Chronic Conditions Warehouse

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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 ¹	Number/Type of Claims to Qualify ²
Acute Myocardial Infarction	1 year	I21.01, I21.02, I21.09, I21.11, I21.19, I21.21, I21.29, I21.3, I21.4, I21.9, I21.A1, I21.A9, I21.B, I22.0, I22.1, I22.2, I22.8, I22.9, I23.0, I23.1, I23.2, I23.3, I23.4, I23.5, I23.6, I23.7, I23.8 (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, D46.1, 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, D57.03, D57.04, D57.09, D57.1, D57.20, D57.211, D57.212, D57.213, D57.214, D57.218, D57.219, D57.3, D57.40, D57.411, D57.412, D57.413, D57.414, D57.418, D57.419, D57.42, D57.431, D57.432, D57.433, D57.434, D57.438, D57.439, D57.44, D57.451, D57.452, D57.453, D57.454, D57.458, D57.459, D57.80, D57.811, D57.812, D57.813, D57.814, 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, D59.30, D59.31, D59.32, D59.39, D59.4, D59.5, D59.6, D59.8, D59.9, D60.0, D60.1, D60.8, D60.9, D61.01, D61.02, D61.09, D61.1, D61.2, D61.3, 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

Algorithms	Reference Period (# of years)	Valid ICD-10 Codes ¹	Number/Type of Claims to Qualify ²
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, C50.919, 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 OR 2 HOP/carrier claims with DX codes
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 OR 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 OR 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 OR 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 OR 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 OR 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, H26.222, 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

Algorithms	Reference Period (# of years)	Valid ICD-10 Codes ¹	Number/Type of Claims to Qualify ²
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, M10.359, 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, N01.4, N02.0, N02.1, N02.2, N02.3, N02.4, N02.5, N02.6, N02.7, N02.8, N02.9, N02.A, N02.B1, N02.B2, N02.B3, N02.B4, N02.B5, N02.B6, N02.B9, 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, N04.20, N04.21, N04.22, N04.29, 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, N06.20, N06.21, N06.22, N06.29, 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, N14.11, N14.19, 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, J44.81, J44.89, J44.9, J47.0, J47.1, J47.9, J98.2, J98.3 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim OR 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.A, F33.0, 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

Algorithms	Reference Period (# of years)	Valid ICD-10 Codes ¹	Number/Type of Claims to Qualify ²
Diabetes	2 years	608.00, E08.01, E08.10, E08.11, E08.21, E08.29, E08.311, E08.311, E08.312, E08.321, E08.3212, E08.3213, E08.3213, E08.3291, E08.3292, E08.3292, E08.3292, E08.3293, E08.3293, E08.3293, E08.3293, E08.3393, E08.3511, E08.3512, E08.3513, E08.3514, E08.3514, E08.3514, E08.3514, E08.3514, E08.3514, E08.3522, E08.3552, E08.3553, E08.3559, E08.3593, E08.3594, E08.3594, E08.3594, E08.3594, E08.3594, E08.3594, E08.3595, E08.3594, E09.3211, E09.3212, E09.3213, E09.3213, E09.3219, E09.3214,	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes

Algorithms	Reference Period (# of years)	Valid ICD-10 Codes ¹	Number/Type of Claims to Qualify ²
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, H40.052, H40.053, H40.059, H40.10X0, H40.10X1, H40.10X2, H40.10X3, H40.10X4, H40.1110, H40.1111, H40.1112, H40.1113, H40.1114, H40.1121, H40.1121, H40.1122, H40.1123, H40.1123, H40.1124, H40.1130, H40.1131, H40.1132, H40.1133, H40.1134, H40.1190, H40.1191, H40.1191, H40.1191, H40.1191, H40.1191, H40.1191, H40.1193, H40.1194, H40.11X0, H40.11X1, H40.11X2, H40.112X3, H40.1230, H40.1231, H40.1231, H40.1231, H40.1221, H40.1222, H40.1223, H40.1223, H40.1233, H40.1231, H40.1321, H40.1322, H40.1323, H40.1323, H40.1324, H40.1320, H40.1323, H40.1323, H40.1331, H40.1311, H40.1312, H40.1314, H40.1390, H40.1391, H40.1392, H40.1393, H40.1344, H40.130, H40.1311, H40.1312, H40.1414, H40.1420, H40.1421, H40.1422, H40.1423, H40.1424, H40.1430, H40.1431, H40.1412, H40.1413, H40.1414, H40.1420, H40.1421, H40.1422, H40.1423, H40.151, H40.152, H40.153, H40.153, H40.153, H40.20X4, H40.20X1, H40.20X1, H40.20X2, H40.2210, H40.2210, H40.2211, H40.2213, H40.2234, H40.233, H40.234, H40.234, H40.30X2, H40.234, H40.30X2, H40.234, H40.33X0, H40.33X1, H40.33X2, H40.33X3, H40.33X3, H40.33X3, H40.33X4, H40.33X0, H40.33X1, H40.33X2, H40.33X3, H40.33X3, H40.33X4, H40.33X0, H40.33X1, H40.33X2, H40.33X3, H40.33X3, H40.33X4, H40.33X0, H40.33X1, H40.33X2, H40.33X3, H40.33X3, H40.33X3, H40.33X4, H40.43X1, H40.43X2, H40.43X1, H40.43X1, H40.41X2, H40.41X3, H40.41X3, H40.41X4, H40.53X1, H40.53X2, H40.53X3, H40.53X3, H40.53X3, H40.53X3, H40.53X4, H40.53X3, H40.53X4, H40.53X4, H40.53X4, H40.53X4, H40.53X4, H40.53X3, H40.53X3, H40.63X3, H4	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

Algorithms Reference Period (# of years)	Valid ICD-10 Codes ¹	Number/Type of Claims to Qualify ²
Hip/Pelvic 1 year Fracture	M80.051A, M80.052A, M80.059A, M80.051A, M80.0B1A, M80.0B2A, M80.0B9A, M80.851A, M80.852A, M80.859A, M80.8B1A, M80.8B2A, M80.8B9A, M84.550A, M84.551A, M84.552A, M84.553A, M84.559A, M84.554A, M84.551A, M84.552A, M84.553A, M84.559A, M84.559A, M84.554A, M84.551A, M84.552A, M84.554A, M84.554A, M84.553A, M84.559A, M84.559A, M84.559A, M84.554A, M84.554A, M84.554A, M84.554A, M84.554A, M84.554A, M84.5554A, M84.554A, M84.5554A, M84.554A, M84.5554A, M84.554A, M84.554A, M84.554A, M84.554A, M84.554A, M84.554A, M84.554	At least 1 inpatient, SNF, HOP or carrier claim with DX codes

Algorithms	Reference Period (# of years)	Valid ICD-10 Codes ¹	Number/Type of Claims to Qualify ²
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, I1A.0, I67.4, N26.2 (any DX on the claim)	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes
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, 120.2, 120.8, 120.81, 120.89, 124.0, 124.1, 124.8, 124.81, 124.89, 125.10, 125.110, 125.111, 125.112, 125.118, 125.119, 125.3, 125.41, 125.42, 125.5, 125.6, 125.700, 125.701, 125.702, 125.708, 125.710, 125.711, 125.712, 125.718, 125.719, 125.720, 125.721, 125.722, 125.728, 125.729, 125.730, 125.731, 125.732, 125.738, 125.739, 125.750, 125.751, 125.752, 125.758, 125.759, 125.760, 125.761, 125.762, 125.768, 125.769, 125.790, 125.791, 125.792, 125.798, 125.799, 125.810, 125.811, 125.812, 125.82, 125.83, 125.84, 125.85, 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, F01.511, F01.518, F01.52, F01.53, F01.54, F01.A0, F01.A11, F01.A18, F01.A2, F01.A3, F01.A4, F01.B0, F01.B11, F01.B18, F01.B2, F01.B3, F01.B4, F01.C0, F01.C11, F01.C18, F01.C2, F01.C3, F01.C4, F02.80, F02.81, F02.811, F02.818, F02.82, F02.83, F02.84, F02.A0, F02.A11, F02.A18, F02.A2, F02.A3, F02.A4, F02.B0, F02.B11, F02.B18, F02.B2, F02.B3, F02.B4, F02.C0, F02.C11, F02.C18, F02.C2, F02.C3, F02.C4, F03.90, F03.91, F03.911, F03.918, F03.92, F03.93, F03.94, F03.A0, F03.A11, F03.A18, F03.A2, F03.A3, F03.A4, F03.B0, F03.B11, F03.B18, F03.B2, F03.B3, F03.B4, F03.C0, F03.C11, F03.C18, F03.C2, F03.C3, F03.C4, 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, M80.0AXA, M80.0B1A, M80.0B2A, M80.0B9A, 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, M80.8B1A, M80.8B2A, M80.8B9A, 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, G20.A1, G20.A2, G20.B1, G20.B2, G20.C, 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

Algorithms	Reference Period (# of years)	Valid ICD-10 Codes ¹	Number/Type of Claims to Qualify ²
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, J15.61, J15.69, 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, M05.071, M05.072, M05.079, M05.09, M05.101, M05.112, M05.112, M05.112, M05.112, M05.122, M05.129, M05.131, M05.132, M05.133, M05.134, M05.212, M05.214, M05.224, M05.224, M05.244, M05.241, M05.224, M05.254, M05.254, M05.254, M05.252, M05.259, M05.261, M05.262, M05.269, M05.271, M05.277, M05.279, M05.279, M05.30, M05.311, M05.312, M05.312, M05.324, M05.324, M05.324, M05.334, M05.341, M05.342, M05.349, M05.351, M05.352, M05.361, M05.362, M05.369, M05.371, M05.372, M05.379, M05.39, M05.341, M05.412, M05.412, M05.412, M05.429, M05.429, M05.431, M05.432, M05.349, M05.341, M05.452, M05.459, M05.461, M05.462, M05.469, M05.471, M05.472, M05.479, M05.49, M05.540, M05.541, M05.545, M05.541, 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, M05.561, M05.662, M05.662, M05.662, M05.663, M05.661, M05.662, M05.663, M05.664, M05.662, M05.669, M05.671, M05.672, M05.679, M05.779, M05.799, M05.779, M05.749, M05.749, M05.741, M05.742, M05.749, M05.759, M05.759, M05.661, M05.662, M05.669, M05.671, M05.672, M05.679, M05.740, M05.740, M05.740, M05.762, M05.769, M05.771, M05.772, M05.739, M05.741, M05.742, M05.849, M05.851, M05.852, M05.869, M05.861, M05.862, M05.869, M05.871, M05.872, M05.879, M05.740, M05.740, M05.740, M05.740, M05.762, M05.769, M05.771, M05.772, M05.779, M05.779, M05.740, M05	At least 1 inpatient/SNF/HHA claim OR 2 HOP/carrier claims with DX codes

Algorithms	Reference Period (# of years)	Valid ICD-10 Codes ¹	Number/Type of Claims to Qualify ²
		M08.959, M08.961, M08.962, M08.969, 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, M18.11, 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, M19.141, M19.142, M19.149, M19.171, M19.172, M19.179, M19.19, M19.211, M19.212, M19.219, 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.A8, 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, M47.895, M47.896, M47.897, M47.898, M47.899, M47.99, 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, I63.033, I63.039, I63.09, I63.10, I63.111, I63.112, I63.113, I63.113, I63.132, I63.133, I63.139, I63.20, I63.211, I63.212, I63.213, I63.221, I63.221, I63.223, I63.231, I63.232, I63.233, I63.239, I63.39, I63.30, I63.311, I63.312, I63.313, I63.313, I63.319, I63.321, I63.322, I63.323, I63.329, I63.341, I63.342, I63.343, I63.349, I63.39, I63.40, I63.411, I63.412, I63.413, I63.419, I63.421, I63.422, I63.423, I63.429, I63.431, I63.432, I63.433, I63.534, I63.542, I63.543, I63.551, I63.551, I63.551, I63.552, I63.522, I63.523, I63.529, I63.531, I63.532, I63.533, I63.539, I63.541, I63.542, I63.543, I63.549, I63.59, I63.6, I63.8, I63.81, I63.89, I63.9, I67.841, I67.848, I67.89, I97.810, I97.811, I97.820, I97.821 (any DX on the claim)	At least 1 inpatient, HOP or carrier claim with DX codes
		EXCLUSION: If any of the qualifying claims have any of the following codes in any DX position then EXCLUDE: \$06.340A, \$06.341A, \$06.342A, \$06.343A, \$06.344A, \$06.345A, \$06.346A, \$06.347A, \$06.348A, \$06.348A, \$06.349A, \$06.350A, \$06.351A, \$06.352A, \$06.353A, \$06.354A, \$06.355A, \$06.355A, \$06.355A, \$06.357A, \$06.358A, \$06.358A, \$06.359A, \$06.360A, \$06.361A, \$06.362A, \$06.363A, \$06.364A, \$06.365A, \$06.366A, \$06.367A, \$06.368A, \$06.36AA, \$06.369A, \$06.370A, \$06.371A, \$06.372A, \$06.373A, \$06.374A, \$06.375A, \$06.376A, \$06.377A, \$06.378A, \$06.379A, \$06.379A, \$06.380A, \$06.381A, \$06.382A, \$06.383A, \$06.384A, \$06.385A, \$06.385A, \$06.387A, \$06.388A, \$06.389A, \$06.5X0A, \$06.5X1A, \$06.5X2A, \$06.5X3A, \$06.5X3A, \$06.5X4A, \$06.5X5A, \$06.5X6A, \$06.5X7A, \$06.5X7A, \$06.5X8A, \$06.5X9A, \$06.6X0A, \$06.6X1A, \$06.6X2A, \$06.6X3A, \$06.6X3A, \$06.6X5A, \$06.6X5A, \$06.6X6A, \$06.6X7A, \$06.6X8A, \$06.6X8A, \$06.6X9A, \$06.810A, \$06.811A, \$06.812A, \$06.813A, \$06.814A, \$06.815A, \$06.815A, \$06.817A, \$06.818A, \$06.819A, \$06.820A, \$06.821A, \$06.823A, \$06.823A, \$06.825A, \$06.825A, \$06.827A, \$06.828A, \$06.829A, \$06.890A, \$06.891A, \$06.892A, \$06.893A, \$06.894A, \$06.895A, \$06.896A, \$06.897A, \$06.898A, \$06.898A, \$06.899A, \$06.900A, \$06.890A, \$06.900A, \$06.900A	

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

² 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 where all service lines contain a Berenson-Eggers Type of Service (BETOS) code equal to 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 (i.e., different claim through dates [CLM_THRU_DT]).

Algorithms Change History

The Chronic Conditions Warehouse (CCW) algorithm specifications may change slightly from year-to-year due to revisions in national claims coding standards. This section identifies changes in the 30 CCW Chronic Conditions (CHRONIC) algorithms following the annual ICD-10-CM code review and describes the nature of the change. The algorithm specifications contain a document revision date and the earliest Conditions Data File that incorporates the revised algorithm (e.g., for algorithm updates that appear in the 02/2023 revision, the code changes are reflected in the 2021+ data files).

Document Revision Date	Conditions File Implementation ¹	Description of Changes
07/2024	2023	 The following changes resulted from the 2023 ICD-10 Code Review. Acute Myocardial Infarction: Added code I21.B Anemia: Added codes D57.04, D57.214, D57.414, D57.434, D57.454, D57.814, D61.02 Chronic Kidney Disease: Added codes N02.B1, N02.B2, N02.B3, N02.B4, N02.B5, N02.B6, N02.B9, N04.20, N04.21, N04.22, N04.29, N06.20, N06.21, N06.22, N06.29 Chronic Obstructive Pulmonary Disease: Added codes J44.81, J44.89 Hip/Pelvic Fracture: Added codes M80.0B1A, M80.0B2A, M80.0B9A, M80.8B1A, M80.8B2A, M80.8B9A Hypertension: Added code I1A.0 Ischemic Heart Disease: Added codes I20.81, I20.89, I24.81, I24.89, I25.85 Osteoporosis With or Without Pathological Fracture: Added codes M80.0B1A, M80.0B2A, M80.0B9A, M80.8B1A, M80.8B2A, M80.8B9A Parkinson's Disease and Secondary Parkinsonism: Added codes G20.A1, G20.A2, G20.B1, G20.B2, G20.C Pneumonia, All-cause: Added codes J15.61, J15.69

Document Revision Date	Conditions File Implementation ¹	Description of Changes
07/2023	2022	 The following changes resulted from the 2022 ICD-10 Code Review. Anemia: Added codes D59.30, D59.31, D59.32, D59.39 Chronic Kidney Disease: Added codes N14.11, N14.19 Ischemic Heart Disease: Added codes I20.2, I25.112, I25.702, I25.712, I25.722, I25.732, I25.752, I25.762, I25.792 Non-Alzheimer's Dementia: Added codes F01.511, F01.518, F01.52, F01.53, F01.54, F01.A0, F01.A11, F01.A18, F01.A2, F01.A3, F01.A4, F01.B0, F01.B11, F01.B18, F01.B2, F01.B3, F01.B4, F01.C0, F01.C11, F01.C18, F01.C2, F01.C3, F01.C4, F02.811, F02.818, F02.82, F02.83, F02.84, F02.A0, F02.A11, F02.A18, F02.A2, F02.A3, F02.A4, F02.B0, F02.B11, F02.B18, F02.B2, F02.B3, F02.B4, F02.C0, F02.C11, F02.C18, F02.C2, F02.C3, F02.C4, F03.911, F03.918, F03.92, F03.93, F03.94, F03.A0, F03.A11, F03.A18, F03.A2, F03.A3, F03.A4, F03.B0, F03.B11, F03.B18, F03.B2, F03.B3, F03.B4, F03.C0, F03.C11, F03.C18, F03.C2, F03.C3, F03.C4 Stroke/Transient Ischemic Attack: Added Exclusion codes S06.34AA, S06.35AA, S06.36AA, S06.37AA, S06.38AA, S06.5XAA, S06.6XAA, S06.81AA, S06.82AA, S06.89AA, S06.9XAA
02/2023	2021	 The following changes resulted from an ICD-10 Code Review. Anemia: Added codes D57.03, D57.09, D57.213, D57.218 Diabetes: Added codes E10.3521, E10.3522, E10.3523, E10.3529, E10.3531, E10.3532, E10.3533, E10.3539, E10.3541, E10.3542, E10.3543, E10.3549, E10.3551, E10.3552, E10.3553, E10.3559, E10.3591, E10.3592, E10.3593, E10.3599, E13.3591, E13.3592, E13.3593, E13.3599 Rheumatoid Arthritis/Osteoarthritis: Added code M19.19
02/2022	2020	Inaugural version

¹ Conditions File Implementation: This indicates the earliest Conditions Data File that incorporates the revised algorithm, when available.