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

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

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

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Overview for Request: cder_mpl1p_wp041

Request ID: cder_mpl1p_wp041_nsdv_v01

Request Description: Lyme disease can be prevented by taking one dose of doxycycline (200 mg or 4.4 mg/kg for persons <45 kg) when administered within 72 hours after a high-risk tick bite. To shed light on patterns of Lyme disease post-exposure prophylaxis (PEP) in the United States, we characterized the frequency and patterns of single dose doxycycline over time, and described characteristics of individuals with these dispensings in the Sentinel Distributed Database (SDD).

Sentinel Routine Querying Module: Cohort Identification and Descriptive Analysis (CIDA) module, version 9.5.0, with custom programming.

Data Source: We distributed this request to 7 Sentinel Data Partners on November 9, 2020. The study period included data from January 1, 2009 through February 29, 2020. Please see Appendix A for a list of dates of available data for each Data Partner.

Study Design: We identified individuals of all ages with an incident dispensing of single-dose doxycycline. We described single-dose doxycycline dispensing trends over time, as well as patient and dispensing characteristics (e.g., year of dispensing, sex, age, race, ethnicity, type of recent medical encounter). Due to the highly focal geographic distribution of Lyme disease, we examined single-dose doxycycline dispensings by state, urbanicity, and month. We also describe the number and proportion of individuals dispensed multiple courses of single-dose doxycycline, and performed a sensitivity analysis removing dispensings with evidence of obstetric or dermatologic conditions in the surrounding 30 days as single dose doxycycline can also be prescribed to treat certain obstetric and dermatologic conditions. This is a Type 1 analysis in the Query Request Package (QRP) documentation, modified with custom programming.

Exposure of Interest: Lyme disease PEP was our exposure of interest, and thus we examined qualifying dispensings of doxycycline (index) (≤ 200 mg, 1-day supply). To ensure the dispensing was isolated (i.e., only a single day supply), we defined incidence with a 1 day washout prior to and following the dispensing of interest, with consideration of any doxycycline dispensing. Specifically, we removed doxycycline dispensings with evidence of another dispensing (dispensing itself, or day supply of multi-day dispensing) in the day prior, and did not include doxycycline dispensings with evidence of another doxycycline dispensing the next day. Please see Appendix B for a list of generic and brand names of medical products.

Cohort Eligibility Criteria: We required cohort members to be enrolled in health plans with medical and drug coverage in the 30 days prior to and following their index dispensing; a gap in coverage of up to 45 days was allowed and treated as continuous enrollment. The following age groups were included in the cohort: 0-7, 8-18, 19-35, 36-50, 51-64, and 65+ years.

Baseline Characteristics: We assessed the baseline characteristics in two windows surrounding the index dispensing: 7 and 30 days prior to and following the index dispensing. The exposure related baseline characteristics of interest were: arthropod encounter, Lyme disease, other tickborne diseases, obstetric conditions, and dermatologic conditions. Additionally, we assessed the following Chronic Conditions Data Warehouse (CCW) conditions: acquired hypothyroidism, acute myocardial infarction, Alzheimer's disease or related senile dementia, anemia, asthma, atrial fibrillation, benign prostatic hyperplasia, cataract, chronic kidney disease, chronic obstructive pulmonary disease and bronchiectasis, colorectal cancer, depression, diabetes, endometrial cancer, glaucoma, heart failure, hip/pelvic fracture, hyperlipidemia, hypertension, ischemic heart disease, lung cancer, male/female breast cancer, obesity, osteoporosis, prostate cancer, rheumatoid arthritis/osteoarthritis, stroke/transient ischemic attack. Please see Appendix C for a list of International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-09-CM) diagnosis codes, International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) diagnosis codes, International Classification of Diseases, Tenth Revision, Procedure Coding System (ICD-10-PCS) procedure codes, Current Procedural Terminology, Fourth Edition (CPT-4) procedure codes, and Healthcare Common Procedure Coding System (HCPCS) procedure codes we used to define baseline characteristics in this request.

Overview for Request: cder_mpl1p_wp041

We evaluated the following characteristics on the index dispensing date: age, year, dispensing form, and dispensing dose. Dose was calculated as the strength of the NDC multiplied by the amount supplied for all routes except syrups and solutions, for which the strength multiplied by the liquid volume unit. For each member with a dispensing of interest, we evaluated: sex, race, ethnicity, and zip code. Zip code was used to assign state, Lyme disease incidence category, and urbanicity. To classify persons as living in an urban area (population $\geq 50,000$), suburban area (population $\geq 2,500$, $< 50,000$), or rural area (population $< 2,500$), we used U.S. Census Bureau 2010 Census Urban Area data supplemented by Uniform Data System (UDS) Mapper for zip code to zip code tabulation area (ZCTA) crosswalks. In cases of a zip code mapping to multiple urban categories, we assigned the category that represented the majority of Census blocks. In the Sentinel Common Data Model there is one zip code assigned per member and zip codes are updated and overwritten as the member's location changes over time. The location reflected in this report is the member's most recent zip code.

Sensitivity Analyses: We performed sensitivity analyses examining the first qualifying index dispensing of doxycycline per patient, and then all qualifying dispensings per patient. In the analysis examining all qualifying dispensings per patient we allowed cohort re-entry. Additionally, we conducted a second sensitivity analysis which excluded patients with any evidence of obstetric and dermatologic conditions in the 30 days prior to and post index dispensing. Cohort re-entry was allowed for sensitivity analyses. Please see Appendix D for a list of ICD-9-CM, ICD-10-CM, ICD-10-PCS, CPT-4, and HCPCS codes used to define this exclusion criteria in this request.

Limitations: The algorithms used to define the events are imperfect; thus, it is possible that there may be misclassification. Therefore, data should be interpreted with this limitation in mind. Although we stratified some estimates by race/ethnicity, please keep in mind that this information is not well captured in many systems. In addition, our program assigned state of residence and urbanicity using enrollee's most recent zip code, which may not reflect residence or place of exposure at the time of the single dose doxycycline dispensing. Please see Appendices E and F for detailed specifications of parameters used in the analyses for this request, and Appendices G and H for the study design diagrams.

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>).

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Table 1a. Aggregated Baseline Table for Single-dose Dispensings of Doxycycline (First Dispensing) in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020

Characteristic¹	Number	Percent
Number of dispensings	408,897	---
Number of unique patients	408,897	---
Dispensing Characteristics		
Capsule	245,899	60.1%
Suspension	32	0.0%
Tablet	162,001	39.6%
Syrup	965	0.2%
Dose: < 100 mg per day	838	0.2%
Dose: 100 mg per day	40,866	10.0%
Dose: >100 - <200 mg per day	1,119	0.3%
Dose: 200 mg per day	366,074	89.5%
Demographics		
Mean Age (Years)	Mean	Standard Deviation
	59.5	14.0
Age (Years)	Number	Percent
00-07	869	0.2%
08-18	10,294	2.5%
19-35	49,602	12.1%
36-50	61,656	15.1%
51-64	79,140	19.4%
65+	207,336	50.7%
Sex		
Female	230,506	56.4%
Male	178,391	43.6%
Year		
2009	12,336	3.0%
2010	18,812	4.6%
2011	25,005	6.1%
2012	26,094	6.4%
2013	33,102	8.1%
2014	40,213	9.8%
2015	43,512	10.6%
2016	43,590	10.7%
2017	60,879	14.9%
2018	49,392	12.1%
2019	55,594	13.6%
2020	368	0.1%
Race		
American Indian or Alaska Native	767	0.2%
Asian	5,537	1.4%
Black or African American	7,515	1.8%
Native Hawaiian or Other Pacific Islander	255	0.1%
White	224,809	55.0%
Unknown	170,014	41.6%
Ethnicity		
Hispanic Origin	4,237	1.0%
Non-Hispanic	201,200	49.2%
Unknown - Hispanic	203,460	49.8%
Non-Hispanic American Indian or Alaska Native	549	0.1%
Non-Hispanic Asian	763	0.2%
Non-Hispanic Black or African American	5,985	1.5%
Non-Hispanic Native Hawaiian or Other Pacific Islander	46	0.0%
Non-Hispanic White	193,857	47.4%

Table 1a. Aggregated Baseline Table for Single-dose Dispensings of Doxycycline (First Dispensing) in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020

	Number		Percent	
Urban (population >= 50,000)	228,321		55.8%	
Suburban (population >= 2,500, <50,000)	8,130		2.0%	
Rural (population < 2,500)	171,293		41.9%	
Zip Code Unknown or Urbanicity Not Available ²	1,153		0.3%	
Recorded History of:				
Before and After, Including the Dispensing Date³	7 Days		30 Days	
Arthropod encounter	189,137	46.3%	193,968	47.4%
Macroscopic examination for arthropod	4,691	1.1%	4,841	1.2%
Any tickborne disease (Lyme disease and other)	21,806	5.3%	36,697	9.0%
Lyme disease - all codes	21,496	5.3%	36,324	8.9%
Lyme disease; ICD-9	3,077	0.8%	4,523	1.1%
Lyme disease; ICD-10	0	0.0%	0	0.0%
Lyme disease, unspecified	2,549	0.6%	4,148	1.0%
Meningitis due to Lyme disease	*****	<0.1%	*****	<0.1%
Other neurologic disorders in Lyme disease	19	0.0%	41	0.0%
Arthritis due to Lyme disease	56	0.0%	107	0.0%
Other conditions associated with Lyme disease	176	0.0%	259	0.1%
Antibody; Borrelia burgdorferi (Lyme disease) confirmatory test (eg, Western Blot or immunoblot)	4,117	1.0%	7,994	2.0%
Antibody; Borrelia burgdorferi (Lyme disease)	14,249	3.5%	26,445	6.5%
Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, direct probe technique	*****	<0.1%	*****	<0.1%
Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, amplified probe technique	1,628	0.4%	1,871	0.5%
Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, quantification	0	0.0%	0	0.0%
Other tickborne diseases	490	0.1%	842	0.2%
Russian spring-summer (taiga) encephalitis	0	0.0%	0	0.0%
Louping ill	0	0.0%	0	0.0%
Central European encephalitis; ICD-9	0	0.0%	0	0.0%
Other specified tick-borne viral encephalitis	*****	<0.1%	*****	<0.1%
Unspecified tick-borne viral encephalitis	17	0.0%	20	0.0%
Spotted fevers	26	0.0%	48	0.0%
Ehrlichiosis, unspecified; ICD-9	0	0.0%	0	0.0%
Ehrlichiosis chaffeensis [E. chaffeensis]; ICD-9	19	0.0%	37	0.0%
Other ehrlichiosis; ICD-9	*****	<0.1%	22	0.0%
Tick-borne relapsing fever; ICD-9	123	0.0%	136	0.0%
Babesiosis; ICD-9	58	0.0%	144	0.0%
Tick-borne relapsing fever; ICD-10	65	0.0%	91	0.0%
Spotted fever due to Rickettsia rickettsii	54	0.0%	94	0.0%
Ehrlichiosis	0	0.0%	0	0.0%
Ehrlichiosis, unspecified; ICD-10	33	0.0%	77	0.0%
Ehrlichiosis chaffeensis [E. chaffeensis]; ICD-10	*****	<0.1%	16	0.0%

Table 1a. Aggregated Baseline Table for Single-dose Dispensings of Doxycycline (First Dispensing) in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020

Recorded History of:				
Before and After, Including the Dispensing Date³	7 Days		30 Days	
Other ehrlichiosis; ICD-10	29	0.0%	82	0.0%
Far Eastern tick-borne encephalitis [Russian spring-summer encephalitis]	*****	<0.1%	*****	<0.1%
Central European tick-borne encephalitis	*****	<0.1%	*****	<0.1%
Other tick-borne viral encephalitis	12	0.0%	15	0.0%
Tick-borne viral encephalitis, unspecified	31	0.0%	40	0.0%
Babesiosis; ICD-10	38	0.0%	106	0.0%
IgM, Tick-borne relapsing fever Borrelia group, antibody detection to 4 recombinant protein groups, by immunoblot	0	0.0%	*****	<0.1%
IgG, Tick-borne relapsing fever Borrelia group, antibody detection to 4 recombinant protein groups, by immunoblot	0	0.0%	*****	<0.1%
Any obstetric condition	25,386	6.2%	32,914	8.0%
Encounter for assisted reproductive fertility proc	1,538	0.4%	2,947	0.7%
Encounter for elective termination of pregnancy	4,076	1.0%	4,428	1.1%
Encounter for pregnancy test - result positive	532	0.1%	1,168	0.3%
Encounter for pregnancy test - result unknown	1,892	0.5%	4,550	1.1%
Encounter for preprocedural examinations	2,808	0.7%	5,375	1.3%
Encounter of female for testing for genetic diseas	483	0.1%	1,082	0.3%
Incomplete spontaneous abortion without complicati	1,769	0.4%	1,961	0.5%
Infertility	11,660	2.9%	16,567	4.1%
Less than 8 weeks gestation of pregnancy	1,285	0.3%	2,397	0.6%
Missed Abortion	7,080	1.7%	7,447	1.8%
Polyp of corpus uteri	1,526	0.4%	2,396	0.6%
Recurrent pregnancy loss	674	0.2%	1,190	0.3%
Any dermatologic condition	2,226	0.5%	5,521	1.4%
Acquired hypothyroidism	14,043	3.4%	30,796	7.5%
Acute myocardial infarction	867	0.2%	1,668	0.4%
Alzheimers disease and related disorders or senile	9,629	2.4%	16,595	4.1%
Anemia	15,391	3.8%	29,500	7.2%
Asthma	6,110	1.5%	13,209	3.2%
Atrial fibrillation	13,439	3.3%	22,613	5.5%
Benign prostatic hyperplasia	5,100	1.2%	12,763	3.1%
Cataract	7,177	1.8%	24,912	6.1%
Chronic kidney disease	14,312	3.5%	25,797	6.3%
Chronic obstructive pulmonary disease and bronchie	14,461	3.5%	24,430	6.0%
Colorectal cancer	1,190	0.3%	2,111	0.5%
Depression	18,381	4.5%	34,961	8.6%
Diabetes	25,250	6.2%	44,562	10.9%
Endometrial cancer	270	0.1%	630	0.2%
Glaucoma	4,188	1.0%	13,713	3.4%
Heart failure	10,663	2.6%	17,704	4.3%
Hip/pelvic fracture	487	0.1%	1,062	0.3%

Table 1a. Aggregated Baseline Table for Single-dose Dispensings of Doxycycline (First Dispensing) in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020

Recorded History of:				
Before and After, Including the Dispensing Date	7 Days		30 Days	
Hyperlipidemia	35,569	8.7%	81,713	20.0%
Hypertension	53,865	13.2%	102,520	25.1%
Ischemic heart disease	14,089	3.4%	29,057	7.1%
Lung cancer	951	0.2%	1,581	0.4%
Male/female breast cancer	2,784	0.7%	6,240	1.5%
Obesity	10,405	2.5%	19,882	4.9%
Osteoporosis	4,381	1.1%	11,017	2.7%
Prostate cancer	2,511	0.6%	5,777	1.4%
Rheumatoid arthritis/osteoarthritis	17,289	4.2%	40,842	10.0%
Stroke/transient ischemic attack	3,078	0.8%	6,876	1.7%
Encounter Type				
Inpatient encounter	9,766	2.4%	19,224	4.7%
Emergency department encounter	14,348	3.5%	30,275	7.4%
Ambulatory encounter	325,816	79.7%	369,980	90.5%
Other ambulatory encounter	94,629	23.1%	151,372	37.0%
Institutional stay encounter	2,621	0.6%	7,477	1.8%
No encounter	63,442	15.5%	27,730	6.8%

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

²Zip code not populated at the Data Partner or zip code provided did not map to an urbanicity

³Each stratification refers to a specific code which can be found in Appendix C

*****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 Single-dose Dispensings of Doxycycline (All Dispensings) in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020

Characteristic¹	Number	Percent
Number of dispensings	474,141	---
Number of unique patients	408,897	---
Number of unique patients with more than one valid dispensing	44,272	10.8%
Dispensing Characteristics		
Capsule	285,637	60.2%
Suspension	32	0.0%
Tablet	187,464	39.5%
Syrup	1,008	0.2%
Dose: < 100 mg per day	891	0.2%
Dose: 100 mg per day	46,488	9.8%
Dose: >100 - <200 mg per day	1,171	0.2%
Dose: 200 mg per day	425,591	89.8%
Demographics		
Mean Age (Years)	60.5	13.8
Age (Years)	Number	Percent
00-07	901	0.2%
08-18	10,664	2.2%
19-35	53,170	11.2%
36-50	67,629	14.3%
51-64	90,492	19.1%
65+	251,285	53.0%
Sex		
Female	230,506	56.4%
Male	178,391	43.6%
Year		
2009	12,792	2.7%
2010	20,021	4.2%
2011	27,330	5.8%
2012	29,107	6.1%
2013	37,117	7.8%
2014	45,776	9.7%
2015	50,422	10.6%
2016	51,113	10.8%
2017	72,996	15.4%
2018	59,289	12.5%
2019	67,760	14.3%
2020	418	0.1%
Race		
American Indian or Alaska Native	767	0.2%
Asian	5,537	1.4%
Black or African American	7,515	1.8%
Native Hawaiian or Other Pacific Islander	255	0.1%
White	224,809	55.0%
Unknown	170,014	41.6%
Ethnicity		
Hispanic Origin	4,237	1.0%
Non-Hispanic	201,200	49.2%
Unknown - Hispanic	203,460	49.8%
Non-Hispanic American Indian or Alaska Native	549	0.1%
Non-Hispanic Asian	763	0.2%

Table 1b. Aggregated Baseline Table for Single-dose Dispensings of Doxycycline (All Dispensings) in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020

Demographics				
	Number		Percent	
Non-Hispanic Black or African American	5,985		1.5%	
Non-Hispanic Native Hawaiian or Other Pacific Islander	46		0.0%	
Non-Hispanic White	193,857		47.4%	
Urban (population >= 50,000)	228,321		55.8%	
Suburban (population >= 2,500, <50,000)	8,130		2.0%	
Rural (population < 2,500)	171,293		41.9%	
Zip Code Unknown or Urbanicity Not Available ²	1,153		0.3%	
Recorded History of:				
Before and After, Including the Dispensing Date³	7 Days		30 Days	
Arthropod encounter	213,354	45.0%	220,701	46.5%
Macroscopic examination for arthropod	5,136	1.1%	5,340	1.1%
Any tickborne disease (Lyme disease and other)	24,398	5.1%	42,391	8.9%
Lyme disease - all codes	24,032	5.1%	41,935	8.8%
Lyme disease; ICD-9	3,333	0.7%	5,072	1.1%
Lyme disease; ICD-10	0	0.0%	0	0.0%
Lyme disease, unspecified	3,097	0.7%	5,170	1.1%
Meningitis due to Lyme disease	*****	<0.1%	*****	<0.1%
Other neurologic disorders in Lyme disease	29	0.0%	59	0.0%
Arthritis due to Lyme disease	66	0.0%	137	0.0%
Other conditions associated with Lyme disease	191	0.0%	294	0.1%
Antibody; Borrelia burgdorferi (Lyme disease) confirmatory test (eg, Western Blot or immunoblot)	4,685	1.0%	9,390	2.0%
Antibody; Borrelia burgdorferi (Lyme disease)	15,880	3.3%	30,483	6.4%
Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, direct probe technique	*****	<0.1%	*****	<0.1%
Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, amplified probe technique	1,757	0.4%	2,057	0.4%
Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, quantification	0	0.0%	0	0.0%
Other tickborne diseases	574	0.1%	1,026	0.2%
Russian spring-summer (taiga) encephalitis	0	0.0%	0	0.0%
Louping ill	0	0.0%	0	0.0%
Central European encephalitis; ICD-9	0	0.0%	0	0.0%
Other specified tick-borne viral encephalitis	*****	<0.1%	*****	<0.1%
Unspecified tick-borne viral encephalitis	17	0.0%	20	0.0%
Spotted fevers	32	0.0%	57	0.0%
Ehrlichiosis, unspecified; ICD-9	0	0.0%	0	0.0%
Ehrlichiosis chaffeensis [E. chaffeensis]; ICD-9	22	0.0%	42	0.0%
Other ehrlichiosis; ICD-9	11	0.0%	26	0.0%
Tick-borne relapsing fever; ICD-9	135	0.0%	151	0.0%
Babesiosis; ICD-9	69	0.0%	170	0.0%
Tick-borne relapsing fever; ICD-10	76	0.0%	109	0.0%
Spotted fever due to Rickettsia rickettsii	59	0.0%	110	0.0%
Ehrlichiosis	0	0.0%	0	0.0%

Table 1b. Aggregated Baseline Table for Single-dose Dispensings of Doxycycline (All Dispensings) in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020

Recorded History of:				
Before and After, Including the Dispensing Date³	7 Days		30 Days	
Ehrlichiosis, unspecified; ICD-10	41	0.0%	102	0.0%
Ehrlichiosis chafeensis [E. chafeensis]; ICD-10	*****	<0.1%	21	0.0%
Other ehrlichiosis; ICD-10	41	0.0%	117	0.0%
Far Eastern tick-borne encephalitis [Russian spring-summer encephalitis]	*****	<0.1%	*****	<0.1%
Central European tick-borne encephalitis	*****	<0.1%	*****	<0.1%
Other tick-borne viral encephalitis	14	0.0%	18	0.0%
Tick-borne viral encephalitis, unspecified	41	0.0%	52	0.0%
Babesiosis; ICD-10	45	0.0%	142	0.0%
IgM, Tick-borne relapsing fever Borrelia group, antibody detection to 4 recombinant protein groups, by immunoblot	0	0.0%	*****	<0.1%
IgG, Tick-borne relapsing fever Borrelia group, antibody detection to 4 recombinant protein groups, by immunoblot	0	0.0%	*****	<0.1%
Any obstetric condition	28,121	5.9%	37,443	7.9%
Encounter for assisted reproductive fertility proc	2,079	0.4%	4,101	0.9%
Encounter for elective termination of pregnancy	4,273	0.9%	4,647	1.0%
Encounter for pregnancy test - result positive	555	0.1%	1,249	0.3%
Encounter for pregnancy test - result unknown	2,225	0.5%	5,852	1.2%
Encounter for preprocedural examinations	3,142	0.7%	6,224	1.3%
Encounter of female for testing for genetic diseas	509	0.1%	1,162	0.2%
Incomplete spontaneous abortion without complicati	1,855	0.4%	2,064	0.4%
Infertility	13,193	2.8%	19,374	4.1%
Less than 8 weeks gestation of pregnancy	1,350	0.3%	2,745	0.6%
Missed Abortion	7,419	1.6%	7,888	1.7%
Polyp of corpus uteri	1,781	0.4%	2,870	0.6%
Recurrent pregnancy loss	789	0.2%	1,454	0.3%
Any dermatologic condition	2,481	0.5%	6,337	1.3%
Acquired hypothyroidism	15,926	3.4%	35,706	7.5%
Acute myocardial infarction	926	0.2%	1,822	0.4%
Alzheimers disease and related disorders or senile	10,517	2.2%	18,298	3.9%
Anemia	17,080	3.6%	33,354	7.0%
Asthma	6,831	1.4%	15,029	3.2%
Atrial fibrillation	15,445	3.3%	26,465	5.6%
Benign prostatic hyperplasia	6,003	1.3%	15,289	3.2%
Cataract	8,832	1.9%	30,608	6.5%
Chronic kidney disease	15,867	3.3%	29,153	6.1%
Chronic obstructive pulmonary disease and bronchie	15,770	3.3%	27,300	5.8%
Colorectal cancer	1,370	0.3%	2,467	0.5%
Depression	20,872	4.4%	39,891	8.4%
Diabetes	28,260	6.0%	50,625	10.7%
Endometrial cancer	303	0.1%	717	0.2%
Glaucoma	5,110	1.1%	16,805	3.5%
Heart failure	11,541	2.4%	19,560	4.1%
Hip/pelvic fracture	517	0.1%	1,157	0.2%
Hyperlipidemia	40,926	8.6%	95,797	20.2%

Table 1b. Aggregated Baseline Table for Single-dose Dispensings of Doxycycline (All Dispensings) in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020

Recorded History of:				
Before and After, Including the Dispensing Date	7 Days		30 Days	
Hypertension	61,251	12.9%	119,210	25.1%
Ischemic heart disease	15,841	3.3%	33,429	7.1%
Lung cancer	1,048	0.2%	1,776	0.4%
Male/female breast cancer	3,222	0.7%	7,390	1.6%
Obesity	11,516	2.4%	22,377	4.7%
Osteoporosis	5,119	1.1%	13,147	2.8%
Prostate cancer	2,989	0.6%	7,022	1.5%
Rheumatoid arthritis/osteoarthritis	20,178	4.3%	48,057	10.1%
Stroke/transient ischemic attack	3,453	0.7%	7,835	1.7%
Encounter Type				
Inpatient encounter	10,242	2.2%	20,745	4.4%
Emergency department encounter	15,668	3.3%	33,976	7.2%
Ambulatory encounter	372,345	78.5%	428,212	90.3%
Other ambulatory encounter	106,801	22.5%	174,519	36.8%
Institutional stay encounter	2,752	0.6%	7,993	1.7%
No encounter	79,704	16.8%	33,294	7.0%

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

²Zip code not populated at the Data Partner or zip code provided did not map to an urbanicity

³Each stratification refers to a specific code which can be found in Appendix C

****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 Single-dose Dispensings of Doxycycline (No obstetric or Dermatologic Conditions in Surrounding 30 days) in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020

Characteristic¹	Number	Percent
Number of dispensings	431,047	---
Number of unique patients	372,287	---
Number of unique patients with more than one valid dispensing	39,726	10.70%
Dispensing Characteristics		
Capsule	264,959	61.5%
Suspension	*****	<0.1%
Tablet	165,055	38.3%
Syrup	*****	0.2%
Dose: < 100 mg per day	770	0.2%
Dose: 100 mg per day	37,510	8.7%
Dose: >100 - <200 mg per day	1,120	0.3%
Dose: 200 mg per day	391,647	90.9%
Demographics		
Mean Age (Years)	62.5	13.7
Age (Years)	Number	Percent
00-07	*****	<0.1%
08-18	*****	2.3%
19-35	32,854	7.6%
36-50	53,139	12.3%
51-64	88,371	20.5%
65+	245,726	57.0%
Sex		
Female	196,753	52.8%
Male	175,534	47.2%
Year		
2009	10,685	2.5%
2010	17,562	4.1%
2011	24,801	5.8%
2012	26,382	6.1%
2013	33,450	7.8%
2014	41,530	9.6%
2015	45,598	10.6%
2016	46,219	10.7%
2017	67,580	15.7%
2018	54,071	12.5%
2019	62,862	14.6%
2020	307	0.1%
Race		
American Indian or Alaska Native	688	0.2%
Asian	2,228	0.6%
Black or African American	6,207	1.7%
Native Hawaiian or Other Pacific Islander	140	0.0%
White	215,419	57.9%
Unknown	147,605	39.6%

Table 1c. Aggregated Baseline Table for Single-dose Dispensings of Doxycycline (No obstetric or Dermatologic Conditions in Surrounding 30 days) in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020

Demographics				
Ethnicity	Number		Percent	
Hispanic Origin	2,232		0.6%	
Non-Hispanic	196,248		52.7%	
Unknown - Hispanic	173,807		46.7%	
Non-Hispanic American Indian or Alaska Native	531		0.1%	
Non-Hispanic Asian	737		0.2%	
Non-Hispanic Black or African American	5,552		1.5%	
Non-Hispanic Native Hawaiian or Other Pacific Islander	46		0.0%	
Non-Hispanic White	189,382		50.9%	
Urban (population >= 50,000)	198,967		53.4%	
Suburban (population >= 2,500, <50,000)	7,870		2.1%	
Rural (population < 2,500)	164,431		44.2%	
Zip Code Unknown or Urbanicity Not Available ²	1,019		0.3%	
Recorded History of:				
Before and After, Including the Dispensing Date³	7 Days		30 Days	
Arthropod encounter	209,179	48.5%	216,318	50.2%
Macroscopic examination for arthropod	5,001	1.2%	5,198	1.2%
Any tickborne disease (Lyme disease and other)	23,837	5.5%	41,391	9.6%
Lyme disease - all codes	23,475	5.4%	40,938	9.5%
Lyme disease; ICD-9	3,239	0.8%	4,936	1.1%
Lyme disease; ICD-10	0	0.0%	0	0.0%
Lyme disease, unspecified	3,031	0.7%	5,048	1.2%
Meningitis due to Lyme disease	*****	<0.1%	*****	<0.1%
Other neurologic disorders in Lyme disease	29	0.0%	*****	<0.1%
Arthritis due to Lyme disease	*****	<0.1%	*****	<0.1%
Other conditions associated with Lyme disease	*****	<0.1%	*****	<0.1%
Antibody; Borrelia burgdorferi (Lyme disease) confirmatory test (eg, Western Blot or immunoblot)	4,575	1.1%	9,171	2.1%
Antibody; Borrelia burgdorferi (Lyme disease)	15,525	3.6%	29,775	6.9%
Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, direct probe technique	*****	<0.1%	*****	<0.1%
Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, amplified probe technique	1,710	0.4%	1,998	0.5%
Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, quantification	0	0.0%	0	0.0%
Other tickborne diseases	*****	0.1%	1,015	0.2%
Russian spring-summer (taiga) encephalitis	0	0.0%	0	0.0%
Louping ill	0	0.0%	0	0.0%
Central European encephalitis; ICD-9	0	0.0%	0	0.0%
Other specified tick-borne viral encephalitis	*****	<0.1%	*****	<0.1%
Unspecified tick-borne viral encephalitis	17	0.0%	20	0.0%
Spotted fevers	32	0.0%	57	0.0%
Ehrlichiosis, unspecified; ICD-9	0	0.0%	0	0.0%
Ehrlichiosis chaffeensis [E. chaffeensis]; ICD-9	*****	<0.1%	*****	<0.1%
Other ehrlichiosis; ICD-9	11	0.0%	26	0.0%

Table 1c. Aggregated Baseline Table for Single-dose Dispensings of Doxycycline (No obstetric or Dermatologic Conditions in Surrounding 30 days) in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020

Recorded History of:				
Before and After, Including the Dispensing Date³	7 Days		30 Days	
Tick-borne relapsing fever; ICD-9	*****	<0.1%	*****	<0.1%
Babesiosis; ICD-9	*****	<0.1%	*****	<0.1%
Tick-borne relapsing fever; ICD-10	76	0.0%	109	0.0%
Spotted fever due to Rickettsia rickettsii	*****	<0.1%	*****	<0.1%
Ehrlichiosis	0	0.0%	0	0.0%
Ehrlichiosis, unspecified; ICD-10	*****	<0.1%	*****	<0.1%
Ehrlichiosis chafeensis [E. chafeensis]; ICD-10	*****	<0.1%	*****	<0.1%
Other ehrlichiosis; ICD-10	*****	<0.1%	*****	<0.1%
Far Eastern tick-borne encephalitis [Russian spring-summer encephalitis]	*****	<0.1%	*****	<0.1%
Central European tick-borne encephalitis	*****	<0.1%	*****	<0.1%
Other tick-borne viral encephalitis	14	0.0%	18	0.0%
Tick-borne viral encephalitis, unspecified	41	0.0%	52	0.0%
Babesiosis; ICD-10	*****	<0.1%	*****	<0.1%
IgM, Tick-borne relapsing fever Borrelia group, antibody detection to 4 recombinant protein groups, by immunoblot	0	0.0%	*****	<0.1%
IgG, Tick-borne relapsing fever Borrelia group, antibody detection to 4 recombinant protein groups, by immunoblot	0	0.0%	*****	<0.1%
Acquired hypothyroidism	14,247	3.3%	32,332	7.5%
Acute myocardial infarction	906	0.2%	1,779	0.4%
Alzheimers disease and related disorders or senile	10,334	2.4%	17,947	4.2%
Anemia	15,879	3.7%	31,089	7.2%
Asthma	5,913	1.4%	13,425	3.1%
Atrial fibrillation	15,028	3.5%	25,769	6.0%
Benign prostatic hyperplasia	5,798	1.3%	14,793	3.4%
Cataract	8,456	2.0%	29,548	6.9%
Chronic kidney disease	15,343	3.6%	28,124	6.5%
Chronic obstructive pulmonary disease and bronchie	15,401	3.6%	26,555	6.2%
Colorectal cancer	1,245	0.3%	2,300	0.5%
Depression	19,381	4.5%	37,024	8.6%
Diabetes	27,136	6.3%	48,699	11.3%
Endometrial cancer	252	0.1%	625	0.1%
Glaucoma	4,931	1.1%	16,275	3.8%
Heart failure	11,286	2.6%	19,080	4.4%
Hip/pelvic fracture	499	0.1%	1,117	0.3%
Hyperlipidemia	39,469	9.2%	92,321	21.4%
Hypertension	58,979	13.7%	114,823	26.6%
Ischemic heart disease	15,350	3.6%	32,375	7.5%
Lung cancer	1,011	0.2%	1,701	0.4%
Male/female breast cancer	3,007	0.7%	6,972	1.6%
Obesity	9,962	2.3%	19,534	4.5%
Osteoporosis	4,959	1.2%	12,712	2.9%
Prostate cancer	2,905	0.7%	6,838	1.6%
Rheumatoid arthritis/osteoarthritis	19,182	4.5%	45,919	10.7%

Table 1c. Aggregated Baseline Table for Single-dose Dispensings of Doxycycline (No obstetric or Dermatologic Conditions in Surrounding 30 days) in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020

Stroke/transient ischemic attack	3,350	0.8%	7,600	1.8%
Encounter Type				
Inpatient encounter	9,591	2.2%	19,218	4.5%
Emergency department encounter	13,260	3.1%	29,684	6.9%
Ambulatory encounter	334,151	77.5%	385,687	89.5%
Other ambulatory encounter	88,872	20.6%	148,485	34.4%
Institutional stay encounter	2,635	0.6%	7,639	1.8%
No encounter	76,784	17.8%	33,294	7.7%

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

²Zip code not populated at the Data Partner or zip code provided did not map to an urbanicity

³Each stratification refers to a specific code which can be found in Appendix C

*****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 2. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 Overall

	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
First Dispensing	408,897	408,897	193,885,775	613,134,895.5	1.00	21.09	6.67
All	408,897	474,141	193,885,775	614,262,849.4	1.16	21.09	7.72
No obstetric or dermatologic conditions in surrounding 30 days	372,287	431,047	193,775,157	604,696,947.9	1.16	19.21	7.13

¹Eligible Members and Member-Years are reflective of the number of patients that met all cohort entry criteria on at least one day during the query period

Table 3. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Sex

Sex	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
First Dispensing							
Female	230,506	230,506	100,346,330	326,893,154.6	1.00	22.97	7.05
Male	178,391	178,391	93,539,445	286,241,740.9	1.00	19.07	6.23
All Dispensings							
Female	230,506	266,156	100,346,330	327,533,565.0	1.15	22.97	8.13
Male	178,391	207,985	93,539,445	286,729,284.4	1.17	19.07	7.25
No obstetric or dermatologic conditions in surrounding 30 days							
Female	196,753	226,722	100,265,207	320,928,772.7	1.15	19.62	7.06
Male	175,534	204,325	93,509,950	283,768,175.2	1.16	18.77	7.20

¹Eligible Members and Member-Years are reflective of the number of patients that met all cohort entry criteria on at least one day during the query period

Table 4. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Age

Age Group (Years)	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
First Dispensing							
00-07	869	869	18,013,364	35,424,410.3	1.00	0.48	0.25
08-18	10,294	10,294	25,096,118	56,788,704.9	1.00	4.10	1.81
19-35	49,602	49,602	52,461,518	102,638,376.6	1.00	9.45	4.83
36-50	61,656	61,656	43,700,644	104,708,939.7	1.00	14.11	5.89
51-64	79,140	79,140	37,882,117	104,282,216.8	1.00	20.89	7.59
65+	207,336	207,336	50,169,872	209,292,247.3	1.00	41.33	9.91
All Dispensings							
00-07	869	901	18,013,364	35,425,329.1	1.04	0.48	0.25
08-18	10,303	10,664	25,096,437	56,809,824.4	1.04	4.11	1.88
19-35	49,653	53,170	52,464,405	102,735,199.5	1.07	9.46	5.18
36-50	62,147	67,629	43,712,768	104,877,070.1	1.09	14.22	6.45
51-64	79,920	90,492	37,894,906	104,496,685.5	1.13	21.09	8.66
65+	208,375	251,285	50,182,624	209,918,740.8	1.21	41.52	11.97
No obstetric or dermatologic conditions in surrounding 30 days							
00-07	*****	*****	*****	*****	1.04	0.48	0.25
08-18	*****	*****	*****	*****	1.03	3.88	1.81
19-35	31,649	32,854	52,400,320	100,468,123.1	1.04	6.04	3.27
36-50	49,728	53,139	43,682,411	103,177,589.4	1.07	11.38	5.15
51-64	78,130	88,371	37,878,326	103,188,261.2	1.13	20.63	8.56
65+	204,225	245,726	50,166,424	206,937,100.9	1.20	40.71	11.87

¹Eligible Members and Member-Years are reflective of the number of patients that met all cohort entry criteria on at least one day during the query period

*****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 5. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year

Year	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
First Dispensing							
2009	12,336	12,336	46,399,415	36,307,002.0	1.00	2.66	3.40
2010	18,812	18,812	62,286,209	49,709,842.6	1.00	3.02	3.78
2011	25,005	25,005	61,880,046	50,861,699.5	1.00	4.04	4.92
2012	26,094	26,094	61,848,513	51,190,515.4	1.00	4.22	5.10
2013	33,102	33,102	69,198,898	56,917,339.6	1.00	4.78	5.82
2014	40,213	40,213	72,358,260	59,400,001.9	1.00	5.56	6.77
2015	43,512	43,512	74,467,855	61,281,375.0	1.00	5.84	7.10
2016	43,590	43,590	77,199,416	63,805,271.0	1.00	5.65	6.83
2017	60,879	60,879	77,681,711	64,076,099.6	1.00	7.84	9.50
2018	49,392	49,392	75,234,733	62,204,404.0	1.00	6.57	7.94
2019	55,594	55,594	73,872,293	56,242,895.1	1.00	7.53	9.88
2020	368	368	20,333,968	1,138,449.8	1.00	0.18	3.23
All							
2009	12,336	12,792	46,399,415	36,312,598.5	1.04	2.66	3.52
2010	19,197	20,021	62,296,617	49,727,738.8	1.04	3.08	4.03
2011	26,095	27,330	61,904,951	50,894,749.7	1.05	4.22	5.37
2012	27,768	29,107	61,891,966	51,242,554.1	1.05	4.49	5.68
2013	35,400	37,117	69,259,089	56,987,237.1	1.05	5.11	6.51
2014	43,426	45,776	72,440,122	59,493,372.0	1.05	5.99	7.69
2015	47,734	50,422	74,574,984	61,399,646.0	1.06	6.40	8.21
2016	48,491	51,113	77,334,046	63,950,331.6	1.05	6.27	7.99
2017	68,405	72,996	77,840,004	64,251,300.6	1.07	8.79	11.36
2018	56,202	59,289	75,429,535	62,410,047.0	1.05	7.45	9.50
2019	64,013	67,760	74,089,096	56,451,791.2	1.06	8.64	12.00
2020	412	418	20,394,736	1,141,482.7	1.01	0.20	3.66

Table 5. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year

Year	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
No obstetric or dermatologic conditions in surrounding 30 days							
2009	10,359	10,685	46,356,610	35,728,166.8	1.03	2.23	2.99
2010	16,863	17,562	62,250,527	48,936,299.4	1.04	2.71	3.59
2011	23,688	24,801	61,858,985	50,083,798.9	1.05	3.83	4.95
2012	25,167	26,382	61,846,085	50,405,571.5	1.05	4.07	5.23
2013	31,962	33,450	69,206,358	56,013,746.5	1.05	4.62	5.97
2014	39,493	41,530	72,381,660	58,467,606.1	1.05	5.46	7.10
2015	43,293	45,598	74,519,539	60,381,568.6	1.05	5.81	7.55
2016	43,980	46,219	77,281,896	63,080,843.5	1.05	5.69	7.33
2017	63,520	67,580	77,787,103	63,350,843.5	1.06	8.17	10.67
2018	51,578	54,071	75,377,215	61,511,614.6	1.05	6.84	8.79
2019	59,582	62,862	74,034,023	55,613,012.4	1.06	8.05	11.30
2020	307	307	20,154,517	1,123,876.2	1.00	0.15	2.73

¹Eligible Members and Member-Years are reflective of the number of patients that met all cohort entry criteria on at least one day during the query period

Table 6. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year-Month

Month	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
First Dispensing							
2009							
January	295	295	38,858,920	2,951,346.2	1.00	0.08	1.00
February	343	343	37,519,885	2,863,556.3	1.00	0.09	1.20
March	744	744	38,653,462	3,155,314.0	1.00	0.19	2.36
April	1,512	1,512	37,308,768	3,047,112.8	1.00	0.41	4.96
May	2,456	2,456	38,436,933	3,149,499.0	1.00	0.64	7.80
June	1,954	1,954	36,852,847	3,009,332.0	1.00	0.53	6.49
July	1,054	1,054	38,143,373	3,100,985.4	1.00	0.28	3.40
August	571	571	38,059,885	3,101,395.6	1.00	0.15	1.84
September	420	420	36,617,711	2,990,159.4	1.00	0.11	1.40
October	1,093	1,093	37,867,441	3,102,754.6	1.00	0.29	3.52
November	1,522	1,522	36,831,438	3,009,736.0	1.00	0.41	5.06
December	372	372	37,700,917	2,825,810.8	1.00	0.10	1.32
2010							
January	316	316	53,036,591	2,850,456.8	1.00	0.06	1.11
February	538	538	51,976,847	3,969,169.5	1.00	0.10	1.36
March	1,298	1,298	53,305,291	4,375,768.6	1.00	0.24	2.97
April	3,000	3,000	51,738,062	4,230,337.3	1.00	0.58	7.09
May	3,351	3,351	53,194,121	4,378,576.8	1.00	0.63	7.65
June	2,560	2,560	51,504,492	4,211,028.3	1.00	0.50	6.08
July	1,280	1,280	53,218,349	4,352,268.0	1.00	0.24	2.94
August	949	949	53,242,777	4,362,669.8	1.00	0.18	2.18
September	809	809	51,602,291	4,217,780.1	1.00	0.16	1.92
October	2,149	2,149	53,217,557	4,381,135.4	1.00	0.40	4.91
November	2,003	2,003	52,029,195	4,255,009.2	1.00	0.38	4.71
December	559	559	53,202,400	4,125,642.7	1.00	0.11	1.35

Table 6. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year-Month

Month	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
First Dispensing							
2011							
January	540	540	52,845,235	4,112,162.6	1.00	0.10	1.31
February	578	578	51,627,356	3,942,309.3	1.00	0.11	1.47
March	1,016	1,016	52,942,055	4,357,763.2	1.00	0.19	2.33
April	2,625	2,625	51,593,943	4,217,659.4	1.00	0.51	6.22
May	4,721	4,721	52,955,233	4,361,705.6	1.00	0.89	10.82
June	3,670	3,670	51,280,671	4,191,528.3	1.00	0.72	8.76
July	1,737	1,737	52,957,377	4,335,416.9	1.00	0.33	4.01
August	1,098	1,098	52,985,186	4,353,346.9	1.00	0.21	2.52
September	868	868	51,572,899	4,215,184.8	1.00	0.17	2.06
October	3,019	3,019	53,254,965	4,382,007.2	1.00	0.57	6.89
November	3,770	3,770	52,113,768	4,260,678.8	1.00	0.72	8.85
December	1,363	1,363	53,262,893	4,131,936.5	1.00	0.26	3.30
2012							
January	660	660	52,919,848	4,122,482.4	1.00	0.12	1.60
February	799	799	51,722,624	4,089,362.5	1.00	0.15	1.95
March	2,753	2,753	53,035,053	4,366,970.8	1.00	0.52	6.30
April	3,376	3,376	51,716,402	4,227,208.1	1.00	0.65	7.99
May	5,221	5,221	53,052,527	4,371,959.9	1.00	0.98	11.94
June	3,252	3,252	51,459,794	4,206,188.4	1.00	0.63	7.73
July	1,816	1,816	53,152,239	4,351,306.4	1.00	0.34	4.17
August	1,271	1,271	53,223,361	4,367,940.6	1.00	0.24	2.91
September	1,031	1,031	51,776,147	4,230,049.8	1.00	0.20	2.44
October	2,561	2,561	53,331,668	4,393,254.0	1.00	0.48	5.83
November	2,379	2,379	52,173,358	4,266,987.9	1.00	0.46	5.58
December	975	975	53,353,101	4,196,804.6	1.00	0.18	2.32

Table 6. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year-Month

Month	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
First Dispensing							
2013							
January	882	882	59,366,151	4,200,991.5	1.00	0.15	2.10
February	721	721	58,190,018	4,442,364.7	1.00	0.12	1.62
March	959	959	59,519,113	4,908,441.0	1.00	0.16	1.95
April	3,342	3,342	58,060,924	4,748,886.9	1.00	0.58	7.04
May	6,228	6,228	59,525,658	4,915,057.8	1.00	1.05	12.67
June	6,053	6,053	57,890,563	4,733,824.6	1.00	1.05	12.79
July	3,225	3,225	59,896,113	4,894,731.0	1.00	0.54	6.59
August	1,680	1,680	59,904,006	4,929,728.8	1.00	0.28	3.41
September	1,360	1,360	58,304,867	4,768,237.8	1.00	0.23	2.85
October	4,603	4,603	59,985,117	4,946,144.4	1.00	0.77	9.31
November	3,131	3,131	58,642,567	4,795,513.5	1.00	0.53	6.53
December	918	918	60,014,710	4,633,417.8	1.00	0.15	1.98
2014							
January	878	878	61,635,831	4,639,518.0	1.00	0.14	1.89
February	886	886	60,307,674	4,605,382.9	1.00	0.15	1.92
March	1,101	1,101	61,877,391	5,095,600.4	1.00	0.18	2.16
April	4,874	4,874	60,269,382	4,929,676.0	1.00	0.81	9.89
May	9,857	9,857	62,257,410	5,115,000.3	1.00	1.58	19.27
June	6,939	6,939	60,381,082	4,939,081.0	1.00	1.15	14.05
July	3,397	3,397	62,261,431	5,095,264.0	1.00	0.55	6.67
August	1,654	1,654	62,160,693	5,109,749.1	1.00	0.27	3.24
September	1,424	1,424	60,466,313	4,945,510.7	1.00	0.24	2.88
October	4,681	4,681	62,277,541	5,132,518.2	1.00	0.75	9.12
November	3,187	3,187	60,680,989	4,964,168.3	1.00	0.53	6.42
December	1,335	1,335	62,241,442	4,828,532.9	1.00	0.21	2.76



Table 6. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year-Month

Month	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
First Dispensing							
2015							
January	945	945	63,310,493	4,834,654.7	1.00	0.15	1.95
February	919	919	61,965,472	4,731,308.9	1.00	0.15	1.94
March	1,278	1,278	63,962,674	5,244,824.1	1.00	0.20	2.44
April	4,353	4,353	62,324,379	5,098,263.7	1.00	0.70	8.54
May	8,840	8,840	63,979,536	5,271,185.6	1.00	1.38	16.77
June	7,640	7,640	62,084,074	5,078,118.5	1.00	1.23	15.04
July	3,678	3,678	64,007,326	5,249,926.9	1.00	0.57	7.01
August	1,943	1,943	64,046,260	5,266,445.2	1.00	0.30	3.69
September	1,528	1,528	62,349,848	5,099,540.7	1.00	0.25	3.00
October	4,221	4,221	64,309,306	5,291,683.8	1.00	0.66	7.98
November	5,646	5,646	62,719,382	5,130,403.0	1.00	0.90	11.00
December	2,521	2,521	64,388,190	4,985,020.0	1.00	0.39	5.06
2016							
January	1,119	1,119	65,780,632	5,000,514.7	1.00	0.17	2.24
February	1,266	1,266	64,451,764	5,095,589.3	1.00	0.20	2.48
March	3,339	3,339	66,319,299	5,458,327.0	1.00	0.50	6.12
April	4,617	4,617	64,693,667	5,291,296.7	1.00	0.71	8.73
May	6,791	6,791	66,381,036	5,475,792.3	1.00	1.02	12.40
June	6,473	6,473	64,560,443	5,280,321.5	1.00	1.00	12.26
July	3,494	3,494	66,554,174	5,460,119.2	1.00	0.52	6.40
August	2,007	2,007	66,614,074	5,483,791.0	1.00	0.30	3.66
September	1,691	1,691	64,870,466	5,304,533.7	1.00	0.26	3.19
October	5,253	5,253	66,905,628	5,505,735.7	1.00	0.79	9.54
November	6,016	6,016	65,320,524	5,341,234.3	1.00	0.92	11.26
December	1,524	1,524	67,010,054	5,108,015.7	1.00	0.23	2.98



Table 6. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year-Month

Month	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
First Dispensing							
2017							
January	1,453	1,453	67,003,519	5,120,127.4	1.00	0.22	2.84
February	1,917	1,917	65,638,107	5,008,216.9	1.00	0.29	3.83
March	2,425	2,425	67,226,982	5,539,483.1	1.00	0.36	4.38
April	7,766	7,766	65,553,792	5,359,037.6	1.00	1.18	14.49
May	12,809	12,809	67,093,817	5,537,824.2	1.00	1.91	23.13
June	9,655	9,655	65,173,274	5,328,326.3	1.00	1.48	18.12
July	5,155	5,155	67,091,518	5,511,843.4	1.00	0.77	9.35
August	2,673	2,673	67,175,401	5,494,496.5	1.00	0.40	4.86
September	1,717	1,717	64,983,926	5,312,818.3	1.00	0.26	3.23
October	7,052	7,052	66,846,824	5,510,710.7	1.00	1.05	12.80
November	6,418	6,418	65,276,117	5,336,107.4	1.00	0.98	12.03
December	1,839	1,839	66,865,529	5,017,107.9	1.00	0.28	3.67
2018							
January	1,297	1,297	64,774,565	5,014,193.1	1.00	0.20	2.59
February	1,837	1,837	63,441,692	4,841,079.4	1.00	0.29	3.79
March	2,080	2,080	64,916,852	5,348,368.7	1.00	0.32	3.89
April	4,764	4,764	63,248,643	5,170,816.8	1.00	0.75	9.21
May	13,388	13,388	64,810,419	5,344,338.2	1.00	2.07	25.05
June	8,795	8,795	62,867,482	5,139,281.8	1.00	1.40	17.11
July	4,431	4,431	64,814,586	5,316,070.4	1.00	0.68	8.34
August	2,705	2,705	64,903,565	5,334,400.8	1.00	0.42	5.07
September	1,865	1,865	63,134,046	5,161,793.9	1.00	0.30	3.61
October	3,782	3,782	65,036,098	5,356,302.2	1.00	0.58	7.06
November	3,004	3,004	63,494,541	5,190,923.4	1.00	0.47	5.79
December	1,444	1,444	64,986,869	4,986,835.5	1.00	0.22	2.90



Table 6. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year-Month

Month	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
First Dispensing							
2019							
January	1,469	1,469	64,600,102	4,983,819.7	1.00	0.23	2.95
February	1,401	1,401	63,288,400	4,828,971.2	1.00	0.22	2.90
March	2,083	2,083	64,742,267	5,335,839.5	1.00	0.32	3.90
April	7,782	7,782	63,081,709	5,156,402.6	1.00	1.23	15.09
May	12,100	12,100	64,622,148	5,326,436.1	1.00	1.87	22.72
June	10,053	10,053	62,765,295	5,130,119.9	1.00	1.60	19.60
July	5,501	5,501	64,509,400	4,960,906.4	1.00	0.85	11.09
August	2,552	2,552	60,333,724	4,959,333.9	1.00	0.42	5.15
September	2,011	2,011	58,672,770	4,795,012.3	1.00	0.34	4.19
October	6,477	6,477	60,336,784	4,615,062.3	1.00	1.07	14.03
November	3,748	3,748	54,666,880	4,467,293.1	1.00	0.69	8.39
December	417	417	55,362,014	1,683,698.2	1.00	0.08	2.48
2020							
January	193	193	20,328,444	553,570.3	1.00	0.09	3.49
February	175	175	7,385,104	584,879.6	1.00	0.24	2.99
All Dispensings							
2009							
January	295	299	38,858,920	2,951,356.9	1.01	0.08	1.01
February	347	350	37,520,173	2,863,589.6	1.01	0.09	1.22
March	750	750	38,654,091	3,155,389.3	1.00	0.19	2.38
April	1,532	1,542	37,310,114	3,047,269.0	1.01	0.41	5.06
May	2,488	2,510	38,439,787	3,149,830.7	1.01	0.65	7.97
June	2,014	2,029	36,858,022	3,009,829.8	1.01	0.55	6.74
July	1,091	1,100	38,150,490	3,101,617.2	1.01	0.29	3.55
August	604	607	38,067,932	3,102,083.5	1.00	0.16	1.96
September	444	447	36,626,052	2,990,855.0	1.01	0.12	1.49
October	1,151	1,158	37,876,187	3,103,521.0	1.01	0.30	3.73
November	1,596	1,606	36,841,081	3,010,584.8	1.01	0.43	5.33
December	394	394	37,712,035	2,826,671.8	1.00	0.10	1.39

Table 6. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year-Month

Month	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
All Dispensings							
2010							
January	329	331	53,046,915	2,851,327.1	1.01	0.06	1.16
February	552	569	51,987,204	3,969,979.2	1.03	0.11	1.43
March	1,360	1,363	53,316,181	4,376,713.8	1.00	0.26	3.11
April	3,112	3,144	51,749,906	4,231,410.8	1.01	0.60	7.43
May	3,491	3,529	53,208,961	4,379,934.3	1.01	0.66	8.06
June	2,685	2,705	51,522,087	4,212,565.1	1.01	0.52	6.42
July	1,364	1,377	53,238,489	4,353,989.9	1.01	0.26	3.16
August	1,020	1,039	53,263,889	4,364,460.0	1.02	0.19	2.38
September	871	888	51,623,703	4,219,556.0	1.02	0.17	2.10
October	2,291	2,315	53,239,787	4,383,056.8	1.01	0.43	5.28
November	2,133	2,150	52,053,114	4,257,044.9	1.01	0.41	5.05
December	597	611	53,228,324	4,127,700.9	1.02	0.11	1.48
2011							
January	587	593	52,869,909	4,114,234.6	1.01	0.11	1.44
February	610	618	51,651,952	3,944,206.0	1.01	0.12	1.57
March	1,074	1,086	52,967,257	4,359,895.9	1.01	0.20	2.49
April	2,811	2,839	51,619,532	4,219,820.8	1.01	0.54	6.73
May	5,024	5,078	52,983,461	4,364,225.1	1.01	0.95	11.64
June	3,938	3,986	51,312,702	4,194,279.0	1.01	0.77	9.50
July	1,888	1,906	52,993,101	4,338,461.5	1.01	0.36	4.39
August	1,196	1,204	53,022,226	4,356,475.5	1.01	0.23	2.76
September	940	952	51,610,198	4,218,259.8	1.01	0.18	2.26
October	3,318	3,358	53,293,158	4,385,280.3	1.01	0.62	7.66
November	4,105	4,180	52,154,219	4,264,106.4	1.02	0.79	9.80
December	1,514	1,530	53,307,084	4,135,505.0	1.01	0.28	3.70



Table 6. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year-Month

Month	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
All Dispensings							
2012							
January	738	745	52,962,838	4,126,083.5	1.01	0.14	1.81
February	877	886	51,765,352	4,092,764.1	1.01	0.17	2.16
March	3,030	3,053	53,078,609	4,370,679.3	1.01	0.57	6.99
April	3,693	3,721	51,761,842	4,231,022.6	1.01	0.71	8.79
May	5,753	5,827	53,101,361	4,376,214.4	1.01	1.08	13.32
June	3,558	3,596	51,511,863	4,210,551.1	1.01	0.69	8.54
July	2,012	2,029	53,207,618	4,355,992.6	1.01	0.38	4.66
August	1,384	1,400	53,279,977	4,372,710.0	1.01	0.26	3.20
September	1,158	1,176	51,832,785	4,234,709.4	1.02	0.22	2.78
October	2,887	2,928	53,389,402	4,398,147.2	1.01	0.54	6.66
November	2,630	2,657	52,232,633	4,271,921.7	1.01	0.50	6.22
December	1,063	1,089	53,414,788	4,201,758.2	1.02	0.20	2.59
2013							
January	966	983	59,425,631	4,205,956.4	1.02	0.16	2.34
February	781	792	58,249,110	4,446,897.0	1.01	0.13	1.78
March	1,024	1,038	59,578,983	4,913,472.3	1.01	0.17	2.11
April	3,644	3,682	58,120,499	4,753,847.7	1.01	0.63	7.75
May	6,850	6,947	59,588,645	4,920,518.5	1.01	1.15	14.12
June	6,702	6,798	57,958,288	4,739,567.5	1.01	1.16	14.34
July	3,592	3,635	59,970,000	4,901,024.0	1.01	0.60	7.42
August	1,884	1,910	59,980,473	4,936,168.4	1.01	0.31	3.87
September	1,516	1,536	58,381,462	4,774,535.7	1.01	0.26	3.22
October	5,173	5,234	60,063,153	4,952,813.1	1.01	0.86	10.57
November	3,490	3,536	58,723,667	4,802,269.6	1.01	0.59	7.36
December	1,016	1,026	60,099,029	4,640,167.0	1.01	0.17	2.21

Table 6. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year-Month

Month	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
All Dispensings							
2014							
January	947	966	61,716,650	4,646,261.6	1.02	0.15	2.08
February	966	983	60,387,373	4,611,491.5	1.02	0.16	2.13
March	1,202	1,214	61,958,119	5,102,375.3	1.01	0.19	2.38
April	5,427	5,488	60,349,490	4,936,352.6	1.01	0.90	11.12
May	10,941	11,126	62,342,600	5,122,436.1	1.02	1.75	21.72
June	7,836	7,958	60,474,117	4,946,931.5	1.02	1.30	16.09
July	3,845	3,893	62,361,530	5,103,716.6	1.01	0.62	7.63
August	1,846	1,867	62,262,908	5,118,344.2	1.01	0.30	3.65
September	1,607	1,630	60,568,178	4,953,882.0	1.01	0.27	3.29
October	5,393	5,465	62,380,961	5,141,287.5	1.01	0.86	10.63
November	3,652	3,689	60,786,901	4,972,956.7	1.01	0.60	7.42
December	1,476	1,497	62,350,649	4,837,336.4	1.01	0.24	3.09
2015							
January	1,046	1,062	63,416,229	4,843,458.1	1.02	0.16	2.19
February	998	1,017	62,070,284	4,739,338.6	1.02	0.16	2.15
March	1,413	1,437	64,068,699	5,253,729.8	1.02	0.22	2.74
April	4,893	4,939	62,429,882	5,106,998.8	1.01	0.78	9.67
May	10,029	10,170	64,089,545	5,280,692.8	1.01	1.56	19.26
June	8,732	8,888	62,200,652	5,087,921.5	1.02	1.40	17.47
July	4,262	4,324	64,131,762	5,260,462.3	1.01	0.66	8.22
August	2,243	2,264	64,173,458	5,277,140.4	1.01	0.35	4.29
September	1,730	1,756	62,476,701	5,109,958.3	1.02	0.28	3.44
October	4,909	4,981	64,437,910	5,302,581.2	1.01	0.76	9.39
November	6,575	6,657	62,850,006	5,141,309.7	1.01	1.05	12.95
December	2,901	2,927	64,524,615	4,996,054.5	1.01	0.45	5.86

Table 6. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year-Month

Month	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
All Dispensings							
2016							
January	1,268	1,293	65,913,631	5,011,615.9	1.02	0.19	2.58
February	1,401	1,418	64,583,856	5,106,068.7	1.01	0.22	2.78
March	3,838	3,886	66,452,915	5,469,613.1	1.01	0.58	7.10
April	5,324	5,372	64,828,447	5,302,438.2	1.01	0.82	10.13
May	7,811	7,919	66,520,651	5,487,698.8	1.01	1.17	14.43
June	7,456	7,555	64,704,173	5,292,289.8	1.01	1.15	14.28
July	4,026	4,071	66,704,592	5,472,825.3	1.01	0.60	7.44
August	2,318	2,349	66,766,853	5,496,635.2	1.01	0.35	4.27
September	1,945	1,975	65,022,531	5,317,015.2	1.02	0.30	3.71
October	6,208	6,309	67,059,668	5,518,788.6	1.02	0.93	11.43
November	7,086	7,199	65,477,334	5,354,278.9	1.02	1.08	13.45
December	1,734	1,767	67,173,044	5,121,063.9	1.02	0.26	3.45
2017							
January	1,621	1,647	67,159,898	5,133,173.0	1.02	0.24	3.21
February	2,148	2,175	65,793,557	5,020,115.3	1.01	0.33	4.33
March	2,776	2,809	67,384,649	5,552,755.8	1.01	0.41	5.06
April	9,148	9,279	65,711,311	5,372,106.3	1.01	1.39	17.27
May	15,068	15,342	67,259,332	5,552,121.8	1.02	2.24	27.63
June	11,351	11,516	65,347,638	5,342,879.0	1.01	1.74	21.55
July	6,016	6,089	67,275,829	5,527,434.8	1.01	0.89	11.02
August	3,104	3,148	67,363,639	5,510,338.7	1.01	0.46	5.71
September	1,998	2,037	65,171,879	5,328,225.1	1.02	0.31	3.82
October	8,682	8,841	67,036,777	5,526,796.1	1.02	1.30	16.00
November	7,851	7,964	65,470,156	5,352,226.4	1.01	1.20	14.88
December	2,122	2,149	67,066,168	5,033,128.3	1.01	0.32	4.27



Table 6. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year-Month

Month	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
All Dispensings							
2018							
January	1,477	1,498	64,966,773	5,030,187.7	1.01	0.23	2.98
February	2,130	2,160	63,632,354	4,855,663.9	1.01	0.33	4.45
March	2,374	2,411	65,109,634	5,364,575.8	1.02	0.36	4.49
April	5,702	5,757	63,440,373	5,186,609.8	1.01	0.90	11.10
May	15,870	16,127	65,007,241	5,361,260.4	1.02	2.44	30.08
June	10,447	10,592	63,073,546	5,156,405.0	1.01	1.66	20.54
July	5,222	5,282	65,030,107	5,334,239.3	1.01	0.80	9.90
August	3,193	3,230	65,122,139	5,352,784.9	1.01	0.49	6.03
September	2,172	2,192	63,351,860	5,179,655.6	1.01	0.34	4.23
October	4,622	4,678	65,256,177	5,374,870.2	1.01	0.71	8.70
November	3,629	3,685	63,715,126	5,209,070.7	1.02	0.57	7.07
December	1,656	1,677	65,210,768	5,004,723.7	1.01	0.25	3.35
2019							
January	1,663	1,682	64,814,362	5,001,680.2	1.01	0.26	3.36
February	1,551	1,569	63,501,212	4,845,245.2	1.01	0.24	3.24
March	2,381	2,402	64,956,906	5,353,860.4	1.01	0.37	4.49
April	9,289	9,396	63,295,080	5,174,047.7	1.01	1.47	18.16
May	14,482	14,709	64,843,661	5,345,358.3	1.02	2.23	27.52
June	12,112	12,316	62,994,955	5,149,209.1	1.02	1.92	23.92
July	6,622	6,708	64,749,514	4,980,114.0	1.01	1.02	13.47
August	3,062	3,101	60,564,578	4,978,731.3	1.01	0.51	6.23
September	2,373	2,399	58,902,541	4,813,844.2	1.01	0.40	4.98
October	8,158	8,284	60,568,876	4,634,210.4	1.02	1.35	17.88
November	4,657	4,712	54,896,694	4,486,213.4	1.01	0.85	10.50
December	479	482	55,594,721	1,689,277.0	1.01	0.09	2.85
2020							
January	216	216	20,389,206	555,183.9	1.00	0.11	3.89
February	202	202	7,402,975	586,298.9	1.00	0.27	3.45

Table 6. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year-Month

Month	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
No obstetric or dermatologic conditions in surrounding 30 days							
2009							
January	142	143	38,475,035	2,906,313.8	1.01	0.04	0.49
February	176	178	37,134,165	2,817,850.9	1.01	0.05	0.63
March	567	567	38,267,288	3,104,553.7	1.00	0.15	1.83
April	1,344	1,353	36,928,294	2,998,011.2	1.01	0.36	4.51
May	2,286	2,307	38,081,272	3,099,087.4	1.01	0.60	7.44
June	1,818	1,831	36,480,948	2,961,136.2	1.01	0.50	6.18
July	905	910	37,766,163	3,050,297.7	1.01	0.24	2.98
August	448	451	37,692,070	3,050,843.4	1.01	0.12	1.48
September	294	295	36,260,376	2,942,439.0	1.00	0.08	1.00
October	975	979	37,503,919	3,053,051.5	1.00	0.26	3.21
November	1,408	1,415	36,486,214	2,961,878.6	1.00	0.39	4.78
December	256	256	37,321,308	2,782,703.4	1.00	0.07	0.92
2010							
January	163	165	52,447,932	2,806,236.2	1.01	0.03	0.59
February	394	409	51,476,009	3,907,127.1	1.04	0.08	1.05
March	1,138	1,141	52,786,183	4,306,864.2	1.00	0.22	2.65
April	2,866	2,897	51,248,027	4,163,020.8	1.01	0.56	6.96
May	3,267	3,303	52,725,865	4,309,610.2	1.01	0.62	7.66
June	2,443	2,462	51,013,512	4,145,815.9	1.01	0.48	5.94
July	1,175	1,188	52,742,257	4,283,929.6	1.01	0.22	2.77
August	829	846	52,747,861	4,293,970.3	1.02	0.16	1.97
September	671	687	51,123,288	4,151,895.9	1.02	0.13	1.65
October	2,057	2,076	52,748,386	4,312,211.3	1.01	0.39	4.81
November	1,931	1,945	51,561,698	4,189,869.0	1.01	0.37	4.64
December	431	443	52,732,882	4,065,749.1	1.03	0.08	1.09



Table 6. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year-Month

Month	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
No obstetric or dermatologic conditions in surrounding 30 days							
2011							
January	419	424	52,365,744	4,051,680.5	1.01	0.08	1.05
February	423	428	51,143,677	3,881,607.4	1.01	0.08	1.10
March	864	875	52,435,398	4,289,383.4	1.01	0.16	2.04
April	2,599	2,626	51,138,113	4,151,729.3	1.01	0.51	6.33
May	4,762	4,814	52,488,144	4,294,427.8	1.01	0.91	11.21
June	3,686	3,732	50,792,076	4,127,755.9	1.01	0.73	9.04
July	1,707	1,722	52,519,704	4,268,760.4	1.01	0.33	4.03
August	1,001	1,009	52,495,402	4,286,209.1	1.01	0.19	2.35
September	767	777	51,124,519	4,150,328.5	1.01	0.15	1.87
October	3,092	3,132	52,792,442	4,313,975.0	1.01	0.59	7.26
November	3,842	3,916	51,643,074	4,196,082.2	1.02	0.74	9.33
December	1,331	1,346	52,804,913	4,071,859.4	1.01	0.25	3.31
2012							
January	558	564	52,428,546	4,060,382.2	1.01	0.11	1.39
February	674	683	51,217,521	4,024,869.0	1.01	0.13	1.70
March	2,805	2,828	52,555,820	4,298,574.6	1.01	0.53	6.58
April	3,461	3,487	51,258,670	4,161,078.7	1.01	0.68	8.38
May	5,454	5,525	52,574,019	4,304,069.5	1.01	1.04	12.84
June	3,303	3,338	51,014,530	4,142,603.8	1.01	0.65	8.06
July	1,788	1,805	52,699,308	4,284,411.8	1.01	0.34	4.21
August	1,155	1,171	52,739,282	4,300,122.9	1.01	0.22	2.72
September	971	989	51,344,294	4,164,870.0	1.02	0.19	2.37
October	2,627	2,664	52,849,768	4,325,448.7	1.01	0.50	6.16
November	2,383	2,407	51,727,826	4,202,598.8	1.01	0.46	5.73
December	898	921	52,936,780	4,136,541.6	1.03	0.17	2.23



Table 6. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year-Month

Month	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
No obstetric or dermatologic conditions in surrounding 30 days							
2013							
January	736	749	58,753,293	4,138,345.7	1.02	0.13	1.81
February	534	542	57,633,194	4,371,012.3	1.01	0.09	1.24
March	770	782	58,997,069	4,829,837.0	1.02	0.13	1.62
April	3,366	3,401	57,512,399	4,672,118.0	1.01	0.59	7.28
May	6,420	6,509	58,978,350	4,835,863.4	1.01	1.09	13.46
June	6,325	6,418	57,372,440	4,659,463.8	1.01	1.10	13.77
July	3,267	3,301	59,350,708	4,816,574.7	1.01	0.55	6.85
August	1,603	1,624	59,361,476	4,850,186.9	1.01	0.27	3.35
September	1,251	1,270	57,794,919	4,690,925.6	1.02	0.22	2.71
October	4,806	4,865	59,408,428	4,863,993.7	1.01	0.81	10.00
November	3,143	3,185	58,143,988	4,719,352.7	1.01	0.54	6.75
December	796	804	59,511,719	4,566,072.7	1.01	0.13	1.76
2014							
January	656	670	61,054,082	4,570,457.2	1.02	0.11	1.47
February	677	691	59,752,379	4,532,222.6	1.02	0.11	1.52
March	935	946	61,334,119	5,013,745.9	1.01	0.15	1.89
April	5,015	5,072	59,691,150	4,849,882.5	1.01	0.84	10.46
May	10,418	10,595	61,713,995	5,033,149.1	1.02	1.69	21.05
June	7,390	7,506	59,849,474	4,861,795.3	1.02	1.23	15.44
July	3,469	3,512	61,708,439	5,014,552.6	1.01	0.56	7.00
August	1,530	1,547	61,641,134	5,028,802.4	1.01	0.25	3.08
September	1,289	1,309	59,938,454	4,866,921.5	1.02	0.22	2.69
October	5,016	5,085	61,709,113	5,049,479.0	1.01	0.81	10.07
November	3,340	3,376	60,189,334	4,887,313.6	1.01	0.55	6.91
December	1,204	1,221	61,719,572	4,759,284.4	1.01	0.20	2.57

Table 6. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year-Month

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						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
No obstetric or dermatologic conditions in surrounding 30 days							
2015							
January	751	761	62,745,802	4,762,854.9	1.01	0.12	1.60
February	722	738	61,399,886	4,656,626.6	1.02	0.12	1.58
March	1,022	1,044	63,397,855	5,161,562.2	1.02	0.16	2.02
April	4,484	4,529	61,740,396	5,015,873.6	1.01	0.73	9.03
May	9,466	9,597	63,454,371	5,186,412.5	1.01	1.49	18.50
June	8,227	8,376	61,524,222	4,997,980.1	1.02	1.34	16.76
July	3,844	3,902	63,450,016	5,166,243.9	1.02	0.61	7.55
August	1,851	1,870	63,514,354	5,182,686.7	1.01	0.29	3.61
September	1,354	1,379	61,808,538	5,024,201.4	1.02	0.22	2.74
October	4,512	4,580	63,913,242	5,223,235.6	1.02	0.71	8.77
November	6,153	6,229	62,352,020	5,071,630.4	1.01	0.99	12.28
December	2,572	2,593	63,997,163	4,932,260.8	1.01	0.40	5.26
2016							
January	929	948	65,376,875	4,946,440.0	1.02	0.14	1.92
February	1,042	1,057	64,042,379	5,036,342.0	1.01	0.16	2.10
March	3,431	3,475	65,887,990	5,394,336.9	1.01	0.52	6.44
April	4,892	4,936	64,300,953	5,229,192.9	1.01	0.76	9.44
May	7,327	7,430	65,986,539	5,412,593.5	1.01	1.11	13.73
June	7,002	7,095	64,143,179	5,221,040.6	1.01	1.09	13.59
July	3,663	3,707	66,194,111	5,397,939.7	1.01	0.55	6.87
August	1,970	1,998	66,194,269	5,421,071.2	1.01	0.30	3.69
September	1,542	1,565	64,499,311	5,244,596.4	1.01	0.24	2.98
October	5,755	5,846	66,522,870	5,442,496.1	1.02	0.87	10.74
November	6,641	6,750	64,920,724	5,280,833.2	1.02	1.02	12.78
December	1,384	1,412	66,618,208	5,053,960.9	1.02	0.21	2.79

Table 6. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year-Month

Month	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
No obstetric or dermatologic conditions in surrounding 30 days							
2017							
January	1,253	1,274	66,581,524	5,064,204.6	1.02	0.19	2.52
February	1,803	1,826	65,198,708	4,949,821.0	1.01	0.28	3.69
March	2,336	2,362	66,799,529	5,474,557.0	1.01	0.35	4.31
April	8,643	8,768	65,163,837	5,295,824.2	1.01	1.33	16.56
May	14,446	14,712	66,682,299	5,473,563.0	1.02	2.17	26.88
June	10,833	10,986	64,779,630	5,268,883.9	1.01	1.67	20.85
July	5,601	5,672	66,741,809	5,449,307.2	1.01	0.84	10.41
August	2,677	2,714	66,761,258	5,432,071.9	1.01	0.40	5.00
September	1,627	1,659	64,651,497	5,253,333.3	1.02	0.25	3.16
October	8,142	8,292	66,459,079	5,447,423.7	1.02	1.23	15.22
November	7,378	7,484	64,896,130	5,276,191.4	1.01	1.14	14.18
December	1,805	1,831	66,514,214	4,965,662.4	1.01	0.27	3.69
2018							
January	1,138	1,155	64,391,561	4,961,721.6	1.01	0.18	2.33
February	1,729	1,749	63,045,529	4,786,286.6	1.01	0.27	3.65
March	1,963	1,992	64,547,797	5,287,298.4	1.01	0.30	3.77
April	5,253	5,303	62,883,054	5,110,533.4	1.01	0.84	10.38
May	15,231	15,478	64,427,860	5,282,565.1	1.02	2.36	29.30
June	9,959	10,089	62,526,470	5,082,706.6	1.01	1.59	19.85
July	4,802	4,851	64,477,199	5,256,595.1	1.01	0.74	9.23
August	2,742	2,772	64,528,569	5,274,254.3	1.01	0.42	5.26
September	1,811	1,826	62,825,003	5,104,310.8	1.01	0.29	3.58
October	4,181	4,227	64,657,760	5,295,493.2	1.01	0.65	7.98
November	3,213	3,258	63,164,132	5,133,518.1	1.01	0.51	6.35
December	1,352	1,371	64,675,595	4,936,331.4	1.01	0.21	2.78



Table 6. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year-Month

Month	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
No obstetric or dermatologic conditions in surrounding 30 days							
2019							
January	1,263	1,278	64,213,928	4,931,567.2	1.01	0.20	2.59
February	1,139	1,156	62,920,281	4,774,136.8	1.01	0.18	2.42
March	1,958	1,972	64,398,171	5,274,761.4	1.01	0.30	3.74
April	8,750	8,851	62,716,476	5,096,886.1	1.01	1.40	17.37
May	13,836	14,049	64,262,451	5,266,067.2	1.02	2.15	26.68
June	11,509	11,704	62,440,081	5,074,441.3	1.02	1.84	23.06
July	6,223	6,298	64,156,792	4,905,739.8	1.01	0.97	12.84
August	2,752	2,787	60,020,191	4,904,107.3	1.01	0.46	5.68
September	2,075	2,095	58,392,545	4,741,860.2	1.01	0.36	4.42
October	7,767	7,884	59,975,918	4,561,819.6	1.02	1.30	17.28
November	4,366	4,418	54,413,766	4,417,998.8	1.01	0.80	10.00
December	368	370	54,916,612	1,663,626.6	1.01	0.07	2.22
2020							
January	169	169	20,102,037	546,504.6	1.00	0.08	3.09
February	138	138	7,330,598	577,371.6	1.00	0.19	2.39

¹Eligible Members and Member-Years are reflective of the number of patients that met all cohort entry criteria on at least one day during the query period



Table 7. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year and Age

Year	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
First Dispensing							
Aged 00-07							
2009	12	12	5,003,608	3,560,743.4	1.00	0.02	0.03
2010	*****	*****	*****	*****	1.00	0.02	0.03
2011	*****	*****	*****	*****	1.00	0.02	0.03
2012	14	14	4,146,840	2,969,858.8	1.00	0.03	0.05
2013	28	28	4,543,194	3,227,197.8	1.00	0.06	0.09
2014	50	50	4,611,831	3,296,275.3	1.00	0.11	0.15
2015	73	73	4,656,071	3,340,550.7	1.00	0.16	0.22
2016	127	127	4,789,964	3,458,124.8	1.00	0.27	0.37
2017	171	171	4,760,861	3,405,159.9	1.00	0.36	0.50
2018	119	119	4,192,369	2,995,704.4	1.00	0.28	0.40
2019	254	254	3,959,766	2,649,152.7	1.00	0.64	0.96
2020	*****	*****	*****	*****	1.00	0.01	0.27
Aged 08-18							
2009	594	594	7,421,872	5,506,455.4	1.00	0.80	1.08
2010	*****	*****	*****	*****	1.00	0.79	1.06
2011	*****	*****	*****	*****	1.00	1.05	1.41
2012	729	729	6,247,069	4,682,005.0	1.00	1.17	1.56
2013	883	883	6,941,416	5,180,317.4	1.00	1.27	1.70
2014	1,053	1,053	7,075,144	5,304,216.8	1.00	1.49	1.99
2015	1,073	1,073	7,114,076	5,374,482.7	1.00	1.51	2.00
2016	1,027	1,027	7,349,785	5,581,728.0	1.00	1.40	1.84
2017	1,496	1,496	7,357,644	5,530,431.4	1.00	2.03	2.71
2018	1,084	1,084	6,643,881	5,005,729.1	1.00	1.63	2.17
2019	1,106	1,106	6,285,145	4,433,215.9	1.00	1.76	2.49
2020	*****	*****	*****	*****	1.00	0.04	0.90



Table 7. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year and Age

Year	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
First Dispensing							
Aged 19-35							
2009	2,972	2,972	12,101,638	8,309,434.0	1.00	2.46	3.58
2010	2,827	2,827	12,126,721	8,331,090.2	1.00	2.33	3.39
2011	3,229	3,229	11,992,213	8,379,986.2	1.00	2.69	3.85
2012	3,175	3,175	11,840,244	8,356,071.2	1.00	2.68	3.80
2013	4,030	4,030	13,139,474	9,184,734.9	1.00	3.07	4.39
2014	4,769	4,769	13,891,645	9,696,941.5	1.00	3.43	4.92
2015	5,285	5,285	14,469,475	10,093,023.7	1.00	3.65	5.24
2016	5,301	5,301	15,056,473	10,519,219.5	1.00	3.52	5.04
2017	6,550	6,550	15,036,903	10,519,930.0	1.00	4.36	6.23
2018	5,688	5,688	14,341,978	10,016,182.6	1.00	3.97	5.68
2019	5,681	5,681	13,604,065	8,952,290.3	1.00	4.18	6.35
2020	95	95	4,909,195	279,472.4	1.00	0.19	3.40
Aged 36-50							
2009	3,988	3,988	11,845,347	8,928,056.3	1.00	3.37	4.47
2010	3,884	3,884	12,713,624	9,585,968.7	1.00	3.05	4.05
2011	4,751	4,751	12,102,419	9,241,245.4	1.00	3.93	5.14
2012	4,486	4,486	11,567,408	8,862,199.9	1.00	3.88	5.06
2013	5,318	5,318	12,531,264	9,514,216.3	1.00	4.24	5.59
2014	5,969	5,969	12,939,169	9,739,079.8	1.00	4.61	6.13
2015	6,218	6,218	13,118,863	9,875,588.0	1.00	4.74	6.30
2016	6,158	6,158	13,525,665	10,224,711.8	1.00	4.55	6.02
2017	7,671	7,671	13,432,441	10,174,871.7	1.00	5.71	7.54
2018	6,478	6,478	12,809,915	9,714,650.5	1.00	5.06	6.67
2019	6,642	6,642	12,185,726	8,627,693.4	1.00	5.45	7.70
2020	93	93	4,294,886	220,657.8	1.00	0.22	4.21

Table 7. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year and Age

Year	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
First Dispensing							
Aged 51-64							
2009	3,571	3,571	8,474,746	6,655,457.9	1.00	4.21	5.37
2010	4,005	4,005	10,730,867	8,402,678.7	1.00	3.73	4.77
2011	5,513	5,513	10,804,710	8,633,822.4	1.00	5.10	6.39
2012	5,297	5,297	10,814,947	8,656,569.1	1.00	4.90	6.12
2013	6,612	6,612	12,140,328	9,677,349.6	1.00	5.45	6.83
2014	7,896	7,896	12,870,155	10,159,253.4	1.00	6.14	7.77
2015	8,185	8,185	13,244,386	10,510,782.3	1.00	6.18	7.79
2016	8,196	8,196	13,744,290	10,958,399.2	1.00	5.96	7.48
2017	11,758	11,758	13,666,240	10,872,815.4	1.00	8.60	10.81
2018	8,551	8,551	13,006,209	10,368,262.9	1.00	6.57	8.25
2019	9,481	9,481	12,484,461	9,182,598.9	1.00	7.59	10.32
2020	75	75	4,113,965	204,226.9	1.00	0.18	3.67
Aged 65+							
2009	1,199	1,199	3,844,391	3,346,855.0	1.00	3.12	3.58
2010	7,539	7,539	17,581,958	14,905,903.1	1.00	4.29	5.06
2011	10,812	10,812	18,535,172	16,576,421.7	1.00	5.83	6.52
2012	12,393	12,393	19,690,558	17,663,811.4	1.00	6.29	7.02
2013	16,231	16,231	22,601,019	20,133,523.7	1.00	7.18	8.06
2014	20,476	20,476	23,761,515	21,204,235.1	1.00	8.62	9.66
2015	22,678	22,678	24,723,980	22,086,947.6	1.00	9.17	10.27
2016	22,781	22,781	25,667,060	23,063,087.7	1.00	8.88	9.88
2017	33,233	33,233	26,339,373	23,572,891.1	1.00	12.62	14.10
2018	27,472	27,472	26,988,503	24,103,874.5	1.00	10.18	11.40
2019	32,430	32,430	27,806,915	22,397,943.8	1.00	11.66	14.48
2020	92	92	3,056,101	236,752.7	1.00	0.30	3.89



Table 7. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year and Age

Year	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
All							
Aged 00-07							
2009	12	12	5,003,608	3,560,748.5	1.00	0.02	0.03
2010	*****	*****	*****	*****	1.00	0.02	0.03
2011	*****	*****	*****	*****	1.13	0.02	0.03
2012	14	14	4,146,851	2,969,870.5	1.00	0.03	0.05
2013	28	29	4,543,205	3,227,216.4	1.04	0.06	0.09
2014	50	51	4,611,855	3,296,313.6	1.02	0.11	0.15
2015	73	77	4,656,121	3,340,618.4	1.05	0.16	0.23
2016	130	132	4,790,043	3,458,246.8	1.02	0.27	0.38
2017	173	177	4,760,995	3,405,334.4	1.02	0.36	0.52
2018	125	127	4,192,564	2,995,909.0	1.02	0.30	0.42
2019	257	260	3,959,962	2,649,394.6	1.01	0.65	0.98
2020	*****	*****	*****	*****	1.00	0.01	0.27
Aged 08-18							
2009	594	605	7,421,876	5,506,723.1	1.02	0.80	1.10
2010	*****	*****	*****	*****	1.01	0.79	1.08
2011	*****	*****	*****	*****	1.01	1.07	1.45
2012	736	744	6,248,208	4,683,284.6	1.01	1.18	1.59
2013	903	908	6,942,795	5,181,871.4	1.01	1.30	1.75
2014	1,078	1,090	7,076,916	5,306,160.6	1.01	1.52	2.05
2015	1,094	1,106	7,116,216	5,376,745.7	1.01	1.54	2.06
2016	1,061	1,081	7,352,309	5,584,354.1	1.02	1.44	1.94
2017	1,542	1,564	7,360,448	5,533,479.0	1.01	2.09	2.83
2018	1,119	1,138	6,647,165	5,009,030.7	1.02	1.68	2.27
2019	1,135	1,148	6,288,495	4,436,400.2	1.01	1.80	2.59
2020	*****	*****	*****	*****	1.00	0.04	0.90

Table 7. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year and Age

Year	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
All							
Aged 19-35							
2009	2,972	3,060	12,101,677	8,310,752.2	1.03	2.46	3.68
2010	2,887	2,964	12,129,187	8,334,300.7	1.03	2.38	3.56
2011	3,295	3,373	11,996,268	8,384,640.7	1.02	2.75	4.02
2012	3,269	3,333	11,845,960	8,362,129.6	1.02	2.76	3.99
2013	4,138	4,257	13,146,364	9,192,075.8	1.03	3.15	4.63
2014	4,900	5,072	13,900,175	9,705,920.6	1.04	3.53	5.23
2015	5,447	5,677	14,479,704	10,103,637.6	1.04	3.76	5.62
2016	5,510	5,730	15,068,666	10,531,423.7	1.04	3.66	5.44
2017	6,795	7,111	15,050,375	10,533,712.0	1.05	4.51	6.75
2018	5,951	6,334	14,357,061	10,030,983.7	1.06	4.14	6.31
2019	5,914	6,159	13,619,667	8,965,773.8	1.04	4.34	6.87
2020	98	100	4,917,134	279,849.0	1.02	0.20	3.57
Aged 36-50							
2009	3,993	4,114	11,845,473	8,929,867.6	1.03	3.37	4.61
2010	3,978	4,095	12,717,270	9,590,698.5	1.03	3.13	4.27
2011	4,904	5,061	12,108,836	9,248,567.2	1.03	4.05	5.47
2012	4,696	4,855	11,577,058	8,872,346.1	1.03	4.06	5.47
2013	5,532	5,730	12,543,369	9,526,717.3	1.04	4.41	6.01
2014	6,272	6,538	12,954,385	9,754,347.0	1.04	4.84	6.70
2015	6,597	6,858	13,136,961	9,893,531.9	1.04	5.02	6.93
2016	6,552	6,842	13,547,235	10,245,789.6	1.04	4.84	6.68
2017	8,218	8,599	13,456,978	10,199,158.3	1.05	6.11	8.43
2018	6,984	7,331	12,838,007	9,741,616.1	1.05	5.44	7.53
2019	7,162	7,495	12,215,672	8,653,125.6	1.05	5.86	8.66
2020	107	111	4,309,316	221,304.9	1.04	0.25	5.02

Table 7. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year and Age

Year	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
All							
Aged 51-64							
2009	3,574	3,730	8,474,871	6,657,073.2	1.04	4.22	5.60
2010	4,157	4,336	10,734,338	8,407,405.3	1.04	3.87	5.16
2011	5,851	6,147	10,811,403	8,641,709.5	1.05	5.41	7.11
2012	5,723	5,967	10,826,026	8,668,388.5	1.04	5.29	6.88
2013	7,138	7,479	12,154,646	9,692,541.5	1.05	5.87	7.72
2014	8,568	8,988	12,888,803	10,178,559.0	1.05	6.65	8.83
2015	8,981	9,374	13,267,277	10,533,916.3	1.04	6.77	8.90
2016	9,079	9,480	13,771,529	10,985,573.2	1.04	6.59	8.63
2017	13,002	13,695	13,697,269	10,904,565.7	1.05	9.49	12.56
2018	9,617	10,032	13,042,739	10,403,909.2	1.04	7.37	9.64
2019	10,714	11,176	12,522,782	9,218,026.5	1.04	8.56	12.12
2020	88	88	4,134,102	205,017.7	1.00	0.21	4.29
Aged 65+							
2009	1,201	1,271	3,844,446	3,347,433.9	1.06	3.12	3.80
2010	7,619	8,059	17,583,246	14,910,503.7	1.06	4.33	5.40
2011	11,345	12,027	18,543,628	16,588,666.5	1.06	6.12	7.25
2012	13,335	14,194	19,708,662	17,686,534.6	1.06	6.77	8.03
2013	17,670	18,714	22,629,142	20,166,814.8	1.06	7.81	9.28
2014	22,565	24,037	23,802,508	21,252,071.3	1.07	9.48	11.31
2015	25,555	27,330	24,781,856	22,151,196.2	1.07	10.31	12.34
2016	26,177	27,848	25,742,961	23,144,944.1	1.06	10.17	12.03
2017	38,698	41,850	26,431,281	23,675,051.2	1.08	14.64	17.68
2018	32,427	34,327	27,106,342	24,228,598.4	1.06	11.96	14.17
2019	38,850	41,522	27,942,390	22,529,070.4	1.07	13.90	18.43
2020	106	106	3,072,074	237,855.7	1.00	0.35	4.46



Table 7. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year and Age

Year	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
No obstetric or dermatologic conditions in surrounding 30 days							
Aged 00-07							
2009	12	12	5,002,307	3,552,296.5	1.00	0.02	0.03
2010	*****	*****	*****	*****	1.00	0.02	0.03
2011	*****	*****	*****	*****	1.13	0.02	0.03
2012	14	14	4,145,685	2,962,453.5	1.00	0.03	0.05
2013	*****	*****	*****	*****	1.04	0.06	0.09
2014	*****	*****	*****	*****	1.02	0.10	0.15
2015	73	77	4,654,517	3,333,265.0	1.05	0.16	0.23
2016	130	132	4,788,378	3,452,911.1	1.02	0.27	0.38
2017	173	177	4,759,315	3,399,877.4	1.02	0.36	0.52
2018	125	127	4,190,941	2,990,918.0	1.02	0.30	0.42
2019	*****	*****	*****	*****	1.01	0.65	0.98
2020	*****	*****	*****	*****	1.00	0.01	0.27
Aged 08-18							
2009	546	556	7,411,000	5,389,669.6	1.02	0.74	1.03
2010	*****	*****	*****	*****	1.01	0.73	1.01
2011	667	675	6,563,291	4,801,639.2	1.01	1.02	1.41
2012	706	714	6,239,234	4,583,212.2	1.01	1.13	1.56
2013	*****	*****	*****	*****	1.01	1.22	1.68
2014	*****	*****	*****	*****	1.01	1.42	1.95
2015	1,030	1,040	7,105,847	5,261,958.1	1.01	1.45	1.98
2016	994	1,014	7,341,623	5,465,327.6	1.02	1.35	1.86
2017	1,477	1,497	7,349,432	5,413,558.2	1.01	2.01	2.77
2018	1,062	1,080	6,636,676	4,894,212.4	1.02	1.60	2.21
2019	*****	*****	*****	*****	1.01	1.73	2.54
2020	*****	*****	*****	*****	1.00	0.04	0.92

Table 7. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year and Age

Year	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
No obstetric or dermatologic conditions in surrounding 30 days							
Aged 19-35							
2009	1,882	1,905	12,077,449	8,117,062.6	1.01	1.56	2.35
2010	1,723	1,746	12,105,711	8,139,044.7	1.01	1.42	2.15
2011	2,189	2,226	11,973,949	8,192,927.7	1.02	1.83	2.72
2012	2,070	2,096	11,823,997	8,170,398.8	1.01	1.75	2.57
2013	2,561	2,592	13,121,056	8,977,006.5	1.01	1.95	2.89
2014	3,087	3,141	13,873,143	9,484,898.9	1.02	2.23	3.31
2015	3,319	3,386	14,453,137	9,880,716.9	1.02	2.30	3.43
2016	3,284	3,340	15,043,074	10,319,077.3	1.02	2.18	3.24
2017	4,484	4,580	15,024,419	10,318,428.3	1.02	2.98	4.44
2018	3,714	3,782	14,331,434	9,820,619.6	1.02	2.59	3.85
2019	3,946	4,005	13,593,839	8,773,954.6	1.01	2.90	4.56
2020	55	55	4,835,386	273,987.4	1.00	0.11	2.01
Aged 36-50							
2009	3,231	3,297	11,834,172	8,787,462.4	1.02	2.73	3.75
2010	3,126	3,193	12,705,198	9,432,433.9	1.02	2.46	3.39
2011	4,046	4,148	12,097,198	9,095,231.0	1.03	3.34	4.56
2012	3,806	3,912	11,565,487	8,722,485.4	1.03	3.29	4.48
2013	4,399	4,516	12,530,353	9,361,695.8	1.03	3.51	4.82
2014	5,001	5,138	12,940,066	9,587,228.8	1.03	3.86	5.36
2015	5,178	5,309	13,123,404	9,729,541.8	1.03	3.95	5.46
2016	5,050	5,184	13,534,399	10,093,334.1	1.03	3.73	5.14
2017	6,657	6,860	13,444,255	10,044,829.2	1.03	4.95	6.83
2018	5,483	5,629	12,825,708	9,590,961.7	1.03	4.28	5.87
2019	5,746	5,901	12,203,012	8,514,860.0	1.03	4.71	6.93
2020	52	52	4,256,638	217,525.2	1.00	0.12	2.39



Table 7. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Year and Age

Year	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
No obstetric or dermatologic conditions in surrounding 30 days							
Aged 51-64							
2009	*****	*****	*****	*****	1.04	4.15	5.58
2010	4,041	4,212	10,728,158	8,298,346.1	1.04	3.77	5.08
2011	5,701	5,988	10,804,940	8,527,132.2	1.05	5.28	7.02
2012	5,557	5,795	10,819,251	8,550,077.2	1.04	5.14	6.78
2013	6,945	7,277	12,146,744	9,552,963.1	1.05	5.72	7.62
2014	8,374	8,775	12,879,528	10,029,511.4	1.05	6.50	8.75
2015	8,750	9,128	13,258,986	10,389,489.2	1.04	6.60	8.79
2016	8,858	9,251	13,764,522	10,871,531.5	1.04	6.44	8.51
2017	12,764	13,434	13,689,940	10,786,944.0	1.05	9.32	12.45
2018	9,425	9,832	13,035,712	10,289,166.3	1.04	7.23	9.56
2019	10,481	10,926	12,515,208	9,112,080.1	1.04	8.37	11.99
2020	*****	*****	*****	*****	1.00	0.20	4.05
Aged 65+							
2009	*****	*****	*****	*****	1.06	3.06	3.77
2010	7,461	7,890	17,578,533	14,701,593.7	1.06	4.24	5.37
2011	11,086	11,755	18,537,143	16,348,941.2	1.06	5.98	7.19
2012	13,018	13,851	19,702,147	17,416,944.4	1.06	6.61	7.95
2013	17,191	18,186	22,621,291	19,834,785.3	1.06	7.60	9.17
2014	21,986	23,414	23,793,338	20,885,206.0	1.06	9.24	11.21
2015	24,952	26,658	24,773,931	21,786,597.6	1.07	10.07	12.24
2016	25,674	27,298	25,736,511	22,878,661.8	1.06	9.98	11.93
2017	37,982	41,032	26,424,255	23,387,206.5	1.08	14.37	17.54
2018	31,779	33,621	27,098,763	23,925,736.6	1.06	11.73	14.05
2019	38,078	40,672	27,933,581	22,232,859.8	1.07	13.63	18.29
2020	*****	*****	*****	*****	1.00	0.34	4.46

¹Eligible Members and Member-Years are reflective of the number of patients that met all cohort entry criteria on at least one day during the query period
 *****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 8. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Race and Ethnicity

Race	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
First Dispensing							
Hispanic Origin							
Hispanic Origin	4,237	4,237	4,153,570	16,455,433.8	1.00	10.20	2.57
Not Hispanic Origin	201,200	201,200	47,919,952	220,415,410.7	1.00	41.99	9.13
Unknown - Hispanic	203,460	203,460	141,812,253	376,264,051.1	1.00	14.35	5.41
Race							
American Indian or Alaska Native	767	767	383,950	1,687,742.0	1.00	19.98	4.54
Asian	5,537	5,537	3,156,851	13,839,532.4	1.00	17.54	4.00
Black or African American	7,515	7,515	7,901,407	31,671,365.8	1.00	9.51	2.37
Native Hawaiian or Other Pacific Islander	255	255	210,268	842,325.3	1.00	12.13	3.03
White	224,809	224,809	51,696,466	229,793,702.2	1.00	43.49	9.78
Unknown - Race	170,014	170,014	130,536,833	335,300,228.0	1.00	13.02	5.07
Hispanic Origin and Race							
<i>Hispanic Origin</i>							
American Indian or Alaska Native	34	34	31,670	113,358.2	1.00	10.74	3.00
Asian	88	88	63,491	278,789.7	1.00	13.86	3.16
Black or African American	58	58	57,998	203,239.7	1.00	10.00	2.85
Native Hawaiian or Other Pacific Islander	18	18	12,456	49,928.4	1.00	14.45	3.61
White	748	748	433,324	2,178,310.6	1.00	17.26	3.43
Unknown - Race	3,291	3,291	3,554,631	13,631,807.2	1.00	9.26	2.41
<i>Not Hispanic Origin</i>							
American Indian or Alaska Native	549	549	241,216	1,150,516.0	1.00	22.76	4.77
Asian	763	763	1,090,429	4,790,910.1	1.00	7.00	1.59
Black or African American	5,985	5,985	6,249,691	25,950,681.2	1.00	9.58	2.31
Native Hawaiian or Other Pacific Islander	*****	*****	*****	*****	1.00	4.65	1.36
White	193,857	193,857	40,239,784	188,185,609.9	1.00	48.18	10.30
Unknown - Race	*****	*****	*****	*****	0.00	0.00	0.00

Table 8. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Race and Ethnicity

Race	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
Hispanic Origin and Race							
<i>Unknown - Hispanic</i>							
American Indian or Alaska Native	184	184	111,064	423,867.8	1.00	16.57	4.34
Asian	4,686	4,686	2,002,931	8,769,832.6	1.00	23.40	5.34
Black or African American	1,472	1,472	1,593,718	5,517,444.9	1.00	9.24	2.67
Native Hawaiian or Other Pacific Islander	191	191	98,981	454,710.7	1.00	19.30	4.20
White	30,204	30,204	11,023,358	39,429,781.6	1.00	27.40	7.66
Unknown - Race	166,723	166,723	126,982,201	321,668,413.5	1.00	13.13	5.18
All Dispensings							
Hispanic Origin							
Hispanic Origin	4,237	4,639	4,153,570	16,468,916.5	1.09	10.20	2.82
Not Hispanic Origin	201,200	241,197	47,919,952	221,013,377.7	1.20	41.99	10.91
Unknown - Hispanic	203,460	228,305	141,812,253	376,780,555.2	1.12	14.35	6.06
Race							
American Indian or Alaska Native	767	836	383,950	1,689,974.9	1.09	19.98	4.95
Asian	5,537	6,185	3,156,851	13,857,243.7	1.12	17.54	4.46
Black or African American	7,515	8,198	7,901,407	31,690,507.1	1.09	9.51	2.59
Native Hawaiian or Other Pacific Islander	255	273	210,268	843,102.4	1.07	12.13	3.24
White	224,809	268,012	51,696,466	230,462,123.1	1.19	43.49	11.63
Unknown - Race	170,014	190,637	130,536,833	335,719,898.2	1.12	13.02	5.68
Hispanic Origin and Race							
<i>Hispanic Origin</i>							
American Indian or Alaska Native	34	34	31,670	113,486.2	1.00	10.74	3.00
Asian	88	94	63,491	279,053.6	1.07	13.86	3.37
Black or African American	58	62	57,998	203,422.9	1.07	10.00	3.05
Native Hawaiian or Other Pacific Islander	18	18	12,456	49,973.7	1.00	14.45	3.60
White	748	830	433,324	2,181,043.5	1.11	17.26	3.81
Unknown - Race	3,291	3,601	3,554,631	13,641,936.6	1.09	9.26	2.64

Table 8. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Race and Ethnicity

Race	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
Hispanic Origin and Race							
<i>Not Hispanic Origin</i>							
American Indian or Alaska Native	549	608	241,216	1,152,140.4	1.11	22.76	5.28
Asian	763	832	1,090,429	4,793,011.4	1.09	7.00	1.74
Black or African American	5,985	6,524	6,249,691	25,964,820.0	1.09	9.58	2.51
Native Hawaiian or Other Pacific Islander	*****	*****	*****	*****	1.04	4.65	1.42
White	193,857	233,185	40,239,784	188,765,601.2	1.20	48.18	12.35
Unknown - Race	*****	*****	*****	*****	0.00	0.00	0.00
<i>Unknown - Hispanic</i>							
American Indian or Alaska Native	184	194	111,064	424,348.3	1.05	16.57	4.57
Asian	4,686	5,259	2,002,931	8,785,178.7	1.12	23.40	5.99
Black or African American	1,472	1,612	1,593,718	5,522,264.2	1.10	9.24	2.92
Native Hawaiian or Other Pacific Islander	191	207	98,981	455,331.2	1.08	19.30	4.55
White	30,204	33,997	11,023,358	39,515,478.5	1.13	27.40	8.60
Unknown - Race	166,723	187,036	126,982,201	322,077,954.3	1.12	13.13	5.81
No obstetric or dermatologic conditions in surrounding 30 days							
Hispanic Origin							
Hispanic Origin	2,232	2,350	4,151,328	16,225,740.0	1.05	5.38	1.45
Not Hispanic Origin	196,248	234,847	47,908,298	217,716,767.7	1.20	40.96	10.79
Unknown - Hispanic	173,807	193,850	141,715,531	370,754,440.2	1.12	12.26	5.23
Race							
American Indian or Alaska Native	688	752	383,830	1,667,299.5	1.09	17.92	4.51
Asian	2,228	2,350	3,155,596	13,692,303.7	1.05	7.06	1.72
Black or African American	6,207	6,739	7,897,945	31,280,990.8	1.09	7.86	2.15
Native Hawaiian or Other Pacific Islander	140	143	210,203	832,362.0	1.02	6.66	1.72
White	215,419	256,518	51,680,502	226,827,168.6	1.19	41.68	11.31
Unknown - Race	147,605	164,545	130,447,081	330,396,823.3	1.11	11.32	4.98

Table 8. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Race and Ethnicity

Race	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
Hispanic Origin and Race							
<i>Hispanic Origin</i>							
American Indian or Alaska Native	*****	*****	*****	*****	1.00	6.95	1.97
Asian	33	33	63,446	274,351.1	1.00	5.20	1.20
Black or African American	29	30	57,947	199,547.4	1.03	5.00	1.50
Native Hawaiian or Other Pacific Islander	*****	*****	*****	*****	1.00	6.42	1.63
White	391	416	433,113	2,140,337.0	1.06	9.03	1.94
Unknown - Race	1,749	1,841	3,552,719	13,450,853.3	1.05	4.92	1.37
<i>Not Hispanic Origin</i>							
American Indian or Alaska Native	531	588	241,163	1,137,977.5	1.11	22.02	5.17
Asian	737	803	1,090,186	4,752,871.5	1.09	6.76	1.69
Black or African American	5,552	6,052	6,247,548	25,654,537.3	1.09	8.89	2.36
Native Hawaiian or Other Pacific Islander	*****	*****	*****	*****	1.04	4.66	1.43
White	189,382	227,356	40,230,598	185,836,839.7	1.20	47.07	12.23
Unknown - Race	*****	*****	*****	*****	0.00	0.00	0.00
<i>Unknown - Hispanic</i>							
American Indian or Alaska Native	135	142	111,016	417,816.2	1.05	12.16	3.40
Asian	1,458	1,514	2,001,964	8,665,081.1	1.04	7.28	1.75
Black or African American	626	657	1,592,450	5,426,906.1	1.05	3.93	1.21
Native Hawaiian or Other Pacific Islander	86	87	98,949	448,682.2	1.01	8.69	1.94
White	25,646	28,746	11,016,791	38,849,991.9	1.12	23.28	7.40
Unknown - Race	145,856	162,704	126,894,361	316,945,962.8	1.12	11.49	5.13

¹Eligible Members and Member-Years are reflective of the number of patients that met all cohort entry criteria on at least one day during the query period

*****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 9. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Urbanicity

Urbanicity	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
First Dispensing							
Urban (population >= 50,000)	228,321	228,321	130,233,683	403,228,662.3	1.00	17.53	5.66
Suburban (population ≥ 2,500, <50,000)	8,130	8,130	2,080,711	7,288,321.3	1.00	39.07	11.15
Rural (population < 2,500)	171,293	171,293	57,428,679	197,429,685.6	1.00	29.83	8.68
Zip Code Unknown or Urbanicity Not Available ²	1,153	1,153	4,142,702	5,188,226.3	1.00	2.78	2.22
All Dispensings							
Urban (population >= 50,000)	228,321	259,732	130,233,683	403,849,589.5	1.14	17.53	6.43
Suburban (population ≥ 2,500, <50,000)	8,130	9,578	2,080,711	7,311,485.3	1.18	39.07	13.10
Rural (population < 2,500)	171,293	203,589	57,428,679	197,911,531.2	1.19	29.83	10.29
Zip Code Unknown or Urbanicity Not Available ²	1,153	1,242	4,142,702	5,190,243.5	1.08	2.78	2.39
No obstetric or dermatologic conditions in surrounding 30 days							
Urban (population >= 50,000)	198,967	225,434	130,153,757	397,146,305.3	1.13	15.29	5.68
Suburban (population ≥ 2,500, <50,000)	7,870	9,257	2,079,825	7,206,998.5	1.18	37.84	12.84
Rural (population < 2,500)	164,431	195,262	57,404,560	195,196,532.7	1.19	28.64	10.00
Zip Code Unknown or Urbanicity Not Available ²	1,019	1,094	4,137,015	5,147,111.5	1.07	2.46	2.13

¹Eligible Members and Member Years are reflective of the number of patients that met all cohort entry criteria on at least one day during the query period

²Zip code not populated at the Data Partner or zip code provided did not map to an urbanicity

Table 10. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by Lyme Disease Incidence

Incidence Category	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
First Dispensing							
Low	77,553	77,553	100,737,583	315,458,138.4	1.00	7.70	2.46
Emerging	44,101	44,101	43,210,431	143,450,385.0	1.00	10.21	3.07
High	286,067	286,067	45,721,121	148,813,976.0	1.00	62.57	19.22
Other ²	30	30	139,473	412,428.5	1.00	2.15	0.73
Zip Code Unknown ³	1,146	1,146	4,077,167	4,999,967.6	1.00	2.81	2.29
All Dispensings							
Low	77,553	85,574	100,737,583	315,669,034.6	1.10	7.70	2.71
Emerging	44,101	47,991	43,210,431	143,549,371.0	1.09	10.21	3.34
High	286,067	339,310	45,721,121	149,629,978.2	1.19	62.57	22.68
Other ²	30	31	139,473	412,503.9	1.03	2.15	0.75
Zip Code Unknown ³	1,146	1,235	4,077,167	5,001,961.7	1.08	2.81	2.47
No obstetric or dermatologic conditions in surrounding 30 days							
Low	56,033	60,153	100,680,235	310,803,975.0	1.07	5.57	1.94
Emerging	40,019	43,518	43,189,846	141,465,314.8	1.09	9.27	3.08
High	275,196	326,261	45,694,167	147,059,243.2	1.19	60.23	22.19
Other ²	*****	*****	*****	*****	1.04	1.94	0.69
Zip Code Unknown ³	*****	*****	*****	*****	1.07	2.49	2.19

¹Eligible Members and Member-Years are reflective of the number of patients that met all cohort entry criteria on at least one day during the query period

²Eligible member zip code associated with a geographic region that is outside of the 50 states

³Zip code not populated at the Data Partner

*****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 11. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State

State	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
First Dispensing							
Alabama	932	932	1,691,033	5,644,670.0	1.00	5.51	1.65
Alaska ²	104	104	292,222	920,034.8	1.00	3.56	1.13
Arizona	1,445	1,445	4,229,090	11,263,266.6	1.00	3.42	1.28
Arkansas	550	550	1,266,463	4,511,240.9	1.00	4.34	1.22
California	33,068	33,068	26,175,708	95,189,328.3	1.00	12.63	3.47
Colorado	1,650	1,650	4,275,703	12,214,523.5	1.00	3.86	1.35
Connecticut	27,361	27,361	2,923,984	9,709,506.5	1.00	93.57	28.18
Delaware	2,579	2,579	494,022	1,697,479.2	1.00	52.20	15.19
District of Columbia	744	744	371,655	1,139,190.4	1.00	20.02	6.53
Florida	11,732	11,732	12,281,180	36,606,115.9	1.00	9.55	3.20
Georgia	6,920	6,920	9,449,555	27,970,375.0	1.00	7.32	2.47
Guam ²	-	-	32,254	41,185.4	-	-	-
Hawaii ²	55	55	204,398	784,354.4	1.00	2.69	0.70
Idaho	330	330	587,250	1,956,044.0	1.00	5.62	1.69
Illinois	5,449	5,449	6,397,173	20,051,578.1	1.00	8.52	2.72
Indiana	7,175	7,175	5,739,558	19,262,000.2	1.00	12.50	3.72
Iowa	1,744	1,744	1,445,039	5,262,177.6	1.00	12.07	3.31
Kansas	1,429	1,429	1,560,861	4,980,045.9	1.00	9.16	2.87
Kentucky	4,273	4,273	4,198,258	14,656,058.5	1.00	10.18	2.92
Louisiana	1,458	1,458	2,353,810	7,887,098.3	1.00	6.19	1.85
Maine	30,243	30,243	1,213,124	4,707,771.5	1.00	249.30	64.24
Marshall Islands ²	-	-	84	377.4	-	-	-
Maryland	11,325	11,325	3,003,431	10,230,549.9	1.00	37.71	11.07
Massachusetts	37,057	37,057	2,516,318	8,519,893.6	1.00	147.27	43.49
Michigan	4,278	4,278	3,488,109	11,985,660.4	1.00	12.26	3.57
Micronesia ²	*****	*****	*****	*****	-	-	-

Table 11. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State

State	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
Minnesota	7,964	7,964	2,685,891	8,072,071.6	1.00	29.65	9.87
Mississippi ²	819	819	1,427,018	5,074,643.5	1.00	5.74	1.61
Missouri	2,947	2,947	4,778,355	14,722,157.0	1.00	6.17	2.00
Montana ²	196	196	341,042	1,270,859.4	1.00	5.75	1.54
Nebraska ²	443	443	1,090,844	3,581,926.1	1.00	4.06	1.24
Nevada	448	448	1,701,906	4,648,090.5	1.00	2.63	0.96
New Hampshire	20,546	20,546	1,014,219	3,471,363.5	1.00	202.58	59.19
New Jersey	15,046	15,046	4,875,020	16,015,120.3	1.00	30.86	9.39
New Mexico ²	277	277	686,562	2,223,956.7	1.00	4.03	1.25
New York	54,794	54,794	9,192,432	28,807,757.1	1.00	59.61	19.02
North Carolina	6,242	6,242	5,138,111	15,819,392.1	1.00	12.15	3.95
North Dakota ²	194	194	277,625	977,008.1	1.00	6.99	1.99
Northern Marianas ²	*****	*****	*****	*****	1.00	1.07	0.22
Ohio	8,518	8,518	9,496,536	29,887,223.4	1.00	8.97	2.85
Oklahoma	621	621	1,805,306	5,902,010.0	1.00	3.44	1.05
Oregon	1,413	1,413	1,373,902	4,191,454.1	1.00	10.28	3.37
Palau ²	-	-	12	102.2	-	-	-
Pennsylvania	33,090	33,090	5,897,351	17,900,272.8	1.00	56.11	18.49
Puerto Rico ²	*****	*****	*****	*****	1.00	3.09	1.02
Rhode Island	3,581	3,581	487,672	1,605,964.9	1.00	73.43	22.30
South Carolina	2,231	2,231	2,155,291	7,094,541.5	1.00	10.35	3.14
South Dakota ²	238	238	295,441	1,132,848.5	1.00	8.06	2.10
Tennessee	3,588	3,588	5,488,848	20,203,318.4	1.00	6.54	1.78
Texas	6,317	6,317	16,478,986	43,625,683.7	1.00	3.83	1.45
Utah	389	389	1,424,155	3,748,620.2	1.00	2.73	1.04
Vermont	7,818	7,818	219,095	900,783.0	1.00	356.83	86.79
Virgin Islands ²	*****	*****	*****	*****	1.00	2.48	0.56

Table 11. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State

State	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
Virginia	21,578	21,578	7,496,480	25,998,839.0	1.00	28.78	8.30
Washington	1,561	1,561	2,894,076	8,702,254.9	1.00	5.39	1.79
West Virginia	1,629	1,629	874,078	3,073,929.4	1.00	18.64	5.30
Wisconsin	13,085	13,085	3,702,082	11,176,603.1	1.00	35.34	11.71
Wyoming ²	124	124	212,867	744,843.0	1.00	5.83	1.66
Zip Code Unknown ³	1,146	1,146	4,077,167	4,999,967.6	1.00	2.81	2.29
All Dispensings							
Alabama	932	1,012	1,691,033	5,646,805.5	1.09	5.51	1.79
Alaska ²	104	112	292,222	920,262.1	1.08	3.56	1.22
Arizona	1,445	1,570	4,229,090	11,267,144.7	1.09	3.42	1.39
Arkansas	550	619	1,266,463	4,512,626.5	1.13	4.34	1.37
California	33,068	36,256	26,175,708	95,290,934.8	1.10	12.63	3.80
Colorado	1,650	1,767	4,275,703	12,218,640.7	1.07	3.86	1.45
Connecticut	27,361	31,886	2,923,984	9,786,256.9	1.17	93.57	32.58
Delaware	2,579	2,908	494,022	1,704,963.6	1.13	52.20	17.06
District of Columbia	744	816	371,655	1,141,166.0	1.10	20.02	7.15
Florida	11,732	12,882	12,281,180	36,637,374.1	1.10	9.55	3.52
Georgia	6,920	8,167	9,449,555	27,985,634.9	1.18	7.32	2.92
Guam ²	-	-	32,254	41,185.4	-	-	-
Hawaii ²	55	63	204,398	784,529.9	1.15	2.69	0.80
Idaho	330	360	587,250	1,956,836.6	1.09	5.62	1.84
Illinois	5,449	5,793	6,397,173	20,064,734.6	1.06	8.52	2.89
Indiana	7,175	7,852	5,739,558	19,277,174.3	1.09	12.50	4.07
Iowa	1,744	1,874	1,445,039	5,266,869.3	1.07	12.07	3.56
Kansas	1,429	1,534	1,560,861	4,983,791.0	1.07	9.16	3.08
Kentucky	4,273	4,751	4,198,258	14,666,169.1	1.11	10.18	3.24
Louisiana	1,458	1,597	2,353,810	7,890,551.3	1.10	6.19	2.02

Table 11. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State

State	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
Maine	30,243	37,253	1,213,124	4,799,219.3	1.23	249.30	77.62
Marshall Islands ²	-	-	84	377.4	-	-	-
Maryland	11,325	12,948	3,003,431	10,263,856.5	1.14	37.71	12.62
Massachusetts	37,057	46,994	2,516,318	8,633,046.0	1.27	147.27	54.44
Michigan	4,278	4,619	3,488,109	11,994,719.6	1.08	12.26	3.85
Micronesia ²	*****	*****	*****	*****	-	-	-
Minnesota	7,964	8,629	2,685,891	8,095,546.3	1.08	29.65	10.66
Mississippi ²	819	901	1,427,018	5,076,828.3	1.10	5.74	1.77
Missouri	2,947	3,124	4,778,355	14,729,066.8	1.06	6.17	2.12
Montana ²	196	216	341,042	1,271,428.1	1.10	5.75	1.70
Nebraska ²	443	492	1,090,844	3,582,969.4	1.11	4.06	1.37
Nevada	448	488	1,701,906	4,649,151.3	1.09	2.63	1.05
New Hampshire	20,546	24,543	1,014,219	3,533,594.1	1.19	202.58	69.46
New Jersey	15,046	16,741	4,875,020	16,055,380.0	1.11	30.86	10.43
New Mexico ²	277	296	686,562	2,224,698.6	1.07	4.03	1.33
New York	54,794	66,341	9,192,432	28,957,219.4	1.21	59.61	22.91
North Carolina	6,242	6,739	5,138,111	15,834,806.9	1.08	12.15	4.26
North Dakota ²	194	213	277,625	977,549.4	1.10	6.99	2.18
Northern Marianas ²	*****	*****	*****	*****	1.00	1.07	0.22
Ohio	8,518	9,378	9,496,536	29,903,378.4	1.10	8.97	3.14
Oklahoma	621	666	1,805,306	5,903,648.2	1.07	3.44	1.13
Oregon	1,413	1,508	1,373,902	4,195,085.7	1.07	10.28	3.59
Palau ²	-	-	12	102.2	-	-	-
Pennsylvania	33,090	38,287	5,897,351	17,986,380.2	1.16	56.11	21.29
Puerto Rico ²	*****	*****	*****	*****	1.04	3.09	1.06
Rhode Island	3,581	4,230	487,672	1,615,990.6	1.18	73.43	26.18
South Carolina	2,231	2,417	2,155,291	7,100,341.6	1.08	10.35	3.40

Table 11. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State

State	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
South Dakota ²	238	251	295,441	1,133,470.5	1.05	8.06	2.21
Tennessee	3,588	3,937	5,488,848	20,211,800.1	1.10	6.54	1.95
Texas	6,317	7,187	16,478,986	43,640,024.4	1.14	3.83	1.65
Utah	389	420	1,424,155	3,749,626.3	1.08	2.73	1.12
Vermont	7,818	10,273	219,095	923,541.0	1.31	356.83	111.23
Virgin Islands ²	*****	*****	*****	*****	1.00	2.48	0.56
Virginia	21,578	23,488	7,496,480	26,059,105.0	1.09	28.78	9.01
Washington	1,561	1,682	2,894,076	8,705,848.9	1.08	5.39	1.93
West Virginia	1,629	1,736	874,078	3,077,532.6	1.07	18.64	5.64
Wisconsin	13,085	14,789	3,702,082	11,215,879.3	1.13	35.34	13.19
Wyoming ²	124	138	212,867	745,185.3	1.11	5.83	1.85
Zip Code Unknown ³	1,146	1,235	4,077,167	5,001,961.7	1.08	2.81	2.47
No obstetric or dermatologic conditions in surrounding 30 days							
Alabama	890	959	1,690,254	5,580,813.1	1.08	5.27	1.72
Alaska ²	90	98	292,123	908,239.2	1.09	3.08	1.08
Arizona	1,117	1,201	4,225,788	11,091,108.5	1.08	2.64	1.08
Arkansas ²	497	562	1,265,942	4,459,053.8	1.13	3.93	1.26
California	20,656	21,958	26,163,079	93,761,946.4	1.06	7.90	2.34
Colorado	1,268	1,348	4,273,242	12,031,358.0	1.06	2.97	1.12
Connecticut	26,200	30,517	2,922,341	9,603,283.1	1.16	89.65	31.78
Delaware	2,491	2,808	493,783	1,674,764.5	1.13	50.45	16.77
District of Columbia	671	736	371,351	1,118,688.2	1.10	18.07	6.58
Florida	9,696	10,627	12,272,572	35,967,002.2	1.10	7.90	2.95
Georgia	4,459	4,725	9,444,562	27,554,174.1	1.06	4.72	1.71
Guam ²	-	-	32,251	40,898.4	-	-	-
Hawaii ²	*****	*****	*****	*****	1.17	2.35	0.72
Idaho ²	277	300	586,937	1,928,409.2	1.08	4.72	1.56

Table 11. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State

State	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
Illinois	5,059	5,379	6,393,672	19,744,787.0	1.06	7.91	2.72
Indiana	6,060	6,582	5,737,370	19,017,755.0	1.09	10.56	3.46
Iowa	1,590	1,716	1,444,214	5,188,669.4	1.08	11.01	3.31
Kansas	1,353	1,454	1,559,856	4,910,544.3	1.07	8.67	2.96
Kentucky	3,876	4,336	4,196,681	14,465,395.3	1.12	9.24	3.00
Louisiana	1,303	1,435	2,352,322	7,776,221.8	1.10	5.54	1.85
Maine	29,788	36,633	1,212,821	4,741,644.8	1.23	245.61	77.26
Marshall Islands ²	-	-	84	377.0	-	-	-
Maryland	10,738	12,286	3,001,827	10,070,648.1	1.14	35.77	12.20
Massachusetts	36,082	45,664	2,515,068	8,486,162.0	1.27	143.46	53.81
Michigan	3,965	4,251	3,486,298	11,818,268.3	1.07	11.37	3.60
Micronesia ²	*****	*****	*****	*****	-	-	-
Minnesota	7,664	8,300	2,684,532	7,966,814.7	1.08	28.55	10.42
Mississippi ²	783	860	1,426,428	5,019,481.5	1.10	5.49	1.71
Missouri	2,751	2,916	4,775,518	14,516,178.9	1.06	5.76	2.01
Montana ²	185	205	340,933	1,254,546.5	1.11	5.43	1.63
Nebraska ²	372	416	1,090,173	3,525,960.4	1.12	3.41	1.18
Nevada	380	416	1,700,865	4,578,903.7	1.09	2.23	0.91
New Hampshire	20,124	24,009	1,013,812	3,480,089.1	1.19	198.50	68.99
New Jersey	14,427	16,034	4,871,805	15,754,200.1	1.11	29.61	10.18
New Mexico ²	253	268	686,275	2,198,011.6	1.06	3.69	1.22
New York	52,115	63,094	9,185,065	28,364,578.4	1.21	56.74	22.24
North Carolina	5,593	6,040	5,135,525	15,622,735.9	1.08	10.89	3.87
North Dakota ²	178	197	277,492	963,707.4	1.11	6.41	2.04
Northern Marianas ²	*****	*****	*****	*****	1.00	1.07	0.22
Ohio	7,901	8,705	9,491,897	29,431,827.0	1.10	8.32	2.96
Oklahoma ²	468	504	1,804,428	5,826,689.2	1.08	2.59	0.86



Table 11. Summary of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State

State	New Users	New Dispensings	Eligible Members ¹	Eligible Member Years ¹	Average Number of Dispensings per Member	Members with a	
						Dispensing per 10K Eligible Members	Dispensing per 10K Eligible Member-Years
Oregon	945	1,018	1,373,281	4,136,050.9	1.08	6.88	2.46
Palau ²	-	-	12	102.2	-	-	-
Pennsylvania	31,306	36,140	5,893,330	17,690,717.1	1.15	53.12	20.43
Puerto Rico ²	*****	*****	*****	*****	1.05	2.71	0.94
Rhode Island	3,447	4,071	487,393	1,586,839.7	1.18	70.72	25.65
South Carolina	2,042	2,188	2,154,249	6,998,801.4	1.07	9.48	3.13
South Dakota ²	225	237	295,314	1,117,406.2	1.05	7.62	2.12
Tennessee	3,319	3,655	5,486,436	19,946,735.4	1.10	6.05	1.83
Texas	4,519	4,824	16,468,529	42,985,499.0	1.07	2.74	1.12
Utah ²	259	276	1,423,365	3,700,230.7	1.07	1.82	0.75
Vermont	7,728	10,120	219,036	911,984.3	1.31	352.82	110.97
Virgin Islands ²	*****	*****	*****	*****	1.00	2.48	0.56
Virginia	20,420	22,260	7,492,972	25,673,641.5	1.09	27.25	8.67
Washington	1,158	1,250	2,892,402	8,583,080.0	1.08	4.00	1.46
West Virginia	1,571	1,672	873,596	3,029,339.6	1.06	17.98	5.52
Wisconsin	12,666	14,325	3,700,382	11,053,875.8	1.13	34.23	12.96
Wyoming ²	*****	*****	*****	*****	1.12	5.45	1.77
Zip Code Unknown ³	1,012	1,087	4,071,490	4,960,101.9	1.07	2.49	2.19

¹Eligible Members and Member-Years are reflective of the number of patients that met all cohort entry criteria on at least one day during the query period

²6 of 7 Data Partners contributed to this stratification, due to small cell suppression in one Data Partner

³Zip code not populated at the Data Partner

*****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 12a. Summary of Ratios of Members with a Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State and Year¹

State	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
First Dispensing												
Low												
All States with Low Incidence Category	1.24	1.37	1.47	1.59	1.80	1.96	2.07	2.15	2.45	2.54	2.57	0.16
Alabama	0.27	0.86	0.87	1.14	1.17	1.26	1.31	1.49	1.57	1.47	1.64	0.25
Alaska	0.58	0.29	0.43	0.43	0.65	0.52	1.04	0.81	2.06	0.66	1.99	0.00
Arizona	0.26	0.59	0.52	0.84	1.22	0.96	0.89	0.87	1.15	1.02	1.25	0.45
Arkansas	0.20	0.54	0.63	0.62	0.73	1.08	0.90	1.08	1.19	1.31	1.75	0.14
California	2.16	2.15	2.11	2.17	2.45	2.66	2.93	2.99	3.33	3.96	3.77	0.17
Colorado	0.73	0.55	0.86	0.73	0.86	0.99	1.27	1.11	1.45	1.33	1.39	0.09
Florida	0.88	1.56	1.86	2.23	2.73	2.96	2.89	2.73	3.43	2.95	3.06	0.25
Georgia	0.99	1.03	1.13	1.38	1.66	1.64	2.11	2.45	2.99	3.09	2.88	0.17
Hawaii	0.00	0.36	0.24	0.64	1.14	0.37	0.77	0.84	0.60	0.49	0.67	0.00
Idaho	0.36	1.86	2.46	1.15	0.99	1.20	1.37	1.17	1.16	1.19	1.24	0.00
Kansas	0.65	1.20	1.59	2.35	1.82	2.07	2.29	2.33	3.09	2.85	3.33	0.07
Louisiana	0.41	0.98	1.39	1.69	1.74	1.83	1.24	1.81	1.65	1.59	1.39	0.17
Mississippi	0.37	1.35	1.34	1.69	1.25	1.14	1.42	1.63	1.44	1.49	1.06	0.00
Missouri	0.35	0.64	0.84	0.93	1.41	1.97	1.69	1.87	2.27	2.34	2.64	0.05
Montana	0.51	0.62	1.37	0.25	1.03	1.27	1.17	2.26	1.49	1.93	1.56	0.00
Nebraska	0.19	0.62	0.44	0.57	1.13	0.66	0.78	1.11	1.63	1.24	1.74	0.18
Nevada	0.34	0.36	0.35	0.56	0.54	0.74	0.82	0.58	0.63	0.62	0.76	0.00
New Mexico	0.24	0.41	1.08	0.76	0.87	1.33	0.96	0.85	1.28	1.41	1.48	0.00
Oklahoma	0.49	0.61	0.71	0.97	0.58	0.72	0.81	0.61	1.01	0.98	1.19	0.00
Oregon	1.94	1.94	1.90	1.57	1.76	2.01	2.41	2.61	2.68	3.25	4.20	0.22
South Carolina	0.87	1.60	2.04	2.91	2.56	2.65	2.43	2.38	2.91	2.32	2.87	0.06
Texas	0.75	0.92	0.96	0.94	0.98	1.12	1.20	1.34	1.36	1.20	1.22	0.12
Utah	0.47	0.67	1.01	0.48	0.85	0.94	0.98	0.62	0.59	0.82	0.70	0.00
Washington	0.58	0.86	1.23	0.98	1.03	1.23	1.18	1.61	1.51	1.55	1.90	0.07
Wyoming	0.95	0.66	1.09	1.19	0.79	0.67	1.06	1.94	2.08	1.88	1.96	0.00

Table 12a. Summary of Ratios of Members with a Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State and Year¹

State	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Emerging												
All States with Emerging Incidence Category	0.66	1.35	1.62	2.05	2.20	2.36	2.45	2.60	3.41	3.79	4.24	0.09
District of Columbia	1.67	2.31	3.10	5.13	4.81	6.22	4.46	4.15	6.28	6.45	6.44	0.42
Illinois	1.22	1.51	1.57	2.21	2.79	2.88	2.53	2.51	3.03	3.55	3.95	0.00
Indiana	0.59	0.90	1.15	2.03	2.29	2.26	2.21	2.22	2.64	2.87	3.66	0.22
Iowa	0.53	1.26	1.58	2.42	2.72	2.88	3.50	3.55	4.61	4.40	4.80	0.04
Kentucky	0.93	1.82	1.83	2.16	2.23	2.14	1.91	2.24	3.08	3.54	3.70	0.00
Michigan	0.33	1.09	1.65	1.85	1.78	2.38	2.36	2.97	4.56	4.56	5.95	0.04
North Carolina	1.09	1.66	2.40	3.03	3.26	3.24	3.30	3.12	3.75	4.20	3.94	0.25
North Dakota	0.97	0.80	1.17	0.85	1.00	1.45	1.89	1.98	2.64	2.11	2.59	0.00
Ohio	0.45	1.48	1.67	1.71	1.75	2.08	2.17	2.55	3.47	3.49	4.00	0.09
South Dakota	0.29	1.19	1.76	1.11	1.23	1.35	1.72	2.02	3.15	1.88	2.74	0.00
Tennessee	0.46	0.93	1.03	1.20	1.25	1.28	1.45	1.39	1.89	3.00	2.98	0.00
West Virginia	1.25	1.51	1.72	2.38	2.32	2.64	4.29	4.90	6.49	7.01	8.51	0.10
High												
All States with High Incidence Category	8.05	8.21	12.01	11.92	13.55	16.19	17.31	16.43	24.53	18.24	21.62	0.30
Connecticut	15.44	11.61	18.99	15.78	18.99	24.26	28.12	24.32	40.17	26.56	27.10	0.64
Delaware	2.93	7.45	9.16	10.30	9.91	12.38	13.36	12.36	15.31	15.70	13.07	0.16
Maine	27.74	32.85	45.24	40.81	46.08	54.27	55.42	65.20	91.15	57.80	76.35	0.04
Maryland	4.64	5.60	6.82	7.66	7.98	9.82	10.51	9.26	11.73	12.34	11.61	0.49
Massachusetts	20.67	17.89	31.35	28.15	28.48	40.67	38.36	36.85	54.75	36.73	45.87	0.51
Minnesota	3.58	6.10	9.11	7.92	10.53	8.88	8.33	9.02	6.49	5.97	10.48	0.10
New Hampshire	23.72	26.86	42.85	49.88	44.86	55.54	47.74	51.41	78.12	47.96	58.73	0.00
New Jersey	4.97	3.81	4.96	4.85	6.57	6.96	9.05	7.74	12.34	10.34	11.24	0.33
New York	9.69	7.37	9.76	9.36	13.46	16.14	17.35	14.73	24.70	18.70	23.43	0.29
Pennsylvania	5.27	5.53	8.33	8.59	11.40	13.70	18.33	17.59	25.58	19.37	22.88	0.60
Rhode Island	12.28	10.62	15.44	14.16	17.28	16.38	21.96	17.77	27.72	21.02	24.24	0.43
Vermont	21.69	31.56	43.84	47.07	56.68	70.18	74.23	69.95	133.13	78.45	141.49	0.00
Virginia	3.15	3.72	5.08	5.95	5.56	6.68	7.19	6.86	9.17	9.45	9.25	0.10
Wisconsin	3.66	5.70	7.08	9.29	10.98	10.16	10.15	10.36	12.63	10.13	11.68	0.04

Table 12a. Summary of Ratios of Members with a Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State and Year¹

State	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Other²												
All States with Other Incidence Category	0.00	0.98	0.62	0.00	1.39	0.41	0.75	0.00	0.66	1.04	0.29	0.00
Guam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Marshall Islands	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Micronesia	.	.	.	.	0	0.00	0.00	0.00	0	0	0	0
Northern Marianas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.39	0.00	0.00
Palau	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Puerto Rico	0.00	1.32	0.80	0.00	1.86	0.34	1.43	0.00	0.84	1.22	0.48	0.00
Virgin Islands	0.00	0.00	0.00	0.00	0.96	0.90	0.00	0.00	0.82	0.80	0.82	0.00
Zip Code Unknown³												
Unknown	1.39	1.43	2.53	1.75	1.81	2.34	1.64	1.30	1.87	1.06	1.35	0.08
All												
Low												
All States with Low Incidence Category	1.24	1.40	1.52	1.66	1.86	2.03	2.17	2.26	2.59	2.71	2.73	0.18
Alabama	0.27	0.86	0.91	1.15	1.18	1.33	1.37	1.55	1.64	1.53	1.67	0.25
Alaska	0.58	0.29	0.43	0.43	0.65	0.60	1.04	0.88	2.05	0.73	2.09	0.00
Arizona	0.26	0.59	0.53	0.87	1.25	1.04	0.97	0.93	1.24	1.06	1.27	0.45
Arkansas	0.20	0.54	0.67	0.66	0.75	1.14	0.99	1.10	1.26	1.34	1.81	0.14
California	2.16	2.20	2.19	2.27	2.54	2.76	3.06	3.16	3.51	4.19	4.02	0.20
Colorado	0.73	0.55	0.87	0.76	0.89	1.03	1.32	1.15	1.50	1.38	1.43	0.09
Florida	0.88	1.57	1.91	2.33	2.85	3.10	3.03	2.87	3.67	3.19	3.27	0.28
Georgia	0.99	1.08	1.18	1.42	1.70	1.68	2.15	2.53	3.17	3.40	3.22	0.22
Hawaii	0.00	0.36	0.24	0.64	1.26	0.62	0.77	0.84	0.70	0.58	0.67	0.00
Idaho	0.36	1.86	2.58	1.33	0.99	1.24	1.45	1.25	1.20	1.19	1.28	0.00
Kansas	0.65	1.20	1.63	2.49	1.89	2.10	2.41	2.50	3.17	2.92	3.48	0.07
Louisiana	0.41	0.98	1.41	1.76	1.81	1.89	1.33	1.88	1.73	1.75	1.47	0.17
Mississippi	0.37	1.35	1.36	1.69	1.32	1.20	1.47	1.69	1.53	1.57	1.08	0.00
Missouri	0.35	0.64	0.84	0.94	1.44	1.98	1.72	1.93	2.36	2.41	2.73	0.05
Montana	0.51	0.62	1.37	0.25	1.11	1.27	1.24	2.33	1.49	1.98	1.67	0.00
Nebraska	0.19	0.62	0.48	0.63	1.15	0.71	0.85	1.23	1.67	1.28	1.88	0.18

Table 12a. Summary of Ratios of Members with a Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State and Year¹

State	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Nevada	0.34	0.36	0.37	0.58	0.56	0.76	0.89	0.59	0.66	0.64	0.76	0.00
New Mexico	0.24	0.41	1.08	0.76	0.87	1.36	1.07	0.85	1.32	1.52	1.51	0.00
Oklahoma	0.49	0.61	0.71	0.97	0.59	0.75	0.82	0.64	1.07	1.00	1.23	0.00
Oregon	1.94	1.94	1.95	1.69	1.78	2.06	2.53	2.72	2.79	3.34	4.33	0.22
South Carolina	0.87	1.62	2.14	2.92	2.61	2.78	2.54	2.44	3.30	2.45	2.96	0.06
Texas	0.75	0.94	0.99	0.97	1.03	1.19	1.29	1.45	1.44	1.33	1.27	0.12
Utah	0.47	0.70	1.10	0.48	0.85	0.98	0.98	0.69	0.61	0.86	0.72	0.00
Washington	0.58	0.88	1.25	1.01	1.09	1.28	1.22	1.63	1.57	1.59	2.01	0.07
Wyoming	0.95	0.66	1.25	1.19	0.79	0.67	1.17	2.14	2.18	2.07	2.05	0.00
Emerging												
All States with Emerging Incidence Category	0.66	1.36	1.67	2.12	2.26	2.44	2.56	2.71	3.53	3.94	4.43	0.09
District of Columbia	1.67	2.31	3.10	5.37	5.11	6.29	4.89	4.50	6.69	6.84	7.11	0.42
Illinois	0.59	0.90	1.15	2.06	2.35	2.30	2.31	2.29	2.75	2.97	3.83	0.24
Indiana	0.53	1.26	1.60	2.48	2.80	3.00	3.62	3.77	4.78	4.67	5.02	0.04
Iowa	1.22	1.53	1.63	2.27	2.84	2.95	2.67	2.63	3.11	3.79	4.11	0.00
Kentucky	0.93	1.88	2.04	2.40	2.33	2.22	2.01	2.35	3.16	3.65	3.84	0.00
Michigan	0.33	1.09	1.68	1.93	1.82	2.45	2.42	3.04	4.67	4.74	6.24	0.04
North Carolina	1.09	1.66	2.47	3.09	3.33	3.38	3.39	3.22	3.93	4.33	4.09	0.25
North Dakota	0.97	0.80	1.17	0.85	1.00	1.54	1.98	2.16	2.64	2.11	2.89	0.00
Ohio	0.45	1.48	1.73	1.76	1.81	2.16	2.28	2.65	3.57	3.60	4.17	0.09
South Dakota	0.29	1.19	1.76	1.11	1.23	1.35	1.95	2.09	3.22	1.88	2.81	0.00
Tennessee	0.46	0.94	1.06	1.22	1.28	1.33	1.53	1.47	1.98	3.11	3.15	0.00
West Virginia	1.25	1.51	1.75	2.41	2.38	2.75	4.39	5.10	6.61	7.28	8.68	0.10
High												
All States with High Incidence Category	8.05	8.41	12.57	12.79	14.68	17.70	19.26	18.64	28.06	21.33	25.58	0.34
Connecticut	15.44	11.99	19.83	16.90	20.53	26.33	30.92	27.26	45.24	30.65	31.88	0.80
Delaware	2.93	7.45	9.51	10.71	10.58	13.06	14.31	13.30	16.34	17.17	14.73	0.32
Maine	27.74	33.98	47.67	44.23	51.04	60.60	63.57	76.41	108.49	70.44	93.85	0.04
Maryland	4.64	5.67	7.03	8.18	8.53	10.53	11.38	10.14	12.88	13.73	13.13	0.52
Massachusetts	20.67	18.20	33.01	31.27	32.25	46.06	44.97	43.46	64.91	45.77	56.72	0.56

Table 12a. Summary of Ratios of Members with a Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State and Year¹

State	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Minnesota	3.58	6.13	9.30	8.25	10.98	9.42	8.93	9.78	7.16	6.49	11.07	0.10
New Hampshire	23.72	27.54	44.97	53.33	48.73	60.71	54.16	59.68	90.11	57.23	71.31	0.00
New Jersey	4.97	3.86	5.09	5.09	6.89	7.30	9.62	8.36	13.34	11.32	12.26	0.39
New York	9.69	7.64	10.42	10.20	14.52	17.67	19.41	16.87	28.51	22.12	28.01	0.33
Pennsylvania	5.27	5.60	8.63	8.97	12.11	14.63	19.60	19.34	28.30	22.06	26.12	0.68
Rhode Island	12.28	10.92	16.23	15.61	18.57	17.97	25.09	21.01	31.20	24.33	27.63	0.42
Vermont	21.69	31.78	46.42	52.09	65.07	79.24	86.37	82.50	159.45	100.13	179.02	0.00
Virginia	3.15	3.75	5.19	6.20	5.81	7.03	7.57	7.21	9.70	10.10	10.06	0.10
Wisconsin	3.66	5.82	7.31	9.64	11.63	10.85	11.04	11.38	13.88	11.34	13.33	0.04
Other²												
All States with Other												
Incidence Category	0.00	0.98	0.62	0.00	1.39	0.41	0.75	0.00	0.66	1.04	0.29	0.00
Guam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Marshall Islands	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Micronesia	.	.	.	.	0	0.00	0.00	0.00	0	0	0	0
Northern Marianas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.39	0.00	0.00
Palau	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Puerto Rico	0.00	1.32	0.80	0.00	1.86	0.34	1.43	0.00	0.84	1.22	0.48	0.00
Virgin Islands	0.00	0.00	0.00	0.00	0.96	0.90	0.00	0.00	0.82	0.80	0.82	0.00
Zip Code Unknown³												
Unknown	1.39	1.43	2.58	1.92	1.81	2.46	1.75	1.35	2.03	1.12	1.47	0.08
No obstetric or dermatologic conditions in surrounding 30 days												
Low												
All States with Low												
Incidence Category	0.67	0.92	1.06	1.18	1.28	1.44	1.50	1.61	1.94	2.06	2.10	0.10
Alabama	0.27	0.84	0.83	1.12	1.15	1.28	1.31	1.50	1.60	1.50	1.60	0.17
Alaska	0.58	0.14	0.43	0.14	0.39	0.45	0.89	0.81	1.91	0.73	1.89	0.00
Arizona	0.13	0.52	0.45	0.73	1.01	0.81	0.73	0.66	1.01	0.81	1.04	0.27
Arkansas	0.15	0.48	0.65	0.62	0.73	1.02	0.93	1.10	1.17	1.34	1.74	0.14
California	1.09	1.24	1.26	1.30	1.31	1.56	1.77	1.96	2.33	3.00	2.90	0.13
Colorado	0.35	0.39	0.42	0.41	0.46	0.79	1.06	0.84	1.27	1.04	1.17	0.06
Florida	0.42	1.22	1.59	1.84	2.33	2.57	2.50	2.39	3.21	2.68	2.78	0.14

Table 12a. Summary of Ratios of Members with a Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State and Year¹

State	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Georgia	0.57	0.67	0.84	1.09	1.31	1.26	1.23	1.48	1.87	2.04	1.82	0.05
Hawaii	0.00	0.24	0.12	0.51	1.14	0.62	0.66	0.73	0.70	0.49	0.67	0.00
Idaho	0.24	1.68	2.46	1.15	0.89	1.07	1.29	1.17	1.12	1.05	1.16	0.00
Kansas	0.57	1.14	1.61	2.41	1.84	2.05	2.26	2.41	2.98	2.82	3.25	0.07
Louisiana	0.30	0.84	1.31	1.67	1.59	1.62	1.15	1.73	1.58	1.62	1.34	0.17
Mississippi	0.26	1.27	1.26	1.67	1.27	1.14	1.36	1.68	1.41	1.56	1.06	0.00
Missouri	0.30	0.43	0.61	0.87	1.38	1.82	1.58	1.82	2.24	2.30	2.57	0.05
Montana	0.51	0.62	1.37	0.25	0.96	1.20	1.24	2.05	1.43	1.81	1.67	0.00
Nebraska	0.19	0.49	0.44	0.54	1.02	0.63	0.75	0.88	1.47	1.08	1.59	0.09
Nevada	0.15	0.32	0.31	0.47	0.47	0.69	0.72	0.56	0.53	0.62	0.67	0.00
New Mexico	0.16	0.37	0.90	0.67	0.71	1.25	0.89	0.85	1.17	1.48	1.48	0.00
Oklahoma	0.35	0.31	0.50	0.74	0.40	0.55	0.67	0.53	0.99	0.94	1.07	0.00
Oregon	0.55	1.29	1.31	1.04	1.14	1.66	1.78	2.00	2.14	2.38	2.76	0.11
South Carolina	0.50	1.35	1.93	2.76	2.34	2.32	2.09	2.34	2.82	2.38	2.81	0.06
Texas	0.44	0.60	0.57	0.66	0.69	0.79	0.88	0.93	1.05	0.95	1.07	0.11
Utah	0.35	0.48	0.99	0.29	0.63	0.61	0.58	0.36	0.50	0.71	0.66	0.00
Washington	0.34	0.59	1.01	0.82	0.85	0.98	0.86	1.26	1.26	1.22	1.57	0.00
Wyoming	0.00	0.66	0.94	0.89	0.79	0.56	1.17	2.14	2.18	2.07	1.96	0.00
Emerging												
All States with Emerging												
Incidence Category	0.51	1.23	1.53	1.95	2.09	2.26	2.33	2.40	3.17	3.57	4.06	0.08
District of Columbia	1.55	2.31	2.62	4.97	4.04	5.46	4.53	3.93	6.49	6.38	6.71	0.42
Illinois	0.49	0.81	1.06	1.89	2.15	2.15	2.16	2.13	2.61	2.76	3.60	0.22
Indiana	0.44	1.15	1.52	2.37	2.67	2.84	3.13	2.88	3.63	3.60	4.12	0.02
Iowa	0.83	1.41	1.49	2.13	2.61	2.70	2.33	2.42	2.86	3.63	3.88	0.00
Kentucky	0.66	1.66	1.79	2.15	2.09	2.04	1.88	2.21	2.97	3.36	3.47	0.00
Michigan	0.27	1.00	1.52	1.84	1.72	2.35	2.30	2.68	4.31	4.37	5.78	0.04
North Carolina	0.76	1.50	2.24	2.79	3.04	3.03	3.02	2.86	3.50	3.96	3.72	0.21
North Dakota	0.64	0.80	1.18	0.66	0.82	1.27	1.71	1.98	2.47	2.03	2.89	0.00
Ohio	0.31	1.34	1.63	1.61	1.69	1.98	2.09	2.44	3.33	3.37	3.99	0.09
South Dakota	0.29	1.10	1.76	1.02	1.23	1.28	1.72	2.02	3.00	1.74	2.74	0.00
Tennessee	0.40	0.86	0.95	1.14	1.19	1.23	1.44	1.33	1.71	2.99	3.07	0.00
West Virginia	1.17	1.48	1.59	2.31	2.38	2.72	4.18	4.98	6.31	7.08	8.35	0.10

Table 12a. Summary of Ratios of Members with a Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State and Year¹

State	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
High												
All States with High Incidence Category	7.63	8.02	12.12	12.26	14.05	16.93	18.48	17.92	27.22	20.58	24.83	0.30
Connecticut	15.04	11.57	19.12	16.16	19.43	24.73	29.30	25.69	43.86	29.61	31.04	0.75
Delaware	2.77	7.09	9.23	10.23	10.06	12.56	13.94	12.97	15.84	16.72	14.24	0.32
Maine	27.49	33.42	46.84	43.37	50.38	59.49	62.77	75.49	106.95	69.17	92.08	0.04
Maryland	4.31	5.47	6.76	7.83	8.04	9.99	10.73	9.49	12.25	13.05	12.63	0.34
Massachusetts	20.07	17.39	32.21	30.32	31.18	44.76	43.75	42.26	63.41	44.63	55.37	0.51
Minnesota	3.35	5.92	8.86	7.94	10.59	9.08	8.56	9.43	6.86	6.29	10.78	0.10
New Hampshire	23.18	26.80	43.91	51.99	47.53	59.58	52.97	58.61	88.72	55.92	69.89	0.00
New Jersey	4.63	3.62	4.84	4.68	6.57	6.94	9.16	8.08	12.97	10.93	11.87	0.36
New York	8.90	7.05	9.79	9.57	13.72	16.64	18.45	16.07	27.56	21.15	27.13	0.28
Pennsylvania	4.86	5.29	8.26	8.28	11.24	13.66	18.52	18.26	27.02	20.88	25.02	0.59
Rhode Island	11.13	10.47	15.68	15.00	17.52	17.31	23.97	20.39	30.39	23.63	27.23	0.43
Vermont	19.45	31.21	46.09	51.65	64.01	78.08	85.03	81.09	157.75	98.34	176.97	0.00
Virginia	2.95	3.52	4.94	5.90	5.53	6.66	7.16	6.76	9.21	9.69	9.52	0.09
Wisconsin	3.43	5.51	7.04	9.23	11.28	10.47	10.72	11.17	13.44	11.07	13.04	0.04
Other²												
All States with Other Incidence Category	0.00	0.98	0.41	0.00	1.19	0.41	0.75	0.00	0.66	0.83	0.29	0.00
Guam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Marshall Islands	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Micronesia	.	.	.	.	0	0.00	0.00	0.00	0	0	0	0
Northern Marianas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.39	0.00	0.00
Palau	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Puerto Rico	0.00	1.32	0.54	0.00	1.55	0.34	1.43	0.00	0.84	0.81	0.48	0.00
Virgin Islands	0.00	0.00	0.00	0.00	0.96	0.90	0.00	0.00	0.82	0.80	0.82	0.00
Zip Code Unknown³												
Unknown	1.21	1.28	2.37	1.75	1.67	2.08	1.60	1.14	1.78	1.02	1.38	0.00

¹6 of 7 Data Partners contributed to this stratification, due to small cell masking in one Data Partner

²Eligible member zip code associated with a geographic region that is outside of the 50 states

³Zip code not populated at the Data Partner

Table 12b. Summary of Rates of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State and Year¹

State	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
First Dispensing												
<i>Low</i>												
All States with Low Incidence Category	1.55	1.72	1.80	1.93	2.20	2.40	2.55	2.63	3.00	3.09	3.49	2.74
Alabama	0.36	1.07	1.03	1.32	1.37	1.46	1.55	1.77	1.85	1.74	2.12	7.48
Alaska	0.73	0.37	0.53	0.53	0.81	0.63	1.21	0.93	2.35	0.77	2.48	0.00
Arizona	0.34	0.78	0.67	1.06	1.58	1.23	1.12	1.11	1.45	1.29	1.67	5.01
Arkansas	0.25	0.67	0.73	0.72	0.85	1.25	1.04	1.27	1.40	1.53	2.22	2.16
California	2.62	2.64	2.53	2.57	2.95	3.23	3.53	3.57	3.95	4.66	5.65	4.59
Colorado	0.93	0.71	1.08	0.92	1.10	1.26	1.61	1.39	1.82	1.67	1.82	2.60
Florida	1.11	1.98	2.28	2.72	3.36	3.68	3.61	3.40	4.19	3.64	4.08	2.44
Georgia	1.23	1.28	1.38	1.68	2.06	2.03	2.59	3.02	3.69	3.80	3.69	4.53
Hawaii	0.00	0.45	0.28	0.75	1.31	0.43	0.89	0.95	0.68	0.55	0.85	0.00
Idaho	0.44	2.28	2.89	1.34	1.16	1.41	1.61	1.38	1.37	1.42	1.55	0.00
Kansas	0.86	1.47	1.87	2.76	2.15	2.44	2.75	2.83	3.71	3.42	4.26	0.89
Louisiana	0.51	1.21	1.65	1.98	2.06	2.17	1.51	2.19	1.96	1.90	1.85	2.34
Mississippi	0.48	1.67	1.57	1.98	1.48	1.34	1.72	1.93	1.69	1.75	1.36	0.00
Missouri	0.44	0.80	1.02	1.12	1.72	2.43	2.07	2.29	2.80	2.89	3.42	1.27
Montana	0.62	0.74	1.56	0.28	1.18	1.45	1.34	2.58	1.71	2.21	1.95	0.00
Nebraska	0.24	0.75	0.51	0.69	1.31	0.77	0.93	1.31	1.96	1.48	2.19	1.66
Nevada	0.45	0.48	0.46	0.70	0.68	0.94	1.04	0.72	0.79	0.79	1.00	0.00
New Mexico	0.30	0.51	1.28	0.90	1.03	1.59	1.16	1.00	1.53	1.69	1.92	0.00
Oklahoma	0.64	0.77	0.86	1.18	0.69	0.87	0.98	0.73	1.23	1.18	1.53	0.00
Oregon	2.54	2.48	2.34	1.95	2.20	2.44	2.94	3.13	3.23	3.95	5.35	3.52
South Carolina	1.14	2.00	2.44	3.43	3.04	3.14	2.83	2.81	3.46	2.75	3.70	1.00
Texas	0.97	1.20	1.23	1.18	1.25	1.43	1.55	1.72	1.77	1.52	1.64	1.37
Utah	0.61	0.88	1.29	0.60	1.07	1.18	1.24	0.79	0.74	1.02	0.91	0.00
Washington	0.74	1.10	1.50	1.18	1.28	1.52	1.43	1.96	1.88	1.88	2.44	0.75
Wyoming	1.22	0.81	1.28	1.39	0.93	0.79	1.26	2.27	2.45	2.21	2.43	0.00

Table 12b. Summary of Rates of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State and Year¹

State	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Emerging												
All States with Emerging Incidence Category	0.83	1.68	1.96	2.45	2.63	2.82	2.92	3.10	4.10	4.55	5.40	2.34
District of Columbia	2.08	2.95	3.84	6.33	5.96	7.76	5.62	5.18	7.89	8.13	8.40	3.28
Illinois	0.76	1.14	1.39	2.43	2.75	2.76	2.68	2.71	3.20	3.45	4.73	2.59
Indiana	0.67	1.56	1.92	2.93	3.27	3.48	4.20	4.22	5.48	5.26	5.98	2.63
Iowa	1.51	1.87	1.78	2.52	3.19	3.28	2.90	2.97	3.50	4.12	4.91	0.00
Kentucky	1.16	2.27	2.20	2.60	2.68	2.59	2.27	2.64	3.62	4.18	4.65	0.00
Michigan	0.43	1.37	1.96	2.16	2.10	2.78	2.79	3.47	5.34	5.37	7.56	0.60
North Carolina	1.40	2.09	2.89	3.61	3.90	3.85	3.98	3.84	4.51	5.06	5.06	3.39
North Dakota	1.22	0.96	1.36	1.00	1.18	1.72	2.22	2.30	3.08	2.47	3.23	0.00
Ohio	0.57	1.86	2.06	2.08	2.13	2.54	2.66	3.08	4.20	4.23	5.08	3.18
South Dakota	0.38	1.42	2.01	1.26	1.40	1.54	1.96	2.30	3.57	2.14	3.37	0.00
Tennessee	0.57	1.15	1.24	1.43	1.50	1.46	1.62	1.60	2.33	3.66	3.93	0.00
West Virginia	1.59	1.85	2.02	2.74	2.69	3.06	5.05	5.71	7.57	8.24	10.85	1.98
High												
All States with High Incidence Category	9.99	10.28	14.57	14.42	16.44	19.71	20.85	19.69	29.43	21.95	27.22	4.50
Connecticut	18.89	14.42	22.94	18.96	22.75	29.87	33.82	29.33	48.98	32.96	33.51	10.27
Delaware	3.78	9.31	10.87	12.32	11.70	14.48	15.85	14.50	17.94	18.29	16.40	1.48
Maine	32.18	38.93	52.03	50.42	53.56	63.43	64.80	76.26	110.98	68.37	93.30	1.03
Maryland	5.69	6.98	8.16	9.15	9.53	11.82	12.50	11.03	14.00	14.64	14.44	4.52
Massachusetts	26.48	22.49	37.58	33.27	33.61	48.60	45.25	42.96	64.98	43.08	57.34	6.30
Minnesota	4.45	7.55	10.99	9.45	12.68	10.76	9.94	10.73	7.76	7.22	13.61	1.48
New Hampshire	30.28	33.01	51.59	58.97	53.28	68.00	56.55	61.08	92.71	57.59	72.39	0.00
New Jersey	6.08	4.80	6.03	5.83	7.87	8.35	10.74	9.17	14.65	12.40	14.11	2.93
New York	12.12	9.32	11.91	11.57	16.31	19.70	20.84	17.66	29.49	22.45	29.37	3.87
Pennsylvania	6.61	7.09	10.19	10.57	13.99	16.75	22.45	21.37	31.02	23.29	29.00	5.84
Rhode Island	15.18	13.15	18.38	16.65	20.45	23.04	26.08	21.13	33.71	25.43	31.09	7.42
Vermont	26.69	37.90	49.68	53.30	64.12	79.30	84.03	77.92	149.37	87.99	171.02	0.00
Virginia	3.89	4.61	6.21	7.20	7.02	8.22	8.81	8.27	11.05	11.49	11.64	3.52
Wisconsin	4.68	7.15	8.74	11.13	13.32	12.44	12.45	12.76	15.26	12.36	15.21	1.48

Table 12b. Summary of Rates of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State and Year¹

State	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Other²												
All States with Other												
Incidence Category	0.00	1.19	0.71	0.00	1.73	0.48	0.86	0.00	0.76	1.22	0.48	0.00
Guam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Marshall Islands	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Micronesia	.	.	.	.	0	0.00	0.00	0.00	0	0	0	0
Northern Marianas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.58	0.00	0.00
Palau	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Puerto Rico	0.00	1.62	0.94	0.00	2.17	0.40	1.74	0.00	1.04	1.53	0.61	0.00
Virgin Islands	0.00	0.00	0.00	0.00	1.61	0.98	0.00	0.00	0.87	0.87	0.94	0.00
Zip Code Unknown³												
Unknown	2.69	1.96	3.33	2.43	2.50	3.10	2.50	1.73	2.37	1.41	1.79	0.72
All												
Low												
All States with Low												
Incidence Category	1.63	1.82	1.94	2.09	2.38	2.63	2.81	2.93	3.35	3.52	3.90	3.11
Alabama	0.36	1.10	1.07	1.39	1.42	1.67	1.69	1.91	1.97	1.96	2.31	9.97
Alaska	0.73	0.37	0.53	0.53	0.81	0.81	1.21	1.10	2.44	0.86	2.72	0.00
Arizona	0.35	0.82	0.69	1.17	1.69	1.42	1.27	1.27	1.57	1.39	1.74	5.00
Arkansas	0.25	0.69	0.78	0.79	0.96	1.56	1.28	1.46	1.61	1.68	2.38	2.16
California	2.73	2.81	2.74	2.77	3.18	3.51	3.90	4.00	4.35	5.19	6.25	5.35
Colorado	0.94	0.72	1.11	0.99	1.20	1.40	1.75	1.48	1.96	1.86	1.89	2.60
Florida	1.27	2.07	2.49	2.96	3.63	3.99	3.97	3.73	4.67	4.09	4.54	2.68
Georgia	1.36	1.40	1.53	1.80	2.18	2.19	2.71	3.25	4.54	5.22	4.87	6.22
Hawaii	0.00	0.45	0.28	0.75	1.46	0.86	0.89	1.19	0.79	0.66	0.85	0.00
Idaho	0.44	2.35	3.29	1.67	1.16	1.61	1.76	1.66	1.41	1.46	1.65	0.00
Kansas	0.91	1.50	1.95	3.04	2.32	2.48	2.98	3.19	3.93	3.68	4.58	0.89
Louisiana	0.54	1.28	1.76	2.15	2.24	2.42	1.65	2.44	2.14	2.15	2.05	2.34
Mississippi	0.48	1.72	1.67	2.24	1.69	1.59	1.88	2.14	1.83	1.92	1.44	0.00
Missouri	0.44	0.82	1.06	1.19	1.81	2.52	2.18	2.49	3.06	3.05	3.63	1.27
Montana	0.62	0.85	1.86	0.28	1.26	1.53	1.50	2.89	1.79	2.33	2.29	0.00
Nebraska	0.24	0.79	0.67	0.80	1.44	0.86	1.10	1.53	2.08	1.55	2.46	1.66
Nevada	0.45	0.51	0.49	0.75	0.75	1.01	1.23	0.76	0.89	0.89	1.05	0.00

Table 12b. Summary of Rates of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State and Year¹

State	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
New Mexico	0.30	0.51	1.39	0.95	1.03	1.68	1.29	1.00	1.70	1.94	1.97	0.00
Oklahoma	0.64	0.77	0.90	1.24	0.75	0.90	1.01	0.88	1.41	1.30	1.61	0.00
Oregon	2.54	2.58	2.46	2.21	2.30	2.65	3.10	3.43	3.45	4.11	5.82	3.52
South Carolina	1.18	2.08	2.72	3.67	3.19	3.41	3.13	3.02	4.08	3.02	3.96	1.00
Texas	1.03	1.25	1.28	1.27	1.38	1.69	1.88	2.05	2.07	1.84	1.78	1.37
Utah	0.61	0.95	1.43	0.60	1.11	1.33	1.27	0.91	0.77	1.12	0.98	0.00
Washington	0.76	1.17	1.58	1.25	1.46	1.64	1.59	2.04	2.06	2.01	2.70	0.75
Wyoming	1.22	0.81	1.46	1.39	0.93	0.93	1.39	2.62	2.80	2.65	2.54	0.00
Emerging												
All States with Emerging Incidence Category	0.85	1.82	2.14	2.71	2.85	3.07	3.21	3.39	4.46	4.91	5.84	2.39
District of Columbia	2.23	3.06	3.84	7.11	6.52	8.13	6.64	5.89	8.75	8.70	9.71	3.27
Illinois	0.79	1.17	1.44	2.51	2.90	2.93	2.91	2.91	3.43	3.67	5.07	2.82
Indiana	0.67	1.66	2.11	3.25	3.54	3.80	4.57	4.70	5.93	5.84	6.52	2.63
Iowa	1.51	2.28	1.92	2.67	3.27	3.44	3.13	3.18	3.90	4.50	5.21	0.00
Kentucky	1.22	2.67	2.68	3.29	3.01	2.79	2.54	2.94	3.89	4.46	4.93	0.00
Michigan	0.43	1.48	2.05	2.42	2.24	3.12	2.96	3.67	5.76	5.83	8.18	0.60
North Carolina	1.43	2.26	3.16	3.90	4.14	4.25	4.24	4.19	4.97	5.40	5.41	3.38
North Dakota	1.22	0.96	1.36	1.00	1.39	2.04	2.43	2.51	3.08	2.75	3.89	0.00
Ohio	0.59	1.99	2.29	2.34	2.44	2.81	2.95	3.45	4.58	4.55	5.54	3.18
South Dakota	0.38	1.53	2.01	1.26	1.40	1.54	2.30	2.38	3.90	2.22	3.53	0.00
Tennessee	0.58	1.21	1.30	1.51	1.57	1.59	1.92	1.75	2.63	3.99	4.70	0.00
West Virginia	1.59	1.85	2.09	2.94	2.89	3.28	5.48	6.18	7.89	8.98	11.41	1.98
High												
All States with High Incidence Category	10.34	10.93	15.95	16.20	18.66	22.68	24.49	23.48	35.98	26.97	34.19	5.22
Connecticut	19.58	15.49	24.81	21.17	25.75	33.97	38.90	34.20	58.69	39.49	41.22	12.76
Delaware	3.78	9.85	11.97	13.46	13.18	16.43	17.80	16.34	19.97	21.90	19.39	2.96
Maine	33.15	41.65	57.32	57.18	61.75	74.66	77.96	94.25	141.40	86.84	121.37	0.99
Maryland	5.79	7.29	8.92	10.19	10.98	13.34	14.23	12.57	16.06	17.25	17.20	4.85
Massachusetts	27.65	23.80	42.07	39.77	40.60	59.04	57.08	53.91	84.06	57.01	76.74	6.87
Minnesota	4.50	8.08	11.56	9.99	13.48	11.68	10.84	12.12	8.75	8.14	14.81	1.47
New Hampshire	31.33	35.68	56.70	64.99	59.49	77.65	66.45	72.83	112.57	71.11	92.33	0.00

Table 12b. Summary of Rates of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State and Year¹

State	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
New Jersey	6.24	5.11	6.41	6.30	8.49	9.01	11.97	10.35	16.49	14.12	16.09	3.51
New York	12.67	10.08	13.35	13.29	18.65	22.85	24.80	21.59	36.88	28.22	37.56	4.58
Pennsylvania	6.84	7.43	11.08	11.53	15.57	18.75	25.49	24.69	36.27	27.96	34.80	6.65
Rhode Island	15.70	14.03	20.08	19.18	23.03	27.23	32.20	26.72	40.86	31.21	36.95	7.37
Vermont	27.12	39.47	56.34	62.66	77.59	94.00	105.38	96.07	196.02	118.67	237.07	0.00
Virginia	4.00	4.76	6.49	7.69	7.57	8.92	9.52	8.91	12.11	12.70	13.11	3.51
Wisconsin	4.81	7.61	9.25	11.98	14.63	13.81	14.17	14.66	17.57	14.27	18.17	1.48
Other²												
All States with Other												
Incidence Category	0.00	1.19	0.71	0.00	1.97	0.48	0.86	0.00	0.76	1.22	0.48	0.00
Guam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Marshall Islands	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Micronesia	.	.	.	.	0	0.00	0.00	0.00	0	0	0	0
Northern Marianas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.58	0.00	0.00
Palau	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Puerto Rico	0.00	1.62	0.94	0.00	2.53	0.40	1.74	0.00	1.04	1.53	0.61	0.00
Virgin Islands	0.00	0.00	0.00	0.00	1.61	0.98	0.00	0.00	0.87	0.87	0.94	0.00
Zip Code Unknown³												
Unknown	2.76	1.96	3.40	2.78	2.62	3.48	2.72	1.99	2.61	1.57	2.00	0.72
No obstetric or dermatologic conditions in surrounding 30 days												
Low												
All States with Low												
Incidence Category	0.87	1.20	1.36	1.50	1.64	1.87	1.94	2.07	2.49	2.63	2.99	1.76
Alabama	0.36	1.06	0.99	1.36	1.40	1.64	1.62	1.87	1.92	1.93	2.24	5.05
Alaska	0.74	0.19	0.54	0.18	0.49	0.64	1.05	1.03	2.30	0.87	2.51	0.00
Arizona	0.17	0.74	0.59	1.00	1.37	1.13	0.97	0.87	1.29	1.07	1.44	2.98
Arkansas	0.19	0.59	0.77	0.75	0.95	1.45	1.23	1.46	1.52	1.71	2.32	2.18
California	1.36	1.59	1.58	1.59	1.63	1.97	2.24	2.43	2.86	3.68	4.51	3.30
Colorado	0.46	0.52	0.55	0.55	0.63	1.07	1.42	1.07	1.68	1.42	1.58	1.59
Florida	0.55	1.65	2.11	2.39	3.02	3.37	3.34	3.15	4.14	3.50	3.90	1.37
Georgia	0.75	0.85	1.06	1.37	1.68	1.62	1.55	1.89	2.46	2.71	2.44	1.34
Hawaii	0.00	0.30	0.14	0.60	1.33	0.87	0.78	1.08	0.80	0.56	0.86	0.00
Idaho	0.30	2.17	3.20	1.42	1.07	1.38	1.59	1.59	1.34	1.30	1.53	0.00

Table 12b. Summary of Rates of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State and Year¹

State	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
Kansas	0.82	1.44	1.95	2.99	2.29	2.45	2.85	3.10	3.76	3.60	4.35	0.90
Louisiana	0.41	1.11	1.66	2.07	1.99	2.13	1.46	2.28	1.99	2.01	1.89	2.38
Mississippi	0.35	1.63	1.56	2.19	1.65	1.51	1.78	2.15	1.68	1.92	1.44	0.00
Missouri	0.40	0.56	0.77	1.12	1.76	2.35	2.04	2.39	2.95	2.95	3.46	1.28
Montana	0.62	0.86	1.88	0.28	1.11	1.47	1.52	2.61	1.74	2.17	2.32	0.00
Nebraska	0.24	0.64	0.60	0.70	1.31	0.76	0.98	1.12	1.86	1.33	2.12	0.84
Nevada	0.21	0.45	0.41	0.63	0.64	0.93	1.01	0.73	0.72	0.88	0.94	0.00
New Mexico	0.20	0.46	1.08	0.86	0.85	1.56	1.08	1.01	1.55	1.92	1.95	0.00
Oklahoma	0.46	0.40	0.64	0.97	0.51	0.67	0.82	0.74	1.31	1.23	1.42	0.00
Oregon	0.73	1.73	1.69	1.43	1.52	2.12	2.22	2.55	2.70	2.95	3.80	1.78
South Carolina	0.67	1.73	2.51	3.49	2.89	2.89	2.60	2.94	3.53	2.96	3.80	1.02
Texas	0.60	0.80	0.76	0.87	0.92	1.08	1.19	1.26	1.44	1.29	1.53	1.29
Utah	0.47	0.66	1.31	0.37	0.84	0.78	0.74	0.49	0.63	0.94	0.92	0.00
Washington	0.44	0.80	1.29	1.04	1.17	1.28	1.12	1.59	1.70	1.55	2.13	0.00
Wyoming	0.00	0.82	1.11	1.06	0.94	0.80	1.41	2.66	2.83	2.69	2.46	0.00
Emerging												
All States with Emerging Incidence Category	0.67	1.68	1.99	2.54	2.67	2.88	2.96	3.05	4.05	4.49	5.42	2.10
District of Columbia	2.12	3.11	3.30	6.55	5.31	7.24	6.30	5.17	8.65	8.27	9.37	3.34
Illinois	0.66	1.07	1.34	2.34	2.70	2.79	2.78	2.76	3.29	3.47	4.83	2.62
Indiana	0.56	1.54	2.04	3.16	3.42	3.65	4.00	3.62	4.54	4.54	5.38	1.33
Iowa	1.05	2.16	1.79	2.56	3.06	3.21	2.78	2.96	3.63	4.37	5.00	0.00
Kentucky	0.89	2.41	2.40	3.02	2.76	2.60	2.42	2.80	3.72	4.17	4.52	0.00
Michigan	0.35	1.37	1.89	2.36	2.16	3.03	2.86	3.28	5.40	5.40	7.63	0.61
North Carolina	1.03	2.07	2.91	3.59	3.83	3.86	3.84	3.77	4.46	4.99	4.98	2.86
North Dakota	0.82	0.98	1.38	0.79	1.20	1.75	2.15	2.33	2.92	2.69	3.95	0.00
Ohio	0.42	1.84	2.21	2.18	2.33	2.62	2.73	3.23	4.33	4.32	5.36	2.97
South Dakota	0.38	1.44	2.03	1.17	1.42	1.48	2.00	2.32	3.70	2.08	3.49	0.00
Tennessee	0.51	1.13	1.18	1.43	1.48	1.50	1.84	1.60	2.44	3.90	4.38	0.00
West Virginia	1.51	1.84	1.93	2.87	2.91	3.31	5.33	6.11	7.63	8.80	11.15	2.00

Table 12b. Summary of Rates of Single-dose Doxycycline Dispensings in the Sentinel Distributed Database (SDD) between January 1, 2009 and February 29, 2020 by State and Year¹

State	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	2019	2020
High												
All States with High Incidence Category	9.96	10.60	15.64	15.79	18.18	22.09	23.90	22.90	35.39	26.39	33.66	4.55
Connecticut	19.40	15.22	24.39	20.68	24.87	32.55	37.60	32.75	57.68	38.73	40.78	11.99
Delaware	3.63	9.58	11.85	12.97	12.82	16.07	17.64	16.16	19.66	20.40	19.07	3.00
Maine	33.16	41.42	56.96	56.73	61.59	74.00	77.75	94.20	140.95	86.38	120.57	1.00
Maryland	5.48	7.16	8.75	9.97	10.56	12.91	13.66	11.97	15.51	16.70	16.78	3.17
Massachusetts	27.21	23.12	41.79	39.20	39.93	58.46	56.44	53.11	83.37	56.35	76.01	6.36
Minnesota	4.29	7.58	11.21	9.78	13.23	11.48	10.58	11.83	8.48	7.98	14.59	1.49
New Hampshire	30.88	35.28	56.19	64.36	58.88	77.43	65.96	72.49	112.26	70.45	91.81	0.00
New Jersey	5.92	4.86	6.19	5.92	8.24	8.71	11.63	10.15	16.28	13.84	15.83	3.28
New York	11.89	9.50	12.81	12.71	18.03	21.99	24.05	20.93	36.23	27.39	36.97	3.83
Pennsylvania	6.42	7.12	10.77	10.84	14.69	17.79	24.48	23.58	35.08	26.82	33.79	5.76
Rhode Island	14.47	13.72	19.79	18.81	22.21	26.64	31.40	26.23	40.35	30.85	37.05	7.49
Vermont	24.63	39.15	56.60	63.04	77.30	94.06	105.28	95.49	195.59	117.79	236.38	0.00
Virginia	3.78	4.53	6.26	7.41	7.32	8.59	9.14	8.48	11.66	12.36	12.59	3.05
Wisconsin	4.56	7.31	9.06	11.66	14.42	13.55	13.96	14.56	17.22	14.11	17.98	1.50
Other²												
All States with Other Incidence Category	0.00	1.21	0.48	0.00	1.75	0.49	0.87	0.00	0.76	0.98	0.49	0.00
Guam	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Marshall Islands	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Micronesia	.	.	.	.	0	0.00	0.00	0.00	0	0	0	0
Northern Marianas	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	1.59	0.00	0.00
Palau	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
Puerto Rico	0.00	1.65	0.63	0.00	2.20	0.41	1.77	0.00	1.05	1.03	0.62	0.00
Virgin Islands	0.00	0.00	0.00	0.00	1.62	0.99	0.00	0.00	0.87	0.88	0.95	0.00
Zip Code Unknown³												
All with Zip Code Unknown	2.41	1.78	3.15	2.57	2.45	2.90	2.52	1.68	2.30	1.42	1.89	0.00

¹6 of 7 Data Partners contributed to this stratification, due to small cell masking in one Data Partner

²Eligible member zip code associated with a geographic region that is outside of the 50 states

³Zip code not populated at the Data Partner

Appendix A. Dates of Available Data for Each Data Partner (DP) as of Request Distribution Date (November 9, 2020)

DP ID	Start Date¹	End Date¹
DP01	6/1/2007	10/31/2019
DP02	1/1/2000	7/31/2019
DP03	1/1/2000	12/31/2017
DP04	1/1/2008	12/31/2019
DP05	1/1/2010	12/31/2019
DP06	1/1/2008	2/29/2020
DP07	1/1/2006	1/31/2020

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. Generic and Brand Names of Medical Products Used to Define the Exposure of Interest in this Request

Generic Name	Brand Name
Doxycycline calcium	Vibramycin
Doxycycline hyclate	Vibramycin
Doxycycline hyclate	Vibra-Tabs
Doxycycline hyclate	Doxycycline Hyclate
Doxycycline hyclate	Acticlate
Doxycycline hyclate	Morgidox
Doxycycline hyclate	Targadox
Doxycycline monohydrate	Vibramycin
Doxycycline monohydrate	Doxycycline Monohydrate
Doxycycline monohydrate	Adoxa
Doxycycline monohydrate	Adoxa Pak
Doxycycline monohydrate	Monodox
Doxycycline monohydrate	Avidoxy
Doxycycline monohydrate	Okebo

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

Code	Description	Code Category	Code Type
Arthropod Encounter			
910.4	Face, neck, and scalp except eye, insect bite, nonvenomous, without mention of infection	Diagnosis	ICD-09-CM
910.5	Face, neck, and scalp except eye, insect bite, nonvenomous, infected	Diagnosis	ICD-09-CM
911.4	Trunk, insect bite, nonvenomous, without mention of infection	Diagnosis	ICD-09-CM
911.5	Trunk, insect bite, nonvenomous, infected	Diagnosis	ICD-09-CM
912.4	Shoulder and upper arm, insect bite, nonvenomous, without mention of infection	Diagnosis	ICD-09-CM
912.5	Shoulder and upper arm, insect bite, nonvenomous, infected	Diagnosis	ICD-09-CM
913.4	Elbow, forearm, and wrist, insect bite, nonvenomous, without mention of infection	Diagnosis	ICD-09-CM
913.5	Elbow, forearm, and wrist, insect bite, nonvenomous, infected	Diagnosis	ICD-09-CM
914.4	Hand(s) except finger(s) alone, insect bite, nonvenomous, without mention of infection	Diagnosis	ICD-09-CM
914.5	Hand(s) except finger(s) alone, insect bite, nonvenomous, infected	Diagnosis	ICD-09-CM
915.4	Finger, insect bite, nonvenomous, without mention of infection	Diagnosis	ICD-09-CM
915.5	Finger, insect bite, nonvenomous, infected	Diagnosis	ICD-09-CM
916.4	Hip, thigh, leg, and ankle, insect bite, nonvenomous, without mention of infection	Diagnosis	ICD-09-CM
916.5	Hip, thigh, leg, and ankle, insect bite, nonvenomous, infected	Diagnosis	ICD-09-CM
917.4	Foot and toe(s), insect bite, nonvenomous, without mention of infection	Diagnosis	ICD-09-CM
917.5	Foot and toe(s), insect bite, nonvenomous, infected	Diagnosis	ICD-09-CM
919.4	Other, multiple, and unspecified sites, insect bite, nonvenomous, without mention of infection	Diagnosis	ICD-09-CM
919.5	Other, multiple, and unspecified sites, insect bite, nonvenomous, infected	Diagnosis	ICD-09-CM
E906.4	Bite of nonvenomous arthropod	Diagnosis	ICD-09-CM
W57	Bitten or stung by nonvenomous insect and other nonvenomous arthropods	Diagnosis	ICD-10-CM
W57.XXXA	Bitten or stung by nonvenomous insect and other nonvenomous arthropods, initial encounter	Diagnosis	ICD-10-CM
W57.XXXD	Bitten or stung by nonvenomous insect and other nonvenomous arthropods, subsequent encounter	Diagnosis	ICD-10-CM
W57.XXXS	Bitten or stung by nonvenomous insect and other nonvenomous arthropods, sequela	Diagnosis	ICD-10-CM
S00.06	Insect bite (nonvenomous) of scalp	Diagnosis	ICD-10-CM
S00.06XA	Insect bite (nonvenomous) of scalp, initial encounter	Diagnosis	ICD-10-CM
S00.06XD	Insect bite (nonvenomous) of scalp, subsequent encounter	Diagnosis	ICD-10-CM
S00.06XS	Insect bite (nonvenomous) of scalp, sequela	Diagnosis	ICD-10-CM
S00.26	Insect bite (nonvenomous) of eyelid and periocular area	Diagnosis	ICD-10-CM
S00.261	Insect bite (nonvenomous) of right eyelid and periocular area	Diagnosis	ICD-10-CM
S00.261A	Insect bite (nonvenomous) of right eyelid and periocular area, initial encounter	Diagnosis	ICD-10-CM
S00.261D	Insect bite (nonvenomous) of right eyelid and periocular area, subsequent	Diagnosis	ICD-10-CM
S00.261S	Insect bite (nonvenomous) of right eyelid and periocular area, sequela	Diagnosis	ICD-10-CM
S00.262	Insect bite (nonvenomous) of left eyelid and periocular area	Diagnosis	ICD-10-CM
S00.262A	Insect bite (nonvenomous) of left eyelid and periocular area, initial encounter	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S00.262D	Insect bite (nonvenomous) of left eyelid and periocular area, subsequent encounter	Diagnosis	ICD-10-CM
S00.262S	Insect bite (nonvenomous) of left eyelid and periocular area, sequela	Diagnosis	ICD-10-CM
S00.269	Insect bite (nonvenomous) of unspecified eyelid and periocular area	Diagnosis	ICD-10-CM
S00.269A	Insect bite (nonvenomous) of unspecified eyelid and periocular area, initial encounter	Diagnosis	ICD-10-CM
S00.269D	Insect bite (nonvenomous) of unspecified eyelid and periocular area, subsequent encounter	Diagnosis	ICD-10-CM
S00.269S	Insect bite (nonvenomous) of unspecified eyelid and periocular area, sequela	Diagnosis	ICD-10-CM
S00.36	Insect bite (nonvenomous) of nose	Diagnosis	ICD-10-CM
S00.36XA	Insect bite (nonvenomous) of nose, initial encounter	Diagnosis	ICD-10-CM
S00.36XD	Insect bite (nonvenomous) of nose, subsequent encounter	Diagnosis	ICD-10-CM
S00.36XS	Insect bite (nonvenomous) of nose, sequela	Diagnosis	ICD-10-CM
S00.46	Insect bite (nonvenomous) of ear	Diagnosis	ICD-10-CM
S00.461	Insect bite (nonvenomous) of right ear	Diagnosis	ICD-10-CM
S00.461A	Insect bite (nonvenomous) of right ear, initial encounter	Diagnosis	ICD-10-CM
S00.461D	Insect bite (nonvenomous) of right ear, subsequent encounter	Diagnosis	ICD-10-CM
S00.461S	Insect bite (nonvenomous) of right ear, sequela	Diagnosis	ICD-10-CM
S00.462	Insect bite (nonvenomous) of left ear	Diagnosis	ICD-10-CM
S00.462A	Insect bite (nonvenomous) of left ear, initial encounter	Diagnosis	ICD-10-CM
S00.462D	Insect bite (nonvenomous) of left ear, subsequent encounter	Diagnosis	ICD-10-CM
S00.462S	Insect bite (nonvenomous) of left ear, sequela	Diagnosis	ICD-10-CM
S00.469	Insect bite (nonvenomous) of unspecified ear	Diagnosis	ICD-10-CM
S00.469A	Insect bite (nonvenomous) of unspecified ear, initial encounter	Diagnosis	ICD-10-CM
S00.469D	Insect bite (nonvenomous) of unspecified ear, subsequent encounter	Diagnosis	ICD-10-CM
S00.469S	Insect bite (nonvenomous) of unspecified ear, sequela	Diagnosis	ICD-10-CM
S00.56	Insect bite (nonvenomous) of lip and oral cavity	Diagnosis	ICD-10-CM
S00.561	Insect bite (nonvenomous) of lip	Diagnosis	ICD-10-CM
S00.561A	Insect bite (nonvenomous) of lip, initial encounter	Diagnosis	ICD-10-CM
S00.561D	Insect bite (nonvenomous) of lip, subsequent encounter	Diagnosis	ICD-10-CM
S00.561S	Insect bite (nonvenomous) of lip, sequela	Diagnosis	ICD-10-CM
S00.562	Insect bite (nonvenomous) of oral cavity	Diagnosis	ICD-10-CM
S00.562A	Insect bite (nonvenomous) of oral cavity, initial encounter	Diagnosis	ICD-10-CM
S00.562D	Insect bite (nonvenomous) of oral cavity, subsequent encounter	Diagnosis	ICD-10-CM
S00.562S	Insect bite (nonvenomous) of oral cavity, sequela	Diagnosis	ICD-10-CM
S00.86	Insect bite (nonvenomous) of other part of head	Diagnosis	ICD-10-CM
S00.86XA	Insect bite (nonvenomous) of other part of head, initial encounter	Diagnosis	ICD-10-CM
S00.86XD	Insect bite (nonvenomous) of other part of head, subsequent encounter	Diagnosis	ICD-10-CM
S00.86XS	Insect bite (nonvenomous) of other part of head, sequela	Diagnosis	ICD-10-CM
S00.96	Insect bite (nonvenomous) of unspecified part of head	Diagnosis	ICD-10-CM
S00.96XA	Insect bite (nonvenomous) of unspecified part of head, initial encounter	Diagnosis	ICD-10-CM
S00.96XD	Insect bite (nonvenomous) of unspecified part of head, subsequent encounter	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S00.96XS	Insect bite (nonvenomous) of unspecified part of head, sequela	Diagnosis	ICD-10-CM
S10.16	Insect bite (nonvenomous) of throat	Diagnosis	ICD-10-CM
S10.16XA	Insect bite (nonvenomous) of throat, initial encounter	Diagnosis	ICD-10-CM
S10.16XD	Insect bite (nonvenomous) of throat, subsequent encounter	Diagnosis	ICD-10-CM
S10.16XS	Insect bite (nonvenomous) of throat, sequela	Diagnosis	ICD-10-CM
S10.86	Insect bite of other specified part of neck	Diagnosis	ICD-10-CM
S10.86XA	Insect bite of other specified part of neck, initial encounter	Diagnosis	ICD-10-CM
S10.86XD	Insect bite of other specified part of neck, subsequent encounter	Diagnosis	ICD-10-CM
S10.86XS	Insect bite of other specified part of neck, sequela	Diagnosis	ICD-10-CM
S10.96	Insect bite of unspecified part of neck	Diagnosis	ICD-10-CM
S10.96XA	Insect bite of unspecified part of neck, initial encounter	Diagnosis	ICD-10-CM
S10.96XD	Insect bite of unspecified part of neck, subsequent encounter	Diagnosis	ICD-10-CM
S10.96XS	Insect bite of unspecified part of neck, sequela	Diagnosis	ICD-10-CM
S20.16	Insect bite (nonvenomous) of breast	Diagnosis	ICD-10-CM
S20.161	Insect bite (nonvenomous) of breast, right breast	Diagnosis	ICD-10-CM
S20.161A	Insect bite (nonvenomous) of breast, right breast, initial encounter	Diagnosis	ICD-10-CM
S20.161D	Insect bite (nonvenomous) of breast, right breast, subsequent encounter	Diagnosis	ICD-10-CM
S20.161S	Insect bite (nonvenomous) of breast, right breast, sequela	Diagnosis	ICD-10-CM
S20.162	Insect bite (nonvenomous) of breast, left breast	Diagnosis	ICD-10-CM
S20.162A	Insect bite (nonvenomous) of breast, left breast, initial encounter	Diagnosis	ICD-10-CM
S20.162D	Insect bite (nonvenomous) of breast, left breast, subsequent encounter	Diagnosis	ICD-10-CM
S20.162S	Insect bite (nonvenomous) of breast, left breast, sequela	Diagnosis	ICD-10-CM
S20.169	Insect bite (nonvenomous) of breast, unspecified breast	Diagnosis	ICD-10-CM
S20.169A	Insect bite (nonvenomous) of breast, unspecified breast, initial encounter	Diagnosis	ICD-10-CM
S20.169D	Insect bite (nonvenomous) of breast, unspecified breast, subsequent encounter	Diagnosis	ICD-10-CM
S20.169S	Insect bite (nonvenomous) of breast, unspecified breast, sequela	Diagnosis	ICD-10-CM
S20.36	Insect bite (nonvenomous) of front wall of thorax	Diagnosis	ICD-10-CM
S20.361	Insect bite (nonvenomous) of right front wall of thorax	Diagnosis	ICD-10-CM
S20.361A	Insect bite (nonvenomous) of right front wall of thorax, initial encounter	Diagnosis	ICD-10-CM
S20.361D	Insect bite (nonvenomous) of right front wall of thorax, subsequent encounter	Diagnosis	ICD-10-CM
S20.361S	Insect bite (nonvenomous) of right front wall of thorax, sequela	Diagnosis	ICD-10-CM
S20.362	Insect bite (nonvenomous) of left front wall of thorax	Diagnosis	ICD-10-CM
S20.362A	Insect bite (nonvenomous) of left front wall of thorax, initial encounter	Diagnosis	ICD-10-CM
S20.362D	Insect bite (nonvenomous) of left front wall of thorax, subsequent encounter	Diagnosis	ICD-10-CM
S20.362S	Insect bite (nonvenomous) of left front wall of thorax, sequela	Diagnosis	ICD-10-CM
S20.369	Insect bite (nonvenomous) of unspecified front wall of thorax	Diagnosis	ICD-10-CM
S20.369A	Insect bite (nonvenomous) of unspecified front wall of thorax, initial encounter	Diagnosis	ICD-10-CM
S20.369D	Insect bite (nonvenomous) of unspecified front wall of thorax, subsequent	Diagnosis	ICD-10-CM
S20.369S	Insect bite (nonvenomous) of unspecified front wall of thorax, sequela	Diagnosis	ICD-10-CM
S20.46	Insect bite (nonvenomous) of back wall of thorax	Diagnosis	ICD-10-CM
S20.461	Insect bite (nonvenomous) of right back wall of thorax	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S20.461A	Insect bite (nonvenomous) of right back wall of thorax, initial encounter	Diagnosis	ICD-10-CM
S20.461D	Insect bite (nonvenomous) of right back wall of thorax, subsequent encounter	Diagnosis	ICD-10-CM
S20.461S	Insect bite (nonvenomous) of right back wall of thorax, sequela	Diagnosis	ICD-10-CM
S20.462	Insect bite (nonvenomous) of left back wall of thorax	Diagnosis	ICD-10-CM
S20.462A	Insect bite (nonvenomous) of left back wall of thorax, initial encounter	Diagnosis	ICD-10-CM
S20.462D	Insect bite (nonvenomous) of left back wall of thorax, subsequent encounter	Diagnosis	ICD-10-CM
S20.462S	Insect bite (nonvenomous) of left back wall of thorax, sequela	Diagnosis	ICD-10-CM
S20.469	Insect bite (nonvenomous) of unspecified back wall of thorax	Diagnosis	ICD-10-CM
S20.469A	Insect bite (nonvenomous) of unspecified back wall of thorax, initial encounter	Diagnosis	ICD-10-CM
S20.469D	Insect bite (nonvenomous) of unspecified back wall of thorax, subsequent encounter	Diagnosis	ICD-10-CM
S20.469S	Insect bite (nonvenomous) of unspecified back wall of thorax, sequela	Diagnosis	ICD-10-CM
S20.96	Insect bite (nonvenomous) of unspecified parts of thorax	Diagnosis	ICD-10-CM
S20.96XA	Insect bite (nonvenomous) of unspecified parts of thorax, initial encounter	Diagnosis	ICD-10-CM
S20.96XD	Insect bite (nonvenomous) of unspecified parts of thorax, subsequent encounter	Diagnosis	ICD-10-CM
S20.96XS	Insect bite (nonvenomous) of unspecified parts of thorax, sequela	Diagnosis	ICD-10-CM
S30.86	Insect bite (nonvenomous) of abdomen, lower back, pelvis and external genitals	Diagnosis	ICD-10-CM
S30.860	Insect bite (nonvenomous) of lower back and pelvis	Diagnosis	ICD-10-CM
S30.860A	Insect bite (nonvenomous) of lower back and pelvis, initial encounter	Diagnosis	ICD-10-CM
S30.860D	Insect bite (nonvenomous) of lower back and pelvis, subsequent encounter	Diagnosis	ICD-10-CM
S30.860S	Insect bite (nonvenomous) of lower back and pelvis, sequela	Diagnosis	ICD-10-CM
S30.861	Insect bite (nonvenomous) of abdominal wall	Diagnosis	ICD-10-CM
S30.861A	Insect bite (nonvenomous) of abdominal wall, initial encounter	Diagnosis	ICD-10-CM
S30.861D	Insect bite (nonvenomous) of abdominal wall, subsequent encounter	Diagnosis	ICD-10-CM
S30.861S	Insect bite (nonvenomous) of abdominal wall, sequela	Diagnosis	ICD-10-CM
S30.862	Insect bite (nonvenomous) of penis	Diagnosis	ICD-10-CM
S30.862A	Insect bite (nonvenomous) of penis, initial encounter	Diagnosis	ICD-10-CM
S30.862D	Insect bite (nonvenomous) of penis, subsequent encounter	Diagnosis	ICD-10-CM
S30.862S	Insect bite (nonvenomous) of penis, sequela	Diagnosis	ICD-10-CM
S30.863	Insect bite (nonvenomous) of scrotum and testes	Diagnosis	ICD-10-CM
S30.863A	Insect bite (nonvenomous) of scrotum and testes, initial encounter	Diagnosis	ICD-10-CM
S30.863D	Insect bite (nonvenomous) of scrotum and testes, subsequent encounter	Diagnosis	ICD-10-CM
S30.863S	Insect bite (nonvenomous) of scrotum and testes, sequela	Diagnosis	ICD-10-CM
S30.864	Insect bite (nonvenomous) of vagina and vulva	Diagnosis	ICD-10-CM
S30.864A	Insect bite (nonvenomous) of vagina and vulva, initial encounter	Diagnosis	ICD-10-CM
S30.864D	Insect bite (nonvenomous) of vagina and vulva, subsequent encounter	Diagnosis	ICD-10-CM
S30.864S	Insect bite (nonvenomous) of vagina and vulva, sequela	Diagnosis	ICD-10-CM
S30.865	Insect bite (nonvenomous) of unspecified external genital organs, male	Diagnosis	ICD-10-CM
S30.865A	Insect bite (nonvenomous) of unspecified external genital organs, male, initial encounter	Diagnosis	ICD-10-CM
S30.865D	Insect bite (nonvenomous) of unspecified external genital organs, male, subsequent encounter	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S30.865S	Insect bite (nonvenomous) of unspecified external genital organs, male, sequela	Diagnosis	ICD-10-CM
S30.866	Insect bite (nonvenomous) of unspecified external genital organs, female	Diagnosis	ICD-10-CM
S30.866A	Insect bite (nonvenomous) of unspecified external genital organs, female, initial encounter	Diagnosis	ICD-10-CM
S30.866D	Insect bite (nonvenomous) of unspecified external genital organs, female, subsequent encounter	Diagnosis	ICD-10-CM
S30.866S	Insect bite (nonvenomous) of unspecified external genital organs, female, sequela	Diagnosis	ICD-10-CM
S30.867	Insect bite (nonvenomous) of anus	Diagnosis	ICD-10-CM
S30.867A	Insect bite (nonvenomous) of anus, initial encounter	Diagnosis	ICD-10-CM
S30.867D	Insect bite (nonvenomous) of anus, subsequent encounter	Diagnosis	ICD-10-CM
S30.867S	Insect bite (nonvenomous) of anus, sequela	Diagnosis	ICD-10-CM
S40.26	Insect bite (nonvenomous) of shoulder	Diagnosis	ICD-10-CM
S40.261	Insect bite (nonvenomous) of right shoulder	Diagnosis	ICD-10-CM
S40.261A	Insect bite (nonvenomous) of right shoulder, initial encounter	Diagnosis	ICD-10-CM
S40.261D	Insect bite (nonvenomous) of right shoulder, subsequent encounter	Diagnosis	ICD-10-CM
S40.261S	Insect bite (nonvenomous) of right shoulder, sequela	Diagnosis	ICD-10-CM
S40.262	Insect bite (nonvenomous) of left shoulder	Diagnosis	ICD-10-CM
S40.262A	Insect bite (nonvenomous) of left shoulder, initial encounter	Diagnosis	ICD-10-CM
S40.262D	Insect bite (nonvenomous) of left shoulder, subsequent encounter	Diagnosis	ICD-10-CM
S40.262S	Insect bite (nonvenomous) of left shoulder, sequela	Diagnosis	ICD-10-CM
S40.269	Insect bite (nonvenomous) of unspecified shoulder	Diagnosis	ICD-10-CM
S40.269A	Insect bite (nonvenomous) of unspecified shoulder, initial encounter	Diagnosis	ICD-10-CM
S40.269D	Insect bite (nonvenomous) of unspecified shoulder, subsequent encounter	Diagnosis	ICD-10-CM
S40.269S	Insect bite (nonvenomous) of unspecified shoulder, sequela	Diagnosis	ICD-10-CM
S40.86	Insect bite (nonvenomous) of upper arm	Diagnosis	ICD-10-CM
S40.861	Insect bite (nonvenomous) of right upper arm	Diagnosis	ICD-10-CM
S40.861A	Insect bite (nonvenomous) of right upper arm, initial encounter	Diagnosis	ICD-10-CM
S40.861D	Insect bite (nonvenomous) of right upper arm, subsequent encounter	Diagnosis	ICD-10-CM
S40.861S	Insect bite (nonvenomous) of right upper arm, sequela	Diagnosis	ICD-10-CM
S40.862	Insect bite (nonvenomous) of left upper arm	Diagnosis	ICD-10-CM
S40.862A	Insect bite (nonvenomous) of left upper arm, initial encounter	Diagnosis	ICD-10-CM
S40.862D	Insect bite (nonvenomous) of left upper arm, subsequent encounter	Diagnosis	ICD-10-CM
S40.862S	Insect bite (nonvenomous) of left upper arm, sequela	Diagnosis	ICD-10-CM
S40.869	Insect bite (nonvenomous) of unspecified upper arm	Diagnosis	ICD-10-CM
S40.869A	Insect bite (nonvenomous) of unspecified upper arm, initial encounter	Diagnosis	ICD-10-CM
S40.869D	Insect bite (nonvenomous) of unspecified upper arm, subsequent encounter	Diagnosis	ICD-10-CM
S40.869S	Insect bite (nonvenomous) of unspecified upper arm, sequela	Diagnosis	ICD-10-CM
S50.36	Insect bite (nonvenomous) of elbow	Diagnosis	ICD-10-CM
S50.361	Insect bite (nonvenomous) of right elbow	Diagnosis	ICD-10-CM
S50.361A	Insect bite (nonvenomous) of right elbow, initial encounter	Diagnosis	ICD-10-CM
S50.361D	Insect bite (nonvenomous) of right elbow, subsequent encounter	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S50.361S	Insect bite (nonvenomous) of right elbow, sequela	Diagnosis	ICD-10-CM
S50.362	Insect bite (nonvenomous) of left elbow	Diagnosis	ICD-10-CM
S50.362A	Insect bite (nonvenomous) of left elbow, initial encounter	Diagnosis	ICD-10-CM
S50.362D	Insect bite (nonvenomous) of left elbow, subsequent encounter	Diagnosis	ICD-10-CM
S50.362S	Insect bite (nonvenomous) of left elbow, sequela	Diagnosis	ICD-10-CM
S50.369	Insect bite (nonvenomous) of unspecified elbow	Diagnosis	ICD-10-CM
S50.369A	Insect bite (nonvenomous) of unspecified elbow, initial encounter	Diagnosis	ICD-10-CM
S50.369D	Insect bite (nonvenomous) of unspecified elbow, subsequent encounter	Diagnosis	ICD-10-CM
S50.369S	Insect bite (nonvenomous) of unspecified elbow, sequela	Diagnosis	ICD-10-CM
S50.86	Insect bite (nonvenomous) of forearm	Diagnosis	ICD-10-CM
S50.861	Insect bite (nonvenomous) of right forearm	Diagnosis	ICD-10-CM
S50.861A	Insect bite (nonvenomous) of right forearm, initial encounter	Diagnosis	ICD-10-CM
S50.861D	Insect bite (nonvenomous) of right forearm, subsequent encounter	Diagnosis	ICD-10-CM
S50.861S	Insect bite (nonvenomous) of right forearm, sequela	Diagnosis	ICD-10-CM
S50.862	Insect bite (nonvenomous) of left forearm	Diagnosis	ICD-10-CM
S50.862A	Insect bite (nonvenomous) of left forearm, initial encounter	Diagnosis	ICD-10-CM
S50.862D	Insect bite (nonvenomous) of left forearm, subsequent encounter	Diagnosis	ICD-10-CM
S50.862S	Insect bite (nonvenomous) of left forearm, sequela	Diagnosis	ICD-10-CM
S50.869	Insect bite (nonvenomous) of unspecified forearm	Diagnosis	ICD-10-CM
S50.869A	Insect bite (nonvenomous) of unspecified forearm, initial encounter	Diagnosis	ICD-10-CM
S50.869D	Insect bite (nonvenomous) of unspecified forearm, subsequent encounter	Diagnosis	ICD-10-CM
S50.869S	Insect bite (nonvenomous) of unspecified forearm, sequela	Diagnosis	ICD-10-CM
S60.36	Insect bite (nonvenomous) of thumb	Diagnosis	ICD-10-CM
S60.361	Insect bite (nonvenomous) of right thumb	Diagnosis	ICD-10-CM
S60.361A	Insect bite (nonvenomous) of right thumb, initial encounter	Diagnosis	ICD-10-CM
S60.361D	Insect bite (nonvenomous) of right thumb, subsequent encounter	Diagnosis	ICD-10-CM
S60.361S	Insect bite (nonvenomous) of right thumb, sequela	Diagnosis	ICD-10-CM
S60.362	Insect bite (nonvenomous) of left thumb	Diagnosis	ICD-10-CM
S60.362A	Insect bite (nonvenomous) of left thumb, initial encounter	Diagnosis	ICD-10-CM
S60.362D	Insect bite (nonvenomous) of left thumb, subsequent encounter	Diagnosis	ICD-10-CM
S60.362S	Insect bite (nonvenomous) of left thumb, sequela	Diagnosis	ICD-10-CM
S60.369	Insect bite (nonvenomous) of unspecified thumb	Diagnosis	ICD-10-CM
S60.369A	Insect bite (nonvenomous) of unspecified thumb, initial encounter	Diagnosis	ICD-10-CM
S60.369D	Insect bite (nonvenomous) of unspecified thumb, subsequent encounter	Diagnosis	ICD-10-CM
S60.369S	Insect bite (nonvenomous) of unspecified thumb, sequela	Diagnosis	ICD-10-CM
S60.46	Insect bite (nonvenomous) of fingers	Diagnosis	ICD-10-CM
S60.460	Insect bite (nonvenomous) of right index finger	Diagnosis	ICD-10-CM
S60.460A	Insect bite (nonvenomous) of right index finger, initial encounter	Diagnosis	ICD-10-CM
S60.460D	Insect bite (nonvenomous) of right index finger, subsequent encounter	Diagnosis	ICD-10-CM
S60.460S	Insect bite (nonvenomous) of right index finger, sequela	Diagnosis	ICD-10-CM
S60.461	Insect bite (nonvenomous) of left index finger	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S60.461A	Insect bite (nonvenomous) of left index finger, initial encounter	Diagnosis	ICD-10-CM
S60.461D	Insect bite (nonvenomous) of left index finger, subsequent encounter	Diagnosis	ICD-10-CM
S60.461S	Insect bite (nonvenomous) of left index finger, sequela	Diagnosis	ICD-10-CM
S60.462	Insect bite (nonvenomous) of right middle finger	Diagnosis	ICD-10-CM
S60.462A	Insect bite (nonvenomous) of right middle finger, initial encounter	Diagnosis	ICD-10-CM
S60.462D	Insect bite (nonvenomous) of right middle finger, subsequent encounter	Diagnosis	ICD-10-CM
S60.462S	Insect bite (nonvenomous) of right middle finger, sequela	Diagnosis	ICD-10-CM
S60.463	Insect bite (nonvenomous) of left middle finger	Diagnosis	ICD-10-CM
S60.463A	Insect bite (nonvenomous) of left middle finger, initial encounter	Diagnosis	ICD-10-CM
S60.463D	Insect bite (nonvenomous) of left middle finger, subsequent encounter	Diagnosis	ICD-10-CM
S60.463S	Insect bite (nonvenomous) of left middle finger, sequela	Diagnosis	ICD-10-CM
S60.464	Insect bite (nonvenomous) of right ring finger	Diagnosis	ICD-10-CM
S60.464A	Insect bite (nonvenomous) of right ring finger, initial encounter	Diagnosis	ICD-10-CM
S60.464D	Insect bite (nonvenomous) of right ring finger, subsequent encounter	Diagnosis	ICD-10-CM
S60.464S	Insect bite (nonvenomous) of right ring finger, sequela	Diagnosis	ICD-10-CM
S60.465	Insect bite (nonvenomous) of left ring finger	Diagnosis	ICD-10-CM
S60.465A	Insect bite (nonvenomous) of left ring finger, initial encounter	Diagnosis	ICD-10-CM
S60.465D	Insect bite (nonvenomous) of left ring finger, subsequent encounter	Diagnosis	ICD-10-CM
S60.465S	Insect bite (nonvenomous) of left ring finger, sequela	Diagnosis	ICD-10-CM
S60.466	Insect bite (nonvenomous) of right little finger	Diagnosis	ICD-10-CM
S60.466A	Insect bite (nonvenomous) of right little finger, initial encounter	Diagnosis	ICD-10-CM
S60.466D	Insect bite (nonvenomous) of right little finger, subsequent encounter	Diagnosis	ICD-10-CM
S60.466S	Insect bite (nonvenomous) of right little finger, sequela	Diagnosis	ICD-10-CM
S60.467	Insect bite (nonvenomous) of left little finger	Diagnosis	ICD-10-CM
S60.467A	Insect bite (nonvenomous) of left little finger, initial encounter	Diagnosis	ICD-10-CM
S60.467D	Insect bite (nonvenomous) of left little finger, subsequent encounter	Diagnosis	ICD-10-CM
S60.467S	Insect bite (nonvenomous) of left little finger, sequela	Diagnosis	ICD-10-CM
S60.468	Insect bite (nonvenomous) of other finger	Diagnosis	ICD-10-CM
S60.468A	Insect bite (nonvenomous) of other finger, initial encounter	Diagnosis	ICD-10-CM
S60.468D	Insect bite (nonvenomous) of other finger, subsequent encounter	Diagnosis	ICD-10-CM
S60.468S	Insect bite (nonvenomous) of other finger, sequela	Diagnosis	ICD-10-CM
S60.469	Insect bite (nonvenomous) of unspecified finger	Diagnosis	ICD-10-CM
S60.469A	Insect bite (nonvenomous) of unspecified finger, initial encounter	Diagnosis	ICD-10-CM
S60.469D	Insect bite (nonvenomous) of unspecified finger, subsequent encounter	Diagnosis	ICD-10-CM
S60.469S	Insect bite (nonvenomous) of unspecified finger, sequela	Diagnosis	ICD-10-CM
S60.56	Insect bite (nonvenomous) of hand	Diagnosis	ICD-10-CM
S60.561	Insect bite (nonvenomous) of right hand	Diagnosis	ICD-10-CM
S60.561A	Insect bite (nonvenomous) of right hand, initial encounter	Diagnosis	ICD-10-CM
S60.561D	Insect bite (nonvenomous) of right hand, subsequent encounter	Diagnosis	ICD-10-CM
S60.561S	Insect bite (nonvenomous) of right hand, sequela	Diagnosis	ICD-10-CM
S60.562	Insect bite (nonvenomous) of left hand	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S60.562A	Insect bite (nonvenomous) of left hand, initial encounter	Diagnosis	ICD-10-CM
S60.562D	Insect bite (nonvenomous) of left hand, subsequent encounter	Diagnosis	ICD-10-CM
S60.562S	Insect bite (nonvenomous) of left hand, sequela	Diagnosis	ICD-10-CM
S60.569	Insect bite (nonvenomous) of unspecified hand	Diagnosis	ICD-10-CM
S60.569A	Insect bite (nonvenomous) of unspecified hand, initial encounter	Diagnosis	ICD-10-CM
S60.569D	Insect bite (nonvenomous) of unspecified hand, subsequent encounter	Diagnosis	ICD-10-CM
S60.569S	Insect bite (nonvenomous) of unspecified hand, sequela	Diagnosis	ICD-10-CM
S60.86	Insect bite (nonvenomous) of wrist	Diagnosis	ICD-10-CM
S60.861	Insect bite (nonvenomous) of right wrist	Diagnosis	ICD-10-CM
S60.861A	Insect bite (nonvenomous) of right wrist, initial encounter	Diagnosis	ICD-10-CM
S60.861D	Insect bite (nonvenomous) of right wrist, subsequent encounter	Diagnosis	ICD-10-CM
S60.861S	Insect bite (nonvenomous) of right wrist, sequela	Diagnosis	ICD-10-CM
S60.862	Insect bite (nonvenomous) of left wrist	Diagnosis	ICD-10-CM
S60.862A	Insect bite (nonvenomous) of left wrist, initial encounter	Diagnosis	ICD-10-CM
S60.862D	Insect bite (nonvenomous) of left wrist, subsequent encounter	Diagnosis	ICD-10-CM
S60.862S	Insect bite (nonvenomous) of left wrist, sequela	Diagnosis	ICD-10-CM
S60.869	Insect bite (nonvenomous) of unspecified wrist	Diagnosis	ICD-10-CM
S60.869A	Insect bite (nonvenomous) of unspecified wrist, initial encounter	Diagnosis	ICD-10-CM
S60.869D	Insect bite (nonvenomous) of unspecified wrist, subsequent encounter	Diagnosis	ICD-10-CM
S60.869S	Insect bite (nonvenomous) of unspecified wrist, sequela	Diagnosis	ICD-10-CM
S70.26	Insect bite (nonvenomous) of hip	Diagnosis	ICD-10-CM
S70.261	Insect bite (nonvenomous), right hip	Diagnosis	ICD-10-CM
S70.261A	Insect bite (nonvenomous), right hip, initial encounter	Diagnosis	ICD-10-CM
S70.261D	Insect bite (nonvenomous), right hip, subsequent encounter	Diagnosis	ICD-10-CM
S70.261S	Insect bite (nonvenomous), right hip, sequela	Diagnosis	ICD-10-CM
S70.262	Insect bite (nonvenomous), left hip	Diagnosis	ICD-10-CM
S70.262A	Insect bite (nonvenomous), left hip, initial encounter	Diagnosis	ICD-10-CM
S70.262D	Insect bite (nonvenomous), left hip, subsequent encounter	Diagnosis	ICD-10-CM
S70.262S	Insect bite (nonvenomous), left hip, sequela	Diagnosis	ICD-10-CM
S70.269	Insect bite (nonvenomous), unspecified hip	Diagnosis	ICD-10-CM
S70.269A	Insect bite (nonvenomous), unspecified hip, initial encounter	Diagnosis	ICD-10-CM
S70.269D	Insect bite (nonvenomous), unspecified hip, subsequent encounter	Diagnosis	ICD-10-CM
S70.269S	Insect bite (nonvenomous), unspecified hip, sequela	Diagnosis	ICD-10-CM
S70.36	Insect bite (nonvenomous) of thigh	Diagnosis	ICD-10-CM
S70.361	Insect bite (nonvenomous), right thigh	Diagnosis	ICD-10-CM
S70.361A	Insect bite (nonvenomous), right thigh, initial encounter	Diagnosis	ICD-10-CM
S70.361D	Insect bite (nonvenomous), right thigh, subsequent encounter	Diagnosis	ICD-10-CM
S70.361S	Insect bite (nonvenomous), right thigh, sequela	Diagnosis	ICD-10-CM
S70.362	Insect bite (nonvenomous), left thigh	Diagnosis	ICD-10-CM
S70.362A	Insect bite (nonvenomous), left thigh, initial encounter	Diagnosis	ICD-10-CM
S70.362D	Insect bite (nonvenomous), left thigh, subsequent encounter	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S70.362S	Insect bite (nonvenomous), left thigh, sequela	Diagnosis	ICD-10-CM
S70.369	Insect bite (nonvenomous), unspecified thigh	Diagnosis	ICD-10-CM
S70.369A	Insect bite (nonvenomous), unspecified thigh, initial encounter	Diagnosis	ICD-10-CM
S70.369D	Insect bite (nonvenomous), unspecified thigh, subsequent encounter	Diagnosis	ICD-10-CM
S70.369S	Insect bite (nonvenomous), unspecified thigh, sequela	Diagnosis	ICD-10-CM
S80.26	Insect bite (nonvenomous) of knee	Diagnosis	ICD-10-CM
S80.261	Insect bite (nonvenomous), right knee	Diagnosis	ICD-10-CM
S80.261A	Insect bite (nonvenomous), right knee, initial encounter	Diagnosis	ICD-10-CM
S80.261D	Insect bite (nonvenomous), right knee, subsequent encounter	Diagnosis	ICD-10-CM
S80.261S	Insect bite (nonvenomous), right knee, sequela	Diagnosis	ICD-10-CM
S80.262	Insect bite (nonvenomous), left knee	Diagnosis	ICD-10-CM
S80.262A	Insect bite (nonvenomous), left knee, initial encounter	Diagnosis	ICD-10-CM
S80.262D	Insect bite (nonvenomous), left knee, subsequent encounter	Diagnosis	ICD-10-CM
S80.262S	Insect bite (nonvenomous), left knee, sequela	Diagnosis	ICD-10-CM
S80.269	Insect bite (nonvenomous), unspecified knee	Diagnosis	ICD-10-CM
S80.269A	Insect bite (nonvenomous), unspecified knee, initial encounter	Diagnosis	ICD-10-CM
S80.269D	Insect bite (nonvenomous), unspecified knee, subsequent encounter	Diagnosis	ICD-10-CM
S80.269S	Insect bite (nonvenomous), unspecified knee, sequela	Diagnosis	ICD-10-CM
S80.86	Insect bite (nonvenomous) of lower leg	Diagnosis	ICD-10-CM
S80.861	Insect bite (nonvenomous), right lower leg	Diagnosis	ICD-10-CM
S80.861A	Insect bite (nonvenomous), right lower leg, initial encounter	Diagnosis	ICD-10-CM
S80.861D	Insect bite (nonvenomous), right lower leg, subsequent encounter	Diagnosis	ICD-10-CM
S80.861S	Insect bite (nonvenomous), right lower leg, sequela	Diagnosis	ICD-10-CM
S80.862	Insect bite (nonvenomous), left lower leg	Diagnosis	ICD-10-CM
S80.862A	Insect bite (nonvenomous), left lower leg, initial encounter	Diagnosis	ICD-10-CM
S80.862D	Insect bite (nonvenomous), left lower leg, subsequent encounter	Diagnosis	ICD-10-CM
S80.862S	Insect bite (nonvenomous), left lower leg, sequela	Diagnosis	ICD-10-CM
S80.869	Insect bite (nonvenomous), unspecified lower leg	Diagnosis	ICD-10-CM
S80.869A	Insect bite (nonvenomous), unspecified lower leg, initial encounter	Diagnosis	ICD-10-CM
S80.869D	Insect bite (nonvenomous), unspecified lower leg, subsequent encounter	Diagnosis	ICD-10-CM
S80.869S	Insect bite (nonvenomous), unspecified lower leg, sequela	Diagnosis	ICD-10-CM
S90.46	Insect bite (nonvenomous) of toe	Diagnosis	ICD-10-CM
S90.461	Insect bite (nonvenomous), right great toe	Diagnosis	ICD-10-CM
S90.461A	Insect bite (nonvenomous), right great toe, initial encounter	Diagnosis	ICD-10-CM
S90.461D	Insect bite (nonvenomous), right great toe, subsequent encounter	Diagnosis	ICD-10-CM
S90.461S	Insect bite (nonvenomous), right great toe, sequela	Diagnosis	ICD-10-CM
S90.462	Insect bite (nonvenomous), left great toe	Diagnosis	ICD-10-CM
S90.462A	Insect bite (nonvenomous), left great toe, initial encounter	Diagnosis	ICD-10-CM
S90.462D	Insect bite (nonvenomous), left great toe, subsequent encounter	Diagnosis	ICD-10-CM
S90.462S	Insect bite (nonvenomous), left great toe, sequela	Diagnosis	ICD-10-CM
S90.463	Insect bite (nonvenomous), unspecified great toe	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S90.463A	Insect bite (nonvenomous), unspecified great toe, initial encounter	Diagnosis	ICD-10-CM
S90.463D	Insect bite (nonvenomous), unspecified great toe, subsequent encounter	Diagnosis	ICD-10-CM
S90.463S	Insect bite (nonvenomous), unspecified great toe, sequela	Diagnosis	ICD-10-CM
S90.464	Insect bite (nonvenomous), right lesser toe(s)	Diagnosis	ICD-10-CM
S90.464A	Insect bite (nonvenomous), right lesser toe(s), initial encounter	Diagnosis	ICD-10-CM
S90.464D	Insect bite (nonvenomous), right lesser toe(s), subsequent encounter	Diagnosis	ICD-10-CM
S90.464S	Insect bite (nonvenomous), right lesser toe(s), sequela	Diagnosis	ICD-10-CM
S90.465	Insect bite (nonvenomous), left lesser toe(s)	Diagnosis	ICD-10-CM
S90.465A	Insect bite (nonvenomous), left lesser toe(s), initial encounter	Diagnosis	ICD-10-CM
S90.465D	Insect bite (nonvenomous), left lesser toe(s), subsequent encounter	Diagnosis	ICD-10-CM
S90.465S	Insect bite (nonvenomous), left lesser toe(s), sequela	Diagnosis	ICD-10-CM
S90.466	Insect bite (nonvenomous), unspecified lesser toe(s)	Diagnosis	ICD-10-CM
S90.466A	Insect bite (nonvenomous), unspecified lesser toe(s), initial encounter	Diagnosis	ICD-10-CM
S90.466D	Insect bite (nonvenomous), unspecified lesser toe(s), subsequent encounter	Diagnosis	ICD-10-CM
S90.466S	Insect bite (nonvenomous), unspecified lesser toe(s), sequela	Diagnosis	ICD-10-CM
S90.56	Insect bite (nonvenomous) of ankle	Diagnosis	ICD-10-CM
S90.561	Insect bite (nonvenomous), right ankle	Diagnosis	ICD-10-CM
S90.561A	Insect bite (nonvenomous), right ankle, initial encounter	Diagnosis	ICD-10-CM
S90.561D	Insect bite (nonvenomous), right ankle, subsequent encounter	Diagnosis	ICD-10-CM
S90.561S	Insect bite (nonvenomous), right ankle, sequela	Diagnosis	ICD-10-CM
S90.562	Insect bite (nonvenomous), left ankle	Diagnosis	ICD-10-CM
S90.562A	Insect bite (nonvenomous), left ankle, initial encounter	Diagnosis	ICD-10-CM
S90.562D	Insect bite (nonvenomous), left ankle, subsequent encounter	Diagnosis	ICD-10-CM
S90.562S	Insect bite (nonvenomous), left ankle, sequela	Diagnosis	ICD-10-CM
S90.569	Insect bite (nonvenomous), unspecified ankle	Diagnosis	ICD-10-CM
S90.569A	Insect bite (nonvenomous), unspecified ankle, initial encounter	Diagnosis	ICD-10-CM
S90.569D	Insect bite (nonvenomous), unspecified ankle, subsequent encounter	Diagnosis	ICD-10-CM
S90.569S	Insect bite (nonvenomous), unspecified ankle, sequela	Diagnosis	ICD-10-CM
S90.86	Insect bite (nonvenomous) of foot	Diagnosis	ICD-10-CM
S90.861	Insect bite (nonvenomous), right foot	Diagnosis	ICD-10-CM
S90.861A	Insect bite (nonvenomous), right foot, initial encounter	Diagnosis	ICD-10-CM
S90.861D	Insect bite (nonvenomous), right foot, subsequent encounter	Diagnosis	ICD-10-CM
S90.861S	Insect bite (nonvenomous), right foot, sequela	Diagnosis	ICD-10-CM
S90.862	Insect bite (nonvenomous), left foot	Diagnosis	ICD-10-CM
S90.862A	Insect bite (nonvenomous), left foot, initial encounter	Diagnosis	ICD-10-CM
S90.862D	Insect bite (nonvenomous), left foot, subsequent encounter	Diagnosis	ICD-10-CM
S90.862S	Insect bite (nonvenomous), left foot, sequela	Diagnosis	ICD-10-CM
S90.869	Insect bite (nonvenomous), unspecified foot	Diagnosis	ICD-10-CM
S90.869A	Insect bite (nonvenomous), unspecified foot, initial encounter	Diagnosis	ICD-10-CM
S90.869D	Insect bite (nonvenomous), unspecified foot, subsequent encounter	Diagnosis	ICD-10-CM
S90.869S	Insect bite (nonvenomous), unspecified foot, sequela	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
87168	Macroscopic examination; arthropod	Procedure	CPT-4
Lyme Disease			
088.81	Lyme disease	Diagnosis	ICD-09-CM
A69.23	Arthritis due to Lyme disease	Diagnosis	ICD-10-CM
A69.2	Lyme disease	Diagnosis	ICD-10-CM
A69.20	Lyme disease, unspecified	Diagnosis	ICD-10-CM
A69.21	Meningitis due to Lyme disease	Diagnosis	ICD-10-CM
A69.29	Other conditions associated with Lyme disease	Diagnosis	ICD-10-CM
A69.22	Other neurologic disorders in Lyme disease	Diagnosis	ICD-10-CM
86617	Antibody; Borrelia burgdorferi (Lyme disease) confirmatory test (eg, Western Blot or immunoblot)	Procedure	CPT-4
86618	Antibody; Borrelia burgdorferi (Lyme disease)	Procedure	CPT-4
87475	Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, direct probe technique	Procedure	CPT-4
87476	Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, amplified probe technique	Procedure	CPT-4
87477	Infectious agent detection by nucleic acid (DNA or RNA); Borrelia burgdorferi, quantification	Procedure	CPT-4
Other Tickborne Diseases			
088.82	Babesiosis	Diagnosis	ICD-09-CM
082.4	Ehrlichiosis, unspecified	Diagnosis	ICD-09-CM
082.41	Ehrlichiosis chaffeensis [E. chaffeensis]	Diagnosis	ICD-09-CM
082.49	Other ehrlichiosis	Diagnosis	ICD-09-CM
082.0	Spotted fevers	Diagnosis	ICD-09-CM
087.1	Tick-borne relapsing fever	Diagnosis	ICD-09-CM
063.0	Russian spring-summer (taiga) encephalitis	Diagnosis	ICD-09-CM
063.1	Louping ill	Diagnosis	ICD-09-CM
063.2	Central European encephalitis	Diagnosis	ICD-09-CM
063.8	Other specified tick-borne viral encephalitis	Diagnosis	ICD-09-CM
063.9	Unspecified tick-borne viral encephalitis	Diagnosis	ICD-09-CM
B60.0	Babesiosis	Diagnosis	ICD-10-CM
A77.4	Ehrlichiosis	Diagnosis	ICD-10-CM
A77.40	Ehrlichiosis, unspecified	Diagnosis	ICD-10-CM
A77.41	Ehrlichiosis chaffeensis [E. chaffeensis]	Diagnosis	ICD-10-CM
A77.49	Other ehrlichiosis	Diagnosis	ICD-10-CM
A77.0	Spotted fever due to Rickettsia rickettsii	Diagnosis	ICD-10-CM
A68.1	Tick-borne relapsing fever	Diagnosis	ICD-10-CM
A84.0	Far Eastern tick-borne encephalitis [Russian spring-summer encephalitis]	Diagnosis	ICD-10-CM
A84.1	Central European tick-borne encephalitis	Diagnosis	ICD-10-CM
A84.8	Other tick-borne viral encephalitis	Diagnosis	ICD-10-CM
A84.9	Tick-borne viral encephalitis, unspecified	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
0043U	Tick-borne relapsing fever Borrelia group, antibody detection to 4 recombinant protein groups, by immunoblot, IgM	Procedure	CPT-4
0044U	Tick-borne relapsing fever Borrelia group, antibody detection to 4 recombinant protein groups, by immunoblot, IgG	Procedure	CPT-4
Obstetric Conditions			
V26.81	Encounter for assisted reproductive fertility procedure cycle	Diagnosis	ICD-09-CM
Z31.83	Encounter for assisted reproductive fertility procedure cycle	Diagnosis	ICD-10-CM
635.90	Unspecified legally induced abortion without mention of complication	Diagnosis	ICD-09-CM
635.91	Incomplete legally induced abortion without mention of complication	Diagnosis	ICD-09-CM
635.92	Complete legally induced abortion without mention of complication	Diagnosis	ICD-09-CM
636.90	Unspecified illegally induced abortion without mention of complication	Diagnosis	ICD-09-CM
636.91	Incomplete illegally induced abortion without mention of complication	Diagnosis	ICD-09-CM
636.92	Complete illegally induced abortion without mention of complication	Diagnosis	ICD-09-CM
637.90	Unspecified type of abortion, unspecified as to completion or legality, without mention of complication	Diagnosis	ICD-09-CM
637.91	Abortion, unspecified as to legality, incomplete, without mention of complication	Diagnosis	ICD-09-CM
637.92	Abortion, unspecified as to legality, complete, without mention of complication	Diagnosis	ICD-09-CM
Z33.2	Encounter for elective termination of pregnancy	Diagnosis	ICD-10-CM
V72.42	Pregnancy examination or test, positive result	Diagnosis	ICD-09-CM
Z32.01	Encounter for pregnancy test, result positive	Diagnosis	ICD-10-CM
Z32.00	Encounter for pregnancy test, result unknown	Diagnosis	ICD-10-CM
V72.40	Pregnancy examination or test, pregnancy unconfirmed	Diagnosis	ICD-09-CM
V72.63	Pre-procedural laboratory examination	Diagnosis	ICD-09-CM
V72.84	Unspecified pre-operative examination	Diagnosis	ICD-09-CM
Z01.812	Encounter for preprocedural laboratory examination	Diagnosis	ICD-10-CM
V26.31	Testing of female for genetic disease carrier status	Diagnosis	ICD-09-CM
Z31.430	Encounter of female for testing for genetic disease carrier status for procreative management	Diagnosis	ICD-10-CM
O03	Spontaneous abortion	Diagnosis	ICD-10-CM
634.91	Incomplete spontaneous abortion without mention of complication	Diagnosis	ICD-09-CM
O03.4	Incomplete spontaneous abortion without complication	Diagnosis	ICD-10-CM
68.0	Hysterotomy	Procedure	ICD-09-CM
68.12	Hysteroscopy	Procedure	ICD-09-CM
68.3	Subtotal abdominal hysterectomy	Procedure	ICD-09-CM
68.31	Laparoscopic supracervical hysterectomy [LSH]	Procedure	ICD-09-CM
68.39	Other and unspecified subtotal abdominal hysterectomy	Procedure	ICD-09-CM
68.4	Total abdominal hysterectomy	Procedure	ICD-09-CM
68.41	Laparoscopic total abdominal hysterectomy	Procedure	ICD-09-CM
68.49	Other and unspecified total abdominal hysterectomy	Procedure	ICD-09-CM
68.5	Vaginal hysterectomy	Procedure	ICD-09-CM
68.51	Laparoscopically assisted vaginal hysterectomy (LAVH)	Procedure	ICD-09-CM

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

Code	Description	Code Category	Code Type
68.59	Other and unspecified vaginal hysterectomy	Procedure	ICD-09-CM
68.6	Radical abdominal hysterectomy	Procedure	ICD-09-CM
68.61	Laparoscopic radical abdominal hysterectomy	Procedure	ICD-09-CM
68.69	Other and unspecified radical abdominal hysterectomy	Procedure	ICD-09-CM
68.7	Radical vaginal hysterectomy	Procedure	ICD-09-CM
68.71	Laparoscopic radical vaginal hysterectomy [LRVH]	Procedure	ICD-09-CM
68.79	Other and unspecified radical vaginal hysterectomy	Procedure	ICD-09-CM
68.9	Other and unspecified hysterectomy	Procedure	ICD-09-CM
74.91	Hysterotomy to terminate pregnancy	Procedure	ICD-09-CM
87.82	Gas contrast hysterosalpingogram	Procedure	ICD-09-CM
87.83	Opaque dye contrast hysterosalpingogram	Procedure	ICD-09-CM
87.84	Percutaneous hysteroqram	Procedure	ICD-09-CM
0U9900Z	Drainage of Uterus with Drainage Device, Open Approach	Procedure	ICD-10-PCS
0U990ZZ	Drainage of Uterus, Open Approach	Procedure	ICD-10-PCS
0U9940Z	Drainage of Uterus with Drainage Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0U994ZZ	Drainage of Uterus, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0U9970Z	Drainage of Uterus with Drainage Device, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0U997ZZ	Drainage of Uterus, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0U9980Z	Drainage of Uterus with Drainage Device, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0U998ZZ	Drainage of Uterus, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UC90ZZ	Extirpation of Matter from Uterus, Open Approach	Procedure	ICD-10-PCS
0UC93ZZ	Extirpation of Matter from Uterus, Percutaneous Approach	Procedure	ICD-10-PCS
0UC94ZZ	Extirpation of Matter from Uterus, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UJD0ZZ	Inspection of Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UJD4ZZ	Inspection of Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UJD8ZZ	Inspection of Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UPD00Z	Removal of Drainage Device from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD01Z	Removal of Radioactive Element from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD03Z	Removal of Infusion Device from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD07Z	Removal of Autologous Tissue Substitute from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD0DZ	Removal of Intraluminal Device from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD0HZ	Removal of Contraceptive Device from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD0JZ	Removal of Synthetic Substitute from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD0KZ	Removal of Nonautologous Tissue Substitute from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD0YZ	Removal of Other Device from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD30Z	Removal of Drainage Device from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UPD31Z	Removal of Radioactive Element from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UPD33Z	Removal of Infusion Device from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS

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

Code	Description	Code Category	Code Type
0UPD37Z	Removal of Autologous Tissue Substitute from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UPD3DZ	Removal of Intraluminal Device from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UPD3HZ	Removal of Contraceptive Device from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UPD3JZ	Removal of Synthetic Substitute from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UPD3KZ	Removal of Nonautologous Tissue Substitute from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UPD3YZ	Removal of Other Device from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UPD40Z	Removal of Drainage Device from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD41Z	Removal of Radioactive Element from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD43Z	Removal of Infusion Device from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD47Z	Removal of Autologous Tissue Substitute from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD4DZ	Removal of Intraluminal Device from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD4HZ	Removal of Contraceptive Device from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD4JZ	Removal of Synthetic Substitute from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD4KZ	Removal of Nonautologous Tissue Substitute from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD4YZ	Removal of Other Device from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD71Z	Removal of Radioactive Element from Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UPD77Z	Removal of Autologous Tissue Substitute from Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UPD7JZ	Removal of Synthetic Substitute from Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UPD7KZ	Removal of Nonautologous Tissue Substitute from Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UPD81Z	Removal of Radioactive Element from Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UPD87Z	Removal of Autologous Tissue Substitute from Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UPD8JZ	Removal of Synthetic Substitute from Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS

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

Code	Description	Code Category	Code Type
0UPD8KZ	Removal of Nonautologous Tissue Substitute from Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UT40ZZ	Resection of Uterine Supporting Structure, Open Approach	Procedure	ICD-10-PCS
0UT44ZZ	Resection of Uterine Supporting Structure, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UT47ZZ	Resection of Uterine Supporting Structure, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UT48ZZ	Resection of Uterine Supporting Structure, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UT90ZL	Resection of Uterus, Supracervical, Open Approach	Procedure	ICD-10-PCS
0UT90ZZ	Resection of Uterus, Open Approach	Procedure	ICD-10-PCS
0UT94ZL	Resection of Uterus, Supracervical, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UT94ZZ	Resection of Uterus, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UT97ZL	Resection of Uterus, Supracervical, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UT97ZZ	Resection of Uterus, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UT98ZL	Resection of Uterus, Supracervical, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UT98ZZ	Resection of Uterus, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UT9FZL	Resection of Uterus, Supracervical, Via Natural or Artificial Opening With Percutaneous Endoscopic Assistance	Procedure	ICD-10-PCS
0UT9FZZ	Resection of Uterus, Via Natural or Artificial Opening With Percutaneous Endoscopic Assistance	Procedure	ICD-10-PCS
0UTC0ZZ	Resection of Cervix, Open Approach	Procedure	ICD-10-PCS
0UTC4ZZ	Resection of Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UTC7ZZ	Resection of Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UTC8ZZ	Resection of Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UWD00Z	Revision of Drainage Device in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UWD01Z	Revision of Radioactive Element in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UWD03Z	Revision of Infusion Device in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UWD07Z	Revision of Autologous Tissue Substitute in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UWD0DZ	Revision of Intraluminal Device in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UWD0HZ	Revision of Contraceptive Device in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UWD0JZ	Revision of Synthetic Substitute in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UWD0KZ	Revision of Nonautologous Tissue Substitute in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UWD0YZ	Revision of Other Device in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UWD30Z	Revision of Drainage Device in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UWD31Z	Revision of Radioactive Element in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UWD33Z	Revision of Infusion Device in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UWD37Z	Revision of Autologous Tissue Substitute in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UWD3DZ	Revision of Intraluminal Device in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UWD3HZ	Revision of Contraceptive Device in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UWD3JZ	Revision of Synthetic Substitute in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS

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

Code	Description	Code Category	Code Type
0UWD3KZ	Revision of Nonautologous Tissue Substitute in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UWD3YZ	Revision of Other Device in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UWD40Z	Revision of Drainage Device in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD41Z	Revision of Radioactive Element in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD43Z	Revision of Infusion Device in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD47Z	Revision of Autologous Tissue Substitute in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD4DZ	Revision of Intraluminal Device in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD4HZ	Revision of Contraceptive Device in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD4JZ	Revision of Synthetic Substitute in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD4KZ	Revision of Nonautologous Tissue Substitute in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD4YZ	Revision of Other Device in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD70Z	Revision of Drainage Device in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD71Z	Revision of Radioactive Element in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD73Z	Revision of Infusion Device in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD77Z	Revision of Autologous Tissue Substitute in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD7DZ	Revision of Intraluminal Device in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD7HZ	Revision of Contraceptive Device in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD7JZ	Revision of Synthetic Substitute in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD7KZ	Revision of Nonautologous Tissue Substitute in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD7YZ	Revision of Other Device in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD80Z	Revision of Drainage Device in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS

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

Code	Description	Code Category	Code Type
0UWD81Z	Revision of Radioactive Element in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UWD83Z	Revision of Infusion Device in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UWD87Z	Revision of Autologous Tissue Substitute in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UWD8DZ	Revision of Intraluminal Device in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UWD8HZ	Revision of Contraceptive Device in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UWD8JZ	Revision of Synthetic Substitute in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UWD8KZ	Revision of Nonautologous Tissue Substitute in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UWD8YZ	Revision of Other Device in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
10A00ZZ	Abortion of Products of Conception, Open Approach	Procedure	ICD-10-PCS
10A03ZZ	Abortion of Products of Conception, Percutaneous Approach	Procedure	ICD-10-PCS
10A04ZZ	Abortion of Products of Conception, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
BU02YZZ	Plain Radiography of Bilateral Fallopian Tubes using Other Contrast	Procedure	ICD-10-PCS
BU060ZZ	Plain Radiography of Uterus using High Osmolar Contrast	Procedure	ICD-10-PCS
BU061ZZ	Plain Radiography of Uterus using Low Osmolar Contrast	Procedure	ICD-10-PCS
BU06YZZ	Plain Radiography of Uterus using Other Contrast	Procedure	ICD-10-PCS
BU08YZZ	Plain Radiography of Uterus and Fallopian Tubes using Other Contrast	Procedure	ICD-10-PCS
BU12YZZ	Fluoroscopy of Bilateral Fallopian Tubes using Other Contrast	Procedure	ICD-10-PCS
BU160ZZ	Fluoroscopy of Uterus using High Osmolar Contrast	Procedure	ICD-10-PCS
BU161ZZ	Fluoroscopy of Uterus using Low Osmolar Contrast	Procedure	ICD-10-PCS
BU16YZZ	Fluoroscopy of Uterus using Other Contrast	Procedure	ICD-10-PCS
BU16ZZZ	Fluoroscopy of Uterus	Procedure	ICD-10-PCS
BU18YZZ	Fluoroscopy of Uterus and Fallopian Tubes using Other Contrast	Procedure	ICD-10-PCS
0058T	Cryopreservation; reproductive tissue, ovarian	Procedure	CPT-4
0336T	Laparoscopy, surgical, ablation of uterine fibroid(s), including intraoperative ultrasound guidance and monitoring, radiofrequency	Procedure	CPT-4 (Category III)
0059T	Cryopreservation; oocyte(s)	Procedure	CPT-4
0357T	Cryopreservation; immature oocyte(s)	Procedure	CPT-4
00952	Anesthesia for vaginal procedures (including biopsy of labia, vagina, cervix or endometrium); hysteroscopy and/or hysterosalpingography	Procedure	CPT-4
01900	Anesthesia for injection procedure for hysterosalpingography	Procedure	CPT-4
58340	Catheterization and introduction of saline or contrast material for saline infusion sonohysterography (SIS) or hysterosalpingography	Procedure	CPT-4

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

Code	Description	Code Category	Code Type
58345	Transcervical introduction of fallopian tube catheter for diagnosis and/or re-establishing patency (any method), with or without hysterosalpingography	Procedure	CPT-4
74740	Hysterosalpingography, radiological supervision and interpretation	Procedure	CPT-4
74741	Hysterosalpingography; Complete Procedure	Procedure	CPT-4
58321	Artificial insemination; intra-cervical	Procedure	CPT-4
58322	Artificial insemination; intra-uterine	Procedure	CPT-4
58350	Chromotubation of oviduct, including materials	Procedure	CPT-4
58752	Tubouterine implantation	Procedure	CPT-4
58760	Fimbrioplasty	Procedure	CPT-4
58970	Follicle puncture for oocyte retrieval, any method	Procedure	CPT-4
58974	Embryo transfer, intrauterine	Procedure	CPT-4
58976	Gamete, zygote, or embryo intrafallopian transfer, any method	Procedure	CPT-4
89250	Culture of oocyte(s)/embryo(s), less than 4 days;	Procedure	CPT-4
89251	Culture of oocyte(s)/embryo(s), less than 4 days; with co-culture of oocyte(s)/embryos	Procedure	CPT-4
89253	Assisted embryo hatching, microtechniques (any method)	Procedure	CPT-4
89254	Oocyte identification from follicular fluid	Procedure	CPT-4
89255	Preparation of embryo for transfer (any method)	Procedure	CPT-4
89268	Insemination of oocytes	Procedure	CPT-4
89272	Extended culture of oocyte(s)/embryo(s), 4-7 days	Procedure	CPT-4
89280	Assisted oocyte fertilization, microtechnique; less than or equal to 10 oocytes	Procedure	CPT-4
89281	Assisted oocyte fertilization, microtechnique; greater than 10 oocytes	Procedure	CPT-4
89290	Biopsy, oocyte polar body or embryo blastomere, microtechnique (for pre-implantation genetic diagnosis); less than or equal to 5 embryos	Procedure	CPT-4
89291	Biopsy, oocyte polar body or embryo blastomere, microtechnique (for pre-implantation genetic diagnosis); greater than 5 embryos	Procedure	CPT-4
45126	Pelvic exenteration for colorectal malignancy, with proctectomy (with or without colostomy), with removal of bladder and ureteral transplantations, and/or hysterectomy, or cervicectomy, with or without removal of tube(s), with or without removal of ovary(s), or any combination thereof	Procedure	CPT-4
49220	Staging laparotomy for Hodgkins disease or lymphoma (includes splenectomy, needle or open biopsies of both liver lobes, possibly also removal of abdominal nodes, abdominal node and/or bone marrow biopsies, ovarian repositioning)	Procedure	CPT-4
49322	Laparoscopy, surgical; with aspiration of cavity or cyst (eg, ovarian cyst) (single or multiple)	Procedure	CPT-4
50722	Ureterolysis for ovarian vein syndrome	Procedure	CPT-4
58150	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(s);	Procedure	CPT-4
58152	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(s); with colpo-urethrocytopexy (eg, Marshall-Marchetti-Krantz, Burch)	Procedure	CPT-4

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Code	Description	Code Category	Code Type
58180	Supracervical abdominal hysterectomy (subtotal hysterectomy), with or without removal of tube(s), with or without removal of ovary(s)	Procedure	CPT-4
58200	Total abdominal hysterectomy, including partial vaginectomy, with para-aortic and pelvic lymph node sampling, with or without removal of tube(s), with or without removal of ovary(s)	Procedure	CPT-4
58210	Radical abdominal hysterectomy, with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy), with or without removal of tube(s), with or without removal of ovary(s)	Procedure	CPT-4
58240	Pelvic exenteration for gynecologic malignancy, with total abdominal hysterectomy or cervicectomy, with or without removal of tube(s), with or without removal of ovary(s), with removal of bladder and ureteral transplantations, and/or abdominoperineal resection of rectum and colon and colostomy, or any combination thereof	Procedure	CPT-4
58262	Vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s), and/or ovary(s)	Procedure	CPT-4
58263	Vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s), and/or ovary(s), with repair of enterocele	Procedure	CPT-4
58291	Vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)	Procedure	CPT-4
58292	Vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s), with repair of enterocele	Procedure	CPT-4
58542	Laparoscopy, surgical, supracervical hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s)	Procedure	CPT-4
58544	Laparoscopy, surgical, supracervical hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)	Procedure	CPT-4
58548	Laparoscopy, surgical, with radical hysterectomy, with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy), with removal of tube(s) and ovary(s), if performed	Procedure	CPT-4
58552	Laparoscopy, surgical, with vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s)	Procedure	CPT-4
58554	Laparoscopy, surgical, with vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)	Procedure	CPT-4
58571	Laparoscopy, surgical, with total hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s)	Procedure	CPT-4
58573	Laparoscopy, surgical, with total hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)	Procedure	CPT-4
58600	Ligation or transection of fallopian tube(s), abdominal or vaginal approach, unilateral or bilateral	Procedure	CPT-4
58605	Ligation or transection of fallopian tube(s), abdominal or vaginal approach, postpartum, unilateral or bilateral, during same hospitalization (separate procedure)	Procedure	CPT-4

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Code	Description	Code Category	Code Type
58611	Ligation or transection of fallopian tube(s) when done at the time of cesarean delivery or intra-abdominal surgery (not a separate procedure) (List separately in addition to code for primary procedure)	Procedure	CPT-4
58615	Occlusion of fallopian tube(s) by device (eg, band, clip, Falope ring) vaginal or suprapubic approach	Procedure	CPT-4
58660	Laparoscopy, surgical; with lysis of adhesions (salpingolysis, ovariolysis) (separate procedure)	Procedure	CPT-4
58661	Laparoscopy, surgical; with removal of adnexal structures (partial or total oophorectomy and/or salpingectomy)	Procedure	CPT-4
58662	Laparoscopy, surgical; with fulguration or excision of lesions of the ovary, pelvic viscera, or peritoneal surface by any method	Procedure	CPT-4
58670	Laparoscopy, surgical; with fulguration of oviducts (with or without transection)	Procedure	CPT-4
58671	Laparoscopy, surgical; with occlusion of oviducts by device (eg, band, clip, or Falope ring)	Procedure	CPT-4
58672	Laparoscopy, surgical; with fimbrioplasty	Procedure	CPT-4
58673	Laparoscopy, surgical; with salpingostomy (salpingoneostomy)	Procedure	CPT-4
58679	Unlisted laparoscopy procedure, oviduct, ovary	Procedure	CPT-4
58700	Salpingectomy, complete or partial, unilateral or bilateral (separate procedure)	Procedure	CPT-4
58720	Salpingo-oophorectomy, complete or partial, unilateral or bilateral (separate procedure)	Procedure	CPT-4
58740	Lysis of adhesions (salpingolysis, ovariolysis)	Procedure	CPT-4
58750	Tubotubal anastomosis	Procedure	CPT-4
58770	Salpingostomy (salpingoneostomy)	Procedure	CPT-4
58800	Drainage of ovarian cyst(s), unilateral or bilateral (separate procedure); vaginal approach	Procedure	CPT-4
58805	Drainage of ovarian cyst(s), unilateral or bilateral (separate procedure); abdominal approach	Procedure	CPT-4
58820	Drainage of ovarian abscess; vaginal approach, open	Procedure	CPT-4
58822	Drainage of ovarian abscess; abdominal approach	Procedure	CPT-4
58823	Drainage of pelvic abscess, transvaginal or transrectal approach, percutaneous (eg, ovarian, pericolic)	Procedure	CPT-4
58825	Transposition, ovary(s)	Procedure	CPT-4
58900	Biopsy of ovary, unilateral or bilateral (separate procedure)	Procedure	CPT-4
58920	Wedge resection or bisection of ovary, unilateral or bilateral	Procedure	CPT-4
58925	Ovarian cystectomy, unilateral or bilateral	Procedure	CPT-4
58940	Oophorectomy, partial or total, unilateral or bilateral;	Procedure	CPT-4
58943	Oophorectomy, partial or total, unilateral or bilateral; for ovarian, tubal or primary peritoneal malignancy, with para-aortic and pelvic lymph node biopsies, peritoneal washings, peritoneal biopsies, diaphragmatic assessments, with or without salpingectomy(s), with or without omentectomy	Procedure	CPT-4

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Code	Description	Code Category	Code Type
58950	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy;	Procedure	CPT-4
58951	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy; with total abdominal hysterectomy, pelvic and limited para-aortic lymphadenectomy	Procedure	CPT-4
58952	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy; with radical dissection for debulking (ie, radical excision or destruction, intra-abdominal or retroperitoneal tumors)	Procedure	CPT-4
58953	Bilateral salpingo-oophorectomy with omentectomy, total abdominal hysterectomy and radical dissection for debulking;	Procedure	CPT-4
58954	Bilateral salpingo-oophorectomy with omentectomy, total abdominal hysterectomy and radical dissection for debulking; with pelvic lymphadenectomy and limited para-aortic lymphadenectomy	Procedure	CPT-4
58956	Bilateral salpingo-oophorectomy with total omentectomy, total abdominal hysterectomy for malignancy	Procedure	CPT-4
58957	Resection (tumor debulking) of recurrent ovarian, tubal, primary peritoneal, uterine malignancy (intra-abdominal, retroperitoneal tumors), with omentectomy, if performed;	Procedure	CPT-4
58958	Resection (tumor debulking) of recurrent ovarian, tubal, primary peritoneal, uterine malignancy (intra-abdominal, retroperitoneal tumors), with omentectomy, if performed; with pelvic lymphadenectomy and limited para-aortic lymphadenectomy	Procedure	CPT-4
58960	Laparotomy, for staging or restaging of ovarian, tubal, or primary peritoneal malignancy (second look), with or without omentectomy, peritoneal washing, biopsy of abdominal and pelvic peritoneum, diaphragmatic assessment with pelvic and limited para-aortic lymphadenectomy	Procedure	CPT-4
58984	Laparoscopy, Surgical; With Fulguration Or Excision Of Lesions Of The Ovary, Pelvic Viscera, Or Peritoneal Surface By Any Method	Procedure	CPT-4
59120	Surgical treatment of ectopic pregnancy; tubal or ovarian, requiring salpingectomy and/or oophorectomy, abdominal or vaginal approach	Procedure	CPT-4
59121	Surgical treatment of ectopic pregnancy; tubal or ovarian, without salpingectomy and/or oophorectomy	Procedure	CPT-4
00842	Anesthesia for intraperitoneal procedures in lower abdomen including laparoscopy; amniocentesis	Procedure	CPT-4
00848	Anesthesia for intraperitoneal procedures in lower abdomen including laparoscopy; pelvic exenteration	Procedure	CPT-4
00850	Anesthesia for intraperitoneal procedures in lower abdomen including laparoscopy; cesarean section	Procedure	CPT-4
00851	Anesthesia for intraperitoneal procedures in lower abdomen including laparoscopy; tubal ligation/transection	Procedure	CPT-4

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Code	Description	Code Category	Code Type
00855	Anesthesia for intraperitoneal procedures in lower abdomen including laparoscopy; cesarean hysterectomy	Procedure	CPT-4
56399	UNLISTED PROC-LAP/HYSTEROSCOPY	Procedure	CPT-4
57425	Laparoscopy, surgical, colpopexy (suspension of vaginal apex)	Procedure	CPT-4
58541	Laparoscopy, surgical, supracervical hysterectomy, for uterus 250 g or less;	Procedure	CPT-4
58543	Laparoscopy, surgical, supracervical hysterectomy, for uterus greater than 250 g;	Procedure	CPT-4
58545	Laparoscopy, surgical, myomectomy, excision; 1 to 4 intramural myomas with total weight of 250 g or less and/or removal of surface myomas	Procedure	CPT-4
58546	Laparoscopy, surgical, myomectomy, excision; 5 or more intramural myomas and/or intramural myomas with total weight greater than 250 g	Procedure	CPT-4
58550	Laparoscopy, surgical, with vaginal hysterectomy, for uterus 250 g or less;	Procedure	CPT-4
58551	Laparoscopy, surgical; with removal of leiomyomata (single or multiple)	Procedure	CPT-4
58553	Laparoscopy, surgical, with vaginal hysterectomy, for uterus greater than 250 g;	Procedure	CPT-4
58570	Laparoscopy, surgical, with total hysterectomy, for uterus 250 g or less;	Procedure	CPT-4
58572	Laparoscopy, surgical, with total hysterectomy, for uterus greater than 250 g;	Procedure	CPT-4
58575	Laparoscopy, surgical, total hysterectomy for resection of malignancy (tumor debulking), with omentectomy including salpingo-oophorectomy, unilateral or bilateral, when performed	Procedure	CPT-4
58578	Unlisted laparoscopy procedure, uterus	Procedure	CPT-4
58674	Laparoscopy, surgical, ablation of uterine fibroid(s) including intraoperative ultrasound guidance and monitoring, radiofrequency	Procedure	CPT-4
58982	Laparoscopy, Surgical; With Fulguration Of Oviducts (with Or Without Transection)	Procedure	CPT-4
58983	Laparoscopy, Surgical; With Occlusion Of Oviducts By Device (eg, Band, Clip, Or Falope Ring)	Procedure	CPT-4
58985	Laparoscopy, Surgical; With Lysis Of Adhesions	Procedure	CPT-4
58986	Laparoscopy, Surgical; With Biopsy (single Or Multiple)	Procedure	CPT-4
58987	Laparoscopy, Surgical; With Aspiration (single Or Multiple)	Procedure	CPT-4
58988	Laparoscopy, Surgical; With Removal Of Adnexal Structures (partial Or Total Oophorectomy And/or Salpingectomy)	Procedure	CPT-4
59898	Unlisted laparoscopy procedure, maternity care and delivery	Procedure	CPT-4
00944	Anesthesia for vaginal procedures (including biopsy of labia, vagina, cervix or endometrium); vaginal hysterectomy	Procedure	CPT-4
01962	Anesthesia for urgent hysterectomy following delivery	Procedure	CPT-4
01963	Anesthesia for cesarean hysterectomy without any labor analgesia/anesthesia care	Procedure	CPT-4
01969	Anesthesia for cesarean hysterectomy following neuraxial labor analgesia/anesthesia (List separately in addition to code for primary procedure	Procedure	CPT-4
51597	Pelvic exenteration, complete, for vesical, prostatic or urethral malignancy, with removal of bladder and ureteral transplantations, with or without hysterectomy and/or abdominoperineal resection of rectum and colon and colostomy, or any combination thereof	Procedure	CPT-4
51925	Closure of vesicouterine fistula; with hysterectomy	Procedure	CPT-4

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Code	Description	Code Category	Code Type
56350	HYSTEROSCOPY Diagnosis (SEPART PROC)	Procedure	CPT-4
56351	HYSTEROSCOPY SURG; W/SAMPL ENDOMETRIUM W/WO D&C	Procedure	CPT-4
56352	HYSTEROSCOPY SURG; W/LYSIS INTRAUTERINE ADHESION	Procedure	CPT-4
56353	HYSTEROSCOPY SURG; W/DIVIS/RESECT SEPTUM	Procedure	CPT-4
56354	HYSTEROSCOPY SURG; W/REMOV LEIOMYOMATA	Procedure	CPT-4
56355	HYSTEROSCOPY SURG; W/REMOV IMPACTED F B	Procedure	CPT-4
56356	HYSTEROSCOPY SURG; W/ENDOMETRIAL ABLATION	Procedure	CPT-4
58205	Total Hysterectomy, Extended, Corpus Cancer, Including Partial	Procedure	CPT-4
58260	Vaginal hysterectomy, for uterus 250 g or less;	Procedure	CPT-4
58265	Vaginal Hysterectomy With Plastic Repair Of Vagina, Anterior	Procedure	CPT-4
58267	Vaginal hysterectomy, for uterus 250 g or less; with colpo-urethrocystopexy (Marshall-Marchetti-Krantz type, Pereyra type) with or without endoscopic control	Procedure	CPT-4
58270	Vaginal hysterectomy, for uterus 250 g or less; with repair of enterocele	Procedure	CPT-4
58275	Vaginal hysterectomy, with total or partial vaginectomy;	Procedure	CPT-4
58280	Vaginal hysterectomy, with total or partial vaginectomy; with repair of enterocele	Procedure	CPT-4
58285	Vaginal hysterectomy, radical (Schauta type operation)	Procedure	CPT-4
58290	Vaginal hysterectomy, for uterus greater than 250 g;	Procedure	CPT-4
58293	Vaginal hysterectomy, for uterus greater than 250 g; with colpo-urethrocystopexy (Marshall-Marchetti-Krantz type, Pereyra type) with or without endoscopic control	Procedure	CPT-4
58294	Vaginal hysterectomy, for uterus greater than 250 g; with repair of enterocele	Procedure	CPT-4
58353	Endometrial ablation, thermal, without hysteroscopic guidance	Procedure	CPT-4
58520	Hysterorrhaphy, repair of ruptured uterus (nonobstetrical)	Procedure	CPT-4
58540	Hysteroplasty, repair of uterine anomaly (Strassman type)	Procedure	CPT-4
58555	Hysteroscopy, diagnostic (separate procedure)	Procedure	CPT-4
58558	Hysteroscopy, surgical; with sampling (biopsy) of endometrium and/or polypectomy, with or without D & C	Procedure	CPT-4
58559	Hysteroscopy, surgical; with lysis of intrauterine adhesions (any method)	Procedure	CPT-4
58560	Hysteroscopy, surgical; with division or resection of intrauterine septum (any method)	Procedure	CPT-4
58561	Hysteroscopy, surgical; with removal of leiomyomata	Procedure	CPT-4
58562	Hysteroscopy, surgical; with removal of impacted foreign body	Procedure	CPT-4
58563	Hysteroscopy, surgical; with endometrial ablation (eg, endometrial resection, electrosurgical ablation, thermoablation)	Procedure	CPT-4
58565	Hysteroscopy, surgical; with bilateral fallopian tube cannulation to induce occlusion by placement of permanent implants	Procedure	CPT-4
58579	Unlisted hysteroscopy procedure, uterus	Procedure	CPT-4
58990	Hysteroscopy; Diagnostic	Procedure	CPT-4
58992	Hysteroscopy; With Lysis Of Intrauterine Adhesions Or Resection Of Intrauterine Septum (any Method)	Procedure	CPT-4
58994	Hysteroscopy; With Removal Of Submucous Leiomyomata (any Method)	Procedure	CPT-4
58995	Hysteroscopy	Procedure	CPT-4

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Code	Description	Code Category	Code Type
58996	Hysteroscopy; With Endometrial Ablation (any Method)	Procedure	CPT-4
59100	Hysterotomy, abdominal (eg, for hydatidiform mole, abortion)	Procedure	CPT-4
59101	Hysterotomy, Abdominal, For Removal Of Hydatidiform Mole	Procedure	CPT-4
59105	Hysterotomy, Abdominal, For Legal Abortion	Procedure	CPT-4
59106	Hysterotomy, Abdominal, For Legal Abortion	Procedure	CPT-4
59130	Surgical treatment of ectopic pregnancy; abdominal pregnancy	Procedure	CPT-4
59135	Surgical treatment of ectopic pregnancy; interstitial, uterine pregnancy requiring total hysterectomy	Procedure	CPT-4
59136	Surgical treatment of ectopic pregnancy; interstitial, uterine pregnancy with partial resection of uterus	Procedure	CPT-4
59140	Surgical treatment of ectopic pregnancy; cervical, with evacuation	Procedure	CPT-4
59150	Laparoscopic treatment of ectopic pregnancy; without salpingectomy and/or oophorectomy	Procedure	CPT-4
59151	Laparoscopic treatment of ectopic pregnancy; with salpingectomy and/or oophorectomy	Procedure	CPT-4
59350	Hysterorrhaphy of ruptured uterus	Procedure	CPT-4
59351	Hysterorrhaphy Of Ruptured Uterus	Procedure	CPT-4
59525	Subtotal or total hysterectomy after cesarean delivery (List separately in addition to code for primary procedure)	Procedure	CPT-4
59560	Cesarean Section With Hysterectomy, Subtotal, Including	Procedure	CPT-4
59561	Cesarean Section With Hysterectomy, Subtotal, Including	Procedure	CPT-4
59580	Cesarean Section With Hysterectomy, Total, Including	Procedure	CPT-4
59581	Cesarean Section With Hysterectomy, Total, Including	Procedure	CPT-4
59852	Induced abortion, by 1 or more intra-amniotic injections (amniocentesis-injections), including hospital admission and visits, delivery of fetus and secundines; with hysterotomy (failed intra-amniotic injection)	Procedure	CPT-4
59857	Induced abortion, by 1 or more vaginal suppositories (eg, prostaglandin) with or without cervical dilation (eg, laminaria), including hospital admission and visits, delivery of fetus and secundines; with hysterotomy (failed medical evacuation)	Procedure	CPT-4
76831	Saline infusion sonohysterography (SIS), including color flow Doppler, when performed	Procedure	CPT-4
58972	Culture & fertilization oocyte	Procedure	CPT-4
89252	Assisted oocyte fertilization, microtechnique (any method)	Procedure	CPT-4
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	Procedure	HCPCS
S4013	Complete cycle, gamete intrafallopian transfer (GIFT), case rate	Procedure	HCPCS
S4014	Complete cycle, zygote intrafallopian transfer (ZIFT), case rate	Procedure	HCPCS
S4015	Complete in vitro fertilization cycle, not otherwise specified, case rate	Procedure	HCPCS
S4016	Frozen in vitro fertilization cycle, case rate	Procedure	HCPCS
S4022	Assisted oocyte fertilization, case rate	Procedure	HCPCS

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Code	Description	Code Category	Code Type
S4023	Donor egg cycle, incomplete, case rate	Procedure	HCPCS
S4025	Donor services for in vitro fertilization (sperm or embryo), case rate	Procedure	HCPCS
S4035	Stimulated intrauterine insemination (IUI), case rate	Procedure	HCPCS
S4037	Cryopreserved embryo transfer, case rate	Procedure	HCPCS
S4040	Monitoring and storage of cryopreserved embryos, per 30 days	Procedure	HCPCS
G0331	PET imaging restaging ovarian	Procedure	HCPCS
S2078	Laparoscopic supracervical hysterectomy (subtotal hysterectomy), with or without removal of tube(s), with or without removal of ovary(s)	Procedure	HCPCS
G9823	Endometrial sampling or hysteroscopy with biopsy and results documented	Procedure	HCPCS
G9824	Endometrial sampling or hysteroscopy with biopsy and results not documented	Procedure	HCPCS
S2255	Hysteroscopy, surgical; with occlusion of oviducts bilaterally by micro-inserts for permanent sterilization	Procedure	HCPCS
V23.9	Unspecified high-risk pregnancy	Diagnosis	ICD-09-CM
Z3A.08	8 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
Z3A.01	Less than 8 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
632	Missed abortion	Diagnosis	ICD-09-CM
O02.1	Missed abortion	Diagnosis	ICD-10-CM
N84	Polyp of female genital tract	Diagnosis	ICD-10-CM
N84.0	Polyp of corpus uteri	Diagnosis	ICD-10-CM
N84.1	Polyp of cervix uteri	Diagnosis	ICD-10-CM
N84.8	Polyp of other parts of female genital tract	Diagnosis	ICD-10-CM
N84.9	Polyp of female genital tract, unspecified	Diagnosis	ICD-10-CM
621.0	Polyp of corpus uteri	Diagnosis	ICD-09-CM
629.81	Recurrent pregnancy loss without current pregnancy	Diagnosis	ICD-09-CM
N96	Recurrent pregnancy loss	Diagnosis	ICD-10-CM
Dermatologic Conditions			
704.09	Other alopecia	Diagnosis	ICD-09-CM
L66.2	Folliculitis decalvans	Diagnosis	ICD-10-CM
L70.0	Acne vulgaris	Diagnosis	ICD-10-CM
706.1	Other acne	Diagnosis	ICD-09-CM
L70.1	Acne conglobata	Diagnosis	ICD-10-CM
706	Acne varioliformis	Diagnosis	ICD-09-CM
L70.2	Acne varioliformis	Diagnosis	ICD-10-CM
L70.3	Acne tropica	Diagnosis	ICD-10-CM
L70.4	Infantile acne	Diagnosis	ICD-10-CM
L70.5	Acne excoriee	Diagnosis	ICD-10-CM
L70.8	Other acne	Diagnosis	ICD-10-CM
L70.9	Acne, unspecified	Diagnosis	ICD-10-CM
704.8	Other specified disease of hair and hair follicles	Diagnosis	ICD-09-CM
704.9	Unspecified disease of hair and hair follicles	Diagnosis	ICD-09-CM
705.83	Hidradenitis	Diagnosis	ICD-09-CM

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

Code	Description	Code Category	Code Type
706.1	Other acne	Diagnosis	ICD-09-CM
706.9	Unspecified disease of sebaceous glands	Diagnosis	ICD-09-CM
L73	Other follicular disorders	Diagnosis	ICD-10-CM
L73.0	Acne keloid	Diagnosis	ICD-10-CM
L73.1	Pseudofolliculitis barbae	Diagnosis	ICD-10-CM
L73.2	Hidradenitis suppurativa	Diagnosis	ICD-10-CM
L73.8	Other specified follicular disorders	Diagnosis	ICD-10-CM
L73.9	Follicular disorder, unspecified	Diagnosis	ICD-10-CM
695.3	Rosacea	Diagnosis	ICD-09-CM
L71.9	Rosacea, unspecified	Diagnosis	ICD-10-CM
L65.8	Other specified nonscarring hair loss	Diagnosis	ICD-10-CM
L66.0	Pseudopelade	Diagnosis	ICD-10-CM
L66.8	Other cicatricial alopecia	Diagnosis	ICD-10-CM
L71.0	Perioral dermatitis	Diagnosis	ICD-10-CM
L71.1	Rhinophyma	Diagnosis	ICD-10-CM
L71.8	Other rosacea	Diagnosis	ICD-10-CM
H10.82	Rosacea conjunctivitis	Diagnosis	ICD-10-CM
H10.821	Rosacea conjunctivitis, right eye	Diagnosis	ICD-10-CM
H10.822	Rosacea conjunctivitis, left eye	Diagnosis	ICD-10-CM
H10.823	Rosacea conjunctivitis, bilateral	Diagnosis	ICD-10-CM
H10.829	Rosacea conjunctivitis, unspecified eye	Diagnosis	ICD-10-CM
L71	Rosacea	Diagnosis	ICD-10-CM
372.31	Rosacea conjunctivitis	Diagnosis	ICD-09-CM
Acquired Hypothyroidism			
244.2	Iodine hypothyroidism	Diagnosis	ICD-09-CM
244.3	Other iatrogenic hypothyroidism	Diagnosis	ICD-09-CM
244.1	Other postablative hypothyroidism	Diagnosis	ICD-09-CM
244.8	Other specified acquired hypothyroidism	Diagnosis	ICD-09-CM
244.0	Postsurgical hypothyroidism	Diagnosis	ICD-09-CM
244.9	Unspecified hypothyroidism	Diagnosis	ICD-09-CM
E03.2	Hypothyroidism due to medicaments and other exogenous substances	Diagnosis	ICD-10-CM
E03.9	Hypothyroidism, unspecified	Diagnosis	ICD-10-CM
E01.8	Other iodine-deficiency related thyroid disorders and allied conditions	Diagnosis	ICD-10-CM
E03.8	Other specified hypothyroidism	Diagnosis	ICD-10-CM
E03.3	Postinfectious hypothyroidism	Diagnosis	ICD-10-CM
E89.0	Postprocedural hypothyroidism	Diagnosis	ICD-10-CM
E02	Subclinical iodine-deficiency hypothyroidism	Diagnosis	ICD-10-CM
Acute Myocardial Infarction			
410.01	Acute myocardial infarction of anterolateral wall, initial episode of care	Diagnosis	ICD-09-CM
410.21	Acute myocardial infarction of inferolateral wall, initial episode of care	Diagnosis	ICD-09-CM
410.31	Acute myocardial infarction of inferoposterior wall, initial episode of care	Diagnosis	ICD-09-CM

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

Code	Description	Code Category	Code Type
410.71	Acute myocardial infarction, subendocardial infarction, initial episode of care	Diagnosis	ICD-09-CM
410.61	Acute myocardial infarction, true posterior wall infarction, initial episode of care	Diagnosis	ICD-09-CM
410.11	Acute myocardial infarction of other anterior wall, initial episode of care	Diagnosis	ICD-09-CM
410.41	Acute myocardial infarction of other inferior wall, initial episode of care	Diagnosis	ICD-09-CM
410.51	Acute myocardial infarction of other lateral wall, initial episode of care	Diagnosis	ICD-09-CM
410.81	Acute myocardial infarction of other specified sites, initial episode of care	Diagnosis	ICD-09-CM
410.91	Acute myocardial infarction, unspecified site, initial episode of care	Diagnosis	ICD-09-CM
I21.9	Acute myocardial infarction, unspecified	Diagnosis	ICD-10-CM
I21.A1	Myocardial infarction type 2	Diagnosis	ICD-10-CM
I21.4	Non-ST elevation (NSTEMI) myocardial infarction	Diagnosis	ICD-10-CM
I21.A9	Other myocardial infarction type	Diagnosis	ICD-10-CM
I21.21	ST elevation (STEMI) myocardial infarction involving left circumflex coronary artery	Diagnosis	ICD-10-CM
I21.09	ST elevation (STEMI) myocardial infarction involving other coronary artery of anterior wall	Diagnosis	ICD-10-CM
I21.19	ST elevation (STEMI) myocardial infarction involving other coronary artery of inferior wall	Diagnosis	ICD-10-CM
I21.29	ST elevation (STEMI) myocardial infarction involving other sites	Diagnosis	ICD-10-CM
I21.02	ST elevation (STEMI) myocardial infarction involving left anterior descending coronary artery	Diagnosis	ICD-10-CM
I21.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery	Diagnosis	ICD-10-CM
I21.11	ST elevation (STEMI) myocardial infarction involving right coronary artery	Diagnosis	ICD-10-CM
I21.3	ST elevation (STEMI) myocardial infarction of unspecified site	Diagnosis	ICD-10-CM
I22.2	Subsequent non-ST elevation (NSTEMI) myocardial infarction	Diagnosis	ICD-10-CM
I22.8	Subsequent ST elevation (STEMI) myocardial infarction of other sites	Diagnosis	ICD-10-CM
I22.9	Subsequent ST elevation (STEMI) myocardial infarction of unspecified site	Diagnosis	ICD-10-CM
I22.0	Subsequent ST elevation (STEMI) myocardial infarction of anterior wall	Diagnosis	ICD-10-CM
I22.1	Subsequent ST elevation (STEMI) myocardial infarction of inferior wall	Diagnosis	ICD-10-CM
Alzheimer's Disease and Related Disorders or Senile Dementia			
R41.81	Age-related cognitive decline	Diagnosis	ICD-10-CM
R54	Age-related physical debility	Diagnosis	ICD-10-CM
G30.9	Alzheimer's disease, unspecified	Diagnosis	ICD-10-CM
G30.0	Alzheimer's disease with early onset	Diagnosis	ICD-10-CM
G30.1	Alzheimer's disease with late onset	Diagnosis	ICD-10-CM
F04	Amnestic disorder due to known physiological condition	Diagnosis	ICD-10-CM
F06.1	Catatonic disorder due to known physiological condition	Diagnosis	ICD-10-CM
G31.2	Degeneration of nervous system due to alcohol	Diagnosis	ICD-10-CM
F05	Delirium due to known physiological condition	Diagnosis	ICD-10-CM
F02.81	Dementia in other diseases classified elsewhere with behavioral disturbance	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
F02.80	Dementia in other diseases classified elsewhere without behavioral disturbance	Diagnosis	ICD-10-CM
G94	Other disorders of brain in diseases classified elsewhere	Diagnosis	ICD-10-CM
F06.8	Other specified mental disorders due to known physiological condition	Diagnosis	ICD-10-CM
G30.8	Other Alzheimer's disease	Diagnosis	ICD-10-CM
G31.09	Other frontotemporal dementia	Diagnosis	ICD-10-CM
G31.01	Pick's disease	Diagnosis	ICD-10-CM
G31.1	Senile degeneration of brain, not elsewhere classified	Diagnosis	ICD-10-CM
G13.8	Systemic atrophy primarily affecting central nervous system in other diseases classified elsewhere	Diagnosis	ICD-10-CM
F03.90	Unspecified dementia without behavioral disturbance	Diagnosis	ICD-10-CM
F03.91	Unspecified dementia with behavioral disturbance	Diagnosis	ICD-10-CM
F01.51	Vascular dementia with behavioral disturbance	Diagnosis	ICD-10-CM
F01.50	Vascular dementia without behavioral disturbance	Diagnosis	ICD-10-CM
331.0	Alzheimer's disease	Diagnosis	ICD-09-CM
294.0	Amnestic disorder in conditions classified elsewhere	Diagnosis	ICD-09-CM
331.7	Cerebral degeneration in diseases classified elsewhere	Diagnosis	ICD-09-CM
294.11	Dementia in conditions classified elsewhere with behavioral disturbance	Diagnosis	ICD-09-CM
294.10	Dementia in conditions classified elsewhere without behavioral disturbance	Diagnosis	ICD-09-CM
294.20	Dementia, unspecified, without behavioral disturbance	Diagnosis	ICD-09-CM
294.21	Dementia, unspecified, with behavioral disturbance	Diagnosis	ICD-09-CM
294.8	Other persistent mental disorders due to conditions classified elsewhere	Diagnosis	ICD-09-CM
331.19	Other frontotemporal dementia	Diagnosis	ICD-09-CM
331.11	Pick's disease	Diagnosis	ICD-09-CM
290.11	Presenile dementia with delirium	Diagnosis	ICD-09-CM
290.12	Presenile dementia with delusional features	Diagnosis	ICD-09-CM
290.13	Presenile dementia with depressive features	Diagnosis	ICD-09-CM
290.10	Presenile dementia, uncomplicated	Diagnosis	ICD-09-CM
331.2	Senile degeneration of brain	Diagnosis	ICD-09-CM
290.3	Senile dementia with delirium	Diagnosis	ICD-09-CM
290.20	Senile dementia with delusional features	Diagnosis	ICD-09-CM
290.21	Senile dementia with depressive features	Diagnosis	ICD-09-CM
290.0	Senile dementia, uncomplicated	Diagnosis	ICD-09-CM
797	Senility without mention of psychosis	Diagnosis	ICD-09-CM
290.40	Vascular dementia, uncomplicated	Diagnosis	ICD-09-CM
290.41	Vascular dementia, with delirium	Diagnosis	ICD-09-CM
290.42	Vascular dementia, with delusions	Diagnosis	ICD-09-CM
290.43	Vascular dementia, with depressed mood	Diagnosis	ICD-09-CM
Anemia			
283.9	Acquired hemolytic anemia, unspecified	Diagnosis	ICD-09-CM
285.1	Acute posthemorrhagic anemia	Diagnosis	ICD-09-CM

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

Code	Description	Code Category	Code Type
282.43	Alpha thalassemia	Diagnosis	ICD-09-CM
281.8	Anemia associated with other specified nutritional deficiency	Diagnosis	ICD-09-CM
285.21	Anemia in chronic kidney disease	Diagnosis	ICD-09-CM
285.22	Anemia in neoplastic disease	Diagnosis	ICD-09-CM
285.29	Anemia of other chronic disease	Diagnosis	ICD-09-CM
282.2	Anemias due to disorders of glutathione metabolism	Diagnosis	ICD-09-CM
285.3	Antineoplastic chemotherapy induced anemia	Diagnosis	ICD-09-CM
284.11	Antineoplastic chemotherapy induced pancytopenia	Diagnosis	ICD-09-CM
283.0	Autoimmune hemolytic anemias	Diagnosis	ICD-09-CM
282.44	Beta thalassemia	Diagnosis	ICD-09-CM
284.01	Constitutional red blood cell aplasia	Diagnosis	ICD-09-CM
282.45	Delta-beta thalassemia	Diagnosis	ICD-09-CM
281.2	Folate-deficiency anemia	Diagnosis	ICD-09-CM
282.62	Hb-SS disease with crisis	Diagnosis	ICD-09-CM
282.61	Hb-SS disease without crisis	Diagnosis	ICD-09-CM
282.47	Hemoglobin E-beta thalassemia	Diagnosis	ICD-09-CM
283.11	Hemolytic-uremic syndrome	Diagnosis	ICD-09-CM
282.1	Hereditary elliptocytosis	Diagnosis	ICD-09-CM
282.0	Hereditary spherocytosis	Diagnosis	ICD-09-CM
283.2	Hemoglobinuria due to hemolysis from external causes	Diagnosis	ICD-09-CM
280.1	Iron deficiency anemia secondary to inadequate dietary iron intake	Diagnosis	ICD-09-CM
280.0	Iron deficiency anemia secondary to blood loss (chronic)	Diagnosis	ICD-09-CM
284.2	Myelophthisis	Diagnosis	ICD-09-CM
284.09	Other constitutional aplastic anemia	Diagnosis	ICD-09-CM
284.12	Other drug induced pancytopenia	Diagnosis	ICD-09-CM
282.7	Other hemoglobinopathies	Diagnosis	ICD-09-CM
282.3	Other hemolytic anemias due to enzyme deficiency	Diagnosis	ICD-09-CM
283.19	Other non-autoimmune hemolytic anemias	Diagnosis	ICD-09-CM
284.19	Other pancytopenia	Diagnosis	ICD-09-CM
282.69	Other sickle-cell disease with crisis	Diagnosis	ICD-09-CM
282.68	Other sickle-cell disease without crisis	Diagnosis	ICD-09-CM
285.8	Other specified anemias	Diagnosis	ICD-09-CM
284.89	Other specified aplastic anemias	Diagnosis	ICD-09-CM
282.8	Other specified hereditary hemolytic anemias	Diagnosis	ICD-09-CM
280.8	Other specified iron deficiency anemias	Diagnosis	ICD-09-CM
281.3	Other specified megaloblastic anemias not elsewhere classified	Diagnosis	ICD-09-CM
282.49	Other thalassemia	Diagnosis	ICD-09-CM
281.1	Other vitamin B12 deficiency anemia	Diagnosis	ICD-09-CM
281.0	Pernicious anemia	Diagnosis	ICD-09-CM
281.4	Protein-deficiency anemia	Diagnosis	ICD-09-CM
284.81	Red cell aplasia (acquired) (adult) (with thymoma)	Diagnosis	ICD-09-CM

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

Code	Description	Code Category	Code Type
282.60	Sickle-cell disease, unspecified	Diagnosis	ICD-09-CM
282.42	Sickle-cell thalassemia with crisis	Diagnosis	ICD-09-CM
282.41	Sickle-cell thalassemia without crisis	Diagnosis	ICD-09-CM
282.5	Sickle-cell trait	Diagnosis	ICD-09-CM
282.64	Sickle-cell/Hb-C disease with crisis	Diagnosis	ICD-09-CM
282.63	Sickle-cell/Hb-C disease without crisis	Diagnosis	ICD-09-CM
285.0	Sideroblastic anemia	Diagnosis	ICD-09-CM
282.46	Thalassemia minor	Diagnosis	ICD-09-CM
282.40	Thalassemia, unspecified	Diagnosis	ICD-09-CM
285.9	Unspecified anemia	Diagnosis	ICD-09-CM
284.9	Unspecified aplastic anemia	Diagnosis	ICD-09-CM
281.9	Unspecified deficiency anemia	Diagnosis	ICD-09-CM
282.9	Unspecified hereditary hemolytic anemia	Diagnosis	ICD-09-CM
280.9	Unspecified iron deficiency anemia	Diagnosis	ICD-09-CM
283.10	Unspecified non-autoimmune hemolytic anemia	Diagnosis	ICD-09-CM
D59.9	Acquired hemolytic anemia, unspecified	Diagnosis	ICD-10-CM
D60.9	Acquired pure red cell aplasia, unspecified	Diagnosis	ICD-10-CM
D62	Acute posthemorrhagic anemia	Diagnosis	ICD-10-CM
D56.0	Alpha thalassemia	Diagnosis	ICD-10-CM
D55.0	Anemia due to glucose-6-phosphate dehydrogenase [G6PD] deficiency	Diagnosis	ICD-10-CM
D55.1	Anemia due to other disorders of glutathione metabolism	Diagnosis	ICD-10-CM
D64.81	Anemia due to antineoplastic chemotherapy	Diagnosis	ICD-10-CM
D55.2	Anemia due to disorders of glycolytic enzymes	Diagnosis	ICD-10-CM
D55.3	Anemia due to disorders of nucleotide metabolism	Diagnosis	ICD-10-CM
D55.9	Anemia due to enzyme disorder, unspecified	Diagnosis	ICD-10-CM
D63.1	Anemia in chronic kidney disease	Diagnosis	ICD-10-CM
D63.0	Anemia in neoplastic disease	Diagnosis	ICD-10-CM
D63.8	Anemia in other chronic diseases classified elsewhere	Diagnosis	ICD-10-CM
D64.9	Anemia, unspecified	Diagnosis	ICD-10-CM
D61.810	Antineoplastic chemotherapy induced pancytopenia	Diagnosis	ICD-10-CM
D61.2	Aplastic anemia due to other external agents	Diagnosis	ICD-10-CM
D61.9	Aplastic anemia, unspecified	Diagnosis	ICD-10-CM
D56.1	Beta thalassemia	Diagnosis	ICD-10-CM
D60.0	Chronic acquired pure red cell aplasia	Diagnosis	ICD-10-CM
D64.4	Congenital dyserythropoietic anemia	Diagnosis	ICD-10-CM
D61.01	Constitutional (pure) red blood cell aplasia	Diagnosis	ICD-10-CM
D56.2	Delta-beta thalassemia	Diagnosis	ICD-10-CM
D52.0	Dietary folate deficiency anemia	Diagnosis	ICD-10-CM
D61.1	Drug-induced aplastic anemia	Diagnosis	ICD-10-CM
D59.0	Drug-induced autoimmune hemolytic anemia	Diagnosis	ICD-10-CM
D52.1	Drug-induced folate deficiency anemia	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
D59.2	Drug-induced nonautoimmune hemolytic anemia	Diagnosis	ICD-10-CM
D52.9	Folate deficiency anemia, unspecified	Diagnosis	ICD-10-CM
D57.01	Hb-SS disease with acute chest syndrome	Diagnosis	ICD-10-CM
D57.00	Hb-SS disease with crisis, unspecified	Diagnosis	ICD-10-CM
D57.02	Hb-SS disease with splenic sequestration	Diagnosis	ICD-10-CM
D56.5	Hemoglobin E-beta thalassemia	Diagnosis	ICD-10-CM
D59.6	Hemoglobinuria due to hemolysis from other external causes	Diagnosis	ICD-10-CM
D59.3	Hemolytic-uremic syndrome	Diagnosis	ICD-10-CM
D58.1	Hereditary elliptocytosis	Diagnosis	ICD-10-CM
D58.9	Hereditary hemolytic anemia, unspecified	Diagnosis	ICD-10-CM
D56.4	Hereditary persistence of fetal hemoglobin [HPFH]	Diagnosis	ICD-10-CM
D64.0	Hereditary sideroblastic anemia	Diagnosis	ICD-10-CM
D58.0	Hereditary spherocytosis	Diagnosis	ICD-10-CM
D61.3	Idiopathic aplastic anemia	Diagnosis	ICD-10-CM
D50.0	Iron deficiency anemia secondary to blood loss (chronic)	Diagnosis	ICD-10-CM
D50.9	Iron deficiency anemia, unspecified	Diagnosis	ICD-10-CM
D61.82	Myelophthisis	Diagnosis	ICD-10-CM
D53.9	Nutritional anemia, unspecified	Diagnosis	ICD-10-CM
D57.812	Other sickle-cell disorders with splenic sequestration	Diagnosis	ICD-10-CM
D61.89	Other specified aplastic anemias and other bone marrow failure syndromes	Diagnosis	ICD-10-CM
D59.8	Other acquired hemolytic anemias	Diagnosis	ICD-10-CM
D60.8	Other acquired pure red cell aplasias	Diagnosis	ICD-10-CM
D55.8	Other anemias due to enzyme disorders	Diagnosis	ICD-10-CM
D59.1	Other autoimmune hemolytic anemias	Diagnosis	ICD-10-CM
D61.09	Other constitutional aplastic anemia	Diagnosis	ICD-10-CM
D51.3	Other dietary vitamin B12 deficiency anemia	Diagnosis	ICD-10-CM
D61.811	Other drug-induced pancytopenia	Diagnosis	ICD-10-CM
D52.8	Other folate deficiency anemias	Diagnosis	ICD-10-CM
D58.2	Other hemoglobinopathies	Diagnosis	ICD-10-CM
D50.8	Other iron deficiency anemias	Diagnosis	ICD-10-CM
D53.1	Other megaloblastic anemias, not elsewhere classified	Diagnosis	ICD-10-CM
D59.4	Other nonautoimmune hemolytic anemias	Diagnosis	ICD-10-CM
D61.818	Other pancytopenia	Diagnosis	ICD-10-CM
D57.811	Other sickle-cell disorders with acute chest syndrome	Diagnosis	ICD-10-CM
D57.819	Other sickle-cell disorders with crisis, unspecified	Diagnosis	ICD-10-CM
D57.80	Other sickle-cell disorders without crisis	Diagnosis	ICD-10-CM
D64.3	Other sideroblastic anemias	Diagnosis	ICD-10-CM
D64.89	Other specified anemias	Diagnosis	ICD-10-CM
D58.8	Other specified hereditary hemolytic anemias	Diagnosis	ICD-10-CM
D53.8	Other specified nutritional anemias	Diagnosis	ICD-10-CM
D56.8	Other thalassemias	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
D51.8	Other vitamin B12 deficiency anemias	Diagnosis	ICD-10-CM
D59.5	Paroxysmal nocturnal hemoglobinuria [Marchiafava-Micheli]	Diagnosis	ICD-10-CM
D53.0	Protein deficiency anemia	Diagnosis	ICD-10-CM
D53.2	Scorbutic anemia	Diagnosis	ICD-10-CM
D64.2	Secondary sideroblastic anemia due to drugs and toxins	Diagnosis	ICD-10-CM
D64.1	Secondary sideroblastic anemia due to disease	Diagnosis	ICD-10-CM
D57.1	Sickle-cell disease without crisis	Diagnosis	ICD-10-CM
D57.412	Sickle-cell thalassemia with splenic sequestration	Diagnosis	ICD-10-CM
D57.411	Sickle-cell thalassemia with acute chest syndrome	Diagnosis	ICD-10-CM
D57.419	Sickle-cell thalassemia with crisis, unspecified	Diagnosis	ICD-10-CM
D57.40	Sickle-cell thalassemia without crisis	Diagnosis	ICD-10-CM
D57.3	Sickle-cell trait	Diagnosis	ICD-10-CM
D57.212	Sickle-cell/Hb-C disease with splenic sequestration	Diagnosis	ICD-10-CM
D57.211	Sickle-cell/Hb-C disease with acute chest syndrome	Diagnosis	ICD-10-CM
D57.219	Sickle-cell/Hb-C disease with crisis, unspecified	Diagnosis	ICD-10-CM
D57.20	Sickle-cell/Hb-C disease without crisis	Diagnosis	ICD-10-CM
D50.1	Sideropenic dysphagia	Diagnosis	ICD-10-CM
D56.3	Thalassemia minor	Diagnosis	ICD-10-CM
D56.9	Thalassemia, unspecified	Diagnosis	ICD-10-CM
D51.2	Transcobalamin II deficiency	Diagnosis	ICD-10-CM
D60.1	Transient acquired pure red cell aplasia	Diagnosis	ICD-10-CM
D51.1	Vitamin B12 deficiency anemia due to selective vitamin B12 malabsorption with proteinuria	Diagnosis	ICD-10-CM
D51.0	Vitamin B12 deficiency anemia due to intrinsic factor deficiency	Diagnosis	ICD-10-CM
D51.9	Vitamin B12 deficiency anemia, unspecified	Diagnosis	ICD-10-CM
Asthma			
J45.991	Cough variant asthma	Diagnosis	ICD-10-CM
J45.990	Exercise induced bronchospasm	Diagnosis	ICD-10-CM
J45.20	Mild intermittent asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.21	Mild intermittent asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.22	Mild intermittent asthma with status asthmaticus	Diagnosis	ICD-10-CM
J45.30	Mild persistent asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.31	Mild persistent asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.32	Mild persistent asthma with status asthmaticus	Diagnosis	ICD-10-CM
J45.40	Moderate persistent asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.41	Moderate persistent asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.42	Moderate persistent asthma with status asthmaticus	Diagnosis	ICD-10-CM
J45.998	Other asthma	Diagnosis	ICD-10-CM
J45.50	Severe persistent asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.51	Severe persistent asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.52	Severe persistent asthma with status asthmaticus	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
J45.909	Unspecified asthma, uncomplicated	Diagnosis	ICD-10-CM
J45.901	Unspecified asthma with (acute) exacerbation	Diagnosis	ICD-10-CM
J45.902	Unspecified asthma with status asthmaticus	Diagnosis	ICD-10-CM
493.92	Asthma, unspecified, with (acute) exacerbation	Diagnosis	ICD-09-CM
493.91	Asthma, unspecified with status asthmaticus	Diagnosis	ICD-09-CM
493.90	Asthma, unspecified, unspecified status	Diagnosis	ICD-09-CM
493.20	Chronic obstructive asthma, unspecified	Diagnosis	ICD-09-CM
493.21	Chronic obstructive asthma with status asthmaticus	Diagnosis	ICD-09-CM
493.22	Chronic obstructive asthma, with (acute) exacerbation	Diagnosis	ICD-09-CM
493.82	Cough variant asthma	Diagnosis	ICD-09-CM
493.81	Exercise induced bronchospasm	Diagnosis	ICD-09-CM
493.01	Extrinsic asthma with status asthmaticus	Diagnosis	ICD-09-CM
493.00	Extrinsic asthma, unspecified	Diagnosis	ICD-09-CM
493.02	Extrinsic asthma, with (acute) exacerbation	Diagnosis	ICD-09-CM
493.11	Intrinsic asthma with status asthmaticus	Diagnosis	ICD-09-CM
493.10	Intrinsic asthma, unspecified	Diagnosis	ICD-09-CM
493.12	Intrinsic asthma, with (acute) exacerbation	Diagnosis	ICD-09-CM
Atrial Fibrillation			
427.31	Atrial fibrillation	Diagnosis	ICD-09-CM
I48.2	Chronic atrial fibrillation	Diagnosis	ICD-10-CM
I48.0	Paroxysmal atrial fibrillation	Diagnosis	ICD-10-CM
I48.1	Persistent atrial fibrillation	Diagnosis	ICD-10-CM
I48.91	Unspecified atrial fibrillation	Diagnosis	ICD-10-CM
Benign Prostatic Hyperplasia			
600.20	Benign localized hyperplasia of prostate without urinary obstruction and other lower urinary tract symptoms [LUTS]	Diagnosis	ICD-09-CM
600.21	Benign localized hyperplasia of prostate with urinary obstruction and other lower urinary tract symptoms [LUTS]	Diagnosis	ICD-09-CM
222.2	Benign neoplasm of prostate	Diagnosis	ICD-09-CM
600.3	Cyst of prostate	Diagnosis	ICD-09-CM
600.90	Hyperplasia of prostate, unspecified, without urinary obstruction and other lower urinary tract symptoms [LUTS]	Diagnosis	ICD-09-CM
600.91	Hyperplasia of prostate, unspecified, with urinary obstruction and other lower urinary tract symptoms [LUTS]	Diagnosis	ICD-09-CM
600.00	Hypertrophy (benign) of prostate without urinary obstruction and other lower urinary tract symptoms [LUTS]	Diagnosis	ICD-09-CM
600.01	Hypertrophy (benign) of prostate with urinary obstruction and other lower urinary tract symptoms [LUTS]	Diagnosis	ICD-09-CM
600.11	Nodular prostate with urinary obstruction	Diagnosis	ICD-09-CM
600.10	Nodular prostate without urinary obstruction	Diagnosis	ICD-09-CM

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

Code	Description	Code Category	Code Type
N40.1	Benign prostatic hyperplasia with lower urinary tract symptoms	Diagnosis	ICD-10-CM
N40.0	Benign prostatic hyperplasia without lower urinary tract symptoms	Diagnosis	ICD-10-CM
N42.83	Cyst of prostate	Diagnosis	ICD-10-CM
N40.2	Nodular prostate without lower urinary tract symptoms	Diagnosis	ICD-10-CM
N40.3	Nodular prostate with lower urinary tract symptoms	Diagnosis	ICD-10-CM
Cataract			
H25.23	Age-related cataract, morgagnian type, bilateral	Diagnosis	ICD-10-CM
H25.22	Age-related cataract, morgagnian type, left eye	Diagnosis	ICD-10-CM
H25.21	Age-related cataract, morgagnian type, right eye	Diagnosis	ICD-10-CM
H25.20	Age-related cataract, morgagnian type, unspecified eye	Diagnosis	ICD-10-CM
H25.13	Age-related nuclear cataract, bilateral	Diagnosis	ICD-10-CM
H25.12	Age-related nuclear cataract, left eye	Diagnosis	ICD-10-CM
H25.11	Age-related nuclear cataract, right eye	Diagnosis	ICD-10-CM
H25.10	Age-related nuclear cataract, unspecified eye	Diagnosis	ICD-10-CM
H25.033	Anterior subcapsular polar age-related cataract, bilateral	Diagnosis	ICD-10-CM
H25.032	Anterior subcapsular polar age-related cataract, left eye	Diagnosis	ICD-10-CM
H25.031	Anterior subcapsular polar age-related cataract, right eye	Diagnosis	ICD-10-CM
H25.039	Anterior subcapsular polar age-related cataract, unspecified eye	Diagnosis	ICD-10-CM
H26.043	Anterior subcapsular polar infantile and juvenile cataract, bilateral	Diagnosis	ICD-10-CM
H26.042	Anterior subcapsular polar infantile and juvenile cataract, left eye	Diagnosis	ICD-10-CM
H26.041	Anterior subcapsular polar infantile and juvenile cataract, right eye	Diagnosis	ICD-10-CM
H26.049	Anterior subcapsular polar infantile and juvenile cataract, unspecified eye	Diagnosis	ICD-10-CM
H26.213	Cataract with neovascularization, bilateral	Diagnosis	ICD-10-CM
H26.212	Cataract with neovascularization, left eye	Diagnosis	ICD-10-CM
H26.211	Cataract with neovascularization, right eye	Diagnosis	ICD-10-CM
H26.219	Cataract with neovascularization, unspecified eye	Diagnosis	ICD-10-CM
H25.819	Combined forms of age-related cataract, unspecified eye	Diagnosis	ICD-10-CM
H26.063	Combined forms of infantile and juvenile cataract, bilateral	Diagnosis	ICD-10-CM
H26.062	Combined forms of infantile and juvenile cataract, left eye	Diagnosis	ICD-10-CM
H26.061	Combined forms of infantile and juvenile cataract, right eye	Diagnosis	ICD-10-CM
H26.069	Combined forms of infantile and juvenile cataract, unspecified eye	Diagnosis	ICD-10-CM
H25.813	Combined forms of age-related cataract, bilateral	Diagnosis	ICD-10-CM
H25.812	Combined forms of age-related cataract, left eye	Diagnosis	ICD-10-CM
H25.811	Combined forms of age-related cataract, right eye	Diagnosis	ICD-10-CM
Q12.0	Congenital cataract	Diagnosis	ICD-10-CM
H25.013	Cortical age-related cataract, bilateral	Diagnosis	ICD-10-CM
H25.012	Cortical age-related cataract, left eye	Diagnosis	ICD-10-CM
H25.011	Cortical age-related cataract, right eye	Diagnosis	ICD-10-CM
H25.019	Cortical age-related cataract, unspecified eye	Diagnosis	ICD-10-CM
H26.33	Drug-induced cataract, bilateral	Diagnosis	ICD-10-CM
H26.32	Drug-induced cataract, left eye	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
H26.31	Drug-induced cataract, right eye	Diagnosis	ICD-10-CM
H26.30	Drug-induced cataract, unspecified eye	Diagnosis	ICD-10-CM
H26.013	Infantile and juvenile cortical, lamellar, or zonular cataract, bilateral	Diagnosis	ICD-10-CM
H26.012	Infantile and juvenile cortical, lamellar, or zonular cataract, left eye	Diagnosis	ICD-10-CM
H26.011	Infantile and juvenile cortical, lamellar, or zonular cataract, right eye	Diagnosis	ICD-10-CM
H26.019	Infantile and juvenile cortical, lamellar, or zonular cataract, unspecified eye	Diagnosis	ICD-10-CM
H26.033	Infantile and juvenile nuclear cataract, bilateral	Diagnosis	ICD-10-CM
H26.032	Infantile and juvenile nuclear cataract, left eye	Diagnosis	ICD-10-CM
H26.031	Infantile and juvenile nuclear cataract, right eye	Diagnosis	ICD-10-CM
H26.039	Infantile and juvenile nuclear cataract, unspecified eye	Diagnosis	ICD-10-CM
H26.113	Localized traumatic opacities, bilateral	Diagnosis	ICD-10-CM
H26.112	Localized traumatic opacities, left eye	Diagnosis	ICD-10-CM
H26.111	Localized traumatic opacities, right eye	Diagnosis	ICD-10-CM
H26.119	Localized traumatic opacities, unspecified eye	Diagnosis	ICD-10-CM
H25.89	Other age-related cataract	Diagnosis	ICD-10-CM
H25.093	Other age-related incipient cataract, bilateral	Diagnosis	ICD-10-CM
H25.092	Other age-related incipient cataract, left eye	Diagnosis	ICD-10-CM
H25.091	Other age-related incipient cataract, right eye	Diagnosis	ICD-10-CM
H25.099	Other age-related incipient cataract, unspecified eye	Diagnosis	ICD-10-CM
H26.09	Other infantile and juvenile cataract	Diagnosis	ICD-10-CM
H26.493	Other secondary cataract, bilateral	Diagnosis	ICD-10-CM
H26.492	Other secondary cataract, left eye	Diagnosis	ICD-10-CM
H26.491	Other secondary cataract, right eye	Diagnosis	ICD-10-CM
H26.499	Other secondary cataract, unspecified eye	Diagnosis	ICD-10-CM
H26.8	Other specified cataract	Diagnosis	ICD-10-CM
H26.123	Partially resolved traumatic cataract, bilateral	Diagnosis	ICD-10-CM
H26.122	Partially resolved traumatic cataract, left eye	Diagnosis	ICD-10-CM
H26.121	Partially resolved traumatic cataract, right eye	Diagnosis	ICD-10-CM
H26.129	Partially resolved traumatic cataract, unspecified eye	Diagnosis	ICD-10-CM
H25.043	Posterior subcapsular polar age-related cataract, bilateral	Diagnosis	ICD-10-CM
H25.042	Posterior subcapsular polar age-related cataract, left eye	Diagnosis	ICD-10-CM
H25.041	Posterior subcapsular polar age-related cataract, right eye	Diagnosis	ICD-10-CM
H25.049	Posterior subcapsular polar age-related cataract, unspecified eye	Diagnosis	ICD-10-CM
H26.053	Posterior subcapsular polar infantile and juvenile cataract, bilateral	Diagnosis	ICD-10-CM
H26.052	Posterior subcapsular polar infantile and juvenile cataract, left eye	Diagnosis	ICD-10-CM
H26.051	Posterior subcapsular polar infantile and juvenile cataract, right eye	Diagnosis	ICD-10-CM
H26.059	Posterior subcapsular polar infantile and juvenile cataract, unspecified eye	Diagnosis	ICD-10-CM
Z96.1	Presence of intraocular lens	Diagnosis	ICD-10-CM
H26.413	Soemmering's ring, bilateral	Diagnosis	ICD-10-CM
H26.412	Soemmering's ring, left eye	Diagnosis	ICD-10-CM
H26.411	Soemmering's ring, right eye	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
H26.419	Soemmering's ring, unspecified eye	Diagnosis	ICD-10-CM
H26.133	Total traumatic cataract, bilateral	Diagnosis	ICD-10-CM
H26.132	Total traumatic cataract, left eye	Diagnosis	ICD-10-CM
H26.131	Total traumatic cataract, right eye	Diagnosis	ICD-10-CM
H26.139	Total traumatic cataract, unspecified eye	Diagnosis	ICD-10-CM
H25.9	Unspecified age-related cataract	Diagnosis	ICD-10-CM
H26.9	Unspecified cataract	Diagnosis	ICD-10-CM
H26.20	Unspecified complicated cataract	Diagnosis	ICD-10-CM
H26.40	Unspecified secondary cataract	Diagnosis	ICD-10-CM
H26.103	Unspecified traumatic cataract, bilateral	Diagnosis	ICD-10-CM
H26.102	Unspecified traumatic cataract, left eye	Diagnosis	ICD-10-CM
H26.101	Unspecified traumatic cataract, right eye	Diagnosis	ICD-10-CM
H26.109	Unspecified traumatic cataract, unspecified eye	Diagnosis	ICD-10-CM
366.53	After-cataract, obscuring vision	Diagnosis	ICD-09-CM
366.01	Anterior subcapsular polar cataract, nonsenile	Diagnosis	ICD-09-CM
366.13	Anterior subcapsular polar senile cataract	Diagnosis	ICD-09-CM
379.31	Aphakia	Diagnosis	ICD-09-CM
366.46	Cataract associated with radiation and other physical influences	Diagnosis	ICD-09-CM
743.31	Congenital capsular and subcapsular cataract	Diagnosis	ICD-09-CM
743.32	Congenital cortical and zonular cataract	Diagnosis	ICD-09-CM
743.33	Congenital nuclear cataract	Diagnosis	ICD-09-CM
366.03	Cortical, lamellar, or zonular cataract, nonsenile	Diagnosis	ICD-09-CM
366.15	Cortical senile cataract	Diagnosis	ICD-09-CM
366.18	Hyper mature senile cataract	Diagnosis	ICD-09-CM
366.12	Incipient cataract	Diagnosis	ICD-09-CM
V43.1	Lens replaced by other means	Diagnosis	ICD-09-CM
366.21	Localized traumatic opacities of cataract	Diagnosis	ICD-09-CM
366.04	Nuclear cataract, nonsenile	Diagnosis	ICD-09-CM
366.16	Nuclear sclerosis	Diagnosis	ICD-09-CM
366.52	Other after-cataract, not obscuring vision	Diagnosis	ICD-09-CM
366.09	Other and combined forms of nonsenile cataract	Diagnosis	ICD-09-CM
366.19	Other and combined forms of senile cataract	Diagnosis	ICD-09-CM
366.8	Other cataract	Diagnosis	ICD-09-CM
379.39	Other disorders of lens	Diagnosis	ICD-09-CM
366.23	Partially resolved traumatic cataract	Diagnosis	ICD-09-CM
366.02	Posterior subcapsular polar cataract, nonsenile	Diagnosis	ICD-09-CM
366.14	Posterior subcapsular polar senile cataract	Diagnosis	ICD-09-CM
366.51	Soemmering's ring	Diagnosis	ICD-09-CM
366.17	Total or mature senile cataract	Diagnosis	ICD-09-CM
366.22	Total traumatic cataract	Diagnosis	ICD-09-CM
366.45	Toxic cataract	Diagnosis	ICD-09-CM

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

Code	Description	Code Category	Code Type
366.50	Unspecified after-cataract	Diagnosis	ICD-09-CM
366.9	Unspecified cataract	Diagnosis	ICD-09-CM
366.30	Unspecified cataracta complicata	Diagnosis	ICD-09-CM
743.30	Unspecified congenital cataract	Diagnosis	ICD-09-CM
366.10	Unspecified senile cataract	Diagnosis	ICD-09-CM
366.20	Unspecified traumatic cataract	Diagnosis	ICD-09-CM
379.26	Vitreous prolapse	Diagnosis	ICD-09-CM

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Code	Description	Code Category	Code Type
Chronic Kidney Disease			
584.8	Acute kidney failure with other specified pathological lesion in kidney	Diagnosis	ICD-09-CM
580.81	Acute glomerulonephritis with other specified pathological lesion in kidney in disease classified elsewhere	Diagnosis	ICD-09-CM
580.9	Acute glomerulonephritis with unspecified pathological lesion in kidney	Diagnosis	ICD-09-CM
580.0	Acute glomerulonephritis with lesion of proliferative glomerulonephritis	Diagnosis	ICD-09-CM
580.4	Acute glomerulonephritis with lesion of rapidly progressive glomerulonephritis	Diagnosis	ICD-09-CM
584.9	Acute kidney failure, unspecified	Diagnosis	ICD-09-CM
584.6	Acute kidney failure with lesion of renal cortical necrosis	Diagnosis	ICD-09-CM
584.7	Acute kidney failure with lesion of medullary [papillary] necrosis	Diagnosis	ICD-09-CM
584.5	Acute kidney failure with lesion of tubular necrosis	Diagnosis	ICD-09-CM
442.1	Aneurysm of renal artery	Diagnosis	ICD-09-CM
440.1	Atherosclerosis of renal artery	Diagnosis	ICD-09-CM
223.0	Benign neoplasm of kidney, except pelvis	Diagnosis	ICD-09-CM
582.89	Other chronic glomerulonephritis with specified pathological lesion in kidney	Diagnosis	ICD-09-CM
582.81	Chronic glomerulonephritis with other specified pathological lesion in kidney in diseases classified elsewhere	Diagnosis	ICD-09-CM
582.1	Chronic glomerulonephritis with lesion of membranous glomerulonephritis	Diagnosis	ICD-09-CM
582.2	Chronic glomerulonephritis with lesion of membranoproliferative glomerulonephritis	Diagnosis	ICD-09-CM
582.0	Chronic glomerulonephritis with lesion of proliferative glomerulonephritis	Diagnosis	ICD-09-CM
582.4	Chronic glomerulonephritis with lesion of rapidly progressive glomerulonephritis	Diagnosis	ICD-09-CM
582.9	Chronic glomerulonephritis with unspecified pathological lesion in kidney	Diagnosis	ICD-09-CM
585.1	Chronic kidney disease, Stage I	Diagnosis	ICD-09-CM
585.2	Chronic kidney disease, Stage II (mild)	Diagnosis	ICD-09-CM
585.3	Chronic kidney disease, Stage III (moderate)	Diagnosis	ICD-09-CM
585.4	Chronic kidney disease, Stage IV (severe)	Diagnosis	ICD-09-CM
585.5	Chronic kidney disease, Stage V	Diagnosis	ICD-09-CM
585.9	Chronic kidney disease, unspecified	Diagnosis	ICD-09-CM
753.16	Congenital medullary cystic kidney	Diagnosis	ICD-09-CM
753.17	Congenital medullary sponge kidney	Diagnosis	ICD-09-CM
753.21	Congenital obstruction of ureteropelvic junction	Diagnosis	ICD-09-CM
753.22	Congenital obstruction of ureterovesical junction	Diagnosis	ICD-09-CM
753.13	Congenital polycystic kidney, autosomal dominant	Diagnosis	ICD-09-CM
753.14	Congenital polycystic kidney, autosomal recessive	Diagnosis	ICD-09-CM
753.12	Congenital polycystic kidney, unspecified type	Diagnosis	ICD-09-CM
753.15	Congenital renal dysplasia	Diagnosis	ICD-09-CM
753.23	Congenital ureterocele	Diagnosis	ICD-09-CM
250.43	Diabetes with renal manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-09-CM

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Code	Description	Code Category	Code Type
250.41	Diabetes with renal manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-09-CM
250.40	Diabetes with renal manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-09-CM
250.42	Diabetes with renal manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-09-CM
585.6	End stage renal disease	Diagnosis	ICD-09-CM
274.10	Gouty nephropathy, unspecified	Diagnosis	ICD-09-CM
283.11	Hemolytic-uremic syndrome	Diagnosis	ICD-09-CM
572.4	Hepatorenal syndrome	Diagnosis	ICD-09-CM
403.01	Hypertensive chronic kidney disease, malignant, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
403.11	Hypertensive chronic kidney disease, benign, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
403.91	Hypertensive chronic kidney disease, unspecified, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
404.13	Hypertensive heart and chronic kidney disease, benign, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
404.02	Hypertensive heart and chronic kidney disease, malignant, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
404.93	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
404.12	Hypertensive heart and chronic kidney disease, benign, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
404.03	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
404.92	Hypertensive heart and chronic kidney disease, unspecified, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
591	Hydronephrosis	Diagnosis	ICD-09-CM
189.0	Malignant neoplasm of kidney, except pelvis	Diagnosis	ICD-09-CM
189.9	Malignant neoplasm of urinary organ, site unspecified	Diagnosis	ICD-09-CM
236.91	Neoplasm of uncertain behavior of kidney and ureter	Diagnosis	ICD-09-CM
583.6	Nephritis and nephropathy, not specified as acute or chronic, with lesion of renal cortical necrosis	Diagnosis	ICD-09-CM
583.81	Nephritis and nephropathy, not specified as acute or chronic, with other specified pathological lesion in kidney, in diseases classified elsewhere	Diagnosis	ICD-09-CM
583.7	Nephritis and nephropathy, not specified as acute or chronic, with lesion of renal medullary necrosis	Diagnosis	ICD-09-CM
583.2	Nephritis and nephropathy, not specified as acute or chronic, with lesion of membranoproliferative glomerulonephritis	Diagnosis	ICD-09-CM
583.4	Nephritis and nephropathy, not specified as acute or chronic, with lesion of rapidly progressive glomerulonephritis	Diagnosis	ICD-09-CM

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Code	Description	Code Category	Code Type
583.89	Other nephritis and nephropathy, not specified as acute or chronic, with specified pathological lesion in kidney	Diagnosis	ICD-09-CM
583.0	Nephritis and nephropathy, not specified as acute or chronic, with lesion of proliferative glomerulonephritis	Diagnosis	ICD-09-CM
583.9	Nephritis and nephropathy, not specified as acute or chronic, with unspecified pathological lesion in kidney	Diagnosis	ICD-09-CM
583.1	Nephritis and nephropathy, not specified as acute or chronic, with lesion of membranous glomerulonephritis	Diagnosis	ICD-09-CM
588.1	Nephrogenic diabetes insipidus	Diagnosis	ICD-09-CM
581.3	Nephrotic syndrome with lesion of minimal change glomerulonephritis	Diagnosis	ICD-09-CM
581.2	Nephrotic syndrome with lesion of membranoproliferative glomerulonephritis	Diagnosis	ICD-09-CM
581.81	Nephrotic syndrome with other specified pathological lesion in kidney in diseases classified elsewhere	Diagnosis	ICD-09-CM
581.1	Nephrotic syndrome with lesion of membranous glomerulonephritis	Diagnosis	ICD-09-CM
581.0	Nephrotic syndrome with lesion of proliferative glomerulonephritis	Diagnosis	ICD-09-CM
581.9	Nephrotic syndrome with unspecified pathological lesion in kidney	Diagnosis	ICD-09-CM
794.4	Nonspecific abnormal results of kidney function study	Diagnosis	ICD-09-CM
580.89	Other acute glomerulonephritis with other specified pathological lesion in kidney	Diagnosis	ICD-09-CM
581.89	Other nephrotic syndrome with specified pathological lesion in kidney	Diagnosis	ICD-09-CM
588.89	Other specified disorders resulting from impaired renal function	Diagnosis	ICD-09-CM
753.29	Other obstructive defect of renal pelvis and ureter	Diagnosis	ICD-09-CM
753.19	Other specified congenital cystic kidney disease	Diagnosis	ICD-09-CM
271.4	Renal glycosuria	Diagnosis	ICD-09-CM
588.0	Renal osteodystrophy	Diagnosis	ICD-09-CM
249.40	Secondary diabetes mellitus with renal manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-09-CM
249.41	Secondary diabetes mellitus with renal manifestations, uncontrolled	Diagnosis	ICD-09-CM
588.81	Secondary hyperparathyroidism (of renal origin)	Diagnosis	ICD-09-CM
095.4	Syphilis of kidney	Diagnosis	ICD-09-CM
016.02	Tuberculosis of kidney, bacteriological or histological examination unknown (at present)	Diagnosis	ICD-09-CM
016.01	Tuberculosis of kidney, bacteriological or histological examination not done	Diagnosis	ICD-09-CM
016.04	Tuberculosis of kidney, tubercle bacilli not found (in sputum) by microscopy, but found by bacterial culture	Diagnosis	ICD-09-CM
016.05	Tuberculosis of kidney, tubercle bacilli not found by bacteriological examination, but tuberculosis confirmed histologically	Diagnosis	ICD-09-CM
016.06	Tuberculosis of kidney, tubercle bacilli not found by bacteriological or histological examination, but tuberculosis confirmed by other methods [inoculation of animals]	Diagnosis	ICD-09-CM

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Code	Description	Code Category	Code Type
016.03	Tuberculosis of kidney, tubercle bacilli found (in sputum) by microscopy	Diagnosis	ICD-09-CM
016.00	Tuberculosis of kidney, confirmation unspecified	Diagnosis	ICD-09-CM
588.9	Unspecified disorder resulting from impaired renal function	Diagnosis	ICD-09-CM
753.20	Unspecified obstructive defect of renal pelvis and ureter	Diagnosis	ICD-09-CM
586	Unspecified renal failure	Diagnosis	ICD-09-CM
587	Unspecified renal sclerosis	Diagnosis	ICD-09-CM
R94.4	Abnormal results of kidney function studies	Diagnosis	ICD-10-CM
N00.4	Acute nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N00.3	Acute nephritic syndrome with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N00.5	Acute nephritic syndrome with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N17.9	Acute kidney failure, unspecified	Diagnosis	ICD-10-CM
N17.1	Acute kidney failure with acute cortical necrosis	Diagnosis	ICD-10-CM
N17.2	Acute kidney failure with medullary necrosis	Diagnosis	ICD-10-CM
N00.6	Acute nephritic syndrome with dense deposit disease	Diagnosis	ICD-10-CM
N00.7	Acute nephritic syndrome with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N00.1	Acute nephritic syndrome with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N00.0	Acute nephritic syndrome with minor glomerular abnormality	Diagnosis	ICD-10-CM
N00.8	Acute nephritic syndrome with other morphologic changes	Diagnosis	ICD-10-CM
N00.9	Acute nephritic syndrome with unspecified morphologic changes	Diagnosis	ICD-10-CM
N00.2	Acute nephritic syndrome with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N17.0	Acute kidney failure with tubular necrosis	Diagnosis	ICD-10-CM
N14.0	Analgesic nephropathy	Diagnosis	ICD-10-CM
I72.2	Aneurysm of renal artery	Diagnosis	ICD-10-CM
I70.1	Atherosclerosis of renal artery	Diagnosis	ICD-10-CM
N26.1	Atrophy of kidney (terminal)	Diagnosis	ICD-10-CM
N15.0	Balkan nephropathy	Diagnosis	ICD-10-CM
D30.02	Benign neoplasm of left kidney	Diagnosis	ICD-10-CM
D30.01	Benign neoplasm of right kidney	Diagnosis	ICD-10-CM
D30.00	Benign neoplasm of unspecified kidney	Diagnosis	ICD-10-CM
Q62.32	Cecoureterocele	Diagnosis	ICD-10-CM
N03.3	Chronic nephritic syndrome with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N03.4	Chronic nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N18.1	Chronic kidney disease, stage 1	Diagnosis	ICD-10-CM
N18.2	Chronic kidney disease, stage 2 (mild)	Diagnosis	ICD-10-CM
N18.3	Chronic kidney disease, stage 3 (moderate)	Diagnosis	ICD-10-CM
N18.4	Chronic kidney disease, stage 4 (severe)	Diagnosis	ICD-10-CM
N18.5	Chronic kidney disease, stage 5	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
N18.9	Chronic kidney disease, unspecified	Diagnosis	ICD-10-CM
N03.1	Chronic nephritic syndrome with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N03.6	Chronic nephritic syndrome with dense deposit disease	Diagnosis	ICD-10-CM
N03.7	Chronic nephritic syndrome with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N03.5	Chronic nephritic syndrome with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N03.0	Chronic nephritic syndrome with minor glomerular abnormality	Diagnosis	ICD-10-CM
N03.8	Chronic nephritic syndrome with other morphologic changes	Diagnosis	ICD-10-CM
N03.9	Chronic nephritic syndrome with unspecified morphologic changes	Diagnosis	ICD-10-CM
N03.2	Chronic nephritic syndrome with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
Q62.0	Congenital hydronephrosis	Diagnosis	ICD-10-CM
Q62.2	Congenital megaureter	Diagnosis	ICD-10-CM
Q61.02	Congenital multiple renal cysts	Diagnosis	ICD-10-CM
Q62.10	Congenital occlusion of ureter, unspecified	Diagnosis	ICD-10-CM
Q62.11	Congenital occlusion of ureteropelvic junction	Diagnosis	ICD-10-CM
Q62.12	Congenital occlusion of ureterovesical orifice	Diagnosis	ICD-10-CM
Q62.31	Congenital ureterocele, orthotopic	Diagnosis	ICD-10-CM
Q61.11	Cystic dilatation of collecting ducts	Diagnosis	ICD-10-CM
N25.9	Disorder resulting from impaired renal tubular function, unspecified	Diagnosis	ICD-10-CM
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication	Diagnosis	ICD-10-CM
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy	Diagnosis	ICD-10-CM
E08.65	Diabetes mellitus due to underlying condition with hyperglycemia	Diagnosis	ICD-10-CM
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
N18.6	End stage renal disease	Diagnosis	ICD-10-CM
M32.14	Glomerular disease in systemic lupus erythematosus	Diagnosis	ICD-10-CM
N08	Glomerular disorders in diseases classified elsewhere	Diagnosis	ICD-10-CM
M10.372	Gout due to renal impairment, left ankle and foot	Diagnosis	ICD-10-CM
M10.322	Gout due to renal impairment, left elbow	Diagnosis	ICD-10-CM
M10.342	Gout due to renal impairment, left hand	Diagnosis	ICD-10-CM
M10.352	Gout due to renal impairment, left hip	Diagnosis	ICD-10-CM
M10.362	Gout due to renal impairment, left knee	Diagnosis	ICD-10-CM
M10.312	Gout due to renal impairment, left shoulder	Diagnosis	ICD-10-CM
M10.332	Gout due to renal impairment, left wrist	Diagnosis	ICD-10-CM
M10.39	Gout due to renal impairment, multiple sites	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
M10.371	Gout due to renal impairment, right ankle and foot	Diagnosis	ICD-10-CM
M10.321	Gout due to renal impairment, right elbow	Diagnosis	ICD-10-CM
M10.341	Gout due to renal impairment, right hand	Diagnosis	ICD-10-CM
M10.351	Gout due to renal impairment, right hip	Diagnosis	ICD-10-CM
M10.361	Gout due to renal impairment, right knee	Diagnosis	ICD-10-CM
M10.311	Gout due to renal impairment, right shoulder	Diagnosis	ICD-10-CM
M10.331	Gout due to renal impairment, right wrist	Diagnosis	ICD-10-CM
M10.379	Gout due to renal impairment, unspecified ankle and foot	Diagnosis	ICD-10-CM
M10.319	Gout due to renal impairment, unspecified shoulder	Diagnosis	ICD-10-CM
M10.329	Gout due to renal impairment, unspecified elbow	Diagnosis	ICD-10-CM
M10.349	Gout due to renal impairment, unspecified hand	Diagnosis	ICD-10-CM
M10.359	Gout due to renal impairment, unspecified hip	Diagnosis	ICD-10-CM
M10.369	Gout due to renal impairment, unspecified knee	Diagnosis	ICD-10-CM
M10.30	Gout due to renal impairment, unspecified site	Diagnosis	ICD-10-CM
M10.339	Gout due to renal impairment, unspecified wrist	Diagnosis	ICD-10-CM
M10.38	Gout due to renal impairment, vertebrae	Diagnosis	ICD-10-CM
D59.3	Hemolytic-uremic syndrome	Diagnosis	ICD-10-CM
K76.7	Hepatorenal syndrome	Diagnosis	ICD-10-CM
N07.3	Hereditary nephropathy, not elsewhere classified with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N07.1	Hereditary nephropathy, not elsewhere classified with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N07.6	Hereditary nephropathy, not elsewhere classified with dense deposit disease	Diagnosis	ICD-10-CM
N07.4	Hereditary nephropathy, not elsewhere classified with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N07.7	Hereditary nephropathy, not elsewhere classified with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N07.2	Hereditary nephropathy, not elsewhere classified with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N07.5	Hereditary nephropathy, not elsewhere classified with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N07.0	Hereditary nephropathy, not elsewhere classified with minor glomerular abnormality	Diagnosis	ICD-10-CM
N07.8	Hereditary nephropathy, not elsewhere classified with other morphologic lesions	Diagnosis	ICD-10-CM
N07.9	Hereditary nephropathy, not elsewhere classified with unspecified morphologic lesions	Diagnosis	ICD-10-CM
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
I13.0	Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.10	Hypertensive heart and chronic kidney disease without heart failure, with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.11	Hypertensive heart and chronic kidney disease without heart failure, with stage 5 chronic kidney disease, or end stage renal disease	Diagnosis	ICD-10-CM
N13.2	Hydronephrosis with renal and ureteral calculous obstruction	Diagnosis	ICD-10-CM
N13.1	Hydronephrosis with ureteral stricture, not elsewhere classified	Diagnosis	ICD-10-CM
I12.9	Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I12.0	Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease	Diagnosis	ICD-10-CM
N06.8	Isolated proteinuria with other morphologic lesion	Diagnosis	ICD-10-CM
N06.3	Isolated proteinuria with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N06.7	Isolated proteinuria with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N06.4	Isolated proteinuria with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N06.2	Isolated proteinuria with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N06.5	Isolated proteinuria with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N06.1	Isolated proteinuria with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N06.0	Isolated proteinuria with minor glomerular abnormality	Diagnosis	ICD-10-CM
N06.9	Isolated proteinuria with unspecified morphologic lesion	Diagnosis	ICD-10-CM
N06.6	Isolated proteinuria with dense deposit disease	Diagnosis	ICD-10-CM
C64.2	Malignant neoplasm of left kidney, except renal pelvis	Diagnosis	ICD-10-CM
C68.9	Malignant neoplasm of urinary organ, unspecified	Diagnosis	ICD-10-CM
C64.1	Malignant neoplasm of right kidney, except renal pelvis	Diagnosis	ICD-10-CM
C64.9	Malignant neoplasm of unspecified kidney, except renal pelvis	Diagnosis	ICD-10-CM
Q61.5	Medullary cystic kidney	Diagnosis	ICD-10-CM
D41.12	Neoplasm of uncertain behavior of left renal pelvis	Diagnosis	ICD-10-CM
D41.02	Neoplasm of uncertain behavior of left kidney	Diagnosis	ICD-10-CM
D41.22	Neoplasm of uncertain behavior of left ureter	Diagnosis	ICD-10-CM
D41.01	Neoplasm of uncertain behavior of right kidney	Diagnosis	ICD-10-CM
D41.21	Neoplasm of uncertain behavior of right ureter	Diagnosis	ICD-10-CM
D41.11	Neoplasm of uncertain behavior of right renal pelvis	Diagnosis	ICD-10-CM
D41.00	Neoplasm of uncertain behavior of unspecified kidney	Diagnosis	ICD-10-CM
D41.10	Neoplasm of uncertain behavior of unspecified renal pelvis	Diagnosis	ICD-10-CM
D41.20	Neoplasm of uncertain behavior of unspecified ureter	Diagnosis	ICD-10-CM
N25.1	Nephrogenic diabetes insipidus	Diagnosis	ICD-10-CM
N14.3	Nephropathy induced by heavy metals	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
N14.1	Nephropathy induced by other drugs, medicaments and biological substances	Diagnosis	ICD-10-CM
N14.2	Nephropathy induced by unspecified drug, medicament or biological substance	Diagnosis	ICD-10-CM
N04.4	Nephrotic syndrome with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N04.3	Nephrotic syndrome with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N04.5	Nephrotic syndrome with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N04.8	Nephrotic syndrome with other morphologic changes	Diagnosis	ICD-10-CM
N04.7	Nephrotic syndrome with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N04.2	Nephrotic syndrome with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N04.1	Nephrotic syndrome with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N04.0	Nephrotic syndrome with minor glomerular abnormality	Diagnosis	ICD-10-CM
N04.9	Nephrotic syndrome with unspecified morphologic changes	Diagnosis	ICD-10-CM
N04.6	Nephrotic syndrome with dense deposit disease	Diagnosis	ICD-10-CM
N25.89	Other disorders resulting from impaired renal tubular function	Diagnosis	ICD-10-CM
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E13.21	Other specified diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E13.29	Other specified diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
N17.8	Other acute kidney failure	Diagnosis	ICD-10-CM
Q61.8	Other cystic kidney diseases	Diagnosis	ICD-10-CM
N13.39	Other hydronephrosis	Diagnosis	ICD-10-CM
Q62.39	Other obstructive defects of renal pelvis and ureter	Diagnosis	ICD-10-CM
Q61.19	Other polycystic kidney, infantile type	Diagnosis	ICD-10-CM
N15.8	Other specified renal tubulo-interstitial diseases	Diagnosis	ICD-10-CM
E74.8	Other specified disorders of carbohydrate metabolism	Diagnosis	ICD-10-CM
B52.0	Plasmodium malariae malaria with nephropathy	Diagnosis	ICD-10-CM
Q61.2	Polycystic kidney, adult type	Diagnosis	ICD-10-CM
Q61.3	Polycystic kidney, unspecified	Diagnosis	ICD-10-CM
N01.3	Rapidly progressive nephritic syndrome with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N01.4	Rapidly progressive nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N01.1	Rapidly progressive nephritic syndrome with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N01.6	Rapidly progressive nephritic syndrome with dense deposit disease	Diagnosis	ICD-10-CM
N01.5	Rapidly progressive nephritic syndrome with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N01.7	Rapidly progressive nephritic syndrome with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
N01.2	Rapidly progressive nephritic syndrome with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N01.0	Rapidly progressive nephritic syndrome with minor glomerular abnormality	Diagnosis	ICD-10-CM
N01.8	Rapidly progressive nephritic syndrome with other morphologic changes	Diagnosis	ICD-10-CM
N01.9	Rapidly progressive nephritic syndrome with unspecified morphologic changes	Diagnosis	ICD-10-CM
N02.3	Recurrent and persistent hematuria with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N02.1	Recurrent and persistent hematuria with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N02.6	Recurrent and persistent hematuria with dense deposit disease	Diagnosis	ICD-10-CM
N02.4	Recurrent and persistent hematuria with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N02.7	Recurrent and persistent hematuria with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N02.5	Recurrent and persistent hematuria with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N02.8	Recurrent and persistent hematuria with other morphologic changes	Diagnosis	ICD-10-CM
N02.9	Recurrent and persistent hematuria with unspecified morphologic changes	Diagnosis	ICD-10-CM
N02.0	Recurrent and persistent hematuria with minor glomerular abnormality	Diagnosis	ICD-10-CM
N02.2	Recurrent and persistent hematuria with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
Q61.4	Renal dysplasia	Diagnosis	ICD-10-CM
N25.0	Renal osteodystrophy	Diagnosis	ICD-10-CM
N26.9	Renal sclerosis, unspecified	Diagnosis	ICD-10-CM
N16	Renal tubulo-interstitial disorders in diseases classified elsewhere	Diagnosis	ICD-10-CM
N15.9	Renal tubulo-interstitial disease, unspecified	Diagnosis	ICD-10-CM
N25.81	Secondary hyperparathyroidism of renal origin	Diagnosis	ICD-10-CM
M35.04	Sicca syndrome with tubulo-interstitial nephropathy	Diagnosis	ICD-10-CM
A52.75	Syphilis of kidney and ureter	Diagnosis	ICD-10-CM
N14.4	Toxic nephropathy, not elsewhere classified	Diagnosis	ICD-10-CM
A18.11	Tuberculosis of kidney and ureter	Diagnosis	ICD-10-CM
M32.15	Tubulo-interstitial nephropathy in systemic lupus erythematosus	Diagnosis	ICD-10-CM
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E10.21	Type 1 diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E10.65	Type 1 diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E11.21	Type 2 diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E11.65	Type 2 diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
N05.4	Unspecified nephritic syndrome with diffuse endocapillary proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N05.3	Unspecified nephritic syndrome with diffuse mesangial proliferative glomerulonephritis	Diagnosis	ICD-10-CM
N05.5	Unspecified nephritic syndrome with diffuse mesangiocapillary glomerulonephritis	Diagnosis	ICD-10-CM
N05.1	Unspecified nephritic syndrome with focal and segmental glomerular lesions	Diagnosis	ICD-10-CM
N05.6	Unspecified nephritic syndrome with dense deposit disease	Diagnosis	ICD-10-CM
N05.7	Unspecified nephritic syndrome with diffuse crescentic glomerulonephritis	Diagnosis	ICD-10-CM
N05.2	Unspecified nephritic syndrome with diffuse membranous glomerulonephritis	Diagnosis	ICD-10-CM
N05.0	Unspecified nephritic syndrome with minor glomerular abnormality	Diagnosis	ICD-10-CM
N05.8	Unspecified nephritic syndrome with other morphologic changes	Diagnosis	ICD-10-CM
N05.9	Unspecified nephritic syndrome with unspecified morphologic changes	Diagnosis	ICD-10-CM
N13.30	Unspecified hydronephrosis	Diagnosis	ICD-10-CM
N19	Unspecified kidney failure	Diagnosis	ICD-10-CM
Chronic Obstructive Pulmonary Disease and Bronchiectasis			
494.1	Bronchiectasis with acute exacerbation	Diagnosis	ICD-09-CM
494.0	Bronchiectasis without acute exacerbation	Diagnosis	ICD-09-CM
490	Bronchitis, not specified as acute or chronic	Diagnosis	ICD-09-CM
496	Chronic airway obstruction, not elsewhere classified	Diagnosis	ICD-09-CM
492.0	Emphysematous bleb	Diagnosis	ICD-09-CM
491.1	Mucopurulent chronic bronchitis	Diagnosis	ICD-09-CM
491.22	Obstructive chronic bronchitis with acute bronchitis	Diagnosis	ICD-09-CM
491.21	Obstructive chronic bronchitis, with (acute) exacerbation	Diagnosis	ICD-09-CM
491.20	Obstructive chronic bronchitis, without exacerbation	Diagnosis	ICD-09-CM
491.8	Other chronic bronchitis	Diagnosis	ICD-09-CM
492.8	Other emphysema	Diagnosis	ICD-09-CM
491.0	Simple chronic bronchitis	Diagnosis	ICD-09-CM
491.9	Unspecified chronic bronchitis	Diagnosis	ICD-09-CM
J47.9	Bronchiectasis, uncomplicated	Diagnosis	ICD-10-CM
J47.0	Bronchiectasis with acute lower respiratory infection	Diagnosis	ICD-10-CM
J47.1	Bronchiectasis with (acute) exacerbation	Diagnosis	ICD-10-CM
J40	Bronchitis, not specified as acute or chronic	Diagnosis	ICD-10-CM
J43.2	Centrilobular emphysema	Diagnosis	ICD-10-CM
J44.9	Chronic obstructive pulmonary disease, unspecified	Diagnosis	ICD-10-CM
J44.1	Chronic obstructive pulmonary disease with (acute) exacerbation	Diagnosis	ICD-10-CM
J44.0	Chronic obstructive pulmonary disease with acute lower respiratory infection	Diagnosis	ICD-10-CM
J43.9	Emphysema, unspecified	Diagnosis	ICD-10-CM
J41.8	Mixed simple and mucopurulent chronic bronchitis	Diagnosis	ICD-10-CM
J41.1	Mucopurulent chronic bronchitis	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
J43.8	Other emphysema	Diagnosis	ICD-10-CM
J43.1	Panlobular emphysema	Diagnosis	ICD-10-CM
J41.0	Simple chronic bronchitis	Diagnosis	ICD-10-CM
J43.0	Unilateral pulmonary emphysema [MacLeod's syndrome]	Diagnosis	ICD-10-CM
J42	Unspecified chronic bronchitis	Diagnosis	ICD-10-CM
Colorectal Cancer			
230.3	Carcinoma in situ of colon	Diagnosis	ICD-09-CM
230.4	Carcinoma in situ of rectum	Diagnosis	ICD-09-CM
153.8	Malignant neoplasm of other specified sites of large intestine	Diagnosis	ICD-09-CM
153.5	Malignant neoplasm of appendix	Diagnosis	ICD-09-CM
153.6	Malignant neoplasm of ascending colon	Diagnosis	ICD-09-CM
153.4	Malignant neoplasm of cecum	Diagnosis	ICD-09-CM
153.9	Malignant neoplasm of colon, unspecified site	Diagnosis	ICD-09-CM
153.2	Malignant neoplasm of descending colon	Diagnosis	ICD-09-CM
153.0	Malignant neoplasm of hepatic flexure	Diagnosis	ICD-09-CM
154.0	Malignant neoplasm of rectosigmoid junction	Diagnosis	ICD-09-CM
154.1	Malignant neoplasm of rectum	Diagnosis	ICD-09-CM
153.3	Malignant neoplasm of sigmoid colon	Diagnosis	ICD-09-CM
153.7	Malignant neoplasm of splenic flexure	Diagnosis	ICD-09-CM
153.1	Malignant neoplasm of transverse colon	Diagnosis	ICD-09-CM
V10.06	Personal history of malignant neoplasm of rectum, rectosigmoid junction, and anus	Diagnosis	ICD-09-CM
V10.05	Personal history of malignant neoplasm of large intestine	Diagnosis	ICD-09-CM
D01.0	Carcinoma in situ of colon	Diagnosis	ICD-10-CM
D01.1	Carcinoma in situ of rectosigmoid junction	Diagnosis	ICD-10-CM
D01.2	Carcinoma in situ of rectum	Diagnosis	ICD-10-CM
C18.1	Malignant neoplasm of appendix	Diagnosis	ICD-10-CM
C18.2	Malignant neoplasm of ascending colon	Diagnosis	ICD-10-CM
C18.0	Malignant neoplasm of cecum	Diagnosis	ICD-10-CM
C18.9	Malignant neoplasm of colon, unspecified	Diagnosis	ICD-10-CM
C18.6	Malignant neoplasm of descending colon	Diagnosis	ICD-10-CM
C18.3	Malignant neoplasm of hepatic flexure	Diagnosis	ICD-10-CM
C18.8	Malignant neoplasm of overlapping sites of colon	Diagnosis	ICD-10-CM
C19	Malignant neoplasm of rectosigmoid junction	Diagnosis	ICD-10-CM
C20	Malignant neoplasm of rectum	Diagnosis	ICD-10-CM
C18.7	Malignant neoplasm of sigmoid colon	Diagnosis	ICD-10-CM
C18.5	Malignant neoplasm of splenic flexure	Diagnosis	ICD-10-CM
C18.4	Malignant neoplasm of transverse colon	Diagnosis	ICD-10-CM
Z85.040	Personal history of malignant carcinoid tumor of rectum	Diagnosis	ICD-10-CM
Z85.048	Personal history of other malignant neoplasm of rectum, rectosigmoid junction, and anus	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
Z85.038	Personal history of other malignant neoplasm of large intestine	Diagnosis	ICD-10-CM
Depression			
296.56	Bipolar I disorder, most recent episode (or current) depressed, in full remission	Diagnosis	ICD-09-CM
296.66	Bipolar I disorder, most recent episode (or current) mixed, in full remission	Diagnosis	ICD-09-CM
296.65	Bipolar I disorder, most recent episode (or current) mixed, in partial or unspecified remission	Diagnosis	ICD-09-CM
296.53	Bipolar I disorder, most recent episode (or current) depressed, severe, without mention of psychotic behavior	Diagnosis	ICD-09-CM
296.55	Bipolar I disorder, most recent episode (or current) depressed, in partial or unspecified remission	Diagnosis	ICD-09-CM
296.54	Bipolar I disorder, most recent episode (or current) depressed, severe, specified as with psychotic behavior	Diagnosis	ICD-09-CM
296.63	Bipolar I disorder, most recent episode (or current) mixed, severe, without mention of psychotic behavior	Diagnosis	ICD-09-CM
296.64	Bipolar I disorder, most recent episode (or current) mixed, severe, specified as with psychotic behavior	Diagnosis	ICD-09-CM
296.51	Bipolar I disorder, most recent episode (or current) depressed, mild	Diagnosis	ICD-09-CM
296.52	Bipolar I disorder, most recent episode (or current) depressed, moderate	Diagnosis	ICD-09-CM
296.62	Bipolar I disorder, most recent episode (or current) mixed, moderate	Diagnosis	ICD-09-CM
296.61	Bipolar I disorder, most recent episode (or current) mixed, mild	Diagnosis	ICD-09-CM
296.60	Bipolar I disorder, most recent episode (or current) mixed, unspecified	Diagnosis	ICD-09-CM
311	Depressive disorder, not elsewhere classified	Diagnosis	ICD-09-CM
298.0	Depressive type psychosis	Diagnosis	ICD-09-CM
300.4	Dysthymic disorder	Diagnosis	ICD-09-CM
296.24	Major depressive disorder, single episode, severe, specified as with psychotic behavior	Diagnosis	ICD-09-CM
296.23	Major depressive disorder, single episode, severe, without mention of psychotic behavior	Diagnosis	ICD-09-CM
296.35	Major depressive disorder, recurrent episode, in partial or unspecified remission	Diagnosis	ICD-09-CM
296.34	Major depressive disorder, recurrent episode, severe, specified as with psychotic behavior	Diagnosis	ICD-09-CM
296.33	Major depressive disorder, recurrent episode, severe, without mention of psychotic behavior	Diagnosis	ICD-09-CM
296.25	Major depressive disorder, single episode, in partial or unspecified remission	Diagnosis	ICD-09-CM
296.31	Major depressive disorder, recurrent episode, mild	Diagnosis	ICD-09-CM
296.21	Major depressive disorder, single episode, mild	Diagnosis	ICD-09-CM
296.20	Major depressive disorder, single episode, unspecified	Diagnosis	ICD-09-CM
296.36	Major depressive disorder, recurrent episode, in full remission	Diagnosis	ICD-09-CM
296.32	Major depressive disorder, recurrent episode, moderate	Diagnosis	ICD-09-CM
296.30	Major depressive disorder, recurrent episode, unspecified	Diagnosis	ICD-09-CM

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

Code	Description	Code Category	Code Type
296.26	Major depressive disorder, single episode in full remission	Diagnosis	ICD-09-CM
296.22	Major depressive disorder, single episode, moderate	Diagnosis	ICD-09-CM
296.89	Other and unspecified bipolar disorders	Diagnosis	ICD-09-CM
309.1	Prolonged depressive reaction as adjustment reaction	Diagnosis	ICD-09-CM
F43.23	Adjustment disorder with mixed anxiety and depressed mood	Diagnosis	ICD-10-CM
F43.21	Adjustment disorder with depressed mood	Diagnosis	ICD-10-CM
F31.4	Bipolar disorder, current episode depressed, severe, without psychotic features	Diagnosis	ICD-10-CM
F31.5	Bipolar disorder, current episode depressed, severe, with psychotic features	Diagnosis	ICD-10-CM
F31.63	Bipolar disorder, current episode mixed, severe, without psychotic features	Diagnosis	ICD-10-CM
F31.64	Bipolar disorder, current episode mixed, severe, with psychotic features	Diagnosis	ICD-10-CM
F31.31	Bipolar disorder, current episode depressed, mild	Diagnosis	ICD-10-CM
F31.32	Bipolar disorder, current episode depressed, moderate	Diagnosis	ICD-10-CM
F31.30	Bipolar disorder, current episode depressed, mild or moderate severity, unspecified	Diagnosis	ICD-10-CM
F31.61	Bipolar disorder, current episode mixed, mild	Diagnosis	ICD-10-CM
F31.62	Bipolar disorder, current episode mixed, moderate	Diagnosis	ICD-10-CM
F31.60	Bipolar disorder, current episode mixed, unspecified	Diagnosis	ICD-10-CM
F31.76	Bipolar disorder, in full remission, most recent episode depressed	Diagnosis	ICD-10-CM
F31.78	Bipolar disorder, in full remission, most recent episode mixed	Diagnosis	ICD-10-CM
F31.75	Bipolar disorder, in partial remission, most recent episode depressed	Diagnosis	ICD-10-CM
F31.77	Bipolar disorder, in partial remission, most recent episode mixed	Diagnosis	ICD-10-CM
F31.81	Bipolar II disorder	Diagnosis	ICD-10-CM
F34.1	Dysthymic disorder	Diagnosis	ICD-10-CM
F33.2	Major depressive disorder, recurrent severe without psychotic features	Diagnosis	ICD-10-CM
F33.3	Major depressive disorder, recurrent, severe with psychotic symptoms	Diagnosis	ICD-10-CM
F32.2	Major depressive disorder, single episode, severe without psychotic features	Diagnosis	ICD-10-CM
F32.3	Major depressive disorder, single episode, severe with psychotic features	Diagnosis	ICD-10-CM
F33.42	Major depressive disorder, recurrent, in full remission	Diagnosis	ICD-10-CM
F33.41	Major depressive disorder, recurrent, in partial remission	Diagnosis	ICD-10-CM
F33.40	Major depressive disorder, recurrent, in remission, unspecified	Diagnosis	ICD-10-CM
F32.5	Major depressive disorder, single episode, in full remission	Diagnosis	ICD-10-CM
F32.4	Major depressive disorder, single episode, in partial remission	Diagnosis	ICD-10-CM
F33.9	Major depressive disorder, recurrent, unspecified	Diagnosis	ICD-10-CM
F33.0	Major depressive disorder, recurrent, mild	Diagnosis	ICD-10-CM
F33.1	Major depressive disorder, recurrent, moderate	Diagnosis	ICD-10-CM
F32.0	Major depressive disorder, single episode, mild	Diagnosis	ICD-10-CM
F32.1	Major depressive disorder, single episode, moderate	Diagnosis	ICD-10-CM
F32.9	Major depressive disorder, single episode, unspecified	Diagnosis	ICD-10-CM
F33.8	Other recurrent depressive disorders	Diagnosis	ICD-10-CM
Diabetes			
362.01	Background diabetic retinopathy	Diagnosis	ICD-09-CM

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

Code	Description	Code Category	Code Type
250.23	Diabetes with hyperosmolarity, type I [juvenile type], uncontrolled	Diagnosis	ICD-09-CM
250.21	Diabetes with hyperosmolarity, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-09-CM
250.20	Diabetes with hyperosmolarity, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-09-CM
250.22	Diabetes with hyperosmolarity, type II or unspecified type, uncontrolled	Diagnosis	ICD-09-CM
250.11	Diabetes with ketoacidosis, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-09-CM
250.10	Diabetes with ketoacidosis, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-09-CM
250.63	Diabetes with neurological manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-09-CM
250.61	Diabetes with neurological manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-09-CM
250.60	Diabetes with neurological manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-09-CM
250.62	Diabetes with neurological manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-09-CM
250.01	Diabetes mellitus without mention of complication, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-09-CM
250.00	Diabetes mellitus without mention of complication, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-09-CM
250.03	Diabetes mellitus without mention of complication, type I [juvenile type], uncontrolled	Diagnosis	ICD-09-CM
250.02	Diabetes mellitus without mention of complication, type II or unspecified type, uncontrolled	Diagnosis	ICD-09-CM
250.53	Diabetes with ophthalmic manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-09-CM
250.51	Diabetes with ophthalmic manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-09-CM
250.50	Diabetes with ophthalmic manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-09-CM
250.52	Diabetes with ophthalmic manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-09-CM
250.31	Diabetes with other coma, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-09-CM
250.30	Diabetes with other coma, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-09-CM
250.83	Diabetes with other specified manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-09-CM
250.81	Diabetes with other specified manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-09-CM
250.80	Diabetes with other specified manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-09-CM

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

Code	Description	Code Category	Code Type
250.82	Diabetes with other specified manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-09-CM
250.73	Diabetes with peripheral circulatory disorders, type I [juvenile type], uncontrolled	Diagnosis	ICD-09-CM
250.71	Diabetes with peripheral circulatory disorders, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-09-CM
250.70	Diabetes with peripheral circulatory disorders, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-09-CM
250.72	Diabetes with peripheral circulatory disorders, type II or unspecified type, uncontrolled	Diagnosis	ICD-09-CM
250.43	Diabetes with renal manifestations, type I [juvenile type], uncontrolled	Diagnosis	ICD-09-CM
250.41	Diabetes with renal manifestations, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-09-CM
250.40	Diabetes with renal manifestations, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-09-CM
250.42	Diabetes with renal manifestations, type II or unspecified type, uncontrolled	Diagnosis	ICD-09-CM
250.91	Diabetes with unspecified complication, type I [juvenile type], not stated as uncontrolled	Diagnosis	ICD-09-CM
250.90	Diabetes with unspecified complication, type II or unspecified type, not stated as uncontrolled	Diagnosis	ICD-09-CM
250.93	Diabetes with unspecified complication, type I [juvenile type], uncontrolled	Diagnosis	ICD-09-CM
250.92	Diabetes with unspecified complication, type II or unspecified type, uncontrolled	Diagnosis	ICD-09-CM
250.13	Diabetes with ketoacidosis, type I [juvenile type], uncontrolled	Diagnosis	ICD-09-CM
250.12	Diabetes with ketoacidosis, type II or unspecified type, uncontrolled	Diagnosis	ICD-09-CM
250.33	Diabetes with other coma, type I [juvenile type], uncontrolled	Diagnosis	ICD-09-CM
250.32	Diabetes with other coma, type II or unspecified type, uncontrolled	Diagnosis	ICD-09-CM
366.41	Diabetic cataract	Diagnosis	ICD-09-CM
362.04	Mild nonproliferative diabetic retinopathy	Diagnosis	ICD-09-CM
362.05	Moderate nonproliferative diabetic retinopathy	Diagnosis	ICD-09-CM
362.03	Nonproliferative diabetic retinopathy NOS	Diagnosis	ICD-09-CM
357.2	Polyneuropathy in diabetes	Diagnosis	ICD-09-CM
362.02	Proliferative diabetic retinopathy	Diagnosis	ICD-09-CM
249.60	Secondary diabetes mellitus with neurological manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-09-CM
249.50	Secondary diabetes mellitus with ophthalmic manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-09-CM
249.20	Secondary diabetes mellitus with hyperosmolarity, not stated as uncontrolled, or unspecified	Diagnosis	ICD-09-CM
249.10	Secondary diabetes mellitus with ketoacidosis, not stated as uncontrolled, or unspecified	Diagnosis	ICD-09-CM

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

Code	Description	Code Category	Code Type
249.61	Secondary diabetes mellitus with neurological manifestations, uncontrolled	Diagnosis	ICD-09-CM
249.00	Secondary diabetes mellitus without mention of complication, not stated as uncontrolled, or unspecified	Diagnosis	ICD-09-CM
249.01	Secondary diabetes mellitus without mention of complication, uncontrolled	Diagnosis	ICD-09-CM
249.51	Secondary diabetes mellitus with ophthalmic manifestations, uncontrolled	Diagnosis	ICD-09-CM
249.80	Secondary diabetes mellitus with other specified manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-09-CM
249.81	Secondary diabetes mellitus with other specified manifestations, uncontrolled	Diagnosis	ICD-09-CM
249.30	Secondary diabetes mellitus with other coma, not stated as uncontrolled, or unspecified	Diagnosis	ICD-09-CM
249.70	Secondary diabetes mellitus with peripheral circulatory disorders, not stated as uncontrolled, or unspecified	Diagnosis	ICD-09-CM
249.71	Secondary diabetes mellitus with peripheral circulatory disorders, uncontrolled	Diagnosis	ICD-09-CM
249.40	Secondary diabetes mellitus with renal manifestations, not stated as uncontrolled, or unspecified	Diagnosis	ICD-09-CM
249.41	Secondary diabetes mellitus with renal manifestations, uncontrolled	Diagnosis	ICD-09-CM
249.90	Secondary diabetes mellitus with unspecified complication, not stated as uncontrolled, or unspecified	Diagnosis	ICD-09-CM
249.91	Secondary diabetes mellitus with unspecified complication, uncontrolled	Diagnosis	ICD-09-CM
249.21	Secondary diabetes mellitus with hyperosmolarity, uncontrolled	Diagnosis	ICD-09-CM
249.11	Secondary diabetes mellitus with ketoacidosis, uncontrolled	Diagnosis	ICD-09-CM
249.31	Secondary diabetes mellitus with other coma, uncontrolled	Diagnosis	ICD-09-CM
362.06	Severe nonproliferative diabetic retinopathy	Diagnosis	ICD-09-CM
E08.44	Diabetes mellitus due to underlying condition with diabetic amyotrophy	Diagnosis	ICD-10-CM
E08.620	Diabetes mellitus due to underlying condition with diabetic dermatitis	Diagnosis	ICD-10-CM
E08.638	Diabetes mellitus due to underlying condition with other oral complications	Diagnosis	ICD-10-CM
E08.628	Diabetes mellitus due to underlying condition with other skin complications	Diagnosis	ICD-10-CM
E08.622	Diabetes mellitus due to underlying condition with other skin ulcer	Diagnosis	ICD-10-CM
E08.630	Diabetes mellitus due to underlying condition with periodontal disease	Diagnosis	ICD-10-CM
E08.3219	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.3293	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3399	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.3543	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E08.3541	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
E08.3542	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E08.3513	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3511	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E08.3512	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E08.3499	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.3299	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.3591	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E08.3592	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E08.37X9	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM
E08.3549	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	Diagnosis	ICD-10-CM
E08.3599	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.3593	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3393	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E08.621	Diabetes mellitus due to underlying condition with foot ulcer	Diagnosis	ICD-10-CM
E08.3213	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3211	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E08.3212	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E08.3291	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E08.3292	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E08.3313	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
E08.3312	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E08.3311	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E08.3391	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E08.3392	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E08.3413	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E08.3411	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E08.3412	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E08.3553	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E08.3552	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E08.3551	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E08.3559	Diabetes mellitus due to underlying condition with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM
E08.3491	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E08.3492	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E08.3493	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E08.9	Diabetes mellitus due to underlying condition without complications	Diagnosis	ICD-10-CM
E08.3519	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.37X1	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E08.37X2	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E08.3319	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.3419	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E08.37X3	Diabetes mellitus due to underlying condition with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
E08.359	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E08.610	Diabetes mellitus due to underlying condition with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E08.39	Diabetes mellitus due to underlying condition with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E08.618	Diabetes mellitus due to underlying condition with other diabetic arthropathy	Diagnosis	ICD-10-CM
E08.29	Diabetes mellitus due to underlying condition with other diabetic kidney complication	Diagnosis	ICD-10-CM
E08.641	Diabetes mellitus due to underlying condition with hypoglycemia with coma	Diagnosis	ICD-10-CM
E08.8	Diabetes mellitus due to underlying condition with unspecified complications	Diagnosis	ICD-10-CM
E08.51	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E08.52	Diabetes mellitus due to underlying condition with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E08.321	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E08.3523	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E08.3521	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM
E08.3522	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E08.3531	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E08.3532	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E08.311	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E08.43	Diabetes mellitus due to underlying condition with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E08.22	Diabetes mellitus due to underlying condition with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E08.41	Diabetes mellitus due to underlying condition with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E08.21	Diabetes mellitus due to underlying condition with diabetic nephropathy	Diagnosis	ICD-10-CM
E08.42	Diabetes mellitus due to underlying condition with diabetic polyneuropathy	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
E08.01	Diabetes mellitus due to underlying condition with hyperosmolarity with coma	Diagnosis	ICD-10-CM
E08.649	Diabetes mellitus due to underlying condition with hypoglycemia without coma	Diagnosis	ICD-10-CM
E08.11	Diabetes mellitus due to underlying condition with ketoacidosis with coma	Diagnosis	ICD-10-CM
E08.59	Diabetes mellitus due to underlying condition with other circulatory complications	Diagnosis	ICD-10-CM
E08.49	Diabetes mellitus due to underlying condition with other diabetic neurological complication	Diagnosis	ICD-10-CM
E08.69	Diabetes mellitus due to underlying condition with other specified complication	Diagnosis	ICD-10-CM
E08.36	Diabetes mellitus due to underlying condition with diabetic cataract	Diagnosis	ICD-10-CM
E08.65	Diabetes mellitus due to underlying condition with hyperglycemia	Diagnosis	ICD-10-CM
E08.40	Diabetes mellitus due to underlying condition with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E08.3529	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E08.3533	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E08.3539	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E08.10	Diabetes mellitus due to underlying condition with ketoacidosis without coma	Diagnosis	ICD-10-CM
E08.331	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E08.341	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E08.329	Diabetes mellitus due to underlying condition with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E08.339	Diabetes mellitus due to underlying condition with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E08.351	Diabetes mellitus due to underlying condition with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E08.349	Diabetes mellitus due to underlying condition with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E08.319	Diabetes mellitus due to underlying condition with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
E08.00	Diabetes mellitus due to underlying condition with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	Diagnosis	ICD-10-CM
E09.3419	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.3291	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E09.3292	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E09.3319	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.3391	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E09.3392	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E09.3393	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3599	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.3559	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM
E09.3493	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3491	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E09.3492	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E09.3513	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3512	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E09.3511	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E09.3553	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E09.3551	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E09.3552	Drug or chemical induced diabetes mellitus with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E09.3529	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
E09.359	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.3213	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3211	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E09.3212	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E09.3313	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3311	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E09.3312	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E09.3413	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3411	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E09.3412	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E09.36	Drug or chemical induced diabetes mellitus with diabetic cataract	Diagnosis	ICD-10-CM
E09.65	Drug or chemical induced diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E09.638	Drug or chemical induced diabetes mellitus with other oral complications	Diagnosis	ICD-10-CM
E09.628	Drug or chemical induced diabetes mellitus with other skin complications	Diagnosis	ICD-10-CM
E09.622	Drug or chemical induced diabetes mellitus with other skin ulcer	Diagnosis	ICD-10-CM
E09.69	Drug or chemical induced diabetes mellitus with other specified complication	Diagnosis	ICD-10-CM
E09.630	Drug or chemical induced diabetes mellitus with periodontal disease	Diagnosis	ICD-10-CM
E09.3593	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3591	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E09.3592	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E09.621	Drug or chemical induced diabetes mellitus with foot ulcer	Diagnosis	ICD-10-CM
E09.8	Drug or chemical induced diabetes mellitus with unspecified complications	Diagnosis	ICD-10-CM
E09.37X9	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM
E09.44	Drug or chemical induced diabetes mellitus with neurological complications with diabetic amyotrophy	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
E09.3543	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E09.3542	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E09.3541	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM
E09.3549	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	Diagnosis	ICD-10-CM
E09.3523	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E09.3522	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E09.3521	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM
E09.351	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.22	Drug or chemical induced diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E09.610	Drug or chemical induced diabetes mellitus with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E09.01	Drug or chemical induced diabetes mellitus with hyperosmolarity with coma	Diagnosis	ICD-10-CM
E09.00	Drug or chemical induced diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	Diagnosis	ICD-10-CM
E09.331	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.339	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.39	Drug or chemical induced diabetes mellitus with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E09.618	Drug or chemical induced diabetes mellitus with other diabetic arthropathy	Diagnosis	ICD-10-CM
E09.349	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.319	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E09.311	Drug or chemical induced diabetes mellitus with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.9	Drug or chemical induced diabetes mellitus without complications	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
E09.3219	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.3299	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.3539	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E09.341	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.3499	Drug or chemical induced diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.620	Drug or chemical induced diabetes mellitus with diabetic dermatitis	Diagnosis	ICD-10-CM
E09.21	Drug or chemical induced diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E09.641	Drug or chemical induced diabetes mellitus with hypoglycemia with coma	Diagnosis	ICD-10-CM
E09.649	Drug or chemical induced diabetes mellitus with hypoglycemia without coma	Diagnosis	ICD-10-CM
E09.11	Drug or chemical induced diabetes mellitus with ketoacidosis with coma	Diagnosis	ICD-10-CM
E09.10	Drug or chemical induced diabetes mellitus with ketoacidosis without coma	Diagnosis	ICD-10-CM
E09.59	Drug or chemical induced diabetes mellitus with other circulatory complications	Diagnosis	ICD-10-CM
E09.29	Drug or chemical induced diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E09.37X3	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM
E09.37X1	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E09.37X2	Drug or chemical induced diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E09.3399	Drug or chemical induced diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E09.3293	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E09.3533	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E09.3531	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E09.3532	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E09.3519	Drug or chemical induced diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
E13.329	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.359	Other specified diabetes mellitus with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.351	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.349	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.311	Other specified diabetes mellitus with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.3539	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E13.3533	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E13.3531	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E13.3532	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E13.649	Other specified diabetes mellitus with hypoglycemia without coma	Diagnosis	ICD-10-CM
E13.22	Other specified diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E13.01	Other specified diabetes mellitus with hyperosmolarity with coma	Diagnosis	ICD-10-CM
E13.59	Other specified diabetes mellitus with other circulatory complications	Diagnosis	ICD-10-CM
E13.41	Other specified diabetes mellitus with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E13.21	Other specified diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E13.42	Other specified diabetes mellitus with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E13.44	Other specified diabetes mellitus with diabetic amyotrophy	Diagnosis	ICD-10-CM
E13.36	Other specified diabetes mellitus with diabetic cataract	Diagnosis	ICD-10-CM
E13.620	Other specified diabetes mellitus with diabetic dermatitis	Diagnosis	ICD-10-CM
E13.641	Other specified diabetes mellitus with hypoglycemia with coma	Diagnosis	ICD-10-CM
E13.11	Other specified diabetes mellitus with ketoacidosis with coma	Diagnosis	ICD-10-CM
E13.9	Other specified diabetes mellitus without complications	Diagnosis	ICD-10-CM
E13.618	Other specified diabetes mellitus with other diabetic arthropathy	Diagnosis	ICD-10-CM
E13.638	Other specified diabetes mellitus with other oral complications	Diagnosis	ICD-10-CM
E13.628	Other specified diabetes mellitus with other skin complications	Diagnosis	ICD-10-CM
E13.622	Other specified diabetes mellitus with other skin ulcer	Diagnosis	ICD-10-CM
E13.69	Other specified diabetes mellitus with other specified complication	Diagnosis	ICD-10-CM
E13.8	Other specified diabetes mellitus with unspecified complications	Diagnosis	ICD-10-CM
E13.65	Other specified diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E13.321	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
E13.339	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.341	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.51	Other specified diabetes mellitus with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E13.52	Other specified diabetes mellitus with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E13.43	Other specified diabetes mellitus with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E13.610	Other specified diabetes mellitus with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E13.00	Other specified diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	Diagnosis	ICD-10-CM
E13.29	Other specified diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E13.49	Other specified diabetes mellitus with other diabetic neurological complication	Diagnosis	ICD-10-CM
E13.39	Other specified diabetes mellitus with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E13.319	Other specified diabetes mellitus with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E13.630	Other specified diabetes mellitus with periodontal disease	Diagnosis	ICD-10-CM
E13.621	Other specified diabetes mellitus with foot ulcer	Diagnosis	ICD-10-CM
E13.3519	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.3299	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.3399	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.3543	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E13.3541	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM
E13.3542	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E13.3529	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E13.3523	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
E13.3521	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM
E13.3522	Other specified diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E13.3419	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.3499	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.3213	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3211	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E13.3212	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E13.3293	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3291	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E13.3292	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E13.3219	Other specified diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.3313	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3311	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E13.3312	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E13.3319	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E13.3393	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3391	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E13.3392	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E13.3513	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3511	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
E13.3512	Other specified diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E13.3413	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3411	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E13.3412	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E13.3559	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM
E13.3493	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E13.3491	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E13.3492	Other specified diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E13.331	Other specified diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E13.3549	Other specified diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	Diagnosis	ICD-10-CM
E13.40	Other specified diabetes mellitus with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E13.10	Other specified diabetes mellitus with ketoacidosis without coma	Diagnosis	ICD-10-CM
E13.3553	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E13.3551	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E13.3552	Other specified diabetes mellitus with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E09.43	Drug or chemical induced diabetes mellitus with neurological complications with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E09.51	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E09.321	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E09.40	Drug or chemical induced diabetes mellitus with neurological complications with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E09.49	Drug or chemical induced diabetes mellitus with neurological complications with other diabetic neurological complication	Diagnosis	ICD-10-CM
E09.41	Drug or chemical induced diabetes mellitus with neurological complications with diabetic mononeuropathy	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
E09.42	Drug or chemical induced diabetes mellitus with neurological complications with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E09.52	Drug or chemical induced diabetes mellitus with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E09.329	Drug or chemical induced diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.3299	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.3319	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.3499	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.37X9	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM
E10.3219	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.3213	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3211	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E10.3212	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E10.3293	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3291	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E10.3292	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E10.3313	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3311	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E10.3312	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E10.3399	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.3393	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3391	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
E10.3392	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E10.3519	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.3419	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E10.3413	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3411	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E10.3412	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E10.3493	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3491	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E10.3492	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E10.39	Type 1 diabetes mellitus with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E10.37X3	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM
E10.37X1	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E10.37X2	Type 1 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E10.3513	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E10.3511	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E10.3512	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E10.22	Type 1 diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E10.41	Type 1 diabetes mellitus with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E10.40	Type 1 diabetes mellitus with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM
E10.42	Type 1 diabetes mellitus with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E10.44	Type 1 diabetes mellitus with diabetic amyotrophy	Diagnosis	ICD-10-CM
E10.36	Type 1 diabetes mellitus with diabetic cataract	Diagnosis	ICD-10-CM
E10.620	Type 1 diabetes mellitus with diabetic dermatitis	Diagnosis	ICD-10-CM
E10.21	Type 1 diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E10.641	Type 1 diabetes mellitus with hypoglycemia with coma	Diagnosis	ICD-10-CM
E10.649	Type 1 diabetes mellitus with hypoglycemia without coma	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
E10.11	Type 1 diabetes mellitus with ketoacidosis with coma	Diagnosis	ICD-10-CM
E10.10	Type 1 diabetes mellitus with ketoacidosis without coma	Diagnosis	ICD-10-CM
E10.59	Type 1 diabetes mellitus with other circulatory complications	Diagnosis	ICD-10-CM
E10.618	Type 1 diabetes mellitus with other diabetic arthropathy	Diagnosis	ICD-10-CM
E10.29	Type 1 diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E10.638	Type 1 diabetes mellitus with other oral complications	Diagnosis	ICD-10-CM
E10.628	Type 1 diabetes mellitus with other skin complications	Diagnosis	ICD-10-CM
E10.69	Type 1 diabetes mellitus with other specified complication	Diagnosis	ICD-10-CM
E10.630	Type 1 diabetes mellitus with periodontal disease	Diagnosis	ICD-10-CM
E10.8	Type 1 diabetes mellitus with unspecified complications	Diagnosis	ICD-10-CM
E10.621	Type 1 diabetes mellitus with foot ulcer	Diagnosis	ICD-10-CM
E10.65	Type 1 diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E10.622	Type 1 diabetes mellitus with other skin ulcer	Diagnosis	ICD-10-CM
E10.9	Type 1 diabetes mellitus without complications	Diagnosis	ICD-10-CM
E10.329	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.52	Type 1 diabetes mellitus with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E10.51	Type 1 diabetes mellitus with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E10.43	Type 1 diabetes mellitus with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E10.610	Type 1 diabetes mellitus with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E10.321	Type 1 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.339	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.331	Type 1 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.49	Type 1 diabetes mellitus with other diabetic neurological complication	Diagnosis	ICD-10-CM
E10.351	Type 1 diabetes mellitus with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.349	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.341	Type 1 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.319	Type 1 diabetes mellitus with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E10.311	Type 1 diabetes mellitus with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E10.359	Type 1 diabetes mellitus with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
E11.3539	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E11.37X9	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, unspecified eye	Diagnosis	ICD-10-CM
E11.3219	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.3549	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, unspecified eye	Diagnosis	ICD-10-CM
E11.3529	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, unspecified eye	Diagnosis	ICD-10-CM
E11.3533	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, bilateral	Diagnosis	ICD-10-CM
E11.3531	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, right eye	Diagnosis	ICD-10-CM
E11.3532	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment not involving the macula, left eye	Diagnosis	ICD-10-CM
E11.01	Type 2 diabetes mellitus with hyperosmolarity with coma	Diagnosis	ICD-10-CM
E11.37X3	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, bilateral	Diagnosis	ICD-10-CM
E11.37X1	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, right eye	Diagnosis	ICD-10-CM
E11.37X2	Type 2 diabetes mellitus with diabetic macular edema, resolved following treatment, left eye	Diagnosis	ICD-10-CM
E11.3213	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3211	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E11.3212	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E11.3293	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3291	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E11.3292	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E11.3299	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.3319	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
E11.3313	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3311	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E11.3312	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E11.3393	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3391	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E11.3392	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E11.3399	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.39	Type 2 diabetes mellitus with other diabetic ophthalmic complication	Diagnosis	ICD-10-CM
E11.3543	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, bilateral	Diagnosis	ICD-10-CM
E11.3541	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, right eye	Diagnosis	ICD-10-CM
E11.3542	Type 2 diabetes mellitus with proliferative diabetic retinopathy with combined traction retinal detachment and rhegmatogenous retinal detachment, left eye	Diagnosis	ICD-10-CM
E11.3519	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.3513	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3511	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E11.3512	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E11.3523	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, bilateral	Diagnosis	ICD-10-CM
E11.3521	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, right eye	Diagnosis	ICD-10-CM
E11.3522	Type 2 diabetes mellitus with proliferative diabetic retinopathy with traction retinal detachment involving the macula, left eye	Diagnosis	ICD-10-CM
E11.3599	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
E11.3593	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3591	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E11.3592	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E11.3553	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, bilateral	Diagnosis	ICD-10-CM
E11.3552	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, left eye	Diagnosis	ICD-10-CM
E11.3551	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, right eye	Diagnosis	ICD-10-CM
E11.3559	Type 2 diabetes mellitus with stable proliferative diabetic retinopathy, unspecified eye	Diagnosis	ICD-10-CM
E11.3419	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.3413	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3411	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, right eye	Diagnosis	ICD-10-CM
E11.3412	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema, left eye	Diagnosis	ICD-10-CM
E11.3493	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, bilateral	Diagnosis	ICD-10-CM
E11.3491	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, right eye	Diagnosis	ICD-10-CM
E11.3492	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, left eye	Diagnosis	ICD-10-CM
E11.3499	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema, unspecified eye	Diagnosis	ICD-10-CM
E11.22	Type 2 diabetes mellitus with diabetic chronic kidney disease	Diagnosis	ICD-10-CM
E11.41	Type 2 diabetes mellitus with diabetic mononeuropathy	Diagnosis	ICD-10-CM
E11.42	Type 2 diabetes mellitus with diabetic polyneuropathy	Diagnosis	ICD-10-CM
E11.44	Type 2 diabetes mellitus with diabetic amyotrophy	Diagnosis	ICD-10-CM
E11.620	Type 2 diabetes mellitus with diabetic dermatitis	Diagnosis	ICD-10-CM
E11.21	Type 2 diabetes mellitus with diabetic nephropathy	Diagnosis	ICD-10-CM
E11.641	Type 2 diabetes mellitus with hypoglycemia with coma	Diagnosis	ICD-10-CM
E11.649	Type 2 diabetes mellitus with hypoglycemia without coma	Diagnosis	ICD-10-CM
E11.10	Type 2 diabetes mellitus with ketoacidosis without coma	Diagnosis	ICD-10-CM
E11.59	Type 2 diabetes mellitus with other circulatory complications	Diagnosis	ICD-10-CM
E11.618	Type 2 diabetes mellitus with other diabetic arthropathy	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
E11.29	Type 2 diabetes mellitus with other diabetic kidney complication	Diagnosis	ICD-10-CM
E11.49	Type 2 diabetes mellitus with other diabetic neurological complication	Diagnosis	ICD-10-CM
E11.638	Type 2 diabetes mellitus with other oral complications	Diagnosis	ICD-10-CM
E11.628	Type 2 diabetes mellitus with other skin complications	Diagnosis	ICD-10-CM
E11.69	Type 2 diabetes mellitus with other specified complication	Diagnosis	ICD-10-CM
E11.630	Type 2 diabetes mellitus with periodontal disease	Diagnosis	ICD-10-CM
E11.8	Type 2 diabetes mellitus with unspecified complications	Diagnosis	ICD-10-CM
E11.36	Type 2 diabetes mellitus with diabetic cataract	Diagnosis	ICD-10-CM
E11.621	Type 2 diabetes mellitus with foot ulcer	Diagnosis	ICD-10-CM
E11.65	Type 2 diabetes mellitus with hyperglycemia	Diagnosis	ICD-10-CM
E11.11	Type 2 diabetes mellitus with ketoacidosis with coma	Diagnosis	ICD-10-CM
E11.622	Type 2 diabetes mellitus with other skin ulcer	Diagnosis	ICD-10-CM
E11.9	Type 2 diabetes mellitus without complications	Diagnosis	ICD-10-CM
E11.359	Type 2 diabetes mellitus with proliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.52	Type 2 diabetes mellitus with diabetic peripheral angiopathy with gangrene	Diagnosis	ICD-10-CM
E11.51	Type 2 diabetes mellitus with diabetic peripheral angiopathy without gangrene	Diagnosis	ICD-10-CM
E11.43	Type 2 diabetes mellitus with diabetic autonomic (poly)neuropathy	Diagnosis	ICD-10-CM
E11.610	Type 2 diabetes mellitus with diabetic neuropathic arthropathy	Diagnosis	ICD-10-CM
E11.00	Type 2 diabetes mellitus with hyperosmolarity without nonketotic hyperglycemic-hyperosmolar coma (NKHHC)	Diagnosis	ICD-10-CM
E11.321	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E11.329	Type 2 diabetes mellitus with mild nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.331	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E11.339	Type 2 diabetes mellitus with moderate nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.351	Type 2 diabetes mellitus with proliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E11.349	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.341	Type 2 diabetes mellitus with severe nonproliferative diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E11.319	Type 2 diabetes mellitus with unspecified diabetic retinopathy without macular edema	Diagnosis	ICD-10-CM
E11.311	Type 2 diabetes mellitus with unspecified diabetic retinopathy with macular edema	Diagnosis	ICD-10-CM
E11.40	Type 2 diabetes mellitus with diabetic neuropathy, unspecified	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
Endometrial Cancer			
D07.0	Carcinoma in situ of endometrium	Diagnosis	ICD-10-CM
C54.9	Malignant neoplasm of corpus uteri, unspecified	Diagnosis	ICD-10-CM
C54.1	Malignant neoplasm of endometrium	Diagnosis	ICD-10-CM
C54.3	Malignant neoplasm of fundus uteri	Diagnosis	ICD-10-CM
C54.2	Malignant neoplasm of myometrium	Diagnosis	ICD-10-CM
C54.8	Malignant neoplasm of overlapping sites of corpus uteri	Diagnosis	ICD-10-CM
Z85.42	Personal history of malignant neoplasm of other parts of uterus	Diagnosis	ICD-10-CM
233.2	Carcinoma in situ of other and unspecified parts of uterus	Diagnosis	ICD-09-CM
182.0	Malignant neoplasm of corpus uteri, except isthmus	Diagnosis	ICD-09-CM
V10.42	Personal history of malignant neoplasm of other parts of uterus	Diagnosis	ICD-09-CM
Glaucoma			
365.22	Acute angle-closure glaucoma	Diagnosis	ICD-09-CM
365.83	Aqueous misdirection	Diagnosis	ICD-09-CM
365.01	Borderline glaucoma, open angle with borderline findings, low risk	Diagnosis	ICD-09-CM
365.02	Borderline glaucoma with anatomical narrow angle	Diagnosis	ICD-09-CM
365.04	Borderline glaucoma with ocular hypertension	Diagnosis	ICD-09-CM
365.03	Borderline glaucoma with steroid responders	Diagnosis	ICD-09-CM
365.23	Chronic angle-closure glaucoma	Diagnosis	ICD-09-CM
365.31	Corticosteroid-induced glaucoma, glaucomatous stage	Diagnosis	ICD-09-CM
365.32	Corticosteroid-induced glaucoma, residual stage	Diagnosis	ICD-09-CM
365.43	Glaucoma associated with other anterior segment anomalies	Diagnosis	ICD-09-CM
365.60	Glaucoma associated with unspecified ocular disorder	Diagnosis	ICD-09-CM
365.63	Glaucoma associated with vascular disorders of eye	Diagnosis	ICD-09-CM
365.42	Glaucoma associated with anomalies of iris	Diagnosis	ICD-09-CM
365.41	Glaucoma associated with chamber angle anomalies	Diagnosis	ICD-09-CM
365.62	Glaucoma associated with ocular inflammations	Diagnosis	ICD-09-CM
365.65	Glaucoma associated with ocular trauma	Diagnosis	ICD-09-CM
365.59	Glaucoma associated with other lens disorders	Diagnosis	ICD-09-CM
365.61	Glaucoma associated with pupillary block	Diagnosis	ICD-09-CM
365.64	Glaucoma associated with tumors or cysts	Diagnosis	ICD-09-CM
365.82	Glaucoma with increased episcleral venous pressure	Diagnosis	ICD-09-CM
377.14	Glaucomatous atrophy (cupping) of optic disc	Diagnosis	ICD-09-CM
365.81	Hypersecretion glaucoma	Diagnosis	ICD-09-CM
365.21	Intermittent angle-closure glaucoma	Diagnosis	ICD-09-CM
365.12	Low tension open-angle glaucoma	Diagnosis	ICD-09-CM
365.89	Other specified glaucoma	Diagnosis	ICD-09-CM
365.51	Phacolytic glaucoma	Diagnosis	ICD-09-CM
365.13	Pigmentary open-angle glaucoma	Diagnosis	ICD-09-CM
365.11	Primary open-angle glaucoma	Diagnosis	ICD-09-CM
365.52	Pseudoexfoliation glaucoma	Diagnosis	ICD-09-CM

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

Code	Description	Code Category	Code Type
365.24	Residual stage of angle-closure glaucoma	Diagnosis	ICD-09-CM
365.15	Residual stage of open angle glaucoma	Diagnosis	ICD-09-CM
362.85	Retinal nerve fiber bundle defects	Diagnosis	ICD-09-CM
365.9	Unspecified glaucoma	Diagnosis	ICD-09-CM
365.10	Unspecified open-angle glaucoma	Diagnosis	ICD-09-CM
365.00	Unspecified preglaucoma	Diagnosis	ICD-09-CM
365.20	Unspecified primary angle-closure glaucoma	Diagnosis	ICD-09-CM
H44.513	Absolute glaucoma, bilateral	Diagnosis	ICD-10-CM
H44.512	Absolute glaucoma, left eye	Diagnosis	ICD-10-CM
H44.511	Absolute glaucoma, right eye	Diagnosis	ICD-10-CM
H44.519	Absolute glaucoma, unspecified eye	Diagnosis	ICD-10-CM
H40.213	Acute angle-closure glaucoma, bilateral	Diagnosis	ICD-10-CM
H40.212	Acute angle-closure glaucoma, left eye	Diagnosis	ICD-10-CM
H40.211	Acute angle-closure glaucoma, right eye	Diagnosis	ICD-10-CM
H40.219	Acute angle-closure glaucoma, unspecified eye	Diagnosis	ICD-10-CM
H40.033	Anatomical narrow angle, bilateral	Diagnosis	ICD-10-CM
H40.032	Anatomical narrow angle, left eye	Diagnosis	ICD-10-CM
H40.031	Anatomical narrow angle, right eye	Diagnosis	ICD-10-CM
H40.039	Anatomical narrow angle, unspecified eye	Diagnosis	ICD-10-CM
H40.833	Aqueous misdirection, bilateral	Diagnosis	ICD-10-CM
H40.832	Aqueous misdirection, left eye	Diagnosis	ICD-10-CM
H40.831	Aqueous misdirection, right eye	Diagnosis	ICD-10-CM
H40.839	Aqueous misdirection, unspecified eye	Diagnosis	ICD-10-CM
H40.1431	Capsular glaucoma with pseudoexfoliation of lens, bilateral, mild stage	Diagnosis	ICD-10-CM
H40.1430	Capsular glaucoma with pseudoexfoliation of lens, bilateral, stage unspecified	Diagnosis	ICD-10-CM
H40.1424	Capsular glaucoma with pseudoexfoliation of lens, left eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.1413	Capsular glaucoma with pseudoexfoliation of lens, right eye, severe stage	Diagnosis	ICD-10-CM
H40.1494	Capsular glaucoma with pseudoexfoliation of lens, unspecified eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.1432	Capsular glaucoma with pseudoexfoliation of lens, bilateral, moderate stage	Diagnosis	ICD-10-CM
H40.1433	Capsular glaucoma with pseudoexfoliation of lens, bilateral, severe stage	Diagnosis	ICD-10-CM
H40.1434	Capsular glaucoma with pseudoexfoliation of lens, bilateral, indeterminate stage	Diagnosis	ICD-10-CM
H40.1422	Capsular glaucoma with pseudoexfoliation of lens, left eye, moderate stage	Diagnosis	ICD-10-CM
H40.1421	Capsular glaucoma with pseudoexfoliation of lens, left eye, mild stage	Diagnosis	ICD-10-CM
H40.1423	Capsular glaucoma with pseudoexfoliation of lens, left eye, severe stage	Diagnosis	ICD-10-CM
H40.1420	Capsular glaucoma with pseudoexfoliation of lens, left eye, stage unspecified	Diagnosis	ICD-10-CM
H40.1414	Capsular glaucoma with pseudoexfoliation of lens, right eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.1411	Capsular glaucoma with pseudoexfoliation of lens, right eye, mild stage	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
H40.1412	Capsular glaucoma with pseudoexfoliation of lens, right eye, moderate stage	Diagnosis	ICD-10-CM
H40.1410	Capsular glaucoma with pseudoexfoliation of lens, right eye, stage unspecified	Diagnosis	ICD-10-CM
H40.1491	Capsular glaucoma with pseudoexfoliation of lens, unspecified eye, mild stage	Diagnosis	ICD-10-CM
H40.1492	Capsular glaucoma with pseudoexfoliation of lens, unspecified eye, moderate stage	Diagnosis	ICD-10-CM
H40.1493	Capsular glaucoma with pseudoexfoliation of lens, unspecified eye, severe stage	Diagnosis	ICD-10-CM
H40.1490	Capsular glaucoma with pseudoexfoliation of lens, unspecified eye, stage unspecified	Diagnosis	ICD-10-CM
H40.2234	Chronic angle-closure glaucoma, bilateral, indeterminate stage	Diagnosis	ICD-10-CM
H40.2224	Chronic angle-closure glaucoma, left eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.2214	Chronic angle-closure glaucoma, right eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.2294	Chronic angle-closure glaucoma, unspecified eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.2232	Chronic angle-closure glaucoma, bilateral, moderate stage	Diagnosis	ICD-10-CM
H40.2231	Chronic angle-closure glaucoma, bilateral, mild stage	Diagnosis	ICD-10-CM
H40.2233	Chronic angle-closure glaucoma, bilateral, severe stage	Diagnosis	ICD-10-CM
H40.2222	Chronic angle-closure glaucoma, left eye, moderate stage	Diagnosis	ICD-10-CM
H40.2212	Chronic angle-closure glaucoma, right eye, moderate stage	Diagnosis	ICD-10-CM
H40.2292	Chronic angle-closure glaucoma, unspecified eye, moderate stage	Diagnosis	ICD-10-CM
H40.2293	Chronic angle-closure glaucoma, unspecified eye, severe stage	Diagnosis	ICD-10-CM
H40.2230	Chronic angle-closure glaucoma, bilateral, stage unspecified	Diagnosis	ICD-10-CM
H40.2223	Chronic angle-closure glaucoma, left eye, severe stage	Diagnosis	ICD-10-CM
H40.2213	Chronic angle-closure glaucoma, right eye, severe stage	Diagnosis	ICD-10-CM
H40.2291	Chronic angle-closure glaucoma, unspecified eye, mild stage	Diagnosis	ICD-10-CM
H40.2221	Chronic angle-closure glaucoma, left eye, mild stage	Diagnosis	ICD-10-CM
H40.2220	Chronic angle-closure glaucoma, left eye, stage unspecified	Diagnosis	ICD-10-CM
H40.2211	Chronic angle-closure glaucoma, right eye, mild stage	Diagnosis	ICD-10-CM
H40.2210	Chronic angle-closure glaucoma, right eye, stage unspecified	Diagnosis	ICD-10-CM
H40.2290	Chronic angle-closure glaucoma, unspecified eye, stage unspecified	Diagnosis	ICD-10-CM
Q15.0	Congenital glaucoma	Diagnosis	ICD-10-CM
H40.42X4	Glaucoma secondary to eye inflammation, left eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.41X4	Glaucoma secondary to eye inflammation, right eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.40X4	Glaucoma secondary to eye inflammation, unspecified eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.43X1	Glaucoma secondary to eye inflammation, bilateral, mild stage	Diagnosis	ICD-10-CM
H40.43X0	Glaucoma secondary to eye inflammation, bilateral, stage unspecified	Diagnosis	ICD-10-CM
H40.42X2	Glaucoma secondary to eye inflammation, left eye, moderate stage	Diagnosis	ICD-10-CM
H40.42X3	Glaucoma secondary to eye inflammation, left eye, severe stage	Diagnosis	ICD-10-CM
H40.41X2	Glaucoma secondary to eye inflammation, right eye, moderate stage	Diagnosis	ICD-10-CM
H40.41X3	Glaucoma secondary to eye inflammation, right eye, severe stage	Diagnosis	ICD-10-CM
H40.40X3	Glaucoma secondary to eye inflammation, unspecified eye, severe stage	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
H40.31X4	Glaucoma secondary to eye trauma, right eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.30X4	Glaucoma secondary to eye trauma, unspecified eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.53X2	Glaucoma secondary to other eye disorders, bilateral, moderate stage	Diagnosis	ICD-10-CM
H40.52X4	Glaucoma secondary to other eye disorders, left eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.51X4	Glaucoma secondary to other eye disorders, right eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.50X4	Glaucoma secondary to other eye disorders, unspecified eye, indeterminate stage	Diagnosis	ICD-10-CM
H42	Glaucoma in diseases classified elsewhere	Diagnosis	ICD-10-CM
H40.63X4	Glaucoma secondary to drugs, bilateral, indeterminate stage	Diagnosis	ICD-10-CM
H40.63X2	Glaucoma secondary to drugs, bilateral, moderate stage	Diagnosis	ICD-10-CM
H40.63X0	Glaucoma secondary to drugs, bilateral, stage unspecified	Diagnosis	ICD-10-CM
H40.62X4	Glaucoma secondary to drugs, left eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.62X0	Glaucoma secondary to drugs, left eye, stage unspecified	Diagnosis	ICD-10-CM
H40.61X4	Glaucoma secondary to drugs, right eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.61X2	Glaucoma secondary to drugs, right eye, moderate stage	Diagnosis	ICD-10-CM
H40.61X0	Glaucoma secondary to drugs, right eye, stage unspecified	Diagnosis	ICD-10-CM
H40.60X4	Glaucoma secondary to drugs, unspecified eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.60X2	Glaucoma secondary to drugs, unspecified eye, moderate stage	Diagnosis	ICD-10-CM
H40.60X0	Glaucoma secondary to drugs, unspecified eye, stage unspecified	Diagnosis	ICD-10-CM
H40.60X1	Glaucoma secondary to drugs, unspecified eye, mild stage	Diagnosis	ICD-10-CM
H40.60X3	Glaucoma secondary to drugs, unspecified eye, severe stage	Diagnosis	ICD-10-CM
H40.43X4	Glaucoma secondary to eye inflammation, bilateral, indeterminate stage	Diagnosis	ICD-10-CM
H40.43X2	Glaucoma secondary to eye inflammation, bilateral, moderate stage	Diagnosis	ICD-10-CM
H40.43X3	Glaucoma secondary to eye inflammation, bilateral, severe stage	Diagnosis	ICD-10-CM
H40.40X2	Glaucoma secondary to eye inflammation, unspecified eye, moderate stage	Diagnosis	ICD-10-CM
H40.42X1	Glaucoma secondary to eye inflammation, left eye, mild stage	Diagnosis	ICD-10-CM
H40.42X0	Glaucoma secondary to eye inflammation, left eye, stage unspecified	Diagnosis	ICD-10-CM
H40.41X1	Glaucoma secondary to eye inflammation, right eye, mild stage	Diagnosis	ICD-10-CM
H40.41X0	Glaucoma secondary to eye inflammation, right eye, stage unspecified	Diagnosis	ICD-10-CM
H40.40X1	Glaucoma secondary to eye inflammation, unspecified eye, mild stage	Diagnosis	ICD-10-CM
H40.40X0	Glaucoma secondary to eye inflammation, unspecified eye, stage unspecified	Diagnosis	ICD-10-CM
H40.33X4	Glaucoma secondary to eye trauma, bilateral, indeterminate stage	Diagnosis	ICD-10-CM
H40.33X1	Glaucoma secondary to eye trauma, bilateral, mild stage	Diagnosis	ICD-10-CM
H40.33X2	Glaucoma secondary to eye trauma, bilateral, moderate stage	Diagnosis	ICD-10-CM
H40.33X3	Glaucoma secondary to eye trauma, bilateral, severe stage	Diagnosis	ICD-10-CM
H40.33X0	Glaucoma secondary to eye trauma, bilateral, stage unspecified	Diagnosis	ICD-10-CM
H40.32X1	Glaucoma secondary to eye trauma, left eye, mild stage	Diagnosis	ICD-10-CM
H40.32X2	Glaucoma secondary to eye trauma, left eye, moderate stage	Diagnosis	ICD-10-CM
H40.32X3	Glaucoma secondary to eye trauma, left eye, severe stage	Diagnosis	ICD-10-CM
H40.32X0	Glaucoma secondary to eye trauma, left eye, stage unspecified	Diagnosis	ICD-10-CM
H40.31X1	Glaucoma secondary to eye trauma, right eye, mild stage	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
H40.31X2	Glaucoma secondary to eye trauma, right eye, moderate stage	Diagnosis	ICD-10-CM
H40.31X3	Glaucoma secondary to eye trauma, right eye, severe stage	Diagnosis	ICD-10-CM
H40.31X0	Glaucoma secondary to eye trauma, right eye, stage unspecified	Diagnosis	ICD-10-CM
H40.30X1	Glaucoma secondary to eye trauma, unspecified eye, mild stage	Diagnosis	ICD-10-CM
H40.30X2	Glaucoma secondary to eye trauma, unspecified eye, moderate stage	Diagnosis	ICD-10-CM
H40.30X3	Glaucoma secondary to eye trauma, unspecified eye, severe stage	Diagnosis	ICD-10-CM
H40.30X0	Glaucoma secondary to eye trauma, unspecified eye, stage unspecified	Diagnosis	ICD-10-CM
H40.53X4	Glaucoma secondary to other eye disorders, bilateral, indeterminate stage	Diagnosis	ICD-10-CM
H40.53X1	Glaucoma secondary to other eye disorders, bilateral, mild stage	Diagnosis	ICD-10-CM
H40.53X3	Glaucoma secondary to other eye disorders, bilateral, severe stage	Diagnosis	ICD-10-CM
H40.53X0	Glaucoma secondary to other eye disorders, bilateral, stage unspecified	Diagnosis	ICD-10-CM
H40.52X2	Glaucoma secondary to other eye disorders, left eye, moderate stage	Diagnosis	ICD-10-CM
H40.52X3	Glaucoma secondary to other eye disorders, left eye, severe stage	Diagnosis	ICD-10-CM
H40.51X2	Glaucoma secondary to other eye disorders, right eye, moderate stage	Diagnosis	ICD-10-CM
H40.51X3	Glaucoma secondary to other eye disorders, right eye, severe stage	Diagnosis	ICD-10-CM
H40.50X1	Glaucoma secondary to other eye disorders, unspecified eye, mild stage	Diagnosis	ICD-10-CM
H40.50X2	Glaucoma secondary to other eye disorders, unspecified eye, moderate stage	Diagnosis	ICD-10-CM
H40.50X3	Glaucoma secondary to other eye disorders, unspecified eye, severe stage	Diagnosis	ICD-10-CM
H40.50X0	Glaucoma secondary to other eye disorders, unspecified eye, stage unspecified	Diagnosis	ICD-10-CM
H40.52X1	Glaucoma secondary to other eye disorders, left eye, mild stage	Diagnosis	ICD-10-CM
H40.52X0	Glaucoma secondary to other eye disorders, left eye, stage unspecified	Diagnosis	ICD-10-CM
H40.51X1	Glaucoma secondary to other eye disorders, right eye, mild stage	Diagnosis	ICD-10-CM
H40.51X0	Glaucoma secondary to other eye disorders, right eye, stage unspecified	Diagnosis	ICD-10-CM
H40.63X3	Glaucoma secondary to drugs, bilateral, severe stage	Diagnosis	ICD-10-CM
H40.62X2	Glaucoma secondary to drugs, left eye, moderate stage	Diagnosis	ICD-10-CM
H40.62X3	Glaucoma secondary to drugs, left eye, severe stage	Diagnosis	ICD-10-CM
H40.61X3	Glaucoma secondary to drugs, right eye, severe stage	Diagnosis	ICD-10-CM
H40.63X1	Glaucoma secondary to drugs, bilateral, mild stage	Diagnosis	ICD-10-CM
H40.62X1	Glaucoma secondary to drugs, left eye, mild stage	Diagnosis	ICD-10-CM
H40.61X1	Glaucoma secondary to drugs, right eye, mild stage	Diagnosis	ICD-10-CM
H40.813	Glaucoma with increased episcleral venous pressure, bilateral	Diagnosis	ICD-10-CM
H40.812	Glaucoma with increased episcleral venous pressure, left eye	Diagnosis	ICD-10-CM
H40.811	Glaucoma with increased episcleral venous pressure, right eye	Diagnosis	ICD-10-CM
H40.819	Glaucoma with increased episcleral venous pressure, unspecified eye	Diagnosis	ICD-10-CM
H47.233	Glaucomatous optic atrophy, bilateral	Diagnosis	ICD-10-CM
H47.232	Glaucomatous optic atrophy, left eye	Diagnosis	ICD-10-CM
H47.231	Glaucomatous optic atrophy, right eye	Diagnosis	ICD-10-CM
H47.239	Glaucomatous optic atrophy, unspecified eye	Diagnosis	ICD-10-CM
H40.823	Hypersecretion glaucoma, bilateral	Diagnosis	ICD-10-CM
H40.822	Hypersecretion glaucoma, left eye	Diagnosis	ICD-10-CM
H40.821	Hypersecretion glaucoma, right eye	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
H40.829	Hypersecretion glaucoma, unspecified eye	Diagnosis	ICD-10-CM
H40.233	Intermittent angle-closure glaucoma, bilateral	Diagnosis	ICD-10-CM
H40.232	Intermittent angle-closure glaucoma, left eye	Diagnosis	ICD-10-CM
H40.231	Intermittent angle-closure glaucoma, right eye	Diagnosis	ICD-10-CM
H40.239	Intermittent angle-closure glaucoma, unspecified eye	Diagnosis	ICD-10-CM
H40.1234	Low-tension glaucoma, bilateral, indeterminate stage	Diagnosis	ICD-10-CM
H40.1230	Low-tension glaucoma, bilateral, stage unspecified	Diagnosis	ICD-10-CM
H40.1220	Low-tension glaucoma, left eye, stage unspecified	Diagnosis	ICD-10-CM
H40.1224	Low-tension glaucoma, left eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.1210	Low-tension glaucoma, right eye, stage unspecified	Diagnosis	ICD-10-CM
H40.1214	Low-tension glaucoma, right eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.1294	Low-tension glaucoma, unspecified eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.1292	Low-tension glaucoma, unspecified eye, moderate stage	Diagnosis	ICD-10-CM
H40.1293	Low-tension glaucoma, unspecified eye, severe stage	Diagnosis	ICD-10-CM
H40.1290	Low-tension glaucoma, unspecified eye, stage unspecified	Diagnosis	ICD-10-CM
H40.1291	Low-tension glaucoma, unspecified eye, mild stage	Diagnosis	ICD-10-CM
H40.1231	Low-tension glaucoma, bilateral, mild stage	Diagnosis	ICD-10-CM
H40.1232	Low-tension glaucoma, bilateral, moderate stage	Diagnosis	ICD-10-CM
H40.1233	Low-tension glaucoma, bilateral, severe stage	Diagnosis	ICD-10-CM
H40.1221	Low-tension glaucoma, left eye, mild stage	Diagnosis	ICD-10-CM
H40.1222	Low-tension glaucoma, left eye, moderate stage	Diagnosis	ICD-10-CM
H40.1223	Low-tension glaucoma, left eye, severe stage	Diagnosis	ICD-10-CM
H40.1211	Low-tension glaucoma, right eye, mild stage	Diagnosis	ICD-10-CM
H40.1212	Low-tension glaucoma, right eye, moderate stage	Diagnosis	ICD-10-CM
H40.1213	Low-tension glaucoma, right eye, severe stage	Diagnosis	ICD-10-CM
H40.053	Ocular hypertension, bilateral	Diagnosis	ICD-10-CM
H40.052	Ocular hypertension, left eye	Diagnosis	ICD-10-CM
H40.051	Ocular hypertension, right eye	Diagnosis	ICD-10-CM
H40.059	Ocular hypertension, unspecified eye	Diagnosis	ICD-10-CM
H40.019	Open angle with borderline findings, low risk, unspecified eye	Diagnosis	ICD-10-CM
H40.013	Open angle with borderline findings, low risk, bilateral	Diagnosis	ICD-10-CM
H40.012	Open angle with borderline findings, low risk, left eye	Diagnosis	ICD-10-CM
H40.011	Open angle with borderline findings, low risk, right eye	Diagnosis	ICD-10-CM
H40.89	Other specified glaucoma	Diagnosis	ICD-10-CM
H40.1334	Pigmentary glaucoma, bilateral, indeterminate stage	Diagnosis	ICD-10-CM
H40.1330	Pigmentary glaucoma, bilateral, stage unspecified	Diagnosis	ICD-10-CM
H40.1324	Pigmentary glaucoma, left eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.1310	Pigmentary glaucoma, right eye, stage unspecified	Diagnosis	ICD-10-CM
H40.1314	Pigmentary glaucoma, right eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.1394	Pigmentary glaucoma, unspecified eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.1392	Pigmentary glaucoma, unspecified eye, moderate stage	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
H40.1390	Pigmentary glaucoma, unspecified eye, stage unspecified	Diagnosis	ICD-10-CM
H40.1393	Pigmentary glaucoma, unspecified eye, severe stage	Diagnosis	ICD-10-CM
H40.1331	Pigmentary glaucoma, bilateral, mild stage	Diagnosis	ICD-10-CM
H40.1332	Pigmentary glaucoma, bilateral, moderate stage	Diagnosis	ICD-10-CM
H40.1333	Pigmentary glaucoma, bilateral, severe stage	Diagnosis	ICD-10-CM
H40.1321	Pigmentary glaucoma, left eye, mild stage	Diagnosis	ICD-10-CM
H40.1322	Pigmentary glaucoma, left eye, moderate stage	Diagnosis	ICD-10-CM
H40.1323	Pigmentary glaucoma, left eye, severe stage	Diagnosis	ICD-10-CM
H40.1320	Pigmentary glaucoma, left eye, stage unspecified	Diagnosis	ICD-10-CM
H40.1311	Pigmentary glaucoma, right eye, mild stage	Diagnosis	ICD-10-CM
H40.1312	Pigmentary glaucoma, right eye, moderate stage	Diagnosis	ICD-10-CM
H40.1313	Pigmentary glaucoma, right eye, severe stage	Diagnosis	ICD-10-CM
H40.1391	Pigmentary glaucoma, unspecified eye, mild stage	Diagnosis	ICD-10-CM
H40.003	Preglaucoma, unspecified, bilateral	Diagnosis	ICD-10-CM
H40.002	Preglaucoma, unspecified, left eye	Diagnosis	ICD-10-CM
H40.001	Preglaucoma, unspecified, right eye	Diagnosis	ICD-10-CM
H40.009	Preglaucoma, unspecified, unspecified eye	Diagnosis	ICD-10-CM
H40.1133	Primary open-angle glaucoma, bilateral, severe stage	Diagnosis	ICD-10-CM
H40.1114	Primary open-angle glaucoma, right eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.1134	Primary open-angle glaucoma, bilateral, indeterminate stage	Diagnosis	ICD-10-CM
H40.11X0	Primary open-angle glaucoma, stage unspecified	Diagnosis	ICD-10-CM
H40.1132	Primary open-angle glaucoma, bilateral, moderate stage	Diagnosis	ICD-10-CM
H40.1131	Primary open-angle glaucoma, bilateral, mild stage	Diagnosis	ICD-10-CM
H40.11X4	Primary open-angle glaucoma, indeterminate stage	Diagnosis	ICD-10-CM
H40.1121	Primary open-angle glaucoma, left eye, mild stage	Diagnosis	ICD-10-CM
H40.1120	Primary open-angle glaucoma, left eye, stage unspecified	Diagnosis	ICD-10-CM
H40.1124	Primary open-angle glaucoma, left eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.1122	Primary open-angle glaucoma, left eye, moderate stage	Diagnosis	ICD-10-CM
H40.1123	Primary open-angle glaucoma, left eye, severe stage	Diagnosis	ICD-10-CM
H40.11X1	Primary open-angle glaucoma, mild stage	Diagnosis	ICD-10-CM
H40.11X2	Primary open-angle glaucoma, moderate stage	Diagnosis	ICD-10-CM
H40.1112	Primary open-angle glaucoma, right eye, moderate stage	Diagnosis	ICD-10-CM
H40.1111	Primary open-angle glaucoma, right eye, mild stage	Diagnosis	ICD-10-CM
H40.1113	Primary open-angle glaucoma, right eye, severe stage	Diagnosis	ICD-10-CM
H40.1110	Primary open-angle glaucoma, right eye, stage unspecified	Diagnosis	ICD-10-CM
H40.11X3	Primary open-angle glaucoma, severe stage	Diagnosis	ICD-10-CM
H40.1192	Primary open-angle glaucoma, unspecified eye, moderate stage	Diagnosis	ICD-10-CM
H40.1193	Primary open-angle glaucoma, unspecified eye, severe stage	Diagnosis	ICD-10-CM
H40.1190	Primary open-angle glaucoma, unspecified eye, stage unspecified	Diagnosis	ICD-10-CM
H40.1191	Primary open-angle glaucoma, unspecified eye, mild stage	Diagnosis	ICD-10-CM
H40.1130	Primary open-angle glaucoma, bilateral, stage unspecified	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
H40.1194	Primary open-angle glaucoma, unspecified eye, indeterminate stage	Diagnosis	ICD-10-CM
H40.243	Residual stage of angle-closure glaucoma, bilateral	Diagnosis	ICD-10-CM
H40.242	Residual stage of angle-closure glaucoma, left eye	Diagnosis	ICD-10-CM
H40.241	Residual stage of angle-closure glaucoma, right eye	Diagnosis	ICD-10-CM
H40.249	Residual stage of angle-closure glaucoma, unspecified eye	Diagnosis	ICD-10-CM
H40.153	Residual stage of open-angle glaucoma, bilateral	Diagnosis	ICD-10-CM
H40.152	Residual stage of open-angle glaucoma, left eye	Diagnosis	ICD-10-CM
H40.151	Residual stage of open-angle glaucoma, right eye	Diagnosis	ICD-10-CM
H40.159	Residual stage of open-angle glaucoma, unspecified eye	Diagnosis	ICD-10-CM
H40.043	Steroid responder, bilateral	Diagnosis	ICD-10-CM
H40.042	Steroid responder, left eye	Diagnosis	ICD-10-CM
H40.041	Steroid responder, right eye	Diagnosis	ICD-10-CM
H40.049	Steroid responder, unspecified eye	Diagnosis	ICD-10-CM
H40.10X4	Unspecified open-angle glaucoma, indeterminate stage	Diagnosis	ICD-10-CM
H40.10X0	Unspecified open-angle glaucoma, stage unspecified	Diagnosis	ICD-10-CM
H40.20X4	Unspecified primary angle-closure glaucoma, indeterminate stage	Diagnosis	ICD-10-CM
H40.20X2	Unspecified primary angle-closure glaucoma, moderate stage	Diagnosis	ICD-10-CM
H40.20X1	Unspecified primary angle-closure glaucoma, mild stage	Diagnosis	ICD-10-CM
H40.20X3	Unspecified primary angle-closure glaucoma, severe stage	Diagnosis	ICD-10-CM
H40.20X0	Unspecified primary angle-closure glaucoma, stage unspecified	Diagnosis	ICD-10-CM
H40.9	Unspecified glaucoma	Diagnosis	ICD-10-CM
H40.10X1	Unspecified open-angle glaucoma, mild stage	Diagnosis	ICD-10-CM
H40.10X2	Unspecified open-angle glaucoma, moderate stage	Diagnosis	ICD-10-CM
H40.10X3	Unspecified open-angle glaucoma, severe stage	Diagnosis	ICD-10-CM
Heart Failure			
428.43	Acute on chronic combined systolic and diastolic heart failure	Diagnosis	ICD-09-CM
428.41	Acute combined systolic and diastolic heart failure	Diagnosis	ICD-09-CM
428.31	Acute diastolic heart failure	Diagnosis	ICD-09-CM
428.33	Acute on chronic diastolic heart failure	Diagnosis	ICD-09-CM
428.23	Acute on chronic systolic heart failure	Diagnosis	ICD-09-CM
428.21	Acute systolic heart failure	Diagnosis	ICD-09-CM
402.11	Benign hypertensive heart disease with heart failure	Diagnosis	ICD-09-CM
428.42	Chronic combined systolic and diastolic heart failure	Diagnosis	ICD-09-CM
428.32	Chronic diastolic heart failure	Diagnosis	ICD-09-CM
428.22	Chronic systolic heart failure	Diagnosis	ICD-09-CM
428.0	Congestive heart failure, unspecified	Diagnosis	ICD-09-CM
404.13	Hypertensive heart and chronic kidney disease, benign, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
404.93	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM

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Code	Description	Code Category	Code Type
404.11	Hypertensive heart and chronic kidney disease, benign, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-09-CM
404.01	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-09-CM
404.03	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
404.91	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-09-CM
402.91	Hypertensive heart disease, unspecified, with heart failure	Diagnosis	ICD-09-CM
428.1	Left heart failure	Diagnosis	ICD-09-CM
402.01	Malignant hypertensive heart disease with heart failure	Diagnosis	ICD-09-CM
398.91	Rheumatic heart failure (congestive)	Diagnosis	ICD-09-CM
428.40	Unspecified combined systolic and diastolic heart failure	Diagnosis	ICD-09-CM
428.30	Unspecified diastolic heart failure	Diagnosis	ICD-09-CM
428.9	Unspecified heart failure	Diagnosis	ICD-09-CM
428.20	Unspecified systolic heart failure	Diagnosis	ICD-09-CM
I50.23	Acute on chronic systolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.41	Acute combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.31	Acute diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.33	Acute on chronic diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.43	Acute on chronic combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.813	Acute on chronic right heart failure	Diagnosis	ICD-10-CM
I50.811	Acute right heart failure	Diagnosis	ICD-10-CM
I50.21	Acute systolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.82	Biventricular heart failure	Diagnosis	ICD-10-CM
I50.42	Chronic combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.32	Chronic diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.812	Chronic right heart failure	Diagnosis	ICD-10-CM
I50.22	Chronic systolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.84	End stage heart failure	Diagnosis	ICD-10-CM
I50.9	Heart failure, unspecified	Diagnosis	ICD-10-CM
I50.83	High output heart failure	Diagnosis	ICD-10-CM
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease	Diagnosis	ICD-10-CM
I13.0	Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I11.0	Hypertensive heart disease with heart failure	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
I50.1	Left ventricular failure, unspecified	Diagnosis	ICD-10-CM
I50.89	Other heart failure	Diagnosis	ICD-10-CM
I09.81	Rheumatic heart failure	Diagnosis	ICD-10-CM
I50.814	Right heart failure due to left heart failure	Diagnosis	ICD-10-CM
I50.810	Right heart failure, unspecified	Diagnosis	ICD-10-CM
I50.40	Unspecified combined systolic (congestive) and diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.30	Unspecified diastolic (congestive) heart failure	Diagnosis	ICD-10-CM
I50.20	Unspecified systolic (congestive) heart failure	Diagnosis	ICD-10-CM
Hip/Pelvic Fracture			
820.00	Closed fracture of unspecified intracapsular section of neck of femur	Diagnosis	ICD-09-CM
820.20	Closed fracture of unspecified trochanteric section of femur	Diagnosis	ICD-09-CM
820.21	Closed fracture of intertrochanteric section of femur	Diagnosis	ICD-09-CM
808.0	Closed fracture of acetabulum	Diagnosis	ICD-09-CM
820.03	Closed fracture of base of neck of femur	Diagnosis	ICD-09-CM
820.01	Closed fracture of epiphysis (separation) (upper) of neck of femur	Diagnosis	ICD-09-CM
808.41	Closed fracture of ilium	Diagnosis	ICD-09-CM
808.42	Closed fracture of ischium	Diagnosis	ICD-09-CM
820.02	Closed fracture of midcervical section of femur	Diagnosis	ICD-09-CM
808.2	Closed fracture of pubis	Diagnosis	ICD-09-CM
808.49	Closed fracture of other specified part of pelvis	Diagnosis	ICD-09-CM
820.22	Closed fracture of subtrochanteric section of femur	Diagnosis	ICD-09-CM
820.8	Closed fracture of unspecified part of neck of femur	Diagnosis	ICD-09-CM
808.43	Multiple closed pelvic fractures with disruption of pelvic circle	Diagnosis	ICD-09-CM
808.53	Multiple open pelvic fractures with disruption of pelvic circle	Diagnosis	ICD-09-CM
808.44	Multiple closed pelvic fractures without disruption of pelvic circle	Diagnosis	ICD-09-CM
808.54	Multiple open pelvic fractures without disruption of pelvic circle	Diagnosis	ICD-09-CM
820.31	Open fracture of intertrochanteric section of femur	Diagnosis	ICD-09-CM
808.1	Open fracture of acetabulum	Diagnosis	ICD-09-CM
820.13	Open fracture of base of neck of femur	Diagnosis	ICD-09-CM
820.11	Open fracture of epiphysis (separation) (upper) of neck of femur	Diagnosis	ICD-09-CM
808.51	Open fracture of ilium	Diagnosis	ICD-09-CM
808.52	Open fracture of ischium	Diagnosis	ICD-09-CM
820.12	Open fracture of midcervical section of femur	Diagnosis	ICD-09-CM
808.3	Open fracture of pubis	Diagnosis	ICD-09-CM
808.59	Open fracture of other specified part of pelvis	Diagnosis	ICD-09-CM
820.32	Open fracture of subtrochanteric section of femur	Diagnosis	ICD-09-CM
820.10	Open fracture of unspecified intracapsular section of neck of femur	Diagnosis	ICD-09-CM
820.30	Open fracture of unspecified trochanteric section of femur	Diagnosis	ICD-09-CM
820.9	Open fracture of unspecified part of neck of femur	Diagnosis	ICD-09-CM
820.09	Other closed transcervical fracture of femur	Diagnosis	ICD-09-CM

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Code	Description	Code Category	Code Type
820.19	Other open transcervical fracture of femur	Diagnosis	ICD-09-CM
733.14	Pathologic fracture of neck of femur	Diagnosis	ICD-09-CM
733.15	Pathologic fracture of other specified part of femur	Diagnosis	ICD-09-CM
733.96	Stress fracture of femoral neck	Diagnosis	ICD-09-CM
733.98	Stress fracture of pelvis	Diagnosis	ICD-09-CM
733.97	Stress fracture of shaft of femur	Diagnosis	ICD-09-CM
808.8	Unspecified closed fracture of pelvis	Diagnosis	ICD-09-CM
808.9	Unspecified open fracture of pelvis	Diagnosis	ICD-09-CM
M80.059A	Age-related osteoporosis with current pathological fracture, unspecified femur, initial encounter for fracture	Diagnosis	ICD-10-CM
M80.052A	Age-related osteoporosis with current pathological fracture, left femur, initial encounter for fracture	Diagnosis	ICD-10-CM
M80.051A	Age-related osteoporosis with current pathological fracture, right femur, initial encounter for fracture	Diagnosis	ICD-10-CM
S72.042C	Displaced fracture of base of neck of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.042B	Displaced fracture of base of neck of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.042A	Displaced fracture of base of neck of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.041C	Displaced fracture of base of neck of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.041B	Displaced fracture of base of neck of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.041A	Displaced fracture of base of neck of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.043C	Displaced fracture of base of neck of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.043B	Displaced fracture of base of neck of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.043A	Displaced fracture of base of neck of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.022B	Displaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.022C	Displaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.021B	Displaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.021C	Displaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S72.023B	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.023C	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.032B	Displaced midcervical fracture of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.032C	Displaced midcervical fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.031B	Displaced midcervical fracture of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.031C	Displaced midcervical fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.033B	Displaced midcervical fracture of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.033C	Displaced midcervical fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S32.433A	Displaced fracture of anterior column [iliopubic] of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.433B	Displaced fracture of anterior column [iliopubic] of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.442A	Displaced fracture of posterior column [ilioischial] of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.442B	Displaced fracture of posterior column [ilioischial] of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.432A	Displaced fracture of anterior column [iliopubic] of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.432B	Displaced fracture of anterior column [iliopubic] of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.431A	Displaced fracture of anterior column [iliopubic] of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.431B	Displaced fracture of anterior column [iliopubic] of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.423A	Displaced fracture of posterior wall of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.423B	Displaced fracture of posterior wall of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.312A	Displaced avulsion fracture of left ilium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.312B	Displaced avulsion fracture of left ilium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.612A	Displaced avulsion fracture of left ischium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.612B	Displaced avulsion fracture of left ischium, initial encounter for open fracture	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S32.311A	Displaced avulsion fracture of right ilium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.311B	Displaced avulsion fracture of right ilium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.611A	Displaced avulsion fracture of right ischium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.611B	Displaced avulsion fracture of right ischium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.313A	Displaced avulsion fracture of unspecified ilium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.313B	Displaced avulsion fracture of unspecified ilium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.613A	Displaced avulsion fracture of unspecified ischium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.613B	Displaced avulsion fracture of unspecified ischium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.482A	Displaced dome fracture of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.482B	Displaced dome fracture of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.481A	Displaced dome fracture of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.481B	Displaced dome fracture of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.483A	Displaced dome fracture of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.483B	Displaced dome fracture of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S72.022A	Displaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.021A	Displaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.023A	Displaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.422A	Displaced fracture of posterior wall of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.422B	Displaced fracture of posterior wall of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.421A	Displaced fracture of posterior wall of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.421B	Displaced fracture of posterior wall of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S72.032A	Displaced midcervical fracture of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.031A	Displaced midcervical fracture of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.033A	Displaced midcervical fracture of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.452A	Displaced transverse fracture of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.452B	Displaced transverse fracture of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.451A	Displaced transverse fracture of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.451B	Displaced transverse fracture of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.453A	Displaced transverse fracture of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.453B	Displaced transverse fracture of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.412B	Displaced fracture of anterior wall of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.411B	Displaced fracture of anterior wall of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.441B	Displaced fracture of posterior column [ilioischial] of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.441A	Displaced fracture of posterior column [ilioischial] of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.443A	Displaced fracture of posterior column [ilioischial] of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.443B	Displaced fracture of posterior column [ilioischial] of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.472B	Displaced fracture of medial wall of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.472A	Displaced fracture of medial wall of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.471A	Displaced fracture of medial wall of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.471B	Displaced fracture of medial wall of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.473A	Displaced fracture of medial wall of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S32.473B	Displaced fracture of medial wall of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.462A	Displaced associated transverse-posterior fracture of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.462B	Displaced associated transverse-posterior fracture of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.461A	Displaced associated transverse-posterior fracture of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.461B	Displaced associated transverse-posterior fracture of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.463A	Displaced associated transverse-posterior fracture of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.463B	Displaced associated transverse-posterior fracture of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S72.132C	Displaced apophyseal fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.132B	Displaced apophyseal fracture of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.132A	Displaced apophyseal fracture of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.131A	Displaced apophyseal fracture of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.131B	Displaced apophyseal fracture of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.131C	Displaced apophyseal fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.133A	Displaced apophyseal fracture of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.133B	Displaced apophyseal fracture of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.133C	Displaced apophyseal fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.062A	Displaced articular fracture of head of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.062B	Displaced articular fracture of head of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.062C	Displaced articular fracture of head of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.061A	Displaced articular fracture of head of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S72.061B	Displaced articular fracture of head of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.061C	Displaced articular fracture of head of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.063B	Displaced articular fracture of head of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.063C	Displaced articular fracture of head of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.063A	Displaced articular fracture of head of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.112C	Displaced fracture of greater trochanter of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.111C	Displaced fracture of greater trochanter of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.113C	Displaced fracture of greater trochanter of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.112A	Displaced fracture of greater trochanter of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.112B	Displaced fracture of greater trochanter of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.111A	Displaced fracture of greater trochanter of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.111B	Displaced fracture of greater trochanter of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.113A	Displaced fracture of greater trochanter of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.113B	Displaced fracture of greater trochanter of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.122C	Displaced fracture of lesser trochanter of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.121C	Displaced fracture of lesser trochanter of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.123B	Displaced fracture of lesser trochanter of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.123C	Displaced fracture of lesser trochanter of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.122A	Displaced fracture of lesser trochanter of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.122B	Displaced fracture of lesser trochanter of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S72.121A	Displaced fracture of lesser trochanter of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.121B	Displaced fracture of lesser trochanter of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.123A	Displaced fracture of lesser trochanter of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.142A	Displaced intertrochanteric fracture of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.141A	Displaced intertrochanteric fracture of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.141C	Displaced intertrochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.141B	Displaced intertrochanteric fracture of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.22XA	Displaced subtrochanteric fracture of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.22XB	Displaced subtrochanteric fracture of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.21XA	Displaced subtrochanteric fracture of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.21XB	Displaced subtrochanteric fracture of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.23XA	Displaced subtrochanteric fracture of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.412A	Displaced fracture of anterior wall of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.411A	Displaced fracture of anterior wall of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.413A	Displaced fracture of anterior wall of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.413B	Displaced fracture of anterior wall of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S72.142C	Displaced intertrochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.142B	Displaced intertrochanteric fracture of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.143C	Displaced intertrochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.143A	Displaced intertrochanteric fracture of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S72.143B	Displaced intertrochanteric fracture of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.22XC	Displaced subtrochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.21XC	Displaced subtrochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.23XC	Displaced subtrochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.23XB	Displaced subtrochanteric fracture of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S32.89XA	Fracture of other parts of pelvis, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.89XB	Fracture of other parts of pelvis, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.512A	Fracture of superior rim of left pubis, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.512B	Fracture of superior rim of left pubis, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.511A	Fracture of superior rim of right pubis, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.511B	Fracture of superior rim of right pubis, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.519A	Fracture of superior rim of unspecified pubis, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.519B	Fracture of superior rim of unspecified pubis, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.9XXA	Fracture of unspecified parts of lumbosacral spine and pelvis, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.9XXB	Fracture of unspecified parts of lumbosacral spine and pelvis, initial encounter for open fracture	Diagnosis	ICD-10-CM
S72.002C	Fracture of unspecified part of neck of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.002B	Fracture of unspecified part of neck of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.002A	Fracture of unspecified part of neck of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.001C	Fracture of unspecified part of neck of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.001B	Fracture of unspecified part of neck of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.001A	Fracture of unspecified part of neck of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.009B	Fracture of unspecified part of neck of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.009C	Fracture of unspecified part of neck of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S72.009A	Fracture of unspecified part of neck of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.810B	Multiple fractures of pelvis with stable disruption of pelvic ring, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.811A	Multiple fractures of pelvis with unstable disruption of pelvic ring, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.82XA	Multiple fractures of pelvis without disruption of pelvic ring, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.82XB	Multiple fractures of pelvis without disruption of pelvic ring, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.810A	Multiple fractures of pelvis with stable disruption of pelvic ring, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.811B	Multiple fractures of pelvis with unstable disruption of pelvic ring, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.446A	Nondisplaced fracture of posterior column [ilioischial] of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.446B	Nondisplaced fracture of posterior column [ilioischial] of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S72.135A	Nondisplaced apophyseal fracture of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.135B	Nondisplaced apophyseal fracture of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.135C	Nondisplaced apophyseal fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.134B	Nondisplaced apophyseal fracture of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.134C	Nondisplaced apophyseal fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.134A	Nondisplaced apophyseal fracture of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.136B	Nondisplaced apophyseal fracture of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.136C	Nondisplaced apophyseal fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.136A	Nondisplaced apophyseal fracture of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.065C	Nondisplaced articular fracture of head of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.064C	Nondisplaced articular fracture of head of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S72.066C	Nondisplaced articular fracture of head of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.065A	Nondisplaced articular fracture of head of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.065B	Nondisplaced articular fracture of head of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.064A	Nondisplaced articular fracture of head of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.064B	Nondisplaced articular fracture of head of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.066A	Nondisplaced articular fracture of head of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.066B	Nondisplaced articular fracture of head of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.115C	Nondisplaced fracture of greater trochanter of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.114C	Nondisplaced fracture of greater trochanter of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.116B	Nondisplaced fracture of greater trochanter of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.116C	Nondisplaced fracture of greater trochanter of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.115A	Nondisplaced fracture of greater trochanter of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.115B	Nondisplaced fracture of greater trochanter of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.114B	Nondisplaced fracture of greater trochanter of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.114A	Nondisplaced fracture of greater trochanter of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.116A	Nondisplaced fracture of greater trochanter of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.125A	Nondisplaced fracture of lesser trochanter of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.125B	Nondisplaced fracture of lesser trochanter of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.125C	Nondisplaced fracture of lesser trochanter of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.124A	Nondisplaced fracture of lesser trochanter of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S72.124B	Nondisplaced fracture of lesser trochanter of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.124C	Nondisplaced fracture of lesser trochanter of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.126A	Nondisplaced fracture of lesser trochanter of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.126B	Nondisplaced fracture of lesser trochanter of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.126C	Nondisplaced fracture of lesser trochanter of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.145A	Nondisplaced intertrochanteric fracture of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.144A	Nondisplaced intertrochanteric fracture of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.145C	Nondisplaced intertrochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.145B	Nondisplaced intertrochanteric fracture of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.144C	Nondisplaced intertrochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.144B	Nondisplaced intertrochanteric fracture of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.146B	Nondisplaced intertrochanteric fracture of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.146A	Nondisplaced intertrochanteric fracture of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.146C	Nondisplaced intertrochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.24XC	Nondisplaced subtrochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.25XB	Nondisplaced subtrochanteric fracture of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.25XC	Nondisplaced subtrochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.24XA	Nondisplaced subtrochanteric fracture of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.24XB	Nondisplaced subtrochanteric fracture of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.26XA	Nondisplaced subtrochanteric fracture of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S72.26XB	Nondisplaced subtrochanteric fracture of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.26XC	Nondisplaced subtrochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S32.414B	Nondisplaced fracture of anterior wall of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.414A	Nondisplaced fracture of anterior wall of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.416A	Nondisplaced fracture of anterior wall of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.426A	Nondisplaced fracture of posterior wall of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.415A	Nondisplaced fracture of anterior wall of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.415B	Nondisplaced fracture of anterior wall of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.315A	Nondisplaced avulsion fracture of left ilium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.316A	Nondisplaced avulsion fracture of unspecified ilium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.315B	Nondisplaced avulsion fracture of left ilium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.314A	Nondisplaced avulsion fracture of right ilium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.314B	Nondisplaced avulsion fracture of right ilium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.316B	Nondisplaced avulsion fracture of unspecified ilium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.615A	Nondisplaced avulsion fracture of left ischium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.614A	Nondisplaced avulsion fracture of right ischium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.614B	Nondisplaced avulsion fracture of right ischium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.616A	Nondisplaced avulsion fracture of unspecified ischium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.616B	Nondisplaced avulsion fracture of unspecified ischium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.486A	Nondisplaced dome fracture of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S32.486B	Nondisplaced dome fracture of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.416B	Nondisplaced fracture of anterior wall of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.425A	Nondisplaced fracture of posterior wall of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.425B	Nondisplaced fracture of posterior wall of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.424A	Nondisplaced fracture of posterior wall of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.424B	Nondisplaced fracture of posterior wall of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.485A	Nondisplaced dome fracture of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.485B	Nondisplaced dome fracture of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.484A	Nondisplaced dome fracture of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.484B	Nondisplaced dome fracture of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.436B	Nondisplaced fracture of anterior column [iliopubic] of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.435B	Nondisplaced fracture of anterior column [iliopubic] of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.435A	Nondisplaced fracture of anterior column [iliopubic] of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.434A	Nondisplaced fracture of anterior column [iliopubic] of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.434B	Nondisplaced fracture of anterior column [iliopubic] of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.436A	Nondisplaced fracture of anterior column [iliopubic] of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.045A	Nondisplaced fracture of base of neck of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.045B	Nondisplaced fracture of base of neck of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.045C	Nondisplaced fracture of base of neck of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.044A	Nondisplaced fracture of base of neck of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S72.044B	Nondisplaced fracture of base of neck of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.044C	Nondisplaced fracture of base of neck of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.046A	Nondisplaced fracture of base of neck of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.046B	Nondisplaced fracture of base of neck of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.046C	Nondisplaced fracture of base of neck of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.025A	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.025B	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.025C	Nondisplaced fracture of epiphysis (separation) (upper) of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.024A	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.024B	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.024C	Nondisplaced fracture of epiphysis (separation) (upper) of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.026A	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.026B	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.026C	Nondisplaced fracture of epiphysis (separation) (upper) of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S32.445A	Nondisplaced fracture of posterior column [ilioischial] of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.445B	Nondisplaced fracture of posterior column [ilioischial] of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.444B	Nondisplaced fracture of posterior column [ilioischial] of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.444A	Nondisplaced fracture of posterior column [ilioischial] of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.035B	Nondisplaced midcervical fracture of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.035C	Nondisplaced midcervical fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S72.035A	Nondisplaced midcervical fracture of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.034B	Nondisplaced midcervical fracture of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.034C	Nondisplaced midcervical fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.034A	Nondisplaced midcervical fracture of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.036B	Nondisplaced midcervical fracture of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.036C	Nondisplaced midcervical fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.036A	Nondisplaced midcervical fracture of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.615B	Nondisplaced avulsion fracture of left ischium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.426B	Nondisplaced fracture of posterior wall of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.465A	Nondisplaced associated transverse-posterior fracture of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.465B	Nondisplaced associated transverse-posterior fracture of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.464A	Nondisplaced associated transverse-posterior fracture of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.464B	Nondisplaced associated transverse-posterior fracture of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.475A	Nondisplaced fracture of medial wall of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.475B	Nondisplaced fracture of medial wall of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.474A	Nondisplaced fracture of medial wall of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.474B	Nondisplaced fracture of medial wall of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.476A	Nondisplaced fracture of medial wall of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.476B	Nondisplaced fracture of medial wall of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S72.25XA	Nondisplaced subtrochanteric fracture of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S32.466A	Nondisplaced associated transverse-posterior fracture of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.466B	Nondisplaced associated transverse-posterior fracture of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.455A	Nondisplaced transverse fracture of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.455B	Nondisplaced transverse fracture of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.454A	Nondisplaced transverse fracture of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.454B	Nondisplaced transverse fracture of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.456A	Nondisplaced transverse fracture of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.456B	Nondisplaced transverse fracture of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S72.092B	Other fracture of head and neck of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.092C	Other fracture of head and neck of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.092A	Other fracture of head and neck of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.091B	Other fracture of head and neck of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.091C	Other fracture of head and neck of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.091A	Other fracture of head and neck of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.099B	Other fracture of head and neck of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.099C	Other fracture of head and neck of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.099A	Other fracture of head and neck of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
M80.852A	Other osteoporosis with current pathological fracture, left femur, initial encounter for fracture	Diagnosis	ICD-10-CM
M80.851A	Other osteoporosis with current pathological fracture, right femur, initial encounter for fracture	Diagnosis	ICD-10-CM
M80.859A	Other osteoporosis with current pathological fracture, unspecified femur, initial encounter for fracture	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S79.092A	Other physeal fracture of upper end of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S79.091A	Other physeal fracture of upper end of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S79.099A	Other physeal fracture of upper end of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.392B	Other fracture of left ilium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.392A	Other fracture of left ilium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.391A	Other fracture of right ilium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.391B	Other fracture of right ilium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.399A	Other fracture of unspecified ilium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.399B	Other fracture of unspecified ilium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.492A	Other specified fracture of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.492B	Other specified fracture of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.692A	Other specified fracture of left ischium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.692B	Other specified fracture of left ischium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.491A	Other specified fracture of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.491B	Other specified fracture of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.691A	Other specified fracture of right ischium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.691B	Other specified fracture of right ischium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.499A	Other specified fracture of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.499B	Other specified fracture of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.699A	Other specified fracture of unspecified ischium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.699B	Other specified fracture of unspecified ischium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.592A	Other specified fracture of left pubis, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.592B	Other specified fracture of left pubis, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.591A	Other specified fracture of right pubis, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.591B	Other specified fracture of right pubis, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.599A	Other specified fracture of unspecified pubis, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.599B	Other specified fracture of unspecified pubis, initial encounter for open fracture	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
M84.559A	Pathological fracture in neoplastic disease, hip, unspecified, initial encounter for fracture	Diagnosis	ICD-10-CM
M84.553A	Pathological fracture in neoplastic disease, unspecified femur, initial encounter for fracture	Diagnosis	ICD-10-CM
M84.459A	Pathological fracture, hip, unspecified, initial encounter for fracture	Diagnosis	ICD-10-CM
M84.452A	Pathological fracture, left femur, initial encounter for fracture	Diagnosis	ICD-10-CM
M84.552A	Pathological fracture in neoplastic disease, left femur, initial encounter for fracture	Diagnosis	ICD-10-CM
M84.550A	Pathological fracture in neoplastic disease, pelvis, initial encounter for fracture	Diagnosis	ICD-10-CM
M84.551A	Pathological fracture in neoplastic disease, right femur, initial encounter for fracture	Diagnosis	ICD-10-CM
M84.650A	Pathological fracture in other disease, pelvis, initial encounter for fracture	Diagnosis	ICD-10-CM
M84.659A	Pathological fracture in other disease, hip, unspecified, initial encounter for fracture	Diagnosis	ICD-10-CM
M84.652A	Pathological fracture in other disease, left femur, initial encounter for fracture	Diagnosis	ICD-10-CM
M84.651A	Pathological fracture in other disease, right femur, initial encounter for fracture	Diagnosis	ICD-10-CM
M84.653A	Pathological fracture in other disease, unspecified femur, initial encounter for fracture	Diagnosis	ICD-10-CM
M84.451A	Pathological fracture, right femur, initial encounter for fracture	Diagnosis	ICD-10-CM
M84.453A	Pathological fracture, unspecified femur, initial encounter for fracture	Diagnosis	ICD-10-CM
S79.012A	Salter-Harris Type I physeal fracture of upper end of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S79.011A	Salter-Harris Type I physeal fracture of upper end of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S79.019A	Salter-Harris Type I physeal fracture of upper end of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
M84.359A	Stress fracture, hip, unspecified, initial encounter for fracture	Diagnosis	ICD-10-CM
M84.352A	Stress fracture, left femur, initial encounter for fracture	Diagnosis	ICD-10-CM
M84.350A	Stress fracture, pelvis, initial encounter for fracture	Diagnosis	ICD-10-CM
M84.351A	Stress fracture, right femur, initial encounter for fracture	Diagnosis	ICD-10-CM
M84.353A	Stress fracture, unspecified femur, initial encounter for fracture	Diagnosis	ICD-10-CM
S72.052A	Unspecified fracture of head of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.051A	Unspecified fracture of head of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.402A	Unspecified fracture of left acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.052B	Unspecified fracture of head of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
S72.052C	Unspecified fracture of head of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.051B	Unspecified fracture of head of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.051C	Unspecified fracture of head of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.059B	Unspecified fracture of head of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.059C	Unspecified fracture of head of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.059A	Unspecified fracture of head of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.012A	Unspecified intracapsular fracture of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.012B	Unspecified intracapsular fracture of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.012C	Unspecified intracapsular fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.011A	Unspecified intracapsular fracture of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.011B	Unspecified intracapsular fracture of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.011C	Unspecified intracapsular fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.019A	Unspecified intracapsular fracture of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.019B	Unspecified intracapsular fracture of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.019C	Unspecified intracapsular fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S79.002A	Unspecified physeal fracture of upper end of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S79.001A	Unspecified physeal fracture of upper end of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S79.009A	Unspecified physeal fracture of upper end of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.102B	Unspecified trochanteric fracture of left femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.102C	Unspecified trochanteric fracture of left femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
S72.101B	Unspecified trochanteric fracture of right femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.101C	Unspecified trochanteric fracture of right femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.109B	Unspecified trochanteric fracture of unspecified femur, initial encounter for open fracture type I or II	Diagnosis	ICD-10-CM
S72.109C	Unspecified trochanteric fracture of unspecified femur, initial encounter for open fracture type IIIA, IIIB, or IIIC	Diagnosis	ICD-10-CM
S72.102A	Unspecified trochanteric fracture of left femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.101A	Unspecified trochanteric fracture of right femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S72.109A	Unspecified trochanteric fracture of unspecified femur, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.402B	Unspecified fracture of left acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.401A	Unspecified fracture of right acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.401B	Unspecified fracture of right acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.409A	Unspecified fracture of unspecified acetabulum, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.409B	Unspecified fracture of unspecified acetabulum, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.309A	Unspecified fracture of unspecified ilium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.302B	Unspecified fracture of left ilium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.302A	Unspecified fracture of left ilium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.602A	Unspecified fracture of left ischium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.602B	Unspecified fracture of left ischium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.502A	Unspecified fracture of left pubis, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.502B	Unspecified fracture of left pubis, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.301A	Unspecified fracture of right ilium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.301B	Unspecified fracture of right ilium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.601A	Unspecified fracture of right ischium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.601B	Unspecified fracture of right ischium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.501A	Unspecified fracture of right pubis, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.501B	Unspecified fracture of right pubis, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.309B	Unspecified fracture of unspecified ilium, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.509A	Unspecified fracture of unspecified pubis, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.509B	Unspecified fracture of unspecified pubis, initial encounter for open fracture	Diagnosis	ICD-10-CM
S32.609A	Unspecified fracture of unspecified ischium, initial encounter for closed fracture	Diagnosis	ICD-10-CM
S32.609B	Unspecified fracture of unspecified ischium, initial encounter for open fracture	Diagnosis	ICD-10-CM
Hyperlipidemia			

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Code	Description	Code Category	Code Type
E78.41	Elevated Lipoprotein(a)	Diagnosis	ICD-10-CM
E78.01	Familial hypercholesterolemia	Diagnosis	ICD-10-CM
E78.3	Hyperchylomicronemia	Diagnosis	ICD-10-CM
E78.5	Hyperlipidemia, unspecified	Diagnosis	ICD-10-CM
E78.2	Mixed hyperlipidemia	Diagnosis	ICD-10-CM
E78.4	Other hyperlipidemia	Diagnosis	ICD-10-CM
E78.49	Other hyperlipidemia	Diagnosis	ICD-10-CM
E78.0	Pure hypercholesterolemia	Diagnosis	ICD-10-CM
E78.00	Pure hypercholesterolemia, unspecified	Diagnosis	ICD-10-CM
E78.1	Pure hyperglyceridemia	Diagnosis	ICD-10-CM
272.3	Hyperchylomicronemia	Diagnosis	ICD-09-CM
272.2	Mixed hyperlipidemia	Diagnosis	ICD-09-CM
272.4	Other and unspecified hyperlipidemia	Diagnosis	ICD-09-CM
272.0	Pure hypercholesterolemia	Diagnosis	ICD-09-CM
272.1	Pure hyperglyceridemia	Diagnosis	ICD-09-CM
Hypertension			
402.10	Benign hypertensive heart disease without heart failure	Diagnosis	ICD-09-CM
402.11	Benign hypertensive heart disease with heart failure	Diagnosis	ICD-09-CM
401.1	Essential hypertension, benign	Diagnosis	ICD-09-CM
401.0	Essential hypertension, malignant	Diagnosis	ICD-09-CM
403.00	Hypertensive chronic kidney disease, malignant, with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-09-CM
403.01	Hypertensive chronic kidney disease, malignant, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
403.10	Hypertensive chronic kidney disease, benign, with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-09-CM
403.11	Hypertensive chronic kidney disease, benign, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
403.90	Hypertensive chronic kidney disease, unspecified, with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-09-CM
403.91	Hypertensive chronic kidney disease, unspecified, with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
404.13	Hypertensive heart and chronic kidney disease, benign, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
404.02	Hypertensive heart and chronic kidney disease, malignant, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
404.93	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
404.11	Hypertensive heart and chronic kidney disease, benign, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-09-CM

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Code	Description	Code Category	Code Type
404.10	Hypertensive heart and chronic kidney disease, benign, without heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-09-CM
404.12	Hypertensive heart and chronic kidney disease, benign, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
404.01	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-09-CM
404.00	Hypertensive heart and chronic kidney disease, malignant, without heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-09-CM
404.03	Hypertensive heart and chronic kidney disease, malignant, with heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
404.91	Hypertensive heart and chronic kidney disease, unspecified, with heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-09-CM
404.90	Hypertensive heart and chronic kidney disease, unspecified, without heart failure and with chronic kidney disease stage I through stage IV, or unspecified	Diagnosis	ICD-09-CM
404.92	Hypertensive heart and chronic kidney disease, unspecified, without heart failure and with chronic kidney disease stage V or end stage renal disease	Diagnosis	ICD-09-CM
437.2	Hypertensive encephalopathy	Diagnosis	ICD-09-CM
402.91	Hypertensive heart disease, unspecified, with heart failure	Diagnosis	ICD-09-CM
362.11	Hypertensive retinopathy	Diagnosis	ICD-09-CM
402.00	Malignant hypertensive heart disease without heart failure	Diagnosis	ICD-09-CM
402.01	Malignant hypertensive heart disease with heart failure	Diagnosis	ICD-09-CM
405.19	Other secondary hypertension, benign	Diagnosis	ICD-09-CM
405.09	Other secondary hypertension, malignant	Diagnosis	ICD-09-CM
405.99	Other secondary hypertension, unspecified	Diagnosis	ICD-09-CM
405.11	Secondary renovascular hypertension, benign	Diagnosis	ICD-09-CM
405.01	Secondary renovascular hypertension, malignant	Diagnosis	ICD-09-CM
405.91	Secondary renovascular hypertension, unspecified	Diagnosis	ICD-09-CM
402.90	Unspecified hypertensive heart disease without heart failure	Diagnosis	ICD-09-CM
401.9	Unspecified essential hypertension	Diagnosis	ICD-09-CM
I10	Essential (primary) hypertension	Diagnosis	ICD-10-CM
I13.2	Hypertensive heart and chronic kidney disease with heart failure and with stage 5 chronic kidney disease, or end stage renal disease	Diagnosis	ICD-10-CM
I13.0	Hypertensive heart and chronic kidney disease with heart failure and stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.10	Hypertensive heart and chronic kidney disease without heart failure, with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I13.11	Hypertensive heart and chronic kidney disease without heart failure, with stage 5 chronic kidney disease, or end stage renal disease	Diagnosis	ICD-10-CM
I15.2	Hypertension secondary to endocrine disorders	Diagnosis	ICD-10-CM
I15.1	Hypertension secondary to other renal disorders	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
I12.9	Hypertensive chronic kidney disease with stage 1 through stage 4 chronic kidney disease, or unspecified chronic kidney disease	Diagnosis	ICD-10-CM
I12.0	Hypertensive chronic kidney disease with stage 5 chronic kidney disease or end stage renal disease	Diagnosis	ICD-10-CM
I67.4	Hypertensive encephalopathy	Diagnosis	ICD-10-CM
I11.0	Hypertensive heart disease with heart failure	Diagnosis	ICD-10-CM
I11.9	Hypertensive heart disease without heart failure	Diagnosis	ICD-10-CM
H35.033	Hypertensive retinopathy, bilateral	Diagnosis	ICD-10-CM
H35.032	Hypertensive retinopathy, left eye	Diagnosis	ICD-10-CM
H35.031	Hypertensive retinopathy, right eye	Diagnosis	ICD-10-CM
H35.039	Hypertensive retinopathy, unspecified eye	Diagnosis	ICD-10-CM
I15.8	Other secondary hypertension	Diagnosis	ICD-10-CM
N26.2	Page kidney	Diagnosis	ICD-10-CM
I15.0	Renovascular hypertension	Diagnosis	ICD-10-CM
I15.9	Secondary hypertension, unspecified	Diagnosis	ICD-10-CM
Ischemic Heart Disease			
410.00	Acute myocardial infarction of anterolateral wall, episode of care unspecified	Diagnosis	ICD-09-CM
410.01	Acute myocardial infarction of anterolateral wall, initial episode of care	Diagnosis	ICD-09-CM
410.02	Acute myocardial infarction of anterolateral wall, subsequent episode of care	Diagnosis	ICD-09-CM
410.20	Acute myocardial infarction of inferolateral wall, episode of care unspecified	Diagnosis	ICD-09-CM
410.21	Acute myocardial infarction of inferolateral wall, initial episode of care	Diagnosis	ICD-09-CM
410.22	Acute myocardial infarction of inferolateral wall, subsequent episode of care	Diagnosis	ICD-09-CM
410.30	Acute myocardial infarction of inferoposterior wall, episode of care unspecified	Diagnosis	ICD-09-CM
410.31	Acute myocardial infarction of inferoposterior wall, initial episode of care	Diagnosis	ICD-09-CM
410.32	Acute myocardial infarction of inferoposterior wall, subsequent episode of care	Diagnosis	ICD-09-CM
410.12	Acute myocardial infarction of other anterior wall, subsequent episode of care	Diagnosis	ICD-09-CM
410.42	Acute myocardial infarction of other inferior wall, subsequent episode of care	Diagnosis	ICD-09-CM
410.52	Acute myocardial infarction of other lateral wall, subsequent episode of care	Diagnosis	ICD-09-CM
410.70	Acute myocardial infarction, subendocardial infarction, episode of care unspecified	Diagnosis	ICD-09-CM
410.71	Acute myocardial infarction, subendocardial infarction, initial episode of care	Diagnosis	ICD-09-CM
410.72	Acute myocardial infarction, subendocardial infarction, subsequent episode of care	Diagnosis	ICD-09-CM
410.60	Acute myocardial infarction, true posterior wall infarction, episode of care unspecified	Diagnosis	ICD-09-CM
410.61	Acute myocardial infarction, true posterior wall infarction, initial episode of care	Diagnosis	ICD-09-CM
410.62	Acute myocardial infarction, true posterior wall infarction, subsequent episode of care	Diagnosis	ICD-09-CM

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Code	Description	Code Category	Code Type
410.10	Acute myocardial infarction of other anterior wall, episode of care unspecified	Diagnosis	ICD-09-CM
410.11	Acute myocardial infarction of other anterior wall, initial episode of care	Diagnosis	ICD-09-CM
410.40	Acute myocardial infarction of other inferior wall, episode of care unspecified	Diagnosis	ICD-09-CM
410.41	Acute myocardial infarction of other inferior wall, initial episode of care	Diagnosis	ICD-09-CM
410.50	Acute myocardial infarction of other lateral wall, episode of care unspecified	Diagnosis	ICD-09-CM
410.51	Acute myocardial infarction of other lateral wall, initial episode of care	Diagnosis	ICD-09-CM
410.81	Acute myocardial infarction of other specified sites, initial episode of care	Diagnosis	ICD-09-CM
410.82	Acute myocardial infarction of other specified sites, subsequent episode of care	Diagnosis	ICD-09-CM
410.80	Acute myocardial infarction of other specified sites, episode of care unspecified	Diagnosis	ICD-09-CM
410.90	Acute myocardial infarction, unspecified site, episode of care unspecified	Diagnosis	ICD-09-CM
410.92	Acute myocardial infarction, unspecified site, subsequent episode of care	Diagnosis	ICD-09-CM
411.81	Acute coronary occlusion without myocardial infarction	Diagnosis	ICD-09-CM
410.91	Acute myocardial infarction, unspecified site, initial episode of care	Diagnosis	ICD-09-CM
413.0	Angina decubitus	Diagnosis	ICD-09-CM
414.2	Chronic total occlusion of coronary artery	Diagnosis	ICD-09-CM
414.07	Coronary atherosclerosis, of bypass graft (artery) (vein) of transplanted heart	Diagnosis	ICD-09-CM
414.06	Coronary atherosclerosis, of native coronary artery of transplanted heart	Diagnosis	ICD-09-CM
414.03	Coronary atherosclerosis of nonautologous biological bypass graft	Diagnosis	ICD-09-CM
414.00	Coronary atherosclerosis of unspecified type of vessel, native or graft	Diagnosis	ICD-09-CM
414.4	Coronary atherosclerosis due to calcified coronary lesion	Diagnosis	ICD-09-CM
414.3	Coronary atherosclerosis due to lipid rich plaque	Diagnosis	ICD-09-CM
414.01	Coronary atherosclerosis of native coronary artery	Diagnosis	ICD-09-CM
414.04	Coronary atherosclerosis of artery bypass graft	Diagnosis	ICD-09-CM
414.02	Coronary atherosclerosis of autologous vein bypass graft	Diagnosis	ICD-09-CM
414.05	Coronary atherosclerosis of unspecified type of bypass graft	Diagnosis	ICD-09-CM
414.12	Dissection of coronary artery	Diagnosis	ICD-09-CM
411.1	Intermediate coronary syndrome	Diagnosis	ICD-09-CM
412	Old myocardial infarction	Diagnosis	ICD-09-CM
411.89	Other acute and subacute form of ischemic heart disease	Diagnosis	ICD-09-CM
413.9	Other and unspecified angina pectoris	Diagnosis	ICD-09-CM
414.8	Other specified forms of chronic ischemic heart disease	Diagnosis	ICD-09-CM
411.0	Postmyocardial infarction syndrome	Diagnosis	ICD-09-CM
413.1	Prinzmetal angina	Diagnosis	ICD-09-CM
414.9	Unspecified chronic ischemic heart disease	Diagnosis	ICD-09-CM
I24.0	Acute coronary thrombosis not resulting in myocardial infarction	Diagnosis	ICD-10-CM
I24.9	Acute ischemic heart disease, unspecified	Diagnosis	ICD-10-CM
I25.3	Aneurysm of heart	Diagnosis	ICD-10-CM
I20.9	Angina pectoris, unspecified	Diagnosis	ICD-10-CM
I20.1	Angina pectoris with documented spasm	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
I25.111	Atherosclerotic heart disease of native coronary artery with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.118	Atherosclerotic heart disease of native coronary artery with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.110	Atherosclerotic heart disease of native coronary artery with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.119	Atherosclerotic heart disease of native coronary artery with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.10	Atherosclerotic heart disease of native coronary artery without angina pectoris	Diagnosis	ICD-10-CM
I25.761	Atherosclerosis of bypass graft of coronary artery of transplanted heart with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.760	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unstable angina	Diagnosis	ICD-10-CM
I25.812	Atherosclerosis of bypass graft of coronary artery of transplanted heart without angina pectoris	Diagnosis	ICD-10-CM
I25.768	Atherosclerosis of bypass graft of coronary artery of transplanted heart with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.769	Atherosclerosis of bypass graft of coronary artery of transplanted heart with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.751	Atherosclerosis of native coronary artery of transplanted heart with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.758	Atherosclerosis of native coronary artery of transplanted heart with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.750	Atherosclerosis of native coronary artery of transplanted heart with unstable angina	Diagnosis	ICD-10-CM
I25.731	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.738	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.791	Atherosclerosis of other coronary artery bypass graft(s) with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.798	Atherosclerosis of other coronary artery bypass graft(s) with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.790	Atherosclerosis of other coronary artery bypass graft(s) with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.721	Atherosclerosis of autologous artery coronary artery bypass graft(s) with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.728	Atherosclerosis of autologous artery coronary artery bypass graft(s) with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.720	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unstable angina pectoris	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
I25.711	Atherosclerosis of autologous vein coronary artery bypass graft(s) with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.718	Atherosclerosis of autologous vein coronary artery bypass graft(s) with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.710	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.729	Atherosclerosis of autologous artery coronary artery bypass graft(s) with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.719	Atherosclerosis of autologous vein coronary artery bypass graft(s) with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.700	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.701	Atherosclerosis of coronary artery bypass graft(s), unspecified, with angina pectoris with documented spasm	Diagnosis	ICD-10-CM
I25.708	Atherosclerosis of coronary artery bypass graft(s), unspecified, with other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.709	Atherosclerosis of coronary artery bypass graft(s), unspecified, with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.810	Atherosclerosis of coronary artery bypass graft(s) without angina pectoris	Diagnosis	ICD-10-CM
I25.811	Atherosclerosis of native coronary artery of transplanted heart without angina pectoris	Diagnosis	ICD-10-CM
I25.759	Atherosclerosis of native coronary artery of transplanted heart with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.739	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unspecified angina pectoris	Diagnosis	ICD-10-CM
I25.730	Atherosclerosis of nonautologous biological coronary artery bypass graft(s) with unstable angina pectoris	Diagnosis	ICD-10-CM
I25.799	Atherosclerosis of other coronary artery bypass graft(s) with unspecified angina pectoris	Diagnosis	ICD-10-CM
I23.1	Atrial septal defect as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I25.9	Chronic ischemic heart disease, unspecified	Diagnosis	ICD-10-CM
I25.82	Chronic total occlusion of coronary artery	Diagnosis	ICD-10-CM
I25.84	Coronary atherosclerosis due to calcified coronary lesion	Diagnosis	ICD-10-CM
I25.41	Coronary artery aneurysm	Diagnosis	ICD-10-CM
I25.42	Coronary artery dissection	Diagnosis	ICD-10-CM
I25.83	Coronary atherosclerosis due to lipid rich plaque	Diagnosis	ICD-10-CM
I24.1	Dressler's syndrome	Diagnosis	ICD-10-CM
I23.0	Hemopericardium as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I25.5	Ischemic cardiomyopathy	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
I21.A1	Myocardial infarction type 2	Diagnosis	ICD-10-CM
I21.4	Non-ST elevation (NSTEMI) myocardial infarction	Diagnosis	ICD-10-CM
I25.2	Old myocardial infarction	Diagnosis	ICD-10-CM
I23.8	Other current complications following acute myocardial infarction	Diagnosis	ICD-10-CM
I24.8	Other forms of acute ischemic heart disease	Diagnosis	ICD-10-CM
I20.8	Other forms of angina pectoris	Diagnosis	ICD-10-CM
I25.89	Other forms of chronic ischemic heart disease	Diagnosis	ICD-10-CM
I21.A9	Other myocardial infarction type	Diagnosis	ICD-10-CM
I23.7	Postinfarction angina	Diagnosis	ICD-10-CM
I23.3	Rupture of cardiac wall without hemopericardium as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.4	Rupture of chordae tendineae as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I23.5	Rupture of papillary muscle as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
I25.6	Silent myocardial ischemia	Diagnosis	ICD-10-CM
I21.21	ST elevation (STEMI) myocardial infarction involving left circumflex coronary artery	Diagnosis	ICD-10-CM
I21.09	ST elevation (STEMI) myocardial infarction involving other coronary artery of anterior wall	Diagnosis	ICD-10-CM
I21.19	ST elevation (STEMI) myocardial infarction involving other coronary artery of inferior wall	Diagnosis	ICD-10-CM
I21.29	ST elevation (STEMI) myocardial infarction involving other sites	Diagnosis	ICD-10-CM
I21.02	ST elevation (STEMI) myocardial infarction involving left anterior descending coronary artery	Diagnosis	ICD-10-CM
I21.01	ST elevation (STEMI) myocardial infarction involving left main coronary artery	Diagnosis	ICD-10-CM
I21.11	ST elevation (STEMI) myocardial infarction involving right coronary artery	Diagnosis	ICD-10-CM
I21.3	ST elevation (STEMI) myocardial infarction of unspecified site	Diagnosis	ICD-10-CM
I22.2	Subsequent non-ST elevation (NSTEMI) myocardial infarction	Diagnosis	ICD-10-CM
I22.8	Subsequent ST elevation (STEMI) myocardial infarction of other sites	Diagnosis	ICD-10-CM
I22.9	Subsequent ST elevation (STEMI) myocardial infarction of unspecified site	Diagnosis	ICD-10-CM
I22.0	Subsequent ST elevation (STEMI) myocardial infarction of anterior wall	Diagnosis	ICD-10-CM
I22.1	Subsequent ST elevation (STEMI) myocardial infarction of inferior wall	Diagnosis	ICD-10-CM
I23.6	Thrombosis of atrium, auricular appendage, and ventricle as current complications following acute myocardial infarction	Diagnosis	ICD-10-CM
I20.0	Unstable angina	Diagnosis	ICD-10-CM
I23.2	Ventricular septal defect as current complication following acute myocardial infarction	Diagnosis	ICD-10-CM
Lung Cancer			
231.2	Carcinoma in situ of bronchus and lung	Diagnosis	ICD-09-CM
162.9	Malignant neoplasm of bronchus and lung, unspecified site	Diagnosis	ICD-09-CM

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

Code	Description	Code Category	Code Type
162.5	Malignant neoplasm of lower lobe, bronchus, or lung	Diagnosis	ICD-09-CM
162.4	Malignant neoplasm of middle lobe, bronchus, or lung	Diagnosis	ICD-09-CM
162.2	Malignant neoplasm of main bronchus	Diagnosis	ICD-09-CM
162.8	Malignant neoplasm of other parts of bronchus or lung	Diagnosis	ICD-09-CM
162.3	Malignant neoplasm of upper lobe, bronchus, or lung	Diagnosis	ICD-09-CM
V10.11	Personal history of malignant neoplasm of bronchus and lung	Diagnosis	ICD-09-CM
D02.22	Carcinoma in situ of left bronchus and lung	Diagnosis	ICD-10-CM
D02.21	Carcinoma in situ of right bronchus and lung	Diagnosis	ICD-10-CM
D02.20	Carcinoma in situ of unspecified bronchus and lung	Diagnosis	ICD-10-CM
C34.32	Malignant neoplasm of lower lobe, left bronchus or lung	Diagnosis	ICD-10-CM
C34.31	Malignant neoplasm of lower lobe, right bronchus or lung	Diagnosis	ICD-10-CM
C34.30	Malignant neoplasm of lower lobe, unspecified bronchus or lung	Diagnosis	ICD-10-CM
C34.02	Malignant neoplasm of left main bronchus	Diagnosis	ICD-10-CM
C34.2	Malignant neoplasm of middle lobe, bronchus or lung	Diagnosis	ICD-10-CM
C34.01	Malignant neoplasm of right main bronchus	Diagnosis	ICD-10-CM
C34.00	Malignant neoplasm of unspecified main bronchus	Diagnosis	ICD-10-CM
C34.82	Malignant neoplasm of overlapping sites of left bronchus and lung	Diagnosis	ICD-10-CM
C34.81	Malignant neoplasm of overlapping sites of right bronchus and lung	Diagnosis	ICD-10-CM
C34.80	Malignant neoplasm of overlapping sites of unspecified bronchus and lung	Diagnosis	ICD-10-CM
C34.92	Malignant neoplasm of unspecified part of left bronchus or lung	Diagnosis	ICD-10-CM
C34.91	Malignant neoplasm of unspecified part of right bronchus or lung	Diagnosis	ICD-10-CM
C34.90	Malignant neoplasm of unspecified part of unspecified bronchus or lung	Diagnosis	ICD-10-CM
C34.12	Malignant neoplasm of upper lobe, left bronchus or lung	Diagnosis	ICD-10-CM
C34.11	Malignant neoplasm of upper lobe, right bronchus or lung	Diagnosis	ICD-10-CM
C34.10	Malignant neoplasm of upper lobe, unspecified bronchus or lung	Diagnosis	ICD-10-CM
Z85.110	Personal history of malignant carcinoid tumor of bronchus and lung	Diagnosis	ICD-10-CM
Z85.118	Personal history of other malignant neoplasm of bronchus and lung	Diagnosis	ICD-10-CM
Male/Female Breast Cancer			
233.0	Carcinoma in situ of breast	Diagnosis	ICD-09-CM
174.3	Malignant neoplasm of lower-inner quadrant of female breast	Diagnosis	ICD-09-CM
174.5	Malignant neoplasm of lower-outer quadrant of female breast	Diagnosis	ICD-09-CM
174.8	Malignant neoplasm of other specified sites of female breast	Diagnosis	ICD-09-CM
175.9	Malignant neoplasm of other and unspecified sites of male breast	Diagnosis	ICD-09-CM
174.2	Malignant neoplasm of upper-inner quadrant of female breast	Diagnosis	ICD-09-CM
174.4	Malignant neoplasm of upper-outer quadrant of female breast	Diagnosis	ICD-09-CM
174.6	Malignant neoplasm of axillary tail of female breast	Diagnosis	ICD-09-CM
174.1	Malignant neoplasm of central portion of female breast	Diagnosis	ICD-09-CM
174.0	Malignant neoplasm of nipple and areola of female breast	Diagnosis	ICD-09-CM
175.0	Malignant neoplasm of nipple and areola of male breast	Diagnosis	ICD-09-CM
174.9	Malignant neoplasm of breast (female), unspecified site	Diagnosis	ICD-09-CM
V10.3	Personal history of malignant neoplasm of breast	Diagnosis	ICD-09-CM

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

Code	Description	Code Category	Code Type
D05.12	Intraductal carcinoma in situ of left breast	Diagnosis	ICD-10-CM
D05.11	Intraductal carcinoma in situ of right breast	Diagnosis	ICD-10-CM
D05.10	Intraductal carcinoma in situ of unspecified breast	Diagnosis	ICD-10-CM
D05.02	Lobular carcinoma in situ of left breast	Diagnosis	ICD-10-CM
D05.01	Lobular carcinoma in situ of right breast	Diagnosis	ICD-10-CM
D05.00	Lobular carcinoma in situ of unspecified breast	Diagnosis	ICD-10-CM
C50.122	Malignant neoplasm of central portion of left male breast	Diagnosis	ICD-10-CM
C50.112	Malignant neoplasm of central portion of left female breast	Diagnosis	ICD-10-CM
C50.121	Malignant neoplasm of central portion of right male breast	Diagnosis	ICD-10-CM
C50.111	Malignant neoplasm of central portion of right female breast	Diagnosis	ICD-10-CM
C50.119	Malignant neoplasm of central portion of unspecified female breast	Diagnosis	ICD-10-CM
C50.129	Malignant neoplasm of central portion of unspecified male breast	Diagnosis	ICD-10-CM
C50.312	Malignant neoplasm of lower-inner quadrant of left female breast	Diagnosis	ICD-10-CM
C50.322	Malignant neoplasm of lower-inner quadrant of left male breast	Diagnosis	ICD-10-CM
C50.311	Malignant neoplasm of lower-inner quadrant of right female breast	Diagnosis	ICD-10-CM
C50.321	Malignant neoplasm of lower-inner quadrant of right male breast	Diagnosis	ICD-10-CM
C50.319	Malignant neoplasm of lower-inner quadrant of unspecified female breast	Diagnosis	ICD-10-CM
C50.329	Malignant neoplasm of lower-inner quadrant of unspecified male breast	Diagnosis	ICD-10-CM
C50.512	Malignant neoplasm of lower-outer quadrant of left female breast	Diagnosis	ICD-10-CM
C50.522	Malignant neoplasm of lower-outer quadrant of left male breast	Diagnosis	ICD-10-CM
C50.511	Malignant neoplasm of lower-outer quadrant of right female breast	Diagnosis	ICD-10-CM
C50.521	Malignant neoplasm of lower-outer quadrant of right male breast	Diagnosis	ICD-10-CM
C50.519	Malignant neoplasm of lower-outer quadrant of unspecified female breast	Diagnosis	ICD-10-CM
C50.529	Malignant neoplasm of lower-outer quadrant of unspecified male breast	Diagnosis	ICD-10-CM
C50.022	Malignant neoplasm of nipple and areola, left male breast	Diagnosis	ICD-10-CM
C50.012	Malignant neoplasm of nipple and areola, left female breast	Diagnosis	ICD-10-CM
C50.021	Malignant neoplasm of nipple and areola, right male breast	Diagnosis	ICD-10-CM
C50.011	Malignant neoplasm of nipple and areola, right female breast	Diagnosis	ICD-10-CM
C50.019	Malignant neoplasm of nipple and areola, unspecified female breast	Diagnosis	ICD-10-CM
C50.029	Malignant neoplasm of nipple and areola, unspecified male breast	Diagnosis	ICD-10-CM
C50.212	Malignant neoplasm of upper-inner quadrant of left female breast	Diagnosis	ICD-10-CM
C50.222	Malignant neoplasm of upper-inner quadrant of left male breast	Diagnosis	ICD-10-CM
C50.211	Malignant neoplasm of upper-inner quadrant of right female breast	Diagnosis	ICD-10-CM
C50.221	Malignant neoplasm of upper-inner quadrant of right male breast	Diagnosis	ICD-10-CM
C50.229	Malignant neoplasm of upper-inner quadrant of unspecified male breast	Diagnosis	ICD-10-CM
C50.412	Malignant neoplasm of upper-outer quadrant of left female breast	Diagnosis	ICD-10-CM
C50.422	Malignant neoplasm of upper-outer quadrant of left male breast	Diagnosis	ICD-10-CM
C50.411	Malignant neoplasm of upper-outer quadrant of right female breast	Diagnosis	ICD-10-CM
C50.421	Malignant neoplasm of upper-outer quadrant of right male breast	Diagnosis	ICD-10-CM
C50.419	Malignant neoplasm of upper-outer quadrant of unspecified female breast	Diagnosis	ICD-10-CM
C50.429	Malignant neoplasm of upper-outer quadrant of unspecified male breast	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
C50.219	Malignant neoplasm of upper-inner quadrant of unspecified female breast	Diagnosis	ICD-10-CM
C50.612	Malignant neoplasm of axillary tail of left female breast	Diagnosis	ICD-10-CM
C50.622	Malignant neoplasm of axillary tail of left male breast	Diagnosis	ICD-10-CM
C50.611	Malignant neoplasm of axillary tail of right female breast	Diagnosis	ICD-10-CM
C50.621	Malignant neoplasm of axillary tail of right male breast	Diagnosis	ICD-10-CM
C50.619	Malignant neoplasm of axillary tail of unspecified female breast	Diagnosis	ICD-10-CM
C50.629	Malignant neoplasm of axillary tail of unspecified male breast	Diagnosis	ICD-10-CM
C50.922	Malignant neoplasm of unspecified site of left male breast	Diagnosis	ICD-10-CM
C50.921	Malignant neoplasm of unspecified site of right male breast	Diagnosis	ICD-10-CM
C50.929	Malignant neoplasm of unspecified site of unspecified male breast	Diagnosis	ICD-10-CM
C50.812	Malignant neoplasm of overlapping sites of left female breast	Diagnosis	ICD-10-CM
C50.811	Malignant neoplasm of overlapping sites of right female breast	Diagnosis	ICD-10-CM
C50.819	Malignant neoplasm of overlapping sites of unspecified female breast	Diagnosis	ICD-10-CM
C50.822	Malignant neoplasm of overlapping sites of left male breast	Diagnosis	ICD-10-CM
C50.821	Malignant neoplasm of overlapping sites of right male breast	Diagnosis	ICD-10-CM
C50.829	Malignant neoplasm of overlapping sites of unspecified male breast	Diagnosis	ICD-10-CM
C50.912	Malignant neoplasm of unspecified site of left female breast	Diagnosis	ICD-10-CM
C50.911	Malignant neoplasm of unspecified site of right female breast	Diagnosis	ICD-10-CM
C50.919	Malignant neoplasm of unspecified site of unspecified female breast	Diagnosis	ICD-10-CM
D05.82	Other specified type of carcinoma in situ of left breast	Diagnosis	ICD-10-CM
D05.81	Other specified type of carcinoma in situ of right breast	Diagnosis	ICD-10-CM
D05.80	Other specified type of carcinoma in situ of unspecified breast	Diagnosis	ICD-10-CM
Z85.3	Personal history of malignant neoplasm of breast	Diagnosis	ICD-10-CM
D05.92	Unspecified type of carcinoma in situ of left breast	Diagnosis	ICD-10-CM
D05.91	Unspecified type of carcinoma in situ of right breast	Diagnosis	ICD-10-CM
D05.90	Unspecified type of carcinoma in situ of unspecified breast	Diagnosis	ICD-10-CM
Obesity			
649.24	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium, postpartum condition or complication	Diagnosis	ICD-09-CM
649.23	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium, antepartum condition or complication	Diagnosis	ICD-09-CM
649.22	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium, delivered, with mention of postpartum complication	Diagnosis	ICD-09-CM
649.14	Obesity complicating pregnancy, childbirth, or the puerperium, postpartum condition or complication	Diagnosis	ICD-09-CM
649.1	Obesity complicating pregnancy, childbirth, or the puerperium	Diagnosis	ICD-09-CM
649.21	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium, delivered, with or without mention of antepartum condition	Diagnosis	ICD-09-CM
649.20	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium, unspecified as to episode of care or not applicable	Diagnosis	ICD-09-CM
649.2	Bariatric surgery status complicating pregnancy, childbirth, or the puerperium	Diagnosis	ICD-09-CM

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

Code	Description	Code Category	Code Type
649.11	Obesity complicating pregnancy, childbirth, or the puerperium, delivered, with or without mention of antepartum condition	Diagnosis	ICD-09-CM
649.10	Obesity complicating pregnancy, childbirth, or the puerperium, unspecified as to episode of care or not applicable	Diagnosis	ICD-09-CM
649.12	Obesity complicating pregnancy, childbirth, or the puerperium, delivered, with mention of postpartum complication	Diagnosis	ICD-09-CM
649.13	Obesity complicating pregnancy, childbirth, or the puerperium, antepartum condition or complication	Diagnosis	ICD-09-CM
539.01	Infection due to gastric band procedure	Diagnosis	ICD-09-CM
539.0	Complications of gastric band procedure	Diagnosis	ICD-09-CM
539.81	Infection due to other bariatric procedure	Diagnosis	ICD-09-CM
539.09	Other complications of gastric band procedure	Diagnosis	ICD-09-CM
539.8	Complications of other bariatric procedure	Diagnosis	ICD-09-CM
539.89	Other complications of other bariatric procedure	Diagnosis	ICD-09-CM
278.03	Obesity hypoventilation syndrome	Diagnosis	ICD-09-CM
278.01	Morbid obesity	Diagnosis	ICD-09-CM
278.00	Obesity, unspecified	Diagnosis	ICD-09-CM
V85.33	Body Mass Index 33.0-33.9, adult	Diagnosis	ICD-09-CM
V85.43	Body Mass Index 50.0-59.9, adult	Diagnosis	ICD-09-CM
V85.45	Body Mass Index 70 and over, adult	Diagnosis	ICD-09-CM
V85.35	Body Mass Index 35.0-35.9, adult	Diagnosis	ICD-09-CM
V85.44	Body Mass Index 60.0-69.9, adult	Diagnosis	ICD-09-CM
V85.38	Body Mass Index 38.0-38.9, adult	Diagnosis	ICD-09-CM
V85.3	Body Mass Index between 30-39, adult	Diagnosis	ICD-09-CM
V85.31	Body Mass Index 31.0-31.9, adult	Diagnosis	ICD-09-CM
V85.4	Body Mass Index 40 and over, adult	Diagnosis	ICD-09-CM
V85.36	Body Mass Index 36.0-36.9, adult	Diagnosis	ICD-09-CM
V85.42	Body Mass Index 45.0-49.9, adult	Diagnosis	ICD-09-CM
V85.39	Body Mass Index 39.0-39.9, adult	Diagnosis	ICD-09-CM
V85.30	Body Mass Index 30.0-30.9, adult	Diagnosis	ICD-09-CM
V85.37	Body Mass Index 37.0-37.9, adult	Diagnosis	ICD-09-CM
V85.41	Body Mass Index 40.0-44.9, adult	Diagnosis	ICD-09-CM
V85.34	Body Mass Index 34.0-34.9, adult	Diagnosis	ICD-09-CM
V85.32	Body Mass Index 32.0-32.9, adult	Diagnosis	ICD-09-CM
43.89	Open and other partial gastrectomy	Procedure	ICD-09-CM
44.38	Laparoscopic gastroenterostomy	Procedure	ICD-09-CM
44.39	Other gastroenterostomy without gastrectomy	Procedure	ICD-09-CM
44.68	Laparoscopic gastroplasty	Procedure	ICD-09-CM
44.95	Laparoscopic gastric restrictive procedure	Procedure	ICD-09-CM
45.51	Isolation of segment of small intestine	Procedure	ICD-09-CM
45.91	Small-to-small intestinal anastomosis	Procedure	ICD-09-CM

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

Code	Description	Code Category	Code Type
Z68.45	Body mass index (BMI) 70 or greater, adult	Diagnosis	ICD-10-CM
Z68.44	Body mass index (BMI) 60.0-69.9, adult	Diagnosis	ICD-10-CM
Z68.43	Body mass index (BMI) 50.0-59.9, adult	Diagnosis	ICD-10-CM
Z68.42	Body mass index (BMI) 45.0-49.9, adult	Diagnosis	ICD-10-CM
Z68.41	Body mass index (BMI) 40.0-44.9, adult	Diagnosis	ICD-10-CM
Z68.39	Body mass index (BMI) 39.0-39.9, adult	Diagnosis	ICD-10-CM
Z68.38	Body mass index (BMI) 38.0-38.9, adult	Diagnosis	ICD-10-CM
Z68.37	Body mass index (BMI) 37.0-37.9, adult	Diagnosis	ICD-10-CM
Z68.36	Body mass index (BMI) 36.0-36.9, adult	Diagnosis	ICD-10-CM
Z68.35	Body mass index (BMI) 35.0-35.9, adult	Diagnosis	ICD-10-CM
Z68.34	Body mass index (BMI) 34.0-34.9, adult	Diagnosis	ICD-10-CM
Z68.33	Body mass index (BMI) 33.0-33.9, adult	Diagnosis	ICD-10-CM
Z68.32	Body mass index (BMI) 32.0-32.9, adult	Diagnosis	ICD-10-CM
Z68.31	Body mass index (BMI) 31.0-31.9, adult	Diagnosis	ICD-10-CM
Z68.30	Body mass index (BMI) 30.0-30.9, adult	Diagnosis	ICD-10-CM
O99.845	Bariatric surgery status complicating the puerperium	Diagnosis	ICD-10-CM
O99.844	Bariatric surgery status complicating childbirth	Diagnosis	ICD-10-CM
O99.843	Bariatric surgery status complicating pregnancy, third trimester	Diagnosis	ICD-10-CM
O99.842	Bariatric surgery status complicating pregnancy, second trimester	Diagnosis	ICD-10-CM
O99.841	Bariatric surgery status complicating pregnancy, first trimester	Diagnosis	ICD-10-CM
O99.840	Bariatric surgery status complicating pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
O99.215	Obesity complicating the puerperium	Diagnosis	ICD-10-CM
O99.214	Obesity complicating childbirth	Diagnosis	ICD-10-CM
O99.213	Obesity complicating pregnancy, third trimester	Diagnosis	ICD-10-CM
O99.212	Obesity complicating pregnancy, second trimester	Diagnosis	ICD-10-CM
O99.211	Obesity complicating pregnancy, first trimester	Diagnosis	ICD-10-CM
O99.210	Obesity complicating pregnancy, unspecified trimester	Diagnosis	ICD-10-CM
K95.89	Other complications of other bariatric procedure	Diagnosis	ICD-10-CM
K95.81	Infection due to other bariatric procedure	Diagnosis	ICD-10-CM
K95.09	Other complications of gastric band procedure	Diagnosis	ICD-10-CM
K95.01	Infection due to gastric band procedure	Diagnosis	ICD-10-CM
E66.9	Obesity, unspecified	Diagnosis	ICD-10-CM
E66.8	Other obesity	Diagnosis	ICD-10-CM
E66.2	Morbid (severe) obesity with alveolar hypoventilation	Diagnosis	ICD-10-CM
E66.1	Drug-induced obesity	Diagnosis	ICD-10-CM
E66.09	Other obesity due to excess calories	Diagnosis	ICD-10-CM
E66.01	Morbid (severe) obesity due to excess calories	Diagnosis	ICD-10-CM
0F190Z3	Bypass Common Bile Duct to Duodenum, Open Approach	Procedure	ICD-10-PCS
0D19479	Bypass Duodenum to Duodenum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

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

Code	Description	Code Category	Code Type
0D194K9	Bypass Duodenum to Duodenum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D19879	Bypass Duodenum to Duodenum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D19079	Bypass Duodenum to Duodenum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D198Z9	Bypass Duodenum to Duodenum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198K9	Bypass Duodenum to Duodenum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D190K9	Bypass Duodenum to Duodenum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D194Z9	Bypass Duodenum to Duodenum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194J9	Bypass Duodenum to Duodenum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D198J9	Bypass Duodenum to Duodenum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D190J9	Bypass Duodenum to Duodenum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D1987B	Bypass Duodenum to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1907B	Bypass Duodenum to Ileum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1947B	Bypass Duodenum to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D198ZB	Bypass Duodenum to Ileum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198KB	Bypass Duodenum to Ileum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D194KB	Bypass Duodenum to Ileum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D190KB	Bypass Duodenum to Ileum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D194ZB	Bypass Duodenum to Ileum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194JB	Bypass Duodenum to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D198JB	Bypass Duodenum to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D190JB	Bypass Duodenum to Ileum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D1987A	Bypass Duodenum to Jejunum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1947A	Bypass Duodenum to Jejunum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1907A	Bypass Duodenum to Jejunum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D198ZA	Bypass Duodenum to Jejunum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D198KA	Bypass Duodenum to Jejunum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS

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

Code	Description	Code Category	Code Type
0D194KA	Bypass Duodenum to Jejunum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D190KA	Bypass Duodenum to Jejunum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D194ZA	Bypass Duodenum to Jejunum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D194JA	Bypass Duodenum to Jejunum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D198JA	Bypass Duodenum to Jejunum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D190JA	Bypass Duodenum to Jejunum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D190Z9	Bypass Duodenum to Duodenum, Open Approach	Procedure	ICD-10-PCS
0D190ZB	Bypass Duodenum to Ileum, Open Approach	Procedure	ICD-10-PCS
0D190ZA	Bypass Duodenum to Jejunum, Open Approach	Procedure	ICD-10-PCS
0D1B87B	Bypass Ileum to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1B47B	Bypass Ileum to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1B07B	Bypass Ileum to Ileum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1B8KB	Bypass Ileum to Ileum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1B0KB	Bypass Ileum to Ileum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1B4KB	Bypass Ileum to Ileum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1B4ZB	Bypass Ileum to Ileum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1B8JB	Bypass Ileum to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1B4JB	Bypass Ileum to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1B0JB	Bypass Ileum to Ileum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D1B8ZH	Bypass Ileum to Cecum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1B0ZB	Bypass Ileum to Ileum, Open Approach	Procedure	ICD-10-PCS
0D1B8ZB	Bypass Ileum to Ileum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A87B	Bypass Jejunum to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A07B	Bypass Jejunum to Ileum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1A47B	Bypass Jejunum to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A8KB	Bypass Jejunum to Ileum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A4KB	Bypass Jejunum to Ileum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A0KB	Bypass Jejunum to Ileum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS

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

Code	Description	Code Category	Code Type
0D1A4ZB	Bypass Jejunum to Ileum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A8JB	Bypass Jejunum to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A0JB	Bypass Jejunum to Ileum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D1A4JB	Bypass Jejunum to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A87A	Bypass Jejunum to Jejunum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A07A	Bypass Jejunum to Jejunum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1A47A	Bypass Jejunum to Jejunum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A8KA	Bypass Jejunum to Jejunum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A4KA	Bypass Jejunum to Jejunum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A0KA	Bypass Jejunum to Jejunum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D1A4ZA	Bypass Jejunum to Jejunum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A8JA	Bypass Jejunum to Jejunum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A0JA	Bypass Jejunum to Jejunum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D1A4JA	Bypass Jejunum to Jejunum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1A8ZB	Bypass Jejunum to Ileum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A8ZH	Bypass Jejunum to Cecum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A0ZB	Bypass Jejunum to Ileum, Open Approach	Procedure	ICD-10-PCS
0D1A8ZA	Bypass Jejunum to Jejunum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1A0ZA	Bypass Jejunum to Jejunum, Open Approach	Procedure	ICD-10-PCS
0D168K9	Bypass Stomach to Duodenum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D16879	Bypass Stomach to Duodenum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168J9	Bypass Stomach to Duodenum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1687B	Bypass Stomach to Ileum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D168KB	Bypass Stomach to Ileum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D164KB	Bypass Stomach to Ileum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D168JB	Bypass Stomach to Ileum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS

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

Code	Description	Code Category	Code Type
0D168KA	Bypass Stomach to Jejunum with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1687A	Bypass Stomach to Jejunum with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D164KA	Bypass Stomach to Jejunum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D168JA	Bypass Stomach to Jejunum with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D160JA	Bypass Stomach to Jejunum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D16479	Bypass Stomach to Duodenum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D16079	Bypass Stomach to Duodenum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D168Z9	Bypass Stomach to Duodenum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D164K9	Bypass Stomach to Duodenum with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D160K9	Bypass Stomach to Duodenum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D160Z9	Bypass Stomach to Duodenum, Open Approach	Procedure	ICD-10-PCS
0D164Z9	Bypass Stomach to Duodenum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D160J9	Bypass Stomach to Duodenum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D164J9	Bypass Stomach to Duodenum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1647B	Bypass Stomach to Ileum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1607B	Bypass Stomach to Ileum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D168ZB	Bypass Stomach to Ileum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D160KB	Bypass Stomach to Ileum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D160ZB	Bypass Stomach to Ileum, Open Approach	Procedure	ICD-10-PCS
0D164ZB	Bypass Stomach to Ileum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D160JB	Bypass Stomach to Ileum with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D164JB	Bypass Stomach to Ileum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1647A	Bypass Stomach to Jejunum with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1607A	Bypass Stomach to Jejunum with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D168ZA	Bypass Stomach to Jejunum, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D160KA	Bypass Stomach to Jejunum with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D160ZA	Bypass Stomach to Jejunum, Open Approach	Procedure	ICD-10-PCS
0D164ZA	Bypass Stomach to Jejunum, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D164JA	Bypass Stomach to Jejunum with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS

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

Code	Description	Code Category	Code Type
0D1607L	Bypass Stomach to Transverse Colon with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D168ZL	Bypass Stomach to Transverse Colon, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D164JL	Bypass Stomach to Transverse Colon with Synthetic Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D160JL	Bypass Stomach to Transverse Colon with Synthetic Substitute, Open Approach	Procedure	ICD-10-PCS
0D160ZL	Bypass Stomach to Transverse Colon, Open Approach	Procedure	ICD-10-PCS
0D164ZL	Bypass Stomach to Transverse Colon, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D1687L	Bypass Stomach to Transverse Colon with Autologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D1647L	Bypass Stomach to Transverse Colon with Autologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D168KL	Bypass Stomach to Transverse Colon with Nonautologous Tissue Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0D164KL	Bypass Stomach to Transverse Colon with Nonautologous Tissue Substitute, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0D160KL	Bypass Stomach to Transverse Colon with Nonautologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0D168JL	Bypass Stomach to Transverse Colon with Synthetic Substitute, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0DB60ZZ	Excision of Stomach, Open Approach	Procedure	ICD-10-PCS
0DB90ZZ	Excision of Duodenum, Open Approach	Procedure	ICD-10-PCS
0DB80ZZ	Excision of Small Intestine, Open Approach	Procedure	ICD-10-PCS
0DB60Z3	Excision of Stomach, Open Approach, Vertical	Procedure	ICD-10-PCS
0DB63ZZ	Excision of Stomach, Percutaneous Approach	Procedure	ICD-10-PCS
0DBB0ZZ	Excision of Ileum, Open Approach	Procedure	ICD-10-PCS
0DB63Z3	Excision of Stomach, Percutaneous Approach, Vertical	Procedure	ICD-10-PCS
0DB68Z3	Excision of Stomach, Via Natural or Artificial Opening Endoscopic, Vertical	Procedure	ICD-10-PCS
0DB67Z3	Excision of Stomach, Via Natural or Artificial Opening, Vertical	Procedure	ICD-10-PCS
0DB67ZZ	Excision of Stomach, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0DQ64ZZ	Repair Stomach, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0TRB07Z	Replacement of Bladder with Autologous Tissue Substitute, Open Approach	Procedure	ICD-10-PCS
0DV64CZ	Restriction of Stomach with Extraluminal Device, Percutaneous Endoscopic	Procedure	ICD-10-PCS
43644	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and Roux-en-Y gastroenterostomy (roux limb 150 cm or less)	Procedure	CPT-4
43645	Laparoscopy, surgical, gastric restrictive procedure; with gastric bypass and small intestine reconstruction to limit absorption	Procedure	CPT-4
43770	Laparoscopy, surgical, gastric restrictive procedure; placement of adjustable gastric restrictive device (eg, gastric band and subcutaneous port components)	Procedure	CPT-4
43842	Gastric restrictive procedure, without gastric bypass, for morbid obesity; vertical-banded gastroplasty	Procedure	CPT-4

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

Code	Description	Code Category	Code Type
43843	Gastric restrictive procedure, without gastric bypass, for morbid obesity; other than vertical-banded gastroplasty	Procedure	CPT-4
43845	Gastric restrictive procedure with partial gastrectomy, pylorus-preserving duodenoileostomy and ileoileostomy (50 to 100 cm common channel) to limit absorption (biliopancreatic diversion with duodenal switch)	Procedure	CPT-4
43846	Gastric restrictive procedure, with gastric bypass for morbid obesity; with short limb (150 cm or less) Roux-en-Y gastroenterostomy	Procedure	CPT-4
43847	Gastric restrictive procedure, with gastric bypass for morbid obesity; with small intestine reconstruction to limit absorption	Procedure	CPT-4
Osteoporosis			
733.03	Disuse osteoporosis	Diagnosis	ICD-09-CM
733.02	Idiopathic osteoporosis	Diagnosis	ICD-09-CM
733.09	Other osteoporosis	Diagnosis	ICD-09-CM
733.01	Senile osteoporosis	Diagnosis	ICD-09-CM
733.00	Unspecified osteoporosis	Diagnosis	ICD-09-CM
M81.0	Age-related osteoporosis without current pathological fracture	Diagnosis	ICD-10-CM
M81.6	Localized osteoporosis [Lequesne]	Diagnosis	ICD-10-CM
M81.8	Other osteoporosis without current pathological fracture	Diagnosis	ICD-10-CM
Prostate Cancer			
233.4	Carcinoma in situ of prostate	Diagnosis	ICD-09-CM
185	Malignant neoplasm of prostate	Diagnosis	ICD-09-CM
V10.46	Personal history of malignant neoplasm of prostate	Diagnosis	ICD-09-CM
D07.5	Carcinoma in situ of prostate	Diagnosis	ICD-10-CM
C61	Malignant neoplasm of prostate	Diagnosis	ICD-10-CM
Z85.46	Personal history of malignant neoplasm of prostate	Diagnosis	ICD-10-CM
Rheumatoid Arthritis/Osteoarthritis			
720.0	Ankylosing spondylitis	Diagnosis	ICD-09-CM
721.1	Cervical spondylosis with myelopathy	Diagnosis	ICD-09-CM
721.0	Cervical spondylosis without myelopathy	Diagnosis	ICD-09-CM
714.1	Felty's syndrome	Diagnosis	ICD-09-CM
715.09	Generalized osteoarthritis, involving multiple sites	Diagnosis	ICD-09-CM
715.04	Generalized osteoarthritis, involving hand	Diagnosis	ICD-09-CM
715.00	Generalized osteoarthritis, unspecified site	Diagnosis	ICD-09-CM
715.37	Localized osteoarthritis not specified whether primary or secondary, ankle and foot	Diagnosis	ICD-09-CM
715.33	Localized osteoarthritis not specified whether primary or secondary, forearm	Diagnosis	ICD-09-CM
715.36	Localized osteoarthritis not specified whether primary or secondary, lower leg	Diagnosis	ICD-09-CM
715.38	Localized osteoarthritis not specified whether primary or secondary, other specified sites	Diagnosis	ICD-09-CM
715.35	Localized osteoarthritis not specified whether primary or secondary, pelvic region and thigh	Diagnosis	ICD-09-CM

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

Code	Description	Code Category	Code Type
715.31	Localized osteoarthritis not specified whether primary or secondary, shoulder region	Diagnosis	ICD-09-CM
715.30	Localized osteoarthritis not specified whether primary or secondary, unspecified site	Diagnosis	ICD-09-CM
715.32	Localized osteoarthritis not specified whether primary or secondary, upper arm	Diagnosis	ICD-09-CM
715.34	Localized osteoarthritis not specified whether primary or secondary, hand	Diagnosis	ICD-09-CM
721.3	Lumbosacral spondylosis without myelopathy	Diagnosis	ICD-09-CM
714.33	Monoarticular juvenile rheumatoid arthritis	Diagnosis	ICD-09-CM
715.80	Osteoarthritis involving more than one site, but not specified as generalized, unspecified site	Diagnosis	ICD-09-CM
715.89	Osteoarthritis involving multiple sites, but not specified as generalized	Diagnosis	ICD-09-CM
715.98	Osteoarthritis, unspecified whether generalized or localized, other specified sites	Diagnosis	ICD-09-CM
715.95	Osteoarthritis, unspecified whether generalized or localized, pelvic region and thigh	Diagnosis	ICD-09-CM
715.91	Osteoarthritis, unspecified whether generalized or localized, shoulder region	Diagnosis	ICD-09-CM
715.90	Osteoarthritis, unspecified whether generalized or localized, unspecified site	Diagnosis	ICD-09-CM
715.97	Osteoarthritis, unspecified whether generalized or localized, ankle and foot	Diagnosis	ICD-09-CM
715.93	Osteoarthritis, unspecified whether generalized or localized, forearm	Diagnosis	ICD-09-CM
715.96	Osteoarthritis, unspecified whether generalized or localized, lower leg	Diagnosis	ICD-09-CM
715.92	Osteoarthritis, unspecified whether generalized or localized, upper arm	Diagnosis	ICD-09-CM
715.94	Osteoarthritis, unspecified whether generalized or localized, hand	Diagnosis	ICD-09-CM
714.2	Other rheumatoid arthritis with visceral or systemic involvement	Diagnosis	ICD-09-CM
714.32	Pauciarticular juvenile rheumatoid arthritis	Diagnosis	ICD-09-CM
714.31	Polyarticular juvenile rheumatoid arthritis, acute	Diagnosis	ICD-09-CM
714.30	Polyarticular juvenile rheumatoid arthritis, chronic or unspecified	Diagnosis	ICD-09-CM
715.15	Primary localized osteoarthritis, pelvic region and thigh	Diagnosis	ICD-09-CM
715.17	Primary localized osteoarthritis, ankle and foot	Diagnosis	ICD-09-CM
715.13	Primary localized osteoarthritis, forearm	Diagnosis	ICD-09-CM
715.14	Primary localized osteoarthritis, hand	Diagnosis	ICD-09-CM
715.16	Primary localized osteoarthritis, lower leg	Diagnosis	ICD-09-CM
715.18	Primary localized osteoarthritis, other specified sites	Diagnosis	ICD-09-CM
715.11	Primary localized osteoarthritis, shoulder region	Diagnosis	ICD-09-CM
715.10	Primary localized osteoarthritis, unspecified site	Diagnosis	ICD-09-CM
715.12	Primary localized osteoarthritis, upper arm	Diagnosis	ICD-09-CM
714.0	Rheumatoid arthritis	Diagnosis	ICD-09-CM
715.27	Secondary localized osteoarthritis, ankle and foot	Diagnosis	ICD-09-CM
715.24	Secondary localized osteoarthritis, involving hand	Diagnosis	ICD-09-CM
715.28	Secondary localized osteoarthritis, other specified site	Diagnosis	ICD-09-CM
715.25	Secondary localized osteoarthritis, pelvic region and thigh	Diagnosis	ICD-09-CM

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

Code	Description	Code Category	Code Type
715.21	Secondary localized osteoarthritis, shoulder region	Diagnosis	ICD-09-CM
715.20	Secondary localized osteoarthritis, unspecified site	Diagnosis	ICD-09-CM
715.23	Secondary localized osteoarthritis, forearm	Diagnosis	ICD-09-CM
715.26	Secondary localized osteoarthritis, lower leg	Diagnosis	ICD-09-CM
715.22	Secondary localized osteoarthritis, upper arm	Diagnosis	ICD-09-CM
721.91	Spondylosis of unspecified site with myelopathy	Diagnosis	ICD-09-CM
721.90	Spondylosis of unspecified site without mention of myelopathy	Diagnosis	ICD-09-CM
721.2	Thoracic spondylosis without myelopathy	Diagnosis	ICD-09-CM
M06.1	Adult-onset Still's disease	Diagnosis	ICD-10-CM
M45.1	Ankylosing spondylitis of occipito-atlanto-axial region	Diagnosis	ICD-10-CM
M45.6	Ankylosing spondylitis lumbar region	Diagnosis	ICD-10-CM
M45.0	Ankylosing spondylitis of multiple sites in spine	Diagnosis	ICD-10-CM
M45.2	Ankylosing spondylitis of cervical region	Diagnosis	ICD-10-CM
M45.3	Ankylosing spondylitis of cervicothoracic region	Diagnosis	ICD-10-CM
M45.7	Ankylosing spondylitis of lumbosacral region	Diagnosis	ICD-10-CM
M45.4	Ankylosing spondylitis of thoracic region	Diagnosis	ICD-10-CM
M45.5	Ankylosing spondylitis of thoracolumbar region	Diagnosis	ICD-10-CM
M45.8	Ankylosing spondylitis sacral and sacrococcygeal region	Diagnosis	ICD-10-CM
M45.9	Ankylosing spondylitis of unspecified sites in spine	Diagnosis	ICD-10-CM
M47.012	Anterior spinal artery compression syndromes, cervical region	Diagnosis	ICD-10-CM
M47.013	Anterior spinal artery compression syndromes, cervicothoracic region	Diagnosis	ICD-10-CM
M47.014	Anterior spinal artery compression syndromes, thoracic region	Diagnosis	ICD-10-CM
M47.015	Anterior spinal artery compression syndromes, thoracolumbar region	Diagnosis	ICD-10-CM
M47.011	Anterior spinal artery compression syndromes, occipito-atlanto-axial region	Diagnosis	ICD-10-CM
M47.016	Anterior spinal artery compression syndromes, lumbar region	Diagnosis	ICD-10-CM
M47.019	Anterior spinal artery compression syndromes, site unspecified	Diagnosis	ICD-10-CM
M18.2	Bilateral post-traumatic osteoarthritis of first carpometacarpal joints	Diagnosis	ICD-10-CM
M16.2	Bilateral osteoarthritis resulting from hip dysplasia	Diagnosis	ICD-10-CM
M16.4	Bilateral post-traumatic osteoarthritis of hip	Diagnosis	ICD-10-CM
M17.2	Bilateral post-traumatic osteoarthritis of knee	Diagnosis	ICD-10-CM
M18.0	Bilateral primary osteoarthritis of first carpometacarpal joints	Diagnosis	ICD-10-CM
M16.0	Bilateral primary osteoarthritis of hip	Diagnosis	ICD-10-CM
M17.0	Bilateral primary osteoarthritis of knee	Diagnosis	ICD-10-CM
M15.2	Bouchard's nodes (with arthropathy)	Diagnosis	ICD-10-CM
M15.4	Erosive (osteo)arthritis	Diagnosis	ICD-10-CM
M05.072	Felty's syndrome, left ankle and foot	Diagnosis	ICD-10-CM
M05.022	Felty's syndrome, left elbow	Diagnosis	ICD-10-CM
M05.042	Felty's syndrome, left hand	Diagnosis	ICD-10-CM
M05.052	Felty's syndrome, left hip	Diagnosis	ICD-10-CM
M05.062	Felty's syndrome, left knee	Diagnosis	ICD-10-CM
M05.012	Felty's syndrome, left shoulder	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
M05.032	Felty's syndrome, left wrist	Diagnosis	ICD-10-CM
M05.09	Felty's syndrome, multiple sites	Diagnosis	ICD-10-CM
M05.071	Felty's syndrome, right ankle and foot	Diagnosis	ICD-10-CM
M05.021	Felty's syndrome, right elbow	Diagnosis	ICD-10-CM
M05.041	Felty's syndrome, right hand	Diagnosis	ICD-10-CM
M05.051	Felty's syndrome, right hip	Diagnosis	ICD-10-CM
M05.061	Felty's syndrome, right knee	Diagnosis	ICD-10-CM
M05.011	Felty's syndrome, right shoulder	Diagnosis	ICD-10-CM
M05.031	Felty's syndrome, right wrist	Diagnosis	ICD-10-CM
M05.079	Felty's syndrome, unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.029	Felty's syndrome, unspecified elbow	Diagnosis	ICD-10-CM
M05.049	Felty's syndrome, unspecified hand	Diagnosis	ICD-10-CM
M05.059	Felty's syndrome, unspecified hip	Diagnosis	ICD-10-CM
M05.069	Felty's syndrome, unspecified knee	Diagnosis	ICD-10-CM
M05.019	Felty's syndrome, unspecified shoulder	Diagnosis	ICD-10-CM
M05.00	Felty's syndrome, unspecified site	Diagnosis	ICD-10-CM
M05.039	Felty's syndrome, unspecified wrist	Diagnosis	ICD-10-CM
M15.1	Heberden's nodes (with arthropathy)	Diagnosis	ICD-10-CM
M08.1	Juvenile ankylosing spondylitis	Diagnosis	ICD-10-CM
M08.979	Juvenile arthritis, unspecified, unspecified ankle and foot	Diagnosis	ICD-10-CM
M08.919	Juvenile arthritis, unspecified, unspecified shoulder	Diagnosis	ICD-10-CM
M08.972	Juvenile arthritis, unspecified, left ankle and foot	Diagnosis	ICD-10-CM
M08.922	Juvenile arthritis, unspecified, left elbow	Diagnosis	ICD-10-CM
M08.942	Juvenile arthritis, unspecified, left hand	Diagnosis	ICD-10-CM
M08.952	Juvenile arthritis, unspecified, left hip	Diagnosis	ICD-10-CM
M08.962	Juvenile arthritis, unspecified, left knee	Diagnosis	ICD-10-CM
M08.912	Juvenile arthritis, unspecified, left shoulder	Diagnosis	ICD-10-CM
M08.932	Juvenile arthritis, unspecified, left wrist	Diagnosis	ICD-10-CM
M08.99	Juvenile arthritis, unspecified, multiple sites	Diagnosis	ICD-10-CM
M08.921	Juvenile arthritis, unspecified, right elbow	Diagnosis	ICD-10-CM
M08.941	Juvenile arthritis, unspecified, right hand	Diagnosis	ICD-10-CM
M08.951	Juvenile arthritis, unspecified, right hip	Diagnosis	ICD-10-CM
M08.961	Juvenile arthritis, unspecified, right knee	Diagnosis	ICD-10-CM
M08.911	Juvenile arthritis, unspecified, right shoulder	Diagnosis	ICD-10-CM
M08.931	Juvenile arthritis, unspecified, right wrist	Diagnosis	ICD-10-CM
M08.971	Juvenile arthritis, unspecified, right ankle and foot	Diagnosis	ICD-10-CM
M08.929	Juvenile arthritis, unspecified, unspecified elbow	Diagnosis	ICD-10-CM
M08.949	Juvenile arthritis, unspecified, unspecified hand	Diagnosis	ICD-10-CM
M08.959	Juvenile arthritis, unspecified, unspecified hip	Diagnosis	ICD-10-CM
M08.969	Juvenile arthritis, unspecified, unspecified knee	Diagnosis	ICD-10-CM
M08.90	Juvenile arthritis, unspecified, unspecified site	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
M08.939	Juvenile arthritis, unspecified, unspecified wrist	Diagnosis	ICD-10-CM
M08.98	Juvenile arthritis, unspecified, vertebrae	Diagnosis	ICD-10-CM
M08.219	Juvenile rheumatoid arthritis with systemic onset, unspecified shoulder	Diagnosis	ICD-10-CM
M08.222	Juvenile rheumatoid arthritis with systemic onset, left elbow	Diagnosis	ICD-10-CM
M08.242	Juvenile rheumatoid arthritis with systemic onset, left hand	Diagnosis	ICD-10-CM
M08.252	Juvenile rheumatoid arthritis with systemic onset, left hip	Diagnosis	ICD-10-CM
M08.262	Juvenile rheumatoid arthritis with systemic onset, left knee	Diagnosis	ICD-10-CM
M08.212	Juvenile rheumatoid arthritis with systemic onset, left shoulder	Diagnosis	ICD-10-CM
M08.232	Juvenile rheumatoid arthritis with systemic onset, left wrist	Diagnosis	ICD-10-CM
M08.272	Juvenile rheumatoid arthritis with systemic onset, left ankle and foot	Diagnosis	ICD-10-CM
M08.29	Juvenile rheumatoid arthritis with systemic onset, multiple sites	Diagnosis	ICD-10-CM
M08.221	Juvenile rheumatoid arthritis with systemic onset, right elbow	Diagnosis	ICD-10-CM
M08.241	Juvenile rheumatoid arthritis with systemic onset, right hand	Diagnosis	ICD-10-CM
M08.251	Juvenile rheumatoid arthritis with systemic onset, right hip	Diagnosis	ICD-10-CM
M08.261	Juvenile rheumatoid arthritis with systemic onset, right knee	Diagnosis	ICD-10-CM
M08.211	Juvenile rheumatoid arthritis with systemic onset, right shoulder	Diagnosis	ICD-10-CM
M08.231	Juvenile rheumatoid arthritis with systemic onset, right wrist	Diagnosis	ICD-10-CM
M08.271	Juvenile rheumatoid arthritis with systemic onset, right ankle and foot	Diagnosis	ICD-10-CM
M08.279	Juvenile rheumatoid arthritis with systemic onset, unspecified ankle and foot	Diagnosis	ICD-10-CM
M08.229	Juvenile rheumatoid arthritis with systemic onset, unspecified elbow	Diagnosis	ICD-10-CM
M08.239	Juvenile rheumatoid arthritis with systemic onset, unspecified wrist	Diagnosis	ICD-10-CM
M08.249	Juvenile rheumatoid arthritis with systemic onset, unspecified hand	Diagnosis	ICD-10-CM
M08.259	Juvenile rheumatoid arthritis with systemic onset, unspecified hip	Diagnosis	ICD-10-CM
M08.269	Juvenile rheumatoid arthritis with systemic onset, unspecified knee	Diagnosis	ICD-10-CM
M08.20	Juvenile rheumatoid arthritis with systemic onset, unspecified site	Diagnosis	ICD-10-CM
M08.28	Juvenile rheumatoid arthritis with systemic onset, vertebrae	Diagnosis	ICD-10-CM
M08.3	Juvenile rheumatoid polyarthritis (seronegative)	Diagnosis	ICD-10-CM
M18.9	Osteoarthritis of first carpometacarpal joint, unspecified	Diagnosis	ICD-10-CM
M16.9	Osteoarthritis of hip, unspecified	Diagnosis	ICD-10-CM
M17.9	Osteoarthritis of knee, unspecified	Diagnosis	ICD-10-CM
M18.4	Other bilateral secondary osteoarthritis of first carpometacarpal joints	Diagnosis	ICD-10-CM
M06.872	Other specified rheumatoid arthritis, left ankle and foot	Diagnosis	ICD-10-CM
M06.89	Other specified rheumatoid arthritis, multiple sites	Diagnosis	ICD-10-CM
M06.871	Other specified rheumatoid arthritis, right ankle and foot	Diagnosis	ICD-10-CM
M06.879	Other specified rheumatoid arthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M48.8X3	Other specified spondylopathies, cervicothoracic region	Diagnosis	ICD-10-CM
M06.812	Other specified rheumatoid arthritis, left shoulder	Diagnosis	ICD-10-CM
M06.811	Other specified rheumatoid arthritis, right shoulder	Diagnosis	ICD-10-CM
M06.819	Other specified rheumatoid arthritis, unspecified shoulder	Diagnosis	ICD-10-CM
M48.8X1	Other specified spondylopathies, occipito-atlanto-axial region	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
M48.8X8	Other specified spondylopathies, sacral and sacrococcygeal region	Diagnosis	ICD-10-CM
M47.21	Other spondylosis with radiculopathy, occipito-atlanto-axial region	Diagnosis	ICD-10-CM
M47.28	Other spondylosis with radiculopathy, sacral and sacrococcygeal region	Diagnosis	ICD-10-CM
M47.22	Other spondylosis with radiculopathy, cervical region	Diagnosis	ICD-10-CM
M47.23	Other spondylosis with radiculopathy, cervicothoracic region	Diagnosis	ICD-10-CM
M47.26	Other spondylosis with radiculopathy, lumbar region	Diagnosis	ICD-10-CM
M47.27	Other spondylosis with radiculopathy, lumbosacral region	Diagnosis	ICD-10-CM
M47.24	Other spondylosis with radiculopathy, thoracic region	Diagnosis	ICD-10-CM
M47.25	Other spondylosis with radiculopathy, thoracolumbar region	Diagnosis	ICD-10-CM
M18.50	Other unilateral secondary osteoarthritis of first carpometacarpal joint, unspecified hand	Diagnosis	ICD-10-CM
M18.52	Other unilateral secondary osteoarthritis of first carpometacarpal joint, left hand	Diagnosis	ICD-10-CM
M18.51	Other unilateral secondary osteoarthritis of first carpometacarpal joint, right hand	Diagnosis	ICD-10-CM
M16.6	Other bilateral secondary osteoarthritis of hip	Diagnosis	ICD-10-CM
M17.4	Other bilateral secondary osteoarthritis of knee	Diagnosis	ICD-10-CM
M08.872	Other juvenile arthritis, left ankle and foot	Diagnosis	ICD-10-CM
M08.822	Other juvenile arthritis, left elbow	Diagnosis	ICD-10-CM
M08.842	Other juvenile arthritis, left hand	Diagnosis	ICD-10-CM
M08.852	Other juvenile arthritis, left hip	Diagnosis	ICD-10-CM
M08.862	Other juvenile arthritis, left knee	Diagnosis	ICD-10-CM
M08.812	Other juvenile arthritis, left shoulder	Diagnosis	ICD-10-CM
M08.832	Other juvenile arthritis, left wrist	Diagnosis	ICD-10-CM
M08.89	Other juvenile arthritis, multiple sites	Diagnosis	ICD-10-CM
M08.88	Other juvenile arthritis, other specified site	Diagnosis	ICD-10-CM
M08.871	Other juvenile arthritis, right ankle and foot	Diagnosis	ICD-10-CM
M08.821	Other juvenile arthritis, right elbow	Diagnosis	ICD-10-CM
M08.841	Other juvenile arthritis, right hand	Diagnosis	ICD-10-CM
M08.851	Other juvenile arthritis, right hip	Diagnosis	ICD-10-CM
M08.861	Other juvenile arthritis, right knee	Diagnosis	ICD-10-CM
M08.811	Other juvenile arthritis, right shoulder	Diagnosis	ICD-10-CM
M08.831	Other juvenile arthritis, right wrist	Diagnosis	ICD-10-CM
M08.879	Other juvenile arthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M08.829	Other juvenile arthritis, unspecified elbow	Diagnosis	ICD-10-CM
M08.849	Other juvenile arthritis, unspecified hand	Diagnosis	ICD-10-CM
M08.859	Other juvenile arthritis, unspecified hip	Diagnosis	ICD-10-CM
M08.869	Other juvenile arthritis, unspecified knee	Diagnosis	ICD-10-CM
M08.819	Other juvenile arthritis, unspecified shoulder	Diagnosis	ICD-10-CM
M08.80	Other juvenile arthritis, unspecified site	Diagnosis	ICD-10-CM
M08.839	Other juvenile arthritis, unspecified wrist	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
M15.8	Other polyosteoarthritis	Diagnosis	ICD-10-CM
M05.872	Other rheumatoid arthritis with rheumatoid factor of left ankle and foot	Diagnosis	ICD-10-CM
M05.871	Other rheumatoid arthritis with rheumatoid factor of right ankle and foot	Diagnosis	ICD-10-CM
M05.839	Other rheumatoid arthritis with rheumatoid factor of unspecified wrist	Diagnosis	ICD-10-CM
M05.879	Other rheumatoid arthritis with rheumatoid factor of unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.819	Other rheumatoid arthritis with rheumatoid factor of unspecified shoulder	Diagnosis	ICD-10-CM
M05.829	Other rheumatoid arthritis with rheumatoid factor of unspecified elbow	Diagnosis	ICD-10-CM
M05.822	Other rheumatoid arthritis with rheumatoid factor of left elbow	Diagnosis	ICD-10-CM
M05.842	Other rheumatoid arthritis with rheumatoid factor of left hand	Diagnosis	ICD-10-CM
M05.852	Other rheumatoid arthritis with rheumatoid factor of left hip	Diagnosis	ICD-10-CM
M05.862	Other rheumatoid arthritis with rheumatoid factor of left knee	Diagnosis	ICD-10-CM
M05.812	Other rheumatoid arthritis with rheumatoid factor of left shoulder	Diagnosis	ICD-10-CM
M05.832	Other rheumatoid arthritis with rheumatoid factor of left wrist	Diagnosis	ICD-10-CM
M05.89	Other rheumatoid arthritis with rheumatoid factor of multiple sites	Diagnosis	ICD-10-CM
M05.821	Other rheumatoid arthritis with rheumatoid factor of right elbow	Diagnosis	ICD-10-CM
M05.841	Other rheumatoid arthritis with rheumatoid factor of right hand	Diagnosis	ICD-10-CM
M05.851	Other rheumatoid arthritis with rheumatoid factor of right hip	Diagnosis	ICD-10-CM
M05.861	Other rheumatoid arthritis with rheumatoid factor of right knee	Diagnosis	ICD-10-CM
M05.811	Other rheumatoid arthritis with rheumatoid factor of right shoulder	Diagnosis	ICD-10-CM
M05.831	Other rheumatoid arthritis with rheumatoid factor of right wrist	Diagnosis	ICD-10-CM
M05.849	Other rheumatoid arthritis with rheumatoid factor of unspecified hand	Diagnosis	ICD-10-CM
M05.859	Other rheumatoid arthritis with rheumatoid factor of unspecified hip	Diagnosis	ICD-10-CM
M05.869	Other rheumatoid arthritis with rheumatoid factor of unspecified knee	Diagnosis	ICD-10-CM
M05.80	Other rheumatoid arthritis with rheumatoid factor of unspecified site	Diagnosis	ICD-10-CM
M48.8X7	Other specified spondylopathies, lumbosacral region	Diagnosis	ICD-10-CM
M48.8X5	Other specified spondylopathies, thoracolumbar region	Diagnosis	ICD-10-CM
M06.80	Other specified rheumatoid arthritis, unspecified site	Diagnosis	ICD-10-CM
M06.822	Other specified rheumatoid arthritis, left elbow	Diagnosis	ICD-10-CM
M06.842	Other specified rheumatoid arthritis, left hand	Diagnosis	ICD-10-CM
M06.852	Other specified rheumatoid arthritis, left hip	Diagnosis	ICD-10-CM
M06.862	Other specified rheumatoid arthritis, left knee	Diagnosis	ICD-10-CM
M06.832	Other specified rheumatoid arthritis, left wrist	Diagnosis	ICD-10-CM
M06.821	Other specified rheumatoid arthritis, right elbow	Diagnosis	ICD-10-CM
M06.841	Other specified rheumatoid arthritis, right hand	Diagnosis	ICD-10-CM
M06.851	Other specified rheumatoid arthritis, right hip	Diagnosis	ICD-10-CM
M06.861	Other specified rheumatoid arthritis, right knee	Diagnosis	ICD-10-CM
M06.831	Other specified rheumatoid arthritis, right wrist	Diagnosis	ICD-10-CM
M06.859	Other specified rheumatoid arthritis, unspecified hip	Diagnosis	ICD-10-CM
M06.829	Other specified rheumatoid arthritis, unspecified elbow	Diagnosis	ICD-10-CM
M06.849	Other specified rheumatoid arthritis, unspecified hand	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
M06.869	Other specified rheumatoid arthritis, unspecified knee	Diagnosis	ICD-10-CM
M06.839	Other specified rheumatoid arthritis, unspecified wrist	Diagnosis	ICD-10-CM
M06.88	Other specified rheumatoid arthritis, vertebrae	Diagnosis	ICD-10-CM
M48.8X2	Other specified spondylopathies, cervical region	Diagnosis	ICD-10-CM
M48.8X6	Other specified spondylopathies, lumbar region	Diagnosis	ICD-10-CM
M48.8X9	Other specified spondylopathies, site unspecified	Diagnosis	ICD-10-CM
M48.8X4	Other specified spondylopathies, thoracic region	Diagnosis	ICD-10-CM
M47.11	Other spondylosis with myelopathy, occipito-atlanto-axial region	Diagnosis	ICD-10-CM
M47.892	Other spondylosis, cervical region	Diagnosis	ICD-10-CM
M47.893	Other spondylosis, cervicothoracic region	Diagnosis	ICD-10-CM
M47.896	Other spondylosis, lumbar region	Diagnosis	ICD-10-CM
M47.897	Other spondylosis, lumbosacral region	Diagnosis	ICD-10-CM
M47.891	Other spondylosis, occipito-atlanto-axial region	Diagnosis	ICD-10-CM
M47.898	Other spondylosis, sacral and sacrococcygeal region	Diagnosis	ICD-10-CM
M47.899	Other spondylosis, site unspecified	Diagnosis	ICD-10-CM
M47.894	Other spondylosis, thoracic region	Diagnosis	ICD-10-CM
M47.895	Other spondylosis, thoracolumbar region	Diagnosis	ICD-10-CM
M47.10	Other spondylosis with myelopathy, site unspecified	Diagnosis	ICD-10-CM
M47.12	Other spondylosis with myelopathy, cervical region	Diagnosis	ICD-10-CM
M47.13	Other spondylosis with myelopathy, cervicothoracic region	Diagnosis	ICD-10-CM
M47.20	Other spondylosis with radiculopathy, site unspecified	Diagnosis	ICD-10-CM
M17.5	Other unilateral secondary osteoarthritis of knee	Diagnosis	ICD-10-CM
M16.7	Other unilateral secondary osteoarthritis of hip	Diagnosis	ICD-10-CM
M08.472	Pauciarticular juvenile rheumatoid arthritis, left ankle and foot	Diagnosis	ICD-10-CM
M08.422	Pauciarticular juvenile rheumatoid arthritis, left elbow	Diagnosis	ICD-10-CM
M08.442	Pauciarticular juvenile rheumatoid arthritis, left hand	Diagnosis	ICD-10-CM
M08.452	Pauciarticular juvenile rheumatoid arthritis, left hip	Diagnosis	ICD-10-CM
M08.462	Pauciarticular juvenile rheumatoid arthritis, left knee	Diagnosis	ICD-10-CM
M08.412	Pauciarticular juvenile rheumatoid arthritis, left shoulder	Diagnosis	ICD-10-CM
M08.432	Pauciarticular juvenile rheumatoid arthritis, left wrist	Diagnosis	ICD-10-CM
M08.471	Pauciarticular juvenile rheumatoid arthritis, right ankle and foot	Diagnosis	ICD-10-CM
M08.421	Pauciarticular juvenile rheumatoid arthritis, right elbow	Diagnosis	ICD-10-CM
M08.441	Pauciarticular juvenile rheumatoid arthritis, right hand	Diagnosis	ICD-10-CM
M08.451	Pauciarticular juvenile rheumatoid arthritis, right hip	Diagnosis	ICD-10-CM
M08.461	Pauciarticular juvenile rheumatoid arthritis, right knee	Diagnosis	ICD-10-CM
M08.411	Pauciarticular juvenile rheumatoid arthritis, right shoulder	Diagnosis	ICD-10-CM
M08.431	Pauciarticular juvenile rheumatoid arthritis, right wrist	Diagnosis	ICD-10-CM
M08.479	Pauciarticular juvenile rheumatoid arthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M08.429	Pauciarticular juvenile rheumatoid arthritis, unspecified elbow	Diagnosis	ICD-10-CM
M08.449	Pauciarticular juvenile rheumatoid arthritis, unspecified hand	Diagnosis	ICD-10-CM
M08.459	Pauciarticular juvenile rheumatoid arthritis, unspecified hip	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
M08.469	Pauciarticular juvenile rheumatoid arthritis, unspecified knee	Diagnosis	ICD-10-CM
M08.419	Pauciarticular juvenile rheumatoid arthritis, unspecified shoulder	Diagnosis	ICD-10-CM
M08.40	Pauciarticular juvenile rheumatoid arthritis, unspecified site	Diagnosis	ICD-10-CM
M08.439	Pauciarticular juvenile rheumatoid arthritis, unspecified wrist	Diagnosis	ICD-10-CM
M08.48	Pauciarticular juvenile rheumatoid arthritis, vertebrae	Diagnosis	ICD-10-CM
M15.9	Polyosteoarthritis, unspecified	Diagnosis	ICD-10-CM
M19.172	Post-traumatic osteoarthritis, left ankle and foot	Diagnosis	ICD-10-CM
M19.122	Post-traumatic osteoarthritis, left elbow	Diagnosis	ICD-10-CM
M19.142	Post-traumatic osteoarthritis, left hand	Diagnosis	ICD-10-CM
M19.112	Post-traumatic osteoarthritis, left shoulder	Diagnosis	ICD-10-CM
M19.132	Post-traumatic osteoarthritis, left wrist	Diagnosis	ICD-10-CM
M19.171	Post-traumatic osteoarthritis, right ankle and foot	Diagnosis	ICD-10-CM
M19.121	Post-traumatic osteoarthritis, right elbow	Diagnosis	ICD-10-CM
M19.141	Post-traumatic osteoarthritis, right hand	Diagnosis	ICD-10-CM
M19.111	Post-traumatic osteoarthritis, right shoulder	Diagnosis	ICD-10-CM
M19.131	Post-traumatic osteoarthritis, right wrist	Diagnosis	ICD-10-CM
M19.179	Post-traumatic osteoarthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M19.119	Post-traumatic osteoarthritis, unspecified shoulder	Diagnosis	ICD-10-CM
M19.129	Post-traumatic osteoarthritis, unspecified elbow	Diagnosis	ICD-10-CM
M19.149	Post-traumatic osteoarthritis, unspecified hand	Diagnosis	ICD-10-CM
M19.92	Post-traumatic osteoarthritis, unspecified site	Diagnosis	ICD-10-CM
M19.139	Post-traumatic osteoarthritis, unspecified wrist	Diagnosis	ICD-10-CM
M15.0	Primary generalized (osteo)arthritis	Diagnosis	ICD-10-CM
M19.072	Primary osteoarthritis, left ankle and foot	Diagnosis	ICD-10-CM
M19.022	Primary osteoarthritis, left elbow	Diagnosis	ICD-10-CM
M19.042	Primary osteoarthritis, left hand	Diagnosis	ICD-10-CM
M19.012	Primary osteoarthritis, left shoulder	Diagnosis	ICD-10-CM
M19.032	Primary osteoarthritis, left wrist	Diagnosis	ICD-10-CM
M19.071	Primary osteoarthritis, right ankle and foot	Diagnosis	ICD-10-CM
M19.021	Primary osteoarthritis, right elbow	Diagnosis	ICD-10-CM
M19.041	Primary osteoarthritis, right hand	Diagnosis	ICD-10-CM
M19.011	Primary osteoarthritis, right shoulder	Diagnosis	ICD-10-CM
M19.031	Primary osteoarthritis, right wrist	Diagnosis	ICD-10-CM
M19.079	Primary osteoarthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M19.029	Primary osteoarthritis, unspecified elbow	Diagnosis	ICD-10-CM
M19.049	Primary osteoarthritis, unspecified hand	Diagnosis	ICD-10-CM
M19.019	Primary osteoarthritis, unspecified shoulder	Diagnosis	ICD-10-CM
M19.91	Primary osteoarthritis, unspecified site	Diagnosis	ICD-10-CM
M19.039	Primary osteoarthritis, unspecified wrist	Diagnosis	ICD-10-CM
M05.672	Rheumatoid arthritis of left ankle and foot with involvement of other organs and systems	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
M05.622	Rheumatoid arthritis of left elbow with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.642	Rheumatoid arthritis of left hand with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.652	Rheumatoid arthritis of left hip with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.662	Rheumatoid arthritis of left knee with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.612	Rheumatoid arthritis of left shoulder with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.632	Rheumatoid arthritis of left wrist with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.69	Rheumatoid arthritis of multiple sites with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.671	Rheumatoid arthritis of right ankle and foot with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.621	Rheumatoid arthritis of right elbow with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.641	Rheumatoid arthritis of right hand with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.651	Rheumatoid arthritis of right hip with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.661	Rheumatoid arthritis of right knee with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.611	Rheumatoid arthritis of right shoulder with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.631	Rheumatoid arthritis of right wrist with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.679	Rheumatoid arthritis of unspecified ankle and foot with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.629	Rheumatoid arthritis of unspecified elbow with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.649	Rheumatoid arthritis of unspecified hand with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.659	Rheumatoid arthritis of unspecified hip with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.669	Rheumatoid arthritis of unspecified knee with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.619	Rheumatoid arthritis of unspecified shoulder with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.60	Rheumatoid arthritis of unspecified site with involvement of other organs and systems	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
M05.639	Rheumatoid arthritis of unspecified wrist with involvement of other organs and systems	Diagnosis	ICD-10-CM
M05.772	Rheumatoid arthritis with rheumatoid factor of left ankle and foot without organ or systems involvement	Diagnosis	ICD-10-CM
M05.771	Rheumatoid arthritis with rheumatoid factor of right ankle and foot without organ or systems involvement	Diagnosis	ICD-10-CM
M05.779	Rheumatoid arthritis with rheumatoid factor of unspecified ankle and foot without organ or systems involvement	Diagnosis	ICD-10-CM
M05.722	Rheumatoid arthritis with rheumatoid factor of left elbow without organ or systems involvement	Diagnosis	ICD-10-CM
M05.742	Rheumatoid arthritis with rheumatoid factor of left hand without organ or systems involvement	Diagnosis	ICD-10-CM
M05.752	Rheumatoid arthritis with rheumatoid factor of left hip without organ or systems involvement	Diagnosis	ICD-10-CM
M05.762	Rheumatoid arthritis with rheumatoid factor of left knee without organ or systems involvement	Diagnosis	ICD-10-CM
M05.712	Rheumatoid arthritis with rheumatoid factor of left shoulder without organ or systems involvement	Diagnosis	ICD-10-CM
M05.732	Rheumatoid arthritis with rheumatoid factor of left wrist without organ or systems involvement	Diagnosis	ICD-10-CM
M05.79	Rheumatoid arthritis with rheumatoid factor of multiple sites without organ or systems involvement	Diagnosis	ICD-10-CM
M05.721	Rheumatoid arthritis with rheumatoid factor of right elbow without organ or systems involvement	Diagnosis	ICD-10-CM
M05.741	Rheumatoid arthritis with rheumatoid factor of right hand without organ or systems involvement	Diagnosis	ICD-10-CM
M05.751	Rheumatoid arthritis with rheumatoid factor of right hip without organ or systems involvement	Diagnosis	ICD-10-CM
M05.761	Rheumatoid arthritis with rheumatoid factor of right knee without organ or systems involvement	Diagnosis	ICD-10-CM
M05.711	Rheumatoid arthritis with rheumatoid factor of right shoulder without organ or systems involvement	Diagnosis	ICD-10-CM
M05.731	Rheumatoid arthritis with rheumatoid factor of right wrist without organ or systems involvement	Diagnosis	ICD-10-CM
M05.729	Rheumatoid arthritis with rheumatoid factor of unspecified elbow without organ or systems involvement	Diagnosis	ICD-10-CM
M05.749	Rheumatoid arthritis with rheumatoid factor of unspecified hand without organ or systems involvement	Diagnosis	ICD-10-CM
M05.759	Rheumatoid arthritis with rheumatoid factor of unspecified hip without organ or systems involvement	Diagnosis	ICD-10-CM

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Code	Description	Code Category	Code Type
M05.769	Rheumatoid arthritis with rheumatoid factor of unspecified knee without organ or systems involvement	Diagnosis	ICD-10-CM
M05.719	Rheumatoid arthritis with rheumatoid factor of unspecified shoulder without organ or systems involvement	Diagnosis	ICD-10-CM
M05.70	Rheumatoid arthritis with rheumatoid factor of unspecified site without organ or systems involvement	Diagnosis	ICD-10-CM
M05.739	Rheumatoid arthritis with rheumatoid factor of unspecified wrist without organ or systems involvement	Diagnosis	ICD-10-CM
M05.9	Rheumatoid arthritis with rheumatoid factor, unspecified	Diagnosis	ICD-10-CM
M06.072	Rheumatoid arthritis without rheumatoid factor, left ankle and foot	Diagnosis	ICD-10-CM
M06.022	Rheumatoid arthritis without rheumatoid factor, left elbow	Diagnosis	ICD-10-CM
M06.042	Rheumatoid arthritis without rheumatoid factor, left hand	Diagnosis	ICD-10-CM
M06.052	Rheumatoid arthritis without rheumatoid factor, left hip	Diagnosis	ICD-10-CM
M06.062	Rheumatoid arthritis without rheumatoid factor, left knee	Diagnosis	ICD-10-CM
M06.012	Rheumatoid arthritis without rheumatoid factor, left shoulder	Diagnosis	ICD-10-CM
M06.032	Rheumatoid arthritis without rheumatoid factor, left wrist	Diagnosis	ICD-10-CM
M06.09	Rheumatoid arthritis without rheumatoid factor, multiple sites	Diagnosis	ICD-10-CM
M06.071	Rheumatoid arthritis without rheumatoid factor, right ankle and foot	Diagnosis	ICD-10-CM
M06.021	Rheumatoid arthritis without rheumatoid factor, right elbow	Diagnosis	ICD-10-CM
M06.041	Rheumatoid arthritis without rheumatoid factor, right hand	Diagnosis	ICD-10-CM
M06.051	Rheumatoid arthritis without rheumatoid factor, right hip	Diagnosis	ICD-10-CM
M06.061	Rheumatoid arthritis without rheumatoid factor, right knee	Diagnosis	ICD-10-CM
M06.011	Rheumatoid arthritis without rheumatoid factor, right shoulder	Diagnosis	ICD-10-CM
M06.031	Rheumatoid arthritis without rheumatoid factor, right wrist	Diagnosis	ICD-10-CM
M06.079	Rheumatoid arthritis without rheumatoid factor, unspecified ankle and foot	Diagnosis	ICD-10-CM
M06.019	Rheumatoid arthritis without rheumatoid factor, unspecified shoulder	Diagnosis	ICD-10-CM
M06.029	Rheumatoid arthritis without rheumatoid factor, unspecified elbow	Diagnosis	ICD-10-CM
M06.049	Rheumatoid arthritis without rheumatoid factor, unspecified hand	Diagnosis	ICD-10-CM
M06.059	Rheumatoid arthritis without rheumatoid factor, unspecified hip	Diagnosis	ICD-10-CM
M06.069	Rheumatoid arthritis without rheumatoid factor, unspecified knee	Diagnosis	ICD-10-CM
M06.00	Rheumatoid arthritis without rheumatoid factor, unspecified site	Diagnosis	ICD-10-CM
M06.039	Rheumatoid arthritis without rheumatoid factor, unspecified wrist	Diagnosis	ICD-10-CM
M06.08	Rheumatoid arthritis without rheumatoid factor, vertebrae	Diagnosis	ICD-10-CM
M06.9	Rheumatoid arthritis, unspecified	Diagnosis	ICD-10-CM
M06.272	Rheumatoid bursitis, left ankle and foot	Diagnosis	ICD-10-CM
M06.222	Rheumatoid bursitis, left elbow	Diagnosis	ICD-10-CM
M06.242	Rheumatoid bursitis, left hand	Diagnosis	ICD-10-CM
M06.252	Rheumatoid bursitis, left hip	Diagnosis	ICD-10-CM
M06.262	Rheumatoid bursitis, left knee	Diagnosis	ICD-10-CM
M06.212	Rheumatoid bursitis, left shoulder	Diagnosis	ICD-10-CM
M06.232	Rheumatoid bursitis, left wrist	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
M06.29	Rheumatoid bursitis, multiple sites	Diagnosis	ICD-10-CM
M06.271	Rheumatoid bursitis, right ankle and foot	Diagnosis	ICD-10-CM
M06.221	Rheumatoid bursitis, right elbow	Diagnosis	ICD-10-CM
M06.241	Rheumatoid bursitis, right hand	Diagnosis	ICD-10-CM
M06.251	Rheumatoid bursitis, right hip	Diagnosis	ICD-10-CM
M06.261	Rheumatoid bursitis, right knee	Diagnosis	ICD-10-CM
M06.211	Rheumatoid bursitis, right shoulder	Diagnosis	ICD-10-CM
M06.231	Rheumatoid bursitis, right wrist	Diagnosis	ICD-10-CM
M06.279	Rheumatoid bursitis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M06.229	Rheumatoid bursitis, unspecified elbow	Diagnosis	ICD-10-CM
M06.249	Rheumatoid bursitis, unspecified hand	Diagnosis	ICD-10-CM
M06.259	Rheumatoid bursitis, unspecified hip	Diagnosis	ICD-10-CM
M06.269	Rheumatoid bursitis, unspecified knee	Diagnosis	ICD-10-CM
M06.219	Rheumatoid bursitis, unspecified shoulder	Diagnosis	ICD-10-CM
M06.20	Rheumatoid bursitis, unspecified site	Diagnosis	ICD-10-CM
M06.239	Rheumatoid bursitis, unspecified wrist	Diagnosis	ICD-10-CM
M06.28	Rheumatoid bursitis, vertebrae	Diagnosis	ICD-10-CM
M05.372	Rheumatoid heart disease with rheumatoid arthritis of left ankle and foot	Diagnosis	ICD-10-CM
M05.329	Rheumatoid heart disease with rheumatoid arthritis of unspecified elbow	Diagnosis	ICD-10-CM
M05.349	Rheumatoid heart disease with rheumatoid arthritis of unspecified hand	Diagnosis	ICD-10-CM
M05.369	Rheumatoid heart disease with rheumatoid arthritis of unspecified knee	Diagnosis	ICD-10-CM
M05.30	Rheumatoid heart disease with rheumatoid arthritis of unspecified site	Diagnosis	ICD-10-CM
M05.339	Rheumatoid heart disease with rheumatoid arthritis of unspecified wrist	Diagnosis	ICD-10-CM
M05.371	Rheumatoid heart disease with rheumatoid arthritis of right ankle and foot	Diagnosis	ICD-10-CM
M05.379	Rheumatoid heart disease with rheumatoid arthritis of unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.319	Rheumatoid heart disease with rheumatoid arthritis of unspecified shoulder	Diagnosis	ICD-10-CM
M05.322	Rheumatoid heart disease with rheumatoid arthritis of left elbow	Diagnosis	ICD-10-CM
M05.342	Rheumatoid heart disease with rheumatoid arthritis of left hand	Diagnosis	ICD-10-CM
M05.352	Rheumatoid heart disease with rheumatoid arthritis of left hip	Diagnosis	ICD-10-CM
M05.362	Rheumatoid heart disease with rheumatoid arthritis of left knee	Diagnosis	ICD-10-CM
M05.312	Rheumatoid heart disease with rheumatoid arthritis of left shoulder	Diagnosis	ICD-10-CM
M05.332	Rheumatoid heart disease with rheumatoid arthritis of left wrist	Diagnosis	ICD-10-CM
M05.39	Rheumatoid heart disease with rheumatoid arthritis of multiple sites	Diagnosis	ICD-10-CM
M05.321	Rheumatoid heart disease with rheumatoid arthritis of right elbow	Diagnosis	ICD-10-CM
M05.341	Rheumatoid heart disease with rheumatoid arthritis of right hand	Diagnosis	ICD-10-CM
M05.351	Rheumatoid heart disease with rheumatoid arthritis of right hip	Diagnosis	ICD-10-CM
M05.361	Rheumatoid heart disease with rheumatoid arthritis of right knee	Diagnosis	ICD-10-CM
M05.311	Rheumatoid heart disease with rheumatoid arthritis of right shoulder	Diagnosis	ICD-10-CM
M05.331	Rheumatoid heart disease with rheumatoid arthritis of right wrist	Diagnosis	ICD-10-CM
M05.359	Rheumatoid heart disease with rheumatoid arthritis of unspecified hip	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
M05.479	Rheumatoid myopathy with rheumatoid arthritis of unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.472	Rheumatoid myopathy with rheumatoid arthritis of left ankle and foot	Diagnosis	ICD-10-CM
M05.422	Rheumatoid myopathy with rheumatoid arthritis of left elbow	Diagnosis	ICD-10-CM
M05.442	Rheumatoid myopathy with rheumatoid arthritis of left hand	Diagnosis	ICD-10-CM
M05.452	Rheumatoid myopathy with rheumatoid arthritis of left hip	Diagnosis	ICD-10-CM
M05.462	Rheumatoid myopathy with rheumatoid arthritis of left knee	Diagnosis	ICD-10-CM
M05.412	Rheumatoid myopathy with rheumatoid arthritis of left shoulder	Diagnosis	ICD-10-CM
M05.432	Rheumatoid myopathy with rheumatoid arthritis of left wrist	Diagnosis	ICD-10-CM
M05.49	Rheumatoid myopathy with rheumatoid arthritis of multiple sites	Diagnosis	ICD-10-CM
M05.471	Rheumatoid myopathy with rheumatoid arthritis of right ankle and foot	Diagnosis	ICD-10-CM
M05.421	Rheumatoid myopathy with rheumatoid arthritis of right elbow	Diagnosis	ICD-10-CM
M05.441	Rheumatoid myopathy with rheumatoid arthritis of right hand	Diagnosis	ICD-10-CM
M05.451	Rheumatoid myopathy with rheumatoid arthritis of right hip	Diagnosis	ICD-10-CM
M05.461	Rheumatoid myopathy with rheumatoid arthritis of right knee	Diagnosis	ICD-10-CM
M05.411	Rheumatoid myopathy with rheumatoid arthritis of right shoulder	Diagnosis	ICD-10-CM
M05.431	Rheumatoid myopathy with rheumatoid arthritis of right wrist	Diagnosis	ICD-10-CM
M05.429	Rheumatoid myopathy with rheumatoid arthritis of unspecified elbow	Diagnosis	ICD-10-CM
M05.449	Rheumatoid myopathy with rheumatoid arthritis of unspecified hand	Diagnosis	ICD-10-CM
M05.459	Rheumatoid myopathy with rheumatoid arthritis of unspecified hip	Diagnosis	ICD-10-CM
M05.469	Rheumatoid myopathy with rheumatoid arthritis of unspecified knee	Diagnosis	ICD-10-CM
M05.419	Rheumatoid myopathy with rheumatoid arthritis of unspecified shoulder	Diagnosis	ICD-10-CM
M05.40	Rheumatoid myopathy with rheumatoid arthritis of unspecified site	Diagnosis	ICD-10-CM
M05.439	Rheumatoid myopathy with rheumatoid arthritis of unspecified wrist	Diagnosis	ICD-10-CM
M06.372	Rheumatoid nodule, left ankle and foot	Diagnosis	ICD-10-CM
M06.322	Rheumatoid nodule, left elbow	Diagnosis	ICD-10-CM
M06.342	Rheumatoid nodule, left hand	Diagnosis	ICD-10-CM
M06.352	Rheumatoid nodule, left hip	Diagnosis	ICD-10-CM
M06.362	Rheumatoid nodule, left knee	Diagnosis	ICD-10-CM
M06.312	Rheumatoid nodule, left shoulder	Diagnosis	ICD-10-CM
M06.332	Rheumatoid nodule, left wrist	Diagnosis	ICD-10-CM
M06.39	Rheumatoid nodule, multiple sites	Diagnosis	ICD-10-CM
M06.371	Rheumatoid nodule, right ankle and foot	Diagnosis	ICD-10-CM
M06.321	Rheumatoid nodule, right elbow	Diagnosis	ICD-10-CM
M06.341	Rheumatoid nodule, right hand	Diagnosis	ICD-10-CM
M06.351	Rheumatoid nodule, right hip	Diagnosis	ICD-10-CM
M06.361	Rheumatoid nodule, right knee	Diagnosis	ICD-10-CM
M06.311	Rheumatoid nodule, right shoulder	Diagnosis	ICD-10-CM
M06.331	Rheumatoid nodule, right wrist	Diagnosis	ICD-10-CM
M06.379	Rheumatoid nodule, unspecified ankle and foot	Diagnosis	ICD-10-CM
M06.329	Rheumatoid nodule, unspecified elbow	Diagnosis	ICD-10-CM
M06.349	Rheumatoid nodule, unspecified hand	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
M06.359	Rheumatoid nodule, unspecified hip	Diagnosis	ICD-10-CM
M06.369	Rheumatoid nodule, unspecified knee	Diagnosis	ICD-10-CM
M06.319	Rheumatoid nodule, unspecified shoulder	Diagnosis	ICD-10-CM
M06.30	Rheumatoid nodule, unspecified site	Diagnosis	ICD-10-CM
M06.339	Rheumatoid nodule, unspecified wrist	Diagnosis	ICD-10-CM
M06.38	Rheumatoid nodule, vertebrae	Diagnosis	ICD-10-CM
M05.549	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified hand	Diagnosis	ICD-10-CM
M05.559	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified hip	Diagnosis	ICD-10-CM
M05.569	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified knee	Diagnosis	ICD-10-CM
M05.50	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified site	Diagnosis	ICD-10-CM
M05.572	Rheumatoid polyneuropathy with rheumatoid arthritis of left ankle and foot	Diagnosis	ICD-10-CM
M05.571	Rheumatoid polyneuropathy with rheumatoid arthritis of right ankle and foot	Diagnosis	ICD-10-CM
M05.579	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.529	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified elbow	Diagnosis	ICD-10-CM
M05.519	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified shoulder	Diagnosis	ICD-10-CM
M05.539	Rheumatoid polyneuropathy with rheumatoid arthritis of unspecified wrist	Diagnosis	ICD-10-CM
M05.522	Rheumatoid polyneuropathy with rheumatoid arthritis of left elbow	Diagnosis	ICD-10-CM
M05.542	Rheumatoid polyneuropathy with rheumatoid arthritis of left hand	Diagnosis	ICD-10-CM
M05.552	Rheumatoid polyneuropathy with rheumatoid arthritis of left hip	Diagnosis	ICD-10-CM
M05.562	Rheumatoid polyneuropathy with rheumatoid arthritis of left knee	Diagnosis	ICD-10-CM
M05.512	Rheumatoid polyneuropathy with rheumatoid arthritis of left shoulder	Diagnosis	ICD-10-CM
M05.532	Rheumatoid polyneuropathy with rheumatoid arthritis of left wrist	Diagnosis	ICD-10-CM
M05.59	Rheumatoid polyneuropathy with rheumatoid arthritis of multiple sites	Diagnosis	ICD-10-CM
M05.521	Rheumatoid polyneuropathy with rheumatoid arthritis of right elbow	Diagnosis	ICD-10-CM
M05.541	Rheumatoid polyneuropathy with rheumatoid arthritis of right hand	Diagnosis	ICD-10-CM
M05.551	Rheumatoid polyneuropathy with rheumatoid arthritis of right hip	Diagnosis	ICD-10-CM
M05.561	Rheumatoid polyneuropathy with rheumatoid arthritis of right knee	Diagnosis	ICD-10-CM
M05.511	Rheumatoid polyneuropathy with rheumatoid arthritis of right shoulder	Diagnosis	ICD-10-CM
M05.531	Rheumatoid polyneuropathy with rheumatoid arthritis of right wrist	Diagnosis	ICD-10-CM
M05.219	Rheumatoid vasculitis with rheumatoid arthritis of unspecified shoulder	Diagnosis	ICD-10-CM
M05.279	Rheumatoid vasculitis with rheumatoid arthritis of unspecified ankle and foot	Diagnosis	ICD-10-CM
M05.272	Rheumatoid vasculitis with rheumatoid arthritis of left ankle and foot	Diagnosis	ICD-10-CM
M05.222	Rheumatoid vasculitis with rheumatoid arthritis of left elbow	Diagnosis	ICD-10-CM
M05.242	Rheumatoid vasculitis with rheumatoid arthritis of left hand	Diagnosis	ICD-10-CM
M05.252	Rheumatoid vasculitis with rheumatoid arthritis of left hip	Diagnosis	ICD-10-CM
M05.262	Rheumatoid vasculitis with rheumatoid arthritis of left knee	Diagnosis	ICD-10-CM
M05.212	Rheumatoid vasculitis with rheumatoid arthritis of left shoulder	Diagnosis	ICD-10-CM
M05.232	Rheumatoid vasculitis with rheumatoid arthritis of left wrist	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
M05.29	Rheumatoid vasculitis with rheumatoid arthritis of multiple sites	Diagnosis	ICD-10-CM
M05.271	Rheumatoid vasculitis with rheumatoid arthritis of right ankle and foot	Diagnosis	ICD-10-CM
M05.221	Rheumatoid vasculitis with rheumatoid arthritis of right elbow	Diagnosis	ICD-10-CM
M05.241	Rheumatoid vasculitis with rheumatoid arthritis of right hand	Diagnosis	ICD-10-CM
M05.251	Rheumatoid vasculitis with rheumatoid arthritis of right hip	Diagnosis	ICD-10-CM
M05.261	Rheumatoid vasculitis with rheumatoid arthritis of right knee	Diagnosis	ICD-10-CM
M05.211	Rheumatoid vasculitis with rheumatoid arthritis of right shoulder	Diagnosis	ICD-10-CM
M05.231	Rheumatoid vasculitis with rheumatoid arthritis of right wrist	Diagnosis	ICD-10-CM
M05.229	Rheumatoid vasculitis with rheumatoid arthritis of unspecified elbow	Diagnosis	ICD-10-CM
M05.249	Rheumatoid vasculitis with rheumatoid arthritis of unspecified hand	Diagnosis	ICD-10-CM
M05.259	Rheumatoid vasculitis with rheumatoid arthritis of unspecified hip	Diagnosis	ICD-10-CM
M05.269	Rheumatoid vasculitis with rheumatoid arthritis of unspecified knee	Diagnosis	ICD-10-CM
M05.20	Rheumatoid vasculitis with rheumatoid arthritis of unspecified site	Diagnosis	ICD-10-CM
M05.239	Rheumatoid vasculitis with rheumatoid arthritis of unspecified wrist	Diagnosis	ICD-10-CM
M19.279	Secondary osteoarthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M15.3	Secondary multiple arthritis	Diagnosis	ICD-10-CM
M19.272	Secondary osteoarthritis, left ankle and foot	Diagnosis	ICD-10-CM
M19.222	Secondary osteoarthritis, left elbow	Diagnosis	ICD-10-CM
M19.242	Secondary osteoarthritis, left hand	Diagnosis	ICD-10-CM
M19.212	Secondary osteoarthritis, left shoulder	Diagnosis	ICD-10-CM
M19.232	Secondary osteoarthritis, left wrist	Diagnosis	ICD-10-CM
M19.271	Secondary osteoarthritis, right ankle and foot	Diagnosis	ICD-10-CM
M19.221	Secondary osteoarthritis, right elbow	Diagnosis	ICD-10-CM
M19.241	Secondary osteoarthritis, right hand	Diagnosis	ICD-10-CM
M19.211	Secondary osteoarthritis, right shoulder	Diagnosis	ICD-10-CM
M19.231	Secondary osteoarthritis, right wrist	Diagnosis	ICD-10-CM
M19.229	Secondary osteoarthritis, unspecified elbow	Diagnosis	ICD-10-CM
M19.249	Secondary osteoarthritis, unspecified hand	Diagnosis	ICD-10-CM
M19.219	Secondary osteoarthritis, unspecified shoulder	Diagnosis	ICD-10-CM
M19.93	Secondary osteoarthritis, unspecified site	Diagnosis	ICD-10-CM
M19.239	Secondary osteoarthritis, unspecified wrist	Diagnosis	ICD-10-CM
M47.9	Spondylosis, unspecified	Diagnosis	ICD-10-CM
M47.811	Spondylosis without myelopathy or radiculopathy, occipito-atlanto-axial region	Diagnosis	ICD-10-CM
M47.818	Spondylosis without myelopathy or radiculopathy, sacral and sacrococcygeal region	Diagnosis	ICD-10-CM
M47.812	Spondylosis without myelopathy or radiculopathy, cervical region	Diagnosis	ICD-10-CM
M47.816	Spondylosis without myelopathy or radiculopathy, lumbar region	Diagnosis	ICD-10-CM
M47.819	Spondylosis without myelopathy or radiculopathy, site unspecified	Diagnosis	ICD-10-CM
M47.814	Spondylosis without myelopathy or radiculopathy, thoracic region	Diagnosis	ICD-10-CM
M47.817	Spondylosis without myelopathy or radiculopathy, lumbosacral region	Diagnosis	ICD-10-CM
M47.813	Spondylosis without myelopathy or radiculopathy, cervicothoracic region	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
M47.815	Spondylosis without myelopathy or radiculopathy, thoracolumbar region	Diagnosis	ICD-10-CM
M16.32	Unilateral osteoarthritis resulting from hip dysplasia, left hip	Diagnosis	ICD-10-CM
M16.31	Unilateral osteoarthritis resulting from hip dysplasia, right hip	Diagnosis	ICD-10-CM
M16.30	Unilateral osteoarthritis resulting from hip dysplasia, unspecified hip	Diagnosis	ICD-10-CM
M18.30	Unilateral post-traumatic osteoarthritis of first carpometacarpal joint, unspecified hand	Diagnosis	ICD-10-CM
M18.32	Unilateral post-traumatic osteoarthritis of first carpometacarpal joint, left hand	Diagnosis	ICD-10-CM
M18.31	Unilateral post-traumatic osteoarthritis of first carpometacarpal joint, right hand	Diagnosis	ICD-10-CM
M18.12	Unilateral primary osteoarthritis of first carpometacarpal joint, left hand	Diagnosis	ICD-10-CM
M18.11	Unilateral primary osteoarthritis of first carpometacarpal joint, right hand	Diagnosis	ICD-10-CM
M18.10	Unilateral primary osteoarthritis of first carpometacarpal joint, unspecified hand	Diagnosis	ICD-10-CM
M17.30	Unilateral post-traumatic osteoarthritis, unspecified knee	Diagnosis	ICD-10-CM
M16.52	Unilateral post-traumatic osteoarthritis, left hip	Diagnosis	ICD-10-CM
M17.32	Unilateral post-traumatic osteoarthritis, left knee	Diagnosis	ICD-10-CM
M16.51	Unilateral post-traumatic osteoarthritis, right hip	Diagnosis	ICD-10-CM
M17.31	Unilateral post-traumatic osteoarthritis, right knee	Diagnosis	ICD-10-CM
M16.50	Unilateral post-traumatic osteoarthritis, unspecified hip	Diagnosis	ICD-10-CM
M16.12	Unilateral primary osteoarthritis, left hip	Diagnosis	ICD-10-CM
M17.12	Unilateral primary osteoarthritis, left knee	Diagnosis	ICD-10-CM
M16.11	Unilateral primary osteoarthritis, right hip	Diagnosis	ICD-10-CM
M17.11	Unilateral primary osteoarthritis, right knee	Diagnosis	ICD-10-CM
M16.10	Unilateral primary osteoarthritis, unspecified hip	Diagnosis	ICD-10-CM
M17.10	Unilateral primary osteoarthritis, unspecified knee	Diagnosis	ICD-10-CM
M08.072	Unspecified juvenile rheumatoid arthritis, left ankle and foot	Diagnosis	ICD-10-CM
M08.022	Unspecified juvenile rheumatoid arthritis, left elbow	Diagnosis	ICD-10-CM
M08.042	Unspecified juvenile rheumatoid arthritis, left hand	Diagnosis	ICD-10-CM
M08.052	Unspecified juvenile rheumatoid arthritis, left hip	Diagnosis	ICD-10-CM
M08.062	Unspecified juvenile rheumatoid arthritis, left knee	Diagnosis	ICD-10-CM
M08.012	Unspecified juvenile rheumatoid arthritis, left shoulder	Diagnosis	ICD-10-CM
M08.032	Unspecified juvenile rheumatoid arthritis, left wrist	Diagnosis	ICD-10-CM
M08.09	Unspecified juvenile rheumatoid arthritis, multiple sites	Diagnosis	ICD-10-CM
M08.00	Unspecified juvenile rheumatoid arthritis of unspecified site	Diagnosis	ICD-10-CM
M08.071	Unspecified juvenile rheumatoid arthritis, right ankle and foot	Diagnosis	ICD-10-CM
M08.021	Unspecified juvenile rheumatoid arthritis, right elbow	Diagnosis	ICD-10-CM
M08.041	Unspecified juvenile rheumatoid arthritis, right hand	Diagnosis	ICD-10-CM
M08.051	Unspecified juvenile rheumatoid arthritis, right hip	Diagnosis	ICD-10-CM
M08.061	Unspecified juvenile rheumatoid arthritis, right knee	Diagnosis	ICD-10-CM
M08.011	Unspecified juvenile rheumatoid arthritis, right shoulder	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
M08.031	Unspecified juvenile rheumatoid arthritis, right wrist	Diagnosis	ICD-10-CM
M08.079	Unspecified juvenile rheumatoid arthritis, unspecified ankle and foot	Diagnosis	ICD-10-CM
M08.029	Unspecified juvenile rheumatoid arthritis, unspecified elbow	Diagnosis	ICD-10-CM
M08.049	Unspecified juvenile rheumatoid arthritis, unspecified hand	Diagnosis	ICD-10-CM
M08.059	Unspecified juvenile rheumatoid arthritis, unspecified hip	Diagnosis	ICD-10-CM
M08.069	Unspecified juvenile rheumatoid arthritis, unspecified knee	Diagnosis	ICD-10-CM
M08.019	Unspecified juvenile rheumatoid arthritis, unspecified shoulder	Diagnosis	ICD-10-CM
M08.039	Unspecified juvenile rheumatoid arthritis, unspecified wrist	Diagnosis	ICD-10-CM
M08.08	Unspecified juvenile rheumatoid arthritis, vertebrae	Diagnosis	ICD-10-CM
M19.90	Unspecified osteoarthritis, unspecified site	Diagnosis	ICD-10-CM
M47.022	Vertebral artery compression syndromes, cervical region	Diagnosis	ICD-10-CM
M47.021	Vertebral artery compression syndromes, occipito-atlanto-axial region	Diagnosis	ICD-10-CM
M47.029	Vertebral artery compression syndromes, site unspecified	Diagnosis	ICD-10-CM
Stroke/Transient Ischemic Attack			
436	Acute, but ill-defined, cerebrovascular disease	Diagnosis	ICD-09-CM
435.0	Basilar artery syndrome	Diagnosis	ICD-09-CM
434.11	Cerebral embolism with cerebral infarction	Diagnosis	ICD-09-CM
434.10	Cerebral embolism without mention of cerebral infarction	Diagnosis	ICD-09-CM
434.01	Cerebral thrombosis with cerebral infarction	Diagnosis	ICD-09-CM
434.00	Cerebral thrombosis without mention of cerebral infarction	Diagnosis	ICD-09-CM
997.02	Iatrogenic cerebrovascular infarction or hemorrhage	Diagnosis	ICD-09-CM
431	Intracerebral hemorrhage	Diagnosis	ICD-09-CM
433.31	Occlusion and stenosis of multiple and bilateral precerebral arteries with cerebral infarction	Diagnosis	ICD-09-CM
433.81	Occlusion and stenosis of other specified precerebral artery with cerebral infarction	Diagnosis	ICD-09-CM
433.91	Occlusion and stenosis of unspecified precerebral artery with cerebral infarction	Diagnosis	ICD-09-CM
433.01	Occlusion and stenosis of basilar artery with cerebral infarction	Diagnosis	ICD-09-CM
433.11	Occlusion and stenosis of carotid artery with cerebral infarction	Diagnosis	ICD-09-CM
433.21	Occlusion and stenosis of vertebral artery with cerebral infarction	Diagnosis	ICD-09-CM
435.8	Other specified transient cerebral ischemias	Diagnosis	ICD-09-CM
430	Subarachnoid hemorrhage	Diagnosis	ICD-09-CM
434.90	Unspecified cerebral artery occlusion without mention of cerebral infarction	Diagnosis	ICD-09-CM
434.91	Unspecified cerebral artery occlusion with cerebral infarction	Diagnosis	ICD-09-CM
435.9	Unspecified transient cerebral ischemia	Diagnosis	ICD-09-CM
435.1	Vertebral artery syndrome	Diagnosis	ICD-09-CM
435.3	Vertebrobasilar artery syndrome	Diagnosis	ICD-09-CM
G46.1	Anterior cerebral artery syndrome	Diagnosis	ICD-10-CM
G46.3	Brain stem stroke syndrome	Diagnosis	ICD-10-CM
G45.1	Carotid artery syndrome (hemispheric)	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
I63.233	Cerebral infarction due to unspecified occlusion or stenosis of bilateral carotid arteries	Diagnosis	ICD-10-CM
I63.29	Cerebral infarction due to unspecified occlusion or stenosis of other precerebral arteries	Diagnosis	ICD-10-CM
I63.20	Cerebral infarction due to unspecified occlusion or stenosis of unspecified precerebral arteries	Diagnosis	ICD-10-CM
G46.4	Cerebellar stroke syndrome	Diagnosis	ICD-10-CM
I63.6	Cerebral infarction due to cerebral venous thrombosis, nonpyogenic	Diagnosis	ICD-10-CM
I63.422	Cerebral infarction due to embolism of left anterior cerebral artery	Diagnosis	ICD-10-CM
I63.132	Cerebral infarction due to embolism of left carotid artery	Diagnosis	ICD-10-CM
I63.442	Cerebral infarction due to embolism of left cerebellar artery	Diagnosis	ICD-10-CM
I63.412	Cerebral infarction due to embolism of left middle cerebral artery	Diagnosis	ICD-10-CM
I63.432	Cerebral infarction due to embolism of left posterior cerebral artery	Diagnosis	ICD-10-CM
I63.49	Cerebral infarction due to embolism of other cerebral artery	Diagnosis	ICD-10-CM
I63.19	Cerebral infarction due to embolism of other precerebral artery	Diagnosis	ICD-10-CM
I63.421	Cerebral infarction due to embolism of right anterior cerebral artery	Diagnosis	ICD-10-CM
I63.131	Cerebral infarction due to embolism of right carotid artery	Diagnosis	ICD-10-CM
I63.441	Cerebral infarction due to embolism of right cerebellar artery	Diagnosis	ICD-10-CM
I63.411	Cerebral infarction due to embolism of right middle cerebral artery	Diagnosis	ICD-10-CM
I63.431	Cerebral infarction due to embolism of right posterior cerebral artery	Diagnosis	ICD-10-CM
I63.429	Cerebral infarction due to embolism of unspecified anterior cerebral artery	Diagnosis	ICD-10-CM
I63.139	Cerebral infarction due to embolism of unspecified carotid artery	Diagnosis	ICD-10-CM
I63.449	Cerebral infarction due to embolism of unspecified cerebellar artery	Diagnosis	ICD-10-CM
I63.40	Cerebral infarction due to embolism of unspecified cerebral artery	Diagnosis	ICD-10-CM
I63.419	Cerebral infarction due to embolism of unspecified middle cerebral artery	Diagnosis	ICD-10-CM
I63.439	Cerebral infarction due to embolism of unspecified posterior cerebral artery	Diagnosis	ICD-10-CM
I63.10	Cerebral infarction due to embolism of unspecified precerebral artery	Diagnosis	ICD-10-CM
I63.333	Cerebral infarction due to thrombosis of bilateral posterior cerebral arteries	Diagnosis	ICD-10-CM
I63.032	Cerebral infarction due to thrombosis of left carotid artery	Diagnosis	ICD-10-CM
I63.322	Cerebral infarction due to thrombosis of left anterior cerebral artery	Diagnosis	ICD-10-CM
I63.342	Cerebral infarction due to thrombosis of left cerebellar artery	Diagnosis	ICD-10-CM
I63.312	Cerebral infarction due to thrombosis of left middle cerebral artery	Diagnosis	ICD-10-CM
I63.332	Cerebral infarction due to thrombosis of left posterior cerebral artery	Diagnosis	ICD-10-CM
I63.012	Cerebral infarction due to thrombosis of left vertebral artery	Diagnosis	ICD-10-CM
I63.39	Cerebral infarction due to thrombosis of other cerebral artery	Diagnosis	ICD-10-CM
I63.09	Cerebral infarction due to thrombosis of other precerebral artery	Diagnosis	ICD-10-CM
I63.031	Cerebral infarction due to thrombosis of right carotid artery	Diagnosis	ICD-10-CM
I63.321	Cerebral infarction due to thrombosis of right anterior cerebral artery	Diagnosis	ICD-10-CM
I63.341	Cerebral infarction due to thrombosis of right cerebellar artery	Diagnosis	ICD-10-CM
I63.311	Cerebral infarction due to thrombosis of right middle cerebral artery	Diagnosis	ICD-10-CM
I63.331	Cerebral infarction due to thrombosis of right posterior cerebral artery	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
I63.011	Cerebral infarction due to thrombosis of right vertebral artery	Diagnosis	ICD-10-CM
I63.329	Cerebral infarction due to thrombosis of unspecified anterior cerebral artery	Diagnosis	ICD-10-CM
I63.039	Cerebral infarction due to thrombosis of unspecified carotid artery	Diagnosis	ICD-10-CM
I63.349	Cerebral infarction due to thrombosis of unspecified cerebellar artery	Diagnosis	ICD-10-CM
I63.30	Cerebral infarction due to thrombosis of unspecified cerebral artery	Diagnosis	ICD-10-CM
I63.319	Cerebral infarction due to thrombosis of unspecified middle cerebral artery	Diagnosis	ICD-10-CM
I63.339	Cerebral infarction due to thrombosis of unspecified posterior cerebral artery	Diagnosis	ICD-10-CM
I63.00	Cerebral infarction due to thrombosis of unspecified precerebral artery	Diagnosis	ICD-10-CM
I63.019	Cerebral infarction due to thrombosis of unspecified vertebral artery	Diagnosis	ICD-10-CM
I63.02	Cerebral infarction due to thrombosis of basilar artery	Diagnosis	ICD-10-CM
I63.232	Cerebral infarction due to unspecified occlusion or stenosis of left carotid arteries	Diagnosis	ICD-10-CM
I63.231	Cerebral infarction due to unspecified occlusion or stenosis of right carotid arteries	Diagnosis	ICD-10-CM
I63.239	Cerebral infarction due to unspecified occlusion or stenosis of unspecified carotid artery	Diagnosis	ICD-10-CM
I63.50	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebral artery	Diagnosis	ICD-10-CM
I63.219	Cerebral infarction due to unspecified occlusion or stenosis of unspecified vertebral artery	Diagnosis	ICD-10-CM
I63.323	Cerebral infarction due to thrombosis of bilateral anterior cerebral arteries	Diagnosis	ICD-10-CM
I63.22	Cerebral infarction due to unspecified occlusion or stenosis of basilar artery	Diagnosis	ICD-10-CM
I63.433	Cerebral infarction due to embolism of bilateral posterior cerebral arteries	Diagnosis	ICD-10-CM
I63.542	Cerebral infarction due to unspecified occlusion or stenosis of left cerebellar artery	Diagnosis	ICD-10-CM
I63.59	Cerebral infarction due to unspecified occlusion or stenosis of other cerebral artery	Diagnosis	ICD-10-CM
I63.541	Cerebral infarction due to unspecified occlusion or stenosis of right cerebellar artery	Diagnosis	ICD-10-CM
I63.549	Cerebral infarction due to unspecified occlusion or stenosis of unspecified cerebellar artery	Diagnosis	ICD-10-CM
I63.213	Cerebral infarction due to unspecified occlusion or stenosis of bilateral vertebral arteries	Diagnosis	ICD-10-CM
I63.12	Cerebral infarction due to embolism of basilar artery	Diagnosis	ICD-10-CM
I63.112	Cerebral infarction due to embolism of left vertebral artery	Diagnosis	ICD-10-CM
I63.111	Cerebral infarction due to embolism of right vertebral artery	Diagnosis	ICD-10-CM
I63.119	Cerebral infarction due to embolism of unspecified vertebral artery	Diagnosis	ICD-10-CM
I63.529	Cerebral infarction due to unspecified occlusion or stenosis of unspecified anterior cerebral artery	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
I63.519	Cerebral infarction due to unspecified occlusion or stenosis of unspecified middle cerebral artery	Diagnosis	ICD-10-CM
I63.539	Cerebral infarction due to unspecified occlusion or stenosis of unspecified posterior cerebral artery	Diagnosis	ICD-10-CM
I63.522	Cerebral infarction due to unspecified occlusion or stenosis of left anterior cerebral artery	Diagnosis	ICD-10-CM
I63.512	Cerebral infarction due to unspecified occlusion or stenosis of left middle cerebral artery	Diagnosis	ICD-10-CM
I63.532	Cerebral infarction due to unspecified occlusion or stenosis of left posterior cerebral artery	Diagnosis	ICD-10-CM
I63.521	Cerebral infarction due to unspecified occlusion or stenosis of right anterior cerebral artery	Diagnosis	ICD-10-CM
I63.511	Cerebral infarction due to unspecified occlusion or stenosis of right middle cerebral artery	Diagnosis	ICD-10-CM
I63.531	Cerebral infarction due to unspecified occlusion or stenosis of right posterior cerebral artery	Diagnosis	ICD-10-CM
I63.523	Cerebral infarction due to unspecified occlusion or stenosis of bilateral anterior cerebral arteries	Diagnosis	ICD-10-CM
I63.513	Cerebral infarction due to unspecified occlusion or stenosis of bilateral middle cerebral arteries	Diagnosis	ICD-10-CM
I63.533	Cerebral infarction due to unspecified occlusion or stenosis of bilateral posterior cerebral arteries	Diagnosis	ICD-10-CM
I63.423	Cerebral infarction due to embolism of bilateral anterior cerebral arteries	Diagnosis	ICD-10-CM
I63.443	Cerebral infarction due to embolism of bilateral cerebellar arteries	Diagnosis	ICD-10-CM
I63.413	Cerebral infarction due to embolism of bilateral middle cerebral arteries	Diagnosis	ICD-10-CM
I63.313	Cerebral infarction due to thrombosis of bilateral middle cerebral arteries	Diagnosis	ICD-10-CM
I63.013	Cerebral infarction due to thrombosis of bilateral vertebral arteries	Diagnosis	ICD-10-CM
I63.543	Cerebral infarction due to unspecified occlusion or stenosis of bilateral cerebellar arteries	Diagnosis	ICD-10-CM
I63.9	Cerebral infarction, unspecified	Diagnosis	ICD-10-CM
I63.212	Cerebral infarction due to unspecified occlusion or stenosis of left vertebral artery	Diagnosis	ICD-10-CM
I63.211	Cerebral infarction due to unspecified occlusion or stenosis of right vertebral artery	Diagnosis	ICD-10-CM
I63.343	Cerebral infarction due to thrombosis of bilateral cerebellar arteries	Diagnosis	ICD-10-CM
I97.811	Intraoperative cerebrovascular infarction during other surgery	Diagnosis	ICD-10-CM
I97.810	Intraoperative cerebrovascular infarction during cardiac surgery	Diagnosis	ICD-10-CM
G97.31	Intraoperative hemorrhage and hematoma of a nervous system organ or structure complicating a nervous system procedure	Diagnosis	ICD-10-CM
G97.32	Intraoperative hemorrhage and hematoma of a nervous system organ or structure complicating other procedure	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
G46.0	Middle cerebral artery syndrome	Diagnosis	ICD-10-CM
G45.2	Multiple and bilateral precerebral artery syndromes	Diagnosis	ICD-10-CM
I60.00	Nontraumatic subarachnoid hemorrhage from unspecified carotid siphon and bifurcation	Diagnosis	ICD-10-CM
I60.02	Nontraumatic subarachnoid hemorrhage from left carotid siphon and bifurcation	Diagnosis	ICD-10-CM
I60.01	Nontraumatic subarachnoid hemorrhage from right carotid siphon and bifurcation	Diagnosis	ICD-10-CM
I61.0	Nontraumatic intracerebral hemorrhage in hemisphere, subcortical	Diagnosis	ICD-10-CM
I61.1	Nontraumatic intracerebral hemorrhage in hemisphere, cortical	Diagnosis	ICD-10-CM
I61.5	Nontraumatic intracerebral hemorrhage, intraventricular	Diagnosis	ICD-10-CM
I61.2	Nontraumatic intracerebral hemorrhage in hemisphere, unspecified	Diagnosis	ICD-10-CM
I61.3	Nontraumatic intracerebral hemorrhage in brain stem	Diagnosis	ICD-10-CM
I61.4	Nontraumatic intracerebral hemorrhage in cerebellum	Diagnosis	ICD-10-CM
I61.6	Nontraumatic intracerebral hemorrhage, multiple localized	Diagnosis	ICD-10-CM
I61.9	Nontraumatic intracerebral hemorrhage, unspecified	Diagnosis	ICD-10-CM
I60.4	Nontraumatic subarachnoid hemorrhage from basilar artery	Diagnosis	ICD-10-CM
I60.52	Nontraumatic subarachnoid hemorrhage from left vertebral artery	Diagnosis	ICD-10-CM
I60.51	Nontraumatic subarachnoid hemorrhage from right vertebral artery	Diagnosis	ICD-10-CM
I60.50	Nontraumatic subarachnoid hemorrhage from unspecified vertebral artery	Diagnosis	ICD-10-CM
I60.22	Nontraumatic subarachnoid hemorrhage from left anterior communicating artery	Diagnosis	ICD-10-CM
I60.12	Nontraumatic subarachnoid hemorrhage from left middle cerebral artery	Diagnosis	ICD-10-CM
I60.32	Nontraumatic subarachnoid hemorrhage from left posterior communicating artery	Diagnosis	ICD-10-CM
I60.6	Nontraumatic subarachnoid hemorrhage from other intracranial arteries	Diagnosis	ICD-10-CM
I60.21	Nontraumatic subarachnoid hemorrhage from right anterior communicating artery	Diagnosis	ICD-10-CM
I60.11	Nontraumatic subarachnoid hemorrhage from right middle cerebral artery	Diagnosis	ICD-10-CM
I60.31	Nontraumatic subarachnoid hemorrhage from right posterior communicating artery	Diagnosis	ICD-10-CM
I60.20	Nontraumatic subarachnoid hemorrhage from unspecified anterior communicating artery	Diagnosis	ICD-10-CM
I60.7	Nontraumatic subarachnoid hemorrhage from unspecified intracranial artery	Diagnosis	ICD-10-CM
I60.10	Nontraumatic subarachnoid hemorrhage from unspecified middle cerebral artery	Diagnosis	ICD-10-CM
I60.30	Nontraumatic subarachnoid hemorrhage from unspecified posterior communicating artery	Diagnosis	ICD-10-CM
I60.9	Nontraumatic subarachnoid hemorrhage, unspecified	Diagnosis	ICD-10-CM
I66.13	Occlusion and stenosis of bilateral anterior cerebral arteries	Diagnosis	ICD-10-CM
I66.03	Occlusion and stenosis of bilateral middle cerebral arteries	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
I66.23	Occlusion and stenosis of bilateral posterior cerebral arteries	Diagnosis	ICD-10-CM
I66.02	Occlusion and stenosis of left middle cerebral artery	Diagnosis	ICD-10-CM
I66.12	Occlusion and stenosis of left anterior cerebral artery	Diagnosis	ICD-10-CM
I66.22	Occlusion and stenosis of left posterior cerebral artery	Diagnosis	ICD-10-CM
I66.8	Occlusion and stenosis of other cerebral arteries	Diagnosis	ICD-10-CM
I66.11	Occlusion and stenosis of right anterior cerebral artery	Diagnosis	ICD-10-CM
I66.01	Occlusion and stenosis of right middle cerebral artery	Diagnosis	ICD-10-CM
I66.21	Occlusion and stenosis of right posterior cerebral artery	Diagnosis	ICD-10-CM
I66.19	Occlusion and stenosis of unspecified anterior cerebral artery	Diagnosis	ICD-10-CM
I66.09	Occlusion and stenosis of unspecified middle cerebral artery	Diagnosis	ICD-10-CM
I66.29	Occlusion and stenosis of unspecified posterior cerebral artery	Diagnosis	ICD-10-CM
I66.9	Occlusion and stenosis of unspecified cerebral artery	Diagnosis	ICD-10-CM
I66.3	Occlusion and stenosis of cerebellar arteries	Diagnosis	ICD-10-CM
G45.8	Other transient cerebral ischemic attacks and related syndromes	Diagnosis	ICD-10-CM
G46.8	Other vascular syndromes of brain in cerebrovascular diseases	Diagnosis	ICD-10-CM
I63.8	Other cerebral infarction	Diagnosis	ICD-10-CM
I67.89	Other cerebrovascular disease	Diagnosis	ICD-10-CM
I67.848	Other cerebrovascular vasospasm and vasoconstriction	Diagnosis	ICD-10-CM
G46.7	Other lacunar syndromes	Diagnosis	ICD-10-CM
I61.8	Other nontraumatic intracerebral hemorrhage	Diagnosis	ICD-10-CM
I60.8	Other nontraumatic subarachnoid hemorrhage	Diagnosis	ICD-10-CM
G46.2	Posterior cerebral artery syndrome	Diagnosis	ICD-10-CM
I97.820	Postprocedural cerebrovascular infarction following cardiac surgery	Diagnosis	ICD-10-CM
I97.821	Postprocedural cerebrovascular infarction following other surgery	Diagnosis	ICD-10-CM
G46.5	Pure motor lacunar syndrome	Diagnosis	ICD-10-CM
G46.6	Pure sensory lacunar syndrome	Diagnosis	ICD-10-CM
I67.841	Reversible cerebrovascular vasoconstriction syndrome	Diagnosis	ICD-10-CM
G45.9	Transient cerebral ischemic attack, unspecified	Diagnosis	ICD-10-CM
G45.0	Vertebro-basilar artery syndrome	Diagnosis	ICD-10-CM

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

Code	Description	Code Category	Code Type
Obstetric Conditions			
V26.81	Encounter for assisted reproductive fertility procedure cycle	Diagnosis	ICD-09-CM
Z31.83	Encounter for assisted reproductive fertility procedure cycle	Diagnosis	ICD-10-CM
635.90	Unspecified legally induced abortion without mention of complication	Diagnosis	ICD-09-CM
635.91	Incomplete legally induced abortion without mention of complication	Diagnosis	ICD-09-CM
635.92	Complete legally induced abortion without mention of complication	Diagnosis	ICD-09-CM
636.90	Unspecified illegally induced abortion without mention of complication	Diagnosis	ICD-09-CM
636.91	Incomplete illegally induced abortion without mention of complication	Diagnosis	ICD-09-CM
636.92	Complete illegally induced abortion without mention of complication	Diagnosis	ICD-09-CM
637.90	Unspecified type of abortion, unspecified as to completion or legality, without mention of complication	Diagnosis	ICD-09-CM
637.91	Abortion, unspecified as to legality, incomplete, without mention of complication	Diagnosis	ICD-09-CM
637.92	Abortion, unspecified as to legality, complete, without mention of complication	Diagnosis	ICD-09-CM
Z33.2	Encounter for elective termination of pregnancy	Diagnosis	ICD-10-CM
V72.42	Pregnancy examination or test, positive result	Diagnosis	ICD-09-CM
Z32.01	Encounter for pregnancy test, result positive	Diagnosis	ICD-10-CM
Z32.00	Encounter for pregnancy test, result unknown	Diagnosis	ICD-10-CM
V72.40	Pregnancy examination or test, pregnancy unconfirmed	Diagnosis	ICD-09-CM
V72.63	Pre-procedural laboratory examination	Diagnosis	ICD-09-CM
V72.84	Unspecified pre-operative examination	Diagnosis	ICD-09-CM
Z01.812	Encounter for preprocedural laboratory examination	Diagnosis	ICD-10-CM
V26.31	Testing of female for genetic disease carrier status	Diagnosis	ICD-09-CM
Z31.430	Encounter of female for testing for genetic disease carrier status for procreative management	Diagnosis	ICD-10-CM
O03	Spontaneous abortion	Diagnosis	ICD-10-CM
634.91	Incomplete spontaneous abortion without mention of complication	Diagnosis	ICD-09-CM
O03.4	Incomplete spontaneous abortion without complication	Diagnosis	ICD-10-CM
68.0	Hysterotomy	Procedure	ICD-09-CM
68.12	Hysteroscopy	Procedure	ICD-09-CM
68.3	Subtotal abdominal hysterectomy	Procedure	ICD-09-CM
68.31	Laparoscopic supracervical hysterectomy [LSH]	Procedure	ICD-09-CM
68.39	Other and unspecified subtotal abdominal hysterectomy	Procedure	ICD-09-CM
68.4	Total abdominal hysterectomy	Procedure	ICD-09-CM
68.41	Laparoscopic total abdominal hysterectomy	Procedure	ICD-09-CM
68.49	Other and unspecified total abdominal hysterectomy	Procedure	ICD-09-CM
68.5	Vaginal hysterectomy	Procedure	ICD-09-CM
68.51	Laparoscopically assisted vaginal hysterectomy (LAVH)	Procedure	ICD-09-CM
68.59	Other and unspecified vaginal hysterectomy	Procedure	ICD-09-CM
68.6	Radical abdominal hysterectomy	Procedure	ICD-09-CM
68.61	Laparoscopic radical abdominal hysterectomy	Procedure	ICD-09-CM

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

Code	Description	Code Category	Code Type
68.69	Other and unspecified radical abdominal hysterectomy	Procedure	ICD-09-CM
68.7	Radical vaginal hysterectomy	Procedure	ICD-09-CM
68.71	Laparoscopic radical vaginal hysterectomy [LRVH]	Procedure	ICD-09-CM
68.79	Other and unspecified radical vaginal hysterectomy	Procedure	ICD-09-CM
68.9	Other and unspecified hysterectomy	Procedure	ICD-09-CM
74.91	Hysterotomy to terminate pregnancy	Procedure	ICD-09-CM
87.82	Gas contrast hysterosalpingogram	Procedure	ICD-09-CM
87.83	Opaque dye contrast hysterosalpingogram	Procedure	ICD-09-CM
87.84	Percutaneous hysteroqram	Procedure	ICD-09-CM
0U9900Z	Drainage of Uterus with Drainage Device, Open Approach	Procedure	ICD-10-PCS
0U990ZZ	Drainage of Uterus, Open Approach	Procedure	ICD-10-PCS
0U9940Z	Drainage of Uterus with Drainage Device, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0U994ZZ	Drainage of Uterus, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0U9970Z	Drainage of Uterus with Drainage Device, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0U997ZZ	Drainage of Uterus, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0U9980Z	Drainage of Uterus with Drainage Device, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0U998ZZ	Drainage of Uterus, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UC90ZZ	Extirpation of Matter from Uterus, Open Approach	Procedure	ICD-10-PCS
0UC93ZZ	Extirpation of Matter from Uterus, Percutaneous Approach	Procedure	ICD-10-PCS
0UC94ZZ	Extirpation of Matter from Uterus, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UJD0ZZ	Inspection of Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UJD4ZZ	Inspection of Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UJD8ZZ	Inspection of Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UPD00Z	Removal of Drainage Device from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD01Z	Removal of Radioactive Element from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD03Z	Removal of Infusion Device from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD07Z	Removal of Autologous Tissue Substitute from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD0DZ	Removal of Intraluminal Device from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD0HZ	Removal of Contraceptive Device from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD0JZ	Removal of Synthetic Substitute from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD0KZ	Removal of Nonautologous Tissue Substitute from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD0YZ	Removal of Other Device from Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
0UPD30Z	Removal of Drainage Device from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UPD31Z	Removal of Radioactive Element from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UPD33Z	Removal of Infusion Device from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UPD37Z	Removal of Autologous Tissue Substitute from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS

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

Code	Description	Code Category	Code Type
0UPD3DZ	Removal of Intraluminal Device from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UPD3HZ	Removal of Contraceptive Device from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UPD3JZ	Removal of Synthetic Substitute from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UPD3KZ	Removal of Nonautologous Tissue Substitute from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UPD3YZ	Removal of Other Device from Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UPD40Z	Removal of Drainage Device from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD41Z	Removal of Radioactive Element from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD43Z	Removal of Infusion Device from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD47Z	Removal of Autologous Tissue Substitute from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD4DZ	Removal of Intraluminal Device from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD4HZ	Removal of Contraceptive Device from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD4JZ	Removal of Synthetic Substitute from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD4KZ	Removal of Nonautologous Tissue Substitute from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD4YZ	Removal of Other Device from Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UPD71Z	Removal of Radioactive Element from Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UPD77Z	Removal of Autologous Tissue Substitute from Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UPD7JZ	Removal of Synthetic Substitute from Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UPD7KZ	Removal of Nonautologous Tissue Substitute from Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UPD81Z	Removal of Radioactive Element from Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UPD87Z	Removal of Autologous Tissue Substitute from Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UPD8JZ	Removal of Synthetic Substitute from Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UPD8KZ	Removal of Nonautologous Tissue Substitute from Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS

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Code	Description	Code Category	Code Type
OUT40ZZ	Resection of Uterine Supporting Structure, Open Approach	Procedure	ICD-10-PCS
OUT44ZZ	Resection of Uterine Supporting Structure, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
OUT47ZZ	Resection of Uterine Supporting Structure, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
OUT48ZZ	Resection of Uterine Supporting Structure, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
OUT90ZL	Resection of Uterus, Supracervical, Open Approach	Procedure	ICD-10-PCS
OUT90ZZ	Resection of Uterus, Open Approach	Procedure	ICD-10-PCS
OUT94ZL	Resection of Uterus, Supracervical, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
OUT94ZZ	Resection of Uterus, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
OUT97ZL	Resection of Uterus, Supracervical, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
OUT97ZZ	Resection of Uterus, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
OUT98ZL	Resection of Uterus, Supracervical, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
OUT98ZZ	Resection of Uterus, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
OUT9FZL	Resection of Uterus, Supracervical, Via Natural or Artificial Opening With Percutaneous Endoscopic Assistance	Procedure	ICD-10-PCS
OUT9FZZ	Resection of Uterus, Via Natural or Artificial Opening With Percutaneous Endoscopic Assistance	Procedure	ICD-10-PCS
OUTC0ZZ	Resection of Cervix, Open Approach	Procedure	ICD-10-PCS
OUTC4ZZ	Resection of Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
OUTC7ZZ	Resection of Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
OUTC8ZZ	Resection of Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
OUWD00Z	Revision of Drainage Device in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
OUWD01Z	Revision of Radioactive Element in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
OUWD03Z	Revision of Infusion Device in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
OUWD07Z	Revision of Autologous Tissue Substitute in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
OUWD0DZ	Revision of Intraluminal Device in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
OUWD0HZ	Revision of Contraceptive Device in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
OUWD0JZ	Revision of Synthetic Substitute in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
OUWD0KZ	Revision of Nonautologous Tissue Substitute in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
OUWD0YZ	Revision of Other Device in Uterus and Cervix, Open Approach	Procedure	ICD-10-PCS
OUWD30Z	Revision of Drainage Device in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
OUWD31Z	Revision of Radioactive Element in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
OUWD33Z	Revision of Infusion Device in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
OUWD37Z	Revision of Autologous Tissue Substitute in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
OUWD3DZ	Revision of Intraluminal Device in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
OUWD3HZ	Revision of Contraceptive Device in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
OUWD3JZ	Revision of Synthetic Substitute in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
OUWD3KZ	Revision of Nonautologous Tissue Substitute in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS

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

Code	Description	Code Category	Code Type
0UWD3YZ	Revision of Other Device in Uterus and Cervix, Percutaneous Approach	Procedure	ICD-10-PCS
0UWD40Z	Revision of Drainage Device in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD41Z	Revision of Radioactive Element in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD43Z	Revision of Infusion Device in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD47Z	Revision of Autologous Tissue Substitute in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD4DZ	Revision of Intraluminal Device in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD4HZ	Revision of Contraceptive Device in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD4JZ	Revision of Synthetic Substitute in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD4KZ	Revision of Nonautologous Tissue Substitute in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD4YZ	Revision of Other Device in Uterus and Cervix, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
0UWD70Z	Revision of Drainage Device in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD71Z	Revision of Radioactive Element in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD73Z	Revision of Infusion Device in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD77Z	Revision of Autologous Tissue Substitute in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD7DZ	Revision of Intraluminal Device in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD7HZ	Revision of Contraceptive Device in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD7JZ	Revision of Synthetic Substitute in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD7KZ	Revision of Nonautologous Tissue Substitute in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD7YZ	Revision of Other Device in Uterus and Cervix, Via Natural or Artificial Opening	Procedure	ICD-10-PCS
0UWD80Z	Revision of Drainage Device in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UWD81Z	Revision of Radioactive Element in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UWD83Z	Revision of Infusion Device in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UWD87Z	Revision of Autologous Tissue Substitute in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS

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Code	Description	Code Category	Code Type
0UWD8DZ	Revision of Intraluminal Device in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UWD8HZ	Revision of Contraceptive Device in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UWD8JZ	Revision of Synthetic Substitute in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UWD8KZ	Revision of Nonautologous Tissue Substitute in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
0UWD8YZ	Revision of Other Device in Uterus and Cervix, Via Natural or Artificial Opening Endoscopic	Procedure	ICD-10-PCS
10A00ZZ	Abortion of Products of Conception, Open Approach	Procedure	ICD-10-PCS
10A03ZZ	Abortion of Products of Conception, Percutaneous Approach	Procedure	ICD-10-PCS
10A04ZZ	Abortion of Products of Conception, Percutaneous Endoscopic Approach	Procedure	ICD-10-PCS
BU02YZZ	Plain Radiography of Bilateral Fallopian Tubes using Other Contrast	Procedure	ICD-10-PCS
BU060ZZ	Plain Radiography of Uterus using High Osmolar Contrast	Procedure	ICD-10-PCS
BU061ZZ	Plain Radiography of Uterus using Low Osmolar Contrast	Procedure	ICD-10-PCS
BU06YZZ	Plain Radiography of Uterus using Other Contrast	Procedure	ICD-10-PCS
BU08YZZ	Plain Radiography of Uterus and Fallopian Tubes using Other Contrast	Procedure	ICD-10-PCS
BU12YZZ	Fluoroscopy of Bilateral Fallopian Tubes using Other Contrast	Procedure	ICD-10-PCS
BU160ZZ	Fluoroscopy of Uterus using High Osmolar Contrast	Procedure	ICD-10-PCS
BU161ZZ	Fluoroscopy of Uterus using Low Osmolar Contrast	Procedure	ICD-10-PCS
BU16YZZ	Fluoroscopy of Uterus using Other Contrast	Procedure	ICD-10-PCS
BU16ZZZ	Fluoroscopy of Uterus	Procedure	ICD-10-PCS
BU18YZZ	Fluoroscopy of Uterus and Fallopian Tubes using Other Contrast	Procedure	ICD-10-PCS
0058T	Cryopreservation; reproductive tissue, ovarian	Procedure	CPT-4
0336T	Laparoscopy, surgical, ablation of uterine fibroid(s), including intraoperative ultrasound guidance and monitoring, radiofrequency	Procedure	CPT-4 (Category III)
0059T	Cryopreservation; oocyte(s)	Procedure	CPT-4
0357T	Cryopreservation; immature oocyte(s)	Procedure	CPT-4
00952	Anesthesia for vaginal procedures (including biopsy of labia, vagina, cervix or endometrium); hysteroscopy and/or hysterosalpingography	Procedure	CPT-4
01900	Anesthesia for injection procedure for hysterosalpingography	Procedure	CPT-4
58340	Catheterization and introduction of saline or contrast material for saline infusion sonohysterography (SIS) or hysterosalpingography	Procedure	CPT-4
58345	Transcervical introduction of fallopian tube catheter for diagnosis and/or re-establishing patency (any method), with or without hysterosalpingography	Procedure	CPT-4
74740	Hysterosalpingography, radiological supervision and interpretation	Procedure	CPT-4
74741	Hysterosalpingography; Complete Procedure	Procedure	CPT-4
58321	Artificial insemination; intra-cervical	Procedure	CPT-4
58322	Artificial insemination; intra-uterine	Procedure	CPT-4

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Code	Description	Code Category	Code Type
58350	Chromotubation of oviduct, including materials	Procedure	CPT-4
58752	Tubouterine implantation	Procedure	CPT-4
58760	Fimbrioplasty	Procedure	CPT-4
58970	Follicle puncture for oocyte retrieval, any method	Procedure	CPT-4
58974	Embryo transfer, intrauterine	Procedure	CPT-4
58976	Gamete, zygote, or embryo intrafallopian transfer, any method	Procedure	CPT-4
89250	Culture of oocyte(s)/embryo(s), less than 4 days;	Procedure	CPT-4
89251	Culture of oocyte(s)/embryo(s), less than 4 days; with co-culture of oocyte(s)/embryos	Procedure	CPT-4
89253	Assisted embryo hatching, microtechniques (any method)	Procedure	CPT-4
89254	Oocyte identification from follicular fluid	Procedure	CPT-4
89255	Preparation of embryo for transfer (any method)	Procedure	CPT-4
89268	Insemination of oocytes	Procedure	CPT-4
89272	Extended culture of oocyte(s)/embryo(s), 4-7 days	Procedure	CPT-4
89280	Assisted oocyte fertilization, microtechnique; less than or equal to 10 oocytes	Procedure	CPT-4
89281	Assisted oocyte fertilization, microtechnique; greater than 10 oocytes	Procedure	CPT-4
89290	Biopsy, oocyte polar body or embryo blastomere, microtechnique (for pre-implantation genetic diagnosis); less than or equal to 5 embryos	Procedure	CPT-4
89291	Biopsy, oocyte polar body or embryo blastomere, microtechnique (for pre-implantation genetic diagnosis); greater than 5 embryos	Procedure	CPT-4
45126	Pelvic exenteration for colorectal malignancy, with proctectomy (with or without colostomy), with removal of bladder and ureteral transplantations, and/or hysterectomy, or cervicectomy, with or without removal of tube(s), with or without removal of ovary(s), or any combination thereof	Procedure	CPT-4
49220	Staging laparotomy for Hodgkins disease or lymphoma (includes splenectomy, needle or open biopsies of both liver lobes, possibly also removal of abdominal nodes, abdominal node and/or bone marrow biopsies, ovarian repositioning)	Procedure	CPT-4
49322	Laparoscopy, surgical; with aspiration of cavity or cyst (eg, ovarian cyst) (single or multiple)	Procedure	CPT-4
50722	Ureterolysis for ovarian vein syndrome	Procedure	CPT-4
58150	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(s);	Procedure	CPT-4
58152	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or without removal of ovary(s); with colpo-urethrocytopexy (eg, Marshall-Marchetti-Krantz, Burch)	Procedure	CPT-4
58180	Supracervical abdominal hysterectomy (subtotal hysterectomy), with or without removal of tube(s), with or without removal of ovary(s)	Procedure	CPT-4
58200	Total abdominal hysterectomy, including partial vaginectomy, with para-aortic and pelvic lymph node sampling, with or without removal of tube(s), with or without removal of ovary(s)	Procedure	CPT-4

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Code	Description	Code Category	Code Type
58210	Radical abdominal hysterectomy, with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy), with or without removal of tube(s), with or without removal of ovary(s)	Procedure	CPT-4
58240	Pelvic exenteration for gynecologic malignancy, with total abdominal hysterectomy or cervicectomy, with or without removal of tube(s), with or without removal of ovary(s), with removal of bladder and ureteral transplantations, and/or abdominoperineal resection of rectum and colon and colostomy, or any combination thereof	Procedure	CPT-4
58262	Vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s), and/or ovary(s)	Procedure	CPT-4
58263	Vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s), and/or ovary(s), with repair of enterocele	Procedure	CPT-4
58291	Vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)	Procedure	CPT-4
58292	Vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s), with repair of enterocele	Procedure	CPT-4
58542	Laparoscopy, surgical, supracervical hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s)	Procedure	CPT-4
58544	Laparoscopy, surgical, supracervical hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)	Procedure	CPT-4
58548	Laparoscopy, surgical, with radical hysterectomy, with bilateral total pelvic lymphadenectomy and para-aortic lymph node sampling (biopsy), with removal of tube(s) and ovary(s), if performed	Procedure	CPT-4
58552	Laparoscopy, surgical, with vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s)	Procedure	CPT-4
58554	Laparoscopy, surgical, with vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)	Procedure	CPT-4
58571	Laparoscopy, surgical, with total hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s)	Procedure	CPT-4
58573	Laparoscopy, surgical, with total hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)	Procedure	CPT-4
58600	Ligation or transection of fallopian tube(s), abdominal or vaginal approach, unilateral or bilateral	Procedure	CPT-4
58605	Ligation or transection of fallopian tube(s), abdominal or vaginal approach, postpartum, unilateral or bilateral, during same hospitalization (separate procedure)	Procedure	CPT-4
58611	Ligation or transection of fallopian tube(s) when done at the time of cesarean delivery or intra-abdominal surgery (not a separate procedure) (List separately in addition to code for primary procedure)	Procedure	CPT-4
58615	Occlusion of fallopian tube(s) by device (eg, band, clip, Falope ring) vaginal or suprapubic approach	Procedure	CPT-4

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Code	Description	Code Category	Code Type
58660	Laparoscopy, surgical; with lysis of adhesions (salpingolysis, ovariolysis) (separate procedure)	Procedure	CPT-4
58661	Laparoscopy, surgical; with removal of adnexal structures (partial or total oophorectomy and/or salpingectomy)	Procedure	CPT-4
58662	Laparoscopy, surgical; with fulguration or excision of lesions of the ovary, pelvic viscera, or peritoneal surface by any method	Procedure	CPT-4
58670	Laparoscopy, surgical; with fulguration of oviducts (with or without transection)	Procedure	CPT-4
58671	Laparoscopy, surgical; with occlusion of oviducts by device (eg, band, clip, or Falope ring)	Procedure	CPT-4
58672	Laparoscopy, surgical; with fimbrioplasty	Procedure	CPT-4
58673	Laparoscopy, surgical; with salpingostomy (salpingoneostomy)	Procedure	CPT-4
58679	Unlisted laparoscopy procedure, oviduct, ovary	Procedure	CPT-4
58700	Salpingectomy, complete or partial, unilateral or bilateral (separate procedure)	Procedure	CPT-4
58720	Salpingo-oophorectomy, complete or partial, unilateral or bilateral (separate procedure)	Procedure	CPT-4
58740	Lysis of adhesions (salpingolysis, ovariolysis)	Procedure	CPT-4
58750	Tubotubal anastomosis	Procedure	CPT-4
58770	Salpingostomy (salpingoneostomy)	Procedure	CPT-4
58800	Drainage of ovarian cyst(s), unilateral or bilateral (separate procedure); vaginal approach	Procedure	CPT-4
58805	Drainage of ovarian cyst(s), unilateral or bilateral (separate procedure); abdominal approach	Procedure	CPT-4
58820	Drainage of ovarian abscess; vaginal approach, open	Procedure	CPT-4
58822	Drainage of ovarian abscess; abdominal approach	Procedure	CPT-4
58823	Drainage of pelvic abscess, transvaginal or transrectal approach, percutaneous (eg, ovarian, pericolic)	Procedure	CPT-4
58825	Transposition, ovary(s)	Procedure	CPT-4
58900	Biopsy of ovary, unilateral or bilateral (separate procedure)	Procedure	CPT-4
58920	Wedge resection or bisection of ovary, unilateral or bilateral	Procedure	CPT-4
58925	Ovarian cystectomy, unilateral or bilateral	Procedure	CPT-4
58940	Oophorectomy, partial or total, unilateral or bilateral;	Procedure	CPT-4
58943	Oophorectomy, partial or total, unilateral or bilateral; for ovarian, tubal or primary peritoneal malignancy, with para-aortic and pelvic lymph node biopsies, peritoneal washings, peritoneal biopsies, diaphragmatic assessments, with or without salpingectomy(s), with or without omentectomy	Procedure	CPT-4
58950	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy;	Procedure	CPT-4
58951	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy; with total abdominal hysterectomy, pelvic and limited para-aortic lymphadenectomy	Procedure	CPT-4

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Code	Description	Code Category	Code Type
58952	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-oophorectomy and omentectomy; with radical dissection for debulking (ie, radical excision or destruction, intra-abdominal or retroperitoneal tumors)	Procedure	CPT-4
58953	Bilateral salpingo-oophorectomy with omentectomy, total abdominal hysterectomy and radical dissection for debulking;	Procedure	CPT-4
58954	Bilateral salpingo-oophorectomy with omentectomy, total abdominal hysterectomy and radical dissection for debulking; with pelvic lymphadenectomy and limited para-aortic lymphadenectomy	Procedure	CPT-4
58956	Bilateral salpingo-oophorectomy with total omentectomy, total abdominal hysterectomy for malignancy	Procedure	CPT-4
58957	Resection (tumor debulking) of recurrent ovarian, tubal, primary peritoneal, uterine malignancy (intra-abdominal, retroperitoneal tumors), with omentectomy, if performed;	Procedure	CPT-4
58958	Resection (tumor debulking) of recurrent ovarian, tubal, primary peritoneal, uterine malignancy (intra-abdominal, retroperitoneal tumors), with omentectomy, if performed; with pelvic lymphadenectomy and limited para-aortic lymphadenectomy	Procedure	CPT-4
58960	Laparotomy, for staging or restaging of ovarian, tubal, or primary peritoneal malignancy (second look), with or without omentectomy, peritoneal washing, biopsy of abdominal and pelvic peritoneum, diaphragmatic assessment with pelvic and limited para-aortic lymphadenectomy	Procedure	CPT-4
58984	Laparoscopy, Surgical; With Fulguration Or Excision Of Lesions Of The Ovary, Pelvic Viscera, Or Peritoneal Surface By Any Method	Procedure	CPT-4
59120	Surgical treatment of ectopic pregnancy; tubal or ovarian, requiring salpingectomy and/or oophorectomy, abdominal or vaginal approach	Procedure	CPT-4
59121	Surgical treatment of ectopic pregnancy; tubal or ovarian, without salpingectomy and/or oophorectomy	Procedure	CPT-4
00842	Anesthesia for intraperitoneal procedures in lower abdomen including laparoscopy; amniocentesis	Procedure	CPT-4
00848	Anesthesia for intraperitoneal procedures in lower abdomen including laparoscopy; pelvic exenteration	Procedure	CPT-4
00850	Anesthesia for intraperitoneal procedures in lower abdomen including laparoscopy; cesarean section	Procedure	CPT-4
00851	Anesthesia for intraperitoneal procedures in lower abdomen including laparoscopy; tubal ligation/transection	Procedure	CPT-4
00855	Anesthesia for intraperitoneal procedures in lower abdomen including laparoscopy; cesarean hysterectomy	Procedure	CPT-4
56399	UNLISTED PROC-LAP/HYSTEROSCOPY	Procedure	CPT-4
57425	Laparoscopy, surgical, colpopexy (suspension of vaginal apex)	Procedure	CPT-4
58541	Laparoscopy, surgical, supracervical hysterectomy, for uterus 250 g or less;	Procedure	CPT-4
58543	Laparoscopy, surgical, supracervical hysterectomy, for uterus greater than 250 g;	Procedure	CPT-4

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Code	Description	Code Category	Code Type
58545	Laparoscopy, surgical, myomectomy, excision; 1 to 4 intramural myomas with total weight of 250 g or less and/or removal of surface myomas	Procedure	CPT-4
58546	Laparoscopy, surgical, myomectomy, excision; 5 or more intramural myomas and/or intramural myomas with total weight greater than 250 g	Procedure	CPT-4
58550	Laparoscopy, surgical, with vaginal hysterectomy, for uterus 250 g or less;	Procedure	CPT-4
58551	Laparoscopy, surgical; with removal of leiomyomata (single or multiple)	Procedure	CPT-4
58553	Laparoscopy, surgical, with vaginal hysterectomy, for uterus greater than 250 g;	Procedure	CPT-4
58570	Laparoscopy, surgical, with total hysterectomy, for uterus 250 g or less;	Procedure	CPT-4
58572	Laparoscopy, surgical, with total hysterectomy, for uterus greater than 250 g;	Procedure	CPT-4
58575	Laparoscopy, surgical, total hysterectomy for resection of malignancy (tumor debulking), with omentectomy including salpingo-oophorectomy, unilateral or bilateral, when performed	Procedure	CPT-4
58578	Unlisted laparoscopy procedure, uterus	Procedure	CPT-4
58674	Laparoscopy, surgical, ablation of uterine fibroid(s) including intraoperative ultrasound guidance and monitoring, radiofrequency	Procedure	CPT-4
58982	Laparoscopy, Surgical; With Fulguration Of Oviducts (with Or Without Transection)	Procedure	CPT-4
58983	Laparoscopy, Surgical; With Occlusion Of Oviducts By Device (eg, Band, Clip, Or Falope Ring)	Procedure	CPT-4
58985	Laparoscopy, Surgical; With Lysis Of Adhesions	Procedure	CPT-4
58986	Laparoscopy, Surgical; With Biopsy (single Or Multiple)	Procedure	CPT-4
58987	Laparoscopy, Surgical; With Aspiration (single Or Multiple)	Procedure	CPT-4
58988	Laparoscopy, Surgical; With Removal Of Adnexal Structures (partial Or Total Oophorectomy And/or Salpingectomy)	Procedure	CPT-4
59898	Unlisted laparoscopy procedure, maternity care and delivery	Procedure	CPT-4
00944	Anesthesia for vaginal procedures (including biopsy of labia, vagina, cervix or endometrium); vaginal hysterectomy	Procedure	CPT-4
01962	Anesthesia for urgent hysterectomy following delivery	Procedure	CPT-4
01963	Anesthesia for cesarean hysterectomy without any labor analgesia/anesthesia care	Procedure	CPT-4
01969	Anesthesia for cesarean hysterectomy following neuraxial labor analgesia/anesthesia (List separately in addition to code for primary procedure	Procedure	CPT-4
51597	Pelvic exenteration, complete, for vesical, prostatic or urethral malignancy, with removal of bladder and ureteral transplantations, with or without hysterectomy and/or abdominoperineal resection of rectum and colon and colostomy, or any combination thereof	Procedure	CPT-4
51925	Closure of vesicouterine fistula; with hysterectomy	Procedure	CPT-4
56350	HYSTEROSCOPY Diagnosis (SEPART PROC)	Procedure	CPT-4
56351	HYSTEROSCOPY SURG; W/SAMPL ENDOMETRIUM W/WO D&C	Procedure	CPT-4
56352	HYSTEROSCOPY SURG; W/LYSIS INTRAUTERINE ADHESION	Procedure	CPT-4
56353	HYSTEROSCOPY SURG; W/DIVIS/RESECT SEPTUM	Procedure	CPT-4
56354	HYSTEROSCOPY SURG; W/REMOV LEIOMYOMATA	Procedure	CPT-4

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Code	Description	Code Category	Code Type
56355	HYSTEROSCOPY SURG; W/REMOV IMPACTED F B	Procedure	CPT-4
56356	HYSTEROSCOPY SURG; W/ENDOMETRIAL ABLATION	Procedure	CPT-4
58205	Total Hysterectomy, Extended, Corpus Cancer, Including Partial	Procedure	CPT-4
58260	Vaginal hysterectomy, for uterus 250 g or less;	Procedure	CPT-4
58265	Vaginal Hysterectomy With Plastic Repair Of Vagina, Anterior	Procedure	CPT-4
58267	Vaginal hysterectomy, for uterus 250 g or less; with colpo-urethrocystopexy (Marshall-Marchetti-Krantz type, Pereyra type) with or without endoscopic control	Procedure	CPT-4
58270	Vaginal hysterectomy, for uterus 250 g or less; with repair of enterocele	Procedure	CPT-4
58275	Vaginal hysterectomy, with total or partial vaginectomy;	Procedure	CPT-4
58280	Vaginal hysterectomy, with total or partial vaginectomy; with repair of enterocele	Procedure	CPT-4
58285	Vaginal hysterectomy, radical (Schauta type operation)	Procedure	CPT-4
58290	Vaginal hysterectomy, for uterus greater than 250 g;	Procedure	CPT-4
58293	Vaginal hysterectomy, for uterus greater than 250 g; with colpo-urethrocystopexy (Marshall-Marchetti-Krantz type, Pereyra type) with or without endoscopic control	Procedure	CPT-4
58294	Vaginal hysterectomy, for uterus greater than 250 g; with repair of enterocele	Procedure	CPT-4
58353	Endometrial ablation, thermal, without hysteroscopic guidance	Procedure	CPT-4
58520	Hysterorrhaphy, repair of ruptured uterus (nonobstetrical)	Procedure	CPT-4
58540	Hysteroplasty, repair of uterine anomaly (Strassman type)	Procedure	CPT-4
58555	Hysteroscopy, diagnostic (separate procedure)	Procedure	CPT-4
58558	Hysteroscopy, surgical; with sampling (biopsy) of endometrium and/or polypectomy, with or without D & C	Procedure	CPT-4
58559	Hysteroscopy, surgical; with lysis of intrauterine adhesions (any method)	Procedure	CPT-4
58560	Hysteroscopy, surgical; with division or resection of intrauterine septum (any method)	Procedure	CPT-4
58561	Hysteroscopy, surgical; with removal of leiomyomata	Procedure	CPT-4
58562	Hysteroscopy, surgical; with removal of impacted foreign body	Procedure	CPT-4
58563	Hysteroscopy, surgical; with endometrial ablation (eg, endometrial resection, electrosurgical ablation, thermoablation)	Procedure	CPT-4
58565	Hysteroscopy, surgical; with bilateral fallopian tube cannulation to induce occlusion by placement of permanent implants	Procedure	CPT-4
58579	Unlisted hysteroscopy procedure, uterus	Procedure	CPT-4
58990	Hysteroscopy; Diagnostic	Procedure	CPT-4
58992	Hysteroscopy; With Lysis Of Intrauterine Adhesions Or Resection Of Intrauterine Septum (any Method)	Procedure	CPT-4
58994	Hysteroscopy; With Removal Of Submucous Leiomyomata (any Method)	Procedure	CPT-4
58995	Hysteroscopy	Procedure	CPT-4
58996	Hysteroscopy; With Endometrial Ablation (any Method)	Procedure	CPT-4
59100	Hysterotomy, abdominal (eg, for hydatidiform mole, abortion)	Procedure	CPT-4
59101	Hysterotomy, Abdominal, For Removal Of Hydatidiform Mole	Procedure	CPT-4
59105	Hysterotomy, Abdominal, For Legal Abortion	Procedure	CPT-4

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

Code	Description	Code Category	Code Type
59106	Hysterotomy, Abdominal, For Legal Abortion	Procedure	CPT-4
59130	Surgical treatment of ectopic pregnancy; abdominal pregnancy	Procedure	CPT-4
59135	Surgical treatment of ectopic pregnancy; interstitial, uterine pregnancy requiring total hysterectomy	Procedure	CPT-4
59136	Surgical treatment of ectopic pregnancy; interstitial, uterine pregnancy with partial resection of uterus	Procedure	CPT-4
59140	Surgical treatment of ectopic pregnancy; cervical, with evacuation	Procedure	CPT-4
59150	Laparoscopic treatment of ectopic pregnancy; without salpingectomy and/or oophorectomy	Procedure	CPT-4
59151	Laparoscopic treatment of ectopic pregnancy; with salpingectomy and/or oophorectomy	Procedure	CPT-4
59350	Hysterorrhaphy of ruptured uterus	Procedure	CPT-4
59351	Hysterorrhaphy Of Ruptured Uterus	Procedure	CPT-4
59525	Subtotal or total hysterectomy after cesarean delivery (List separately in addition to code for primary procedure)	Procedure	CPT-4
59560	Cesarean Section With Hysterectomy, Subtotal, Including	Procedure	CPT-4
59561	Cesarean Section With Hysterectomy, Subtotal, Including	Procedure	CPT-4
59580	Cesarean Section With Hysterectomy, Total, Including	Procedure	CPT-4
59581	Cesarean Section With Hysterectomy, Total, Including	Procedure	CPT-4
59852	Induced abortion, by 1 or more intra-amniotic injections (amniocentesis-injections), including hospital admission and visits, delivery of fetus and secundines; with hysterotomy (failed intra-amniotic injection)	Procedure	CPT-4
59857	Induced abortion, by 1 or more vaginal suppositories (eg, prostaglandin) with or without cervical dilation (eg, laminaria), including hospital admission and visits, delivery of fetus and secundines; with hysterotomy (failed medical evacuation)	Procedure	CPT-4
76831	Saline infusion sonohysterography (SIS), including color flow Doppler, when performed	Procedure	CPT-4
58972	Culture & fertilization oocyte	Procedure	CPT-4
89252	Assisted oocyte fertilization, microtechnique (any method)	Procedure	CPT-4
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	Procedure	HCPCS
S4013	Complete cycle, gamete intrafallopian transfer (GIFT), case rate	Procedure	HCPCS
S4014	Complete cycle, zygote intrafallopian transfer (ZIFT), case rate	Procedure	HCPCS
S4015	Complete in vitro fertilization cycle, not otherwise specified, case rate	Procedure	HCPCS
S4016	Frozen in vitro fertilization cycle, case rate	Procedure	HCPCS
S4022	Assisted oocyte fertilization, case rate	Procedure	HCPCS
S4023	Donor egg cycle, incomplete, case rate	Procedure	HCPCS
S4025	Donor services for in vitro fertilization (sperm or embryo), case rate	Procedure	HCPCS
S4035	Stimulated intrauterine insemination (IUI), case rate	Procedure	HCPCS

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

Code	Description	Code Category	Code Type
S4037	Cryopreserved embryo transfer, case rate	Procedure	HCPCS
S4040	Monitoring and storage of cryopreserved embryos, per 30 days	Procedure	HCPCS
G0331	PET imaging restaging ovarian	Procedure	HCPCS
S2078	Laparoscopic supracervical hysterectomy (subtotal hysterectomy), with or without removal of tube(s), with or without removal of ovary(s)	Procedure	HCPCS
G9823	Endometrial sampling or hysteroscopy with biopsy and results documented	Procedure	HCPCS
G9824	Endometrial sampling or hysteroscopy with biopsy and results not documented	Procedure	HCPCS
S2255	Hysteroscopy, surgical; with occlusion of oviducts bilaterally by micro-inserts for permanent sterilization	Procedure	HCPCS
V23.9	Unspecified high-risk pregnancy	Diagnosis	ICD-09-CM
Z3A.08	8 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
Z3A.01	Less than 8 weeks gestation of pregnancy	Diagnosis	ICD-10-CM
632	Missed abortion	Diagnosis	ICD-09-CM
O02.1	Missed abortion	Diagnosis	ICD-10-CM
N84	Polyp of female genital tract	Diagnosis	ICD-10-CM
N84.0	Polyp of corpus uteri	Diagnosis	ICD-10-CM
N84.1	Polyp of cervix uteri	Diagnosis	ICD-10-CM
N84.8	Polyp of other parts of female genital tract	Diagnosis	ICD-10-CM
N84.9	Polyp of female genital tract, unspecified	Diagnosis	ICD-10-CM
621.0	Polyp of corpus uteri	Diagnosis	ICD-09-CM
629.81	Recurrent pregnancy loss without current pregnancy	Diagnosis	ICD-09-CM
N96	Recurrent pregnancy loss	Diagnosis	ICD-10-CM
Dermatologic Conditions			
704.09	Other alopecia	Diagnosis	ICD-09-CM
L66.2	Folliculitis decalvans	Diagnosis	ICD-10-CM
L70.0	Acne vulgaris	Diagnosis	ICD-10-CM
706.1	Other acne	Diagnosis	ICD-09-CM
L70.1	Acne conglobata	Diagnosis	ICD-10-CM
706	Acne varioliformis	Diagnosis	ICD-09-CM
L70.2	Acne varioliformis	Diagnosis	ICD-10-CM
L70.3	Acne tropica	Diagnosis	ICD-10-CM
L70.4	Infantile acne	Diagnosis	ICD-10-CM
L70.5	Acne excoriee	Diagnosis	ICD-10-CM
L70.8	Other acne	Diagnosis	ICD-10-CM
L70.9	Acne, unspecified	Diagnosis	ICD-10-CM
704.8	Other specified disease of hair and hair follicles	Diagnosis	ICD-09-CM
704.9	Unspecified disease of hair and hair follicles	Diagnosis	ICD-09-CM
705.83	Hidradenitis	Diagnosis	ICD-09-CM
706.1	Other acne	Diagnosis	ICD-09-CM
706.9	Unspecified disease of sebaceous glands	Diagnosis	ICD-09-CM

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

Code	Description	Code Category	Code Type
L73	Other follicular disorders	Diagnosis	ICD-10-CM
L73.0	Acne keloid	Diagnosis	ICD-10-CM
L73.1	Pseudofolliculitis barbae	Diagnosis	ICD-10-CM
L73.2	Hidradenitis suppurativa	Diagnosis	ICD-10-CM
L73.8	Other specified follicular disorders	Diagnosis	ICD-10-CM
L73.9	Follicular disorder, unspecified	Diagnosis	ICD-10-CM
695.3	Rosacea	Diagnosis	ICD-09-CM
L71.9	Rosacea, unspecified	Diagnosis	ICD-10-CM
L65.8	Other specified nonscarring hair loss	Diagnosis	ICD-10-CM
L66.0	Pseudopelade	Diagnosis	ICD-10-CM
L66.8	Other cicatricial alopecia	Diagnosis	ICD-10-CM
L71.0	Perioral dermatitis	Diagnosis	ICD-10-CM
L71.1	Rhinophyma	Diagnosis	ICD-10-CM
L71.8	Other rosacea	Diagnosis	ICD-10-CM
H10.82	Rosacea conjunctivitis	Diagnosis	ICD-10-CM
H10.821	Rosacea conjunctivitis, right eye	Diagnosis	ICD-10-CM
H10.822	Rosacea conjunctivitis, left eye	Diagnosis	ICD-10-CM
H10.823	Rosacea conjunctivitis, bilateral	Diagnosis	ICD-10-CM
H10.829	Rosacea conjunctivitis, unspecified eye	Diagnosis	ICD-10-CM
L71	Rosacea	Diagnosis	ICD-10-CM
372.31	Rosacea conjunctivitis	Diagnosis	ICD-09-CM

Appendix E. Specifications Defining Parameters in this Request

The Center for Drug Evaluation and Research (CDER) has requested execution of the Cohort Identification and Descriptive Analysis (CIDA) module, version 9.5.0 to estimate geographic rates of single-dose doxycycline dispensings and describe characteristics of patients with these dispensings in the Sentinel Distributed Database (SDD).

Query Period: January 1, 2009 - February 29, 2020
Coverage Requirement: Medical & Drug Coverage
Pre-Index Enrollment Requirement: 30 days
Post-Index Enrollment Requirement: 30 days
Enrollment Gap: 45 days
Age Groups: 0-7, 8-18, 19-35, 36-50, 51-64, 65+ years
Censor Output Categorization: N/A
Restrictions: None
Envelope Macro: Default - on: Reclassify encounters during inpatient stay as inpatient
Freeze Data: None

Scenario	Exposure			Isolated Dispensing Definition (custom washout and exclusion)		Inclusion/Exclusion		
	Index Exposure	Cohort Definition	Care Setting	Censor Observation at Evidence of	Programming	Window	Care Setting	Definition
1	Doxycycline	01: First valid index dates during query period	Any	Death; Data Partner End Date; Query End Date	<ul style="list-style-type: none"> No evidence of a different dispensing in the day before or after the index dispensing Index dispensings with a same-day dispensing of the same group (doxycycline) will be excluded 	N/A	N/A	N/A
2	Doxycycline	02: All valid index dates during query period	Any	Death; Data Partner End Date; Query End Date	<ul style="list-style-type: none"> No evidence of a different dispensing in the day before or after the index dispensing Index dispensings with a same-day dispensing of the same group (doxycycline) will be excluded 	N/A	N/A	N/A
3	Doxycycline	02: All valid index dates during query period	Any	Death; Data Partner End Date; Query End Date	<ul style="list-style-type: none"> No evidence of a different dispensing in the day before or after the index dispensing Index dispensings with a same-day dispensing of the same group (doxycycline) will be excluded 	(-30, 30)	Any Care Setting	Obstetric and dermatologic conditions

International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9), International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10), Healthcare Common Procedure Coding System (HCPCS), and Current Procedural Terminology, Fourth Edition (CPT-4) codes are provided by Optum360.

National Drug Codes (NDCs) codes are checked against First Data Bank's "FDB MedKnowledge®" database.

Appendix F. Specifications Defining Baseline Characteristics in this Request

Baseline Characteristics

Characteristic	Care Setting	Principal Diagnosis Position	Evaluation Period Start (days)	Evaluation Period End (days)	Number of Instances the Characteristics Should be Found in Evaluation Period
Age			0	0	
Sex			0	0	
Race			0	0	
Year			0	0	
Medication Form					
Capsule	Any	Any	0	0	1
Suspension	Any	Any	0	0	1
Tablet	Any	Any	0	0	1
Syrup	Any	Any	0	0	1
Encounter					
Arthropod encounter	Any	Any	-7	7	1
Macroscopic examination for arthropod	Any	Any	-7	7	1
Any tickborne disease (Lyme and other)	Any	Any	-7	7	1
Lyme disease	Any	Any	-7	7	1
By code...	Any	Any	-7	7	1
Other tickborne diseases	Any	Any	-7	7	1
By code...	Any	Any	-7	7	1
Obstetric and Reproductive					
Any obstetric condition	Any	Any	-7	7	1
Encounter for assisted reproductive fertility procedure cycle	Any	Any	-7	7	1
Encounter for elective termination of pregnancy	Any	Any	-7	7	1
Encounter for pregnancy test, result positive	Any	Any	-7	7	1
Encounter for pregnancy test, result unknown	Any	Any	-7	7	1
Encounter for preprocedural examinations	Any	Any	-7	7	1
Encounter of female for testing for genetic disease carrier status for procreative management	Any	Any	-7	7	1
Incomplete spontaneous abortion without complication	Any	Any	-7	7	1
Infertility	Any	Any	-7	7	1
Less than 8 weeks gestation of pregnancy	Any	Any	-7	7	1
Missed Abortion	Any	Any	-7	7	1

Appendix F. Specifications Defining Baseline Characteristics in this Request

Baseline Characteristics

Characteristic	Care Setting	Principal Diagnosis Position	Evaluation Period Start (days)	Evaluation Period End (days)	Number of Instances the Characteristics Should be Found in Evaluation Period
Polyp of corpus uteri	Any	Any	-7	7	1
Recurrent pregnancy loss	Any	Any	-7	7	1
Any dermatologic condition	Any	Any	-7	7	1
Acquired hypothyroidism	Any	Any	-7	7	1
Acute myocardial infarction	Any	Any	-7	7	1
Alzheimer's disease and related disorders or senile dementia	Any	Any	-7	7	1
Anemia	Any	Any	-7	7	1
Asthma	Any	Any	-7	7	1
Atrial fibrillation	Any	Any	-7	7	1
Benign prostatic hyperplasia	Any	Any	-7	7	1
Cataract	Any	Any	-7	7	1
Chronic kidney disease	Any	Any	-7	7	1
Chronic obstructive pulmonary disease and bronchiectasis	Any	Any	-7	7	1
Colorectal cancer	Any	Any	-7	7	1
Depression	Any	Any	-7	7	1
Diabetes	Any	Any	-7	7	1
Endometrial cancer	Any	Any	-7	7	1
Glaucoma	Any	Any	-7	7	1
Heart failure	Any	Any	-7	7	1
Hip/pelvic fracture	Any	Any	-7	7	1
Hyperlipidemia	Any	Any	-7	7	1
Hypertension	Any	Any	-7	7	1
Ischemic heart disease	Any	Any	-7	7	1
Lung cancer	Any	Any	-7	7	1
Male/female breast cancer	Any	Any	-7	7	1
Obesity	Any	Any	-7	7	1
Osteoporosis	Any	Any	-7	7	1
Prostate cancer	Any	Any	-7	7	1
Rheumatoid arthritis/osteoarthritis	Any	Any	-7	7	1
Stroke/transient ischemic attack	Any	Any	-7	7	1
Inpatient encounter	Any	Any	-7	7	1
Emergency department encounter	Any	Any	-7	7	1
Ambulatory encounter	Any	Any	-7	7	1
Other ambulatory encounter	Any	Any	-7	7	1
Institutional stay encounter	Any	Any	-7	7	1

Appendix F. Specifications Defining Baseline Characteristics in this Request
Baseline Characteristics

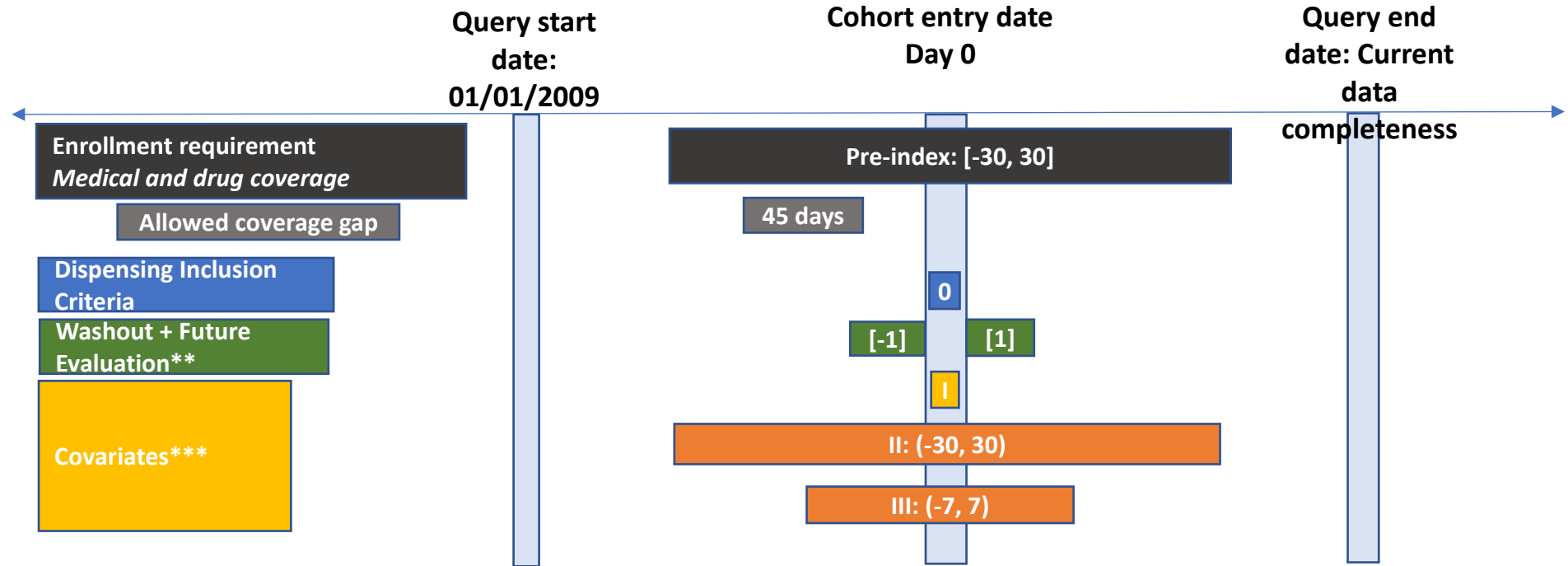
Characteristic	Care Setting	Principal Diagnosis Position	Evaluation Period Start (days)	Evaluation Period End (days)	Number of Instances the Characteristics Should be Found in Evaluation Period
No encounter	Any	Any	-7	7	1
Arthropod encounter	Any	Any	-30	30	1
Macroscopic examination for arthropod	Any	Any	-30	30	1
Any tickborne disease	Any	Any	-30	30	1
Lyme disease	Any	Any	-30	30	1
By code...	Any	Any	-30	30	1
Other tickborne diseases	Any	Any	-30	30	1
By code...	Any	Any	-30	30	1
Any obstetric condition	Any	Any	-30	30	1
Encounter for assisted reproductive fertility procedure cycle	Any	Any	-30	30	1
Encounter for elective termination of pregnancy	Any	Any	-30	30	1
Encounter for pregnancy test, result positive	Any	Any	-30	30	1
Encounter for pregnancy test, result unknown	Any	Any	-30	30	1
Encounter for preprocedural examinations	Any	Any	-30	30	1
Encounter of female for testing for genetic disease carrier status for procreative management	Any	Any	-30	30	1
Incomplete spontaneous abortion without complication	Any	Any	-30	30	1
Infertility	Any	Any	-30	30	1
Less than 8 weeks gestation of pregnancy	Any	Any	-30	30	1
Missed Abortion	Any	Any	-30	30	1
Polyp of corpus uteri	Any	Any	-30	30	1
Recurrent pregnancy loss	Any	Any	-30	30	1
Any dermatologic condition	Any	Any	-7	7	1
Acquired hypothyroidism	Any	Any	-30	30	1
Acute myocardial infarction	Any	Any	-30	30	1
Alzheimer's disease and related disorders or senile dementia	Any	Any	-30	30	1
Anemia	Any	Any	-30	30	1

Appendix F. Specifications Defining Baseline Characteristics in this Request

Baseline Characteristics

Characteristic	Care Setting	Principal Diagnosis Position	Evaluation Period Start (days)	Evaluation Period End (days)	Number of Instances the Characteristics Should be Found in Evaluation Period
Asthma	Any	Any	-30	30	1
Atrial fibrillation	Any	Any	-30	30	1
Benign prostatic hyperplasia	Any	Any	-30	30	1
Cataract	Any	Any	-30	30	1
Chronic kidney disease	Any	Any	-30	30	1
Chronic obstructive pulmonary disease and bronchiectasis	Any	Any	-30	30	1
Colorectal cancer	Any	Any	-30	30	1
Depression	Any	Any	-30	30	1
Diabetes	Any	Any	-30	30	1
Endometrial cancer	Any	Any	-30	30	1
Glaucoma	Any	Any	-30	30	1
Heart failure	Any	Any	-30	30	1
Hip/pelvic fracture	Any	Any	-30	30	1
Hyperlipidemia	Any	Any	-30	30	1
Hypertension	Any	Any	-30	30	1
Ischemic heart disease	Any	Any	-30	30	1
Lung cancer	Any	Any	-30	30	1
Male/female breast cancer	Any	Any	-30	30	1
Obesity	Any	Any	-30	30	1
Osteoporosis	Any	Any	-30	30	1
Prostate cancer	Any	Any	-30	30	1
Rheumatoid arthritis/osteoarthritis	Any	Any	-30	30	1
Stroke/transient ischemic attack	Any	Any	-30	30	1
Inpatient encounter	Any	Any	-30	30	1
Emergency department encounter	Any	Any	-30	30	1
Ambulatory encounter	Any	Any	-30	30	1
Other ambulatory encounter	Any	Any	-30	30	1
Institutional stay encounter	Any	Any	-30	30	1
No encounter	Any	Any	-30	30	1

**Type 1 design diagram: Cohort Def 2
(include all valid exposures)**



***Inclusion Criteria:**

Qualifying dispensing of doxycycline (≤ 200 mg, 1 day supply)

This will represent outpatient pharmacy dispensings only.

****Washout Criteria + Future Evaluation**

Washout: Do not include doxycycline dispensings with evidence of another doxycycline dispensing (dispensing itself, or day supply of multi-day dispensing) in the day prior.

Future Evaluation: Do not include doxycycline dispensings with evidence of another doxycycline dispensing the next day.

This serves to only evaluate dispensings that are in isolation from other dispensings. 1 day supply dispensings of doxycycline dispensed sequentially are

*****Covariates**

Window I: Index Date - Age (all ages), sex, race, year on index date; dose and dispensing form; urbanicity
Window II: 7 Days surrounding index - Lyme related indications, dermatological and obstetric conditions, comorbidities of interest, care setting encounters
Window III: 30 days surrounding index - Same as Window II

Appendix H. Design Diagram of Isolated Dispensings of Interest

