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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: arf_mpl2p_wp001

Request ID: arf_mpl2p_wp001

Request Description: In this report, we described risk factors for respiratory failure among patients with chronic obstructive pulmonary disorder (COPD) exacerbation, idiopathic pulmonary fibrosis (IPF), asthma exacerbation, or COVID-19 in the Sentinel Distributed Database (SDD).

Sentinel Routine Querying Module: Cohort Identification and Descriptive Analysis (CIDA) tool, version 10.3.0.

Data Source: We distributed this request to 13 Sentinel Data Partners on March 10, 2022. This report contains data covering two study periods:

- 1.) prior to COVID-19 era (April 1, 2016 through December 31, 2019),
- 2.) COVID-19 era (January 1, 2020 through June 30, 2021).

Please see Appendix A for a list of dates of available data for each Data Partner.

Study Design: We identified individuals aged 18 years or older with hospitalized COPD exacerbation, IPF, asthma exacerbation, or COVID-19 diagnosis and evaluated the occurrence of respiratory failure during the same hospitalization. This is a Type 2 analysis as described in the Query Request Package (QRP) documentation.

Cohort Eligibility Criteria: Four cohorts of interest were identified:

1. **Inpatient COPD exacerbation:** Patients were included in this cohort if they had a COPD exacerbation diagnosis, an inpatient COPD diagnosis in the primary position, or acute respiratory failure diagnosis in the primary position and a COPD diagnosis in any position that occurred during an inpatient encounter.

Patients were required to have had a COPD diagnosis in any care setting in the past year. Patients were further required to have at least 90 days cumulative days' supply of one of the following medications or combination of medications in the past year, and at least one dispensing of one of the following medications or combination of medications in the 60 days prior to index:

- 1) an inhaled corticosteroid (ICS), long-acting beta agonist (LABA), and long-acting muscarinic antagonist (LAMA) combination medication;
- 2) an ICS/LABA combination medication and a LAMA-containing medication; or
- 3) a LABA/LAMA combination medication and an ICS-containing medication.

Patients were excluded if they had a do not resuscitate code in the past year. Finally, patients were required to have had a moderate or severe COPD exacerbation event between 365 days and 31 days prior to index.

Moderate COPD exacerbation episodes were defined as a COPD diagnosis in an outpatient, emergency department, or ambulatory setting, and within seven days, at least one of the following: greater than or equal to 3 days' supply of an oral corticosteroid (OCS), 3 to 15 days' supply of non-azithromycin antibiotics, or 3 to 13 days' supply of azithromycin. The earlier of the diagnosis or dispensing was used to anchor the moderate exacerbation event date.

Severe COPD exacerbation episodes were defined as one of the following diagnoses in an inpatient setting: a primary diagnosis of COPD, any diagnosis of a COPD exacerbation, or a primary acute respiratory failure diagnosis and any COPD diagnosis.

Moderate and severe COPD exacerbation events were built into episodes by bridging events that were 14 days or fewer together. A 14-day extension was then added to the last exacerbation event. If any exacerbation episode had a severe exacerbation within it, the episode was labeled as severe. Please see Appendix B for a list of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) diagnosis and procedure codes used to define exposures in this request. Please see Appendix C for a list of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) diagnosis and procedure codes and Appendix D for a list of generic and brand drug names.

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2. Inpatient IPF diagnosis: Patients were included in this cohort if they had an IPF diagnosis that occurred during an inpatient encounter. Patients were further required to have had an IPF diagnosis in any care setting between 365 days and 31 days prior to index.

3. Inpatient asthma exacerbation:

Patients were included in this cohort if they had an asthma exacerbation diagnosis, asthma diagnosis in the primary position, or acute respiratory failure diagnosis in the primary position and an asthma diagnosis in any position that occurred during an inpatient encounter. Patients were required to have had an asthma diagnosis in any care setting in the past year. Patients were further required to have at least 90 days cumulative days' supply of an ICS-containing medication and a LABA-containing medication in the past year, and at least one dispensing of an ICS-containing medication and a LABA-containing medication in the 60 days prior to index. Patients were excluded if they had a do not resuscitate code in the past year. Finally, patients were required to have had a moderate or severe asthma exacerbation event between 365 days and 31 days prior to index.

Moderate asthma exacerbation episodes were defined as an asthma diagnosis or an asthma exacerbation diagnosis in an outpatient, emergency department, or ambulatory setting, and an OCS dispensing within seven days. The earlier of the diagnosis or dispensing was used to anchor the moderate exacerbation event date.

Severe asthma exacerbation episodes were defined as one of the following diagnoses in an inpatient setting: a primary diagnosis of asthma, any diagnosis of an asthma exacerbation, or a primary acute respiratory failure diagnosis and any asthma diagnosis. Moderate and severe asthma exacerbation events were built into episodes by bridging events that were 14 days or fewer together. A 14-day extension was then added to the last exacerbation event. If any exacerbation episode had a severe exacerbation within it, the episode was labeled as severe.

4. Inpatient COVID-19 diagnosis: Patients were included in this cohort if they had a COVID-19 diagnosis that occurred during an inpatient encounter. Patients were excluded if they had a do not resuscitate code in the past year.

In all four cohorts, patients were required to have no evidence of their respective index-defining criteria in the previous 30 days; cohort re-entry was allowed. We included patients 18 years and older categorized into the following groups based on age at index date: 18-39 years, 40-64 years, and 65+ years.

Outcome of Interest: We defined the outcome of interest as an acute, acute on chronic, or unspecified respiratory failure diagnosis that occurred either in an emergency department or inpatient setting during an inpatient encounter. Patients were further required to have a mechanical ventilation procedure and an intubation procedure in the emergency department or inpatient setting during that same inpatient encounter. Please see Appendix E for a list of ICD-10-CM diagnosis codes and procedure codes and Appendix F for a list of Healthcare Common Procedure Coding System (HCPCS) and Current Procedural Terminology, Fourth Edition (CPT-4) codes used to define outcomes in this request.

Overview for request: arf_mpl2p_wp001

Baseline Characteristics: For all cohorts, we considered the following demographic characteristics on the index date: age, sex, race, and calendar year. We assessed Charlson/Elixhauser combined comorbidity score¹ and health services and drug utilization in the 365 days prior to the index date.

Among the COPD exacerbation cohort, we assessed the following characteristics in the 365 days prior to the index date: smoking; obesity; cachexia; congestive heart failure (CHF); major adverse cardiovascular events (MACE); atrial fibrillation; bronchiectasis; IPF; COPD; asthma; pulmonary hypertension; pulmonary embolism; gastroesophageal reflux disease (GERD); dysphagia; chronic bronchitis; and emphysematous subtype. Prior history of zero, exactly one, and at least two moderate COPD exacerbations; and prior history of zero, exactly one; and at least two severe COPD exacerbations was assessed between 365 days and 31 days prior to index. We additionally assessed for the following medication utilization in the 365 days prior to index: any evidence of days supply of ICS-containing, LABA-containing, or LAMA-containing medications, and at least 14 days of azithromycin or any evidence of roflumilast. The mean and standard deviation of these medications' days supply were calculated within episodes with dispensings that started within the 365-day window, without any stockpiling rules applied. Evidence of opiate and benzodiazepine use in the 30 days prior to index was also assessed.

Among the IPF cohort, we assessed the following characteristics in the 365 days prior to the index date: smoking, obesity, CHF, MACE, atrial fibrillation, bronchiectasis, IPF, COPD, asthma, pulmonary hypertension, pulmonary embolism, GERD, dysphagia, and lung cancer. Evidence of use of immunosuppressants or immunomodulators and nintedanib or pirfenidone during the same time period was assessed. The mean and standard deviation of nintedanib or pirfenidone days supply were calculated within episodes with dispensings that started within the 365-day window, without any stockpiling rules applied. Opiate and benzodiazepine use in the 30 days prior to index was also assessed.

Among the asthma exacerbation cohort, we assessed the following characteristics in the 365 days prior to the index date: smoking; obesity; cachexia; CHF; MACE; atrial fibrillation; bronchiectasis; IPF; COPD; asthma; atopic dermatitis; atopy and food allergy; eosinophilic granulomatosis with polyangiitis; allergic bronchopulmonary aspergillosis; pulmonary hypertension; pulmonary embolism; GERD; dysphagia; vocal cord dysfunction; and bronchial thermoplasty. Prior history of zero; exactly one; and at least two moderate asthma exacerbations; and prior history of zero, exactly one, and at least two severe asthma exacerbations was assessed between 365 days and 31 days prior to index. We additionally assessed for any evidence of days supply of ICS-containing, LABA-containing, LAMA-containing, leukotriene receptor antagonist (LTRA)-containing, or short-acting beta agonist (SABA)-containing medications in the 365 days prior to index. The mean and standard deviation of these medications' days supply were calculated within episodes with dispensings that started within the 365-day window, without any stockpiling rules applied. IL4R or IL5 use and anti-IgE use in the 365 days prior to index was assessed. Evidence of opiate and benzodiazepine use in the 30 days prior to index, and glucocorticoid or oral corticosteroid (OCS) use in the 15 days prior to index was also assessed.

Among the COVID-19 cohort, we assessed the following characteristics in the 365 days prior to the index date: smoking, obesity, CHF, MACE, atrial fibrillation, bronchiectasis, IPF, COPD, asthma, pulmonary hypertension, pulmonary embolism, diabetes, hypertension, interstitial lung diseases, sarcoidosis, stroke or cerebrovascular disease, HIV, cancer, solid organ transplant, bone marrow transplant, pregnancy, tuberculosis, hemodialysis, cirrhosis, sickle cell disease, and cystic fibrosis, evidence of therapeutic anticoagulant use, immunosuppressant or immunomodulator use, and immunostimulant use. Evidence of glucocorticoid or OCS use and monoclonal antibody (mAb) use in the 15 days prior to index was also assessed.

Please see Appendix G for a list of ICD-10-CM diagnosis codes, Appendix H for a list of HCPCS and CPT-4 codes and Appendix I for a list of generic and brand drug names.

Overview for request: arf_mpl2p_wp001

Analysis: Within each cohort, we calculated site-adjusted odds of respiratory failure for all covariates in univariable models. We also generated multivariable adjusted logistic regression models predicting respiratory failure among each cohort, including all covariates evaluated within univariate logistic regression models. Please see Tables 2a through 5d for the complete list of variables included in the univariate and multivariable models. Responses were aggregated using fixed-effect and random-effects meta-analysis.²

Please see Appendices J - J.10 for the specifications of QRP parameters used in this request.

Limitations: Algorithms to define exposures, inclusion, and exclusion criteria are imperfect and may result in misclassification. Therefore, data should be interpreted with this limitation in mind.

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

¹ Gagne JJ, Glynn RJ, Avorn J, Levin R, Schneeweiss S. A combined comorbidity score predicted mortality in elderly patients better than existing scores. *J Clin Epidemiol.* 2011;64(7):749-759

² Hertzmark, E. and Spiegelman, D (2017). The SAS METAANAL Macro [SAS program]. Cambridge, MA: Harvard T.H. Chan School of Public Health. <https://www.hsph.harvard.edu/donna-spiegelman/software/metaanal/>

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

*all terms may not be used in this report

Table 1a. Aggregated Baseline Table for COPD Exacerbation in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among All Data Partners

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Number of episodes	136,309		10,376		125,933	
Number of unique patients	92,253		9,660		86,467	
Demographics	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation
Mean Age (years)	70.7	9.8	68.5	9.5	70.9	9.8
	Number	Percent	Number	Percent	Number	Percent
18-39	197	0.1%	13	0.1%	184	0.1%
40-64	37,813	27.7%	3,669	35.4%	34,144	27.1%
65+	98,299	72.1%	6,694	64.5%	91,605	72.7%
Sex						
Female	55,138	59.8%	5,643	58.4%	51,886	60.0%
Male	37,115	40.2%	4,017	41.6%	34,581	40.0%
Race						
Unknown	7,531	8.2%	729	7.5%	7,098	8.2%
American Indian or Alaska Native	479	0.5%	*****	*****	*****	*****
Asian	1,041	1.1%	136	1.4%	954	1.1%
Black or African American	8,059	8.7%	1,091	11.3%	7,489	8.7%
Native Hawaiian or Other Pacific Islander	76	0.1%	*****	*****	*****	*****
White	75,067	81.4%	7,635	79.0%	70,408	81.4%
Hispanic Origin	975	1.1%	107	1.1%	916	1.1%
Year						
2016	10,869	8.0%	874	8.4%	9,995	7.9%
2017	43,177	31.7%	3,358	32.4%	39,819	31.6%
2018	39,951	29.3%	2,960	28.5%	36,991	29.4%
2019	42,312	31.0%	3,184	30.7%	39,128	31.1%
Health Characteristics:	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation
Charlson/Elixhauser Combined Comorbidity Score ³	5.9	3.5	6.4	3.7	5.8	3.5
	Number	Percent	Number	Percent	Number	Percent
Smoking [-365,-1]	115,284	84.6%	8,944	86.2%	106,340	84.4%
Obesity [-365,-1]	44,153	32.4%	3,628	35.0%	40,525	32.2%
Cachexia [-365,-1] ⁴	5,146	3.8%	491	4.7%	4,655	3.7%
Congestive heart failure (CHF) [-365,-1]	73,009	53.6%	6,128	59.1%	66,881	53.1%

Table 1a. Aggregated Baseline Table for COPD Exacerbation in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among All Data Partners

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
MACE [-365,-1]	10,501	7.7%	1,046	10.1%	9,455	7.5%
Atrial fibrillation [-365,-1]	38,518	28.3%	3,098	29.9%	35,420	28.1%
Bronchiectasis [-365,-1]	10,789	7.9%	752	7.2%	10,037	8.0%
Idiopathic pulmonary fibrosis (IPF) [-365,-1] ⁴	1,044	0.8%	86	0.8%	958	0.8%
Chronic obstructive pulmonary disorder (COPD) [-365,-1]	136,309	100.0%	10,376	100.0%	125,933	100.0%
Asthma [-365,-1]	39,262	28.8%	2,745	26.5%	36,517	29.0%
Pulmonary hypertension [-365,-1]	28,971	21.3%	2,630	25.3%	26,341	20.9%
Pulmonary embolism [-365,-1]	7,479	5.5%	634	6.1%	6,845	5.4%
GERD [-365,-1]	71,600	52.5%	5,357	51.6%	66,243	52.6%
Dysphagia [-365,-1]	20,743	15.2%	1,750	16.9%	18,993	15.1%
Chronic bronchitis [-365,-1]	21,993	16.1%	1,619	15.6%	20,374	16.2%
Emphysematous subtype [-365,-1]	71,655	52.6%	5,473	52.7%	66,182	52.6%
No emphysema, no chronic bronchitis [-365,-1]	55,629	40.8%	4,246	40.9%	51,383	40.8%
Emphysema, no chronic bronchitis [-365,-1]	58,687	43.1%	4,511	43.5%	54,176	43.0%
Chronic bronchitis, no emphysema [-365,-1]	9,025	6.6%	657	6.3%	8,368	6.6%
Both emphysema and chronic bronchitis [-365,-1]	12,968	9.5%	962	9.3%	12,006	9.5%
Prior history of zero moderate COPD exacerbations (-365,-31) ⁴	19,746	14.5%	1,866	18.0%	17,880	14.2%
Prior history of exactly 1 moderate COPD exacerbation (-365,-31) ⁴	37,814	27.7%	2,968	28.6%	34,846	27.7%
Prior history of at least 2 moderate COPD exacerbations (-365,-31) ⁴	78,749	57.8%	5,542	53.4%	73,207	58.1%
Prior history of zero severe COPD exacerbations (-365,-31)	58,402	42.8%	4,042	39.0%	54,360	43.2%
Prior history of exactly 1 severe COPD exacerbation (-365,-31)	41,304	30.3%	3,205	30.9%	38,099	30.3%
Prior history of at least 2 severe COPD exacerbations (-365,-31)	36,603	26.9%	3,129	30.2%	33,474	26.6%
Medication Characteristics:						
Opiates [-30,-1]	48,081	35.3%	3,900	37.6%	44,181	35.1%
Benzodiazepines [-30,-1]	29,715	21.8%	2,347	22.6%	27,368	21.7%
ICS-containing any evidence of days supply [-365,-1] ⁵	136,309	100.0%	10,376	100.0%	125,933	100.0%
LABA-containing any evidence of days supply [-365,-1] ⁵	136,309	100.0%	10,376	100.0%	125,933	100.0%
LAMA-containing any evidence of days supply [-365,-1] ⁵	136,309	100.0%	10,376	100.0%	125,933	100.0%
Azithromycin (at least 14 days) or roflumilast any evidence of days	25,371	18.6%	1,941	18.7%	23,430	18.6%
Mean ICS-containing days supply [-365,-1] ⁶	273.2	93.5	272.9	95.4	273.2	93.4
Mean LABA-containing days supply [-365,-1] ⁶	277.4	94.6	277.9	96.5	277.4	94.5

Table 1a. Aggregated Baseline Table for COPD Exacerbation in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among All Data Partners

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Mean LAMA-containing days supply [-365,-1] ⁶	269.8	85.7	268.2	88.1	270	85.5
365,-1] ⁶	39.4	102.5	40	102.9	39.4	102.5
Health Service Utilization Intensity:						
Mean number of ambulatory encounters	33.7	27.4	33.2	30.1	33.7	27.2
Mean number of emergency room encounters	2.1	3.6	2	3.6	2.1	3.6
Mean number of inpatient hospital encounters	1.7	2	1.9	2.2	1.6	2
Mean number of non-acute institutional encounters	0.3	0.9	0.4	1	0.3	0.9
Mean number of other ambulatory encounters	22.3	28.1	27	33.2	21.9	27.6
Mean number of unique drug classes	18.1	6.6	18.4	6.8	18.1	6.6
Mean number of generics	20.5	8.1	20.9	8.4	20.5	8.1
Mean number of filled prescriptions	103.9	62.1	109.4	66	103.4	61.7

¹All metrics are based on total number of episodes per group, except for sex, race, and hispanic origin which are based on total number of unique patients

²Value represents standard deviation where no % follows the value

³The Charlson/Elixhauser Combined Comorbidity Score is calculated based on comorbidities observed during a requester-defined window around the exposure episode start date (index date).

⁴Not included in risk factor model.

⁵Episodes with any evidence of days supply within the 365 day window, with standard stockpiling rules applied.

⁶Mean and standard deviation are calculated within episodes with dispensings that start within the 365 day window, without any stockpiling rules applied.

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

Table 1b. Aggregated Baseline Table for Idiopathic Pulmonary Fibrosis in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among All Data Partners

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Number of episodes	24,365		1,533		22,832	
Number of unique patients	17,321		1,494		16,288	
Demographics	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation
Mean Age (years)	76.1	9.1	73.1	8.8	76.3	9.1
	Number	Percent	Number	Percent	Number	Percent
18-39	64	0.3%	*****	*****	*****	*****
40-64	2,110	8.7%	*****	*****	*****	*****
65+	22,191	91.1%	1,336	87.1%	20,855	91.3%
Sex						
Female	7,326	42.3%	539	36.1%	6,948	42.7%
Male	9,995	57.7%	955	63.9%	9,340	57.3%
Race						
Unknown	2,174	12.6%	224	15.0%	2,020	12.4%
American Indian or Alaska Native	99	0.6%	*****	*****	*****	*****
Asian	299	1.7%	49	3.3%	265	1.6%
Black or African American	835	4.8%	100	6.7%	770	4.7%
Native Hawaiian or Other Pacific Islander	37	0.2%	*****	*****	*****	*****
White	13,877	80.1%	1,104	73.9%	13,109	80.5%
Hispanic Origin	395	2.3%	43	2.9%	366	2.2%
Year						
2016	1,605	6.6%	112	7.3%	1,493	6.5%
2017	7,100	29.1%	444	29.0%	6,656	29.2%
2018	7,400	30.4%	482	31.4%	6,918	30.3%
2019	8,260	33.9%	495	32.3%	7,765	34.0%
Health Characteristics:	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation
Charlson/Elixhauser Combined Comorbidity Score ³	5.9	3.6	6	3.8	5.9	3.6
	Number	Percent	Number	Percent	Number	Percent
Smoking [-365,-1]	13,171	54.1%	871	56.8%	12,300	53.9%
Obesity [-365,-1]	6,537	26.8%	419	27.3%	6,118	26.8%
Congestive heart failure (CHF) [-365,-1]	14,330	58.8%	896	58.4%	13,434	58.8%
MACE [-365,-1] ⁴	2,107	8.6%	135	8.8%	1,972	8.6%
Atrial fibrillation [-365,-1]	7,843	32.2%	476	31.1%	7,367	32.3%
Bronchiectasis [-365,-1]	6,100	25.0%	427	27.9%	5,673	24.8%
Idiopathic pulmonary fibrosis (IPF) [-365,-1]	24,365	100.0%	1,533	100.0%	22,832	100.0%

Table 1b. Aggregated Baseline Table for Idiopathic Pulmonary Fibrosis in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among All Data Partners

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Chronic obstructive pulmonary disorder (COPD) [-365,-1]	14,162	58.1%	880	57.4%	13,282	58.2%
Asthma [-365,-1]	3,819	15.7%	228	14.9%	3,591	15.7%
Pulmonary hypertension [-365,-1]	9,640	39.6%	647	42.2%	8,993	39.4%
Pulmonary embolism [-365,-1] ⁴	2,006	8.2%	137	8.9%	1,869	8.2%
GERD [-365,-1]	14,507	59.5%	955	62.3%	13,552	59.4%
Dysphagia [-365,-1]	4,340	17.8%	314	20.5%	4,026	17.6%
Lung cancer [-365,-1] ⁴	1,069	4.4%	54	3.5%	1,015	4.4%
Medication Characteristics:						
Opiates [-30,-1]	4,872	20.0%	290	18.9%	4,582	20.1%
Benzodiazepines [-30,-1]	2,906	11.9%	168	11.0%	2,738	12.0%
Immunosuppressants or immunomodulators [-365,-1]	4,504	18.5%	343	22.4%	4,161	18.2%
Glucocorticoids or oral corticosteroids (OCS) [-15,-1]	9,092	37.3%	656	42.8%	8,436	36.9%
Nintedanib or pirfenidone any evidence of days supply [-365,-1] ⁵	9,106	37.4%	631	41.2%	8,475	37.1%
Mean nintedanib or pirfenidone days supply [-365,-1] ⁶	80.3	127.8	86.5	128.8	79.9	127.7
Health Service Utilization Intensity:						
Mean number of ambulatory encounters	38.1	27.3	39.7	26.3	38	27.4
Mean number of emergency room encounters	1.4	2.7	1.3	2.2	1.4	2.7
Mean number of inpatient hospital encounters	1.4	1.9	1.5	2.1	1.4	1.8
Mean number of non-acute institutional encounters	0.3	0.8	0.3	0.9	0.3	0.8
Mean number of other ambulatory encounters	19.5	24.7	20.8	27.1	19.4	24.5
Mean number of unique drug classes	13.9	6.2	14.1	6.3	13.9	6.2
Mean number of generics	15.4	7.3	15.6	7.5	15.4	7.3
Mean number of filled prescriptions	55.6	36.7	55.7	36.2	55.5	36.7

¹All metrics are based on total number of episodes per group, except for sex, race, and hispanic origin which are based on total number of unique patients

²Value represents standard deviation where no % follows the value

³The Charlson/Elixhauser Combined Comorbidity Score is calculated based on comorbidities observed during a requester-defined window around the exposure episode start date (index date).

⁴Not included in risk factor model.

⁵Episodes with any evidence of days supply within the 365 day window, with standard stockpiling rules applied.

⁶Mean and standard deviation are calculated within episodes with dispensings that start within the 365 day window, without any stockpiling rules applied.

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

Table 1c. Aggregated Baseline Table for Asthma Exacerbation in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among All Data Partners

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Number of episodes	33,762		1,784		31,978	
Number of unique patients	26,168		1,689		24,935	
Demographics	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation
Mean Age (years)	66.1	14.8	63.3	15.2	66.3	14.8
	Number	Percent	Number	Percent	Number	Percent
18-39	2,014	6.0%	138	7.7%	1,876	5.9%
40-64	12,276	36.4%	772	43.3%	11,504	36.0%
65+	19,472	57.7%	874	49.0%	18,598	58.2%
Sex						
Female	20,066	76.7%	1,240	73.4%	19,161	76.8%
Male	6,102	23.3%	449	26.6%	5,774	23.2%
Race						
Unknown	4,438	17.0%	253	15.0%	4,255	17.1%
American Indian or Alaska Native	157	0.6%	*****	*****	*****	*****
Asian	916	3.5%	77	4.6%	861	3.5%
Black or African American	5,397	20.6%	453	26.8%	5,102	20.5%
Native Hawaiian or Other Pacific Islander	57	0.2%	*****	*****	*****	*****
White	15,203	58.1%	891	52.8%	14,515	58.2%
Hispanic Origin	1,188	4.5%	74	4.4%	1,134	4.5%
Year						
2016	2,890	8.6%	178	10.0%	2,712	8.5%
2017	10,979	32.5%	588	33.0%	10,391	32.5%
2018	9,954	29.5%	510	28.6%	9,444	29.5%
2019	9,939	29.4%	508	28.5%	9,431	29.5%
Health Characteristics:	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation
Charlson/Elixhauser Combined Comorbidity Score ³	5.1	3.3	6.2	3.6	5	3.3
	Number	Percent	Number	Percent	Number	Percent
Smoking [-365,-1]	15,784	46.8%	958	53.7%	14,826	46.4%
Obesity [-365,-1]	17,781	52.7%	975	54.7%	16,806	52.6%
Congestive heart failure (CHF) [-365,-1]	15,515	46.0%	997	55.9%	14,518	45.4%
MACE [-365,-1] ⁴	1,835	5.4%	159	8.9%	1,676	5.2%
Atrial fibrillation [-365,-1]	7,195	21.3%	441	24.7%	6,754	21.1%
Bronchiectasis [-365,-1]	2,889	8.6%	155	8.7%	2,734	8.5%
Chronic obstructive pulmonary disorder (COPD) [-365,-1]	21,803	64.6%	1,281	71.8%	20,522	64.2%

Table 1c. Aggregated Baseline Table for Asthma Exacerbation in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among All Data Partners

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Asthma [-365,-1]	33,762	100.0%	1,784	100.0%	31,978	100.0%
Atopic dermatitis [-365,-1] ⁴	444	1.3%	12	0.7%	432	1.4%
Atopy and food allergy [-365,-1] ⁴	2,552	7.6%	157	8.8%	2,395	7.5%
Eosinophilic granulomatosis with polyangiitis [-365,-1] ⁴	90	0.3%	*****	*****	*****	*****
Allergic bronchopulmonary aspergillosis [-365,-1] ⁴	354	1.0%	21	1.2%	333	1.0%
Pulmonary hypertension [-365,-1] ⁴	5,104	15.1%	369	20.7%	4,735	14.8%
Pulmonary embolism [-365,-1] ⁴	2,082	6.2%	142	8.0%	1,940	6.1%
GERD [-365,-1]	20,149	59.7%	1,077	60.4%	19,072	59.6%
Dysphagia [-365,-1]	4,736	14.0%	342	19.2%	4,394	13.7%
Vocal cord dysfunction [-365,-1] ⁴	1,279	3.8%	89	5.0%	1,190	3.7%
Bronchial thermoplasty [-365,-1] ⁴	116	0.3%	*****	*****	*****	*****
Prior history of zero moderate asthma exacerbations (-365,-31) ⁴	4,688	13.9%	371	20.8%	4,317	13.5%
Prior history of exactly 1 moderate asthma exacerbation (-365,-31) ⁴	11,645	34.5%	582	32.6%	11,063	34.6%
Prior history of at least 2 moderate asthma exacerbations (-365,-31) ⁴	17,429	51.6%	831	46.6%	16,598	51.9%
Prior history of zero severe asthma exacerbations (-365,-31)	19,184	56.8%	881	49.4%	18,303	57.2%
Prior history of exactly 1 severe asthma exacerbation (-365,-31)	8,781	26.0%	534	29.9%	8,247	25.8%
Prior history of at least 2 severe asthma exacerbations (-365,-31)	5,797	17.2%	369	20.7%	5,428	17.0%
Medication Characteristics:						
IL4R or IL5 [-365,-1]	426	1.3%	23	1.3%	403	1.3%
Anti-IgE [-365,-1]	545	1.6%	23	1.3%	522	1.6%
Opiates [-30,-1]	10,231	30.3%	594	33.3%	9,637	30.1%
Benzodiazepines [-30,-1]	5,597	16.6%	332	18.6%	5,265	16.5%
Glucocorticoids or oral corticosteroids (OCS) [-15,-1]	14,917	44.2%	712	39.9%	14,205	44.4%
ICS-containing any evidence of days supply [-365,-1] ⁵	33,762	100.0%	1,784	100.0%	31,978	100.0%
LABA-containing any evidence of days supply [-365,-1] ⁵	33,762	100.0%	1,784	100.0%	31,978	100.0%
LAMA-containing any evidence of days supply [-365,-1] ⁵	12,083	35.8%	694	38.9%	11,389	35.6%
LTRA-containing any evidence of days supply [-365,-1] ⁵	21,248	62.9%	1,062	59.5%	20,186	63.1%
SABA-containing any evidence of days supply [-365,-1] ⁵	29,444	87.2%	1,598	89.6%	27,846	87.1%
Mean ICS-containing days supply [-365,-1] ⁶	252.7	107.5	251.5	109.6	252.8	107.4
Mean LABA-containing days supply [-365,-1] ⁶	242.8	96.3	242.5	98.3	242.8	96.2
Mean LAMA-containing days supply [-365,-1] ⁶	64.3	112.1	71.7	118.5	63.9	111.7
Mean LTRA-containing days supply [-365,-1] ⁶	151.4	145.7	142.8	143.3	151.8	145.8
Mean SABA-containing days supply [-365,-1] ⁶	144.2	140.1	165.6	150.3	143	139.4

Table 1c. Aggregated Baseline Table for Asthma Exacerbation in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among All Data Partners

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Health Service Utilization Intensity:						
Mean number of ambulatory encounters	39.2	31.2	40.3	37	39.1	30.9
Mean number of emergency room encounters	2.9	5.6	3.3	5.7	2.9	5.5
Mean number of inpatient hospital encounters	1.8	2.5	2.4	2.7	1.7	2.4
Mean number of non-acute institutional encounters	0.2	0.8	0.4	1.1	0.2	0.8
Mean number of other ambulatory encounters	20.3	27.1	28.5	34.2	19.8	26.5
Mean number of unique drug classes	18.7	7.2	19.4	7.3	18.7	7.2
Mean number of generics	21.5	8.9	22.4	9.1	21.4	8.9
Mean number of filled prescriptions	95.7	59.6	103.1	61	95.3	59.5

¹All metrics are based on total number of episodes per group, except for sex, race, and hispanic origin which are based on total number of unique patients

²Value represents standard deviation where no % follows the value

³The Charlson/Elixhauser Combined Comorbidity Score is calculated based on comorbidities observed during a requester-defined window around the exposure episode start date (index date).

⁴Not included in risk factor model.

⁵Episodes with any evidence of days supply within the 365 day window, with standard stockpiling rules applied.

⁶Mean and standard deviation are calculated within episodes with dispensings that start within the 365 day window, without any stockpiling rules applied.

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

Table 1d. Aggregated Baseline Table for COVID-19 in the Sentinel Distributed Database (SDD) between January 1, 2020 and June 30, 2021, Among All Data Partners

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Number of episodes	666,044		86,041		580,003	
Number of unique patients	651,849		85,429		568,660	
Demographics	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation
Mean Age (years)	72.7	12.8	71.4	10.9	72.9	13
	Number	Percent	Number	Percent	Number	Percent
18-39	19,290	2.9%	1,296	1.5%	17,994	3.1%
40-64	125,532	18.8%	17,481	20.3%	108,051	18.6%
65+	521,222	78.3%	67,264	78.2%	453,958	78.3%
Sex						
Female	330,320	50.7%	36,423	42.6%	294,863	51.9%
Male	321,529	49.3%	49,006	57.4%	273,797	48.1%
Race						
Unknown	122,994	18.9%	15,803	18.5%	107,739	18.9%
American Indian or Alaska Native	5,570	0.9%	976	1.1%	4,611	0.8%
Asian	13,755	2.1%	2,509	2.9%	11,302	2.0%
Black or African American	95,301	14.6%	15,993	18.7%	79,798	14.0%
Native Hawaiian or Other Pacific Islander	1,317	0.2%	231	0.3%	1,093	0.2%
White	412,912	63.3%	49,917	58.4%	364,117	64.0%
Hispanic Origin	28,868	4.4%	5,490	6.4%	23,514	4.1%
Year						
2020	446,087	67.0%	62,381	72.5%	383,706	66.2%
2021	219,957	33.0%	23,660	27.5%	196,297	33.8%
Health Characteristics:	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation
Charlson/Elixhauser Combined Comorbidity Score ³	4.2	3.8	4.5	3.9	4.2	3.7
	Number	Percent	Number	Percent	Number	Percent
Smoking [-365,-1]	204,398	30.7%	28,449	33.1%	175,949	30.3%
Obesity [-365,-1]	223,419	33.5%	34,462	40.1%	188,957	32.6%
Congestive heart failure (CHF) [-365,-1]	224,967	33.8%	32,035	37.2%	192,932	33.3%
MACE [-365,-1]	36,976	5.6%	5,612	6.5%	31,364	5.4%
Atrial fibrillation [-365,-1]	139,660	21.0%	17,762	20.6%	121,898	21.0%
Bronchiectasis [-365,-1] ⁴	10,142	1.5%	1,434	1.7%	8,708	1.5%
Idiopathic pulmonary fibrosis (IPF) [-365,-1] ⁴	2,017	0.3%	386	0.4%	1,631	0.3%
Chronic obstructive pulmonary disorder (COPD) [-365,-1]	160,544	24.1%	22,431	26.1%	138,113	23.8%
Asthma [-365,-1]	74,926	11.2%	10,396	12.1%	64,530	11.1%
Pulmonary hypertension [-365,-1]	47,038	7.1%	6,919	8.0%	40,119	6.9%
Pulmonary embolism [-365,-1]	19,525	2.9%	2,590	3.0%	16,935	2.9%

Table 1d. Aggregated Baseline Table for COVID-19 in the Sentinel Distributed Database (SDD) between January 1, 2020 and June 30, 2021, Among All Data Partners

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Diabetes [-365,-1]	324,672	48.7%	48,975	56.9%	275,697	47.5%
Hypertension [-365,-1]	547,997	82.3%	73,454	85.4%	474,543	81.8%
Interstitial lung diseases [-365,-1]	14,318	2.1%	2,532	2.9%	11,786	2.0%
Sarcoidosis [-365,-1] ⁴	3,241	0.5%	527	0.6%	2,714	0.5%
Stroke or cerebrovascular disease [-365,-1]	238,485	35.8%	33,348	38.8%	205,137	35.4%
HIV [-365,-1] ⁴	4,340	0.7%	712	0.8%	3,628	0.6%
Cancer [-365,-1]	212,178	31.9%	27,419	31.9%	184,759	31.9%
Solid organ transplant [-365,-1] ⁴	3,153	0.5%	659	0.8%	2,494	0.4%
Bone marrow transplant [-365,-1]	1,707	0.3%	285	0.3%	1,422	0.2%
Pregnancy [-365,-1]	17,245	2.6%	1,929	2.2%	15,316	2.6%
Tuberculosis [-365,-1] ⁴	1,642	0.2%	276	0.3%	1,366	0.2%
Hemodialysis [-365,-1]	41,763	6.3%	7,404	8.6%	34,359	5.9%
Cirrhosis [-365,-1]	15,825	2.4%	2,852	3.3%	12,973	2.2%
Sickle cell disease [-365,-1] ⁴	1,114	0.2%	116	0.1%	998	0.2%
Cystic fibrosis [-365,-1] ⁴	249	0.0%	37	0.0%	212	0.0%
Covid-19 [-365,-31]	45,571	6.8%	5,079	5.9%	40,492	7.0%
Medication Characteristics:						
Therapeutic anticoagulants [-365,-1]	123,904	18.6%	15,862	18.4%	108,042	18.6%
Immunosuppressants or immunomodulators [-365,-1]	61,498	9.2%	9,154	10.6%	52,344	9.0%
Immunostimulants [-365,-1]	4,778	0.7%	674	0.8%	4,104	0.7%
Glucocorticoids or oral corticosteroids (OCS) [-15,-1]	104,696	15.7%	15,589	18.1%	89,107	15.4%
Monoclonal antibodies (mAbs) [-15,-1]	4,584	0.7%	317	0.4%	4,267	0.7%
Health Service Utilization Intensity:						
Mean number of ambulatory encounters	29.1	40	32.2	44.8	28.6	39.2
Mean number of emergency room encounters	1.2	2.9	1.1	2.7	1.2	2.9
Mean number of inpatient hospital encounters	0.6	1.4	0.7	1.5	0.6	1.4
Mean number of non-acute institutional encounters	0.3	0.9	0.3	1.1	0.3	0.9
Mean number of other ambulatory encounters	19.6	33.4	21.2	36	19.3	33
Mean number of unique drug classes	11	6.3	11.8	6.6	10.8	6.2
Mean number of generics	12	7.3	13	7.7	11.9	7.2
Mean number of filled prescriptions	53.5	52.1	57.8	55.6	52.9	51.6

¹All metrics are based on total number of episodes per group, except for sex, race, and hispanic origin which are based on total number of unique patients

²Value represents standard deviation where no % follows the value

³The Charlson/Elixhauser Combined Comorbidity Score is calculated based on comorbidities observed during a requester-defined window around the exposure episode start date (index date).

⁴Not included in risk factor model.

Table 1e. Aggregated Baseline Table for COPD Exacerbation in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among Data Partners Included in Model (N=5)

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Number of episodes	134,226		10,243		123,983	
Number of unique patients	90,679		9,532		84,981	
Demographics	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation
Mean Age (years)	70.7	9.8	68.5	9.5	70.9	9.8
	Number	Percent	Number	Percent	Number	Percent
18-39	196	0.1%	13	0.1%	183	0.1%
40-64	37,181	27.7%	3,619	35.3%	33,562	27.1%
65+	96,849	72.2%	6,611	64.5%	90,238	72.8%
Sex						
Female	54,300	59.9%	5,584	58.6%	51,087	60.1%
Male	36,379	40.1%	3,948	41.4%	33,894	39.9%
Race						
Unknown	7,350	8.1%	713	7.5%	6,928	8.2%
American Indian or Alaska Native	463	0.5%	*****	*****	*****	*****
Asian	994	1.1%	129	1.4%	912	1.1%
Black or African American	7,893	8.7%	1,069	11.2%	7,337	8.6%
Native Hawaiian or Other Pacific Islander	49	0.1%	*****	*****	*****	*****
White	73,930	81.5%	7,556	79.3%	69,327	81.6%
Hispanic Origin	935	1.0%	104	1.1%	878	1.0%
Year						
2016	10,716	8.0%	867	8.5%	9,849	7.9%
2017	42,565	31.7%	3,323	32.4%	39,242	31.7%
2018	39,281	29.3%	2,909	28.4%	36,372	29.3%
2019	41,664	31.0%	3,144	30.7%	38,520	31.1%
Health Characteristics:	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation
Charlson/Elixhauser Combined Comorbidity Score ³	5.9	3.5	6.4	3.7	5.8	3.5
	Number	Percent	Number	Percent	Number	Percent
Smoking [-365,-1]	113,623	84.7%	8,842	86.3%	104,781	84.5%
Obesity [-365,-1]	43,573	32.5%	3,597	35.1%	39,976	32.2%
Cachexia [-365,-1] ⁴	5,082	3.8%	490	4.8%	4,592	3.7%
Congestive heart failure (CHF) [-365,-1]	72,196	53.8%	6,065	59.2%	66,131	53.3%
MACE [-365,-1]	10,387	7.7%	1,035	10.1%	9,352	7.5%
Atrial fibrillation [-365,-1]	37,990	28.3%	3,056	29.8%	34,934	28.2%
Bronchiectasis [-365,-1]	10,618	7.9%	739	7.2%	9,879	8.0%

Table 1e. Aggregated Baseline Table for COPD Exacerbation in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among Data Partners Included in Model (N=5)

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Idiopathic pulmonary fibrosis (IPF) [-365,-1] ⁴	1,038	0.8%	86	0.8%	952	0.8%
Chronic obstructive pulmonary disorder (COPD) [-365,-1]	134,226	100.0%	10,243	100.0%	123,983	100.0%
Asthma [-365,-1]	38,709	28.8%	2,720	26.6%	35,989	29.0%
Pulmonary hypertension [-365,-1]	28,565	21.3%	2,593	25.3%	25,972	20.9%
Pulmonary embolism [-365,-1]	7,377	5.5%	632	6.2%	6,745	5.4%
GERD [-365,-1]	70,776	52.7%	5,316	51.9%	65,460	52.8%
Dysphagia [-365,-1]	20,524	15.3%	1,739	17.0%	18,785	15.2%
Chronic bronchitis [-365,-1]	21,743	16.2%	1,601	15.6%	20,142	16.2%
Emphysematous subtype [-365,-1]	70,833	52.8%	5,412	52.8%	65,421	52.8%
No emphysema, no chronic bronchitis [-365,-1]	54,484	40.6%	4,181	40.8%	50,303	40.6%
Emphysema, no chronic bronchitis [-365,-1]	57,999	43.2%	4,461	43.6%	53,538	43.2%
Chronic bronchitis, no emphysema [-365,-1]	8,909	6.6%	650	6.3%	8,259	6.7%
Both emphysema and chronic bronchitis [-365,-1]	12,834	9.6%	951	9.3%	11,883	9.6%
Prior history of zero moderate COPD exacerbations (-365,-31) ⁴	19,517	14.5%	1,847	18.0%	17,670	14.3%
Prior history of exactly 1 moderate COPD exacerbation (-365,-31) ⁴	37,181	27.7%	2,920	28.5%	34,261	27.6%
Prior history of at least 2 moderate COPD exacerbations (-365,-31) ⁴	77,528	57.8%	5,476	53.5%	72,052	58.1%
Prior history of zero severe COPD exacerbations (-365,-31)	57,281	42.7%	3,971	38.8%	53,310	43.0%
Prior history of exactly 1 severe COPD exacerbation (-365,-31)	40,736	30.3%	3,167	30.9%	37,569	30.3%
Prior history of at least 2 severe COPD exacerbations (-365,-31)	36,209	27.0%	3,105	30.3%	33,104	26.7%
Medication Characteristics:						
Opiates [-30,-1]	47,510	35.4%	3,865	37.7%	43,645	35.2%
Benzodiazepines [-30,-1]	29,505	22.0%	2,329	22.7%	27,176	21.9%
ICS-containing any evidence of days supply [-365,-1] ⁵	134,226	100.0%	10,243	100.0%	123,983	100.0%
LABA-containing any evidence of days supply [-365,-1] ⁵	134,226	100.0%	10,243	100.0%	123,983	100.0%
LAMA-containing any evidence of days supply [-365,-1] ⁵	134,226	100.0%	10,243	100.0%	123,983	100.0%
Azithromycin (at least 14 days) or roflumilast any evidence of days	25,066	18.7%	1,929	18.8%	23,137	18.7%
Mean ICS-containing days supply [-365,-1] ⁶	273.2	93.5	272.9	95.3	273.3	93.3
Mean LABA-containing days supply [-365,-1] ⁶	277.6	94.7	278.1	96.5	277.5	94.5
Mean LAMA-containing days supply [-365,-1] ⁶	269.9	85.7	268	88.1	270	85.5
Mean azithromycin (at least 14 days) or roflumilast days supply [-365,-1] ⁶	39.6	102.8	40.2	103.2	39.5	102.7
Health Service Utilization Intensity:						
Mean number of ambulatory encounters	33.8	27.5	33.3	30.2	33.8	27.3

Table 1e. Aggregated Baseline Table for COPD Exacerbation in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among Data Partners Included in Model (N=5)

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Mean number of emergency room encounters	2.1	3.6	2	3.6	2.1	3.6
Mean number of inpatient hospital encounters	1.7	2	1.9	2.2	1.6	2
Mean number of non-acute institutional encounters	0.3	0.8	0.4	1	0.3	0.8
Mean number of other ambulatory encounters	22.1	28.1	27	33.3	21.7	27.6
Mean number of unique drug classes	18.1	6.6	18.4	6.8	18.1	6.6
Mean number of generics	20.6	8.1	20.9	8.5	20.5	8.1
Mean number of filled prescriptions	104.2	62.3	109.8	66.1	103.8	61.9

¹All metrics are based on total number of episodes per group, except for sex, race, and hispanic origin which are based on total number of unique patients

²Value represents standard deviation where no % follows the value

³The Charlson/Elixhauser Combined Comorbidity Score is calculated based on comorbidities observed during a requester-defined window around the exposure episode start date (index date).

⁴Not included in risk factor model.

⁵Episodes with any evidence of days supply within the 365 day window, with standard stockpiling rules applied.

⁶Mean and standard deviation are calculated within episodes with dispensings that start within the 365 day window, without any stockpiling rules applied.

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

Table 1f. Aggregated Baseline Table for Idiopathic Pulmonary Fibrosis (IPF) in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among Data Partners Included in Model (N=4)

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Number of episodes	23,828		1,505		22,323	
Number of unique patients	16,940		1,469		15,923	
Demographics	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation
Mean Age (years)	76.2	9.1	73.2	8.8	76.4	9.1
	Number	Percent	Number	Percent	Number	Percent
18-39	61	0.3%	*****	*****	*****	*****
40-64	2,034	8.5%	*****	*****	*****	*****
65+	21,733	91.2%	1,315	87.4%	20,418	91.5%
Sex						
Female	7,203	42.5%	535	36.4%	6,827	42.9%
Male	9,737	57.5%	934	63.6%	9,096	57.1%
Race						
Unknown	2,101	12.4%	220	15.0%	1,950	12.2%
American Indian or Alaska Native	95	0.6%	*****	*****	*****	*****
Asian	277	1.6%	48	3.3%	244	1.5%
Black or African American	822	4.9%	98	6.7%	757	4.8%
Native Hawaiian or Other Pacific Islander	33	0.2%	*****	*****	*****	*****
White	13,612	80.4%	1,087	74.0%	12,855	80.7%
Hispanic Origin	368	2.2%	41	2.8%	341	2.1%
Year						
2016	1,566	6.6%	111	7.4%	1,455	6.5%
2017	6,936	29.1%	435	28.9%	6,501	29.1%
2018	7,223	30.3%	473	31.4%	6,750	30.2%
2019	8,103	34.0%	486	32.3%	7,617	34.1%
Health Characteristics:	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation
Charlson/Elixhauser Combined Comorbidity Score ³	5.9	3.6	6	3.8	5.9	3.6
	Number	Percent	Number	Percent	Number	Percent
Smoking [-365,-1]	12,891	54.1%	854	56.7%	12,037	53.9%
Obesity [-365,-1]	6,411	26.9%	413	27.4%	5,998	26.9%
Congestive heart failure (CHF) [-365,-1]	14,064	59.0%	880	58.5%	13,184	59.1%
MACE [-365,-1] ⁴	2,068	8.7%	135	9.0%	1,933	8.7%
Atrial fibrillation [-365,-1]	7,693	32.3%	465	30.9%	7,228	32.4%
Bronchiectasis [-365,-1]	5,995	25.2%	421	28.0%	5,574	25.0%
Idiopathic pulmonary fibrosis (IPF) [-365,-1]	23,828	100.0%	1,505	100.0%	22,323	100.0%

Table 1f. Aggregated Baseline Table for Idiopathic Pulmonary Fibrosis (IPF) in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among Data Partners Included in Model (N=4)

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Chronic obstructive pulmonary disorder (COPD) [-365,-1]	13,944	58.5%	868	57.7%	13,076	58.6%
Asthma [-365,-1]	3,756	15.8%	223	14.8%	3,533	15.8%
Pulmonary hypertension [-365,-1]	9,444	39.6%	639	42.5%	8,805	39.4%
Pulmonary embolism [-365,-1] ⁴	1,971	8.3%	136	9.0%	1,835	8.2%
GERD [-365,-1]	14,213	59.6%	943	62.7%	13,270	59.4%
Dysphagia [-365,-1]	4,277	17.9%	304	20.2%	3,973	17.8%
Lung cancer [-365,-1] ⁴	1,050	4.4%	53	3.5%	997	4.5%
Medication Characteristics:						
Opiates [-30,-1]	4,767	20.0%	287	19.1%	4,480	20.1%
Benzodiazepines [-30,-1]	2,873	12.1%	166	11.0%	2,707	12.1%
Immunosuppressants or immunomodulators [-365,-1]	4,406	18.5%	336	22.3%	4,070	18.2%
Glucocorticoids or oral corticosteroids (OCS) [-15,-1]	8,913	37.4%	642	42.7%	8,271	37.1%
Nintedanib or pirfenidone any evidence of days supply [-365,-1] ⁵	8,922	37.4%	619	41.1%	8,303	37.2%
Mean nintedanib or pirfenidone days supply [-365,-1] ⁶	80.5	127.8	86.6	128.7	80	127.7
Health Service Utilization Intensity:						
Mean number of ambulatory encounters	38.2	27.1	39.9	26.4	38.1	27.2
Mean number of emergency room encounters	1.4	2.6	1.2	2.2	1.4	2.7
Mean number of inpatient hospital encounters	1.4	1.9	1.5	2.1	1.4	1.8
Mean number of non-acute institutional encounters	0.3	0.8	0.3	0.9	0.3	0.8
Mean number of other ambulatory encounters	19.2	24.7	20.7	27.2	19.1	24.5
Mean number of unique drug classes	14	6.2	14.2	6.3	14	6.2
Mean number of generics	15.4	7.3	15.6	7.5	15.4	7.3
Mean number of filled prescriptions	55.7	36.8	55.9	36.2	55.7	36.8

¹All metrics are based on total number of episodes per group, except for sex, race, and hispanic origin which are based on total number of unique patients

²Value represents standard deviation where no % follows the value

³The Charlson/Elixhauser Combined Comorbidity Score is calculated based on comorbidities observed during a requester-defined window around the exposure episode start date (index date).

⁴Not included in risk factor model.

⁵Episodes with any evidence of days supply within the 365 day window, with standard stockpiling rules applied.

⁶Mean and standard deviation are calculated within episodes with dispensings that start within the 365 day window, without any stockpiling rules applied.

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

Table 1g. Aggregated Baseline Table for Asthma Exacerbation in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among Data Partners Included in Model (N=2)

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Number of episodes	29,427		1,554		27,873	
Number of unique patients	22,604		1,472		21,537	
Demographics	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation
Mean Age (years)	66.6	14.9	63.5	15.5	66.7	14.9
	Number	Percent	Number	Percent	Number	Percent
18-39	1,647	5.6%	120	7.7%	1,527	5.5%
40-64	10,377	35.3%	662	42.6%	9,715	34.9%
65+	17,403	59.1%	772	49.7%	16,631	59.7%
Sex						
Female	17,435	77.1%	1,091	74.1%	16,644	77.3%
Male	5,169	22.9%	381	25.9%	4,893	22.7%
Race						
Unknown	3,786	16.7%	219	14.9%	3,624	16.8%
American Indian or Alaska Native	135	0.6%	*****	*****	*****	*****
Asian	821	3.6%	*****	*****	*****	*****
Black or African American	4,572	20.2%	390	26.5%	4,321	20.1%
Native Hawaiian or Other Pacific Islander	0	0.0%	0	0.0%	0	0.0%
White	13,290	58.8%	781	53.1%	12,694	58.9%
Hispanic Origin	1,039	4.6%	70	4.8%	989	4.6%
Year						
2016	2,555	8.7%	164	10.6%	2,391	8.6%
2017	9,718	33.0%	542	34.9%	9,176	32.9%
2018	8,615	29.3%	424	27.3%	8,191	29.4%
2019	8,539	29.0%	424	27.3%	8,115	29.1%
Health Characteristics:	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation
Charlson/Elixhauser Combined Comorbidity Score ³	5.2	3.4	6.3	3.7	5.1	3.3
	Number	Percent	Number	Percent	Number	Percent
Smoking [-365,-1]	13,936	47.4%	839	54.0%	13,097	47.0%
Obesity [-365,-1]	15,446	52.5%	849	54.6%	14,597	52.4%
Congestive heart failure (CHF) [-365,-1]	13,900	47.2%	897	57.7%	13,003	46.7%
MACE [-365,-1] ⁴	1,661	5.6%	144	9.3%	1,517	5.4%
Atrial fibrillation [-365,-1]	6,419	21.8%	388	25.0%	6,031	21.6%
Bronchiectasis [-365,-1]	2,493	8.5%	129	8.3%	2,364	8.5%
Chronic obstructive pulmonary disorder (COPD) [-365,-1]	19,293	65.6%	1,119	72.0%	18,174	65.2%

Table 1g. Aggregated Baseline Table for Asthma Exacerbation in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among Data Partners Included in Model (N=2)

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Asthma [-365,-1]	29,427	100.0%	1,554	100.0%	27,873	100.0%
Atopic dermatitis [-365,-1] ⁴	391	1.3%	12	0.8%	379	1.4%
Atopy and food allergy [-365,-1] ⁴	2,332	7.9%	145	9.3%	2,187	7.8%
Eosinophilic granulomatosis with polyangiitis [-365,-1] ⁴	78	0.3%	*****	*****	*****	*****
Allergic bronchopulmonary aspergillosis [-365,-1] ⁴	317	1.1%	20	1.3%	297	1.1%
Pulmonary hypertension [-365,-1] ⁴	4,517	15.3%	321	20.7%	4,196	15.1%
Pulmonary embolism [-365,-1] ⁴	1,852	6.3%	126	8.1%	1,726	6.2%
GERD [-365,-1]	17,816	60.5%	955	61.5%	16,861	60.5%
Dysphagia [-365,-1]	4,235	14.4%	308	19.8%	3,927	14.1%
Vocal cord dysfunction [-365,-1] ⁴	1,087	3.7%	78	5.0%	1,009	3.6%
Bronchial thermoplasty [-365,-1] ⁴	106	0.4%	*****	*****	*****	*****
Prior history of zero moderate asthma exacerbations (-365,-31) ⁴	4,260	14.5%	331	21.3%	3,929	14.1%
Prior history of exactly 1 moderate asthma exacerbation (-365,-31) ⁴	10,197	34.7%	515	33.1%	9,682	34.7%
Prior history of at least 2 moderate asthma exacerbations (-365,-31) ⁴	14,970	50.9%	708	45.6%	14,262	51.2%
Prior history of zero severe asthma exacerbations (-365,-31)	16,447	55.9%	757	48.7%	15,690	56.3%
Prior history of exactly 1 severe asthma exacerbation (-365,-31)	7,731	26.3%	469	30.2%	7,262	26.1%
Prior history of at least 2 severe asthma exacerbations (-365,-31)	5,249	17.8%	328	21.1%	4,921	17.7%
Medication Characteristics:						
IL4R or IL5 [-365,-1]	356	1.2%	23	1.5%	333	1.2%
Anti-IgE [-365,-1]	419	1.4%	19	1.2%	400	1.4%
Opiates [-30,-1]	9,124	31.0%	527	33.9%	8,597	30.8%
Benzodiazepines [-30,-1]	5,023	17.1%	300	19.3%	4,723	16.9%
Glucocorticoids or oral corticosteroids (OCS) [-15,-1]	12,930	43.9%	621	40.0%	12,309	44.2%
ICS-containing any evidence of days supply [-365,-1] ⁵	29,427	100.0%	1,554	100.0%	27,873	100.0%
LABA-containing any evidence of days supply [-365,-1] ⁵	29,427	100.0%	1,554	100.0%	27,873	100.0%
LAMA-containing any evidence of days supply [-365,-1] ⁵	10,504	35.7%	608	39.1%	9,896	35.5%
LTRA-containing any evidence of days supply [-365,-1] ⁵	18,557	63.1%	923	59.4%	17,634	63.3%
SABA-containing any evidence of days supply [-365,-1] ⁵	25,398	86.3%	1,378	88.7%	24,020	86.2%
Mean ICS-containing days supply [-365,-1] ⁶	254.1	107.5	253.8	108.9	254.1	107.5
Mean LABA-containing days supply [-365,-1] ⁶	244.6	96.4	245	98.2	244.6	96.3
Mean LAMA-containing days supply [-365,-1] ⁶	64.3	112.2	71.8	118.8	63.9	111.8
Mean LTRA-containing days supply [-365,-1] ⁶	153.1	146.4	145	144.9	153.5	146.4
Mean SABA-containing days supply [-365,-1] ⁶	138.8	135.6	157	143.8	137.8	135.1

Table 1g. Aggregated Baseline Table for Asthma Exacerbation in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among Data Partners Included in Model (N=2)

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Health Service Utilization Intensity:						
Mean number of ambulatory encounters	40	31.7	41.2	38.4	39.9	31.3
Mean number of emergency room encounters	2.7	5.5	3	5.4	2.7	5.5
Mean number of inpatient hospital encounters	1.8	2.5	2.4	2.8	1.8	2.5
Mean number of non-acute institutional encounters	0.3	0.8	0.5	1.1	0.2	0.8
Mean number of other ambulatory encounters	21	27.7	29.7	35.3	20.5	27.1
Mean number of unique drug classes	18.8	7.2	19.5	7.2	18.8	7.2
Mean number of generics	21.6	8.9	22.5	9	21.5	8.9
Mean number of filled prescriptions	97.8	60.7	105.6	61.8	97.4	60.6

¹All metrics are based on total number of episodes per group, except for sex, race, and hispanic origin which are based on total number of unique patients

²Value represents standard deviation where no % follows the value

³The Charlson/Elixhauser Combined Comorbidity Score is calculated based on comorbidities observed during a requester-defined window around the exposure episode start date (index date).

⁴Not included in risk factor model.

⁵Episodes with any evidence of days supply within the 365 day window, with standard stockpiling rules applied.

⁶Mean and standard deviation are calculated within episodes with dispensings that start within the 365 day window, without any stockpiling rules applied.

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

Table 1h. Aggregated Baseline Table for COVID-19 in the Sentinel Distributed Database (SDD) between January 1, 2020 and June 30, 2021, Among Data Partners Included in Model (N=9)

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Number of episodes	665,410		85,968		579,442	
Number of unique patients	651,225		85,360		568,104	
Demographics	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation
Mean Age (years)	72.7	12.8	71.4	10.9	72.9	13
	Number	Percent	Number	Percent	Number	Percent
18-39	19,198	2.9%	1,288	1.5%	17,910	3.1%
40-64	125,220	18.8%	17,444	20.3%	107,776	18.6%
65+	520,992	78.3%	67,236	78.2%	453,756	78.3%
Sex						
Female	330,040	50.7%	36,403	42.6%	294,603	51.9%
Male	321,185	49.3%	48,957	57.4%	273,501	48.1%
Race						
Unknown	122,757	18.9%	15,764	18.5%	107,541	18.9%
American Indian or Alaska Native	5,567	0.9%	976	1.1%	4,608	0.8%
Asian	13,650	2.1%	2,503	2.9%	11,203	2.0%
Black or African American	95,284	14.6%	15,990	18.7%	79,784	14.0%
Native Hawaiian or Other Pacific Islander	1,148	0.2%	224	0.3%	931	0.2%
White	412,819	63.4%	49,903	58.5%	364,037	64.1%
Hispanic Origin	28,835	4.4%	5,487	6.4%	23,484	4.1%
Year						
2020	445,498	67.0%	62,310	72.5%	383,188	66.1%
2021	219,912	33.0%	23,658	27.5%	196,254	33.9%
Health Characteristics:	Mean	Standard Deviation	Mean	Standard Deviation	Mean	Standard Deviation
Charlson/Elixhauser Combined Comorbidity Score ³	4.2	3.8	4.5	3.9	4.2	3.7
	Number	Percent	Number	Percent	Number	Percent
Smoking [-365,-1]	204,245	30.7%	28,434	33.1%	175,811	30.3%
Obesity [-365,-1]	223,250	33.6%	34,436	40.1%	188,814	32.6%
Congestive heart failure (CHF) [-365,-1]	224,879	33.8%	32,024	37.3%	192,855	33.3%
MACE [-365,-1]	36,960	5.6%	5,608	6.5%	31,352	5.4%
Atrial fibrillation [-365,-1]	139,597	21.0%	17,755	20.7%	121,842	21.0%
Bronchiectasis [-365,-1] ⁴	10,133	1.5%	1,433	1.7%	8,700	1.5%

Table 1h. Aggregated Baseline Table for COVID-19 in the Sentinel Distributed Database (SDD) between January 1, 2020 and June 30, 2021, Among Data Partners Included in Model (N=9)

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Idiopathic pulmonary fibrosis (IPF) [-365,-1] ⁴	2,017	0.3%	386	0.4%	1,631	0.3%
Chronic obstructive pulmonary disorder (COPD) [-365,-1]	160,498	24.1%	22,426	26.1%	138,072	23.8%
Asthma [-365,-1]	74,847	11.2%	10,390	12.1%	64,457	11.1%
Pulmonary hypertension [-365,-1]	47,009	7.1%	6,913	8.0%	40,096	6.9%
Pulmonary embolism [-365,-1]	19,520	2.9%	2,589	3.0%	16,931	2.9%
Diabetes [-365,-1]	324,443	48.8%	48,941	56.9%	275,502	47.5%
Hypertension [-365,-1]	547,652	82.3%	73,413	85.4%	474,239	81.8%
Interstitial lung diseases [-365,-1]	14,314	2.2%	2,530	2.9%	11,784	2.0%
Sarcoidosis [-365,-1] ⁴	3,241	0.5%	527	0.6%	2,714	0.5%
Stroke or cerebrovascular disease [-365,-1]	238,400	35.8%	33,336	38.8%	205,064	35.4%
HIV [-365,-1] ⁴	4,336	0.7%	711	0.8%	3,625	0.6%
Cancer [-365,-1]	212,054	31.9%	27,407	31.9%	184,647	31.9%
Solid organ transplant [-365,-1] ⁴	3,153	0.5%	659	0.8%	2,494	0.4%
Bone marrow transplant [-365,-1]	1,705	0.3%	285	0.3%	1,420	0.2%
Pregnancy [-365,-1]	17,197	2.6%	1,924	2.2%	15,273	2.6%
Tuberculosis [-365,-1] ⁴	1,639	0.2%	276	0.3%	1,363	0.2%
Hemodialysis [-365,-1]	41,745	6.3%	7,401	8.6%	34,344	5.9%
Cirrhosis [-365,-1]	15,820	2.4%	2,851	3.3%	12,969	2.2%
Sickle cell disease [-365,-1] ⁴	1,114	0.2%	116	0.1%	998	0.2%
Cystic fibrosis [-365,-1] ⁴	249	0.0%	37	0.0%	212	0.0%
Covid-19 [-365,-31]	45,550	6.8%	5,074	5.9%	40,476	7.0%
Medication Characteristics:						
Therapeutic anticoagulants [-365,-1]	123,847	18.6%	15,855	18.4%	107,992	18.6%
Immunosuppressants or immunomodulators [-365,-1]	61,466	9.2%	9,150	10.6%	52,316	9.0%
Immunostimulants [-365,-1]	4,772	0.7%	673	0.8%	4,099	0.7%
Glucocorticoids or oral corticosteroids (OCS) [-15,-1]	104,648	15.7%	15,582	18.1%	89,066	15.4%
Monoclonal antibodies (mAbs) [-15,-1]	4,584	0.7%	317	0.4%	4,267	0.7%
Health Service Utilization Intensity:						
Mean number of ambulatory encounters	29.1	40	32.2	44.8	28.6	39.2
Mean number of emergency room encounters	1.2	2.9	1.1	2.7	1.2	2.9
Mean number of inpatient hospital encounters	0.6	1.4	0.7	1.5	0.6	1.4

Table 1h. Aggregated Baseline Table for COVID-19 in the Sentinel Distributed Database (SDD) between January 1, 2020 and June 30, 2021, Among Data Partners Included in Model (N=9)

Characteristic ¹	All		Respiratory Failure		No Respiratory Failure	
	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²	Number	Percent/Standard Deviation ²
Mean number of non-acute institutional encounters	0.3	0.9	0.3	1.1	0.3	0.9
Mean number of other ambulatory encounters	19.6	33.4	21.3	36	19.3	33
Mean number of unique drug classes	11	6.3	11.8	6.6	10.9	6.2
Mean number of generics	12	7.3	13	7.7	11.9	7.2
Mean number of filled prescriptions	53.5	52.1	57.8	55.6	52.9	51.6

¹All metrics are based on total number of episodes per group, except for sex, race, and hispanic origin which are based on total number of unique patients

²Value represents standard deviation where no % follows the value

³The Charlson/Elixhauser Combined Comorbidity Score is calculated based on comorbidities observed during a requester-defined window around the exposure episode start date (index date).

⁴Not included in risk factor model.

Table 2a. Summary of Acute Respiratory Failure in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among COPD, IPF, and Asthma Cohorts

	New Users	New Episodes	New Episodes with an Event	Days At Risk	Years at Risk	Time to Data End (Days)
COPD Exacerbation, Among All Data Partners						
	92,253	136,309	10,376	3,752,114	10,272.7	53,410,516
Idiopathic Pulmonary Fibrosis, Among All Data Partners						
	17,321	24,365	1,533	633,251	1,733.7	6,475,850
Asthma Exacerbation, Among All Data Partners						
	26,168	33,762	1,784	969,336	2,653.9	16,253,240
COPD Exacerbation, Among Data Partners Included in Model						
	90,679	134,226	10,243	3,694,330	10,114.5	52,578,498
Idiopathic Pulmonary Fibrosis, Among Data Partners Included in Model						
	16,940	23,828	1,505	619,530	1,696.2	6,337,619
Asthma Exacerbation, Among Data Partners Included in Model						
	22,604	29,427	1,554	845,211	2,314.1	14,352,084

Table 2b. Summary of Acute Respiratory Failure in the Sentinel Distributed Database (SDD) between January 1, 2020 and June 30, 2021, Among COVID-19 Cohort

	New Users	New Episodes	New Episodes with an Event	Days At Risk	Years at Risk	Time to Data End (Days)
COVID-19, Among All Data Partners	651,849	666,044	86,041	16,168,395	44,266.7	104,647,417
COVID-19, Among Data Partners Included in Model	651,225	665,410	85,968	16,152,191	44,222.3	104,585,067

Table 3a. Factors Associated with Hospitalized Respiratory Failure in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among COPD Cohort (Fixed-Effects)

	Site-Adjusted Univariate Models					Multivariable-Adjusted Model				
	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners
Demographics										
Age, continuous	0.97543	0.97344	0.97743	<.00001	5	0.96867	0.96643	0.97091	<.00001	5
Female	0.92864	0.89134	0.96750	0.00040	5	0.97302	0.93263	1.01515	0.20591	5
Health Characteristics										
Charlson Elixhauser Index	1.04757	1.04177	1.05340	<.00001	5	1.05413	1.04572	1.06261	<.00001	5
Evidence of smoking	1.15005	1.08464	1.21940	<.00001	5	0.91931	0.86346	0.97876	0.00851	5
Evidence of obesity	1.13497	1.08792	1.18404	<.00001	5	0.98987	0.94456	1.03735	0.67017	5
Evidence of congestive heart failure (CHF)	1.26705	1.21616	1.32007	<.00001	5	1.10627	1.05003	1.16551	0.00015	5
Evidence of MACE	1.37993	1.28964	1.47653	<.00001	5	1.23811	1.15364	1.32877	<.00001	5
Evidence of atrial fibrillation	1.08277	1.03602	1.13162	0.00041	5	1.06380	1.01313	1.11701	0.01299	5
Evidence of bronchiectasis	0.89943	0.83223	0.97205	0.00746	5	0.93471	0.86364	1.01162	0.09422	5
Evidence of asthma	0.88459	0.84518	0.92585	<.00001	5	0.81418	0.77608	0.85415	<.00001	5
Evidence of pulmonary hypertension	1.27898	1.22075	1.34000	<.00001	5	1.14404	1.08778	1.20320	<.00001	5
Evidence of pulmonary embolism	1.14526	1.05281	1.24583	0.00159	5	0.95586	0.87627	1.04268	0.30878	5
Evidence of GERD	0.96015	0.92210	0.99977	0.04869	5	0.89606	0.85734	0.93653	<.00001	5
Evidence of dysphagia	1.14505	1.08495	1.20847	<.00001	5	1.11574	1.05386	1.18126	0.00017	5
Emphysema and chronic bronchitis subtype										
No emphysema, no chronic bronchitis (ref)	--	--	--	--	5	--	--	--	--	5
Emphysema, no chronic bronchitis	1.00270	0.95960	1.04774	0.90411	5	0.95469	0.91206	0.99932	0.04667	5
Chronic bronchitis, no emphysema	0.94882	0.87072	1.03393	0.23068	5	0.94093	0.86276	1.02618	0.16884	5
Both conditions	0.96406	0.89594	1.03736	0.32755	5	0.89904	0.83374	0.96946	0.00567	5
Number of moderate COPD exacerbations in prior year ¹										
0 (ref)	--	--	--	--	5	--	--	--	--	--
1	0.81368	0.76535	0.86506	<.00001	5	--	--	--	--	--
2+	0.72418	0.68508	0.76552	<.00001	5	--	--	--	--	--
Number of severe COPD exacerbations in prior year										
0 (ref)	--	--	--	--	5	--	--	--	--	5
1	1.13306	1.07929	1.18950	<.00001	5	1.01170	0.95943	1.06682	0.66724	5
2+	1.26358	1.20306	1.32713	<.00001	5	0.99814	0.92934	1.07203	0.95919	5
Medication Characteristics										
Opioid dispensing [-30, -1]	1.11149	1.06613	1.15879	<.00001	5	1.02465	0.97884	1.07261	0.29675	5
Benzodiazepine dispensing [-30, -1]	1.04671	0.99750	1.09834	0.06314	5	1.01657	0.96665	1.06907	0.52234	5

Table 3a. Factors Associated with Hospitalized Respiratory Failure in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among COPD Cohort (Fixed-Effects)

	Site-Adjusted Univariate Models					Multivariable-Adjusted Model				
	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners
ICS-containing adherence in prior year (continuous days supplied)	0.99996	0.99975	1.00018	0.73151	5	0.99981	0.99939	1.00023	0.38602	5
LABA-containing adherence in prior year (continuous days supplied)	1.00006	0.99984	1.00027	0.60426	5	1.00037	0.99996	1.00079	0.07996	5
LAMA-containing adherence in prior year (continuous days supplied)	0.99974	0.99950	0.99997	0.02703	5	0.99994	0.99967	1.00022	0.69045	5
Chronic azithromycin (days supplied > 14) or roflumilast adherence in prior year (continuous days supplied)	1.00007	0.99988	1.00027	0.45711	5	1.00003	0.99983	1.00023	0.79209	5
Healthcare Utilization										
Number of inpatient hospital encounters	1.05310	1.04380	1.06248	<.00001	5	1.00066	0.98639	1.01513	0.92848	5
Number of unique drug classes	1.00595	1.00290	1.00900	0.00013	5	0.98527	0.98129	0.98927	<.00001	5

¹Not included in multivariable model.

Table 3b. Factors Associated with Hospitalized Respiratory Failure in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among IPF Cohort (Fixed-Effects)

	Site-Adjusted Univariate Models					Multivariable-Adjusted Model				
	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners
Demographics										
Age, continuous	0.96512	0.96002	0.97026	<.00001	4	0.96277	0.95692	0.96866	<.00001	4
Female	0.74687	0.67020	0.83230	<.00001	4	0.74918	0.66770	0.84059	<.00001	4
Health Characteristics										
Charlson Elixhauser Index	1.00380	0.98950	1.01830	0.60470	4	1.00187	0.98078	1.02341	0.86337	4
Evidence of smoking	1.12217	1.00970	1.24715	0.03242	4	1.03128	0.92052	1.15536	0.59522	4
Evidence of obesity	1.02831	0.91463	1.15611	0.64048	4	0.90642	0.80086	1.02589	0.11985	4
Evidence of congestive heart failure (CHF)	0.97553	0.87732	1.08473	0.64716	4	0.99591	0.87312	1.13597	0.95133	4
Evidence of atrial fibrillation	0.93534	0.83543	1.04719	0.24610	4	1.02416	0.90472	1.15937	0.70591	4
Evidence of bronchiectasis	1.17028	1.04142	1.31509	0.00825	4	1.09770	0.97381	1.23734	0.12709	4
Evidence of COPD	0.95962	0.86320	1.06680	0.44545	4	0.91611	0.81605	1.02844	0.13762	4
Evidence of asthma	0.93777	0.80943	1.08646	0.39217	4	0.89720	0.76932	1.04634	0.16679	4
Evidence of pulmonary hypertension	1.13438	1.02050	1.26096	0.01949	4	1.09138	0.97279	1.22443	0.13624	4
Evidence of GERD	1.14566	1.02832	1.27638	0.01364	4	1.05240	0.93837	1.18028	0.38275	4
Evidence of dysphagia	1.17320	1.02953	1.33692	0.01655	4	1.16719	1.01672	1.33992	0.02813	4
Medication Characteristics										
Opioid dispensing [-30, -1]	0.93980	0.82285	1.07337	0.35979	4	0.85472	0.74158	0.98513	0.03025	4
Benzodiazepine dispensing [-30, -1]	0.90934	0.76986	1.07409	0.26327	4	0.88799	0.74670	1.05601	0.17908	4
Immunosuppressants or immunomodulators dispensing in prior year	1.29482	1.14127	1.46903	0.00006	4	1.06689	0.92651	1.22855	0.36835	4
Glucocorticoids or oral corticosteroids (OCS) dispensing [-15,-1]	1.26490	1.13799	1.40596	0.00001	4	1.21005	1.08196	1.35331	0.00084	4
Nintedanib or pirfenidone adherence in prior year (continuous days supplied)	1.00039	1.00000	1.00079	0.05201	4	1.00016	0.99974	1.00058	0.45623	4
Healthcare Utilization										
Number of inpatient hospital encounters	1.03382	1.00723	1.06111	0.01235	4	0.99792	0.96458	1.03241	0.90425	4
Number of unique drug classes	1.00603	0.99764	1.01450	0.15952	4	0.99727	0.98648	1.00818	0.62271	4

Table 3c. Factors Associated with Hospitalized Respiratory Failure in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among Asthma Cohort (Fixed-Effects)

	Site-Adjusted Univariate Models					Multivariable-Adjusted Model				
	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners
Demographics										
Age, continuous	0.98570	0.98244	0.98897	<.00001	2	0.98063	0.97668	0.98460	<.00001	2
Female	0.84556	0.75194	0.95085	0.00508	2	0.96328	0.85210	1.08897	0.54993	2
Health Characteristics										
Charlson Elixhauser Index	1.09496	1.07959	1.11054	<.00001	2	1.08521	1.06251	1.10840	<.00001	2
Evidence of smoking	1.31236	1.18417	1.45443	<.00001	2	1.02033	0.91129	1.14242	0.72706	2
Evidence of obesity	1.08925	0.98288	1.20712	0.10296	2	0.87383	0.77987	0.97910	0.02013	2
Evidence of congestive heart failure (CHF)	1.54518	1.39270	1.71435	<.00001	2	1.20462	1.05210	1.37926	0.00703	2
Evidence of atrial fibrillation	1.21299	1.07654	1.36673	0.00152	2	1.08376	0.95003	1.23632	0.23127	2
Evidence of bronchiectasis	0.97656	0.81150	1.17519	0.80175	2	0.96905	0.80112	1.17218	0.74608	2
Evidence of COPD	1.35443	1.20863	1.51782	<.00001	2	1.15397	1.01497	1.31201	0.02875	2
Evidence of GERD	1.03155	0.92848	1.14605	0.56307	2	0.91521	0.81638	1.02601	0.12861	2
Evidence of dysphagia	1.50016	1.31831	1.70708	<.00001	2	1.34366	1.17148	1.54115	0.00002	2
Number of moderate asthma exacerbations in prior year ¹										
0 (ref)	--	--	--	--	2	--	--	--	--	--
1	0.63459	0.54998	0.73222	<.00001	2	--	--	--	--	--
2+	0.59354	0.51835	0.67964	<.00001	2	--	--	--	--	--
Number of severe asthma exacerbations in prior year										
0 (ref)	--	--	--	--	2	--	--	--	--	2
1	1.33451	1.18537	1.50242	<.00001	2	1.04462	0.92163	1.18402	0.49458	2
2+	1.36843	1.19741	1.56388	<.00001	2	0.85824	0.72595	1.01464	0.07348	2
Medication Characteristics										
IL4R or IL5 dispensing in prior year	1.39076	0.90360	2.14057	0.13380	2	1.27558	0.81384	1.99928	0.28843	2
Anti-IgE dispensing in prior year	0.93852	0.58822	1.49744	0.79010	2	0.92369	0.57313	1.48867	0.74442	2
Opioid dispensing [-30, -1]	1.14054	1.02352	1.27093	0.01727	2	0.96635	0.85737	1.08918	0.57496	2
Benzodiazepine dispensing [-30, -1]	1.16714	1.02506	1.32891	0.01961	2	1.08837	0.94827	1.24917	0.22842	2
Glucocorticoids or oral corticosteroids (OCS) dispensing [-15,-1]	0.84418	0.76062	0.93693	0.00145	2	0.83940	0.75385	0.93466	0.00141	2
ICS-containing adherence in prior year (continuous days supplied)	0.99998	0.99951	1.00046	0.94183	2	0.99962	0.99859	1.00065	0.47129	2

Table 3c. Factors Associated with Hospitalized Respiratory Failure in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among Asthma Cohort (Fixed-Effects)

	Site-Adjusted Univariate Models					Multivariable-Adjusted Model				
	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners
LABA-containing adherence in prior year (continuous days supplied)	1.00003	0.99950	1.00056	0.91751	2	1.00032	0.99917	1.00146	0.58772	2
LAMA-containing adherence in prior year (continuous days supplied)	1.00060	1.00017	1.00104	0.00658	2	1.00043	0.99996	1.00091	0.07519	2
LTRA-containing adherence in prior year (continuous days supplied)	0.99960	0.99925	0.99995	0.02628	2	0.99987	0.99949	1.00025	0.51120	2
days supplied)	1.00103	1.00068	1.00138	<.00001	2	1.00065	1.00025	1.00104	0.00135	2
Healthcare Utilization										
Number of inpatient hospital encounters	1.08122	1.06451	1.09819	<.00001	2	1.01809	0.99430	1.04245	0.13727	2
Number of unique drug classes	1.01374	1.00673	1.02081	0.00012	2	0.98690	0.97768	0.99621	0.00590	2

¹Not included in multivariable model.

Table 3d. Factors Associated with Hospitalized Respiratory Failure in the Sentinel Distributed Database (SDD) between January 1, 2020 and June 30, 2021, Among COVID-19 Cohort (Fixed-Effects)

	Site-Adjusted Univariate Models					Multivariable-Adjusted Model				
	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners
Demographics										
Age, continuous	0.98770	0.98716	0.98824	<.00001	9	0.99025	0.98960	0.99090	<.00001	9
Female	0.68739	0.67750	0.69742	<.00001	9	0.67763	0.66744	0.68797	<.00001	9
Health Characteristics										
Charlson Elixhauser Index	1.01632	1.01443	1.01823	<.00001	9	0.98851	0.98536	0.99167	<.00001	9
Evidence of smoking	1.10651	1.08966	1.12363	<.00001	9	0.95457	0.93841	0.97101	<.00001	9
Evidence of obesity	1.38224	1.36198	1.40280	<.00001	9	1.21715	1.19777	1.23685	<.00001	9
Evidence of congestive heart failure (CHF)	1.15856	1.14134	1.17604	<.00001	9	1.09795	1.07128	1.12529	<.00001	9
Evidence of MACE	1.19878	1.16402	1.23457	<.00001	9	1.10291	1.06799	1.13897	<.00001	9
Evidence of atrial fibrillation	0.95579	0.93898	0.97289	<.00001	9	0.93970	0.91844	0.96144	<.00001	9
Evidence of COPD	1.09850	1.08057	1.11672	<.00001	9	1.04294	1.02330	1.06296	0.00001	9
Evidence of asthma	1.09761	1.07361	1.12215	<.00001	9	0.99438	0.97134	1.01796	0.63744	9
Evidence of pulmonary hypertension	1.15001	1.11977	1.18107	<.00001	9	1.04955	1.01950	1.08048	0.00110	9
Evidence of pulmonary embolism	1.02183	0.97975	1.06571	0.31414	9	0.96708	0.92519	1.01087	0.13850	9
Evidence of diabetes	1.42887	1.40828	1.44976	<.00001	9	1.27902	1.25835	1.30003	<.00001	9
Evidence of hypertension	1.22910	1.20433	1.25438	<.00001	9	1.06129	1.03723	1.08592	<.00001	9
Evidence of interstitial lung diseases	1.44304	1.38144	1.50740	<.00001	9	1.34290	1.28385	1.40466	<.00001	9
Evidence of stroke or cerebrovascular disease	1.12355	1.10698	1.14038	<.00001	9	0.99147	0.96820	1.01531	0.47971	9
Evidence of cancer	0.99063	0.97549	1.00601	0.23100	9	0.95811	0.94265	0.97383	<.00001	9
Evidence of pregnancy	0.93864	0.89421	0.98527	0.01047	9	0.88352	0.84083	0.92837	<.00001	9
Evidence of hemodialysis	1.46217	1.42418	1.50118	<.00001	9	1.13730	1.10406	1.17154	<.00001	9
Evidence of cirrhosis	1.47929	1.41955	1.54154	<.00001	9	1.28477	1.23105	1.34083	<.00001	9
Evidence of prior COVID-19 infection [-365,-31]	0.84524	0.82006	0.87120	<.00001	9	0.78816	0.76378	0.81331	<.00001	9
Medication Characteristics										
Therapeutic anticoagulant dispensing in prior year	0.96876	0.95099	0.98687	0.00078	9	0.93897	0.91724	0.96121	<.00001	9
Immunosuppressant or immunomodulator dispensing in prior year	1.19287	1.16517	1.22123	<.00001	9	1.12501	1.09753	1.15318	<.00001	9

Table 3d. Factors Associated with Hospitalized Respiratory Failure in the Sentinel Distributed Database (SDD) between January 1, 2020 and June 30, 2021, Among COVID-19 Cohort (Fixed-Effects)

	Site-Adjusted Univariate Models					Multivariable-Adjusted Model				
	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners
Glucocorticoid or oral corticosteroid (OCS) dispensing [-15,-1]	1.22680	1.20396	1.25008	<.00001	9	1.18038	1.15714	1.20408	<.00001	9
Healthcare Utilization										
Number of inpatient hospital encounters	1.04442	1.03970	1.04916	<.00001	9	0.99717	0.99119	1.00318	0.35529	9
Number of unique drug classes	1.01966	1.01853	1.02079	<.00001	9	1.01022	1.00875	1.01169	<.00001	9

Table 4a. Factors Associated with Hospitalized Respiratory Failure in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among COPD Cohort (Random-Effects)

	Site-Adjusted Univariate Models					Multivariable-Adjusted Model				
	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners
Demographics										
Age, continuous	0.97505	0.97227	0.97784	<.00001	5	0.96783	0.96422	0.97146	<.00001	5
Female	0.92864	0.89134	0.96750	0.00040	5	0.97302	0.93263	1.01515	0.20591	5
Health Characteristics										
Charlson Elixhauser Index	1.03822	1.02253	1.05416	<.00001	5	1.04597	1.02421	1.06820	0.00003	5
Evidence of smoking	1.13966	1.04713	1.24036	0.00248	5	0.91931	0.86346	0.97876	0.00851	5
Evidence of obesity	1.10329	0.99480	1.22362	0.06269	5	0.98218	0.86291	1.11795	0.78552	5
Evidence of congestive heart failure (CHF)	1.24973	1.16615	1.33929	<.00001	5	1.15045	1.00532	1.31652	0.04163	5
Evidence of MACE	1.33718	1.20292	1.48641	<.00001	5	1.23811	1.15364	1.32877	<.00001	5
Evidence of atrial fibrillation	1.06828	0.99886	1.14253	0.05402	5	1.06380	1.01313	1.11701	0.01299	5
Evidence of bronchiectasis	0.89943	0.83223	0.97205	0.00746	5	0.93471	0.86364	1.01162	0.09422	5
Evidence of asthma	0.88459	0.84518	0.92585	<.00001	5	0.81418	0.77608	0.85415	<.00001	5
Evidence of pulmonary hypertension	1.27898	1.22075	1.34000	<.00001	5	1.14404	1.08778	1.20320	<.00001	5
Evidence of pulmonary embolism	1.14526	1.05281	1.24583	0.00159	5	0.95586	0.87627	1.04268	0.30878	5
Evidence of GERD	0.95491	0.90652	1.00588	0.08204	5	0.89606	0.85734	0.93653	<.00001	5
Evidence of dysphagia	1.13902	1.03605	1.25222	0.00709	5	1.12395	1.02123	1.23701	0.01687	5
Emphysema and chronic bronchitis subtype										
No emphysema, no chronic bronchitis (ref)	--	--	--	--	5	--	--	--	--	5
Emphysema, no chronic bronchitis	1.00270	0.95960	1.04774	0.90411	5	0.95469	0.91206	0.99932	0.04667	5
Chronic bronchitis, no emphysema	0.97639	0.86761	1.09881	0.69176	5	1.02613	0.86210	1.22137	0.77164	5
Both conditions	0.95551	0.85431	1.06870	0.42558	5	0.89904	0.83374	0.96946	0.00567	5
Number of moderate COPD exacerbations in prior year ¹										
0 (ref)	--	--	--	--	5	--	--	--	--	--
1	0.87386	0.71245	1.07183	0.19559	5	--	--	--	--	--
2+	0.85944	0.70122	1.05336	0.14451	5	--	--	--	--	--
Number of severe COPD exacerbations in prior year										
0 (ref)	--	--	--	--	5	--	--	--	--	5
1	1.02963	0.88113	1.20316	0.71327	5	0.94898	0.82201	1.09557	0.47489	5
2+	1.26358	1.20306	1.32713	<.00001	5	0.99814	0.92934	1.07203	0.95919	5
Medication Characteristics										
Opioid dispensing [-30, -1]	1.11828	1.03460	1.20873	0.00485	5	1.07330	0.95041	1.21207	0.25421	5
Benzodiazepine dispensing [-30, -1]	1.04671	0.99750	1.09834	0.06314	5	1.01657	0.96665	1.06907	0.52234	5

Table 4a. Factors Associated with Hospitalized Respiratory Failure in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among COPD Cohort (Random-Effects)

	Site-Adjusted Univariate Models					Multivariable-Adjusted Model				
	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners
ICS-containing adherence in prior year (continuous days supplied)	0.99996	0.99975	1.00018	0.73151	5	0.99937	0.99806	1.00068	0.34457	5
LABA-containing adherence in prior year (continuous days supplied)	1.00006	0.99984	1.00027	0.60426	5	1.00080	0.99951	1.00209	0.22324	5
LAMA-containing adherence in prior year (continuous days supplied)	0.99967	0.99916	1.00018	0.20450	5	0.99975	0.99898	1.00053	0.53359	5
Chronic azithromycin (days supplied > 14) or roflumilast adherence in prior year (continuous days supplied)	0.99995	0.99950	1.00039	0.81522	5	0.99997	0.99964	1.00030	0.86968	5
Healthcare Utilization										
Number of inpatient hospital encounters	1.05310	1.04380	1.06248	<.00001	5	1.00066	0.98639	1.01513	0.92848	5
Number of unique drug classes	1.00323	0.99716	1.00932	0.29759	5	0.98527	0.98129	0.98927	<.00001	5

¹Not included in multivariable model.

Table 4b. Factors Associated with Hospitalized Respiratory Failure in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among IPF Cohort (Random-Effects)

	Site-Adjusted Univariate Models					Multivariable-Adjusted Model				
	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners
Demographics										
Age, continuous	0.96512	0.96002	0.97026	<.00001	4	0.96277	0.95692	0.96866	<.00001	4
Female	0.74687	0.67020	0.83230	<.00001	4	0.74918	0.66770	0.84059	<.00001	4
Health Characteristics										
Charlson Elixhauser Index	1.00380	0.98950	1.01830	0.60470	4	1.00187	0.98078	1.02341	0.86337	4
Evidence of smoking	1.23488	0.98514	1.54794	0.06724	4	1.18232	0.89939	1.55426	0.23009	4
Evidence of obesity	1.02831	0.91463	1.15611	0.64048	4	0.90642	0.80086	1.02589	0.11985	4
Evidence of congestive heart failure (CHF)	0.97303	0.84697	1.11786	0.69935	4	0.99591	0.87312	1.13597	0.95133	4
Evidence of atrial fibrillation	0.93534	0.83543	1.04719	0.24610	4	1.02416	0.90472	1.15937	0.70591	4
Evidence of bronchiectasis	1.10645	0.92360	1.32550	0.27237	4	1.04453	0.87481	1.24719	0.63010	4
Evidence of COPD	0.95962	0.86320	1.06680	0.44545	4	0.91611	0.81605	1.02844	0.13762	4
Evidence of asthma	1.05111	0.71678	1.54139	0.79855	4	1.04996	0.67934	1.62276	0.82629	4
Evidence of pulmonary hypertension	1.11839	0.96553	1.29544	0.13565	4	1.09138	0.97279	1.22443	0.13624	4
Evidence of GERD	1.14566	1.02832	1.27638	0.01364	4	1.05240	0.93837	1.18028	0.38275	4
Evidence of dysphagia	1.17320	1.02953	1.33692	0.01655	4	1.16719	1.01672	1.33992	0.02813	4
Medication Characteristics										
Opioid dispensing [-30, -1]	0.93980	0.82285	1.07337	0.35979	4	0.85472	0.74158	0.98513	0.03025	4
Benzodiazepine dispensing [-30, -1]	1.04840	0.76503	1.43673	0.76876	4	1.04995	0.74159	1.48653	0.78351	4
Immunosuppressants or immunomodulators d	1.29482	1.14127	1.46903	0.00006	4	1.06689	0.92651	1.22855	0.36835	4
Glucocorticoids or oral corticosteroids (OCS) dispensing [-15,-1]	1.26490	1.13799	1.40596	0.00001	4	1.21005	1.08196	1.35331	0.00084	4
Nintedanib or pirfenidone adherence in prior year (continuous days supplied)	1.00039	1.00000	1.00079	0.05201	4	1.00016	0.99974	1.00058	0.45623	4
Healthcare Utilization										
Number of inpatient hospital encounters	1.03382	1.00723	1.06111	0.01235	4	0.99792	0.96458	1.03241	0.90425	4
Number of unique drug classes	1.00603	0.99764	1.01450	0.15952	4	0.99727	0.98648	1.00818	0.62271	4

Table 4c. Factors Associated with Hospitalized Respiratory Failure in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among Asthma Cohort (Random-Effects)

	Site-Adjusted Univariate Models					Multivariable-Adjusted Model				
	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners
Demographics										
Age, continuous	0.98497	0.97965	0.99033	<.00001	2	0.98053	0.97621	0.98486	<.00001	2
Female	0.84734	0.74758	0.96042	0.00955	2	0.96328	0.85210	1.08897	0.54993	2
Health Characteristics										
Charlson Elixhauser Index	1.07938	1.02929	1.13191	0.00163	2	1.06449	0.99366	1.14037	0.07526	2
Evidence of smoking	1.31236	1.18417	1.45443	<.00001	2	0.96296	0.74015	1.25285	0.77865	2
Evidence of obesity	1.08925	0.98288	1.20712	0.10296	2	0.84717	0.69165	1.03765	0.10897	2
Evidence of congestive heart failure (CHF)	1.54518	1.39270	1.71435	<.00001	2	1.40747	0.86343	2.29431	0.17038	2
Evidence of atrial fibrillation	0.71927	0.21545	2.40127	0.59213	2	0.64966	0.19486	2.16597	0.48267	2
Evidence of bronchiectasis	0.97656	0.81150	1.17519	0.80175	2	0.96905	0.80112	1.17218	0.74608	2
Evidence of COPD	1.35443	1.20863	1.51782	<.00001	2	1.30958	0.86492	1.98285	0.20255	2
Evidence of GERD	1.03155	0.92848	1.14605	0.56307	2	0.91521	0.81638	1.02601	0.12861	2
Evidence of dysphagia	1.50016	1.31831	1.70708	<.00001	2	1.50858	0.99721	2.28217	0.05156	2
Number of moderate asthma exacerbations in prior year ¹										
0 (ref)	--	--	--	--	2	--	--	--	--	--
1	0.63459	0.54998	0.73222	<.00001	2	--	--	--	--	--
2+	0.59354	0.51835	0.67964	<.00001	2	--	--	--	--	--
Number of severe asthma exacerbations in prior year										
0 (ref)	--	--	--	--	2	--	--	--	--	2
1	1.42176	1.07867	1.87399	0.01251	2	1.17258	0.79338	1.73302	0.42443	2
2+	1.39166	1.14961	1.68468	0.00070	2	0.85824	0.72595	1.01464	0.07348	2
Medication Characteristics										
IL4R or IL5 dispensing in prior year	1.50850	0.65732	3.46186	0.33204	2	1.34668	0.70209	2.58310	0.37043	2
Anti-IgE dispensing in prior year	1.00145	0.47804	2.09794	0.99693	2	0.96869	0.50416	1.86123	0.92393	2
Opioid dispensing [-30, -1]	1.14054	1.02352	1.27093	0.01727	2	0.96635	0.85737	1.08918	0.57496	2
Benzodiazepine dispensing [-30, -1]	1.17883	0.99983	1.38988	0.05023	2	1.09100	0.94161	1.26408	0.24638	2
Glucocorticoids or oral corticosteroids (OCS) dispensing [-15,-1]	0.84418	0.76062	0.93693	0.00145	2	0.75921	0.54077	1.06590	0.11153	2
ICS-containing adherence in prior year (continuous days supplied)	0.99998	0.99951	1.00046	0.94183	2	0.99962	0.99859	1.00065	0.47129	2

Table 4c. Factors Associated with Hospitalized Respiratory Failure in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019, Among Asthma Cohort (Random-Effects)

	Site-Adjusted Univariate Models					Multivariable-Adjusted Model				
	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners
LABA-containing adherence in prior year (continuous days supplied)	1.00003	0.99950	1.00056	0.91751	2	1.00032	0.99917	1.00146	0.58772	2
LAMA-containing adherence in prior year (continuous days supplied)	1.00060	1.00017	1.00104	0.00658	2	1.00043	0.99996	1.00091	0.07519	2
LTRA-containing adherence in prior year (continuous days supplied)	0.99996	0.99880	1.00113	0.95077	2	1.00010	0.99916	1.00104	0.83650	2
SABA-containing adherence in prior year (continuous days supplied)	1.00141	1.00018	1.00264	0.02427	2	1.00105	0.99975	1.00235	0.11357	2
Healthcare Utilization										
Number of inpatient hospital encounters	1.08122	1.06451	1.09819	<.00001	2	1.01809	0.99430	1.04245	0.13727	2
Number of unique drug classes	1.01374	1.00673	1.02081	0.00012	2	0.98690	0.97768	0.99621	0.00590	2

¹Not included in multivariable model.

Table 4d. Factors Associated with Hospitalized Respiratory Failure in the Sentinel Distributed Database (SDD) between January 1, 2020 and June 30, 2021, Among COVID-19 Cohort (Random-Effects)

	Site-Adjusted Univariate Models					Multivariable-Adjusted Model				
	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners
Demographics										
Age, continuous	1.00175	0.99109	1.01253	0.74817	9	1.00148	0.99251	1.01052	0.74786	9
Female	0.68877	0.66979	0.70829	<.00001	9	0.67763	0.66744	0.68797	<.00001	9
Health Characteristics										
Charlson Elixhauser Index	1.02324	1.01626	1.03025	<.00001	9	0.98953	0.98232	0.99680	0.00481	9
Evidence of smoking	1.14477	1.08532	1.20749	<.00001	9	0.99001	0.93678	1.04626	0.72170	9
Evidence of obesity	1.34560	1.28530	1.40873	<.00001	9	1.23789	1.18480	1.29336	<.00001	9
Evidence of congestive heart failure (CHF)	1.20172	1.14661	1.25948	<.00001	9	1.09795	1.07128	1.12529	<.00001	9
Evidence of MACE	1.21098	1.12209	1.30691	<.00001	9	1.09673	1.00996	1.19096	0.02811	9
Evidence of atrial fibrillation	0.99427	0.94180	1.04965	0.83533	9	0.92563	0.87604	0.97802	0.00594	9
Evidence of COPD	1.15136	1.07678	1.23111	0.00004	9	1.04294	1.02330	1.06296	0.00001	9
Evidence of asthma	1.08395	1.04360	1.12586	0.00003	9	0.99438	0.97134	1.01796	0.63744	9
Evidence of pulmonary hypertension	1.13324	1.06308	1.20802	0.00012	9	1.02080	0.95936	1.08617	0.51564	9
Evidence of pulmonary embolism	1.02183	0.97975	1.06571	0.31414	9	0.96708	0.92519	1.01087	0.13850	9
Evidence of diabetes	1.43826	1.38843	1.48987	<.00001	9	1.26534	1.21030	1.32288	<.00001	9
Evidence of hypertension	1.35254	1.22809	1.48959	<.00001	9	1.06232	1.00942	1.11799	0.02035	9
Evidence of interstitial lung diseases	1.65018	1.42214	1.91478	<.00001	9	1.51171	1.30845	1.74654	<.00001	9
Evidence of stroke or cerebrovascular disease	1.16766	1.10951	1.22886	<.00001	9	0.98088	0.92746	1.03736	0.49911	9
Evidence of cancer	0.99175	0.97520	1.00858	0.33473	9	0.95811	0.94265	0.97383	<.00001	9
Evidence of pregnancy	0.57587	0.39467	0.84026	0.00420	9	0.72637	0.59454	0.88743	0.00176	9
Evidence of hemodialysis	1.45968	1.36887	1.55651	<.00001	9	1.19541	1.10144	1.29740	0.00002	9
Evidence of cirrhosis	1.47929	1.41955	1.54154	<.00001	9	1.32257	1.21806	1.43605	<.00001	9
Evidence of prior COVID-19 infection [-365,	1.04362	0.81539	1.33572	0.73455	9	0.94283	0.74474	1.19362	0.62470	9
Medication Characteristics										
Therapeutic anticoagulant dispensing in prior year	0.97590	0.93328	1.02045	0.28408	9	0.90648	0.85046	0.96619	0.00255	9
Immunosuppressant or immunomodulator dispensing in prior year	1.19205	1.13557	1.25133	<.00001	9	1.12387	1.09069	1.15807	<.00001	9

Table 4d. Factors Associated with Hospitalized Respiratory Failure in the Sentinel Distributed Database (SDD) between January 1, 2020 and June 30, 2021, Among COVID-19 Cohort (Random-Effects)

	Site-Adjusted Univariate Models					Multivariable-Adjusted Model				
	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners	Odds Ratio	95% Confidence Interval Lower Limit	95% Confidence Interval Upper Limit	P-value	Number of Contributing Data Partners
Glucocorticoid or oral corticosteroid (OCS) dispensing [-15,-1]	1.20301	1.15745	1.25036	<.00001	9	1.14303	1.08790	1.20096	<.00001	9
Healthcare Utilization										
Number of inpatient hospital encounters	1.03803	1.01733	1.05914	0.00028	9	0.99571	0.98599	1.00553	0.39018	9
Number of unique drug classes	1.01990	1.01686	1.02295	<.00001	9	1.01069	1.00589	1.01551	0.00001	9

Table 5a. Statistics Associated with COPD Exacerbation and Hospitalized Respiratory Failure Risk Factor Model in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019

	Statistics from Site-Adjusted Univariate Model		Statistics from Multivariable-Adjusted Model	
	Q-statistic	P-value	Q-statistic	P-value
Demographics				
Age, continuous	4.37	0.35745	4.71	0.31796
Female	2.82	0.58833	3.67	0.45178
Health Characteristics				
Charlson Elixhauser Index	8.47	0.07550	7.90	0.09497
Evidence of smoking	4.68	0.32064	3.51	0.47629
Evidence of obesity	7.27	0.12220	8.93	0.06281
Evidence of congestive heart failure (CHF)	5.00	0.28725	8.13	0.08674
Evidence of MACE	4.57	0.33409	1.61	0.80579
Evidence of atrial fibrillation	4.58	0.33303	1.30	0.86072
Evidence of bronchiectasis	1.73	0.78413	1.70	0.79026
Evidence of asthma	2.61	0.62489	1.82	0.76845
Evidence of pulmonary hypertension	2.21	0.69643	1.68	0.79291
Evidence of pulmonary embolism	3.80	0.43331	3.72	0.44487
Evidence of GERD	4.28	0.36894	3.00	0.55664
Evidence of dysphagia	4.91	0.29634	4.76	0.31254
Emphysema and chronic bronchitis subtype				
No emphysema, no chronic bronchitis (ref)	--	--	--	--
Emphysema, no chronic bronchitis	1.32	0.85730	2.30	0.67931
Chronic bronchitis, no emphysema	4.45	0.34820	5.99	0.19961
Both conditions	4.59	0.33120	3.05	0.54793
Number of moderate COPD exacerbations in prior year ¹				
0 (ref)	--	--	--	--
1	9.86	0.04269	--	--
2+	12.23	0.01568	--	--
Number of severe COPD exacerbations in prior year				
0 (ref)	--	--	--	--
1	12.09	0.01669	8.75	0.06752
2+	2.00	0.73520	2.58	0.62896
Medication Characteristics				
Opioid dispensing [-30, -1]	5.28	0.25891	8.24	0.08300
Benzodiazepine dispensing [-30, -1]	1.77	0.77700	1.96	0.74193
ICS-containing adherence in prior year (continuous days supplied)	3.46	0.48263	11.54	0.02109
LABA-containing adherence in prior year (continuous days supplied)	2.47	0.64845	10.75	0.02949
LAMA-containing adherence in prior year (continuous days supplied)	6.59	0.15888	9.65	0.04664
Chronic azithromycin (days supplied > 14) or roflumilast adherence in prior year (continuous days supplied)	6.39	0.17185	4.72	0.31691
Healthcare Utilization				
Number of inpatient hospital encounters	2.72	0.60565	1.83	0.76523
Number of unique drug classes	5.65	0.22646	3.30	0.50759

¹Not included in multivariable model.

Table 5b. Statistics Associated with IPF and Hospitalized Respiratory Failure Risk Factor Model in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019

	Statistics from Site-Adjusted Univariate Model		Statistics from Multivariable-Adjusted Model	
	Q-statistic	P-value	Q-statistic	P-value
Demographics				
Age, continuous	1.51	0.67773	0.90	0.82412
Female	0.63	0.88741	1.04	0.78917
Health Characteristics				
Charlson Elixhauser Index	1.87	0.59851	1.69	0.63898
Evidence of smoking	6.00	0.11116	7.45	0.05871
Evidence of obesity	1.70	0.63492	1.07	0.78404
Evidence of congestive heart failure (CHF)	3.42	0.33039	1.79	0.61631
Evidence of atrial fibrillation	1.23	0.74352	1.59	0.66095
Evidence of bronchiectasis	3.84	0.27909	3.67	0.29868
Evidence of COPD	0.09	0.99230	0.26	0.96597
Evidence of asthma	9.72	0.02109	11.29	0.01023
Evidence of pulmonary hypertension	3.55	0.31392	2.31	0.50967
Evidence of GERD	1.43	0.69678	2.99	0.39246
Evidence of dysphagia	1.53	0.67533	1.93	0.58558
Medication Characteristics				
Opioid dispensing [-30, -1]	0.94	0.81384	1.83	0.60819
Benzodiazepine dispensing [-30, -1]	5.59	0.13311	5.96	0.11348
Immunosuppressants or immunomodulators dispensing in prior y	0.67	0.87976	0.95	0.81164
Glucocorticoids or oral corticosteroids (OCS) dispensing [-15,-1]	0.68	0.87704	0.67	0.87873
Nintedanib or pirfenidone adherence in prior year (continuous da	1.62	0.65474	2.77	0.42693
Healthcare Utilization				
Number of inpatient hospital encounters	0.44	0.93066	0.33	0.95283
Number of unique drug classes	1.87	0.59778	1.70	0.63626

Table 5c. Statistics Associated with Asthma Exacerbation and Hospitalized Respiratory Failure Risk Factor Model in the Sentinel Distributed Database (SDD) between October 1, 2016 and December 31, 2019

	Statistics from Site-Adjusted Univariate Model		Statistics from Multivariable-Adjusted Model	
	Q-statistic	P-value	Q-statistic	P-value
Demographics				
Age, continuous	1.33	0.24880	1.03	0.30929
Female	1.02	0.31227	0.30	0.58085
Health Characteristics				
Charlson Elixhauser Index	2.69	0.10078	2.23	0.13510
Evidence of smoking	0.27	0.60100	1.75	0.18483
Evidence of obesity	0.53	0.46289	1.37	0.24089
Evidence of congestive heart failure (CHF)	0.20	0.64759	3.08	0.07890
Evidence of atrial fibrillation	8.36	0.00383	7.36	0.00667
Evidence of bronchiectasis	0.31	0.57584	0.33	0.56063
Evidence of COPD	0.05	0.81498	3.02	0.08220
Evidence of GERD	0.63	0.42656	0.57	0.44768
Evidence of dysphagia	0.77	0.37745	2.36	0.12400
Number of moderate asthma exacerbations in prior year ¹				
0 (ref)	--	--	--	--
1	0.07	0.79035	--	--
2+	0.18	0.66303	--	--
Number of severe asthma exacerbations in prior year				
0 (ref)	--	--	--	--
1	1.90	0.16777	2.77	0.09567
2+	1.14	0.28459	0.59	0.44033
Medication Characteristics				
IL4R or IL5 dispensing in prior year	3.46	0.06273	1.92	0.16546
Anti-IgE dispensing in prior year	2.31	0.12782	1.72	0.18848
Opioid dispensing [-30, -1]	0.03	0.85324	0.00	0.96277
Benzodiazepine dispensing [-30, -1]	1.09	0.29615	1.01	0.31266
Glucocorticoids or oral corticosteroids (OCS) dispensing [-15,-1]	0.68	0.40854	2.72	0.09876
ICS-containing adherence in prior year (continuous days supplied)	0.55	0.45680	0.26	0.60548
LABA-containing adherence in prior year (continuous days supplied)	0.46	0.49568	0.15	0.69080
LAMA-containing adherence in prior year (continuous days supplied)	0.63	0.42471	0.31	0.57677
LTRA-containing adherence in prior year (continuous days supplied)	3.19	0.07379	1.96	0.16107
SABA-containing adherence in prior year (continuous days supplied)	5.96	0.01462	4.57	0.03247
Healthcare Utilization				
Number of inpatient hospital encounters	0.00	0.93190	0.09	0.76099
Number of unique drug classes	0.09	0.75245	0.08	0.77205

¹Not included in multivariable model.

Table 5d. Statistics Associated with COVID-19 and Hospitalized Respiratory Failure Risk Factor Model in the Sentinel Distributed Database (SDD) between January 1, 2020 and June 30, 2021

	Statistics from Site-Adjusted Univariate Model		Statistics from Multivariable-Adjusted Model	
	Q-statistic	P-value	Q-statistic	P-value
Demographics				
Age, continuous	1584.41	<.00001	687.99	<.00001
Female	11.34	0.18313	7.83	0.44976
Health Characteristics				
Charlson Elixhauser Index	28.09	0.00046	12.44	0.13255
Evidence of smoking	25.91	0.00109	22.77	0.00366
Evidence of obesity	23.08	0.00326	18.46	0.01801
Evidence of congestive heart failure (CHF)	20.72	0.00793	3.81	0.87322
Evidence of MACE	14.52	0.06897	14.06	0.08001
Evidence of atrial fibrillation	18.96	0.01504	13.33	0.10088
Evidence of COPD	32.62	0.00007	7.38	0.49528
Evidence of asthma	10.08	0.25930	7.02	0.53356
Evidence of pulmonary hypertension	13.27	0.10283	11.62	0.16852
Evidence of pulmonary embolism	6.22	0.62202	3.44	0.90311
Evidence of diabetes	15.33	0.05298	18.01	0.02113
Evidence of hypertension	72.95	<.00001	14.95	0.06012
Evidence of interstitial lung diseases	25.65	0.00120	22.62	0.00388
Evidence of stroke or cerebrovascular disease	24.19	0.00212	12.76	0.12021
Evidence of cancer	8.14	0.41940	5.61	0.68988
Evidence of pregnancy	184.55	<.00001	39.84	<.00001
Evidence of hemodialysis	11.21	0.18999	13.34	0.10037
Evidence of cirrhosis	7.27	0.50712	10.71	0.21842
Evidence of prior COVID-19 infection [-365,-31]	189.90	<.00001	147.86	<.00001
Medication Characteristics				
Therapeutic anticoagulant dispensing in prior year	13.21	0.10464	15.47	0.05051
Immunosuppressant or immunomodulator dispensing in prior year	11.44	0.17785	8.31	0.40355
Glucocorticoid or oral corticosteroid (OCS) dispensing [-15,-1]	12.31	0.13768	147.86	<.00001
Healthcare Utilization				
Number of inpatient hospital encounters	33.90	0.00004	8.87	0.35289
Number of unique drug classes	18.84	0.01574	24.88	0.00162

Appendix A. Start and End Dates for Each Data Partner up to Request End Date (03/10/2022)¹

Masked ID	Included in Risk Factor Model?				DP Start Date	DP End Date
	COPD	IPF	Asthma	COVID-19		
DP01	N	N	N	N	01/01/2000	02/28/2021
DP02	N	N	N	Y	01/01/2005	10/31/2020
DP03	Y	Y	N	Y	01/01/2008	06/30/2021
DP04	N	N	N	N	01/01/2000	06/30/2020
DP05	Y	Y	Y	Y	01/01/2006	06/30/2021
DP06	N	N	N	Y	01/01/2004	05/31/2021
DP07	N	N	N	Y	01/01/2000	05/31/2021
DP08	Y	Y	N	Y	01/01/2007	05/31/2021
DP09	N	N	N	Y	01/01/2000	04/30/2021
DP10	Y	N	N	N	01/01/2000	12/31/2019
DP11	N	N	N	Y	01/01/2000	02/28/2021
DP12	N	N	N	N	01/01/2000	06/30/2020
DP13	Y	Y	Y	Y	01/01/2010	06/30/2021

¹The start and end dates are based on the minimum and maximum dates within each DP. The month with the maximum date must have at least 80% of the number of records in the previous month.

Appendix B. List of International Classification of Diseases, Tenth Revisions, Clinical Modification (ICD-10-CM) Diagnosis Codes to Define Exposures in this Request

Code	Description	Code Type	Code Category
Chronic obstructive pulmonary disease (COPD) exacerbation codes			
J44.0	Chronic obstructive pulmonary disease with acute lower respiratory infection	ICD-10-CM	Diagnosis
J44.1	Chronic obstructive pulmonary disease with (acute) exacerbation	ICD-10-CM	Diagnosis
COPD diagnosis codes			
J41	Simple and mucopurulent chronic bronchitis	ICD-10-CM	Diagnosis
J41.0	Simple chronic bronchitis	ICD-10-CM	Diagnosis
J41.1	Mucopurulent chronic bronchitis	ICD-10-CM	Diagnosis
J41.8	Mixed simple and mucopurulent chronic bronchitis	ICD-10-CM	Diagnosis
J42	Unspecified chronic bronchitis	ICD-10-CM	Diagnosis
J43	Emphysema	ICD-10-CM	Diagnosis
J43.1	Panlobular emphysema	ICD-10-CM	Diagnosis
J43.2	Centrilobular emphysema	ICD-10-CM	Diagnosis
J43.8	Other emphysema	ICD-10-CM	Diagnosis
J43.9	Emphysema, unspecified	ICD-10-CM	Diagnosis
J44	Other chronic obstructive pulmonary disease	ICD-10-CM	Diagnosis
J44.9	Chronic obstructive pulmonary disease, unspecified	ICD-10-CM	Diagnosis
Acute Respiratory Failure			
J96	Respiratory failure, not elsewhere classified	ICD-10-CM	Diagnosis
J96.0	Acute respiratory failure	ICD-10-CM	Diagnosis
J96.00	Acute respiratory failure, unspecified whether with hypoxia or hypercapnia	ICD-10-CM	Diagnosis
J96.01	Acute respiratory failure with hypoxia	ICD-10-CM	Diagnosis
J96.02	Acute respiratory failure with hypercapnia	ICD-10-CM	Diagnosis
Acute on Chronic Respiratory Failure			
J96.2	Acute and chronic respiratory failure	ICD-10-CM	Diagnosis
J96.20	Acute and chronic respiratory failure unspecified with hypoxia/hypercapnia	ICD-10-CM	Diagnosis
J96.21	Acute and chronic respiratory failure with hypoxia	ICD-10-CM	Diagnosis
J96.22	Acute and chronic respiratory failure with hypercapnia	ICD-10-CM	Diagnosis
Unspecified Respiratory Failure			
J96.9	Respiratory failure, unspecified	ICD-10-CM	Diagnosis
J96.90	Respiratory failure, unspecified, unspecified whether with hypoxia or hypercapnia	ICD-10-CM	Diagnosis
J96.91	Respiratory failure, unspecified with hypoxia	ICD-10-CM	Diagnosis
J96.92	Respiratory failure, unspecified with hypercapnia	ICD-10-CM	Diagnosis
Asthma exacerbation codes			
J45.21	Mild intermittent asthma with (acute) exacerbation	ICD-10-CM	Diagnosis
J45.22	Mild intermittent asthma with status asthmaticus	ICD-10-CM	Diagnosis
J45.31	Mild persistent asthma with (acute) exacerbation	ICD-10-CM	Diagnosis
J45.32	Mild persistent asthma with status asthmaticus	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
J45.51	Severe persistent asthma with (acute) exacerbation	ICD-10-CM	Diagnosis
J45.52	Severe persistent asthma with status asthmaticus	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
Asthma diagnosis codes			
J45	Asthma	ICD-10-CM	Diagnosis
J45.2	Mild intermittent asthma	ICD-10-CM	Diagnosis
J45.20	Mild intermittent asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.3	Mild persistent asthma	ICD-10-CM	Diagnosis
J45.30	Mild persistent asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.4	Moderate persistent asthma	ICD-10-CM	Diagnosis
J45.40	Moderate persistent asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.5	Severe persistent asthma	ICD-10-CM	Diagnosis

Appendix B. List of International Classification of Diseases, Tenth Revisions, Clinical Modification (ICD-10-CM) Diagnosis Codes to Define Exposures in this Request

Code	Description	Code Type	Code Category
J45.50	Severe persistent asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.9	Other and unspecified asthma	ICD-10-CM	Diagnosis
J45.90	Unspecified asthma	ICD-10-CM	Diagnosis
J45.909	Unspecified asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.99	Other asthma	ICD-10-CM	Diagnosis
J45.991	Cough variant asthma	ICD-10-CM	Diagnosis
J45.998	Other asthma	ICD-10-CM	Diagnosis
Idiopathic pulmonary fibrosis diagnosis codes			
J84.112	Idiopathic pulmonary fibrosis	ICD-10-CM	Diagnosis
COVID-19 diagnosis codes			
B97.29	Other coronavirus as the cause of diseases classified elsewhere	ICD-10-CM	Diagnosis
U07.1	COVID-19, virus identified [code effective April 1, 2020]	ICD-10-CM	Diagnosis
B34.2	Coronavirus infection, unspecified site	ICD-10-CM	Diagnosis
B97.21	SARS-associated coronavirus as the cause of diseases classified elsewhere	ICD-10-CM	Diagnosis
J12.81	Pneumonia due to SARS-associated coronavirus	ICD-10-CM	Diagnosis

Appendix C. List of International Classification of Diseases, Tenth Revisions, Clinical Modification (ICD-10-CM) Diagnosis Codes to Define Inclusion/Exclusion Criteria in this Request

Code	Description	Code Type	Code Category
Chronic obstructive pulmonary disease (COPD) exacerbation codes			
J44.0	Chronic obstructive pulmonary disease with acute lower respiratory infection	ICD-10-CM	Diagnosis
J44.1	Chronic obstructive pulmonary disease with (acute) exacerbation	ICD-10-CM	Diagnosis
COPD diagnosis codes			
J41	Simple and mucopurulent chronic bronchitis	ICD-10-CM	Diagnosis
J41.0	Simple chronic bronchitis	ICD-10-CM	Diagnosis
J41.1	Mucopurulent chronic bronchitis	ICD-10-CM	Diagnosis
J41.8	Mixed simple and mucopurulent chronic bronchitis	ICD-10-CM	Diagnosis
J42	Unspecified chronic bronchitis	ICD-10-CM	Diagnosis
J43	Emphysema	ICD-10-CM	Diagnosis
J43.1	Panlobular emphysema	ICD-10-CM	Diagnosis
J43.2	Centrilobular emphysema	ICD-10-CM	Diagnosis
J43.8	Other emphysema	ICD-10-CM	Diagnosis
J43.9	Emphysema, unspecified	ICD-10-CM	Diagnosis
J44	Other chronic obstructive pulmonary disease	ICD-10-CM	Diagnosis
J44.9	Chronic obstructive pulmonary disease, unspecified	ICD-10-CM	Diagnosis
Acute Respiratory Failure			
J96	Respiratory failure, not elsewhere classified	ICD-10-CM	Diagnosis
J96.0	Acute respiratory failure	ICD-10-CM	Diagnosis
J96.00	Acute respiratory failure, unspecified whether with hypoxia or hypercapnia	ICD-10-CM	Diagnosis
J96.01	Acute respiratory failure with hypoxia	ICD-10-CM	Diagnosis
J96.02	Acute respiratory failure with hypercapnia	ICD-10-CM	Diagnosis
Acute on Chronic Respiratory Failure			
J96.2	Acute and chronic respiratory failure	ICD-10-CM	Diagnosis
J96.20	Acute and chronic respiratory failure unspecified with hypoxia/hypercapnia	ICD-10-CM	Diagnosis
J96.21	Acute and chronic respiratory failure with hypoxia	ICD-10-CM	Diagnosis
J96.22	Acute and chronic respiratory failure with hypercapnia	ICD-10-CM	Diagnosis
Unspecified Respiratory Failure			
J96.9	Respiratory failure, unspecified	ICD-10-CM	Diagnosis
J96.90	Respiratory failure, unspecified, unspecified whether with hypoxia or hypercapnia	ICD-10-CM	Diagnosis
J96.91	Respiratory failure, unspecified with hypoxia	ICD-10-CM	Diagnosis
J96.92	Respiratory failure, unspecified with hypercapnia	ICD-10-CM	Diagnosis
Asthma exacerbation codes			
J45.21	Mild intermittent asthma with (acute) exacerbation	ICD-10-CM	Diagnosis
J45.22	Mild intermittent asthma with status asthmaticus	ICD-10-CM	Diagnosis
J45.31	Mild persistent asthma with (acute) exacerbation	ICD-10-CM	Diagnosis
J45.32	Mild persistent asthma with status asthmaticus	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
J45.51	Severe persistent asthma with (acute) exacerbation	ICD-10-CM	Diagnosis
J45.52	Severe persistent asthma with status asthmaticus	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
Asthma diagnosis codes			
J45	Asthma	ICD-10-CM	Diagnosis
J45.2	Mild intermittent asthma	ICD-10-CM	Diagnosis
J45.20	Mild intermittent asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.3	Mild persistent asthma	ICD-10-CM	Diagnosis
J45.30	Mild persistent asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.4	Moderate persistent asthma	ICD-10-CM	Diagnosis
J45.40	Moderate persistent asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.5	Severe persistent asthma	ICD-10-CM	Diagnosis

Appendix C. List of International Classification of Diseases, Tenth Revisions, Clinical Modification (ICD-10-CM) Diagnosis Codes to Define Inclusion/Exclusion Criteria in this Request

Code	Description	Code Type	Code Category
J45.50	Severe persistent asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.9	Other and unspecified asthma	ICD-10-CM	Diagnosis
J45.90	Unspecified asthma	ICD-10-CM	Diagnosis
J45.909	Unspecified asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.99	Other asthma	ICD-10-CM	Diagnosis
J45.991	Cough variant asthma	ICD-10-CM	Diagnosis
J45.998	Other asthma	ICD-10-CM	Diagnosis
Idiopathic pulmonary fibrosis diagnosis codes			
J84.112	Idiopathic pulmonary fibrosis	ICD-10-CM	Diagnosis
Do not resuscitate diagnosis codes			
Z66	Do not resuscitate	ICD-10-CM	Diagnosis

Appendix D. List of Generic and Brand Drug Names Used to Define Inclusion/Exclusion Criteria in this Request

Generic Name	Brand Name
Inhaled corticosteroids (ICS) mono-product	
budesonide	budesonide
budesonide	Pulmicort
budesonide	Pulmicort Flexhaler
fluticasone furoate	Arnuity Ellipta
fluticasone propionate	Flovent HFA
fluticasone propionate	Flovent Diskus
mometasone furoate	Asmanex Twisthaler
mometasone furoate	Asmanex HFA
beclomethasone dipropionate	Qvar
beclomethasone dipropionate	Qvar RediHaler
budesonide	Pulmicort Turbuhaler
ciclesonide	Alvesco
fluticasone propionate	ArmonAir RespiClick
ICS and long-acting beta agonist (LABA) combination product	
mometasone furoate/formoterol fumarate	Dulera
fluticasone propionate/salmeterol xinafoate	fluticasone propion-salmeterol
fluticasone propionate/salmeterol xinafoate	Advair Diskus
fluticasone propionate/salmeterol xinafoate	Advair HFA
fluticasone furoate/vilanterol trifenate	Breo Ellipta
budesonide/formoterol fumarate	Symbicort
fluticasone propionate/salmeterol xinafoate	Wixela Inhub
fluticasone propionate/salmeterol xinafoate	AirDuo RespiClick
Long-acting muscarinic antagonist (LAMA) mono-product	
umeclidinium bromide	Incruse Ellipta
tiotropium bromide	Spiriva with HandiHaler
tiotropium bromide	Spiriva Respimat
glycopyrrolate	Seebri Neohaler
aclidinium bromide	Tudorza Pressair
revefenacin	Yupelri
glycopyrrolate/nebulizer and accessories	Lonhala Magnair Starter
glycopyrrolate/nebulizer accessories	Lonhala Magnair Refill
LABA and LAMA combination product	
glycopyrrolate/formoterol fumarate	Bevespi Aerosphere
indacaterol maleate/glycopyrrolate	Utibron Neohaler
tiotropium bromide/olodaterol HCl	Stiolto Respimat
umeclidinium bromide/vilanterol trifenate	Anoro Ellipta
ICS, LABA and LAMA combination product	
fluticasone furoate/umeclidinium bromide/vilanterol trifenate	Trelegy Ellipta
LABA mono-product	
indacaterol maleate	Arcapta Neohaler
olodaterol HCl	Striverdi Respimat
salmeterol xinafoate	Serevent Diskus
arformoterol tartrate	Brovana
formoterol fumarate	Foradil Aerolizer
formoterol fumarate	Perforomist

Appendix E. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Outcomes in this Request

Code	Description	Code Type	Code Category
Acute Respiratory Failure			
J96	Respiratory failure, not elsewhere classified	ICD-10-CM	Diagnosis
J96.0	Acute respiratory failure	ICD-10-CM	Diagnosis
J96.00	Acute respiratory failure, unspecified whether with hypoxia or hypercapnia	ICD-10-CM	Diagnosis
J96.01	Acute respiratory failure with hypoxia	ICD-10-CM	Diagnosis
J96.02	Acute respiratory failure with hypercapnia	ICD-10-CM	Diagnosis
Acute on Chronic Respiratory Failure			
J96.2	Acute and chronic respiratory failure	ICD-10-CM	Diagnosis
J96.20	Acute and chronic respiratory failure unspecified with hypoxia/hypercapnia	ICD-10-CM	Diagnosis
J96.21	Acute and chronic respiratory failure with hypoxia	ICD-10-CM	Diagnosis
J96.22	Acute and chronic respiratory failure with hypercapnia	ICD-10-CM	Diagnosis
Unspecified Respiratory Failure			
J96.9	Respiratory failure, unspecified	ICD-10-CM	Diagnosis
J96.90	Respiratory failure, unspecified, unspecified whether with hypoxia or hypercapnia	ICD-10-CM	Diagnosis
J96.91	Respiratory failure, unspecified with hypoxia	ICD-10-CM	Diagnosis
J96.92	Respiratory failure, unspecified with hypercapnia	ICD-10-CM	Diagnosis
Mechanical Ventilation			
5A09359	Assistance with Respiratory Ventilation, Less than 24 Consecutive Hours, Continuous Negative Airway Pressure	ICD-10-CM	Procedure
5A0935B	Assistance with Respiratory Ventilation, Less than 24 Consecutive Hours, Intermittent Negative Airway Pressure	ICD-10-CM	Procedure
5A0935Z	Assistance with Respiratory Ventilation, Less than 24 Consecutive Hours	ICD-10-CM	Procedure
5A09458	Assistance with Respiratory Ventilation, 24-96 Consecutive Hours, Intermittent Positive Airway Pressure	ICD-10-CM	Procedure
5A09459	Assistance with Respiratory Ventilation, 24-96 Consecutive Hours, Continuous Negative Airway Pressure	ICD-10-CM	Procedure
5A0945B	Assistance with Respiratory Ventilation, 24-96 Consecutive Hours, Intermittent Negative Airway Pressure	ICD-10-CM	Procedure
5A0945Z	Assistance with Respiratory Ventilation, 24-96 Consecutive Hours	ICD-10-CM	Procedure
5A09558	Assistance with Respiratory Ventilation, Greater than 96 Consecutive Hours, Intermittent Positive Airway Pressure	ICD-10-CM	Procedure
5A09559	Assistance with Respiratory Ventilation, Greater than 96 Consecutive Hours, Continuous Negative Airway Pressure	ICD-10-CM	Procedure
5A0955B	Assistance with Respiratory Ventilation, Greater than 96 Consecutive Hours, Intermittent Negative Airway Pressure	ICD-10-CM	Procedure
5A0955Z	Assistance with Respiratory Ventilation, Greater than 96 Consecutive Hours	ICD-10-CM	Procedure
5A1935Z	Respiratory Ventilation, Less than 24 Consecutive Hours	ICD-10-CM	Procedure
5A1945Z	Respiratory Ventilation, 24-96 Consecutive Hours	ICD-10-CM	Procedure
5A1945Z	Respiratory Ventilation, 24-96 Consecutive Hours	ICD-10-CM	Procedure
5A1955Z	Respiratory Ventilation, Greater than 96 Consecutive Hours	ICD-10-CM	Procedure
Intubation			
0BH17DZ	Insertion of Intraluminal Device into Trachea, Via Natural or Artificial Opening	ICD-10-CM	Procedure
0BH13EZ	Insertion of Endotracheal Airway into Trachea, Percutaneous Approach	ICD-10-CM	Procedure
0BH172Z	Insertion of Monitoring Device into Trachea, Via Natural or Artificial Opening	ICD-10-CM	Procedure
0BH17EZ	Insertion of Endotracheal Airway into Trachea, Via Natural or Artificial Opening	ICD-10-CM	Procedure
0BH17EZ	Insertion of Endotracheal Airway into Trachea, Via Natural or Artificial Opening	ICD-10-CM	Procedure
0BH17YZ	Insertion of Other Device into Trachea, Via Natural or Artificial Opening	ICD-10-CM	Procedure
0BH182Z	Insertion of Monitoring Device into Trachea, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0BH18DZ	Insertion of Intraluminal Device into Trachea, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0BH18EZ	Insertion of Endotracheal Airway into Trachea, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0BH18EZ	Insertion of Endotracheal Airway into Trachea, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure

Appendix E. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Outcomes in this Request

Code	Description	Code Type	Code Category
0BH18YZ	Insertion of Other Device into Trachea, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0WHQ73Z	Insertion of Infusion Device into Respiratory Tract, Via Natural or Artificial Opening	ICD-10-CM	Procedure
0WHQ7YZ	Insertion of Other Device into Respiratory Tract, Via Natural or Artificial Opening	ICD-10-CM	Procedure

Appendix F. List of Healthcare Common Procedure Coding System (HCPCS) and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Outcomes in this Request

Code	Description	Code Type	Code Category
Mechanical Ventilation			
94002	ventilation assist and management, initiation of pressure or volume preset ventilators for assisted or controlled breathing; hospital inpatient/observation, initial day	CPT-4	Procedure
94003	ventilation assist and management, initiation of pressure or volume preset ventilators for assisted or controlled breathing; hospital inpatient/observation, each subsequent day	CPT-4	Procedure
94004	Ventilation assist and management, initiation of pressure or volume preset ventilators for assisted or controlled breathing; nursing facility, per day	CPT-4	Procedure
94656	ventilation assist and management, initiation of pressure or volume preset ventilator for assisted or controlled breathing: first day	CPT-4	Procedure
94657	ventilation assist and management, initiation of pressure or volume preset ventilator for assisted or controlled breathing: subsequent days	CPT-4	Procedure
94662	continuous negative pressure ventilator	CPT-4	Procedure
99440	Newborn resuscitation: provision of positive pressure ventilation and/or chest compressions in the presence of acute inadequate ventilation and/or cardiac output	CPT-4	Procedure
4168F	Patient receiving care in the intensive care unit (ICU) and receiving mechanical ventilation, 24 hours or less (CRIT)	CPT-4	Procedure
A4483	Moisture exchanger, disposable, for use with invasive mechanical ventilation	HCPCS	Procedure
Intubation			
31500	Intubation, endotracheal, emergency procedure	CPT-4	Procedure
G8164	Patient with isolated coronary artery bypass graft documented to have prolonged intubation	HCPCS	Procedure
G8569	Prolonged postoperative intubation (> 24 hrs) required	HCPCS	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
Smoking			
F17	Nicotine dependence	ICD-10-CM	Diagnosis
F17.2	Nicotine dependence	ICD-10-CM	Diagnosis
F17.20	Nicotine dependence, unspecified	ICD-10-CM	Diagnosis
F17.200	Nicotine dependence, unspecified, uncomplicated	ICD-10-CM	Diagnosis
F17.201	Nicotine dependence, unspecified, in remission	ICD-10-CM	Diagnosis
F17.203	Nicotine dependence unspecified, with withdrawal	ICD-10-CM	Diagnosis
F17.208	Nicotine dependence, unspecified, with other nicotine-induced disorders	ICD-10-CM	Diagnosis
F17.209	Nicotine dependence, unspecified, with unspecified nicotine-induced disorders	ICD-10-CM	Diagnosis
F17.21	Nicotine dependence, cigarettes	ICD-10-CM	Diagnosis
F17.210	Nicotine dependence, cigarettes, uncomplicated	ICD-10-CM	Diagnosis
F17.211	Nicotine dependence, cigarettes, in remission	ICD-10-CM	Diagnosis
F17.213	Nicotine dependence, cigarettes, with withdrawal	ICD-10-CM	Diagnosis
F17.218	Nicotine dependence, cigarettes, with other nicotine-induced disorders	ICD-10-CM	Diagnosis
F17.219	Nicotine dependence, cigarettes, with unspecified nicotine-induced disorders	ICD-10-CM	Diagnosis
F17.220	Nicotine dependence, chewing tobacco, uncomplicated	ICD-10-CM	Diagnosis
F17.221	Nicotine dependence, chewing tobacco, in remission	ICD-10-CM	Diagnosis
F17.290	Nicotine dependence, other tobacco product, uncomplicated	ICD-10-CM	Diagnosis
F17.291	Nicotine dependence, other tobacco product, in remission	ICD-10-CM	Diagnosis
O99.33	Tobacco use disorder complicating pregnancy, childbirth, and the puerperium	ICD-10-CM	Diagnosis
O99.330	Smoking (tobacco) complicating pregnancy, unspecified 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
O99.334	Smoking (tobacco) complicating childbirth	ICD-10-CM	Diagnosis
O99.335	Smoking (tobacco) complicating the puerperium	ICD-10-CM	Diagnosis
T65.211A	Toxic effect of chewing tobacco, accidental (unintentional), initial encounter	ICD-10-CM	Diagnosis
T65.212A	Toxic effect of chewing tobacco, intentional self-harm, initial encounter	ICD-10-CM	Diagnosis
T65.213A	Toxic effect of chewing tobacco, assault, initial encounter	ICD-10-CM	Diagnosis
T65.214A	Toxic effect of chewing tobacco, undetermined, initial encounter	ICD-10-CM	Diagnosis
T65.221A	Toxic effect of tobacco cigarettes, accidental (unintentional), initial encounter	ICD-10-CM	Diagnosis
T65.222A	Toxic effect of tobacco cigarettes, intentional self-harm, initial encounter	ICD-10-CM	Diagnosis
T65.223A	Toxic effect of tobacco cigarettes, assault, initial encounter	ICD-10-CM	Diagnosis
T65.224A	Toxic effect of tobacco cigarettes, undetermined, initial encounter	ICD-10-CM	Diagnosis
T65.291A	Toxic effect of other tobacco and nicotine, accidental (unintentional), initial encounter	ICD-10-CM	Diagnosis
T65.292A	Toxic effect of other tobacco and nicotine, intentional self-harm, initial encounter	ICD-10-CM	Diagnosis
T65.293A	Toxic effect of other tobacco and nicotine, assault, initial encounter	ICD-10-CM	Diagnosis
T65.294A	Toxic effect of other tobacco and nicotine, undetermined, initial encounter	ICD-10-CM	Diagnosis
Z72.0	Tobacco use	ICD-10-CM	Diagnosis
Z87.891	Personal history of nicotine dependence	ICD-10-CM	Diagnosis
Obesity			
E66.01	Morbid (severe) obesity due to excess calories	ICD-10-CM	Diagnosis
E66.09	Other obesity due to excess calories	ICD-10-CM	Diagnosis
E66.1	Drug-induced obesity	ICD-10-CM	Diagnosis
E66.8	Other obesity	ICD-10-CM	Diagnosis
E66.9	Obesity, unspecified	ICD-10-CM	Diagnosis
K95.01	Infection due to gastric band procedure	ICD-10-CM	Diagnosis
K95.09	Other complications of gastric band procedure	ICD-10-CM	Diagnosis
K95.81	Infection due to other bariatric procedure	ICD-10-CM	Diagnosis
K95.89	Other complications of other bariatric procedure	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O99.210	Obesity complicating pregnancy, unspecified 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
O99.214	Obesity complicating childbirth	ICD-10-CM	Diagnosis
O99.215	Obesity complicating the puerperium	ICD-10-CM	Diagnosis
O99.840	Bariatric surgery status complicating pregnancy, unspecified 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
O99.843	Bariatric surgery status complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O99.844	Bariatric surgery status complicating childbirth	ICD-10-CM	Diagnosis
O99.845	Bariatric surgery status complicating the puerperium	ICD-10-CM	Diagnosis
Z68.30	Body mass index (BMI) 30.0-30.9, adult	ICD-10-CM	Diagnosis
Z68.31	Body mass index (BMI) 31.0-31.9, adult	ICD-10-CM	Diagnosis
Z68.32	Body mass index (BMI) 32.0-32.9, adult	ICD-10-CM	Diagnosis
Z68.33	Body mass index (BMI) 33.0-33.9, adult	ICD-10-CM	Diagnosis
Z68.34	Body mass index (BMI) 34.0-34.9, adult	ICD-10-CM	Diagnosis
Z68.35	Body mass index (BMI) 35.0-35.9, adult	ICD-10-CM	Diagnosis
Z68.36	Body mass index (BMI) 36.0-36.9, adult	ICD-10-CM	Diagnosis
Z68.37	Body mass index (BMI) 37.0-37.9, adult	ICD-10-CM	Diagnosis
Z68.38	Body mass index (BMI) 38.0-38.9, adult	ICD-10-CM	Diagnosis
Z68.39	Body mass index (BMI) 39.0-39.9, adult	ICD-10-CM	Diagnosis
Z68.41	Body mass index (BMI) 40.0-44.9, adult	ICD-10-CM	Diagnosis
Z68.42	Body mass index (BMI) 45.0-49.9, adult	ICD-10-CM	Diagnosis
Z68.43	Body mass index (BMI) 50-59.9, adult	ICD-10-CM	Diagnosis
Z68.44	Body mass index (BMI) 60.0-69.9, adult	ICD-10-CM	Diagnosis
Z68.45	Body mass index (BMI) 70 or greater, adult	ICD-10-CM	Diagnosis
E66.2	Morbid (severe) obesity with alveolar hypoventilation	ICD-10-CM	Diagnosis
0D16079	Bypass Stomach to Duodenum with Autologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D1607A	Bypass Stomach to Jejunum with Autologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D1607B	Bypass Stomach to Ileum with Autologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D1607L	Bypass Stomach to Transverse Colon with Autologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D160J9	Bypass Stomach to Duodenum with Synthetic Substitute, Open Approach	ICD-10-CM	Procedure
0D160JA	Bypass Stomach to Jejunum with Synthetic Substitute, Open Approach	ICD-10-CM	Procedure
0D160JB	Bypass Stomach to Ileum with Synthetic Substitute, Open Approach	ICD-10-CM	Procedure
0D160JL	Bypass Stomach to Transverse Colon with Synthetic Substitute, Open Approach	ICD-10-CM	Procedure
0D160K9	Bypass Stomach to Duodenum with Nonautologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D160KA	Bypass Stomach to Jejunum with Nonautologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D160KB	Bypass Stomach to Ileum with Nonautologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D160KL	Bypass Stomach to Transverse Colon with Nonautologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D160Z9	Bypass Stomach to Duodenum, Open Approach	ICD-10-CM	Procedure
0D160ZA	Bypass Stomach to Jejunum, Open Approach	ICD-10-CM	Procedure
0D160ZB	Bypass Stomach to Ileum, Open Approach	ICD-10-CM	Procedure
0D160ZL	Bypass Stomach to Transverse Colon, Open Approach	ICD-10-CM	Procedure
0D16479	Bypass Stomach to Duodenum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D1647A	Bypass Stomach to Jejunum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D1647B	Bypass Stomach to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
0D1647L	Bypass Stomach to Transverse Colon with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D164J9	Bypass Stomach to Duodenum with Synthetic Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D164JA	Bypass Stomach to Jejunum with Synthetic Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D164JB	Bypass Stomach to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D164JL	Bypass Stomach to Transverse Colon with Synthetic Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D164K9	Bypass Stomach to Duodenum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D164KA	Bypass Stomach to Jejunum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D164KB	Bypass Stomach to Ileum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D164KL	Bypass Stomach to Transverse Colon with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D164Z9	Bypass Stomach to Duodenum, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D164ZA	Bypass Stomach to Jejunum, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D164ZB	Bypass Stomach to Ileum, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D164ZL	Bypass Stomach to Transverse Colon, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D16879	Bypass Stomach to Duodenum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1687A	Bypass Stomach to Jejunum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1687B	Bypass Stomach to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1687L	Bypass Stomach to Transverse Colon with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D168J9	Bypass Stomach to Duodenum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D168JA	Bypass Stomach to Jejunum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D168JB	Bypass Stomach to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D168JL	Bypass Stomach to Transverse Colon with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D168K9	Bypass Stomach to Duodenum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D168KA	Bypass Stomach to Jejunum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D168KB	Bypass Stomach to Ileum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D168KL	Bypass Stomach to Transverse Colon with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D168Z9	Bypass Stomach to Duodenum, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D168ZA	Bypass Stomach to Jejunum, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D168ZB	Bypass Stomach to Ileum, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D168ZL	Bypass Stomach to Transverse Colon, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D19079	Bypass Duodenum to Duodenum with Autologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D1907A	Bypass Duodenum to Jejunum with Autologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
0D1907B	Bypass Duodenum to Ileum with Autologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D190J9	Bypass Duodenum to Duodenum with Synthetic Substitute, Open Approach	ICD-10-CM	Procedure
0D190JA	Bypass Duodenum to Jejunum with Synthetic Substitute, Open Approach	ICD-10-CM	Procedure
0D190JB	Bypass Duodenum to Ileum with Synthetic Substitute, Open Approach	ICD-10-CM	Procedure
0D190K9	Bypass Duodenum to Duodenum with Nonautologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D190KA	Bypass Duodenum to Jejunum with Nonautologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D190KB	Bypass Duodenum to Ileum with Nonautologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D190Z9	Bypass Duodenum to Duodenum, Open Approach	ICD-10-CM	Procedure
0D190ZA	Bypass Duodenum to Jejunum, Open Approach	ICD-10-CM	Procedure
0D190ZB	Bypass Duodenum to Ileum, Open Approach	ICD-10-CM	Procedure
0D19479	Bypass Duodenum to Duodenum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D1947A	Bypass Duodenum to Jejunum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D1947B	Bypass Duodenum to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D194J9	Bypass Duodenum to Duodenum with Synthetic Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D194JA	Bypass Duodenum to Jejunum with Synthetic Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D194JB	Bypass Duodenum to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D194K9	Bypass Duodenum to Duodenum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D194KA	Bypass Duodenum to Jejunum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D194KB	Bypass Duodenum to Ileum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D194Z9	Bypass Duodenum to Duodenum, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D194ZA	Bypass Duodenum to Jejunum, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D194ZB	Bypass Duodenum to Ileum, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D19879	Bypass Duodenum to Duodenum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1987A	Bypass Duodenum to Jejunum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1987B	Bypass Duodenum to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D198J9	Bypass Duodenum to Duodenum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D198JA	Bypass Duodenum to Jejunum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D198JB	Bypass Duodenum to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D198K9	Bypass Duodenum to Duodenum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D198KA	Bypass Duodenum to Jejunum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D198KB	Bypass Duodenum to Ileum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D198Z9	Bypass Duodenum to Duodenum, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D198ZA	Bypass Duodenum to Jejunum, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
0D198ZB	Bypass Duodenum to Ileum, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1A07A	Bypass Jejunum to Jejunum with Autologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D1A07B	Bypass Jejunum to Ileum with Autologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D1A0JA	Bypass Jejunum to Jejunum with Synthetic Substitute, Open Approach	ICD-10-CM	Procedure
0D1A0JB	Bypass Jejunum to Ileum with Synthetic Substitute, Open Approach	ICD-10-CM	Procedure
0D1A0KA	Bypass Jejunum to Jejunum with Nonautologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D1A0KB	Bypass Jejunum to Ileum with Nonautologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D1A0ZA	Bypass Jejunum to Jejunum, Open Approach	ICD-10-CM	Procedure
0D1A0ZB	Bypass Jejunum to Ileum, Open Approach	ICD-10-CM	Procedure
0D1A47A	Bypass Jejunum to Jejunum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D1A47B	Bypass Jejunum to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D1A4JA	Bypass Jejunum to Jejunum with Synthetic Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D1A4JB	Bypass Jejunum to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D1A4KA	Bypass Jejunum to Jejunum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D1A4KB	Bypass Jejunum to Ileum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D1A4ZA	Bypass Jejunum to Jejunum, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D1A4ZB	Bypass Jejunum to Ileum, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D1A87A	Bypass Jejunum to Jejunum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1A87B	Bypass Jejunum to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1A8JA	Bypass Jejunum to Jejunum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1A8JB	Bypass Jejunum to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1A8KA	Bypass Jejunum to Jejunum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1A8KB	Bypass Jejunum to Ileum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1A8ZA	Bypass Jejunum to Jejunum, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1A8ZB	Bypass Jejunum to Ileum, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1A8ZH	Bypass Jejunum to Cecum, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1B07B	Bypass Ileum to Ileum with Autologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D1B0JB	Bypass Ileum to Ileum with Synthetic Substitute, Open Approach	ICD-10-CM	Procedure
0D1B0KB	Bypass Ileum to Ileum with Nonautologous Tissue Substitute, Open Approach	ICD-10-CM	Procedure
0D1B0ZB	Bypass Ileum to Ileum, Open Approach	ICD-10-CM	Procedure
0D1B47B	Bypass Ileum to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D1B4JB	Bypass Ileum to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D1B4KB	Bypass Ileum to Ileum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D1B4ZB	Bypass Ileum to Ileum, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0D1B87B	Bypass Ileum to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1B8JB	Bypass Ileum to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
0D1B8KB	Bypass Ileum to Ileum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1B8ZB	Bypass Ileum to Ileum, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0D1B8ZH	Bypass Ileum to Cecum, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
0DB60Z3	Excision of Stomach, Open Approach, Vertical	ICD-10-CM	Procedure
0DB60ZZ	Excision of Stomach, Open Approach	ICD-10-CM	Procedure
0DB63Z3	Excision of Stomach, Percutaneous Approach, Vertical	ICD-10-CM	Procedure
0DB63ZZ	Excision of Stomach, Percutaneous Approach	ICD-10-CM	Procedure
0DB67Z3	Excision of Stomach, Via Natural or Artificial Opening, Vertical	ICD-10-CM	Procedure
0DB67ZZ	Excision of Stomach, Via Natural or Artificial Opening	ICD-10-CM	Procedure
0DB68Z3	Excision of Stomach, Via Natural or Artificial Opening Endoscopic, Vertical	ICD-10-CM	Procedure
0DB80ZZ	Excision of Small Intestine, Open Approach	ICD-10-CM	Procedure
0DB90ZZ	Excision of Duodenum, Open Approach	ICD-10-CM	Procedure
0DBB0ZZ	Excision of Ileum, Open Approach	ICD-10-CM	Procedure
0DQ64ZZ	Repair Stomach, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0DV64CZ	Restriction of Stomach with Extraluminal Device, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
0F190Z3	Bypass Common Bile Duct to Duodenum, Open Approach	ICD-10-CM	Procedure
Cachexia			
R64	Cachexia	ICD-10-CM	Diagnosis
Congestive heart failure (CHF)			
I42.8	Other cardiomyopathies	ICD-10-CM	Diagnosis
I51.7	Cardiomegaly	ICD-10-CM	Diagnosis
I50.21	Acute systolic (congestive) heart failure	ICD-10-CM	Diagnosis
I42.2	Other hypertrophic cardiomyopathy	ICD-10-CM	Diagnosis
P29.0	Neonatal cardiac failure	ICD-10-CM	Diagnosis
I50.2	Systolic (congestive) heart failure	ICD-10-CM	Diagnosis
I42.0	Dilated cardiomyopathy	ICD-10-CM	Diagnosis
I50.23	Acute on chronic systolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.43	Acute on chronic combined systolic (congestive) and diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.22	Chronic systolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.32	Chronic diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.1	Left ventricular failure, unspecified	ICD-10-CM	Diagnosis
I42.7	Cardiomyopathy due to drug and external agent	ICD-10-CM	Diagnosis
I50.30	Unspecified diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.41	Acute combined systolic (congestive) and diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I11.0	Hypertensive heart disease with heart failure	ICD-10-CM	Diagnosis
I50.42	Chronic combined systolic (congestive) and diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.20	Unspecified systolic (congestive) heart failure	ICD-10-CM	Diagnosis
I09.9	Rheumatic heart disease, unspecified	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
I42.4	Endocardial fibroelastosis	ICD-10-CM	Diagnosis
I50.3	Diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I25.5	Ischemic cardiomyopathy	ICD-10-CM	Diagnosis
I50.33	Acute on chronic diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.31	Acute diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I42.5	Other restrictive cardiomyopathy	ICD-10-CM	Diagnosis
I43	Cardiomyopathy in diseases classified elsewhere	ICD-10-CM	Diagnosis
I50.4	Combined systolic (congestive) and diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50	Heart failure	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
A18.84	Tuberculosis of heart	ICD-10-CM	Diagnosis
I42.9	Cardiomyopathy, unspecified	ICD-10-CM	Diagnosis
I42.1	Obstructive hypertrophic cardiomyopathy	ICD-10-CM	Diagnosis
I50.40	Unspecified combined systolic (congestive) and diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I42	Cardiomyopathy	ICD-10-CM	Diagnosis
I50.9	Heart failure, unspecified	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
I42.3	Endomyocardial (eosinophilic) disease	ICD-10-CM	Diagnosis
I42.6	Alcoholic cardiomyopathy	ICD-10-CM	Diagnosis
MACE			
I63.423	Cerebral infarction due to embolism of bilateral anterior cerebral arteries	ICD-10-CM	Diagnosis
I63.133	Cerebral infarction due to embolism of bilateral carotid arteries	ICD-10-CM	Diagnosis
I63.443	Cerebral infarction due to embolism of bilateral cerebellar arteries	ICD-10-CM	Diagnosis
I63.413	Cerebral infarction due to embolism of bilateral middle cerebral arteries	ICD-10-CM	Diagnosis
I63.433	Cerebral infarction due to embolism of bilateral posterior cerebral arteries	ICD-10-CM	Diagnosis
I63.113	Cerebral infarction due to embolism of bilateral vertebral arteries	ICD-10-CM	Diagnosis
I63.422	Cerebral infarction due to embolism of left anterior cerebral artery	ICD-10-CM	Diagnosis
I63.132	Cerebral infarction due to embolism of left carotid artery	ICD-10-CM	Diagnosis
I63.442	Cerebral infarction due to embolism of left cerebellar artery	ICD-10-CM	Diagnosis
I63.412	Cerebral infarction due to embolism of left middle cerebral artery	ICD-10-CM	Diagnosis
I63.432	Cerebral infarction due to embolism of left posterior cerebral artery	ICD-10-CM	Diagnosis
I63.112	Cerebral infarction due to embolism of left vertebral artery	ICD-10-CM	Diagnosis
I63.421	Cerebral infarction due to embolism of right anterior cerebral artery	ICD-10-CM	Diagnosis
I63.131	Cerebral infarction due to embolism of right carotid artery	ICD-10-CM	Diagnosis
I63.441	Cerebral infarction due to embolism of right cerebellar artery	ICD-10-CM	Diagnosis
I63.411	Cerebral infarction due to embolism of right middle cerebral artery	ICD-10-CM	Diagnosis
I63.431	Cerebral infarction due to embolism of right posterior cerebral artery	ICD-10-CM	Diagnosis
I63.111	Cerebral infarction due to embolism of right vertebral artery	ICD-10-CM	Diagnosis
I63.429	Cerebral infarction due to embolism of unspecified anterior cerebral artery	ICD-10-CM	Diagnosis
I63.139	Cerebral infarction due to embolism of unspecified carotid artery	ICD-10-CM	Diagnosis
I63.449	Cerebral infarction due to embolism of unspecified cerebellar artery	ICD-10-CM	Diagnosis
I63.419	Cerebral infarction due to embolism of unspecified middle cerebral artery	ICD-10-CM	Diagnosis
I63.439	Cerebral infarction due to embolism of unspecified posterior cerebral artery	ICD-10-CM	Diagnosis
I63.119	Cerebral infarction due to embolism of unspecified vertebral artery	ICD-10-CM	Diagnosis
I63.323	Cerebral infarction due to thrombosis of bilateral anterior cerebral arteries	ICD-10-CM	Diagnosis
I63.033	Cerebral infarction due to thrombosis of bilateral carotid arteries	ICD-10-CM	Diagnosis
I63.343	Cerebral infarction due to thrombosis of bilateral cerebellar arteries	ICD-10-CM	Diagnosis
I63.313	Cerebral infarction due to thrombosis of bilateral middle cerebral arteries	ICD-10-CM	Diagnosis
I63.333	Cerebral infarction due to thrombosis of bilateral posterior cerebral arteries	ICD-10-CM	Diagnosis
I63.013	Cerebral infarction due to thrombosis of bilateral vertebral arteries	ICD-10-CM	Diagnosis
I63.322	Cerebral infarction due to thrombosis of left anterior cerebral artery	ICD-10-CM	Diagnosis
I63.032	Cerebral infarction due to thrombosis of left carotid artery	ICD-10-CM	Diagnosis
I63.342	Cerebral infarction due to thrombosis of left cerebellar artery	ICD-10-CM	Diagnosis
I63.312	Cerebral infarction due to thrombosis of left middle cerebral artery	ICD-10-CM	Diagnosis
I63.332	Cerebral infarction due to thrombosis of left posterior cerebral artery	ICD-10-CM	Diagnosis
I63.012	Cerebral infarction due to thrombosis of left vertebral artery	ICD-10-CM	Diagnosis
I63.321	Cerebral infarction due to thrombosis of right anterior cerebral artery	ICD-10-CM	Diagnosis
I63.031	Cerebral infarction due to thrombosis of right carotid artery	ICD-10-CM	Diagnosis
I63.341	Cerebral infarction due to thrombosis of right cerebellar artery	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
I63.311	Cerebral infarction due to thrombosis of right middle cerebral artery	ICD-10-CM	Diagnosis
I63.331	Cerebral infarction due to thrombosis of right posterior cerebral artery	ICD-10-CM	Diagnosis
I63.011	Cerebral infarction due to thrombosis of right vertebral artery	ICD-10-CM	Diagnosis
I63.329	Cerebral infarction due to thrombosis of unspecified anterior cerebral artery	ICD-10-CM	Diagnosis
I63.039	Cerebral infarction due to thrombosis of unspecified carotid artery	ICD-10-CM	Diagnosis
I63.349	Cerebral infarction due to thrombosis of unspecified cerebellar artery	ICD-10-CM	Diagnosis
I63.319	Cerebral infarction due to thrombosis of unspecified middle cerebral artery	ICD-10-CM	Diagnosis
I63.339	Cerebral infarction due to thrombosis of unspecified posterior cerebral artery	ICD-10-CM	Diagnosis
I63.019	Cerebral infarction due to thrombosis of unspecified vertebral artery	ICD-10-CM	Diagnosis
I63.523	Cerebral infarction due to unspecified occlusion or stenosis of bilateral anterior cerebral arteries	ICD-10-CM	Diagnosis
I63.233	Cerebral infarction due to unspecified occlusion or stenosis of bilateral carotid arteries	ICD-10-CM	Diagnosis
I63.543	Cerebral infarction due to unspecified occlusion or stenosis of bilateral cerebellar arteries	ICD-10-CM	Diagnosis
I63.513	Cerebral infarction due to unspecified occlusion or stenosis of bilateral middle cerebral arteries	ICD-10-CM	Diagnosis
I63.533	Cerebral infarction due to unspecified occlusion or stenosis of bilateral posterior cerebral arteries	ICD-10-CM	Diagnosis
I63.213	Cerebral infarction due to unspecified occlusion or stenosis of bilateral vertebral arteries	ICD-10-CM	Diagnosis
I63.522	Cerebral infarction due to unspecified occlusion or stenosis of left anterior cerebral artery	ICD-10-CM	Diagnosis
I63.232	Cerebral infarction due to unspecified occlusion or stenosis of left carotid arteries	ICD-10-CM	Diagnosis
I63.542	Cerebral infarction due to unspecified occlusion or stenosis of left cerebellar artery	ICD-10-CM	Diagnosis
I63.512	Cerebral infarction due to unspecified occlusion or stenosis of left middle cerebral artery	ICD-10-CM	Diagnosis
I63.532	Cerebral infarction due to unspecified occlusion or stenosis of left posterior cerebral artery	ICD-10-CM	Diagnosis
I63.212	Cerebral infarction due to unspecified occlusion or stenosis of left vertebral artery	ICD-10-CM	Diagnosis
I63.521	Cerebral infarction due to unspecified occlusion or stenosis of right anterior cerebral artery	ICD-10-CM	Diagnosis
I63.231	Cerebral infarction due to unspecified occlusion or stenosis of right carotid arteries	ICD-10-CM	Diagnosis
I63.541	Cerebral infarction due to unspecified occlusion or stenosis of right cerebellar artery	ICD-10-CM	Diagnosis
I63.511	Cerebral infarction due to unspecified occlusion or stenosis of right middle cerebral artery	ICD-10-CM	Diagnosis
I63.531	Cerebral infarction due to unspecified occlusion or stenosis of right posterior cerebral artery	ICD-10-CM	Diagnosis
I63.211	Cerebral infarction due to unspecified occlusion or stenosis of right vertebral artery	ICD-10-CM	Diagnosis
I63.529	Cerebral infarction due to unspecified occlusion or stenosis of unspecified anterior cerebral artery	ICD-10-CM	Diagnosis
I63.239	Cerebral infarction due to unspecified occlusion or stenosis of unspecified carotid artery	ICD-10-CM	Diagnosis
I63.549	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebellar artery	ICD-10-CM	Diagnosis
I63.519	Cerebral infarction due to unspecified occlusion or stenosis of unspecified middle cerebral artery	ICD-10-CM	Diagnosis
I63.539	Cerebral infarction due to unspecified occlusion or stenosis of unspecified posterior cerebral artery	ICD-10-CM	Diagnosis
I63.219	Cerebral infarction due to unspecified occlusion or stenosis of unspecified vertebral artery	ICD-10-CM	Diagnosis
I21.4	Non-ST elevation (NSTEMI) myocardial infarction	ICD-10-CM	Diagnosis
I21.0	ST elevation (STEMI) myocardial infarction of anterior wall	ICD-10-CM	Diagnosis
I21.1	ST elevation (STEMI) myocardial infarction of inferior wall	ICD-10-CM	Diagnosis
I21.2	ST elevation (STEMI) myocardial infarction of other sites	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
Atrial fibrillation			
I48.0	Paroxysmal atrial fibrillation	ICD-10-CM	Diagnosis
I48.1	Persistent atrial fibrillation	ICD-10-CM	Diagnosis
I48.2	Chronic atrial fibrillation	ICD-10-CM	Diagnosis
I48.3	Typical atrial flutter	ICD-10-CM	Diagnosis
I48.4	Atypical atrial flutter	ICD-10-CM	Diagnosis
I48.91	Unspecified atrial fibrillation	ICD-10-CM	Diagnosis
I48.92	Unspecified atrial flutter	ICD-10-CM	Diagnosis
Bronchiectasis			
J47	Bronchiectasis	ICD-10-CM	Diagnosis
J47.0	Bronchiectasis with acute lower respiratory infection	ICD-10-CM	Diagnosis
J47.1	Bronchiectasis with (acute) exacerbation	ICD-10-CM	Diagnosis
J47.9	Bronchiectasis, uncomplicated	ICD-10-CM	Diagnosis
Q33.4	Congenital bronchiectasis	ICD-10-CM	Diagnosis
A15.0	Tuberculous bronchiectasis (current disease)	ICD-10-CM	Diagnosis
Idiopathic pulmonary fibrosis			
J84.112	Idiopathic pulmonary fibrosis	ICD-10-CM	Diagnosis
COPD			
J41	Simple and mucopurulent chronic bronchitis	ICD-10-CM	Diagnosis
J41.0	Simple chronic bronchitis	ICD-10-CM	Diagnosis
J41.1	Mucopurulent chronic bronchitis	ICD-10-CM	Diagnosis
J41.8	Mixed simple and mucopurulent chronic bronchitis	ICD-10-CM	Diagnosis
J42	Unspecified chronic bronchitis	ICD-10-CM	Diagnosis
J43	Emphysema	ICD-10-CM	Diagnosis
J43.1	Panlobular emphysema	ICD-10-CM	Diagnosis
J43.2	Centrilobular emphysema	ICD-10-CM	Diagnosis
J43.8	Other emphysema	ICD-10-CM	Diagnosis
J43.9	Emphysema, unspecified	ICD-10-CM	Diagnosis
J44	Other chronic obstructive pulmonary disease	ICD-10-CM	Diagnosis
J44.9	Chronic obstructive pulmonary disease, unspecified	ICD-10-CM	Diagnosis
Asthma			
J45	Asthma	ICD-10-CM	Diagnosis
J45.2	Mild intermittent asthma	ICD-10-CM	Diagnosis
J45.20	Mild intermittent asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.3	Mild persistent asthma	ICD-10-CM	Diagnosis
J45.30	Mild persistent asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.4	Moderate persistent asthma	ICD-10-CM	Diagnosis
J45.40	Moderate persistent asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.5	Severe persistent asthma	ICD-10-CM	Diagnosis
J45.50	Severe persistent asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.9	Other and unspecified asthma	ICD-10-CM	Diagnosis
J45.90	Unspecified asthma	ICD-10-CM	Diagnosis
J45.909	Unspecified asthma, uncomplicated	ICD-10-CM	Diagnosis
J45.99	Other asthma	ICD-10-CM	Diagnosis
J45.991	Cough variant asthma	ICD-10-CM	Diagnosis
J45.998	Other asthma	ICD-10-CM	Diagnosis
Atopic dermatitis			
L20.9	Atopic dermatitis, unspecified	ICD-10-CM	Diagnosis
Atopy and food allergy			
Z91.012	Allergy to eggs	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
Z91.014	Allergy to mammalian meats	ICD-10-CM	Diagnosis
Z91.011	Allergy to milk products	ICD-10-CM	Diagnosis
Z91.018	Allergy to other foods	ICD-10-CM	Diagnosis
Z91.010	Allergy to peanuts	ICD-10-CM	Diagnosis
Z91.013	Allergy to seafood	ICD-10-CM	Diagnosis
Z91.030	Bee allergy status	ICD-10-CM	Diagnosis
Z91.02	Food additives allergy status	ICD-10-CM	Diagnosis
Z91.038	Other insect allergy status	ICD-10-CM	Diagnosis
Z91.048	Other nonmedicinal substance allergy status	ICD-10-CM	Diagnosis
Eosinophilic granulomatosis with polyangiitis			
M30.1	Polyarteritis with lung involvement [Churg-Strauss]	ICD-10-CM	Diagnosis
Allergic bronchopulmonary aspergillosis			
B44.81	Allergic bronchopulmonary aspergillosis	ICD-10-CM	Diagnosis
Pulmonary hypertension			
I27.0	Primary pulmonary hypertension	ICD-10-CM	Diagnosis
I27.2	Other secondary pulmonary hypertension	ICD-10-CM	Diagnosis
I27.20	Pulmonary hypertension, unspecified	ICD-10-CM	Diagnosis
I27.21	Secondary pulmonary arterial hypertension	ICD-10-CM	Diagnosis
I27.22	Pulmonary hypertension due to left heart disease	ICD-10-CM	Diagnosis
I27.23	Pulmonary hypertension due to lung diseases and hypoxia	ICD-10-CM	Diagnosis
I27.24	Chronic thromboembolic pulmonary hypertension	ICD-10-CM	Diagnosis
I27.29	Other secondary pulmonary hypertension	ICD-10-CM	Diagnosis
I27.8	Other specified pulmonary heart diseases	ICD-10-CM	Diagnosis
I27.81	Cor pulmonale (chronic)	ICD-10-CM	Diagnosis
I27.82	Chronic pulmonary embolism	ICD-10-CM	Diagnosis
I27.83	Eisenmenger's syndrome	ICD-10-CM	Diagnosis
I27.89	Other specified pulmonary heart diseases	ICD-10-CM	Diagnosis
I27.9	Pulmonary heart disease, unspecified	ICD-10-CM	Diagnosis
Pulmonary embolism			
I26.01	Septic pulmonary embolism with acute cor pulmonale	ICD-10-CM	Diagnosis
I26.09	Other pulmonary embolism with acute cor pulmonale	ICD-10-CM	Diagnosis
I26.90	Septic pulmonary embolism without acute cor pulmonale	ICD-10-CM	Diagnosis
I26.99	Other pulmonary embolism without acute cor pulmonale	ICD-10-CM	Diagnosis
T80.0XXA	Air embolism following infusion, transfusion and therapeutic injection, initial encounter	ICD-10-CM	Diagnosis
T82.817A	Embolism due to cardiac prosthetic devices, implants and grafts, initial encounter	ICD-10-CM	Diagnosis
T82.818A	Embolism due to vascular prosthetic devices, implants and grafts, initial encounter	ICD-10-CM	Diagnosis
GERD			
K21	Gastro-esophageal reflux disease	ICD-10-CM	Diagnosis
K21.0	Gastro-esophageal reflux disease with esophagitis	ICD-10-CM	Diagnosis
K21.00	Gastro-esophageal reflux disease with esophagitis, without bleeding	ICD-10-CM	Diagnosis
K21.01	Gastro-esophageal reflux disease with esophagitis, with bleeding	ICD-10-CM	Diagnosis
K21.9	Gastro-esophageal reflux disease without esophagitis	ICD-10-CM	Diagnosis
Dysphagia			
R13.11	Dysphagia, oral phase	ICD-10-CM	Diagnosis
R13.12	Dysphagia, oropharyngeal phase	ICD-10-CM	Diagnosis
R13.13	Dysphagia, pharyngeal phase	ICD-10-CM	Diagnosis
R13.14	Dysphagia, pharyngoesophageal phase	ICD-10-CM	Diagnosis
R13.10	Dysphagia, unspecified	ICD-10-CM	Diagnosis
R13.19	Other dysphagia	ICD-10-CM	Diagnosis
Vocal cord dysfunction			

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
J38.5	Laryngeal spasm	ICD-10-CM	Diagnosis
J38.3	Other diseases of vocal cords	ICD-10-CM	Diagnosis
J38.02	Paralysis of vocal cords and larynx, bilateral	ICD-10-CM	Diagnosis
J38.01	Paralysis of vocal cords and larynx, unilateral	ICD-10-CM	Diagnosis
J38.00	Paralysis of vocal cords and larynx, unspecified	ICD-10-CM	Diagnosis
Lung cancer			
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
Z85.118	Personal history of other malignant neoplasm of bronchus and lung	ICD-10-CM	Diagnosis
Chronic bronchitis			
J41	Simple and mucopurulent chronic bronchitis	ICD-10-CM	Diagnosis
J41.0	Simple chronic bronchitis	ICD-10-CM	Diagnosis
J41.1	Mucopurulent chronic bronchitis	ICD-10-CM	Diagnosis
J41.8	Mixed simple and mucopurulent chronic bronchitis	ICD-10-CM	Diagnosis
J42	Unspecified chronic bronchitis	ICD-10-CM	Diagnosis
Emphysematous subtype			
J43	Emphysema	ICD-10-CM	Diagnosis
J43.1	Panlobular emphysema	ICD-10-CM	Diagnosis
J43.2	Centrilobular emphysema	ICD-10-CM	Diagnosis
J43.8	Other emphysema	ICD-10-CM	Diagnosis
J43.9	Emphysema, unspecified	ICD-10-CM	Diagnosis
Diabetes			
E10.10	Type 1 diabetes mellitus with ketoacidosis without coma	ICD-10-CM	Diagnosis
E10.11	Type 1 diabetes mellitus with ketoacidosis with coma	ICD-10-CM	Diagnosis
E10.21	Type 1 diabetes mellitus with diabetic nephropathy	ICD-10-CM	Diagnosis
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease	ICD-10-CM	Diagnosis
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication	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
E10.3211	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E10.3212	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E10.3213	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
E10.3219	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified 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
E10.3292	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E10.3293	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E10.3299	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E10.3311	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E10.3312	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E10.3313	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E10.3319	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E10.3391	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E10.3392	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E10.3393	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E10.3399	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E10.3411	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E10.3412	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E10.3413	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E10.3419	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E10.3491	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E10.3492	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E10.3493	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E10.3499	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E10.3511	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E10.3512	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E10.3513	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E10.3519	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
E10.3521	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	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
E10.3523	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	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
E10.3531	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	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
E10.3533	Type 1 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	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
E10.3541	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	ICD-10-CM	Diagnosis
E10.3542	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	ICD-10-CM	Diagnosis
E10.3543	Type 1 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	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
E10.3551	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, right eye	ICD-10-CM	Diagnosis
E10.3552	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, left eye	ICD-10-CM	Diagnosis
E10.3553	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	ICD-10-CM	Diagnosis
E10.3559	Type 1 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	ICD-10-CM	Diagnosis
E10.3591	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E10.3592	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E10.3593	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E10.3599	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E10.36	Type 1 diabetes mellitus with diabetic cataract	ICD-10-CM	Diagnosis
E10.37X1	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	ICD-10-CM	Diagnosis
E10.37X2	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	ICD-10-CM	Diagnosis
E10.37X3	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	ICD-10-CM	Diagnosis
E10.37X9	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	ICD-10-CM	Diagnosis
E10.39	Type 1 diabetes mellitus with other diabetic ophthalmic complication	ICD-10-CM	Diagnosis
E10.40	Type 1 diabetes mellitus with diabetic neuropathy, unspecified	ICD-10-CM	Diagnosis
E10.41	Type 1 diabetes mellitus with diabetic mononeuropathy	ICD-10-CM	Diagnosis
E10.42	Type 1 diabetes mellitus with diabetic polyneuropathy	ICD-10-CM	Diagnosis
E10.43	Type 1 diabetes mellitus with diabetic autonomic (poly)neuropathy	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
E10.44	Type 1 diabetes mellitus with diabetic amyotrophy	ICD-10-CM	Diagnosis
E10.49	Type 1 diabetes mellitus with other diabetic neurological complication	ICD-10-CM	Diagnosis
E10.51	Type 1 diabetes mellitus with diabetic peripheral angiopathy without gangrene	ICD-10-CM	Diagnosis
E10.52	Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene	ICD-10-CM	Diagnosis
E10.59	Type 1 diabetes mellitus with other circulatory complications	ICD-10-CM	Diagnosis
E10.610	Type 1 diabetes mellitus with diabetic neuropathic arthropathy	ICD-10-CM	Diagnosis
E10.618	Type 1 diabetes mellitus with other diabetic arthropathy	ICD-10-CM	Diagnosis
E10.620	Type 1 diabetes mellitus with diabetic dermatitis	ICD-10-CM	Diagnosis
E10.621	Type 1 diabetes mellitus with foot ulcer	ICD-10-CM	Diagnosis
E10.622	Type 1 diabetes mellitus with other skin ulcer	ICD-10-CM	Diagnosis
E10.628	Type 1 diabetes mellitus with other skin complications	ICD-10-CM	Diagnosis
E10.630	Type 1 diabetes mellitus with periodontal disease	ICD-10-CM	Diagnosis
E10.638	Type 1 diabetes mellitus with other oral complications	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
E10.65	Type 1 diabetes mellitus with hyperglycemia	ICD-10-CM	Diagnosis
E10.69	Type 1 diabetes mellitus with other specified complication	ICD-10-CM	Diagnosis
E10.8	Type 1 diabetes mellitus with unspecified complications	ICD-10-CM	Diagnosis
E10.9	Type 1 diabetes mellitus without complications	ICD-10-CM	Diagnosis
E11.00	Type 2 diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	ICD-10-CM	Diagnosis
E11.01	Type 2 diabetes mellitus with hyperosmolarity with coma	ICD-10-CM	Diagnosis
E11.10	Type 2 diabetes mellitus with ketoacidosis without coma	ICD-10-CM	Diagnosis
E11.11	Type 2 diabetes mellitus with ketoacidosis with coma	ICD-10-CM	Diagnosis
E11.21	Type 2 diabetes mellitus with diabetic nephropathy	ICD-10-CM	Diagnosis
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease	ICD-10-CM	Diagnosis
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication	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
E11.3211	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E11.3212	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E11.3213	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E11.3219	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E11.3291	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E11.3292	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E11.3293	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E11.3299	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E11.3311	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E11.3312	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
E11.3313	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E11.3319	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E11.3391	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E11.3392	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E11.3393	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E11.3399	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E11.3411	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E11.3412	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E11.3413	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E11.3419	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E11.3491	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E11.3492	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E11.3493	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E11.3499	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E11.3511	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E11.3512	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E11.3513	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E11.3519	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified 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
E11.3522	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left 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
E11.3529	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified 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
E11.3532	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	ICD-10-CM	Diagnosis
E11.3533	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
E11.3539	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	ICD-10-CM	Diagnosis
E11.3541	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	ICD-10-CM	Diagnosis
E11.3542	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	ICD-10-CM	Diagnosis
E11.3543	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	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
E11.3551	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, right eye	ICD-10-CM	Diagnosis
E11.3552	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, left eye	ICD-10-CM	Diagnosis
E11.3553	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	ICD-10-CM	Diagnosis
E11.3559	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	ICD-10-CM	Diagnosis
E11.3591	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E11.3592	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E11.3593	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E11.3599	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E11.36	Type 2 diabetes mellitus with diabetic cataract	ICD-10-CM	Diagnosis
E11.37X1	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	ICD-10-CM	Diagnosis
E11.37X2	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	ICD-10-CM	Diagnosis
E11.37X3	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	ICD-10-CM	Diagnosis
E11.37X9	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	ICD-10-CM	Diagnosis
E11.39	Type 2 diabetes mellitus with other diabetic ophthalmic complication	ICD-10-CM	Diagnosis
E11.40	Type 2 diabetes mellitus with diabetic neuropathy, unspecified	ICD-10-CM	Diagnosis
E11.41	Type 2 diabetes mellitus with diabetic mononeuropathy	ICD-10-CM	Diagnosis
E11.42	Type 2 diabetes mellitus with diabetic polyneuropathy	ICD-10-CM	Diagnosis
E11.43	Type 2 diabetes mellitus with diabetic autonomic (poly)neuropathy	ICD-10-CM	Diagnosis
E11.44	Type 2 diabetes mellitus with diabetic amyotrophy	ICD-10-CM	Diagnosis
E11.49	Type 2 diabetes mellitus with other diabetic neurological complication	ICD-10-CM	Diagnosis
E11.51	Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene	ICD-10-CM	Diagnosis
E11.52	Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene	ICD-10-CM	Diagnosis
E11.59	Type 2 diabetes mellitus with other circulatory complications	ICD-10-CM	Diagnosis
E11.610	Type 2 diabetes mellitus with diabetic neuropathic arthropathy	ICD-10-CM	Diagnosis
E11.618	Type 2 diabetes mellitus with other diabetic arthropathy	ICD-10-CM	Diagnosis
E11.620	Type 2 diabetes mellitus with diabetic dermatitis	ICD-10-CM	Diagnosis
E11.621	Type 2 diabetes mellitus with foot ulcer	ICD-10-CM	Diagnosis
E11.622	Type 2 diabetes mellitus with other skin ulcer	ICD-10-CM	Diagnosis
E11.628	Type 2 diabetes mellitus with other skin complications	ICD-10-CM	Diagnosis
E11.630	Type 2 diabetes mellitus with periodontal disease	ICD-10-CM	Diagnosis
E11.638	Type 2 diabetes mellitus with other oral complications	ICD-10-CM	Diagnosis
E11.641	Type 2 diabetes mellitus with hypoglycemia with coma	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
E11.649	Type 2 diabetes mellitus with hypoglycemia without coma	ICD-10-CM	Diagnosis
E11.65	Type 2 diabetes mellitus with hyperglycemia	ICD-10-CM	Diagnosis
E11.69	Type 2 diabetes mellitus with other specified complication	ICD-10-CM	Diagnosis
E11.8	Type 2 diabetes mellitus with unspecified complications	ICD-10-CM	Diagnosis
E11.9	Type 2 diabetes mellitus without complications	ICD-10-CM	Diagnosis
E13.00	Other specified diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	ICD-10-CM	Diagnosis
E13.01	Other specified diabetes mellitus with hyperosmolarity with coma	ICD-10-CM	Diagnosis
E13.10	Other specified diabetes mellitus with ketoacidosis without coma	ICD-10-CM	Diagnosis
E13.11	Other specified diabetes mellitus with ketoacidosis with coma	ICD-10-CM	Diagnosis
E13.21	Other specified diabetes mellitus with diabetic nephropathy	ICD-10-CM	Diagnosis
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease	ICD-10-CM	Diagnosis
E13.29	Other specified diabetes mellitus with other diabetic kidney complication	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
E13.3211	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E13.3212	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E13.3213	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3219	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.3291	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E13.3292	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E13.3293	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3299	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.3311	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E13.3312	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E13.3313	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3319	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.3391	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E13.3392	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E13.3393	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3399	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
E13.3411	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E13.3412	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E13.3413	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3419	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.3491	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E13.3492	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E13.3493	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3499	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.3511	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E13.3512	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E13.3513	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3519	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified 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
E13.3522	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left 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
E13.3529	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified 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
E13.3532	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left 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
E13.3539	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified 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
E13.3542	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	ICD-10-CM	Diagnosis
E13.3543	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	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
E13.3551	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, right eye	ICD-10-CM	Diagnosis
E13.3552	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, left eye	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure 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
E13.3559	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	ICD-10-CM	Diagnosis
E13.3591	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E13.3592	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E13.3593	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3599	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.36	Other specified diabetes mellitus with diabetic cataract	ICD-10-CM	Diagnosis
E13.37X1	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	ICD-10-CM	Diagnosis
E13.37X2	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	ICD-10-CM	Diagnosis
E13.37X3	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	ICD-10-CM	Diagnosis
E13.37X9	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	ICD-10-CM	Diagnosis
E13.39	Other specified diabetes mellitus with other diabetic ophthalmic complication	ICD-10-CM	Diagnosis
E13.40	Other specified diabetes mellitus with diabetic neuropathy, unspecified	ICD-10-CM	Diagnosis
E13.41	Other specified diabetes mellitus with diabetic mononeuropathy	ICD-10-CM	Diagnosis
E13.42	Other specified diabetes mellitus with diabetic polyneuropathy	ICD-10-CM	Diagnosis
E13.43	Other specified diabetes mellitus with diabetic autonomic (poly)neuropathy	ICD-10-CM	Diagnosis
E13.44	Other specified diabetes mellitus with diabetic amyotrophy	ICD-10-CM	Diagnosis
E13.49	Other specified diabetes mellitus with other diabetic neurological complication	ICD-10-CM	Diagnosis
E13.51	Other specified diabetes mellitus with diabetic peripheral angiopathy without gangrene	ICD-10-CM	Diagnosis
E13.52	Other specified diabetes mellitus with diabetic peripheral angiopathy with gangrene	ICD-10-CM	Diagnosis
E13.59	Other specified diabetes mellitus with other circulatory complications	ICD-10-CM	Diagnosis
E13.610	Other specified diabetes mellitus with diabetic neuropathic arthropathy	ICD-10-CM	Diagnosis
E13.618	Other specified diabetes mellitus with other diabetic arthropathy	ICD-10-CM	Diagnosis
E13.620	Other specified diabetes mellitus with diabetic dermatitis	ICD-10-CM	Diagnosis
E13.621	Other specified diabetes mellitus with foot ulcer	ICD-10-CM	Diagnosis
E13.622	Other specified diabetes mellitus with other skin ulcer	ICD-10-CM	Diagnosis
E13.628	Other specified diabetes mellitus with other skin complications	ICD-10-CM	Diagnosis
E13.630	Other specified diabetes mellitus with periodontal disease	ICD-10-CM	Diagnosis
E13.638	Other specified diabetes mellitus with other oral complications	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
E13.65	Other specified diabetes mellitus with hyperglycemia	ICD-10-CM	Diagnosis
E13.69	Other specified diabetes mellitus with other specified complication	ICD-10-CM	Diagnosis
E13.8	Other specified diabetes mellitus with unspecified complications	ICD-10-CM	Diagnosis
E13.9	Other specified diabetes mellitus without complications	ICD-10-CM	Diagnosis
O24319	Unspecified pre-existing diabetes mellitus in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O2432	Unspecified pre-existing diabetes mellitus in childbirth	ICD-10-CM	Diagnosis
O2492	Unspecified diabetes mellitus in childbirth	ICD-10-CM	Diagnosis
O24913	Unspecified diabetes mellitus in pregnancy, third trimester	ICD-10-CM	Diagnosis
O24912	Unspecified diabetes mellitus in pregnancy, second trimester	ICD-10-CM	Diagnosis
O24911	Unspecified diabetes mellitus in pregnancy, first trimester	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O2493	Unspecified diabetes mellitus in the puerperium	ICD-10-CM	Diagnosis
O24019	Pre-existing type 1 diabetes mellitus, in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O24919	Unspecified diabetes mellitus in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O24819	Other pre-existing diabetes mellitus in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O24119	Pre-existing type 2 diabetes mellitus, in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O24011	Pre-existing type 1 diabetes mellitus, in pregnancy, first trimester	ICD-10-CM	Diagnosis
O2482	Other pre-existing diabetes mellitus in childbirth	ICD-10-CM	Diagnosis
O24813	Other pre-existing diabetes mellitus in pregnancy, third trimester	ICD-10-CM	Diagnosis
O24812	Other pre-existing diabetes mellitus in pregnancy, second trimester	ICD-10-CM	Diagnosis
O24811	Other pre-existing diabetes mellitus in pregnancy, first trimester	ICD-10-CM	Diagnosis
O24313	Unspecified pre-existing diabetes mellitus in pregnancy, third trimester	ICD-10-CM	Diagnosis
O24312	Unspecified pre-existing diabetes mellitus in pregnancy, second trimester	ICD-10-CM	Diagnosis
O24311	Unspecified pre-existing diabetes mellitus in pregnancy, first trimester	ICD-10-CM	Diagnosis
O2412	Pre-existing type 2 diabetes mellitus, in childbirth	ICD-10-CM	Diagnosis
O24113	Pre-existing type 2 diabetes mellitus, in pregnancy, third trimester	ICD-10-CM	Diagnosis
O24112	Pre-existing type 2 diabetes mellitus, in pregnancy, second trimester	ICD-10-CM	Diagnosis
O24111	Pre-existing type 2 diabetes mellitus, in pregnancy, first trimester	ICD-10-CM	Diagnosis
O2402	Pre-existing type 1 diabetes mellitus, in childbirth	ICD-10-CM	Diagnosis
O24013	Pre-existing type 1 diabetes mellitus, in pregnancy, third trimester	ICD-10-CM	Diagnosis
O24012	Pre-existing type 1 diabetes mellitus, in pregnancy, second trimester	ICD-10-CM	Diagnosis
O2403	Pre-existing type 1 diabetes mellitus, in the puerperium	ICD-10-CM	Diagnosis
O2483	Other pre-existing diabetes mellitus in the puerperium	ICD-10-CM	Diagnosis
O2433	Unspecified pre-existing diabetes mellitus in the puerperium	ICD-10-CM	Diagnosis
O2413	Pre-existing type 2 diabetes mellitus, in the puerperium	ICD-10-CM	Diagnosis
O24.414	Gestational diabetes mellitus in pregnancy, insulin controlled	ICD-10-CM	Diagnosis
O24.415	Gestational diabetes mellitus in pregnancy, controlled by oral hypoglycemic drugs	ICD-10-CM	Diagnosis
O24.419	Gestational diabetes mellitus in pregnancy, unspecified control	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
O24.434	Gestational diabetes mellitus in the puerperium, insulin controlled	ICD-10-CM	Diagnosis
O24.435	Gestational diabetes mellitus in puerperium, controlled by oral hypoglycemic drugs	ICD-10-CM	Diagnosis
O24.439	Gestational diabetes mellitus in the puerperium, unspecified control	ICD-10-CM	Diagnosis
E08.610	Diabetes mellitus due to underlying condition with diabetic neuropathic arthropathy	ICD-10-CM	Diagnosis
E08.618	Diabetes mellitus due to underlying condition with other diabetic arthropathy	ICD-10-CM	Diagnosis
E09.610	Drug or chemical induced diabetes mellitus with diabetic neuropathic arthropathy	ICD-10-CM	Diagnosis
E09.618	Drug or chemical induced diabetes mellitus with other diabetic arthropathy	ICD-10-CM	Diagnosis
E10.610	Type 1 diabetes mellitus with diabetic neuropathic arthropathy	ICD-10-CM	Diagnosis
E10.618	Type 1 diabetes mellitus with other diabetic arthropathy	ICD-10-CM	Diagnosis
E11.610	Type 2 diabetes mellitus with diabetic neuropathic arthropathy	ICD-10-CM	Diagnosis
E11.618	Type 2 diabetes mellitus with other diabetic arthropathy	ICD-10-CM	Diagnosis
E13.610	Other specified diabetes mellitus with diabetic neuropathic arthropathy	ICD-10-CM	Diagnosis
E13.618	Other specified diabetes mellitus with other diabetic arthropathy	ICD-10-CM	Diagnosis
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy	ICD-10-CM	Diagnosis
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease	ICD-10-CM	Diagnosis
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication	ICD-10-CM	Diagnosis
E08.00	Diabetes mellitus due to underlying condition with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	ICD-10-CM	Diagnosis
E08.01	Diabetes mellitus due to underlying condition with hyperosmolarity with coma	ICD-10-CM	Diagnosis
E08.10	Diabetes mellitus due to underlying condition with ketoacidosis without coma	ICD-10-CM	Diagnosis
E08.11	Diabetes mellitus due to underlying condition with ketoacidosis with coma	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
E08.3211	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, right eye	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
E08.3213	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, bilateral	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
E08.3291	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, right eye	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
E08.3293	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, bilateral	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
E08.3311	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, right eye	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
E08.3313	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	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
E08.3391	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, right eye	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
E08.3393	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E08.3399	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, unspecified 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
E08.3412	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, left eye	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
E08.3419	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, unspecified 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
E08.3492	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, left eye	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
E08.3499	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, unspecified 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
E08.3512	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E08.3513	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E08.3519	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, unspecified 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
E08.3522	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	ICD-10-CM	Diagnosis
E08.3523	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	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
E08.3531	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	ICD-10-CM	Diagnosis
E08.3532	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	ICD-10-CM	Diagnosis
E08.3533	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	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
E08.3541	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
E08.3542	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
E08.3543	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	ICD-10-CM	Diagnosis
E08.3549	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
E08.3551	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, right eye	ICD-10-CM	Diagnosis
E08.3552	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, left eye	ICD-10-CM	Diagnosis
E08.3553	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, bilateral	ICD-10-CM	Diagnosis
E08.3559	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, unspecified 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
E08.3592	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E08.3593	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
E08.3599	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E08.36	Diabetes mellitus due to underlying condition with diabetic cataract	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
E08.37X2	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, left eye	ICD-10-CM	Diagnosis
E08.37X3	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, bilateral	ICD-10-CM	Diagnosis
E08.37X9	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, unspecified eye	ICD-10-CM	Diagnosis
E08.39	Diabetes mellitus due to underlying condition with other diabetic ophthalmic complication	ICD-10-CM	Diagnosis
E08.40	Diabetes mellitus due to underlying condition with diabetic neuropathy, unspecified	ICD-10-CM	Diagnosis
E08.41	Diabetes mellitus due to underlying condition with diabetic mononeuropathy	ICD-10-CM	Diagnosis
E08.42	Diabetes mellitus due to underlying condition with diabetic polyneuropathy	ICD-10-CM	Diagnosis
E08.43	Diabetes mellitus due to underlying condition with diabetic autonomic (poly)neuropathy	ICD-10-CM	Diagnosis
E08.44	Diabetes mellitus due to underlying condition with diabetic amyotrophy	ICD-10-CM	Diagnosis
E08.49	Diabetes mellitus due to underlying condition with other diabetic neurological complication	ICD-10-CM	Diagnosis
E08.51	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy without gangrene	ICD-10-CM	Diagnosis
E08.52	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy with gangrene	ICD-10-CM	Diagnosis
E08.59	Diabetes mellitus due to underlying condition with other circulatory complications	ICD-10-CM	Diagnosis
E08.610	Diabetes mellitus due to underlying condition with diabetic neuropathic arthropathy	ICD-10-CM	Diagnosis
E08.618	Diabetes mellitus due to underlying condition with other diabetic arthropathy	ICD-10-CM	Diagnosis
E08.620	Diabetes mellitus due to underlying condition with diabetic dermatitis	ICD-10-CM	Diagnosis
E08.621	Diabetes mellitus due to underlying condition with foot ulcer	ICD-10-CM	Diagnosis
E08.622	Diabetes mellitus due to underlying condition with other skin ulcer	ICD-10-CM	Diagnosis
E08.628	Diabetes mellitus due to underlying condition with other skin complications	ICD-10-CM	Diagnosis
E08.630	Diabetes mellitus due to underlying condition with periodontal disease	ICD-10-CM	Diagnosis
E08.638	Diabetes mellitus due to underlying condition with other oral complications	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
E08.65	Diabetes mellitus due to underlying condition with hyperglycemia	ICD-10-CM	Diagnosis
E08.69	Diabetes mellitus due to underlying condition with other specified complication	ICD-10-CM	Diagnosis
E08.8	Diabetes mellitus due to underlying condition with unspecified complications	ICD-10-CM	Diagnosis
E08.9	Diabetes mellitus due to underlying condition without complications	ICD-10-CM	Diagnosis
E09.00	Drug or chemical induced diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	ICD-10-CM	Diagnosis
E09.01	Drug or chemical induced diabetes mellitus with hyperosmolarity with coma	ICD-10-CM	Diagnosis
E09.10	Drug or chemical induced diabetes mellitus with ketoacidosis without coma	ICD-10-CM	Diagnosis
E09.11	Drug or chemical induced diabetes mellitus with ketoacidosis with coma	ICD-10-CM	Diagnosis
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy	ICD-10-CM	Diagnosis
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease	ICD-10-CM	Diagnosis
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
E09.3211	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	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
E09.3213	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	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
E09.3291	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	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
E09.3293	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	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
E09.3311	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	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
E09.3313	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	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
E09.3391	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	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
E09.3393	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	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
E09.3411	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	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
E09.3413	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	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
E09.3491	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	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
E09.3493	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	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
E09.3511	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
E09.3512	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E09.3513	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E09.3519	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified 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
E09.3522	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	ICD-10-CM	Diagnosis
E09.3523	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	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
E09.3531	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	ICD-10-CM	Diagnosis
E09.3532	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	ICD-10-CM	Diagnosis
E09.3533	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	ICD-10-CM	Diagnosis
E09.3539	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	ICD-10-CM	Diagnosis
E09.3541	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
E09.3542	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
E09.3543	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	ICD-10-CM	Diagnosis
E09.3549	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
E09.3551	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, right eye	ICD-10-CM	Diagnosis
E09.3552	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, left eye	ICD-10-CM	Diagnosis
E09.3553	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	ICD-10-CM	Diagnosis
E09.3559	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, unspecified 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
E09.3592	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E09.3593	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	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
E09.36	Drug or chemical induced diabetes mellitus with diabetic cataract	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
E09.37X2	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	ICD-10-CM	Diagnosis
E09.37X3	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	ICD-10-CM	Diagnosis
E09.37X9	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	ICD-10-CM	Diagnosis
E09.39	Drug or chemical induced diabetes mellitus with other diabetic ophthalmic complication	ICD-10-CM	Diagnosis
E09.40	Drug or chemical induced diabetes mellitus with neurological complications with diabetic neuropathy, unspecified	ICD-10-CM	Diagnosis
E09.41	Drug or chemical induced diabetes mellitus with neurological complications with diabetic mononeuropathy	ICD-10-CM	Diagnosis
E09.42	Drug or chemical induced diabetes mellitus with neurological complications with diabetic polyneuropathy	ICD-10-CM	Diagnosis
E09.43	Drug or chemical induced diabetes mellitus with neurological complications with diabetic autonomic (poly)neuropathy	ICD-10-CM	Diagnosis
E09.44	Drug or chemical induced diabetes mellitus with neurological complications with diabetic amyotrophy	ICD-10-CM	Diagnosis
E09.49	Drug or chemical induced diabetes mellitus with neurological complications with other diabetic neurological complication	ICD-10-CM	Diagnosis
E09.51	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy without gangrene	ICD-10-CM	Diagnosis
E09.52	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy with gangrene	ICD-10-CM	Diagnosis
E09.59	Drug or chemical induced diabetes mellitus with other circulatory complications	ICD-10-CM	Diagnosis
E09.610	Drug or chemical induced diabetes mellitus with diabetic neuropathic arthropathy	ICD-10-CM	Diagnosis
E09.618	Drug or chemical induced diabetes mellitus with other diabetic arthropathy	ICD-10-CM	Diagnosis
E09.620	Drug or chemical induced diabetes mellitus with diabetic dermatitis	ICD-10-CM	Diagnosis
E09.621	Drug or chemical induced diabetes mellitus with foot ulcer	ICD-10-CM	Diagnosis
E09.622	Drug or chemical induced diabetes mellitus with other skin ulcer	ICD-10-CM	Diagnosis
E09.628	Drug or chemical induced diabetes mellitus with other skin complications	ICD-10-CM	Diagnosis
E09.630	Drug or chemical induced diabetes mellitus with periodontal disease	ICD-10-CM	Diagnosis
E09.638	Drug or chemical induced diabetes mellitus with other oral complications	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
E09.65	Drug or chemical induced diabetes mellitus with hyperglycemia	ICD-10-CM	Diagnosis
E09.69	Drug or chemical induced diabetes mellitus with other specified complication	ICD-10-CM	Diagnosis
E09.8	Drug or chemical induced diabetes mellitus with unspecified complications	ICD-10-CM	Diagnosis
E09.9	Drug or chemical induced diabetes mellitus without complications	ICD-10-CM	Diagnosis
E13.00	Other specified diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	ICD-10-CM	Diagnosis
E13.01	Other specified diabetes mellitus with hyperosmolarity with coma	ICD-10-CM	Diagnosis
E13.10	Other specified diabetes mellitus with ketoacidosis without coma	ICD-10-CM	Diagnosis
E13.11	Other specified diabetes mellitus with ketoacidosis with coma	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
E13.3211	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
E13.3212	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E13.3213	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3219	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.3291	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E13.3292	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E13.3293	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3299	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.3311	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E13.3312	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E13.3313	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3319	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.3391	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E13.3392	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E13.3393	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3399	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.3411	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E13.3412	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis
E13.3413	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3419	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.3491	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E13.3492	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E13.3493	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3499	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.3511	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	ICD-10-CM	Diagnosis
E13.3512	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
E13.3513	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3519	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified 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
E13.3522	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left 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
E13.3529	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified 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
E13.3532	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left 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
E13.3539	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified 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
E13.3542	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	ICD-10-CM	Diagnosis
E13.3543	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	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
E13.3551	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, right eye	ICD-10-CM	Diagnosis
E13.3552	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, left eye	ICD-10-CM	Diagnosis
E13.3553	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	ICD-10-CM	Diagnosis
E13.3559	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	ICD-10-CM	Diagnosis
E13.3591	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	ICD-10-CM	Diagnosis
E13.3592	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	ICD-10-CM	Diagnosis
E13.3593	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	ICD-10-CM	Diagnosis
E13.3599	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	ICD-10-CM	Diagnosis
E13.36	Other specified diabetes mellitus with diabetic cataract	ICD-10-CM	Diagnosis
E13.37X1	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	ICD-10-CM	Diagnosis
E13.37X2	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	ICD-10-CM	Diagnosis
E13.37X3	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	ICD-10-CM	Diagnosis
E13.37X9	Other specified diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
E13.39	Other specified diabetes mellitus with other diabetic ophthalmic complication	ICD-10-CM	Diagnosis
E13.618	Other specified diabetes mellitus with other diabetic arthropathy	ICD-10-CM	Diagnosis
E13.620	Other specified diabetes mellitus with diabetic dermatitis	ICD-10-CM	Diagnosis
E13.621	Other specified diabetes mellitus with foot ulcer	ICD-10-CM	Diagnosis
E13.622	Other specified diabetes mellitus with other skin ulcer	ICD-10-CM	Diagnosis
E13.628	Other specified diabetes mellitus with other skin complications	ICD-10-CM	Diagnosis
E13.630	Other specified diabetes mellitus with periodontal disease	ICD-10-CM	Diagnosis
E13.638	Other specified diabetes mellitus with other oral complications	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
E13.65	Other specified diabetes mellitus with hyperglycemia	ICD-10-CM	Diagnosis
E13.69	Other specified diabetes mellitus with other specified complication	ICD-10-CM	Diagnosis
E13.9	Other specified diabetes mellitus without complications	ICD-10-CM	Diagnosis
Hypertension			
I10	Essential (primary) hypertension	ICD-10-CM	Diagnosis
I11.9	Hypertensive heart disease without heart failure	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
I12.9	Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney 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
I13.10	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
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
I15.0	Renovascular hypertension	ICD-10-CM	Diagnosis
I15.1	Hypertension secondary to other renal disorders	ICD-10-CM	Diagnosis
I15.2	Hypertension secondary to endocrine disorders	ICD-10-CM	Diagnosis
I15.8	Other secondary hypertension	ICD-10-CM	Diagnosis
I15.9	Secondary hypertension, unspecified	ICD-10-CM	Diagnosis
I16.0	Hypertensive urgency	ICD-10-CM	Diagnosis
I16.1	Hypertensive emergency	ICD-10-CM	Diagnosis
I16.9	Hypertensive crisis, unspecified	ICD-10-CM	Diagnosis
N26.2	Page kidney	ICD-10-CM	Diagnosis
Interstitial lung diseases			
J84	Other interstitial pulmonary diseases	ICD-10-CM	Diagnosis
J84.0	Alveolar and parieto-alveolar conditions	ICD-10-CM	Diagnosis
J84.01	Alveolar proteinosis	ICD-10-CM	Diagnosis
J84.02	Pulmonary alveolar microlithiasis	ICD-10-CM	Diagnosis
J84.03	Idiopathic pulmonary hemosiderosis	ICD-10-CM	Diagnosis
J84.09	Other alveolar and parieto-alveolar conditions	ICD-10-CM	Diagnosis
J84.1	Other interstitial pulmonary diseases with fibrosis	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
J84.114	Acute interstitial pneumonitis	ICD-10-CM	Diagnosis
J84.115	Respiratory bronchiolitis interstitial lung disease	ICD-10-CM	Diagnosis
J84.117	Desquamative interstitial pneumonia	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
J84.17	Other interstitial pulmonary diseases with fibrosis in diseases classified elsewhere	ICD-10-CM	Diagnosis
J84.2	Lymphoid interstitial pneumonia	ICD-10-CM	Diagnosis
J84.8	Other specified interstitial pulmonary diseases	ICD-10-CM	Diagnosis
J84.81	Lymphangioleiomyomatosis	ICD-10-CM	Diagnosis
J84.82	Adult pulmonary Langerhans cell histiocytosis	ICD-10-CM	Diagnosis
J84.83	Surfactant mutations of the lung	ICD-10-CM	Diagnosis
J84.84	Other interstitial lung diseases of childhood	ICD-10-CM	Diagnosis
J84.841	Neuroendocrine cell hyperplasia of infancy	ICD-10-CM	Diagnosis
J84.842	Pulmonary interstitial glycogenosis	ICD-10-CM	Diagnosis
J84.843	Alveolar capillary dysplasia with vein misalignment	ICD-10-CM	Diagnosis
J84.848	Other interstitial lung diseases of childhood	ICD-10-CM	Diagnosis
J84.89	Other specified interstitial pulmonary diseases	ICD-10-CM	Diagnosis
J84.9	Interstitial pulmonary disease, unspecified	ICD-10-CM	Diagnosis
Sarcoidosis			
D86	Sarcoidosis	ICD-10-CM	Diagnosis
D860	Sarcoidosis of lung	ICD-10-CM	Diagnosis
D861	Sarcoidosis of lymph nodes	ICD-10-CM	Diagnosis
D862	Sarcoidosis of lung with sarcoidosis of lymph nodes	ICD-10-CM	Diagnosis
D863	Sarcoidosis of skin	ICD-10-CM	Diagnosis
D868	Sarcoidosis of other sites	ICD-10-CM	Diagnosis
D8681	Sarcoid meningitis	ICD-10-CM	Diagnosis
D8682	Multiple cranial nerve palsies in sarcoidosis	ICD-10-CM	Diagnosis
D8683	Sarcoid iridocyclitis	ICD-10-CM	Diagnosis
D8684	Sarcoid pyelonephritis	ICD-10-CM	Diagnosis
D8685	Sarcoid myocarditis	ICD-10-CM	Diagnosis
D8686	Sarcoid arthropathy	ICD-10-CM	Diagnosis
D8687	Sarcoid myositis	ICD-10-CM	Diagnosis
D8689	Sarcoidosis of other sites	ICD-10-CM	Diagnosis
D869	Sarcoidosis, unspecified	ICD-10-CM	Diagnosis
Stroke or cerebrovascular disease			
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
I21.11	ST elevation (STEMI) myocardial infarction involving right coronary artery	ICD-10-CM	Diagnosis
I21.29	ST elevation (STEMI) myocardial infarction involving other sites	ICD-10-CM	Diagnosis
I21.4	Non-ST elevation (NSTEMI) myocardial infarction	ICD-10-CM	Diagnosis
I21.3	ST elevation (STEMI) myocardial infarction of unspecified site	ICD-10-CM	Diagnosis
I21.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery	ICD-10-CM	Diagnosis
I21.02	ST elevation (STEMI) myocardial infarction involving left anterior descending coronary artery	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
I22.2	Subsequent non-ST elevation (NSTEMI) myocardial infarction	ICD-10-CM	Diagnosis
I22.9	Subsequent ST elevation (STEMI) myocardial infarction of unspecified site	ICD-10-CM	Diagnosis
I21.21	ST elevation (STEMI) myocardial infarction involving left circumflex coronary artery	ICD-10-CM	Diagnosis
I63.22	Cerebral infarction due to unspecified occlusion or stenosis of basilar arteries	ICD-10-CM	Diagnosis
I63.139	Cerebral infarction due to embolism of unspecified carotid artery	ICD-10-CM	Diagnosis
I63.239	Cerebral infarction due to unspecified occlusion or stenosis of unspecified carotid arteries	ICD-10-CM	Diagnosis
I63.019	Cerebral infarction due to thrombosis of unspecified vertebral artery	ICD-10-CM	Diagnosis
I63.119	Cerebral infarction due to embolism of unspecified vertebral artery	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
I63.219	Cerebral infarction due to unspecified occlusion or stenosis of unspecified vertebral arteries	ICD-10-CM	Diagnosis
I63.59	Cerebral infarction due to unspecified occlusion or stenosis of other cerebral artery	ICD-10-CM	Diagnosis
I63.20	Cerebral infarction due to unspecified occlusion or stenosis of unspecified precerebral arteries	ICD-10-CM	Diagnosis
I63.30	Cerebral infarction due to thrombosis of unspecified cerebral artery	ICD-10-CM	Diagnosis
I63.40	Cerebral infarction due to embolism of unspecified cerebral artery	ICD-10-CM	Diagnosis
I63.50	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebral artery	ICD-10-CM	Diagnosis
I67.89	Other cerebrovascular disease	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
I63.02	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
I63.12	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
I63.133	Cerebral infarction due to embolism of bilateral carotid arteries	ICD-10-CM	Diagnosis
I63.19	Cerebral infarction due to embolism of other precerebral artery	ICD-10-CM	Diagnosis
I63.211	Cerebral infarction due to unspecified occlusion or stenosis of right vertebral arteries	ICD-10-CM	Diagnosis
I63.212	Cerebral infarction due to unspecified occlusion or stenosis of left vertebral arteries	ICD-10-CM	Diagnosis
I63.213	Cerebral infarction due to unspecified occlusion or stenosis of bilateral vertebral arteries	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
I63.29	Cerebral infarction due to unspecified occlusion or stenosis of other precerebral arteries	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 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 to thrombosis of bilateral posterior 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 to thrombosis of bilateral cerebellar arteries	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
I63.411	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
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
I63.511	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 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 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 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
I63.6	Cerebral infarction due to cerebral venous thrombosis, nonpyogenic	ICD-10-CM	Diagnosis
I63.8	Other cerebral infarction	ICD-10-CM	Diagnosis
I63.9	Cerebral infarction, unspecified	ICD-10-CM	Diagnosis
I11.0	Hypertensive heart disease with 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
I50.1	Left ventricular failure, unspecified	ICD-10-CM	Diagnosis
I50.20	Unspecified systolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.21	Acute systolic (congestive) heart failure	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
I50.22	Chronic systolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.23	Acute on chronic systolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.30	Unspecified diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.31	Acute diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.32	Chronic diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.33	Acute on chronic diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.40	Unspecified combined systolic (congestive) and diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.41	Acute combined systolic (congestive) and diastolic (congestive) heart failure	ICD-10-CM	Diagnosis
I50.42	Chronic combined systolic (congestive) and 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
I50.810	Right heart failure, unspecified	ICD-10-CM	Diagnosis
I50.811	Acute right heart failure	ICD-10-CM	Diagnosis
I50.812	Chronic right heart failure	ICD-10-CM	Diagnosis
I50.813	Acute on chronic right heart failure	ICD-10-CM	Diagnosis
I50.814	Right heart failure due to left heart failure	ICD-10-CM	Diagnosis
I50.82	Biventricular heart failure	ICD-10-CM	Diagnosis
I50.83	High output heart failure	ICD-10-CM	Diagnosis
I50.84	End stage heart failure	ICD-10-CM	Diagnosis
I50.89	Other heart failure	ICD-10-CM	Diagnosis
I50.9	Heart failure, unspecified	ICD-10-CM	Diagnosis
411.1	Intermediate coronary syndrome	ICD-10-CM	Diagnosis
I20.0	Unstable angina	ICD-10-CM	Diagnosis
I25.110	Atherosclerotic heart disease of native coronary artery with unstable angina pectoris	ICD-10-CM	Diagnosis
I25.700	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unstable angina pectoris	ICD-10-CM	Diagnosis
I25.710	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unstable 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
I25.730	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unstable angina pectoris	ICD-10-CM	Diagnosis
I25.750	Atherosclerosis of native coronary artery of transplanted heart with unstable angina	ICD-10-CM	Diagnosis
I25.760	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unstable angina	ICD-10-CM	Diagnosis
I25.790	Atherosclerosis of other coronary artery bypass graft(s) with unstable angina pectoris	ICD-10-CM	Diagnosis
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
G45.8	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
I60.20	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
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
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
I63.039	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
I63.119	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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 arteries	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 arteries	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 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 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
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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
I63.9	Cerebral infarction, unspecified	ICD-10-CM	Diagnosis
I66.01	Occlusion and stenosis of right middle cerebral artery	ICD-10-CM	Diagnosis
I66.02	Occlusion and stenosis of left middle cerebral artery	ICD-10-CM	Diagnosis
I66.03	Occlusion and stenosis of bilateral middle cerebral arteries	ICD-10-CM	Diagnosis
I66.09	Occlusion and stenosis of unspecified middle cerebral artery	ICD-10-CM	Diagnosis
I66.11	Occlusion and stenosis of right anterior cerebral artery	ICD-10-CM	Diagnosis
I66.12	Occlusion and stenosis of left anterior cerebral artery	ICD-10-CM	Diagnosis
I66.13	Occlusion and stenosis of bilateral anterior cerebral arteries	ICD-10-CM	Diagnosis
I66.19	Occlusion and stenosis of unspecified anterior cerebral artery	ICD-10-CM	Diagnosis
I66.21	Occlusion and stenosis of right posterior cerebral artery	ICD-10-CM	Diagnosis
I66.22	Occlusion and stenosis of left posterior cerebral artery	ICD-10-CM	Diagnosis
I66.23	Occlusion and stenosis of bilateral posterior cerebral arteries	ICD-10-CM	Diagnosis
I66.29	Occlusion and stenosis of unspecified posterior cerebral artery	ICD-10-CM	Diagnosis
I66.3	Occlusion and stenosis of cerebellar arteries	ICD-10-CM	Diagnosis
I66.8	Occlusion and stenosis of other cerebral arteries	ICD-10-CM	Diagnosis
I66.9	Occlusion and stenosis of unspecified cerebral artery	ICD-10-CM	Diagnosis
I67.841	Reversible cerebrovascular vasoconstriction syndrome	ICD-10-CM	Diagnosis
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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
I97.821	Postprocedural cerebrovascular infarction following other surgery	ICD-10-CM	Diagnosis
HIV			
B20	HUMAN IMMUNODEFICIENCY VIRUS HIV DISEASE	ICD-10-CM	Diagnosis
B9735	HIV TYPE 2 CAUSE OF DISEASE CLASSIFIED ELSEWHERE	ICD-10-CM	Diagnosis
D848	OTHER SPECIFIED IMMUNODEFICIENCIES	ICD-10-CM	Diagnosis
R75	INCONCLUSIVE LABORATORY EVIDENCE OF HIV	ICD-10-CM	Diagnosis
Z21	ASYMPTOMATIC HIV INFECTION STATUS	ICD-10-CM	Diagnosis
Cancer			
C00.0	Malignant neoplasm of external upper lip	ICD-10-CM	Diagnosis
C00.1	Malignant neoplasm of external lower lip	ICD-10-CM	Diagnosis
C00.2	Malignant neoplasm of external lip, unspecified	ICD-10-CM	Diagnosis
C00.3	Malignant neoplasm of upper lip, inner aspect	ICD-10-CM	Diagnosis
C00.4	Malignant neoplasm of lower lip, inner aspect	ICD-10-CM	Diagnosis
C00.5	Malignant neoplasm of lip, unspecified, inner aspect	ICD-10-CM	Diagnosis
C00.6	Malignant neoplasm of commissure of lip, unspecified	ICD-10-CM	Diagnosis
C00.8	Malignant neoplasm of overlapping sites of lip	ICD-10-CM	Diagnosis
C00.9	Malignant neoplasm of lip, unspecified	ICD-10-CM	Diagnosis
C01	Malignant neoplasm of base of tongue	ICD-10-CM	Diagnosis
C02.0	Malignant neoplasm of dorsal surface of tongue	ICD-10-CM	Diagnosis
C02.1	Malignant neoplasm of border of tongue	ICD-10-CM	Diagnosis
C02.2	Malignant neoplasm of ventral surface of tongue	ICD-10-CM	Diagnosis
C02.3	Malignant neoplasm of anterior two-thirds of tongue, part unspecified	ICD-10-CM	Diagnosis
C02.4	Malignant neoplasm of lingual tonsil	ICD-10-CM	Diagnosis
C02.8	Malignant neoplasm of overlapping sites of tongue	ICD-10-CM	Diagnosis
C02.9	Malignant neoplasm of tongue, unspecified	ICD-10-CM	Diagnosis
C03.0	Malignant neoplasm of upper gum	ICD-10-CM	Diagnosis
C03.1	Malignant neoplasm of lower gum	ICD-10-CM	Diagnosis
C03.9	Malignant neoplasm of gum, unspecified	ICD-10-CM	Diagnosis
C04.0	Malignant neoplasm of anterior floor of mouth	ICD-10-CM	Diagnosis
C04.1	Malignant neoplasm of lateral floor of mouth	ICD-10-CM	Diagnosis
C04.8	Malignant neoplasm of overlapping sites of floor of mouth	ICD-10-CM	Diagnosis
C04.9	Malignant neoplasm of floor of mouth, unspecified	ICD-10-CM	Diagnosis
C05.0	Malignant neoplasm of hard palate	ICD-10-CM	Diagnosis
C05.1	Malignant neoplasm of soft palate	ICD-10-CM	Diagnosis
C05.2	Malignant neoplasm of uvula	ICD-10-CM	Diagnosis
C05.8	Malignant neoplasm of overlapping sites of palate	ICD-10-CM	Diagnosis
C05.9	Malignant neoplasm of palate, unspecified	ICD-10-CM	Diagnosis
C06.0	Malignant neoplasm of cheek mucosa	ICD-10-CM	Diagnosis
C06.1	Malignant neoplasm of vestibule of mouth	ICD-10-CM	Diagnosis
C06.2	Malignant neoplasm of retromolar area	ICD-10-CM	Diagnosis
C06.80	Malignant neoplasm of overlapping sites of unspecified parts of mouth	ICD-10-CM	Diagnosis
C06.89	Malignant neoplasm of overlapping sites of other parts of mouth	ICD-10-CM	Diagnosis
C06.9	Malignant neoplasm of mouth, unspecified	ICD-10-CM	Diagnosis
C07	Malignant neoplasm of parotid gland	ICD-10-CM	Diagnosis
C08.0	Malignant neoplasm of submandibular gland	ICD-10-CM	Diagnosis
C08.1	Malignant neoplasm of sublingual gland	ICD-10-CM	Diagnosis
C08.9	Malignant neoplasm of major salivary gland, unspecified	ICD-10-CM	Diagnosis
C09.0	Malignant neoplasm of tonsillar fossa	ICD-10-CM	Diagnosis
C09.1	Malignant neoplasm of tonsillar pillar (anterior) (posterior)	ICD-10-CM	Diagnosis
C09.8	Malignant neoplasm of overlapping sites of tonsil	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
C09.9	Malignant neoplasm of tonsil, unspecified	ICD-10-CM	Diagnosis
C10.0	Malignant neoplasm of vallecula	ICD-10-CM	Diagnosis
C10.1	Malignant neoplasm of anterior surface of epiglottis	ICD-10-CM	Diagnosis
C10.2	Malignant neoplasm of lateral wall of oropharynx	ICD-10-CM	Diagnosis
C10.3	Malignant neoplasm of posterior wall of oropharynx	ICD-10-CM	Diagnosis
C10.4	Malignant neoplasm of branchial cleft	ICD-10-CM	Diagnosis
C10.8	Malignant neoplasm of overlapping sites of oropharynx	ICD-10-CM	Diagnosis
C10.9	Malignant neoplasm of oropharynx, unspecified	ICD-10-CM	Diagnosis
C11.0	Malignant neoplasm of superior wall of nasopharynx	ICD-10-CM	Diagnosis
C11.1	Malignant neoplasm of posterior wall of nasopharynx	ICD-10-CM	Diagnosis
C11.2	Malignant neoplasm of lateral wall of nasopharynx	ICD-10-CM	Diagnosis
C11.3	Malignant neoplasm of anterior wall of nasopharynx	ICD-10-CM	Diagnosis
C11.8	Malignant neoplasm of overlapping sites of nasopharynx	ICD-10-CM	Diagnosis
C11.9	Malignant neoplasm of nasopharynx, unspecified	ICD-10-CM	Diagnosis
C12	Malignant neoplasm of pyriform sinus	ICD-10-CM	Diagnosis
C13.0	Malignant neoplasm of postcricoid region	ICD-10-CM	Diagnosis
C13.1	Malignant neoplasm of aryepiglottic fold, hypopharyngeal aspect	ICD-10-CM	Diagnosis
C13.2	Malignant neoplasm of posterior wall of hypopharynx	ICD-10-CM	Diagnosis
C13.8	Malignant neoplasm of overlapping sites of hypopharynx	ICD-10-CM	Diagnosis
C13.9	Malignant neoplasm of hypopharynx, unspecified	ICD-10-CM	Diagnosis
C14.0	Malignant neoplasm of pharynx, unspecified	ICD-10-CM	Diagnosis
C14.2	Malignant neoplasm of Waldeyer's ring	ICD-10-CM	Diagnosis
C14.8	Malignant neoplasm of overlapping sites of lip, oral cavity and pharynx	ICD-10-CM	Diagnosis
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
C16.0	Malignant neoplasm of cardia	ICD-10-CM	Diagnosis
C16.1	Malignant neoplasm of fundus of stomach	ICD-10-CM	Diagnosis
C16.2	Malignant neoplasm of body of stomach	ICD-10-CM	Diagnosis
C16.3	Malignant neoplasm of pyloric antrum	ICD-10-CM	Diagnosis
C16.4	Malignant neoplasm of pylorus	ICD-10-CM	Diagnosis
C16.5	Malignant neoplasm of lesser curvature of stomach, unspecified	ICD-10-CM	Diagnosis
C16.6	Malignant neoplasm of greater curvature of stomach, unspecified	ICD-10-CM	Diagnosis
C16.8	Malignant neoplasm of overlapping sites of stomach	ICD-10-CM	Diagnosis
C16.9	Malignant neoplasm of stomach, unspecified	ICD-10-CM	Diagnosis
C17.0	Malignant neoplasm of duodenum	ICD-10-CM	Diagnosis
C17.1	Malignant neoplasm of jejunum	ICD-10-CM	Diagnosis
C17.2	Malignant neoplasm of ileum	ICD-10-CM	Diagnosis
C17.3	Meckel's diverticulum, malignant	ICD-10-CM	Diagnosis
C17.8	Malignant neoplasm of overlapping sites of small intestine	ICD-10-CM	Diagnosis
C17.9	Malignant neoplasm of small intestine, 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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
C22.0	Liver cell carcinoma	ICD-10-CM	Diagnosis
C22.1	Intrahepatic bile duct carcinoma	ICD-10-CM	Diagnosis
C22.2	Hepatoblastoma	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
C22.9	Malignant neoplasm of liver, not specified as primary or secondary	ICD-10-CM	Diagnosis
C23	Malignant neoplasm of gallbladder	ICD-10-CM	Diagnosis
C24.0	Malignant neoplasm of extrahepatic bile duct	ICD-10-CM	Diagnosis
C24.1	Malignant neoplasm of ampulla of Vater	ICD-10-CM	Diagnosis
C24.8	Malignant neoplasm of overlapping sites of biliary tract	ICD-10-CM	Diagnosis
C24.9	Malignant neoplasm of biliary tract, unspecified	ICD-10-CM	Diagnosis
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
C26.0	Malignant neoplasm of intestinal tract, part unspecified	ICD-10-CM	Diagnosis
C26.1	Malignant neoplasm of spleen	ICD-10-CM	Diagnosis
C26.9	Malignant neoplasm of ill-defined sites within the digestive system	ICD-10-CM	Diagnosis
C30.0	Malignant neoplasm of nasal cavity	ICD-10-CM	Diagnosis
C30.1	Malignant neoplasm of middle ear	ICD-10-CM	Diagnosis
C31.0	Malignant neoplasm of maxillary sinus	ICD-10-CM	Diagnosis
C31.1	Malignant neoplasm of ethmoidal sinus	ICD-10-CM	Diagnosis
C31.2	Malignant neoplasm of frontal sinus	ICD-10-CM	Diagnosis
C31.3	Malignant neoplasm of sphenoid sinus	ICD-10-CM	Diagnosis
C31.8	Malignant neoplasm of overlapping sites of accessory sinuses	ICD-10-CM	Diagnosis
C31.9	Malignant neoplasm of accessory sinus, unspecified	ICD-10-CM	Diagnosis
C32.0	Malignant neoplasm of glottis	ICD-10-CM	Diagnosis
C32.1	Malignant neoplasm of supraglottis	ICD-10-CM	Diagnosis
C32.2	Malignant neoplasm of subglottis	ICD-10-CM	Diagnosis
C32.3	Malignant neoplasm of laryngeal cartilage	ICD-10-CM	Diagnosis
C32.8	Malignant neoplasm of overlapping sites of larynx	ICD-10-CM	Diagnosis
C32.9	Malignant neoplasm of larynx, unspecified	ICD-10-CM	Diagnosis
C33	Malignant neoplasm of trachea	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
C37	Malignant neoplasm of thymus	ICD-10-CM	Diagnosis
C38.0	Malignant neoplasm of heart	ICD-10-CM	Diagnosis
C38.1	Malignant neoplasm of anterior mediastinum	ICD-10-CM	Diagnosis
C38.2	Malignant neoplasm of posterior mediastinum	ICD-10-CM	Diagnosis
C38.3	Malignant neoplasm of mediastinum, part unspecified	ICD-10-CM	Diagnosis
C38.4	Malignant neoplasm of pleura	ICD-10-CM	Diagnosis
C38.8	Malignant neoplasm of overlapping sites of heart, mediastinum and pleura	ICD-10-CM	Diagnosis
C39.0	Malignant neoplasm of upper respiratory tract, part unspecified	ICD-10-CM	Diagnosis
C39.9	Malignant neoplasm of lower respiratory tract, part unspecified	ICD-10-CM	Diagnosis
C40.00	Malignant neoplasm of scapula and long bones of unspecified upper limb	ICD-10-CM	Diagnosis
C40.01	Malignant neoplasm of scapula and long bones of right upper limb	ICD-10-CM	Diagnosis
C40.02	Malignant neoplasm of scapula and long bones of left upper limb	ICD-10-CM	Diagnosis
C40.10	Malignant neoplasm of short bones of unspecified upper limb	ICD-10-CM	Diagnosis
C40.11	Malignant neoplasm of short bones of right upper limb	ICD-10-CM	Diagnosis
C40.12	Malignant neoplasm of short bones of left upper limb	ICD-10-CM	Diagnosis
C40.20	Malignant neoplasm of long bones of unspecified lower limb	ICD-10-CM	Diagnosis
C40.21	Malignant neoplasm of long bones of right lower limb	ICD-10-CM	Diagnosis
C40.22	Malignant neoplasm of long bones of left lower limb	ICD-10-CM	Diagnosis
C40.30	Malignant neoplasm of short bones of unspecified lower limb	ICD-10-CM	Diagnosis
C40.31	Malignant neoplasm of short bones of right lower limb	ICD-10-CM	Diagnosis
C40.32	Malignant neoplasm of short bones of left lower limb	ICD-10-CM	Diagnosis
C40.80	Malignant neoplasm of overlapping sites of bone and articular cartilage of unspecified limb	ICD-10-CM	Diagnosis
C40.81	Malignant neoplasm of overlapping sites of bone and articular cartilage of right limb	ICD-10-CM	Diagnosis
C40.82	Malignant neoplasm of overlapping sites of bone and articular cartilage of left limb	ICD-10-CM	Diagnosis
C40.90	Malignant neoplasm of unspecified bones and articular cartilage of unspecified limb	ICD-10-CM	Diagnosis
C40.91	Malignant neoplasm of unspecified bones and articular cartilage of right limb	ICD-10-CM	Diagnosis
C40.92	Malignant neoplasm of unspecified bones and articular cartilage of left limb	ICD-10-CM	Diagnosis
C41.0	Malignant neoplasm of bones of skull and face	ICD-10-CM	Diagnosis
C41.1	Malignant neoplasm of mandible	ICD-10-CM	Diagnosis
C41.2	Malignant neoplasm of vertebral column	ICD-10-CM	Diagnosis
C41.3	Malignant neoplasm of ribs, sternum and clavicle	ICD-10-CM	Diagnosis
C41.4	Malignant neoplasm of pelvic bones, sacrum and coccyx	ICD-10-CM	Diagnosis
C41.9	Malignant neoplasm of bone and articular cartilage, unspecified	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
C43.8	Malignant melanoma of overlapping sites of skin	ICD-10-CM	Diagnosis
C43.9	Malignant melanoma of skin, unspecified	ICD-10-CM	Diagnosis
C44.00	Unspecified malignant neoplasm of skin of lip	ICD-10-CM	Diagnosis
C44.09	Other specified malignant neoplasm of skin of lip	ICD-10-CM	Diagnosis
C44.101	Unspecified malignant neoplasm of skin of unspecified eyelid, including canthus	ICD-10-CM	Diagnosis
C44.102	Unspecified malignant neoplasm of skin of right eyelid, including canthus	ICD-10-CM	Diagnosis
C44.109	Unspecified malignant neoplasm of skin of left eyelid, including canthus	ICD-10-CM	Diagnosis
C44.191	Other specified malignant neoplasm of skin of unspecified eyelid, including canthus	ICD-10-CM	Diagnosis
C44.192	Other specified malignant neoplasm of skin of right eyelid, including canthus	ICD-10-CM	Diagnosis
C44.199	Other specified malignant neoplasm of skin of left eyelid, including canthus	ICD-10-CM	Diagnosis
C44.201	Unspecified malignant neoplasm of skin of unspecified ear and external auricular canal	ICD-10-CM	Diagnosis
C44.202	Unspecified malignant neoplasm of skin of right ear and external auricular canal	ICD-10-CM	Diagnosis
C44.209	Unspecified malignant neoplasm of skin of left ear and external auricular canal	ICD-10-CM	Diagnosis
C44.291	Other specified malignant neoplasm of skin of unspecified ear and external auricular canal	ICD-10-CM	Diagnosis
C44.292	Other specified malignant neoplasm of skin of right ear and external auricular canal	ICD-10-CM	Diagnosis
C44.299	Other specified malignant neoplasm of skin of left ear and external auricular canal	ICD-10-CM	Diagnosis
C44.300	Unspecified malignant neoplasm of skin of unspecified part of face	ICD-10-CM	Diagnosis
C44.301	Unspecified malignant neoplasm of skin of nose	ICD-10-CM	Diagnosis
C44.309	Unspecified malignant neoplasm of skin of other parts of face	ICD-10-CM	Diagnosis
C44.390	Other specified malignant neoplasm of skin of unspecified parts of face	ICD-10-CM	Diagnosis
C44.391	Other specified malignant neoplasm of skin of nose	ICD-10-CM	Diagnosis
C44.399	Other specified malignant neoplasm of skin of other parts of face	ICD-10-CM	Diagnosis
C44.40	Unspecified malignant neoplasm of skin of scalp and neck	ICD-10-CM	Diagnosis
C44.49	Other specified malignant neoplasm of skin of scalp and neck	ICD-10-CM	Diagnosis
C44.500	Unspecified malignant neoplasm of anal skin	ICD-10-CM	Diagnosis
C44.501	Unspecified malignant neoplasm of skin of breast	ICD-10-CM	Diagnosis
C44.509	Unspecified malignant neoplasm of skin of other part of trunk	ICD-10-CM	Diagnosis
C44.590	Other specified malignant neoplasm of anal skin	ICD-10-CM	Diagnosis
C44.591	Other specified malignant neoplasm of skin of breast	ICD-10-CM	Diagnosis
C44.599	Other specified malignant neoplasm of skin of other part of trunk	ICD-10-CM	Diagnosis
C44.601	Unspecified malignant neoplasm of skin of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
C44.602	Unspecified malignant neoplasm of skin of right upper limb, including shoulder	ICD-10-CM	Diagnosis
C44.609	Unspecified malignant neoplasm of skin of left upper limb, including shoulder	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
C44.691	Other specified malignant neoplasm of skin of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
C44.692	Other specified malignant neoplasm of skin of right upper limb, including shoulder	ICD-10-CM	Diagnosis
C44.699	Other specified malignant neoplasm of skin of left upper limb, including shoulder	ICD-10-CM	Diagnosis
C44.701	Unspecified malignant neoplasm of skin of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
C44.702	Unspecified malignant neoplasm of skin of right lower limb, including hip	ICD-10-CM	Diagnosis
C44.709	Unspecified malignant neoplasm of skin of left lower limb, including hip	ICD-10-CM	Diagnosis
C44.791	Other specified malignant neoplasm of skin of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
C44.792	Other specified malignant neoplasm of skin of right lower limb, including hip	ICD-10-CM	Diagnosis
C44.799	Other specified malignant neoplasm of skin of left lower limb, including hip	ICD-10-CM	Diagnosis
C44.80	Unspecified malignant neoplasm of overlapping sites of skin	ICD-10-CM	Diagnosis
C44.89	Other specified malignant neoplasm of overlapping sites of skin	ICD-10-CM	Diagnosis
C44.90	Unspecified malignant neoplasm of skin, unspecified	ICD-10-CM	Diagnosis
C44.99	Other specified malignant neoplasm of skin, unspecified	ICD-10-CM	Diagnosis
C45.0	Mesothelioma of pleura	ICD-10-CM	Diagnosis
C45.1	Mesothelioma of peritoneum	ICD-10-CM	Diagnosis
C45.2	Mesothelioma of pericardium	ICD-10-CM	Diagnosis
C45.7	Mesothelioma of other sites	ICD-10-CM	Diagnosis
C45.9	Mesothelioma, unspecified	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
C46.50	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
C47.0	Malignant neoplasm of peripheral nerves of head, face and neck	ICD-10-CM	Diagnosis
C47.10	Malignant neoplasm of peripheral nerves of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
C47.11	Malignant neoplasm of peripheral nerves of right upper limb, including shoulder	ICD-10-CM	Diagnosis
C47.12	Malignant neoplasm of peripheral nerves of left upper limb, including shoulder	ICD-10-CM	Diagnosis
C47.20	Malignant neoplasm of peripheral nerves of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
C47.21	Malignant neoplasm of peripheral nerves of right lower limb, including hip	ICD-10-CM	Diagnosis
C47.22	Malignant neoplasm of peripheral nerves of left lower limb, including hip	ICD-10-CM	Diagnosis
C47.3	Malignant neoplasm of peripheral nerves of thorax	ICD-10-CM	Diagnosis
C47.4	Malignant neoplasm of peripheral nerves of abdomen	ICD-10-CM	Diagnosis
C47.5	Malignant neoplasm of peripheral nerves of pelvis	ICD-10-CM	Diagnosis
C47.6	Malignant neoplasm of peripheral nerves of trunk, unspecified	ICD-10-CM	Diagnosis
C47.8	Malignant neoplasm of overlapping sites of peripheral nerves and autonomic nervous system	ICD-10-CM	Diagnosis
C47.9	Malignant neoplasm of peripheral nerves and autonomic nervous system, unspecified	ICD-10-CM	Diagnosis
C48.0	Malignant neoplasm of retroperitoneum	ICD-10-CM	Diagnosis
C48.1	Malignant neoplasm of specified parts of peritoneum	ICD-10-CM	Diagnosis
C48.2	Malignant neoplasm of peritoneum, unspecified	ICD-10-CM	Diagnosis
C48.8	Malignant neoplasm of overlapping sites of retroperitoneum and peritoneum	ICD-10-CM	Diagnosis
C49.0	Malignant neoplasm of connective and soft tissue of head, face and neck	ICD-10-CM	Diagnosis
C49.10	Malignant neoplasm of connective and soft tissue of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
C49.11	Malignant neoplasm of connective and soft tissue of right upper limb, including shoulder	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
C49.12	Malignant neoplasm of connective and soft tissue of left upper limb, including shoulder	ICD-10-CM	Diagnosis
C49.20	Malignant neoplasm of connective and soft tissue of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
C49.21	Malignant neoplasm of connective and soft tissue of right lower limb, including hip	ICD-10-CM	Diagnosis
C49.22	Malignant neoplasm of connective and soft tissue of left lower limb, including hip	ICD-10-CM	Diagnosis
C49.3	Malignant neoplasm of connective and soft tissue of thorax	ICD-10-CM	Diagnosis
C49.4	Malignant neoplasm of connective and soft tissue of abdomen	ICD-10-CM	Diagnosis
C49.5	Malignant neoplasm of connective and soft tissue of pelvis	ICD-10-CM	Diagnosis
C49.6	Malignant neoplasm of connective and soft tissue of trunk, unspecified	ICD-10-CM	Diagnosis
C49.8	Malignant neoplasm of overlapping sites of connective and soft tissue	ICD-10-CM	Diagnosis
C49.9	Malignant neoplasm of connective and soft tissue, unspecified	ICD-10-CM	Diagnosis
C49.A0	Gastrointestinal stromal tumor, unspecified site	ICD-10-CM	Diagnosis
C49.A1	Gastrointestinal stromal tumor of esophagus	ICD-10-CM	Diagnosis
C49.A2	Gastrointestinal stromal tumor of stomach	ICD-10-CM	Diagnosis
C49.A3	Gastrointestinal stromal tumor of small intestine	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
C49.A9	Gastrointestinal stromal tumor of other sites	ICD-10-CM	Diagnosis
C4A.0	Merkel cell carcinoma of lip	ICD-10-CM	Diagnosis
C4A.10	Merkel cell carcinoma of unspecified eyelid, including canthus	ICD-10-CM	Diagnosis
C4A.11	Merkel cell carcinoma of right eyelid, including canthus	ICD-10-CM	Diagnosis
C4A.12	Merkel cell carcinoma of left eyelid, including canthus	ICD-10-CM	Diagnosis
C4A.20	Merkel cell carcinoma of unspecified ear and external auricular canal	ICD-10-CM	Diagnosis
C4A.21	Merkel cell carcinoma of right ear and external auricular canal	ICD-10-CM	Diagnosis
C4A.22	Merkel cell carcinoma of left ear and external auricular canal	ICD-10-CM	Diagnosis
C4A.30	Merkel cell carcinoma of unspecified part of face	ICD-10-CM	Diagnosis
C4A.31	Merkel cell carcinoma of nose	ICD-10-CM	Diagnosis
C4A.39	Merkel cell carcinoma of other parts of face	ICD-10-CM	Diagnosis
C4A.4	Merkel cell carcinoma of scalp and neck	ICD-10-CM	Diagnosis
C4A.51	Merkel cell carcinoma of anal skin	ICD-10-CM	Diagnosis
C4A.52	Merkel cell carcinoma of skin of breast	ICD-10-CM	Diagnosis
C4A.59	Merkel cell carcinoma of other part of trunk	ICD-10-CM	Diagnosis
C4A.60	Merkel cell carcinoma of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
C4A.61	Merkel cell carcinoma of right upper limb, including shoulder	ICD-10-CM	Diagnosis
C4A.62	Merkel cell carcinoma of left upper limb, including shoulder	ICD-10-CM	Diagnosis
C4A.70	Merkel cell carcinoma of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
C4A.71	Merkel cell carcinoma of right lower limb, including hip	ICD-10-CM	Diagnosis
C4A.72	Merkel cell carcinoma of left lower limb, including hip	ICD-10-CM	Diagnosis
C4A.8	Merkel cell carcinoma of overlapping sites	ICD-10-CM	Diagnosis
C4A.9	Merkel cell carcinoma, 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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
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
C51.0	Malignant neoplasm of labium majus	ICD-10-CM	Diagnosis
C51.1	Malignant neoplasm of labium minus	ICD-10-CM	Diagnosis
C51.2	Malignant neoplasm of clitoris	ICD-10-CM	Diagnosis
C51.8	Malignant neoplasm of overlapping sites of vulva	ICD-10-CM	Diagnosis
C51.9	Malignant neoplasm of vulva, unspecified	ICD-10-CM	Diagnosis
C52	Malignant neoplasm of vagina	ICD-10-CM	Diagnosis
C53.0	Malignant neoplasm of endocervix	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
C56.1	Malignant neoplasm of right ovary	ICD-10-CM	Diagnosis
C56.2	Malignant neoplasm of left ovary	ICD-10-CM	Diagnosis
C56.9	Malignant neoplasm of unspecified ovary	ICD-10-CM	Diagnosis
C57.00	Malignant neoplasm of unspecified fallopian tube	ICD-10-CM	Diagnosis
C57.01	Malignant neoplasm of right fallopian tube	ICD-10-CM	Diagnosis
C57.02	Malignant neoplasm of left fallopian tube	ICD-10-CM	Diagnosis
C57.10	Malignant neoplasm of unspecified broad ligament	ICD-10-CM	Diagnosis
C57.11	Malignant neoplasm of right broad ligament	ICD-10-CM	Diagnosis
C57.12	Malignant neoplasm of left broad ligament	ICD-10-CM	Diagnosis
C57.20	Malignant neoplasm of unspecified round ligament	ICD-10-CM	Diagnosis
C57.21	Malignant neoplasm of right round ligament	ICD-10-CM	Diagnosis
C57.22	Malignant neoplasm of left round ligament	ICD-10-CM	Diagnosis
C57.3	Malignant neoplasm of parametrium	ICD-10-CM	Diagnosis
C57.4	Malignant neoplasm of uterine adnexa, unspecified	ICD-10-CM	Diagnosis
C57.7	Malignant neoplasm of other specified female genital organs	ICD-10-CM	Diagnosis
C57.8	Malignant neoplasm of overlapping sites of female genital organs	ICD-10-CM	Diagnosis
C57.9	Malignant neoplasm of female genital organ, unspecified	ICD-10-CM	Diagnosis
C58	Malignant neoplasm of placenta	ICD-10-CM	Diagnosis
C60.0	Malignant neoplasm of prepuce	ICD-10-CM	Diagnosis
C60.1	Malignant neoplasm of glans penis	ICD-10-CM	Diagnosis
C60.2	Malignant neoplasm of body of penis	ICD-10-CM	Diagnosis
C60.8	Malignant neoplasm of overlapping sites of penis	ICD-10-CM	Diagnosis
C60.9	Malignant neoplasm of penis, unspecified	ICD-10-CM	Diagnosis
C61	Malignant neoplasm of prostate	ICD-10-CM	Diagnosis
C62.00	Malignant neoplasm of unspecified undescended testis	ICD-10-CM	Diagnosis
C62.01	Malignant neoplasm of undescended right testis	ICD-10-CM	Diagnosis
C62.02	Malignant neoplasm of undescended left testis	ICD-10-CM	Diagnosis
C62.10	Malignant neoplasm of unspecified descended testis	ICD-10-CM	Diagnosis
C62.11	Malignant neoplasm of descended right testis	ICD-10-CM	Diagnosis
C62.12	Malignant neoplasm of descended left testis	ICD-10-CM	Diagnosis
C62.90	Malignant neoplasm of unspecified testis, unspecified whether descended or undescended	ICD-10-CM	Diagnosis
C62.91	Malignant neoplasm of right testis, unspecified whether descended or undescended	ICD-10-CM	Diagnosis
C62.92	Malignant neoplasm of left testis, unspecified whether descended or undescended	ICD-10-CM	Diagnosis
C63.00	Malignant neoplasm of unspecified epididymis	ICD-10-CM	Diagnosis
C63.01	Malignant neoplasm of right epididymis	ICD-10-CM	Diagnosis
C63.02	Malignant neoplasm of left epididymis	ICD-10-CM	Diagnosis
C63.10	Malignant neoplasm of unspecified spermatic cord	ICD-10-CM	Diagnosis
C63.11	Malignant neoplasm of right spermatic cord	ICD-10-CM	Diagnosis
C63.12	Malignant neoplasm of left spermatic cord	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
C63.2	Malignant neoplasm of scrotum	ICD-10-CM	Diagnosis
C63.7	Malignant neoplasm of other specified male genital organs	ICD-10-CM	Diagnosis
C63.8	Malignant neoplasm of overlapping sites of male genital organs	ICD-10-CM	Diagnosis
C63.9	Malignant neoplasm of male genital organ, unspecified	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
C66.1	Malignant neoplasm of right ureter	ICD-10-CM	Diagnosis
C66.2	Malignant neoplasm of left ureter	ICD-10-CM	Diagnosis
C66.9	Malignant neoplasm of unspecified ureter	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
C68.0	Malignant neoplasm of urethra	ICD-10-CM	Diagnosis
C68.1	Malignant neoplasm of paraurethral glands	ICD-10-CM	Diagnosis
C68.8	Malignant neoplasm of overlapping sites of urinary organs	ICD-10-CM	Diagnosis
C68.9	Malignant neoplasm of urinary organ, unspecified	ICD-10-CM	Diagnosis
C69.00	Malignant neoplasm of unspecified conjunctiva	ICD-10-CM	Diagnosis
C69.01	Malignant neoplasm of right conjunctiva	ICD-10-CM	Diagnosis
C69.02	Malignant neoplasm of left conjunctiva	ICD-10-CM	Diagnosis
C69.10	Malignant neoplasm of unspecified cornea	ICD-10-CM	Diagnosis
C69.11	Malignant neoplasm of right cornea	ICD-10-CM	Diagnosis
C69.12	Malignant neoplasm of left cornea	ICD-10-CM	Diagnosis
C69.20	Malignant neoplasm of unspecified retina	ICD-10-CM	Diagnosis
C69.21	Malignant neoplasm of right retina	ICD-10-CM	Diagnosis
C69.22	Malignant neoplasm of left retina	ICD-10-CM	Diagnosis
C69.30	Malignant neoplasm of unspecified choroid	ICD-10-CM	Diagnosis
C69.31	Malignant neoplasm of right choroid	ICD-10-CM	Diagnosis
C69.32	Malignant neoplasm of left choroid	ICD-10-CM	Diagnosis
C69.40	Malignant neoplasm of unspecified ciliary body	ICD-10-CM	Diagnosis
C69.41	Malignant neoplasm of right ciliary body	ICD-10-CM	Diagnosis
C69.42	Malignant neoplasm of left ciliary body	ICD-10-CM	Diagnosis
C69.50	Malignant neoplasm of unspecified lacrimal gland and duct	ICD-10-CM	Diagnosis
C69.51	Malignant neoplasm of right lacrimal gland and duct	ICD-10-CM	Diagnosis
C69.52	Malignant neoplasm of left lacrimal gland and duct	ICD-10-CM	Diagnosis
C69.60	Malignant neoplasm of unspecified orbit	ICD-10-CM	Diagnosis
C69.61	Malignant neoplasm of right orbit	ICD-10-CM	Diagnosis
C69.62	Malignant neoplasm of left orbit	ICD-10-CM	Diagnosis
C69.80	Malignant neoplasm of overlapping sites of unspecified eye and adnexa	ICD-10-CM	Diagnosis
C69.81	Malignant neoplasm of overlapping sites of right eye and adnexa	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
C69.82	Malignant neoplasm of overlapping sites of left eye and adnexa	ICD-10-CM	Diagnosis
C69.90	Malignant neoplasm of unspecified site of unspecified eye	ICD-10-CM	Diagnosis
C69.91	Malignant neoplasm of unspecified site of right eye	ICD-10-CM	Diagnosis
C69.92	Malignant neoplasm of unspecified site of left eye	ICD-10-CM	Diagnosis
C70.0	Malignant neoplasm of cerebral meninges	ICD-10-CM	Diagnosis
C70.1	Malignant neoplasm of spinal meninges	ICD-10-CM	Diagnosis
C70.9	Malignant neoplasm of meninges, unspecified	ICD-10-CM	Diagnosis
C71.0	Malignant neoplasm of cerebrum, except lobes and ventricles	ICD-10-CM	Diagnosis
C71.1	Malignant neoplasm of frontal lobe	ICD-10-CM	Diagnosis
C71.2	Malignant neoplasm of temporal lobe	ICD-10-CM	Diagnosis
C71.3	Malignant neoplasm of parietal lobe	ICD-10-CM	Diagnosis
C71.4	Malignant neoplasm of occipital lobe	ICD-10-CM	Diagnosis
C71.5	Malignant neoplasm of cerebral ventricle	ICD-10-CM	Diagnosis
C71.6	Malignant neoplasm of cerebellum	ICD-10-CM	Diagnosis
C71.7	Malignant neoplasm of brain stem	ICD-10-CM	Diagnosis
C71.8	Malignant neoplasm of overlapping sites of brain	ICD-10-CM	Diagnosis
C71.9	Malignant neoplasm of brain, unspecified	ICD-10-CM	Diagnosis
C72.0	Malignant neoplasm of spinal cord	ICD-10-CM	Diagnosis
C72.1	Malignant neoplasm of cauda equina	ICD-10-CM	Diagnosis
C72.20	Malignant neoplasm of unspecified olfactory nerve	ICD-10-CM	Diagnosis
C72.21	Malignant neoplasm of right olfactory nerve	ICD-10-CM	Diagnosis
C72.22	Malignant neoplasm of left olfactory nerve	ICD-10-CM	Diagnosis
C72.30	Malignant neoplasm of unspecified optic nerve	ICD-10-CM	Diagnosis
C72.31	Malignant neoplasm of right optic nerve	ICD-10-CM	Diagnosis
C72.32	Malignant neoplasm of left optic nerve	ICD-10-CM	Diagnosis
C72.40	Malignant neoplasm of unspecified acoustic nerve	ICD-10-CM	Diagnosis
C72.41	Malignant neoplasm of right acoustic nerve	ICD-10-CM	Diagnosis
C72.42	Malignant neoplasm of left acoustic nerve	ICD-10-CM	Diagnosis
C72.50	Malignant neoplasm of unspecified cranial nerve	ICD-10-CM	Diagnosis
C72.59	Malignant neoplasm of other cranial nerves	ICD-10-CM	Diagnosis
C72.9	Malignant neoplasm of central nervous system, 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
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
C76.0	Malignant neoplasm of head, face and neck	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
C76.1	Malignant neoplasm of thorax	ICD-10-CM	Diagnosis
C76.2	Malignant neoplasm of abdomen	ICD-10-CM	Diagnosis
C76.3	Malignant neoplasm of pelvis	ICD-10-CM	Diagnosis
C76.40	Malignant neoplasm of unspecified upper limb	ICD-10-CM	Diagnosis
C76.41	Malignant neoplasm of right upper limb	ICD-10-CM	Diagnosis
C76.42	Malignant neoplasm of left upper limb	ICD-10-CM	Diagnosis
C76.50	Malignant neoplasm of unspecified lower limb	ICD-10-CM	Diagnosis
C76.51	Malignant neoplasm of right lower limb	ICD-10-CM	Diagnosis
C76.52	Malignant neoplasm of left lower limb	ICD-10-CM	Diagnosis
C76.8	Malignant neoplasm of other specified ill-defined sites	ICD-10-CM	Diagnosis
C77.0	Secondary and unspecified malignant neoplasm of lymph nodes of head, face and neck	ICD-10-CM	Diagnosis
C77.1	Secondary and unspecified malignant neoplasm of intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C77.2	Secondary and unspecified malignant neoplasm of intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C77.3	Secondary and unspecified malignant neoplasm of axilla and upper limb lymph nodes	ICD-10-CM	Diagnosis
C77.4	Secondary and unspecified malignant neoplasm of inguinal and lower limb lymph nodes	ICD-10-CM	Diagnosis
C77.5	Secondary and unspecified malignant neoplasm of intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C77.8	Secondary and unspecified malignant neoplasm of lymph nodes of multiple regions	ICD-10-CM	Diagnosis
C77.9	Secondary and unspecified malignant neoplasm of lymph node, unspecified	ICD-10-CM	Diagnosis
C78.00	Secondary malignant neoplasm of unspecified lung	ICD-10-CM	Diagnosis
C78.01	Secondary malignant neoplasm of right lung	ICD-10-CM	Diagnosis
C78.02	Secondary malignant neoplasm of left lung	ICD-10-CM	Diagnosis
C78.1	Secondary malignant neoplasm of mediastinum	ICD-10-CM	Diagnosis
C78.2	Secondary malignant neoplasm of pleura	ICD-10-CM	Diagnosis
C78.30	Secondary malignant neoplasm of unspecified respiratory organ	ICD-10-CM	Diagnosis
C78.39	Secondary malignant neoplasm of other respiratory organs	ICD-10-CM	Diagnosis
C78.4	Secondary malignant neoplasm of small intestine	ICD-10-CM	Diagnosis
C78.5	Secondary malignant neoplasm of large intestine and rectum	ICD-10-CM	Diagnosis
C78.6	Secondary malignant neoplasm of retroperitoneum and peritoneum	ICD-10-CM	Diagnosis
C78.7	Secondary malignant neoplasm of liver and intrahepatic bile duct	ICD-10-CM	Diagnosis
C78.80	Secondary malignant neoplasm of unspecified digestive organ	ICD-10-CM	Diagnosis
C78.89	Secondary malignant neoplasm of other digestive organs	ICD-10-CM	Diagnosis
C79.00	Secondary malignant neoplasm of unspecified kidney and renal pelvis	ICD-10-CM	Diagnosis
C79.01	Secondary malignant neoplasm of right kidney and renal pelvis	ICD-10-CM	Diagnosis
C79.02	Secondary malignant neoplasm of left kidney and renal pelvis	ICD-10-CM	Diagnosis
C79.10	Secondary malignant neoplasm of unspecified urinary organs	ICD-10-CM	Diagnosis
C79.11	Secondary malignant neoplasm of bladder	ICD-10-CM	Diagnosis
C79.19	Secondary malignant neoplasm of other urinary organs	ICD-10-CM	Diagnosis
C79.2	Secondary malignant neoplasm of skin	ICD-10-CM	Diagnosis
C79.31	Secondary malignant neoplasm of brain	ICD-10-CM	Diagnosis
C79.32	Secondary malignant neoplasm of cerebral meninges	ICD-10-CM	Diagnosis
C79.40	Secondary malignant neoplasm of unspecified part of nervous system	ICD-10-CM	Diagnosis
C79.49	Secondary malignant neoplasm of other parts of nervous system	ICD-10-CM	Diagnosis
C79.51	Secondary malignant neoplasm of bone	ICD-10-CM	Diagnosis
C79.52	Secondary malignant neoplasm of bone marrow	ICD-10-CM	Diagnosis
C79.60	Secondary malignant neoplasm of unspecified ovary	ICD-10-CM	Diagnosis
C79.61	Secondary malignant neoplasm of right ovary	ICD-10-CM	Diagnosis
C79.62	Secondary malignant neoplasm of left ovary	ICD-10-CM	Diagnosis
C79.70	Secondary malignant neoplasm of unspecified adrenal gland	ICD-10-CM	Diagnosis
C79.71	Secondary malignant neoplasm of right adrenal gland	ICD-10-CM	Diagnosis
C79.72	Secondary malignant neoplasm of left adrenal gland	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
C79.81	Secondary malignant neoplasm of breast	ICD-10-CM	Diagnosis
C79.82	Secondary malignant neoplasm of genital organs	ICD-10-CM	Diagnosis
C79.89	Secondary malignant neoplasm of other specified sites	ICD-10-CM	Diagnosis
C79.9	Secondary malignant neoplasm of unspecified site	ICD-10-CM	Diagnosis
C7A.00	Malignant carcinoid tumor of unspecified site	ICD-10-CM	Diagnosis
C7A.010	Malignant carcinoid tumor of the duodenum	ICD-10-CM	Diagnosis
C7A.011	Malignant carcinoid tumor of the jejunum	ICD-10-CM	Diagnosis
C7A.012	Malignant carcinoid tumor of the ileum	ICD-10-CM	Diagnosis
C7A.019	Malignant carcinoid tumor of the small intestine, unspecified portion	ICD-10-CM	Diagnosis
C7A.020	Malignant carcinoid tumor of the appendix	ICD-10-CM	Diagnosis
C7A.021	Malignant carcinoid tumor of the cecum	ICD-10-CM	Diagnosis
C7A.022	Malignant carcinoid tumor of the ascending colon	ICD-10-CM	Diagnosis
C7A.023	Malignant carcinoid tumor of the transverse colon	ICD-10-CM	Diagnosis
C7A.024	Malignant carcinoid tumor of the descending colon	ICD-10-CM	Diagnosis
C7A.025	Malignant carcinoid tumor of the sigmoid colon	ICD-10-CM	Diagnosis
C7A.026	Malignant carcinoid tumor of the rectum	ICD-10-CM	Diagnosis
C7A.029	Malignant carcinoid tumor of the large intestine, unspecified portion	ICD-10-CM	Diagnosis
C7A.090	Malignant carcinoid tumor of the bronchus and lung	ICD-10-CM	Diagnosis
C7A.091	Malignant carcinoid tumor of the thymus	ICD-10-CM	Diagnosis
C7A.092	Malignant carcinoid tumor of the stomach	ICD-10-CM	Diagnosis
C7A.093	Malignant carcinoid tumor of the kidney	ICD-10-CM	Diagnosis
C7A.094	Malignant carcinoid tumor of the foregut, unspecified	ICD-10-CM	Diagnosis
C7A.095	Malignant carcinoid tumor of the midgut, unspecified	ICD-10-CM	Diagnosis
C7A.096	Malignant carcinoid tumor of the hindgut, unspecified	ICD-10-CM	Diagnosis
C7A.098	Malignant carcinoid tumors of other sites	ICD-10-CM	Diagnosis
C7A.1	Malignant poorly differentiated neuroendocrine tumors	ICD-10-CM	Diagnosis
C7A.8	Other malignant neuroendocrine tumors	ICD-10-CM	Diagnosis
C7B.00	Secondary carcinoid tumors, unspecified site	ICD-10-CM	Diagnosis
C7B.01	Secondary carcinoid tumors of distant lymph nodes	ICD-10-CM	Diagnosis
C7B.02	Secondary carcinoid tumors of liver	ICD-10-CM	Diagnosis
C7B.03	Secondary carcinoid tumors of bone	ICD-10-CM	Diagnosis
C7B.04	Secondary carcinoid tumors of peritoneum	ICD-10-CM	Diagnosis
C7B.09	Secondary carcinoid tumors of other sites	ICD-10-CM	Diagnosis
C7B.1	Secondary Merkel cell carcinoma	ICD-10-CM	Diagnosis
C7B.8	Other secondary neuroendocrine tumors	ICD-10-CM	Diagnosis
C80.0	Disseminated malignant neoplasm, unspecified	ICD-10-CM	Diagnosis
C80.1	Malignant (primary) neoplasm, unspecified	ICD-10-CM	Diagnosis
C80.2	Malignant neoplasm associated with transplanted organ	ICD-10-CM	Diagnosis
C81.00	Nodular lymphocyte predominant Hodgkin lymphoma, unspecified site	ICD-10-CM	Diagnosis
C81.01	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C81.02	Nodular lymphocyte predominant Hodgkin lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C81.03	Nodular lymphocyte predominant Hodgkin lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C81.04	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C81.05	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C81.06	Nodular lymphocyte predominant Hodgkin lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C81.07	Nodular lymphocyte predominant Hodgkin lymphoma, spleen	ICD-10-CM	Diagnosis
C81.08	Nodular lymphocyte predominant Hodgkin lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
C81.09	Nodular lymphocyte predominant Hodgkin lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C81.10	Nodular sclerosis Hodgkin lymphoma, unspecified site	ICD-10-CM	Diagnosis
C81.11	Nodular sclerosis Hodgkin lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C81.12	Nodular sclerosis Hodgkin lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C81.13	Nodular sclerosis Hodgkin lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C81.14	Nodular sclerosis Hodgkin lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C81.15	Nodular sclerosis Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C81.16	Nodular sclerosis Hodgkin lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C81.17	Nodular sclerosis Hodgkin lymphoma, spleen	ICD-10-CM	Diagnosis
C81.18	Nodular sclerosis Hodgkin lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C81.19	Nodular sclerosis Hodgkin lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C81.20	Mixed cellularity Hodgkin lymphoma, unspecified site	ICD-10-CM	Diagnosis
C81.21	Mixed cellularity Hodgkin lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C81.22	Mixed cellularity Hodgkin lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C81.23	Mixed cellularity Hodgkin lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C81.24	Mixed cellularity Hodgkin lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C81.25	Mixed cellularity Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C81.26	Mixed cellularity Hodgkin lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C81.27	Mixed cellularity Hodgkin lymphoma, spleen	ICD-10-CM	Diagnosis
C81.28	Mixed cellularity Hodgkin lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C81.29	Mixed cellularity Hodgkin lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C81.30	Lymphocyte depleted Hodgkin lymphoma, unspecified site	ICD-10-CM	Diagnosis
C81.31	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C81.32	Lymphocyte depleted Hodgkin lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C81.33	Lymphocyte depleted Hodgkin lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C81.34	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C81.35	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C81.36	Lymphocyte depleted Hodgkin lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C81.37	Lymphocyte depleted Hodgkin lymphoma, spleen	ICD-10-CM	Diagnosis
C81.38	Lymphocyte depleted Hodgkin lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C81.39	Lymphocyte depleted Hodgkin lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C81.40	Lymphocyte-rich Hodgkin lymphoma, unspecified site	ICD-10-CM	Diagnosis
C81.41	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C81.42	Lymphocyte-rich Hodgkin lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C81.43	Lymphocyte-rich Hodgkin lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C81.44	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C81.45	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C81.46	Lymphocyte-rich Hodgkin lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C81.47	Lymphocyte-rich Hodgkin lymphoma, spleen	ICD-10-CM	Diagnosis
C81.48	Lymphocyte-rich Hodgkin lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C81.49	Lymphocyte-rich Hodgkin lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C81.70	Other Hodgkin lymphoma, unspecified site	ICD-10-CM	Diagnosis
C81.71	Other Hodgkin lymphoma, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C81.72	Other Hodgkin lymphoma, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C81.73	Other Hodgkin lymphoma, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C81.74	Other Hodgkin lymphoma, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C81.75	Other Hodgkin lymphoma, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C81.76	Other Hodgkin lymphoma, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C81.77	Other Hodgkin lymphoma, spleen	ICD-10-CM	Diagnosis
C81.78	Other Hodgkin lymphoma, lymph nodes of multiple sites	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
C81.79	Other Hodgkin lymphoma, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C81.90	Hodgkin lymphoma, unspecified, unspecified site	ICD-10-CM	Diagnosis
C81.91	Hodgkin lymphoma, unspecified, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C81.92	Hodgkin lymphoma, unspecified, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C81.93	Hodgkin lymphoma, unspecified, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C81.94	Hodgkin lymphoma, unspecified, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C81.95	Hodgkin lymphoma, unspecified, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C81.96	Hodgkin lymphoma, unspecified, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C81.97	Hodgkin lymphoma, unspecified, spleen	ICD-10-CM	Diagnosis
C81.98	Hodgkin lymphoma, unspecified, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C81.99	Hodgkin lymphoma, unspecified, extranodal and solid organ sites	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
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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
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	Szary disease, unspecified site	ICD-10-CM	Diagnosis
C84.11	Szary disease, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C84.12	Szary disease, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C84.13	Szary disease, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C84.14	Szary disease, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C84.15	Szary disease, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C84.16	Szary disease, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C84.17	Szary disease, spleen	ICD-10-CM	Diagnosis
C84.18	Szary disease, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C84.19	Szary disease, extranodal and solid organ sites	ICD-10-CM	Diagnosis
C84.40	Peripheral T-cell lymphoma, not classified, unspecified site	ICD-10-CM	Diagnosis
C84.41	Peripheral T-cell lymphoma, not classified, lymph nodes of head, face, and neck	ICD-10-CM	Diagnosis
C84.42	Peripheral T-cell lymphoma, not classified, intrathoracic lymph nodes	ICD-10-CM	Diagnosis
C84.43	Peripheral T-cell lymphoma, not classified, intra-abdominal lymph nodes	ICD-10-CM	Diagnosis
C84.44	Peripheral T-cell lymphoma, not classified, lymph nodes of axilla and upper limb	ICD-10-CM	Diagnosis
C84.45	Peripheral T-cell lymphoma, not classified, lymph nodes of inguinal region and lower limb	ICD-10-CM	Diagnosis
C84.46	Peripheral T-cell lymphoma, not classified, intrapelvic lymph nodes	ICD-10-CM	Diagnosis
C84.47	Peripheral T-cell lymphoma, not classified, spleen	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
C84.48	Peripheral T-cell lymphoma, not classified, lymph nodes of multiple sites	ICD-10-CM	Diagnosis
C84.49	Peripheral T-cell lymphoma, not classified, 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
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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
C86.5	Angioimmunoblastic T-cell lymphoma	ICD-10-CM	Diagnosis
C86.6	Primary cutaneous CD30-positive T-cell proliferations	ICD-10-CM	Diagnosis
C88.2	Heavy chain disease	ICD-10-CM	Diagnosis
C88.3	Immunoproliferative small intestinal disease	ICD-10-CM	Diagnosis
C88.4	Extranodal marginal zone B-cell lymphoma of mucosa-associated lymphoid tissue [MALT-lymphoma]	ICD-10-CM	Diagnosis
C88.8	Other malignant immunoproliferative diseases	ICD-10-CM	Diagnosis
C88.9	Malignant immunoproliferative disease, unspecified	ICD-10-CM	Diagnosis
C90.00	Multiple myeloma not having achieved remission	ICD-10-CM	Diagnosis
C90.01	Multiple myeloma in remission	ICD-10-CM	Diagnosis
C90.02	Multiple myeloma in relapse	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
C90.12	Plasma cell leukemia in relapse	ICD-10-CM	Diagnosis
C90.20	Extramedullary plasmacytoma not having achieved remission	ICD-10-CM	Diagnosis
C90.21	Extramedullary plasmacytoma in remission	ICD-10-CM	Diagnosis
C90.22	Extramedullary plasmacytoma in relapse	ICD-10-CM	Diagnosis
C90.30	Solitary plasmacytoma not having achieved remission	ICD-10-CM	Diagnosis
C90.31	Solitary plasmacytoma in remission	ICD-10-CM	Diagnosis
C90.32	Solitary plasmacytoma in relapse	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
C91.02	Acute lymphoblastic leukemia, in relapse	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
C91.12	Chronic lymphocytic leukemia of B-cell type in relapse	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
C91.32	Prolymphocytic leukemia of B-cell type, in relapse	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
C91.42	Hairy cell leukemia, in relapse	ICD-10-CM	Diagnosis
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
C91.52	Adult T-cell lymphoma/leukemia (HTLV-1-associated), in relapse	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
C91.62	Prolymphocytic leukemia of T-cell type, in relapse	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
C91.92	Lymphoid leukemia, unspecified, in relapse	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.A2	Mature B-cell leukemia Burkitt-type, in relapse	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
C91.Z2	Other lymphoid leukemia, in relapse	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
C92.02	Acute myeloblastic leukemia, in relapse	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
C92.12	Chronic myeloid leukemia, BCR/ABL-positive, in relapse	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
C92.22	Atypical chronic myeloid leukemia, BCR/ABL-negative, in relapse	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
C92.32	Myeloid sarcoma, in relapse	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
C92.42	Acute promyelocytic leukemia, in relapse	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
C92.52	Acute myelomonocytic leukemia, in relapse	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
C92.62	Acute myeloid leukemia with 11q23-abnormality in relapse	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
C92.92	Myeloid leukemia, unspecified in relapse	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.A2	Acute myeloid leukemia with multilineage dysplasia, in relapse	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
C92.Z2	Other myeloid leukemia, in relapse	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
C93.02	Acute monoblastic/monocytic leukemia, in relapse	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
C93.12	Chronic myelomonocytic leukemia, in relapse	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
C93.32	Juvenile myelomonocytic leukemia, in relapse	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
C93.92	Monocytic leukemia, unspecified in relapse	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
C93.Z2	Other monocytic leukemia, in relapse	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
C94.02	Acute erythroid leukemia, in relapse	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
C94.22	Acute megakaryoblastic leukemia, in relapse	ICD-10-CM	Diagnosis
C94.30	Mast cell leukemia not having achieved remission	ICD-10-CM	Diagnosis
C94.31	Mast cell leukemia, in remission	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
C94.32	Mast cell leukemia, in relapse	ICD-10-CM	Diagnosis
C94.40	Acute panmyelosis with myelofibrosis not having achieved remission	ICD-10-CM	Diagnosis
C94.41	Acute panmyelosis with myelofibrosis, in remission	ICD-10-CM	Diagnosis
C94.42	Acute panmyelosis with myelofibrosis, in relapse	ICD-10-CM	Diagnosis
C94.6	Myelodysplastic disease, not classified	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
C94.82	Other specified leukemias, in relapse	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
C95.02	Acute leukemia of unspecified cell type, in relapse	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
C95.12	Chronic leukemia of unspecified cell type, in relapse	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
C95.92	Leukemia, unspecified, in relapse	ICD-10-CM	Diagnosis
C96.0	Multifocal and multisystemic (disseminated) Langerhans-cell histiocytosis	ICD-10-CM	Diagnosis
C96.20	Malignant mast cell neoplasm, unspecified	ICD-10-CM	Diagnosis
C96.21	Aggressive systemic mastocytosis	ICD-10-CM	Diagnosis
C96.22	Mast cell sarcoma	ICD-10-CM	Diagnosis
C96.29	Other malignant mast cell neoplasm	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.A	Histiocytic sarcoma	ICD-10-CM	Diagnosis
C96.Z	Other specified malignant neoplasms of lymphoid, hematopoietic and related tissue	ICD-10-CM	Diagnosis
D00.00	Carcinoma in situ of oral cavity, unspecified site	ICD-10-CM	Diagnosis
D00.01	Carcinoma in situ of labial mucosa and vermilion border	ICD-10-CM	Diagnosis
D00.02	Carcinoma in situ of buccal mucosa	ICD-10-CM	Diagnosis
D00.03	Carcinoma in situ of gingiva and edentulous alveolar ridge	ICD-10-CM	Diagnosis
D00.04	Carcinoma in situ of soft palate	ICD-10-CM	Diagnosis
D00.05	Carcinoma in situ of hard palate	ICD-10-CM	Diagnosis
D00.06	Carcinoma in situ of floor of mouth	ICD-10-CM	Diagnosis
D00.07	Carcinoma in situ of tongue	ICD-10-CM	Diagnosis
D00.08	Carcinoma in situ of pharynx	ICD-10-CM	Diagnosis
D00.1	Carcinoma in situ of esophagus	ICD-10-CM	Diagnosis
D00.2	Carcinoma in situ of stomach	ICD-10-CM	Diagnosis
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
D01.3	Carcinoma in situ of anus and anal canal	ICD-10-CM	Diagnosis
D01.40	Carcinoma in situ of unspecified part of intestine	ICD-10-CM	Diagnosis
D01.49	Carcinoma in situ of other parts of intestine	ICD-10-CM	Diagnosis
D01.5	Carcinoma in situ of liver, gallbladder and bile ducts	ICD-10-CM	Diagnosis
D01.7	Carcinoma in situ of other specified digestive organs	ICD-10-CM	Diagnosis
D01.9	Carcinoma in situ of digestive organ, unspecified	ICD-10-CM	Diagnosis
D02.0	Carcinoma in situ of larynx	ICD-10-CM	Diagnosis
D02.1	Carcinoma in situ of trachea	ICD-10-CM	Diagnosis
D02.20	Carcinoma in situ of unspecified bronchus and lung	ICD-10-CM	Diagnosis
D02.21	Carcinoma in situ of right bronchus and lung	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
D02.22	Carcinoma in situ of left bronchus and lung	ICD-10-CM	Diagnosis
D02.3	Carcinoma in situ of other parts of respiratory system	ICD-10-CM	Diagnosis
D02.4	Carcinoma in situ of respiratory system, unspecified	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
D04.0	Carcinoma in situ of skin of lip	ICD-10-CM	Diagnosis
D04.10	Carcinoma in situ of skin of unspecified eyelid, including canthus	ICD-10-CM	Diagnosis
D04.11	Carcinoma in situ of skin of right eyelid, including canthus	ICD-10-CM	Diagnosis
D04.12	Carcinoma in situ of skin of left eyelid, including canthus	ICD-10-CM	Diagnosis
D04.20	Carcinoma in situ of skin of unspecified ear and external auricular canal	ICD-10-CM	Diagnosis
D04.21	Carcinoma in situ of skin of right ear and external auricular canal	ICD-10-CM	Diagnosis
D04.22	Carcinoma in situ of skin of left ear and external auricular canal	ICD-10-CM	Diagnosis
D04.30	Carcinoma in situ of skin of unspecified part of face	ICD-10-CM	Diagnosis
D04.39	Carcinoma in situ of skin of other parts of face	ICD-10-CM	Diagnosis
D04.4	Carcinoma in situ of skin of scalp and neck	ICD-10-CM	Diagnosis
D04.5	Carcinoma in situ of skin of trunk	ICD-10-CM	Diagnosis
D04.60	Carcinoma in situ of skin of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
D04.61	Carcinoma in situ of skin of right upper limb, including shoulder	ICD-10-CM	Diagnosis
D04.62	Carcinoma in situ of skin of left upper limb, including shoulder	ICD-10-CM	Diagnosis
D04.70	Carcinoma in situ of skin of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
D04.71	Carcinoma in situ of skin of right lower limb, including hip	ICD-10-CM	Diagnosis
D04.72	Carcinoma in situ of skin of left lower limb, including hip	ICD-10-CM	Diagnosis
D04.8	Carcinoma in situ of skin of other sites	ICD-10-CM	Diagnosis
D04.9	Carcinoma in situ of skin, unspecified	ICD-10-CM	Diagnosis
D05.00	Lobular carcinoma in situ of unspecified breast	ICD-10-CM	Diagnosis
D05.01	Lobular carcinoma in situ of right breast	ICD-10-CM	Diagnosis
D05.02	Lobular carcinoma in situ of left breast	ICD-10-CM	Diagnosis
D05.10	Intraductal carcinoma in situ of unspecified breast	ICD-10-CM	Diagnosis
D05.11	Intraductal carcinoma in situ of right breast	ICD-10-CM	Diagnosis
D05.12	Intraductal carcinoma in situ of left breast	ICD-10-CM	Diagnosis
D05.80	Other specified type of carcinoma in situ of unspecified breast	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
D05.81	Other specified type of carcinoma in situ of right breast	ICD-10-CM	Diagnosis
D05.82	Other specified type of carcinoma in situ of left breast	ICD-10-CM	Diagnosis
D05.90	Unspecified type of carcinoma in situ of unspecified breast	ICD-10-CM	Diagnosis
D05.91	Unspecified type of carcinoma in situ of right breast	ICD-10-CM	Diagnosis
D05.92	Unspecified type of carcinoma in situ of left breast	ICD-10-CM	Diagnosis
D06.0	Carcinoma in situ of endocervix	ICD-10-CM	Diagnosis
D06.1	Carcinoma in situ of exocervix	ICD-10-CM	Diagnosis
D06.7	Carcinoma in situ of other parts of cervix	ICD-10-CM	Diagnosis
D06.9	Carcinoma in situ of cervix, unspecified	ICD-10-CM	Diagnosis
D07.0	Carcinoma in situ of endometrium	ICD-10-CM	Diagnosis
D07.1	Carcinoma in situ of vulva	ICD-10-CM	Diagnosis
D07.2	Carcinoma in situ of vagina	ICD-10-CM	Diagnosis
D07.30	Carcinoma in situ of unspecified female genital organs	ICD-10-CM	Diagnosis
D07.39	Carcinoma in situ of other female genital organs	ICD-10-CM	Diagnosis
D07.4	Carcinoma in situ of penis	ICD-10-CM	Diagnosis
D07.5	Carcinoma in situ of prostate	ICD-10-CM	Diagnosis
D07.60	Carcinoma in situ of unspecified male genital organs	ICD-10-CM	Diagnosis
D07.61	Carcinoma in situ of scrotum	ICD-10-CM	Diagnosis
D07.69	Carcinoma in situ of other male genital organs	ICD-10-CM	Diagnosis
D09.0	Carcinoma in situ of bladder	ICD-10-CM	Diagnosis
D09.10	Carcinoma in situ of unspecified urinary organ	ICD-10-CM	Diagnosis
D09.19	Carcinoma in situ of other urinary organs	ICD-10-CM	Diagnosis
D09.20	Carcinoma in situ of unspecified eye	ICD-10-CM	Diagnosis
D09.21	Carcinoma in situ of right eye	ICD-10-CM	Diagnosis
D09.22	Carcinoma in situ of left eye	ICD-10-CM	Diagnosis
D09.3	Carcinoma in situ of thyroid and other endocrine glands	ICD-10-CM	Diagnosis
D09.8	Carcinoma in situ of other specified sites	ICD-10-CM	Diagnosis
D09.9	Carcinoma in situ, unspecified	ICD-10-CM	Diagnosis
D10.0	Benign neoplasm of lip	ICD-10-CM	Diagnosis
D10.1	Benign neoplasm of tongue	ICD-10-CM	Diagnosis
D10.2	Benign neoplasm of floor of mouth	ICD-10-CM	Diagnosis
D10.30	Benign neoplasm of unspecified part of mouth	ICD-10-CM	Diagnosis
D10.39	Benign neoplasm of other parts of mouth	ICD-10-CM	Diagnosis
D10.4	Benign neoplasm of tonsil	ICD-10-CM	Diagnosis
D10.5	Benign neoplasm of other parts of oropharynx	ICD-10-CM	Diagnosis
D10.6	Benign neoplasm of nasopharynx	ICD-10-CM	Diagnosis
D10.7	Benign neoplasm of hypopharynx	ICD-10-CM	Diagnosis
D10.9	Benign neoplasm of pharynx, unspecified	ICD-10-CM	Diagnosis
D11.0	Benign neoplasm of parotid gland	ICD-10-CM	Diagnosis
D11.7	Benign neoplasm of other major salivary glands	ICD-10-CM	Diagnosis
D11.9	Benign neoplasm of major salivary gland, unspecified	ICD-10-CM	Diagnosis
D12.0	Benign neoplasm of cecum	ICD-10-CM	Diagnosis
D12.1	Benign neoplasm of appendix	ICD-10-CM	Diagnosis
D12.2	Benign neoplasm of ascending colon	ICD-10-CM	Diagnosis
D12.3	Benign neoplasm of transverse colon	ICD-10-CM	Diagnosis
D12.4	Benign neoplasm of descending colon	ICD-10-CM	Diagnosis
D12.5	Benign neoplasm of sigmoid colon	ICD-10-CM	Diagnosis
D12.6	Benign neoplasm of colon, unspecified	ICD-10-CM	Diagnosis
D12.7	Benign neoplasm of rectosigmoid junction	ICD-10-CM	Diagnosis
D12.8	Benign neoplasm of rectum	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
D12.9	Benign neoplasm of anus and anal canal	ICD-10-CM	Diagnosis
D13.0	Benign neoplasm of esophagus	ICD-10-CM	Diagnosis
D13.1	Benign neoplasm of stomach	ICD-10-CM	Diagnosis
D13.2	Benign neoplasm of duodenum	ICD-10-CM	Diagnosis
D13.30	Benign neoplasm of unspecified part of small intestine	ICD-10-CM	Diagnosis
D13.39	Benign neoplasm of other parts of small intestine	ICD-10-CM	Diagnosis
D13.4	Benign neoplasm of liver	ICD-10-CM	Diagnosis
D13.5	Benign neoplasm of extrahepatic bile ducts	ICD-10-CM	Diagnosis
D13.6	Benign neoplasm of pancreas	ICD-10-CM	Diagnosis
D13.7	Benign neoplasm of endocrine pancreas	ICD-10-CM	Diagnosis
D13.9	Benign neoplasm of ill-defined sites within the digestive system	ICD-10-CM	Diagnosis
D14.0	Benign neoplasm of middle ear, nasal cavity and accessory sinuses	ICD-10-CM	Diagnosis
D14.1	Benign neoplasm of larynx	ICD-10-CM	Diagnosis
D14.2	Benign neoplasm of trachea	ICD-10-CM	Diagnosis
D14.30	Benign neoplasm of unspecified bronchus and lung	ICD-10-CM	Diagnosis
D14.31	Benign neoplasm of right bronchus and lung	ICD-10-CM	Diagnosis
D14.32	Benign neoplasm of left bronchus and lung	ICD-10-CM	Diagnosis
D14.4	Benign neoplasm of respiratory system, unspecified	ICD-10-CM	Diagnosis
D15.0	Benign neoplasm of thymus	ICD-10-CM	Diagnosis
D15.1	Benign neoplasm of heart	ICD-10-CM	Diagnosis
D15.2	Benign neoplasm of mediastinum	ICD-10-CM	Diagnosis
D15.7	Benign neoplasm of other specified intrathoracic organs	ICD-10-CM	Diagnosis
D15.9	Benign neoplasm of intrathoracic organ, unspecified	ICD-10-CM	Diagnosis
D16.00	Benign neoplasm of scapula and long bones of unspecified upper limb	ICD-10-CM	Diagnosis
D16.01	Benign neoplasm of scapula and long bones of right upper limb	ICD-10-CM	Diagnosis
D16.02	Benign neoplasm of scapula and long bones of left upper limb	ICD-10-CM	Diagnosis
D16.10	Benign neoplasm of short bones of unspecified upper limb	ICD-10-CM	Diagnosis
D16.11	Benign neoplasm of short bones of right upper limb	ICD-10-CM	Diagnosis
D16.12	Benign neoplasm of short bones of left upper limb	ICD-10-CM	Diagnosis
D16.20	Benign neoplasm of long bones of unspecified lower limb	ICD-10-CM	Diagnosis
D16.21	Benign neoplasm of long bones of right lower limb	ICD-10-CM	Diagnosis
D16.22	Benign neoplasm of long bones of left lower limb	ICD-10-CM	Diagnosis
D16.30	Benign neoplasm of short bones of unspecified lower limb	ICD-10-CM	Diagnosis
D16.31	Benign neoplasm of short bones of right lower limb	ICD-10-CM	Diagnosis
D16.32	Benign neoplasm of short bones of left lower limb	ICD-10-CM	Diagnosis
D16.4	Benign neoplasm of bones of skull and face	ICD-10-CM	Diagnosis
D16.5	Benign neoplasm of lower jaw bone	ICD-10-CM	Diagnosis
D16.6	Benign neoplasm of vertebral column	ICD-10-CM	Diagnosis
D16.7	Benign neoplasm of ribs, sternum and clavicle	ICD-10-CM	Diagnosis
D16.8	Benign neoplasm of pelvic bones, sacrum and coccyx	ICD-10-CM	Diagnosis
D16.9	Benign neoplasm of bone and articular cartilage, unspecified	ICD-10-CM	Diagnosis
D17.0	Benign lipomatous neoplasm of skin and subcutaneous tissue of head, face and neck	ICD-10-CM	Diagnosis
D17.1	Benign lipomatous neoplasm of skin and subcutaneous tissue of trunk	ICD-10-CM	Diagnosis
D17.20	Benign lipomatous neoplasm of skin and subcutaneous tissue of unspecified limb	ICD-10-CM	Diagnosis
D17.21	Benign lipomatous neoplasm of skin and subcutaneous tissue of right arm	ICD-10-CM	Diagnosis
D17.22	Benign lipomatous neoplasm of skin and subcutaneous tissue of left arm	ICD-10-CM	Diagnosis
D17.23	Benign lipomatous neoplasm of skin and subcutaneous tissue of right leg	ICD-10-CM	Diagnosis
D17.24	Benign lipomatous neoplasm of skin and subcutaneous tissue of left leg	ICD-10-CM	Diagnosis
D17.30	Benign lipomatous neoplasm of skin and subcutaneous tissue of unspecified sites	ICD-10-CM	Diagnosis
D17.39	Benign lipomatous neoplasm of skin and subcutaneous tissue of other sites	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
D17.4	Benign lipomatous neoplasm of intrathoracic organs	ICD-10-CM	Diagnosis
D17.5	Benign lipomatous neoplasm of intra-abdominal organs	ICD-10-CM	Diagnosis
D17.6	Benign lipomatous neoplasm of spermatic cord	ICD-10-CM	Diagnosis
D17.71	Benign lipomatous neoplasm of kidney	ICD-10-CM	Diagnosis
D17.72	Benign lipomatous neoplasm of other genitourinary organ	ICD-10-CM	Diagnosis
D17.79	Benign lipomatous neoplasm of other sites	ICD-10-CM	Diagnosis
D17.9	Benign lipomatous neoplasm, unspecified	ICD-10-CM	Diagnosis
D18.00	Hemangioma unspecified site	ICD-10-CM	Diagnosis
D18.01	Hemangioma of skin and subcutaneous tissue	ICD-10-CM	Diagnosis
D18.02	Hemangioma of intracranial structures	ICD-10-CM	Diagnosis
D18.03	Hemangioma of intra-abdominal structures	ICD-10-CM	Diagnosis
D18.09	Hemangioma of other sites	ICD-10-CM	Diagnosis
D18.1	Lymphangioma, any site	ICD-10-CM	Diagnosis
D19.0	Benign neoplasm of mesothelial tissue of pleura	ICD-10-CM	Diagnosis
D19.1	Benign neoplasm of mesothelial tissue of peritoneum	ICD-10-CM	Diagnosis
D19.7	Benign neoplasm of mesothelial tissue of other sites	ICD-10-CM	Diagnosis
D19.9	Benign neoplasm of mesothelial tissue, unspecified	ICD-10-CM	Diagnosis
D20.0	Benign neoplasm of soft tissue of retroperitoneum	ICD-10-CM	Diagnosis
D20.1	Benign neoplasm of soft tissue of peritoneum	ICD-10-CM	Diagnosis
D21.0	Benign neoplasm of connective and other soft tissue of head, face and neck	ICD-10-CM	Diagnosis
D21.10	Benign neoplasm of connective and other soft tissue of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
D21.11	Benign neoplasm of connective and other soft tissue of right upper limb, including shoulder	ICD-10-CM	Diagnosis
D21.12	Benign neoplasm of connective and other soft tissue of left upper limb, including shoulder	ICD-10-CM	Diagnosis
D21.20	Benign neoplasm of connective and other soft tissue of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
D21.21	Benign neoplasm of connective and other soft tissue of right lower limb, including hip	ICD-10-CM	Diagnosis
D21.22	Benign neoplasm of connective and other soft tissue of left lower limb, including hip	ICD-10-CM	Diagnosis
D21.3	Benign neoplasm of connective and other soft tissue of thorax	ICD-10-CM	Diagnosis
D21.4	Benign neoplasm of connective and other soft tissue of abdomen	ICD-10-CM	Diagnosis
D21.5	Benign neoplasm of connective and other soft tissue of pelvis	ICD-10-CM	Diagnosis
D21.6	Benign neoplasm of connective and other soft tissue of trunk, unspecified	ICD-10-CM	Diagnosis
D21.9	Benign neoplasm of connective and other soft tissue, unspecified	ICD-10-CM	Diagnosis
D22.0	Melanocytic nevi of lip	ICD-10-CM	Diagnosis
D22.10	Melanocytic nevi of unspecified eyelid, including canthus	ICD-10-CM	Diagnosis
D22.11	Melanocytic nevi of right eyelid, including canthus	ICD-10-CM	Diagnosis
D22.12	Melanocytic nevi of left eyelid, including canthus	ICD-10-CM	Diagnosis
D22.20	Melanocytic nevi of unspecified ear and external auricular canal	ICD-10-CM	Diagnosis
D22.21	Melanocytic nevi of right ear and external auricular canal	ICD-10-CM	Diagnosis
D22.22	Melanocytic nevi of left ear and external auricular canal	ICD-10-CM	Diagnosis
D22.30	Melanocytic nevi of unspecified part of face	ICD-10-CM	Diagnosis
D22.39	Melanocytic nevi of other parts of face	ICD-10-CM	Diagnosis
D22.4	Melanocytic nevi of scalp and neck	ICD-10-CM	Diagnosis
D22.5	Melanocytic nevi of trunk	ICD-10-CM	Diagnosis
D22.60	Melanocytic nevi of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
D22.61	Melanocytic nevi of right upper limb, including shoulder	ICD-10-CM	Diagnosis
D22.62	Melanocytic nevi of left upper limb, including shoulder	ICD-10-CM	Diagnosis
D22.70	Melanocytic nevi of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
D22.71	Melanocytic nevi of right lower limb, including hip	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
D22.72	Melanocytic nevi of left lower limb, including hip	ICD-10-CM	Diagnosis
D22.9	Melanocytic nevi, unspecified	ICD-10-CM	Diagnosis
D23.0	Other benign neoplasm of skin of lip	ICD-10-CM	Diagnosis
D23.10	Other benign neoplasm of skin of unspecified eyelid, including canthus	ICD-10-CM	Diagnosis
D23.11	Other benign neoplasm of skin of right eyelid, including canthus	ICD-10-CM	Diagnosis
D23.12	Other benign neoplasm of skin of left eyelid, including canthus	ICD-10-CM	Diagnosis
D23.20	Other benign neoplasm of skin of unspecified ear and external auricular canal	ICD-10-CM	Diagnosis
D23.21	Other benign neoplasm of skin of right ear and external auricular canal	ICD-10-CM	Diagnosis
D23.22	Other benign neoplasm of skin of left ear and external auricular canal	ICD-10-CM	Diagnosis
D23.30	Other benign neoplasm of skin of unspecified part of face	ICD-10-CM	Diagnosis
D23.39	Other benign neoplasm of skin of other parts of face	ICD-10-CM	Diagnosis
D23.4	Other benign neoplasm of skin of scalp and neck	ICD-10-CM	Diagnosis
D23.5	Other benign neoplasm of skin of trunk	ICD-10-CM	Diagnosis
D23.60	Other benign neoplasm of skin of unspecified upper limb, including shoulder	ICD-10-CM	Diagnosis
D23.61	Other benign neoplasm of skin of right upper limb, including shoulder	ICD-10-CM	Diagnosis
D23.62	Other benign neoplasm of skin of left upper limb, including shoulder	ICD-10-CM	Diagnosis
D23.70	Other benign neoplasm of skin of unspecified lower limb, including hip	ICD-10-CM	Diagnosis
D23.71	Other benign neoplasm of skin of right lower limb, including hip	ICD-10-CM	Diagnosis
D23.72	Other benign neoplasm of skin of left lower limb, including hip	ICD-10-CM	Diagnosis
D23.9	Other benign neoplasm of skin, unspecified	ICD-10-CM	Diagnosis
D24.1	Benign neoplasm of right breast	ICD-10-CM	Diagnosis
D24.2	Benign neoplasm of left breast	ICD-10-CM	Diagnosis
D24.9	Benign neoplasm of unspecified breast	ICD-10-CM	Diagnosis
D25.0	Submucous leiomyoma of uterus	ICD-10-CM	Diagnosis
D25.1	Intramural leiomyoma of uterus	ICD-10-CM	Diagnosis
D25.2	Subserosal leiomyoma of uterus	ICD-10-CM	Diagnosis
D25.9	Leiomyoma of uterus, unspecified	ICD-10-CM	Diagnosis
D26.0	Other benign neoplasm of cervix uteri	ICD-10-CM	Diagnosis
D26.1	Other benign neoplasm of corpus uteri	ICD-10-CM	Diagnosis
D26.7	Other benign neoplasm of other parts of uterus	ICD-10-CM	Diagnosis
D26.9	Other benign neoplasm of uterus, unspecified	ICD-10-CM	Diagnosis
D27.0	Benign neoplasm of right ovary	ICD-10-CM	Diagnosis
D27.1	Benign neoplasm of left ovary	ICD-10-CM	Diagnosis
D27.9	Benign neoplasm of unspecified ovary	ICD-10-CM	Diagnosis
D28.0	Benign neoplasm of vulva	ICD-10-CM	Diagnosis
D28.1	Benign neoplasm of vagina	ICD-10-CM	Diagnosis
D28.2	Benign neoplasm of uterine tubes and ligaments	ICD-10-CM	Diagnosis
D28.7	Benign neoplasm of other specified female genital organs	ICD-10-CM	Diagnosis
D28.9	Benign neoplasm of female genital organ, unspecified	ICD-10-CM	Diagnosis
D29.0	Benign neoplasm of penis	ICD-10-CM	Diagnosis
D29.1	Benign neoplasm of prostate	ICD-10-CM	Diagnosis
D29.20	Benign neoplasm of unspecified testis	ICD-10-CM	Diagnosis
D29.21	Benign neoplasm of right testis	ICD-10-CM	Diagnosis
D29.22	Benign neoplasm of left testis	ICD-10-CM	Diagnosis
D29.30	Benign neoplasm of unspecified epididymis	ICD-10-CM	Diagnosis
D29.31	Benign neoplasm of right epididymis	ICD-10-CM	Diagnosis
D29.32	Benign neoplasm of left epididymis	ICD-10-CM	Diagnosis
D29.4	Benign neoplasm of scrotum	ICD-10-CM	Diagnosis
D29.8	Benign neoplasm of other specified male genital organs	ICD-10-CM	Diagnosis
D29.9	Benign neoplasm of male genital organ, unspecified	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
D30.00	Benign neoplasm of unspecified kidney	ICD-10-CM	Diagnosis
D30.01	Benign neoplasm of right kidney	ICD-10-CM	Diagnosis
D30.02	Benign neoplasm of left kidney	ICD-10-CM	Diagnosis
D30.10	Benign neoplasm of unspecified renal pelvis	ICD-10-CM	Diagnosis
D30.11	Benign neoplasm of right renal pelvis	ICD-10-CM	Diagnosis
D30.12	Benign neoplasm of left renal pelvis	ICD-10-CM	Diagnosis
D30.20	Benign neoplasm of unspecified ureter	ICD-10-CM	Diagnosis
D30.21	Benign neoplasm of right ureter	ICD-10-CM	Diagnosis
D30.22	Benign neoplasm of left ureter	ICD-10-CM	Diagnosis
D30.3	Benign neoplasm of bladder	ICD-10-CM	Diagnosis
D30.4	Benign neoplasm of urethra	ICD-10-CM	Diagnosis
D30.8	Benign neoplasm of other specified urinary organs	ICD-10-CM	Diagnosis
D30.9	Benign neoplasm of urinary organ, unspecified	ICD-10-CM	Diagnosis
D31.00	Benign neoplasm of unspecified conjunctiva	ICD-10-CM	Diagnosis
D31.01	Benign neoplasm of right conjunctiva	ICD-10-CM	Diagnosis
D31.02	Benign neoplasm of left conjunctiva	ICD-10-CM	Diagnosis
D31.10	Benign neoplasm of unspecified cornea	ICD-10-CM	Diagnosis
D31.11	Benign neoplasm of right cornea	ICD-10-CM	Diagnosis
D31.12	Benign neoplasm of left cornea	ICD-10-CM	Diagnosis
D31.20	Benign neoplasm of unspecified retina	ICD-10-CM	Diagnosis
D31.21	Benign neoplasm of right retina	ICD-10-CM	Diagnosis
D31.22	Benign neoplasm of left retina	ICD-10-CM	Diagnosis
D31.30	Benign neoplasm of unspecified choroid	ICD-10-CM	Diagnosis
D31.31	Benign neoplasm of right choroid	ICD-10-CM	Diagnosis
D31.32	Benign neoplasm of left choroid	ICD-10-CM	Diagnosis
D31.40	Benign neoplasm of unspecified ciliary body	ICD-10-CM	Diagnosis
D31.41	Benign neoplasm of right ciliary body	ICD-10-CM	Diagnosis
D31.42	Benign neoplasm of left ciliary body	ICD-10-CM	Diagnosis
D31.50	Benign neoplasm of unspecified lacrimal gland and duct	ICD-10-CM	Diagnosis
D31.51	Benign neoplasm of right lacrimal gland and duct	ICD-10-CM	Diagnosis
D31.52	Benign neoplasm of left lacrimal gland and duct	ICD-10-CM	Diagnosis
D31.60	Benign neoplasm of unspecified site of unspecified orbit	ICD-10-CM	Diagnosis
D31.61	Benign neoplasm of unspecified site of right orbit	ICD-10-CM	Diagnosis
D31.62	Benign neoplasm of unspecified site of left orbit	ICD-10-CM	Diagnosis
D31.90	Benign neoplasm of unspecified part of unspecified eye	ICD-10-CM	Diagnosis
D31.91	Benign neoplasm of unspecified part of right eye	ICD-10-CM	Diagnosis
D31.92	Benign neoplasm of unspecified part of left eye	ICD-10-CM	Diagnosis
D32.0	Benign neoplasm of cerebral meninges	ICD-10-CM	Diagnosis
D32.1	Benign neoplasm of spinal meninges	ICD-10-CM	Diagnosis
D32.9	Benign neoplasm of meninges, unspecified	ICD-10-CM	Diagnosis
D33.0	Benign neoplasm of brain, supratentorial	ICD-10-CM	Diagnosis
D33.1	Benign neoplasm of brain, infratentorial	ICD-10-CM	Diagnosis
D33.2	Benign neoplasm of brain, unspecified	ICD-10-CM	Diagnosis
D33.3	Benign neoplasm of cranial nerves	ICD-10-CM	Diagnosis
D33.4	Benign neoplasm of spinal cord	ICD-10-CM	Diagnosis
D33.7	Benign neoplasm of other specified parts of central nervous system	ICD-10-CM	Diagnosis
D33.9	Benign neoplasm of central nervous system, unspecified	ICD-10-CM	Diagnosis
D34	Benign neoplasm of thyroid gland	ICD-10-CM	Diagnosis
D35.00	Benign neoplasm of unspecified adrenal gland	ICD-10-CM	Diagnosis
D35.01	Benign neoplasm of right adrenal gland	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
D35.02	Benign neoplasm of left adrenal gland	ICD-10-CM	Diagnosis
D35.1	Benign neoplasm of parathyroid gland	ICD-10-CM	Diagnosis
D35.2	Benign neoplasm of pituitary gland	ICD-10-CM	Diagnosis
D35.3	Benign neoplasm of craniopharyngeal duct	ICD-10-CM	Diagnosis
D35.4	Benign neoplasm of pineal gland	ICD-10-CM	Diagnosis
D35.5	Benign neoplasm of carotid body	ICD-10-CM	Diagnosis
D35.6	Benign neoplasm of aortic body and other paraganglia	ICD-10-CM	Diagnosis
D35.7	Benign neoplasm of other specified endocrine glands	ICD-10-CM	Diagnosis
D35.9	Benign neoplasm of endocrine gland, unspecified	ICD-10-CM	Diagnosis
D36.0	Benign neoplasm of lymph nodes	ICD-10-CM	Diagnosis
D36.10	Benign neoplasm of peripheral nerves and autonomic nervous system, unspecified	ICD-10-CM	Diagnosis
D36.11	Benign neoplasm of peripheral nerves and autonomic nervous system of face, head, and neck	ICD-10-CM	Diagnosis
D36.12	Benign neoplasm of peripheral nerves and autonomic nervous system, upper limb, including shoulder	ICD-10-CM	Diagnosis
D36.13	Benign neoplasm of peripheral nerves and autonomic nervous system of lower limb, including hip	ICD-10-CM	Diagnosis
D36.14	Benign neoplasm of peripheral nerves and autonomic nervous system of thorax	ICD-10-CM	Diagnosis
D36.15	Benign neoplasm of peripheral nerves and autonomic nervous system of abdomen	ICD-10-CM	Diagnosis
D36.16	Benign neoplasm of peripheral nerves and autonomic nervous system of pelvis	ICD-10-CM	Diagnosis
D36.17	Benign neoplasm of peripheral nerves and autonomic nervous system of trunk, unspecified	ICD-10-CM	Diagnosis
D36.7	Benign neoplasm of other specified sites	ICD-10-CM	Diagnosis
D36.9	Benign neoplasm, unspecified site	ICD-10-CM	Diagnosis
D37.01	Neoplasm of uncertain behavior of lip	ICD-10-CM	Diagnosis
D37.02	Neoplasm of uncertain behavior of tongue	ICD-10-CM	Diagnosis
D37.030	Neoplasm of uncertain behavior of the parotid salivary glands	ICD-10-CM	Diagnosis
D37.031	Neoplasm of uncertain behavior of the sublingual salivary glands	ICD-10-CM	Diagnosis
D37.032	Neoplasm of uncertain behavior of the submandibular salivary glands	ICD-10-CM	Diagnosis
D37.039	Neoplasm of uncertain behavior of the major salivary glands, unspecified	ICD-10-CM	Diagnosis
D37.04	Neoplasm of uncertain behavior of the minor salivary glands	ICD-10-CM	Diagnosis
D37.05	Neoplasm of uncertain behavior of pharynx	ICD-10-CM	Diagnosis
D37.09	Neoplasm of uncertain behavior of other specified sites of the oral cavity	ICD-10-CM	Diagnosis
D37.1	Neoplasm of uncertain behavior of stomach	ICD-10-CM	Diagnosis
D37.2	Neoplasm of uncertain behavior of small intestine	ICD-10-CM	Diagnosis
D37.3	Neoplasm of uncertain behavior of appendix	ICD-10-CM	Diagnosis
D37.4	Neoplasm of uncertain behavior of colon	ICD-10-CM	Diagnosis
D37.5	Neoplasm of uncertain behavior of rectum	ICD-10-CM	Diagnosis
D37.6	Neoplasm of uncertain behavior of liver, gallbladder and bile ducts	ICD-10-CM	Diagnosis
D37.8	Neoplasm of uncertain behavior of other specified digestive organs	ICD-10-CM	Diagnosis
D37.9	Neoplasm of uncertain behavior of digestive organ, unspecified	ICD-10-CM	Diagnosis
D38.0	Neoplasm of uncertain behavior of larynx	ICD-10-CM	Diagnosis
D38.1	Neoplasm of uncertain behavior of trachea, bronchus and lung	ICD-10-CM	Diagnosis
D38.2	Neoplasm of uncertain behavior of pleura	ICD-10-CM	Diagnosis
D38.3	Neoplasm of uncertain behavior of mediastinum	ICD-10-CM	Diagnosis
D38.4	Neoplasm of uncertain behavior of thymus	ICD-10-CM	Diagnosis
D38.5	Neoplasm of uncertain behavior of other respiratory organs	ICD-10-CM	Diagnosis
D38.6	Neoplasm of uncertain behavior of respiratory organ, unspecified	ICD-10-CM	Diagnosis
D39.0	Neoplasm of uncertain behavior of uterus	ICD-10-CM	Diagnosis
D39.10	Neoplasm of uncertain behavior of unspecified ovary	ICD-10-CM	Diagnosis
D39.11	Neoplasm of uncertain behavior of right ovary	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
D39.12	Neoplasm of uncertain behavior of left ovary	ICD-10-CM	Diagnosis
D39.2	Neoplasm of uncertain behavior of placenta	ICD-10-CM	Diagnosis
D39.8	Neoplasm of uncertain behavior of other specified female genital organs	ICD-10-CM	Diagnosis
D39.9	Neoplasm of uncertain behavior of female genital organ, unspecified	ICD-10-CM	Diagnosis
D3A.00	Benign carcinoid tumor of unspecified site	ICD-10-CM	Diagnosis
D3A.010	Benign carcinoid tumor of the duodenum	ICD-10-CM	Diagnosis
D3A.011	Benign carcinoid tumor of the jejunum	ICD-10-CM	Diagnosis
D3A.012	Benign carcinoid tumor of the ileum	ICD-10-CM	Diagnosis
D3A.019	Benign carcinoid tumor of the small intestine, unspecified portion	ICD-10-CM	Diagnosis
D3A.020	Benign carcinoid tumor of the appendix	ICD-10-CM	Diagnosis
D3A.021	Benign carcinoid tumor of the cecum	ICD-10-CM	Diagnosis
D3A.022	Benign carcinoid tumor of the ascending colon	ICD-10-CM	Diagnosis
D3A.023	Benign carcinoid tumor of the transverse colon	ICD-10-CM	Diagnosis
D3A.024	Benign carcinoid tumor of the descending colon	ICD-10-CM	Diagnosis
D3A.025	Benign carcinoid tumor of the sigmoid colon	ICD-10-CM	Diagnosis
D3A.026	Benign carcinoid tumor of the rectum	ICD-10-CM	Diagnosis
D3A.029	Benign carcinoid tumor of the large intestine, unspecified portion	ICD-10-CM	Diagnosis
D3A.090	Benign carcinoid tumor of the bronchus and lung	ICD-10-CM	Diagnosis
D3A.091	Benign carcinoid tumor of the thymus	ICD-10-CM	Diagnosis
D3A.092	Benign carcinoid tumor of the stomach	ICD-10-CM	Diagnosis
D3A.093	Benign carcinoid tumor of the kidney	ICD-10-CM	Diagnosis
D3A.094	Benign carcinoid tumor of the foregut, unspecified	ICD-10-CM	Diagnosis
D3A.095	Benign carcinoid tumor of the midgut, unspecified	ICD-10-CM	Diagnosis
D3A.096	Benign carcinoid tumor of the hindgut, unspecified	ICD-10-CM	Diagnosis
D3A.098	Benign carcinoid tumors of other sites	ICD-10-CM	Diagnosis
D3A.8	Other benign neuroendocrine tumors	ICD-10-CM	Diagnosis
D40.0	Neoplasm of uncertain behavior of prostate	ICD-10-CM	Diagnosis
D40.10	Neoplasm of uncertain behavior of unspecified testis	ICD-10-CM	Diagnosis
D40.11	Neoplasm of uncertain behavior of right testis	ICD-10-CM	Diagnosis
D40.12	Neoplasm of uncertain behavior of left testis	ICD-10-CM	Diagnosis
D40.8	Neoplasm of uncertain behavior of other specified male genital organs	ICD-10-CM	Diagnosis
D40.9	Neoplasm of uncertain behavior of male genital organ, unspecified	ICD-10-CM	Diagnosis
D41.00	Neoplasm of uncertain behavior of unspecified kidney	ICD-10-CM	Diagnosis
D41.01	Neoplasm of uncertain behavior of right kidney	ICD-10-CM	Diagnosis
D41.02	Neoplasm of uncertain behavior of left kidney	ICD-10-CM	Diagnosis
D41.10	Neoplasm of uncertain behavior of unspecified renal pelvis	ICD-10-CM	Diagnosis
D41.11	Neoplasm of uncertain behavior of right renal pelvis	ICD-10-CM	Diagnosis
D41.12	Neoplasm of uncertain behavior of left renal pelvis	ICD-10-CM	Diagnosis
D41.20	Neoplasm of uncertain behavior of unspecified ureter	ICD-10-CM	Diagnosis
D41.21	Neoplasm of uncertain behavior of right ureter	ICD-10-CM	Diagnosis
D41.22	Neoplasm of uncertain behavior of left ureter	ICD-10-CM	Diagnosis
D41.3	Neoplasm of uncertain behavior of urethra	ICD-10-CM	Diagnosis
D41.4	Neoplasm of uncertain behavior of bladder	ICD-10-CM	Diagnosis
D41.8	Neoplasm of uncertain behavior of other specified urinary organs	ICD-10-CM	Diagnosis
D41.9	Neoplasm of uncertain behavior of unspecified urinary organ	ICD-10-CM	Diagnosis
D42.0	Neoplasm of uncertain behavior of cerebral meninges	ICD-10-CM	Diagnosis
D42.1	Neoplasm of uncertain behavior of spinal meninges	ICD-10-CM	Diagnosis
D42.9	Neoplasm of uncertain behavior of meninges, unspecified	ICD-10-CM	Diagnosis
D43.0	Neoplasm of uncertain behavior of brain, supratentorial	ICD-10-CM	Diagnosis
D43.1	Neoplasm of uncertain behavior of brain, infratentorial	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
D43.2	Neoplasm of uncertain behavior of brain, unspecified	ICD-10-CM	Diagnosis
D43.3	Neoplasm of uncertain behavior of cranial nerves	ICD-10-CM	Diagnosis
D43.4	Neoplasm of uncertain behavior of spinal cord	ICD-10-CM	Diagnosis
D43.8	Neoplasm of uncertain behavior of other specified parts of central nervous system	ICD-10-CM	Diagnosis
D43.9	Neoplasm of uncertain behavior of central nervous system, unspecified	ICD-10-CM	Diagnosis
D44.0	Neoplasm of uncertain behavior of thyroid gland	ICD-10-CM	Diagnosis
D44.10	Neoplasm of uncertain behavior of unspecified adrenal gland	ICD-10-CM	Diagnosis
D44.11	Neoplasm of uncertain behavior of right adrenal gland	ICD-10-CM	Diagnosis
D44.12	Neoplasm of uncertain behavior of left adrenal gland	ICD-10-CM	Diagnosis
D44.2	Neoplasm of uncertain behavior of parathyroid gland	ICD-10-CM	Diagnosis
D44.3	Neoplasm of uncertain behavior of pituitary gland	ICD-10-CM	Diagnosis
D44.4	Neoplasm of uncertain behavior of craniopharyngeal duct	ICD-10-CM	Diagnosis
D44.5	Neoplasm of uncertain behavior of pineal gland	ICD-10-CM	Diagnosis
D44.6	Neoplasm of uncertain behavior of carotid body	ICD-10-CM	Diagnosis
D44.7	Neoplasm of uncertain behavior of aortic body and other paraganglia	ICD-10-CM	Diagnosis
D44.9	Neoplasm of uncertain behavior of unspecified endocrine gland	ICD-10-CM	Diagnosis
D45	Polycythemia vera	ICD-10-CM	Diagnosis
D46.0	Refractory anemia without ring sideroblasts, so stated	ICD-10-CM	Diagnosis
D46.1	Refractory anemia with ring sideroblasts	ICD-10-CM	Diagnosis
D46.20	Refractory anemia with excess of blasts, unspecified	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
D46.4	Refractory anemia, unspecified	ICD-10-CM	Diagnosis
D46.9	Myelodysplastic syndrome, 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
D46.C	Myelodysplastic syndrome with isolated del(5q) chromosomal abnormality	ICD-10-CM	Diagnosis
D46.Z	Other myelodysplastic syndromes	ICD-10-CM	Diagnosis
D47.01	Cutaneous mastocytosis	ICD-10-CM	Diagnosis
D47.02	Systemic mastocytosis	ICD-10-CM	Diagnosis
D47.09	Other mast cell neoplasms of uncertain behavior	ICD-10-CM	Diagnosis
D47.1	Chronic myeloproliferative disease	ICD-10-CM	Diagnosis
D47.3	Essential (hemorrhagic) thrombocythemia	ICD-10-CM	Diagnosis
D47.9	Neoplasm of uncertain behavior of lymphoid, hematopoietic and related tissue, unspecified	ICD-10-CM	Diagnosis
D47.Z1	Post-transplant lymphoproliferative disorder (PTLD)	ICD-10-CM	Diagnosis
D47.Z2	Castleman disease	ICD-10-CM	Diagnosis
D47.Z9	Other specified neoplasms of uncertain behavior of lymphoid, hematopoietic and related tissue	ICD-10-CM	Diagnosis
D48.0	Neoplasm of uncertain behavior of bone and articular cartilage	ICD-10-CM	Diagnosis
D48.1	Neoplasm of uncertain behavior of connective and other soft tissue	ICD-10-CM	Diagnosis
D48.2	Neoplasm of uncertain behavior of peripheral nerves and autonomic nervous system	ICD-10-CM	Diagnosis
D48.3	Neoplasm of uncertain behavior of retroperitoneum	ICD-10-CM	Diagnosis
D48.4	Neoplasm of uncertain behavior of peritoneum	ICD-10-CM	Diagnosis
D48.5	Neoplasm of uncertain behavior of skin	ICD-10-CM	Diagnosis
D48.60	Neoplasm of uncertain behavior of unspecified breast	ICD-10-CM	Diagnosis
D48.61	Neoplasm of uncertain behavior of right breast	ICD-10-CM	Diagnosis
D48.62	Neoplasm of uncertain behavior of left breast	ICD-10-CM	Diagnosis
D48.7	Neoplasm of uncertain behavior of other specified sites	ICD-10-CM	Diagnosis
D48.9	Neoplasm of uncertain behavior, unspecified	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
D49.0	Neoplasm of unspecified behavior of digestive system	ICD-10-CM	Diagnosis
D49.1	Neoplasm of unspecified behavior of respiratory system	ICD-10-CM	Diagnosis
D49.2	Neoplasm of unspecified behavior of bone, soft tissue, and skin	ICD-10-CM	Diagnosis
D49.3	Neoplasm of unspecified behavior of breast	ICD-10-CM	Diagnosis
D49.4	Neoplasm of unspecified behavior of bladder	ICD-10-CM	Diagnosis
D49.511	Neoplasm of unspecified behavior of right kidney	ICD-10-CM	Diagnosis
D49.512	Neoplasm of unspecified behavior of left kidney	ICD-10-CM	Diagnosis
D49.519	Neoplasm of unspecified behavior of unspecified kidney	ICD-10-CM	Diagnosis
D49.59	Neoplasm of unspecified behavior of other genitourinary organ	ICD-10-CM	Diagnosis
D49.6	Neoplasm of unspecified behavior of brain	ICD-10-CM	Diagnosis
D49.7	Neoplasm of unspecified behavior of endocrine glands and other parts of nervous system	ICD-10-CM	Diagnosis
D49.81	Neoplasm of unspecified behavior of retina and choroid	ICD-10-CM	Diagnosis
D49.89	Neoplasm of unspecified behavior of other specified sites	ICD-10-CM	Diagnosis
D49.9	Neoplasm of unspecified behavior of unspecified site	ICD-10-CM	Diagnosis
H47.42	Disorders of optic chiasm in (due to) neoplasm	ICD-10-CM	Diagnosis
H47.49	Disorders of optic chiasm in (due to) other disorders	ICD-10-CM	Diagnosis
H47.521	Disorders of visual pathways in (due to) neoplasm, right side	ICD-10-CM	Diagnosis
H47.522	Disorders of visual pathways in (due to) neoplasm, left side	ICD-10-CM	Diagnosis
H47.529	Disorders of visual pathways in (due to) neoplasm, unspecified side	ICD-10-CM	Diagnosis
H47.631	Disorders of visual cortex in (due to) neoplasm, right side of brain	ICD-10-CM	Diagnosis
H47.632	Disorders of visual cortex in (due to) neoplasm, left side of brain	ICD-10-CM	Diagnosis
H47.639	Disorders of visual cortex in (due to) neoplasm, unspecified side of brain	ICD-10-CM	Diagnosis
K31.7	Polyp of stomach and duodenum	ICD-10-CM	Diagnosis
K63.5	Polyp of colon	ICD-10-CM	Diagnosis
Q85.00	Neurofibromatosis, unspecified	ICD-10-CM	Diagnosis
Q85.01	Neurofibromatosis, type 1	ICD-10-CM	Diagnosis
Q85.02	Neurofibromatosis, type 2	ICD-10-CM	Diagnosis
Q85.03	Schwannomatosis	ICD-10-CM	Diagnosis
Q85.09	Other neurofibromatosis	ICD-10-CM	Diagnosis
Solid organ transplant			
02Y	Heart and Great Vessels, Transplantation	ICD-10-CM	Procedure
02YA	Transplantation / Heart	ICD-10-CM	Procedure
02YA0Z0	Transplantation of Heart, Allogeneic, Open Approach	ICD-10-CM	Procedure
02YA0Z1	Transplantation of Heart, Syngeneic, Open Approach	ICD-10-CM	Procedure
02YA0Z2	Transplantation of Heart, Zooplastic, Open Approach	ICD-10-CM	Procedure
07Y	Lymphatic and Hemic Systems, Transplantation	ICD-10-CM	Procedure
07YM	Transplantation / Thymus	ICD-10-CM	Procedure
07YM0Z0	Transplantation of Thymus, Allogeneic, Open Approach	ICD-10-CM	Procedure
07YM0Z1	Transplantation of Thymus, Syngeneic, Open Approach	ICD-10-CM	Procedure
07YM0Z2	Transplantation of Thymus, Zooplastic, Open Approach	ICD-10-CM	Procedure
07YP	Transplantation / Spleen	ICD-10-CM	Procedure
07YP0Z0	Transplantation of Spleen, Allogeneic, Open Approach	ICD-10-CM	Procedure
07YP0Z1	Transplantation of Spleen, Syngeneic, Open Approach	ICD-10-CM	Procedure
07YP0Z2	Transplantation of Spleen, Zooplastic, Open Approach	ICD-10-CM	Procedure
0BY	Respiratory System, Transplantation	ICD-10-CM	Procedure
0BYC	Transplantation / Upper Lung Lobe, Right	ICD-10-CM	Procedure
0BYCOZ0	Transplantation of Right Upper Lung Lobe, Allogeneic, Open Approach	ICD-10-CM	Procedure
0BYCOZ1	Transplantation of Right Upper Lung Lobe, Syngeneic, Open Approach	ICD-10-CM	Procedure
0BYCOZ2	Transplantation of Right Upper Lung Lobe, Zooplastic, Open Approach	ICD-10-CM	Procedure
0BYD	Transplantation / Middle Lung Lobe, Right	ICD-10-CM	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
0BYDOZ0	Transplantation of Right Middle Lung Lobe, Allogeneic, Open Approach	ICD-10-CM	Procedure
0BYDOZ1	Transplantation of Right Middle Lung Lobe, Syngeneic, Open Approach	ICD-10-CM	Procedure
0BYDOZ2	Transplantation of Right Middle Lung Lobe, Zooplastic, Open Approach	ICD-10-CM	Procedure
0BYF	Transplantation / Lower Lung Lobe, Right	ICD-10-CM	Procedure
0BYFOZ0	Transplantation of Right Lower Lung Lobe, Allogeneic, Open Approach	ICD-10-CM	Procedure
0BYFOZ1	Transplantation of Right Lower Lung Lobe, Syngeneic, Open Approach	ICD-10-CM	Procedure
0BYFOZ2	Transplantation of Right Lower Lung Lobe, Zooplastic, Open Approach	ICD-10-CM	Procedure
0BYG	Transplantation / Upper Lung Lobe, Left	ICD-10-CM	Procedure
0BYGOZ0	Transplantation of Left Upper Lung Lobe, Allogeneic, Open Approach	ICD-10-CM	Procedure
0BYGOZ1	Transplantation of Left Upper Lung Lobe, Syngeneic, Open Approach	ICD-10-CM	Procedure
0BYGOZ2	Transplantation of Left Upper Lung Lobe, Zooplastic, Open Approach	ICD-10-CM	Procedure
0BYH	Transplantation / Lung Lingula	ICD-10-CM	Procedure
0BYHOZ0	Transplantation of Lung Lingula, Allogeneic, Open Approach	ICD-10-CM	Procedure
0BYHOZ1	Transplantation of Lung Lingula, Syngeneic, Open Approach	ICD-10-CM	Procedure
0BYHOZ2	Transplantation of Lung Lingula, Zooplastic, Open Approach	ICD-10-CM	Procedure
0BYJ	Transplantation / Lower Lung Lobe, Left	ICD-10-CM	Procedure
0BYJOZ0	Transplantation of Left Lower Lung Lobe, Allogeneic, Open Approach	ICD-10-CM	Procedure
0BYJOZ1	Transplantation of Left Lower Lung Lobe, Syngeneic, Open Approach	ICD-10-CM	Procedure
0BYJOZ2	Transplantation of Left Lower Lung Lobe, Zooplastic, Open Approach	ICD-10-CM	Procedure
0BYK	Transplantation / Lung, Right	ICD-10-CM	Procedure
0BYKOZ0	Transplantation of Right Lung, Allogeneic, Open Approach	ICD-10-CM	Procedure
0BYKOZ1	Transplantation of Right Lung, Syngeneic, Open Approach	ICD-10-CM	Procedure
0BYKOZ2	Transplantation of Right Lung, Zooplastic, Open Approach	ICD-10-CM	Procedure
0BYL	Transplantation / Lung, Left	ICD-10-CM	Procedure
0BYLOZ0	Transplantation of Left Lung, Allogeneic, Open Approach	ICD-10-CM	Procedure
0BYLOZ1	Transplantation of Left Lung, Syngeneic, Open Approach	ICD-10-CM	Procedure
0BYLOZ2	Transplantation of Left Lung, Zooplastic, Open Approach	ICD-10-CM	Procedure
0BYM	Transplantation / Lungs, Bilateral	ICD-10-CM	Procedure
0BYMOZ0	Transplantation of Bilateral Lungs, Allogeneic, Open Approach	ICD-10-CM	Procedure
0BYMOZ1	Transplantation of Bilateral Lungs, Syngeneic, Open Approach	ICD-10-CM	Procedure
0BYMOZ2	Transplantation of Bilateral Lungs, Zooplastic, Open Approach	ICD-10-CM	Procedure
0DY	Gastrointestinal System, Transplantation	ICD-10-CM	Procedure
0DY5	Transplantation / Esophagus	ICD-10-CM	Procedure
0DY5OZ0	Transplantation of Esophagus, Allogeneic, Open Approach	ICD-10-CM	Procedure
0DY5OZ1	Transplantation of Esophagus, Syngeneic, Open Approach	ICD-10-CM	Procedure
0DY5OZ2	Transplantation of Esophagus, Zooplastic, Open Approach	ICD-10-CM	Procedure
0DY6	Transplantation / Stomach	ICD-10-CM	Procedure
0DY6OZ0	Transplantation of Stomach, Allogeneic, Open Approach	ICD-10-CM	Procedure
0DY6OZ1	Transplantation of Stomach, Syngeneic, Open Approach	ICD-10-CM	Procedure
0DY6OZ2	Transplantation of Stomach, Zooplastic, Open Approach	ICD-10-CM	Procedure
0DY8	Transplantation / Small Intestine	ICD-10-CM	Procedure
0DY8OZ0	Transplantation of Small Intestine, Allogeneic, Open Approach	ICD-10-CM	Procedure
0DY8OZ1	Transplantation of Small Intestine, Syngeneic, Open Approach	ICD-10-CM	Procedure
0DY8OZ2	Transplantation of Small Intestine, Zooplastic, Open Approach	ICD-10-CM	Procedure
0DYE	Transplantation / Large Intestine	ICD-10-CM	Procedure
0DYE0Z0	Transplantation of Large Intestine, Allogeneic, Open Approach	ICD-10-CM	Procedure
0DYE0Z1	Transplantation of Large Intestine, Syngeneic, Open Approach	ICD-10-CM	Procedure
0DYE0Z2	Transplantation of Large Intestine, Zooplastic, Open Approach	ICD-10-CM	Procedure
0FY	Hepatobiliary System and Pancreas, Transplantation	ICD-10-CM	Procedure
0FY0	Transplantation / Liver	ICD-10-CM	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
0FY00Z0	Transplantation of Liver, Allogeneic, Open Approach	ICD-10-CM	Procedure
0FY00Z1	Transplantation of Liver, Syngeneic, Open Approach	ICD-10-CM	Procedure
0FY00Z2	Transplantation of Liver, Zooplastic, Open Approach	ICD-10-CM	Procedure
0FYG	Transplantation / Pancreas	ICD-10-CM	Procedure
0FYGOZ0	Transplantation of Pancreas, Allogeneic, Open Approach	ICD-10-CM	Procedure
0FYGOZ1	Transplantation of Pancreas, Syngeneic, Open Approach	ICD-10-CM	Procedure
0FYGOZ2	Transplantation of Pancreas, Zooplastic, Open Approach	ICD-10-CM	Procedure
0TY	Urinary System, Transplantation	ICD-10-CM	Procedure
0TY0	Transplantation / Kidney, Right	ICD-10-CM	Procedure
0TY00Z0	Transplantation of Right Kidney, Allogeneic, Open Approach	ICD-10-CM	Procedure
0TY00Z1	Transplantation of Right Kidney, Syngeneic, Open Approach	ICD-10-CM	Procedure
0TY00Z2	Transplantation of Right Kidney, Zooplastic, Open Approach	ICD-10-CM	Procedure
0TY1	Transplantation / Kidney, Left	ICD-10-CM	Procedure
0TY10Z0	Transplantation of Left Kidney, Allogeneic, Open Approach	ICD-10-CM	Procedure
0TY10Z1	Transplantation of Left Kidney, Syngeneic, Open Approach	ICD-10-CM	Procedure
0TY10Z2	Transplantation of Left Kidney, Zooplastic, Open Approach	ICD-10-CM	Procedure
0UY	Female Reproductive System, Transplantation	ICD-10-CM	Procedure
0UY0	Transplantation / Ovary, Right	ICD-10-CM	Procedure
0UY00Z0	Transplantation of Right Ovary, Allogeneic, Open Approach	ICD-10-CM	Procedure
0UY00Z1	Transplantation of Right Ovary, Syngeneic, Open Approach	ICD-10-CM	Procedure
0UY00Z2	Transplantation of Right Ovary, Zooplastic, Open Approach	ICD-10-CM	Procedure
0UY1	Transplantation / Ovary, Left	ICD-10-CM	Procedure
0UY10Z0	Transplantation of Left Ovary, Allogeneic, Open Approach	ICD-10-CM	Procedure
0UY10Z1	Transplantation of Left Ovary, Syngeneic, Open Approach	ICD-10-CM	Procedure
0UY10Z2	Transplantation of Left Ovary, Zooplastic, Open Approach	ICD-10-CM	Procedure
0UY9	Transplantation / Uterus	ICD-10-CM	Procedure
0UY90Z0	Transplantation of Uterus, Allogeneic, Open Approach	ICD-10-CM	Procedure
0UY90Z1	Transplantation of Uterus, Syngeneic, Open Approach	ICD-10-CM	Procedure
0UY90Z2	Transplantation of Uterus, Zooplastic, Open Approach	ICD-10-CM	Procedure
0WY	Anatomical Regions, General, Transplantation	ICD-10-CM	Procedure
0WY2	Transplantation / Face	ICD-10-CM	Procedure
0WY20Z0	Transplantation of Face, Allogeneic, Open Approach	ICD-10-CM	Procedure
0WY20Z1	Transplantation of Face, Syngeneic, Open Approach	ICD-10-CM	Procedure
0XY	Anatomical Regions, Upper Extremities, Transplantation	ICD-10-CM	Procedure
0XYJ	Transplantation / Hand, Right	ICD-10-CM	Procedure
0XYJ0Z0	Transplantation of Right Hand, Allogeneic, Open Approach	ICD-10-CM	Procedure
0XYJ0Z1	Transplantation of Right Hand, Syngeneic, Open Approach	ICD-10-CM	Procedure
0XYK	Transplantation / Hand, Left	ICD-10-CM	Procedure
0XYK0Z0	Transplantation of Left Hand, Allogeneic, Open Approach	ICD-10-CM	Procedure
0XYK0Z1	Transplantation of Left Hand, Syngeneic, Open Approach	ICD-10-CM	Procedure
Bone marrow transplant			
T86.02	Bone marrow transplant failure	ICD-10-CM	Diagnosis
T86.03	Bone marrow transplant infection	ICD-10-CM	Diagnosis
T86.01	Bone marrow transplant rejection	ICD-10-CM	Diagnosis
Z94.81	Bone marrow transplant status	ICD-10-CM	Diagnosis
T86.0	Complications of bone marrow transplant	ICD-10-CM	Diagnosis
Z48.290	Encounter for aftercare following bone marrow transplant	ICD-10-CM	Diagnosis
T86.09	Other complications of bone marrow transplant	ICD-10-CM	Diagnosis
T86.00	Unspecified complication of bone marrow transplant	ICD-10-CM	Diagnosis
D89.810	Acute graft-versus-host disease	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
D89.811	Chronic graft-versus-host disease	ICD-10-CM	Diagnosis
T86.5	Complications of stem cell transplant	ICD-10-CM	Diagnosis
C80.2	Malignant neoplasm associated with transplanted organ	ICD-10-CM	Diagnosis
D47.Z1	Post-transplant lymphoproliferative disorder (PTLD)	ICD-10-CM	Diagnosis
Z94.84	Stem cells transplant status	ICD-10-CM	Diagnosis
Pregnancy			
O98.5	Other viral diseases complicating pregnancy, childbirth and the puerperium	ICD-10-CM	Diagnosis
O98.51	Other viral diseases complicating pregnancy	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
O98.519	Other viral diseases complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O98.52	Other viral diseases complicating childbirth	ICD-10-CM	Diagnosis
O98.53	Other viral diseases complicating the puerperium	ICD-10-CM	Diagnosis
0W8NXZZ	Division of Female Perineum, External Approach	ICD-10-CM	Procedure
10900ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception, Open Approach	ICD-10-CM	Procedure
10903ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10904ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10907ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10908ZC	Drainage of Amniotic Fluid, Therapeutic from Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10D00Z0	Extraction of Products of Conception, Classical, Open Approach	ICD-10-CM	Procedure
10D00Z1	Extraction of Products of Conception, Low Cervical, Open Approach	ICD-10-CM	Procedure
10D00Z2	Extraction of Products of Conception, Extraperitoneal, Open Approach	ICD-10-CM	Procedure
10D07Z3	Extraction of Products of Conception, Low Forceps, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10D07Z4	Extraction of Products of Conception, Mid Forceps, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10D07Z5	Extraction of Products of Conception, High Forceps, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10D07Z6	Extraction of Products of Conception, Vacuum, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10D07Z7	Extraction of Products of Conception, Internal Version, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10D07Z8	Extraction of Products of Conception, Other, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10E0XZZ	Delivery of Products of Conception, External Approach	ICD-10-CM	Procedure
10S07ZZ	Reposition Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
O1002	Pre-existing essential hypertension complicating childbirth	ICD-10-CM	Diagnosis
O1012	Pre-existing hypertensive heart disease complicating childbirth	ICD-10-CM	Diagnosis
O1022	Pre-existing hypertensive chronic kidney disease complicating childbirth	ICD-10-CM	Diagnosis
O1032	Pre-existing hypertensive heart and chronic kidney disease complicating childbirth	ICD-10-CM	Diagnosis
O1042	Pre-existing secondary hypertension complicating childbirth	ICD-10-CM	Diagnosis
O1092	Unspecified pre-existing hypertension complicating childbirth	ICD-10-CM	Diagnosis
O114	Pre-existing hypertension with pre-eclampsia, complicating childbirth	ICD-10-CM	Diagnosis
O1204	Gestational edema, complicating childbirth	ICD-10-CM	Diagnosis
O1214	Gestational proteinuria, complicating childbirth	ICD-10-CM	Diagnosis
O1224	Gestational edema with proteinuria, complicating childbirth	ICD-10-CM	Diagnosis
O134	Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating childbirth	ICD-10-CM	Diagnosis
O1404	Mild to moderate pre-eclampsia, complicating childbirth	ICD-10-CM	Diagnosis
O1414	Severe pre-eclampsia complicating childbirth	ICD-10-CM	Diagnosis
O1424	HELLP syndrome, complicating childbirth	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O1494	Unspecified pre-eclampsia, complicating childbirth	ICD-10-CM	Diagnosis
O164	Unspecified maternal hypertension, complicating childbirth	ICD-10-CM	Diagnosis
O2402	Pre-existing type 1 diabetes mellitus, in childbirth	ICD-10-CM	Diagnosis
O2412	Pre-existing type 2 diabetes mellitus, in childbirth	ICD-10-CM	Diagnosis
O2432	Unspecified pre-existing diabetes mellitus in childbirth	ICD-10-CM	Diagnosis
O24420	Gestational diabetes mellitus in childbirth, diet controlled	ICD-10-CM	Diagnosis
O24424	Gestational diabetes mellitus in childbirth, insulin controlled	ICD-10-CM	Diagnosis
O24425	Gestational diabetes mellitus in childbirth, controlled by oral hypoglycemic drugs	ICD-10-CM	Diagnosis
O24429	Gestational diabetes mellitus in childbirth, unspecified control	ICD-10-CM	Diagnosis
O2482	Other pre-existing diabetes mellitus in childbirth	ICD-10-CM	Diagnosis
O2492	Unspecified diabetes mellitus in childbirth	ICD-10-CM	Diagnosis
O252	Malnutrition in childbirth	ICD-10-CM	Diagnosis
O2662	Liver and biliary tract disorders in childbirth	ICD-10-CM	Diagnosis
O2672	Subluxation of symphysis (pubis) in childbirth	ICD-10-CM	Diagnosis
O6012X0	Preterm labor second trimester with preterm delivery second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O6012X1	Preterm labor second trimester with preterm delivery second trimester, fetus 1	ICD-10-CM	Diagnosis
O6012X2	Preterm labor second trimester with preterm delivery second trimester, fetus 2	ICD-10-CM	Diagnosis
O6012X3	Preterm labor second trimester with preterm delivery second trimester, fetus 3	ICD-10-CM	Diagnosis
O6012X4	Preterm labor second trimester with preterm delivery second trimester, fetus 4	ICD-10-CM	Diagnosis
O6012X5	Preterm labor second trimester with preterm delivery second trimester, fetus 5	ICD-10-CM	Diagnosis
O6012X9	Preterm labor second trimester with preterm delivery second trimester, other fetus	ICD-10-CM	Diagnosis
O6013X0	Preterm labor second trimester with preterm delivery third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O6013X1	Preterm labor second trimester with preterm delivery third trimester, fetus 1	ICD-10-CM	Diagnosis
O6013X2	Preterm labor second trimester with preterm delivery third trimester, fetus 2	ICD-10-CM	Diagnosis
O6013X3	Preterm labor second trimester with preterm delivery third trimester, fetus 3	ICD-10-CM	Diagnosis
O6013X4	Preterm labor second trimester with preterm delivery third trimester, fetus 4	ICD-10-CM	Diagnosis
O6013X5	Preterm labor second trimester with preterm delivery third trimester, fetus 5	ICD-10-CM	Diagnosis
O6013X9	Preterm labor second trimester with preterm delivery third trimester, other fetus	ICD-10-CM	Diagnosis
O6014X0	Preterm labor third trimester with preterm delivery third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O6014X1	Preterm labor third trimester with preterm delivery third trimester, fetus 1	ICD-10-CM	Diagnosis
O6014X2	Preterm labor third trimester with preterm delivery third trimester, fetus 2	ICD-10-CM	Diagnosis
O6014X3	Preterm labor third trimester with preterm delivery third trimester, fetus 3	ICD-10-CM	Diagnosis
O6014X4	Preterm labor third trimester with preterm delivery third trimester, fetus 4	ICD-10-CM	Diagnosis
O6014X5	Preterm labor third trimester with preterm delivery third trimester, fetus 5	ICD-10-CM	Diagnosis
O6014X9	Preterm labor third trimester with preterm delivery third trimester, other fetus	ICD-10-CM	Diagnosis
O6022X0	Term delivery with preterm labor, second trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O6022X1	Term delivery with preterm labor, second trimester, fetus 1	ICD-10-CM	Diagnosis
O6022X2	Term delivery with preterm labor, second trimester, fetus 2	ICD-10-CM	Diagnosis
O6022X3	Term delivery with preterm labor, second trimester, fetus 3	ICD-10-CM	Diagnosis
O6022X4	Term delivery with preterm labor, second trimester, fetus 4	ICD-10-CM	Diagnosis
O6022X5	Term delivery with preterm labor, second trimester, fetus 5	ICD-10-CM	Diagnosis
O6022X9	Term delivery with preterm labor, second trimester, other fetus	ICD-10-CM	Diagnosis
O6023X0	Term delivery with preterm labor, third trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O6023X1	Term delivery with preterm labor, third trimester, fetus 1	ICD-10-CM	Diagnosis
O6023X2	Term delivery with preterm labor, third trimester, fetus 2	ICD-10-CM	Diagnosis
O6023X3	Term delivery with preterm labor, third trimester, fetus 3	ICD-10-CM	Diagnosis
O6023X4	Term delivery with preterm labor, third trimester, fetus 4	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O6023X5	Term delivery with preterm labor, third trimester, fetus 5	ICD-10-CM	Diagnosis
O6023X9	Term delivery with preterm labor, third trimester, other fetus	ICD-10-CM	Diagnosis
O632	Delayed delivery of second twin, triplet, etc	ICD-10-CM	Diagnosis
O670	Intrapartum hemorrhage with coagulation defect	ICD-10-CM	Diagnosis
O678	Other intrapartum hemorrhage	ICD-10-CM	Diagnosis
O679	Intrapartum hemorrhage, unspecified	ICD-10-CM	Diagnosis
O68	Labor and delivery complicated by abnormality of fetal acid-base balance	ICD-10-CM	Diagnosis
O690XX0	Labor and delivery complicated by prolapse of cord, not applicable or unspecified	ICD-10-CM	Diagnosis
O690XX1	Labor and delivery complicated by prolapse of cord, fetus 1	ICD-10-CM	Diagnosis
O690XX2	Labor and delivery complicated by prolapse of cord, fetus 2	ICD-10-CM	Diagnosis
O690XX3	Labor and delivery complicated by prolapse of cord, fetus 3	ICD-10-CM	Diagnosis
O690XX4	Labor and delivery complicated by prolapse of cord, fetus 4	ICD-10-CM	Diagnosis
O690XX5	Labor and delivery complicated by prolapse of cord, fetus 5	ICD-10-CM	Diagnosis
O690XX9	Labor and delivery complicated by prolapse of cord, other fetus	ICD-10-CM	Diagnosis
O691XX0	Labor and delivery complicated by cord around neck, with compression, not applicable or unspecified	ICD-10-CM	Diagnosis
O691XX1	Labor and delivery complicated by cord around neck, with compression, fetus 1	ICD-10-CM	Diagnosis
O691XX2	Labor and delivery complicated by cord around neck, with compression, fetus 2	ICD-10-CM	Diagnosis
O691XX3	Labor and delivery complicated by cord around neck, with compression, fetus 3	ICD-10-CM	Diagnosis
O691XX4	Labor and delivery complicated by cord around neck, with compression, fetus 4	ICD-10-CM	Diagnosis
O691XX5	Labor and delivery complicated by cord around neck, with compression, fetus 5	ICD-10-CM	Diagnosis
O691XX9	Labor and delivery complicated by cord around neck, with compression, other fetus	ICD-10-CM	Diagnosis
O692XX0	Labor and delivery complicated by other cord entanglement, with compression, not applicable or unspecified	ICD-10-CM	Diagnosis
O692XX1	Labor and delivery complicated by other cord entanglement, with compression, fetus 1	ICD-10-CM	Diagnosis
O692XX2	Labor and delivery complicated by other cord entanglement, with compression, fetus 2	ICD-10-CM	Diagnosis
O692XX3	Labor and delivery complicated by other cord entanglement, with compression, fetus 3	ICD-10-CM	Diagnosis
O692XX4	Labor and delivery complicated by other cord entanglement, with compression, fetus 4	ICD-10-CM	Diagnosis
O692XX5	Labor and delivery complicated by other cord entanglement, with compression, fetus 5	ICD-10-CM	Diagnosis
O692XX9	Labor and delivery complicated by other cord entanglement, with compression, other fetus	ICD-10-CM	Diagnosis
O693XX0	Labor and delivery complicated by short cord, not applicable or unspecified	ICD-10-CM	Diagnosis
O693XX1	Labor and delivery complicated by short cord, fetus 1	ICD-10-CM	Diagnosis
O693XX2	Labor and delivery complicated by short cord, fetus 2	ICD-10-CM	Diagnosis
O693XX3	Labor and delivery complicated by short cord, fetus 3	ICD-10-CM	Diagnosis
O693XX4	Labor and delivery complicated by short cord, fetus 4	ICD-10-CM	Diagnosis
O693XX5	Labor and delivery complicated by short cord, fetus 5	ICD-10-CM	Diagnosis
O693XX9	Labor and delivery complicated by short cord, other fetus	ICD-10-CM	Diagnosis
O694XX0	Labor and delivery complicated by vasa previa, not applicable or unspecified	ICD-10-CM	Diagnosis
O694XX1	Labor and delivery complicated by vasa previa, fetus 1	ICD-10-CM	Diagnosis
O694XX2	Labor and delivery complicated by vasa previa, fetus 2	ICD-10-CM	Diagnosis
O694XX3	Labor and delivery complicated by vasa previa, fetus 3	ICD-10-CM	Diagnosis
O694XX4	Labor and delivery complicated by vasa previa, fetus 4	ICD-10-CM	Diagnosis
O694XX5	Labor and delivery complicated by vasa previa, fetus 5	ICD-10-CM	Diagnosis
O694XX9	Labor and delivery complicated by vasa previa, other fetus	ICD-10-CM	Diagnosis
O695XX0	Labor and delivery complicated by vascular lesion of cord, not applicable or unspecified	ICD-10-CM	Diagnosis
O695XX1	Labor and delivery complicated by vascular lesion of cord, fetus 1	ICD-10-CM	Diagnosis
O695XX2	Labor and delivery complicated by vascular lesion of cord, fetus 2	ICD-10-CM	Diagnosis
O695XX3	Labor and delivery complicated by vascular lesion of cord, fetus 3	ICD-10-CM	Diagnosis
O695XX4	Labor and delivery complicated by vascular lesion of cord, fetus 4	ICD-10-CM	Diagnosis
O695XX5	Labor and delivery complicated by vascular lesion of cord, fetus 5	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O695XX9	Labor and delivery complicated by vascular lesion of cord, other fetus	ICD-10-CM	Diagnosis
O6981X0	Labor and delivery complicated by cord around neck, without compression, not applicable or unspecified	ICD-10-CM	Diagnosis
O6981X1	Labor and delivery complicated by cord around neck, without compression, fetus 1	ICD-10-CM	Diagnosis
O6981X2	Labor and delivery complicated by cord around neck, without compression, fetus 2	ICD-10-CM	Diagnosis
O6981X3	Labor and delivery complicated by cord around neck, without compression, fetus 3	ICD-10-CM	Diagnosis
O6981X4	Labor and delivery complicated by cord around neck, without compression, fetus 4	ICD-10-CM	Diagnosis
O6981X5	Labor and delivery complicated by cord around neck, without compression, fetus 5	ICD-10-CM	Diagnosis
O6981X9	Labor and delivery complicated by cord around neck, without compression, other fetus	ICD-10-CM	Diagnosis
O6982X0	Labor and delivery complicated by other cord entanglement, without compression, not applicable or unspecified	ICD-10-CM	Diagnosis
O6982X1	Labor and delivery complicated by other cord entanglement, without compression, fetus 1	ICD-10-CM	Diagnosis
O6982X2	Labor and delivery complicated by other cord entanglement, without compression, fetus 2	ICD-10-CM	Diagnosis
O6982X3	Labor and delivery complicated by other cord entanglement, without compression, fetus 3	ICD-10-CM	Diagnosis
O6982X4	Labor and delivery complicated by other cord entanglement, without compression, fetus 4	ICD-10-CM	Diagnosis
O6982X5	Labor and delivery complicated by other cord entanglement, without compression, fetus 5	ICD-10-CM	Diagnosis
O6982X9	Labor and delivery complicated by other cord entanglement, without compression, other fetus	ICD-10-CM	Diagnosis
O6989X0	Labor and delivery complicated by other cord complications, not applicable or unspecified	ICD-10-CM	Diagnosis
O6989X1	Labor and delivery complicated by other cord complications, fetus 1	ICD-10-CM	Diagnosis
O6989X2	Labor and delivery complicated by other cord complications, fetus 2	ICD-10-CM	Diagnosis
O6989X3	Labor and delivery complicated by other cord complications, fetus 3	ICD-10-CM	Diagnosis
O6989X4	Labor and delivery complicated by other cord complications, fetus 4	ICD-10-CM	Diagnosis
O6989X5	Labor and delivery complicated by other cord complications, fetus 5	ICD-10-CM	Diagnosis
O6989X9	Labor and delivery complicated by other cord complications, other fetus	ICD-10-CM	Diagnosis
O699XX0	Labor and delivery complicated by cord complication, unspecified, not applicable or unspecified	ICD-10-CM	Diagnosis
O699XX1	Labor and delivery complicated by cord complication, unspecified, fetus 1	ICD-10-CM	Diagnosis
O699XX2	Labor and delivery complicated by cord complication, unspecified, fetus 2	ICD-10-CM	Diagnosis
O699XX3	Labor and delivery complicated by cord complication, unspecified, fetus 3	ICD-10-CM	Diagnosis
O699XX4	Labor and delivery complicated by cord complication, unspecified, fetus 4	ICD-10-CM	Diagnosis
O699XX5	Labor and delivery complicated by cord complication, unspecified, fetus 5	ICD-10-CM	Diagnosis
O699XX9	Labor and delivery complicated by cord complication, unspecified, other fetus	ICD-10-CM	Diagnosis
O700	First degree perineal laceration during delivery	ICD-10-CM	Diagnosis
O701	Second degree perineal laceration during delivery	ICD-10-CM	Diagnosis
O7020	Third degree perineal laceration during delivery, unspecified	ICD-10-CM	Diagnosis
O7021	Third degree perineal laceration during delivery, IIIa	ICD-10-CM	Diagnosis
O7022	Third degree perineal laceration during delivery, IIIb	ICD-10-CM	Diagnosis
O7023	Third degree perineal laceration during delivery, IIIc	ICD-10-CM	Diagnosis
O703	Fourth degree perineal laceration during delivery	ICD-10-CM	Diagnosis
O704	Anal sphincter tear complicating delivery, not associated with third degree laceration	ICD-10-CM	Diagnosis
O709	Perineal laceration during delivery, unspecified	ICD-10-CM	Diagnosis
O740	Aspiration pneumonitis due to anesthesia during labor and delivery	ICD-10-CM	Diagnosis
O741	Other pulmonary complications of anesthesia during labor and delivery	ICD-10-CM	Diagnosis
O742	Cardiac complications of anesthesia during labor and delivery	ICD-10-CM	Diagnosis
O743	Central nervous system complications of anesthesia during labor and delivery	ICD-10-CM	Diagnosis
O744	Toxic reaction to local anesthesia during labor and delivery	ICD-10-CM	Diagnosis
O745	Spinal and epidural anesthesia-induced headache during labor and delivery	ICD-10-CM	Diagnosis
O746	Other complications of spinal and epidural anesthesia during labor and delivery	ICD-10-CM	Diagnosis
O747	Failed or difficult intubation for anesthesia during labor and delivery	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O748	Other complications of anesthesia during labor and delivery	ICD-10-CM	Diagnosis
O749	Complication of anesthesia during labor and delivery, unspecified	ICD-10-CM	Diagnosis
O750	Maternal distress during labor and delivery	ICD-10-CM	Diagnosis
O751	Shock during or following labor and delivery	ICD-10-CM	Diagnosis
O755	Delayed delivery after artificial rupture of membranes	ICD-10-CM	Diagnosis
O7581	Maternal exhaustion complicating labor and delivery	ICD-10-CM	Diagnosis
O7582	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
O7589	Other specified complications of labor and delivery	ICD-10-CM	Diagnosis
O759	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
O770	Labor and delivery complicated by meconium in amniotic fluid	ICD-10-CM	Diagnosis
O778	Labor and delivery complicated by other evidence of fetal stress	ICD-10-CM	Diagnosis
O779	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
O8802	Air embolism in childbirth	ICD-10-CM	Diagnosis
O8812	Amniotic fluid embolism in childbirth	ICD-10-CM	Diagnosis
O8822	Thromboembolism in childbirth	ICD-10-CM	Diagnosis
O8832	Pyemic and septic embolism in childbirth	ICD-10-CM	Diagnosis
O8882	Other embolism in childbirth	ICD-10-CM	Diagnosis
O9802	Tuberculosis complicating childbirth	ICD-10-CM	Diagnosis
O9812	Syphilis complicating childbirth	ICD-10-CM	Diagnosis
O9822	Gonorrhea complicating childbirth	ICD-10-CM	Diagnosis
O9832	Other infections with a predominantly sexual mode of transmission complicating childbirth	ICD-10-CM	Diagnosis
O9842	Viral hepatitis complicating childbirth	ICD-10-CM	Diagnosis
O9852	Other viral diseases complicating childbirth	ICD-10-CM	Diagnosis
O9862	Protozoal diseases complicating childbirth	ICD-10-CM	Diagnosis
O9872	Human immunodeficiency virus [HIV] disease complicating childbirth	ICD-10-CM	Diagnosis
O9882	Other maternal infectious and parasitic diseases complicating childbirth	ICD-10-CM	Diagnosis
O9892	Unspecified maternal infectious and parasitic disease complicating childbirth	ICD-10-CM	Diagnosis
O9902	Anemia complicating childbirth	ICD-10-CM	Diagnosis
O9912	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating childbirth	ICD-10-CM	Diagnosis
O99214	Obesity complicating childbirth	ICD-10-CM	Diagnosis
O99284	Endocrine, nutritional and metabolic diseases complicating childbirth	ICD-10-CM	Diagnosis
O99314	Alcohol use complicating childbirth	ICD-10-CM	Diagnosis
O99324	Drug use complicating childbirth	ICD-10-CM	Diagnosis
O99334	Smoking (tobacco) complicating childbirth	ICD-10-CM	Diagnosis
O99344	Other mental disorders complicating childbirth	ICD-10-CM	Diagnosis
O99354	Diseases of the nervous system complicating childbirth	ICD-10-CM	Diagnosis
O9942	Diseases of the circulatory system complicating childbirth	ICD-10-CM	Diagnosis
O9952	Diseases of the respiratory system complicating childbirth	ICD-10-CM	Diagnosis
O9962	Diseases of the digestive system complicating childbirth	ICD-10-CM	Diagnosis
O9972	Diseases of the skin and subcutaneous tissue complicating childbirth	ICD-10-CM	Diagnosis
O99814	Abnormal glucose complicating childbirth	ICD-10-CM	Diagnosis
O99824	Streptococcus B carrier state complicating childbirth	ICD-10-CM	Diagnosis
O99834	Other infection carrier state complicating childbirth	ICD-10-CM	Diagnosis
O99844	Bariatric surgery status complicating childbirth	ICD-10-CM	Diagnosis
O9A12	Malignant neoplasm complicating childbirth	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O9A22	Injury, poisoning and certain other consequences of external causes complicating childbirth	ICD-10-CM	Diagnosis
O9A32	Physical abuse complicating childbirth	ICD-10-CM	Diagnosis
O9A42	Sexual abuse complicating childbirth	ICD-10-CM	Diagnosis
O9A52	Psychological abuse complicating childbirth	ICD-10-CM	Diagnosis
P030	Newborn affected by breech delivery and extraction	ICD-10-CM	Diagnosis
P032	Newborn affected by forceps delivery	ICD-10-CM	Diagnosis
P033	Newborn affected by delivery by vacuum extractor [ventouse]	ICD-10-CM	Diagnosis
P034	Newborn affected by Cesarean delivery	ICD-10-CM	Diagnosis
P035	Newborn affected by precipitate delivery	ICD-10-CM	Diagnosis
P0700	Extremely low birth weight newborn, unspecified weight	ICD-10-CM	Diagnosis
P0701	Extremely low birth weight newborn, less than 500 grams	ICD-10-CM	Diagnosis
P0702	Extremely low birth weight newborn, 500-749 grams	ICD-10-CM	Diagnosis
P0703	Extremely low birth weight newborn, 750-999 grams	ICD-10-CM	Diagnosis
P0710	Other low birth weight newborn, unspecified weight	ICD-10-CM	Diagnosis
P0714	Other low birth weight newborn, 1000-1249 grams	ICD-10-CM	Diagnosis
P0715	Other low birth weight newborn, 1250-1499 grams	ICD-10-CM	Diagnosis
P0716	Other low birth weight newborn, 1500-1749 grams	ICD-10-CM	Diagnosis
P0717	Other low birth weight newborn, 1750-1999 grams	ICD-10-CM	Diagnosis
P0718	Other low birth weight newborn, 2000-2499 grams	ICD-10-CM	Diagnosis
P0720	Extreme immaturity of newborn, unspecified weeks of gestation	ICD-10-CM	Diagnosis
P0721	Extreme immaturity of newborn, gestational age less than 23 completed weeks	ICD-10-CM	Diagnosis
P0722	Extreme immaturity of newborn, gestational age 23 completed weeks	ICD-10-CM	Diagnosis
P0723	Extreme immaturity of newborn, gestational age 24 completed weeks	ICD-10-CM	Diagnosis
P0724	Extreme immaturity of newborn, gestational age 25 completed weeks	ICD-10-CM	Diagnosis
P0725	Extreme immaturity of newborn, gestational age 26 completed weeks	ICD-10-CM	Diagnosis
P0726	Extreme immaturity of newborn, gestational age 27 completed weeks	ICD-10-CM	Diagnosis
P0730	Preterm newborn, unspecified weeks of gestation	ICD-10-CM	Diagnosis
P0731	Preterm newborn, gestational age 28 completed weeks	ICD-10-CM	Diagnosis
P0732	Preterm newborn, gestational age 29 completed weeks	ICD-10-CM	Diagnosis
P0733	Preterm newborn, gestational age 30 completed weeks	ICD-10-CM	Diagnosis
P0734	Preterm newborn, gestational age 31 completed weeks	ICD-10-CM	Diagnosis
P0735	Preterm newborn, gestational age 32 completed weeks	ICD-10-CM	Diagnosis
P0736	Preterm newborn, gestational age 33 completed weeks	ICD-10-CM	Diagnosis
P0737	Preterm newborn, gestational age 34 completed weeks	ICD-10-CM	Diagnosis
P0738	Preterm newborn, gestational age 35 completed weeks	ICD-10-CM	Diagnosis
P0739	Preterm newborn, gestational age 36 completed weeks	ICD-10-CM	Diagnosis
P0821	Post-term newborn	ICD-10-CM	Diagnosis
P0822	Prolonged gestation of newborn	ICD-10-CM	Diagnosis
Z370	Single live birth	ICD-10-CM	Diagnosis
Z372	Twins, both liveborn	ICD-10-CM	Diagnosis
Z373	Twins, one liveborn and one stillborn	ICD-10-CM	Diagnosis
Z3750	Multiple births, unspecified, all liveborn	ICD-10-CM	Diagnosis
Z3751	Triples, all liveborn	ICD-10-CM	Diagnosis
Z3752	Quadruplets, all liveborn	ICD-10-CM	Diagnosis
Z3753	Quintuplets, all liveborn	ICD-10-CM	Diagnosis
Z3754	Sextuplets, all liveborn	ICD-10-CM	Diagnosis
Z3759	Other multiple births, all liveborn	ICD-10-CM	Diagnosis
Z3760	Multiple births, unspecified, some liveborn	ICD-10-CM	Diagnosis
Z3761	Triples, some liveborn	ICD-10-CM	Diagnosis
Z3762	Quadruplets, some liveborn	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
Z3763	Quintuplets, some liveborn	ICD-10-CM	Diagnosis
Z3764	Sextuplets, some liveborn	ICD-10-CM	Diagnosis
Z3769	Other multiple births, some liveborn	ICD-10-CM	Diagnosis
Z379	Outcome of delivery, unspecified	ICD-10-CM	Diagnosis
Z3800	Single liveborn infant, delivered vaginally	ICD-10-CM	Diagnosis
Z3801	Single liveborn infant, delivered by cesarean	ICD-10-CM	Diagnosis
Z381	Single liveborn infant, born outside hospital	ICD-10-CM	Diagnosis
Z382	Single liveborn infant, unspecified as to place of birth	ICD-10-CM	Diagnosis
Z3830	Twin liveborn infant, delivered vaginally	ICD-10-CM	Diagnosis
Z3831	Twin liveborn infant, delivered by cesarean	ICD-10-CM	Diagnosis
Z384	Twin liveborn infant, born outside hospital	ICD-10-CM	Diagnosis
Z385	Twin liveborn infant, unspecified as to place of birth	ICD-10-CM	Diagnosis
Z3861	Triplet liveborn infant, delivered vaginally	ICD-10-CM	Diagnosis
Z3862	Triplet liveborn infant, delivered by cesarean	ICD-10-CM	Diagnosis
Z3863	Quadruplet liveborn infant, delivered vaginally	ICD-10-CM	Diagnosis
Z3864	Quadruplet liveborn infant, delivered by cesarean	ICD-10-CM	Diagnosis
Z3865	Quintuplet liveborn infant, delivered vaginally	ICD-10-CM	Diagnosis
Z3866	Quintuplet liveborn infant, delivered by cesarean	ICD-10-CM	Diagnosis
Z3868	Other multiple liveborn infant, delivered vaginally	ICD-10-CM	Diagnosis
Z3869	Other multiple liveborn infant, delivered by cesarean	ICD-10-CM	Diagnosis
Z387	Other multiple liveborn infant, born outside hospital	ICD-10-CM	Diagnosis
Z388	Other multiple liveborn infant, unspecified as to place of birth	ICD-10-CM	Diagnosis
10900Z9	Drainage of Fetal Blood from Products of Conception, Open Approach	ICD-10-CM	Procedure
10900ZA	Drainage of Fetal Cerebrospinal Fluid from Products of Conception, Open Approach	ICD-10-CM	Procedure
10900ZB	Drainage of Other Fetal Fluid from Products of Conception, Open Approach	ICD-10-CM	Procedure
10900ZD	Drainage of Other Fluid from Products of Conception, Open Approach	ICD-10-CM	Procedure
10900ZU	Drainage of Amniotic Fluid, Diagnostic from Products of Conception, Open Approach	ICD-10-CM	Procedure
10903Z9	Drainage of Fetal Blood from Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10903ZA	Drainage of Fetal Cerebrospinal Fluid from Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10903ZB	Drainage of Other Fetal Fluid from Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10903ZD	Drainage of Other Fluid from Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10903ZU	Drainage of Amniotic Fluid, Diagnostic from Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10904Z9	Drainage of Fetal Blood from Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10904ZA	Drainage of Fetal Cerebrospinal Fluid from Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10904ZB	Drainage of Other Fetal Fluid from Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10904ZD	Drainage of Other Fluid from Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10904ZU	Drainage of Amniotic Fluid, Diagnostic from Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10907Z9	Drainage of Fetal Blood from Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10907ZB	Drainage of Other Fetal Fluid from Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10907ZD	Drainage of Other Fluid from Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10907ZU	Drainage of Amniotic Fluid, Diagnostic from Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10908Z9	Drainage of Fetal Blood from Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10908ZB	Drainage of Other Fetal Fluid from Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
10908ZD	Drainage of Other Fluid from Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10908ZU	Drainage of Amniotic Fluid, Diagnostic from Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10D17ZZ	Extraction of Products of Conception, Retained, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10D18ZZ	Extraction of Products of Conception, Retained, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10H073Z	Insertion of Monitoring Electrode into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10H07YZ	Insertion of Other Device into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10J00ZZ	Inspection of Products of Conception, Open Approach	ICD-10-CM	Procedure
10J03ZZ	Inspection of Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10J04ZZ	Inspection of Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10J07ZZ	Inspection of Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10J08ZZ	Inspection of Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10J0XZZ	Inspection of Products of Conception, External Approach	ICD-10-CM	Procedure
10J10ZZ	Inspection of Products of Conception, Retained, Open Approach	ICD-10-CM	Procedure
10J13ZZ	Inspection of Products of Conception, Retained, Percutaneous Approach	ICD-10-CM	Procedure
10J14ZZ	Inspection of Products of Conception, Retained, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10J17ZZ	Inspection of Products of Conception, Retained, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10J18ZZ	Inspection of Products of Conception, Retained, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10J1XZZ	Inspection of Products of Conception, Retained, External Approach	ICD-10-CM	Procedure
10J20ZZ	Inspection of Products of Conception, Ectopic, Open Approach	ICD-10-CM	Procedure
10J23ZZ	Inspection of Products of Conception, Ectopic, Percutaneous Approach	ICD-10-CM	Procedure
10J24ZZ	Inspection of Products of Conception, Ectopic, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10J27ZZ	Inspection of Products of Conception, Ectopic, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10J28ZZ	Inspection of Products of Conception, Ectopic, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10J2XZZ	Inspection of Products of Conception, Ectopic, External Approach	ICD-10-CM	Procedure
10Q00YE	Repair Nervous System in Products of Conception with Other Device, Open Approach	ICD-10-CM	Procedure
10Q00YF	Repair Cardiovascular System in Products of Conception with Other Device, Open Approach	ICD-10-CM	Procedure
10Q00YG	Repair Lymphatics and Hemic in Products of Conception with Other Device, Open Approach	ICD-10-CM	Procedure
10Q00YH	Repair Eye in Products of Conception with Other Device, Open Approach	ICD-10-CM	Procedure
10Q00YJ	Repair Ear, Nose and Sinus in Products of Conception with Other Device, Open Approach	ICD-10-CM	Procedure
10Q00YK	Repair Respiratory System in Products of Conception with Other Device, Open Approach	ICD-10-CM	Procedure
10Q00YL	Repair Mouth and Throat in Products of Conception with Other Device, Open Approach	ICD-10-CM	Procedure
10Q00YM	Repair Gastrointestinal System in Products of Conception with Other Device, Open Approach	ICD-10-CM	Procedure
10Q00YN	Repair Hepatobiliary and Pancreas in Products of Conception with Other Device, Open Approach	ICD-10-CM	Procedure
10Q00YP	Repair Endocrine System in Products of Conception with Other Device, Open Approach	ICD-10-CM	Procedure
10Q00YQ	Repair Skin in Products of Conception with Other Device, Open Approach	ICD-10-CM	Procedure
10Q00YR	Repair Musculoskeletal System in Products of Conception with Other Device, Open Approach	ICD-10-CM	Procedure
10Q00YS	Repair Urinary System in Products of Conception with Other Device, Open Approach	ICD-10-CM	Procedure
10Q00YT	Repair Female Reproductive System in Products of Conception with Other Device, Open Approach	ICD-10-CM	Procedure
10Q00YV	Repair Male Reproductive System in Products of Conception with Other Device, Open Approach	ICD-10-CM	Procedure
10Q00YY	Repair Other Body System in Products of Conception with Other Device, Open Approach	ICD-10-CM	Procedure
10Q00ZE	Repair Nervous System in Products of Conception, Open Approach	ICD-10-CM	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
10Q00ZF	Repair Cardiovascular System in Products of Conception, Open Approach	ICD-10-CM	Procedure
10Q00ZG	Repair Lymphatics and Hemic in Products of Conception, Open Approach	ICD-10-CM	Procedure
10Q00ZH	Repair Eye in Products of Conception, Open Approach	ICD-10-CM	Procedure
10Q00ZJ	Repair Ear, Nose and Sinus in Products of Conception, Open Approach	ICD-10-CM	Procedure
10Q00ZK	Repair Respiratory System in Products of Conception, Open Approach	ICD-10-CM	Procedure
10Q00ZL	Repair Mouth and Throat in Products of Conception, Open Approach	ICD-10-CM	Procedure
10Q00ZM	Repair Gastrointestinal System in Products of Conception, Open Approach	ICD-10-CM	Procedure
10Q00ZN	Repair Hepatobiliary and Pancreas in Products of Conception, Open Approach	ICD-10-CM	Procedure
10Q00ZP	Repair Endocrine System in Products of Conception, Open Approach	ICD-10-CM	Procedure
10Q00ZQ	Repair Skin in Products of Conception, Open Approach	ICD-10-CM	Procedure
10Q00ZR	Repair Musculoskeletal System in Products of Conception, Open Approach	ICD-10-CM	Procedure
10Q00ZS	Repair Urinary System in Products of Conception, Open Approach	ICD-10-CM	Procedure
10Q00ZT	Repair Female Reproductive System in Products of Conception, Open Approach	ICD-10-CM	Procedure
10Q00ZV	Repair Male Reproductive System in Products of Conception, Open Approach	ICD-10-CM	Procedure
10Q00ZY	Repair Other Body System in Products of Conception, Open Approach	ICD-10-CM	Procedure
10Q03YE	Repair Nervous System in Products of Conception with Other Device, Percutaneous Approach	ICD-10-CM	Procedure
10Q03YF	Repair Cardiovascular System in Products of Conception with Other Device, Percutaneous Approach	ICD-10-CM	Procedure
10Q03YG	Repair Lymphatics and Hemic in Products of Conception with Other Device, Percutaneous Approach	ICD-10-CM	Procedure
10Q03YH	Repair Eye in Products of Conception with Other Device, Percutaneous Approach	ICD-10-CM	Procedure
10Q03YJ	Repair Ear, Nose and Sinus in Products of Conception with Other Device, Percutaneous Approach	ICD-10-CM	Procedure
10Q03YK	Repair Respiratory System in Products of Conception with Other Device, Percutaneous Approach	ICD-10-CM	Procedure
10Q03YL	Repair Mouth and Throat in Products of Conception with Other Device, Percutaneous Approach	ICD-10-CM	Procedure
10Q03YM	Repair Gastrointestinal System in Products of Conception with Other Device, Percutaneous Approach	ICD-10-CM	Procedure
10Q03YN	Repair Hepatobiliary and Pancreas in Products of Conception with Other Device, Percutaneous Approach	ICD-10-CM	Procedure
10Q03YP	Repair Endocrine System in Products of Conception with Other Device, Percutaneous Approach	ICD-10-CM	Procedure
10Q03YQ	Repair Skin in Products of Conception with Other Device, Percutaneous Approach	ICD-10-CM	Procedure
10Q03YR	Repair Musculoskeletal System in Products of Conception with Other Device, Percutaneous Approach	ICD-10-CM	Procedure
10Q03YS	Repair Urinary System in Products of Conception with Other Device, Percutaneous Approach	ICD-10-CM	Procedure
10Q03YT	Repair Female Reproductive System in Products of Conception with Other Device, Percutaneous Approach	ICD-10-CM	Procedure
10Q03YV	Repair Male Reproductive System in Products of Conception with Other Device, Percutaneous Approach	ICD-10-CM	Procedure
10Q03YY	Repair Other Body System in Products of Conception with Other Device, Percutaneous Approach	ICD-10-CM	Procedure
10Q03ZE	Repair Nervous System in Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Q03ZF	Repair Cardiovascular System in Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Q03ZG	Repair Lymphatics and Hemic in Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Q03ZH	Repair Eye in Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Q03ZJ	Repair Ear, Nose and Sinus in Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
10Q03ZK	Repair Respiratory System in Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Q03ZL	Repair Mouth and Throat in Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Q03ZM	Repair Gastrointestinal System in Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Q03ZN	Repair Hepatobiliary and Pancreas in Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Q03ZP	Repair Endocrine System in Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Q03ZQ	Repair Skin in Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Q03ZR	Repair Musculoskeletal System in Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Q03ZS	Repair Urinary System in Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Q03ZT	Repair Female Reproductive System in Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Q03ZV	Repair Male Reproductive System in Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Q03ZY	Repair Other Body System in Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Q04YE	Repair Nervous System in Products of Conception with Other Device, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04YF	Repair Cardiovascular System in Products of Conception with Other Device, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04YG	Repair Lymphatics and Hemic in Products of Conception with Other Device, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04YH	Repair Eye in Products of Conception with Other Device, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04YJ	Repair Ear, Nose and Sinus in Products of Conception with Other Device, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04YK	Repair Respiratory System in Products of Conception with Other Device, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04YL	Repair Mouth and Throat in Products of Conception with Other Device, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04YM	Repair Gastrointestinal System in Products of Conception with Other Device, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04YN	Repair Hepatobiliary and Pancreas in Products of Conception with Other Device, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04YP	Repair Endocrine System in Products of Conception with Other Device, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04YQ	Repair Skin in Products of Conception with Other Device, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04YR	Repair Musculoskeletal System in Products of Conception with Other Device, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04YS	Repair Urinary System in Products of Conception with Other Device, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04YT	Repair Female Reproductive System in Products of Conception with Other Device, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04YV	Repair Male Reproductive System in Products of Conception with Other Device, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04YY	Repair Other Body System in Products of Conception with Other Device, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04ZE	Repair Nervous System in Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04ZF	Repair Cardiovascular System in Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04ZG	Repair Lymphatics and Hemic in Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04ZH	Repair Eye in Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04ZJ	Repair Ear, Nose and Sinus in Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
10Q04ZK	Repair Respiratory System in Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04ZL	Repair Mouth and Throat in Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04ZM	Repair Gastrointestinal System in Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04ZN	Repair Hepatobiliary and Pancreas in Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04ZP	Repair Endocrine System in Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04ZQ	Repair Skin in Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04ZR	Repair Musculoskeletal System in Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04ZS	Repair Urinary System in Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04ZT	Repair Female Reproductive System in Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04ZV	Repair Male Reproductive System in Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q04ZY	Repair Other Body System in Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Q07YE	Repair Nervous System in Products of Conception with Other Device, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07YF	Repair Cardiovascular System in Products of Conception with Other Device, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07YG	Repair Lymphatics and Hemic in Products of Conception with Other Device, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07YH	Repair Eye in Products of Conception with Other Device, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07YJ	Repair Ear, Nose and Sinus in Products of Conception with Other Device, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07YK	Repair Respiratory System in Products of Conception with Other Device, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07YL	Repair Mouth and Throat in Products of Conception with Other Device, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07YM	Repair Gastrointestinal System in Products of Conception with Other Device, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07YN	Repair Hepatobiliary and Pancreas in Products of Conception with Other Device, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07YP	Repair Endocrine System in Products of Conception with Other Device, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07YQ	Repair Skin in Products of Conception with Other Device, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07YR	Repair Musculoskeletal System in Products of Conception with Other Device, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07YS	Repair Urinary System in Products of Conception with Other Device, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07YT	Repair Female Reproductive System in Products of Conception with Other Device, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07YV	Repair Male Reproductive System in Products of Conception with Other Device, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07YY	Repair Other Body System in Products of Conception with Other Device, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07ZE	Repair Nervous System in Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07ZF	Repair Cardiovascular System in Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07ZG	Repair Lymphatics and Hemic in Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07ZH	Repair Eye in Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
10Q07ZJ	Repair Ear, Nose and Sinus in Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07ZK	Repair Respiratory System in Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07ZL	Repair Mouth and Throat in Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07ZM	Repair Gastrointestinal System in Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07ZN	Repair Hepatobiliary and Pancreas in Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07ZP	Repair Endocrine System in Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07ZQ	Repair Skin in Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07ZR	Repair Musculoskeletal System in Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07ZS	Repair Urinary System in Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07ZT	Repair Female Reproductive System in Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07ZV	Repair Male Reproductive System in Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q07ZY	Repair Other Body System in Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Q08YE	Repair Nervous System in Products of Conception with Other Device, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08YF	Repair Cardiovascular System in Products of Conception with Other Device, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08YG	Repair Lymphatics and Hemic in Products of Conception with Other Device, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08YH	Repair Eye in Products of Conception with Other Device, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08YJ	Repair Ear, Nose and Sinus in Products of Conception with Other Device, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08YK	Repair Respiratory System in Products of Conception with Other Device, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08YL	Repair Mouth and Throat in Products of Conception with Other Device, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08YM	Repair Gastrointestinal System in Products of Conception with Other Device, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08YN	Repair Hepatobiliary and Pancreas in Products of Conception with Other Device, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08YP	Repair Endocrine System in Products of Conception with Other Device, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08YQ	Repair Skin in Products of Conception with Other Device, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08YR	Repair Musculoskeletal System in Products of Conception with Other Device, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08YS	Repair Urinary System in Products of Conception with Other Device, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08YT	Repair Female Reproductive System in Products of Conception with Other Device, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08YV	Repair Male Reproductive System in Products of Conception with Other Device, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08YY	Repair Other Body System in Products of Conception with Other Device, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08ZE	Repair Nervous System in Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
10Q08ZF	Repair Cardiovascular System in Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08ZG	Repair Lymphatics and Hemic in Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08ZH	Repair Eye in Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08ZJ	Repair Ear, Nose and Sinus in Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08ZK	Repair Respiratory System in Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08ZL	Repair Mouth and Throat in Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08ZM	Repair Gastrointestinal System in Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08ZN	Repair Hepatobiliary and Pancreas in Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08ZP	Repair Endocrine System in Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08ZQ	Repair Skin in Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08ZR	Repair Musculoskeletal System in Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08ZS	Repair Urinary System in Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08ZT	Repair Female Reproductive System in Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08ZV	Repair Male Reproductive System in Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10Q08ZY	Repair Other Body System in Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
10S07ZZ	Reposition Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Y03ZE	Transplantation of Nervous System into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Y03ZF	Transplantation of Cardiovascular System into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Y03ZG	Transplantation of Lymphatics and Hemic into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Y03ZH	Transplantation of Eye into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Y03ZJ	Transplantation of Ear, Nose and Sinus into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Y03ZK	Transplantation of Respiratory System into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Y03ZL	Transplantation of Mouth and Throat into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Y03ZM	Transplantation of Gastrointestinal System into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Y03ZN	Transplantation of Hepatobiliary and Pancreas into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Y03ZP	Transplantation of Endocrine System into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Y03ZQ	Transplantation of Skin into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Y03ZR	Transplantation of Musculoskeletal System into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Y03ZS	Transplantation of Urinary System into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Y03ZT	Transplantation of Female Reproductive System into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
10Y03ZV	Transplantation of Male Reproductive System into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Y03ZY	Transplantation of Other Body System into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
10Y04ZE	Transplantation of Nervous System into Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Y04ZF	Transplantation of Cardiovascular System into Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Y04ZG	Transplantation of Lymphatics and Hemic into Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Y04ZH	Transplantation of Eye into Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Y04ZJ	Transplantation of Ear, Nose and Sinus into Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Y04ZK	Transplantation of Respiratory System into Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Y04ZL	Transplantation of Mouth and Throat into Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Y04ZM	Transplantation of Gastrointestinal System into Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Y04ZN	Transplantation of Hepatobiliary and Pancreas into Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Y04ZP	Transplantation of Endocrine System into Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Y04ZQ	Transplantation of Skin into Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Y04ZR	Transplantation of Musculoskeletal System into Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Y04ZS	Transplantation of Urinary System into Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Y04ZT	Transplantation of Female Reproductive System into Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Y04ZV	Transplantation of Male Reproductive System into Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Y04ZY	Transplantation of Other Body System into Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
10Y07ZE	Transplantation of Nervous System into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Y07ZF	Transplantation of Cardiovascular System into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Y07ZG	Transplantation of Lymphatics and Hemic into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Y07ZH	Transplantation of Eye into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Y07ZJ	Transplantation of Ear, Nose and Sinus into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Y07ZK	Transplantation of Respiratory System into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Y07ZL	Transplantation of Mouth and Throat into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Y07ZM	Transplantation of Gastrointestinal System into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Y07ZN	Transplantation of Hepatobiliary and Pancreas into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
10Y07ZP	Transplantation of Endocrine System into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Y07ZQ	Transplantation of Skin into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Y07ZR	Transplantation of Musculoskeletal System into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Y07ZS	Transplantation of Urinary System into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Y07ZT	Transplantation of Female Reproductive System into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Y07ZV	Transplantation of Male Reproductive System into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
10Y07ZY	Transplantation of Other Body System into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
30273H1	Transfusion of Nonautologous Whole Blood into Products of Conception, Circulatory, Percutaneous Approach	ICD-10-CM	Procedure
30273J1	Transfusion of Nonautologous Serum Albumin into Products of Conception, Circulatory, Percutaneous Approach	ICD-10-CM	Procedure
30273K1	Transfusion of Nonautologous Frozen Plasma into Products of Conception, Circulatory, Percutaneous Approach	ICD-10-CM	Procedure
30273L1	Transfusion of Nonautologous Fresh Plasma into Products of Conception, Circulatory, Percutaneous Approach	ICD-10-CM	Procedure
30273M1	Transfusion of Nonautologous Plasma Cryoprecipitate into Products of Conception, Circulatory, Percutaneous Approach	ICD-10-CM	Procedure
30273N1	Transfusion of Nonautologous Red Blood Cells into Products of Conception, Circulatory, Percutaneous Approach	ICD-10-CM	Procedure
30273P1	Transfusion of Nonautologous Frozen Red Cells into Products of Conception, Circulatory, Percutaneous Approach	ICD-10-CM	Procedure
30273Q1	Transfusion of Nonautologous White Cells into Products of Conception, Circulatory, Percutaneous Approach	ICD-10-CM	Procedure
30273R1	Transfusion of Nonautologous Platelets into Products of Conception, Circulatory, Percutaneous Approach	ICD-10-CM	Procedure
30273S1	Transfusion of Nonautologous Globulin into Products of Conception, Circulatory, Percutaneous Approach	ICD-10-CM	Procedure
30273T1	Transfusion of Nonautologous Fibrinogen into Products of Conception, Circulatory, Percutaneous Approach	ICD-10-CM	Procedure
30273V1	Transfusion of Nonautologous Antihemophilic Factors into Products of Conception, Circulatory, Percutaneous Approach	ICD-10-CM	Procedure
30273W1	Transfusion of Nonautologous Factor IX into Products of Conception, Circulatory, Percutaneous Approach	ICD-10-CM	Procedure
30277H1	Transfusion of Nonautologous Whole Blood into Products of Conception, Circulatory, Via Natural or Artificial Opening	ICD-10-CM	Procedure
30277J1	Transfusion of Nonautologous Serum Albumin into Products of Conception, Circulatory, Via Natural or Artificial Opening	ICD-10-CM	Procedure
30277K1	Transfusion of Nonautologous Frozen Plasma into Products of Conception, Circulatory, Via Natural or Artificial Opening	ICD-10-CM	Procedure
30277L1	Transfusion of Nonautologous Fresh Plasma into Products of Conception, Circulatory, Via Natural or Artificial Opening	ICD-10-CM	Procedure
30277M1	Transfusion of Nonautologous Plasma Cryoprecipitate into Products of Conception, Circulatory, Via Natural or Artificial Opening	ICD-10-CM	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
30277N1	Transfusion of Nonautologous Red Blood Cells into Products of Conception, Circulatory, Via Natural or Artificial Opening	ICD-10-CM	Procedure
30277P1	Transfusion of Nonautologous Frozen Red Cells into Products of Conception, Circulatory, Via Natural or Artificial Opening	ICD-10-CM	Procedure
30277Q1	Transfusion of Nonautologous White Cells into Products of Conception, Circulatory, Via Natural or Artificial Opening	ICD-10-CM	Procedure
30277R1	Transfusion of Nonautologous Platelets into Products of Conception, Circulatory, Via Natural or Artificial Opening	ICD-10-CM	Procedure
30277S1	Transfusion of Nonautologous Globulin into Products of Conception, Circulatory, Via Natural or Artificial Opening	ICD-10-CM	Procedure
30277T1	Transfusion of Nonautologous Fibrinogen into Products of Conception, Circulatory, Via Natural or Artificial Opening	ICD-10-CM	Procedure
30277V1	Transfusion of Nonautologous Antihemophilic Factors into Products of Conception, Circulatory, Via Natural or Artificial Opening	ICD-10-CM	Procedure
30277W1	Transfusion of Nonautologous Factor IX into Products of Conception, Circulatory, Via Natural or Artificial Opening	ICD-10-CM	Procedure
3E0E305	Introduction of Other Antineoplastic into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
3E0E329	Introduction of Other Anti-infective into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
3E0E33Z	Introduction of Anti-inflammatory into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
3E0E36Z	Introduction of Nutritional Substance into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
3E0E37Z	Introduction of Electrolytic and Water Balance Substance into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
3E0E3BZ	Introduction of Anesthetic Agent into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
3E0E3GC	Introduction of Other Therapeutic Substance into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
3E0E3HZ	Introduction of Radioactive Substance into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
3E0E3KZ	Introduction of Other Diagnostic Substance into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
3E0E3NZ	Introduction of Analgesics, Hypnotics, Sedatives into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
3E0E3SF	Introduction of Other Gas into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
3E0E3TZ	Introduction of Destructive Agent into Products of Conception, Percutaneous Approach	ICD-10-CM	Procedure
3E0E4GC	Introduction of Other Therapeutic Substance into Products of Conception, Percutaneous Endoscopic Approach	ICD-10-CM	Procedure
3E0E705	Introduction of Other Antineoplastic into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
3E0E729	Introduction of Other Anti-infective into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
3E0E73Z	Introduction of Anti-inflammatory into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
3E0E76Z	Introduction of Nutritional Substance into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
3E0E77Z	Introduction of Electrolytic and Water Balance Substance into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
3E0E7BZ	Introduction of Anesthetic Agent into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
3E0E7GC	Introduction of Other Therapeutic Substance into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
3E0E7HZ	Introduction of Radioactive Substance into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
3E0E7KZ	Introduction of Other Diagnostic Substance into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
3E0E7NZ	Introduction of Analgesics, Hypnotics, Sedatives into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
3E0E7SF	Introduction of Other Gas into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
3E0E7TZ	Introduction of Destructive Agent into Products of Conception, Via Natural or Artificial Opening	ICD-10-CM	Procedure
3E0E805	Introduction of Other Antineoplastic into Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
3E0E829	Introduction of Other Anti-infective into Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
3E0E83Z	Introduction of Anti-inflammatory into Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
3E0E86Z	Introduction of Nutritional Substance into Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
3E0E87Z	Introduction of Electrolytic and Water Balance Substance into Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
3E0E8BZ	Introduction of Anesthetic Agent into Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
3E0E8GC	Introduction of Other Therapeutic Substance into Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
3E0E8HZ	Introduction of Radioactive Substance into Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
3E0E8KZ	Introduction of Other Diagnostic Substance into Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
3E0E8NZ	Introduction of Analgesics, Hypnotics, Sedatives into Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
3E0E8SF	Introduction of Other Gas into Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
3E0E8TZ	Introduction of Destructive Agent into Products of Conception, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
4A0H74Z	Measurement of Products of Conception, Cardiac Electrical Activity, Via Natural or Artificial Opening	ICD-10-CM	Procedure
4A0H7CZ	Measurement of Products of Conception, Cardiac Rate, Via Natural or Artificial Opening	ICD-10-CM	Procedure
4A0H7FZ	Measurement of Products of Conception, Cardiac Rhythm, Via Natural or Artificial Opening	ICD-10-CM	Procedure
4A0H7HZ	Measurement of Products of Conception, Cardiac Sound, Via Natural or Artificial Opening	ICD-10-CM	Procedure
4A0H84Z	Measurement of Products of Conception, Cardiac Electrical Activity, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
4A0H8CZ	Measurement of Products of Conception, Cardiac Rate, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
4A0H8FZ	Measurement of Products of Conception, Cardiac Rhythm, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
4A0H8HZ	Measurement of Products of Conception, Cardiac Sound, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
4A0HX4Z	Measurement of Products of Conception, Cardiac Electrical Activity, External Approach	ICD-10-CM	Procedure
4A0HXCZ	Measurement of Products of Conception, Cardiac Rate, External Approach	ICD-10-CM	Procedure
4A0HXFZ	Measurement of Products of Conception, Cardiac Rhythm, External Approach	ICD-10-CM	Procedure
4A0HXHZ	Measurement of Products of Conception, Cardiac Sound, External Approach	ICD-10-CM	Procedure
4A0J72Z	Measurement of Products of Conception, Nervous Conductivity, Via Natural or Artificial Opening	ICD-10-CM	Procedure

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
4A0J74Z	Measurement of Products of Conception, Nervous Electrical Activity, Via Natural or Artificial Opening	ICD-10-CM	Procedure
4A0J7BZ	Measurement of Products of Conception, Nervous Pressure, Via Natural or Artificial Opening	ICD-10-CM	Procedure
4A0J82Z	Measurement of Products of Conception, Nervous Conductivity, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
4A0J84Z	Measurement of Products of Conception, Nervous Electrical Activity, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
4A0J8BZ	Measurement of Products of Conception, Nervous Pressure, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
4A0JX2Z	Measurement of Products of Conception, Nervous Conductivity, External Approach	ICD-10-CM	Procedure
4A0JX4Z	Measurement of Products of Conception, Nervous Electrical Activity, External Approach	ICD-10-CM	Procedure
4A0JXBZ	Measurement of Products of Conception, Nervous Pressure, External Approach	ICD-10-CM	Procedure
4A1H74Z	Monitoring of Products of Conception, Cardiac Electrical Activity, Via Natural or Artificial Opening	ICD-10-CM	Procedure
4A1H7CZ	Monitoring of Products of Conception, Cardiac Rate, Via Natural or Artificial Opening	ICD-10-CM	Procedure
4A1H7FZ	Monitoring of Products of Conception, Cardiac Rhythm, Via Natural or Artificial Opening	ICD-10-CM	Procedure
4A1H7HZ	Monitoring of Products of Conception, Cardiac Sound, Via Natural or Artificial Opening	ICD-10-CM	Procedure
4A1H84Z	Monitoring of Products of Conception, Cardiac Electrical Activity, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
4A1H8CZ	Monitoring of Products of Conception, Cardiac Rate, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
4A1H8FZ	Monitoring of Products of Conception, Cardiac Rhythm, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
4A1H8HZ	Monitoring of Products of Conception, Cardiac Sound, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
4A1HX4Z	Monitoring of Products of Conception, Cardiac Electrical Activity, External Approach	ICD-10-CM	Procedure
4A1HXCZ	Monitoring of Products of Conception, Cardiac Rate, External Approach	ICD-10-CM	Procedure
4A1HXFZ	Monitoring of Products of Conception, Cardiac Rhythm, External Approach	ICD-10-CM	Procedure
4A1HXHZ	Monitoring of Products of Conception, Cardiac Sound, External Approach	ICD-10-CM	Procedure
4A1J72Z	Monitoring of Products of Conception, Nervous Conductivity, Via Natural or Artificial Opening	ICD-10-CM	Procedure
4A1J74Z	Monitoring of Products of Conception, Nervous Electrical Activity, Via Natural or Artificial Opening	ICD-10-CM	Procedure
4A1J7BZ	Monitoring of Products of Conception, Nervous Pressure, Via Natural or Artificial Opening	ICD-10-CM	Procedure
4A1J82Z	Monitoring of Products of Conception, Nervous Conductivity, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
4A1J84Z	Monitoring of Products of Conception, Nervous Electrical Activity, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
4A1J8BZ	Monitoring of Products of Conception, Nervous Pressure, Via Natural or Artificial Opening Endoscopic	ICD-10-CM	Procedure
4A1JX2Z	Monitoring of Products of Conception, Nervous Conductivity, External Approach	ICD-10-CM	Procedure
4A1JX4Z	Monitoring of Products of Conception, Nervous Electrical Activity, External Approach	ICD-10-CM	Procedure
4A1JXBZ	Monitoring of Products of Conception, Nervous Pressure, External Approach	ICD-10-CM	Procedure
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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O30.009	Twin pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, unspecified 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
O30.019	Twin pregnancy, monochorionic/monoamniotic, unspecified 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
O30.039	Twin pregnancy, monochorionic/diamniotic, unspecified 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
O30.049	Twin pregnancy, dichorionic/diamniotic, unspecified 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
O30.099	Twin pregnancy, unable to determine number of placenta and number of amniotic sacs, unspecified 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
O30.109	Triplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, unspecified 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
O30.119	Triplet pregnancy with two or more monochorionic fetuses, unspecified 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
O30.129	Triplet pregnancy with two or more monoamniotic fetuses, unspecified 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
O30.199	Triplet pregnancy, unable to determine number of placenta and number of amniotic sacs, unspecified 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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O30.203	Quadruplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, third trimester	ICD-10-CM	Diagnosis
O30.209	Quadruplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, unspecified 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
O30.219	Quadruplet pregnancy with two or more monochorionic fetuses, unspecified 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
O30.229	Quadruplet pregnancy with two or more monoamniotic fetuses, unspecified 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
O30.299	Quadruplet pregnancy, unable to determine number of placenta and number of amniotic sacs, unspecified 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
O30.809	Other specified multiple gestation, unspecified number of placenta and unspecified number of amniotic sacs, unspecified 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
O30.819	Other specified multiple gestation with two or more monochorionic fetuses, unspecified 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
O30.829	Other specified multiple gestation with two or more monoamniotic fetuses, unspecified 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
O30.899	Other specified multiple gestation, unable to determine number of placenta and number of amniotic sacs, unspecified trimester	ICD-10-CM	Diagnosis
O30.90	Multiple gestation, unspecified, unspecified trimester	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O31.8X10	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
O31.8X90	Other complications specific to multiple gestation, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.8X91	Other complications specific to multiple gestation, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O31.8X92	Other complications specific to multiple gestation, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O31.8X93	Other complications specific to multiple gestation, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O31.8X94	Other complications specific to multiple gestation, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O31.8X95	Other complications specific to multiple gestation, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O31.8X99	Other complications specific to multiple gestation, unspecified trimester, other fetus	ICD-10-CM	Diagnosis
O48.0	Post-term pregnancy	ICD-10-CM	Diagnosis
O48.1	Prolonged pregnancy	ICD-10-CM	Diagnosis
O60.10X0	Preterm labor with preterm delivery, unspecified trimester, not applicable or unspecified	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
O60.12X0	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
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
O60.20X0	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
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
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
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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
P61.2	Anemia of prematurity	ICD-10-CM	Diagnosis
Z37.2	Twins, both liveborn	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
Z37.50	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
Z37.60	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
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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
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
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
Z37.60	Multiple births, unspecified, some liveborn	ICD-10-CM	Diagnosis
Z37.7	Other multiple births, all stillborn	ICD-10-CM	Diagnosis
Z37.69	Other multiple births, 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
Z37.1	Single stillbirth	ICD-10-CM	Diagnosis
P95	Stillbirth	ICD-10-CM	Diagnosis
Z37.61	Triplets, some liveborn	ICD-10-CM	Diagnosis
Z37.4	Twins, both stillborn	ICD-10-CM	Diagnosis
Z37.3	Twins, one liveborn and one stillborn	ICD-10-CM	Diagnosis
H35.101	Retinopathy of prematurity, unspecified, right eye	ICD-10-CM	Diagnosis
H35.102	Retinopathy of prematurity, unspecified, left eye	ICD-10-CM	Diagnosis
H35.103	Retinopathy of prematurity, unspecified, bilateral	ICD-10-CM	Diagnosis
H35.109	Retinopathy of prematurity, unspecified, unspecified eye	ICD-10-CM	Diagnosis
H35.111	Retinopathy of prematurity, stage 0, right eye	ICD-10-CM	Diagnosis
H35.112	Retinopathy of prematurity, stage 0, left eye	ICD-10-CM	Diagnosis
H35.113	Retinopathy of prematurity, stage 0, bilateral	ICD-10-CM	Diagnosis
H35.119	Retinopathy of prematurity, stage 0, unspecified eye	ICD-10-CM	Diagnosis
H35.121	Retinopathy of prematurity, stage 1, right eye	ICD-10-CM	Diagnosis
H35.122	Retinopathy of prematurity, stage 1, left eye	ICD-10-CM	Diagnosis
H35.123	Retinopathy of prematurity, stage 1, bilateral	ICD-10-CM	Diagnosis
H35.129	Retinopathy of prematurity, stage 1, unspecified eye	ICD-10-CM	Diagnosis
H35.131	Retinopathy of prematurity, stage 2, right eye	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
H35.132	Retinopathy of prematurity, stage 2, left eye	ICD-10-CM	Diagnosis
H35.133	Retinopathy of prematurity, stage 2, bilateral	ICD-10-CM	Diagnosis
H35.139	Retinopathy of prematurity, stage 2, unspecified eye	ICD-10-CM	Diagnosis
H35.141	Retinopathy of prematurity, stage 3, right eye	ICD-10-CM	Diagnosis
H35.142	Retinopathy of prematurity, stage 3, left eye	ICD-10-CM	Diagnosis
H35.143	Retinopathy of prematurity, stage 3, bilateral	ICD-10-CM	Diagnosis
H35.149	Retinopathy of prematurity, stage 3, unspecified eye	ICD-10-CM	Diagnosis
H35.151	Retinopathy of prematurity, stage 4, right eye	ICD-10-CM	Diagnosis
H35.152	Retinopathy of prematurity, stage 4, left eye	ICD-10-CM	Diagnosis
H35.153	Retinopathy of prematurity, stage 4, bilateral	ICD-10-CM	Diagnosis
H35.159	Retinopathy of prematurity, stage 4, unspecified eye	ICD-10-CM	Diagnosis
H35.161	Retinopathy of prematurity, stage 5, right eye	ICD-10-CM	Diagnosis
H35.162	Retinopathy of prematurity, stage 5, left eye	ICD-10-CM	Diagnosis
H35.163	Retinopathy of prematurity, stage 5, bilateral	ICD-10-CM	Diagnosis
H35.169	Retinopathy of prematurity, stage 5, unspecified eye	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
O07.0	Genital tract and pelvic infection following failed attempted termination of pregnancy	ICD-10-CM	Diagnosis
O07.1	Delayed or excessive hemorrhage following failed attempted termination of pregnancy	ICD-10-CM	Diagnosis
O07.2	Embolism following failed attempted termination of pregnancy	ICD-10-CM	Diagnosis
O07.30	Failed attempted termination of pregnancy with unspecified complications	ICD-10-CM	Diagnosis
O07.31	Shock following failed attempted termination of pregnancy	ICD-10-CM	Diagnosis
O07.32	Renal failure following failed attempted termination of pregnancy	ICD-10-CM	Diagnosis
O07.33	Metabolic disorder following failed attempted termination of pregnancy	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O07.34	Damage to pelvic organs following failed attempted termination of pregnancy	ICD-10-CM	Diagnosis
O07.35	Other venous complications following failed attempted termination of pregnancy	ICD-10-CM	Diagnosis
O07.36	Cardiac arrest following failed attempted termination of pregnancy	ICD-10-CM	Diagnosis
O07.37	Sepsis following failed attempted termination of pregnancy	ICD-10-CM	Diagnosis
O07.38	Urinary tract infection following failed attempted termination of pregnancy	ICD-10-CM	Diagnosis
O07.39	Failed attempted termination of pregnancy with other complications	ICD-10-CM	Diagnosis
O07.4	Failed attempted termination of pregnancy without complication	ICD-10-CM	Diagnosis
O09.00	Supervision of pregnancy with history of infertility, unspecified trimester	ICD-10-CM	Diagnosis
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
O09.10	Supervision of pregnancy with history of ectopic pregnancy, unspecified 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
O09.219	Supervision of pregnancy with history of pre-term labor, unspecified 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
O09.299	Supervision of pregnancy with other poor reproductive or obstetric history, unspecified trimester	ICD-10-CM	Diagnosis
O09.30	Supervision of pregnancy with insufficient antenatal care, unspecified 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
O09.40	Supervision of pregnancy with grand multiparity, unspecified 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
O09.519	Supervision of elderly primigravida, unspecified 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
O09.529	Supervision of elderly multigravida, unspecified 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
O09.619	Supervision of young primigravida, unspecified 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
O09.629	Supervision of young multigravida, unspecified trimester	ICD-10-CM	Diagnosis
O09.70	Supervision of high risk pregnancy due to social problems, unspecified trimester	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O09.819	Supervision of pregnancy resulting from assisted reproductive technology, unspecified 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
O09.823	Supervision of pregnancy with history of in utero procedure during previous pregnancy, third trimester	ICD-10-CM	Diagnosis
O09.829	Supervision of pregnancy with history of in utero procedure during previous pregnancy, unspecified 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
O09.899	Supervision of other high risk pregnancies, unspecified trimester	ICD-10-CM	Diagnosis
O09.90	Supervision of high risk pregnancy, unspecified, unspecified 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.A0	Supervision of pregnancy with history of molar pregnancy, unspecified 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
O10.019	Pre-existing essential hypertension complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O10.02	Pre-existing essential hypertension complicating childbirth	ICD-10-CM	Diagnosis
O10.03	Pre-existing essential hypertension complicating the puerperium	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
O10.119	Pre-existing hypertensive heart disease complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O10.12	Pre-existing hypertensive heart disease complicating childbirth	ICD-10-CM	Diagnosis
O10.13	Pre-existing hypertensive heart disease complicating the puerperium	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
O10.219	Pre-existing hypertensive chronic kidney disease complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O10.22	Pre-existing hypertensive chronic kidney disease complicating childbirth	ICD-10-CM	Diagnosis
O10.23	Pre-existing hypertensive chronic kidney disease complicating the puerperium	ICD-10-CM	Diagnosis
O10.311	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, first trimester	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O10.319	Pre-existing hypertensive heart and chronic kidney disease complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O10.32	Pre-existing hypertensive heart and chronic kidney disease complicating childbirth	ICD-10-CM	Diagnosis
O10.33	Pre-existing hypertensive heart and chronic kidney disease complicating the puerperium	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
O10.419	Pre-existing secondary hypertension complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O10.42	Pre-existing secondary hypertension complicating childbirth	ICD-10-CM	Diagnosis
O10.43	Pre-existing secondary hypertension complicating the puerperium	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
O10.919	Unspecified pre-existing hypertension complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O10.92	Unspecified pre-existing hypertension complicating childbirth	ICD-10-CM	Diagnosis
O10.93	Unspecified pre-existing hypertension complicating the puerperium	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
O11.4	Pre-existing hypertension with pre-eclampsia, complicating childbirth	ICD-10-CM	Diagnosis
O11.5	Pre-existing hypertension with pre-eclampsia, complicating the puerperium	ICD-10-CM	Diagnosis
O11.9	Pre-existing hypertension with pre-eclampsia, unspecified trimester	ICD-10-CM	Diagnosis
O12.00	Gestational edema, unspecified 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
O12.04	Gestational edema, complicating childbirth	ICD-10-CM	Diagnosis
O12.05	Gestational edema, complicating the puerperium	ICD-10-CM	Diagnosis
O12.10	Gestational proteinuria, unspecified 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
O12.14	Gestational proteinuria, complicating childbirth	ICD-10-CM	Diagnosis
O12.15	Gestational proteinuria, complicating the puerperium	ICD-10-CM	Diagnosis
O12.20	Gestational edema with proteinuria, unspecified 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
O12.23	Gestational edema with proteinuria, third trimester	ICD-10-CM	Diagnosis
O12.24	Gestational edema with proteinuria, complicating childbirth	ICD-10-CM	Diagnosis
O12.25	Gestational edema with proteinuria, complicating the puerperium	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O13.4	Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating childbirth	ICD-10-CM	Diagnosis
O13.5	Gestational [pregnancy-induced] hypertension without significant proteinuria, complicating the puerperium	ICD-10-CM	Diagnosis
O13.9	Gestational [pregnancy-induced] hypertension without significant proteinuria, unspecified trimester	ICD-10-CM	Diagnosis
O14.00	Mild to moderate pre-eclampsia, unspecified 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
O14.04	Mild to moderate pre-eclampsia, complicating childbirth	ICD-10-CM	Diagnosis
O14.05	Mild to moderate pre-eclampsia, complicating the puerperium	ICD-10-CM	Diagnosis
O14.10	Severe pre-eclampsia, unspecified 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
O14.14	Severe pre-eclampsia complicating childbirth	ICD-10-CM	Diagnosis
O14.15	Severe pre-eclampsia, complicating the puerperium	ICD-10-CM	Diagnosis
O14.20	HELLP syndrome (HELLP), unspecified 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
O14.24	HELLP syndrome, complicating childbirth	ICD-10-CM	Diagnosis
O14.25	HELLP syndrome, complicating the puerperium	ICD-10-CM	Diagnosis
O14.90	Unspecified pre-eclampsia, unspecified 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
O14.94	Unspecified pre-eclampsia, complicating childbirth	ICD-10-CM	Diagnosis
O14.95	Unspecified pre-eclampsia, complicating the puerperium	ICD-10-CM	Diagnosis
O15.00	Eclampsia complicating pregnancy, unspecified 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
O15.1	Eclampsia complicating labor	ICD-10-CM	Diagnosis
O15.2	Eclampsia complicating the puerperium	ICD-10-CM	Diagnosis
O15.9	Eclampsia, unspecified as to time period	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
O16.4	Unspecified maternal hypertension, complicating childbirth	ICD-10-CM	Diagnosis
O16.5	Unspecified maternal hypertension, complicating the puerperium	ICD-10-CM	Diagnosis
O16.9	Unspecified maternal hypertension, unspecified trimester	ICD-10-CM	Diagnosis
O20.0	Threatened abortion	ICD-10-CM	Diagnosis
O20.8	Other hemorrhage in early pregnancy	ICD-10-CM	Diagnosis
O20.9	Hemorrhage in early pregnancy, unspecified	ICD-10-CM	Diagnosis
O21.0	Mild hyperemesis gravidarum	ICD-10-CM	Diagnosis
O21.1	Hyperemesis gravidarum with metabolic disturbance	ICD-10-CM	Diagnosis
O21.2	Late vomiting of pregnancy	ICD-10-CM	Diagnosis
O21.8	Other vomiting complicating pregnancy	ICD-10-CM	Diagnosis
O21.9	Vomiting of pregnancy, unspecified	ICD-10-CM	Diagnosis
O22.00	Varicose veins of lower extremity in pregnancy, unspecified 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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O22.10	Genital varices in pregnancy, unspecified 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
O22.20	Superficial thrombophlebitis in pregnancy, unspecified 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
O22.30	Deep phlebothrombosis in pregnancy, unspecified 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
O22.40	Hemorrhoids in pregnancy, unspecified 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
O22.50	Cerebral venous thrombosis in pregnancy, unspecified 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
O22.8X9	Other venous complications in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O22.90	Venous complication in pregnancy, unspecified, unspecified 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
O23.00	Infections of kidney in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
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
O23.10	Infections of bladder in pregnancy, unspecified 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
O23.20	Infections of urethra in pregnancy, unspecified 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
O23.30	Infections of other parts of urinary tract in pregnancy, unspecified 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
O23.40	Unspecified infection of urinary tract in pregnancy, unspecified 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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O23.513	Infections of cervix in pregnancy, third trimester	ICD-10-CM	Diagnosis
O23.519	Infections of cervix in pregnancy, unspecified 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
O23.529	Salpingo-oophoritis in pregnancy, unspecified 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
O23.599	Infection of other part of genital tract in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O23.90	Unspecified genitourinary tract infection in pregnancy, unspecified 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
O24.019	Pre-existing type 1 diabetes mellitus, in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O24.02	Pre-existing type 1 diabetes mellitus, in childbirth	ICD-10-CM	Diagnosis
O24.03	Pre-existing type 1 diabetes mellitus, in the puerperium	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
O24.119	Pre-existing type 2 diabetes mellitus, in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O24.12	Pre-existing type 2 diabetes mellitus, in childbirth	ICD-10-CM	Diagnosis
O24.13	Pre-existing type 2 diabetes mellitus, in the puerperium	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
O24.319	Unspecified pre-existing diabetes mellitus in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O24.32	Unspecified pre-existing diabetes mellitus in childbirth	ICD-10-CM	Diagnosis
O24.33	Unspecified pre-existing diabetes mellitus in the puerperium	ICD-10-CM	Diagnosis
O24.410	Gestational diabetes mellitus in pregnancy, diet controlled	ICD-10-CM	Diagnosis
O24.414	Gestational diabetes mellitus in pregnancy, insulin controlled	ICD-10-CM	Diagnosis
O24.415	Gestational diabetes mellitus in pregnancy, controlled by oral hypoglycemic drugs	ICD-10-CM	Diagnosis
O24.419	Gestational diabetes mellitus in pregnancy, unspecified control	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
O24.430	Gestational diabetes mellitus in the puerperium, diet controlled	ICD-10-CM	Diagnosis
O24.434	Gestational diabetes mellitus in the puerperium, insulin controlled	ICD-10-CM	Diagnosis
O24.435	Gestational diabetes mellitus in puerperium, controlled by oral hypoglycemic drugs	ICD-10-CM	Diagnosis
O24.439	Gestational diabetes mellitus in the puerperium, unspecified control	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
O24.819	Other pre-existing diabetes mellitus in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O24.82	Other pre-existing diabetes mellitus in childbirth	ICD-10-CM	Diagnosis
O24.83	Other pre-existing diabetes mellitus in the puerperium	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O24.919	Unspecified diabetes mellitus in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O24.92	Unspecified diabetes mellitus in childbirth	ICD-10-CM	Diagnosis
O24.93	Unspecified diabetes mellitus in the puerperium	ICD-10-CM	Diagnosis
O25.10	Malnutrition in pregnancy, unspecified 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
O25.13	Malnutrition in pregnancy, third trimester	ICD-10-CM	Diagnosis
O25.2	Malnutrition in childbirth	ICD-10-CM	Diagnosis
O25.3	Malnutrition in the puerperium	ICD-10-CM	Diagnosis
O26.00	Excessive weight gain in pregnancy, unspecified 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
O26.10	Low weight gain in pregnancy, unspecified 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
O26.20	Pregnancy care for patient with recurrent pregnancy loss, unspecified 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
O26.30	Retained intrauterine contraceptive device in pregnancy, unspecified 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
O26.40	Herpes gestationis, unspecified 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
O26.50	Maternal hypotension syndrome, unspecified 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
O26.619	Liver and biliary tract disorders in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O26.62	Liver and biliary tract disorders in childbirth	ICD-10-CM	Diagnosis
O26.63	Liver and biliary tract disorders in the puerperium	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
O26.719	Subluxation of symphysis (pubis) in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O26.72	Subluxation of symphysis (pubis) in childbirth	ICD-10-CM	Diagnosis
O26.73	Subluxation of symphysis (pubis) in the puerperium	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O26.813	Pregnancy related exhaustion and fatigue, third trimester	ICD-10-CM	Diagnosis
O26.819	Pregnancy related exhaustion and fatigue, unspecified 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
O26.829	Pregnancy related peripheral neuritis, unspecified 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
O26.839	Pregnancy related renal disease, unspecified 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
O26.849	Uterine size-date discrepancy, unspecified 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
O26.859	Spotting complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O26.86	Pruritic urticarial papules and plaques of pregnancy (PUPPP)	ICD-10-CM	Diagnosis
O26.872	Cervical shortening, second trimester	ICD-10-CM	Diagnosis
O26.873	Cervical shortening, third trimester	ICD-10-CM	Diagnosis
O26.879	Cervical shortening, unspecified 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
O26.893	Other specified pregnancy related conditions, third trimester	ICD-10-CM	Diagnosis
O26.899	Other specified pregnancy related conditions, unspecified trimester	ICD-10-CM	Diagnosis
O26.90	Pregnancy related conditions, unspecified, unspecified 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
O29.019	Aspiration pneumonitis due to anesthesia during pregnancy, unspecified 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
O29.029	Pressure collapse of lung due to anesthesia during pregnancy, unspecified 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
O29.099	Other pulmonary complications of anesthesia during pregnancy, unspecified 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
O29.119	Cardiac arrest due to anesthesia during pregnancy, unspecified 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
O29.129	Cardiac failure due to anesthesia during pregnancy, unspecified trimester	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O29.199	Other cardiac complications of anesthesia during pregnancy, unspecified 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
O29.219	Cerebral anoxia due to anesthesia during pregnancy, unspecified 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
O29.299	Other central nervous system complications of anesthesia during pregnancy, unspecified 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
O29.3X9	Toxic reaction to local anesthesia during pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O29.40	Spinal and epidural anesthesia induced headache during pregnancy, unspecified 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
O29.5X9	Other complications of spinal and epidural anesthesia during pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O29.60	Failed or difficult intubation for anesthesia during pregnancy, unspecified 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
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
O29.8X9	Other complications of anesthesia during pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O29.90	Unspecified complication of anesthesia during pregnancy, unspecified 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
O30.009	Twin pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, unspecified 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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O30.013	Twin pregnancy, monochorionic/monoamniotic, third trimester	ICD-10-CM	Diagnosis
O30.019	Twin pregnancy, monochorionic/monoamniotic, unspecified 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
O30.029	Conjoined twin pregnancy, unspecified 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
O30.039	Twin pregnancy, monochorionic/diamniotic, unspecified 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
O30.049	Twin pregnancy, dichorionic/diamniotic, unspecified 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
O30.099	Twin pregnancy, unable to determine number of placenta and number of amniotic sacs, unspecified 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
O30.109	Triplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, unspecified 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
O30.119	Triplet pregnancy with two or more monochorionic fetuses, unspecified 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
O30.129	Triplet pregnancy with two or more monoamniotic fetuses, unspecified 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
O30.199	Triplet pregnancy, unable to determine number of placenta and number of amniotic sacs, unspecified 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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O30.203	Quadruplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, third trimester	ICD-10-CM	Diagnosis
O30.209	Quadruplet pregnancy, unspecified number of placenta and unspecified number of amniotic sacs, unspecified 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
O30.219	Quadruplet pregnancy with two or more monochorionic fetuses, unspecified 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
O30.229	Quadruplet pregnancy with two or more monoamniotic fetuses, unspecified 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
O30.299	Quadruplet pregnancy, unable to determine number of placenta and number of amniotic sacs, unspecified 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
O30.809	Other specified multiple gestation, unspecified number of placenta and unspecified number of amniotic sacs, unspecified 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
O30.819	Other specified multiple gestation with two or more monochorionic fetuses, unspecified 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
O30.829	Other specified multiple gestation with two or more monoamniotic fetuses, unspecified 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
O30.899	Other specified multiple gestation, unable to determine number of placenta and number of amniotic sacs, unspecified trimester	ICD-10-CM	Diagnosis
O30.90	Multiple gestation, unspecified, unspecified trimester	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O31.00X0	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
O31.01X0	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
O31.10X0	Continuing pregnancy after spontaneous abortion of one fetus or more, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
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
O31.20X0	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O31.20X9	Continuing pregnancy after intrauterine death of one fetus or more, unspecified 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
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
O31.30X0	Continuing pregnancy after elective fetal reduction of one fetus or more, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.30X1	Continuing pregnancy after elective fetal reduction of one fetus or more, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O31.30X2	Continuing pregnancy after elective fetal reduction of one fetus or more, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O31.30X3	Continuing pregnancy after elective fetal reduction of one fetus or more, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O31.30X4	Continuing pregnancy after elective fetal reduction of one fetus or more, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O31.30X5	Continuing pregnancy after elective fetal reduction of one fetus or more, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O31.30X9	Continuing pregnancy after elective fetal reduction of one fetus or more, unspecified 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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O31.8X90	Other complications specific to multiple gestation, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O31.8X91	Other complications specific to multiple gestation, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O31.8X92	Other complications specific to multiple gestation, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O31.8X93	Other complications specific to multiple gestation, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O31.8X94	Other complications specific to multiple gestation, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O31.8X95	Other complications specific to multiple gestation, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O31.8X99	Other complications specific to multiple gestation, unspecified trimester, other fetus	ICD-10-CM	Diagnosis
O32.0XX0	Maternal care for unstable lie, not applicable or unspecified	ICD-10-CM	Diagnosis
O32.0XX1	Maternal care for unstable lie, fetus 1	ICD-10-CM	Diagnosis
O32.0XX2	Maternal care for unstable lie, fetus 2	ICD-10-CM	Diagnosis
O32.0XX3	Maternal care for unstable lie, fetus 3	ICD-10-CM	Diagnosis
O32.0XX4	Maternal care for unstable lie, fetus 4	ICD-10-CM	Diagnosis
O32.0XX5	Maternal care for unstable lie, fetus 5	ICD-10-CM	Diagnosis
O32.0XX9	Maternal care for unstable lie, other fetus	ICD-10-CM	Diagnosis
O32.1XX0	Maternal care for breech presentation, not applicable or unspecified	ICD-10-CM	Diagnosis
O32.1XX1	Maternal care for breech presentation, fetus 1	ICD-10-CM	Diagnosis
O32.1XX2	Maternal care for breech presentation, fetus 2	ICD-10-CM	Diagnosis
O32.1XX3	Maternal care for breech presentation, fetus 3	ICD-10-CM	Diagnosis
O32.1XX4	Maternal care for breech presentation, fetus 4	ICD-10-CM	Diagnosis
O32.1XX5	Maternal care for breech presentation, fetus 5	ICD-10-CM	Diagnosis
O32.1XX9	Maternal care for breech presentation, other fetus	ICD-10-CM	Diagnosis
O32.2XX0	Maternal care for transverse and oblique lie, not applicable or unspecified	ICD-10-CM	Diagnosis
O32.2XX1	Maternal care for transverse and oblique lie, fetus 1	ICD-10-CM	Diagnosis
O32.2XX2	Maternal care for transverse and oblique lie, fetus 2	ICD-10-CM	Diagnosis
O32.2XX3	Maternal care for transverse and oblique lie, fetus 3	ICD-10-CM	Diagnosis
O32.2XX4	Maternal care for transverse and oblique lie, fetus 4	ICD-10-CM	Diagnosis
O32.2XX5	Maternal care for transverse and oblique lie, fetus 5	ICD-10-CM	Diagnosis
O32.2XX9	Maternal care for transverse and oblique lie, other fetus	ICD-10-CM	Diagnosis
O32.3XX0	Maternal care for face, brow and chin presentation, not applicable or unspecified	ICD-10-CM	Diagnosis
O32.3XX1	Maternal care for face, brow and chin presentation, fetus 1	ICD-10-CM	Diagnosis
O32.3XX2	Maternal care for face, brow and chin presentation, fetus 2	ICD-10-CM	Diagnosis
O32.3XX3	Maternal care for face, brow and chin presentation, fetus 3	ICD-10-CM	Diagnosis
O32.3XX4	Maternal care for face, brow and chin presentation, fetus 4	ICD-10-CM	Diagnosis
O32.3XX5	Maternal care for face, brow and chin presentation, fetus 5	ICD-10-CM	Diagnosis
O32.3XX9	Maternal care for face, brow and chin presentation, other fetus	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O32.4XX0	Maternal care for high head at term, not applicable or unspecified	ICD-10-CM	Diagnosis
O32.4XX1	Maternal care for high head at term, fetus 1	ICD-10-CM	Diagnosis
O32.4XX2	Maternal care for high head at term, fetus 2	ICD-10-CM	Diagnosis
O32.4XX3	Maternal care for high head at term, fetus 3	ICD-10-CM	Diagnosis
O32.4XX4	Maternal care for high head at term, fetus 4	ICD-10-CM	Diagnosis
O32.4XX5	Maternal care for high head at term, fetus 5	ICD-10-CM	Diagnosis
O32.4XX9	Maternal care for high head at term, other fetus	ICD-10-CM	Diagnosis
O32.6XX0	Maternal care for compound presentation, not applicable or unspecified	ICD-10-CM	Diagnosis
O32.6XX1	Maternal care for compound presentation, fetus 1	ICD-10-CM	Diagnosis
O32.6XX2	Maternal care for compound presentation, fetus 2	ICD-10-CM	Diagnosis
O32.6XX3	Maternal care for compound presentation, fetus 3	ICD-10-CM	Diagnosis
O32.6XX4	Maternal care for compound presentation, fetus 4	ICD-10-CM	Diagnosis
O32.6XX5	Maternal care for compound presentation, fetus 5	ICD-10-CM	Diagnosis
O32.6XX9	Maternal care for compound presentation, other fetus	ICD-10-CM	Diagnosis
O32.8XX0	Maternal care for other malpresentation of fetus, not applicable or unspecified	ICD-10-CM	Diagnosis
O32.8XX1	Maternal care for other malpresentation of fetus, fetus 1	ICD-10-CM	Diagnosis
O32.8XX2	Maternal care for other malpresentation of fetus, fetus 2	ICD-10-CM	Diagnosis
O32.8XX3	Maternal care for other malpresentation of fetus, fetus 3	ICD-10-CM	Diagnosis
O32.8XX4	Maternal care for other malpresentation of fetus, fetus 4	ICD-10-CM	Diagnosis
O32.8XX5	Maternal care for other malpresentation of fetus, fetus 5	ICD-10-CM	Diagnosis
O32.8XX9	Maternal care for other malpresentation of fetus, other fetus	ICD-10-CM	Diagnosis
O32.9XX0	Maternal care for malpresentation of fetus, unspecified, not applicable or unspecified	ICD-10-CM	Diagnosis
O32.9XX1	Maternal care for malpresentation of fetus, unspecified, fetus 1	ICD-10-CM	Diagnosis
O32.9XX2	Maternal care for malpresentation of fetus, unspecified, fetus 2	ICD-10-CM	Diagnosis
O32.9XX3	Maternal care for malpresentation of fetus, unspecified, fetus 3	ICD-10-CM	Diagnosis
O32.9XX4	Maternal care for malpresentation of fetus, unspecified, fetus 4	ICD-10-CM	Diagnosis
O32.9XX5	Maternal care for malpresentation of fetus, unspecified, fetus 5	ICD-10-CM	Diagnosis
O32.9XX9	Maternal care for malpresentation of fetus, unspecified, other fetus	ICD-10-CM	Diagnosis
O33.0	Maternal care for disproportion due to deformity of maternal pelvic bones	ICD-10-CM	Diagnosis
O33.1	Maternal care for disproportion due to generally contracted pelvis	ICD-10-CM	Diagnosis
O33.2	Maternal care for disproportion due to inlet contraction of pelvis	ICD-10-CM	Diagnosis
O33.3XX0	Maternal care for disproportion due to outlet contraction of pelvis, not applicable or unspecified	ICD-10-CM	Diagnosis
O33.3XX1	Maternal care for disproportion due to outlet contraction of pelvis, fetus 1	ICD-10-CM	Diagnosis
O33.3XX2	Maternal care for disproportion due to outlet contraction of pelvis, fetus 2	ICD-10-CM	Diagnosis
O33.3XX3	Maternal care for disproportion due to outlet contraction of pelvis, fetus 3	ICD-10-CM	Diagnosis
O33.3XX4	Maternal care for disproportion due to outlet contraction of pelvis, fetus 4	ICD-10-CM	Diagnosis
O33.3XX5	Maternal care for disproportion due to outlet contraction of pelvis, fetus 5	ICD-10-CM	Diagnosis
O33.3XX9	Maternal care for disproportion due to outlet contraction of pelvis, other fetus	ICD-10-CM	Diagnosis
O33.4XX0	Maternal care for disproportion of mixed maternal and fetal origin, not applicable or unspecified	ICD-10-CM	Diagnosis
O33.4XX1	Maternal care for disproportion of mixed maternal and fetal origin, fetus 1	ICD-10-CM	Diagnosis
O33.4XX2	Maternal care for disproportion of mixed maternal and fetal origin, fetus 2	ICD-10-CM	Diagnosis
O33.4XX3	Maternal care for disproportion of mixed maternal and fetal origin, fetus 3	ICD-10-CM	Diagnosis
O33.4XX4	Maternal care for disproportion of mixed maternal and fetal origin, fetus 4	ICD-10-CM	Diagnosis
O33.4XX5	Maternal care for disproportion of mixed maternal and fetal origin, fetus 5	ICD-10-CM	Diagnosis
O33.4XX9	Maternal care for disproportion of mixed maternal and fetal origin, other fetus	ICD-10-CM	Diagnosis
O33.5XX0	Maternal care for disproportion due to unusually large fetus, not applicable or unspecified	ICD-10-CM	Diagnosis
O33.5XX1	Maternal care for disproportion due to unusually large fetus, fetus 1	ICD-10-CM	Diagnosis
O33.5XX2	Maternal care for disproportion due to unusually large fetus, fetus 2	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O33.5XX3	Maternal care for disproportion due to unusually large fetus, fetus 3	ICD-10-CM	Diagnosis
O33.5XX4	Maternal care for disproportion due to unusually large fetus, fetus 4	ICD-10-CM	Diagnosis
O33.5XX5	Maternal care for disproportion due to unusually large fetus, fetus 5	ICD-10-CM	Diagnosis
O33.5XX9	Maternal care for disproportion due to unusually large fetus, other fetus	ICD-10-CM	Diagnosis
O33.6XX0	Maternal care for disproportion due to hydrocephalic fetus, not applicable or unspecified	ICD-10-CM	Diagnosis
O33.6XX1	Maternal care for disproportion due to hydrocephalic fetus, fetus 1	ICD-10-CM	Diagnosis
O33.6XX2	Maternal care for disproportion due to hydrocephalic fetus, fetus 2	ICD-10-CM	Diagnosis
O33.6XX3	Maternal care for disproportion due to hydrocephalic fetus, fetus 3	ICD-10-CM	Diagnosis
O33.6XX4	Maternal care for disproportion due to hydrocephalic fetus, fetus 4	ICD-10-CM	Diagnosis
O33.6XX5	Maternal care for disproportion due to hydrocephalic fetus, fetus 5	ICD-10-CM	Diagnosis
O33.6XX9	Maternal care for disproportion due to hydrocephalic fetus, other fetus	ICD-10-CM	Diagnosis
O33.7XX0	Maternal care for disproportion due to other fetal deformities, not applicable or unspecified	ICD-10-CM	Diagnosis
O33.7XX1	Maternal care for disproportion due to other fetal deformities, fetus 1	ICD-10-CM	Diagnosis
O33.7XX2	Maternal care for disproportion due to other fetal deformities, fetus 2	ICD-10-CM	Diagnosis
O33.7XX3	Maternal care for disproportion due to other fetal deformities, fetus 3	ICD-10-CM	Diagnosis
O33.7XX4	Maternal care for disproportion due to other fetal deformities, fetus 4	ICD-10-CM	Diagnosis
O33.7XX5	Maternal care for disproportion due to other fetal deformities, fetus 5	ICD-10-CM	Diagnosis
O33.7XX9	Maternal care for disproportion due to other fetal deformities, other fetus	ICD-10-CM	Diagnosis
O33.8	Maternal care for disproportion of other origin	ICD-10-CM	Diagnosis
O33.9	Maternal care for disproportion, unspecified	ICD-10-CM	Diagnosis
O34.00	Maternal care for unspecified congenital malformation of uterus, unspecified trimester	ICD-10-CM	Diagnosis
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
O34.10	Maternal care for benign tumor of corpus uteri, unspecified 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
O34.211	Maternal care for low transverse scar from previous cesarean delivery	ICD-10-CM	Diagnosis
O34.212	Maternal care for vertical scar from previous cesarean delivery	ICD-10-CM	Diagnosis
O34.219	Maternal care for unspecified type scar from previous cesarean delivery	ICD-10-CM	Diagnosis
O34.29	Maternal care due to uterine scar from other previous surgery	ICD-10-CM	Diagnosis
O34.30	Maternal care for cervical incompetence, unspecified 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
O34.40	Maternal care for other abnormalities of cervix, unspecified 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
O34.519	Maternal care for incarceration of gravid uterus, unspecified 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
O34.529	Maternal care for prolapse of gravid uterus, unspecified trimester	ICD-10-CM	Diagnosis
O34.531	Maternal care for retroversion of gravid uterus, first trimester	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O34.539	Maternal care for retroversion of gravid uterus, unspecified 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
O34.599	Maternal care for other abnormalities of gravid uterus, unspecified trimester	ICD-10-CM	Diagnosis
O34.60	Maternal care for abnormality of vagina, unspecified 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
O34.70	Maternal care for abnormality of vulva and perineum, unspecified 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
O34.80	Maternal care for other abnormalities of pelvic organs, unspecified 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
O34.90	Maternal care for abnormality of pelvic organ, unspecified, unspecified 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
O35.0XX0	Maternal care for (suspected) central nervous system malformation in fetus, not applicable or unspecified	ICD-10-CM	Diagnosis
O35.0XX1	Maternal care for (suspected) central nervous system malformation in fetus, fetus 1	ICD-10-CM	Diagnosis
O35.0XX2	Maternal care for (suspected) central nervous system malformation in fetus, fetus 2	ICD-10-CM	Diagnosis
O35.0XX3	Maternal care for (suspected) central nervous system malformation in fetus, fetus 3	ICD-10-CM	Diagnosis
O35.0XX4	Maternal care for (suspected) central nervous system malformation in fetus, fetus 4	ICD-10-CM	Diagnosis
O35.0XX5	Maternal care for (suspected) central nervous system malformation in fetus, fetus 5	ICD-10-CM	Diagnosis
O35.0XX9	Maternal care for (suspected) central nervous system malformation in fetus, other fetus	ICD-10-CM	Diagnosis
O35.1XX0	Maternal care for (suspected) chromosomal abnormality in fetus, not applicable or unspecified	ICD-10-CM	Diagnosis
O35.1XX1	Maternal care for (suspected) chromosomal abnormality in fetus, fetus 1	ICD-10-CM	Diagnosis
O35.1XX2	Maternal care for (suspected) chromosomal abnormality in fetus, fetus 2	ICD-10-CM	Diagnosis
O35.1XX3	Maternal care for (suspected) chromosomal abnormality in fetus, fetus 3	ICD-10-CM	Diagnosis
O35.1XX4	Maternal care for (suspected) chromosomal abnormality in fetus, fetus 4	ICD-10-CM	Diagnosis
O35.1XX5	Maternal care for (suspected) chromosomal abnormality in fetus, fetus 5	ICD-10-CM	Diagnosis
O35.1XX9	Maternal care for (suspected) chromosomal abnormality in fetus, other fetus	ICD-10-CM	Diagnosis
O35.2XX0	Maternal care for (suspected) hereditary disease in fetus, not applicable or unspecified	ICD-10-CM	Diagnosis
O35.2XX1	Maternal care for (suspected) hereditary disease in fetus, fetus 1	ICD-10-CM	Diagnosis
O35.2XX2	Maternal care for (suspected) hereditary disease in fetus, fetus 2	ICD-10-CM	Diagnosis
O35.2XX3	Maternal care for (suspected) hereditary disease in fetus, fetus 3	ICD-10-CM	Diagnosis
O35.2XX4	Maternal care for (suspected) hereditary disease in fetus, fetus 4	ICD-10-CM	Diagnosis
O35.2XX5	Maternal care for (suspected) hereditary disease in fetus, fetus 5	ICD-10-CM	Diagnosis
O35.2XX9	Maternal care for (suspected) hereditary disease in fetus, other fetus	ICD-10-CM	Diagnosis
O35.3XX0	Maternal care for (suspected) damage to fetus from viral disease in mother, not applicable or unspecified	ICD-10-CM	Diagnosis
O35.3XX1	Maternal care for (suspected) damage to fetus from viral disease in mother, fetus 1	ICD-10-CM	Diagnosis
O35.3XX2	Maternal care for (suspected) damage to fetus from viral disease in mother, fetus 2	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O35.3XX3	Maternal care for (suspected) damage to fetus from viral disease in mother, fetus 3	ICD-10-CM	Diagnosis
O35.3XX4	Maternal care for (suspected) damage to fetus from viral disease in mother, fetus 4	ICD-10-CM	Diagnosis
O35.3XX5	Maternal care for (suspected) damage to fetus from viral disease in mother, fetus 5	ICD-10-CM	Diagnosis
O35.3XX9	Maternal care for (suspected) damage to fetus from viral disease in mother, other fetus	ICD-10-CM	Diagnosis
O35.4XX0	Maternal care for (suspected) damage to fetus from alcohol, not applicable or unspecified	ICD-10-CM	Diagnosis
O35.4XX1	Maternal care for (suspected) damage to fetus from alcohol, fetus 1	ICD-10-CM	Diagnosis
O35.4XX2	Maternal care for (suspected) damage to fetus from alcohol, fetus 2	ICD-10-CM	Diagnosis
O35.4XX3	Maternal care for (suspected) damage to fetus from alcohol, fetus 3	ICD-10-CM	Diagnosis
O35.4XX4	Maternal care for (suspected) damage to fetus from alcohol, fetus 4	ICD-10-CM	Diagnosis
O35.4XX5	Maternal care for (suspected) damage to fetus from alcohol, fetus 5	ICD-10-CM	Diagnosis
O35.4XX9	Maternal care for (suspected) damage to fetus from alcohol, other fetus	ICD-10-CM	Diagnosis
O35.5XX0	Maternal care for (suspected) damage to fetus by drugs, not applicable or unspecified	ICD-10-CM	Diagnosis
O35.5XX1	Maternal care for (suspected) damage to fetus by drugs, fetus 1	ICD-10-CM	Diagnosis
O35.5XX2	Maternal care for (suspected) damage to fetus by drugs, fetus 2	ICD-10-CM	Diagnosis
O35.5XX3	Maternal care for (suspected) damage to fetus by drugs, fetus 3	ICD-10-CM	Diagnosis
O35.5XX4	Maternal care for (suspected) damage to fetus by drugs, fetus 4	ICD-10-CM	Diagnosis
O35.5XX5	Maternal care for (suspected) damage to fetus by drugs, fetus 5	ICD-10-CM	Diagnosis
O35.5XX9	Maternal care for (suspected) damage to fetus by drugs, other fetus	ICD-10-CM	Diagnosis
O35.6XX0	Maternal care for (suspected) damage to fetus by radiation, not applicable or unspecified	ICD-10-CM	Diagnosis
O35.6XX1	Maternal care for (suspected) damage to fetus by radiation, fetus 1	ICD-10-CM	Diagnosis
O35.6XX2	Maternal care for (suspected) damage to fetus by radiation, fetus 2	ICD-10-CM	Diagnosis
O35.6XX3	Maternal care for (suspected) damage to fetus by radiation, fetus 3	ICD-10-CM	Diagnosis
O35.6XX4	Maternal care for (suspected) damage to fetus by radiation, fetus 4	ICD-10-CM	Diagnosis
O35.6XX5	Maternal care for (suspected) damage to fetus by radiation, fetus 5	ICD-10-CM	Diagnosis
O35.6XX9	Maternal care for (suspected) damage to fetus by radiation, other fetus	ICD-10-CM	Diagnosis
O35.7XX0	Maternal care for (suspected) damage to fetus by other medical procedures, not applicable or unspecified	ICD-10-CM	Diagnosis
O35.7XX1	Maternal care for (suspected) damage to fetus by other medical procedures, fetus 1	ICD-10-CM	Diagnosis
O35.7XX2	Maternal care for (suspected) damage to fetus by other medical procedures, fetus 2	ICD-10-CM	Diagnosis
O35.7XX3	Maternal care for (suspected) damage to fetus by other medical procedures, fetus 3	ICD-10-CM	Diagnosis
O35.7XX4	Maternal care for (suspected) damage to fetus by other medical procedures, fetus 4	ICD-10-CM	Diagnosis
O35.7XX5	Maternal care for (suspected) damage to fetus by other medical procedures, fetus 5	ICD-10-CM	Diagnosis
O35.7XX9	Maternal care for (suspected) damage to fetus by other medical procedures, other fetus	ICD-10-CM	Diagnosis
O35.8XX0	Maternal care for other (suspected) fetal abnormality and damage, not applicable or unspecified	ICD-10-CM	Diagnosis
O35.8XX1	Maternal care for other (suspected) fetal abnormality and damage, fetus 1	ICD-10-CM	Diagnosis
O35.8XX2	Maternal care for other (suspected) fetal abnormality and damage, fetus 2	ICD-10-CM	Diagnosis
O35.8XX3	Maternal care for other (suspected) fetal abnormality and damage, fetus 3	ICD-10-CM	Diagnosis
O35.8XX4	Maternal care for other (suspected) fetal abnormality and damage, fetus 4	ICD-10-CM	Diagnosis
O35.8XX5	Maternal care for other (suspected) fetal abnormality and damage, fetus 5	ICD-10-CM	Diagnosis
O35.8XX9	Maternal care for other (suspected) fetal abnormality and damage, other fetus	ICD-10-CM	Diagnosis
O35.9XX0	Maternal care for (suspected) fetal abnormality and damage, unspecified, not applicable or unspecified	ICD-10-CM	Diagnosis
O35.9XX1	Maternal care for (suspected) fetal abnormality and damage, unspecified, fetus 1	ICD-10-CM	Diagnosis
O35.9XX2	Maternal care for (suspected) fetal abnormality and damage, unspecified, fetus 2	ICD-10-CM	Diagnosis
O35.9XX3	Maternal care for (suspected) fetal abnormality and damage, unspecified, fetus 3	ICD-10-CM	Diagnosis
O35.9XX4	Maternal care for (suspected) fetal abnormality and damage, unspecified, fetus 4	ICD-10-CM	Diagnosis
O35.9XX5	Maternal care for (suspected) fetal abnormality and damage, unspecified, fetus 5	ICD-10-CM	Diagnosis
O35.9XX9	Maternal care for (suspected) fetal abnormality and damage, unspecified, other fetus	ICD-10-CM	Diagnosis
O36.0110	Maternal care for anti-D [Rh] antibodies, first trimester, not applicable or unspecified	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
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
O36.0190	Maternal care for anti-D [Rh] antibodies, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.0191	Maternal care for anti-D [Rh] antibodies, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O36.0192	Maternal care for anti-D [Rh] antibodies, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O36.0193	Maternal care for anti-D [Rh] antibodies, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O36.0194	Maternal care for anti-D [Rh] antibodies, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O36.0195	Maternal care for anti-D [Rh] antibodies, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O36.0199	Maternal care for anti-D [Rh] antibodies, unspecified 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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O36.0990	Maternal care for other rhesus isoimmunization, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.0991	Maternal care for other rhesus isoimmunization, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O36.0992	Maternal care for other rhesus isoimmunization, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O36.0993	Maternal care for other rhesus isoimmunization, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O36.0994	Maternal care for other rhesus isoimmunization, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O36.0995	Maternal care for other rhesus isoimmunization, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O36.0999	Maternal care for other rhesus isoimmunization, unspecified 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
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
O36.1190	Maternal care for Anti-A sensitization, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.1191	Maternal care for Anti-A sensitization, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O36.1192	Maternal care for Anti-A sensitization, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O36.1193	Maternal care for Anti-A sensitization, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O36.1194	Maternal care for Anti-A sensitization, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O36.1195	Maternal care for Anti-A sensitization, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O36.1199	Maternal care for Anti-A sensitization, unspecified 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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O36.1990	Maternal care for other isoimmunization, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.1991	Maternal care for other isoimmunization, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O36.1992	Maternal care for other isoimmunization, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O36.1993	Maternal care for other isoimmunization, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O36.1994	Maternal care for other isoimmunization, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O36.1995	Maternal care for other isoimmunization, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O36.1999	Maternal care for other isoimmunization, unspecified trimester, other fetus	ICD-10-CM	Diagnosis
O36.20X0	Maternal care for hydrops fetalis, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.20X1	Maternal care for hydrops fetalis, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O36.20X2	Maternal care for hydrops fetalis, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O36.20X3	Maternal care for hydrops fetalis, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O36.20X4	Maternal care for hydrops fetalis, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O36.20X5	Maternal care for hydrops fetalis, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O36.20X9	Maternal care for hydrops fetalis, unspecified 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
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
O36.4XX0	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

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Code	Description	Code Type	Code Category
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
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
O36.5190	Maternal care for known or suspected placental insufficiency, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.5191	Maternal care for known or suspected placental insufficiency, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O36.5192	Maternal care for known or suspected placental insufficiency, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O36.5193	Maternal care for known or suspected placental insufficiency, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O36.5194	Maternal care for known or suspected placental insufficiency, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O36.5195	Maternal care for known or suspected placental insufficiency, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O36.5199	Maternal care for known or suspected placental insufficiency, unspecified 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
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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O36.5990	Maternal care for other known or suspected poor fetal growth, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.5991	Maternal care for other known or suspected poor fetal growth, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O36.5992	Maternal care for other known or suspected poor fetal growth, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O36.5993	Maternal care for other known or suspected poor fetal growth, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O36.5994	Maternal care for other known or suspected poor fetal growth, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O36.5995	Maternal care for other known or suspected poor fetal growth, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O36.5999	Maternal care for other known or suspected poor fetal growth, unspecified trimester, other fetus	ICD-10-CM	Diagnosis
O36.60X0	Maternal care for excessive fetal growth, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.60X1	Maternal care for excessive fetal growth, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O36.60X2	Maternal care for excessive fetal growth, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O36.60X3	Maternal care for excessive fetal growth, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O36.60X4	Maternal care for excessive fetal growth, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O36.60X5	Maternal care for excessive fetal growth, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O36.60X9	Maternal care for excessive fetal growth, unspecified 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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O36.70X0	Maternal care for viable fetus in abdominal pregnancy, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.70X1	Maternal care for viable fetus in abdominal pregnancy, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O36.70X2	Maternal care for viable fetus in abdominal pregnancy, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O36.70X3	Maternal care for viable fetus in abdominal pregnancy, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O36.70X4	Maternal care for viable fetus in abdominal pregnancy, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O36.70X5	Maternal care for viable fetus in abdominal pregnancy, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O36.70X9	Maternal care for viable fetus in abdominal pregnancy, unspecified 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
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
O36.80X0	Pregnancy with inconclusive fetal viability, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.80X1	Pregnancy with inconclusive fetal viability, fetus 1	ICD-10-CM	Diagnosis
O36.80X2	Pregnancy with inconclusive fetal viability, fetus 2	ICD-10-CM	Diagnosis
O36.80X3	Pregnancy with inconclusive fetal viability, fetus 3	ICD-10-CM	Diagnosis
O36.80X4	Pregnancy with inconclusive fetal viability, fetus 4	ICD-10-CM	Diagnosis
O36.80X5	Pregnancy with inconclusive fetal viability, fetus 5	ICD-10-CM	Diagnosis
O36.80X9	Pregnancy with inconclusive fetal viability, 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

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Code	Description	Code Type	Code Category
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
O36.8190	Decreased fetal movements, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.8191	Decreased fetal movements, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O36.8192	Decreased fetal movements, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O36.8193	Decreased fetal movements, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O36.8194	Decreased fetal movements, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O36.8195	Decreased fetal movements, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O36.8199	Decreased fetal movements, unspecified 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
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
O36.8290	Fetal anemia and thrombocytopenia, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.8291	Fetal anemia and thrombocytopenia, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O36.8292	Fetal anemia and thrombocytopenia, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O36.8293	Fetal anemia and thrombocytopenia, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O36.8294	Fetal anemia and thrombocytopenia, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O36.8295	Fetal anemia and thrombocytopenia, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O36.8299	Fetal anemia and thrombocytopenia, unspecified 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

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Code	Description	Code Type	Code Category
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
O36.8319	Maternal care for abnormalities of the fetal heart rate or rhythm, first trimester, other fetus	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
O36.8390	Maternal care for abnormalities of the fetal heart rate or rhythm, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.8391	Maternal care for abnormalities of the fetal heart rate or rhythm, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O36.8392	Maternal care for abnormalities of the fetal heart rate or rhythm, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O36.8393	Maternal care for abnormalities of the fetal heart rate or rhythm, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O36.8394	Maternal care for abnormalities of the fetal heart rate or rhythm, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O36.8395	Maternal care for abnormalities of the fetal heart rate or rhythm, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O36.8399	Maternal care for abnormalities of the fetal heart rate or rhythm, unspecified 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
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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O36.8990	Maternal care for other specified fetal problems, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.8991	Maternal care for other specified fetal problems, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O36.8992	Maternal care for other specified fetal problems, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O36.8993	Maternal care for other specified fetal problems, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O36.8994	Maternal care for other specified fetal problems, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O36.8995	Maternal care for other specified fetal problems, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O36.8999	Maternal care for other specified fetal problems, unspecified trimester, other fetus	ICD-10-CM	Diagnosis
O36.90X0	Maternal care for fetal problem, unspecified, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O36.90X1	Maternal care for fetal problem, unspecified, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O36.90X2	Maternal care for fetal problem, unspecified, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O36.90X3	Maternal care for fetal problem, unspecified, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O36.90X4	Maternal care for fetal problem, unspecified, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O36.90X5	Maternal care for fetal problem, unspecified, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O36.90X9	Maternal care for fetal problem, unspecified, unspecified 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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
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
O40.9XX0	Polyhydramnios, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O40.9XX1	Polyhydramnios, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O40.9XX2	Polyhydramnios, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O40.9XX3	Polyhydramnios, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O40.9XX4	Polyhydramnios, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O40.9XX5	Polyhydramnios, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O40.9XX9	Polyhydramnios, unspecified trimester, other fetus	ICD-10-CM	Diagnosis
O41.00X0	Oligohydramnios, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.00X1	Oligohydramnios, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O41.00X2	Oligohydramnios, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O41.00X3	Oligohydramnios, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O41.00X4	Oligohydramnios, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O41.00X5	Oligohydramnios, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O41.00X9	Oligohydramnios, unspecified 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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
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
O41.1090	Infection of amniotic sac and membranes, unspecified, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.1091	Infection of amniotic sac and membranes, unspecified, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O41.1092	Infection of amniotic sac and membranes, unspecified, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O41.1093	Infection of amniotic sac and membranes, unspecified, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O41.1094	Infection of amniotic sac and membranes, unspecified, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O41.1095	Infection of amniotic sac and membranes, unspecified, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O41.1099	Infection of amniotic sac and membranes, unspecified, unspecified 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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O41.1290	Chorioamnionitis, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.1291	Chorioamnionitis, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O41.1292	Chorioamnionitis, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O41.1293	Chorioamnionitis, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O41.1294	Chorioamnionitis, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O41.1295	Chorioamnionitis, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O41.1299	Chorioamnionitis, unspecified 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
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
O41.1490	Placentitis, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.1491	Placentitis, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O41.1492	Placentitis, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O41.1493	Placentitis, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O41.1494	Placentitis, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O41.1495	Placentitis, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O41.1499	Placentitis, unspecified 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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O41.8X90	Other specified disorders of amniotic fluid and membranes, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.8X91	Other specified disorders of amniotic fluid and membranes, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O41.8X92	Other specified disorders of amniotic fluid and membranes, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O41.8X93	Other specified disorders of amniotic fluid and membranes, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O41.8X94	Other specified disorders of amniotic fluid and membranes, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O41.8X95	Other specified disorders of amniotic fluid and membranes, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O41.8X99	Other specified disorders of amniotic fluid and membranes, unspecified trimester, other fetus	ICD-10-CM	Diagnosis
O41.90X0	Disorder of amniotic fluid and membranes, unspecified, unspecified trimester, not applicable or unspecified	ICD-10-CM	Diagnosis
O41.90X1	Disorder of amniotic fluid and membranes, unspecified, unspecified trimester, fetus 1	ICD-10-CM	Diagnosis
O41.90X2	Disorder of amniotic fluid and membranes, unspecified, unspecified trimester, fetus 2	ICD-10-CM	Diagnosis
O41.90X3	Disorder of amniotic fluid and membranes, unspecified, unspecified trimester, fetus 3	ICD-10-CM	Diagnosis
O41.90X4	Disorder of amniotic fluid and membranes, unspecified, unspecified trimester, fetus 4	ICD-10-CM	Diagnosis
O41.90X5	Disorder of amniotic fluid and membranes, unspecified, unspecified trimester, fetus 5	ICD-10-CM	Diagnosis
O41.90X9	Disorder of amniotic fluid and membranes, unspecified, unspecified 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
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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O42.00	Premature rupture of membranes, onset of labor within 24 hours of rupture, unspecified weeks of gestation	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
O42.10	Premature rupture of membranes, onset of labor more than 24 hours following rupture, unspecified weeks of gestation	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
O42.90	Premature rupture of membranes, unspecified as to length of time between rupture and onset of labor, unspecified weeks of gestation	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
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
O43.019	Fetomaternal placental transfusion syndrome, unspecified 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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O43.029	Fetus-to-fetus placental transfusion syndrome, unspecified 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
O43.109	Malformation of placenta, unspecified, unspecified 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
O43.119	Circumvallate placenta, unspecified 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
O43.129	Velamentous insertion of umbilical cord, unspecified 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
O43.199	Other malformation of placenta, unspecified 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
O43.219	Placenta accreta, unspecified 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
O43.229	Placenta increta, unspecified 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
O43.239	Placenta percreta, unspecified 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
O43.819	Placental infarction, unspecified 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
O43.899	Other placental disorders, unspecified trimester	ICD-10-CM	Diagnosis
O43.90	Unspecified placental disorder, unspecified 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
O44.00	Complete placenta previa NOS or without hemorrhage, unspecified 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
O44.10	Complete placenta previa with hemorrhage, unspecified trimester	ICD-10-CM	Diagnosis
O44.11	Complete placenta previa with hemorrhage, first trimester	ICD-10-CM	Diagnosis
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
O44.20	Partial placenta previa NOS or without hemorrhage, unspecified trimester	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O44.30	Partial placenta previa with hemorrhage, unspecified 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
O44.40	Low lying placenta NOS or without hemorrhage, unspecified 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
O44.50	Low lying placenta with hemorrhage, unspecified 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
O45.009	Premature separation of placenta with coagulation defect, unspecified, unspecified 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
O45.019	Premature separation of placenta with afibrinogenemia, unspecified 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
O45.029	Premature separation of placenta with disseminated intravascular coagulation, unspecified 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
O45.099	Premature separation of placenta with other coagulation defect, unspecified 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
O45.8X9	Other premature separation of placenta, unspecified trimester	ICD-10-CM	Diagnosis
O45.90	Premature separation of placenta, unspecified, unspecified 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
O46.009	Antepartum hemorrhage with coagulation defect, unspecified, unspecified 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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O46.013	Antepartum hemorrhage with afibrinogenemia, third trimester	ICD-10-CM	Diagnosis
O46.019	Antepartum hemorrhage with afibrinogenemia, unspecified 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
O46.029	Antepartum hemorrhage with disseminated intravascular coagulation, unspecified trimester	ICD-10-CM	Diagnosis
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
O46.099	Antepartum hemorrhage with other coagulation defect, unspecified 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
O46.8X9	Other antepartum hemorrhage, unspecified trimester	ICD-10-CM	Diagnosis
O46.90	Antepartum hemorrhage, unspecified, unspecified 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
O47.00	False labor before 37 completed weeks of gestation, unspecified 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
O47.9	False labor, unspecified	ICD-10-CM	Diagnosis
O48.0	Post-term pregnancy	ICD-10-CM	Diagnosis
O48.1	Prolonged pregnancy	ICD-10-CM	Diagnosis
O60.00	Preterm labor without delivery, unspecified trimester	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
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
O60.12X0	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
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
O60.20X0	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
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
O61.0	Failed medical induction of labor	ICD-10-CM	Diagnosis
O61.1	Failed instrumental induction of labor	ICD-10-CM	Diagnosis
O61.8	Other failed induction of labor	ICD-10-CM	Diagnosis
O61.9	Failed induction of labor, unspecified	ICD-10-CM	Diagnosis
O62.0	Primary inadequate contractions	ICD-10-CM	Diagnosis
O62.1	Secondary uterine inertia	ICD-10-CM	Diagnosis
O62.2	Other uterine inertia	ICD-10-CM	Diagnosis
O62.3	Precipitate labor	ICD-10-CM	Diagnosis
O62.4	Hypertonic, incoordinate, and prolonged uterine contractions	ICD-10-CM	Diagnosis
O62.8	Other abnormalities of forces of labor	ICD-10-CM	Diagnosis
O62.9	Abnormality of forces of labor, unspecified	ICD-10-CM	Diagnosis
O63.0	Prolonged first stage (of labor)	ICD-10-CM	Diagnosis
O63.1	Prolonged second stage (of labor)	ICD-10-CM	Diagnosis
O63.2	Delayed delivery of second twin, triplet, etc.	ICD-10-CM	Diagnosis
O63.9	Long labor, unspecified	ICD-10-CM	Diagnosis
O64.0XX0	Obstructed labor due to incomplete rotation of fetal head, not applicable or unspecified	ICD-10-CM	Diagnosis
O64.0XX1	Obstructed labor due to incomplete rotation of fetal head, fetus 1	ICD-10-CM	Diagnosis
O64.0XX2	Obstructed labor due to incomplete rotation of fetal head, fetus 2	ICD-10-CM	Diagnosis
O64.0XX3	Obstructed labor due to incomplete rotation of fetal head, fetus 3	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O64.0XX4	Obstructed labor due to incomplete rotation of fetal head, fetus 4	ICD-10-CM	Diagnosis
O64.0XX5	Obstructed labor due to incomplete rotation of fetal head, fetus 5	ICD-10-CM	Diagnosis
O64.0XX9	Obstructed labor due to incomplete rotation of fetal head, other fetus	ICD-10-CM	Diagnosis
O64.1XX0	Obstructed labor due to breech presentation, not applicable or unspecified	ICD-10-CM	Diagnosis
O64.1XX1	Obstructed labor due to breech presentation, fetus 1	ICD-10-CM	Diagnosis
O64.1XX2	Obstructed labor due to breech presentation, fetus 2	ICD-10-CM	Diagnosis
O64.1XX3	Obstructed labor due to breech presentation, fetus 3	ICD-10-CM	Diagnosis
O64.1XX4	Obstructed labor due to breech presentation, fetus 4	ICD-10-CM	Diagnosis
O64.1XX5	Obstructed labor due to breech presentation, fetus 5	ICD-10-CM	Diagnosis
O64.1XX9	Obstructed labor due to breech presentation, other fetus	ICD-10-CM	Diagnosis
O64.2XX0	Obstructed labor due to face presentation, not applicable or unspecified	ICD-10-CM	Diagnosis
O64.2XX1	Obstructed labor due to face presentation, fetus 1	ICD-10-CM	Diagnosis
O64.2XX2	Obstructed labor due to face presentation, fetus 2	ICD-10-CM	Diagnosis
O64.2XX3	Obstructed labor due to face presentation, fetus 3	ICD-10-CM	Diagnosis
O64.2XX4	Obstructed labor due to face presentation, fetus 4	ICD-10-CM	Diagnosis
O64.2XX5	Obstructed labor due to face presentation, fetus 5	ICD-10-CM	Diagnosis
O64.2XX9	Obstructed labor due to face presentation, other fetus	ICD-10-CM	Diagnosis
O64.3XX0	Obstructed labor due to brow presentation, not applicable or unspecified	ICD-10-CM	Diagnosis
O64.3XX1	Obstructed labor due to brow presentation, fetus 1	ICD-10-CM	Diagnosis
O64.3XX2	Obstructed labor due to brow presentation, fetus 2	ICD-10-CM	Diagnosis
O64.3XX3	Obstructed labor due to brow presentation, fetus 3	ICD-10-CM	Diagnosis
O64.3XX4	Obstructed labor due to brow presentation, fetus 4	ICD-10-CM	Diagnosis
O64.3XX5	Obstructed labor due to brow presentation, fetus 5	ICD-10-CM	Diagnosis
O64.3XX9	Obstructed labor due to brow presentation, other fetus	ICD-10-CM	Diagnosis
O64.4XX0	Obstructed labor due to shoulder presentation, not applicable or unspecified	ICD-10-CM	Diagnosis
O64.4XX1	Obstructed labor due to shoulder presentation, fetus 1	ICD-10-CM	Diagnosis
O64.4XX2	Obstructed labor due to shoulder presentation, fetus 2	ICD-10-CM	Diagnosis
O64.4XX3	Obstructed labor due to shoulder presentation, fetus 3	ICD-10-CM	Diagnosis
O64.4XX4	Obstructed labor due to shoulder presentation, fetus 4	ICD-10-CM	Diagnosis
O64.4XX5	Obstructed labor due to shoulder presentation, fetus 5	ICD-10-CM	Diagnosis
O64.4XX9	Obstructed labor due to shoulder presentation, other fetus	ICD-10-CM	Diagnosis
O64.5XX0	Obstructed labor due to compound presentation, not applicable or unspecified	ICD-10-CM	Diagnosis
O64.5XX1	Obstructed labor due to compound presentation, fetus 1	ICD-10-CM	Diagnosis
O64.5XX2	Obstructed labor due to compound presentation, fetus 2	ICD-10-CM	Diagnosis
O64.5XX3	Obstructed labor due to compound presentation, fetus 3	ICD-10-CM	Diagnosis
O64.5XX4	Obstructed labor due to compound presentation, fetus 4	ICD-10-CM	Diagnosis
O64.5XX5	Obstructed labor due to compound presentation, fetus 5	ICD-10-CM	Diagnosis
O64.5XX9	Obstructed labor due to compound presentation, other fetus	ICD-10-CM	Diagnosis
O64.8XX0	Obstructed labor due to other malposition and malpresentation, not applicable or unspecified	ICD-10-CM	Diagnosis
O64.8XX1	Obstructed labor due to other malposition and malpresentation, fetus 1	ICD-10-CM	Diagnosis
O64.8XX2	Obstructed labor due to other malposition and malpresentation, fetus 2	ICD-10-CM	Diagnosis
O64.8XX3	Obstructed labor due to other malposition and malpresentation, fetus 3	ICD-10-CM	Diagnosis
O64.8XX4	Obstructed labor due to other malposition and malpresentation, fetus 4	ICD-10-CM	Diagnosis
O64.8XX5	Obstructed labor due to other malposition and malpresentation, fetus 5	ICD-10-CM	Diagnosis
O64.8XX9	Obstructed labor due to other malposition and malpresentation, other fetus	ICD-10-CM	Diagnosis
O64.9XX0	Obstructed labor due to malposition and malpresentation, unspecified, not applicable or unspecified	ICD-10-CM	Diagnosis
O64.9XX1	Obstructed labor due to malposition and malpresentation, unspecified, fetus 1	ICD-10-CM	Diagnosis
O64.9XX2	Obstructed labor due to malposition and malpresentation, unspecified, fetus 2	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O64.9XX3	Obstructed labor due to malposition and malpresentation, unspecified, fetus 3	ICD-10-CM	Diagnosis
O64.9XX4	Obstructed labor due to malposition and malpresentation, unspecified, fetus 4	ICD-10-CM	Diagnosis
O64.9XX5	Obstructed labor due to malposition and malpresentation, unspecified, fetus 5	ICD-10-CM	Diagnosis
O64.9XX9	Obstructed labor due to malposition and malpresentation, unspecified, other fetus	ICD-10-CM	Diagnosis
O65.0	Obstructed labor due to deformed pelvis	ICD-10-CM	Diagnosis
O65.1	Obstructed labor due to generally contracted pelvis	ICD-10-CM	Diagnosis
O65.2	Obstructed labor due to pelvic inlet contraction	ICD-10-CM	Diagnosis
O65.3	Obstructed labor due to pelvic outlet and mid-cavity contraction	ICD-10-CM	Diagnosis
O65.4	Obstructed labor due to fetopelvic disproportion, unspecified	ICD-10-CM	Diagnosis
O65.5	Obstructed labor due to abnormality of maternal pelvic organs	ICD-10-CM	Diagnosis
O65.8	Obstructed labor due to other maternal pelvic abnormalities	ICD-10-CM	Diagnosis
O65.9	Obstructed labor due to maternal pelvic abnormality, unspecified	ICD-10-CM	Diagnosis
O66.0	Obstructed labor due to shoulder dystocia	ICD-10-CM	Diagnosis
O66.1	Obstructed labor due to locked twins	ICD-10-CM	Diagnosis
O66.2	Obstructed labor due to unusually large fetus	ICD-10-CM	Diagnosis
O66.3	Obstructed labor due to other abnormalities of fetus	ICD-10-CM	Diagnosis
O66.40	Failed trial of labor, unspecified	ICD-10-CM	Diagnosis
O66.41	Failed attempted vaginal birth after previous cesarean delivery	ICD-10-CM	Diagnosis
O66.5	Attempted application of vacuum extractor and forceps	ICD-10-CM	Diagnosis
O66.6	Obstructed labor due to other multiple fetuses	ICD-10-CM	Diagnosis
O66.8	Other specified obstructed labor	ICD-10-CM	Diagnosis
O66.9	Obstructed labor, unspecified	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
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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O71.00	Rupture of uterus before onset of labor, unspecified trimester	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
O71.1	Rupture of uterus during labor	ICD-10-CM	Diagnosis
O71.2	Postpartum inversion of uterus	ICD-10-CM	Diagnosis
O71.3	Obstetric laceration of cervix	ICD-10-CM	Diagnosis
O71.4	Obstetric high vaginal laceration alone	ICD-10-CM	Diagnosis
O71.5	Other obstetric injury to pelvic organs	ICD-10-CM	Diagnosis
O71.6	Obstetric damage to pelvic joints and ligaments	ICD-10-CM	Diagnosis
O71.7	Obstetric hematoma of pelvis	ICD-10-CM	Diagnosis
O71.81	Laceration of uterus, not elsewhere classified	ICD-10-CM	Diagnosis
O71.82	Other specified trauma to perineum and vulva	ICD-10-CM	Diagnosis
O71.89	Other specified obstetric trauma	ICD-10-CM	Diagnosis
O71.9	Obstetric trauma, unspecified	ICD-10-CM	Diagnosis
O72.0	Third-stage hemorrhage	ICD-10-CM	Diagnosis
O72.1	Other immediate postpartum hemorrhage	ICD-10-CM	Diagnosis
O72.2	Delayed and secondary postpartum hemorrhage	ICD-10-CM	Diagnosis
O72.3	Postpartum coagulation defects	ICD-10-CM	Diagnosis
O73.0	Retained placenta without hemorrhage	ICD-10-CM	Diagnosis
O73.1	Retained portions of placenta and membranes, without hemorrhage	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
O75.2	Pyrexia during labor, not elsewhere classified	ICD-10-CM	Diagnosis
O75.3	Other infection during labor	ICD-10-CM	Diagnosis
O75.4	Other complications of obstetric surgery and procedures	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
O77.0	Labor and delivery complicated by meconium in amniotic fluid	ICD-10-CM	Diagnosis
O77.1	Fetal stress in labor or delivery due to drug administration	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
O85	Puerperal sepsis	ICD-10-CM	Diagnosis
O86.0	Infection of obstetric surgical wound	ICD-10-CM	Diagnosis
O86.11	Cervicitis following delivery	ICD-10-CM	Diagnosis
O86.12	Endometritis following delivery	ICD-10-CM	Diagnosis
O86.13	Vaginitis following delivery	ICD-10-CM	Diagnosis
O86.19	Other infection of genital tract following delivery	ICD-10-CM	Diagnosis
O86.20	Urinary tract infection following delivery, unspecified	ICD-10-CM	Diagnosis
O86.21	Infection of kidney following delivery	ICD-10-CM	Diagnosis
O86.22	Infection of bladder following delivery	ICD-10-CM	Diagnosis
O86.29	Other urinary tract infection following delivery	ICD-10-CM	Diagnosis
O86.4	Pyrexia of unknown origin following delivery	ICD-10-CM	Diagnosis
O86.81	Puerperal septic thrombophlebitis	ICD-10-CM	Diagnosis
O86.89	Other specified puerperal infections	ICD-10-CM	Diagnosis
O87.0	Superficial thrombophlebitis in the puerperium	ICD-10-CM	Diagnosis
O87.1	Deep phlebothrombosis in the puerperium	ICD-10-CM	Diagnosis
O87.2	Hemorrhoids in the puerperium	ICD-10-CM	Diagnosis
O87.3	Cerebral venous thrombosis in the puerperium	ICD-10-CM	Diagnosis
O87.4	Varicose veins of lower extremity in the puerperium	ICD-10-CM	Diagnosis
O87.8	Other venous complications in the puerperium	ICD-10-CM	Diagnosis
O87.9	Venous complication in the puerperium, unspecified	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
O88.019	Air embolism in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O88.02	Air embolism in childbirth	ICD-10-CM	Diagnosis
O88.03	Air embolism in the puerperium	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
O88.119	Amniotic fluid embolism in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O88.12	Amniotic fluid embolism in childbirth	ICD-10-CM	Diagnosis
O88.13	Amniotic fluid embolism in the puerperium	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
O88.219	Thromboembolism in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O88.22	Thromboembolism in childbirth	ICD-10-CM	Diagnosis
O88.23	Thromboembolism in the puerperium	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O88.319	Pyemic and septic embolism in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O88.32	Pyemic and septic embolism in childbirth	ICD-10-CM	Diagnosis
O88.33	Pyemic and septic embolism in the puerperium	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
O88.819	Other embolism in pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O88.82	Other embolism in childbirth	ICD-10-CM	Diagnosis
O88.83	Other embolism in the puerperium	ICD-10-CM	Diagnosis
O89.01	Aspiration pneumonitis due to anesthesia during the puerperium	ICD-10-CM	Diagnosis
O89.09	Other pulmonary complications of anesthesia during the puerperium	ICD-10-CM	Diagnosis
O89.1	Cardiac complications of anesthesia during the puerperium	ICD-10-CM	Diagnosis
O89.2	Central nervous system complications of anesthesia during the puerperium	ICD-10-CM	Diagnosis
O89.3	Toxic reaction to local anesthesia during the puerperium	ICD-10-CM	Diagnosis
O89.4	Spinal and epidural anesthesia-induced headache during the puerperium	ICD-10-CM	Diagnosis
O89.5	Other complications of spinal and epidural anesthesia during the puerperium	ICD-10-CM	Diagnosis
O89.6	Failed or difficult intubation for anesthesia during the puerperium	ICD-10-CM	Diagnosis
O89.8	Other complications of anesthesia during the puerperium	ICD-10-CM	Diagnosis
O89.9	Complication of anesthesia during the puerperium, unspecified	ICD-10-CM	Diagnosis
O90.0	Disruption of cesarean delivery wound	ICD-10-CM	Diagnosis
O90.1	Disruption of perineal obstetric wound	ICD-10-CM	Diagnosis
O90.2	Hematoma of obstetric wound	ICD-10-CM	Diagnosis
O90.3	Peripartum cardiomyopathy	ICD-10-CM	Diagnosis
O90.4	Postpartum acute kidney failure	ICD-10-CM	Diagnosis
O90.5	Postpartum thyroiditis	ICD-10-CM	Diagnosis
O90.6	Postpartum mood disturbance	ICD-10-CM	Diagnosis
O90.81	Anemia of the puerperium	ICD-10-CM	Diagnosis
O90.89	Other complications of the puerperium, not elsewhere classified	ICD-10-CM	Diagnosis
O90.9	Complication of the puerperium, unspecified	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
O91.019	Infection of nipple associated with pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O91.02	Infection of nipple associated with the puerperium	ICD-10-CM	Diagnosis
O91.03	Infection of nipple associated with lactation	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
O91.119	Abscess of breast associated with pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O91.12	Abscess of breast associated with the puerperium	ICD-10-CM	Diagnosis
O91.13	Abscess of breast associated with lactation	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
O91.213	Nonpurulent mastitis associated with pregnancy, third trimester	ICD-10-CM	Diagnosis
O91.219	Nonpurulent mastitis associated with pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O91.22	Nonpurulent mastitis associated with the puerperium	ICD-10-CM	Diagnosis
O91.23	Nonpurulent mastitis associated with lactation	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
092.019	Retracted nipple associated with pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
092.02	Retracted nipple associated with the puerperium	ICD-10-CM	Diagnosis
092.03	Retracted nipple associated with lactation	ICD-10-CM	Diagnosis
092.111	Cracked nipple associated with pregnancy, first trimester	ICD-10-CM	Diagnosis
092.112	Cracked nipple associated with pregnancy, second trimester	ICD-10-CM	Diagnosis
092.113	Cracked nipple associated with pregnancy, third trimester	ICD-10-CM	Diagnosis
092.119	Cracked nipple associated with pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
092.12	Cracked nipple associated with the puerperium	ICD-10-CM	Diagnosis
092.13	Cracked nipple associated with lactation	ICD-10-CM	Diagnosis
092.20	Unspecified disorder of breast associated with pregnancy and the puerperium	ICD-10-CM	Diagnosis
092.29	Other disorders of breast associated with pregnancy and the puerperium	ICD-10-CM	Diagnosis
092.3	Agalactia	ICD-10-CM	Diagnosis
092.4	Hypogalactia	ICD-10-CM	Diagnosis
092.5	Suppressed lactation	ICD-10-CM	Diagnosis
092.6	Galactorrhea	ICD-10-CM	Diagnosis
092.70	Unspecified disorders of lactation	ICD-10-CM	Diagnosis
092.79	Other disorders of lactation	ICD-10-CM	Diagnosis
094	Sequelae of complication of pregnancy, childbirth, and the puerperium	ICD-10-CM	Diagnosis
098.011	Tuberculosis complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
098.012	Tuberculosis complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
098.013	Tuberculosis complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
098.019	Tuberculosis complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
098.02	Tuberculosis complicating childbirth	ICD-10-CM	Diagnosis
098.03	Tuberculosis complicating the puerperium	ICD-10-CM	Diagnosis
098.111	Syphilis complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
098.112	Syphilis complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
098.113	Syphilis complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
098.119	Syphilis complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
098.12	Syphilis complicating childbirth	ICD-10-CM	Diagnosis
098.13	Syphilis complicating the puerperium	ICD-10-CM	Diagnosis
098.211	Gonorrhea complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
098.212	Gonorrhea complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
098.213	Gonorrhea complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
098.219	Gonorrhea complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
098.22	Gonorrhea complicating childbirth	ICD-10-CM	Diagnosis
098.23	Gonorrhea complicating the puerperium	ICD-10-CM	Diagnosis
098.311	Other infections with a predominantly sexual mode of transmission complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
098.312	Other infections with a predominantly sexual mode of transmission complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
098.313	Other infections with a predominantly sexual mode of transmission complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
098.319	Other infections with a predominantly sexual mode of transmission complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
098.32	Other infections with a predominantly sexual mode of transmission complicating childbirth	ICD-10-CM	Diagnosis
098.33	Other infections with a predominantly sexual mode of transmission complicating the puerperium	ICD-10-CM	Diagnosis
098.411	Viral hepatitis complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
098.412	Viral hepatitis complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
098.413	Viral hepatitis complicating pregnancy, third trimester	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
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
O98.519	Other viral diseases complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O98.52	Other viral diseases complicating childbirth	ICD-10-CM	Diagnosis
O98.53	Other viral diseases complicating the puerperium	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
O98.619	Protozoal diseases complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O98.62	Protozoal diseases complicating childbirth	ICD-10-CM	Diagnosis
O98.63	Protozoal diseases complicating the puerperium	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
O98.719	Human immunodeficiency virus [HIV] disease complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O98.72	Human immunodeficiency virus [HIV] disease complicating childbirth	ICD-10-CM	Diagnosis
O98.73	Human immunodeficiency virus [HIV] disease complicating the puerperium	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
O98.819	Other maternal infectious and parasitic diseases complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O98.82	Other maternal infectious and parasitic diseases complicating childbirth	ICD-10-CM	Diagnosis
O98.83	Other maternal infectious and parasitic diseases complicating the puerperium	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
O98.919	Unspecified maternal infectious and parasitic disease complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O98.92	Unspecified maternal infectious and parasitic disease complicating childbirth	ICD-10-CM	Diagnosis
O98.93	Unspecified maternal infectious and parasitic disease complicating the puerperium	ICD-10-CM	Diagnosis
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
O99.019	Anemia complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O99.02	Anemia complicating childbirth	ICD-10-CM	Diagnosis
O99.03	Anemia complicating the puerperium	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
099.113	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
099.119	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
099.12	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating childbirth	ICD-10-CM	Diagnosis
099.13	Other diseases of the blood and blood-forming organs and certain disorders involving the immune mechanism complicating the puerperium	ICD-10-CM	Diagnosis
099.210	Obesity complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
099.211	Obesity complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
099.212	Obesity complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
099.213	Obesity complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
099.214	Obesity complicating childbirth	ICD-10-CM	Diagnosis
099.215	Obesity complicating the puerperium	ICD-10-CM	Diagnosis
099.280	Endocrine, nutritional and metabolic diseases complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
099.281	Endocrine, nutritional and metabolic diseases complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
099.282	Endocrine, nutritional and metabolic diseases complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
099.283	Endocrine, nutritional and metabolic diseases complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
099.284	Endocrine, nutritional and metabolic diseases complicating childbirth	ICD-10-CM	Diagnosis
099.285	Endocrine, nutritional and metabolic diseases complicating the puerperium	ICD-10-CM	Diagnosis
099.310	Alcohol use complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
099.311	Alcohol use complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
099.312	Alcohol use complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
099.313	Alcohol use complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
099.314	Alcohol use complicating childbirth	ICD-10-CM	Diagnosis
099.315	Alcohol use complicating the puerperium	ICD-10-CM	Diagnosis
099.320	Drug use complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
099.321	Drug use complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
099.322	Drug use complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
099.323	Drug use complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
099.324	Drug use complicating childbirth	ICD-10-CM	Diagnosis
099.325	Drug use complicating the puerperium	ICD-10-CM	Diagnosis
099.330	Smoking (tobacco) complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
099.331	Smoking (tobacco) complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
099.332	Smoking (tobacco) complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
099.333	Smoking (tobacco) complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
099.334	Smoking (tobacco) complicating childbirth	ICD-10-CM	Diagnosis
099.335	Smoking (tobacco) complicating the puerperium	ICD-10-CM	Diagnosis
099.340	Other mental disorders complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
099.341	Other mental disorders complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
099.342	Other mental disorders complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
099.343	Other mental disorders complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
099.344	Other mental disorders complicating childbirth	ICD-10-CM	Diagnosis
099.345	Other mental disorders complicating the puerperium	ICD-10-CM	Diagnosis
099.350	Diseases of the nervous system complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
099.351	Diseases of the nervous system complicating pregnancy, first trimester	ICD-10-CM	Diagnosis
099.352	Diseases of the nervous system complicating pregnancy, second trimester	ICD-10-CM	Diagnosis
099.353	Diseases of the nervous system complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
099.354	Diseases of the nervous system complicating childbirth	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
O99.355	Diseases of the nervous system complicating the puerperium	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
O99.419	Diseases of the circulatory system complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O99.42	Diseases of the circulatory system complicating childbirth	ICD-10-CM	Diagnosis
O99.43	Diseases of the circulatory system complicating the puerperium	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
O99.519	Diseases of the respiratory system complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O99.52	Diseases of the respiratory system complicating childbirth	ICD-10-CM	Diagnosis
O99.53	Diseases of the respiratory system complicating the puerperium	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
O99.619	Diseases of the digestive system complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O99.62	Diseases of the digestive system complicating childbirth	ICD-10-CM	Diagnosis
O99.63	Diseases of the digestive system complicating the puerperium	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
O99.719	Diseases of the skin and subcutaneous tissue complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O99.72	Diseases of the skin and subcutaneous tissue complicating childbirth	ICD-10-CM	Diagnosis
O99.73	Diseases of the skin and subcutaneous tissue complicating the puerperium	ICD-10-CM	Diagnosis
O99.810	Abnormal glucose complicating pregnancy	ICD-10-CM	Diagnosis
O99.814	Abnormal glucose complicating childbirth	ICD-10-CM	Diagnosis
O99.815	Abnormal glucose complicating the puerperium	ICD-10-CM	Diagnosis
O99.820	Streptococcus B carrier state complicating pregnancy	ICD-10-CM	Diagnosis
O99.824	Streptococcus B carrier state complicating childbirth	ICD-10-CM	Diagnosis
O99.825	Streptococcus B carrier state complicating the puerperium	ICD-10-CM	Diagnosis
O99.830	Other infection carrier state complicating pregnancy	ICD-10-CM	Diagnosis
O99.834	Other infection carrier state complicating childbirth	ICD-10-CM	Diagnosis
O99.835	Other infection carrier state complicating the puerperium	ICD-10-CM	Diagnosis
O99.840	Bariatric surgery status complicating pregnancy, unspecified 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
O99.843	Bariatric surgery status complicating pregnancy, third trimester	ICD-10-CM	Diagnosis
O99.844	Bariatric surgery status complicating childbirth	ICD-10-CM	Diagnosis
O99.845	Bariatric surgery status complicating the puerperium	ICD-10-CM	Diagnosis
O99.89	Other specified diseases and conditions complicating pregnancy, childbirth and the puerperium	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.119	Malignant neoplasm complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O9A.12	Malignant neoplasm complicating childbirth	ICD-10-CM	Diagnosis
O9A.13	Malignant neoplasm complicating the puerperium	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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.219	Injury, poisoning and certain other consequences of external causes complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O9A.22	Injury, poisoning and certain other consequences of external causes complicating childbirth	ICD-10-CM	Diagnosis
O9A.23	Injury, poisoning and certain other consequences of external causes complicating the puerperium	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.319	Physical abuse complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O9A.32	Physical abuse complicating childbirth	ICD-10-CM	Diagnosis
O9A.33	Physical abuse complicating the puerperium	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.419	Sexual abuse complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O9A.42	Sexual abuse complicating childbirth	ICD-10-CM	Diagnosis
O9A.43	Sexual abuse complicating the puerperium	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
O9A.519	Psychological abuse complicating pregnancy, unspecified trimester	ICD-10-CM	Diagnosis
O9A.52	Psychological abuse complicating childbirth	ICD-10-CM	Diagnosis
O9A.53	Psychological abuse complicating the puerperium	ICD-10-CM	Diagnosis
P00.0	Newborn affected by maternal hypertensive disorders	ICD-10-CM	Diagnosis
P00.1	Newborn affected by maternal renal and urinary tract diseases	ICD-10-CM	Diagnosis
P00.2	Newborn affected by maternal infectious and parasitic diseases	ICD-10-CM	Diagnosis
P00.3	Newborn affected by other maternal circulatory and respiratory diseases	ICD-10-CM	Diagnosis
P00.4	Newborn affected by maternal nutritional disorders	ICD-10-CM	Diagnosis
P00.5	Newborn affected by maternal injury	ICD-10-CM	Diagnosis
P00.6	Newborn affected by surgical procedure on mother	ICD-10-CM	Diagnosis
P00.7	Newborn affected by other medical procedures on mother, not elsewhere classified	ICD-10-CM	Diagnosis
P00.81	Newborn affected by periodontal disease in mother	ICD-10-CM	Diagnosis
P00.89	Newborn affected by other maternal conditions	ICD-10-CM	Diagnosis
P00.9	Newborn affected by unspecified maternal condition	ICD-10-CM	Diagnosis
P01.0	Newborn affected by incompetent cervix	ICD-10-CM	Diagnosis
P01.1	Newborn affected by premature rupture of membranes	ICD-10-CM	Diagnosis
P01.2	Newborn affected by oligohydramnios	ICD-10-CM	Diagnosis
P01.3	Newborn affected by polyhydramnios	ICD-10-CM	Diagnosis
P01.4	Newborn affected by ectopic pregnancy	ICD-10-CM	Diagnosis
P01.5	Newborn affected by multiple pregnancy	ICD-10-CM	Diagnosis
P01.6	Newborn affected by maternal death	ICD-10-CM	Diagnosis
P01.7	Newborn affected by malpresentation before labor	ICD-10-CM	Diagnosis
P01.8	Newborn affected by other maternal complications of pregnancy	ICD-10-CM	Diagnosis
P01.9	Newborn affected by maternal complication of pregnancy, unspecified	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
P02.0	Newborn affected by placenta previa	ICD-10-CM	Diagnosis
P02.1	Newborn affected by other forms of placental separation and hemorrhage	ICD-10-CM	Diagnosis
P02.20	Newborn affected by unspecified morphological and functional abnormalities of placenta	ICD-10-CM	Diagnosis
P02.29	Newborn affected by other morphological and functional abnormalities of placenta	ICD-10-CM	Diagnosis
P02.3	Newborn affected by placental transfusion syndromes	ICD-10-CM	Diagnosis
P02.4	Newborn affected by prolapsed cord	ICD-10-CM	Diagnosis
P02.5	Newborn affected by other compression of umbilical cord	ICD-10-CM	Diagnosis
P02.60	Newborn affected by unspecified conditions of umbilical cord	ICD-10-CM	Diagnosis
P02.69	Newborn affected by other conditions of umbilical cord	ICD-10-CM	Diagnosis
P02.7	Newborn affected by chorioamnionitis	ICD-10-CM	Diagnosis
P02.8	Newborn affected by other abnormalities of membranes	ICD-10-CM	Diagnosis
P02.9	Newborn affected by abnormality of membranes, unspecified	ICD-10-CM	Diagnosis
P03.0	Newborn affected by breech delivery and extraction	ICD-10-CM	Diagnosis
P03.1	Newborn affected by other malpresentation, malposition and disproportion during labor and delivery	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
P03.6	Newborn affected by abnormal uterine contractions	ICD-10-CM	Diagnosis
P03.810	Newborn affected by abnormality in fetal (intrauterine) heart rate or rhythm before the onset of labor	ICD-10-CM	Diagnosis
P03.811	Newborn affected by abnormality in fetal (intrauterine) heart rate or rhythm during labor	ICD-10-CM	Diagnosis
P03.819	Newborn affected by abnormality in fetal (intrauterine) heart rate or rhythm, unspecified as to time of onset	ICD-10-CM	Diagnosis
P03.82	Meconium passage during delivery	ICD-10-CM	Diagnosis
P03.89	Newborn affected by other specified complications of labor and delivery	ICD-10-CM	Diagnosis
P03.9	Newborn affected by complication of labor and delivery, unspecified	ICD-10-CM	Diagnosis
P04.0	Newborn affected by maternal anesthesia and analgesia in pregnancy, labor and delivery	ICD-10-CM	Diagnosis
P04.1	Newborn affected by other maternal medication	ICD-10-CM	Diagnosis
P04.2	Newborn affected by maternal use of tobacco	ICD-10-CM	Diagnosis
P04.3	Newborn affected by maternal use of alcohol	ICD-10-CM	Diagnosis
P04.41	Newborn affected by maternal use of cocaine	ICD-10-CM	Diagnosis
P04.49	Newborn affected by maternal use of other drugs of addiction	ICD-10-CM	Diagnosis
P04.5	Newborn affected by maternal use of nutritional chemical substances	ICD-10-CM	Diagnosis
P04.6	Newborn affected by maternal exposure to environmental chemical substances	ICD-10-CM	Diagnosis
P04.8	Newborn affected by other maternal noxious substances	ICD-10-CM	Diagnosis
P04.9	Newborn affected by maternal noxious substance, unspecified	ICD-10-CM	Diagnosis
P05.00	Newborn light for gestational age, unspecified weight	ICD-10-CM	Diagnosis
P05.01	Newborn light for gestational age, less than 500 grams	ICD-10-CM	Diagnosis
P05.02	Newborn light for gestational age, 500-749 grams	ICD-10-CM	Diagnosis
P05.03	Newborn light for gestational age, 750-999 grams	ICD-10-CM	Diagnosis
P05.04	Newborn light for gestational age, 1000-1249 grams	ICD-10-CM	Diagnosis
P05.05	Newborn light for gestational age, 1250-1499 grams	ICD-10-CM	Diagnosis
P05.06	Newborn light for gestational age, 1500-1749 grams	ICD-10-CM	Diagnosis
P05.07	Newborn light for gestational age, 1750-1999 grams	ICD-10-CM	Diagnosis
P05.08	Newborn light for gestational age, 2000-2499 grams	ICD-10-CM	Diagnosis
P05.09	Newborn light for gestational age, 2500 grams and over	ICD-10-CM	Diagnosis
P05.10	Newborn small for gestational age, unspecified weight	ICD-10-CM	Diagnosis
P05.11	Newborn small for gestational age, less than 500 grams	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
P05.12	Newborn small for gestational age, 500-749 grams	ICD-10-CM	Diagnosis
P05.13	Newborn small for gestational age, 750-999 grams	ICD-10-CM	Diagnosis
P05.14	Newborn small for gestational age, 1000-1249 grams	ICD-10-CM	Diagnosis
P05.15	Newborn small for gestational age, 1250-1499 grams	ICD-10-CM	Diagnosis
P05.16	Newborn small for gestational age, 1500-1749 grams	ICD-10-CM	Diagnosis
P05.17	Newborn small for gestational age, 1750-1999 grams	ICD-10-CM	Diagnosis
P05.18	Newborn small for gestational age, 2000-2499 grams	ICD-10-CM	Diagnosis
P05.19	Newborn small for gestational age, other	ICD-10-CM	Diagnosis
P05.2	Newborn affected by fetal (intrauterine) malnutrition not light or small for gestational age	ICD-10-CM	Diagnosis
P05.9	Newborn affected by slow intrauterine growth, unspecified	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
P08.0	Exceptionally large newborn baby	ICD-10-CM	Diagnosis
P08.1	Other heavy for gestational age newborn	ICD-10-CM	Diagnosis
P08.21	Post-term newborn	ICD-10-CM	Diagnosis
P08.22	Prolonged gestation of newborn	ICD-10-CM	Diagnosis
P10.0	Subdural hemorrhage due to birth injury	ICD-10-CM	Diagnosis
P10.1	Cerebral hemorrhage due to birth injury	ICD-10-CM	Diagnosis
P10.4	Tentorial tear due to birth injury	ICD-10-CM	Diagnosis
P10.8	Other intracranial lacerations and hemorrhages due to birth injury	ICD-10-CM	Diagnosis
P10.9	Unspecified intracranial laceration and hemorrhage due to birth injury	ICD-10-CM	Diagnosis
P11.0	Cerebral edema due to birth injury	ICD-10-CM	Diagnosis
P11.1	Other specified brain damage due to birth injury	ICD-10-CM	Diagnosis
P11.2	Unspecified brain damage due to birth injury	ICD-10-CM	Diagnosis
P11.3	Birth injury to facial nerve	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
P11.4	Birth injury to other cranial nerves	ICD-10-CM	Diagnosis
P11.5	Birth injury to spine and spinal cord	ICD-10-CM	Diagnosis
P11.9	Birth injury to central nervous system, unspecified	ICD-10-CM	Diagnosis
P12.0	Cephalhematoma due to birth injury	ICD-10-CM	Diagnosis
P12.1	Chignon (from vacuum extraction) due to birth injury	ICD-10-CM	Diagnosis
P12.2	Epicranial subaponeurotic hemorrhage due to birth injury	ICD-10-CM	Diagnosis
P12.3	Bruising of scalp due to birth injury	ICD-10-CM	Diagnosis
P12.4	Injury of scalp of newborn due to monitoring equipment	ICD-10-CM	Diagnosis
P12.81	Caput succedaneum	ICD-10-CM	Diagnosis
P12.89	Other birth injuries to scalp	ICD-10-CM	Diagnosis
P12.9	Birth injury to scalp, unspecified	ICD-10-CM	Diagnosis
P13.0	Fracture of skull due to birth injury	ICD-10-CM	Diagnosis
P13.1	Other birth injuries to skull	ICD-10-CM	Diagnosis
P13.2	Birth injury to femur	ICD-10-CM	Diagnosis
P13.3	Birth injury to other long bones	ICD-10-CM	Diagnosis
P13.4	Fracture of clavicle due to birth injury	ICD-10-CM	Diagnosis
P13.8	Birth injuries to other parts of skeleton	ICD-10-CM	Diagnosis
P13.9	Birth injury to skeleton, unspecified	ICD-10-CM	Diagnosis
P14.0	Erb's paralysis due to birth injury	ICD-10-CM	Diagnosis
P14.1	Klumpke's paralysis due to birth injury	ICD-10-CM	Diagnosis
P14.2	Phrenic nerve paralysis due to birth injury	ICD-10-CM	Diagnosis
P14.3	Other brachial plexus birth injuries	ICD-10-CM	Diagnosis
P14.8	Birth injuries to other parts of peripheral nervous system	ICD-10-CM	Diagnosis
P14.9	Birth injury to peripheral nervous system, unspecified	ICD-10-CM	Diagnosis
P15.0	Birth injury to liver	ICD-10-CM	Diagnosis
P15.1	Birth injury to spleen	ICD-10-CM	Diagnosis
P15.2	Sternomastoid injury due to birth injury	ICD-10-CM	Diagnosis
P15.3	Birth injury to eye	ICD-10-CM	Diagnosis
P15.4	Birth injury to face	ICD-10-CM	Diagnosis
P15.5	Birth injury to external genitalia	ICD-10-CM	Diagnosis
P15.6	Subcutaneous fat necrosis due to birth injury	ICD-10-CM	Diagnosis
P15.8	Other specified birth injuries	ICD-10-CM	Diagnosis
P15.9	Birth injury, unspecified	ICD-10-CM	Diagnosis
P19.0	Metabolic acidemia in newborn first noted before onset of labor	ICD-10-CM	Diagnosis
P19.1	Metabolic acidemia in newborn first noted during labor	ICD-10-CM	Diagnosis
P19.2	Metabolic acidemia noted at birth	ICD-10-CM	Diagnosis
P19.9	Metabolic acidemia, unspecified	ICD-10-CM	Diagnosis
P22.0	Respiratory distress syndrome of newborn	ICD-10-CM	Diagnosis
P52.4	Intracerebral (nontraumatic) hemorrhage of newborn	ICD-10-CM	Diagnosis
P52.6	Cerebellar (nontraumatic) and posterior fossa hemorrhage of newborn	ICD-10-CM	Diagnosis
P52.8	Other intracranial (nontraumatic) hemorrhages of newborn	ICD-10-CM	Diagnosis
P52.9	Intracranial (nontraumatic) hemorrhage of newborn, unspecified	ICD-10-CM	Diagnosis
P84	Other problems with newborn	ICD-10-CM	Diagnosis
P91.60	Hypoxic ischemic encephalopathy [HIE], unspecified	ICD-10-CM	Diagnosis
P91.61	Mild hypoxic ischemic encephalopathy [HIE]	ICD-10-CM	Diagnosis
P91.62	Moderate hypoxic ischemic encephalopathy [HIE]	ICD-10-CM	Diagnosis
P91.63	Severe hypoxic ischemic encephalopathy [HIE]	ICD-10-CM	Diagnosis
P96.81	Exposure to (parental) (environmental) tobacco smoke in the perinatal period	ICD-10-CM	Diagnosis
Q86.0	Fetal alcohol syndrome (dysmorphic)	ICD-10-CM	Diagnosis
Q86.1	Fetal hydantoin syndrome	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
Q86.2	Dysmorphism due to warfarin	ICD-10-CM	Diagnosis
Q86.8	Other congenital malformation syndromes due to known exogenous causes	ICD-10-CM	Diagnosis
Z32.01	Encounter for pregnancy test, result positive	ICD-10-CM	Diagnosis
Z33.1	Pregnant state, incidental	ICD-10-CM	Diagnosis
Z33.2	Encounter for elective termination of pregnancy	ICD-10-CM	Diagnosis
Z33.3	Pregnant state, gestational carrier	ICD-10-CM	Diagnosis
Z34.00	Encounter for supervision of normal first pregnancy, unspecified trimester	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
Z34.80	Encounter for supervision of other normal pregnancy, unspecified 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
Z34.90	Encounter for supervision of normal pregnancy, unspecified, unspecified 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
Z36.0	Encounter for antenatal screening for chromosomal anomalies	ICD-10-CM	Diagnosis
Z36.1	Encounter for antenatal screening for raised alphafetoprotein level	ICD-10-CM	Diagnosis
Z36.2	Encounter for other antenatal screening follow-up	ICD-10-CM	Diagnosis
Z36.3	Encounter for antenatal screening for malformations	ICD-10-CM	Diagnosis
Z36.4	Encounter for antenatal screening for fetal growth retardation	ICD-10-CM	Diagnosis
Z36.5	Encounter for antenatal screening for isoimmunization	ICD-10-CM	Diagnosis
Z36.81	Encounter for antenatal screening for hydrops fetalis	ICD-10-CM	Diagnosis
Z36.82	Encounter for antenatal screening for nuchal translucency	ICD-10-CM	Diagnosis
Z36.83	Encounter for fetal screening for congenital cardiac abnormalities	ICD-10-CM	Diagnosis
Z36.84	Encounter for antenatal screening for fetal lung maturity	ICD-10-CM	Diagnosis
Z36.85	Encounter for antenatal screening for Streptococcus B	ICD-10-CM	Diagnosis
Z36.86	Encounter for antenatal screening for cervical length	ICD-10-CM	Diagnosis
Z36.87	Encounter for antenatal screening for uncertain dates	ICD-10-CM	Diagnosis
Z36.88	Encounter for antenatal screening for fetal macrosomia	ICD-10-CM	Diagnosis
Z36.89	Encounter for other specified antenatal screening	ICD-10-CM	Diagnosis
Z36.8A	Encounter for antenatal screening for other genetic defects	ICD-10-CM	Diagnosis
Z36.9	Encounter for antenatal screening, unspecified	ICD-10-CM	Diagnosis
Z37.0	Single live birth	ICD-10-CM	Diagnosis
Z37.1	Single stillbirth	ICD-10-CM	Diagnosis
Z37.2	Twins, both liveborn	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
Z37.50	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
Z37.60	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

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
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
Z37.9	Outcome of delivery, unspecified	ICD-10-CM	Diagnosis
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
Z64.0	Problems related to unwanted pregnancy	ICD-10-CM	Diagnosis
Tuberculosis			
A15.0	Tuberculosis of lung	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
Z86.11	personal history of tuberculosis	ICD-10-CM	Diagnosis
J65	Pneumoconiosis associated with tuberculosis	ICD-10-CM	Diagnosis
Hemodialysis			
Z99.2	DEPENDENCE ON RENAL DIALYSIS	ICD-10-CM	Procedure
Cirrhosis			
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
K74.0	Hepatic fibrosis	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
Sickle cell disease			
D57.0	Hb-SS disease with crisis	ICD-10-CM	Diagnosis
D57.00	Hb-SS disease with crisis, unspecified	ICD-10-CM	Diagnosis
D57.01	Hb-SS disease with acute chest syndrome	ICD-10-CM	Diagnosis
D57.02	Hb-SS disease with splenic sequestration	ICD-10-CM	Diagnosis
D57.03	Hb-SS disease with cerebral vascular involvement	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
D57.09	Hb-SS disease with crisis with other specified complication	ICD-10-CM	Diagnosis
D57.1	Sickle-cell disease without crisis	ICD-10-CM	Diagnosis
D57.2	Sickle-cell/Hb-C disease	ICD-10-CM	Diagnosis
D57.20	Sickle-cell/Hb-C disease without crisis	ICD-10-CM	Diagnosis
D57.21	Sickle-cell/Hb-C disease with crisis	ICD-10-CM	Diagnosis
D57.211	Sickle-cell/Hb-C disease with acute chest syndrome	ICD-10-CM	Diagnosis
D57.212	Sickle-cell/Hb-C disease with splenic sequestration	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
D57.8	Other sickle-cell disorders	ICD-10-CM	Diagnosis
D57.80	Other sickle-cell disorders without crisis	ICD-10-CM	Diagnosis
D57.81	Other sickle-cell disorders with crisis	ICD-10-CM	Diagnosis
D57.811	Other sickle-cell disorders with acute chest syndrome	ICD-10-CM	Diagnosis
D57.812	Other sickle-cell disorders with splenic sequestration	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
Cystic fibrosis			
E84	Cystic fibrosis	ICD-10-CM	Diagnosis
E84.0	Cystic fibrosis with pulmonary manifestations	ICD-10-CM	Diagnosis
E84.1	Cystic fibrosis with intestinal manifestations	ICD-10-CM	Diagnosis
E84.11	Meconium ileus in cystic fibrosis	ICD-10-CM	Diagnosis
E84.19	Cystic fibrosis with other intestinal manifestations	ICD-10-CM	Diagnosis
E84.8	Cystic fibrosis with other manifestations	ICD-10-CM	Diagnosis
E84.9	Cystic fibrosis, unspecified	ICD-10-CM	Diagnosis
COVID-19			
B97.29	Other coronavirus as the cause of diseases classified elsewhere	ICD-10-CM	Diagnosis
U07.1	COVID-19, virus identified [code effective April 1, 2020]	ICD-10-CM	Diagnosis
B34.2	Coronavirus infection, unspecified site	ICD-10-CM	Diagnosis
B97.21	SARS-associated coronavirus as the cause of diseases classified elsewhere	ICD-10-CM	Diagnosis
J12.81	Pneumonia due to SARS-associated coronavirus	ICD-10-CM	Diagnosis
Chronic obstructive pulmonary disease (COPD) exacerbation			
J44.0	Chronic obstructive pulmonary disease with acute lower respiratory infection	ICD-10-CM	Diagnosis
J44.1	Chronic obstructive pulmonary disease with (acute) exacerbation	ICD-10-CM	Diagnosis
Acute Respiratory Failure			
J96	Respiratory failure, not elsewhere classified	ICD-10-CM	Diagnosis
J96.0	Acute respiratory failure	ICD-10-CM	Diagnosis
J96.00	Acute respiratory failure, unspecified whether with hypoxia or hypercapnia	ICD-10-CM	Diagnosis
J96.01	Acute respiratory failure with hypoxia	ICD-10-CM	Diagnosis
J96.02	Acute respiratory failure with hypercapnia	ICD-10-CM	Diagnosis
Acute on Chronic Respiratory Failure			
J96.2	Acute and chronic respiratory failure	ICD-10-CM	Diagnosis
J96.20	Acute and chronic respiratory failure unspecified with hypoxia/hypercapnia	ICD-10-CM	Diagnosis
J96.21	Acute and chronic respiratory failure with hypoxia	ICD-10-CM	Diagnosis
J96.22	Acute and chronic respiratory failure with hypercapnia	ICD-10-CM	Diagnosis
Unspecified Respiratory Failure			
J96.9	Respiratory failure, unspecified	ICD-10-CM	Diagnosis
J96.90	Respiratory failure, unspecified, unspecified whether with hypoxia or hypercapnia	ICD-10-CM	Diagnosis
J96.91	Respiratory failure, unspecified with hypoxia	ICD-10-CM	Diagnosis

Appendix G. List of International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Diagnosis and Procedure Codes Used to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
J96.92	Respiratory failure, unspecified with hypercapnia	ICD-10-CM	Diagnosis
Asthma exacerbation			
J45.21	Mild intermittent asthma with (acute) exacerbation	ICD-10-CM	Diagnosis
J45.22	Mild intermittent asthma with status asthmaticus	ICD-10-CM	Diagnosis
J45.31	Mild persistent asthma with (acute) exacerbation	ICD-10-CM	Diagnosis
J45.32	Mild persistent asthma with status asthmaticus	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
J45.51	Severe persistent asthma with (acute) exacerbation	ICD-10-CM	Diagnosis
J45.52	Severe persistent asthma with status asthmaticus	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
Immunosuppressants or immunomodulators			
XW033G5	Introduction of Sarilumab into Peripheral Vein, Percutaneous Approach, New Technology Group 5	ICD-10-CM	Procedure
XW043G5	Introduction of Sarilumab into Central Vein, Percutaneous Approach, New Technology Group 5	ICD-10-CM	Procedure
Monoclonal antibodies			
XW033F6	Introduction of Bamlanivimab Monoclonal Antibody into Peripheral Vein, Percutaneous Approach, New Technology Group 6	ICD-10-CM	Procedure
XW043F6	Introduction of Bamlanivimab Monoclonal Antibody into Central Vein, Percutaneous Approach, New Technology Group 6	ICD-10-CM	Procedure
XW033G6	Introduction of REGN-COV2 monoclonal antibody into peripheral vein, percutaneous approach, new technology group 6	ICD-10-CM	Procedure
XW043G6	Introduction of REGN-COV2 monoclonal antibody into central vein, percutaneous approach, new technology group 6	ICD-10-CM	Procedure

Appendix H. List of Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology, Second Edition (CPT-2), Current Procedural Terminology, Third Edition (CPT-3), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
Smoking			
1034F	Current tobacco smoker (CAD, CAP, COPD, PV) (DM)	CPT-2	Procedure
1035F	Current smokeless tobacco user (eg, chew, snuff) (PV)	CPT-2	Procedure
4000F	Tobacco use cessation intervention, counseling (COPD, CAP, CAD, Asthma) (DM) (PV)	CPT-2	Procedure
4001F	Tobacco use cessation intervention, pharmacologic therapy (COPD, CAD, CAP, PV, Asthma) (DM) (PV)	CPT-2	Procedure
4004F	Patient screened for tobacco use and received tobacco cessation intervention (counseling, pharmacotherapy, or both), if identified as a tobacco user (PV, CAD)	CPT-2	Procedure
83887	Nicotine	CPT-4	Procedure
99406	Smoking and tobacco use cessation counseling visit; intermediate, greater than 3 minutes up to 10 minutes	CPT-4	Procedure
99407	Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes	CPT-4	Procedure
C9801	Smoking and tobacco cessation counseling visit for the asymptomatic patient; intermediate, greater than 3 minutes, up to 10 minutes	HCPCS	Procedure
C9802	Smoking and tobacco cessation counseling visit for the asymptomatic patient; intensive, greater than 10 minutes	HCPCS	Procedure
D1320	tobacco counseling for the control and prevention of oral disease	HCPCS	Procedure
G0375	Smoking and tobacco use cessation counseling visit; intermediate, greater than 3 minutes up to 10 minutes	HCPCS	Procedure
G0376	Smoking and tobacco use cessation counseling visit; intensive, greater than 10 minutes	HCPCS	Procedure
G0436	Smoking and tobacco cessation counseling visit for the asymptomatic patient; intermediate, greater than 3 minutes, up to 10 minutes	HCPCS	Procedure
G0437	Smoking and tobacco cessation counseling visit for the asymptomatic patient; intensive, greater than 10 minutes	HCPCS	Procedure
G8093	Newly diagnosed chronic obstructive pulmonary disease (COPD) patient documented to have received smoking cessation intervention, within 3 months of diagnosis	HCPCS	Procedure
G8094	Newly diagnosed chronic obstructive pulmonary disease (COPD) patient not documented to have received smoking cessation intervention, within 3 months of diagnosis	HCPCS	Procedure
G8402	Tobacco (smoke) use cessation intervention, counseling	HCPCS	Procedure
G8403	Tobacco (smoke) use cessation intervention not counseled	HCPCS	Procedure
G8453	Tobacco use cessation intervention, counseling	HCPCS	Procedure
G8454	Tobacco use cessation intervention not counseled, reason not specified	HCPCS	Procedure
G8455	Current tobacco smoker	HCPCS	Procedure
G8456	Current smokeless tobacco user	HCPCS	Procedure
G8688	Currently a smokeless tobacco user (e.g., chew, snuff) and no exposure to secondhand smoke	HCPCS	Procedure
G8690	Current tobacco smoker or current exposure to secondhand smoke	HCPCS	Procedure
G8692	Current smokeless tobacco user (e.g., chew, snuff) and no exposure to secondhand smoke	HCPCS	Procedure
G9016	Smoking cessation counseling, individual, in the absence of or in addition to any other evaluation and management service, per session (6-10 minutes) [demo project code only]	HCPCS	Procedure
G9276	Documentation that patient is a current tobacco user	HCPCS	Procedure
G9458	Patient documented as tobacco user and received tobacco cessation intervention (must include at least one of the following: advice given to quit smoking or tobacco use, counseling on the benefits of quitting smoking or tobacco use, assistance with or referral to external smoking or tobacco cessation support programs, or current enrollment in smoking or tobacco use cessation program) if identified as a tobacco user	HCPCS	Procedure
S4990	Nicotine patches, legend	HCPCS	Procedure
S4991	Nicotine patches, non-legend	HCPCS	Procedure
S4995	Smoking cessation gum	HCPCS	Procedure

Appendix H. List of Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology, Second Edition (CPT-2), Current Procedural Terminology, Third Edition (CPT-3), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
S9075	Smoking cessation treatment	HCPCS	Procedure
S9453	Smoking cessation classes, non-physician provider, per session	HCPCS	Procedure
Obesity			
43644	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and Roux-en-Y gastroenterostomy (roux limb 150 cm or less)	CPT-4	Procedure
43645	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and small intestine reconstruction to limit absorption	CPT-4	Procedure
43770	Laparoscopy, surgical, gastric restrictive procedure; placement of adjustable gastric restrictive device (eg, gastric band and subcutaneous port components)	CPT-4	Procedure
43842	Gastric restrictive procedure, without gastric bypass, for morbid obesity; vertical-banded gastroplasty	CPT-4	Procedure
43843	Gastric restrictive procedure, without gastric bypass, for morbid obesity; other than vertical-banded gastroplasty	CPT-4	Procedure
43845	Gastric restrictive procedure with partial gastrectomy, pylorus-preserving duodenoileostomy and ileoileostomy (50 to 100 cm common channel) to limit absorption (biliopancreatic diversion with duodenal switch)	CPT-4	Procedure
43846	Gastric restrictive procedure, with gastric bypass for morbid obesity; with short limb (150 cm or less) Roux-en-Y gastroenterostomy	CPT-4	Procedure
43847	Gastric restrictive procedure, with gastric bypass for morbid obesity; with small intestine reconstruction to limit absorption	CPT-4	Procedure
43659	Unlisted laparoscopy procedure, stomach	CPT-4	Procedure
43844	GASTRIC BYPASS NOT ROUX-EN-Y GASTROENTEROSTOMY	CPT-4	Procedure
S2082	Laparoscopy, surgical; gastric restrictive procedure, adjustable gastric band includes placement of subcutaneous port	HCPCS	Procedure
S2085	Laparoscopy, gastric restrictive procedure, with gastric bypass for morbid obesity, with short limb (less than 100 cm) roux-en-y gastroenterostomy	HCPCS	Procedure
Bronchial thermoplasty			
31661	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 2 or more lobes	CPT-4	Procedure
31660	Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 1 lobe	CPT-4	Procedure
Solid organ transplant			
76776	Ultrasound, transplanted kidney, real time and duplex Doppler with image documentation	CPT-4	Procedure
76778	Ultrasound, transplanted kidney, B-scan and/or real time with image documentation, with or without duplex Doppler study	CPT-4	Procedure
S2053	Transplantation of small intestine and liver allografts	HCPCS	Procedure
S2052	Transplantation of small intestine allograft (there are cpt codes available for intestinal allotransplantation - 44135 for graft from cadaver donor or 44136 for graft from living donor)	HCPCS	Procedure
60510	Transplantation Of Parathyroid Gland(s) During Thyroidectomy	CPT-4	Procedure
48554	Transplantation of pancreatic allograft	CPT-4	Procedure
S2054	Transplantation of multivisceral organs	HCPCS	Procedure
0088U	Transplantation medicine (kidney allograft rejection), microarray gene expression profiling of 1494 genes, utilizing transplant biopsy tissue, algorithm reported as a probability score for rejection	CPT-4	Procedure
S2152	Solid organ(s), complete or segmental, single organ or combination of organs; deceased or living donor(s), procurement, transplantation, and related complications; including: drugs; supplies; hospitalization with outpatient follow-up; medical/surgical, diagnostic, emergency, and rehabilitative services, and the number of days of pre- and posttransplant care in the global definition	HCPCS	Procedure

Appendix H. List of Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology, Second Edition (CPT-2), Current Procedural Terminology, Third Edition (CPT-3), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
S2065	Simultaneous pancreas kidney transplantation	HCPCS	Procedure
50366	Renal Homotransplantation, Implantation Of Graft	CPT-4	Procedure
50380	Renal autotransplantation, reimplantation of kidney	CPT-4	Procedure
50360	Renal allotransplantation, implantation of graft; without recipient nephrectomy	CPT-4	Procedure
50365	Renal allotransplantation, implantation of graft; with recipient nephrectomy	CPT-4	Procedure
50340	Recipient nephrectomy (separate procedure)	CPT-4	Procedure
G0341	Percutaneous islet cell transplant, includes portal vein catheterization and infusion	HCPCS	Procedure
60512	Parathyroid autotransplantation (List separately in addition to code for primary procedure)	CPT-4	Procedure
0141T	Pancreatic islet cell transplantation through portal vein, percutaneous	CPT-3	Procedure
0142T	Pancreatic islet cell transplantation through portal vein, open	CPT-3	Procedure
48160	Pancreatectomy, total or subtotal, with autologous transplantation of pancreas or pancreatic islet cells	CPT-4	Procedure
32851	Lung transplant, single; without cardiopulmonary bypass	CPT-4	Procedure
32852	Lung transplant, single; with cardiopulmonary bypass	CPT-4	Procedure
32853	Lung transplant, double (bilateral sequential or en bloc); without cardiopulmonary bypass	CPT-4	Procedure
32854	Lung transplant, double (bilateral sequential or en bloc); with cardiopulmonary bypass	CPT-4	Procedure
S2060	Lobar lung transplantation	HCPCS	Procedure
47136	Liver allotransplantation; heterotopic, partial or whole, from cadaver or living donor, any age	CPT-4	Procedure
47135	Liver allotransplantation, orthotopic, partial or whole, from cadaver or living donor, any age	CPT-4	Procedure
G0343	Laparotomy for islet cell transplant, includes portal vein catheterization and infusion	HCPCS	Procedure
0143T	Laparoscopy, surgical, pancreatic islet cell transplantation through portal vein	CPT-3	Procedure
G0342	Laparoscopy for islet cell transplant, includes portal vein catheterization and infusion	HCPCS	Procedure
65755	Keratoplasty (corneal transplant); penetrating (in pseudophakia)	CPT-4	Procedure
0584T	Islet cell transplant, includes portal vein catheterization and infusion, including all imaging, including guidance, and radiological supervision and interpretation, when performed; percutaneous	CPT-3	Procedure
0586T	Islet cell transplant, includes portal vein catheterization and infusion, including all imaging, including guidance, and radiological supervision and interpretation, when performed; open	CPT-3	Procedure
0585T	Islet cell transplant, includes portal vein catheterization and infusion, including all imaging, including guidance, and radiological supervision and interpretation, when performed; laparoscopic	CPT-3	Procedure
S2102	Islet cell tissue transplant from pancreas; allogeneic	HCPCS	Procedure
44136	Intestinal allotransplantation; from living donor	CPT-4	Procedure
44135	Intestinal allotransplantation; from cadaver donor	CPT-4	Procedure
33927	Implantation of a total replacement heart system (artificial heart) with recipient cardiectomy	CPT-4	Procedure
33945	Heart transplant, with or without recipient cardiectomy	CPT-4	Procedure
33935	Heart-lung transplant with recipient cardiectomy-pneumonectomy	CPT-4	Procedure
43625	GASTRECTOMY,TOTAL;W REPAIR INTESTINAL TRANSPLANT	CPT-4	Procedure
81495	Cardiology (heart transplant), mRNA, gene expression profiling by real-time quantitative PCR of 20 genes (11 content and 9 housekeeping), utilizing subfraction of peripheral blood, algorithm reported as a rejection risk score	CPT-4	Procedure
81595	Cardiology (heart transplant), mRNA, gene expression profiling by real-time quantitative PCR of 20 genes (11 content and 9 housekeeping), utilizing subfraction of peripheral blood, algorithm reported as a rejection risk score	CPT-4	Procedure
0087U	Cardiology (heart transplant), mRNA gene expression profiling by microarray of 1283 genes, transplant biopsy tissue, allograft rejection and injury algorithm reported as a probability score	CPT-4	Procedure

Appendix H. List of Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology, Second Edition (CPT-2), Current Procedural Terminology, Third Edition (CPT-3), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
0055U	Cardiology (heart transplant), cell-free DNA, PCR assay of 96 DNA target sequences (94 single nucleotide polymorphism targets and two control targets), plasma	CPT-4	Procedure
S2103	Adrenal tissue transplant to brain	HCPCS	Procedure
Pregnancy			
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
01958	Anesthesia for external cephalic version procedure	CPT-4	Procedure
01962	Anesthesia for urgent hysterectomy following delivery	CPT-4	Procedure
36460	Transfusion, intrauterine, fetal	CPT-4	Procedure
59000	Amniocentesis; diagnostic	CPT-4	Procedure
59001	Amniocentesis; therapeutic amniotic fluid reduction (includes ultrasound guidance)	CPT-4	Procedure
59012	Cordocentesis (intrauterine), any method	CPT-4	Procedure
59015	Chorionic villus sampling, any method	CPT-4	Procedure
59020	Fetal contraction stress test	CPT-4	Procedure
59025	Fetal non-stress test	CPT-4	Procedure
59030	Fetal scalp blood sampling	CPT-4	Procedure
59050	Fetal monitoring during labor by consulting physician (ie, non-attending physician) with written report; supervision and interpretation	CPT-4	Procedure
59051	Fetal monitoring during labor by consulting physician (ie, non-attending physician) with written report; interpretation only	CPT-4	Procedure
59070	Transabdominal amnioinfusion, including ultrasound guidance	CPT-4	Procedure
59072	Fetal umbilical cord occlusion, including ultrasound guidance	CPT-4	Procedure
59074	Fetal fluid drainage (eg, vesicocentesis, thoracocentesis, paracentesis), including ultrasound guidance	CPT-4	Procedure
59076	Fetal shunt placement, including ultrasound guidance	CPT-4	Procedure
59151	Laparoscopic treatment of ectopic pregnancy; with salpingectomy and/or oophorectomy	CPT-4	Procedure
59160	Curettage, postpartum	CPT-4	Procedure
59200	Insertion of cervical dilator (eg, laminaria, prostaglandin) (separate procedure)	CPT-4	Procedure
59300	Episiotomy or vaginal repair, by other than attending	CPT-4	Procedure
59320	Cerclage of cervix, during pregnancy; vaginal	CPT-4	Procedure
59325	Cerclage of cervix, during pregnancy; abdominal	CPT-4	Procedure

Appendix H. List of Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology, Second Edition (CPT-2), Current Procedural Terminology, Third Edition (CPT-3), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
59350	Hysterorrhaphy of ruptured uterus	CPT-4	Procedure
59412	External cephalic version, with or without tocolysis	CPT-4	Procedure
59425	Antepartum care only; 4-6 visits	CPT-4	Procedure
59426	Antepartum care only; 7 or more visits	CPT-4	Procedure
59866	Multifetal pregnancy reduction(s) (MPR)	CPT-4	Procedure
59870	Uterine evacuation and curettage for hydatidiform mole	CPT-4	Procedure
59897	Unlisted fetal invasive procedure, including ultrasound guidance, when performed	CPT-4	Procedure
59898	Unlisted laparoscopy procedure, maternity care and delivery	CPT-4	Procedure
59899	Unlisted procedure, maternity care and delivery	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 (List separately in addition to code for primary procedure)	CPT-4	Procedure
76805	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, after first trimester (> or = 14 weeks 0 days), transabdominal approach; single or first gestation	CPT-4	Procedure
76810	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, after first trimester (> or = 14 weeks 0 days), transabdominal approach; each additional gestation (List separately in addition to code for primary procedure)	CPT-4	Procedure
76811	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation plus detailed fetal anatomic examination, transabdominal approach; single or first gestation	CPT-4	Procedure
76812	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation plus detailed fetal anatomic examination, transabdominal approach; each additional gestation (List separately in addition to code for primary procedure)	CPT-4	Procedure
76813	Ultrasound, pregnant uterus, real time with image documentation, first trimester fetal nuchal translucency measurement, transabdominal or transvaginal approach; single or first gestation	CPT-4	Procedure
76814	Ultrasound, pregnant uterus, real time with image documentation, first trimester fetal nuchal translucency measurement, transabdominal or transvaginal approach; each additional gestation (List separately in addition to code for primary procedure)	CPT-4	Procedure
76815	Ultrasound, pregnant uterus, real time with image documentation, limited (eg, fetal heart beat, placental location, fetal position and/or qualitative amniotic fluid volume), 1 or more fetuses	CPT-4	Procedure
76816	Ultrasound, pregnant uterus, real time with image documentation, follow-up (eg, re-evaluation of fetal size by measuring standard growth parameters and amniotic fluid volume, re-evaluation of organ system(s) suspected or confirmed to be abnormal on a previous scan), transabdominal approach, per fetus	CPT-4	Procedure
76817	Ultrasound, pregnant uterus, real time with image documentation, transvaginal	CPT-4	Procedure
76818	Fetal biophysical profile; with non-stress testing	CPT-4	Procedure
76819	Fetal biophysical profile; without non-stress testing	CPT-4	Procedure
76820	Doppler velocimetry, fetal; umbilical artery	CPT-4	Procedure
76821	Doppler velocimetry, fetal; middle cerebral artery	CPT-4	Procedure
76825	Echocardiography, fetal, cardiovascular system, real time with image documentation (2D), with or without M-mode recording;	CPT-4	Procedure
76826	Echocardiography, fetal, cardiovascular system, real time with image documentation (2D), with or without M-mode recording; follow-up or repeat study	CPT-4	Procedure

Appendix H. List of Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology, Second Edition (CPT-2), Current Procedural Terminology, Third Edition (CPT-3), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
76827	Doppler echocardiography, fetal, pulsed wave and/or continuous wave with spectral display; complete	CPT-4	Procedure
81508	Fetal congenital abnormalities, biochemical assays of two proteins (PAPP-A, hCG [any form]), utilizing maternal serum, algorithm reported as a risk score	CPT-4	Procedure
81509	Fetal congenital abnormalities, biochemical assays of three proteins (PAPP-A, hCG [any form], DIA), utilizing maternal serum, algorithm reported as a risk score	CPT-4	Procedure
81510	Fetal congenital abnormalities, biochemical assays of three analytes (AFP, uE3, hCG [any form]), utilizing maternal serum, algorithm reported as a risk score	CPT-4	Procedure
81511	Fetal congenital abnormalities, biochemical assays of four analytes (AFP, uE3, hCG [any form], DIA) utilizing maternal serum, algorithm reported as a risk score (may include additional results from previous biochemical testing)	CPT-4	Procedure
81512	Fetal congenital abnormalities, biochemical assays of five analytes (AFP, uE3, total hCG, hyperglycosylated hCG, DIA) utilizing maternal serum, algorithm reported as a risk score	CPT-4	Procedure
82731	Fetal fibronectin, cervicovaginal secretions, semi-quantitative	CPT-4	Procedure
83030	Hemoglobin; F (fetal), chemical	CPT-4	Procedure
83033	Hemoglobin; F (fetal), qualitative	CPT-4	Procedure
83661	Fetal lung maturity assessment; lecithin sphingomyelin (L/S) ratio	CPT-4	Procedure
83662	Fetal lung maturity assessment; foam stability test	CPT-4	Procedure
83663	Fetal lung maturity assessment; fluorescence polarization	CPT-4	Procedure
85460	Hemoglobin or RBCs, fetal, for fetomaternal hemorrhage; differential lysis (Kleihauer-Betke)	CPT-4	Procedure
85461	Hemoglobin or RBCs, fetal, for fetomaternal hemorrhage; rosette	CPT-4	Procedure
99500	Home visit for prenatal monitoring and assessment to include fetal heart rate, non-stress test, uterine monitoring, and gestational diabetes monitoring	CPT-4	Procedure
J2788	Injection, Rho D immune globulin, human, minidose, 50 mcg (250 IU)	HCPCS	Procedure
J2790	Injection, Rho D immune globulin, human, full dose, 300 mcg (1500 IU)	HCPCS	Procedure
J2791	Injection, Rho D immune globulin (human), (Rhophylac), intramuscular or intravenous, 100 IU	HCPCS	Procedure
J2792	Injection, Rho D immune globulin, intravenous, human, solvent detergent, 100 IU	HCPCS	Procedure
S8055	Ultrasound guidance for multifetal pregnancy reduction(s), technical component (only to be used when the physician doing the reduction procedure does not perform the ultrasound, guidance is included in the CPT code for multifetal pregnancy reduction (59866)	HCPCS	Procedure
00836	Anesthesia for hernia repairs in the lower abdomen not otherwise specified, infants younger than 37 weeks gestational age at birth and younger than 50 weeks gestational age at time of surgery	CPT-4	Procedure
49491	Repair, initial inguinal hernia, preterm infant (younger than 37 weeks gestation at birth), performed from birth up to 50 weeks postconception age, with or without hydrocelectomy; reducible	CPT-4	Procedure
49492	Repair, initial inguinal hernia, preterm infant (younger than 37 weeks gestation at birth), performed from birth up to 50 weeks postconception age, with or without hydrocelectomy; incarcerated or strangulated	CPT-4	Procedure
59820	Treatment of missed abortion, completed surgically; first trimester	CPT-4	Procedure
59821	Treatment of missed abortion, completed surgically; second trimester	CPT-4	Procedure
67229	Treatment of extensive or progressive retinopathy, 1 or more sessions, preterm infant (less than 37 weeks gestation at birth), performed from birth up to 1 year of age (eg, retinopathy of prematurity), photocoagulation or cryotherapy	CPT-4	Procedure
S2260	Induced abortion, 17 to 24 weeks	HCPCS	Procedure
S2262	Abortion for maternal indication, 25 weeks or greater	HCPCS	Procedure
S2265	Induced abortion, 25 to 28 weeks	HCPCS	Procedure

Appendix H. List of Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology, Second Edition (CPT-2), Current Procedural Terminology, Third Edition (CPT-3), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
S2266	Induced abortion, 29 to 31 weeks	HCPCS	Procedure
S2267	Induced abortion, 32 weeks or greater	HCPCS	Procedure
82106	Alpha-fetoprotein (AFP); amniotic fluid	CPT-4	Procedure
58321	Artificial insemination; intra-cervical	CPT-4	Procedure
58322	Artificial insemination; intra-uterine	CPT-4	Procedure
82677	Estriol	CPT-4	Procedure
59015	Chorionic villus sampling, any method	CPT-4	Procedure
S4013	Complete cycle, gamete intrafallopian transfer (GIFT), case rate	HCPCS	Procedure
S4014	Complete cycle, zygote intrafallopian transfer (ZIFT), case rate	HCPCS	Procedure
S4015	Complete in vitro fertilization cycle, not otherwise specified, case rate	HCPCS	Procedure
S4037	Cryopreserved embryo transfer, case rate	HCPCS	Procedure
87081	Culture, presumptive, pathogenic organisms, screening only;	CPT-4	Procedure
58974	Embryo transfer, intrauterine	CPT-4	Procedure
81420	Fetal chromosomal aneuploidy (eg, trisomy 21, monosomy X) genomic sequence analysis panel, circulating cell-free fetal DNA in maternal blood, must include analysis of chromosomes 13, 18, and 21	CPT-4	Procedure
S4016	Frozen in vitro fertilization cycle, case rate	HCPCS	Procedure
58976	Gamete, zygote, or embryo intrafallopian transfer, any method	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
S4011	In vitro fertilization; including but not limited to identification and incubation of mature oocytes, fertilization with sperm, incubation of embryo(s), and subsequent visualization for determination of development	HCPCS	Procedure
86336	Inhibin A	CPT-4	Procedure
84163	Pregnancy-associated plasma protein-A (PAPP-A)	CPT-4	Procedure
S4035	Stimulated intrauterine insemination (IUI), case rate	HCPCS	Procedure
76813	Ultrasound, pregnant uterus, real time with image documentation, first trimester fetal nuchal translucency measurement, transabdominal or transvaginal approach; single or first gestation	CPT-4	Procedure
76814	Ultrasound, pregnant uterus, real time with image documentation, first trimester fetal nuchal translucency measurement, transabdominal or transvaginal approach; each additional gestation (List separately in addition to code for primary procedure)	CPT-4	Procedure
76810	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, after first trimester (> or = 14 weeks 0 days), transabdominal approach; each additional gestation (List separately in addition to code for primary procedure)	CPT-4	Procedure
76805	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation, after first trimester (> or = 14 weeks 0 days), transabdominal approach; single or first gestation	CPT-4	Procedure
76812	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation plus detailed fetal anatomic examination, transabdominal approach; each additional gestation (List separately in addition to code for primary procedure)	CPT-4	Procedure
76811	Ultrasound, pregnant uterus, real time with image documentation, fetal and maternal evaluation plus detailed fetal anatomic examination, transabdominal approach; single or first gestation	CPT-4	Procedure
Hemodialysis			
A4709	Acid concentrate, solution, for hemodialysis, per gallon	HCPCS	Procedure
A4708	Acetate concentrate solution, for hemodialysis, per gallon	HCPCS	Procedure
A4680	Activated carbon filter for hemodialysis, each	HCPCS	Procedure
E1530	Air bubble detector for hemodialysis, each, replacement	HCPCS	Procedure

Appendix H. List of Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology, Second Edition (CPT-2), Current Procedural Terminology, Third Edition (CPT-3), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
36821	Arteriovenous anastomosis, open; direct, any site (eg, Cimino type) (separate procedure)	CPT-4	Procedure
36820	Arteriovenous anastomosis, open; by forearm vein transposition	CPT-4	Procedure
36819	Arteriovenous anastomosis, open; by upper arm basilic vein transposition	CPT-4	Procedure
36818	Arteriovenous anastomosis, open; by upper arm cephalic vein transposition	CPT-4	Procedure
E1550	Bath conductivity meter for hemodialysis, each	HCPCS	Procedure
A4707	Bicarbonate concentrate, powder, for hemodialysis, per packet	HCPCS	Procedure
A4706	Bicarbonate concentrate, solution, for hemodialysis, per gallon	HCPCS	Procedure
E1560	Blood leak detector for hemodialysis, each, replacement	HCPCS	Procedure
E1620	Blood pump for hemodialysis, replacement	HCPCS	Procedure
A4755	Blood tubing, arterial and venous combined, for hemodialysis, each	HCPCS	Procedure
A4750	Blood tubing, arterial or venous, for hemodialysis, each	HCPCS	Procedure
C1750	Catheter, hemodialysis/peritoneal, long-term	HCPCS	Procedure
C1752	Catheter, hemodialysis/peritoneal, short-term	HCPCS	Procedure
A4890	Contracts, repair and maintenance, for hemodialysis equipment	HCPCS	Procedure
E1615	Deionizer water purification system, for hemodialysis	HCPCS	Procedure
E1600	Delivery and/or installation charges for hemodialysis equipment	HCPCS	Procedure
36909	Dialysis circuit permanent vascular embolization or occlusion (including main circuit or any accessory veins), endovascular, including all imaging and radiological supervision and interpretation necessary to complete the intervention (List separately in addition to code for primary procedure)	CPT-4	Procedure
90947	Dialysis procedure other than hemodialysis (eg, peritoneal dialysis, hemofiltration, or other continuous renal replacement therapies) requiring repeated evaluations by a physician or other qualified health care professional, with or without substantial revision of dialysis prescription	CPT-4	Procedure
90945	Dialysis procedure other than hemodialysis (eg, peritoneal dialysis, hemofiltration, or other continuous renal replacement therapies), with single evaluation by a physician or other qualified health care professional	CPT-4	Procedure
A4690	Dialyzer (artificial kidneys), all types, all sizes, for hemodialysis, each	HCPCS	Procedure
G9264	Documentation of patient receiving maintenance hemodialysis for greater than or equal to 90 days with a catheter for documented reasons (e.g., other medical reasons, patient declined arteriovenous fistula (AVF)/arteriovenous graft (AVG), other patient reasons)	HCPCS	Procedure
G9239	Documentation of reasons for patient initiating maintenance hemodialysis with a catheter as the mode of vascular access (e.g., patient has a maturing arteriovenous fistula (AVF)/arteriovenous graft (AVG), time limited trial of hemodialysis, other medical reasons, patient declined AVF/AVG, other patient reasons, patient followed by reporting nephrologist for fewer than 90 days, other system reasons)	HCPCS	Procedure
36838	Distal revascularization and interval ligation (DRIL), upper extremity hemodialysis access (steal syndrome)	CPT-4	Procedure
93990	Duplex scan of hemodialysis access (including arterial inflow, body of access and venous outflow)	CPT-4	Procedure
G8082	ESRD patient requiring hemodialysis documented to have received vascular access other than autogenous AV fistula	HCPCS	Procedure
G8081	ESRD patient requiring hemodialysis vascular access documented to have received autogenous AV fistula	HCPCS	Procedure
G8085	ESRD patient requiring hemodialysis vascular access was not an eligible candidate for autogenous AV fistula	HCPCS	Procedure
A4730	Fistula cannulation set for hemodialysis, each	HCPCS	Procedure
G8715	Hemodialysis treatment performed less than 3 times per week or greater than 3 times per week	HCPCS	Procedure

Appendix H. List of Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology, Second Edition (CPT-2), Current Procedural Terminology, Third Edition (CPT-3), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
90939	Hemodialysis access flow study to determine blood flow in grafts and arteriovenous fistulae by an indicator dilution method, hook-up; transcutaneous measurement and disconnection	CPT-4	Procedure
4052F	Hemodialysis via functioning arteriovenous (AV) fistula (ESRD)	CPT-2	Procedure
90940	Hemodialysis access flow study to determine blood flow in grafts and arteriovenous fistulae by an indicator method	CPT-4	Procedure
A4820	Hemodialysis kit supplies	HCPCS	Procedure
E1590	Hemodialysis machine	HCPCS	Procedure
0505F	Hemodialysis plan of care documented (ESRD, P-ESRD)	CPT-2	Procedure
90935	Hemodialysis procedure with single evaluation by a physician or other qualified health care professional	CPT-4	Procedure
90937	Hemodialysis procedure requiring repeated evaluation(s) with or without substantial revision of dialysis prescription	CPT-4	Procedure
90990	Hemodialysis Training And/or Counseling	CPT-4	Procedure
G8714	Hemodialysis treatment performed exactly 3 times per week > 90 days	HCPCS	Procedure
4054F	Hemodialysis via catheter (ESRD)	CPT-2	Procedure
4053F	Hemodialysis via functioning arteriovenous (AV) graft (ESRD)	CPT-2	Procedure
A4801	Heparin, any type, for hemodialysis, per 1000 units	HCPCS	Procedure
E1520	Heparin infusion pump for hemodialysis	HCPCS	Procedure
S9335	Home therapy, hemodialysis; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing services coded separately), per diem	HCPCS	Procedure
99512	Home visit for hemodialysis	CPT-4	Procedure
36810	Insertion of cannula for hemodialysis, other purpose (separate procedure); arteriovenous, external (Scribner type)	CPT-4	Procedure
36800	Insertion of cannula for hemodialysis, other purpose (separate procedure); vein to vein	CPT-4	Procedure
36815	Insertion of cannula for hemodialysis, other purpose (separate procedure); arteriovenous, external revision, or closure	CPT-4	Procedure
36901	Introduction of needle(s) and/or catheter(s), dialysis circuit, with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, radiological supervision and interpretation and image documentation and report;	CPT-4	Procedure
36903	Introduction of needle(s) and/or catheter(s), dialysis circuit, with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, radiological supervision and interpretation and image documentation and report; with transcatheter placement of intravascular stent(s), peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the stenting, and all angioplasty within the peripheral dialysis segment	CPT-4	Procedure
36902	Introduction of needle(s) and/or catheter(s), dialysis circuit, with diagnostic angiography of the dialysis circuit, including all direct puncture(s) and catheter placement(s), injection(s) of contrast, all necessary imaging from the arterial anastomosis and adjacent artery through entire venous outflow including the inferior or superior vena cava, fluoroscopic guidance, radiological supervision and interpretation and image documentation and report; with transluminal balloon angioplasty, peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty	CPT-4	Procedure
37607	Ligation or banding of angioaccess arteriovenous fistula	CPT-4	Procedure

Appendix H. List of Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology, Second Edition (CPT-2), Current Procedural Terminology, Third Edition (CPT-3), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
36906	Percutaneous transluminal mechanical thrombectomy and/or infusion for thrombolysis, dialysis circuit, any method, including all imaging and radiological supervision and interpretation, diagnostic angiography, fluoroscopic guidance, catheter placement(s), and intraprocedural pharmacological thrombolytic injection(s); with transcatheter placement of intravascular stent(s), peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the stenting, and all angioplasty within the peripheral dialysis circuit	CPT-4	Procedure
36905	Percutaneous transluminal mechanical thrombectomy and/or infusion for thrombolysis, dialysis circuit, any method, including all imaging and radiological supervision and interpretation, diagnostic angiography, fluoroscopic guidance, catheter placement(s), and intraprocedural pharmacological thrombolytic injection(s); with transluminal balloon angioplasty, peripheral dialysis segment, including all imaging and radiological supervision and interpretation necessary to perform the angioplasty	CPT-4	Procedure
36904	Percutaneous transluminal mechanical thrombectomy and/or infusion for thrombolysis, dialysis circuit, any method, including all imaging and radiological supervision and interpretation, diagnostic angiography, fluoroscopic guidance, catheter placement(s), and intraprocedural pharmacological thrombolytic injection(s);	CPT-4	Procedure
A4870	Plumbing and/or electrical work for home hemodialysis equipment	HCPCS	Procedure
E1540	Pressure alarm for hemodialysis, each, replacement	HCPCS	Procedure
A4802	Protamine sulfate, for hemodialysis, per 50 mg	HCPCS	Procedure
G9240	Patient whose mode of vascular access is a catheter at the time maintenance hemodialysis is initiated	HCPCS	Procedure
G9241	Patient whose mode of vascular access is not a catheter at the time maintenance hemodialysis is initiated	HCPCS	Procedure
G8727	Patient receiving hemodialysis, peritoneal dialysis or kidney transplantation	HCPCS	Procedure
G9265	Patient receiving maintenance hemodialysis for greater than or equal to 90 days with a catheter as the mode of vascular access	HCPCS	Procedure
G8956	Patient receiving maintenance hemodialysis in an outpatient dialysis facility	HCPCS	Procedure
G9266	Patient receiving maintenance hemodialysis for greater than or equal to 90 days without a catheter as the mode of vascular access	HCPCS	Procedure
E1640	Replacement components for hemodialysis and/or peritoneal dialysis machines that are owned or being purchased by the patient	HCPCS	Procedure
E1610	Reverse osmosis water purification system, for hemodialysis	HCPCS	Procedure
A4740	Shunt accessory, for hemodialysis, any type, each	HCPCS	Procedure
E1636	Sorbent cartridges, for hemodialysis, per 10	HCPCS	Procedure
36908	Transcatheter placement of intravascular stent(s), central dialysis segment, performed through dialysis circuit, including all imaging and radiological supervision and interpretation required to perform the stenting, and all angioplasty in the central dialysis segment (List separately in addition to code for primary procedure)	CPT-4	Procedure
35875	Thrombectomy of arterial or venous graft (other than hemodialysis graft or fistula);	CPT-4	Procedure
35876	Thrombectomy of arterial or venous graft (other than hemodialysis graft or fistula); with revision of arterial or venous graft	CPT-4	Procedure
E1575	Transducer protectors/fluid barriers, for hemodialysis, any size, per 10	HCPCS	Procedure
36907	Transluminal balloon angioplasty, central dialysis segment, performed through dialysis circuit, including all imaging and radiological supervision and interpretation required to perform the angioplasty (List separately in addition to code for primary procedure)	CPT-4	Procedure
G0392	Transluminal balloon angioplasty, percutaneous; for maintenance of hemodialysis access, arteriovenous fistula or graft; arterial	HCPCS	Procedure

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Code	Description	Code Type	Code Category
G0393	Transluminal balloon angioplasty, percutaneous; for maintenance of hemodialysis access, arteriovenous fistula or graft; venous	HCPCS	Procedure
E1580	Unipuncture control system for hemodialysis	HCPCS	Procedure
A4918	Venous pressure clamp, for hemodialysis, each	HCPCS	Procedure
G0365	Vessel mapping of vessels for hemodialysis access (services for preoperative vessel mapping prior to creation of hemodialysis access using an autogenous hemodialysis conduit, including arterial inflow and venous outflow)	HCPCS	Procedure
E1625	Water softening system, for hemodialysis	HCPCS	Procedure
90941	Hemodialysis, For Acute Renal Failure And Or Intoxication,	CPT-4	Procedure
90942	Hemodialysis, For Acute Renal Failure And Or Intoxication,	CPT-4	Procedure
90943	Hemodialysis, For Acute Renal Failure And Or Intoxication,	CPT-4	Procedure
90944	Hemodialysis, For Acute Renal Failure And Or Intoxication,	CPT-4	Procedure
90988	Supervision Of Hemodialysis In Hospital Or Other Facility (excluding Home Dialysis), On Monthly Basis	CPT-4	Procedure
90991	Home Hemodialysis Care, Outpatient, For Those Services Either Provided By The Physician Primarily Responsible	CPT-4	Procedure
90999	UNLISTED DIALYSIS PROCEDURE INPATIENT/OUTPATIENT	CPT-4	Procedure
Immunosuppressants or immunomodulators			
J7500	Azathioprine, oral, 50 mg	HCPCS	Procedure
C9436	Azathioprine, parenteral, brand name, per 100 mg	HCPCS	Procedure
J7501	Azathioprine, parenteral, 100 mg	HCPCS	Procedure
K0119	Azathioprine, oral, tab, 50 mg	HCPCS	Procedure
K0120	Azathioprine, parenteral, 100 mg	HCPCS	Procedure
J9030	BCG live intravesical instillation, 1 mg	HCPCS	Procedure
C9416	BCG (intravesical) per instillation, brand name	HCPCS	Procedure
S0116	Bevacizumab, 100 mg	HCPCS	Procedure
C9073	Brexucabtagene autoleucel, up to 200 million autologous anti-CD19 CAR positive viable T cells, including leukapheresis and dose preparation procedures, per therapeutic dose	HCPCS	Procedure
J7502	Cyclosporine, oral, 100 mg	HCPCS	Procedure
C9438	Cyclosporine, oral, 100 mg, brand name	HCPCS	Procedure
J7515	Cyclosporine, oral, 25 mg	HCPCS	Procedure
J7516	Cyclosporine, parenteral, 250 mg	HCPCS	Procedure
K0122	Cyclosporine, parenteral, 250 mg	HCPCS	Procedure
80145	Adalimumab	CPT-4	Procedure
80158	Cyclosporine	CPT-4	Procedure
80230	Infliximab	CPT-4	Procedure
80193	Leflunomide	CPT-4	Procedure
80195	Sirolimus	CPT-4	Procedure
80197	Tacrolimus	CPT-4	Procedure
S9562	Home injectable therapy, palivizumab, including administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem	HCPCS	Procedure
J0129	Injection, abatacept, 10 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered)	HCPCS	Procedure
J9354	Injection, ado-trastuzumab emtansine, 1 mg	HCPCS	Procedure
C9004	Injection, gemtuzumab ozogamicin, per 5 mg	HCPCS	Procedure
Q5121	Injection, infliximab-axxq, biosimilar, (AVSOLA), 10 mg	HCPCS	Procedure
C9235	Injection, panitumumab, 10 mg	HCPCS	Procedure
Q5120	Injection, pegfilgrastim-bmez, biosimilar, (ZIEXTENZO), 0.5 mg	HCPCS	Procedure

Appendix H. List of Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology, Second Edition (CPT-2), Current Procedural Terminology, Third Edition (CPT-3), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
J9316	Injection, pertuzumab, trastuzumab, and hyaluronidase-zzxf, per 10 mg	HCPCS	Procedure
Q5119	Injection, rituximab-pvvr, biosimilar, (RUXIENCE), 10 mg	HCPCS	Procedure
C9006	Injection, tacrolimus, per 5 mg (1 amp)	HCPCS	Procedure
J9325	Injection, talimogene laherparepvec, per 1 million plaque forming units	HCPCS	Procedure
J2323	Injection, natalizumab, 1 mg	HCPCS	Procedure
C9230	Injection, abatacept, per 10 mg	HCPCS	Procedure
J0135	Injection, adalimumab, 20 mg	HCPCS	Procedure
C9131	Injection, ado-trastuzumab emtansine, 1 mg	HCPCS	Procedure
J9015	Injection, aldesleukin, per single use vial	HCPCS	Procedure
C9483	Injection, atezolizumab, 10 mg	HCPCS	Procedure
J9022	Injection, atezolizumab, 10 mg	HCPCS	Procedure
C9491	Injection, avelumab, 10 mg	HCPCS	Procedure
J9023	Injection, avelumab, 10 mg	HCPCS	Procedure
J0480	Injection, basiliximab, 20 mg	HCPCS	Procedure
Q2019	Injection, basiliximab, 20 mg	HCPCS	Procedure
C9286	Injection, belatacept, 1 mg	HCPCS	Procedure
J0485	Injection, belatacept, 1 mg	HCPCS	Procedure
J0490	Injection, belimumab, 10 mg	HCPCS	Procedure
Q2044	Injection, belimumab, 10 mg	HCPCS	Procedure
C9466	Injection, benralizumab, 1 mg	HCPCS	Procedure
J0517	Injection, benralizumab, 1 mg	HCPCS	Procedure
Q5107	Injection, bevacizumab-awwb, biosimilar, (Mvasi), 10 mg	HCPCS	Procedure
Q5118	Injection, bevacizumab-bvzr, biosimilar, (Zirabev), 10 mg	HCPCS	Procedure
C9257	Injection, bevacizumab, 0.25 mg	HCPCS	Procedure
Q2024	Injection, bevacizumab, 0.25 mg	HCPCS	Procedure
J9035	Injection, bevacizumab, 10 mg	HCPCS	Procedure
C9214	Injection, bevacizumab, per 10 mg	HCPCS	Procedure
C9449	Injection, blinatumomab, 1 mcg	HCPCS	Procedure
J9039	Injection, blinatumomab, 1 mcg	HCPCS	Procedure
C9287	Injection, brentuximab vedotin, 1 mg	HCPCS	Procedure
J9042	Injection, brentuximab vedotin, 1 mg	HCPCS	Procedure
C9044	Injection, cemiplimab-rwlc, 1 mg	HCPCS	Procedure
J9119	Injection, cemiplimab-rwlc, 1 mg	HCPCS	Procedure
C9249	Injection, certolizumab pegol, 1 mg	HCPCS	Procedure
J0717	Injection, certolizumab pegol, 1 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered)	HCPCS	Procedure
J0718	Injection, certolizumab pegol, 1 mg	HCPCS	Procedure
J9055	Injection, cetuximab, 10 mg	HCPCS	Procedure
C9215	Injection, cetuximab, per 10 mg	HCPCS	Procedure
C9476	Injection, daratumumab, 10 mg	HCPCS	Procedure
J9145	Injection, daratumumab, 10 mg	HCPCS	Procedure
J9144	Injection, daratumumab, 10 mg and hyaluronidase-fihj	HCPCS	Procedure
C9272	Injection, denosumab, 1 mg	HCPCS	Procedure
J0897	Injection, denosumab, 1 mg	HCPCS	Procedure
C9492	Injection, durvalumab, 10 mg	HCPCS	Procedure
J9173	Injection, durvalumab, 10 mg	HCPCS	Procedure
J1300	Injection, eculizumab, 10 mg	HCPCS	Procedure
C9236	Injection, eculizumab, 10 mg	HCPCS	Procedure

Appendix H. List of Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology, Second Edition (CPT-2), Current Procedural Terminology, Third Edition (CPT-3), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
C9477	Injection, elotuzumab, 1 mg	HCPCS	Procedure
J9176	Injection, elotuzumab, 1 mg	HCPCS	Procedure
J9177	Injection, enfortumab vedotin-ejfv, 0.25 mg	HCPCS	Procedure
J1438	Injection, etanercept, 25 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered)	HCPCS	Procedure
J9358	Injection, fam-trastuzumab deruxtecan-nxki, 1 mg	HCPCS	Procedure
Q5110	Injection, filgrastim-aafi, biosimilar, (Nivestym), 1 mcg	HCPCS	Procedure
J1440	Injection, filgrastim (G-CSF), 300 mcg	HCPCS	Procedure
J1441	Injection, filgrastim (G-CSF), 480 mcg	HCPCS	Procedure
Q5101	Injection, filgrastim (G-CSF), biosimilar, 1 microgram	HCPCS	Procedure
J1442	Injection, filgrastim (G-CSF), excludes biosimilars, 1 mcg	HCPCS	Procedure
J9203	Injection, gemtuzumab ozogamicin, 0.1 mg	HCPCS	Procedure
J9300	Injection, gemtuzumab ozogamicin, 5 mg	HCPCS	Procedure
J1602	Injection, golimumab, 1 mg, for intravenous use	HCPCS	Procedure
C9029	Injection, guselkumab, 1 mg	HCPCS	Procedure
J1628	Injection, guselkumab, 1 mg	HCPCS	Procedure
Q5104	Injection, infliximab-abda, biosimilar, (Renflexis), 10 mg	HCPCS	Procedure
Q5103	Injection, infliximab-dyyb, biosimilar, (Inflectra), 10 mg	HCPCS	Procedure
Q5109	Injection, infliximab-qbtx, biosimilar, (Ixifi), 10 mg	HCPCS	Procedure
Q5102	Injection, infliximab, biosimilar, 10 mg	HCPCS	Procedure
J1745	Injection, infliximab, excludes biosimilar, 10 mg	HCPCS	Procedure
C9028	Injection, inotuzumab ozogamicin, 0.1 mg	HCPCS	Procedure
J9229	Injection, inotuzumab ozogamicin, 0.1 mg	HCPCS	Procedure
J9214	Injection, interferon, alfa-2b, recombinant, 1 million units	HCPCS	Procedure
Q3027	Injection, interferon beta-1a, 1 mcg for intramuscular use	HCPCS	Procedure
Q3028	Injection, interferon beta-1a, 1 mcg for subcutaneous use	HCPCS	Procedure
Q3026	Injection, interferon beta-1a, 11 mcg for subcutaneous use	HCPCS	Procedure
J1826	Injection, interferon beta-1a, 30 mcg	HCPCS	Procedure
J1825	Injection, interferon beta-1a, 33 mcg	HCPCS	Procedure
J1830	Injection interferon beta-1b, 0.25 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered)	HCPCS	Procedure
C9284	Injection, ipilimumab, 1 mg	HCPCS	Procedure
J9228	Injection, ipilimumab, 1 mg	HCPCS	Procedure
J9227	Injection, isatuximab-irfc, 10 mg	HCPCS	Procedure
J0896	Injection, luspatercept-aamt, 0.25 mg	HCPCS	Procedure
J9353	Injection, margetuximab-cmkb, 5 mg	HCPCS	Procedure
C9473	Injection, mepolizumab, 1 mg	HCPCS	Procedure
J2182	Injection, mepolizumab, 1 mg	HCPCS	Procedure
C9038	Injection, mogamulizumab-kpkc, 1 mg	HCPCS	Procedure
J9204	Injection, mogamulizumab-kpkc, 1 mg	HCPCS	Procedure
C9045	Injection, moxetumomab pasudotox-tdfk, 0.01 mg	HCPCS	Procedure
J9313	Injection, moxetumomab pasudotox-tdfk, 0.01 mg	HCPCS	Procedure
Q4079	Injection, natalizumab, 1 mg	HCPCS	Procedure
C9126	Injection natalizumab per 5 mg	HCPCS	Procedure
J9348	Injection, naxitamab-gqgk, 1 mg	HCPCS	Procedure
C9475	Injection, necitumumab, 1 mg	HCPCS	Procedure
J9295	Injection, necitumumab, 1 mg	HCPCS	Procedure
C9453	Injection, nivolumab, 1 mg	HCPCS	Procedure

Appendix H. List of Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology, Second Edition (CPT-2), Current Procedural Terminology, Third Edition (CPT-3), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
J9299	Injection, nivolumab, 1 mg	HCPCS	Procedure
C9021	Injection, obinutuzumab, 10 mg	HCPCS	Procedure
J9301	Injection, obinutuzumab, 10 mg	HCPCS	Procedure
C9260	Injection, ofatumumab, 10 mg	HCPCS	Procedure
J9302	Injection, ofatumumab, 10 mg	HCPCS	Procedure
C9485	Injection, olaratumab, 10 mg	HCPCS	Procedure
J9285	Injection, olaratumab, 10 mg	HCPCS	Procedure
J2425	Injection, palifermin, 50 mcg	HCPCS	Procedure
J9303	Injection, panitumumab, 10 mg	HCPCS	Procedure
J2504	Injection, pegademase bovine, 25 IU	HCPCS	Procedure
Q2012	Injection, pegademase bovine, 25 IU	HCPCS	Procedure
C9119	Injection, pegfilgrastim, per 6 mg single dose vial	HCPCS	Procedure
Q5122	Injection, pegfilgrastim-apgf, biosimilar, (Nyvepria), 0.5 mg	HCPCS	Procedure
C9058	Injection, pegfilgrastim-bmez, biosimilar, (Ziextenzo) 0.5 mg	HCPCS	Procedure
Q5111	Injection, pegfilgrastim-cbqv, biosimilar, (Udenyca), 0.5 mg	HCPCS	Procedure
Q5108	Injection, pegfilgrastim-jmdb, biosimilar, (Fulphila), 0.5 mg	HCPCS	Procedure
Q4053	Injection, pegfilgrastim, 1 mg	HCPCS	Procedure
J2505	Injection, pegfilgrastim, 6 mg	HCPCS	Procedure
S0135	Injection pegfilgrastim, 6 mg	HCPCS	Procedure
C9027	Injection, pembrolizumab, 1 mg	HCPCS	Procedure
J9271	Injection, pembrolizumab, 1 mg	HCPCS	Procedure
J9306	Injection, pertuzumab, 1 mg	HCPCS	Procedure
C9292	Injection, pertuzumab, 10 mg	HCPCS	Procedure
J9309	Injection, polatuzumab vedotin-piiq, 1 mg	HCPCS	Procedure
C9025	Injection, ramucirumab, 5 mg	HCPCS	Procedure
J9308	Injection, ramucirumab, 5 mg	HCPCS	Procedure
C9481	Injection, reslizumab, 1 mg	HCPCS	Procedure
J2786	Injection, reslizumab, 1 mg	HCPCS	Procedure
J2793	Injection, rilonacept, 1 mg	HCPCS	Procedure
Q5115	Injection, rituximab-abbs, biosimilar, (Truxima), 10 mg	HCPCS	Procedure
Q5123	Injection, rituximab-arrx, biosimilar, (Riabni), 10 mg	HCPCS	Procedure
J9312	Injection, rituximab, 10 mg	HCPCS	Procedure
J9311	Injection, rituximab 10 mg and hyaluronidase	HCPCS	Procedure
J9310	Injection, rituximab, 100 mg	HCPCS	Procedure
C9467	Injection, rituximab and hyaluronidase, 10 mg	HCPCS	Procedure
C9066	Injection, sacituzumab govitecan-hziy, 2.5 mg	HCPCS	Procedure
J9317	Injection, sacituzumab govitecan-hziy, 2.5 mg	HCPCS	Procedure
J2820	Injection, sargramostim (GM-CSF), 50 mcg	HCPCS	Procedure
C9455	Injection, siltuximab, 10 mg	HCPCS	Procedure
J2860	Injection, siltuximab, 10 mg	HCPCS	Procedure
C9070	Injection, tafasitamab-cxix, 2 mg	HCPCS	Procedure
J9349	Injection, tafasitamab-cxix, 2 mg	HCPCS	Procedure
C9049	Injection, tagraxofusp-erzs, 10 mcg	HCPCS	Procedure
J9269	Injection, tagraxofusp-erzs, 10 mcg	HCPCS	Procedure
C9472	Injection, talimogene laherparepvec, 1 million plaque forming units (PFU)	HCPCS	Procedure
J1447	Injection, tbo-filgrastim, 1 mcg	HCPCS	Procedure
J1446	Injection, TBO-filgrastim, 5 micrograms	HCPCS	Procedure
C9239	Injection, temsirolimus, 1 mg	HCPCS	Procedure
J9330	Injection, temsirolimus, 1 mg	HCPCS	Procedure

Appendix H. List of Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology, Second Edition (CPT-2), Current Procedural Terminology, Third Edition (CPT-3), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
C9264	Injection, tocilizumab, 1 mg	HCPCS	Procedure
J3262	Injection, tocilizumab, 1 mg	HCPCS	Procedure
Q5117	Injection, trastuzumab-anns, biosimilar, (Kanjinti), 10 mg	HCPCS	Procedure
Q5114	Injection, Trastuzumab-dkst, biosimilar, (Ogivri), 10 mg	HCPCS	Procedure
Q5112	Injection, trastuzumab-dttb, biosimilar, (Ontruzant), 10 mg	HCPCS	Procedure
Q5113	Injection, trastuzumab-pkrb, biosimilar, (Herzuma), 10 mg	HCPCS	Procedure
Q5116	Injection, trastuzumab-qyyp, biosimilar, (Trazimera), 10 mg	HCPCS	Procedure
J9356	Injection, trastuzumab, 10 mg and hyaluronidase-oysk	HCPCS	Procedure
J9355	Injection, trastuzumab, excludes biosimilar, 10 mg	HCPCS	Procedure
C9261	Injection, ustekinumab, 1 mg	HCPCS	Procedure
C9062	Injection, daratumumab 10 mg and hyaluronidase-fihj	HCPCS	Procedure
C9076	Lisocabtagene maraleucel, up to 110 million autologous anti-CD19 CAR-positive viable T cells, including leukapheresis and dose preparation procedures, per therapeutic dose	HCPCS	Procedure
J7517	Mycophenolate mofetil, oral, 250 mg	HCPCS	Procedure
K0412	Mycophenolate mofetil, oral, 250 mg (CellCept)	HCPCS	Procedure
C9003	Palivizumab-RSV-IgM, per 50 mg	HCPCS	Procedure
G9836	Reason for not administering trastuzumab documented (e.g., patient declined, patient died, patient transferred, contraindication or other clinical exclusion, neoadjuvant chemotherapy or radiation not complete)	HCPCS	Procedure
J7520	Sirolimus, oral, 1 mg	HCPCS	Procedure
C9106	Sirolimus, per 1 mg/ml	HCPCS	Procedure
C9020	Sirolimus tablet, 1 mg	HCPCS	Procedure
J7508	Tacrolimus, extended release, (Astagraf XL), oral, 0.1 mg	HCPCS	Procedure
J7503	Tacrolimus, extended release, (Envarsus XR), oral, 0.25 mg	HCPCS	Procedure
J7507	Tacrolimus, immediate release, oral, 1 mg	HCPCS	Procedure
J7525	Tacrolimus, parenteral, 5 mg	HCPCS	Procedure
Q2040	Tisagenlecleucel, up to 250 million CAR-positive viable T cells, including leukapheresis and dose preparation procedures, per infusion	HCPCS	Procedure
Q2042	Tisagenlecleucel, up to 600 million CAR-positive viable T cells, including leukapheresis and dose preparation procedures, per therapeutic dose	HCPCS	Procedure
G9835	Trastuzumab administered within 12 months of diagnosis	HCPCS	Procedure
G9837	Trastuzumab not administered within 12 months of diagnosis	HCPCS	Procedure
C9487	Ustekinumab, for intravenous injection, 1 mg	HCPCS	Procedure
J3358	Ustekinumab, for intravenous injection, 1 mg	HCPCS	Procedure
Q9989	Ustekinumab, for intravenous injection, 1 mg	HCPCS	Procedure
J3357	Ustekinumab, for subcutaneous injection, 1 mg	HCPCS	Procedure
80280	Vedolizumab	CPT-4	Procedure
C9050	Injection, emapalumab-lzsg, 1 mg	HCPCS	Procedure
C9052	Injection, ravulizumab-cwvz, 10 mg	HCPCS	Procedure
C9494	Injection, ocrelizumab, 1 mg	HCPCS	Procedure
J0202	Injection, alemtuzumab, 1 mg	HCPCS	Procedure
J1303	Injection, ravulizumab-cwvz, 10 mg	HCPCS	Procedure
J2350	Injection, ocrelizumab, 1 mg	HCPCS	Procedure
J3380	Injection, vedolizumab, 1 mg	HCPCS	Procedure
J7511	Lymphocyte immune globulin, antithymocyte globulin, rabbit, parenteral, 25 mg	HCPCS	Procedure
J7513	Daclizumab, parenteral, 25 mg	HCPCS	Procedure
J9210	Injection, emapalumab-lzsg, 1 mg	HCPCS	Procedure
J7500	Azathioprine, oral, 50 mg	HCPCS	Procedure
J0638	Injection, canakinumab, 1 mg	HCPCS	Procedure

Appendix H. List of Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology, Second Edition (CPT-2), Current Procedural Terminology, Third Edition (CPT-3), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
J8610	Methotrexate; oral, 2.5 mg	HCPCS	Procedure
J9250	Methotrexate sodium, 5 mg	HCPCS	Procedure
J9260	Methotrexate sodium, 50 mg	HCPCS	Procedure
J3245	Injection, tildrakizumab, 1 mg	HCPCS	Procedure
Immunostimulants			
C9058	Injection, pegfilgrastim-bmez, biosimilar, (Ziextenzo) 0.5 mg	HCPCS	Procedure
J1442	Injection, filgrastim (G-CSF), excludes biosimilars, 1 mcg	HCPCS	Procedure
J1447	Injection, tbo-filgrastim, 1 mcg	HCPCS	Procedure
J1595	Injection, glatiramer acetate, 20 mg	HCPCS	Procedure
J1826	Injection, interferon beta-1a, 30 mcg	HCPCS	Procedure
J1830	Injection interferon beta-1b, 0.25 mg (code may be used for Medicare when drug administered under the direct supervision of a physician, not for use when drug is self-administered)	HCPCS	Procedure
J2504	Injection, pegademase bovine, 25 IU	HCPCS	Procedure
J2505	Injection, pegfilgrastim, 6 mg	HCPCS	Procedure
J2562	Injection, plerixafor, 1 mg	HCPCS	Procedure
J2820	Injection, sargramostim (GM-CSF), 50 mcg	HCPCS	Procedure
J9015	Injection, aldesleukin, per single use vial	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
Q3027	Injection, interferon beta-1a, 1 mcg for intramuscular use	HCPCS	Procedure
Q3028	Injection, interferon beta-1a, 1 mcg for subcutaneous use	HCPCS	Procedure
Q5101	Injection, filgrastim-sndz, biosimilar, (Zarxio), 1 mcg	HCPCS	Procedure
Q5108	Injection, pegfilgrastim-jmdb, biosimilar, (Fulphila), 0.5 mg	HCPCS	Procedure
Q5110	Injection, filgrastim-aafi, biosimilar, (Nivestym), 1 mcg	HCPCS	Procedure
Q5111	Injection, pegfilgrastim-cbqv, biosimilar, (Udenyca), 0.5 mg	HCPCS	Procedure
Q5120	Injection, pegfilgrastim-bmez, biosimilar, (ZIEXTENZO), 0.5 mg	HCPCS	Procedure
Q5122	Injection, pegfilgrastim-apgf, biosimilar, (Nyvepria), 0.5 mg	HCPCS	Procedure
J9212	Injection, interferon alfacon-1, recombinant, 1 mcg	HCPCS	Procedure
J1826	Injection, interferon beta-1a, 30 mcg	HCPCS	Procedure
Q3028	Injection, interferon beta-1a, 1 mcg for subcutaneous use	HCPCS	Procedure
J9216	Injection, interferon, gamma 1-b, 3 million units	HCPCS	Procedure
J1830	Injection, interferon beta-1b, 0.25 mg (code may be used for medicare when drug administered under the direct supervision of a physician, not for use when drug is self administered)	HCPCS	Procedure
J9213	Injection, interferon, alfa-2a, recombinant, 3 million units	HCPCS	Procedure
S0145	Injection, pegylated interferon alfa-2a, 180 mcg per ml	HCPCS	Procedure
S0148	Injection, pegylated interferon alfa-2b, 10 mcg	HCPCS	Procedure
J9214	Injection, interferon, alfa-2b, recombinant, 1 million units	HCPCS	Procedure
Q2043	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
0540T	Chimeric antigen receptor T-cell (CAR-T) therapy; CAR-T cell administration, autologous	CPT-3	Procedure
0537T	Chimeric antigen receptor T-cell (CAR-T) therapy; harvesting of blood-derived T lymphocytes for development of genetically modified autologous CAR-T cells, per day	CPT-3	Procedure
0538T	Chimeric antigen receptor T-cell (CAR-T) therapy; preparation of blood-derived T lymphocytes for transportation (eg, cryopreservation, storage)	CPT-3	Procedure
0539T	Chimeric antigen receptor T-cell (CAR-T) therapy; receipt and preparation of CAR-T cells for administration	CPT-3	Procedure
Monoclonal antibodies			

Appendix H. List of Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology, Second Edition (CPT-2), Current Procedural Terminology, Third Edition (CPT-3), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
Q0239	Injection, bamlanivimab-xxxx, 700 mg	HCPCS	Procedure
M0239	intravenous infusion, bamlanivimab-xxxx, includes infusion and post administration monitoring	HCPCS	Procedure
Q0243	Injection, casirivimab and imdevimab, 2400 mg	HCPCS	Procedure
M0243	intravenous infusion, casirivimab and imdevimab includes infusion and post administration monitoring	HCPCS	Procedure
Q0245	Injection, bamlanivimab and etesevimab, 2100 mg	HCPCS	Procedure
M0245	Intravenous infusion, bamlanivimab and etesevimab, includes infusion and post administration monitoring	HCPCS	Procedure
Glucocorticoids			
82539	CORTISOL;DEXAMETHASONE SUPPRESS.TEST,PLASMA/URIN	C4	Procedure Procedure
K0512	Dexamethasone, inhalation solution administered through DME, concentrated form, per milligram	HCPCS	Procedure
K0513	Dexamethasone, inhalation solution administered through DME, unit dose form, per milligram	HCPCS	Procedure
J7637	Dexamethasone, inhalation solution, compounded product, administered through DME, concentrated form, per mg	HCPCS	Procedure
J7638	Dexamethasone, inhalation solution, compounded product, administered through DME, unit dose form, per mg	HCPCS	Procedure
C9048	Dexamethasone, lacrimal ophthalmic insert, 0.1 mg	HCPCS	Procedure
J1096	Dexamethasone, lacrimal ophthalmic insert, 0.1 mg	HCPCS	Procedure
J8540	Dexamethasone, oral, 0.25 mg	HCPCS	Procedure
S0173	Dexamethasone, oral, 4 mg	HCPCS	Procedure
80420	Dexamethasone suppression panel, 48 hour This panel must include the following: Free cortisol, urine (82530 x 2) Cortisol (82533 x 2) Volume measurement for timed collection (81050 x 2)	C4	Procedure
C9256	Injection, dexamethasone intravitreal implant, 0.1 mg	HCPCS	Procedure
J2930	Injection, methylprednisolone sodium succinate, up to 125 mg	HCPCS	Procedure
J2920	Injection, methylprednisolone sodium succinate, up to 40 mg	HCPCS	Procedure
J2640	Injection, prednisolone sodium phosphate, to 20 mg	HCPCS	Procedure
C9469	Injection, triamcinolone acetonide, preservative-free, extended-release, microsphere formulation, 1 mg	HCPCS	Procedure
J3300	Injection, triamcinolone acetonide, preservative free, 1 mg	HCPCS	Procedure
C9092	Injection, triamcinolone acetonide, suprachoroidal (Xipere), 1 mg	HCPCS	Procedure
J3304	Injection, triamcinolone acetonide, preservative-free, extended-release, microsphere formulation, 1 mg	HCPCS	Procedure
C9034	Injection, dexamethasone 9%, intraocular, 1 mcg	HCPCS	Procedure
J1095	Injection, dexamethasone 9%, intraocular, 1 mcg	HCPCS	Procedure
J1094	Injection, dexamethasone acetate, 1 mg	HCPCS	Procedure
J7312	Injection, dexamethasone, intravitreal implant, 0.1 mg	HCPCS	Procedure
J1100	Injection, dexamethasone sodium phosphate, 1 mg	HCPCS	Procedure
J1700	Injection, hydrocortisone acetate, up to 25 mg	HCPCS	Procedure
J1020	Injection, methylprednisolone acetate, 20 mg	HCPCS	Procedure
J1030	Injection, methylprednisolone acetate, 40 mg	HCPCS	Procedure
J1040	Injection, methylprednisolone acetate, 80 mg	HCPCS	Procedure
J2650	Injection, prednisolone acetate, up to 1 ml	HCPCS	Procedure
Q9993	Injection, triamcinolone acetonide, preservative-free, extended-release, microsphere formulation, 1 mg	HCPCS	Procedure
J3301	Injection, triamcinolone acetonide, not otherwise specified, 10 mg	HCPCS	Procedure

Appendix H. List of Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology, Second Edition (CPT-2), Current Procedural Terminology, Third Edition (CPT-3), and Current Procedural Terminology, Fourth Edition (CPT-4) Codes to Define Baseline Characteristics in this Request

Code	Description	Code Type	Code Category
J3303	Injection, triamcinolone hexacetonide, per 5 mg	HCPCS	Procedure
J1690	Injection, prednisolone tebutate, up to 20 mg	HCPCS	Procedure
J7509	Methylprednisolone, oral, per 4 mg	HCPCS	Procedure
4193F	Patient receiving <10 mg daily prednisone (or equivalent), or RA activity is worsening, or glucocorticoid use is for less than 6 months (RA)	C2	Procedure
4194F	Patient receiving =>10 mg daily prednisone (or equivalent) for longer than 6 months, and improvement or no change in disease activity (RA)	C2	Procedure
J7510	Prednisolone, oral, per 5 mg	HCPCS	Procedure
J7512	Prednisone, immediate release or delayed release, oral, 1 mg	HCPCS	Procedure
J7506	Prednisone, oral, per 5 mg	HCPCS	Procedure
G9468	Patient not receiving corticosteroids greater than or equal to 10 mg/day of prednisone equivalents for 60 or greater consecutive days or a single prescription equating to 600 mg prednisone or greater for all fills	HCPCS	Procedure
G9470	Patients not receiving corticosteroids greater than or equal to 10 mg/day of prednisone equivalents for 60 or greater consecutive days or a single prescription equating to 600 mg prednisone or greater for all fills	HCPCS	Procedure
G9467	Patients who have received or are receiving corticosteroids greater than or equal to 10 mg/day of prednisone equivalents for 60 or greater consecutive days or a single prescription equating to 600 mg prednisone or greater for all fills within the last twelve months	HCPCS	Procedure
G2112	Patient receiving <=5 mg daily prednisone (or equivalent), or RA activity is worsening, or glucocorticoid use is for less than 6 months	HCPCS	Procedure
G2113	Patient receiving >5 mg daily prednisone (or equivalent) for longer than 6 months, and improvement or no change in disease activity	HCPCS	Procedure
G9469	Patients who have received or are receiving corticosteroids greater than or equal to 10 mg/day of prednisone equivalents for 90 or greater consecutive days or a single prescription equating to 900 mg prednisone or greater for all fills	HCPCS	Procedure

Appendix I. List of Generic and Brand Drug Names Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
Oral corticosteroid (OCS)	
betamethasone	Celestone
cortisone acetate	cortisone
cortisone acetate	Cortisone aceticum
deflazacort	Emflaza
dexamethasone	Dexamethasone Intensol
dexamethasone	dexamethasone
dexamethasone	DexPak 10 day
dexamethasone	DexPak 13 Day
dexamethasone	DexPak 6 Day
dexamethasone	Baycadron
dexamethasone	Decadron
dexamethasone	Dxevo
dexamethasone	HiDex
dexamethasone	LoCort
dexamethasone	TaperDex
dexamethasone	Zema-Pak
dexamethasone	ZoDex
dexamethasone	ZonaCort
Dexamethasone	Dexamethasone
dexamethasone	HiDex 6-day
dexamethasone	TaperDex 12-day
dexamethasone	TaperDex 6-day
dexamethasone	TaperDex 7-day
Dexamethasone 1.5 mg	Dexamethasone
Dexamethasone 1.5 mg	Dxevo
dexamethasone/saliva collection device	Cushings Syndrome Diagnostic
hydrocortisone	Cortef
hydrocortisone	hydrocortisone
Hydrocortisone	CORTISOL
Hydrocortisone	Cortisol Phenolic
methylprednisolone	Medrol
methylprednisolone	Medrol (Pak)
methylprednisolone	methylprednisolone
methylprednisolone	Meprolone Unipak
methylprednisolone	Methylpred
methylprednisolone	Methylpred DP
prednisolone	prednisolone
prednisolone	Millipred
prednisolone	Millipred DP
prednisolone	Prelone
prednisolone acetate	Flo-Pred
prednisolone sodium phosphate	prednisolone sodium phosphate
prednisolone sodium phosphate	Millipred
prednisolone sodium phosphate	Orapred
prednisolone sodium phosphate	Orapred ODT
prednisolone sodium phosphate	Pediapred
prednisolone sodium phosphate	Veripred 20
Prednisolone Sodium Phosphate	Prednisolone Sodium Phosphate Oral Solution
Prednisolone Sodium Phosphate/Peak Flow Meter	Asmalpred
Prednisolone Sodium Phosphate/Peak Flow Meter	Asmalpred Plus
prednisone	prednisone

Appendix I. List of Generic and Brand Drug Names Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
prednisone	Prednisone Intensol
prednisone	Deltasone
prednisone	Rayos
prednisone	Sterapred
prednisone	Sterapred DS
Smoking	
nicotine	Nicotrol NS
nicotine	Nicotrol
nicotine	nicotine
nicotine polacrilex	Thrive Nicotine
varenicline tartrate	Chantix
varenicline tartrate	Chantix Continuing Month Box
varenicline tartrate	Chantix Continuing Month Pak
varenicline tartrate	Chantix Starting Month Box
varenicline tartrate	Chantix Starting Month Pak
bupropion HCl	Buproban
nicotine polacrilex	nicotine (polacrilex)
nicotine	Nicoderm CQ
nicotine polacrilex	Nicorette
nicotine polacrilex	Nicorette Refill
nicotine polacrilex	Commit
bupropion HCl	Zyban
bupropion HCl	bupropion HCl (smoking deter)
silver nitrate	silver nitrate (bulk)
nicotine polacrilex	Nicorette Starter Kit
nicotine polacrilex	Nicorelief
nicotine polacrilex	Stop Smoking Aid
nicotine polacrilex	nicotine polacrilex (bulk)
nicotine	NTS Step 1
nicotine	NTS Step 3
nicotine	NTS Step 2
nicotine bitartrate	Nicotine Tartrate
nicotine	Habitrol
nicotine polacrilex	Quit 2
nicotine polacrilex	Quit 4
Hemodialysis	
sodium acetate trihydrate	sodium acetate trihydra (bulk)
bicarbonate dialysis soln no.7 without potassium or dextrose	Primasol BK
bicarbonate dialysis solution no.8 without calcium	Primasol BGK
bicarbonate dialysis solution no.2	Primasol BGK
bicarbonate dialysis soln no.9	Primasol BGK
bicarbonate dialysis solution no.11 without potassium	Primasol BGK
bicarbonate dialysis solution no.14 without calcium	Primasol B22GK
bicarbonate dialysis solution no.16 without calcium	Primasol B22GK
bicarbonate dialysis soln no.13 without calc,potas,dextrose	Primasol BK
bicarbonate dialysis solution no.15 without calcium	Primasol BGK
phosphate hemodialysis solution no.2 without dextrose	Phoxillum BK
phosphate hemodialysis soln no.3 without calcium or dextrose	Phoxillum B22K
IL4R or IL5	
reslizumab	Cinqair
benralizumab	Fasenra
mepolizumab	Nucala

Appendix I. List of Generic and Brand Drug Names Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
dupilumab	Dupixent Syringe
dupilumab	Dupixent Pen
Anti-IgE	
omalizumab	Xolair
Opiates	
buprenorphine HCl	Belbuca
fentanyl citrate	Fentora
fentanyl citrate	Actiq
fentanyl citrate	fentanyl citrate
hydromorphone HCl/PF	Dilaudid (PF)
morphine sulfate	morphine
fentanyl citrate/bupivacaine HCl in 0.9 % sodium chloride/PF	fentanyl (PF)-bupivacaine-NaCl
fentanyl citrate in 0.9 % sodium chloride/PF	fentanyl citrate (PF)-0.9%NaCl
morphine sulfate in 0.9 % sodium chloride	morphine in 0.9 % sodium chlor
fentanyl citrate/ropivacaine HCl/sodium chloride 0.9%/PF	fentanyl-ropivacaine-NaCl (PF)
methadone HCl	methadone
morphine sulfate in 0.9 % sodium chloride/PF	morphine (PF) in 0.9 % sod chl
hydromorphone HCl in sterile water/PF	hydromorphone (PF) in water
morphine sulfate/PF	Mitigo (PF)
nalbuphine HCl	nalbuphine
oxymorphone HCl	Opana
hydromorphone HCl/PF	hydromorphone (PF)
hydromorphone HCl in 0.9 % sodium chloride	hydromorphone in 0.9 % NaCl
morphine sulfate/dextrose 5 % in water	morphine in dextrose 5 %
hydromorphone HCl/PF	Dilaudid-HP (PF)
butorphanol tartrate	butorphanol
meperidine HCl/PF	Demerol (PF)
buprenorphine HCl	buprenorphine HCl
alfentanil HCl	alfentanil
buprenorphine HCl	Buprenex
meperidine HCl/PF	meperidine (PF)
morphine sulfate/PF	Infumorph P/F
morphine sulfate/PF	Duramorph (PF)
hydromorphone HCl	hydromorphone
meperidine HCl	meperidine
morphine sulfate/PF	morphine (PF)
pentazocine lactate	Talwin
meperidine HCl	Demerol
meperidine HCl in 0.9 % sodium chloride	meperidine in 0.9 % NaCl
hydromorphone HCl in dextrose 5 %-water/PF	hydromorphone in D5W (PF)
hydromorphone HCl in 0.9 % sodium chloride/PF	hydromorphone (PF)-0.9 % NaCl
fentanyl citrate/PF	fentanyl citrate (PF)
fentanyl citrate in dextrose 5% in water/PF	fentanyl citrate in D5W (PF)
methadone hydrochloride in 0.9 % sodium chloride	methadone in 0.9 % sod.chlorid
meperidine HCl in 0.9 % sodium chloride/PF	meperidine (PF) in 0.9 % NaCl
morphine sulfate/dextrose 5%-water/PF	morphine (PF) in dextrose 5 %
tramadol HCl	tramadol hydrochloride (bulk)
methadone HCl	methadone (bulk)
buprenorphine HCl	buprenorphine HCl (bulk)
codeine phosphate	codeine phosphate (bulk)
meperidine HCl	meperidine (bulk)
fentanyl citrate	fentanyl citrate (bulk)

Appendix I. List of Generic and Brand Drug Names Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
hydrocodone bitartrate	hydrocodone bitartrate (bulk)
oxycodone HCl	oxycodone (bulk)
hydromorphone HCl	hydromorphone (bulk)
levorphanol tartrate	levorphanol tartrate (bulk)
morphine sulfate	morphine (bulk)
nalbuphine HCl	nalbuphine (bulk)
butorphanol tartrate	butorphanol tartrate (bulk)
budesonide, micronized	budesonide, micronized (bulk)
fentanyl	fentanyl (bulk)
fentanyl citrate	Lazanda
tramadol HCl	tramadol
oxycodone HCl/acetaminophen	Nalocet
oxycodone HCl/acetaminophen	oxycodone-acetaminophen
hydrocodone bitartrate/acetaminophen	hydrocodone-acetaminophen
oxycodone HCl	oxycodone
acetaminophen with codeine phosphate	acetaminophen-codeine
acetaminophen/caffeine/dihydrocodeine bitartrate	Dvorah
acetaminophen/caffeine/dihydrocodeine bitartrate	Panlor(acetam-caff-dihydrocod)
tapentadol HCl	Nucynta ER
tapentadol HCl	Nucynta
levorphanol tartrate	levorphanol tartrate
morphine sulfate	Arymo ER
oxycodone HCl	Oxaydo
tramadol HCl/acetaminophen	tramadol-acetaminophen
oxycodone HCl/aspirin	oxycodone-aspirin
codeine phosphate/butalbital/aspirin/caffeine	codeine-butalbital-ASA-caff
hydrocodone bitartrate/acetaminophen	Lorcet HD
hydrocodone bitartrate/acetaminophen	Lorcet Plus
hydrocodone bitartrate/acetaminophen	Lorcet (hydrocodone)
morphine sulfate	morphine concentrate
hydrocodone/ibuprofen	hydrocodone-ibuprofen
tramadol HCl	Ultram ER
acetaminophen/caffeine/dihydrocodeine bitartrate	acetaminophen-caff-dihydrocod
tramadol HCl	ConZip
acetaminophen/caffeine/dihydrocodeine bitartrate	Trezix
pentazocine HCl/naloxone HCl	pentazocine-naloxone
tramadol HCl/acetaminophen	Ultracet
tramadol HCl	Ultram
oxycodone HCl	RoxyBond
morphine sulfate	MorphaBond ER
hydrocodone bitartrate	Zohydro ER
oxymorphone HCl	oxymorphone
oxycodone HCl	OxyContin
butalbital/acetaminophen/caffeine/codeine phosphate	butalbital-acetaminop-caf-cod
oxymorphone HCl	Opana ER
oxycodone HCl/acetaminophen	Percocet
oxycodone HCl/acetaminophen	Endocet
hydrocodone/ibuprofen	Reprexain
oxycodone HCl	Oxecta
morphine sulfate/naltrexone HCl	Embeda
methadone HCl	Methadose
hydrocodone bitartrate/acetaminophen	Xodol 7.5/300

Appendix I. List of Generic and Brand Drug Names Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
hydrocodone bitartrate/acetaminophen	Xodol 5/300
hydrocodone bitartrate/acetaminophen	Xodol 10/300
hydromorphone HCl	Dilaudid
hydrocodone bitartrate	Hysingla ER
morphine sulfate	MS Contin
aspirin/caffeine/dihydrocodeine bitartrate	aspirin-caffeine-dihydrocodein
oxycodone myristate	Xtampza ER
oxycodone HCl/acetaminophen	Xartemis XR
morphine sulfate	Kadian
hydrocodone bitartrate/acetaminophen	Norco
hydrocodone/ibuprofen	Vicoprofen
aspirin/caffeine/dihydrocodeine bitartrate	Synalgos-DC
acetaminophen with codeine phosphate	Tylenol-Codeine #3
codeine phosphate/butalbital/aspirin/caffeine	Fiorinal-Codeine #3
hydromorphone HCl	Exalgo ER
codeine sulfate	codeine sulfate
codeine phosphate/butalbital/aspirin/caffeine	Butalbital Compound-Codeine
butalbital/acetaminophen/caffeine/codeine phosphate	Fioricet with Codeine
codeine phosphate/butalbital/aspirin/caffeine	Ascomp with Codeine
hydrocodone/ibuprofen	Xylon 10
hydrocodone/ibuprofen	Ibudone
hydrocodone bitartrate/acetaminophen	Lortab 10-325
hydrocodone bitartrate/acetaminophen	Lortab 7.5-325
hydrocodone bitartrate/acetaminophen	Lortab 5-325
acetaminophen with codeine phosphate	Tylenol-Codeine #4
oxycodone HCl/acetaminophen	Primlev
oxycodone HCl	Roxicodone
hydrocodone bitartrate/acetaminophen	Lortab Elixir
benzhydrocodone HCl/acetaminophen	benzhydrocodone-acetaminophen
benzhydrocodone HCl/acetaminophen	Apadaz
hydrocodone bitartrate/acetaminophen	Hycet
codeine phosphate/butalbital/aspirin/caffeine	Butalbital Compound W/Codeine
hydrocodone bitartrate/acetaminophen	Zamicet
ibuprofen/oxycodone HCl	ibuprofen-oxycodone
acetaminophen with codeine phosphate	Capital with Codeine
hydrocodone bitartrate/acetaminophen	Vicodin HP
hydrocodone bitartrate/acetaminophen	Vicodin ES
hydrocodone bitartrate/acetaminophen	Vicodin
methadone HCl	Diskets
methadone HCl	Dolophine
methadone HCl	Methadone Intensol
sufentanil citrate	Dsuvia
fentanyl citrate	Abstral
fentanyl	Subsys
fentanyl HCl	Ionsys
fentanyl	fentanyl
buprenorphine	Butrans
buprenorphine	buprenorphine
fentanyl	Duragesic
Benzodiazepines	
lorazepam	lorazepam
midazolam HCl/PF	midazolam (PF)

Appendix I. List of Generic and Brand Drug Names Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
midazolam HCl	midazolam
diazepam	diazepam
lorazepam	Ativan
midazolam HCl in 0.9 % sodium chloride	midazolam in 0.9 % sod chlorid
midazolam HCl in 0.9 % sodium chloride/PF	midazolam (PF) in 0.9 % NaCl
midazolam HCl in dextrose 5% in water	midazolam in dextrose 5 %
midazolam in sodium chloride, iso-osmotic/PF	midazolam in NaCl,iso-osmo(PF)
lorazepam in 5 % dextrose and water	lorazepam in dextrose 5 %
lorazepam in 0.9 % sodium chloride	lorazepam in 0.9% sod chloride
lorazepam	lorazepam (bulk)
alprazolam	alprazolam (bulk)
midazolam	midazolam (bulk)
diazepam	diazepam (bulk)
diazepam	Valtoco
midazolam	Nayzilam
chlordiazepoxide/clidinium bromide	chlordiazepoxide-clidinium
alprazolam	alprazolam
quazepam	quazepam
chlordiazepoxide HCl	chlordiazepoxide HCl
temazepam	temazepam
estazolam	estazolam
clorazepate dipotassium	clorazepate dipotassium
flurazepam HCl	flurazepam
oxazepam	oxazepam
triazolam	triazolam
temazepam	Restoril
quazepam	Doral
clorazepate dipotassium	Tranxene T-Tab
alprazolam	Xanax
diazepam	Valium
lorazepam	Lorazepam Intensol
amitriptyline HCl/chlordiazepoxide	amitriptyline-chlordiazepoxide
chlordiazepoxide/clidinium bromide	Librax (with clidinium)
diazepam	Diazepam Intensol
alprazolam	Alprazolam Intensol
alprazolam	Xanax XR
triazolam	Halcion
diazepam	Diastat
diazepam	Diastat AcuDial
midazolam/ketamine HCl/ondansetron HCl	MKO (Midazolam-Ketamine-Ondan)
Immunosuppressants or immunomodulators	
siltuximab	Sylvant
cyclophosphamide	cyclophosphamide
emapalumab-lzsg	Gamifant
azathioprine	azathioprine
mycophenolate mofetil	mycophenolate mofetil
mycophenolate sodium	mycophenolate sodium
leflunomide	leflunomide
tacrolimus	tacrolimus
sirolimus	sirolimus
methotrexate sodium	methotrexate sodium
tacrolimus	Envarsus XR

Appendix I. List of Generic and Brand Drug Names Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
cyclosporine	cyclosporine
methotrexate sodium/PF	methotrexate sodium (PF)
anakinra	Kineret
azathioprine	Azasan
cyclosporine, modified	cyclosporine modified
pomalidomide	Pomalyst
lenalidomide	Revlimid
thalidomide	Thalomid
alemtuzumab	Campath
alemtuzumab	Lemtrada
etanercept	Enbrel Mini
etanercept	Enbrel
etanercept	Enbrel SureClick
golimumab	Simponi ARIA
golimumab	Simponi
infliximab	Remicade
azathioprine	Imuran
methotrexate	Xatmep
everolimus	everolimus (antineoplastic)
methotrexate sodium	Trexall
certolizumab pegol	Cimzia Starter Kit
certolizumab pegol	Cimzia
certolizumab pegol	Cimzia Powder for Reconst
tocilizumab	Actemra ACTPen
tocilizumab	Actemra
belimumab	Benlysta
tacrolimus	Prograf
mycophenolate mofetil HCl	mycophenolate mofetil (HCl)
temsirolimus	temsirolimus
tacrolimus	Astagraf XL
azathioprine sodium	azathioprine sodium
leflunomide	Arava
everolimus	Afinitor Disperz
everolimus	Afinitor
everolimus	Zortress
basiliximab	Simulect
mycophenolate sodium	Myfortic
cyclosporine, modified	Neoral
cyclosporine	Sandimmune
adalimumab	Humira
cyclosporine, modified	Gengraf
adalimumab	Humira Pen
adalimumab	Humira Pen Psor-Uveits-Adol HS
adalimumab	Humira Pen Crohns-UC-HS Start
adalimumab	Humira Pediatric Crohns Start
adalimumab	Humira(CF) Pedi Crohns Starter
adalimumab	Humira(CF) Pen Psor-Uv-Adol HS
adalimumab	Humira(CF)
adalimumab	Humira(CF) Pen
adalimumab	Humira(CF) Pen Crohns-UC-HS
infliximab-dyyb	Inflectra
everolimus	everolimus (immunosuppressive)

Appendix I. List of Generic and Brand Drug Names Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
temsirolimus	Torisel
sirolimus	Rapamune
infliximab-abda	Renflexis
mycophenolate mofetil HCl	CellCept Intravenous
mycophenolate mofetil	CellCept
abatacept	Orencia
abatacept	Orencia ClickJect
abatacept/maltose	Orencia (with maltose)
belatacept	Nulojix
loncastuximab tesirine-lpyl	Zynlonta
aldesleukin	Proleukin
interferon gamma-1b, recomb.	Actimmune
margetuximab-cmkb	Margenza
tafasitamab-cxix	Monjuvi
moxetumomab pasudotox-tdfk	Lumoxiti
lisocabtagene maraleucel, CD4 component, 2 of 2	Breyanzi CD4 Component (2of 2)
lisocabtagene maraleucel, CD8 component, 1 of 2	Breyanzi CD8 Component (1of 2)
lisocabtagene maraleucel	Breyanzi
naxitamab-gqgk	Danyelza
kit for prep yttrium-90/ibritumomab tiuxetan/albumin human	Zevalin (Y-90)
zanubrutinib	Brukinsa
tagraxofusp-erzs	Elzonris
bevacizumab	bevacizumab
brexucabtagene autoleucel	Tecartus
axicabtagene ciloleucel	Yescarta
pegfilgrastim-cbqv	Udenyca
trastuzumab-dkst	Ogivri
pegfilgrastim-jmdb	Fulphila
cetuximab	Erbitux
palifermin	Kepivance
dinutuximab	Unituxin
fam-trastuzumab deruxtecan-nxki	Enhertu
peginterferon beta-1a	Plegridy
natalizumab	Tysabri
tbo-filgrastim	Granix
trastuzumab-pkrb	Herzuma
rituximab-abbs	Truxima
cemiplimab-rwlc	Libtayo
rilonacept	Arcalyst
pegfilgrastim-bmez	Ziextenzo
filgrastim-sndz	Zarxio
palivizumab	Synagis
interferon beta-1a	Avonex
interferon beta-1a/albumin human	Avonex (with albumin)
luspatercept-aamt	Reblozyl
idecabtagene vicleucel	Abecma
reslizumab	Cinqair
ibrutinib	Imbruvica
guselkumab	Tremfya
daratumumab-hyaluronidase-fihj	Darzalex Faspro
daratumumab	Darzalex
ustekinumab	Stelara

Appendix I. List of Generic and Brand Drug Names Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
pegademase bovine	Adagen
panitumumab	Vectibix
filgrastim	Neupogen
denosumab	Xgeva
denosumab	Prolia
rituximab-arrx	Riabni
bevacizumab-awwb	Mvasi
pegfilgrastim	Neulasta Onpro
pegfilgrastim	Neulasta
blinatumomab	Blinicyto
trastuzumab-anns	Kanjinti
talimogene laherparepvec	Imlygic
sacituzumab govitecan-hziy	Trodelvy
auranofin	Ridaura
levamisole HCl	levamisole (bulk)
brentuximab vedotin	Adcetris
enfortumab vedotin-ejfv	Padcev
ruxolitinib phosphate	Jakafi
interferon beta-1b	Betaseron
atezolizumab	Tecentriq
pertuzumab-trastuzumab-hyaluronidase-zzxf	Phesgo
pertuzumab	Perjeta
trastuzumab	Herceptin
rituximab/hyaluronidase, human recombinant	Rituxan Hycela
polatuzumab vedotin-piiq	Polivy
ado-trastuzumab emtansine	Kadcyla
trastuzumab-hyaluronidase-oysk	Herceptin Hylecta
obinutuzumab	Gazyva
bevacizumab	Avastin
rituximab	Rituxan
satralizumab-mwge	Enspryng
tildrakizumab-asmn	Ilumya
interferon beta-1a/albumin human	Rebif Titration Pack
avelumab	Bavencio
interferon beta-1a/albumin human	Rebif Rebidose
interferon beta-1a/albumin human	Rebif (with albumin)
mogamulizumab-kpkc	Poteligeo
sipuleucel-T/lactated ringers solution	Provenge
eculizumab	Soliris
durvalumab	Imfinzi
benralizumab	Fasenra Pen
benralizumab	Fasenra
acalabrutinib	Calquence
brodalumab	Siliq
dostarlimab-gxly	Jemperli
belantamab mafodotin-blmf	Blenrep
mepolizumab	Nucala
peginterferon alfa-2b	PegIntron
interferon alfa-2b, recomb.	Intron A
peginterferon alfa-2b	Sylatron
ofatumumab	Kesimpta Pen
tisagenlecleucel	Kymriah

Appendix I. List of Generic and Brand Drug Names Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
canakinumab/PF	Ilaris (PF)
ofatumumab	Arzerra
secukinumab	Cosentyx (2 Syringes)
secukinumab	Cosentyx
secukinumab	Cosentyx Pen
secukinumab	Cosentyx Pen (2 Pens)
interferon beta-1b	Extavia
risankizumab-rzaa	Skyrizi
tofacitinib citrate	Xeljanz
tofacitinib citrate	Xeljanz XR
bevacizumab-bvzr	Zirabev
trastuzumab-qyyp	Trazimera
filgrastim-aafi	Nivestym
rituximab-pvvr	Ruxience
BCG vaccine, live/PF	BCG vaccine, live (PF)
BCG live	Tice BCG
sarilumab	Kevzara
dupilumab	Dupixent Syringe
sargramostim	Leukine
isatuximab-irfc	Sarclisa
gemtuzumab ozogamicin	Mylotarg
inotuzumab ozogamicin	Besponsa
trastuzumab-dttb	Ontruzant
pembrolizumab	Keytruda
peginterferon alfa-2a	Pegasys ProClick
peginterferon alfa-2a	Pegasys
elotuzumab	Empliciti
nivolumab	Opdivo
ipilimumab	Yervoy
olaratumab	Lartruvo
ixekizumab	Taltz Syringe
necitumumab	Portrazza
ramucirumab	Cyramza
baricitinib	Olumiant
ixekizumab	Taltz Autoinjector (2 Pack)
ixekizumab	Taltz Autoinjector
ixekizumab	Taltz Autoinjector (3 Pack)
Glucocorticoids	
betamethasone acetate/betamethasone sodium phosphate	Celestone Soluspan
betamethasone acetate/betamethasone sodium phosphate	betamethasone acet,sod phos
betamethasone acetate/betamethasone sodium phosphate	Pod-Care 100C
betamethasone acetate/betamethasone sodium phosphate	ReadySharp Betamethasone
betamethasone acetate/betamethasone sodium phosphate	BSP-0820
betamethasone acetate/betamethasone sodium phosphate	Beta-1
betamethasone sodium phosph in sterile water for injection	betamethasone sod phosph-water
betamethasone acetate and sodium phos in sterile water/PF	betameth ac,sod phos(PF)-water
betamethasone acetate/betamethasone sodium phosphate/water	betamethasone ace,sod phos-wtr
bupivacaine HCl/dexamethasone sodium phos in sterile water	bupivacaine-dexameth in water
cortisone acetate	cortisone
dexamethasone	dexamethasone
dexamethasone	DexPak 10 day
dexamethasone	DexPak 13 Day

Appendix I. List of Generic and Brand Drug Names Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
dexamethasone	DexPak 6 Day
dexamethasone sodium phosphate	dexamethasone sodium phosphate
dexamethasone	HiDex
dexamethasone	TaperDex
dexamethasone sodium phosphate/PF	Active Injection Kit D (PF)
dexamethasone sodium phosphate	ReadySharp dexamethasone
dexamethasone	Decadron
dexamethasone sodium phosphate/PF	dexamethasone sodium phos (PF)
dexamethasone sodium phosphate/PF	MAS Care-Pak (PF)
dexamethasone sodium phosphate in 0.9 % sodium chloride	dexamethasone-0.9 % sod. chlor
dexamethasone	Dxevo
dexamethasone acetate and sodium phosphate in sterile water	dexamethasone ac, sod ph-water
dexamethasone acetate in sodium chloride, iso-osmotic	dexamethasone ace-NaCl,iso-osm
dexamethasone sodium phosphate/lidocaine HCl	Lidocidex-I
dexamethasone sodium phosphate	Dexonto
dexamethasone	Dexabliss
dexamethasone	Hemady
dexamethasone sodium phosphate/PF	DoubleDex (PF)
dexamethasone	ZCort
hydrocortisone sodium succinate/PF	Solu-Cortef Act-O-Vial (PF)
hydrocortisone sod succinate	Solu-Cortef
hydrocortisone sod succinate	A-Hydrocort
methylprednisolone sodium succinate/PF	Solu-Medrol (PF)
methylprednisolone	Medrol
methylprednisolone	Medrol (Pak)
methylprednisolone acetate	Depo-Medrol
methylprednisolone sodium succinate	Solu-Medrol
methylprednisolone sodium succinate	methylprednisolone sodium succ
methylprednisolone	methylprednisolone
methylprednisolone acetate	methylprednisolone acetate
methylprednisolone acetate	P-Care D40
methylprednisolone acetate	P-Care D80
methylprednisolone acetate in sterile water for injection	methylprednisolone acet-water
methylprednisolone acetate/bupivacaine HCl in sterile water	methylprednisol ac-bupivac-wat
methylprednisolone acetate in sodium chloride,iso-osmotic/PF	methylpred ac(PF)-NaCl,iso-osm
methylprednisolone	Methylpred DP
prednisolone sodium phosphate	prednisolone sodium phosphate
prednisolone	Millipred
prednisolone	Millipred DP
prednisolone sodium phosphate	Veripred 20
prednisolone	prednisolone
prednisolone sodium phosphate	Orapred ODT
prednisolone sodium phosphate	Pediapred
prednisone	prednisone
prednisone	Prednisone Intensol
prednisone	Rayos
triamcinolone acetonide	Kenalog
triamcinolone acetonide	Kenalog-80
triamcinolone acetonide	triamcinolone acetonide
triamcinolone hexacetonide	Aristospan Intralesional
triamcinolone hexacetonide	Aristospan Intra-Articular
triamcinolone acetonide	P-Care K40

Appendix I. List of Generic and Brand Drug Names Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
triamcinolone acetonide	P-Care K80
triamcinolone acetonide	Pod-Care 100K
triamcinolone acetonide	Pro-C-Dure 5
triamcinolone acetonide	Pro-C-Dure 6
triamcinolone diacetate in 0.9 % sodium chloride	triamcinolone diacet-0.9% NaCl
triamcinolone diacetate in 0.9 % sodium chloride/PF	triamcinolone dia(PF)-0.9%NaCl
triamcinolone acetonide/bupivacaine/in 0.9% sodium chloride	triamcinol ace-bupiv-0.9% NaCl
triamcinolone acetonide in 0.9 % sodium chloride	triamcinolone aceton-0.9% NaCl
triamcinolone acetonide/0.9% sodium chloride/PF	triamcinol ac (PF) in 0.9%NaCl
triamcinolone acetonide/lidocaine HCl	Lidocilone I
triamcinolone acetonide	Kenalog-40
Inhaled corticosteroids (ICS) mono-product	
budesonide	budesonide
budesonide	Pulmicort
budesonide	Pulmicort Flexhaler
fluticasone furoate	Arnuity Ellipta
fluticasone propionate	Flovent HFA
fluticasone propionate	Flovent Diskus
mometasone furoate	Asmanex Twisthaler
mometasone furoate	Asmanex HFA
beclomethasone dipropionate	Qvar
beclomethasone dipropionate	Qvar RediHaler
budesonide	Pulmicort Turbuhaler
ciclesonide	Alvesco
fluticasone propionate	ArmonAir RespiClick
ICS and long-acting beta agonist (LABA) combination product	
mometasone furoate/formoterol fumarate	Dulera
fluticasone propionate/salmeterol xinafoate	fluticasone propion-salmeterol
fluticasone propionate/salmeterol xinafoate	Advair Diskus
fluticasone propionate/salmeterol xinafoate	Advair HFA
fluticasone furoate/vilanterol trifenate	Breo Ellipta
budesonide/formoterol fumarate	Symbicort
fluticasone propionate/salmeterol xinafoate	Wixela Inhub
fluticasone propionate/salmeterol xinafoate	AirDuo RespiClick
Long-acting muscarinic antagonist (LAMA) mono-product	
umeclidinium bromide	Incruse Ellipta
tiotropium bromide	Spiriva with HandiHaler
tiotropium bromide	Spiriva Respimat
glycopyrrolate	Seebri Neohaler
aclidinium bromide	Tudorza Pressair
revefenacin	Yupelri
glycopyrrolate/nebulizer and accessories	Lonhala Magnair Starter
glycopyrrolate/nebulizer accessories	Lonhala Magnair Refill
LABA and LAMA combination product	
glycopyrrolate/formoterol fumarate	Bevespi Aerosphere
indacaterol maleate/glycopyrrolate	Utibron Neohaler
tiotropium bromide/olodaterol HCl	Stiolto Respimat
umeclidinium bromide/vilanterol trifenate	Anoro Ellipta
ICS, LABA and LAMA combination product	
fluticasone furoate/umeclidinium bromide/vilanterol trifenate	Trelegy Ellipta
LABA mono-product	
indacaterol maleate	Arcapta Neohaler

Appendix I. List of Generic and Brand Drug Names Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
olodaterol HCl	Striverdi Respimat
salmeterol xinafoate	Serevent Diskus
arformoterol tartrate	Brovana
formoterol fumarate	Foradil Aerolizer
formoterol fumarate	Perforomist
Azithromycin	
azithromycin	Zithromax
azithromycin	Zithromax Z-Pak
azithromycin	Zithromax TRI-PAK
azithromycin	Zmax Pediatric
azithromycin	Zmax
azithromycin	azithromycin
Azithromycin Dihydrate	Azithromycin Dihydrate
Azithromycin Dihydrate	Zithromax
azithromycin monohydrate	azithromycin monohydrate
Roflumilast	
roflumilast	Daliresp
roflumilast	roflumilast
LTRA	
montelukast sodium	montelukast
zafirlukast	zafirlukast
zileuton	zileuton
montelukast sodium	Singulair
zafirlukast	Accolate
zileuton	Zyflo CR
zileuton	Zyflo
SABA	
levalbuterol HCl	levalbuterol HCl
ipratropium bromide/albuterol sulfate	ipratropium-albuterol
albuterol sulfate	albuterol sulfate
terbutaline sulfate	terbutaline
albuterol sulfate	Vospire ER
albuterol sulfate	ProAir HFA
albuterol sulfate	Proventil HFA
metaproterenol sulfate	metaproterenol
levalbuterol HCl	Xopenex
levalbuterol tartrate	Xopenex HFA
levalbuterol tartrate	levalbuterol tartrate
albuterol sulfate	Ventolin HFA
levalbuterol HCl	levalbuterol HCl (bulk)
terbutaline sulfate	terbutaline sulfate (bulk)
albuterol sulfate	albuterol sulfate (bulk)
albuterol sulfate	ProAir RespiClick
albuterol sulfate	Proair Digihaler
ipratropium bromide/albuterol sulfate	Combivent Respimat
metaproterenol sulfate	metaproterenol sulfate (bulk)
levalbuterol HCl	Xopenex Concentrate
Nintedanib	
nintedanib esylate	Ofev
Pirfenidone	
pirfenidone	Esbriet
Therapeutic anticoagulants	

Appendix I. List of Generic and Brand Drug Names Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
bivalirudin	Angiomax
anisindione	anisindione (bulk)
argatroban	argatroban
argatroban in 0.9 % sodium chloride	argatroban in 0.9 % sod chlor
argatroban in sodium chloride, iso-osmotic	argatroban in NaCl (iso-os)
fondaparinux sodium	Arixtra
betrixaban maleate	Bevyxxa
bivalirudin	bivalirudin
bivalirudin in 0.9 % sodium chloride	bivalirudin-0.9 % sodium chlor
warfarin sodium	Coumadin
dicumarol	dicumarol (bulk)
apixaban	Eliquis
apixaban	Eliquis DVT-PE Treat 30D Start
enoxaparin sodium	enoxaparin
fondaparinux sodium	fondaparinux
dalteparin sodium,porcine	Fragmin
heparin sodium,porcine/PF	Hep Flush-10 (PF)
heparin sodium,porcine in 0.45 % sodium chloride/PF	heparin (porc)-0.45% NaCl (PF)
heparin sodium,porcine	heparin (porcine)
heparin sodium,porcine	heparin (porcine) (bulk)
heparin sodium,porcine in 0.9 % sodium chloride	heparin (porcine) in 0.9% NaCl
heparin sodium,porcine/dextrose 5 % in water	heparin (porcine) in 5 % dex
heparin sodium,porcine IN 0.9 % sodium chloride/PF	heparin (porcine) in NaCl (PF)
heparin sodium,porcine in 0.9 % sodium chloride	heparin flush(porcine)-0.9NaCl
heparin sodium,porcine	heparin lock flush (porcine)
heparin sodium,porcine/PF	Heparin LockFlush(Porcine)(PF)
heparin sodium,porcine in 0.45 % sodium chloride	heparin(porcine) in 0.45% NaCl
heparin sodium,porcine/PF	heparin, porcine (PF)
warfarin sodium	Jantoven
enoxaparin sodium	Lovenox
phenindione	phenindione (bulk)
dabigatran etexilate mesylate	Pradaxa
edoxaban tosylate	Savaysa
warfarin sodium	warfarin
warfarin sodium	warfarin (bulk)
rivaroxaban	Xarelto
Immunostimulants	
aldesleukin	Proleukin
interferon gamma-1b,recomb.	Actimmune
pegfilgrastim-cbqv	Udenyca
glatiramer acetate	Copaxone
pegfilgrastim-jmdb	Fulphila
peginterferon beta-1a	Plegridy
tbo-filgrastim	Granix
pegfilgrastim-bmez	Ziextenzo
filgrastim-sndz	Zarxio
interferon beta-1a	Avonex
interferon beta-1a/albumin human	Avonex (with albumin)
pegademase bovine	Adagen
pegfilgrastim	Neulasta Onpro
pegfilgrastim	Neulasta
interferon alfa-n3	Alferon N

Appendix I. List of Generic and Brand Drug Names Used to Define Baseline Characteristics in this Request

Generic Name	Brand Name
interferon beta-1b	Betaseron
interferon beta-1a/albumin human	Rebif Titration Pack
interferon beta-1a/albumin human	Rebif Rebidose
interferon beta-1a/albumin human	Rebif (with albumin)
sipuleucel-T/lactated ringers solution	Provenge
glatiramer acetate	Glatopa
glatiramer acetate	glatiramer
peginterferon alfa-2b	PegIntron
interferon alfa-2b, recomb.	Intron A
peginterferon alfa-2b	Sylatron
peginterferon alfa-2b	PegIntron Redipen
interferon beta-1b	Extavia
pegfilgrastim-apgf	Nyvepria
filgrastim-aafi	Nivestym
plerixafor	Mozobil
peginterferon alfa-2a	Pegasys ProClick
peginterferon alfa-2a	Pegasys
cemiplimab-rwlc	Libtayo
atezolizumab	Tecentriq
durvalumab	Imfinzi
dostarlimab-gxly	Jemperli
pembrolizumab	Keytruda
nivolumab	Opdivo
ipilimumab	Yervoy
Monoclonal antibodies	
Bamlanivimab	Bamlanivimab
casirivimab (REGN10933)	casirivimab (REGN10933)
imdevimab (REGN10987)	imdevimab (REGN10987)
Etesevimab	etesevimab

Appendix J. Specifications for Type 2 Request

The Office of Medical Policy (OMP) has requested execution of the Cohort Identification and Descriptive Analysis (CIDA) tool [10.3.0] to perform a risk factor analysis of acute respiratory failure in the Sentinel Distributed Database (SDD).

Query period: Run 1: October 1, 2016 - December 31, 2019 (all other scenarios)
 Run 2: January 1, 2020 - current data (COVID-19 scenario only)
Coverage requirement: Medical & Drug Coverage
Pre-index enrollment requirement: 365 days
Post-index enrollment requirement: 0 days
Enrollment gap: 45 days
Age groups: 18-39 40-64 65+
Stratifications: None
Envelope macro: Do not reclassify
Freeze data: Y

Exposure

Scenario	Index Exposure	Cohort definition	Incident exposure washout period	Incident w/ respect to:	Point Exposure?	Maximum exposure episode duration	Care setting	Principal diagnosis position	Censor treatment episode at evidence of:
1	COPD exacerbation code in any position OR COPD diagnosis code in the primary position OR Acute respiratory failure diagnosis code in the primary position + COPD diagnosis code in any position (see Combo tab)	All valid exposure episodes during query period	30 days	Severe COPD exacerbation	Yes	31 days	Inpatient	See COPD exac tab	*Death; *Disenrollment; *DP end date; *Query end date;

Appendix J. Specifications for Type 2 Request

Inclusion/Exclusion Criteria									Covariates
Inclusion/Exclusion	Criteria	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	Exclude evidence of days supply if inclusion/exclusion evaluation period includes dispensings	Number of instances the criteria should be found in evaluation period	Minimum Days Supplied	Covariates
Inclusion	COPD diagnosis AND	Any	Any	-365	-1	N/A	1	N/A	Age, sex, smoking history, COPD medication, number of exacerbations (See Covariates tab)
Inclusion	(ICS/LABA/LAMA combo) OR [(ICS/LABA combo) and (LAMA-containing)] OR [(LABA/LAMA-combo) and (ICS-containing)] AND	N/A	N/A	-365	-1	Evaluation period should search for evidence of days supply	1	90 days	
Inclusion	(ICS/LABA/LAMA combo) OR [(ICS/LABA combo) and (LAMA-containing)] OR [(LABA/LAMA-combo) and (ICS-containing)] AND	N/A	N/A	-60	-1	Evaluation period should search for evidence of a dispensing	1	N/A	
Inclusion	Moderate or severe COPD exacerbation episode	See COPD exac tab	See COPD exac tab	-365	-31	N/A	1	N/A	
Exclusion	Do not resuscitate code	Any	Any	-365	-1	N/A	1	N/A	

Appendix J. Specifications for Type 2 Request

Event Outcome

Event	Incident event washout period	Incident w/ respect to:	Principal diagnosis position	Event de-duplication	Blackout period
RF with Mechanical Ventilation and Intubation (see Combo tab)	0 days	RF with Mechanical Ventilation and Intubation (see Combo tab)	Any	De-duplicates occurrences of the same event group on the same day	0 days

Appendix J. Specifications for Type 2 Request

Exposure									
Scenario	Index Exposure	Cohort definition	Incident exposure washout period	Incident w/ respect to:	Point Exposure?	Maximum exposure episode duration	Care setting	Principal diagnosis position	Censor treatment episode at evidence of:
2	Idiopathic pulmonary fibrosis (IPF)	All valid exposure episodes during query period	30 days	IPF	Yes	31 days	Inpatient	Any	*Death; *Disenrollment; *DP end date; *Query end date;
3	Asthma ExacCodes in any position OR Asthma diagnosis in the primary position OR Acute respiratory failure diagnosis in the primary position + Asthma diagnosis in the secondary position (See Combo tab)	All valid exposure episodes during query period	30 days	Asthma exacerbation	Yes	31 days	Inpatient	Any	*Death; *Disenrollment; *DP end date; *Query end date;

Appendix J. Specifications for Type 2 Request

Inclusion/Exclusion Criteria									Covariates
Inclusion/Exclusion	Criteria	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	Exclude evidence of days supply if inclusion/exclusion evaluation period includes dispensings	Number of instances the criteria should be found in evaluation period	Minimum Days Supplied	Covariates
Inclusion	IPF diagnosis	Any	Any	-365	-31	N/A	N/A	N/A	Age, sex, smoking history, nintedanib/pirfenidone/none (See Covariates tab)
Inclusion	Asthma diagnosis AND	Any	Any	-365	-1	N/A	1	N/A	
Inclusion	Inhaled corticosteroids AND	N/A	N/A	-365	-1	Evaluation period should search for evidence of days supply	1	90 days	
Inclusion	LABA-containing AND	N/A	N/A	-365	-1	Evaluation period should search for evidence of days supply	1	90 days	
Inclusion	Inhaled corticosteroids AND	N/A	N/A	-60	-1	Evaluation period should search for evidence of a dispensing	1	N/A	Age, sex, smoking history (See Covariates tab)
Inclusion	LABA-containing AND	N/A	N/A	-60	-1	Evaluation period should search for evidence of a dispensing	1	N/A	
Inclusion	Moderate or severe asthma exacerbation episode	See asthma exac tab	See asthma exac tab	-365	-31	N/A	1	N/A	
Exclusion	Do not resuscitate code	Any	Any	-365	-1	N/A	1	N/A	

Appendix J. Specifications for Type 2 Request

Event Outcome

Event	Incident event washout period	Incident w/ respect to:	Principal diagnosis position	Event de-duplication	Blackout period
RF with Mechanical Ventilation and Intubation (see Combo tab)	0 days	RF with Mechanical Ventilation and Intubation (see Combo tab)	Any	De-duplicates occurrences of the same event group on the same day	0 days
RF with Mechanical Ventilation and Intubation (see Combo tab)	0 days	RF with Mechanical Ventilation (see Combo tab)	Any	De-duplicates occurrences of the same event group on the same day	0 days

Appendix J. Specifications for Type 2 Request

Exposure									
Scenario	Index Exposure	Cohort definition	Incident exposure washout period	Incident w/ respect to:	Point Exposure?	Maximum exposure episode duration	Care setting	Principal diagnosis position	Censor treatment episode at evidence of:
4	COVID-19 diagnosis	All valid exposure episodes during query period	30 days	COVID-19	Yes	31 days	Inpatient	Any	*Death; *Disenrollment; *DP end date; *Query end date;

ICD-9, ICD-10, HCPCS, and CPT codes are provided by Optum360.
 NDC codes are checked against First Data Bank's FDB MedKnowledge®.

Appendix J. Specifications for Type 2 Request

Inclusion/Exclusion Criteria									Covariates
Inclusion/ Exclusion	Criteria	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	Exclude evidence of days supply if inclusion/exclusion evaluation period includes dispensings	Number of instances the criteria should be found in evaluation period	Minimum Days Supplied	Covariates
Exclusion	Do not resuscitate code	Any	Any	-365	-1	N/A	1	N/A	Age, sex, smoking history, specific comorbidities (See Covariates tab)

Appendix J. Specifications for Type 2 Request

Event Outcome

Event	Incident event washout period	Incident w/ respect to:	Principal diagnosis position	Event de-duplication	Blackout period
RF with Mechanical Ventilation and Intubation (see Combo tab)	0 days	RF with Mechanical Ventilation and Intubation (see Combo tab)	Any	De-duplicates occurrences of the same event group on the same day	0 days

Appendix J.1. Specifications for COPD covariates

COPD Covariates									
Covariate	Operationalization	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	Exclude evidence of days supply if covariate includes dispensings	Number of instances the covariate should be found in evaluation period	Minimum Days Supplied	Include in model?
Number of moderate COPD exacerbations in prior year	Categorical: 0, 1, 2+	See COPD_Exacerbation_Episodes tab	See COPD_Exacerbation_Episodes tab	-365	-31	N/A	Custom programmed	N/A	N
Number of severe COPD exacerbations in prior year	Categorical: 0, 1, 2+	See COPD_Exacerbation_Episodes tab	See COPD_Exacerbation_Episodes tab	-365	-31	N/A	Custom programmed	N/A	Y
Evidence of smoking	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Evidence of obesity	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Evidence of cachexia	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
Congestive Heart Failure	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
MACE (Cardiac disease, coronary artery disease and acute coronary syndromes, myocardial infarctions, etc)	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Atrial Fib	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Bronchiectasis	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Ideopathic pulmonary fibrosis	Dichotomous: 1, 1	Any	Any	-365	-1	N/A	1	N/A	N
Asthma	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Pulmonary hypertension	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Pulmonary embolism	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
GERD	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Dysphagia	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y

Appendix J.1. Specifications for COPD covariates

COPD Covariates									
Covariate	Operationalization	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	Exclude evidence of days supply if covariate includes dispensings	Number of instances the covariate should be found in evaluation period	Minimum Days Supplied	Include in model?
ICS-containing adherence in prior year (days supplied/365)	Continuous	N/A	N/A	-365	-1	Search for evidence of days supply	Custom programmed	Custom programmed	Y
LABA-containing adherence in prior year (days supplied/365)	Continuous	N/A	N/A	-365	-1	Search for evidence of days supply	Custom programmed	Custom programmed	Y
LAMA-containing adherence in prior year (days supplied/365)	Continuous	N/A	N/A	-365	-1	Search for evidence of days supply	Custom programmed	Custom programmed	Y
Opioid dispensing [-30, -1]	Dichotomous: 1, 0	N/A	N/A	-30	-1	Search for evidence of days supply	1	N/A	Y
Benzodiazepine dispensing [-30, -1]	Dichotomous: 1, 0	N/A	N/A	-30	-1	Search for evidence of days supply	1	N/A	Y
Emphysema and chronic bronchitis subtype	Categorical (dummies, ref=0): 0=E CB (no, no) 1=E CB (yes, no) 2= E CB (no, yes) 3=E CB (yes, yes)	N/A	N/A	-365	-1	Search for evidence of days supply	Custom programmed	Custom programmed	Y
Chronic azithromycin (days supplied > 14) or roflumilast dispensing in prior year	Continuous	N/A	N/A	-365	-1	Search for evidence of days supply	Custom programmed	Custom programmed	Y

Appendix J.2. Specifications for IPF Covariates

IPF Covariates

Covariate	Operationalization	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	Exclude evidence of days supply if covariate includes dispensings	Number of instances the covariate should be found in evaluation period	Minimum Days Supplied	Include in model?
Evidence of smoking	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Evidence of obesity	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Congestive Heart Failure	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
MACE (Cardiac disease, coronary artery disease and acute coronary syndromes, myocardial infarctions, etc)	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
Atrial Fib	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Bronchiectasis	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
COPD	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Asthma	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Pulmonary hypertension	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Pulmonary embolism	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
GERD	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Dysphagia	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Lung cancer	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
Opioid dispensing [-30, -1]	Dichotomous: 1, 0	N/A	N/A	-30	-1	Search for evidence of days supply	1	N/A	Y
Benzodiazepine dispensing [-30, -1]	Dichotomous: 1, 0	N/A	N/A	-30	-1	Search for evidence of days supply	1	N/A	Y
Immunosuppressants	Dichotomous: 1, 0	N/A	N/A	-365	-1	Search for evidence of days supply	1	N/A	Y
Glucocorticoid or oral corticosteroid	Dichotomous: 1, 0	N/A	N/A	-365	-1	Search for evidence of days supply	1	N/A	Y
Nintedanib/Pirfenidone adherence in prior year	Continuous	N/A	N/A	-365	-1	Search for evidence of days supply	Custom programmed	Custom programmed	Y

Appendix J.3. Specifications for Asthma Covariates

Asthma Covariates

Covariate	Operationalization	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	Exclude evidence of days supply if covariate includes dispensings	Number of instances the covariate should be found in evaluation period	Minimum Days Supplied	Include in model?
Number of moderate asthma exacerbations in prior year	Categorical: 0, 1, 2+	See Asthma_Exacerbation_Episodes tab	See Asthma_Exacerbation_Episodes tab	-365	-31	N/A	Custom programmed	N/A	N
Number of severe asthma exacerbations in prior year	Categorical: 0, 1, 2+	See Asthma_Exacerbation_Episodes tab	See Asthma_Exacerbation_Episodes tab	-365	-31	N/A	Custom programmed	N/A	Y
Evidence of smoking	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Evidence of obesity	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Congestive Heart Failure	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
MACE (Cardiac disease, coronary artery disease and acute coronary syndromes, myocardial infarctions, etc)	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
Atrial Fib	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Bronchiectasis	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
COPD	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Atopic dermatitis	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
Atopy and food allergy	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
Eosinophilic granulomatosis with polyangiitis	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
Allergic bronchopulmonary aspergillosis	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
Pulmonary hypertension	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
Pulmonary embolism	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
GERD	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Dysphagia	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y

Appendix J.3. Specifications for Asthma Covariates

Asthma Covariates

Covariate	Operationalization	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	Exclude evidence of days supply if covariate includes dispensings	Number of instances the covariate should be found in evaluation period	Minimum Days Supplied	Include in model?
Vocal Cord Dysfunction	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
IL4R or IL5	Dichotomous: 1, 0	N/A	N/A	-365	-1	Search for evidence of days supply	1	N/A	Y
Anti-IgE (omalizumab)	Dichotomous: 1, 0	N/A	N/A	-365	-1	Search for evidence of days supply	1	N/A	Y
Glucocorticoid or oral corticosteroid dispensing [-15, -1]	Dichotomous: 1, 0	N/A	N/A	-15	-1	Search for evidence of days supply	1	N/A	Y
Opioid dispensing [-30, -1]	Dichotomous: 1, 0	N/A	N/A	-30	-1	Search for evidence of days supply	1	N/A	Y
Benzodiazepine dispensing [-30, -1]	Dichotomous: 1, 0	N/A	N/A	-30	-1	Search for evidence of days supply	1	N/A	Y
ICS-containing adherence in prior year (days supplied/365)	Continuous	N/A	N/A	-365	-1	Search for evidence of days supply	Custom programmed	Custom programmed	Y
LABA-containing adherence in prior year (days supplied/365)	Continuous	N/A	N/A	-365	-1	Search for evidence of days supply	Custom programmed	Custom programmed	Y
LTRA-containing adherence in prior year (days supplied/365)	Continuous	N/A	N/A	-365	-1	Search for evidence of days supply	Custom programmed	Custom programmed	Y
SABA-containing adherence in prior year (days supplied/365)	Continuous	N/A	N/A	-365	-1	Search for evidence of days supply	Custom programmed	Custom programmed	Y

Appendix J.3. Specifications for Asthma Covariates

Asthma Covariates

Covariate	Operationalization	Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	Exclude evidence of days supply if covariate includes dispensings	Number of instances the covariate should be found in evaluation period	Minimum Days Supplied	Include in model?
LAMA-containing adherence in prior year	Dichotomous: 1, 0	N/A	N/A	-365	-1	Search for evidence of days supply	1	N/A	Y
Bronchial thermoplasty	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N

Appendix J.4. Specifications for COVID-19 Covariates

COVID-19 Covariates

Covariate		Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	Exclude evidence of days supply if covariate includes dispensings	Number of instances the covariate should be found in evaluation period	Minimum Days Supplied	Include in model?
Evidence of smoking	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Evidence of obesity	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Congestive Heart Failure	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
MACE (Cardiac disease, coronary artery disease and acute coronary syndromes, myocardial infarctions, etc)	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Atrial Fib	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Bronchiectasis	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
Ideopathic pulmonary fibrosis	Dichotomous: 1, 1	Any	Any	-365	-1	N/A	1	N/A	N
COPD	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Asthma	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Pulmonary hypertension	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Pulmonary embolism	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Diabetes mellitus	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Hypertension	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Interstitial lung disease	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y

Appendix J.4. Specifications for COVID-19 Covariates
COVID-19 Covariates

Covariate		Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	Exclude evidence of days supply if covariate includes dispensings	Number of instances the covariate should be found in evaluation period	Minimum Days Supplied	Include in model?
Sarcoidosis	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
Stroke/cerebrovascular disease	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
HIV	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
Cancer/malignancy	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Solid organ transplant	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
Bone marrow transplant	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
Evidence of pregnancy during hospitalization	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Tuberculosis	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
Hemodialysis	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Cirrhosis of liver	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	Y
Previous COVID-19 infection [-365, -30]	Dichotomous: 1, 0	Any	Any	-365	-30	N/A	1	N/A	Y
Sickle cell disease	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
Cystic Fibrosis	Dichotomous: 1, 0	Any	Any	-365	-1	N/A	1	N/A	N
Therapeutic anticoagulants	Dichotomous: 1, 0	N/A	N/A	-365	-1	Search for evidence of days supply	1	N/A	Y
Immunosuppressants	Dichotomous: 1, 0	N/A	N/A	-365	-1	Search for evidence of days supply	1	N/A	Y

Appendix J.4. Specifications for COVID-19 Covariates

COVID-19 Covariates

Covariate		Care setting	Principal diagnosis position	Evaluation period start	Evaluation period end	Exclude evidence of days supply if covariate includes dispensings	Number of instances the covariate should be found in evaluation period	Minimum Days Supplied	Include in model?
Immunomodulators	Dichotomous: 1, 0	N/A	N/A	-365	-1	Search for evidence of days supply	1	N/A	Y
Immunostimulants	Dichotomous: 1, 0	N/A	N/A	-365	-1	Search for evidence of days supply	1	N/A	N
Glucocorticoid or oral corticosteroid dispensing [-15, -1]	Dichotomous: 1, 0	N/A	N/A	-15	-1	Search for evidence of days supply	1	N/A	Y
Monoclonal antibody dispensing [-15, -1]	Dichotomous: 1, 0	N/A	N/A	-15	-1	Search for evidence of days supply	1	N/A	N

Appendix J.5. Specifications for Combo Tool

Combo

Combination description	Combination date	RawDaysFromStartDt	RawDaysFromEndDt	RawExclusion	Combination Order	Encounter type for each combination component	Principal diagnosis for each combination component
Inpatient encounter	ADATEB	N/A	N/A	0	1	Inpatient hospital stay	N/A
Acute, Acute on Chronic, or Unspecified Respiratory Failure	ADATEB	0	0	0	2	ED*/IP*	Any
Intubation	ADATEB	0	0	0	3	ED*/IP*	Any
Mechanical ventilation	ADATEB	0	0	0	4	ED*/IP*	Any
Acute respiratory failure diagnosis code in the primary position	ADATEB	N/A	N/A	0	1	IPP	Primary
COPD diagnosis code in any position	ADATEB	N/A	N/A	0	2	IP*	Any
Acute respiratory failure diagnosis code in the primary position	ADATEB	N/A	N/A	0	1	IPP	Primary
Asthma diagnosis code in any position	ADATEB	N/A	N/A	0	2	IP*	Any

Appendix J.6. Specifications for COPD Exacerbation Episodes

COPD exacerbation episode definition

Outcome	Description	Care setting	Episode gap	Episode extension
Severe exacerbation event	COPD exacerbation code in any position OR COPD diagnosis code in the primary position OR Acute respiratory failure diagnosis code in the primary position + COPD diagnosis code in any position	IP	14 days	14 days
Moderate exacerbation event	COPD diagnosis code AND At least 3 days supply of oral corticosteroids [3,inf] within 7 days (+/- 7) or non-azithromycin antibiotics [3,15] days supply or azithromycin [3,13] days supply within 7 days (+/- 7) If oral corticosteroids are [14,inf] AND if another oral corticosteroid [14,inf] is dispensed in the previous 30 days, THEN don't count as exacerbation.	AV/ED/OA	14 days	14 days
Events will be evaluated sequentially for patients in the cohort from their left censor date (earliest time frame of required data) to their right censor date. In this query, this will be [index dt – 365, end of available data]. Events will be processed and event dates assigned to the earlier of the paired RX and DX. A valid RX code can be assigned to be paired with one DX code alone.				

Exacerbation episodes order of processing:

For every patient with qualifying index date, generate patient record of **exacerbation episodes** as follows:

Starting with leftmost censor date (365 days prior to 1st qualifying index) through available enrollment data, calculate exacerbation episodes by:

1. Find all evidence of serious exacerbations as defined by code lists, retaining admission date (ADATE) and discharge date (DDATE)
2. Find all evidence of moderate exacerbation events defined by code lists with required concomitant OCS/ABX medications, retaining ADATE and DDATE (which should be same for these events and **is the FIRST of the RX/DX pair to occur**)

This should result in various points-in-times (flags) for exacerbation events as described above.

3. Concatenate exacerbation episodes similarly to how treatment episodes are concatenated by a) dropping overlapping exacerbation events - i.e., no "stockpiling" equivalent, b) using gap parameter of 14 days to concatenate exacerbation events and c) adding final 14 day extension to last exacerbation event. These exacerbation episodes are formed from earliest to latest exacerbation using event date flags created in earlier steps. 14 day gap parameter looks ahead from DDATE.

If exacerbation episode has ANY serious exacerbation flag within it, assign episode as serious. Otherwise, assign as moderate.

Create standalone analytic dataset of PATID, exacerbation episode numbers, exacerbation episode start and end dates, exacerbation event dates (ADATE, DDATE) within episode, flag for serious or moderate exacerbations.

Appendix J.7. Specifications for Asthma Exacerbation Episodes

Asthma exacerbation episode definition

Outcome	Description	Care setting	Episode gap	Episode extension
Severe exacerbation event	Asthma ExacCodes in any position OR Asthma diagnosis in the primary position OR Acute respiratory failure diagnosis in the primary position + Asthma diagnosis in any position	IP	14 days	14 days
Moderate exacerbation event	Asthma ExacCodes AND OCS (+/- 7 days) OR Asthma Diag Codes AND OCS (+/- 7 days) Events will be evaluated sequentially for patients in the cohort from their left censor date (earliest time frame of required data) to their right censor date. In this query, this will be [index dt – 365, end of available data]. Events will be processed and event dates assigned to the earlier of the paired RX and DX. A valid RX code can be assigned to be paired with one DX code alone.	AV/ED/OA	14 days	14 days

Exacerbation episodes order of processing:

For every patient with qualifying index date, generate patient record of **exacerbation episodes** as follows:

Starting with leftmost censor date (365 days prior to 1st qualifying index) through available enrollment data, calculate exacerbation episodes by:

1. Find all evidence of serious exacerbations as defined by code lists, retaining admission date (ADATE) and discharge date (DDATE)
2. Find all evidence of moderate exacerbation events defined by code lists with required concomitant OCS/ABX medications, retaining ADATE and DDATE (which should be same for these events and **is the FIRST of the RX/DX pair to occur**)

This should result in various points-in-times (flags) for exacerbation events as described above.

3. Concatenate exacerbation episodes similarly to how treatment episodes are concatenated by a) dropping overlapping exacerbation events - i.e., no "stockpiling" equivalent, b) using gap parameter of 14 days to concatenate exacerbation events and c) adding final 14 day extension to last exacerbation event. These exacerbation episodes are formed from earliest to latest exacerbation using event date flags created in earlier steps. 14 day gap parameter looks ahead from DDATE.

If exacerbation episode has ANY serious exacerbation flag within it, assign episode as serious. Otherwise, assign as moderate.

Create standalone analytic dataset of PATID, exacerbation episode numbers, exacerbation episode start and end dates, exacerbation event dates (ADATE, DDATE) within episode, flag for serious or moderate exacerbations.

Appendix J.8. Specifications for Comorbidity Score

Comorbidity Score

Evaluation period start	Evaluation period end
-365	-1

Appendix J.9. Specifications for Health Services Utilization

Utilization				
Medical utilization evaluation period start	Medical utilization evaluation period end	Medical visit care settings	Drug utilization evaluation period start	Drug utilization evaluation period end
-365	-1	<ul style="list-style-type: none"> *Inpatient hospital stay; *Non-acute institutional stay; *Emergency department encounter; *Ambulatory visit; *Other ambulatory visit; *Any care setting 	-365	-1

Appendix J.10. Specifications for Stockpiling

Stockpiling						
Group	Stockpiling group	Same day dispensing processing for days supplied	Same day dispensing processing for amount supplied	Range of allowable days supplied values	Range of allowable amount supplied values	Overlap percentage*
COPD_exac	AZI_14ormore	Adds all days supplied values for dispensings in the same stockgroup on the same day	Adds all amount values for dispensings in the same stockgroup on the same day	14-HIGH	Default: 0-HIGH	Default
	AZIllessthan14	Adds all days supplied values for dispensings in the same stockgroup on the same day	Adds all amount values for dispensings in the same stockgroup on the same day	LOW-<14	Default: 0-HIGH	Default