; disease status; limited to multiple myeloma, systemic disease; extent of disease unknown, staging in progress, or not listed (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9131	Oncology; disease status; invasive female breast cancer (does not include ductal carcinoma in situ); adenocarcinoma as predominant cell type; extent of disease unknown, staging in progress, or not listed (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9132	Oncology; disease status; prostate cancer, limited to adenocarcinoma; hormone-refractory/androgen-independent (e.g., rising PSA on antiandrogen therapy or postorchiectomy); clinical metastases (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9133	Oncology; disease status; prostate cancer, limited to adenocarcinoma; hormone-responsive; clinical metastases or M1 at diagnosis (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9134	Oncology; disease status; non-Hodgkin's lymphoma, any cellular classification; Stage I, II at diagnosis, not relapsed, not refractory (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9135	Oncology; disease status; non-Hodgkin's lymphoma, any cellular classification; Stage III, IV, not relapsed, not refractory (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9136	Oncology; disease status; non-Hodgkin's lymphoma, transformed from original cellular diagnosis to a second cellular classification (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9137	Oncology; disease status; non-Hodgkin's lymphoma, any cellular classification; relapsed/refractory (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9138	Oncology; disease status; non-Hodgkin's lymphoma, any cellular classification; diagnostic evaluation, stage not determined, evaluation of possible relapse or nonresponse to therapy, or not listed (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
G9139	Oncology; disease status; chronic myelogenous leukemia, limited to Philadelphia chromosome positive and/or BCR-ABL positive; extent of disease unknown, staging in progress, not listed (for use in a Medicare-approved demonstration project)	HCPCS	Procedure
J0207	Injection, amifostine, 500 mg	HCPCS	Procedure
J1260	Injection, dolasetron mesylate, 10 mg	HCPCS	Procedure
J8498	Antiemetic drug, rectal/suppository, not otherwise specified	HCPCS	Procedure

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
J8510	Busulfan; oral, 2 mg	HCPCS	Procedure
J8520	Capecitabine, oral, 150 mg	HCPCS	Procedure
J8521	Capecitabine, oral, 500 mg	HCPCS	Procedure
J8530	Cyclophosphamide, oral, 25 mg	HCPCS	Procedure
J8560	Etoposide, oral, 50 mg	HCPCS	Procedure
J8562	Fludarabine phosphate, oral, 10 mg	HCPCS	Procedure
J8597	Antiemetic drug, oral, not otherwise specified	HCPCS	Procedure
J8600	Melphalan, oral 2 mg	HCPCS	Procedure
J8610	Methotrexate, oral, 2.5 mg	HCPCS	Procedure
J8700	Temozolomide, oral, 5 mg	HCPCS	Procedure
J8705	Topotecan, oral, 0.25 mg	HCPCS	Procedure
J8999	Prescription drug, oral, chemotherapeutic, nos	HCPCS	Procedure
J9000	Injection, doxorubicin HCl, 10 mg	HCPCS	Procedure
J9002	Injection, doxorubicin hydrochloride, liposomal, Doxil, 10 mg	HCPCS	Procedure
J9015	Injection, aldesleukin, per single use vial	HCPCS	Procedure
J9017	Injection, arsenic trioxide, 1 mg	HCPCS	Procedure
J9019	Injection, asparaginase (Erwinaze), 1,000 IU	HCPCS	Procedure
J9020	Injection, asparaginase, not otherwise specified, 10,000 units	HCPCS	Procedure
J9025	Injection, azacitidine, 1 mg	HCPCS	Procedure
J9031	BCG (intravesical) per instillation	HCPCS	Procedure
J9033	Injection, bendamustine HCl (Treanda), 1 mg	HCPCS	Procedure
J9040	Injection, bleomycin sulfate, 15 units	HCPCS	Procedure
J9042	Injection, brentuximab vedotin, 1 mg	HCPCS	Procedure
J9043	Injection, cabazitaxel, 1 mg	HCPCS	Procedure
J9045	Injection, carboplatin, 50 mg	HCPCS	Procedure
J9047	Injection, carfilzomib, 1 mg	HCPCS	Procedure
J9050	Injection, carmustine, 100 mg	HCPCS	Procedure
J9060	Injection, cisplatin, powder or solution, 10 mg	HCPCS	Procedure
J9062	Cisplatin, 50 mg	HCPCS	Procedure
J9065	Injection, cladribine, per 1 mg	HCPCS	Procedure
J9070	Cyclophosphamide, 100 mg	HCPCS	Procedure
J9080	Cyclophosphamide, 200 mg	HCPCS	Procedure
J9090	Cyclophosphamide, 500 mg	HCPCS	Procedure
J9091	Cyclophosphamide, 1 g	HCPCS	Procedure
J9092	Cyclophosphamide, 2 g	HCPCS	Procedure
J9093	Cyclophosphamide, lyophilized, 100 mg	HCPCS	Procedure
J9094	Cyclophosphamide, lyophilized, 200 mg	HCPCS	Procedure
J9095	Cyclophosphamide, lyophilized, 500 mg	HCPCS	Procedure
J9096	Cyclophosphamide, lyophilized, 1 g	HCPCS	Procedure
J9097	Cyclophosphamide, lyophilized, 2 g	HCPCS	Procedure
J9100	Cytarabine, 100 mg	HCPCS	Procedure
J9110	Injection, cytarabine, 500 mg	HCPCS	Procedure
J9120	Injection, dactinomycin, 0.5 mg	HCPCS	Procedure
J9130	Dacarbazine, 100 mg	HCPCS	Procedure

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
J9140	Dacarbazine, 200 mg	HCPCS	Procedure
J9150	Injection, daunorubicin, 10 mg	HCPCS	Procedure
J9151	Injection, daunorubicin citrate, liposomal formulation, 10 mg	HCPCS	Procedure
J9165	Injection, diethylstilbestrol diphosphate, 250 mg	HCPCS	Procedure
J9179	Injection, eribulin mesylate, 0.1 mg	HCPCS	Procedure
J9181	Injection, etoposide, 10 mg	HCPCS	Procedure
J9185	Injection, fludarabine phosphate, 50 mg	HCPCS	Procedure
J9190	Injection, fluorouracil, 500 mg	HCPCS	Procedure
J9200	Floxuridine, 500 mg	HCPCS	Procedure
J9201	Injection, gemcitabine HCl, not otherwise specified, 200 mg	HCPCS	Procedure
J9202	Goserelin acetate implant, per 3.6 mg	HCPCS	Procedure
J9206	Injection, irinotecan, 20 mg	HCPCS	Procedure
J9207	Injection, ixabepilone, 1 mg	HCPCS	Procedure
J9208	Injection, ifosfamide, 1 g	HCPCS	Procedure
J9209	Injection, mesna, 200 mg	HCPCS	Procedure
J9211	Idarubicin HCl, 5 mg	HCPCS	Procedure
J9213	Injection, interferon, alfa-2a, recombinant, 3 million units	HCPCS	Procedure
J9214	Injection, interferon, alfa-2b, recombinant, 1 million units	HCPCS	Procedure
J9215	Injection, interferon, alfa-N3, (human leukocyte derived), 250,000 IU	HCPCS	Procedure
J9216	Injection, interferon, gamma 1-b, 3 million units	HCPCS	Procedure
J9217	Leuprolide acetate (for depot suspension), 7.5 mg	HCPCS	Procedure
J9218	Leuprolide acetate, per 1 mg	HCPCS	Procedure
J9219	Leuprolide acetate implant, 65 mg	HCPCS	Procedure
J9225	Histrelin implant (Vantas), 50 mg	HCPCS	Procedure
J9226	Histrelin implant (Supprelin LA), 50 mg	HCPCS	Procedure
J9228	Injection, ipilimumab, 1 mg	HCPCS	Procedure
J9230	Injection, mechlorethamine HCl, (nitrogen mustard), 10 mg	HCPCS	Procedure
J9245	Injection, melphalan hydrochloride, not otherwise specified, 50 mg	HCPCS	Procedure
J9250	Methotrexate sodium, 5 mg	HCPCS	Procedure
J9260	Methotrexate sodium, 50 mg	HCPCS	Procedure
J9262	Injection, omacetaxine mepesuccinate, 0.01 mg	HCPCS	Procedure
J9263	Injection, oxaliplatin, 0.5 mg	HCPCS	Procedure
J9265	Injection, paclitaxel, 30 mg	HCPCS	Procedure
J9266	Injection, pegaspargase, per single dose vial	HCPCS	Procedure
J9267	Injection, paclitaxel, 1 mg	HCPCS	Procedure
J9268	Pentostatin, per 10 mg	HCPCS	Procedure
J9270	Plicamycin, 2.5 mg	HCPCS	Procedure
J9280	Mitomycin, 5 mg	HCPCS	Procedure
J9290	Mitomycin, 20 mg	HCPCS	Procedure
J9291	Mitomycin, 40 mg	HCPCS	Procedure
J9293	Injection, mitoxantrone HCl, per 5 mg	HCPCS	Procedure
J9300	Injection, gemtuzumab ozogamicin, 5 mg	HCPCS	Procedure
J9301	Injection, obinutuzumab, 10 mg	HCPCS	Procedure
J9302	Injection, ofatumumab, 10 mg	HCPCS	Procedure

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
J9303	Injection, panitumumab, 10 mg	HCPCS	Procedure
J9306	Injection, pertuzumab, 1 mg	HCPCS	Procedure
J9310	Injection, rituximab, 100 mg	HCPCS	Procedure
J9315	Injection, romidepsin, 1 mg	HCPCS	Procedure
J9320	Streptozocin, 1 g	HCPCS	Procedure
J9328	Injection, temozolomide, 1 mg	HCPCS	Procedure
J9330	Injection, temsirolimus, 1 mg	HCPCS	Procedure
J9340	Thiotepa, 15 mg	HCPCS	Procedure
J9350	Injection, topotecan, 4 mg	HCPCS	Procedure
J9351	Injection, topotecan, 0.1 mg	HCPCS	Procedure
J9354	Injection, ado-trastuzumab emtansine, 1 mg	HCPCS	Procedure
J9360	Injection, vinblastine sulfate, 1 mg	HCPCS	Procedure
J9370	Vincristine sulfate, 1 mg	HCPCS	Procedure
J9371	Injection, vincristine sulfate liposome, 1 mg	HCPCS	Procedure
J9375	Vincristine sulfate, 2 mg	HCPCS	Procedure
J9380	Vincristine sulfate, 5 mg	HCPCS	Procedure
J9390	Vinorelbine tartrate, per 10 mg	HCPCS	Procedure
J9600	Porfimer sodium, 75 mg	HCPCS	Procedure
J9999	Not otherwise classified, antineoplastic drugs	HCPCS	Procedure
Q0083	Chemotherapy administration by other than infusion technique only (e.g., subcutaneous, intramuscular, push), per visit	HCPCS	Procedure
Q0084	Chemotherapy administration by infusion technique only, per visit	HCPCS	Procedure
Q0085	Chemotherapy administration by both infusion technique and other technique(s) (e.g. subcutaneous, intramuscular, push), per visit	HCPCS	Procedure
Q0161	Chlorpromazine HCl, 5 mg, oral, FDA-approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0162	Ondansetron 1 mg, oral, FDA-approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0163	Diphenhydramine HCl, 50 mg, oral, FDA-approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at time of chemotherapy treatment not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0164	Prochlorperazine maleate, 5 mg, oral, FDA-approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0165	Prochlorperazine maleate, 10 mg, oral, FDA approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0166	Granisetron HCl, 1 mg, oral, FDA-approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 24-hour dosage regimen	HCPCS	Procedure

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
Q0167	Dronabinol, 2.5 mg, oral, FDA-approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0168	Dronabinol, 5 mg, oral, FDA approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0169	Promethazine HCl, 12.5 mg, oral, FDA-approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0170	Promethazine HCl, 25 mg, oral, FDA approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0171	Chlorpromazine HCl, 10 mg, oral, FDA approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0172	Chlorpromazine HCl, 25 mg, oral, FDA approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0173	Trimethobenzamide HCl, 250 mg, oral, FDA-approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0174	Thiethylperazine maleate, 10 mg, oral, FDA-approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0175	Perphenazine, 4 mg, oral, FDA-approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0176	Perphenazine, 8 mg, oral, FDA approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48 hour dosage regimen	HCPCS	Procedure
Q0177	Hydroxyzine pamoate, 25 mg, oral, FDA-approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0178	Hydroxyzine pamoate, 50 mg, oral, FDA approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0179	Ondansetron HCl 8 mg, oral, FDA approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0180	Dolasetron mesylate, 100 mg, oral, FDA-approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 24-hour dosage regimen	HCPCS	Procedure

Appendix D. List International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis Codes, International Classification of Diseases, Ninth Revision, Procedural Coding System (ICD-9-PCS), International Classification of Diseases, Tenth Revision, Procedural Coding System (ICD-10-PCS), Healthcare Common Procedure Coding System (HCPCS), and Current Proedural Terminology Fourth Edition (CPT-4) Used to Define Exclusions in this Request

Code	Description	Code Type	Code Category
Q0181	Unspecified oral dosage form, FDA-approved prescription antiemetic, for use as a complete therapeutic substitute for an IV antiemetic at the time of chemotherapy treatment, not to exceed a 48-hour dosage regimen	HCPCS	Procedure
Q0511	Pharmacy supply fee for oral anticancer, oral antiemetic, or immunosuppressive drug(s); for the first prescription in a 30-day period	HCPCS	Procedure
Q0512	Pharmacy supply fee for oral anticancer, oral antiemetic, or immunosuppressive drug(s); for a subsequent prescription in a 30-day period	HCPCS	Procedure
Q2017	Injection, teniposide, 50 mg	HCPCS	Procedure
Q2025	Fludarabine phosphate, oral, 1 mg	HCPCS	Procedure
Q2048	Injection, doxorubicin hydrochloride, liposomal, DOXIL, 10 mg	HCPCS	Procedure
Q2049	Injection, doxorubicin HCl, liposomal, imported Lipodox, 10 mg	HCPCS	Procedure
Q2050	Injection, doxorubicin HCl, liposomal, not otherwise specified, 10 mg	HCPCS	Procedure
Q3001	Radioelements for brachytherapy, any type, each	HCPCS	Procedure

Appendix E. Generic and Brand Names of Medical Products Used to Define Exclusions in this Request

Generic Name	Brand Name
Contraindications	
dofetilide	dofetilide
dofetilide	Tikosyn
phenobarbital	phenobarbital
phenobarbital/hyoscyamine sulf/atropine sulf/scopolamine Hb	phenobarb-hyoscy-atropine-scop
phenobarbital sodium	phenobarbital sodium
phenobarbital/hyoscyamine sulf/atropine sulf/scopolamine Hb	Phenohytro
phenobarbital/hyoscyamine sulf/atropine sulf/scopolamine Hb	Donnatal
phenobarbital sodium	Sezaby
phenobarbital sodium in 0.9 % sodium chloride	phenobarbital in 0.9 % sod chl
oxcarbazepine	oxcarbazepine
oxcarbazepine	Trileptal
oxcarbazepine	Oxtellar XR
phenytoin sodium	phenytoin sodium
phenytoin sodium extended	phenytoin sodium extended
phenytoin sodium extended	Dilantin Kapseal
fosphenytoin sodium	fosphenytoin
phenytoin	phenytoin
phenytoin sodium extended	Dilantin Extended
phenytoin	Dilantin-125
phenytoin	Dilantin Infatabs
phenytoin sodium extended	Dilantin
fosphenytoin sodium	Cerebyx
phenytoin sodium extended	Phenytek
carbamazepine	carbamazepine
carbamazepine	Carbatrol
carbamazepine	Tegretol
carbamazepine	Tegretol XR
carbamazepine	Epitol
carbamazepine	Equetro
rifabutin	Mycobutin
rifabutin	rifabutin
omeprazole magnesium/amoxicillin trihydrate/rifabutin	Talicia
rifampin	rifampin
rifampin	Rifadin
rifampin/isoniazid	Rifamate
rifampin/isoniazid/pyrazinamide	Rifater
rifapentine	Priftin
sucralfate	sucralfate
sucralfate	Carafate
Malignancy	
selpercatinib	Retevmo
abemaciclib	Verzenio
pemetrexed disodium	Alimta
ramucirumab	Cyramza
necitumumab	Portrazza
dasatinib	Sprycel
hydroxyurea	Hydrea

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Generic Name	Brand Name
elotuzumab	Empliciti
ipilimumab	Yervoy
nivolumab	Opdivo
hydroxyurea	Droxia
nivolumab-relatlimab-rmbw	Opdualag
capecitabine	Xeloda
vorinostat	Zolinza
pembrolizumab	Keytruda
inotuzumab ozogamicin	Besponsa
temsirolimus	Torisel
gemtuzumab ozogamicin	Mylotarg
irinotecan HCl	Camptosar
epirubicin HCl	Ellence
idarubicin HCl	Idamycin PFS
carmustine	BiCNU
isatuximab-irfc	Sarclisa
diluent for cabazitaxel (ethanol)	Diluent For Jevtana
cabazitaxel	Jevtana
ziv-aflibercept	Zaltrap
imatinib mesylate	imatinib
capecitabine	capecitabine
cyclophosphamide	cyclophosphamide
bexarotene	bexarotene
everolimus	everolimus (immunosuppressive)
everolimus	everolimus (antineoplastic)
methotrexate sodium	methotrexate sodium
mercaptopurine	mercaptopurine
bosutinib	Bosulif
axitinib	Inlyta
palbociclib	Ibrance
dacomitinib	Vizimpro
lorlatinib	Lorbrena
rituximab-pvvr	Ruxience
crizotinib	Xalkori
talazoparib tosylate	Talzenna
glasdegib maleate	Daurismo
trastuzumab-qyyp	Trazimera
bevacizumab-bvzr	Zirabev
sunitinib malate	Sutent
doxorubicin HCl	doxorubicin
venetoclax	Venclexta
venetoclax	Venclexta Starting Pack
imatinib mesylate	Gleevec
everolimus	Zortress
nilotinib HCl	Tasigna
everolimus	Afinitor
everolimus	Afinitor Disperz
sonidegib phosphate	Odomzo

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Generic Name	Brand Name
panobinostat lactate	Farydak
ofatumumab	Arzerra
lapatinib ditosylate	Tykerb
topotecan HCl	Hycamtin
dabrafenib mesylate	Tafinlar
nelarabine	Arranon
ceritinib	Zykadia
midostaurin	Rydapt
alpelisib	Piqray
capmatinib hydrochloride	Tabrecta
tisagenlecleucel	Kymriah
ribociclib succinate	Kisqali
ofatumumab	Kesimpta Pen
alpelisib	Vijoice
trametinib dimethyl sulfoxide	Mekinist
temozolomide	Temodar
erlotinib HCl	erlotinib
sunitinib malate	sunitinib malate
bortezomib	bortezomib
mitomycin	mitomycin
docetaxel	docetaxel
idarubicin HCl	idarubicin
bleomycin sulfate	bleomycin
dacarbazine	dacarbazine
doxorubicin HCl	Adriamycin
thiotepa	thiotepa
methotrexate sodium/PF	methotrexate sodium (PF)
etoposide	etoposide
decitabine	decitabine
gemcitabine HCl	gemcitabine
cisplatin	cisplatin
ifosfamide	ifosfamide
daunorubicin HCl	daunorubicin
irinotecan HCl	irinotecan
azacitidine	azacitidine
cladribine	cladribine
belantamab mafodotin-blmf	Blenrep
niraparib tosylate	Zejula
fluorouracil	Efudex
fluorouracil	Carac
bexarotene	Targretin
everolimus	Torpenz
gefitinib	Iressa
selumetinib sulfate/vitamin E TPGS	Koselugo
olaparib	Lynparza
osimertinib mesylate	Tagrisso
acalabrutinib maleate	Calquence (acalabrutinib mal)
durvalumab	Imfinzi

Appendix E. Generic and Brand Names of Medical Products Used to Define Exclusions in this Request

Generic Name	Brand Name
doxorubicin HCl pegylated liposomal	Doxil
temozolomide	temozolomide
ifosfamide	Ifex
doxorubicin HCl pegylated liposomal	Caelyx
sorafenib tosylate	sorafenib
fluorouracil	fluorouracil
methotrexate/PF	Otrexup (PF)
epirubicin HCl	epirubicin
oxaliplatin	oxaliplatin
vinorelbine tartrate	vinorelbine
methotrexate/PF	Rasuvo (PF)
pemetrexed disodium	pemetrexed disodium
topotecan HCl	topotecan
vandetanib	Caprelsa
pentostatin	Nipent
busulfan	busulfan
cytarabine liposome/PF	DepoCyt (PF)
gilteritinib fumarate	Xospata
paclitaxel protein-bound	paclitaxel protein-bound
gefitinib	gefitinib
hydroxyurea	hydroxyurea
afatinib dimaleate	Gilotrif
fluorouracil	Adrucil
irinotecan liposomal	Onivyde
paclitaxel	paclitaxel
romidepsin	romidepsin
carboplatin	carboplatin
vincristine sulfate	Vincasar PFS
ixabepilone	Ixempra
streptozocin	Zanosar
arsenic trioxide	Trisenox
bleomycin sulfate	Bleo 15K
interferon gamma-1b,recomb.	Actimmune
brigatinib	Alunbrig
vemurafenib	Zelboraf
dactinomycin	dactinomycin
procarbazine HCl	Matulane
teniposide	teniposide
lomustine	Gleostine
clofarabine	Clolar
bevacizumab	bevacizumab
fludarabine phosphate	fludarabine
carmustine	carmustine
diluent for carmustine (ethanol)	diluent, carmustine (ethanol)
arsenic trioxide	arsenic trioxide
bendamustine HCl	bendamustine
fluorouracil	Fluoroplex
doxorubicin HCl pegylated liposomal	doxorubicin, peg-liposomal

Appendix E. Generic and Brand Names of Medical Products Used to Define Exclusions in this Request

Generic Name	Brand Name
erlotinib HCl	Tarceva
temsirolimus	temsirolimus
diluent for temsirolimus (ethanol)	diluent,temsirolimus (ethanol)
diluent for carmustine (ethanol)	Diluent for BiCNU
valrubicin	valrubicin
carmustine in polifeprosan 20	Gliadel Wafer
gemcitabine HCl	Gemzar
cytarabine/PF	cytarabine (PF)
melphalan HCl	melphalan HCl
fluorouracil	Tolak
sipuleucel-T/lactated ringers solution	Provenge
cladribine	Mavenclad (4 tablet pack)
cladribine	Mavenclad (5 tablet pack)
cladribine	Mavenclad (6 tablet pack)
cladribine	Mavenclad (7 tablet pack)
bendamustine HCl	Belrapzo
cabozantinib s-malate	Cometriq
cabozantinib s-malate	Cabometyx
mogamulizumab-kpkc	Poteligeo
cladribine	Mavenclad (8 tablet pack)
cladribine	Mavenclad (9 tablet pack)
cladribine	Mavenclad (10 tablet pack)
docetaxel	Taxotere
etoposide phosphate	Etopophos
trastuzumab	Herceptin
nelarabine	nelarabine
thiotepa	Tepadina
clofarabine	clofarabine
diluent for melphalan (sodium citrate)	diluent for melphalan
avelumab	Bavencio
tepotinib HCl	Tepmetko
ifosfamide/mesna	ifosfamide-mesna
etoposide	Toposar
larotrectinib sulfate	Vitrakvi
diluent for decitabine (potass ph monobasic,sodium hydrox)	diluent for decitabine
ponatinib HCl	Iclusig
melphalan HCl/betadex sulfobutyl ether sodium	Evomela
mercaptopurine	Purixan
rituximab	Rituxan
belinostat	Beleodaq
bevacizumab	Avastin
obinutuzumab	Gazyva
trastuzumab-hyaluronidase-oysk	Herceptin Hylecta
ado-trastuzumab emtansine	Kadcyla
entrectinib	Rozlytrek
polatuzumab vedotin-piiq	Polivy
rituximab/hyaluronidase, human recombinant	Rituxan Hycela
alectinib HCl	Alecensa

Appendix E. Generic and Brand Names of Medical Products Used to Define Exclusions in this Request

Generic Name	Brand Name
vismodegib	Erivedge
pertuzumab	Perjeta
pertuzumab-trastuzumab-hyaluronidase-zzxf	Phesgo
aldesleukin	Proleukin
cobimetinib fumarate	Cotellic
atezolizumab	Tecentriq
regorafenib	Stivarga
copanlisib di-HCl	Aliqopa
sorafenib tosylate	Nexavar
glucarpidase	Voraxaze
ruxolitinib phosphate	Jakafi
ruxolitinib phosphate	Opzelura
pemigatinib	Pemazyre
tucatinib	Tukysa
enfortumab vedotin-ejfv	Padcev
brentuximab vedotin	Adcetris
methotrexate sodium	Trexall
doxorubicin HCl pegylated liposomal	Lipodox
doxorubicin HCl pegylated liposomal	Lipodox 50
vincristine sulfate liposomal	Marqibo
vinorelbine tartrate	Navelbine
pegaspargase	Oncaspar
melphalan	Alkeran
melphalan HCl	Alkeran (as HCl)
methotrexate	Xatmep
kit for prep yttrium-90/ibritumomab tiuxetan/albumin human	Zevalin (Y-90)
interferon alfa-n3	Alferon N
busulfan	Busulfex
sacituzumab govitecan-hziy	Trodelvy
floxuridine	floxuridine
dactinomycin	Cosmegen
talimogene laherparepvec	Imlygic
trastuzumab-anns	Kanjinti
blinatumomab	Blincyto
stabilizer for blinatumomab	IV Sol Stabilizer for Blincyto
bevacizumab-awwb	Mvasi
rituximab-arrx	Riabni
panitumumab	Vectibix
niraparib tosylate/abiraterone acetate	Akeega
daratumumab	Darzalex
daratumumab-hyaluronidase-fihj	Darzalex Faspro
ibrutinib	Imbruvica
alemtuzumab	Lemtrada
alemtuzumab	Campath
hydroxyurea	Siklos
azacitidine	Vidaza
pomalidomide	Pomalyst
enasidenib mesylate	Idhifa

Appendix E. Generic and Brand Names of Medical Products Used to Define Exclusions in this Request

Generic Name	Brand Name
fedratinib dihydrochloride	Inrebic
azacitidine	Onureg
ixazomib citrate	Ninlaro
romidepsin	Istodax
diluent for romidepsin (propylene glycol)	Diluent For Istodax
erdafitinib	Balversa
trabectedin	Yondelis
eribulin mesylate	eribulin
cytarabine	cytarabine
vincristine sulfate	vincristine
mitoxantrone HCl	mitoxantrone
encorafenib	Braftovi
cemiplimab-rwlc	Libtayo
idelalisib	Zydelig
gemcitabine HCl in 0.9 % sodium chloride	Infugem
eribulin mesylate	Halaven
decitabine	Dacogen
lenvatinib mesylate	Lenvima
bortezomib	Velcade
vinblastine sulfate	vinblastine
diluent for romidepsin (propylene glycol)	diluent, romidepsin (prop gly)
rituximab-abbs	Truxima
trastuzumab-pkrb	Herzuma
bendamustine HCl	Bendeka
bendamustine HCl	Treanda
selinexor	Xpovio
decitabine/cedazuridine	Inqovi
trifluridine/tipiracil HCl	Lonsurf
cisplatin	Kemoplat
pralatrexate	pralatrexate
fam-trastuzumab deruxtecan-nxki	Enhertu
pexidartinib hydrochloride	Turalio
melphalan flufenamide hydrochloride	Pepaxto
dinutuximab	Unituxin
cetuximab	Erbitux
moxetumomab pasudotox-tdfk	Lumoxiti
stabilizer for moxetumomab pasudotox-tdfk	Lumoxiti IV Soln Stabilizer
daunorubicin/cytarabine liposomal	Vyxeos
busulfan	Myleran
docetaxel	Docefrez
trastuzumab-dttb	Ontruzant
acalabrutinib	Calquence
valrubicin	Valstar
duvelisib	Copiktra
pralatrexate	Folotyn
lapatinib ditosylate	lapatinib
lurbinectedin	Zepzelca
paclitaxel protein-bound	Abraxane

Appendix E. Generic and Brand Names of Medical Products Used to Define Exclusions in this Request

Generic Name	Brand Name
mitomycin	Mutamycin
carboplatin	Paraplatin
rucaparib camsylate	Rubraca
diluent for ixabepilone (castor oil/alcohol)	Diluent for Ixempra (15 mg)
diluent for ixabepilone (castor oil/alcohol)	Diluent for Ixempra (45 mg)
bevacizumab-maly	Alymsys
pemetrexed disodium	Pemrydi RTU
binimetinib	Mektovi
neratinib maleate	Nerlynx
bendamustine HCl	Vivimusta
trastuzumab-dkst	Ogivri
methotrexate/PF	RediTrex (PF)
axicabtagene ciloleucel	Yescarta
brexucabtagene autoleucel	Tecartus
fostamatinib disodium	Tavalisse
avapritinib	Ayvakit
tagraxofusp-erzs	Elzonris
omacetaxine mepesuccinate	Synribo
mitomycin	Jelmyto
diluent for mitomycin (hydroxypropyl,poloxam,polyethyl)	Sterile Hydrogel For Jelmyto
zanubrutinib	Brukinsa
bevacizumab-adcd	Vegzelma
melphalan	melphalan
tazemetostat hydrobromide	Tazverik
calaspargase pegol-mknl	Asparlas
naxitamab-gqgk	Danyelza
lisocabtagene maraleucel	Breyanzi
lisocabtagene maraleucel, CD8 component, 1 of 2	Breyanzi CD8 Component (1of 2)
lisocabtagene maraleucel, CD4 component, 2 of 2	Breyanzi CD4 Component (2of 2)
ripretinib	Qinlock
ribociclib succinate/letrozole	Kisqali Femara Co-Pack
trilaciclib dihydrochloride	Cosela
tafasitamab-cxix	Monjuvi
melphalan HCl	Hepzato (50 mm catheter)
melphalan HCl	Hepzato (62 mm catheter)
melphalan HCl	Hepzato
carfilzomib	Kyprolis
methotrexate	Jylamvo
docetaxel	Docivyx

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

Code	Description	Code Type	Code Category
	Low CD4+ Cell Count (CD4+ Count <500 or <15% CD4+ Cells)		
3492F	History of nadir CD4+ cell count <350 cells/mm3	CPT-2	Procedure
3494F	CD4+ cell count <200 cells/mm	CPT-2	Procedure
3495F	CD4+ cell count 200-499 cells/mm (HIV)	CPT-2	Procedure
3497F	CD4+ cell percentage <15% HIV	CPT-2	Procedure
	B20 HIV Diagnosis Code		
B20	Human immunodeficiency virus [HIV] disease	ICD-10-CM	Diagnosis
	Opportunistic Infections, Definition A		
81315	PML/RARalpha, (t(15;17)), (promyelocytic leukemia/retinoic acid receptor alpha) (eg, promyelocytic leukemia) translocation analysis; common breakpoints (eg, intron 3 and intron 6), qualitative or quantitative	CPT-4	Procedure
81316	PML/RARalpha, (t(15;17)), (promyelocytic leukemia/retinoic acid receptor alpha) (eg, promyelocytic leukemia) translocation analysis; single breakpoint (eg, intron 3, intron 6 or exon 6), qualitative or quantitative	CPT-4	Procedure
86625	Antibody; Campylobacter	CPT-4	Procedure
86771	Antibody; Shigella	CPT-4	Procedure
90291	Cytomegalovirus immune globulin (CMV-IgIV), human, for intravenous use	CPT-4	Procedure
90396	Varicella-zoster immune globulin, human, for intramuscular use	CPT-4	Procedure
0012F	Community-acquired bacterial pneumonia assessment (includes all of the following components) (CAP): Co-morbid conditions assessed (1026F) Vital signs recorded (2010F) Mental status assessed (2014F) Hydration status assessed (2018F)	CPT-4	Procedure
4150F	Patient receiving antiviral treatment for Hepatitis C (HEP-C)	CPT-4	Procedure
A01.03	Typhoid pneumonia	ICD-10-CM	Diagnosis
A02.22	Salmonella pneumonia	ICD-10-CM	Diagnosis
A03.0	Shigellosis due to Shigella dysenteriae	ICD-10-CM	Diagnosis
A03.1	Shigellosis due to Shigella flexneri	ICD-10-CM	Diagnosis
A03.2	Shigellosis due to Shigella boydii	ICD-10-CM	Diagnosis
A03.3	Shigellosis due to Shigella sonnei	ICD-10-CM	Diagnosis
A04.5	Campylobacter enteritis	ICD-10-CM	Diagnosis
A07.2	Cryptosporidiosis	ICD-10-CM	Diagnosis
A07.3	Isosporiasis	ICD-10-CM	Diagnosis
A07.8	Other specified protozoal intestinal diseases	ICD-10-CM	Diagnosis
A15.0	Tuberculosis of lung	ICD-10-CM	Diagnosis
A15.4	Tuberculosis of intrathoracic lymph nodes	ICD-10-CM	Diagnosis
A15.5	Tuberculosis of larynx, trachea and bronchus	ICD-10-CM	Diagnosis
A15.6	Tuberculous pleurisy	ICD-10-CM	Diagnosis
A15.7	Primary respiratory tuberculosis	ICD-10-CM	Diagnosis
A15.8	Other respiratory tuberculosis	ICD-10-CM	Diagnosis
A15.9	Respiratory tuberculosis unspecified	ICD-10-CM	Diagnosis
A17.0	Tuberculous meningitis	ICD-10-CM	Diagnosis
A17.1	Meningeal tuberculoma	ICD-10-CM	Diagnosis
A17.8	Other tuberculosis of nervous system	ICD-10-CM	Diagnosis
A17.81	Tuberculoma of brain and spinal cord	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
A17.82	Tuberculous meningoencephalitis	ICD-10-CM	Diagnosis
A17.83	Tuberculous neuritis	ICD-10-CM	Diagnosis
A17.89	Other tuberculosis of nervous system	ICD-10-CM	Diagnosis
A17.9	Tuberculosis of nervous system, unspecified	ICD-10-CM	Diagnosis
A18.0	Tuberculosis of bones and joints	ICD-10-CM	Diagnosis
A18.01	Tuberculosis of spine	ICD-10-CM	Diagnosis
A18.02	Tuberculous arthritis of other joints	ICD-10-CM	Diagnosis
A18.03	Tuberculosis of other bones	ICD-10-CM	Diagnosis
A18.09	Other musculoskeletal tuberculosis	ICD-10-CM	Diagnosis
A18.1	Tuberculosis of genitourinary system	ICD-10-CM	Diagnosis
A18.10	Tuberculosis of genitourinary system, unspecified	ICD-10-CM	Diagnosis
A18.11	Tuberculosis of kidney and ureter	ICD-10-CM	Diagnosis
A18.12	Tuberculosis of bladder	ICD-10-CM	Diagnosis
A18.13	Tuberculosis of other urinary organs	ICD-10-CM	Diagnosis
A18.14	Tuberculosis of prostate	ICD-10-CM	Diagnosis
A18.15	Tuberculosis of other male genital organs	ICD-10-CM	Diagnosis
A18.16	Tuberculosis of cervix	ICD-10-CM	Diagnosis
A18.17	Tuberculous female pelvic inflammatory disease	ICD-10-CM	Diagnosis
A18.18	Tuberculosis of other female genital organs	ICD-10-CM	Diagnosis
A18.2	Tuberculous peripheral lymphadenopathy	ICD-10-CM	Diagnosis
A18.3	Tuberculosis of intestines, peritoneum and mesenteric glands	ICD-10-CM	Diagnosis
A18.31	Tuberculous peritonitis	ICD-10-CM	Diagnosis
A18.32	Tuberculous enteritis	ICD-10-CM	Diagnosis
A18.39	Retroperitoneal tuberculosis	ICD-10-CM	Diagnosis
A18.4	Tuberculosis of skin and subcutaneous tissue	ICD-10-CM	Diagnosis
A18.5	Tuberculosis of eye	ICD-10-CM	Diagnosis
A18.50	Tuberculosis of eye, unspecified	ICD-10-CM	Diagnosis
A18.51	Tuberculous episcleritis	ICD-10-CM	Diagnosis
A18.52	Tuberculous keratitis	ICD-10-CM	Diagnosis
A18.53	Tuberculous chorioretinitis	ICD-10-CM	Diagnosis
A18.54	Tuberculous iridocyclitis	ICD-10-CM	Diagnosis
A18.59	Other tuberculosis of eye	ICD-10-CM	Diagnosis
A18.6	Tuberculosis of (inner) (middle) ear	ICD-10-CM	Diagnosis
A18.7	Tuberculosis of adrenal glands	ICD-10-CM	Diagnosis
A18.8	Tuberculosis of other specified organs	ICD-10-CM	Diagnosis
A18.81	Tuberculosis of thyroid gland	ICD-10-CM	Diagnosis
A18.82	Tuberculosis of other endocrine glands	ICD-10-CM	Diagnosis
A18.83	Tuberculosis of digestive tract organs, not elsewhere classified	ICD-10-CM	Diagnosis
A18.84	Tuberculosis of heart	ICD-10-CM	Diagnosis
A18.85	Tuberculosis of spleen	ICD-10-CM	Diagnosis
A18.89	Tuberculosis of other sites	ICD-10-CM	Diagnosis
A19.0	Acute miliary tuberculosis of a single specified site	ICD-10-CM	Diagnosis
A19.1	Acute miliary tuberculosis of multiple sites	ICD-10-CM	Diagnosis
A19.2	Acute miliary tuberculosis, unspecified	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
A19.8	Other miliary tuberculosis	ICD-10-CM	Diagnosis
A19.9	Miliary tuberculosis, unspecified	ICD-10-CM	Diagnosis
A28.1	Cat-scratch disease	ICD-10-CM	Diagnosis
A31.0	Pulmonary mycobacterial infection	ICD-10-CM	Diagnosis
A31.2	Disseminated mycobacterium avium-intracellulare complex (DMAC)	ICD-10-CM	Diagnosis
A37.01	Whooping cough due to Bordetella pertussis with pneumonia	ICD-10-CM	Diagnosis
A37.11	Whooping cough due to Bordetella parapertussis with pneumonia	ICD-10-CM	Diagnosis
A37.81	Whooping cough due to other Bordetella species with pneumonia	ICD-10-CM	Diagnosis
A37.91	Whooping cough, unspecified species with pneumonia	ICD-10-CM	Diagnosis
A50.32	Late congenital syphilitic chorioretinitis	ICD-10-CM	Diagnosis
A51	Early syphilis	ICD-10-CM	Diagnosis
A51.0	Primary genital syphilis	ICD-10-CM	Diagnosis
A51.1	Primary anal syphilis	ICD-10-CM	Diagnosis
A51.2	Primary syphilis of other sites	ICD-10-CM	Diagnosis
A51.3	Secondary syphilis of skin and mucous membranes	ICD-10-CM	Diagnosis
A51.39	Other secondary syphilis of skin	ICD-10-CM	Diagnosis
A51.4	Other secondary syphilis	ICD-10-CM	Diagnosis
A51.5	Early syphilis, latent	ICD-10-CM	Diagnosis
A51.9	Early syphilis, unspecified	ICD-10-CM	Diagnosis
A52	Late syphilis	ICD-10-CM	Diagnosis
A52.0	Cardiovascular and cerebrovascular syphilis	ICD-10-CM	Diagnosis
A52.00	Cardiovascular syphilis, unspecified	ICD-10-CM	Diagnosis
A52.05	Other cerebrovascular syphilis	ICD-10-CM	Diagnosis
A52.09	Other cardiovascular syphilis	ICD-10-CM	Diagnosis
A52.1	Symptomatic neurosyphilis	ICD-10-CM	Diagnosis
A52.10	Symptomatic neurosyphilis, unspecified	ICD-10-CM	Diagnosis
A52.12	Other cerebrospinal syphilis	ICD-10-CM	Diagnosis
A52.19	Other symptomatic neurosyphilis	ICD-10-CM	Diagnosis
A52.2	Asymptomatic neurosyphilis	ICD-10-CM	Diagnosis
A52.3	Neurosyphilis, unspecified	ICD-10-CM	Diagnosis
A52.7	Other symptomatic late syphilis	ICD-10-CM	Diagnosis
A52.72	Syphilis of lung and bronchus	ICD-10-CM	Diagnosis
A52.73	Symptomatic late syphilis of other respiratory organs	ICD-10-CM	Diagnosis
A52.74	Syphilis of liver and other viscera	ICD-10-CM	Diagnosis
A52.75	Syphilis of kidney and ureter	ICD-10-CM	Diagnosis
A52.76	Other genitourinary symptomatic late syphilis	ICD-10-CM	Diagnosis
A52.77	Syphilis of bone and joint	ICD-10-CM	Diagnosis
A52.78	Syphilis of other musculoskeletal tissue	ICD-10-CM	Diagnosis
A52.79	Other symptomatic late syphilis	ICD-10-CM	Diagnosis
A52.8	Late syphilis, latent	ICD-10-CM	Diagnosis
A52.9	Late syphilis, unspecified	ICD-10-CM	Diagnosis
A53	Other and unspecified syphilis	ICD-10-CM	Diagnosis
A53.0	Latent syphilis, unspecified as early or late	ICD-10-CM	Diagnosis
A53.9	Syphilis, unspecified	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
A60	Anogenital herpesviral [herpes simplex] infections	ICD-10-CM	Diagnosis
A65	Nonvenereal syphilis	ICD-10-CM	Diagnosis
A79.0	Trench fever	ICD-10-CM	Diagnosis
A81.2	Progressive multifocal leukoencephalopathy	ICD-10-CM	Diagnosis
B00	Herpesviral [herpes simplex] infections	ICD-10-CM	Diagnosis
B00.82	Herpes simplex myelitis	ICD-10-CM	Diagnosis
B01	Varicella [chickenpox]	ICD-10-CM	Diagnosis
B01.2	Varicella pneumonia	ICD-10-CM	Diagnosis
B02	Zoster [herpes zoster]	ICD-10-CM	Diagnosis
B02.0	Zoster encephalitis	ICD-10-CM	Diagnosis
B02.1	Zoster meningitis	ICD-10-CM	Diagnosis
B02.2	Zoster with other nervous system involvement	ICD-10-CM	Diagnosis
B02.21	Postherpetic geniculate ganglionitis	ICD-10-CM	Diagnosis
B02.22	Postherpetic trigeminal neuralgia	ICD-10-CM	Diagnosis
B02.23	Postherpetic polyneuropathy	ICD-10-CM	Diagnosis
B02.24	Postherpetic myelitis	ICD-10-CM	Diagnosis
B02.29	Other postherpetic nervous system involvement	ICD-10-CM	Diagnosis
B02.3	Zoster ocular disease	ICD-10-CM	Diagnosis
B02.30	Zoster ocular disease, unspecified	ICD-10-CM	Diagnosis
B02.31	Zoster conjunctivitis	ICD-10-CM	Diagnosis
B02.32	Zoster iridocyclitis	ICD-10-CM	Diagnosis
B02.33	Zoster keratitis	ICD-10-CM	Diagnosis
B02.34	Zoster scleritis	ICD-10-CM	Diagnosis
B02.39	Other herpes zoster eye disease	ICD-10-CM	Diagnosis
B02.7	Disseminated zoster	ICD-10-CM	Diagnosis
B02.8	Zoster with other complications	ICD-10-CM	Diagnosis
B02.9	Zoster without complications	ICD-10-CM	Diagnosis
B04	Monkeypox	ICD-10-CM	Diagnosis
B05.2	Measles complicated by pneumonia	ICD-10-CM	Diagnosis
B06.81	Rubella pneumonia	ICD-10-CM	Diagnosis
B10	Other human herpesviruses	ICD-10-CM	Diagnosis
B10.0	Other human herpesvirus encephalitis	ICD-10-CM	Diagnosis
B10.09	Other human herpesvirus encephalitis	ICD-10-CM	Diagnosis
B10.8	Other human herpesvirus infection	ICD-10-CM	Diagnosis
B10.89	Other human herpesvirus infection	ICD-10-CM	Diagnosis
B16	Acute hepatitis B	ICD-10-CM	Diagnosis
B16.0	Acute hepatitis B with delta-agent with hepatic coma	ICD-10-CM	Diagnosis
B16.1	Acute hepatitis B with delta-agent without hepatic coma	ICD-10-CM	Diagnosis
B16.2	Acute hepatitis B without delta-agent with hepatic coma	ICD-10-CM	Diagnosis
B16.9	Acute hepatitis B without delta-agent and without hepatic coma	ICD-10-CM	Diagnosis
B17.0	Acute delta-(super) infection of hepatitis B carrier	ICD-10-CM	Diagnosis
B17.1	Acute hepatitis C	ICD-10-CM	Diagnosis
B17.10	Acute hepatitis C without hepatic coma	ICD-10-CM	Diagnosis
B17.11	Acute hepatitis C with hepatic coma	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
B18.0	Chronic viral hepatitis B with delta-agent	ICD-10-CM	Diagnosis
B18.1	Chronic viral hepatitis B without delta-agent	ICD-10-CM	Diagnosis
B18.2	Chronic viral hepatitis C	ICD-10-CM	Diagnosis
B19.1	Unspecified viral hepatitis B	ICD-10-CM	Diagnosis
B19.10	Unspecified viral hepatitis B without hepatic coma	ICD-10-CM	Diagnosis
B19.11	Unspecified viral hepatitis B with hepatic coma	ICD-10-CM	Diagnosis
B19.2	Unspecified viral hepatitis C	ICD-10-CM	Diagnosis
B19.20	Unspecified viral hepatitis C without hepatic coma	ICD-10-CM	Diagnosis
B19.21	Unspecified viral hepatitis C with hepatic coma	ICD-10-CM	Diagnosis
B25.0	Cytomegaloviral pneumonitis	ICD-10-CM	Diagnosis
B25.1	Cytomegaloviral hepatitis	ICD-10-CM	Diagnosis
B25.2	Cytomegaloviral pancreatitis	ICD-10-CM	Diagnosis
B25.8	Other cytomegaloviral diseases	ICD-10-CM	Diagnosis
B25.9	Cytomegaloviral disease, unspecified	ICD-10-CM	Diagnosis
B37.0	Candidal stomatitis	ICD-10-CM	Diagnosis
B37.1	Pulmonary candidiasis	ICD-10-CM	Diagnosis
B37.7	Candidal sepsis	ICD-10-CM	Diagnosis
B37.81	Candidal esophagitis	ICD-10-CM	Diagnosis
B38	Coccidioidomycosis	ICD-10-CM	Diagnosis
B38.0	Acute pulmonary coccidioidomycosis	ICD-10-CM	Diagnosis
B38.1	Chronic pulmonary coccidioidomycosis	ICD-10-CM	Diagnosis
B38.2	Pulmonary coccidioidomycosis, unspecified	ICD-10-CM	Diagnosis
B38.3	Cutaneous coccidioidomycosis	ICD-10-CM	Diagnosis
B38.4	Coccidioidomycosis meningitis	ICD-10-CM	Diagnosis
B38.7	Disseminated coccidioidomycosis	ICD-10-CM	Diagnosis
B38.8	Other forms of coccidioidomycosis	ICD-10-CM	Diagnosis
B38.81	Prostatic coccidioidomycosis	ICD-10-CM	Diagnosis
B38.89	Other forms of coccidioidomycosis	ICD-10-CM	Diagnosis
B38.9	Coccidioidomycosis, unspecified	ICD-10-CM	Diagnosis
B39	Histoplasmosis	ICD-10-CM	Diagnosis
B39.0	Acute pulmonary histoplasmosis capsulati	ICD-10-CM	Diagnosis
B39.1	Chronic pulmonary histoplasmosis capsulati	ICD-10-CM	Diagnosis
B39.2	Pulmonary histoplasmosis capsulati, unspecified	ICD-10-CM	Diagnosis
B39.3	Disseminated histoplasmosis capsulati	ICD-10-CM	Diagnosis
B39.4	Histoplasmosis capsulati, unspecified	ICD-10-CM	Diagnosis
B39.5	Histoplasmosis duboisii	ICD-10-CM	Diagnosis
B39.9	Histoplasmosis, unspecified	ICD-10-CM	Diagnosis
B44.0	Invasive pulmonary aspergillosis	ICD-10-CM	Diagnosis
B44.1	Other pulmonary aspergillosis	ICD-10-CM	Diagnosis
B44.2	Tonsillar aspergillosis	ICD-10-CM	Diagnosis
B44.7	Disseminated aspergillosis	ICD-10-CM	Diagnosis
B44.89	Other forms of aspergillosis	ICD-10-CM	Diagnosis
B44.9	Aspergillosis, unspecified	ICD-10-CM	Diagnosis
B45	Cryptococcosis	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
B45.0	Pulmonary cryptococcosis	ICD-10-CM	Diagnosis
B45.1	Cerebral cryptococcosis	ICD-10-CM	Diagnosis
B45.2	Cutaneous cryptococcosis	ICD-10-CM	Diagnosis
B45.3	Osseous cryptococcosis	ICD-10-CM	Diagnosis
B45.7	Disseminated cryptococcosis	ICD-10-CM	Diagnosis
B45.8	Other forms of cryptococcosis	ICD-10-CM	Diagnosis
B45.9	Cryptococcosis, unspecified	ICD-10-CM	Diagnosis
B46.0	Pulmonary mucormycosis	ICD-10-CM	Diagnosis
B46.1	Rhinocerebral mucormycosis	ICD-10-CM	Diagnosis
B46.2	Gastrointestinal mucormycosis	ICD-10-CM	Diagnosis
B46.3	Cutaneous mucormycosis	ICD-10-CM	Diagnosis
B46.4	Disseminated mucormycosis	ICD-10-CM	Diagnosis
B46.5	Mucormycosis, unspecified	ICD-10-CM	Diagnosis
B46.8	Other zygomycoses	ICD-10-CM	Diagnosis
B46.9	Zygomycosis, unspecified	ICD-10-CM	Diagnosis
B48.4	Penicillosis	ICD-10-CM	Diagnosis
B48.8	Other specified mycoses	ICD-10-CM	Diagnosis
B50	Plasmodium falciparum malaria	ICD-10-CM	Diagnosis
B50.0	Plasmodium falciparum malaria with cerebral complications	ICD-10-CM	Diagnosis
B50.8	Other severe and complicated Plasmodium falciparum malaria	ICD-10-CM	Diagnosis
B50.9	Plasmodium falciparum malaria, unspecified	ICD-10-CM	Diagnosis
B51	Plasmodium vivax malaria	ICD-10-CM	Diagnosis
B51.0	Plasmodium vivax malaria with rupture of spleen	ICD-10-CM	Diagnosis
B51.8	Plasmodium vivax malaria with other complications	ICD-10-CM	Diagnosis
B51.9	Plasmodium vivax malaria without complication	ICD-10-CM	Diagnosis
B52	Plasmodium malariae malaria	ICD-10-CM	Diagnosis
B52.0	Plasmodium malariae malaria with nephropathy	ICD-10-CM	Diagnosis
B52.8	Plasmodium malariae malaria with other complications	ICD-10-CM	Diagnosis
B52.9	Plasmodium malariae malaria without complication	ICD-10-CM	Diagnosis
B53	Other specified malaria	ICD-10-CM	Diagnosis
B53.0	Plasmodium ovale malaria	ICD-10-CM	Diagnosis
B53.1	Malaria due to simian plasmodia	ICD-10-CM	Diagnosis
B53.8	Other malaria, not elsewhere classified	ICD-10-CM	Diagnosis
B54	Unspecified malaria	ICD-10-CM	Diagnosis
B55	Leishmaniasis	ICD-10-CM	Diagnosis
B55.0	Visceral leishmaniasis	ICD-10-CM	Diagnosis
B55.1	Cutaneous leishmaniasis	ICD-10-CM	Diagnosis
B55.2	Mucocutaneous leishmaniasis	ICD-10-CM	Diagnosis
B55.9	Leishmaniasis, unspecified	ICD-10-CM	Diagnosis
B57	Chagas' disease	ICD-10-CM	Diagnosis
B57.0	Acute Chagas' disease with heart involvement	ICD-10-CM	Diagnosis
B57.1	Acute Chagas' disease without heart involvement	ICD-10-CM	Diagnosis
B57.2	Chagas' disease (chronic) with heart involvement	ICD-10-CM	Diagnosis
B57.3	Chagas' disease (chronic) with digestive system involvement	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
B57.30	Chagas' disease with digestive system involvement, unspecified	ICD-10-CM	Diagnosis
B57.31	Megaesophagus in Chagas' disease	ICD-10-CM	Diagnosis
B57.32	Megacolon in Chagas' disease	ICD-10-CM	Diagnosis
B57.39	Other digestive system involvement in Chagas' disease	ICD-10-CM	Diagnosis
B57.4	Chagas' disease (chronic) with nervous system involvement	ICD-10-CM	Diagnosis
B57.40	Chagas' disease with nervous system involvement, unspecified	ICD-10-CM	Diagnosis
B57.41	Meningitis in Chagas' disease	ICD-10-CM	Diagnosis
B57.42	Meningoencephalitis in Chagas' disease	ICD-10-CM	Diagnosis
B57.49	Other nervous system involvement in Chagas' disease	ICD-10-CM	Diagnosis
B57.5	Chagas' disease (chronic) with other organ involvement	ICD-10-CM	Diagnosis
B58	Toxoplasmosis	ICD-10-CM	Diagnosis
B58.2	Toxoplasma meningoencephalitis	ICD-10-CM	Diagnosis
B58.3	Pulmonary toxoplasmosis	ICD-10-CM	Diagnosis
B58.8	Toxoplasmosis with other organ involvement	ICD-10-CM	Diagnosis
B58.89	Toxoplasmosis with other organ involvement	ICD-10-CM	Diagnosis
B58.9	Toxoplasmosis, unspecified	ICD-10-CM	Diagnosis
B59	Pneumocystosis	ICD-10-CM	Diagnosis
B60.8	Other specified protozoal diseases	ICD-10-CM	Diagnosis
B77.81	Ascariasis pneumonia	ICD-10-CM	Diagnosis
B95.3	Streptococcus pneumoniae as the cause of diseases classified elsewhere	ICD-10-CM	Diagnosis
B96.0	Mycoplasma pneumoniae [M. pneumoniae] as the cause of diseases classified elsewhere	ICD-10-CM	Diagnosis
B96.1	Klebsiella pneumoniae [K. pneumoniae] as the cause of diseases classified elsewhere	ICD-10-CM	Diagnosis
B97.35	HIV 2 as the cause of diseases classified elsewhere	ICD-10-CM	Diagnosis
C46	Kaposi's sarcoma	ICD-10-CM	Diagnosis
C46.0	Kaposi's sarcoma of skin	ICD-10-CM	Diagnosis
C46.1	Kaposi's sarcoma of soft tissue	ICD-10-CM	Diagnosis
C46.2	Kaposi's sarcoma of palate	ICD-10-CM	Diagnosis
C46.3	Kaposi's sarcoma of lymph nodes	ICD-10-CM	Diagnosis
C46.4	Kaposi's sarcoma of gastrointestinal sites	ICD-10-CM	Diagnosis
C46.5	Kaposi's sarcoma of lung	ICD-10-CM	Diagnosis
C46.50	Kaposi's sarcoma of unspecified lung	ICD-10-CM	Diagnosis
C46.51	Kaposi's sarcoma of right lung	ICD-10-CM	Diagnosis
C46.52	Kaposi's sarcoma of left lung	ICD-10-CM	Diagnosis
C46.7	Kaposi's sarcoma of other sites	ICD-10-CM	Diagnosis
C46.9	Kaposi's sarcoma, unspecified	ICD-10-CM	Diagnosis
G8012	Pneumonia: patient documented to have received antibiotic within 4 hours of presentation	HCPCS	Procedure
G8013	Pneumonia: patient not documented to have received antibiotic within 4 hours of presentation	HCPCS	Procedure
G8459	Clinician documented that patient is receiving antiviral treatment for hepatitis C	HCPCS	Procedure
G8461	Patient receiving antiviral treatment for hepatitis C during the measurement period	HCPCS	Procedure
G8463	Patient receiving antiviral treatment for hepatitis C documented	HCPCS	Procedure
G8546	I intend to report the community-acquired pneumonia (CAP) measures group	HCPCS	Procedure
G8550	All quality actions for the applicable measures in the community-acquired pneumonia (CAP) measures group have been performed for this patient	HCPCS	Procedure

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

Code	Description	Code Type	Code Category
G9205	Patient starting antiviral treatment for hepatitis C during the measurement period	HCPCS	Procedure
G9206	Patient starting antiviral treatment for hepatitis C during the measurement period	HCPCS	Procedure
G9679	Onsite acute care treatment of a nursing facility resident with pneumonia. May only be billed once per day per beneficiary	HCPCS	Procedure
J0850	Injection, cytomegalovirus immune globulin intravenous (human), per vial	HCPCS	Procedure
J09.X1	Influenza due to identified novel influenza A virus with pneumonia	ICD-10-CM	Diagnosis
J10.0	Influenza due to other identified influenza virus with pneumonia	ICD-10-CM	Diagnosis
J10.00	Influenza due to other identified influenza virus with unspecified type of pneumonia	ICD-10-CM	Diagnosis
J10.01	Influenza due to other identified influenza virus with the same other identified influenza virus pneumonia	ICD-10-CM	Diagnosis
J10.08	Influenza due to other identified influenza virus with other specified pneumonia	ICD-10-CM	Diagnosis
J11.0	Influenza due to unidentified influenza virus with pneumonia	ICD-10-CM	Diagnosis
J11.00	Influenza due to unidentified influenza virus with unspecified type of pneumonia	ICD-10-CM	Diagnosis
J11.08	Influenza due to unidentified influenza virus with specified pneumonia	ICD-10-CM	Diagnosis
J12	Viral pneumonia, not elsewhere classified	ICD-10-CM	Diagnosis
J12.0	Adenoviral pneumonia	ICD-10-CM	Diagnosis
J12.1	Respiratory syncytial virus pneumonia	ICD-10-CM	Diagnosis
J12.2	Parainfluenza virus pneumonia	ICD-10-CM	Diagnosis
J12.3	Human metapneumovirus pneumonia	ICD-10-CM	Diagnosis
J12.8	Other viral pneumonia	ICD-10-CM	Diagnosis
J12.81	Pneumonia due to SARS-associated coronavirus	ICD-10-CM	Diagnosis
J12.82	Pneumonia due to coronavirus disease 2019	ICD-10-CM	Diagnosis
J12.89	Other viral pneumonia	ICD-10-CM	Diagnosis
J12.9	Viral pneumonia, unspecified	ICD-10-CM	Diagnosis
J13	Pneumonia due to Streptococcus pneumoniae	ICD-10-CM	Diagnosis
J14	Pneumonia due to Hemophilus influenzae	ICD-10-CM	Diagnosis
J15	Bacterial pneumonia, not elsewhere classified	ICD-10-CM	Diagnosis
J15.0	Pneumonia due to Klebsiella pneumoniae	ICD-10-CM	Diagnosis
J15.1	Pneumonia due to Pseudomonas	ICD-10-CM	Diagnosis
J15.2	Pneumonia due to staphylococcus	ICD-10-CM	Diagnosis
J15.20	Pneumonia due to staphylococcus, unspecified	ICD-10-CM	Diagnosis
J15.21	Pneumonia due to staphylococcus aureus	ICD-10-CM	Diagnosis
J15.211	Pneumonia due to Methicillin susceptible Staphylococcus aureus	ICD-10-CM	Diagnosis
J15.212	Pneumonia due to Methicillin resistant Staphylococcus aureus	ICD-10-CM	Diagnosis
J15.29	Pneumonia due to other staphylococcus	ICD-10-CM	Diagnosis
J15.3	Pneumonia due to streptococcus, group B	ICD-10-CM	Diagnosis
J15.4	Pneumonia due to other streptococci	ICD-10-CM	Diagnosis
J15.5	Pneumonia due to Escherichia coli	ICD-10-CM	Diagnosis
J15.6	Pneumonia due to other Gram-negative bacteria	ICD-10-CM	Diagnosis
J15.61	Pneumonia due to Acinetobacter baumannii	ICD-10-CM	Diagnosis
J15.69	Pneumonia due to other Gram-negative bacteria	ICD-10-CM	Diagnosis
J15.7	Pneumonia due to Mycoplasma pneumoniae	ICD-10-CM	Diagnosis
J15.8	Pneumonia due to other specified bacteria	ICD-10-CM	Diagnosis
J15.9	Unspecified bacterial pneumonia	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
J1571	Injection, hepatitis B immune globulin (Hepagam B), intramuscular, 0.5 ml	ICD-10-CM	Diagnosis
J1573	Injection, hepatitis B immune globulin (Hepagam B), intravenous, 0.5 ml	ICD-10-CM	Diagnosis
J16	Pneumonia due to other infectious organisms, not elsewhere classified	ICD-10-CM	Diagnosis
J16.0	Chlamydial pneumonia	ICD-10-CM	Diagnosis
J16.8	Pneumonia due to other specified infectious organisms	ICD-10-CM	Diagnosis
J17	Pneumonia in diseases classified elsewhere	ICD-10-CM	Diagnosis
J18	Pneumonia, unspecified organism	ICD-10-CM	Diagnosis
J18.0	Bronchopneumonia, unspecified organism	ICD-10-CM	Diagnosis
J18.1	Lobar pneumonia, unspecified organism	ICD-10-CM	Diagnosis
J18.2	Hypostatic pneumonia, unspecified organism	ICD-10-CM	Diagnosis
J18.8	Other pneumonia, unspecified organism	ICD-10-CM	Diagnosis
J18.9	Pneumonia, unspecified organism	ICD-10-CM	Diagnosis
J20.0	Acute bronchitis due to Mycoplasma pneumoniae	ICD-10-CM	Diagnosis
J82.82	Acute eosinophilic pneumonia	ICD-10-CM	Diagnosis
J84.11	Idiopathic interstitial pneumonia	ICD-10-CM	Diagnosis
J84.111	Idiopathic interstitial pneumonia, not otherwise specified	ICD-10-CM	Diagnosis
J84.116	Cryptogenic organizing pneumonia	ICD-10-CM	Diagnosis
J84.117	Desquamative interstitial pneumonia	ICD-10-CM	Diagnosis
J84.2	Lymphoid interstitial pneumonia	ICD-10-CM	Diagnosis
J85.1	Abscess of lung with pneumonia	ICD-10-CM	Diagnosis
O98.1	Syphilis complicating pregnancy, childbirth and the puerperium	ICD-10-CM	Diagnosis
O98.11	Syphilis complicating pregnancy	ICD-10-CM	Diagnosis
O98.111	Syphilis complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O98.112	Syphilis complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O98.113	Syphilis complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O98.119	Syphilis complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O98.12	Syphilis complicating childbirth	ICD-10-CM	Diagnosis
O98.13	Syphilis complicating the puerperium	ICD-10-CM	Diagnosis
O98.4	Viral hepatitis complicating pregnancy, childbirth and the puerperium	ICD-10-CM	Diagnosis
O98.41	Viral hepatitis complicating pregnancy	ICD-10-CM	Diagnosis
O98.411	Viral hepatitis complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
O98.412	Viral hepatitis complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
O98.413	Viral hepatitis complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O98.419	Viral hepatitis complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O98.42	Viral hepatitis complicating childbirth	ICD-10-CM	Diagnosis
O98.43	Viral hepatitis complicating the puerperium	ICD-10-CM	Diagnosis
Q4090	Injection, hepatitis B immune globulin (HepaGam B), intramuscular, 0.5 ml	ICD-10-CM	Diagnosis
R85.81	Anal high risk human papillomavirus (HPV) DNA test positive	ICD-10-CM	Diagnosis
R85.82	Anal low risk human papillomavirus (HPV) DNA test positive	ICD-10-CM	Diagnosis
R87.81	High risk human papillomavirus (HPV) DNA test positive from female genital organs	ICD-10-CM	Diagnosis
R87.810	Cervical high risk human papillomavirus (HPV) DNA test positive	ICD-10-CM	Diagnosis
R87.811	Vaginal high risk human papillomavirus (HPV) DNA test positive	ICD-10-CM	Diagnosis
R87.82	Low risk human papillomavirus (HPV) DNA test positive from female genital organs	ICD-10-CM	Diagnosis
R87.820	Cervical low risk human papillomavirus (HPV) DNA test positive	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
R87.821	Vaginal low risk human papillomavirus (HPV) DNA test positive	ICD-10-CM	Diagnosis
Z20.01	Contact with and (suspected) exposure to intestinal infectious diseases due to Escherichia coli (E. coli)	ICD-10-CM	Diagnosis
Z22.51	Carrier of viral hepatitis B	ICD-10-CM	Diagnosis
Z22.52	Carrier of viral hepatitis C	ICD-10-CM	Diagnosis
	Opportunistic Infection, Definition B		
A18.53	Tuberculous chorioretinitis	ICD-10-CM	Diagnosis
A28.1	Cat-scratch disease	ICD-10-CM	Diagnosis
A50.32	Late congenital syphilitic chorioretinitis	ICD-10-CM	Diagnosis
A79.0	Trench fever	ICD-10-CM	Diagnosis
B38	Coccidioidomycosis	ICD-10-CM	Diagnosis
B38.0	Acute pulmonary coccidioidomycosis	ICD-10-CM	Diagnosis
B38.1	Chronic pulmonary coccidioidomycosis	ICD-10-CM	Diagnosis
B38.2	Pulmonary coccidioidomycosis, unspecified	ICD-10-CM	Diagnosis
B38.3	Cutaneous coccidioidomycosis	ICD-10-CM	Diagnosis
B38.4	Coccidioidomycosis meningitis	ICD-10-CM	Diagnosis
B38.7	Disseminated coccidioidomycosis	ICD-10-CM	Diagnosis
B38.8	Other forms of coccidioidomycosis	ICD-10-CM	Diagnosis
B38.81	Prostatic coccidioidomycosis	ICD-10-CM	Diagnosis
B38.89	Other forms of coccidioidomycosis	ICD-10-CM	Diagnosis
B38.9	Coccidioidomycosis, unspecified	ICD-10-CM	Diagnosis
B45	Cryptococcosis	ICD-10-CM	Diagnosis
B45.0	Pulmonary cryptococcosis	ICD-10-CM	Diagnosis
B45.1	Cerebral cryptococcosis	ICD-10-CM	Diagnosis
B45.2	Cutaneous cryptococcosis	ICD-10-CM	Diagnosis
B45.3	Osseous cryptococcosis	ICD-10-CM	Diagnosis
B45.7	Disseminated cryptococcosis	ICD-10-CM	Diagnosis
B45.8	Other forms of cryptococcosis	ICD-10-CM	Diagnosis
B45.9	Cryptococcosis, unspecified	ICD-10-CM	Diagnosis
B37.0	Candidal stomatitis	ICD-10-CM	Diagnosis
B37.81	Candidal esophagitis	ICD-10-CM	Diagnosis
A07.2	Cryptosporidiosis	ICD-10-CM	Diagnosis
A07.3	Isosporiasis	ICD-10-CM	Diagnosis
B39	Histoplasmosis	ICD-10-CM	Diagnosis
B39.0	Acute pulmonary histoplasmosis capsulati	ICD-10-CM	Diagnosis
B39.1	Chronic pulmonary histoplasmosis capsulati	ICD-10-CM	Diagnosis
B39.2	Pulmonary histoplasmosis capsulati, unspecified	ICD-10-CM	Diagnosis
B39.3	Disseminated histoplasmosis capsulati	ICD-10-CM	Diagnosis
B39.4	Histoplasmosis capsulati, unspecified	ICD-10-CM	Diagnosis
B39.5	Histoplasmosis duboisii	ICD-10-CM	Diagnosis
B39.9	Histoplasmosis, unspecified	ICD-10-CM	Diagnosis
A07.8	Other specified protozoal intestinal diseases	ICD-10-CM	Diagnosis
B60.8	Other specified protozoal diseases	ICD-10-CM	Diagnosis
A31.2	Disseminated mycobacterium avium-intracellulare complex (DMAC)	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
A15.0	Tuberculosis of lung	ICD-10-CM	Diagnosis
A15.4	Tuberculosis of intrathoracic lymph nodes	ICD-10-CM	Diagnosis
A15.5	Tuberculosis of larynx, trachea and bronchus	ICD-10-CM	Diagnosis
A15.6	Tuberculous pleurisy	ICD-10-CM	Diagnosis
A15.7	Primary respiratory tuberculosis	ICD-10-CM	Diagnosis
A15.8	Other respiratory tuberculosis	ICD-10-CM	Diagnosis
A15.9	Respiratory tuberculosis unspecified	ICD-10-CM	Diagnosis
A17.0	Tuberculous meningitis	ICD-10-CM	Diagnosis
A17.1	Meningeal tuberculoma	ICD-10-CM	Diagnosis
A17.8	Other tuberculosis of nervous system	ICD-10-CM	Diagnosis
A17.81	Tuberculoma of brain and spinal cord	ICD-10-CM	Diagnosis
A17.82	Tuberculous meningoencephalitis	ICD-10-CM	Diagnosis
A17.83	Tuberculous neuritis	ICD-10-CM	Diagnosis
A17.89	Other tuberculosis of nervous system	ICD-10-CM	Diagnosis
A17.9	Tuberculosis of nervous system, unspecified	ICD-10-CM	Diagnosis
A18.0	Tuberculosis of bones and joints	ICD-10-CM	Diagnosis
A18.01	Tuberculosis of spine	ICD-10-CM	Diagnosis
A18.02	Tuberculous arthritis of other joints	ICD-10-CM	Diagnosis
A18.03	Tuberculosis of other bones	ICD-10-CM	Diagnosis
A18.09	Other musculoskeletal tuberculosis	ICD-10-CM	Diagnosis
A18.1	Tuberculosis of genitourinary system	ICD-10-CM	Diagnosis
A18.10	Tuberculosis of genitourinary system, unspecified	ICD-10-CM	Diagnosis
A18.11	Tuberculosis of kidney and ureter	ICD-10-CM	Diagnosis
A18.12	Tuberculosis of bladder	ICD-10-CM	Diagnosis
A18.13	Tuberculosis of other urinary organs	ICD-10-CM	Diagnosis
A18.14	Tuberculosis of prostate	ICD-10-CM	Diagnosis
A18.15	Tuberculosis of other male genital organs	ICD-10-CM	Diagnosis
A18.16	Tuberculosis of cervix	ICD-10-CM	Diagnosis
A18.17	Tuberculous female pelvic inflammatory disease	ICD-10-CM	Diagnosis
A18.18	Tuberculosis of other female genital organs	ICD-10-CM	Diagnosis
A18.2	Tuberculous peripheral lymphadenopathy	ICD-10-CM	Diagnosis
A18.3	Tuberculosis of intestines, peritoneum and mesenteric glands	ICD-10-CM	Diagnosis
A18.31	Tuberculous peritonitis	ICD-10-CM	Diagnosis
A18.32	Tuberculous enteritis	ICD-10-CM	Diagnosis
A18.39	Retroperitoneal tuberculosis	ICD-10-CM	Diagnosis
A18.4	Tuberculosis of skin and subcutaneous tissue	ICD-10-CM	Diagnosis
A18.5	Tuberculosis of eye	ICD-10-CM	Diagnosis
A18.50	Tuberculosis of eye, unspecified	ICD-10-CM	Diagnosis
A18.51	Tuberculous episcleritis	ICD-10-CM	Diagnosis
A18.52	Tuberculous keratitis	ICD-10-CM	Diagnosis
A18.54	Tuberculous iridocyclitis	ICD-10-CM	Diagnosis
A18.59	Other tuberculosis of eye	ICD-10-CM	Diagnosis
A18.6	Tuberculosis of (inner) (middle) ear	ICD-10-CM	Diagnosis
A18.7	Tuberculosis of adrenal glands	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
A18.8	Tuberculosis of other specified organs	ICD-10-CM	Diagnosis
A18.81	Tuberculosis of thyroid gland	ICD-10-CM	Diagnosis
A18.82	Tuberculosis of other endocrine glands	ICD-10-CM	Diagnosis
A18.83	Tuberculosis of digestive tract organs, not elsewhere classified	ICD-10-CM	Diagnosis
A18.84	Tuberculosis of heart	ICD-10-CM	Diagnosis
A18.85	Tuberculosis of spleen	ICD-10-CM	Diagnosis
A18.89	Tuberculosis of other sites	ICD-10-CM	Diagnosis
A19.0	Acute miliary tuberculosis of a single specified site	ICD-10-CM	Diagnosis
A19.1	Acute miliary tuberculosis of multiple sites	ICD-10-CM	Diagnosis
A19.2	Acute miliary tuberculosis, unspecified	ICD-10-CM	Diagnosis
A19.8	Other miliary tuberculosis	ICD-10-CM	Diagnosis
A19.9	Miliary tuberculosis, unspecified	ICD-10-CM	Diagnosis
B59	Pneumocystosis	ICD-10-CM	Diagnosis
A81.2	Progressive multifocal leukoencephalopathy	ICD-10-CM	Diagnosis
B48.4	Penicillosis	ICD-10-CM	Diagnosis
B58	Toxoplasmosis	ICD-10-CM	Diagnosis
B58.3	Pulmonary toxoplasmosis	ICD-10-CM	Diagnosis
B58.8	Toxoplasmosis with other organ involvement	ICD-10-CM	Diagnosis
B58.89	Toxoplasmosis with other organ involvement	ICD-10-CM	Diagnosis
B58.9	Toxoplasmosis, unspecified	ICD-10-CM	Diagnosis
J0850	Injection, cytomegalovirus immune globulin intravenous (human), per vial	HCPCS	Procedure
90291	Cytomegalovirus immune globulin (CMV-IgIV), human, for intravenous use	CPT-4	Procedure
81316	PML/RARalpha, (t(15;17)), (promyelocytic leukemia/retinoic acid receptor alpha) (eg, promyelocytic leukemia) translocation analysis; single breakpoint (eg, intron 3, intron 6 or exon 6), qualitative or quantitative	CPT-4	Procedure
81315	PML/RARalpha, (t(15;17)), (promyelocytic leukemia/retinoic acid receptor alpha) (eg, promyelocytic leukemia) translocation analysis; common breakpoints (eg, intron 3 and intron 6), qualitative or quantitative	CPT-4	Procedure
A31.0	Pulmonary mycobacterial infection	ICD-10-CM	Diagnosis
B25.0	Cytomegaloviral pneumonitis	ICD-10-CM	Diagnosis
B25.1	Cytomegaloviral hepatitis	ICD-10-CM	Diagnosis
B25.2	Cytomegaloviral pancreatitis	ICD-10-CM	Diagnosis
B25.8	Other cytomegaloviral diseases	ICD-10-CM	Diagnosis
B25.9	Cytomegaloviral disease, unspecified	ICD-10-CM	Diagnosis
B37.1	Pulmonary candidiasis	ICD-10-CM	Diagnosis
B37.7	Candidal sepsis	ICD-10-CM	Diagnosis
B44.0	Invasive pulmonary aspergillosis	ICD-10-CM	Diagnosis
B44.1	Other pulmonary aspergillosis	ICD-10-CM	Diagnosis
B44.2	Tonsillar aspergillosis	ICD-10-CM	Diagnosis
B44.7	Disseminated aspergillosis	ICD-10-CM	Diagnosis
B44.89	Other forms of aspergillosis	ICD-10-CM	Diagnosis
B44.9	Aspergillosis, unspecified	ICD-10-CM	Diagnosis
B46.0	Pulmonary mucormycosis	ICD-10-CM	Diagnosis
B46.1	Rhinocerebral mucormycosis	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
B46.2	Gastrointestinal mucormycosis	ICD-10-CM	Diagnosis
B46.3	Cutaneous mucormycosis	ICD-10-CM	Diagnosis
B46.4	Disseminated mucormycosis	ICD-10-CM	Diagnosis
B46.5	Mucormycosis, unspecified	ICD-10-CM	Diagnosis
B46.8	Other zygomycoses	ICD-10-CM	Diagnosis
B46.9	Zygomycosis, unspecified	ICD-10-CM	Diagnosis
B48.8	Other specified mycoses	ICD-10-CM	Diagnosis
B58.2	Toxoplasma meningoencephalitis	ICD-10-CM	Diagnosis
	Prior Antiretroviral Use		
J0739	Injection, cabotegravir, 1 mg, FDA-approved prescription, only for use as HIV pre-exposure prophylaxis (not for use as treatment for HIV)	HCPCS	Procedure
C9077	Injection, cabotegravir and rilpivirine, 2 mg/3 mg	HCPCS	Procedure
J0741	Injection, cabotegravir and rilpivirine, 2 mg/3 mg	HCPCS	Procedure
	Acute Myocardial Infarction		
I21.9	Acute myocardial infarction, unspecified	ICD-10-CM	Diagnosis
I23.1	Atrial septal defect as current complication following acute myocardial infarction	ICD-10-CM	Diagnosis
I23.0	Hemopericardium as current complication following acute myocardial infarction	ICD-10-CM	Diagnosis
I21.A1	Myocardial infarction type 2	ICD-10-CM	Diagnosis
I21.4	Non-ST elevation (NSTEMI) myocardial infarction	ICD-10-CM	Diagnosis
I23.8	Other current complications following acute myocardial infarction	ICD-10-CM	Diagnosis
I21.A9	Other myocardial infarction type	ICD-10-CM	Diagnosis
I23.7	Postinfarction angina	ICD-10-CM	Diagnosis
I23.3	Rupture of cardiac wall without hemopericardium as current complication following acute myocardial infarction	ICD-10-CM	Diagnosis
I23.4	Rupture of chordae tendineae as current complication following acute myocardial infarction	ICD-10-CM	Diagnosis
I23.5	Rupture of papillary muscle as current complication following acute myocardial infarction	ICD-10-CM	Diagnosis
I21.02	ST elevation (STEMI) myocardial infarction involving left anterior descending coronary artery	ICD-10-CM	Diagnosis
I21.21	ST elevation (STEMI) myocardial infarction involving left circumflex coronary artery	ICD-10-CM	Diagnosis
I21.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery	ICD-10-CM	Diagnosis
I21.09	ST elevation (STEMI) myocardial infarction involving other coronary artery of anterior wall	ICD-10-CM	Diagnosis
I21.19	ST elevation (STEMI) myocardial infarction involving other coronary artery of inferior wall	ICD-10-CM	Diagnosis
I21.29	ST elevation (STEMI) myocardial infarction involving other sites	ICD-10-CM	Diagnosis
I21.11	ST elevation (STEMI) myocardial infarction involving right coronary artery	ICD-10-CM	Diagnosis
I21.3	ST elevation (STEMI) myocardial infarction of unspecified site	ICD-10-CM	Diagnosis
I22.2	Subsequent non-ST elevation (NSTEMI) myocardial infarction	ICD-10-CM	Diagnosis
I22.0	Subsequent ST elevation (STEMI) myocardial infarction of anterior wall	ICD-10-CM	Diagnosis
I22.1	Subsequent ST elevation (STEMI) myocardial infarction of inferior wall	ICD-10-CM	Diagnosis
I22.8	Subsequent ST elevation (STEMI) myocardial infarction of other sites	ICD-10-CM	Diagnosis
I22.9	Subsequent ST elevation (STEMI) myocardial infarction of unspecified site	ICD-10-CM	Diagnosis
I23.6	Thrombosis of atrium, auricular appendage, and ventricle as current complications following acute myocardial infarction	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
I23.2	Ventricular septal defect as current complication following acute myocardial infarction	ICD-10-CM	Diagnosis
	Alzheimer's Disease		
G30.0	Alzheimer's disease with early onset	ICD-10-CM	Diagnosis
G30.1	Alzheimer's disease with late onset	ICD-10-CM	Diagnosis
G30.9	Alzheimer's disease, unspecified	ICD-10-CM	Diagnosis
G30.8	Other Alzheimer's disease	ICD-10-CM	Diagnosis
	Anemia		
D59.9	Acquired hemolytic anemia, unspecified	ICD-10-CM	Diagnosis
D60.9	Acquired pure red cell aplasia, unspecified	ICD-10-CM	Diagnosis
D56.0	Alpha thalassemia	ICD-10-CM	Diagnosis
D64.81	Anemia due to antineoplastic chemotherapy	ICD-10-CM	Diagnosis
D55.2	Anemia due to disorders of glycolytic enzymes	ICD-10-CM	Diagnosis
D55.3	Anemia due to disorders of nucleotide metabolism	ICD-10-CM	Diagnosis
D55.9	Anemia due to enzyme disorder, unspecified	ICD-10-CM	Diagnosis
D55.0	Anemia due to glucose-6-phosphate dehydrogenase [G6PD] deficiency	ICD-10-CM	Diagnosis
D55.1	Anemia due to other disorders of glutathione metabolism	ICD-10-CM	Diagnosis
D55.29	Anemia due to other disorders of glycolytic enzymes	ICD-10-CM	Diagnosis
D55.21	Anemia due to pyruvate kinase deficiency	ICD-10-CM	Diagnosis
D63.1	Anemia in chronic kidney disease	ICD-10-CM	Diagnosis
D63.0	Anemia in neoplastic disease	ICD-10-CM	Diagnosis
D63.8	Anemia in other chronic diseases classified elsewhere	ICD-10-CM	Diagnosis
D64.9	Anemia, unspecified	ICD-10-CM	Diagnosis
D61.810	Antineoplastic chemotherapy induced pancytopenia	ICD-10-CM	Diagnosis
D61.2	Aplastic anemia due to other external agents	ICD-10-CM	Diagnosis
D61.9	Aplastic anemia, unspecified	ICD-10-CM	Diagnosis
D59.10	Autoimmune hemolytic anemia, unspecified	ICD-10-CM	Diagnosis
D56.1	Beta thalassemia	ICD-10-CM	Diagnosis
D60.0	Chronic acquired pure red cell aplasia	ICD-10-CM	Diagnosis
D59.12	Cold autoimmune hemolytic anemia	ICD-10-CM	Diagnosis
D64.4	Congenital dyserythropoietic anemia	ICD-10-CM	Diagnosis
D61.01	Constitutional (pure) red blood cell aplasia	ICD-10-CM	Diagnosis
D56.2	Delta-beta thalassemia	ICD-10-CM	Diagnosis
D52.0	Dietary folate deficiency anemia	ICD-10-CM	Diagnosis
D61.1	Drug-induced aplastic anemia	ICD-10-CM	Diagnosis
D59.0	Drug-induced autoimmune hemolytic anemia	ICD-10-CM	Diagnosis
D52.1	Drug-induced folate deficiency anemia	ICD-10-CM	Diagnosis
D59.2	Drug-induced nonautoimmune hemolytic anemia	ICD-10-CM	Diagnosis
D52.9	Folate deficiency anemia, unspecified	ICD-10-CM	Diagnosis
D57.01	Hb-SS disease with acute chest syndrome	ICD-10-CM	Diagnosis
D57.03	Hb-SS disease with cerebral vascular involvement	ICD-10-CM	Diagnosis
D57.09	Hb-SS disease with crisis with other specified complication	ICD-10-CM	Diagnosis
D57.00	Hb-SS disease with crisis, unspecified	ICD-10-CM	Diagnosis
D57.02	Hb-SS disease with splenic sequestration	ICD-10-CM	Diagnosis
D56.5	Hemoglobin E-beta thalassemia	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
D59.6	Hemoglobinuria due to hemolysis from other external causes	ICD-10-CM	Diagnosis
D59.3	Hemolytic-uremic syndrome	ICD-10-CM	Diagnosis
D58.1	Hereditary elliptocytosis	ICD-10-CM	Diagnosis
D58.9	Hereditary hemolytic anemia, unspecified	ICD-10-CM	Diagnosis
D56.4	Hereditary persistence of fetal hemoglobin [HPFH]	ICD-10-CM	Diagnosis
D64.0	Hereditary sideroblastic anemia	ICD-10-CM	Diagnosis
D58.0	Hereditary spherocytosis	ICD-10-CM	Diagnosis
D61.3	Idiopathic aplastic anemia	ICD-10-CM	Diagnosis
D50.0	Iron deficiency anemia secondary to blood loss (chronic)	ICD-10-CM	Diagnosis
D50.9	Iron deficiency anemia, unspecified	ICD-10-CM	Diagnosis
D59.13	Mixed type autoimmune hemolytic anemia	ICD-10-CM	Diagnosis
C94.6	Myelodysplastic disease, not elsewhere classified	ICD-10-CM	Diagnosis
D46.C	Myelodysplastic syndrome with isolated del(5q) chromosomal abnormality	ICD-10-CM	Diagnosis
D46.9	Myelodysplastic syndrome, unspecified	ICD-10-CM	Diagnosis
D75.81	Myelofibrosis	ICD-10-CM	Diagnosis
D61.82	Myelophthisis	ICD-10-CM	Diagnosis
D53.9	Nutritional anemia, unspecified	ICD-10-CM	Diagnosis
D47.4	Osteomyelofibrosis	ICD-10-CM	Diagnosis
D59.8	Other acquired hemolytic anemias	ICD-10-CM	Diagnosis
D60.8	Other acquired pure red cell aplasias	ICD-10-CM	Diagnosis
D55.8	Other anemias due to enzyme disorders	ICD-10-CM	Diagnosis
D59.19	Other autoimmune hemolytic anemia	ICD-10-CM	Diagnosis
D59.1	Other autoimmune hemolytic anemias	ICD-10-CM	Diagnosis
D61.09	Other constitutional aplastic anemia	ICD-10-CM	Diagnosis
D51.3	Other dietary vitamin B12 deficiency anemia	ICD-10-CM	Diagnosis
D61.811	Other drug-induced pancytopenia	ICD-10-CM	Diagnosis
D52.8	Other folate deficiency anemias	ICD-10-CM	Diagnosis
D58.2	Other hemoglobinopathies	ICD-10-CM	Diagnosis
D50.8	Other iron deficiency anemias	ICD-10-CM	Diagnosis
D53.1	Other megaloblastic anemias, not elsewhere classified	ICD-10-CM	Diagnosis
D46.Z	Other myelodysplastic syndromes	ICD-10-CM	Diagnosis
D59.4	Other nonautoimmune hemolytic anemias	ICD-10-CM	Diagnosis
D61.818	Other pancytopenia	ICD-10-CM	Diagnosis
D57.811	Other sickle-cell disorders with acute chest syndrome	ICD-10-CM	Diagnosis
D57.813	Other sickle-cell disorders with cerebral vascular involvement	ICD-10-CM	Diagnosis
D57.818	Other sickle-cell disorders with crisis with other specified complication	ICD-10-CM	Diagnosis
D57.819	Other sickle-cell disorders with crisis, unspecified	ICD-10-CM	Diagnosis
D57.812	Other sickle-cell disorders with splenic sequestration	ICD-10-CM	Diagnosis
D57.80	Other sickle-cell disorders without crisis	ICD-10-CM	Diagnosis
D64.3	Other sideroblastic anemias	ICD-10-CM	Diagnosis
D64.89	Other specified anemias	ICD-10-CM	Diagnosis
D61.89	Other specified aplastic anemias and other bone marrow failure syndromes	ICD-10-CM	Diagnosis
D58.8	Other specified hereditary hemolytic anemias	ICD-10-CM	Diagnosis
D53.8	Other specified nutritional anemias	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
D56.8	Other thalassemias	ICD-10-CM	Diagnosis
D51.8	Other vitamin B12 deficiency anemias	ICD-10-CM	Diagnosis
D59.5	Paroxysmal nocturnal hemoglobinuria [Marchiafava-Micheli]	ICD-10-CM	Diagnosis
D53.0	Protein deficiency anemia	ICD-10-CM	Diagnosis
D46.21	Refractory anemia with excess of blasts 1	ICD-10-CM	Diagnosis
D46.22	Refractory anemia with excess of blasts 2	ICD-10-CM	Diagnosis
D46.20	Refractory anemia with excess of blasts, unspecified	ICD-10-CM	Diagnosis
D46.1	Refractory anemia with ring sideroblasts	ICD-10-CM	Diagnosis
D46.0	Refractory anemia without ring sideroblasts, so stated	ICD-10-CM	Diagnosis
D46.4	Refractory anemia, unspecified	ICD-10-CM	Diagnosis
D46.A	Refractory cytopenia with multilineage dysplasia	ICD-10-CM	Diagnosis
D46.B	Refractory cytopenia with multilineage dysplasia and ring sideroblasts	ICD-10-CM	Diagnosis
D53.2	Scorbutic anemia	ICD-10-CM	Diagnosis
D64.1	Secondary sideroblastic anemia due to disease	ICD-10-CM	Diagnosis
D64.2	Secondary sideroblastic anemia due to drugs and toxins	ICD-10-CM	Diagnosis
D57.1	Sickle-cell disease without crisis	ICD-10-CM	Diagnosis
D57.451	Sickle-cell thalassemia beta plus with acute chest syndrome	ICD-10-CM	Diagnosis
D57.453	Sickle-cell thalassemia beta plus with cerebral vascular involvement	ICD-10-CM	Diagnosis
D57.458	Sickle-cell thalassemia beta plus with crisis with other specified complication	ICD-10-CM	Diagnosis
D57.459	Sickle-cell thalassemia beta plus with crisis, unspecified	ICD-10-CM	Diagnosis
D57.452	Sickle-cell thalassemia beta plus with splenic sequestration	ICD-10-CM	Diagnosis
D57.44	Sickle-cell thalassemia beta plus without crisis	ICD-10-CM	Diagnosis
D57.431	Sickle-cell thalassemia beta zero with acute chest syndrome	ICD-10-CM	Diagnosis
D57.433	Sickle-cell thalassemia beta zero with cerebral vascular involvement	ICD-10-CM	Diagnosis
D57.438	Sickle-cell thalassemia beta zero with crisis with other specified complication	ICD-10-CM	Diagnosis
D57.439	Sickle-cell thalassemia beta zero with crisis, unspecified	ICD-10-CM	Diagnosis
D57.432	Sickle-cell thalassemia beta zero with splenic sequestration	ICD-10-CM	Diagnosis
D57.42	Sickle-cell thalassemia beta zero without crisis	ICD-10-CM	Diagnosis
D57.40	Sickle-cell thalassemia without crisis	ICD-10-CM	Diagnosis
D57.411	Sickle-cell thalassemia, unspecified, with acute chest syndrome	ICD-10-CM	Diagnosis
D57.413	Sickle-cell thalassemia, unspecified, with cerebral vascular involvement	ICD-10-CM	Diagnosis
D57.419	Sickle-cell thalassemia, unspecified, with crisis	ICD-10-CM	Diagnosis
D57.418	Sickle-cell thalassemia, unspecified, with crisis with other specified complication	ICD-10-CM	Diagnosis
D57.412	Sickle-cell thalassemia, unspecified, with splenic sequestration	ICD-10-CM	Diagnosis
D57.3	Sickle-cell trait	ICD-10-CM	Diagnosis
D57.211	Sickle-cell/Hb-C disease with acute chest syndrome	ICD-10-CM	Diagnosis
D57.213	Sickle-cell/Hb-C disease with cerebral vascular involvement	ICD-10-CM	Diagnosis
D57.218	Sickle-cell/Hb-C disease with crisis with other specified complication	ICD-10-CM	Diagnosis
D57.219	Sickle-cell/Hb-C disease with crisis, unspecified	ICD-10-CM	Diagnosis
D57.212	Sickle-cell/Hb-C disease with splenic sequestration	ICD-10-CM	Diagnosis
D57.20	Sickle-cell/Hb-C disease without crisis	ICD-10-CM	Diagnosis
D50.1	Sideropenic dysphagia	ICD-10-CM	Diagnosis
D56.3	Thalassemia minor	ICD-10-CM	Diagnosis
D56.9	Thalassemia, unspecified	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
D51.2	Transcobalamin II deficiency	ICD-10-CM	Diagnosis
D60.1	Transient acquired pure red cell aplasia	ICD-10-CM	Diagnosis
D51.0	Vitamin B12 deficiency anemia due to intrinsic factor deficiency	ICD-10-CM	Diagnosis
D51.1	Vitamin B12 deficiency anemia due to selective vitamin B12 malabsorption with proteinuria	ICD-10-CM	Diagnosis
D51.9	Vitamin B12 deficiency anemia, unspecified	ICD-10-CM	Diagnosis
D59.11	Warm autoimmune hemolytic anemia	ICD-10-CM	Diagnosis
	Asthma		
J45.991	Cough variant asthma	ICD-10-CM	Diagnosis
J45.990	Exercise induced bronchospasm	ICD-10-CM	Diagnosis
J45.21	Mild intermittent asthma with (acute) exacerbation	ICD-10-CM	Diagnosis
J45.22	Mild intermittent asthma with status asthmaticus	ICD-10-CM	Diagnosis
J45.20	Mild intermittent asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.31	Mild persistent asthma with (acute) exacerbation	ICD-10-CM	Diagnosis
J45.32	Mild persistent asthma with status asthmaticus	ICD-10-CM	Diagnosis
J45.30	Mild persistent asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.41	Moderate persistent asthma with (acute) exacerbation	ICD-10-CM	Diagnosis
J45.42	Moderate persistent asthma with status asthmaticus	ICD-10-CM	Diagnosis
J45.40	Moderate persistent asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.998	Other asthma	ICD-10-CM	Diagnosis
J45.51	Severe persistent asthma with (acute) exacerbation	ICD-10-CM	Diagnosis
J45.52	Severe persistent asthma with status asthmaticus	ICD-10-CM	Diagnosis
J45.50	Severe persistent asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.901	Unspecified asthma with (acute) exacerbation	ICD-10-CM	Diagnosis
J45.902	Unspecified asthma with status asthmaticus	ICD-10-CM	Diagnosis
J45.909	Unspecified asthma, uncomplicated	ICD-10-CM	Diagnosis
	Atrial Fibrillation or Flutter		
I48.4	Atypical atrial flutter	ICD-10-CM	Diagnosis
I48.2	Chronic atrial fibrillation	ICD-10-CM	Diagnosis
I48.20	Chronic atrial fibrillation, unspecified	ICD-10-CM	Diagnosis
I48.11	Longstanding persistent atrial fibrillation	ICD-10-CM	Diagnosis
I48.19	Other persistent atrial fibrillation	ICD-10-CM	Diagnosis
I48.0	Paroxysmal atrial fibrillation	ICD-10-CM	Diagnosis
I48.21	Permanent atrial fibrillation	ICD-10-CM	Diagnosis
I48.1	Persistent atrial fibrillation	ICD-10-CM	Diagnosis
I48.3	Typical atrial flutter	ICD-10-CM	Diagnosis
I48.91	Unspecified atrial fibrillation	ICD-10-CM	Diagnosis
	Benign Prostatic Hyperplasia		
N40.1	Benign prostatic hyperplasia with lower urinary tract symptoms	ICD-10-CM	Diagnosis
N40.0	Benign prostatic hyperplasia without lower urinary tract symptoms	ICD-10-CM	Diagnosis
N40.3	Nodular prostate with lower urinary tract symptoms	ICD-10-CM	Diagnosis
N40.2	Nodular prostate without lower urinary tract symptoms	ICD-10-CM	Diagnosis
	Breast Cancer		
Z17.1	Estrogen receptor negative status [ER-]	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
Z17.0	Estrogen receptor positive status [ER+]	ICD-10-CM	Diagnosis
Z19.2	Hormone resistant malignancy status	ICD-10-CM	Diagnosis
Z19.1	Hormone sensitive malignancy status	ICD-10-CM	Diagnosis
D05.12	Intraductal carcinoma in situ of left breast	ICD-10-CM	Diagnosis
D05.11	Intraductal carcinoma in situ of right breast	ICD-10-CM	Diagnosis
D05.10	Intraductal carcinoma in situ of unspecified breast	ICD-10-CM	Diagnosis
D05.02	Lobular carcinoma in situ of left breast	ICD-10-CM	Diagnosis
D05.01	Lobular carcinoma in situ of right breast	ICD-10-CM	Diagnosis
D05.00	Lobular carcinoma in situ of unspecified breast	ICD-10-CM	Diagnosis
C50.612	Malignant neoplasm of axillary tail of left female breast	ICD-10-CM	Diagnosis
C50.622	Malignant neoplasm of axillary tail of left male breast	ICD-10-CM	Diagnosis
C50.611	Malignant neoplasm of axillary tail of right female breast	ICD-10-CM	Diagnosis
C50.621	Malignant neoplasm of axillary tail of right male breast	ICD-10-CM	Diagnosis
C50.619	Malignant neoplasm of axillary tail of unspecified female breast	ICD-10-CM	Diagnosis
C50.629	Malignant neoplasm of axillary tail of unspecified male breast	ICD-10-CM	Diagnosis
C50.112	Malignant neoplasm of central portion of left female breast	ICD-10-CM	Diagnosis
C50.122	Malignant neoplasm of central portion of left male breast	ICD-10-CM	Diagnosis
C50.111	Malignant neoplasm of central portion of right female breast	ICD-10-CM	Diagnosis
C50.121	Malignant neoplasm of central portion of right male breast	ICD-10-CM	Diagnosis
C50.119	Malignant neoplasm of central portion of unspecified female breast	ICD-10-CM	Diagnosis
C50.129	Malignant neoplasm of central portion of unspecified male breast	ICD-10-CM	Diagnosis
C50.312	Malignant neoplasm of lower-inner quadrant of left female breast	ICD-10-CM	Diagnosis
C50.322	Malignant neoplasm of lower-inner quadrant of left male breast	ICD-10-CM	Diagnosis
C50.311	Malignant neoplasm of lower-inner quadrant of right female breast	ICD-10-CM	Diagnosis
C50.321	Malignant neoplasm of lower-inner quadrant of right male breast	ICD-10-CM	Diagnosis
C50.319	Malignant neoplasm of lower-inner quadrant of unspecified female breast	ICD-10-CM	Diagnosis
C50.329	Malignant neoplasm of lower-inner quadrant of unspecified male breast	ICD-10-CM	Diagnosis
C50.512	Malignant neoplasm of lower-outer quadrant of left female breast	ICD-10-CM	Diagnosis
C50.522	Malignant neoplasm of lower-outer quadrant of left male breast	ICD-10-CM	Diagnosis
C50.511	Malignant neoplasm of lower-outer quadrant of right female breast	ICD-10-CM	Diagnosis
C50.521	Malignant neoplasm of lower-outer quadrant of right male breast	ICD-10-CM	Diagnosis
C50.519	Malignant neoplasm of lower-outer quadrant of unspecified female breast	ICD-10-CM	Diagnosis
C50.529	Malignant neoplasm of lower-outer quadrant of unspecified male breast	ICD-10-CM	Diagnosis
C50.012	Malignant neoplasm of nipple and areola, left female breast	ICD-10-CM	Diagnosis
C50.022	Malignant neoplasm of nipple and areola, left male breast	ICD-10-CM	Diagnosis
C50.011	Malignant neoplasm of nipple and areola, right female breast	ICD-10-CM	Diagnosis
C50.021	Malignant neoplasm of nipple and areola, right male breast	ICD-10-CM	Diagnosis
C50.019	Malignant neoplasm of nipple and areola, unspecified female breast	ICD-10-CM	Diagnosis
C50.029	Malignant neoplasm of nipple and areola, unspecified male breast	ICD-10-CM	Diagnosis
C50.812	Malignant neoplasm of overlapping sites of left female breast	ICD-10-CM	Diagnosis
C50.822	Malignant neoplasm of overlapping sites of left male breast	ICD-10-CM	Diagnosis
C50.811	Malignant neoplasm of overlapping sites of right female breast	ICD-10-CM	Diagnosis
C50.821	Malignant neoplasm of overlapping sites of right male breast	ICD-10-CM	Diagnosis
C50.819	Malignant neoplasm of overlapping sites of unspecified female breast	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
C50.829	Malignant neoplasm of overlapping sites of unspecified male breast	ICD-10-CM	Diagnosis
C50.912	Malignant neoplasm of unspecified site of left female breast	ICD-10-CM	Diagnosis
C50.922	Malignant neoplasm of unspecified site of left male breast	ICD-10-CM	Diagnosis
C50.911	Malignant neoplasm of unspecified site of right female breast	ICD-10-CM	Diagnosis
C50.921	Malignant neoplasm of unspecified site of right male breast	ICD-10-CM	Diagnosis
C50.919	Malignant neoplasm of unspecified site of unspecified female breast	ICD-10-CM	Diagnosis
C50.929	Malignant neoplasm of unspecified site of unspecified male breast	ICD-10-CM	Diagnosis
C50.212	Malignant neoplasm of upper-inner quadrant of left female breast	ICD-10-CM	Diagnosis
C50.222	Malignant neoplasm of upper-inner quadrant of left male breast	ICD-10-CM	Diagnosis
C50.211	Malignant neoplasm of upper-inner quadrant of right female breast	ICD-10-CM	Diagnosis
C50.221	Malignant neoplasm of upper-inner quadrant of right male breast	ICD-10-CM	Diagnosis
C50.219	Malignant neoplasm of upper-inner quadrant of unspecified female breast	ICD-10-CM	Diagnosis
C50.229	Malignant neoplasm of upper-inner quadrant of unspecified male breast	ICD-10-CM	Diagnosis
C50.412	Malignant neoplasm of upper-outer quadrant of left female breast	ICD-10-CM	Diagnosis
C50.422	Malignant neoplasm of upper-outer quadrant of left male breast	ICD-10-CM	Diagnosis
C50.411	Malignant neoplasm of upper-outer quadrant of right female breast	ICD-10-CM	Diagnosis
C50.421	Malignant neoplasm of upper-outer quadrant of right male breast	ICD-10-CM	Diagnosis
C50.419	Malignant neoplasm of upper-outer quadrant of unspecified female breast	ICD-10-CM	Diagnosis
C50.429	Malignant neoplasm of upper-outer quadrant of unspecified male breast	ICD-10-CM	Diagnosis
D05.82	Other specified type of carcinoma in situ of left breast	ICD-10-CM	Diagnosis
D05.81	Other specified type of carcinoma in situ of right breast	ICD-10-CM	Diagnosis
D05.80	Other specified type of carcinoma in situ of unspecified breast	ICD-10-CM	Diagnosis
Z86.000	Personal history of in-situ neoplasm of breast	ICD-10-CM	Diagnosis
Z85.3	Personal history of malignant neoplasm of breast	ICD-10-CM	Diagnosis
D05.92	Unspecified type of carcinoma in situ of left breast	ICD-10-CM	Diagnosis
D05.91	Unspecified type of carcinoma in situ of right breast	ICD-10-CM	Diagnosis
D05.90	Unspecified type of carcinoma in situ of unspecified breast	ICD-10-CM	Diagnosis
	Colorectal Cancer		
D01.0	Carcinoma in situ of colon	ICD-10-CM	Diagnosis
D01.1	Carcinoma in situ of rectosigmoid junction	ICD-10-CM	Diagnosis
D01.2	Carcinoma in situ of rectum	ICD-10-CM	Diagnosis
C49.A4	Gastrointestinal stromal tumor of large intestine	ICD-10-CM	Diagnosis
C49.A5	Gastrointestinal stromal tumor of rectum	ICD-10-CM	Diagnosis
C18.1	Malignant neoplasm of appendix	ICD-10-CM	Diagnosis
C18.2	Malignant neoplasm of ascending colon	ICD-10-CM	Diagnosis
C18.0	Malignant neoplasm of cecum	ICD-10-CM	Diagnosis
C18.9	Malignant neoplasm of colon, unspecified	ICD-10-CM	Diagnosis
C18.6	Malignant neoplasm of descending colon	ICD-10-CM	Diagnosis
C18.3	Malignant neoplasm of hepatic flexure	ICD-10-CM	Diagnosis
C18.8	Malignant neoplasm of overlapping sites of colon	ICD-10-CM	Diagnosis
C19	Malignant neoplasm of rectosigmoid junction	ICD-10-CM	Diagnosis
C20	Malignant neoplasm of rectum	ICD-10-CM	Diagnosis
C18.7	Malignant neoplasm of sigmoid colon	ICD-10-CM	Diagnosis
C18.5	Malignant neoplasm of splenic flexure	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
C18.4	Malignant neoplasm of transverse colon	ICD-10-CM	Diagnosis
Z85.030	Personal history of malignant carcinoid tumor of large intestine	ICD-10-CM	Diagnosis
Z85.040	Personal history of malignant carcinoid tumor of rectum	ICD-10-CM	Diagnosis
Z85.038	Personal history of other malignant neoplasm of large intestine	ICD-10-CM	Diagnosis
Z85.048	Personal history of other malignant neoplasm of rectum, rectosigmoid junction, and anus	ICD-10-CM	Diagnosis
	Endometrial Cancer		
D07.0	Carcinoma in situ of endometrium	ICD-10-CM	Diagnosis
C54.9	Malignant neoplasm of corpus uteri, unspecified	ICD-10-CM	Diagnosis
C54.1	Malignant neoplasm of endometrium	ICD-10-CM	Diagnosis
C54.3	Malignant neoplasm of fundus uteri	ICD-10-CM	Diagnosis
C54.0	Malignant neoplasm of isthmus uteri	ICD-10-CM	Diagnosis
C54.2	Malignant neoplasm of myometrium	ICD-10-CM	Diagnosis
C54.8	Malignant neoplasm of overlapping sites of corpus uteri	ICD-10-CM	Diagnosis
Z85.42	Personal history of malignant neoplasm of other parts of uterus	ICD-10-CM	Diagnosis
	Lung Cancer		
D02.22	Carcinoma in situ of left bronchus and lung	ICD-10-CM	Diagnosis
D02.21	Carcinoma in situ of right bronchus and lung	ICD-10-CM	Diagnosis
D02.20	Carcinoma in situ of unspecified bronchus and lung	ICD-10-CM	Diagnosis
C34.02	Malignant neoplasm of left main bronchus	ICD-10-CM	Diagnosis
C34.32	Malignant neoplasm of lower lobe, left bronchus or lung	ICD-10-CM	Diagnosis
C34.31	Malignant neoplasm of lower lobe, right bronchus or lung	ICD-10-CM	Diagnosis
C34.30	Malignant neoplasm of lower lobe, unspecified bronchus or lung	ICD-10-CM	Diagnosis
C34.2	Malignant neoplasm of middle lobe, bronchus or lung	ICD-10-CM	Diagnosis
C34.82	Malignant neoplasm of overlapping sites of left bronchus and lung	ICD-10-CM	Diagnosis
C34.81	Malignant neoplasm of overlapping sites of right bronchus and lung	ICD-10-CM	Diagnosis
C34.80	Malignant neoplasm of overlapping sites of unspecified bronchus and lung	ICD-10-CM	Diagnosis
C34.01	Malignant neoplasm of right main bronchus	ICD-10-CM	Diagnosis
C34.00	Malignant neoplasm of unspecified main bronchus	ICD-10-CM	Diagnosis
C34.92	Malignant neoplasm of unspecified part of left bronchus or lung	ICD-10-CM	Diagnosis
C34.91	Malignant neoplasm of unspecified part of right bronchus or lung	ICD-10-CM	Diagnosis
C34.90	Malignant neoplasm of unspecified part of unspecified bronchus or lung	ICD-10-CM	Diagnosis
C34.12	Malignant neoplasm of upper lobe, left bronchus or lung	ICD-10-CM	Diagnosis
C34.11	Malignant neoplasm of upper lobe, right bronchus or lung	ICD-10-CM	Diagnosis
C34.10	Malignant neoplasm of upper lobe, unspecified bronchus or lung	ICD-10-CM	Diagnosis
Z85.110	Personal history of malignant carcinoid tumor of bronchus and lung	ICD-10-CM	Diagnosis
Z85.118	Personal history of other malignant neoplasm of bronchus and lung	ICD-10-CM	Diagnosis
	Prostate Cancer		
D07.5	Carcinoma in situ of prostate	ICD-10-CM	Diagnosis
C61	Malignant neoplasm of prostate	ICD-10-CM	Diagnosis
Z85.46	Personal history of malignant neoplasm of prostate	ICD-10-CM	Diagnosis
	Urologic Cancer		
D09.19	Carcinoma in situ of other urinary organs	ICD-10-CM	Diagnosis
D09.10	Carcinoma in situ of unspecified urinary organ	ICD-10-CM	Diagnosis
C64.2	Malignant neoplasm of left kidney, except renal pelvis	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
C65.2	Malignant neoplasm of left renal pelvis	ICD-10-CM	Diagnosis
C66.2	Malignant neoplasm of left ureter	ICD-10-CM	Diagnosis
C68.8	Malignant neoplasm of overlapping sites of urinary organs	ICD-10-CM	Diagnosis
C64.1	Malignant neoplasm of right kidney, except renal pelvis	ICD-10-CM	Diagnosis
C65.1	Malignant neoplasm of right renal pelvis	ICD-10-CM	Diagnosis
C66.1	Malignant neoplasm of right ureter	ICD-10-CM	Diagnosis
C64.9	Malignant neoplasm of unspecified kidney, except renal pelvis	ICD-10-CM	Diagnosis
C65.9	Malignant neoplasm of unspecified renal pelvis	ICD-10-CM	Diagnosis
C66.9	Malignant neoplasm of unspecified ureter	ICD-10-CM	Diagnosis
C68.9	Malignant neoplasm of urinary organ, unspecified	ICD-10-CM	Diagnosis
Z85.520	Personal history of malignant carcinoid tumor of kidney	ICD-10-CM	Diagnosis
Z85.59	Personal history of malignant neoplasm of other urinary tract organ	ICD-10-CM	Diagnosis
Z85.53	Personal history of malignant neoplasm of renal pelvis	ICD-10-CM	Diagnosis
Z85.54	Personal history of malignant neoplasm of ureter	ICD-10-CM	Diagnosis
Z85.528	Personal history of other malignant neoplasm of kidney	ICD-10-CM	Diagnosis
	Cataract		
H25.23	Age-related cataract, morgagnian type, bilateral	ICD-10-CM	Diagnosis
H25.22	Age-related cataract, morgagnian type, left eye	ICD-10-CM	Diagnosis
H25.21	Age-related cataract, morgagnian type, right eye	ICD-10-CM	Diagnosis
H25.20	Age-related cataract, morgagnian type, unspecified eye	ICD-10-CM	Diagnosis
H25.13	Age-related nuclear cataract, bilateral	ICD-10-CM	Diagnosis
H25.12	Age-related nuclear cataract, left eye	ICD-10-CM	Diagnosis
H25.11	Age-related nuclear cataract, right eye	ICD-10-CM	Diagnosis
H25.10	Age-related nuclear cataract, unspecified eye	ICD-10-CM	Diagnosis
H25.033	Anterior subcapsular polar age-related cataract, bilateral	ICD-10-CM	Diagnosis
H25.032	Anterior subcapsular polar age-related cataract, left eye	ICD-10-CM	Diagnosis
H25.031	Anterior subcapsular polar age-related cataract, right eye	ICD-10-CM	Diagnosis
H25.039	Anterior subcapsular polar age-related cataract, unspecified eye	ICD-10-CM	Diagnosis
H26.043	Anterior subcapsular polar infantile and juvenile cataract, bilateral	ICD-10-CM	Diagnosis
H26.042	Anterior subcapsular polar infantile and juvenile cataract, left eye	ICD-10-CM	Diagnosis
H26.041	Anterior subcapsular polar infantile and juvenile cataract, right eye	ICD-10-CM	Diagnosis
H26.049	Anterior subcapsular polar infantile and juvenile cataract, unspecified eye	ICD-10-CM	Diagnosis
H26.223	Cataract secondary to ocular disorders (degenerative) (inflammatory), bilateral	ICD-10-CM	Diagnosis
H26.222	Cataract secondary to ocular disorders (degenerative) (inflammatory), left eye	ICD-10-CM	Diagnosis
H26.221	Cataract secondary to ocular disorders (degenerative) (inflammatory), right eye	ICD-10-CM	Diagnosis
H26.229	Cataract secondary to ocular disorders (degenerative) (inflammatory), unspecified eye	ICD-10-CM	Diagnosis
H26.213	Cataract with neovascularization, bilateral	ICD-10-CM	Diagnosis
H26.212	Cataract with neovascularization, left eye	ICD-10-CM	Diagnosis
H26.211	Cataract with neovascularization, right eye	ICD-10-CM	Diagnosis
H26.219	Cataract with neovascularization, unspecified eye	ICD-10-CM	Diagnosis
H25.813	Combined forms of age-related cataract, bilateral	ICD-10-CM	Diagnosis
H25.812	Combined forms of age-related cataract, left eye	ICD-10-CM	Diagnosis
H25.811	Combined forms of age-related cataract, right eye	ICD-10-CM	Diagnosis
H25.819	Combined forms of age-related cataract, unspecified eye	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
H26.063	Combined forms of infantile and juvenile cataract, bilateral	ICD-10-CM	Diagnosis
H26.062	Combined forms of infantile and juvenile cataract, left eye	ICD-10-CM	Diagnosis
H26.061	Combined forms of infantile and juvenile cataract, right eye	ICD-10-CM	Diagnosis
H26.069	Combined forms of infantile and juvenile cataract, unspecified eye	ICD-10-CM	Diagnosis
Q12.0	Congenital cataract	ICD-10-CM	Diagnosis
H25.013	Cortical age-related cataract, bilateral	ICD-10-CM	Diagnosis
H25.012	Cortical age-related cataract, left eye	ICD-10-CM	Diagnosis
H25.011	Cortical age-related cataract, right eye	ICD-10-CM	Diagnosis
H25.019	Cortical age-related cataract, unspecified eye	ICD-10-CM	Diagnosis
E08.36	Diabetes mellitus due to underlying condition with diabetic cataract	ICD-10-CM	Diagnosis
H26.33	Drug-induced cataract, bilateral	ICD-10-CM	Diagnosis
H26.32	Drug-induced cataract, left eye	ICD-10-CM	Diagnosis
H26.31	Drug-induced cataract, right eye	ICD-10-CM	Diagnosis
H26.30	Drug-induced cataract, unspecified eye	ICD-10-CM	Diagnosis
E09.36	Drug or chemical induced diabetes mellitus with diabetic cataract	ICD-10-CM	Diagnosis
H26.013	Infantile and juvenile cortical, lamellar, or zonular cataract, bilateral	ICD-10-CM	Diagnosis
H26.012	Infantile and juvenile cortical, lamellar, or zonular cataract, left eye	ICD-10-CM	Diagnosis
H26.011	Infantile and juvenile cortical, lamellar, or zonular cataract, right eye	ICD-10-CM	Diagnosis
H26.019	Infantile and juvenile cortical, lamellar, or zonular cataract, unspecified eye	ICD-10-CM	Diagnosis
H26.033	Infantile and juvenile nuclear cataract, bilateral	ICD-10-CM	Diagnosis
H26.032	Infantile and juvenile nuclear cataract, left eye	ICD-10-CM	Diagnosis
H26.031	Infantile and juvenile nuclear cataract, right eye	ICD-10-CM	Diagnosis
H26.039	Infantile and juvenile nuclear cataract, unspecified eye	ICD-10-CM	Diagnosis
H26.113	Localized traumatic opacities, bilateral	ICD-10-CM	Diagnosis
H26.112	Localized traumatic opacities, left eye	ICD-10-CM	Diagnosis
H26.111	Localized traumatic opacities, right eye	ICD-10-CM	Diagnosis
H26.119	Localized traumatic opacities, unspecified eye	ICD-10-CM	Diagnosis
H25.89	Other age-related cataract	ICD-10-CM	Diagnosis
H25.093	Other age-related incipient cataract, bilateral	ICD-10-CM	Diagnosis
H25.092	Other age-related incipient cataract, left eye	ICD-10-CM	Diagnosis
H25.091	Other age-related incipient cataract, right eye	ICD-10-CM	Diagnosis
H25.099	Other age-related incipient cataract, unspecified eye	ICD-10-CM	Diagnosis
H26.09	Other infantile and juvenile cataract	ICD-10-CM	Diagnosis
H26.493	Other secondary cataract, bilateral	ICD-10-CM	Diagnosis
H26.492	Other secondary cataract, left eye	ICD-10-CM	Diagnosis
H26.491	Other secondary cataract, right eye	ICD-10-CM	Diagnosis
H26.499	Other secondary cataract, unspecified eye	ICD-10-CM	Diagnosis
H26.8	Other specified cataract	ICD-10-CM	Diagnosis
E13.36	Other specified diabetes mellitus with diabetic cataract	ICD-10-CM	Diagnosis
H26.123	Partially resolved traumatic cataract, bilateral	ICD-10-CM	Diagnosis
H26.122	Partially resolved traumatic cataract, left eye	ICD-10-CM	Diagnosis
H26.121	Partially resolved traumatic cataract, right eye	ICD-10-CM	Diagnosis
H26.129	Partially resolved traumatic cataract, unspecified eye	ICD-10-CM	Diagnosis
H25.043	Posterior subcapsular polar age-related cataract, bilateral	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
H25.042	Posterior subcapsular polar age-related cataract, left eye	ICD-10-CM	Diagnosis
H25.041	Posterior subcapsular polar age-related cataract, right eye	ICD-10-CM	Diagnosis
H25.049	Posterior subcapsular polar age-related cataract, unspecified eye	ICD-10-CM	Diagnosis
H26.053	Posterior subcapsular polar infantile and juvenile cataract, bilateral	ICD-10-CM	Diagnosis
H26.052	Posterior subcapsular polar infantile and juvenile cataract, left eye	ICD-10-CM	Diagnosis
H26.051	Posterior subcapsular polar infantile and juvenile cataract, right eye	ICD-10-CM	Diagnosis
H26.059	Posterior subcapsular polar infantile and juvenile cataract, unspecified eye	ICD-10-CM	Diagnosis
H26.413	Soemmering's ring, bilateral	ICD-10-CM	Diagnosis
H26.412	Soemmering's ring, left eye	ICD-10-CM	Diagnosis
H26.411	Soemmering's ring, right eye	ICD-10-CM	Diagnosis
H26.419	Soemmering's ring, unspecified eye	ICD-10-CM	Diagnosis
H26.133	Total traumatic cataract, bilateral	ICD-10-CM	Diagnosis
H26.132	Total traumatic cataract, left eye	ICD-10-CM	Diagnosis
H26.131	Total traumatic cataract, right eye	ICD-10-CM	Diagnosis
H26.139	Total traumatic cataract, unspecified eye	ICD-10-CM	Diagnosis
E10.36	Type 1 diabetes mellitus with diabetic cataract	ICD-10-CM	Diagnosis
E11.36	Type 2 diabetes mellitus with diabetic cataract	ICD-10-CM	Diagnosis
H25.9	Unspecified age-related cataract	ICD-10-CM	Diagnosis
H26.9	Unspecified cataract	ICD-10-CM	Diagnosis
H26.20	Unspecified complicated cataract	ICD-10-CM	Diagnosis
H26.003	Unspecified infantile and juvenile cataract, bilateral	ICD-10-CM	Diagnosis
H26.002	Unspecified infantile and juvenile cataract, left eye	ICD-10-CM	Diagnosis
H26.001	Unspecified infantile and juvenile cataract, right eye	ICD-10-CM	Diagnosis
H26.009	Unspecified infantile and juvenile cataract, unspecified eye	ICD-10-CM	Diagnosis
H26.40	Unspecified secondary cataract	ICD-10-CM	Diagnosis
H26.103	Unspecified traumatic cataract, bilateral	ICD-10-CM	Diagnosis
H26.102	Unspecified traumatic cataract, left eye	ICD-10-CM	Diagnosis
H26.101	Unspecified traumatic cataract, right eye	ICD-10-CM	Diagnosis
H26.109	Unspecified traumatic cataract, unspecified eye	ICD-10-CM	Diagnosis
	Chronic Kidney Disease		
N14.0	Analgesic nephropathy	ICD-10-CM	Diagnosis
N26.1	Atrophy of kidney (terminal)	ICD-10-CM	Diagnosis
N15.0	Balkan nephropathy	ICD-10-CM	Diagnosis
N18.1	Chronic kidney disease, stage 1	ICD-10-CM	Diagnosis
N18.2	Chronic kidney disease, stage 2 (mild)	ICD-10-CM	Diagnosis
N18.3	Chronic kidney disease, stage 3 (moderate)	ICD-10-CM	Diagnosis
N18.30	Chronic kidney disease, stage 3 unspecified	ICD-10-CM	Diagnosis
N18.31	Chronic kidney disease, stage 3a	ICD-10-CM	Diagnosis
N18.32	Chronic kidney disease, stage 3b	ICD-10-CM	Diagnosis
N18.4	Chronic kidney disease, stage 4 (severe)	ICD-10-CM	Diagnosis
N18.5	Chronic kidney disease, stage 5	ICD-10-CM	Diagnosis
N18.9	Chronic kidney disease, unspecified	ICD-10-CM	Diagnosis
N03.A	Chronic nephritic syndrome with C3 glomerulonephritis	ICD-10-CM	Diagnosis
N03.6	Chronic nephritic syndrome with dense deposit disease	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
N03.7	Chronic nephritic syndrome with diffuse crescentic glomerulonephritis	ICD-10-CM	Diagnosis
N03.4	Chronic nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis	ICD-10-CM	Diagnosis
N03.2	Chronic nephritic syndrome with diffuse membranous glomerulonephritis	ICD-10-CM	Diagnosis
N03.3	Chronic nephritic syndrome with diffuse mesangial proliferative glomerulonephritis	ICD-10-CM	Diagnosis
N03.5	Chronic nephritic syndrome with diffuse mesangiocapillary glomerulonephritis	ICD-10-CM	Diagnosis
N03.1	Chronic nephritic syndrome with focal and segmental glomerular lesions	ICD-10-CM	Diagnosis
N03.0	Chronic nephritic syndrome with minor glomerular abnormality	ICD-10-CM	Diagnosis
N03.8	Chronic nephritic syndrome with other morphologic changes	ICD-10-CM	Diagnosis
N03.9	Chronic nephritic syndrome with unspecified morphologic changes	ICD-10-CM	Diagnosis
Q61.02	Congenital multiple renal cysts	ICD-10-CM	Diagnosis
Q61.11	Cystic dilatation of collecting ducts	ICD-10-CM	Diagnosis
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease	ICD-10-CM	Diagnosis
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy	ICD-10-CM	Diagnosis
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication	ICD-10-CM	Diagnosis
N25.9	Disorder resulting from impaired renal tubular function, unspecified	ICD-10-CM	Diagnosis
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease	ICD-10-CM	Diagnosis
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy	ICD-10-CM	Diagnosis
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication	ICD-10-CM	Diagnosis
N18.6	End stage renal disease	ICD-10-CM	Diagnosis
M32.14	Glomerular disease in systemic lupus erythematosus	ICD-10-CM	Diagnosis
N08	Glomerular disorders in diseases classified elsewhere	ICD-10-CM	Diagnosis
M10.372	Gout due to renal impairment, left ankle and foot	ICD-10-CM	Diagnosis
M10.322	Gout due to renal impairment, left elbow	ICD-10-CM	Diagnosis
M10.342	Gout due to renal impairment, left hand	ICD-10-CM	Diagnosis
M10.352	Gout due to renal impairment, left hip	ICD-10-CM	Diagnosis
M10.362	Gout due to renal impairment, left knee	ICD-10-CM	Diagnosis
M10.312	Gout due to renal impairment, left shoulder	ICD-10-CM	Diagnosis
M10.332	Gout due to renal impairment, left wrist	ICD-10-CM	Diagnosis
M10.39	Gout due to renal impairment, multiple sites	ICD-10-CM	Diagnosis
M10.371	Gout due to renal impairment, right ankle and foot	ICD-10-CM	Diagnosis
M10.321	Gout due to renal impairment, right elbow	ICD-10-CM	Diagnosis
M10.341	Gout due to renal impairment, right hand	ICD-10-CM	Diagnosis
M10.351	Gout due to renal impairment, right hip	ICD-10-CM	Diagnosis
M10.361	Gout due to renal impairment, right knee	ICD-10-CM	Diagnosis
M10.311	Gout due to renal impairment, right shoulder	ICD-10-CM	Diagnosis
M10.331	Gout due to renal impairment, right wrist	ICD-10-CM	Diagnosis
M10.379	Gout due to renal impairment, unspecified ankle and foot	ICD-10-CM	Diagnosis
M10.329	Gout due to renal impairment, unspecified elbow	ICD-10-CM	Diagnosis
M10.349	Gout due to renal impairment, unspecified hand	ICD-10-CM	Diagnosis
M10.359	Gout due to renal impairment, unspecified hip	ICD-10-CM	Diagnosis
M10.369	Gout due to renal impairment, unspecified knee	ICD-10-CM	Diagnosis
M10.319	Gout due to renal impairment, unspecified shoulder	ICD-10-CM	Diagnosis
M10.30	Gout due to renal impairment, unspecified site	ICD-10-CM	Diagnosis
M10.339	Gout due to renal impairment, unspecified wrist	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
M10.38	Gout due to renal impairment, vertebrae	ICD-10-CM	Diagnosis
K76.7	Hepatorenal syndrome	ICD-10-CM	Diagnosis
N07.A	Hereditary nephropathy, not elsewhere classified with C3 glomerulonephritis	ICD-10-CM	Diagnosis
N07.6	Hereditary nephropathy, not elsewhere classified with dense deposit disease	ICD-10-CM	Diagnosis
N07.7	Hereditary nephropathy, not elsewhere classified with diffuse crescentic glomerulonephritis	ICD-10-CM	Diagnosis
N07.4	Hereditary nephropathy, not elsewhere classified with diffuse endocapillary proliferative glomerulonephritis	ICD-10-CM	Diagnosis
N07.2	Hereditary nephropathy, not elsewhere classified with diffuse membranous glomerulonephritis	ICD-10-CM	Diagnosis
N07.3	Hereditary nephropathy, not elsewhere classified with diffuse mesangial proliferative glomerulonephritis	ICD-10-CM	Diagnosis
N07.5	Hereditary nephropathy, not elsewhere classified with diffuse mesangiocapillary glomerulonephritis	ICD-10-CM	Diagnosis
N07.1	Hereditary nephropathy, not elsewhere classified with focal and segmental glomerular lesions	ICD-10-CM	Diagnosis
N07.0	Hereditary nephropathy, not elsewhere classified with minor glomerular abnormality	ICD-10-CM	Diagnosis
N07.8	Hereditary nephropathy, not elsewhere classified with other morphologic lesions	ICD-10-CM	Diagnosis
N07.9	Hereditary nephropathy, not elsewhere classified with unspecified morphologic lesions	ICD-10-CM	Diagnosis
I12.9	Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	ICD-10-CM	Diagnosis
I12.0	Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease	ICD-10-CM	Diagnosis
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	ICD-10-CM	Diagnosis
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease	ICD-10-CM	Diagnosis
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	ICD-10-CM	Diagnosis
I13.11	Hypertensive heart and chronic kidney disease without heart failure, with stage 5 chronic kidney disease, or end stage renal disease	ICD-10-CM	Diagnosis
N06.A	Isolated proteinuria with C3 glomerulonephritis	ICD-10-CM	Diagnosis
N06.6	Isolated proteinuria with dense deposit disease	ICD-10-CM	Diagnosis
N06.7	Isolated proteinuria with diffuse crescentic glomerulonephritis	ICD-10-CM	Diagnosis
N06.4	Isolated proteinuria with diffuse endocapillary proliferative glomerulonephritis	ICD-10-CM	Diagnosis
N06.2	Isolated proteinuria with diffuse membranous glomerulonephritis	ICD-10-CM	Diagnosis
N06.3	Isolated proteinuria with diffuse mesangial proliferative glomerulonephritis	ICD-10-CM	Diagnosis
N06.5	Isolated proteinuria with diffuse mesangiocapillary glomerulonephritis	ICD-10-CM	Diagnosis
N06.1	Isolated proteinuria with focal and segmental glomerular lesions	ICD-10-CM	Diagnosis
N06.0	Isolated proteinuria with minor glomerular abnormality	ICD-10-CM	Diagnosis
N06.8	Isolated proteinuria with other morphologic lesion	ICD-10-CM	Diagnosis
N06.9	Isolated proteinuria with unspecified morphologic lesion	ICD-10-CM	Diagnosis
Q61.5	Medullary cystic kidney	ICD-10-CM	Diagnosis
N25.1	Nephrogenic diabetes insipidus	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
N14.3	Nephropathy induced by heavy metals	ICD-10-CM	Diagnosis
N14.1	Nephropathy induced by other drugs, medicaments and biological substances	ICD-10-CM	Diagnosis
N14.2	Nephropathy induced by unspecified drug, medicament or biological substance	ICD-10-CM	Diagnosis
N04.A	Nephrotic syndrome with C3 glomerulonephritis	ICD-10-CM	Diagnosis
N04.6	Nephrotic syndrome with dense deposit disease	ICD-10-CM	Diagnosis
N04.7	Nephrotic syndrome with diffuse crescentic glomerulonephritis	ICD-10-CM	Diagnosis
N04.4	Nephrotic syndrome with diffuse endocapillary proliferative glomerulonephritis	ICD-10-CM	Diagnosis
N04.2	Nephrotic syndrome with diffuse membranous glomerulonephritis	ICD-10-CM	Diagnosis
N04.3	Nephrotic syndrome with diffuse mesangial proliferative glomerulonephritis	ICD-10-CM	Diagnosis
N04.5	Nephrotic syndrome with diffuse mesangiocapillary glomerulonephritis	ICD-10-CM	Diagnosis
N04.1	Nephrotic syndrome with focal and segmental glomerular lesions	ICD-10-CM	Diagnosis
N04.0	Nephrotic syndrome with minor glomerular abnormality	ICD-10-CM	Diagnosis
N04.8	Nephrotic syndrome with other morphologic changes	ICD-10-CM	Diagnosis
N04.9	Nephrotic syndrome with unspecified morphologic changes	ICD-10-CM	Diagnosis
Q61.8	Other cystic kidney diseases	ICD-10-CM	Diagnosis
N25.89	Other disorders resulting from impaired renal tubular function	ICD-10-CM	Diagnosis
Q61.19	Other polycystic kidney, infantile type	ICD-10-CM	Diagnosis
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease	ICD-10-CM	Diagnosis
E13.21	Other specified diabetes mellitus with diabetic nephropathy	ICD-10-CM	Diagnosis
E13.29	Other specified diabetes mellitus with other diabetic kidney complication	ICD-10-CM	Diagnosis
N15.8	Other specified renal tubulo-interstitial diseases	ICD-10-CM	Diagnosis
B52.0	Plasmodium malariae malaria with nephropathy	ICD-10-CM	Diagnosis
Q61.2	Polycystic kidney, adult type	ICD-10-CM	Diagnosis
Q61.3	Polycystic kidney, unspecified	ICD-10-CM	Diagnosis
N99.0	Postprocedural (acute) (chronic) kidney failure	ICD-10-CM	Diagnosis
N01.A	Rapidly progressive nephritic syndrome with C3 glomerulonephritis	ICD-10-CM	Diagnosis
N01.6	Rapidly progressive nephritic syndrome with dense deposit disease	ICD-10-CM	Diagnosis
N01.7	Rapidly progressive nephritic syndrome with diffuse crescentic glomerulonephritis	ICD-10-CM	Diagnosis
N01.4	Rapidly progressive nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis	ICD-10-CM	Diagnosis
N01.2	Rapidly progressive nephritic syndrome with diffuse membranous glomerulonephritis	ICD-10-CM	Diagnosis
N01.3	Rapidly progressive nephritic syndrome with diffuse mesangial proliferative glomerulonephritis	ICD-10-CM	Diagnosis
N01.5	Rapidly progressive nephritic syndrome with diffuse mesangiocapillary glomerulonephritis	ICD-10-CM	Diagnosis
N01.1	Rapidly progressive nephritic syndrome with focal and segmental glomerular lesions	ICD-10-CM	Diagnosis
N01.0	Rapidly progressive nephritic syndrome with minor glomerular abnormality	ICD-10-CM	Diagnosis
N01.8	Rapidly progressive nephritic syndrome with other morphologic changes	ICD-10-CM	Diagnosis
N01.9	Rapidly progressive nephritic syndrome with unspecified morphologic changes	ICD-10-CM	Diagnosis
N02.A	Recurrent and persistent hematuria with C3 glomerulonephritis	ICD-10-CM	Diagnosis
N02.6	Recurrent and persistent hematuria with dense deposit disease	ICD-10-CM	Diagnosis
N02.7	Recurrent and persistent hematuria with diffuse crescentic glomerulonephritis	ICD-10-CM	Diagnosis
N02.4	Recurrent and persistent hematuria with diffuse endocapillary proliferative glomerulonephritis	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
N02.2	Recurrent and persistent hematuria with diffuse membranous glomerulonephritis	ICD-10-CM	Diagnosis
N02.3	Recurrent and persistent hematuria with diffuse mesangial proliferative glomerulonephritis	ICD-10-CM	Diagnosis
N02.5	Recurrent and persistent hematuria with diffuse mesangiocapillary glomerulonephritis	ICD-10-CM	Diagnosis
N02.1	Recurrent and persistent hematuria with focal and segmental glomerular lesions	ICD-10-CM	Diagnosis
N02.0	Recurrent and persistent hematuria with minor glomerular abnormality	ICD-10-CM	Diagnosis
N02.8	Recurrent and persistent hematuria with other morphologic changes	ICD-10-CM	Diagnosis
N02.9	Recurrent and persistent hematuria with unspecified morphologic changes	ICD-10-CM	Diagnosis
Q61.4	Renal dysplasia	ICD-10-CM	Diagnosis
N26.9	Renal sclerosis, unspecified	ICD-10-CM	Diagnosis
N15.9	Renal tubulo-interstitial disease, unspecified	ICD-10-CM	Diagnosis
N16	Renal tubulo-interstitial disorders in diseases classified elsewhere	ICD-10-CM	Diagnosis
M35.0A	Sjogren syndrome with glomerular disease	ICD-10-CM	Diagnosis
M35.04	Sjogren syndrome with tubulo-interstitial nephropathy	ICD-10-CM	Diagnosis
A52.75	Syphilis of kidney and ureter	ICD-10-CM	Diagnosis
N14.4	Toxic nephropathy, not elsewhere classified	ICD-10-CM	Diagnosis
A18.11	Tuberculosis of kidney and ureter	ICD-10-CM	Diagnosis
M32.15	Tubulo-interstitial nephropathy in systemic lupus erythematosus	ICD-10-CM	Diagnosis
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease	ICD-10-CM	Diagnosis
E10.21	Type 1 diabetes mellitus with diabetic nephropathy	ICD-10-CM	Diagnosis
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication	ICD-10-CM	Diagnosis
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease	ICD-10-CM	Diagnosis
E11.21	Type 2 diabetes mellitus with diabetic nephropathy	ICD-10-CM	Diagnosis
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication	ICD-10-CM	Diagnosis
N05.A	Unspecified nephritic syndrome with C3 glomerulonephritis	ICD-10-CM	Diagnosis
N05.6	Unspecified nephritic syndrome with dense deposit disease	ICD-10-CM	Diagnosis
N05.7	Unspecified nephritic syndrome with diffuse crescentic glomerulonephritis	ICD-10-CM	Diagnosis
N05.4	Unspecified nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis	ICD-10-CM	Diagnosis
N05.2	Unspecified nephritic syndrome with diffuse membranous glomerulonephritis	ICD-10-CM	Diagnosis
N05.3	Unspecified nephritic syndrome with diffuse mesangial proliferative glomerulonephritis	ICD-10-CM	Diagnosis
N05.5	Unspecified nephritic syndrome with diffuse mesangiocapillary glomerulonephritis	ICD-10-CM	Diagnosis
N05.1	Unspecified nephritic syndrome with focal and segmental glomerular lesions	ICD-10-CM	Diagnosis
N05.0	Unspecified nephritic syndrome with minor glomerular abnormality	ICD-10-CM	Diagnosis
N05.8	Unspecified nephritic syndrome with other morphologic changes	ICD-10-CM	Diagnosis
N05.9	Unspecified nephritic syndrome with unspecified morphologic changes	ICD-10-CM	Diagnosis
	Chronic Obstructive Pulmonary Disease		
J47.1	Bronchiectasis with (acute) exacerbation	ICD-10-CM	Diagnosis
J47.0	Bronchiectasis with acute lower respiratory infection	ICD-10-CM	Diagnosis
J47.9	Bronchiectasis, uncomplicated	ICD-10-CM	Diagnosis
J40	Bronchitis, not specified as acute or chronic	ICD-10-CM	Diagnosis
J43.2	Centrilobular emphysema	ICD-10-CM	Diagnosis
J44.1	Chronic obstructive pulmonary disease with (acute) exacerbation	ICD-10-CM	Diagnosis
J44.0	Chronic obstructive pulmonary disease with (acute) lower respiratory infection	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
J44.9	Chronic obstructive pulmonary disease, unspecified	ICD-10-CM	Diagnosis
J98.3	Compensatory emphysema	ICD-10-CM	Diagnosis
J43.9	Emphysema, unspecified	ICD-10-CM	Diagnosis
J98.2	Interstitial emphysema	ICD-10-CM	Diagnosis
J41.8	Mixed simple and mucopurulent chronic bronchitis	ICD-10-CM	Diagnosis
J41.1	Mucopurulent chronic bronchitis	ICD-10-CM	Diagnosis
J43.1	Panlobular emphysema	ICD-10-CM	Diagnosis
J41.0	Simple chronic bronchitis	ICD-10-CM	Diagnosis
J43.0	Unilateral pulmonary emphysema [MacLeod's syndrome]	ICD-10-CM	Diagnosis
J42	Unspecified chronic bronchitis	ICD-10-CM	Diagnosis
	Depression or Bipolar Disorder		
F43.21	Adjustment disorder with depressed mood	ICD-10-CM	Diagnosis
F43.23	Adjustment disorder with mixed anxiety and depressed mood	ICD-10-CM	Diagnosis
F31.31	Bipolar disorder, current episode depressed, mild	ICD-10-CM	Diagnosis
F31.30	Bipolar disorder, current episode depressed, mild or moderate severity, unspecified	ICD-10-CM	Diagnosis
F31.32	Bipolar disorder, current episode depressed, moderate	ICD-10-CM	Diagnosis
F31.5	Bipolar disorder, current episode depressed, severe, with psychotic features	ICD-10-CM	Diagnosis
F31.4	Bipolar disorder, current episode depressed, severe, without psychotic features	ICD-10-CM	Diagnosis
F31.0	Bipolar disorder, current episode hypomanic	ICD-10-CM	Diagnosis
F31.2	Bipolar disorder, current episode manic severe with psychotic features	ICD-10-CM	Diagnosis
F31.11	Bipolar disorder, current episode manic without psychotic features, mild	ICD-10-CM	Diagnosis
F31.12	Bipolar disorder, current episode manic without psychotic features, moderate	ICD-10-CM	Diagnosis
F31.13	Bipolar disorder, current episode manic without psychotic features, severe	ICD-10-CM	Diagnosis
F31.10	Bipolar disorder, current episode manic without psychotic features, unspecified	ICD-10-CM	Diagnosis
F31.61	Bipolar disorder, current episode mixed, mild	ICD-10-CM	Diagnosis
F31.62	Bipolar disorder, current episode mixed, moderate	ICD-10-CM	Diagnosis
F31.64	Bipolar disorder, current episode mixed, severe, with psychotic features	ICD-10-CM	Diagnosis
F31.63	Bipolar disorder, current episode mixed, severe, without psychotic features	ICD-10-CM	Diagnosis
F31.60	Bipolar disorder, current episode mixed, unspecified	ICD-10-CM	Diagnosis
F31.76	Bipolar disorder, in full remission, most recent episode depressed	ICD-10-CM	Diagnosis
F31.78	Bipolar disorder, in full remission, most recent episode mixed	ICD-10-CM	Diagnosis
F31.75	Bipolar disorder, in partial remission, most recent episode depressed	ICD-10-CM	Diagnosis
F31.71	Bipolar disorder, in partial remission, most recent episode hypomanic	ICD-10-CM	Diagnosis
F31.73	Bipolar disorder, in partial remission, most recent episode manic	ICD-10-CM	Diagnosis
F31.77	Bipolar disorder, in partial remission, most recent episode mixed	ICD-10-CM	Diagnosis
F31.9	Bipolar disorder, unspecified	ICD-10-CM	Diagnosis
F31.81	Bipolar II disorder	ICD-10-CM	Diagnosis
F34.0	Cyclothymic disorder	ICD-10-CM	Diagnosis
F32.A	Depression, unspecified	ICD-10-CM	Diagnosis
F34.1	Dysthymic disorder	ICD-10-CM	Diagnosis
F33.2	Major depressive disorder, recurrent severe without psychotic features	ICD-10-CM	Diagnosis
F33.42	Major depressive disorder, recurrent, in full remission	ICD-10-CM	Diagnosis
F33.41	Major depressive disorder, recurrent, in partial remission	ICD-10-CM	Diagnosis
F33.40	Major depressive disorder, recurrent, in remission, unspecified	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
F33.0	Major depressive disorder, recurrent, mild	ICD-10-CM	Diagnosis
F33.1	Major depressive disorder, recurrent, moderate	ICD-10-CM	Diagnosis
F33.3	Major depressive disorder, recurrent, severe with psychotic symptoms	ICD-10-CM	Diagnosis
F33.9	Major depressive disorder, recurrent, unspecified	ICD-10-CM	Diagnosis
F32.5	Major depressive disorder, single episode, in full remission	ICD-10-CM	Diagnosis
F32.4	Major depressive disorder, single episode, in partial remission	ICD-10-CM	Diagnosis
F32.0	Major depressive disorder, single episode, mild	ICD-10-CM	Diagnosis
F32.1	Major depressive disorder, single episode, moderate	ICD-10-CM	Diagnosis
F32.3	Major depressive disorder, single episode, severe with psychotic features	ICD-10-CM	Diagnosis
F32.2	Major depressive disorder, single episode, severe without psychotic features	ICD-10-CM	Diagnosis
F32.9	Major depressive disorder, single episode, unspecified	ICD-10-CM	Diagnosis
F06.31	Mood disorder due to known physiological condition with depressive features	ICD-10-CM	Diagnosis
F06.32	Mood disorder due to known physiological condition with major depressive-like episode	ICD-10-CM	Diagnosis
F31.89	Other bipolar disorder	ICD-10-CM	Diagnosis
F32.8	Other depressive episodes	ICD-10-CM	Diagnosis
F33.8	Other recurrent depressive disorders	ICD-10-CM	Diagnosis
F32.89	Other specified depressive episodes	ICD-10-CM	Diagnosis
	Diabetes		
E08.44	Diabetes mellitus due to underlying condition with diabetic amyotrophy	ICD-10-CM	Diagnosis
E08.43	Diabetes mellitus due to underlying condition with diabetic autonomic (poly)neuropathy	ICD-10-CM	Diagnosis
E08.36	Diabetes mellitus due to underlying condition with diabetic cataract	ICD-10-CM	Diagnosis
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease	ICD-10-CM	Diagnosis
E08.620	Diabetes mellitus due to underlying condition with diabetic dermatitis	ICD-10-CM	Diagnosis
E08.37X3	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, bilateral	ICD-10-CM	Diagnosis
E08.37X2	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, left eye	ICD-10-CM	Diagnosis
E08.37X1	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, right eye	ICD-10-CM	Diagnosis
E08.37X9	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, unspecified eye	ICD-10-CM	Diagnosis
E08.41	Diabetes mellitus due to underlying condition with diabetic mononeuropathy	ICD-10-CM	Diagnosis
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy	ICD-10-CM	Diagnosis
E08.610	Diabetes mellitus due to underlying condition with diabetic neuropathic arthropathy	ICD-10-CM	Diagnosis
E08.40	Diabetes mellitus due to underlying condition with diabetic neuropathy, unspecified	ICD-10-CM	Diagnosis
E08.52	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy with gangrene	ICD-10-CM	Diagnosis
E08.51	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy without gangrene	ICD-10-CM	Diagnosis
E08.42	Diabetes mellitus due to underlying condition with diabetic polyneuropathy	ICD-10-CM	Diagnosis
E08.621	Diabetes mellitus due to underlying condition with foot ulcer	ICD-10-CM	Diagnosis
E08.65	Diabetes mellitus due to underlying condition with hyperglycemia	ICD-10-CM	Diagnosis
E08.01	Diabetes mellitus due to underlying condition with hyperosmolarity with coma	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
E08.00	Diabetes mellitus due to underlying condition with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	ICD-10-CM	Diagnosis
E08.641	Diabetes mellitus due to underlying condition with hypoglycemia with coma	ICD-10-CM	Diagnosis
E08.649	Diabetes mellitus due to underlying condition with hypoglycemia without coma	ICD-10-CM	Diagnosis
E08.11	Diabetes mellitus due to underlying condition with ketoacidosis with coma	ICD-10-CM	Diagnosis
E08.10	Diabetes mellitus due to underlying condition with ketoacidosis without coma	ICD-10-CM	Diagnosis
E08.321	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E08.3213	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E08.3212	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E08.3211	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E08.3219	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E08.329	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E08.3293	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E08.3292	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E08.3291	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E08.3299	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E08.331	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E08.3313	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E08.3312	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E08.3311	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E08.3319	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E08.339	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E08.3393	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E08.3392	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E08.3391	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
E08.3399	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E08.59	Diabetes mellitus due to underlying condition with other circulatory complications	ICD-10-CM	Diagnosis
E08.618	Diabetes mellitus due to underlying condition with other diabetic arthropathy	ICD-10-CM	Diagnosis
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication	ICD-10-CM	Diagnosis
E08.49	Diabetes mellitus due to underlying condition with other diabetic neurological complication	ICD-10-CM	Diagnosis
E08.39	Diabetes mellitus due to underlying condition with other diabetic ophthalmic complication	ICD-10-CM	Diagnosis
E08.638	Diabetes mellitus due to underlying condition with other oral complications	ICD-10-CM	Diagnosis
E08.628	Diabetes mellitus due to underlying condition with other skin complications	ICD-10-CM	Diagnosis
E08.622	Diabetes mellitus due to underlying condition with other skin ulcer	ICD-10-CM	Diagnosis
E08.69	Diabetes mellitus due to underlying condition with other specified complication	ICD-10-CM	Diagnosis
E08.630	Diabetes mellitus due to underlying condition with periodontal disease	ICD-10-CM	Diagnosis
E08.3543	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	ICD-10-CM	Diagnosis
E08.3542	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	ICD-10-CM	Diagnosis
E08.3541	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	ICD-10-CM	Diagnosis
E08.3549	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	ICD-10-CM	Diagnosis
E08.351	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E08.3513	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E08.3512	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E08.3511	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E08.3519	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E08.3523	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	ICD-10-CM	Diagnosis
E08.3522	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	ICD-10-CM	Diagnosis
E08.3521	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	ICD-10-CM	Diagnosis
E08.3529	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	ICD-10-CM	Diagnosis
E08.3533	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
E08.3532	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	ICD-10-CM	Diagnosis
E08.3531	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	ICD-10-CM	Diagnosis
E08.3539	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	ICD-10-CM	Diagnosis
E08.359	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E08.3593	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E08.3592	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E08.3591	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E08.3599	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E08.341	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E08.3413	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E08.3412	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E08.3411	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E08.3419	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E08.349	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E08.3493	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E08.3492	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E08.3491	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E08.3499	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E08.3553	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, bilateral	ICD-10-CM	Diagnosis
E08.3552	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, left eye	ICD-10-CM	Diagnosis
E08.3551	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, right eye	ICD-10-CM	Diagnosis
E08.3559	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, unspecified eye	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
E08.8	Diabetes mellitus due to underlying condition with unspecified complications	ICD-10-CM	Diagnosis
E08.311	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E08.319	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E08.9	Diabetes mellitus due to underlying condition without complications	ICD-10-CM	Diagnosis
E09.36	Drug or chemical induced diabetes mellitus with diabetic cataract	ICD-10-CM	Diagnosis
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease	ICD-10-CM	Diagnosis
E09.620	Drug or chemical induced diabetes mellitus with diabetic dermatitis	ICD-10-CM	Diagnosis
E09.37X3	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	ICD-10-CM	Diagnosis
E09.37X2	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	ICD-10-CM	Diagnosis
E09.37X1	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	ICD-10-CM	Diagnosis
E09.37X9	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	ICD-10-CM	Diagnosis
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy	ICD-10-CM	Diagnosis
E09.610	Drug or chemical induced diabetes mellitus with diabetic neuropathic arthropathy	ICD-10-CM	Diagnosis
E09.52	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy with gangrene	ICD-10-CM	Diagnosis
E09.51	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy without gangrene	ICD-10-CM	Diagnosis
E09.621	Drug or chemical induced diabetes mellitus with foot ulcer	ICD-10-CM	Diagnosis
E09.65	Drug or chemical induced diabetes mellitus with hyperglycemia	ICD-10-CM	Diagnosis
E09.01	Drug or chemical induced diabetes mellitus with hyperosmolarity with coma	ICD-10-CM	Diagnosis
E09.00	Drug or chemical induced diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	ICD-10-CM	Diagnosis
E09.641	Drug or chemical induced diabetes mellitus with hypoglycemia with coma	ICD-10-CM	Diagnosis
E09.649	Drug or chemical induced diabetes mellitus with hypoglycemia without coma	ICD-10-CM	Diagnosis
E09.11	Drug or chemical induced diabetes mellitus with ketoacidosis with coma	ICD-10-CM	Diagnosis
E09.10	Drug or chemical induced diabetes mellitus with ketoacidosis without coma	ICD-10-CM	Diagnosis
E09.321	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E09.3213	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E09.3212	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E09.3211	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E09.3219	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E09.329	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
E09.3293	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E09.3292	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E09.3291	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E09.3299	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E09.331	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E09.3313	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E09.3312	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E09.3311	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E09.3319	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E09.339	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E09.3393	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E09.3392	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E09.3391	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E09.3399	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E09.44	Drug or chemical induced diabetes mellitus with neurological complications with diabetic amyotrophy	ICD-10-CM	Diagnosis
E09.43	Drug or chemical induced diabetes mellitus with neurological complications with diabetic autonomic (poly)neuropathy	ICD-10-CM	Diagnosis
E09.41	Drug or chemical induced diabetes mellitus with neurological complications with diabetic mononeuropathy	ICD-10-CM	Diagnosis
E09.40	Drug or chemical induced diabetes mellitus with neurological complications with diabetic neuropathy, unspecified	ICD-10-CM	Diagnosis
E09.42	Drug or chemical induced diabetes mellitus with neurological complications with diabetic polyneuropathy	ICD-10-CM	Diagnosis
E09.49	Drug or chemical induced diabetes mellitus with neurological complications with other diabetic neurological complication	ICD-10-CM	Diagnosis
E09.59	Drug or chemical induced diabetes mellitus with other circulatory complications	ICD-10-CM	Diagnosis
E09.618	Drug or chemical induced diabetes mellitus with other diabetic arthropathy	ICD-10-CM	Diagnosis
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication	ICD-10-CM	Diagnosis
E09.39	Drug or chemical induced diabetes mellitus with other diabetic ophthalmic complication	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
E09.638	Drug or chemical induced diabetes mellitus with other oral complications	ICD-10-CM	Diagnosis
E09.628	Drug or chemical induced diabetes mellitus with other skin complications	ICD-10-CM	Diagnosis
E09.622	Drug or chemical induced diabetes mellitus with other skin ulcer	ICD-10-CM	Diagnosis
E09.69	Drug or chemical induced diabetes mellitus with other specified complication	ICD-10-CM	Diagnosis
E09.630	Drug or chemical induced diabetes mellitus with periodontal disease	ICD-10-CM	Diagnosis
E09.3543	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	ICD-10-CM	Diagnosis
E09.3542	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	ICD-10-CM	Diagnosis
E09.3541	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	ICD-10-CM	Diagnosis
E09.3549	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	ICD-10-CM	Diagnosis
E09.351	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E09.3513	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E09.3512	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E09.3511	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E09.3519	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E09.3523	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	ICD-10-CM	Diagnosis
E09.3522	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	ICD-10-CM	Diagnosis
E09.3521	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	ICD-10-CM	Diagnosis
E09.3529	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	ICD-10-CM	Diagnosis
E09.3533	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	ICD-10-CM	Diagnosis
E09.3532	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	ICD-10-CM	Diagnosis
E09.3531	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	ICD-10-CM	Diagnosis
E09.3539	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	ICD-10-CM	Diagnosis
E09.359	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E09.3593	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
E09.3592	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E09.3591	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E09.3599	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E09.341	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E09.3413	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E09.3412	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E09.3411	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E09.3419	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E09.349	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E09.3493	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E09.3492	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E09.3491	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E09.3499	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E09.3553	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	ICD-10-CM	Diagnosis
E09.3552	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, left eye	ICD-10-CM	Diagnosis
E09.3551	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, right eye	ICD-10-CM	Diagnosis
E09.3559	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	ICD-10-CM	Diagnosis
E09.8	Drug or chemical induced diabetes mellitus with unspecified complications	ICD-10-CM	Diagnosis
E09.311	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E09.319	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E09.9	Drug or chemical induced diabetes mellitus without complications	ICD-10-CM	Diagnosis
E13.44	Other specified diabetes mellitus with diabetic amyotrophy	ICD-10-CM	Diagnosis
E13.43	Other specified diabetes mellitus with diabetic autonomic (poly)neuropathy	ICD-10-CM	Diagnosis
E13.36	Other specified diabetes mellitus with diabetic cataract	ICD-10-CM	Diagnosis
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
E13.620	Other specified diabetes mellitus with diabetic dermatitis	ICD-10-CM	Diagnosis
E13.41	Other specified diabetes mellitus with diabetic mononeuropathy	ICD-10-CM	Diagnosis
E13.21	Other specified diabetes mellitus with diabetic nephropathy	ICD-10-CM	Diagnosis
E13.610	Other specified diabetes mellitus with diabetic neuropathic arthropathy	ICD-10-CM	Diagnosis
E13.40	Other specified diabetes mellitus with diabetic neuropathy, unspecified	ICD-10-CM	Diagnosis
E13.52	Other specified diabetes mellitus with diabetic peripheral angiopathy with gangrene	ICD-10-CM	Diagnosis
E13.51	Other specified diabetes mellitus with diabetic peripheral angiopathy without gangrene	ICD-10-CM	Diagnosis
E13.42	Other specified diabetes mellitus with diabetic polyneuropathy	ICD-10-CM	Diagnosis
E13.621	Other specified diabetes mellitus with foot ulcer	ICD-10-CM	Diagnosis
E13.65	Other specified diabetes mellitus with hyperglycemia	ICD-10-CM	Diagnosis
E13.01	Other specified diabetes mellitus with hyperosmolarity with coma	ICD-10-CM	Diagnosis
E13.00	Other specified diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	ICD-10-CM	Diagnosis
E13.641	Other specified diabetes mellitus with hypoglycemia with coma	ICD-10-CM	Diagnosis
E13.649	Other specified diabetes mellitus with hypoglycemia without coma	ICD-10-CM	Diagnosis
E13.11	Other specified diabetes mellitus with ketoacidosis with coma	ICD-10-CM	Diagnosis
E13.10	Other specified diabetes mellitus with ketoacidosis without coma	ICD-10-CM	Diagnosis
E13.321	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E13.3213	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3212	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E13.3211	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E13.3219	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.329	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E13.3293	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3292	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E13.3291	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E13.3299	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.331	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E13.3313	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3312	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
E13.3311	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E13.3319	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.339	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E13.3393	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3392	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E13.3391	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E13.3399	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.59	Other specified diabetes mellitus with other circulatory complications	ICD-10-CM	Diagnosis
E13.618	Other specified diabetes mellitus with other diabetic arthropathy	ICD-10-CM	Diagnosis
E13.29	Other specified diabetes mellitus with other diabetic kidney complication	ICD-10-CM	Diagnosis
E13.49	Other specified diabetes mellitus with other diabetic neurological complication	ICD-10-CM	Diagnosis
E13.39	Other specified diabetes mellitus with other diabetic ophthalmic complication	ICD-10-CM	Diagnosis
E13.638	Other specified diabetes mellitus with other oral complications	ICD-10-CM	Diagnosis
E13.628	Other specified diabetes mellitus with other skin complications	ICD-10-CM	Diagnosis
E13.622	Other specified diabetes mellitus with other skin ulcer	ICD-10-CM	Diagnosis
E13.69	Other specified diabetes mellitus with other specified complication	ICD-10-CM	Diagnosis
E13.630	Other specified diabetes mellitus with periodontal disease	ICD-10-CM	Diagnosis
E13.3543	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	ICD-10-CM	Diagnosis
E13.3542	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	ICD-10-CM	Diagnosis
E13.3541	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	ICD-10-CM	Diagnosis
E13.3549	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	ICD-10-CM	Diagnosis
E13.351	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E13.3513	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3512	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E13.3511	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E13.3519	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.3523	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
E13.3522	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	ICD-10-CM	Diagnosis
E13.3521	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	ICD-10-CM	Diagnosis
E13.3529	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	ICD-10-CM	Diagnosis
E13.3533	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	ICD-10-CM	Diagnosis
E13.3532	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	ICD-10-CM	Diagnosis
E13.3531	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	ICD-10-CM	Diagnosis
E13.3539	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	ICD-10-CM	Diagnosis
E13.359	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E13.3593	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3592	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E13.3591	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E13.3599	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.341	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E13.3413	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3412	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E13.3411	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E13.3419	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.349	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E13.3493	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3492	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E13.3491	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E13.3499	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
E13.3553	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	ICD-10-CM	Diagnosis
E13.3552	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, left eye	ICD-10-CM	Diagnosis
E13.3551	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, right eye	ICD-10-CM	Diagnosis
E13.3559	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	ICD-10-CM	Diagnosis
E13.8	Other specified diabetes mellitus with unspecified complications	ICD-10-CM	Diagnosis
E13.311	Other specified diabetes mellitus with unspecified diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E13.319	Other specified diabetes mellitus with unspecified diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E13.9	Other specified diabetes mellitus without complications	ICD-10-CM	Diagnosis
E10.44	Type 1 diabetes mellitus with diabetic amyotrophy	ICD-10-CM	Diagnosis
E10.43	Type 1 diabetes mellitus with diabetic autonomic (poly)neuropathy	ICD-10-CM	Diagnosis
E10.36	Type 1 diabetes mellitus with diabetic cataract	ICD-10-CM	Diagnosis
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease	ICD-10-CM	Diagnosis
E10.620	Type 1 diabetes mellitus with diabetic dermatitis	ICD-10-CM	Diagnosis
E10.37X3	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	ICD-10-CM	Diagnosis
E10.37X2	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	ICD-10-CM	Diagnosis
E10.37X1	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	ICD-10-CM	Diagnosis
E10.37X9	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	ICD-10-CM	Diagnosis
E10.41	Type 1 diabetes mellitus with diabetic mononeuropathy	ICD-10-CM	Diagnosis
E10.21	Type 1 diabetes mellitus with diabetic nephropathy	ICD-10-CM	Diagnosis
E10.610	Type 1 diabetes mellitus with diabetic neuropathic arthropathy	ICD-10-CM	Diagnosis
E10.40	Type 1 diabetes mellitus with diabetic neuropathy, unspecified	ICD-10-CM	Diagnosis
E10.52	Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene	ICD-10-CM	Diagnosis
E10.51	Type 1 diabetes mellitus with diabetic peripheral angiopathy without gangrene	ICD-10-CM	Diagnosis
E10.42	Type 1 diabetes mellitus with diabetic polyneuropathy	ICD-10-CM	Diagnosis
E10.621	Type 1 diabetes mellitus with foot ulcer	ICD-10-CM	Diagnosis
E10.65	Type 1 diabetes mellitus with hyperglycemia	ICD-10-CM	Diagnosis
E10.641	Type 1 diabetes mellitus with hypoglycemia with coma	ICD-10-CM	Diagnosis
E10.649	Type 1 diabetes mellitus with hypoglycemia without coma	ICD-10-CM	Diagnosis
E10.11	Type 1 diabetes mellitus with ketoacidosis with coma	ICD-10-CM	Diagnosis
E10.10	Type 1 diabetes mellitus with ketoacidosis without coma	ICD-10-CM	Diagnosis
E10.321	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E10.3213	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E10.3212	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
E10.3211	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E10.3219	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E10.329	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E10.3293	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E10.3292	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E10.3291	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E10.3299	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E10.331	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E10.3313	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E10.3312	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E10.3311	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E10.3319	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E10.339	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E10.3393	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E10.3392	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E10.3391	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E10.3399	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E10.59	Type 1 diabetes mellitus with other circulatory complications	ICD-10-CM	Diagnosis
E10.618	Type 1 diabetes mellitus with other diabetic arthropathy	ICD-10-CM	Diagnosis
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication	ICD-10-CM	Diagnosis
E10.49	Type 1 diabetes mellitus with other diabetic neurological complication	ICD-10-CM	Diagnosis
E10.39	Type 1 diabetes mellitus with other diabetic ophthalmic complication	ICD-10-CM	Diagnosis
E10.638	Type 1 diabetes mellitus with other oral complications	ICD-10-CM	Diagnosis
E10.628	Type 1 diabetes mellitus with other skin complications	ICD-10-CM	Diagnosis
E10.622	Type 1 diabetes mellitus with other skin ulcer	ICD-10-CM	Diagnosis
E10.69	Type 1 diabetes mellitus with other specified complication	ICD-10-CM	Diagnosis
E10.630	Type 1 diabetes mellitus with periodontal disease	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
E10.3543	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	ICD-10-CM	Diagnosis
E10.3542	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	ICD-10-CM	Diagnosis
E10.3541	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	ICD-10-CM	Diagnosis
E10.3549	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	ICD-10-CM	Diagnosis
E10.351	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E10.3513	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E10.3512	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E10.3511	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E10.3519	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E10.3523	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	ICD-10-CM	Diagnosis
E10.3522	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	ICD-10-CM	Diagnosis
E10.3521	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	ICD-10-CM	Diagnosis
E10.3529	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	ICD-10-CM	Diagnosis
E10.3533	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	ICD-10-CM	Diagnosis
E10.3532	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	ICD-10-CM	Diagnosis
E10.3531	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	ICD-10-CM	Diagnosis
E10.3539	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	ICD-10-CM	Diagnosis
E10.359	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E10.3593	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E10.3592	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E10.3591	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E10.3599	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E10.341	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
E10.3413	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E10.3412	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E10.3411	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E10.3419	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E10.349	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E10.3493	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E10.3492	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E10.3491	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E10.3499	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E10.3553	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	ICD-10-CM	Diagnosis
E10.3552	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, left eye	ICD-10-CM	Diagnosis
E10.3551	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, right eye	ICD-10-CM	Diagnosis
E10.3559	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	ICD-10-CM	Diagnosis
E10.8	Type 1 diabetes mellitus with unspecified complications	ICD-10-CM	Diagnosis
E10.311	Type 1 diabetes mellitus with unspecified diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E10.319	Type 1 diabetes mellitus with unspecified diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E10.9	Type 1 diabetes mellitus without complications	ICD-10-CM	Diagnosis
E11.44	Type 2 diabetes mellitus with diabetic amyotrophy	ICD-10-CM	Diagnosis
E11.43	Type 2 diabetes mellitus with diabetic autonomic (poly)neuropathy	ICD-10-CM	Diagnosis
E11.36	Type 2 diabetes mellitus with diabetic cataract	ICD-10-CM	Diagnosis
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease	ICD-10-CM	Diagnosis
E11.620	Type 2 diabetes mellitus with diabetic dermatitis	ICD-10-CM	Diagnosis
E11.37X3	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	ICD-10-CM	Diagnosis
E11.37X2	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	ICD-10-CM	Diagnosis
E11.37X1	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	ICD-10-CM	Diagnosis
E11.37X9	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	ICD-10-CM	Diagnosis
E11.41	Type 2 diabetes mellitus with diabetic mononeuropathy	ICD-10-CM	Diagnosis
E11.21	Type 2 diabetes mellitus with diabetic nephropathy	ICD-10-CM	Diagnosis
E11.610	Type 2 diabetes mellitus with diabetic neuropathic arthropathy	ICD-10-CM	Diagnosis
E11.40	Type 2 diabetes mellitus with diabetic neuropathy, unspecified	ICD-10-CM	Diagnosis
E11.52	Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
E11.51	Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene	ICD-10-CM	Diagnosis
E11.42	Type 2 diabetes mellitus with diabetic polyneuropathy	ICD-10-CM	Diagnosis
E11.621	Type 2 diabetes mellitus with foot ulcer	ICD-10-CM	Diagnosis
E11.65	Type 2 diabetes mellitus with hyperglycemia	ICD-10-CM	Diagnosis
E11.01	Type 2 diabetes mellitus with hyperosmolarity with coma	ICD-10-CM	Diagnosis
E11.00	Type 2 diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	ICD-10-CM	Diagnosis
E11.641	Type 2 diabetes mellitus with hypoglycemia with coma	ICD-10-CM	Diagnosis
E11.649	Type 2 diabetes mellitus with hypoglycemia without coma	ICD-10-CM	Diagnosis
E11.11	Type 2 diabetes mellitus with ketoacidosis with coma	ICD-10-CM	Diagnosis
E11.10	Type 2 diabetes mellitus with ketoacidosis without coma	ICD-10-CM	Diagnosis
E11.321	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E11.3213	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E11.3212	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E11.3211	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E11.3219	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E11.329	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E11.3293	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E11.3292	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E11.3291	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E11.3299	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E11.331	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E11.3313	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E11.3312	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E11.3311	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E11.3319	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E11.339	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
E11.3393	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E11.3392	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E11.3391	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E11.3399	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E11.59	Type 2 diabetes mellitus with other circulatory complications	ICD-10-CM	Diagnosis
E11.618	Type 2 diabetes mellitus with other diabetic arthropathy	ICD-10-CM	Diagnosis
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication	ICD-10-CM	Diagnosis
E11.49	Type 2 diabetes mellitus with other diabetic neurological complication	ICD-10-CM	Diagnosis
E11.39	Type 2 diabetes mellitus with other diabetic ophthalmic complication	ICD-10-CM	Diagnosis
E11.638	Type 2 diabetes mellitus with other oral complications	ICD-10-CM	Diagnosis
E11.628	Type 2 diabetes mellitus with other skin complications	ICD-10-CM	Diagnosis
E11.622	Type 2 diabetes mellitus with other skin ulcer	ICD-10-CM	Diagnosis
E11.69	Type 2 diabetes mellitus with other specified complication	ICD-10-CM	Diagnosis
E11.630	Type 2 diabetes mellitus with periodontal disease	ICD-10-CM	Diagnosis
E11.3543	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	ICD-10-CM	Diagnosis
E11.3542	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	ICD-10-CM	Diagnosis
E11.3541	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	ICD-10-CM	Diagnosis
E11.3549	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	ICD-10-CM	Diagnosis
E11.351	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E11.3513	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E11.3512	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E11.3511	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E11.3519	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E11.3523	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	ICD-10-CM	Diagnosis
E11.3522	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	ICD-10-CM	Diagnosis
E11.3521	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	ICD-10-CM	Diagnosis
E11.3529	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
E11.3533	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	ICD-10-CM	Diagnosis
E11.3532	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	ICD-10-CM	Diagnosis
E11.3531	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	ICD-10-CM	Diagnosis
E11.3539	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	ICD-10-CM	Diagnosis
E11.359	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E11.3593	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E11.3592	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E11.3591	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E11.3599	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E11.341	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E11.3413	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E11.3412	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E11.3411	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E11.3419	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E11.349	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis
E11.3493	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E11.3492	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E11.3491	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E11.3499	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E11.3553	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	ICD-10-CM	Diagnosis
E11.3552	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, left eye	ICD-10-CM	Diagnosis
E11.3551	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, right eye	ICD-10-CM	Diagnosis
E11.3559	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	ICD-10-CM	Diagnosis
E11.8	Type 2 diabetes mellitus with unspecified complications	ICD-10-CM	Diagnosis
E11.311	Type 2 diabetes mellitus with unspecified diabetic retinopathy with macular edema	ICD-10-CM	Diagnosis
E11.319	Type 2 diabetes mellitus with unspecified diabetic retinopathy without macular edema	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
E11.9	Type 2 diabetes mellitus without complications	ICD-10-CM	Diagnosis
	Glaucoma		
H44.513	Absolute glaucoma, bilateral	ICD-10-CM	Diagnosis
H44.512	Absolute glaucoma, left eye	ICD-10-CM	Diagnosis
H44.511	Absolute glaucoma, right eye	ICD-10-CM	Diagnosis
H44.519	Absolute glaucoma, unspecified eye	ICD-10-CM	Diagnosis
H40.213	Acute angle-closure glaucoma, bilateral	ICD-10-CM	Diagnosis
H40.212	Acute angle-closure glaucoma, left eye	ICD-10-CM	Diagnosis
H40.211	Acute angle-closure glaucoma, right eye	ICD-10-CM	Diagnosis
H40.219	Acute angle-closure glaucoma, unspecified eye	ICD-10-CM	Diagnosis
H40.833	Aqueous misdirection, bilateral	ICD-10-CM	Diagnosis
H40.832	Aqueous misdirection, left eye	ICD-10-CM	Diagnosis
H40.831	Aqueous misdirection, right eye	ICD-10-CM	Diagnosis
H40.839	Aqueous misdirection, unspecified eye	ICD-10-CM	Diagnosis
H40.1434	Capsular glaucoma with pseudoexfoliation of lens, bilateral, indeterminate stage	ICD-10-CM	Diagnosis
H40.1431	Capsular glaucoma with pseudoexfoliation of lens, bilateral, mild stage	ICD-10-CM	Diagnosis
H40.1432	Capsular glaucoma with pseudoexfoliation of lens, bilateral, moderate stage	ICD-10-CM	Diagnosis
H40.1433	Capsular glaucoma with pseudoexfoliation of lens, bilateral, severe stage	ICD-10-CM	Diagnosis
H40.1430	Capsular glaucoma with pseudoexfoliation of lens, bilateral, stage unspecified	ICD-10-CM	Diagnosis
H40.1424	Capsular glaucoma with pseudoexfoliation of lens, left eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.1421	Capsular glaucoma with pseudoexfoliation of lens, left eye, mild stage	ICD-10-CM	Diagnosis
H40.1422	Capsular glaucoma with pseudoexfoliation of lens, left eye, moderate stage	ICD-10-CM	Diagnosis
H40.1423	Capsular glaucoma with pseudoexfoliation of lens, left eye, severe stage	ICD-10-CM	Diagnosis
H40.1420	Capsular glaucoma with pseudoexfoliation of lens, left eye, stage unspecified	ICD-10-CM	Diagnosis
H40.1414	Capsular glaucoma with pseudoexfoliation of lens, right eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.1411	Capsular glaucoma with pseudoexfoliation of lens, right eye, mild stage	ICD-10-CM	Diagnosis
H40.1412	Capsular glaucoma with pseudoexfoliation of lens, right eye, moderate stage	ICD-10-CM	Diagnosis
H40.1413	Capsular glaucoma with pseudoexfoliation of lens, right eye, severe stage	ICD-10-CM	Diagnosis
H40.1410	Capsular glaucoma with pseudoexfoliation of lens, right eye, stage unspecified	ICD-10-CM	Diagnosis
H40.1494	Capsular glaucoma with pseudoexfoliation of lens, unspecified eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.1491	Capsular glaucoma with pseudoexfoliation of lens, unspecified eye, mild stage	ICD-10-CM	Diagnosis
H40.1492	Capsular glaucoma with pseudoexfoliation of lens, unspecified eye, moderate stage	ICD-10-CM	Diagnosis
H40.1493	Capsular glaucoma with pseudoexfoliation of lens, unspecified eye, severe stage	ICD-10-CM	Diagnosis
H40.1490	Capsular glaucoma with pseudoexfoliation of lens, unspecified eye, stage unspecified	ICD-10-CM	Diagnosis
H40.2234	Chronic angle-closure glaucoma, bilateral, indeterminate stage	ICD-10-CM	Diagnosis
H40.2231	Chronic angle-closure glaucoma, bilateral, mild stage	ICD-10-CM	Diagnosis
H40.2232	Chronic angle-closure glaucoma, bilateral, moderate stage	ICD-10-CM	Diagnosis
H40.2233	Chronic angle-closure glaucoma, bilateral, severe stage	ICD-10-CM	Diagnosis
H40.2230	Chronic angle-closure glaucoma, bilateral, stage unspecified	ICD-10-CM	Diagnosis
H40.2224	Chronic angle-closure glaucoma, left eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.2221	Chronic angle-closure glaucoma, left eye, mild stage	ICD-10-CM	Diagnosis
H40.2222	Chronic angle-closure glaucoma, left eye, moderate stage	ICD-10-CM	Diagnosis
H40.2223	Chronic angle-closure glaucoma, left eye, severe stage	ICD-10-CM	Diagnosis
H40.2220	Chronic angle-closure glaucoma, left eye, stage unspecified	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
H40.2214	Chronic angle-closure glaucoma, right eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.2211	Chronic angle-closure glaucoma, right eye, mild stage	ICD-10-CM	Diagnosis
H40.2212	Chronic angle-closure glaucoma, right eye, moderate stage	ICD-10-CM	Diagnosis
H40.2213	Chronic angle-closure glaucoma, right eye, severe stage	ICD-10-CM	Diagnosis
H40.2210	Chronic angle-closure glaucoma, right eye, stage unspecified	ICD-10-CM	Diagnosis
H40.2294	Chronic angle-closure glaucoma, unspecified eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.2291	Chronic angle-closure glaucoma, unspecified eye, mild stage	ICD-10-CM	Diagnosis
H40.2292	Chronic angle-closure glaucoma, unspecified eye, moderate stage	ICD-10-CM	Diagnosis
H40.2293	Chronic angle-closure glaucoma, unspecified eye, severe stage	ICD-10-CM	Diagnosis
H40.2290	Chronic angle-closure glaucoma, unspecified eye, stage unspecified	ICD-10-CM	Diagnosis
Q15.0	Congenital glaucoma	ICD-10-CM	Diagnosis
H42	Glaucoma in diseases classified elsewhere	ICD-10-CM	Diagnosis
H40.63X4	Glaucoma secondary to drugs, bilateral, indeterminate stage	ICD-10-CM	Diagnosis
H40.63X1	Glaucoma secondary to drugs, bilateral, mild stage	ICD-10-CM	Diagnosis
H40.63X2	Glaucoma secondary to drugs, bilateral, moderate stage	ICD-10-CM	Diagnosis
H40.63X3	Glaucoma secondary to drugs, bilateral, severe stage	ICD-10-CM	Diagnosis
H40.63X0	Glaucoma secondary to drugs, bilateral, stage unspecified	ICD-10-CM	Diagnosis
H40.62X4	Glaucoma secondary to drugs, left eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.62X1	Glaucoma secondary to drugs, left eye, mild stage	ICD-10-CM	Diagnosis
H40.62X2	Glaucoma secondary to drugs, left eye, moderate stage	ICD-10-CM	Diagnosis
H40.62X3	Glaucoma secondary to drugs, left eye, severe stage	ICD-10-CM	Diagnosis
H40.62X0	Glaucoma secondary to drugs, left eye, stage unspecified	ICD-10-CM	Diagnosis
H40.61X4	Glaucoma secondary to drugs, right eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.61X1	Glaucoma secondary to drugs, right eye, mild stage	ICD-10-CM	Diagnosis
H40.61X2	Glaucoma secondary to drugs, right eye, moderate stage	ICD-10-CM	Diagnosis
H40.61X3	Glaucoma secondary to drugs, right eye, severe stage	ICD-10-CM	Diagnosis
H40.61X0	Glaucoma secondary to drugs, right eye, stage unspecified	ICD-10-CM	Diagnosis
H40.60X4	Glaucoma secondary to drugs, unspecified eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.60X1	Glaucoma secondary to drugs, unspecified eye, mild stage	ICD-10-CM	Diagnosis
H40.60X2	Glaucoma secondary to drugs, unspecified eye, moderate stage	ICD-10-CM	Diagnosis
H40.60X3	Glaucoma secondary to drugs, unspecified eye, severe stage	ICD-10-CM	Diagnosis
H40.60X0	Glaucoma secondary to drugs, unspecified eye, stage unspecified	ICD-10-CM	Diagnosis
H40.43X4	Glaucoma secondary to eye inflammation, bilateral, indeterminate stage	ICD-10-CM	Diagnosis
H40.43X1	Glaucoma secondary to eye inflammation, bilateral, mild stage	ICD-10-CM	Diagnosis
H40.43X2	Glaucoma secondary to eye inflammation, bilateral, moderate stage	ICD-10-CM	Diagnosis
H40.43X3	Glaucoma secondary to eye inflammation, bilateral, severe stage	ICD-10-CM	Diagnosis
H40.43X0	Glaucoma secondary to eye inflammation, bilateral, stage unspecified	ICD-10-CM	Diagnosis
H40.42X4	Glaucoma secondary to eye inflammation, left eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.42X1	Glaucoma secondary to eye inflammation, left eye, mild stage	ICD-10-CM	Diagnosis
H40.42X2	Glaucoma secondary to eye inflammation, left eye, moderate stage	ICD-10-CM	Diagnosis
H40.42X3	Glaucoma secondary to eye inflammation, left eye, severe stage	ICD-10-CM	Diagnosis
H40.42X0	Glaucoma secondary to eye inflammation, left eye, stage unspecified	ICD-10-CM	Diagnosis
H40.41X4	Glaucoma secondary to eye inflammation, right eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.41X1	Glaucoma secondary to eye inflammation, right eye, mild stage	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
H40.41X2	Glaucoma secondary to eye inflammation, right eye, moderate stage	ICD-10-CM	Diagnosis
H40.41X3	Glaucoma secondary to eye inflammation, right eye, severe stage	ICD-10-CM	Diagnosis
H40.41X0	Glaucoma secondary to eye inflammation, right eye, stage unspecified	ICD-10-CM	Diagnosis
H40.40X4	Glaucoma secondary to eye inflammation, unspecified eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.40X1	Glaucoma secondary to eye inflammation, unspecified eye, mild stage	ICD-10-CM	Diagnosis
H40.40X2	Glaucoma secondary to eye inflammation, unspecified eye, moderate stage	ICD-10-CM	Diagnosis
H40.40X3	Glaucoma secondary to eye inflammation, unspecified eye, severe stage	ICD-10-CM	Diagnosis
H40.40X0	Glaucoma secondary to eye inflammation, unspecified eye, stage unspecified	ICD-10-CM	Diagnosis
H40.33X4	Glaucoma secondary to eye trauma, bilateral, indeterminate stage	ICD-10-CM	Diagnosis
H40.33X1	Glaucoma secondary to eye trauma, bilateral, mild stage	ICD-10-CM	Diagnosis
H40.33X2	Glaucoma secondary to eye trauma, bilateral, moderate stage	ICD-10-CM	Diagnosis
H40.33X3	Glaucoma secondary to eye trauma, bilateral, severe stage	ICD-10-CM	Diagnosis
H40.33X0	Glaucoma secondary to eye trauma, bilateral, stage unspecified	ICD-10-CM	Diagnosis
H40.32X4	Glaucoma secondary to eye trauma, left eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.32X1	Glaucoma secondary to eye trauma, left eye, mild stage	ICD-10-CM	Diagnosis
H40.32X2	Glaucoma secondary to eye trauma, left eye, moderate stage	ICD-10-CM	Diagnosis
H40.32X3	Glaucoma secondary to eye trauma, left eye, severe stage	ICD-10-CM	Diagnosis
H40.32X0	Glaucoma secondary to eye trauma, left eye, stage unspecified	ICD-10-CM	Diagnosis
H40.31X4	Glaucoma secondary to eye trauma, right eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.31X1	Glaucoma secondary to eye trauma, right eye, mild stage	ICD-10-CM	Diagnosis
H40.31X2	Glaucoma secondary to eye trauma, right eye, moderate stage	ICD-10-CM	Diagnosis
H40.31X3	Glaucoma secondary to eye trauma, right eye, severe stage	ICD-10-CM	Diagnosis
H40.31X0	Glaucoma secondary to eye trauma, right eye, stage unspecified	ICD-10-CM	Diagnosis
H40.30X4	Glaucoma secondary to eye trauma, unspecified eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.30X1	Glaucoma secondary to eye trauma, unspecified eye, mild stage	ICD-10-CM	Diagnosis
H40.30X2	Glaucoma secondary to eye trauma, unspecified eye, moderate stage	ICD-10-CM	Diagnosis
H40.30X3	Glaucoma secondary to eye trauma, unspecified eye, severe stage	ICD-10-CM	Diagnosis
H40.30X0	Glaucoma secondary to eye trauma, unspecified eye, stage unspecified	ICD-10-CM	Diagnosis
H40.53X4	Glaucoma secondary to other eye disorders, bilateral, indeterminate stage	ICD-10-CM	Diagnosis
H40.53X1	Glaucoma secondary to other eye disorders, bilateral, mild stage	ICD-10-CM	Diagnosis
H40.53X2	Glaucoma secondary to other eye disorders, bilateral, moderate stage	ICD-10-CM	Diagnosis
H40.53X3	Glaucoma secondary to other eye disorders, bilateral, severe stage	ICD-10-CM	Diagnosis
H40.53X0	Glaucoma secondary to other eye disorders, bilateral, stage unspecified	ICD-10-CM	Diagnosis
H40.52X4	Glaucoma secondary to other eye disorders, left eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.52X1	Glaucoma secondary to other eye disorders, left eye, mild stage	ICD-10-CM	Diagnosis
H40.52X2	Glaucoma secondary to other eye disorders, left eye, moderate stage	ICD-10-CM	Diagnosis
H40.52X3	Glaucoma secondary to other eye disorders, left eye, severe stage	ICD-10-CM	Diagnosis
H40.52X0	Glaucoma secondary to other eye disorders, left eye, stage unspecified	ICD-10-CM	Diagnosis
H40.51X4	Glaucoma secondary to other eye disorders, right eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.51X1	Glaucoma secondary to other eye disorders, right eye, mild stage	ICD-10-CM	Diagnosis
H40.51X2	Glaucoma secondary to other eye disorders, right eye, moderate stage	ICD-10-CM	Diagnosis
H40.51X3	Glaucoma secondary to other eye disorders, right eye, severe stage	ICD-10-CM	Diagnosis
H40.51X0	Glaucoma secondary to other eye disorders, right eye, stage unspecified	ICD-10-CM	Diagnosis
H40.50X4	Glaucoma secondary to other eye disorders, unspecified eye, indeterminate stage	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
H40.50X1	Glaucoma secondary to other eye disorders, unspecified eye, mild stage	ICD-10-CM	Diagnosis
H40.50X2	Glaucoma secondary to other eye disorders, unspecified eye, moderate stage	ICD-10-CM	Diagnosis
H40.50X3	Glaucoma secondary to other eye disorders, unspecified eye, severe stage	ICD-10-CM	Diagnosis
H40.50X0	Glaucoma secondary to other eye disorders, unspecified eye, stage unspecified	ICD-10-CM	Diagnosis
H40.813	Glaucoma with increased episcleral venous pressure, bilateral	ICD-10-CM	Diagnosis
H40.812	Glaucoma with increased episcleral venous pressure, left eye	ICD-10-CM	Diagnosis
H40.811	Glaucoma with increased episcleral venous pressure, right eye	ICD-10-CM	Diagnosis
H40.819	Glaucoma with increased episcleral venous pressure, unspecified eye	ICD-10-CM	Diagnosis
H47.233	Glaucomatous optic atrophy, bilateral	ICD-10-CM	Diagnosis
H47.232	Glaucomatous optic atrophy, left eye	ICD-10-CM	Diagnosis
H47.231	Glaucomatous optic atrophy, right eye	ICD-10-CM	Diagnosis
H47.239	Glaucomatous optic atrophy, unspecified eye	ICD-10-CM	Diagnosis
H40.823	Hypersecretion glaucoma, bilateral	ICD-10-CM	Diagnosis
H40.822	Hypersecretion glaucoma, left eye	ICD-10-CM	Diagnosis
H40.821	Hypersecretion glaucoma, right eye	ICD-10-CM	Diagnosis
H40.829	Hypersecretion glaucoma, unspecified eye	ICD-10-CM	Diagnosis
H40.233	Intermittent angle-closure glaucoma, bilateral	ICD-10-CM	Diagnosis
H40.232	Intermittent angle-closure glaucoma, left eye	ICD-10-CM	Diagnosis
H40.231	Intermittent angle-closure glaucoma, right eye	ICD-10-CM	Diagnosis
H40.239	Intermittent angle-closure glaucoma, unspecified eye	ICD-10-CM	Diagnosis
H40.1234	Low-tension glaucoma, bilateral, indeterminate stage	ICD-10-CM	Diagnosis
H40.1231	Low-tension glaucoma, bilateral, mild stage	ICD-10-CM	Diagnosis
H40.1232	Low-tension glaucoma, bilateral, moderate stage	ICD-10-CM	Diagnosis
H40.1233	Low-tension glaucoma, bilateral, severe stage	ICD-10-CM	Diagnosis
H40.1230	Low-tension glaucoma, bilateral, stage unspecified	ICD-10-CM	Diagnosis
H40.1224	Low-tension glaucoma, left eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.1221	Low-tension glaucoma, left eye, mild stage	ICD-10-CM	Diagnosis
H40.1222	Low-tension glaucoma, left eye, moderate stage	ICD-10-CM	Diagnosis
H40.1223	Low-tension glaucoma, left eye, severe stage	ICD-10-CM	Diagnosis
H40.1220	Low-tension glaucoma, left eye, stage unspecified	ICD-10-CM	Diagnosis
H40.1214	Low-tension glaucoma, right eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.1211	Low-tension glaucoma, right eye, mild stage	ICD-10-CM	Diagnosis
H40.1212	Low-tension glaucoma, right eye, moderate stage	ICD-10-CM	Diagnosis
H40.1213	Low-tension glaucoma, right eye, severe stage	ICD-10-CM	Diagnosis
H40.1210	Low-tension glaucoma, right eye, stage unspecified	ICD-10-CM	Diagnosis
H40.1294	Low-tension glaucoma, unspecified eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.1291	Low-tension glaucoma, unspecified eye, mild stage	ICD-10-CM	Diagnosis
H40.1292	Low-tension glaucoma, unspecified eye, moderate stage	ICD-10-CM	Diagnosis
H40.1293	Low-tension glaucoma, unspecified eye, severe stage	ICD-10-CM	Diagnosis
H40.1290	Low-tension glaucoma, unspecified eye, stage unspecified	ICD-10-CM	Diagnosis
H40.053	Ocular hypertension, bilateral	ICD-10-CM	Diagnosis
H40.052	Ocular hypertension, left eye	ICD-10-CM	Diagnosis
H40.051	Ocular hypertension, right eye	ICD-10-CM	Diagnosis
H40.059	Ocular hypertension, unspecified eye	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
H40.023	Open angle with borderline findings, high risk, bilateral	ICD-10-CM	Diagnosis
H40.022	Open angle with borderline findings, high risk, left eye	ICD-10-CM	Diagnosis
H40.021	Open angle with borderline findings, high risk, right eye	ICD-10-CM	Diagnosis
H40.029	Open angle with borderline findings, high risk, unspecified eye	ICD-10-CM	Diagnosis
H40.013	Open angle with borderline findings, low risk, bilateral	ICD-10-CM	Diagnosis
H40.012	Open angle with borderline findings, low risk, left eye	ICD-10-CM	Diagnosis
H40.011	Open angle with borderline findings, low risk, right eye	ICD-10-CM	Diagnosis
H40.019	Open angle with borderline findings, low risk, unspecified eye	ICD-10-CM	Diagnosis
H40.89	Other specified glaucoma	ICD-10-CM	Diagnosis
H40.1334	Pigmentary glaucoma, bilateral, indeterminate stage	ICD-10-CM	Diagnosis
H40.1331	Pigmentary glaucoma, bilateral, mild stage	ICD-10-CM	Diagnosis
H40.1332	Pigmentary glaucoma, bilateral, moderate stage	ICD-10-CM	Diagnosis
H40.1333	Pigmentary glaucoma, bilateral, severe stage	ICD-10-CM	Diagnosis
H40.1330	Pigmentary glaucoma, bilateral, stage unspecified	ICD-10-CM	Diagnosis
H40.1324	Pigmentary glaucoma, left eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.1321	Pigmentary glaucoma, left eye, mild stage	ICD-10-CM	Diagnosis
H40.1322	Pigmentary glaucoma, left eye, moderate stage	ICD-10-CM	Diagnosis
H40.1323	Pigmentary glaucoma, left eye, severe stage	ICD-10-CM	Diagnosis
H40.1320	Pigmentary glaucoma, left eye, stage unspecified	ICD-10-CM	Diagnosis
H40.1314	Pigmentary glaucoma, right eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.1311	Pigmentary glaucoma, right eye, mild stage	ICD-10-CM	Diagnosis
H40.1312	Pigmentary glaucoma, right eye, moderate stage	ICD-10-CM	Diagnosis
H40.1313	Pigmentary glaucoma, right eye, severe stage	ICD-10-CM	Diagnosis
H40.1310	Pigmentary glaucoma, right eye, stage unspecified	ICD-10-CM	Diagnosis
H40.1394	Pigmentary glaucoma, unspecified eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.1391	Pigmentary glaucoma, unspecified eye, mild stage	ICD-10-CM	Diagnosis
H40.1392	Pigmentary glaucoma, unspecified eye, moderate stage	ICD-10-CM	Diagnosis
H40.1393	Pigmentary glaucoma, unspecified eye, severe stage	ICD-10-CM	Diagnosis
H40.1390	Pigmentary glaucoma, unspecified eye, stage unspecified	ICD-10-CM	Diagnosis
H40.1134	Primary open-angle glaucoma, bilateral, indeterminate stage	ICD-10-CM	Diagnosis
H40.1131	Primary open-angle glaucoma, bilateral, mild stage	ICD-10-CM	Diagnosis
H40.1132	Primary open-angle glaucoma, bilateral, moderate stage	ICD-10-CM	Diagnosis
H40.1133	Primary open-angle glaucoma, bilateral, severe stage	ICD-10-CM	Diagnosis
H40.1130	Primary open-angle glaucoma, bilateral, stage unspecified	ICD-10-CM	Diagnosis
H40.11X4	Primary open-angle glaucoma, indeterminate stage	ICD-10-CM	Diagnosis
H40.1124	Primary open-angle glaucoma, left eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.1121	Primary open-angle glaucoma, left eye, mild stage	ICD-10-CM	Diagnosis
H40.1122	Primary open-angle glaucoma, left eye, moderate stage	ICD-10-CM	Diagnosis
H40.1123	Primary open-angle glaucoma, left eye, severe stage	ICD-10-CM	Diagnosis
H40.1120	Primary open-angle glaucoma, left eye, stage unspecified	ICD-10-CM	Diagnosis
H40.11X1	Primary open-angle glaucoma, mild stage	ICD-10-CM	Diagnosis
H40.11X2	Primary open-angle glaucoma, moderate stage	ICD-10-CM	Diagnosis
H40.1114	Primary open-angle glaucoma, right eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.1111	Primary open-angle glaucoma, right eye, mild stage	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
H40.1112	Primary open-angle glaucoma, right eye, moderate stage	ICD-10-CM	Diagnosis
H40.1113	Primary open-angle glaucoma, right eye, severe stage	ICD-10-CM	Diagnosis
H40.1110	Primary open-angle glaucoma, right eye, stage unspecified	ICD-10-CM	Diagnosis
H40.11X3	Primary open-angle glaucoma, severe stage	ICD-10-CM	Diagnosis
H40.11X0	Primary open-angle glaucoma, stage unspecified	ICD-10-CM	Diagnosis
H40.1194	Primary open-angle glaucoma, unspecified eye, indeterminate stage	ICD-10-CM	Diagnosis
H40.1191	Primary open-angle glaucoma, unspecified eye, mild stage	ICD-10-CM	Diagnosis
H40.1192	Primary open-angle glaucoma, unspecified eye, moderate stage	ICD-10-CM	Diagnosis
H40.1193	Primary open-angle glaucoma, unspecified eye, severe stage	ICD-10-CM	Diagnosis
H40.1190	Primary open-angle glaucoma, unspecified eye, stage unspecified	ICD-10-CM	Diagnosis
H40.243	Residual stage of angle-closure glaucoma, bilateral	ICD-10-CM	Diagnosis
H40.242	Residual stage of angle-closure glaucoma, left eye	ICD-10-CM	Diagnosis
H40.241	Residual stage of angle-closure glaucoma, right eye	ICD-10-CM	Diagnosis
H40.249	Residual stage of angle-closure glaucoma, unspecified eye	ICD-10-CM	Diagnosis
H40.153	Residual stage of open-angle glaucoma, bilateral	ICD-10-CM	Diagnosis
H40.152	Residual stage of open-angle glaucoma, left eye	ICD-10-CM	Diagnosis
H40.151	Residual stage of open-angle glaucoma, right eye	ICD-10-CM	Diagnosis
H40.159	Residual stage of open-angle glaucoma, unspecified eye	ICD-10-CM	Diagnosis
H40.043	Steroid responder, bilateral	ICD-10-CM	Diagnosis
H40.042	Steroid responder, left eye	ICD-10-CM	Diagnosis
H40.041	Steroid responder, right eye	ICD-10-CM	Diagnosis
H40.049	Steroid responder, unspecified eye	ICD-10-CM	Diagnosis
H40.9	Unspecified glaucoma	ICD-10-CM	Diagnosis
H40.10X4	Unspecified open-angle glaucoma, indeterminate stage	ICD-10-CM	Diagnosis
H40.10X1	Unspecified open-angle glaucoma, mild stage	ICD-10-CM	Diagnosis
H40.10X2	Unspecified open-angle glaucoma, moderate stage	ICD-10-CM	Diagnosis
H40.10X3	Unspecified open-angle glaucoma, severe stage	ICD-10-CM	Diagnosis
H40.10X0	Unspecified open-angle glaucoma, stage unspecified	ICD-10-CM	Diagnosis
H40.20X4	Unspecified primary angle-closure glaucoma, indeterminate stage	ICD-10-CM	Diagnosis
H40.20X1	Unspecified primary angle-closure glaucoma, mild stage	ICD-10-CM	Diagnosis
H40.20X2	Unspecified primary angle-closure glaucoma, moderate stage	ICD-10-CM	Diagnosis
H40.20X3	Unspecified primary angle-closure glaucoma, severe stage	ICD-10-CM	Diagnosis
H40.20X0	Unspecified primary angle-closure glaucoma, stage unspecified	ICD-10-CM	Diagnosis
	Heart Failure or Non-ischemic Heart Disease		
I50.41	Acute combined systolic (congestive) and diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.31	Acute diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.43	Acute on chronic combined systolic (congestive) and diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.33	Acute on chronic diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.813	Acute on chronic right heart failure	ICD-10-CM	Diagnosis
I50.23	Acute on chronic systolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.811	Acute right heart failure	ICD-10-CM	Diagnosis
I50.21	Acute systolic (congestive) heart failure	ICD-10-CM	Diagnosis
I42.6	Alcoholic cardiomyopathy	ICD-10-CM	Diagnosis
I50.82	Biventricular heart failure	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
I42.7	Cardiomyopathy due to drug and external agent	ICD-10-CM	Diagnosis
I43	Cardiomyopathy in diseases classified elsewhere	ICD-10-CM	Diagnosis
I50.42	Chronic combined systolic (congestive) and diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.32	Chronic diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.812	Chronic right heart failure	ICD-10-CM	Diagnosis
I50.22	Chronic systolic (congestive) heart failure	ICD-10-CM	Diagnosis
I42.0	Dilated cardiomyopathy	ICD-10-CM	Diagnosis
I50.84	End stage heart failure	ICD-10-CM	Diagnosis
I50.9	Heart failure, unspecified	ICD-10-CM	Diagnosis
I50.83	High output heart failure	ICD-10-CM	Diagnosis
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	ICD-10-CM	Diagnosis
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease	ICD-10-CM	Diagnosis
I11.0	Hypertensive heart disease with heart failure	ICD-10-CM	Diagnosis
I50.1	Left ventricular failure, unspecified	ICD-10-CM	Diagnosis
P29.0	Neonatal cardiac failure	ICD-10-CM	Diagnosis
I42.8	Other cardiomyopathies	ICD-10-CM	Diagnosis
I50.89	Other heart failure	ICD-10-CM	Diagnosis
I42.5	Other restrictive cardiomyopathy	ICD-10-CM	Diagnosis
I09.81	Rheumatic heart failure	ICD-10-CM	Diagnosis
I50.814	Right heart failure due to left heart failure	ICD-10-CM	Diagnosis
I50.810	Right heart failure, unspecified	ICD-10-CM	Diagnosis
I50.40	Unspecified combined systolic (congestive) and diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.30	Unspecified diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.20	Unspecified systolic (congestive) heart failure	ICD-10-CM	Diagnosis
	Hip or Pelvic Fracture		
M80.052A	Age-related osteoporosis with current pathological fracture, left femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.051A	Age-related osteoporosis with current pathological fracture, right femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.059A	Age-related osteoporosis with current pathological fracture, unspecified femur, initial encounter for fracture	ICD-10-CM	Diagnosis
S72.132A	Displaced apophyseal fracture of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.132B	Displaced apophyseal fracture of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.132C	Displaced apophyseal fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.131A	Displaced apophyseal fracture of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.131B	Displaced apophyseal fracture of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.131C	Displaced apophyseal fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.133A	Displaced apophyseal fracture of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
S72.133B	Displaced apophyseal fracture of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.133C	Displaced apophyseal fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.062A	Displaced articular fracture of head of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.062B	Displaced articular fracture of head of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.062C	Displaced articular fracture of head of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.061A	Displaced articular fracture of head of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.061B	Displaced articular fracture of head of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.061C	Displaced articular fracture of head of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.063A	Displaced articular fracture of head of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.063B	Displaced articular fracture of head of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.063C	Displaced articular fracture of head of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S32.462A	Displaced associated transverse-posterior fracture of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.462B	Displaced associated transverse-posterior fracture of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.461A	Displaced associated transverse-posterior fracture of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.461B	Displaced associated transverse-posterior fracture of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.463A	Displaced associated transverse-posterior fracture of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.463B	Displaced associated transverse-posterior fracture of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.312A	Displaced avulsion fracture of left ilium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.312B	Displaced avulsion fracture of left ilium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.612A	Displaced avulsion fracture of left ischium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.612B	Displaced avulsion fracture of left ischium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.311A	Displaced avulsion fracture of right ilium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.311B	Displaced avulsion fracture of right ilium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.611A	Displaced avulsion fracture of right ischium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.611B	Displaced avulsion fracture of right ischium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.313A	Displaced avulsion fracture of unspecified ilium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.313B	Displaced avulsion fracture of unspecified ilium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.613A	Displaced avulsion fracture of unspecified ischium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.613B	Displaced avulsion fracture of unspecified ischium, initial encounter for open fracture	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
S32.482A	Displaced dome fracture of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.482B	Displaced dome fracture of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.481A	Displaced dome fracture of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.481B	Displaced dome fracture of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.483A	Displaced dome fracture of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.483B	Displaced dome fracture of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.432A	Displaced fracture of anterior column [iliopubic] of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.432B	Displaced fracture of anterior column [iliopubic] of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.431A	Displaced fracture of anterior column [iliopubic] of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.431B	Displaced fracture of anterior column [iliopubic] of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.433A	Displaced fracture of anterior column [iliopubic] of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.433B	Displaced fracture of anterior column [iliopubic] of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.412A	Displaced fracture of anterior wall of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.412B	Displaced fracture of anterior wall of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.411A	Displaced fracture of anterior wall of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.411B	Displaced fracture of anterior wall of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.413A	Displaced fracture of anterior wall of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.413B	Displaced fracture of anterior wall of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S72.042A	Displaced fracture of base of neck of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.042B	Displaced fracture of base of neck of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.042C	Displaced fracture of base of neck of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.041A	Displaced fracture of base of neck of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.041B	Displaced fracture of base of neck of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.041C	Displaced fracture of base of neck of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.043A	Displaced fracture of base of neck of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.043B	Displaced fracture of base of neck of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.043C	Displaced fracture of base of neck of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
S72.022A	Displaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.022B	Displaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.022C	Displaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.021A	Displaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.021B	Displaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.021C	Displaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.023A	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.023B	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.023C	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.112A	Displaced fracture of greater trochanter of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.112B	Displaced fracture of greater trochanter of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.112C	Displaced fracture of greater trochanter of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.111A	Displaced fracture of greater trochanter of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.111B	Displaced fracture of greater trochanter of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.111C	Displaced fracture of greater trochanter of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.113A	Displaced fracture of greater trochanter of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.113B	Displaced fracture of greater trochanter of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.113C	Displaced fracture of greater trochanter of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.122A	Displaced fracture of lesser trochanter of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.122B	Displaced fracture of lesser trochanter of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.122C	Displaced fracture of lesser trochanter of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.121A	Displaced fracture of lesser trochanter of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.121B	Displaced fracture of lesser trochanter of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
S72.121C	Displaced fracture of lesser trochanter of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.123A	Displaced fracture of lesser trochanter of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.123B	Displaced fracture of lesser trochanter of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.123C	Displaced fracture of lesser trochanter of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S32.472A	Displaced fracture of medial wall of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.472B	Displaced fracture of medial wall of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.471A	Displaced fracture of medial wall of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.471B	Displaced fracture of medial wall of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.473A	Displaced fracture of medial wall of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.473B	Displaced fracture of medial wall of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.442A	Displaced fracture of posterior column [ilioischial] of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.442B	Displaced fracture of posterior column [ilioischial] of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.441A	Displaced fracture of posterior column [ilioischial] of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.441B	Displaced fracture of posterior column [ilioischial] of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.443A	Displaced fracture of posterior column [ilioischial] of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.443B	Displaced fracture of posterior column [ilioischial] of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.422A	Displaced fracture of posterior wall of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.422B	Displaced fracture of posterior wall of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.421A	Displaced fracture of posterior wall of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.421B	Displaced fracture of posterior wall of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.423A	Displaced fracture of posterior wall of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.423B	Displaced fracture of posterior wall of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S72.142A	Displaced intertrochanteric fracture of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.142B	Displaced intertrochanteric fracture of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.142C	Displaced intertrochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
S72.141A	Displaced intertrochanteric fracture of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.141B	Displaced intertrochanteric fracture of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.141C	Displaced intertrochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.143A	Displaced intertrochanteric fracture of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.143B	Displaced intertrochanteric fracture of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.143C	Displaced intertrochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.032A	Displaced midcervical fracture of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.032B	Displaced midcervical fracture of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.032C	Displaced midcervical fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.031A	Displaced midcervical fracture of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.031B	Displaced midcervical fracture of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.031C	Displaced midcervical fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.033A	Displaced midcervical fracture of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.033B	Displaced midcervical fracture of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.033C	Displaced midcervical fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.22XA	Displaced subtrochanteric fracture of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.22XB	Displaced subtrochanteric fracture of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.22XC	Displaced subtrochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.21XA	Displaced subtrochanteric fracture of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.21XB	Displaced subtrochanteric fracture of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.21XC	Displaced subtrochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.23XA	Displaced subtrochanteric fracture of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.23XB	Displaced subtrochanteric fracture of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.23XC	Displaced subtrochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S32.452A	Displaced transverse fracture of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.452B	Displaced transverse fracture of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.451A	Displaced transverse fracture of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
S32.451B	Displaced transverse fracture of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.453A	Displaced transverse fracture of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.453B	Displaced transverse fracture of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.89XA	Fracture of other parts of pelvis, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.89XB	Fracture of other parts of pelvis, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.512A	Fracture of superior rim of left pubis, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.512B	Fracture of superior rim of left pubis, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.511A	Fracture of superior rim of right pubis, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.511B	Fracture of superior rim of right pubis, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.519A	Fracture of superior rim of unspecified pubis, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.519B	Fracture of superior rim of unspecified pubis, initial encounter for open fracture	ICD-10-CM	Diagnosis
S72.002A	Fracture of unspecified part of neck of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.002B	Fracture of unspecified part of neck of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.002C	Fracture of unspecified part of neck of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.001A	Fracture of unspecified part of neck of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.001B	Fracture of unspecified part of neck of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.001C	Fracture of unspecified part of neck of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.009A	Fracture of unspecified part of neck of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.009B	Fracture of unspecified part of neck of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.009C	Fracture of unspecified part of neck of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S32.9XXA	Fracture of unspecified parts of lumbosacral spine and pelvis, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.9XXB	Fracture of unspecified parts of lumbosacral spine and pelvis, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.810A	Multiple fractures of pelvis with stable disruption of pelvic ring, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.810B	Multiple fractures of pelvis with stable disruption of pelvic ring, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.811A	Multiple fractures of pelvis with unstable disruption of pelvic ring, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.811B	Multiple fractures of pelvis with unstable disruption of pelvic ring, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.82XA	Multiple fractures of pelvis without disruption of pelvic ring, initial encounter for closed fracture	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
S32.82XB	Multiple fractures of pelvis without disruption of pelvic ring, initial encounter for open fracture	ICD-10-CM	Diagnosis
S72.135A	Nondisplaced apophyseal fracture of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.135B	Nondisplaced apophyseal fracture of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.135C	Nondisplaced apophyseal fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.134A	Nondisplaced apophyseal fracture of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.134B	Nondisplaced apophyseal fracture of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.134C	Nondisplaced apophyseal fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.136A	Nondisplaced apophyseal fracture of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.136B	Nondisplaced apophyseal fracture of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.136C	Nondisplaced apophyseal fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.065A	Nondisplaced articular fracture of head of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.065B	Nondisplaced articular fracture of head of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.065C	Nondisplaced articular fracture of head of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.064A	Nondisplaced articular fracture of head of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.064B	Nondisplaced articular fracture of head of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.064C	Nondisplaced articular fracture of head of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.066A	Nondisplaced articular fracture of head of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.066B	Nondisplaced articular fracture of head of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.066C	Nondisplaced articular fracture of head of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S32.465A	Nondisplaced associated transverse-posterior fracture of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.465B	Nondisplaced associated transverse-posterior fracture of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.464A	Nondisplaced associated transverse-posterior fracture of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.464B	Nondisplaced associated transverse-posterior fracture of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
S32.466A	Nondisplaced associated transverse-posterior fracture of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.466B	Nondisplaced associated transverse-posterior fracture of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.315A	Nondisplaced avulsion fracture of left ilium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.315B	Nondisplaced avulsion fracture of left ilium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.615A	Nondisplaced avulsion fracture of left ischium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.615B	Nondisplaced avulsion fracture of left ischium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.314A	Nondisplaced avulsion fracture of right ilium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.314B	Nondisplaced avulsion fracture of right ilium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.614A	Nondisplaced avulsion fracture of right ischium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.614B	Nondisplaced avulsion fracture of right ischium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.316A	Nondisplaced avulsion fracture of unspecified ilium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.316B	Nondisplaced avulsion fracture of unspecified ilium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.616A	Nondisplaced avulsion fracture of unspecified ischium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.616B	Nondisplaced avulsion fracture of unspecified ischium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.485A	Nondisplaced dome fracture of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.485B	Nondisplaced dome fracture of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.484A	Nondisplaced dome fracture of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.484B	Nondisplaced dome fracture of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.486A	Nondisplaced dome fracture of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.486B	Nondisplaced dome fracture of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.435A	Nondisplaced fracture of anterior column [iliopubic] of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.435B	Nondisplaced fracture of anterior column [iliopubic] of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.434A	Nondisplaced fracture of anterior column [iliopubic] of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.434B	Nondisplaced fracture of anterior column [iliopubic] of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.436A	Nondisplaced fracture of anterior column [iliopubic] of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.436B	Nondisplaced fracture of anterior column [iliopubic] of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.415A	Nondisplaced fracture of anterior wall of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.415B	Nondisplaced fracture of anterior wall of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.414A	Nondisplaced fracture of anterior wall of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
S32.414B	Nondisplaced fracture of anterior wall of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.416A	Nondisplaced fracture of anterior wall of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.416B	Nondisplaced fracture of anterior wall of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S72.045A	Nondisplaced fracture of base of neck of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.045B	Nondisplaced fracture of base of neck of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.045C	Nondisplaced fracture of base of neck of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.044A	Nondisplaced fracture of base of neck of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.044B	Nondisplaced fracture of base of neck of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.044C	Nondisplaced fracture of base of neck of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.046A	Nondisplaced fracture of base of neck of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.046B	Nondisplaced fracture of base of neck of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.046C	Nondisplaced fracture of base of neck of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.025A	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.025B	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.025C	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.024A	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.024B	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.024C	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.026A	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.026B	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.026C	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.115A	Nondisplaced fracture of greater trochanter of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.115B	Nondisplaced fracture of greater trochanter of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
S72.115C	Nondisplaced fracture of greater trochanter of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.114A	Nondisplaced fracture of greater trochanter of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.114B	Nondisplaced fracture of greater trochanter of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.114C	Nondisplaced fracture of greater trochanter of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.116A	Nondisplaced fracture of greater trochanter of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.116B	Nondisplaced fracture of greater trochanter of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.116C	Nondisplaced fracture of greater trochanter of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.125A	Nondisplaced fracture of lesser trochanter of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.125B	Nondisplaced fracture of lesser trochanter of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.125C	Nondisplaced fracture of lesser trochanter of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.124A	Nondisplaced fracture of lesser trochanter of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.124B	Nondisplaced fracture of lesser trochanter of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.124C	Nondisplaced fracture of lesser trochanter of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.126A	Nondisplaced fracture of lesser trochanter of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.126B	Nondisplaced fracture of lesser trochanter of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.126C	Nondisplaced fracture of lesser trochanter of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S32.475A	Nondisplaced fracture of medial wall of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.475B	Nondisplaced fracture of medial wall of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.474A	Nondisplaced fracture of medial wall of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.474B	Nondisplaced fracture of medial wall of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.476A	Nondisplaced fracture of medial wall of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.476B	Nondisplaced fracture of medial wall of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
S32.445A	Nondisplaced fracture of posterior column [ilioischial] of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.445B	Nondisplaced fracture of posterior column [ilioischial] of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.444A	Nondisplaced fracture of posterior column [ilioischial] of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.444B	Nondisplaced fracture of posterior column [ilioischial] of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.446A	Nondisplaced fracture of posterior column [ilioischial] of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.446B	Nondisplaced fracture of posterior column [ilioischial] of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.425A	Nondisplaced fracture of posterior wall of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.425B	Nondisplaced fracture of posterior wall of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.424A	Nondisplaced fracture of posterior wall of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.424B	Nondisplaced fracture of posterior wall of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.426A	Nondisplaced fracture of posterior wall of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.426B	Nondisplaced fracture of posterior wall of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S72.145A	Nondisplaced intertrochanteric fracture of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.145B	Nondisplaced intertrochanteric fracture of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.145C	Nondisplaced intertrochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.144A	Nondisplaced intertrochanteric fracture of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.144B	Nondisplaced intertrochanteric fracture of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.144C	Nondisplaced intertrochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.146A	Nondisplaced intertrochanteric fracture of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.146B	Nondisplaced intertrochanteric fracture of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.146C	Nondisplaced intertrochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.035A	Nondisplaced midcervical fracture of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.035B	Nondisplaced midcervical fracture of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
S72.035C	Nondisplaced midcervical fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.034A	Nondisplaced midcervical fracture of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.034B	Nondisplaced midcervical fracture of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.034C	Nondisplaced midcervical fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.036A	Nondisplaced midcervical fracture of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.036B	Nondisplaced midcervical fracture of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.036C	Nondisplaced midcervical fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.25XA	Nondisplaced subtrochanteric fracture of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.25XB	Nondisplaced subtrochanteric fracture of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.25XC	Nondisplaced subtrochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.24XA	Nondisplaced subtrochanteric fracture of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.24XB	Nondisplaced subtrochanteric fracture of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.24XC	Nondisplaced subtrochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.26XA	Nondisplaced subtrochanteric fracture of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.26XB	Nondisplaced subtrochanteric fracture of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.26XC	Nondisplaced subtrochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S32.455A	Nondisplaced transverse fracture of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.455B	Nondisplaced transverse fracture of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.454A	Nondisplaced transverse fracture of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.454B	Nondisplaced transverse fracture of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.456A	Nondisplaced transverse fracture of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.456B	Nondisplaced transverse fracture of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S72.092A	Other fracture of head and neck of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.092B	Other fracture of head and neck of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.092C	Other fracture of head and neck of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.091A	Other fracture of head and neck of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.091B	Other fracture of head and neck of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
S72.091C	Other fracture of head and neck of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.099A	Other fracture of head and neck of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.099B	Other fracture of head and neck of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.099C	Other fracture of head and neck of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S32.392A	Other fracture of left ilium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.392B	Other fracture of left ilium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.391A	Other fracture of right ilium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.391B	Other fracture of right ilium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.399A	Other fracture of unspecified ilium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.399B	Other fracture of unspecified ilium, initial encounter for open fracture	ICD-10-CM	Diagnosis
M80.852A	Other osteoporosis with current pathological fracture, left femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.851A	Other osteoporosis with current pathological fracture, right femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.859A	Other osteoporosis with current pathological fracture, unspecified femur, initial encounter for fracture	ICD-10-CM	Diagnosis
S79.092A	Other physeal fracture of upper end of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S79.091A	Other physeal fracture of upper end of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S79.099A	Other physeal fracture of upper end of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.492A	Other specified fracture of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.492B	Other specified fracture of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.692A	Other specified fracture of left ischium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.692B	Other specified fracture of left ischium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.592A	Other specified fracture of left pubis, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.592B	Other specified fracture of left pubis, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.491A	Other specified fracture of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.491B	Other specified fracture of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.691A	Other specified fracture of right ischium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.691B	Other specified fracture of right ischium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.591A	Other specified fracture of right pubis, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.591B	Other specified fracture of right pubis, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.499A	Other specified fracture of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.499B	Other specified fracture of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.699A	Other specified fracture of unspecified ischium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.699B	Other specified fracture of unspecified ischium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.599A	Other specified fracture of unspecified pubis, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.599B	Other specified fracture of unspecified pubis, initial encounter for open fracture	ICD-10-CM	Diagnosis
M84.559A	Pathological fracture in neoplastic disease, hip, unspecified, initial encounter for fracture	ICD-10-CM	Diagnosis
M84.552A	Pathological fracture in neoplastic disease, left femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M84.550A	Pathological fracture in neoplastic disease, pelvis, initial encounter for fracture	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
M84.551A	Pathological fracture in neoplastic disease, right femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M84.553A	Pathological fracture in neoplastic disease, unspecified femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M84.659A	Pathological fracture in other disease, hip, unspecified, initial encounter for fracture	ICD-10-CM	Diagnosis
M84.652A	Pathological fracture in other disease, left femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M84.650A	Pathological fracture in other disease, pelvis, initial encounter for fracture	ICD-10-CM	Diagnosis
M84.651A	Pathological fracture in other disease, right femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M84.653A	Pathological fracture in other disease, unspecified femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M84.459A	Pathological fracture, hip, unspecified, initial encounter for fracture	ICD-10-CM	Diagnosis
M84.452A	Pathological fracture, left femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M84.451A	Pathological fracture, right femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M84.453A	Pathological fracture, unspecified femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M97.02XA	Periprosthetic fracture around internal prosthetic left hip joint, initial encounter	ICD-10-CM	Diagnosis
M97.01XA	Periprosthetic fracture around internal prosthetic right hip joint, initial encounter	ICD-10-CM	Diagnosis
S79.012A	Salter-Harris Type I physeal fracture of upper end of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S79.011A	Salter-Harris Type I physeal fracture of upper end of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S79.019A	Salter-Harris Type I physeal fracture of upper end of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
M84.359A	Stress fracture, hip, unspecified, initial encounter for fracture	ICD-10-CM	Diagnosis
M84.352A	Stress fracture, left femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M84.350A	Stress fracture, pelvis, initial encounter for fracture	ICD-10-CM	Diagnosis
M84.351A	Stress fracture, right femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M84.353A	Stress fracture, unspecified femur, initial encounter for fracture	ICD-10-CM	Diagnosis
S72.052A	Unspecified fracture of head of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.052B	Unspecified fracture of head of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.052C	Unspecified fracture of head of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.051A	Unspecified fracture of head of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.051B	Unspecified fracture of head of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.051C	Unspecified fracture of head of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.059A	Unspecified fracture of head of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.059B	Unspecified fracture of head of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.059C	Unspecified fracture of head of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S32.402A	Unspecified fracture of left acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.402B	Unspecified fracture of left acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.302A	Unspecified fracture of left ilium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.302B	Unspecified fracture of left ilium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.602A	Unspecified fracture of left ischium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.602B	Unspecified fracture of left ischium, initial encounter for open fracture	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
S32.502A	Unspecified fracture of left pubis, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.502B	Unspecified fracture of left pubis, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.401A	Unspecified fracture of right acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.401B	Unspecified fracture of right acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.301A	Unspecified fracture of right ilium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.301B	Unspecified fracture of right ilium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.601A	Unspecified fracture of right ischium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.601B	Unspecified fracture of right ischium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.501A	Unspecified fracture of right pubis, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.501B	Unspecified fracture of right pubis, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.409A	Unspecified fracture of unspecified acetabulum, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.409B	Unspecified fracture of unspecified acetabulum, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.309A	Unspecified fracture of unspecified ilium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.309B	Unspecified fracture of unspecified ilium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.609A	Unspecified fracture of unspecified ischium, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.609B	Unspecified fracture of unspecified ischium, initial encounter for open fracture	ICD-10-CM	Diagnosis
S32.509A	Unspecified fracture of unspecified pubis, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S32.509B	Unspecified fracture of unspecified pubis, initial encounter for open fracture	ICD-10-CM	Diagnosis
S72.012A	Unspecified intracapsular fracture of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.012B	Unspecified intracapsular fracture of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.012C	Unspecified intracapsular fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.011A	Unspecified intracapsular fracture of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.011B	Unspecified intracapsular fracture of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.011C	Unspecified intracapsular fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.019A	Unspecified intracapsular fracture of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.019B	Unspecified intracapsular fracture of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.019C	Unspecified intracapsular fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S79.002A	Unspecified physeal fracture of upper end of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S79.001A	Unspecified physeal fracture of upper end of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S79.009A	Unspecified physeal fracture of upper end of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.102A	Unspecified trochanteric fracture of left femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.102B	Unspecified trochanteric fracture of left femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
S72.102C	Unspecified trochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.101A	Unspecified trochanteric fracture of right femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.101B	Unspecified trochanteric fracture of right femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.101C	Unspecified trochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
S72.109A	Unspecified trochanteric fracture of unspecified femur, initial encounter for closed fracture	ICD-10-CM	Diagnosis
S72.109B	Unspecified trochanteric fracture of unspecified femur, initial encounter for open fracture type I or II	ICD-10-CM	Diagnosis
S72.109C	Unspecified trochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	ICD-10-CM	Diagnosis
	Hyperlipidemia		
E78.41	Elevated Lipoprotein(a)	ICD-10-CM	Diagnosis
E78.01	Familial hypercholesterolemia	ICD-10-CM	Diagnosis
E78.3	Hyperchylomicronemia	ICD-10-CM	Diagnosis
E78.5	Hyperlipidemia, unspecified	ICD-10-CM	Diagnosis
E78.2	Mixed hyperlipidemia	ICD-10-CM	Diagnosis
E78.4	Other hyperlipidemia	ICD-10-CM	Diagnosis
E78.49	Other hyperlipidemia	ICD-10-CM	Diagnosis
E78.0	Pure hypercholesterolemia	ICD-10-CM	Diagnosis
E78.00	Pure hypercholesterolemia, unspecified	ICD-10-CM	Diagnosis
E78.1	Pure hyperglyceridemia	ICD-10-CM	Diagnosis
	Hypertension		
I10	Essential (primary) hypertension	ICD-10-CM	Diagnosis
I15.2	Hypertension secondary to endocrine disorders	ICD-10-CM	Diagnosis
I15.1	Hypertension secondary to other renal disorders	ICD-10-CM	Diagnosis
I12.9	Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	ICD-10-CM	Diagnosis
I12.0	Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease	ICD-10-CM	Diagnosis
I67.4	Hypertensive encephalopathy	ICD-10-CM	Diagnosis
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	ICD-10-CM	Diagnosis
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease	ICD-10-CM	Diagnosis
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	ICD-10-CM	Diagnosis
I13.11	Hypertensive heart and chronic kidney disease without heart failure, with stage 5 chronic kidney disease, or end stage renal disease	ICD-10-CM	Diagnosis
I11.0	Hypertensive heart disease with heart failure	ICD-10-CM	Diagnosis
I11.9	Hypertensive heart disease without heart failure	ICD-10-CM	Diagnosis
H35.033	Hypertensive retinopathy, bilateral	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
H35.032	Hypertensive retinopathy, left eye	ICD-10-CM	Diagnosis
H35.031	Hypertensive retinopathy, right eye	ICD-10-CM	Diagnosis
H35.039	Hypertensive retinopathy, unspecified eye	ICD-10-CM	Diagnosis
I15.8	Other secondary hypertension	ICD-10-CM	Diagnosis
N26.2	Page kidney	ICD-10-CM	Diagnosis
I15.0	Renovascular hypertension	ICD-10-CM	Diagnosis
I15.9	Secondary hypertension, unspecified	ICD-10-CM	Diagnosis
	Hypothyroidism		
E03.4	Atrophy of thyroid (acquired)	ICD-10-CM	Diagnosis
E03.0	Congenital hypothyroidism with diffuse goiter	ICD-10-CM	Diagnosis
E03.1	Congenital hypothyroidism without goiter	ICD-10-CM	Diagnosis
E00.2	Congenital iodine-deficiency syndrome, mixed type	ICD-10-CM	Diagnosis
E00.1	Congenital iodine-deficiency syndrome, myxedematous type	ICD-10-CM	Diagnosis
E00.0	Congenital iodine-deficiency syndrome, neurological type	ICD-10-CM	Diagnosis
E00.9	Congenital iodine-deficiency syndrome, unspecified	ICD-10-CM	Diagnosis
E03.2	Hypothyroidism due to medicaments and other exogenous substances	ICD-10-CM	Diagnosis
E03.9	Hypothyroidism, unspecified	ICD-10-CM	Diagnosis
E01.8	Other iodine-deficiency related thyroid disorders and allied conditions	ICD-10-CM	Diagnosis
E03.8	Other specified hypothyroidism	ICD-10-CM	Diagnosis
E03.3	Postinfectious hypothyroidism	ICD-10-CM	Diagnosis
E89.0	Postprocedural hypothyroidism	ICD-10-CM	Diagnosis
E02	Subclinical iodine-deficiency hypothyroidism	ICD-10-CM	Diagnosis
	Ischemic Heart Disease		
I24.0	Acute coronary thrombosis not resulting in myocardial infarction	ICD-10-CM	Diagnosis
I25.3	Aneurysm of heart	ICD-10-CM	Diagnosis
I20.1	Angina pectoris with documented spasm	ICD-10-CM	Diagnosis
I25.721	Atherosclerosis of autologous artery coronary artery bypass graft(s) with angina pectoris with documented spasm	ICD-10-CM	Diagnosis
I25.728	Atherosclerosis of autologous artery coronary artery bypass graft(s) with other forms of angina pectoris	ICD-10-CM	Diagnosis
I25.729	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unspecified angina pectoris	ICD-10-CM	Diagnosis
I25.720	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unstable angina pectoris	ICD-10-CM	Diagnosis
I25.711	Atherosclerosis of autologous vein coronary artery bypass graft(s) with angina pectoris with documented spasm	ICD-10-CM	Diagnosis
I25.718	Atherosclerosis of autologous vein coronary artery bypass graft(s) with other forms of angina pectoris	ICD-10-CM	Diagnosis
I25.719	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unspecified angina pectoris	ICD-10-CM	Diagnosis
I25.710	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unstable angina pectoris	ICD-10-CM	Diagnosis
I25.761	Atherosclerosis of bypass graft of coronary artery of transplanted heart with angina pectoris with documented spasm	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
I25.768	Atherosclerosis of bypass graft of coronary artery of transplanted heart with other forms of angina pectoris	ICD-10-CM	Diagnosis
I25.769	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unspecified angina pectoris	ICD-10-CM	Diagnosis
I25.760	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unstable angina	ICD-10-CM	Diagnosis
I25.812	Atherosclerosis of bypass graft of coronary artery of transplanted heart without angina pectoris	ICD-10-CM	Diagnosis
I25.810	Atherosclerosis of coronary artery bypass graft(s) without angina pectoris	ICD-10-CM	Diagnosis
I25.701	Atherosclerosis of coronary artery bypass graft(s), unspecified, with angina pectoris with documented spasm	ICD-10-CM	Diagnosis
I25.708	Atherosclerosis of coronary artery bypass graft(s), unspecified, with other forms of angina pectoris	ICD-10-CM	Diagnosis
I25.700	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unstable angina pectoris	ICD-10-CM	Diagnosis
I25.751	Atherosclerosis of native coronary artery of transplanted heart with angina pectoris with documented spasm	ICD-10-CM	Diagnosis
I25.758	Atherosclerosis of native coronary artery of transplanted heart with other forms of angina pectoris	ICD-10-CM	Diagnosis
I25.759	Atherosclerosis of native coronary artery of transplanted heart with unspecified angina pectoris	ICD-10-CM	Diagnosis
I25.750	Atherosclerosis of native coronary artery of transplanted heart with unstable angina	ICD-10-CM	Diagnosis
I25.811	Atherosclerosis of native coronary artery of transplanted heart without angina pectoris	ICD-10-CM	Diagnosis
I25.731	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with angina pectoris with documented spasm	ICD-10-CM	Diagnosis
I25.738	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with other forms of angina pectoris	ICD-10-CM	Diagnosis
I25.739	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unspecified angina pectoris	ICD-10-CM	Diagnosis
I25.730	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unstable angina pectoris	ICD-10-CM	Diagnosis
I25.791	Atherosclerosis of other coronary artery bypass graft(s) with angina pectoris with documented spasm	ICD-10-CM	Diagnosis
I25.798	Atherosclerosis of other coronary artery bypass graft(s) with other forms of angina pectoris	ICD-10-CM	Diagnosis
I25.799	Atherosclerosis of other coronary artery bypass graft(s) with unspecified angina pectoris	ICD-10-CM	Diagnosis
I25.790	Atherosclerosis of other coronary artery bypass graft(s) with unstable angina pectoris	ICD-10-CM	Diagnosis
I25.111	Atherosclerotic heart disease of native coronary artery with angina pectoris with documented spasm	ICD-10-CM	Diagnosis
I25.118	Atherosclerotic heart disease of native coronary artery with other forms of angina pectoris	ICD-10-CM	Diagnosis
I25.119	Atherosclerotic heart disease of native coronary artery with unspecified angina pectoris	ICD-10-CM	Diagnosis
I25.110	Atherosclerotic heart disease of native coronary artery with unstable angina pectoris	ICD-10-CM	Diagnosis
I25.10	Atherosclerotic heart disease of native coronary artery without angina pectoris	ICD-10-CM	Diagnosis
I25.9	Chronic ischemic heart disease, unspecified	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
I25.82	Chronic total occlusion of coronary artery	ICD-10-CM	Diagnosis
I25.41	Coronary artery aneurysm	ICD-10-CM	Diagnosis
I25.42	Coronary artery dissection	ICD-10-CM	Diagnosis
I25.84	Coronary atherosclerosis due to calcified coronary lesion	ICD-10-CM	Diagnosis
I25.83	Coronary atherosclerosis due to lipid rich plaque	ICD-10-CM	Diagnosis
I24.1	Dressler's syndrome	ICD-10-CM	Diagnosis
I25.5	Ischemic cardiomyopathy	ICD-10-CM	Diagnosis
I24.8	Other forms of acute ischemic heart disease	ICD-10-CM	Diagnosis
I20.8	Other forms of angina pectoris	ICD-10-CM	Diagnosis
I25.89	Other forms of chronic ischemic heart disease	ICD-10-CM	Diagnosis
I25.6	Silent myocardial ischemia	ICD-10-CM	Diagnosis
I20.0	Unstable angina	ICD-10-CM	Diagnosis
	Non-Alzheimer's Dementia		
R41.81	Age-related cognitive decline	ICD-10-CM	Diagnosis
G31.2	Degeneration of nervous system due to alcohol	ICD-10-CM	Diagnosis
F05	Delirium due to known physiological condition	ICD-10-CM	Diagnosis
F02.81	Dementia in other diseases classified elsewhere, unspecified severity, with behavioral disturbance	ICD-10-CM	Diagnosis
F02.80	Dementia in other diseases classified elsewhere, unspecified severity, without behavioral disturbance, psychotic disturbance, mood disturbance, and anxiety	ICD-10-CM	Diagnosis
G31.83	Neurocognitive disorder with Lewy bodies	ICD-10-CM	Diagnosis
G94	Other disorders of brain in diseases classified elsewhere	ICD-10-CM	Diagnosis
G31.09	Other frontotemporal neurocognitive disorder	ICD-10-CM	Diagnosis
G31.01	Pick's disease	ICD-10-CM	Diagnosis
G31.1	Senile degeneration of brain, not elsewhere classified	ICD-10-CM	Diagnosis
G13.8	Systemic atrophy primarily affecting central nervous system in other diseases classified elsewhere	ICD-10-CM	Diagnosis
F03.91	Unspecified dementia, unspecified severity, with behavioral disturbance	ICD-10-CM	Diagnosis
F03.90	Unspecified dementia, unspecified severity, without behavioral disturbance, psychotic disturbance, mood disturbance, and anxiety	ICD-10-CM	Diagnosis
F01.51	Vascular dementia, unspecified severity, with behavioral disturbance	ICD-10-CM	Diagnosis
F01.50	Vascular dementia, unspecified severity, without behavioral disturbance, psychotic disturbance, mood disturbance, and anxiety	ICD-10-CM	Diagnosis
	Osteoporosis		
M80.00XA	Age-related osteoporosis with current pathological fracture, unspecified site, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.011A	Age-related osteoporosis with current pathological fracture, right shoulder, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.012A	Age-related osteoporosis with current pathological fracture, left shoulder, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.019A	Age-related osteoporosis with current pathological fracture, unspecified shoulder, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.021A	Age-related osteoporosis with current pathological fracture, right humerus, initial encounter for fracture	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
M80.022A	Age-related osteoporosis with current pathological fracture, left humerus, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.029A	Age-related osteoporosis with current pathological fracture, unspecified humerus, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.031A	Age-related osteoporosis with current pathological fracture, right forearm, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.032A	Age-related osteoporosis with current pathological fracture, left forearm, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.039A	Age-related osteoporosis with current pathological fracture, unspecified forearm, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.041A	Age-related osteoporosis with current pathological fracture, right hand, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.042A	Age-related osteoporosis with current pathological fracture, left hand, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.049A	Age-related osteoporosis with current pathological fracture, unspecified hand, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.051A	Age-related osteoporosis with current pathological fracture, right femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.052A	Age-related osteoporosis with current pathological fracture, left femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.059A	Age-related osteoporosis with current pathological fracture, unspecified femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.061A	Age-related osteoporosis with current pathological fracture, right lower leg, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.062A	Age-related osteoporosis with current pathological fracture, left lower leg, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.069A	Age-related osteoporosis with current pathological fracture, unspecified lower leg, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.071A	Age-related osteoporosis with current pathological fracture, right ankle and foot, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.072A	Age-related osteoporosis with current pathological fracture, left ankle and foot, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.079A	Age-related osteoporosis with current pathological fracture, unspecified ankle and foot, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.08XA	Age-related osteoporosis with current pathological fracture, vertebra(e), initial encounter for fracture	ICD-10-CM	Diagnosis
M80.0AXA	Age-related osteoporosis with current pathological fracture, other site, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.80XA	Other osteoporosis with current pathological fracture, unspecified site, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.811A	Other osteoporosis with current pathological fracture, right shoulder, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.812A	Other osteoporosis with current pathological fracture, left shoulder, initial encounter for fracture	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
M80.819A	Other osteoporosis with current pathological fracture, unspecified shoulder, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.821A	Other osteoporosis with current pathological fracture, right humerus, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.822A	Other osteoporosis with current pathological fracture, left humerus, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.829A	Other osteoporosis with current pathological fracture, unspecified humerus, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.831A	Other osteoporosis with current pathological fracture, right forearm, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.832A	Other osteoporosis with current pathological fracture, left forearm, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.839A	Other osteoporosis with current pathological fracture, unspecified forearm, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.841A	Other osteoporosis with current pathological fracture, right hand, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.842A	Other osteoporosis with current pathological fracture, left hand, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.849A	Other osteoporosis with current pathological fracture, unspecified hand, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.851A	Other osteoporosis with current pathological fracture, right femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.852A	Other osteoporosis with current pathological fracture, left femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.859A	Other osteoporosis with current pathological fracture, unspecified femur, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.861A	Other osteoporosis with current pathological fracture, right lower leg, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.862A	Other osteoporosis with current pathological fracture, left lower leg, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.869A	Other osteoporosis with current pathological fracture, unspecified lower leg, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.871A	Other osteoporosis with current pathological fracture, right ankle and foot, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.872A	Other osteoporosis with current pathological fracture, left ankle and foot, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.879A	Other osteoporosis with current pathological fracture, unspecified ankle and foot, initial encounter for fracture	ICD-10-CM	Diagnosis
M80.88XA	Other osteoporosis with current pathological fracture, vertebra(e), initial encounter for fracture	ICD-10-CM	Diagnosis
M80.8AXA	Other osteoporosis with current pathological fracture, other site, initial encounter for fracture	ICD-10-CM	Diagnosis
M81.0	Age-related osteoporosis without current pathological fracture	ICD-10-CM	Diagnosis
M81.6	Localized osteoporosis [Lequesne]	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
M81.8	Other osteoporosis without current pathological fracture	ICD-10-CM	Diagnosis
	Parkinson's		
G20	Parkinson's disease	ICD-10-CM	Diagnosis
G21.11	Neuroleptic induced parkinsonism	ICD-10-CM	Diagnosis
G21.19	Other drug induced secondary parkinsonism	ICD-10-CM	Diagnosis
G21.3	Postencephalitic parkinsonism	ICD-10-CM	Diagnosis
G21.4	Vascular parkinsonism	ICD-10-CM	Diagnosis
G21.8	Other secondary parkinsonism	ICD-10-CM	Diagnosis
G21.9	Secondary parkinsonism, unspecified	ICD-10-CM	Diagnosis
G31.83	Neurocognitive disorder with Lewy bodies	ICD-10-CM	Diagnosis
	Pneumonia		
A01.03	Typhoid pneumonia	ICD-10-CM	Diagnosis
A02.22	Salmonella pneumonia	ICD-10-CM	Diagnosis
A06.5	Amebic lung abscess	ICD-10-CM	Diagnosis
A20.2	Pneumonic plague	ICD-10-CM	Diagnosis
A21.2	Pulmonary tularemia	ICD-10-CM	Diagnosis
A22.1	Pulmonary anthrax	ICD-10-CM	Diagnosis
A31.0	Pulmonary mycobacterial infection	ICD-10-CM	Diagnosis
A37.01	Whooping cough due to Bordetella pertussis with pneumonia	ICD-10-CM	Diagnosis
A37.11	Whooping cough due to Bordetella parapertussis with pneumonia	ICD-10-CM	Diagnosis
A37.81	Whooping cough due to other Bordetella species with pneumonia	ICD-10-CM	Diagnosis
A37.91	Whooping cough, unspecified species with pneumonia	ICD-10-CM	Diagnosis
A40.3	Sepsis due to Streptococcus pneumoniae	ICD-10-CM	Diagnosis
A42.0	Pulmonary actinomycosis	ICD-10-CM	Diagnosis
A43.0	Pulmonary nocardiosis	ICD-10-CM	Diagnosis
A48.1	Legionnaires' disease	ICD-10-CM	Diagnosis
A50.04	Early congenital syphilitic pneumonia	ICD-10-CM	Diagnosis
A54.84	Gonococcal pneumonia	ICD-10-CM	Diagnosis
B01.2	Varicella pneumonia	ICD-10-CM	Diagnosis
B05.2	Measles complicated by pneumonia	ICD-10-CM	Diagnosis
B06.81	Rubella pneumonia	ICD-10-CM	Diagnosis
B37.1	Pulmonary candidiasis	ICD-10-CM	Diagnosis
B38.0	Acute pulmonary coccidioidomycosis	ICD-10-CM	Diagnosis
B38.2	Pulmonary coccidioidomycosis, unspecified	ICD-10-CM	Diagnosis
B39.0	Acute pulmonary histoplasmosis capsulati	ICD-10-CM	Diagnosis
B39.2	Pulmonary histoplasmosis capsulati, unspecified	ICD-10-CM	Diagnosis
B40.0	Acute pulmonary blastomycosis	ICD-10-CM	Diagnosis
B40.2	Pulmonary blastomycosis, unspecified	ICD-10-CM	Diagnosis
B41.0	Pulmonary paracoccidioidomycosis	ICD-10-CM	Diagnosis
B58.3	Pulmonary toxoplasmosis	ICD-10-CM	Diagnosis
B59	Pneumocystosis	ICD-10-CM	Diagnosis
B66.4	Paragonimiasis	ICD-10-CM	Diagnosis
B67.1	Echinococcus granulosus infection of lung	ICD-10-CM	Diagnosis
B77.81	Ascariasis pneumonia	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
B95.3	Streptococcus pneumoniae as the cause of diseases classified elsewhere	ICD-10-CM	Diagnosis
B96.0	Mycoplasma pneumoniae [M. pneumoniae] as the cause of diseases classified elsewhere	ICD-10-CM	Diagnosis
B96.1	Klebsiella pneumoniae [K. pneumoniae] as the cause of diseases classified elsewhere	ICD-10-CM	Diagnosis
J09.X1	Influenza due to identified novel influenza A virus with pneumonia	ICD-10-CM	Diagnosis
J10.00	Influenza due to other identified influenza virus with unspecified type of pneumonia	ICD-10-CM	Diagnosis
J10.01	Influenza due to other identified influenza virus with the same other identified influenza virus pneumonia	ICD-10-CM	Diagnosis
J10.08	Influenza due to other identified influenza virus with other specified pneumonia	ICD-10-CM	Diagnosis
J11.00	Influenza due to unidentified influenza virus with unspecified type of pneumonia	ICD-10-CM	Diagnosis
J11.08	Influenza due to unidentified influenza virus with specified pneumonia	ICD-10-CM	Diagnosis
J12.0	Adenoviral pneumonia	ICD-10-CM	Diagnosis
J12.1	Respiratory syncytial virus pneumonia	ICD-10-CM	Diagnosis
J12.2	Parainfluenza virus pneumonia	ICD-10-CM	Diagnosis
J12.3	Human metapneumovirus pneumonia	ICD-10-CM	Diagnosis
J12.81	Pneumonia due to SARS-associated coronavirus	ICD-10-CM	Diagnosis
J12.82	Pneumonia due to coronavirus disease 2019	ICD-10-CM	Diagnosis
J12.89	Other viral pneumonia	ICD-10-CM	Diagnosis
J12.9	Viral pneumonia, unspecified	ICD-10-CM	Diagnosis
J13	Pneumonia due to Streptococcus pneumoniae	ICD-10-CM	Diagnosis
J14	Pneumonia due to Hemophilus influenzae	ICD-10-CM	Diagnosis
J15.0	Pneumonia due to Klebsiella pneumoniae	ICD-10-CM	Diagnosis
J15.1	Pneumonia due to Pseudomonas	ICD-10-CM	Diagnosis
J15.20	Pneumonia due to staphylococcus, unspecified	ICD-10-CM	Diagnosis
J15.211	Pneumonia due to Methicillin susceptible Staphylococcus aureus	ICD-10-CM	Diagnosis
J15.212	Pneumonia due to Methicillin resistant Staphylococcus aureus	ICD-10-CM	Diagnosis
J15.29	Pneumonia due to other staphylococcus	ICD-10-CM	Diagnosis
J15.3	Pneumonia due to streptococcus, group B	ICD-10-CM	Diagnosis
J15.4	Pneumonia due to other streptococci	ICD-10-CM	Diagnosis
J15.5	Pneumonia due to Escherichia coli	ICD-10-CM	Diagnosis
J15.6	Pneumonia due to other Gram-negative bacteria	ICD-10-CM	Diagnosis
J15.7	Pneumonia due to Mycoplasma pneumoniae	ICD-10-CM	Diagnosis
J15.8	Pneumonia due to other specified bacteria	ICD-10-CM	Diagnosis
J15.9	Unspecified bacterial pneumonia	ICD-10-CM	Diagnosis
J16.0	Chlamydial pneumonia	ICD-10-CM	Diagnosis
J16.8	Pneumonia due to other specified infectious organisms	ICD-10-CM	Diagnosis
J17	Pneumonia in diseases classified elsewhere	ICD-10-CM	Diagnosis
J18.0	Bronchopneumonia, unspecified organism	ICD-10-CM	Diagnosis
J18.1	Lobar pneumonia, unspecified organism	ICD-10-CM	Diagnosis
J18.2	Hypostatic pneumonia, unspecified organism	ICD-10-CM	Diagnosis
J18.8	Other pneumonia, unspecified organism	ICD-10-CM	Diagnosis
J18.9	Pneumonia, unspecified organism	ICD-10-CM	Diagnosis
J20.0	Acute bronchitis due to Mycoplasma pneumoniae	ICD-10-CM	Diagnosis
J84.111	Idiopathic interstitial pneumonia, not otherwise specified	ICD-10-CM	Diagnosis
J84.116	Cryptogenic organizing pneumonia	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
J84.117	Desquamative interstitial pneumonia	ICD-10-CM	Diagnosis
J84.178	Other interstitial pulmonary diseases with fibrosis in diseases classified elsewhere	ICD-10-CM	Diagnosis
J84.2	Lymphoid interstitial pneumonia	ICD-10-CM	Diagnosis
J85.1	Abscess of lung with pneumonia	ICD-10-CM	Diagnosis
J95.851	Ventilator associated pneumonia	ICD-10-CM	Diagnosis
P23.0	Congenital pneumonia due to viral agent	ICD-10-CM	Diagnosis
P23.1	Congenital pneumonia due to Chlamydia	ICD-10-CM	Diagnosis
P23.2	Congenital pneumonia due to staphylococcus	ICD-10-CM	Diagnosis
P23.3	Congenital pneumonia due to streptococcus, group B	ICD-10-CM	Diagnosis
P23.4	Congenital pneumonia due to Escherichia coli	ICD-10-CM	Diagnosis
P23.5	Congenital pneumonia due to Pseudomonas	ICD-10-CM	Diagnosis
P23.6	Congenital pneumonia due to other bacterial agents	ICD-10-CM	Diagnosis
P23.8	Congenital pneumonia due to other organisms	ICD-10-CM	Diagnosis
P23.9	Congenital pneumonia, unspecified	ICD-10-CM	Diagnosis
Z87.01	Personal history of pneumonia (recurrent)	ICD-10-CM	Diagnosis
	Rheumatoid Arthritis Osteoarthritis		
L40.50	Arthropathic psoriasis, unspecified	ICD-10-CM	Diagnosis
L40.51	Distal interphalangeal psoriatic arthropathy	ICD-10-CM	Diagnosis
L40.54	Psoriatic juvenile arthropathy	ICD-10-CM	Diagnosis
L40.59	Other psoriatic arthropathy	ICD-10-CM	Diagnosis
M05.00	Felty's syndrome, unspecified site	ICD-10-CM	Diagnosis
M05.011	Felty's syndrome, right shoulder	ICD-10-CM	Diagnosis
M05.012	Felty's syndrome, left shoulder	ICD-10-CM	Diagnosis
M05.019	Felty's syndrome, unspecified shoulder	ICD-10-CM	Diagnosis
M05.021	Felty's syndrome, right elbow	ICD-10-CM	Diagnosis
M05.022	Felty's syndrome, left elbow	ICD-10-CM	Diagnosis
M05.029	Felty's syndrome, unspecified elbow	ICD-10-CM	Diagnosis
M05.031	Felty's syndrome, right wrist	ICD-10-CM	Diagnosis
M05.032	Felty's syndrome, left wrist	ICD-10-CM	Diagnosis
M05.039	Felty's syndrome, unspecified wrist	ICD-10-CM	Diagnosis
M05.041	Felty's syndrome, right hand	ICD-10-CM	Diagnosis
M05.042	Felty's syndrome, left hand	ICD-10-CM	Diagnosis
M05.049	Felty's syndrome, unspecified hand	ICD-10-CM	Diagnosis
M05.051	Felty's syndrome, right hip	ICD-10-CM	Diagnosis
M05.052	Felty's syndrome, left hip	ICD-10-CM	Diagnosis
M05.059	Felty's syndrome, unspecified hip	ICD-10-CM	Diagnosis
M05.061	Felty's syndrome, right knee	ICD-10-CM	Diagnosis
M05.062	Felty's syndrome, left knee	ICD-10-CM	Diagnosis
M05.069	Felty's syndrome, unspecified knee	ICD-10-CM	Diagnosis
M05.071	Felty's syndrome, right ankle and foot	ICD-10-CM	Diagnosis
M05.072	Felty's syndrome, left ankle and foot	ICD-10-CM	Diagnosis
M05.079	Felty's syndrome, unspecified ankle and foot	ICD-10-CM	Diagnosis
M05.09	Felty's syndrome, multiple sites	ICD-10-CM	Diagnosis
M05.10	Rheumatoid lung disease with rheumatoid arthritis of unspecified site	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
M05.111	Rheumatoid lung disease with rheumatoid arthritis of right shoulder	ICD-10-CM	Diagnosis
M05.112	Rheumatoid lung disease with rheumatoid arthritis of left shoulder	ICD-10-CM	Diagnosis
M05.119	Rheumatoid lung disease with rheumatoid arthritis of unspecified shoulder	ICD-10-CM	Diagnosis
M05.121	Rheumatoid lung disease with rheumatoid arthritis of right elbow	ICD-10-CM	Diagnosis
M05.122	Rheumatoid lung disease with rheumatoid arthritis of left elbow	ICD-10-CM	Diagnosis
M05.129	Rheumatoid lung disease with rheumatoid arthritis of unspecified elbow	ICD-10-CM	Diagnosis
M05.131	Rheumatoid lung disease with rheumatoid arthritis of right wrist	ICD-10-CM	Diagnosis
M05.132	Rheumatoid lung disease with rheumatoid arthritis of left wrist	ICD-10-CM	Diagnosis
M05.139	Rheumatoid lung disease with rheumatoid arthritis of unspecified wrist	ICD-10-CM	Diagnosis
M05.141	Rheumatoid lung disease with rheumatoid arthritis of right hand	ICD-10-CM	Diagnosis
M05.142	Rheumatoid lung disease with rheumatoid arthritis of left hand	ICD-10-CM	Diagnosis
M05.149	Rheumatoid lung disease with rheumatoid arthritis of unspecified hand	ICD-10-CM	Diagnosis
M05.151	Rheumatoid lung disease with rheumatoid arthritis of right hip	ICD-10-CM	Diagnosis
M05.152	Rheumatoid lung disease with rheumatoid arthritis of left hip	ICD-10-CM	Diagnosis
M05.159	Rheumatoid lung disease with rheumatoid arthritis of unspecified hip	ICD-10-CM	Diagnosis
M05.161	Rheumatoid lung disease with rheumatoid arthritis of right knee	ICD-10-CM	Diagnosis
M05.162	Rheumatoid lung disease with rheumatoid arthritis of left knee	ICD-10-CM	Diagnosis
M05.169	Rheumatoid lung disease with rheumatoid arthritis of unspecified knee	ICD-10-CM	Diagnosis
M05.171	Rheumatoid lung disease with rheumatoid arthritis of right ankle and foot	ICD-10-CM	Diagnosis
M05.172	Rheumatoid lung disease with rheumatoid arthritis of left ankle and foot	ICD-10-CM	Diagnosis
M05.179	Rheumatoid lung disease with rheumatoid arthritis of unspecified ankle and foot	ICD-10-CM	Diagnosis
M05.19	Rheumatoid lung disease with rheumatoid arthritis of multiple sites	ICD-10-CM	Diagnosis
M05.20	Rheumatoid vasculitis with rheumatoid arthritis of unspecified site	ICD-10-CM	Diagnosis
M05.211	Rheumatoid vasculitis with rheumatoid arthritis of right shoulder	ICD-10-CM	Diagnosis
M05.212	Rheumatoid vasculitis with rheumatoid arthritis of left shoulder	ICD-10-CM	Diagnosis
M05.219	Rheumatoid vasculitis with rheumatoid arthritis of unspecified shoulder	ICD-10-CM	Diagnosis
M05.221	Rheumatoid vasculitis with rheumatoid arthritis of right elbow	ICD-10-CM	Diagnosis
M05.222	Rheumatoid vasculitis with rheumatoid arthritis of left elbow	ICD-10-CM	Diagnosis
M05.229	Rheumatoid vasculitis with rheumatoid arthritis of unspecified elbow	ICD-10-CM	Diagnosis
M05.231	Rheumatoid vasculitis with rheumatoid arthritis of right wrist	ICD-10-CM	Diagnosis
M05.232	Rheumatoid vasculitis with rheumatoid arthritis of left wrist	ICD-10-CM	Diagnosis
M05.239	Rheumatoid vasculitis with rheumatoid arthritis of unspecified wrist	ICD-10-CM	Diagnosis
M05.241	Rheumatoid vasculitis with rheumatoid arthritis of right hand	ICD-10-CM	Diagnosis
M05.242	Rheumatoid vasculitis with rheumatoid arthritis of left hand	ICD-10-CM	Diagnosis
M05.249	Rheumatoid vasculitis with rheumatoid arthritis of unspecified hand	ICD-10-CM	Diagnosis
M05.251	Rheumatoid vasculitis with rheumatoid arthritis of right hip	ICD-10-CM	Diagnosis
M05.252	Rheumatoid vasculitis with rheumatoid arthritis of left hip	ICD-10-CM	Diagnosis
M05.259	Rheumatoid vasculitis with rheumatoid arthritis of unspecified hip	ICD-10-CM	Diagnosis
M05.261	Rheumatoid vasculitis with rheumatoid arthritis of right knee	ICD-10-CM	Diagnosis
M05.262	Rheumatoid vasculitis with rheumatoid arthritis of left knee	ICD-10-CM	Diagnosis
M05.269	Rheumatoid vasculitis with rheumatoid arthritis of unspecified knee	ICD-10-CM	Diagnosis
M05.271	Rheumatoid vasculitis with rheumatoid arthritis of right ankle and foot	ICD-10-CM	Diagnosis
M05.272	Rheumatoid vasculitis with rheumatoid arthritis of left ankle and foot	ICD-10-CM	Diagnosis
M05.279	Rheumatoid vasculitis with rheumatoid arthritis of unspecified ankle and foot	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
M05.29	Rheumatoid vasculitis with rheumatoid arthritis of multiple sites	ICD-10-CM	Diagnosis
M05.30	Rheumatoid heart disease with rheumatoid arthritis of unspecified site	ICD-10-CM	Diagnosis
M05.311	Rheumatoid heart disease with rheumatoid arthritis of right shoulder	ICD-10-CM	Diagnosis
M05.312	Rheumatoid heart disease with rheumatoid arthritis of left shoulder	ICD-10-CM	Diagnosis
M05.319	Rheumatoid heart disease with rheumatoid arthritis of unspecified shoulder	ICD-10-CM	Diagnosis
M05.321	Rheumatoid heart disease with rheumatoid arthritis of right elbow	ICD-10-CM	Diagnosis
M05.322	Rheumatoid heart disease with rheumatoid arthritis of left elbow	ICD-10-CM	Diagnosis
M05.329	Rheumatoid heart disease with rheumatoid arthritis of unspecified elbow	ICD-10-CM	Diagnosis
M05.331	Rheumatoid heart disease with rheumatoid arthritis of right wrist	ICD-10-CM	Diagnosis
M05.332	Rheumatoid heart disease with rheumatoid arthritis of left wrist	ICD-10-CM	Diagnosis
M05.339	Rheumatoid heart disease with rheumatoid arthritis of unspecified wrist	ICD-10-CM	Diagnosis
M05.341	Rheumatoid heart disease with rheumatoid arthritis of right hand	ICD-10-CM	Diagnosis
M05.342	Rheumatoid heart disease with rheumatoid arthritis of left hand	ICD-10-CM	Diagnosis
M05.349	Rheumatoid heart disease with rheumatoid arthritis of unspecified hand	ICD-10-CM	Diagnosis
M05.351	Rheumatoid heart disease with rheumatoid arthritis of right hip	ICD-10-CM	Diagnosis
M05.352	Rheumatoid heart disease with rheumatoid arthritis of left hip	ICD-10-CM	Diagnosis
M05.359	Rheumatoid heart disease with rheumatoid arthritis of unspecified hip	ICD-10-CM	Diagnosis
M05.361	Rheumatoid heart disease with rheumatoid arthritis of right knee	ICD-10-CM	Diagnosis
M05.362	Rheumatoid heart disease with rheumatoid arthritis of left knee	ICD-10-CM	Diagnosis
M05.369	Rheumatoid heart disease with rheumatoid arthritis of unspecified knee	ICD-10-CM	Diagnosis
M05.371	Rheumatoid heart disease with rheumatoid arthritis of right ankle and foot	ICD-10-CM	Diagnosis
M05.372	Rheumatoid heart disease with rheumatoid arthritis of left ankle and foot	ICD-10-CM	Diagnosis
M05.379	Rheumatoid heart disease with rheumatoid arthritis of unspecified ankle and foot	ICD-10-CM	Diagnosis
M05.39	Rheumatoid heart disease with rheumatoid arthritis of multiple sites	ICD-10-CM	Diagnosis
M05.40	Rheumatoid myopathy with rheumatoid arthritis of unspecified site	ICD-10-CM	Diagnosis
M05.411	Rheumatoid myopathy with rheumatoid arthritis of right shoulder	ICD-10-CM	Diagnosis
M05.412	Rheumatoid myopathy with rheumatoid arthritis of left shoulder	ICD-10-CM	Diagnosis
M05.419	Rheumatoid myopathy with rheumatoid arthritis of unspecified shoulder	ICD-10-CM	Diagnosis
M05.421	Rheumatoid myopathy with rheumatoid arthritis of right elbow	ICD-10-CM	Diagnosis
M05.422	Rheumatoid myopathy with rheumatoid arthritis of left elbow	ICD-10-CM	Diagnosis
M05.429	Rheumatoid myopathy with rheumatoid arthritis of unspecified elbow	ICD-10-CM	Diagnosis
M05.431	Rheumatoid myopathy with rheumatoid arthritis of right wrist	ICD-10-CM	Diagnosis
M05.432	Rheumatoid myopathy with rheumatoid arthritis of left wrist	ICD-10-CM	Diagnosis
M05.439	Rheumatoid myopathy with rheumatoid arthritis of unspecified wrist	ICD-10-CM	Diagnosis
M05.441	Rheumatoid myopathy with rheumatoid arthritis of right hand	ICD-10-CM	Diagnosis
M05.442	Rheumatoid myopathy with rheumatoid arthritis of left hand	ICD-10-CM	Diagnosis
M05.449	Rheumatoid myopathy with rheumatoid arthritis of unspecified hand	ICD-10-CM	Diagnosis
M05.451	Rheumatoid myopathy with rheumatoid arthritis of right hip	ICD-10-CM	Diagnosis
M05.452	Rheumatoid myopathy with rheumatoid arthritis of left hip	ICD-10-CM	Diagnosis
M05.459	Rheumatoid myopathy with rheumatoid arthritis of unspecified hip	ICD-10-CM	Diagnosis
M05.461	Rheumatoid myopathy with rheumatoid arthritis of right knee	ICD-10-CM	Diagnosis
M05.462	Rheumatoid myopathy with rheumatoid arthritis of left knee	ICD-10-CM	Diagnosis
M05.469	Rheumatoid myopathy with rheumatoid arthritis of unspecified knee	ICD-10-CM	Diagnosis
M05.471	Rheumatoid myopathy with rheumatoid arthritis of right ankle and foot	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
M05.472	Rheumatoid myopathy with rheumatoid arthritis of left ankle and foot	ICD-10-CM	Diagnosis
M05.479	Rheumatoid myopathy with rheumatoid arthritis of unspecified ankle and foot	ICD-10-CM	Diagnosis
M05.49	Rheumatoid myopathy with rheumatoid arthritis of multiple sites	ICD-10-CM	Diagnosis
M05.50	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified site	ICD-10-CM	Diagnosis
M05.511	Rheumatoid polyneuropathy with rheumatoid arthritis of right shoulder	ICD-10-CM	Diagnosis
M05.512	Rheumatoid polyneuropathy with rheumatoid arthritis of left shoulder	ICD-10-CM	Diagnosis
M05.519	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified shoulder	ICD-10-CM	Diagnosis
M05.521	Rheumatoid polyneuropathy with rheumatoid arthritis of right elbow	ICD-10-CM	Diagnosis
M05.522	Rheumatoid polyneuropathy with rheumatoid arthritis of left elbow	ICD-10-CM	Diagnosis
M05.529	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified elbow	ICD-10-CM	Diagnosis
M05.531	Rheumatoid polyneuropathy with rheumatoid arthritis of right wrist	ICD-10-CM	Diagnosis
M05.532	Rheumatoid polyneuropathy with rheumatoid arthritis of left wrist	ICD-10-CM	Diagnosis
M05.539	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified wrist	ICD-10-CM	Diagnosis
M05.541	Rheumatoid polyneuropathy with rheumatoid arthritis of right hand	ICD-10-CM	Diagnosis
M05.542	Rheumatoid polyneuropathy with rheumatoid arthritis of left hand	ICD-10-CM	Diagnosis
M05.549	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified hand	ICD-10-CM	Diagnosis
M05.551	Rheumatoid polyneuropathy with rheumatoid arthritis of right hip	ICD-10-CM	Diagnosis
M05.552	Rheumatoid polyneuropathy with rheumatoid arthritis of left hip	ICD-10-CM	Diagnosis
M05.559	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified hip	ICD-10-CM	Diagnosis
M05.561	Rheumatoid polyneuropathy with rheumatoid arthritis of right knee	ICD-10-CM	Diagnosis
M05.562	Rheumatoid polyneuropathy with rheumatoid arthritis of left knee	ICD-10-CM	Diagnosis
M05.569	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified knee	ICD-10-CM	Diagnosis
M05.571	Rheumatoid polyneuropathy with rheumatoid arthritis of right ankle and foot	ICD-10-CM	Diagnosis
M05.572	Rheumatoid polyneuropathy with rheumatoid arthritis of left ankle and foot	ICD-10-CM	Diagnosis
M05.579	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified ankle and foot	ICD-10-CM	Diagnosis
M05.59	Rheumatoid polyneuropathy with rheumatoid arthritis of multiple sites	ICD-10-CM	Diagnosis
M05.60	Rheumatoid arthritis of unspecified site with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.611	Rheumatoid arthritis of right shoulder with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.612	Rheumatoid arthritis of left shoulder with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.619	Rheumatoid arthritis of unspecified shoulder with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.621	Rheumatoid arthritis of right elbow with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.622	Rheumatoid arthritis of left elbow with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.629	Rheumatoid arthritis of unspecified elbow with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.631	Rheumatoid arthritis of right wrist with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.632	Rheumatoid arthritis of left wrist with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.639	Rheumatoid arthritis of unspecified wrist with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.641	Rheumatoid arthritis of right hand with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.642	Rheumatoid arthritis of left hand with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.649	Rheumatoid arthritis of unspecified hand with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.651	Rheumatoid arthritis of right hip with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.652	Rheumatoid arthritis of left hip with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.659	Rheumatoid arthritis of unspecified hip with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.661	Rheumatoid arthritis of right knee with involvement of other organs and systems	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
M05.662	Rheumatoid arthritis of left knee with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.669	Rheumatoid arthritis of unspecified knee with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.671	Rheumatoid arthritis of right ankle and foot with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.672	Rheumatoid arthritis of left ankle and foot with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.679	Rheumatoid arthritis of unspecified ankle and foot with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.69	Rheumatoid arthritis of multiple sites with involvement of other organs and systems	ICD-10-CM	Diagnosis
M05.70	Rheumatoid arthritis with rheumatoid factor of unspecified site without organ or systems involvement	ICD-10-CM	Diagnosis
M05.711	Rheumatoid arthritis with rheumatoid factor of right shoulder without organ or systems involvement	ICD-10-CM	Diagnosis
M05.712	Rheumatoid arthritis with rheumatoid factor of left shoulder without organ or systems involvement	ICD-10-CM	Diagnosis
M05.719	Rheumatoid arthritis with rheumatoid factor of unspecified shoulder without organ or systems involvement	ICD-10-CM	Diagnosis
M05.721	Rheumatoid arthritis with rheumatoid factor of right elbow without organ or systems involvement	ICD-10-CM	Diagnosis
M05.722	Rheumatoid arthritis with rheumatoid factor of left elbow without organ or systems involvement	ICD-10-CM	Diagnosis
M05.729	Rheumatoid arthritis with rheumatoid factor of unspecified elbow without organ or systems involvement	ICD-10-CM	Diagnosis
M05.731	Rheumatoid arthritis with rheumatoid factor of right wrist without organ or systems involvement	ICD-10-CM	Diagnosis
M05.732	Rheumatoid arthritis with rheumatoid factor of left wrist without organ or systems involvement	ICD-10-CM	Diagnosis
M05.739	Rheumatoid arthritis with rheumatoid factor of unspecified wrist without organ or systems involvement	ICD-10-CM	Diagnosis
M05.741	Rheumatoid arthritis with rheumatoid factor of right hand without organ or systems involvement	ICD-10-CM	Diagnosis
M05.742	Rheumatoid arthritis with rheumatoid factor of left hand without organ or systems involvement	ICD-10-CM	Diagnosis
M05.749	Rheumatoid arthritis with rheumatoid factor of unspecified hand without organ or systems involvement	ICD-10-CM	Diagnosis
M05.751	Rheumatoid arthritis with rheumatoid factor of right hip without organ or systems involvement	ICD-10-CM	Diagnosis
M05.752	Rheumatoid arthritis with rheumatoid factor of left hip without organ or systems involvement	ICD-10-CM	Diagnosis
M05.759	Rheumatoid arthritis with rheumatoid factor of unspecified hip without organ or systems involvement	ICD-10-CM	Diagnosis
M05.761	Rheumatoid arthritis with rheumatoid factor of right knee without organ or systems involvement	ICD-10-CM	Diagnosis
M05.762	Rheumatoid arthritis with rheumatoid factor of left knee without organ or systems involvement	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
M05.769	Rheumatoid arthritis with rheumatoid factor of unspecified knee without organ or systems involvement	ICD-10-CM	Diagnosis
M05.771	Rheumatoid arthritis with rheumatoid factor of right ankle and foot without organ or systems involvement	ICD-10-CM	Diagnosis
M05.772	Rheumatoid arthritis with rheumatoid factor of left ankle and foot without organ or systems involvement	ICD-10-CM	Diagnosis
M05.779	Rheumatoid arthritis with rheumatoid factor of unspecified ankle and foot without organ or systems involvement	ICD-10-CM	Diagnosis
M05.79	Rheumatoid arthritis with rheumatoid factor of multiple sites without organ or systems involvement	ICD-10-CM	Diagnosis
M05.7A	Rheumatoid arthritis with rheumatoid factor of other specified site without organ or systems involvement	ICD-10-CM	Diagnosis
M05.80	Other rheumatoid arthritis with rheumatoid factor of unspecified site	ICD-10-CM	Diagnosis
M05.811	Other rheumatoid arthritis with rheumatoid factor of right shoulder	ICD-10-CM	Diagnosis
M05.812	Other rheumatoid arthritis with rheumatoid factor of left shoulder	ICD-10-CM	Diagnosis
M05.819	Other rheumatoid arthritis with rheumatoid factor of unspecified shoulder	ICD-10-CM	Diagnosis
M05.821	Other rheumatoid arthritis with rheumatoid factor of right elbow	ICD-10-CM	Diagnosis
M05.822	Other rheumatoid arthritis with rheumatoid factor of left elbow	ICD-10-CM	Diagnosis
M05.829	Other rheumatoid arthritis with rheumatoid factor of unspecified elbow	ICD-10-CM	Diagnosis
M05.831	Other rheumatoid arthritis with rheumatoid factor of right wrist	ICD-10-CM	Diagnosis
M05.832	Other rheumatoid arthritis with rheumatoid factor of left wrist	ICD-10-CM	Diagnosis
M05.839	Other rheumatoid arthritis with rheumatoid factor of unspecified wrist	ICD-10-CM	Diagnosis
M05.841	Other rheumatoid arthritis with rheumatoid factor of right hand	ICD-10-CM	Diagnosis
M05.842	Other rheumatoid arthritis with rheumatoid factor of left hand	ICD-10-CM	Diagnosis
M05.849	Other rheumatoid arthritis with rheumatoid factor of unspecified hand	ICD-10-CM	Diagnosis
M05.851	Other rheumatoid arthritis with rheumatoid factor of right hip	ICD-10-CM	Diagnosis
M05.852	Other rheumatoid arthritis with rheumatoid factor of left hip	ICD-10-CM	Diagnosis
M05.859	Other rheumatoid arthritis with rheumatoid factor of unspecified hip	ICD-10-CM	Diagnosis
M05.861	Other rheumatoid arthritis with rheumatoid factor of right knee	ICD-10-CM	Diagnosis
M05.862	Other rheumatoid arthritis with rheumatoid factor of left knee	ICD-10-CM	Diagnosis
M05.869	Other rheumatoid arthritis with rheumatoid factor of unspecified knee	ICD-10-CM	Diagnosis
M05.871	Other rheumatoid arthritis with rheumatoid factor of right ankle and foot	ICD-10-CM	Diagnosis
M05.872	Other rheumatoid arthritis with rheumatoid factor of left ankle and foot	ICD-10-CM	Diagnosis
M05.879	Other rheumatoid arthritis with rheumatoid factor of unspecified ankle and foot	ICD-10-CM	Diagnosis
M05.89	Other rheumatoid arthritis with rheumatoid factor of multiple sites	ICD-10-CM	Diagnosis
M05.8A	Other rheumatoid arthritis with rheumatoid factor of other specified site	ICD-10-CM	Diagnosis
M05.9	Rheumatoid arthritis with rheumatoid factor, unspecified	ICD-10-CM	Diagnosis
M06.00	Rheumatoid arthritis without rheumatoid factor, unspecified site	ICD-10-CM	Diagnosis
M06.011	Rheumatoid arthritis without rheumatoid factor, right shoulder	ICD-10-CM	Diagnosis
M06.012	Rheumatoid arthritis without rheumatoid factor, left shoulder	ICD-10-CM	Diagnosis
M06.019	Rheumatoid arthritis without rheumatoid factor, unspecified shoulder	ICD-10-CM	Diagnosis
M06.021	Rheumatoid arthritis without rheumatoid factor, right elbow	ICD-10-CM	Diagnosis
M06.022	Rheumatoid arthritis without rheumatoid factor, left elbow	ICD-10-CM	Diagnosis
M06.029	Rheumatoid arthritis without rheumatoid factor, unspecified elbow	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
M06.031	Rheumatoid arthritis without rheumatoid factor, right wrist	ICD-10-CM	Diagnosis
M06.032	Rheumatoid arthritis without rheumatoid factor, left wrist	ICD-10-CM	Diagnosis
M06.039	Rheumatoid arthritis without rheumatoid factor, unspecified wrist	ICD-10-CM	Diagnosis
M06.041	Rheumatoid arthritis without rheumatoid factor, right hand	ICD-10-CM	Diagnosis
M06.042	Rheumatoid arthritis without rheumatoid factor, left hand	ICD-10-CM	Diagnosis
M06.049	Rheumatoid arthritis without rheumatoid factor, unspecified hand	ICD-10-CM	Diagnosis
M06.051	Rheumatoid arthritis without rheumatoid factor, right hip	ICD-10-CM	Diagnosis
M06.052	Rheumatoid arthritis without rheumatoid factor, left hip	ICD-10-CM	Diagnosis
M06.059	Rheumatoid arthritis without rheumatoid factor, unspecified hip	ICD-10-CM	Diagnosis
M06.061	Rheumatoid arthritis without rheumatoid factor, right knee	ICD-10-CM	Diagnosis
M06.062	Rheumatoid arthritis without rheumatoid factor, left knee	ICD-10-CM	Diagnosis
M06.069	Rheumatoid arthritis without rheumatoid factor, unspecified knee	ICD-10-CM	Diagnosis
M06.071	Rheumatoid arthritis without rheumatoid factor, right ankle and foot	ICD-10-CM	Diagnosis
M06.072	Rheumatoid arthritis without rheumatoid factor, left ankle and foot	ICD-10-CM	Diagnosis
M06.079	Rheumatoid arthritis without rheumatoid factor, unspecified ankle and foot	ICD-10-CM	Diagnosis
M06.08	Rheumatoid arthritis without rheumatoid factor, vertebrae	ICD-10-CM	Diagnosis
M06.09	Rheumatoid arthritis without rheumatoid factor, multiple sites	ICD-10-CM	Diagnosis
M06.0A	Rheumatoid arthritis without rheumatoid factor, other specified site	ICD-10-CM	Diagnosis
M06.1	Adult-onset Still's disease	ICD-10-CM	Diagnosis
M06.20	Rheumatoid bursitis, unspecified site	ICD-10-CM	Diagnosis
M06.211	Rheumatoid bursitis, right shoulder	ICD-10-CM	Diagnosis
M06.212	Rheumatoid bursitis, left shoulder	ICD-10-CM	Diagnosis
M06.219	Rheumatoid bursitis, unspecified shoulder	ICD-10-CM	Diagnosis
M06.221	Rheumatoid bursitis, right elbow	ICD-10-CM	Diagnosis
M06.222	Rheumatoid bursitis, left elbow	ICD-10-CM	Diagnosis
M06.229	Rheumatoid bursitis, unspecified elbow	ICD-10-CM	Diagnosis
M06.231	Rheumatoid bursitis, right wrist	ICD-10-CM	Diagnosis
M06.232	Rheumatoid bursitis, left wrist	ICD-10-CM	Diagnosis
M06.239	Rheumatoid bursitis, unspecified wrist	ICD-10-CM	Diagnosis
M06.241	Rheumatoid bursitis, right hand	ICD-10-CM	Diagnosis
M06.242	Rheumatoid bursitis, left hand	ICD-10-CM	Diagnosis
M06.249	Rheumatoid bursitis, unspecified hand	ICD-10-CM	Diagnosis
M06.251	Rheumatoid bursitis, right hip	ICD-10-CM	Diagnosis
M06.252	Rheumatoid bursitis, left hip	ICD-10-CM	Diagnosis
M06.259	Rheumatoid bursitis, unspecified hip	ICD-10-CM	Diagnosis
M06.261	Rheumatoid bursitis, right knee	ICD-10-CM	Diagnosis
M06.262	Rheumatoid bursitis, left knee	ICD-10-CM	Diagnosis
M06.269	Rheumatoid bursitis, unspecified knee	ICD-10-CM	Diagnosis
M06.271	Rheumatoid bursitis, right ankle and foot	ICD-10-CM	Diagnosis
M06.272	Rheumatoid bursitis, left ankle and foot	ICD-10-CM	Diagnosis
M06.279	Rheumatoid bursitis, unspecified ankle and foot	ICD-10-CM	Diagnosis
M06.28	Rheumatoid bursitis, vertebrae	ICD-10-CM	Diagnosis
M06.29	Rheumatoid bursitis, multiple sites	ICD-10-CM	Diagnosis
M06.30	Rheumatoid nodule, unspecified site	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
M06.311	Rheumatoid nodule, right shoulder	ICD-10-CM	Diagnosis
M06.312	Rheumatoid nodule, left shoulder	ICD-10-CM	Diagnosis
M06.319	Rheumatoid nodule, unspecified shoulder	ICD-10-CM	Diagnosis
M06.321	Rheumatoid nodule, right elbow	ICD-10-CM	Diagnosis
M06.322	Rheumatoid nodule, left elbow	ICD-10-CM	Diagnosis
M06.329	Rheumatoid nodule, unspecified elbow	ICD-10-CM	Diagnosis
M06.331	Rheumatoid nodule, right wrist	ICD-10-CM	Diagnosis
M06.332	Rheumatoid nodule, left wrist	ICD-10-CM	Diagnosis
M06.339	Rheumatoid nodule, unspecified wrist	ICD-10-CM	Diagnosis
M06.341	Rheumatoid nodule, right hand	ICD-10-CM	Diagnosis
M06.342	Rheumatoid nodule, left hand	ICD-10-CM	Diagnosis
M06.349	Rheumatoid nodule, unspecified hand	ICD-10-CM	Diagnosis
M06.351	Rheumatoid nodule, right hip	ICD-10-CM	Diagnosis
M06.352	Rheumatoid nodule, left hip	ICD-10-CM	Diagnosis
M06.359	Rheumatoid nodule, unspecified hip	ICD-10-CM	Diagnosis
M06.361	Rheumatoid nodule, right knee	ICD-10-CM	Diagnosis
M06.362	Rheumatoid nodule, left knee	ICD-10-CM	Diagnosis
M06.369	Rheumatoid nodule, unspecified knee	ICD-10-CM	Diagnosis
M06.371	Rheumatoid nodule, right ankle and foot	ICD-10-CM	Diagnosis
M06.372	Rheumatoid nodule, left ankle and foot	ICD-10-CM	Diagnosis
M06.379	Rheumatoid nodule, unspecified ankle and foot	ICD-10-CM	Diagnosis
M06.38	Rheumatoid nodule, vertebrae	ICD-10-CM	Diagnosis
M06.39	Rheumatoid nodule, multiple sites	ICD-10-CM	Diagnosis
M06.80	Other specified rheumatoid arthritis, unspecified site	ICD-10-CM	Diagnosis
M06.811	Other specified rheumatoid arthritis, right shoulder	ICD-10-CM	Diagnosis
M06.812	Other specified rheumatoid arthritis, left shoulder	ICD-10-CM	Diagnosis
M06.819	Other specified rheumatoid arthritis, unspecified shoulder	ICD-10-CM	Diagnosis
M06.821	Other specified rheumatoid arthritis, right elbow	ICD-10-CM	Diagnosis
M06.822	Other specified rheumatoid arthritis, left elbow	ICD-10-CM	Diagnosis
M06.829	Other specified rheumatoid arthritis, unspecified elbow	ICD-10-CM	Diagnosis
M06.831	Other specified rheumatoid arthritis, right wrist	ICD-10-CM	Diagnosis
M06.832	Other specified rheumatoid arthritis, left wrist	ICD-10-CM	Diagnosis
M06.839	Other specified rheumatoid arthritis, unspecified wrist	ICD-10-CM	Diagnosis
M06.841	Other specified rheumatoid arthritis, right hand	ICD-10-CM	Diagnosis
M06.842	Other specified rheumatoid arthritis, left hand	ICD-10-CM	Diagnosis
M06.849	Other specified rheumatoid arthritis, unspecified hand	ICD-10-CM	Diagnosis
M06.851	Other specified rheumatoid arthritis, right hip	ICD-10-CM	Diagnosis
M06.852	Other specified rheumatoid arthritis, left hip	ICD-10-CM	Diagnosis
M06.859	Other specified rheumatoid arthritis, unspecified hip	ICD-10-CM	Diagnosis
M06.861	Other specified rheumatoid arthritis, right knee	ICD-10-CM	Diagnosis
M06.862	Other specified rheumatoid arthritis, left knee	ICD-10-CM	Diagnosis
M06.869	Other specified rheumatoid arthritis, unspecified knee	ICD-10-CM	Diagnosis
M06.871	Other specified rheumatoid arthritis, right ankle and foot	ICD-10-CM	Diagnosis
M06.872	Other specified rheumatoid arthritis, left ankle and foot	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
M06.879	Other specified rheumatoid arthritis, unspecified ankle and foot	ICD-10-CM	Diagnosis
M06.88	Other specified rheumatoid arthritis, vertebrae	ICD-10-CM	Diagnosis
M06.89	Other specified rheumatoid arthritis, multiple sites	ICD-10-CM	Diagnosis
M06.8A	Other specified rheumatoid arthritis, other specified site	ICD-10-CM	Diagnosis
M06.9	Rheumatoid arthritis, unspecified	ICD-10-CM	Diagnosis
M08.00	Unspecified juvenile rheumatoid arthritis of unspecified site	ICD-10-CM	Diagnosis
M08.011	Unspecified juvenile rheumatoid arthritis, right shoulder	ICD-10-CM	Diagnosis
M08.012	Unspecified juvenile rheumatoid arthritis, left shoulder	ICD-10-CM	Diagnosis
M08.019	Unspecified juvenile rheumatoid arthritis, unspecified shoulder	ICD-10-CM	Diagnosis
M08.021	Unspecified juvenile rheumatoid arthritis, right elbow	ICD-10-CM	Diagnosis
M08.022	Unspecified juvenile rheumatoid arthritis, left elbow	ICD-10-CM	Diagnosis
M08.029	Unspecified juvenile rheumatoid arthritis, unspecified elbow	ICD-10-CM	Diagnosis
M08.031	Unspecified juvenile rheumatoid arthritis, right wrist	ICD-10-CM	Diagnosis
M08.032	Unspecified juvenile rheumatoid arthritis, left wrist	ICD-10-CM	Diagnosis
M08.039	Unspecified juvenile rheumatoid arthritis, unspecified wrist	ICD-10-CM	Diagnosis
M08.041	Unspecified juvenile rheumatoid arthritis, right hand	ICD-10-CM	Diagnosis
M08.042	Unspecified juvenile rheumatoid arthritis, left hand	ICD-10-CM	Diagnosis
M08.049	Unspecified juvenile rheumatoid arthritis, unspecified hand	ICD-10-CM	Diagnosis
M08.051	Unspecified juvenile rheumatoid arthritis, right hip	ICD-10-CM	Diagnosis
M08.052	Unspecified juvenile rheumatoid arthritis, left hip	ICD-10-CM	Diagnosis
M08.059	Unspecified juvenile rheumatoid arthritis, unspecified hip	ICD-10-CM	Diagnosis
M08.061	Unspecified juvenile rheumatoid arthritis, right knee	ICD-10-CM	Diagnosis
M08.062	Unspecified juvenile rheumatoid arthritis, left knee	ICD-10-CM	Diagnosis
M08.069	Unspecified juvenile rheumatoid arthritis, unspecified knee	ICD-10-CM	Diagnosis
M08.071	Unspecified juvenile rheumatoid arthritis, right ankle and foot	ICD-10-CM	Diagnosis
M08.072	Unspecified juvenile rheumatoid arthritis, left ankle and foot	ICD-10-CM	Diagnosis
M08.079	Unspecified juvenile rheumatoid arthritis, unspecified ankle and foot	ICD-10-CM	Diagnosis
M08.08	Unspecified juvenile rheumatoid arthritis, vertebrae	ICD-10-CM	Diagnosis
M08.09	Unspecified juvenile rheumatoid arthritis, multiple sites	ICD-10-CM	Diagnosis
M08.0A	Unspecified juvenile rheumatoid arthritis, other specified site	ICD-10-CM	Diagnosis
M08.1	Juvenile ankylosing spondylitis	ICD-10-CM	Diagnosis
M08.20	Juvenile rheumatoid arthritis with systemic onset, unspecified site	ICD-10-CM	Diagnosis
M08.211	Juvenile rheumatoid arthritis with systemic onset, right shoulder	ICD-10-CM	Diagnosis
M08.212	Juvenile rheumatoid arthritis with systemic onset, left shoulder	ICD-10-CM	Diagnosis
M08.219	Juvenile rheumatoid arthritis with systemic onset, unspecified shoulder	ICD-10-CM	Diagnosis
M08.221	Juvenile rheumatoid arthritis with systemic onset, right elbow	ICD-10-CM	Diagnosis
M08.222	Juvenile rheumatoid arthritis with systemic onset, left elbow	ICD-10-CM	Diagnosis
M08.229	Juvenile rheumatoid arthritis with systemic onset, unspecified elbow	ICD-10-CM	Diagnosis
M08.231	Juvenile rheumatoid arthritis with systemic onset, right wrist	ICD-10-CM	Diagnosis
M08.232	Juvenile rheumatoid arthritis with systemic onset, left wrist	ICD-10-CM	Diagnosis
M08.239	Juvenile rheumatoid arthritis with systemic onset, unspecified wrist	ICD-10-CM	Diagnosis
M08.241	Juvenile rheumatoid arthritis with systemic onset, right hand	ICD-10-CM	Diagnosis
M08.242	Juvenile rheumatoid arthritis with systemic onset, left hand	ICD-10-CM	Diagnosis
M08.249	Juvenile rheumatoid arthritis with systemic onset, unspecified hand	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
M08.251	Juvenile rheumatoid arthritis with systemic onset, right hip	ICD-10-CM	Diagnosis
M08.252	Juvenile rheumatoid arthritis with systemic onset, left hip	ICD-10-CM	Diagnosis
M08.259	Juvenile rheumatoid arthritis with systemic onset, unspecified hip	ICD-10-CM	Diagnosis
M08.261	Juvenile rheumatoid arthritis with systemic onset, right knee	ICD-10-CM	Diagnosis
M08.262	Juvenile rheumatoid arthritis with systemic onset, left knee	ICD-10-CM	Diagnosis
M08.269	Juvenile rheumatoid arthritis with systemic onset, unspecified knee	ICD-10-CM	Diagnosis
M08.271	Juvenile rheumatoid arthritis with systemic onset, right ankle and foot	ICD-10-CM	Diagnosis
M08.272	Juvenile rheumatoid arthritis with systemic onset, left ankle and foot	ICD-10-CM	Diagnosis
M08.279	Juvenile rheumatoid arthritis with systemic onset, unspecified ankle and foot	ICD-10-CM	Diagnosis
M08.28	Juvenile rheumatoid arthritis with systemic onset, vertebrae	ICD-10-CM	Diagnosis
M08.29	Juvenile rheumatoid arthritis with systemic onset, multiple sites	ICD-10-CM	Diagnosis
M08.2A	Juvenile rheumatoid arthritis with systemic onset, other specified site	ICD-10-CM	Diagnosis
M08.3	Juvenile rheumatoid polyarthritis (seronegative)	ICD-10-CM	Diagnosis
M08.40	Pauciarticular juvenile rheumatoid arthritis, unspecified site	ICD-10-CM	Diagnosis
M08.411	Pauciarticular juvenile rheumatoid arthritis, right shoulder	ICD-10-CM	Diagnosis
M08.412	Pauciarticular juvenile rheumatoid arthritis, left shoulder	ICD-10-CM	Diagnosis
M08.419	Pauciarticular juvenile rheumatoid arthritis, unspecified shoulder	ICD-10-CM	Diagnosis
M08.421	Pauciarticular juvenile rheumatoid arthritis, right elbow	ICD-10-CM	Diagnosis
M08.422	Pauciarticular juvenile rheumatoid arthritis, left elbow	ICD-10-CM	Diagnosis
M08.429	Pauciarticular juvenile rheumatoid arthritis, unspecified elbow	ICD-10-CM	Diagnosis
M08.431	Pauciarticular juvenile rheumatoid arthritis, right wrist	ICD-10-CM	Diagnosis
M08.432	Pauciarticular juvenile rheumatoid arthritis, left wrist	ICD-10-CM	Diagnosis
M08.439	Pauciarticular juvenile rheumatoid arthritis, unspecified wrist	ICD-10-CM	Diagnosis
M08.441	Pauciarticular juvenile rheumatoid arthritis, right hand	ICD-10-CM	Diagnosis
M08.442	Pauciarticular juvenile rheumatoid arthritis, left hand	ICD-10-CM	Diagnosis
M08.449	Pauciarticular juvenile rheumatoid arthritis, unspecified hand	ICD-10-CM	Diagnosis
M08.451	Pauciarticular juvenile rheumatoid arthritis, right hip	ICD-10-CM	Diagnosis
M08.452	Pauciarticular juvenile rheumatoid arthritis, left hip	ICD-10-CM	Diagnosis
M08.459	Pauciarticular juvenile rheumatoid arthritis, unspecified hip	ICD-10-CM	Diagnosis
M08.461	Pauciarticular juvenile rheumatoid arthritis, right knee	ICD-10-CM	Diagnosis
M08.462	Pauciarticular juvenile rheumatoid arthritis, left knee	ICD-10-CM	Diagnosis
M08.469	Pauciarticular juvenile rheumatoid arthritis, unspecified knee	ICD-10-CM	Diagnosis
M08.471	Pauciarticular juvenile rheumatoid arthritis, right ankle and foot	ICD-10-CM	Diagnosis
M08.472	Pauciarticular juvenile rheumatoid arthritis, left ankle and foot	ICD-10-CM	Diagnosis
M08.479	Pauciarticular juvenile rheumatoid arthritis, unspecified ankle and foot	ICD-10-CM	Diagnosis
M08.48	Pauciarticular juvenile rheumatoid arthritis, vertebrae	ICD-10-CM	Diagnosis
M08.4A	Pauciarticular juvenile rheumatoid arthritis, other specified site	ICD-10-CM	Diagnosis
M08.80	Other juvenile arthritis, unspecified site	ICD-10-CM	Diagnosis
M08.811	Other juvenile arthritis, right shoulder	ICD-10-CM	Diagnosis
M08.812	Other juvenile arthritis, left shoulder	ICD-10-CM	Diagnosis
M08.819	Other juvenile arthritis, unspecified shoulder	ICD-10-CM	Diagnosis
M08.821	Other juvenile arthritis, right elbow	ICD-10-CM	Diagnosis
M08.822	Other juvenile arthritis, left elbow	ICD-10-CM	Diagnosis
M08.829	Other juvenile arthritis, unspecified elbow	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
M08.831	Other juvenile arthritis, right wrist	ICD-10-CM	Diagnosis
M08.832	Other juvenile arthritis, left wrist	ICD-10-CM	Diagnosis
M08.839	Other juvenile arthritis, unspecified wrist	ICD-10-CM	Diagnosis
M08.841	Other juvenile arthritis, right hand	ICD-10-CM	Diagnosis
M08.842	Other juvenile arthritis, left hand	ICD-10-CM	Diagnosis
M08.849	Other juvenile arthritis, unspecified hand	ICD-10-CM	Diagnosis
M08.851	Other juvenile arthritis, right hip	ICD-10-CM	Diagnosis
M08.852	Other juvenile arthritis, left hip	ICD-10-CM	Diagnosis
M08.859	Other juvenile arthritis, unspecified hip	ICD-10-CM	Diagnosis
M08.861	Other juvenile arthritis, right knee	ICD-10-CM	Diagnosis
M08.862	Other juvenile arthritis, left knee	ICD-10-CM	Diagnosis
M08.869	Other juvenile arthritis, unspecified knee	ICD-10-CM	Diagnosis
M08.871	Other juvenile arthritis, right ankle and foot	ICD-10-CM	Diagnosis
M08.872	Other juvenile arthritis, left ankle and foot	ICD-10-CM	Diagnosis
M08.879	Other juvenile arthritis, unspecified ankle and foot	ICD-10-CM	Diagnosis
M08.88	Other juvenile arthritis, other specified site	ICD-10-CM	Diagnosis
M08.89	Other juvenile arthritis, multiple sites	ICD-10-CM	Diagnosis
M08.90	Juvenile arthritis, unspecified, unspecified site	ICD-10-CM	Diagnosis
M08.911	Juvenile arthritis, unspecified, right shoulder	ICD-10-CM	Diagnosis
M08.912	Juvenile arthritis, unspecified, left shoulder	ICD-10-CM	Diagnosis
M08.919	Juvenile arthritis, unspecified, unspecified shoulder	ICD-10-CM	Diagnosis
M08.921	Juvenile arthritis, unspecified, right elbow	ICD-10-CM	Diagnosis
M08.922	Juvenile arthritis, unspecified, left elbow	ICD-10-CM	Diagnosis
M08.929	Juvenile arthritis, unspecified, unspecified elbow	ICD-10-CM	Diagnosis
M08.931	Juvenile arthritis, unspecified, right wrist	ICD-10-CM	Diagnosis
M08.932	Juvenile arthritis, unspecified, left wrist	ICD-10-CM	Diagnosis
M08.939	Juvenile arthritis, unspecified, unspecified wrist	ICD-10-CM	Diagnosis
M08.941	Juvenile arthritis, unspecified, right hand	ICD-10-CM	Diagnosis
M08.942	Juvenile arthritis, unspecified, left hand	ICD-10-CM	Diagnosis
M08.949	Juvenile arthritis, unspecified, unspecified hand	ICD-10-CM	Diagnosis
M08.951	Juvenile arthritis, unspecified, right hip	ICD-10-CM	Diagnosis
M08.952	Juvenile arthritis, unspecified, left hip	ICD-10-CM	Diagnosis
M08.959	Juvenile arthritis, unspecified, unspecified hip	ICD-10-CM	Diagnosis
M08.961	Juvenile arthritis, unspecified, right knee	ICD-10-CM	Diagnosis
M08.962	Juvenile arthritis, unspecified, left knee	ICD-10-CM	Diagnosis
M08.969	Juvenile arthritis, unspecified, unspecified knee	ICD-10-CM	Diagnosis
M08.971	Juvenile arthritis, unspecified, right ankle and foot	ICD-10-CM	Diagnosis
M08.972	Juvenile arthritis, unspecified, left ankle and foot	ICD-10-CM	Diagnosis
M08.979	Juvenile arthritis, unspecified, unspecified ankle and foot	ICD-10-CM	Diagnosis
M08.98	Juvenile arthritis, unspecified, vertebrae	ICD-10-CM	Diagnosis
M08.99	Juvenile arthritis, unspecified, multiple sites	ICD-10-CM	Diagnosis
M08.9A	Juvenile arthritis, unspecified, other specified site	ICD-10-CM	Diagnosis
M15.0	Primary generalized (osteo)arthritis	ICD-10-CM	Diagnosis
M15.1	Heberden's nodes (with arthropathy)	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
M15.2	Bouchard's nodes (with arthropathy)	ICD-10-CM	Diagnosis
M15.3	Secondary multiple arthritis	ICD-10-CM	Diagnosis
M15.4	Erosive (osteo)arthritis	ICD-10-CM	Diagnosis
M15.8	Other polyosteoarthritis	ICD-10-CM	Diagnosis
M15.9	Polyosteoarthritis, unspecified	ICD-10-CM	Diagnosis
M16.0	Bilateral primary osteoarthritis of hip	ICD-10-CM	Diagnosis
M16.10	Unilateral primary osteoarthritis, unspecified hip	ICD-10-CM	Diagnosis
M16.11	Unilateral primary osteoarthritis, right hip	ICD-10-CM	Diagnosis
M16.12	Unilateral primary osteoarthritis, left hip	ICD-10-CM	Diagnosis
M16.2	Bilateral osteoarthritis resulting from hip dysplasia	ICD-10-CM	Diagnosis
M16.30	Unilateral osteoarthritis resulting from hip dysplasia, unspecified hip	ICD-10-CM	Diagnosis
M16.31	Unilateral osteoarthritis resulting from hip dysplasia, right hip	ICD-10-CM	Diagnosis
M16.32	Unilateral osteoarthritis resulting from hip dysplasia, left hip	ICD-10-CM	Diagnosis
M16.4	Bilateral post-traumatic osteoarthritis of hip	ICD-10-CM	Diagnosis
M16.50	Unilateral post-traumatic osteoarthritis, unspecified hip	ICD-10-CM	Diagnosis
M16.51	Unilateral post-traumatic osteoarthritis, right hip	ICD-10-CM	Diagnosis
M16.52	Unilateral post-traumatic osteoarthritis, left hip	ICD-10-CM	Diagnosis
M16.6	Other bilateral secondary osteoarthritis of hip	ICD-10-CM	Diagnosis
M16.7	Other unilateral secondary osteoarthritis of hip	ICD-10-CM	Diagnosis
M16.9	Osteoarthritis of hip, unspecified	ICD-10-CM	Diagnosis
M17.0	Bilateral primary osteoarthritis of knee	ICD-10-CM	Diagnosis
M17.10	Unilateral primary osteoarthritis, unspecified knee	ICD-10-CM	Diagnosis
M17.11	Unilateral primary osteoarthritis, right knee	ICD-10-CM	Diagnosis
M17.12	Unilateral primary osteoarthritis, left knee	ICD-10-CM	Diagnosis
M17.2	Bilateral post-traumatic osteoarthritis of knee	ICD-10-CM	Diagnosis
M17.30	Unilateral post-traumatic osteoarthritis, unspecified knee	ICD-10-CM	Diagnosis
M17.31	Unilateral post-traumatic osteoarthritis, right knee	ICD-10-CM	Diagnosis
M17.32	Unilateral post-traumatic osteoarthritis, left knee	ICD-10-CM	Diagnosis
M17.4	Other bilateral secondary osteoarthritis of knee	ICD-10-CM	Diagnosis
M17.5	Other unilateral secondary osteoarthritis of knee	ICD-10-CM	Diagnosis
M17.9	Osteoarthritis of knee, unspecified	ICD-10-CM	Diagnosis
M18.0	Bilateral primary osteoarthritis of first carpometacarpal joints	ICD-10-CM	Diagnosis
M18.10	Unilateral primary osteoarthritis of first carpometacarpal joint, unspecified hand	ICD-10-CM	Diagnosis
M18.11	Unilateral primary osteoarthritis of first carpometacarpal joint, right hand	ICD-10-CM	Diagnosis
M18.12	Unilateral primary osteoarthritis of first carpometacarpal joint, left hand	ICD-10-CM	Diagnosis
M18.2	Bilateral post-traumatic osteoarthritis of first carpometacarpal joints	ICD-10-CM	Diagnosis
M18.30	Unilateral post-traumatic osteoarthritis of first carpometacarpal joint, unspecified hand	ICD-10-CM	Diagnosis
M18.31	Unilateral post-traumatic osteoarthritis of first carpometacarpal joint, right hand	ICD-10-CM	Diagnosis
M18.32	Unilateral post-traumatic osteoarthritis of first carpometacarpal joint, left hand	ICD-10-CM	Diagnosis
M18.4	Other bilateral secondary osteoarthritis of first carpometacarpal joints	ICD-10-CM	Diagnosis
M18.50	Other unilateral secondary osteoarthritis of first carpometacarpal joint, unspecified hand	ICD-10-CM	Diagnosis
M18.51	Other unilateral secondary osteoarthritis of first carpometacarpal joint, right hand	ICD-10-CM	Diagnosis
M18.52	Other unilateral secondary osteoarthritis of first carpometacarpal joint, left hand	ICD-10-CM	Diagnosis
M18.9	Osteoarthritis of first carpometacarpal joint, unspecified	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
M19.011	Primary osteoarthritis, right shoulder	ICD-10-CM	Diagnosis
M19.012	Primary osteoarthritis, left shoulder	ICD-10-CM	Diagnosis
M19.019	Primary osteoarthritis, unspecified shoulder	ICD-10-CM	Diagnosis
M19.021	Primary osteoarthritis, right elbow	ICD-10-CM	Diagnosis
M19.022	Primary osteoarthritis, left elbow	ICD-10-CM	Diagnosis
M19.029	Primary osteoarthritis, unspecified elbow	ICD-10-CM	Diagnosis
M19.031	Primary osteoarthritis, right wrist	ICD-10-CM	Diagnosis
M19.032	Primary osteoarthritis, left wrist	ICD-10-CM	Diagnosis
M19.039	Primary osteoarthritis, unspecified wrist	ICD-10-CM	Diagnosis
M19.041	Primary osteoarthritis, right hand	ICD-10-CM	Diagnosis
M19.042	Primary osteoarthritis, left hand	ICD-10-CM	Diagnosis
M19.049	Primary osteoarthritis, unspecified hand	ICD-10-CM	Diagnosis
M19.071	Primary osteoarthritis, right ankle and foot	ICD-10-CM	Diagnosis
M19.072	Primary osteoarthritis, left ankle and foot	ICD-10-CM	Diagnosis
M19.079	Primary osteoarthritis, unspecified ankle and foot	ICD-10-CM	Diagnosis
M19.09	Primary osteoarthritis, other specified site	ICD-10-CM	Diagnosis
M19.111	Post-traumatic osteoarthritis, right shoulder	ICD-10-CM	Diagnosis
M19.112	Post-traumatic osteoarthritis, left shoulder	ICD-10-CM	Diagnosis
M19.119	Post-traumatic osteoarthritis, unspecified shoulder	ICD-10-CM	Diagnosis
M19.121	Post-traumatic osteoarthritis, right elbow	ICD-10-CM	Diagnosis
M19.122	Post-traumatic osteoarthritis, left elbow	ICD-10-CM	Diagnosis
M19.129	Post-traumatic osteoarthritis, unspecified elbow	ICD-10-CM	Diagnosis
M19.131	Post-traumatic osteoarthritis, right wrist	ICD-10-CM	Diagnosis
M19.132	Post-traumatic osteoarthritis, left wrist	ICD-10-CM	Diagnosis
M19.139	Post-traumatic osteoarthritis, unspecified wrist	ICD-10-CM	Diagnosis
M19.141	Post-traumatic osteoarthritis, right hand	ICD-10-CM	Diagnosis
M19.142	Post-traumatic osteoarthritis, left hand	ICD-10-CM	Diagnosis
M19.149	Post-traumatic osteoarthritis, unspecified hand	ICD-10-CM	Diagnosis
M19.171	Post-traumatic osteoarthritis, right ankle and foot	ICD-10-CM	Diagnosis
M19.172	Post-traumatic osteoarthritis, left ankle and foot	ICD-10-CM	Diagnosis
M19.179	Post-traumatic osteoarthritis, unspecified ankle and foot	ICD-10-CM	Diagnosis
M19.19	Post-traumatic osteoarthritis, other specified site	ICD-10-CM	Diagnosis
M19.211	Secondary osteoarthritis, right shoulder	ICD-10-CM	Diagnosis
M19.212	Secondary osteoarthritis, left shoulder	ICD-10-CM	Diagnosis
M19.219	Secondary osteoarthritis, unspecified shoulder	ICD-10-CM	Diagnosis
M19.221	Secondary osteoarthritis, right elbow	ICD-10-CM	Diagnosis
M19.222	Secondary osteoarthritis, left elbow	ICD-10-CM	Diagnosis
M19.229	Secondary osteoarthritis, unspecified elbow	ICD-10-CM	Diagnosis
M19.231	Secondary osteoarthritis, right wrist	ICD-10-CM	Diagnosis
M19.232	Secondary osteoarthritis, left wrist	ICD-10-CM	Diagnosis
M19.239	Secondary osteoarthritis, unspecified wrist	ICD-10-CM	Diagnosis
M19.241	Secondary osteoarthritis, right hand	ICD-10-CM	Diagnosis
M19.242	Secondary osteoarthritis, left hand	ICD-10-CM	Diagnosis
M19.249	Secondary osteoarthritis, unspecified hand	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
M19.271	Secondary osteoarthritis, right ankle and foot	ICD-10-CM	Diagnosis
M19.272	Secondary osteoarthritis, left ankle and foot	ICD-10-CM	Diagnosis
M19.279	Secondary osteoarthritis, unspecified ankle and foot	ICD-10-CM	Diagnosis
M19.29	Secondary osteoarthritis, other specified site	ICD-10-CM	Diagnosis
M19.90	Unspecified osteoarthritis, unspecified site	ICD-10-CM	Diagnosis
M19.91	Primary osteoarthritis, unspecified site	ICD-10-CM	Diagnosis
M19.92	Post-traumatic osteoarthritis, unspecified site	ICD-10-CM	Diagnosis
M19.93	Secondary osteoarthritis, unspecified site	ICD-10-CM	Diagnosis
M45.0	Ankylosing spondylitis of multiple sites in spine	ICD-10-CM	Diagnosis
M45.1	Ankylosing spondylitis of occipito-atlanto-axial region	ICD-10-CM	Diagnosis
M45.2	Ankylosing spondylitis of cervical region	ICD-10-CM	Diagnosis
M45.3	Ankylosing spondylitis of cervicothoracic region	ICD-10-CM	Diagnosis
M45.4	Ankylosing spondylitis of thoracic region	ICD-10-CM	Diagnosis
M45.5	Ankylosing spondylitis of thoracolumbar region	ICD-10-CM	Diagnosis
M45.6	Ankylosing spondylitis lumbar region	ICD-10-CM	Diagnosis
M45.7	Ankylosing spondylitis of lumbosacral region	ICD-10-CM	Diagnosis
M45.8	Ankylosing spondylitis sacral and sacrococcygeal region	ICD-10-CM	Diagnosis
M45.9	Ankylosing spondylitis of unspecified sites in spine	ICD-10-CM	Diagnosis
M45.A0	Non-radiographic axial spondyloarthritis of unspecified sites in spine	ICD-10-CM	Diagnosis
M45.A1	Non-radiographic axial spondyloarthritis of occipito-atlanto-axial region	ICD-10-CM	Diagnosis
M45.A2	Non-radiographic axial spondyloarthritis of cervical region	ICD-10-CM	Diagnosis
M45.A3	Non-radiographic axial spondyloarthritis of cervicothoracic region	ICD-10-CM	Diagnosis
M45.A4	Non-radiographic axial spondyloarthritis of thoracic region	ICD-10-CM	Diagnosis
M45.A5	Non-radiographic axial spondyloarthritis of thoracolumbar region	ICD-10-CM	Diagnosis
M45.A6	Non-radiographic axial spondyloarthritis of lumbar region	ICD-10-CM	Diagnosis
M45.A7	Non-radiographic axial spondyloarthritis of lumbosacral region	ICD-10-CM	Diagnosis
M45.A8	Non-radiographic axial spondyloarthritis of sacral and sacrococcygeal region	ICD-10-CM	Diagnosis
M45.AB	Non-radiographic axial spondyloarthritis of multiple sites in spine	ICD-10-CM	Diagnosis
M46.80	Other specified inflammatory spondylopathies, site unspecified	ICD-10-CM	Diagnosis
M46.81	Other specified inflammatory spondylopathies, occipito-atlanto-axial region	ICD-10-CM	Diagnosis
M46.82	Other specified inflammatory spondylopathies, cervical region	ICD-10-CM	Diagnosis
M46.83	Other specified inflammatory spondylopathies, cervicothoracic region	ICD-10-CM	Diagnosis
M46.84	Other specified inflammatory spondylopathies, thoracic region	ICD-10-CM	Diagnosis
M46.85	Other specified inflammatory spondylopathies, thoracolumbar region	ICD-10-CM	Diagnosis
M46.86	Other specified inflammatory spondylopathies, lumbar region	ICD-10-CM	Diagnosis
M46.87	Other specified inflammatory spondylopathies, lumbosacral region	ICD-10-CM	Diagnosis
M46.88	Other specified inflammatory spondylopathies, sacral and sacrococcygeal region	ICD-10-CM	Diagnosis
M46.89	Other specified inflammatory spondylopathies, multiple sites in spine	ICD-10-CM	Diagnosis
M46.90	Unspecified inflammatory spondylopathy, site unspecified	ICD-10-CM	Diagnosis
M46.91	Unspecified inflammatory spondylopathy, occipito-atlanto-axial region	ICD-10-CM	Diagnosis
M46.92	Unspecified inflammatory spondylopathy, cervical region	ICD-10-CM	Diagnosis
M46.93	Unspecified inflammatory spondylopathy, cervicothoracic region	ICD-10-CM	Diagnosis
M46.94	Unspecified inflammatory spondylopathy, thoracic region	ICD-10-CM	Diagnosis
M46.95	Unspecified inflammatory spondylopathy, thoracolumbar region	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
M46.96	Unspecified inflammatory spondylopathy, lumbar region	ICD-10-CM	Diagnosis
M46.97	Unspecified inflammatory spondylopathy, lumbosacral region	ICD-10-CM	Diagnosis
M46.98	Unspecified inflammatory spondylopathy, sacral and sacrococcygeal region	ICD-10-CM	Diagnosis
M46.99	Unspecified inflammatory spondylopathy, multiple sites in spine	ICD-10-CM	Diagnosis
M47.011	Anterior spinal artery compression syndromes, occipito-atlanto-axial region	ICD-10-CM	Diagnosis
M47.012	Anterior spinal artery compression syndromes, cervical region	ICD-10-CM	Diagnosis
M47.013	Anterior spinal artery compression syndromes, cervicothoracic region	ICD-10-CM	Diagnosis
M47.014	Anterior spinal artery compression syndromes, thoracic region	ICD-10-CM	Diagnosis
M47.015	Anterior spinal artery compression syndromes, thoracolumbar region	ICD-10-CM	Diagnosis
M47.016	Anterior spinal artery compression syndromes, lumbar region	ICD-10-CM	Diagnosis
M47.019	Anterior spinal artery compression syndromes, site unspecified	ICD-10-CM	Diagnosis
M47.021	Vertebral artery compression syndromes, occipito-atlanto-axial region	ICD-10-CM	Diagnosis
M47.022	Vertebral artery compression syndromes, cervical region	ICD-10-CM	Diagnosis
M47.029	Vertebral artery compression syndromes, site unspecified	ICD-10-CM	Diagnosis
M47.10	Other spondylosis with myelopathy, site unspecified	ICD-10-CM	Diagnosis
M47.11	Other spondylosis with myelopathy, occipito-atlanto-axial region	ICD-10-CM	Diagnosis
M47.12	Other spondylosis with myelopathy, cervical region	ICD-10-CM	Diagnosis
M47.13	Other spondylosis with myelopathy, cervicothoracic region	ICD-10-CM	Diagnosis
M47.14	Other spondylosis with myelopathy, thoracic region	ICD-10-CM	Diagnosis
M47.15	Other spondylosis with myelopathy, thoracolumbar region	ICD-10-CM	Diagnosis
M47.16	Other spondylosis with myelopathy, lumbar region	ICD-10-CM	Diagnosis
M47.20	Other spondylosis with radiculopathy, site unspecified	ICD-10-CM	Diagnosis
M47.21	Other spondylosis with radiculopathy, occipito-atlanto-axial region	ICD-10-CM	Diagnosis
M47.22	Other spondylosis with radiculopathy, cervical region	ICD-10-CM	Diagnosis
M47.23	Other spondylosis with radiculopathy, cervicothoracic region	ICD-10-CM	Diagnosis
M47.24	Other spondylosis with radiculopathy, thoracic region	ICD-10-CM	Diagnosis
M47.25	Other spondylosis with radiculopathy, thoracolumbar region	ICD-10-CM	Diagnosis
M47.26	Other spondylosis with radiculopathy, lumbar region	ICD-10-CM	Diagnosis
M47.27	Other spondylosis with radiculopathy, lumbosacral region	ICD-10-CM	Diagnosis
M47.28	Other spondylosis with radiculopathy, sacral and sacrococcygeal region	ICD-10-CM	Diagnosis
M47.811	Spondylosis without myelopathy or radiculopathy, occipito-atlanto-axial region	ICD-10-CM	Diagnosis
M47.812	Spondylosis without myelopathy or radiculopathy, cervical region	ICD-10-CM	Diagnosis
M47.813	Spondylosis without myelopathy or radiculopathy, cervicothoracic region	ICD-10-CM	Diagnosis
M47.814	Spondylosis without myelopathy or radiculopathy, thoracic region	ICD-10-CM	Diagnosis
M47.815	Spondylosis without myelopathy or radiculopathy, thoracolumbar region	ICD-10-CM	Diagnosis
M47.816	Spondylosis without myelopathy or radiculopathy, lumbar region	ICD-10-CM	Diagnosis
M47.817	Spondylosis without myelopathy or radiculopathy, lumbosacral region	ICD-10-CM	Diagnosis
M47.818	Spondylosis without myelopathy or radiculopathy, sacral and sacrococcygeal region	ICD-10-CM	Diagnosis
M47.819	Spondylosis without myelopathy or radiculopathy, site unspecified	ICD-10-CM	Diagnosis
M47.891	Other spondylosis, occipito-atlanto-axial region	ICD-10-CM	Diagnosis
M47.892	Other spondylosis, cervical region	ICD-10-CM	Diagnosis
M47.893	Other spondylosis, cervicothoracic region	ICD-10-CM	Diagnosis
M47.894	Other spondylosis, thoracic region	ICD-10-CM	Diagnosis
M47.895	Other spondylosis, thoracolumbar region	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
M47.896	Other spondylosis, lumbar region	ICD-10-CM	Diagnosis
M47.897	Other spondylosis, lumbosacral region	ICD-10-CM	Diagnosis
M47.898	Other spondylosis, sacral and sacrococcygeal region	ICD-10-CM	Diagnosis
M47.899	Other spondylosis, site unspecified	ICD-10-CM	Diagnosis
M47.9	Spondylosis, unspecified	ICD-10-CM	Diagnosis
M48.8X1	Other specified spondylopathies, occipito-atlanto-axial region	ICD-10-CM	Diagnosis
M48.8X2	Other specified spondylopathies, cervical region	ICD-10-CM	Diagnosis
M48.8X3	Other specified spondylopathies, cervicothoracic region	ICD-10-CM	Diagnosis
M48.8X4	Other specified spondylopathies, thoracic region	ICD-10-CM	Diagnosis
M48.8X5	Other specified spondylopathies, thoracolumbar region	ICD-10-CM	Diagnosis
M48.8X6	Other specified spondylopathies, lumbar region	ICD-10-CM	Diagnosis
M48.8X7	Other specified spondylopathies, lumbosacral region	ICD-10-CM	Diagnosis
M48.8X8	Other specified spondylopathies, sacral and sacrococcygeal region	ICD-10-CM	Diagnosis
M48.8X9	Other specified spondylopathies, site unspecified	ICD-10-CM	Diagnosis
	Stroke TIA		
G45.0	Vertebro-basilar artery syndrome	ICD-10-CM	Diagnosis
G45.1	Carotid artery syndrome (hemispheric)	ICD-10-CM	Diagnosis
G45.2	Multiple and bilateral precerebral artery syndromes	ICD-10-CM	Diagnosis
G45.3	Amaurosis fugax	ICD-10-CM	Diagnosis
G45.8	Other transient cerebral ischemic attacks and related syndromes	ICD-10-CM	Diagnosis
G45.9	Transient cerebral ischemic attack, unspecified	ICD-10-CM	Diagnosis
G46.0	Middle cerebral artery syndrome	ICD-10-CM	Diagnosis
G46.1	Anterior cerebral artery syndrome	ICD-10-CM	Diagnosis
G46.2	Posterior cerebral artery syndrome	ICD-10-CM	Diagnosis
G46.3	Brain stem stroke syndrome	ICD-10-CM	Diagnosis
G46.4	Cerebellar stroke syndrome	ICD-10-CM	Diagnosis
G46.5	Pure motor lacunar syndrome	ICD-10-CM	Diagnosis
G46.6	Pure sensory lacunar syndrome	ICD-10-CM	Diagnosis
G46.7	Other lacunar syndromes	ICD-10-CM	Diagnosis
G46.8	Other vascular syndromes of brain in cerebrovascular diseases	ICD-10-CM	Diagnosis
G97.31	Intraoperative hemorrhage and hematoma of a nervous system organ or structure complicating a nervous system procedure	ICD-10-CM	Diagnosis
G97.32	Intraoperative hemorrhage and hematoma of a nervous system organ or structure complicating other procedure	ICD-10-CM	Diagnosis
I60.00	Nontraumatic subarachnoid hemorrhage from unspecified carotid siphon and bifurcation	ICD-10-CM	Diagnosis
I60.01	Nontraumatic subarachnoid hemorrhage from right carotid siphon and bifurcation	ICD-10-CM	Diagnosis
I60.02	Nontraumatic subarachnoid hemorrhage from left carotid siphon and bifurcation	ICD-10-CM	Diagnosis
I60.10	Nontraumatic subarachnoid hemorrhage from unspecified middle cerebral artery	ICD-10-CM	Diagnosis
I60.11	Nontraumatic subarachnoid hemorrhage from right middle cerebral artery	ICD-10-CM	Diagnosis
I60.12	Nontraumatic subarachnoid hemorrhage from left middle cerebral artery	ICD-10-CM	Diagnosis
I60.2	Nontraumatic subarachnoid hemorrhage from anterior communicating artery	ICD-10-CM	Diagnosis
I60.20	Nontraumatic subarachnoid hemorrhage from unspecified anterior communicating artery	ICD-10-CM	Diagnosis
I60.21	Nontraumatic subarachnoid hemorrhage from right anterior communicating artery	ICD-10-CM	Diagnosis
I60.22	Nontraumatic subarachnoid hemorrhage from left anterior communicating artery	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
I60.30	Nontraumatic subarachnoid hemorrhage from unspecified posterior communicating artery	ICD-10-CM	Diagnosis
I60.31	Nontraumatic subarachnoid hemorrhage from right posterior communicating artery	ICD-10-CM	Diagnosis
I60.32	Nontraumatic subarachnoid hemorrhage from left posterior communicating artery	ICD-10-CM	Diagnosis
I60.4	Nontraumatic subarachnoid hemorrhage from basilar artery	ICD-10-CM	Diagnosis
I60.50	Nontraumatic subarachnoid hemorrhage from unspecified vertebral artery	ICD-10-CM	Diagnosis
I60.51	Nontraumatic subarachnoid hemorrhage from right vertebral artery	ICD-10-CM	Diagnosis
I60.52	Nontraumatic subarachnoid hemorrhage from left vertebral artery	ICD-10-CM	Diagnosis
I60.6	Nontraumatic subarachnoid hemorrhage from other intracranial arteries	ICD-10-CM	Diagnosis
I60.7	Nontraumatic subarachnoid hemorrhage from unspecified intracranial artery	ICD-10-CM	Diagnosis
I60.8	Other nontraumatic subarachnoid hemorrhage	ICD-10-CM	Diagnosis
I60.9	Nontraumatic subarachnoid hemorrhage, unspecified	ICD-10-CM	Diagnosis
I61.0	Nontraumatic intracerebral hemorrhage in hemisphere, subcortical	ICD-10-CM	Diagnosis
I61.1	Nontraumatic intracerebral hemorrhage in hemisphere, cortical	ICD-10-CM	Diagnosis
I61.2	Nontraumatic intracerebral hemorrhage in hemisphere, unspecified	ICD-10-CM	Diagnosis
I61.3	Nontraumatic intracerebral hemorrhage in brain stem	ICD-10-CM	Diagnosis
I61.4	Nontraumatic intracerebral hemorrhage in cerebellum	ICD-10-CM	Diagnosis
I61.5	Nontraumatic intracerebral hemorrhage, intraventricular	ICD-10-CM	Diagnosis
I61.6	Nontraumatic intracerebral hemorrhage, multiple localized	ICD-10-CM	Diagnosis
I61.8	Other nontraumatic intracerebral hemorrhage	ICD-10-CM	Diagnosis
I61.9	Nontraumatic intracerebral hemorrhage, unspecified	ICD-10-CM	Diagnosis
I62.00	Nontraumatic subdural hemorrhage, unspecified	ICD-10-CM	Diagnosis
I62.01	Nontraumatic acute subdural hemorrhage	ICD-10-CM	Diagnosis
I62.02	Nontraumatic subacute subdural hemorrhage	ICD-10-CM	Diagnosis
I62.9	Nontraumatic intracranial hemorrhage, unspecified	ICD-10-CM	Diagnosis
I63.00	Cerebral infarction due to thrombosis of unspecified precerebral artery	ICD-10-CM	Diagnosis
I63.011	Cerebral infarction due to thrombosis of right vertebral artery	ICD-10-CM	Diagnosis
I63.012	Cerebral infarction due to thrombosis of left vertebral artery	ICD-10-CM	Diagnosis
I63.013	Cerebral infarction due to thrombosis of bilateral vertebral arteries	ICD-10-CM	Diagnosis
I63.019	Cerebral infarction due to thrombosis of unspecified vertebral artery	ICD-10-CM	Diagnosis
I63.02	Cerebral infarction due to thrombosis of basilar artery	ICD-10-CM	Diagnosis
I63.031	Cerebral infarction due to thrombosis of right carotid artery	ICD-10-CM	Diagnosis
I63.032	Cerebral infarction due to thrombosis of left carotid artery	ICD-10-CM	Diagnosis
I63.033	Cerebral infarction due to thrombosis of bilateral carotid arteries	ICD-10-CM	Diagnosis
I63.039	Cerebral infarction due to thrombosis of unspecified carotid artery	ICD-10-CM	Diagnosis
I63.09	Cerebral infarction due to thrombosis of other precerebral artery	ICD-10-CM	Diagnosis
I63.10	Cerebral infarction due to embolism of unspecified precerebral artery	ICD-10-CM	Diagnosis
I63.111	Cerebral infarction due to embolism of right vertebral artery	ICD-10-CM	Diagnosis
I63.112	Cerebral infarction due to embolism of left vertebral artery	ICD-10-CM	Diagnosis
I63.113	Cerebral infarction due to embolism of bilateral vertebral arteries	ICD-10-CM	Diagnosis
I63.119	Cerebral infarction due to embolism of unspecified vertebral artery	ICD-10-CM	Diagnosis
I63.12	Cerebral infarction due to embolism of basilar artery	ICD-10-CM	Diagnosis
I63.131	Cerebral infarction due to embolism of right carotid artery	ICD-10-CM	Diagnosis
I63.132	Cerebral infarction due to embolism of left carotid artery	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
I63.133	Cerebral infarction due to embolism of bilateral carotid arteries	ICD-10-CM	Diagnosis
I63.139	Cerebral infarction due to embolism of unspecified carotid artery	ICD-10-CM	Diagnosis
I63.19	Cerebral infarction due to embolism of other precerebral artery	ICD-10-CM	Diagnosis
I63.20	Cerebral infarction due to unspecified occlusion or stenosis of unspecified precerebral arteries	ICD-10-CM	Diagnosis
I63.211	Cerebral infarction due to unspecified occlusion or stenosis of right vertebral artery	ICD-10-CM	Diagnosis
I63.212	Cerebral infarction due to unspecified occlusion or stenosis of left vertebral artery	ICD-10-CM	Diagnosis
I63.213	Cerebral infarction due to unspecified occlusion or stenosis of bilateral vertebral arteries	ICD-10-CM	Diagnosis
I63.219	Cerebral infarction due to unspecified occlusion or stenosis of unspecified vertebral artery	ICD-10-CM	Diagnosis
I63.22	Cerebral infarction due to unspecified occlusion or stenosis of basilar artery	ICD-10-CM	Diagnosis
I63.231	Cerebral infarction due to unspecified occlusion or stenosis of right carotid arteries	ICD-10-CM	Diagnosis
I63.232	Cerebral infarction due to unspecified occlusion or stenosis of left carotid arteries	ICD-10-CM	Diagnosis
I63.233	Cerebral infarction due to unspecified occlusion or stenosis of bilateral carotid arteries	ICD-10-CM	Diagnosis
I63.239	Cerebral infarction due to unspecified occlusion or stenosis of unspecified carotid artery	ICD-10-CM	Diagnosis
I63.29	Cerebral infarction due to unspecified occlusion or stenosis of other precerebral arteries	ICD-10-CM	Diagnosis
I63.30	Cerebral infarction due to thrombosis of unspecified cerebral artery	ICD-10-CM	Diagnosis
I63.311	Cerebral infarction due to thrombosis of right middle cerebral artery	ICD-10-CM	Diagnosis
I63.312	Cerebral infarction due to thrombosis of left middle cerebral artery	ICD-10-CM	Diagnosis
I63.313	Cerebral infarction due to thrombosis of bilateral middle cerebral arteries	ICD-10-CM	Diagnosis
I63.319	Cerebral infarction due to thrombosis of unspecified middle cerebral artery	ICD-10-CM	Diagnosis
I63.321	Cerebral infarction due to thrombosis of right anterior cerebral artery	ICD-10-CM	Diagnosis
I63.322	Cerebral infarction due to thrombosis of left anterior cerebral artery	ICD-10-CM	Diagnosis
I63.323	Cerebral infarction due to thrombosis of bilateral anterior cerebral arteries	ICD-10-CM	Diagnosis
I63.329	Cerebral infarction due to thrombosis of unspecified anterior cerebral artery	ICD-10-CM	Diagnosis
I63.331	Cerebral infarction due to thrombosis of right posterior cerebral artery	ICD-10-CM	Diagnosis
I63.332	Cerebral infarction due to thrombosis of left posterior cerebral artery	ICD-10-CM	Diagnosis
I63.333	Cerebral infarction due to thrombosis of bilateral posterior cerebral arteries	ICD-10-CM	Diagnosis
I63.339	Cerebral infarction due to thrombosis of unspecified posterior cerebral artery	ICD-10-CM	Diagnosis
I63.341	Cerebral infarction due to thrombosis of right cerebellar artery	ICD-10-CM	Diagnosis
I63.342	Cerebral infarction due to thrombosis of left cerebellar artery	ICD-10-CM	Diagnosis
I63.343	Cerebral infarction due to thrombosis of bilateral cerebellar arteries	ICD-10-CM	Diagnosis
I63.349	Cerebral infarction due to thrombosis of unspecified cerebellar artery	ICD-10-CM	Diagnosis
I63.39	Cerebral infarction due to thrombosis of other cerebral artery	ICD-10-CM	Diagnosis
I63.40	Cerebral infarction due to embolism of unspecified cerebral artery	ICD-10-CM	Diagnosis
I63.411	Cerebral infarction due to embolism of right middle cerebral artery	ICD-10-CM	Diagnosis
I63.412	Cerebral infarction due to embolism of left middle cerebral artery	ICD-10-CM	Diagnosis
I63.413	Cerebral infarction due to embolism of bilateral middle cerebral arteries	ICD-10-CM	Diagnosis
I63.419	Cerebral infarction due to embolism of unspecified middle cerebral artery	ICD-10-CM	Diagnosis
I63.421	Cerebral infarction due to embolism of right anterior cerebral artery	ICD-10-CM	Diagnosis
I63.422	Cerebral infarction due to embolism of left anterior cerebral artery	ICD-10-CM	Diagnosis
I63.423	Cerebral infarction due to embolism of bilateral anterior cerebral arteries	ICD-10-CM	Diagnosis
I63.429	Cerebral infarction due to embolism of unspecified anterior cerebral artery	ICD-10-CM	Diagnosis
I63.431	Cerebral infarction due to embolism of right posterior cerebral artery	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
I63.432	Cerebral infarction due to embolism of left posterior cerebral artery	ICD-10-CM	Diagnosis
I63.433	Cerebral infarction due to embolism of bilateral posterior cerebral arteries	ICD-10-CM	Diagnosis
I63.439	Cerebral infarction due to embolism of unspecified posterior cerebral artery	ICD-10-CM	Diagnosis
I63.441	Cerebral infarction due to embolism of right cerebellar artery	ICD-10-CM	Diagnosis
I63.442	Cerebral infarction due to embolism of left cerebellar artery	ICD-10-CM	Diagnosis
I63.443	Cerebral infarction due to embolism of bilateral cerebellar arteries	ICD-10-CM	Diagnosis
I63.449	Cerebral infarction due to embolism of unspecified cerebellar artery	ICD-10-CM	Diagnosis
I63.49	Cerebral infarction due to embolism of other cerebral artery	ICD-10-CM	Diagnosis
I63.50	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebral artery	ICD-10-CM	Diagnosis
I63.511	Cerebral infarction due to unspecified occlusion or stenosis of right middle cerebral artery	ICD-10-CM	Diagnosis
I63.512	Cerebral infarction due to unspecified occlusion or stenosis of left middle cerebral artery	ICD-10-CM	Diagnosis
I63.513	Cerebral infarction due to unspecified occlusion or stenosis of bilateral middle cerebral arteries	ICD-10-CM	Diagnosis
I63.519	Cerebral infarction due to unspecified occlusion or stenosis of unspecified middle cerebral artery	ICD-10-CM	Diagnosis
I63.521	Cerebral infarction due to unspecified occlusion or stenosis of right anterior cerebral artery	ICD-10-CM	Diagnosis
I63.522	Cerebral infarction due to unspecified occlusion or stenosis of left anterior cerebral artery	ICD-10-CM	Diagnosis
I63.523	Cerebral infarction due to unspecified occlusion or stenosis of bilateral anterior cerebral arteries	ICD-10-CM	Diagnosis
I63.529	Cerebral infarction due to unspecified occlusion or stenosis of unspecified anterior cerebral artery	ICD-10-CM	Diagnosis
I63.531	Cerebral infarction due to unspecified occlusion or stenosis of right posterior cerebral artery	ICD-10-CM	Diagnosis
I63.532	Cerebral infarction due to unspecified occlusion or stenosis of left posterior cerebral artery	ICD-10-CM	Diagnosis
I63.533	Cerebral infarction due to unspecified occlusion or stenosis of bilateral posterior cerebral arteries	ICD-10-CM	Diagnosis
I63.539	Cerebral infarction due to unspecified occlusion or stenosis of unspecified posterior cerebral artery	ICD-10-CM	Diagnosis
I63.541	Cerebral infarction due to unspecified occlusion or stenosis of right cerebellar artery	ICD-10-CM	Diagnosis
I63.542	Cerebral infarction due to unspecified occlusion or stenosis of left cerebellar artery	ICD-10-CM	Diagnosis
I63.543	Cerebral infarction due to unspecified occlusion or stenosis of bilateral cerebellar arteries	ICD-10-CM	Diagnosis
I63.549	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebellar artery	ICD-10-CM	Diagnosis
I63.59	Cerebral infarction due to unspecified occlusion or stenosis of other cerebral artery	ICD-10-CM	Diagnosis
I63.6	Cerebral infarction due to cerebral venous thrombosis, nonpyogenic	ICD-10-CM	Diagnosis
I63.8	Other cerebral infarction	ICD-10-CM	Diagnosis
I63.81	Other cerebral infarction due to occlusion or stenosis of small artery	ICD-10-CM	Diagnosis
I63.89	Other cerebral infarction	ICD-10-CM	Diagnosis
I63.9	Cerebral infarction, unspecified	ICD-10-CM	Diagnosis
I67.841	Reversible cerebrovascular vasoconstriction syndrome	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
I67.848	Other cerebrovascular vasospasm and vasoconstriction	ICD-10-CM	Diagnosis
I67.89	Other cerebrovascular disease	ICD-10-CM	Diagnosis
I97.810	Intraoperative cerebrovascular infarction during cardiac surgery	ICD-10-CM	Diagnosis
I97.811	Intraoperative cerebrovascular infarction during other surgery	ICD-10-CM	Diagnosis
I97.820	Postprocedural cerebrovascular infarction following cardiac surgery	ICD-10-CM	Diagnosis
I97.821	Postprocedural cerebrovascular infarction following other surgery	ICD-10-CM	Diagnosis
	Hepatic Disorders		
K70.0	Alcoholic fatty liver	ICD-10-CM	Diagnosis
K70.10	Alcoholic hepatitis without ascites	ICD-10-CM	Diagnosis
K70.11	Alcoholic hepatitis with ascites	ICD-10-CM	Diagnosis
K70.2	Alcoholic fibrosis and sclerosis of liver	ICD-10-CM	Diagnosis
K70.30	Alcoholic cirrhosis of liver without ascites	ICD-10-CM	Diagnosis
K70.31	Alcoholic cirrhosis of liver with ascites	ICD-10-CM	Diagnosis
K70.40	Alcoholic hepatic failure without coma	ICD-10-CM	Diagnosis
K70.41	Alcoholic hepatic failure with coma	ICD-10-CM	Diagnosis
K70.9	Alcoholic liver disease, unspecified	ICD-10-CM	Diagnosis
K71.0	Toxic liver disease with cholestasis	ICD-10-CM	Diagnosis
K71.11	Toxic liver disease with hepatic necrosis, with coma	ICD-10-CM	Diagnosis
K71.7	Toxic liver disease with fibrosis and cirrhosis of liver	ICD-10-CM	Diagnosis
K71.8	Toxic liver disease with other disorders of liver	ICD-10-CM	Diagnosis
K71.9	Toxic liver disease, unspecified	ICD-10-CM	Diagnosis
K72.00	Acute and subacute hepatic failure without coma	ICD-10-CM	Diagnosis
K72.01	Acute and subacute hepatic failure with coma	ICD-10-CM	Diagnosis
K72.10	Chronic hepatic failure without coma	ICD-10-CM	Diagnosis
K72.11	Chronic hepatic failure with coma	ICD-10-CM	Diagnosis
K72.90	Hepatic failure, unspecified without coma	ICD-10-CM	Diagnosis
K72.91	Hepatic failure, unspecified with coma	ICD-10-CM	Diagnosis
K74.0	Hepatic fibrosis	ICD-10-CM	Diagnosis
K74.00	Hepatic fibrosis, unspecified	ICD-10-CM	Diagnosis
K74.01	Hepatic fibrosis, early fibrosis	ICD-10-CM	Diagnosis
K74.02	Hepatic fibrosis, advanced fibrosis	ICD-10-CM	Diagnosis
K74.1	Hepatic sclerosis	ICD-10-CM	Diagnosis
K74.2	Hepatic fibrosis with hepatic sclerosis	ICD-10-CM	Diagnosis
K74.3	Primary biliary cirrhosis	ICD-10-CM	Diagnosis
K74.4	Secondary biliary cirrhosis	ICD-10-CM	Diagnosis
K74.5	Biliary cirrhosis, unspecified	ICD-10-CM	Diagnosis
K74.60	Unspecified cirrhosis of liver	ICD-10-CM	Diagnosis
K74.69	Other cirrhosis of liver	ICD-10-CM	Diagnosis
K75.0	Abscess of liver	ICD-10-CM	Diagnosis
K75.1	Phlebitis of portal vein	ICD-10-CM	Diagnosis
K75.81	Nonalcoholic steatohepatitis (NASH)	ICD-10-CM	Diagnosis
K75.89	Other specified inflammatory liver diseases	ICD-10-CM	Diagnosis
K75.9	Inflammatory liver disease, unspecified	ICD-10-CM	Diagnosis
K76.0	Fatty (change of) liver, not elsewhere classified	ICD-10-CM	Diagnosis

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Code	Description	Code Type	Code Category
K76.1	Chronic passive congestion of liver	ICD-10-CM	Diagnosis
K76.2	Central hemorrhagic necrosis of liver	ICD-10-CM	Diagnosis
K76.3	Infarction of liver	ICD-10-CM	Diagnosis
K76.5	Hepatic veno-occlusive disease	ICD-10-CM	Diagnosis
K76.6	Portal hypertension	ICD-10-CM	Diagnosis
K76.7	Hepatorenal syndrome	ICD-10-CM	Diagnosis
K76.81	Hepatopulmonary syndrome	ICD-10-CM	Diagnosis
K76.82	Hepatic encephalopathy	ICD-10-CM	Diagnosis
K76.89	Other specified diseases of liver	ICD-10-CM	Diagnosis
K76.9	Liver disease, unspecified	ICD-10-CM	Diagnosis
K77	Liver disorders in diseases classified elsewhere	ICD-10-CM	Diagnosis
K80.30	Calculus of bile duct with cholangitis, unspecified, without obstruction	ICD-10-CM	Diagnosis
K80.31	Calculus of bile duct with cholangitis, unspecified, with obstruction	ICD-10-CM	Diagnosis
K80.32	Calculus of bile duct with acute cholangitis without obstruction	ICD-10-CM	Diagnosis
K80.33	Calculus of bile duct with acute cholangitis with obstruction	ICD-10-CM	Diagnosis
K80.34	Calculus of bile duct with chronic cholangitis without obstruction	ICD-10-CM	Diagnosis
K80.35	Calculus of bile duct with chronic cholangitis with obstruction	ICD-10-CM	Diagnosis
K80.36	Calculus of bile duct with acute and chronic cholangitis without obstruction	ICD-10-CM	Diagnosis
K80.37	Calculus of bile duct with acute and chronic cholangitis with obstruction	ICD-10-CM	Diagnosis
K83.0	Cholangitis	ICD-10-CM	Diagnosis
R16.0	Hepatomegaly, not elsewhere classified	ICD-10-CM	Diagnosis
R16.2	Hepatomegaly with splenomegaly, not elsewhere classified	ICD-10-CM	Diagnosis
Z48.23	Encounter for aftercare following liver transplant	ICD-10-CM	Diagnosis
Z94.4	Liver transplant status	ICD-10-CM	Diagnosis
B15.0	Hepatitis A with hepatic coma	ICD-10-CM	Diagnosis
B15.9	Hepatitis A without hepatic coma	ICD-10-CM	Diagnosis
B16.0	Acute hepatitis B with delta-agent with hepatic coma	ICD-10-CM	Diagnosis
B16.1	Acute hepatitis B with delta-agent without hepatic coma	ICD-10-CM	Diagnosis
B16.2	Acute hepatitis B without delta-agent with hepatic coma	ICD-10-CM	Diagnosis
B16.9	Acute hepatitis B without delta-agent and without hepatic coma	ICD-10-CM	Diagnosis
B17.0	Acute delta-(super) infection of hepatitis B carrier	ICD-10-CM	Diagnosis
B17.10	Acute hepatitis C without hepatic coma	ICD-10-CM	Diagnosis
B17.11	Acute hepatitis C with hepatic coma	ICD-10-CM	Diagnosis
B17.2	Acute hepatitis E	ICD-10-CM	Diagnosis
B17.8	Other specified acute viral hepatitis	ICD-10-CM	Diagnosis
B17.9	Acute viral hepatitis, unspecified	ICD-10-CM	Diagnosis
B18.0	Chronic viral hepatitis B with delta-agent	ICD-10-CM	Diagnosis
B18.1	Chronic viral hepatitis B without delta-agent	ICD-10-CM	Diagnosis
B18.2	Chronic viral hepatitis C	ICD-10-CM	Diagnosis
B18.8	Other chronic viral hepatitis	ICD-10-CM	Diagnosis
B18.9	Chronic viral hepatitis, unspecified	ICD-10-CM	Diagnosis
B19.0	Unspecified viral hepatitis with hepatic coma	ICD-10-CM	Diagnosis
B19.10	Unspecified viral hepatitis B without hepatic coma	ICD-10-CM	Diagnosis
B19.11	Unspecified viral hepatitis B with hepatic coma	ICD-10-CM	Diagnosis

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

Code	Description	Code Type	Code Category
B19.20	Unspecified viral hepatitis C without hepatic coma	ICD-10-CM	Diagnosis
B19.21	Unspecified viral hepatitis C with hepatic coma	ICD-10-CM	Diagnosis
B19.9	Unspecified viral hepatitis without hepatic coma	ICD-10-CM	Diagnosis
Z22.50	Carrier of unspecified viral hepatitis	ICD-10-CM	Diagnosis
Z22.51	Carrier of viral hepatitis B	ICD-10-CM	Diagnosis
Z22.52	Carrier of viral hepatitis C	ICD-10-CM	Diagnosis
Z22.59	Carrier of other viral hepatitis	ICD-10-CM	Diagnosis
06L20ZZ	Occlusion of Gastric Vein, Open Approach	ICD-10-PCS	Procedure
06L23ZZ	Occlusion of Gastric Vein, Percutaneous Approach	ICD-10-PCS	Procedure
06L24ZZ	Occlusion of Gastric Vein, Percutaneous Endoscopic Approach	ICD-10-PCS	Procedure
06L30ZZ	Occlusion of Esophageal Vein, Open Approach	ICD-10-PCS	Procedure
06L33ZZ	Occlusion of Esophageal Vein, Percutaneous Approach	ICD-10-PCS	Procedure
06L34ZZ	Occlusion of Esophageal Vein, Percutaneous Endoscopic Approach	ICD-10-PCS	Procedure
0D9S30Z	Drainage of Greater Omentum with Drainage Device, Percutaneous Approach	ICD-10-PCS	Procedure
0D9S3ZZ	Drainage of Greater Omentum, Percutaneous Approach	ICD-10-PCS	Procedure
0D9S40Z	Drainage of Greater Omentum with Drainage Device, Percutaneous Endoscopic Approach	ICD-10-PCS	Procedure
0D9S4ZZ	Drainage of Greater Omentum, Percutaneous Endoscopic Approach	ICD-10-PCS	Procedure
0D9T30Z	Drainage of Lesser Omentum with Drainage Device, Percutaneous Approach	ICD-10-PCS	Procedure
0D9T3ZZ	Drainage of Lesser Omentum, Percutaneous Approach	ICD-10-PCS	Procedure
0D9T40Z	Drainage of Lesser Omentum with Drainage Device, Percutaneous Endoscopic Approach	ICD-10-PCS	Procedure
0D9T4ZZ	Drainage of Lesser Omentum, Percutaneous Endoscopic Approach	ICD-10-PCS	Procedure
0D9V30Z	Drainage of Mesentery with Drainage Device, Percutaneous Approach	ICD-10-PCS	Procedure
0D9V3ZZ	Drainage of Mesentery, Percutaneous Approach	ICD-10-PCS	Procedure
0D9V40Z	Drainage of Mesentery with Drainage Device, Percutaneous Endoscopic Approach	ICD-10-PCS	Procedure
0D9V4ZZ	Drainage of Mesentery, Percutaneous Endoscopic Approach	ICD-10-PCS	Procedure
0D9W30Z	Drainage of Peritoneum with Drainage Device, Percutaneous Approach	ICD-10-PCS	Procedure
0D9W3ZZ	Drainage of Peritoneum, Percutaneous Approach	ICD-10-PCS	Procedure
0D9W40Z	Drainage of Peritoneum with Drainage Device, Percutaneous Endoscopic Approach	ICD-10-PCS	Procedure
0D9W4ZZ	Drainage of Peritoneum, Percutaneous Endoscopic Approach	ICD-10-PCS	Procedure
0DL57DZ	Occlusion of Esophagus with Intraluminal Device, Via Natural or Artificial Opening	ICD-10-PCS	Procedure
0DL58DZ	Occlusion of Esophagus with Intraluminal Device, Via Natural or Artificial Opening Endoscopic	ICD-10-PCS	Procedure
0W9F30Z	Drainage of Abdominal Wall with Drainage Device, Percutaneous Approach	ICD-10-PCS	Procedure
0W9F3ZZ	Drainage of Abdominal Wall, Percutaneous Approach	ICD-10-PCS	Procedure
0W9F40Z	Drainage of Abdominal Wall with Drainage Device, Percutaneous Endoscopic Approach	ICD-10-PCS	Procedure
0W9F4ZZ	Drainage of Abdominal Wall, Percutaneous Endoscopic Approach	ICD-10-PCS	Procedure
0W9G30Z	Drainage of Peritoneal Cavity with Drainage Device, Percutaneous Approach	ICD-10-PCS	Procedure
0W9G3ZZ	Drainage of Peritoneal Cavity, Percutaneous Approach	ICD-10-PCS	Procedure
0W9G40Z	Drainage of Peritoneal Cavity with Drainage Device, Percutaneous Endoscopic Approach	ICD-10-PCS	Procedure
0W9G4ZZ	Drainage of Peritoneal Cavity, Percutaneous Endoscopic Approach	ICD-10-PCS	Procedure
0W9J30Z	Drainage of Pelvic Cavity with Drainage Device, Percutaneous Approach	ICD-10-PCS	Procedure
0W9J3ZZ	Drainage of Pelvic Cavity, Percutaneous Approach	ICD-10-PCS	Procedure

Appendix G. Generic and Brand Names of Medical Products Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
Prior Antiretroviral Use	
abacavir sulfate	abacavir
abacavir sulfate	Ziagen
abacavir sulfate/dolutegravir sodium/lamivudine	Triumeq
abacavir sulfate/dolutegravir sodium/lamivudine	Triumeq PD
abacavir sulfate/lamivudine	abacavir-lamivudine
abacavir sulfate/lamivudine	Epzicom
abacavir sulfate/lamivudine/zidovudine	Trizivir
abacavir sulfate/lamivudine/zidovudine	abacavir-lamivudine-zidovudine
atazanavir sulfate	Reyataz
atazanavir sulfate	atazanavir
atazanavir sulfate/cobicistat	Evotaz
bictegravir sodium/emtricitabine/tenofovir alafenamide fumar	Biktarvy
cabotegravir	cabotegravir
cabotegravir	Apretude
cabotegravir sodium	Vocabria
cabotegravir/rilpivirine	Cabenuva
darunavir	darunavir
darunavir	Prezista
darunavir eth/cobicistat/emtricitabine/tenofovir alafenamide	Symtuza
darunavir ethanolate/cobicistat	Prezcobix
delavirdine mesylate	Rescriptor
didanosine	Videx 2 gram Pediatric
didanosine	Videx 4 gram Pediatric
didanosine	Videx EC
didanosine	didanosine
dolutegravir sodium	Tivicay
dolutegravir sodium	Tivicay PD
dolutegravir sodium/lamivudine	Dovato
dolutegravir sodium/rilpivirine HCl	Juluca
doravirine	Pifeltro
doravirine/lamivudine/tenofovir disoproxil fumarate	Delstrigo
efavirenz	Sustiva
efavirenz	efavirenz
efavirenz/emtricitabine/tenofovir disoproxil fumarate	efavirenz-emtricitabin-tenofov
efavirenz/emtricitabine/tenofovir disoproxil fumarate	Atripla
efavirenz/lamivudine/tenofovir disoproxil fumarate	efavirenz-lamivu-tenofov disop
efavirenz/lamivudine/tenofovir disoproxil fumarate	Symfi Lo
efavirenz/lamivudine/tenofovir disoproxil fumarate	Symfi
elvitegravir/cobicistat/emtricitabine/tenofovir alafenamide	Genvoya
elvitegravir/cobicistat/emtricitabine/tenofovir disoproxil	Stribild

Appendix G. Generic and Brand Names of Medical Products Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
emtricitabine	Emtriva
emtricitabine	emtricitabine
emtricitabine/rilpivirine HCl/tenofovir alafenamide fumarate	Odefsey
emtricitabine/rilpivirine HCl/tenofovir disoproxil fumarate	Complera
emtricitabine/tenofovir alafenamide fumarate	Descovy
emtricitabine/tenofovir disoproxil fumarate	emtricitabine-tenofovir (TDF)
emtricitabine/tenofovir disoproxil fumarate	Truvada
enfuvirtide	Fuzeon
etravirine	etravirine
etravirine	Intelence
fosamprenavir calcium	fosamprenavir
fosamprenavir calcium	Lexiva
fostemsavir tromethamine	Rukobia
ibalizumab-uiyk	Trogarzo
indinavir sulfate	Crixivan
lamivudine	lamivudine
lamivudine	Epivir
lamivudine/tenofovir disoproxil fumarate	Cimduo
lamivudine/tenofovir disoproxil fumarate	Temixys
lamivudine/zidovudine	lamivudine-zidovudine
lamivudine/zidovudine	Combivir
lenacapavir sodium	Sunlenca
lopinavir/ritonavir	Kaletra
lopinavir/ritonavir	lopinavir-ritonavir
maraviroc	maraviroc
maraviroc	Selzentry
nelfinavir mesylate	Viracept
nevirapine	nevirapine
nevirapine	Viramune
nevirapine	Viramune XR
nirmatrelvir/ritonavir	Paxlovid
ombitasvir/paritaprevir/ritonavir	Technivie
ombitasvir/paritaprevir/ritonavir/dasabuvir sodium	Viekira XR
ombitasvir/paritaprevir/ritonavir/dasabuvir sodium	Viekira Pak
raltegravir potassium	Isentress
raltegravir potassium	Isentress HD
rilpivirine	rilpivirine
rilpivirine HCl	Edurant
ritonavir	ritonavir
ritonavir	Norvir
saquinavir mesylate	Invirase

Appendix G. Generic and Brand Names of Medical Products Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
stavudine	Zerit
stavudine	stavudine
tenofovir disoproxil fumarate	tenofovir disoproxil fumarate
tenofovir disoproxil fumarate	Viread
tipranavir	Aptivus
tipranavir/vitamin E TPGS	Aptivus (with vitamin E)
zidovudine	zidovudine
zidovudine	Retrovir

Appendix H. Specifications for Type 3 Request ID: cder_sir_wp011

The Center for Drug Evaluation and Research (CDER) has requested execution of the Cohort Identification and Descriptive Analysis (CIDA) tool [version 13.2.1] to perform a signal identification analysis assessing the safety profile of BIC/FTC/TAF used to treat HIV in the Sentinel Distributed Database (SDD) using a self-controlled risk interval (SCRI) design.

Query Period: February 8, 2018 to May 31, 2024
Coverage Requirement: Medical & Drug Coverage
Enrollment gap: 45
Restrictions: M/F/A/U
Age groups: 0-11, 12-17, 18-24, 25-34, 35-44, 45-54, 55-64, 65-74, 75+
Stratifications: Prior antiretroviral use, no prior antiretroviral use
Envelope macro: *Reclassify encounters during inpatient stay as inpatient except on IP ADATE (1)
Freeze data: T

Signal Identification Parameters	*Scenario 1*	*Scenario 2*
Group	bik_tree	bik_temp
Description	**BIC/FTC/TAF Tree Analysis**	**BIC/FTC/TAF Tree Temporal Scan Analysis**
Drug/Exposure		
Exposure		
Index Exposure:	BIC/FTC/TAF	BIC/FTC/TAF
Care Setting:	Any	Any
Principal Diagnosis Position:	Any	Any
Pre-Exposure Required Days:	456	400
Post-Exposure Required Days:	28	183
Incidence Criteria:	BIC/FTC/TAF	BIC/FTC/TAF
Care Setting:	Any	Any
Principal Diagnosis Position:	Any	Any
Create Baseline Table?	Yes	Yes
Washout (days):	456	184
Exclude evidence of days supply	No, washout should look for evidence of days supplied	No, washout should look for evidence of days supplied
Cohort Definition:	All valid exposure episodes during query period	All valid exposure episodes during query period
Censoring Criteria:	*Death; *DP end date; *Query end date	*Death; *DP end date; *Query end date
Inclusion/Exclusion Criteria		

Appendix H. Specifications for Type 3 Request ID: cder_sir_wp011		
The Center for Drug Evaluation and Research (CDER) has requested execution of the Cohort Identification and Descriptive Analysis (CIDA) tool [version 13.2.1] to perform a signal identification analysis assessing the safety profile of BIC/FTC/TAF used to treat HIV in the Sentinel Distributed Database (SDD) using a self-controlled risk interval (SCRI) design.		
Pre-existing Conditions:	Exposure to contraindicated drugs (dofetilide, carbamazepine, oxcarbazepine, phenobarbital, phenytoin, Rifabutin, rifampin, Rifapentine, sucralfate)	Exposure to contraindicated drugs (dofetilide, carbamazepine, oxcarbazepine, phenobarbital, phenytoin, Rifabutin, rifampin, Rifapentine, sucralfate)
Care Setting:	Any	Any
Principal Diagnosis Position:	Any	Any
Include/Exclude:	Exclude	Exclude
Evaluation Period:	[-456, 0]	[-400, 0]
Number of Instances Code Should Occur:	1	1
Exclude evidence of days supply if inclusion/exclusion evaluation period includes dispensings	No	No
	OR	OR
Pre-existing Conditions:	Ongoing pregnancy	Ongoing pregnancy
Care Setting:	Any	Any
Principal Diagnosis Position:	Any	Any
Include/Exclude:	Exclude	Exclude
Evaluation Period:	[-183, 28]	[-183, 183]
Number of Instances Code Should Occur:	1	1
Exclude evidence of days supply if inclusion/exclusion evaluation period includes dispensings	No	No
	OR	OR
Pre-existing Conditions:	Pregnancy delivery	Pregnancy delivery
Care Setting:	*Some codes IP, some codes any care setting. See code list.	*Some codes IP, some codes any care setting. See code list.
Principal Diagnosis Position:	Any	Any
Include/Exclude:	Exclude	Exclude
Evaluation Period:	[-56, 28]	[0, 183]
Number of Instances Code Should Occur:	1	1
Exclude evidence of days supply if inclusion/exclusion evaluation period includes dispensings	No	No
	OR	OR
Pre-existing Conditions:	Malignancy	Malignancy
Care Setting:	Any	Any

Appendix H. Specifications for Type 3 Request ID: cder_sir_wp011				
The Center for Drug Evaluation and Research (CDER) has requested execution of the Cohort Identification and Descriptive Analysis (CIDA) tool [version 13.2.1] to perform a signal identification analysis assessing the safety profile of BIC/FTC/TAF used to treat HIV in the Sentinel Distributed Database (SDD) using a self-controlled risk interval (SCRI) design.				
Principal Diagnosis Position:	Any		Any	
Include/Exclude:	Exclude		Exclude	
Evaluation Period:	[-456, 0]		[-400, 0]	
Number of Instances Code Should Occur:	1		1	
Exclude evidence of days supply if inclusion/exclusion evaluation period includes dispensings	No		No	
Outcome				
Risk Window:	[1, 28]	[1, 28]	[1, 183]	[1, 183]
Control Window:	[-56, -29]	[-56, -29]	n/a	n/a
Event:	Treescan	Treescan	Treescan	Treescan
Care Setting:	IP, ED	IP, ED, AV	IP, ED	IP, ED, AV
Principal Diagnosis Position:	Any	Any	Any	Any
Tree Incidence Level	3rd Level	3rd Level	3rd Level	3rd Level
Tree Washout (days):	400	400	400	400
Care Setting:	Any	Any	Any	Any
Principal Diagnosis Position:	Any	Any	Any	Any
TreeScan Software Parameters				
Type of Scan:	Tree Only		Tree-Temporal	
Time Precision:	n/a		n/a	
Conditional Analysis:	Total Cases		Node and Time	
Probability Model:	Bernoulli		n/a	
Monte Carlo Replications	9999		9999	
Tree Level Assessment:	3, 4, 5		3, 4, 5	

[1]Only applicable for Type 3

Appendix H.1. Baseline Characteristics for Type 3 Request ID: cder_sir_wp011

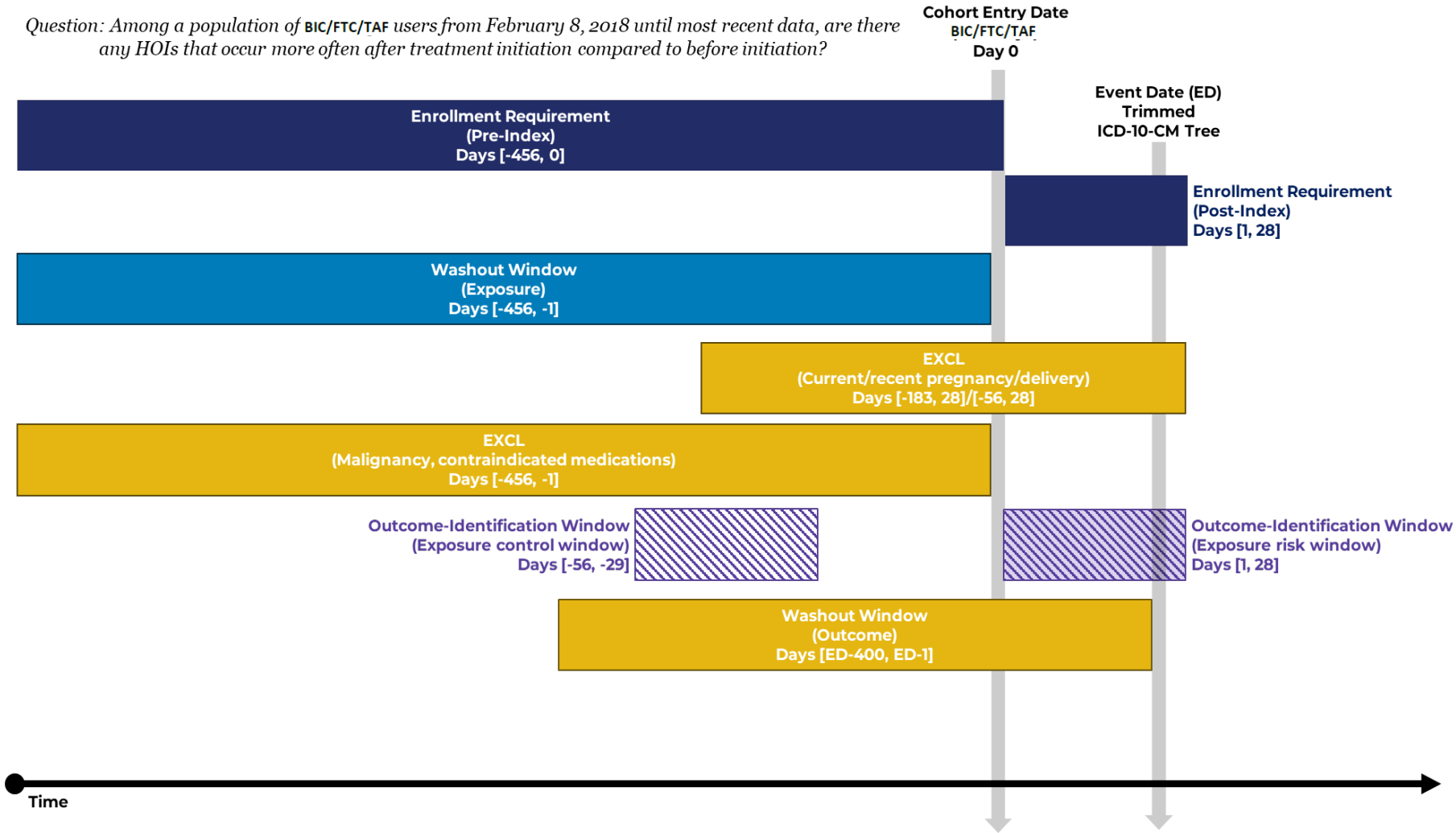
Characteristics									
Covariate Number	TreeScan Strata?	Covariate	Care setting	Principal diagnosis position	Code Category	Evaluation period start	Evaluation period end	Exclude evidence of days supply if characteristic includes dispensings	Number of instances the covariate should be found in evaluation period
HIV									
1	N	Severe HIV Diagnosis	Any	n/a	Diagnosis Code	-400	0	n/a	1
2	N	HIV B20 Diagnoses	Any	n/a	Diagnosis Code	-400	0	n/a	1
3	N	HIV opportunistic infections, original definition	Any	n/a	Diagnosis Code Procedure Code	-400	0	n/a	1
4	N	HIV Severity - HIV associated opportunistic infections and other diseases, original definition (Covar1 or [Covar2 and Covar3])	-	-	-	-	-	-	-
5		HIV opportunistic infections, expanded CDC definition	Any	n/a	Diagnosis Code Procedure Code	-400	0	n/a	1
6		HIV Severity v2 - HIV associated opportunistic infections and other diseases, expanded CDC definition (Covar 1 or [Covar 2 and Covar5)	-	-	-	-	-	-	-
Antiretroviral Use									
7	Y	Prior antiretroviral use	Any	n/a	Drug Code Procedure Code	-400	-1	n/a	1
Combined Comorbidity Score									
n/a	N	Combined Comorbidity Score	Any	n/a	Diagnosis Code	-400	-1	n/a	1
8	N	Acute Myocardial Infarction	Any	n/a	Diagnosis Code	-400	-1	n/a	1
9	N	Alzheimer's Disease	Any	n/a	Diagnosis Code	-400	-1	n/a	1
10	N	Anemia	Any	n/a	Diagnosis Code	-400	-1	n/a	1
11	N	Asthma	Any	n/a	Diagnosis Code	-400	-1	n/a	1
12	N	Atrial Fibrillation or Flutter	Any	n/a	Diagnosis Code	-400	-1	n/a	1
13	N	Benign Prostatic Hyperplasia	Any	n/a	Diagnosis Code	-400	-1	n/a	1
14	N	Breast Cancer	Any	n/a	Diagnosis Code	-400	-1	n/a	1
15	N	Colorectal Cancer	Any	n/a	Diagnosis Code	-400	-1	n/a	1
16	N	Endometrial Cancer	Any	n/a	Diagnosis Code	-400	-1	n/a	1
17	N	Lung Cancer	Any	n/a	Diagnosis Code	-400	-1	n/a	1
18	N	Prostate Cancer	Any	n/a	Diagnosis Code	-400	-1	n/a	1
19	N	Urologic Cancer	Any	n/a	Diagnosis Code	-400	-1	n/a	1
20	N	Cataract	Any	n/a	Diagnosis Code	-400	-1	n/a	1
21	N	Chronic Kidney Disease	Any	n/a	Diagnosis Code	-400	-1	n/a	1
22	N	Chronic Obstructive Pulmonary Disorder	Any	n/a	Diagnosis Code	-400	-1	n/a	1
23	N	Depression, Bipoloar, or Other Mood Disorders	Any	n/a	Diagnosis Code	-400	-1	n/a	1
24	N	Diabetes	Any	n/a	Diagnosis Code	-400	-1	n/a	1
25	N	Glaucoma	Any	n/a	Diagnosis Code	-400	-1	n/a	1
26	N	Heart Failure and Non-Ischemic Heart Disease	Any	n/a	Diagnosis Code	-400	-1	n/a	1
27	N	Hip/Pelvic Fracture	Any	n/a	Diagnosis Code	-400	-1	n/a	1
28	N	Hyperlipidemia	Any	n/a	Diagnosis Code	-400	-1	n/a	1
29	N	Hypertension	Any	n/a	Diagnosis Code	-400	-1	n/a	1
30	N	Hypothyroidism	Any	n/a	Diagnosis Code	-400	-1	n/a	1
31	N	Ischemic Heart Disease	Any	n/a	Diagnosis Code	-400	-1	n/a	1
32	N	Non-Alzheimer's Dementia	Any	n/a	Diagnosis Code	-400	-1	n/a	1
33	N	Osteoporosis	Any	n/a	Diagnosis Code	-400	-1	n/a	1
34	N	Parkinson's Disease and Secondary Parkinsonism	Any	n/a	Diagnosis Code	-400	-1	n/a	1
35	N	Rheumatoid Arthritis/Osteoarthritis	Any	n/a	Diagnosis Code	-400	-1	n/a	1
36	N	Stroke/Transient Ischemic Attack	Any	n/a	Diagnosis Code	-400	-1	n/a	1
37	N	Hepatic Disorders	Any	n/a	Diagnosis Code	-400	-1	n/a	1

N/A: Not applicable

Appendix I. Design Diagram for Self-Controlled Risk Interval Design with Tree-Only Scan

An exposure-indexed self-controlled risk interval design with Tree-Only Scan

Question: Among a population of **BIC/FTC/TAF** *users from February 8, 2018 until most recent data, are there any HOIs that occur more often after treatment initiation compared to before initiation?*



Appendix J. Design Diagram for Self-Controlled Risk Interval Design with Tree-Only Temporal Scan

An exposure-indexed self-controlled risk interval design with Tree-Temporal Scan

Question: Among a population of **BIC/FTC/TAF** *users from February 7, 2018 until most recent data, are there any HOIs that occur more often in certain windows after initiation compared to other windows after initiation?*