### **Chronic Conditions Warehouse**

Your source for national CMS Medicare and Medicaid research data

### **Chronic Conditions Warehouse**

30 CCW Chronic Conditions Algorithms: MBSF\_CHRONIC\_{YYYY} File

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## 30 CCW Chronic Conditions Algorithms:

MBSF\_CHRONIC\_{YYYY} File

Algorithms	Reference Period (# of years)	Valid ICD-10 Codes <sup>1</sup>	Number/Type of Claims to Qualify <sup>2</sup>
Acute Myocardial Infarction	1 year	123.0, 123.1, 123.2, 123.3, 123.4, 123.5, 123.6, 123.7, 123.8, 121.01, 121.02, 121.09, 121.11, 121.19, 121.21, 121.29, 121.3, 121.4, 121.9, 121.A1, 121.A9, 122.0, 122.1, 122.2, 122.8, 122.9 (any DX on the claim)	At least 1 inpatient claim with DX codes
Alzheimer's Disease	2 years	G30.0, G30.1, G30.8, G30.9 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes
Anemia	2 years	C94.6, D46.0, D46.1, D46.20, D46.21, D46.22, D46.4, D46.9, D46.A, D46.B, D46.C, D46.Z, D47.4, D50.0, D50.1, D50.8, D50.9, D51.0, D51.1, D51.2, D51.3, D51.8, D51.9, D52.0, D52.1, D52.8, D52.9, D53.0, D53.1, D53.2, D53.8, D53.9, D55.0, D55.1, D55.2, D55.21, D55.29, D55.3, D55.8, D55.9, D56.0, D56.1, D56.2, D56.3, D56.4, D56.5, D56.8, D56.9, D57.00, D57.01, D57.02, D57.1, D57.20, D57.211, D57.212, D57.219, D57.3, D57.40, D57.411, D57.412, D57.413, D57.418, D57.419, D57.42, D57.431, D57.432, D57.433, D57.438, D57.439, D57.44, D57.451, D57.452, D57.453, D57.458, D57.459, D57.80, D57.811, D57.812, D57.813, D57.818, D57.819, D58.0, D58.1, D58.2, D58.8, D58.9, D59.0, D59.1, D59.10, D59.11, D59.12, D59.13, D59.19, D59.2, D59.3, D59.4, D59.5, D59.6, D59.8, D59.9, D60.0, D60.1, D60.8, D60.9, D61.01, D61.09, D61.1, D61.2, D61.3, D61.810, D61.811, D61.818, D61.82, D61.89, D61.9, D63.0, D63.1, D63.8, D64.0, D64.1, D64.2, D64.3, D64.4, D64.81, D64.89, D64.9, D75.81 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes
Asthma	2 years	J45.20, J45.21, J45.22, J45.30, J45.31, J45.32, J45.40, J45.41, J45.42, J45.50, J45.51, J45.52, J45.901, J45.902, J45.909, J45.990, J45.991, J45.998 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes
Atrial Fibrillation and Flutter	2 years	I48.0, I48.1, I48.11, I48.19, I48.2, I48.20, I48.21, I48.3, I48.4, I48.91 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes
Benign Prostatic Hyperplasia	2 years	N40.0, N40.1, N40.2, N40.3 (any DX on the claim)  EXCLUSION: If any of the qualifying claims also have an ICD-10 diagnosis of D29.1, then EXCLUDE	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes
Cancer, Breast	2 years	C50.011, C50.012, C50.019, C50.021, C50.022, C50.029, C50.111, C50.112, C50.119, C50.121, C50.122, C50.129, C50.211, C50.212, C50.219, C50.221, C50.222, C50.229, C50.311, C50.312, C50.319, C50.321, C50.322, C50.329, C50.411, C50.412, C50.419, C50.421, C50.422, C50.429, C50.511, C50.512, C50.519, C50.521, C50.522, C50.529, C50.611, C50.612, C50.619, C50.621, C50.622, C50.629, C50.811, C50.812, C50.819, C50.821, C50.822, C50.829, C50.911, C50.912, C50.912, C50.922, C50.929, D05.00, D05.01, D05.02, D05.10, D05.11, D05.12, D05.80, D05.81, D05.82, D05.90, D05.91, D05.92, Z17.0, Z17.1, Z19.1, Z19.2, Z85.3, Z86.000 (any DX on the claim)	At least 1 inpatient/SNF claim <b>OR</b> 2 HOP/carrier claims with DX codes

Algorithms	Reference Period (# of years)	Valid ICD-10 Codes <sup>1</sup>	Number/Type of Claims to Qualify <sup>2</sup>
Cancer, Colorectal	2 years	C18.0, C18.1, C18.2, C18.3, C18.4, C18.5, C18.6, C18.7, C18.8, C18.9, C19, C20, C49.A4, C49.A5, D01.0, D01.1, D01.2, Z85.030, Z85.038, Z85.040, Z85.048 (any DX on the claim)	At least 1 inpatient/SNF claim <b>OR</b> 2 HOP/carrier claims with DX codes
Cancer, Endometrial	2 years	C54.0, C54.1, C54.2, C54.3, C54.8, C54.9, D07.0, Z85.42 (any DX on the claim)	At least 1 inpatient/SNF claim <b>OR</b> 2 HOP/carrier claims with DX codes
Cancer, Lung	2 years	C34.00, C34.01, C34.02, C34.10, C34.11, C34.12, C34.2, C34.30, C34.31, C34.32, C34.80, C34.81, C34.82, C34.90, C34.91, C34.92, D02.20, D02.21, D02.22, Z85.110, Z85.118 (any DX on the claim)	At least 1 inpatient/SNF claim <b>OR</b> 2 HOP/carrier claims with DX codes
Cancer, Prostate	2 years	C61, D07.5, Z85.46 (any DX on the claim)	At least 1 inpatient/SNF claim <b>OR</b> 2 HOP/carrier claims with DX codes
Cancer, Urologic (Kidney, Renal Pelvis, and Ureter)	2 years	C64.1, C64.2, C64.9, C65.1, C65.2, C65.9, C66.1, C66.2, C66.9, C68.8, C68.9, D09.10, D09.19, Z85.520, Z85.528, Z85.53, Z85.54, Z85.59 (any DX on the claim)	At least 1 inpatient/SNF claim <b>OR</b> 2 HOP/carrier claims with DX codes
Cataract	1 year	E08.36, E09.36, E10.36, E11.36, E13.36, H25.011, H25.012, H25.013, H25.019, H25.031, H25.032, H25.033, H25.039, H25.041, H25.042, H25.043, H25.049, H25.091, H25.092, H25.093, H25.099, H25.10, H25.11, H25.12, H25.13, H25.20, H25.21, H25.22, H25.23, H25.811, H25.812, H25.813, H25.819, H25.89, H25.9, H26.001, H26.002, H26.003, H26.009, H26.011, H26.012, H26.013, H26.019, H26.031, H26.032, H26.033, H26.039, H26.041, H26.042, H26.043, H26.049, H26.051, H26.052, H26.053, H26.059, H26.061, H26.062, H26.063, H26.069, H26.09, H26.101, H26.102, H26.103, H26.109, H26.111, H26.112, H26.113, H26.119, H26.121, H26.122, H26.123, H26.129, H26.131, H26.132, H26.133, H26.139, H26.20, H26.211, H26.212, H26.213, H26.219, H26.221, H26.221, H26.223, H26.229, H26.30, H26.31, H26.32, H26.33, H26.40, H26.411, H26.412, H26.413, H26.419, H26.491, H26.492, H26.493, H26.499, H26.8, H26.9, Q12.0 (any DX on the claim)	At least 1 HOP or carrier claim with DX codes
Chronic Kidney Disease	2 years	A18.11, A52.75, B52.0, E08.21, E08.22, E08.29, E09.21, E09.22, E09.29, E10.21, E10.22, E10.29, E11.21, E11.22, E11.29, E13.21, E13.22, E13.29, I12.0, I12.9, I13.0, I13.10, I13.11, I13.2, K76.7, M10.30, M10.311, M10.312, M10.319, M10.321, M10.322, M10.329, M10.331, M10.332, M10.339, M10.341, M10.342, M10.349, M10.351, M10.352, M10.359, M10.361, M10.362, M10.369, M10.371, M10.372, M10.379, M10.38, M10.39, M32.14, M32.15, M35.04, M35.04, N01.0, N01.1, N01.2, N01.3, N01.4, N01.5, N01.6, N01.7, N01.8, N01.9, N01.A, N02.0, N02.1, N02.2, N02.3, N02.4, N02.5, N02.6, N02.7, N02.8, N02.9, N02.A, N03.0, N03.1, N03.2, N03.3, N03.4, N03.5, N03.6, N03.7, N03.8, N03.9, N03.A, N04.0, N04.1, N04.2, N04.3, N04.4, N04.5, N04.6, N04.7, N04.8, N04.9, N04.A, N05.0, N05.1, N05.2, N05.3, N05.4, N05.5, N05.6, N05.7, N05.8, N05.9, N05.A, N06.0, N06.1, N06.2, N06.3, N06.4, N06.5, N06.6, N06.7, N06.8, N06.9, N06.A, N07.0, N07.1, N07.2, N07.3, N07.4, N07.5, N07.6, N07.7, N07.8, N07.9, N07.A, N08, N14.0, N14.1, N14.2, N14.3, N14.4, N15.0, N15.8, N15.9, N16, N18.1, N18.2, N18.3, N18.30, N18.31, N18.32, N18.4, N18.5, N18.6, N18.9, N25.1, N25.89, N25.9, N26.1, N26.9, N99.0, Q61.02, Q61.11, Q61.19, Q61.2, Q61.3, Q61.4, Q61.5, Q61.8 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes
Chronic Obstructive Pulmonary Disease	2 years	J40, J41.0, J41.1, J41.8, J42, J43.0, J43.1, J43.2, J43.9, J44.0, J44.1, J44.9, J47.0, J47.1, J47.9, J98.2, J98.3 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim

Algorithms	Reference Period (# of years)	Valid ICD-10 Codes <sup>1</sup>	Number/Type of Claims to Qualify <sup>2</sup>
			<b>OR</b> 2 HOP/carrier claims with DX codes
Depression, Bipolar, or Other Depressive Mood Disorders	2 years	F06.31, F06.32, F31.0, F31.10, F31.11, F31.12, F31.13, F31.2, F31.30, F31.31, F31.32, F31.4, F31.5, F31.60, F31.61, F31.62, F31.63, F31.64, F31.71, F31.73, F31.75, F31.76, F31.77, F31.78, F31.81, F31.89, F31.9, F32.0, F32.1, F32.2, F32.3, F32.4, F32.5, F32.8, F32.89, F32.9, F32.9, F32.0, F33.1, F33.2, F33.3, F33.40, F33.41, F33.42, F33.8, F33.9, F34.0, F34.1, F43.21, F43.23 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes
Diabetes	2 years	E08.00, E08.01, E08.10, E08.11, E08.21, E08.22, E08.29, E08.311, E08.311, E08.3211, E08.3211, E08.3212, E08.3213, E08.3219, E08.329, E08.329, E08.3293, E08.3299, E08.3311, E08.3311, E08.3312, E08.3313, E08.3319, E08.3391, E08.3392, E08.3393, E08.3393, E08.3393, E08.3393, E08.3394, E08.3495, E08.3496, E08.3496, E08.3496, E08.3496, E08.3514, E08.3514, E08.3514, E08.3514, E08.3514, E08.3514, E08.3524, E08.3524, E08.3524, E08.3524, E08.3525, E08.3523, E08.3529, E08.3531, E08.3529, E08.3539, E08.3539, E08.3594, E08.3542, E08.3542, E08.3544, E08.3542, E08.3714, E08.3714, E08.3424, E08.442, E08.4424, E08.442, E08.4424, E09.4424, E09.4424, E09.4424, E09.4444, E09	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes

Algorithms	Reference Period (# of years)	Valid ICD-10 Codes <sup>1</sup>	Number/Type of Claims to Qualify <sup>2</sup>
		E13.3553, E13.3559, E13.359, E13.36, E13.39, E13.40, E13.41, E13.42, E13.43, E13.44, E13.49, E13.51, E13.52, E13.59, E13.610, E13.618, E13.620, E13.621, E13.622, E13.628, E13.630, E13.638, E13.641, E13.649, E13.65, E13.69, E13.8, E13.9 (any DX on the claim)	
Glaucoma	2 years	H40.011, H40.012, H40.013, H40.019, H40.021, H40.022, H40.023, H40.029, H40.041, H40.042, H40.043, H40.049, H40.051, H40.051, H40.053, H40.059, H40.1003, H40.1004, H40.10003, H40.10003, H40.10004, H40.1111, H40.1111, H40.1112, H40.1113, H40.1113, H40.1130, H40.1113, H40.1131, H40.1131, H40.1132, H40.1133, H40.1134, H40.1130, H40.1191, H40.1191, H40.1191, H40.1121, H40.1121, H40.1122, H40.1221, H40.1221, H40.1222, H40.1223, H40.1223, H40.1224, H40.1230, H40.1221, H40.1231, H40.1233, H40.1234, H40.1290, H40.1291, H40.1292, H40.1293, H40.1293, H40.1311, H40.1312, H40.1313, H40.1314, H40.1314, H40.1320, H40.1321, H40.1322, H40.1323, H40.1323, H40.1324, H40.1329, H40.1323, H40.1324, H40.1333, H40.1334, H40.1334, H40.1390, H40.1391, H40.1392, H40.1393, H40.1394, H40.1410, H40.1411, H40.1412, H40.1413, H40.1414, H40.1420, H40.1421, H40.1422, H40.1423, H40.1424, H40.1430, H40.1431, H40.1432, H40.1433, H40.1434, H40.1490, H40.1491, H40.1492, H40.1493, H40.1491, H40.151, H40.152, H40.153, H40.153, H40.153, H40.1291, H40.2000, H40.2001, H40.	At least 1 HOP or carrier claim with DX codes
Heart Failure and Non-Ischemic Heart Disease	2 years	109.81, 111.0, 113.0, 113.2, 142.0, 142.5, 142.6, 142.7, 142.8, 143, 150.1, 150.20, 150.21, 150.22, 150.23, 150.30, 150.31, 150.32, 150.33, 150.40, 150.41, 150.42, 150.43, 150.810, 150.811, 150.812, 150.813, 150.814, 150.82, 150.83, 150.84, 150.89, 150.9, P29.0 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes
Hip/Pelvic Fracture	1 year	M80.051A, M80.052A, M80.059A, M80.851A, M80.852A, M80.859A, M84.350A, M84.351A, M84.352A, M84.353A, M84.359A, M84.451A, M84.452A, M84.453A, M84.459A, M84.550A, M84.551A, M84.552A, M84.553A, M84.559A, M84.650A, M84.651A, M84.652A, M84.653A, M84.659A, M97.01XA, M97.02XA, S32.301A, S32.301B, S32.302A, S32.302B, S32.309A, S32.309B, S32.311A, S32.311B, S32.312A, S32.312B, S32.313A, S32.313B, S32.314A, S32.314B, S32.315A, S32.315B, S32.316A, S32.316B, S32.391A, S32.391B, S32.392A, S32.399B, S32.399A, S32.399B, S32.401A, S32.401B, S32.402A, S32.402B, S32.409A, S32.409B, S32.411A, S32.411B, S32.412A, S32.412B, S32.413A, S32.413B, S32.414A, S32.414B, S32.415A, S32.415B, S32.415B, S32.426A, S32.426B, S32.421A, S32.431B, S32.432A, S32.432B, S32.433A, S32.433B, S32.434A, S32.434B, S32.434B, S32.435A, S32.435B, S32.436A, S32.436B, S32.441A, S32.441B, S32.442A,	At least 1 inpatient, SNF, HOP or carrier claim with DX codes

Algorithms	Reference Period (# of years)	Valid ICD-10 Codes <sup>1</sup>	Number/Type of Claims to Qualify <sup>2</sup>
	(ii oi yeuis)	\$32.442B, \$32.443A, \$32.443B, \$32.444A, \$32.444B, \$32.445A, \$32.445B, \$32.446A, \$32.446B, \$32.451A, \$32.451B, \$32.452A, \$32.452B, \$32.452B, \$32.452B, \$32.453B, \$32.453B, \$32.454A, \$32.454B, \$32.455B, \$32.455B, \$32.456A, \$32.456B, \$32.466B, \$32.466B, \$32.466B, \$32.4661B, \$32.4672A, \$32.472B, \$32.477B, \$32.476A, \$32.476B, \$32.487B, \$32.481B, \$32.481B, \$32.482A, \$32.482B, \$32.483B, \$32.484B, \$32.484B, \$32.485B, \$32.485B, \$32.502B, \$32.509B, \$32.509B, \$32.511A, \$32.511B, \$32.512B, \$32.512B, \$32.519B, \$32.501A, \$32.501B, \$32.502A, \$32.502B, \$32.509B, \$32.509B, \$32.511A, \$32.511B, \$32.512B, \$32.602A, \$32.602B, \$32.609B, \$32.601B, \$32.	
Hyperlipidemia	2 years	E78.0, E78.00, E78.01, E78.1, E78.2, E78.3, E78.4, E78.41, E78.49, E78.5 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes
Hypertension	2 years	H35.031, H35.032, H35.033, H35.039, I10, I11.0, I11.9, I12.0, I12.9, I13.0, I13.10, I13.11, I13.2, I15.0, I15.1, I15.2, I15.8, I15.9, I67.4, N26.2 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes

Algorithms	Reference Period (# of years)	Valid ICD-10 Codes <sup>1</sup>	Number/Type of Claims to Qualify <sup>2</sup>
Hypothyroidism	2 years	E00.0, E00.1, E00.2, E00.9, E01.8, E02, E03.0, E03.1, E03.2, E03.3, E03.4, E03.8, E03.9, E89.0 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes
Ischemic Heart Disease	2 years	120.0, 120.1, 120.8, 124.0, 124.1, 124.8, 125.10, 125.110, 125.111, 125.118, 125.119, 125.3, 125.41, 125.42, 125.5, 125.6, 125.700, 125.701, 125.708, 125.710, 125.711, 125.718, 125.719, 125.720, 125.721, 125.728, 125.729, 125.730, 125.731, 125.738, 125.739, 125.750, 125.751, 125.758, 125.759, 125.760, 125.761, 125.768, 125.769, 125.790, 125.791, 125.798, 125.799, 125.810, 125.811, 125.812, 125.82, 125.83, 125.84, 125.89, 125.9 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes
Non-Alzheimer's Dementia	2 years	F01.50, F01.51, F02.80, F02.81, F03.90, F03.91, F05, G13.8, G31.01, G31.09, G31.1, G31.2, G31.83, G94, R41.81 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes
Osteoporosis With or Without Pathological Fracture	2 years	M80.00XA, M80.011A, M80.012A, M80.019A, M80.021A, M80.022A, M80.029A, M80.031A, M80.032A, M80.039A, M80.041A, M80.042A, M80.049A, M80.051A, M80.052A, M80.059A, M80.061A, M80.062A, M80.069A, M80.071A, M80.072A, M80.079A, M80.08XA, M80.0XA, M80.80XA, M80.811A, M80.812A, M80.819A, M80.821A, M80.822A, M80.829A, M80.831A, M80.832A, M80.839A, M80.841A, M80.842A, M80.849A, M80.851A, M80.852A, M80.859A, M80.861A, M80.862A, M80.869A, M80.871A, M80.872A, M80.879A, M80.88XA, M80.8AXA, M81.0, M81.6, M81.8 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes
Parkinson's Disease and Secondary Parkinsonism	2 years	G20, G21.11, G21.19, G21.3, G21.4, G21.8, G21.9, G31.83 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim OR 2 HOP/Carrier claims with DX codes
Pneumonia, All-cause	1 year	A01.03, A02.22, A06.5, A20.2, A21.2, A22.1, A31.0, A37.01, A37.11, A37.81, A37.91, A40.3, A42.0, A43.0, A48.1, A50.04, A54.84, B01.2, B05.2, B06.81, B37.1, B38.0, B38.2, B39.0, B39.2, B40.0, B40.2, B41.0, B58.3, B59, B66.4, B67.1, B77.81, B95.3, B96.0, B96.1, J09.X1, J10.00, J10.01, J10.08, J11.00, J11.08, J12.0, J12.1, J12.2, J12.3, J12.81, J12.82, J12.89, J12.9, J13, J14, J15.0, J15.1, J15.20, J15.211, J15.212, J15.29, J15.3, J15.4, J15.5, J15.6, J15.7, J15.8, J15.9, J16.0, J16.8, J17, J18.0, J18.1, J18.2, J18.8, J18.9, J20.0, J84.111, J84.116, J84.117, J84.178, J84.2, J85.1, J95.851, P23.0, P23.1, P23.2, P23.3, P23.4, P23.5, P23.6, P23.8, P23.9, Z87.01 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes
Rheumatoid Arthritis/ Osteoarthritis	2 years	L40.50, L40.51, L40.54, L40.59, M05.00, M05.011, M05.012, M05.019, M05.021, M05.022, M05.029, M05.031, M05.032, M05.039, M05.041, M05.042, M05.049, M05.051, M05.052, M05.059, M05.061, M05.062, M05.069, M05.069, M05.071, M05.072, M05.079, M05.09, M05.10, M05.111, M05.112, M05.119, M05.121, M05.122, M05.129, M05.131, M05.132, M05.139, M05.141, M05.142, M05.149, M05.151, M05.152, M05.159, M05.161, M05.162, M05.169, M05.171, M05.172, M05.179, M05.19, M05.20, M05.211, M05.212, M05.219, M05.221, M05.222, M05.229, M05.231, M05.232, M05.239, M05.241, M05.242, M05.249, M05.251, M05.252, M05.259, M05.261, M05.262, M05.269, M05.271, M05.272, M05.279, M05.29, M05.30, M05.311, M05.312, M05.319, M05.321, M05.322, M05.329, M05.331, M05.332, M05.339, M05.341, M05.342, M05.349, M05.351, M05.352, M05.359, M05.361, M05.362, M05.369, M05.371, M05.372, M05.379, M05.39, M05.40, M05.411, M05.412, M05.419, M05.421, M05.422, M05.429, M05.431, M05.472, M05.479, M05.49, M05.49, M05.50, M05.511,	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes

Almontalous	Reference	Wildian 40 cylyd	Number/Type of Claims
Algorithms	Period	Valid ICD-10 Codes <sup>1</sup>	to Qualify <sup>2</sup>
	(# of years)		·
		M05.512, M05.519, M05.521, M05.522, M05.529, M05.531, M05.532, M05.539, M05.541, M05.542, M05.549, M05.551,	
		M05.552, M05.559, M05.561, M05.562, M05.569, M05.571, M05.572, M05.579, M05.59, M05.60, M05.611, M05.612,	
		M05.619, M05.621, M05.622, M05.629, M05.631, M05.632, M05.639, M05.641, M05.642, M05.649, M05.651, M05.652,	
		M05.659, M05.661, M05.662, M05.669, M05.671, M05.672, M05.679, M05.69, M05.70, M05.711, M05.712, M05.719,	
		M05.721, M05.722, M05.729, M05.731, M05.732, M05.739, M05.741, M05.742, M05.749, M05.751, M05.752, M05.759,	
		M05.761, M05.762, M05.769, M05.771, M05.772, M05.779, M05.79, M05.7A, M05.80, M05.811, M05.812, M05.819,	
		M05.821, M05.822, M05.829, M05.831, M05.832, M05.839, M05.841, M05.842, M05.849, M05.851, M05.852, M05.859,	
		M05.861, M05.862, M05.869, M05.871, M05.872, M05.879, M05.89, M05.8A, M05.9, M06.00, M06.011, M06.012,	
		M06.019, M06.021, M06.022, M06.029, M06.031, M06.032, M06.039, M06.041, M06.042, M06.049, M06.051, M06.052,	
		M06.059, M06.061, M06.062, M06.069, M06.071, M06.072, M06.079, M06.08, M06.09, M06.0A, M06.1, M06.20,	
		M06.211, M06.212, M06.219, M06.221, M06.222, M06.229, M06.231, M06.232, M06.239, M06.241, M06.242, M06.249,	
		M06.251, M06.252, M06.259, M06.261, M06.262, M06.269, M06.271, M06.272, M06.279, M06.28, M06.29, M06.30,	
		M06.311, M06.312, M06.319, M06.321, M06.322, M06.329, M06.331, M06.332, M06.339, M06.341, M06.342, M06.349,	
		M06.351, M06.352, M06.359, M06.361, M06.362, M06.369, M06.371, M06.372, M06.379, M06.38, M06.39, M06.80,	
		M06.811, M06.812, M06.819, M06.821, M06.822, M06.829, M06.831, M06.832, M06.839, M06.841, M06.842, M06.849,	
		M06.851, M06.852, M06.859, M06.861, M06.862, M06.869, M06.871, M06.872, M06.879, M06.88, M06.89, M06.8A,	
		M06.9, M08.00, M08.011, M08.012, M08.019, M08.021, M08.022, M08.029, M08.031, M08.032, M08.039, M08.041,	
		M08.042, M08.049, M08.051, M08.052, M08.059, M08.061, M08.062, M08.069, M08.071, M08.072, M08.079, M08.08,	
		M08.09, M08.0A, M08.1, M08.20, M08.211, M08.212, M08.219, M08.221, M08.222, M08.229, M08.231, M08.232,	
		M08.239, M08.241, M08.242, M08.249, M08.251, M08.252, M08.259, M08.261, M08.262, M08.269, M08.271, M08.272,	
		M08.279, M08.28, M08.29, M08.2A, M08.3, M08.40, M08.411, M08.412, M08.419, M08.421, M08.422, M08.429,	
		M08.431, M08.432, M08.439, M08.441, M08.442, M08.449, M08.451, M08.452, M08.459, M08.461, M08.462, M08.469,	
		M08.471, M08.472, M08.479, M08.48, M08.4A, M08.80, M08.811, M08.812, M08.819, M08.821, M08.822, M08.829,	
		M08.831, M08.832, M08.839, M08.841, M08.842, M08.849, M08.851, M08.852, M08.859, M08.861, M08.862, M08.869,	
		M08.871, M08.872, M08.879, M08.88, M08.89, M08.90, M08.911, M08.912, M08.919, M08.921, M08.922, M08.929,	
		M08.931, M08.932, M08.939, M08.941, M08.942, M08.949, M08.951, M08.952, M08.959, M08.961, M08.969, M08.969, M08.961, M08.969, M08	
		M08.971, M08.972, M08.979, M08.98, M08.99, M08.9A, M15.0, M15.1, M15.2, M15.3, M15.4, M15.8, M15.9, M16.0,	
		M16.10, M16.11, M16.12, M16.2, M16.30, M16.31, M16.32, M16.4, M16.50, M16.51, M16.52, M16.6, M16.7, M16.9,	
		M17.0, M17.10, M17.11, M17.12, M17.2, M17.30, M17.31, M17.32, M17.4, M17.5, M17.9, M18.0, M18.10, M18.11,	
		M18.12, M18.2, M18.30, M18.31, M18.32, M18.4, M18.50, M18.51, M18.52, M18.9, M19.011, M19.012, M19.019,	
		M19.021, M19.022, M19.029, M19.031, M19.032, M19.039, M19.041, M19.042, M19.049, M19.071, M19.072, M19.079,	
		M19.09, M19.111, M19.112, M19.119, M19.121, M19.122, M19.129, M19.131, M19.132, M19.139, M19.131, M19.141, M19.142,	
		M19.149, M19.171, M19.172, M19.179, M19.211, M19.212, M19.219, M19.221, M19.222, M19.229, M19.231, M19.232,	
		M19.239, M19.241, M19.242, M19.249, M19.271, M19.272, M19.279, M19.29, M19.90, M19.91, M19.92, M19.93, M45.0,	
		M45.1, M45.2, M45.3, M45.4, M45.5, M45.6, M45.7, M45.8, M45.9, M45.A0, M45.A1, M45.A2, M45.A3, M45.A4, M45.A5,	
		M45.A6, M45.A7, M45.A8, M45.AB, M46.80, M46.81, M46.82, M46.83, M46.84, M46.85, M46.86, M46.87, M46.88,	
		M46.89, M46.90, M46.91, M46.92, M46.93, M46.94, M46.95, M46.96, M46.97, M46.98, M46.99, M47.011, M47.012,	
		M47.013, M47.014, M47.015, M47.016, M47.019, M47.021, M47.022, M47.029, M47.10, M47.11, M47.12, M47.13,	
		M47.14, M47.15, M47.16, M47.20, M47.21, M47.22, M47.23, M47.24, M47.25, M47.26, M47.27, M47.28, M47.811,	
		M47.812, M47.813, M47.814, M47.815, M47.816, M47.817, M47.818, M47.819, M47.891, M47.892, M47.893, M47.894,	

Algorithms	Reference Period (# of years)	Valid ICD-10 Codes <sup>1</sup>	Number/Type of Claims to Qualify <sup>2</sup>
		M47.895, M47.896, M47.897, M47.898, M47.899, M47.9, M48.8X1, M48.8X2, M48.8X3, M48.8X4, M48.8X5, M48.8X6, M48.8X7, M48.8X8, M48.8X9 (any DX on the claim)	
Stroke/Transient Ischemic Attack	1 year	G45.0, G45.1, G45.2, G45.3, G45.8, G45.9, G46.0, G46.1, G46.2, G46.3, G46.4, G46.5, G46.6, G46.7, G46.8, G97.31, G97.32, I60.00, I60.01, I60.02, I60.10, I60.11, I60.12, I60.2, I60.20, I60.21, I60.22, I60.30, I60.31, I60.32, I60.4, I60.50, I60.51, I60.52, I60.6, I60.7, I60.8, I60.9, I61.0, I61.1, I61.2, I61.3, I61.4, I61.5, I61.6, I61.8, I61.9, I62.00, I62.01, I62.02, I62.9, I63.00, I63.011, I63.012, I63.013, I63.019, I63.02, I63.031, I63.032, I63.039, I63.09, I63.10, I63.111, I63.112, I63.113, I63.119, I63.12, I63.131, I63.132, I63.133, I63.139, I63.39, I63.39, I63.211, I63.212, I63.213, I63.229, I63.23, I63.239, I63.29, I63.30, I63.311, I63.312, I63.313, I63.319, I63.321, I63.321, I63.322, I63.323, I63.339, I63.339, I63.341, I63.342, I63.343, I63.349, I63.349, I63.340, I63.411, I63.412, I63.413, I63.419, I63.421, I63.422, I63.423, I63.429, I63.431, I63.432, I63.433, I63.439, I63.441, I63.442, I63.443, I63.449, I63.49, I63.512, I63.512, I63.512, I63.521, I63.522, I63.523, I63.529, I63.531, I63.533, I63.539, I63.541, I63.542, I63.543, I63.549, I63.59, I63.6, I63.8, I63.89, I63.9, I67.841, I67.848, I67.89, I97.810, I97.811, I97.820, I97.821 (any DX on the claim)  EXCLUSION: If any of the qualifying claims have any of the following codes in any DX position then EXCLUDE: S06.340A, S06.351A, S06.354A, S06.354A, S06.354A, S06.355A, S06.356A, S06.357A, S06.357A, S06.358A, S06.359A, S06.350A, S06.351A, S06.352A, S06.355A, S06.356A, S06.365A, S06.369A, S06.357A, S06.357A, S06.377A, S06.377A, S06.377A, S06.377A, S06.378A, S06.381A, S06.381A, S06.382A, S06.384A, S06.387A, S06.387A, S06.387A, S06.387A, S06.389A, S06.6X2A, S06.6X2A, S06.6X3A, S06.6X5A, S06.6X5A	At least 1 inpatient, HOP or carrier claim with DX codes

<sup>&</sup>lt;sup>1</sup> ICD-10 codes are effective 10/2015. Researchers may be interested in confirming the code(s) of interest in the accompanying claims data files.

<sup>&</sup>lt;sup>2</sup> SNF refers to skilled nursing facility; HHA refers to home health agency; HOP refers to hospital outpatient. Carrier claims refer to claim types 71 and 72 (not durable medical equipment [DME] claim types 81 or 82), and excludes any claims for which line item Berenson-Eggers Type of Service (BETOS) code variable equals D1A, D1B, D1C, D1D, D1E, D1F, D1G (which is DME), or O1A (which is ambulance services). The intent of the algorithm is to exclude claims where the services do not require a licensed health care professional. When two claims are required, they must occur at least one day apart.

#### **Algorithms Change History**

The Chronic Conditions Warehouse (CCW) algorithm specifications may change slightly from year-to-year due to changing coding standards. This section identifies changes in the 30 CCW Chronic Conditions (CHRONIC) algorithms following the February 2022 algorithm version and describes the nature of the change. The algorithm specifications contain a revision date and the calendar year that the change was implemented in the data file.

	vision te <sup>1</sup>	Conditions File Implementation Date <sup>2</sup>	Description <sup>3</sup>
02	/2022	2020	Inaugural version

<sup>&</sup>lt;sup>1</sup> Revision Date: The date the algorithms documentation was updated.

<sup>&</sup>lt;sup>2</sup> Conditions File Implementation Date: This indicates the earliest Conditions Data File that incorporates the revised algorithm.

<sup>&</sup>lt;sup>3</sup> Description: Details of what changed, listed by algorithm type.