

## Texas Prior Authorization Program Clinical Edit Criteria

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### Drug/Drug Class

## Suboxone/Buprenorphine

### Clinical Edit Information Included in this Document

#### Suboxone (Buprenorphine/Naloxone)

- **Drugs requiring prior authorization:** the list of drugs requiring prior authorization for this clinical edit
- **Prior authorization criteria logic:** a description of how the prior authorization request will be evaluated against the clinical edit criteria rules
- **Logic diagram:** a visual depiction of the clinical edit criteria logic
- **Supporting tables:** a collection of information associated with the steps within the criteria (diagnosis codes, procedure codes, and therapy codes)
- **References:** clinical publications and sources relevant to this clinical edit

#### Buprenorphine

- **Drugs requiring prior authorization:** the list of drugs requiring prior authorization for this clinical edit
- **Prior authorization criteria logic:** a description of how the prior authorization request will be evaluated against the clinical edit criteria rules
- **Logic diagram:** a visual depiction of the clinical edit criteria logic
- **Supporting tables:** a collection of information associated with the steps within the criteria (diagnosis codes, procedure codes, and therapy codes)
- **References:** clinical publications and sources relevant to this clinical edit

**Note:** Click the hyperlink to navigate directly to that section.

### Revision Notes

- Removed Subutex GCNs from buprenorphine edit

- Updated Clinical Edit Criteria References



**Suboxone**  
**(Buprenorphine/Naloxone)**  
**Drugs Requiring Prior Authorization**

<b>Drugs Requiring Prior Authorization</b>	
<b>Label Name</b>	<b>GCN</b>
SUBOXONE 2MG-0.5MG FILM	28958
SUBOXONE 4MG-1MG FILM	33741
SUBOXONE 8MG-2MG FILM	28959
SUBOXONE 12MG-3MG FILM	33744
SUBOXONE 2MG-0.5MG TABLET SL	18973
SUBOXONE 8MG-2MG TABLET SL	18974

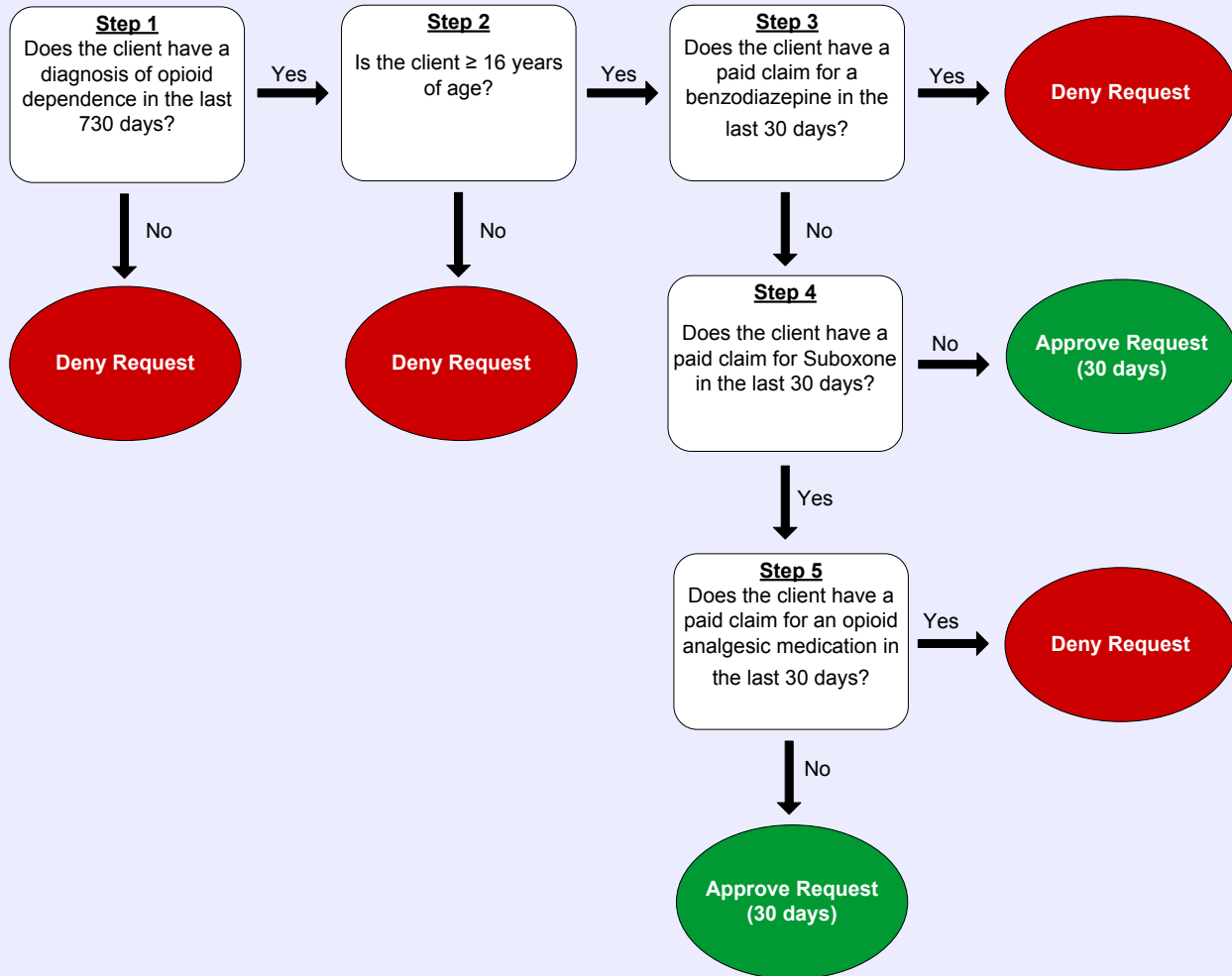


**Suboxone**  
**(Buprenorphine/Naloxone)**  
**Clinical Edit Criteria Logic**

1. Does the client have a diagnosis of opioid dependence in the last 730 days?  
 Yes (Go to #2)  
 No (Deny)
  
2. Is the client greater than or equal to ( $\geq$ ) 16 years of age?  
 Yes (Go to #3)  
 No (Deny)
  
3. Does the client have a paid claim for a benzodiazepine in the last 30 days?  
 Yes (Deny)  
 No (Go to #4)
  
4. Does the client have a paid claim for Suboxone in the last 30 days?  
 Yes (Go to #5)  
 No (Approve – 30 days)
  
5. Does the client have a paid claim for an opioid analgesic medication in the last 30 days?  
 Yes (Deny)  
 No (Approve – 30 days)



## Suboxone (Buprenorphine/Naloxone) Clinical Edit Criteria Logic Diagram





## Suboxone (Buprenorphine/Naloxone)

### Supporting Tables

<b>Step 1 (diagnosis of opioid dependence)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 730 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
30400	OPIOID TYPE DEPENDENCE, UNSPECIFIED
30401	OPIOID TYPE DEPENDENCE, CONTINUOUS
30402	OPIOID TYPE DEPENDENCE, EPISODIC
30403	OPIOID TYPE DEPENDENCE, IN REMISSION

<b>Step 3 (history of benzodiazepine therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	
<b>Benzodiazepine Therapies</b>	
<b>Description</b>	<b>GCN</b>
ALPRAZOLAM 0.25 MG ODT	24368
ALPRAZOLAM 0.5 MG ODT	24369
ALPRAZOLAM 1 MG ODT	24373
ALPRAZOLAM 2 MG ODT	24374
ALPRAZOLAM 1 MG/ML ORAL CONC	14264
ALPRAZOLAM 0.25 MG TABLET	14260
ALPRAZOLAM 0.5 MG TABLET	14261
ALPRAZOLAM 1 MG TABLET	14262
ALPRAZOLAM 2 MG TABLET	14263
ALPRAZOLAM ER 0.5 MG TABLET	17423
ALPRAZOLAM ER 1 MG TABLET	17424
ALPRAZOLAM ER 2 MG TABLET	17425
ALPRAZOLAM ER 3 MG TABLET	19681
ALPRAZOLAM XR 0.5 MG TABLET	17423
ALPRAZOLAM XR 1 MG TABLET	17424
ALPRAZOLAM XR 2 MG TABLET	17425
ALPRAZOLAM XR 3 MG TABLET	19681
ATIVAN 0.5 MG TABLET	14160
ATIVAN 1 MG TABLET	14161

<b>Step 3 (history of benzodiazepine therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	
<b>Benzodiazepine Therapies</b>	
<b>Description</b>	<b>GCN</b>
ATIVAN 2 MG TABLET	14162
ATIVAN 2 MG/ML VIAL	14140
ATIVAN 4 MG/ML VIAL	14141
CHLORDIAZEPOXIDE 5 MG CAPSULE	14033
CHLORDIAZEPOXIDE 10 MG CAPSULE	14031
CHLORDIAZEPOXIDE 25 MG CAPSULE	14032
CHLORDIAZEPOXIDE-CLIDINIUM CAPSULE	74801
CLONAZEPAM 0.125 MG DIS TAB	19467
CLONAZEPAM 0.5 MG DIS TABLET	19469
CLONAZEPAM 1 MG DIS TABLET	19470
CLONAZEPAM 0.25 MG ODT	19468
CLONAZEPAM 2 MG ODT	19472
CLONAZEPAM 0.5 MG TABLET	17470
CLONAZEPAM 1 MG TABLET	17471
CLONAZEPAM 2 MG TABLET	17472
CLORAZEPATE 3.75 MG TABLET	14092
CLORAZEPATE 7.5 MG TABLET	14093
CLORAZEPATE 15 MG TABLET	14090
DIASTAT 2.5 MG PEDI SYSTEM	48131
DIASTAT ACUDIAL 5-7.5-10 MG KT	25598
DIASTAT ACUDIAL 12.5-15-20 MG	25599
DIAZEPAM 5-7.5-10 MG GEL KIT	25598
DIAZEPAM 5 MG/ML ORAL CONC	45500
DIAZEPAM 2.5 MG RECTAL GEL	48131
DIAZEPAM 20 MG RECTAL GEL	25599
DIAZEPAM 5 MG/5 ML SOLUTION	45560
DIAZEPAM 2 MG TABLET	14221
DIAZEPAM 5 MG TABLET	14222
DIAZEPAM 10 MG TABLET	14220
ESTAZOLAM 1 MG TABLET	19181
ESTAZOLAM 2 MG TABLET	19182
FLURAZEPAM 15 MG CAPSULE	14250
FLURAZEPAM 30 MG CAPSULE	14251
HALCION 0.25 MG TABLET	14280

<b>Step 3 (history of benzodiazepine therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	
<b>Benzodiazepine Therapies</b>	
<b>Description</b>	<b>GCN</b>
KLONOPIN 0.5 MG TABLET	17470
KLONOPIN 1 MG TABLET	17471
KLONOPIN 2 MG TABLET	17472
LIBRAX 5 MG – 2.5 MG CAPSULE	74801
LORAZEPAM 2 MG/ML ORAL CONCENT	19601
LORAZEPAM 0.5 MG TABLET	14160
LORAZEPAM 1 MG TABLET	14161
LORAZEPAM 2 MG TABLET	14162
LORAZEPAM 2 MG/ML VIAL	14140
LORAZEPAM 4 MG/ML VIAL	14141
LORAZEPAM INTENSOL 2 MG/ML	19601
MEPROBAMATE 200 MG TABLET	13801
MEPROBAMATE 400 MG TABLET	13802
NIRAVAM 0.25 MG ODT	24368
NIRAVAM 0.5 MG ODT	24369
NIRAVAM 1 MG ODT	24373
NIRAVAM 2 MG ODT	24374
OXAZEPAM 10 MG CAPSULE	14230
OXAZEPAM 15 MG CAPSULE	14231
OXAZEPAM 30 MG CAPSULE	14232
RESTORIL 7.5 MG CAPSULE	13845
RESTORIL 15 MG CAPSULE	13840
RESTORIL 22.5 MG CAPSULE	24036
RESTORIL 30 MG CAPSULE	13841
TEMAZEPAM 7.5 MG CAPSULE	13845
TEMAZEPAM 15 MG CAPSULE	13840
TEMAZEPAM 22.5 MG CAPSULE	24036
TEMAZEPAM 30 MG CAPSULE	13841
TRANXENE SD 11.25 MG TABLET	14100
TRANXENE SD 22.5 MG TAB	14091
TRANXENE T-TAB 3.75 MG	14092
TRANXENE T-TAB 7.5 MG	14093
TRANXENE T-TAB 15 MG	14090
TRIAZOLAM 0.125 MG TABLET	14282



<b>Step 3 (history of benzodiazepine therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	
<b>Benzodiazepine Therapies</b>	
<b>Description</b>	<b>GCN</b>
TRIAZOLAM 0.25 MG TABLET	14280
XANAX 0.25 MG TABLET	14260
XANAX 0.5 MG TABLET	14261
XANAX 1 MG TABLET	14262
XANAX 2 MG TABLET	14263
XANAX XR 0.5 MG TABLET	17423
XANAX XR 1 MG TABLET	17424
XANAX XR 2 MG TABLET	17425
XANAX XR 3 MG TABLET	19681

<b>Step 4 (history of Suboxone therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	
<b>Description</b>	<b>GCN</b>
SUBOXONE 2MG – 0.5MG FILM	28958
SUBOXONE 4MG – 1MG FILM	33741
SUBOXONE 8MG – 2MG FILM	28959
SUBOXONE 12MG – 3MG FILM	33744
SUBOXONE 2MG – 0.5MG TABLET SL	18973
SUBOXONE 8MG-2MG TABLET SL	18974

<b>Step 5 (history of opioid analgesic therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	
<b>Opioid Analgesic Therapies</b>	
<b>Description</b>	<b>GCN</b>
ABSTRAL 100MCG TABLET SL	16178
ABSTRAL 200MCG TABLET SL	16179
ABSTRAL 300MCG TABLET SL	16181
ABSTRAL 400MCG TABLET SL	16182
ABSTRAL 600MCG TABLET SL	16183
ABSTRAL 800MCG TABLET SL	16184
ACETAMINOPHEN-CAFF-DIHYDROCODEINE	41517

<b>Step 5 (history of opioid analgesic therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	
<b>Opioid Analgesic Therapies</b>	
<b>Description</b>	<b>GCN</b>
ACETAMINOPHEN-COD #2 TABLET	70131
ACETAMINOPHEN-COD #3 TABLET	70134
ACETAMINOPHEN-COD #4 TABLET	70136
ACETAMINOPHEN-CODEINE ELIXIR	55401
ACTIQ 200 MCG LOZENGE	19204
ACTIQ 400 MCG LOZENGE	19206
ACTIQ 600 MCG LOZENGE	19191
ACTIQ 800 MCG LOZENGE	19192
ACTIQ 1,200 MCG LOZENGE	19193
ACTIQ 1,600 MCG LOZENGE	19194
ALFENTANOL HCL 500MCG/NL AMPULE	42570
ASCOMP WITH CODEINE CAPSULE	69500
ASPIRIN-CODEINE 325-50 TABLET	69913
ASTRAMORPH-PF 0.5MG/ML AMPULE	19827
ASTRAMORPH-PF 1MG/ML AMPULE	19828
ASTRAMORPH-PF 0.5MG/ML VIAL	19835
ASTRAMORPH-PF 1MG/ML VIAL	19836
AVINZA 30 MG CAPSULE	17193
AVINZA 45 MG CAPSULE	16212
AVINZA 60 MG CAPSULE	17192
AVINZA 75 MG CAPSULE	16213
AVINZA 90 MG CAPSULE	17191
AVINZA 120 MG CAPSULE	17189
BELLADONNA-OPIUM 30-16.2MG SUPP	70741
BELLADONNA-OPIUM 60-16.2MG SUPP	70742
BUPRENEX 0.3 MG/ML AMPUL	27500
BUTALB-CAFF-ACETAMINOPH-CODEIN	70140
BUTALBITAL COMP-CODEINE #3 CAP	69500
BUTORPHANOL 1 MG/ML VIAL	16550
BUTORPHANOL 2 MG/ML VIAL	16551
BUTORPHANOL 10 MG/ML SPRAY	20351
BUTRANS 5 MCG/HR PATCH	25308
BUTRANS 10 MCG/HR PATCH	25309
BUTRANS 20 MCG/HR PATCH	25312

<b>Step 5 (history of opioid analgesic therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	
<b>Opioid Analgesic Therapies</b>	
<b>Description</b>	<b>GCN</b>
CAPITAL WITH CODEINE 120MG-12MG/5ML	70110
CARISOPRODOL CPD-CODEINE TABLET	13995
CO-GESIC 5-500 TABLET	70331
CODEINE SULFATE 30MG/5ML SOLUTION	32307
CODEINE SULFATE 15MG TABLET	16240
CODEINE SULFATE 30 MG TABLET	16241
CODEINE SULFATE 60 MG TABLET	16242
DEMEROL 50 MG/ML AMPUL	25605
DEMEROL 50 MG/ML AMPUL	25608
DEMEROL 75 MG/1.5 ML AMPUL	25607
DEMEROL 100 MG/ML AMPUL	25626
DEMEROL 50 MG TABLET	15991
DEMEROL 100 MG TABLET	15990
DEMEROL 50 MG/ML VIAL	15962
DEMEROL 100 MG/ML VIAL	15960
DEPODUR 15MG/1.5ML VIAL	23846
DILAUDID 2 MG TABLET	16141
DILAUDID 4 MG TABLET	16143
DILAUDID 8 MG TABLET	16144
DILAUDID-5 1 MG/ML LIQUID	20251
DILAUDID-HP 10 MG/ML AMPUL	98596
DILAUDID-HP 10 MG/ML VIAL	20451
DILAUDID-HP 250 MG VIAL	16092
DOLOPHINE HCL 10 MG TABLET	16420
DOLOREX FORTE CAPSULE	70320
DURAGESIC 12 MCG/HR PATCH	24635
DURAGESIC 25 MCG/HR PATCH	19200
DURAGESIC 50 MCG/HR PATCH	19201
DURAGESIC 75 MCG/HR PATCH	19202
DURAGESIC 100 MCG/HR PATCH	19203
EMBEDA 20-0.8 MG CAPSULE	27526
EMBEDA 30-1.2 MG CAPSULE	27535
EMBEDA 50-2 MG CAPSULE	27536
EMBEDA 60-2.4 MG CAPSULE	27537

<b>Step 5 (history of opioid analgesic therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	
<b>Opioid Analgesic Therapies</b>	
<b>Description</b>	<b>GCN</b>
EMBEDA 80-3.2 MG CAPSULE	27538
EMBEDA 100-4 MG CAPSULE	27539
ENDOCET 5-325 TABLET	70491
ENDOCET 7.5-325 MG TABLET	14965
ENDOCET 7.5-500 MG TABLET	50756
ENDOCET 10-325 MG TABLET	14966
ENDOCET 10-650 MG TABLET	50766
ENDODAN 4.83-325 MG TABLET	26836
ETH-OXYDOSE 20 MG/ML SOLUTION	16281
EXALGO ER 8 MG TABLET	22056
EXALGO ER 12 MG TABLET	28427
EXALGO ER 16 MG TABLET	22098
EXALGO ER 32 MG TABLET	33088
FENTANYL 12 MCG/HR PATCH	24635
FENTANYL 25 MCG/HR PATCH	19200
FENTANYL 50 MCG/HR PATCH	19201
FENTANYL 75 MCG/HR PATCH	19202
FENTANYL 100 MCG/HR PATCH	19203
FENTANYL CITRATE OTFC 200 MCG	19204
FENTANYL CITRATE OTFC 400 MCG	19206
FENTANYL CITRATE OTFC 600 MCG	19191
FENTANYL CITRATE OTFC 800 MCG	19192
FENTANYL CIT OTFC 1,200 MCG	19193
FENTANYL CIT OTFC 1,600 MCG	19194
FENTORA 100 MCG BUCCAL TABLET	97280
FENTORA 200 MCG BUCCAL TABLET	97281
FENTORA 400 MCG BUCCAL TABLET	97283
FENTORA 600 MCG BUCCAL TABLET	97284
FENTORA 800 MCG BUCCAL TABLET	97285
FIORICET-COD 30-50-325-40 CAP	70140
FIORINAL-COD 30-50-325-40 CAP	69500
HYCET 7.5 MG-325 MG/15 ML SOL	21146
HYDROCODON-ACETAMINOPH 2.5-500	70338
HYDROCODON-ACETAMINOPHEN 5-300	26470

<b>Step 5 (history of opioid analgesic therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	
<b>Opioid Analgesic Therapies</b>	
<b>Description</b>	<b>GCN</b>
HYDROCODON-ACETAMINOPHEN 5-325	12486
HYDROCODON-ACETAMINOPHEN 5-500	70331
HYDROCODON-ACETAMINOPH 7.5-300	26709
HYDROCODON-ACETAMINOPH 7.5-325	12488
HYDROCODON-ACETAMINOPH 7.5-500	70339
HYDROCODON-ACETAMINOPH 7.5-650	70333
HYDROCODON-ACETAMINOPH 7.5-750	70335
HYDROCODON-ACETAMINOPHN 10-300	22929
HYDROCODON-ACETAMINOPHN 10-325	70330
HYDROCODON-ACETAMINOPHN 10-500	70334
HYDROCODON-ACETAMINOPHN 10-650	70332
HYDROCODON-ACETAMINOPHN 10-660	70363
HYDROCODON-ACETAMINOPHN 10-750	85319
HYDROCODONE-ACETAMINOPHEN SOLN	20906
HYDROCODONE BT-IBUPROFEN TAB	63101
HYDROGESIC 5-500 MG CAPSULE	70320
HYDROMORPHONE 3 MG SUPPOS	16130
HYDROMORPHONE 1MG/ML SYRINGE	98594
HYDROMORPHONE 2 MG TABLET	16141
HYDROMORPHONE 4 MG TABLET	16143
HYDROMORPHONE 8 MG TABLET	16144
HYDROMORPHONE 2MG/ML VIAL	16100
HYDROMORPHONE 10 MG/ML VIAL	20451
IBUDONE 5-200 MG TABLET	22678
IBUDONE 10-200 MG TABLET	99371
INFUMORPH 10 MG/ML AMPUL P-F	19829
INFUMORPH 25 MG/ML AMPUL P-F	19843
KADIAN ER 10 MG CAPSULE	26490
KADIAN ER 20 MG CAPSULE	26492
KADIAN ER 30 MG CAPSULE	97534
KADIAN ER 50 MG CAPSULE	26493
KADIAN ER 60 MG CAPSULE	97535
KADIAN ER 80 MG CAPSULE	97508
KADIAN ER 100 MG CAPSULE	26494

<b>Step 5 (history of opioid analgesic therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	
<b>Opioid Analgesic Therapies</b>	
<b>Description</b>	<b>GCN</b>
KADIAN ER 200 MG CAPSULE	98135
LAZANDA 100MCG SPRAY/PUMP	27648
LAZANDA 400MCG SPRAY/PUMP	29146
LEVORPHANOL 2 MG TABLET	16350
LORCET 10-650 TABLET	70332
LORCET PLUS TABLET	70333
LORTAB 5-500 TABLET	70331
LORTAB 7.5-500 TABLET	70339
LORTAB 10-500 TABLET	70334
LORTAB ELIXIR	20906
MAGNACET 5MG-400MG TABLET	97874
MAGNACET 7.5MG-400MG TABLET	97875
MAGNACET 10MG-400MG TABLET	97876
MEPERIDINE 50 MG/5 ML SOLUTION	15980
MEPERIDINE 50 MG TABLET	15991
MEPERIDINE 100 MG TABLET	15990
MEPERIDINE 25 MG/ML VIAL	25613
MEPERIDINE 50 MG/ML VIAL	25609
MEPERIDINE 75 MG/ML VIAL	25617
MEPERIDINE 100 MG/ML VIAL	25627
MEPERITAB 50 MG TABLET	15991
MEPERITAB 100 MG TABLET	15990
METHADONE 10 MG/ML ORAL CONC	16415
METHADONE 5 MG/5 ML SOLUTION	16400
METHADONE 10 MG/5 ML SOLUTION	16410
METHADONE 40 MG TABLET DISPR	16423
METHADONE HCL 5 MG TABLET	16422
METHADONE HCL 10 MG TABLET	16420
METHADONE INTENSOL 10 MG/ML	16415
METHADOSE 10 MG/ML ORAL CONC	16415
METHADOSE 10 MG TABLET	16420
METHADOSE 40 MG TABLET DISPR	16423
MORPHINE 15 MG/ML VIAL	16041
MORPHINE SULF 8 MG/ML AMPULE	16022

<b>Step 5 (history of opioid analgesic therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	
<b>Opioid Analgesic Therapies</b>	
<b>Description</b>	<b>GCN</b>
MORPHINE SULF 10 MG/5 ML SOLN	16060
MORPHINE SULF 20 MG/5 ML SOLN	16062
MORPHINE SULF 100 MG/5 ML SOLN	16063
MORPHINE SULF 2 MG/ML SYRINGE	16032
MORPHINE SULF 4 MG/ML SYRINGE	16035
MORPHINE SULF 8 MG/ML SYRINGE	16038
MORPHINE SULF 5 MG SUPP	16053
MORPHINE SUFL 10 MG SUPP	16051
MORPHINE SULF 20 MG SUPP	16052
MORPHINE SULF 5 MG/ML VIAL	16042
MORPHINE SULF 8 MG/ML VIAL	16043
MORPHINE SULF 10MG/ML VIAL	16040
MORPHINE SULF 25 MG/ML VIAL	19844
MORPHINE SULFATE 50 MG/ML VIAL	16277
MORPHINE SULF CR 15 MG TABLET	16643
MORPHINE SULF CR 30 MG TABLET	16640
MORPHINE SULF CR 60 MG TABLET	16641
MORPHINE SULF CR 100 MG TABLET	16642
MORPHINE SULF CR 200 MG TABLET	16078
MORPHINE SULF ER 15 MG TABLET	16643
MORPHINE SULF ER 30 MG TABLET	16640
MORPHINE SULF ER 60 MG TABLET	16641
MORPHINE SULF ER 100 MG TABLET	16642
MORPHINE SULF ER 200 MG TABLET	16078
MORPHINE SULFATE IR 15 MG TAB	16070
MORPHINE SULFATE IR 30 MG TAB	16071
MS CONTIN 15 MG TABLET	16643
MS CONTIN 60 MG TABLET	16641
MS CONTIN 100 MG TABLET	16642
MS CONTIN 200 MG TABLET	16078
MS CONTIN CR 30 MG TABLET	16640
NALBUPHINE 10 MG/ML AMPUL	16360
NALBUPHINE 200 MG/10 ML VIAL	16371
NORCO 10-325 TABLET	70330

<b>Step 5 (history of opioid analgesic therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	
<b>Opioid Analgesic Therapies</b>	
<b>Description</b>	<b>GCN</b>
NUCYNTA 50 MG TABLET	26163
NUCYNTA 75 MG TABLET	26164
NUCYNTA 100 MG TABLET	26165
NUCYNTA ER 50MG TABLET	29787
NUCYNTA ER 100MG TABLET	29788
NUCYNTA ER 150MG TABLET	29789
NUCYNTA ER 200MG TABLET	29791
NUCYNTA ER 250MG TABLET	29792
ONSOLIS 200 MCG SOLUBLE FILM	27545
ONSOLIS 400 MCG SOLUBLE FILM	27546
ONSOLIS 600 MCG SOLUBLE FILM	27547
ONSOLIS 800 MCG SOLUBLE FILM	27548
ONSOLIS 1,200 MCG SOLUBLE FILM	27549
OPANA 1 MG/ML AMPULE	16150
OPANA 5 MG TABLET	27243
OPANA 10 MG TABLET	27244
OPANA ER 5 MG TABLET	27247
OPANA ER 7.5 MG TABLET	99492
OPANA ER 10 MG TABLET	27248
OPANA ER 15 MG TABLET	99493
OPANA ER 20 MG TABLET	27249
OPANA ER 30 MG TABLET	99494
OPANA ER 40 MG TABLET	27253
ORAMORPH SR 15 MG TABLET	16643
ORAMORPH SR 30 MG TABLET	16640
ORAMORPH SR 60 MG TABLET	16641
ORAMORPH SR 100 MG TABLET	16642
OXECTA 5MG TABLET	32047
OXECTA 7.5MG TABLET	31256
OXYCODON-ACETAMINOPHEN 2.5-325	70492
OXYCODONE-ACETAMINOPHEN 5-325	70491
OXYCODONE-ACETAMINOPHEN 5-500	70500
OXYCODON-ACETAMINOPHEN 7.5-325	14965
OXYCODON-ACETAMINOPHEN 7.5-500	50756



<b>Step 5 (history of opioid analgesic therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	
<b>Opioid Analgesic Therapies</b>	
<b>Description</b>	<b>GCN</b>
OXYCODONE-ACETAMINOPHEN 10-325	14966
OXYCODONE-ACETAMINOPHEN 10-650	50766
OXYCODONE-ASA 4.88-325 TABLET	70481
OXYCODONE CONC 20 MG/ML SOLN	16281
OXYCODONE HCL 5 MG CAPSULE	16285
OXYCODONE HCL 5 MG/5 ML SOL	16280
OXYCODONE HCL 20 MG/ML SOLN	16281
OXYCODONE HCL 5 MG TABLET	16290
OXYCODONE HCL 10 MG TABLET	16291
OXYCODONE HCL 10 MG TABLET ER	16282
OXYCODONE HCL 15 MG TABLET	20091
OXYCODONE HCL 20 MG TABLET	21194
OXYCODONE HCL 20 MG TABLET ER	16283
OXYCODONE HCL 30 MG TABLET	20092
OXYCODONE HCL CR 80 MG TABLET	16286
OXYCODONE HCL ER 80 MG TABLET	16286
OXYCODONE-ASA 4.5-0.38-325 TAB	70481
OXYCODONE-IBUPROFEN 5-400 TAB	23827
OXYCONTIN 10 MG TABLET	16282
OXYCONTIN 15 MG TABLET	99238
OXYCONTIN 20 MG TABLET	16283
OXYCONTIN 30 MG TABLET	99239
OXYCONTIN 40 MG TABLET	16284
OXYCONTIN 60 MG TABLET	99240
OXYCONTIN 80 MG TABLET	16286
OXYMORPHONE HCL 5 MG TABLET	27243
OXYMORPHONE HCL 10 MG TABLET	27244
PENTAZOCIN-ACETAMINOPHN 25-650	71050
PENTAZOCINE-NALOXONE TABLET	71060
PERCOCET 2.5-325 MG TABLET	70492
PERCOCET 5-325 MG TABLET	70491
PERCOCET 7.5-325 MG TABLET	14965
PERCOCET 7.5-500 MG TABLET	50756
PERCOCET 10-325 MG TABLET	14966

<b>Step 5 (history of opioid analgesic therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	
<b>Opioid Analgesic Therapies</b>	
<b>Description</b>	<b>GCN</b>
PERCOCET 10-650 MG TABLET	50766
PERCODAN TABLET	26836
POLYGESIC 5/500 CAPSULE	70320
PRIMALEV 2.5-300 MG TABLET	26953
PRIMLEV 5-300 MG TABLET	26954
PRIMLEV 7.5-300 MG TABLET	26955
PRIMLEV 10-300 MG TABLET	26956
PROPOXYPH-ACETAMINOPHEN 50-325	70933
REPREXAIN 2.5-200 MG TABLET	16279
REPREXAIN 5-200 MG TABLET	22678
REPREXAIN 7.5-200 MG TABLET	63101
REPREXAIN 10-200 MG TABLET	99371
ROXICET 5-325 ORAL SOLUTION	70470
ROXICET 5-325 TABLET	70491
ROXICET 5-500 CAPLET	70490
ROXICODONE 5 MG/5 ML SOLUTION	16280
ROXICODONE 5 MG TABLET	16290
ROXICODONE 15 MG TABLET	20091
ROXICODONE 30 MG TABLET	20092
ROXICODONE INTENSOL 20 MG/ML	16281
SUBSYS 100 MCG SPRAY	31187
SUBSYS 200 MCG SPRAY	31189
SUBSYS 400 MCG SPRAY	31188
SUBSYS 600 MCG SPRAY	31192
SUBSYS 800 MCG SPRAY	31193
SUBSYS 1200 MCG SPRAY	31596
SUBSYS 1600 MCG SPRAY	31597
SYNALGOS-DC CAPSULE	52190
TALACEN CAPLET	71050
TALWIN 30 MG/ML VIAL	16590
TALWIN NX TABLET	71060
THERACODOPHEN-325	97812
THERACODOPHEN-650	97813
THERADOCOPHEN-LOW 90	97814

<b>Step 5 (history of opioid analgesic therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	
<b>Opioid Analgesic Therapies</b>	
<b>Description</b>	<b>GCN</b>
TREZIX 16-356-30 CAPSULE	70270
TYLENOL WITH CODEINE #3 TABLET	70134
TYLENOL WITH CODEINE #4 TABLET	70136
TYLOX 5-500 CAPSULE	70500
VICODIN 5-500 TABLET	70331
VICODIN ES 7.5-750 MG TABLET	70335
VICODIN HP TABLET	70363
VICOPROFEN 200-7.5 MG TAB	63101
XODOL 5-300 TABLET	26470
XODOL 7.5-300 MG TABLET	26709
XODOL 10-300 TABLET	22929
XOLOX 10-500 MG TABLET	27245
ZAMICET SOLUTION	99967
ZOLVIT 10 MG-300 MG/15 ML SOL	29246
ZYDONE 5-400 MG TABLET	70401
ZYDONE 7.5-400 MG TABLET	70402
ZYDONE 10-400 MG TABLET	70403



## Buprenorphine

### Drugs Requiring Prior Authorization

Drugs Requiring Prior Authorization	
Label Name	GCN
BUPRENORPHINE HCL 2MG TABLET SL	64672
BUPRENORPHINE HCL 8MG TABLET SL	64673



## Buprenorphine

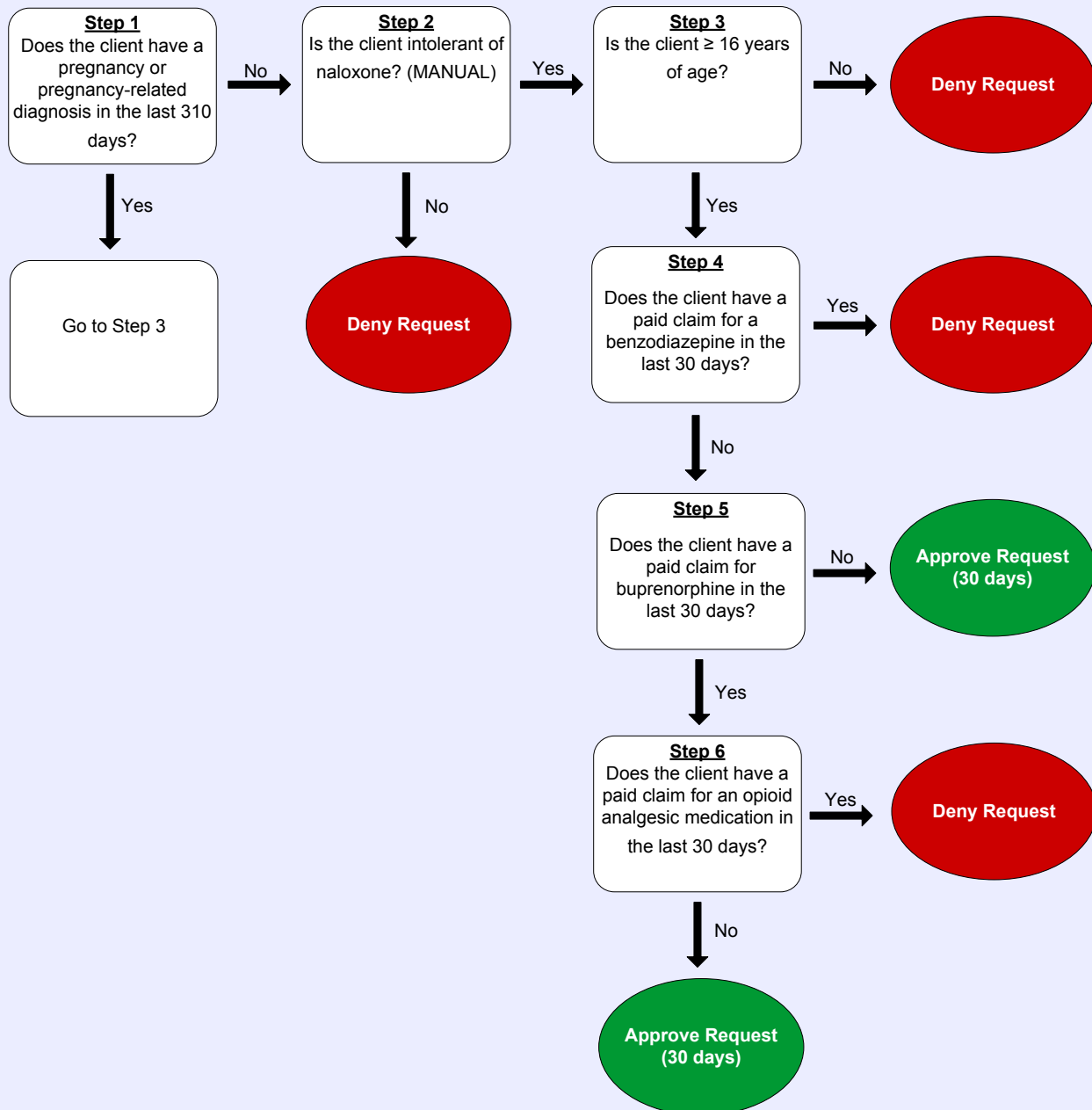
### Clinical Edit Criteria Logic

1. Does the client have a pregnancy or pregnancy-related diagnosis in the last 310 days?
  - Yes (Go to #3)
  - No (Go to #2)
  
2. Manual step – Is the client intolerant of naloxone?
  - Yes (Go to #3)
  - No (Deny)
  
3. Is the client greater than or equal to ( $\geq$ ) 16 years of age?
  - Yes (Go to #4)
  - No (Deny)
  
4. Does the client have a paid claim for a benzodiazepine in the last 30 days?
  - Yes (Deny)
  - No (Go to #5)
  
5. Does the client have a paid claim for buprenorphine in the last 30 days?
  - Yes (Go to #6)
  - No (Approve – 30 days)
  
6. Does the client have a paid claim for an opioid analgesic medication in the last 30 days?
  - Yes (Deny)
  - No (Approve – 30 days)



# Buprenorphine

## Clinical Edit Criteria Logic Diagram





# Buprenorphine

## Supporting Tables

<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b> <b>Required diagnosis: 1</b> <b>Look back timeframe: 310 days</b>	
ICD-9 Code	Description
64000	THREATENED ABORTION UNSPECIFIED AS TO EPISODE OF CARE
64001	THREATENED ABORTION DELIVERED
64003	THREATENED ABORTION ANTEPARTUM
64080	OTHER SPECIFIED HEMORRHAGE IN EARLY PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
64081	OTHER SPECIFIED HEMORRHAGE IN EARLY PREGNANCY DELIVERED
64083	OTHER SPECIFIED HEMORRHAGE IN EARLY PREGNANCY ANTEPARTUM
64090	UNSPECIFIED HEMORRHAGE IN EARLY PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
64091	UNSPECIFIED HEMORRHAGE IN EARLY PREGNANCY DELIVERED
64093	UNSPECIFIED HEMORRHAGE IN EARLY PREGNANCY ANTEPARTUM
64100	PLACENTA PREVIA WITHOUT HEMORRHAGE UNSPECIFIED AS TO EPISODE OF CARE
64101	PLACENTA PREVIA WITHOUT HEMORRHAGE WITH DELIVERY
64103	PLACENTA PREVIA WITHOUT HEMORRHAGE ANTEPARTUM
64110	HEMORRHAGE FROM PLACENTA PREVIA UNSPECIFIED AS TO EPISODE OF CARE
64111	HEMORRHAGE FROM PLACENTA PREVIA WITH DELIVERY
64113	HEMORRHAGE FROM PLACENTA PREVIA ANTEPARTUM
64120	PREMATURE SEPARATION OF PLACENTA UNSPECIFIED AS TO EPISODE OF CARE
64121	PREMATURE SEPARATION OF PLACENTA WITH DELIVERY
64123	PREMATURE SEPARATION OF PLACENTA ANTEPARTUM
64130	ANTEPARTUM HEMORRHAGE ASSOCIATED WITH COAGULATION DEFECTS UNSPECIFIED AS TO EPISODE OF CARE
64131	ANTEPARTUM HEMORRHAGE ASSOCIATED WITH COAGULATION DEFECTS WITH DELIVERY
64133	ANTEPARTUM HEMORRHAGE ASSOCIATED WITH COAGULATION DEFECTS ANTEPARTUM
64180	OTHER ANTEPARTUM HEMORRHAGE UNSPECIFIED AS TO EPISODE OF CARE
64181	OTHER ANTEPARTUM HEMORRHAGE WITH DELIVERY
64183	OTHER ANTEPARTUM HEMORRHAGE

<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
64190	UNSPECIFIED ANTEPARTUM HEMORRHAGE UNSPECIFIED AS TO EPISODE OF CARE
64191	UNSPECIFIED ANTEPARTUM HEMORRHAGE WITH DELIVERY
64193	UNSPECIFIED ANTEPARTUM HEMORRHAGE
64200	BENIGN ESSENTIAL HYPERTENSION COMPLICATING PREGNANCY CHILDBIRTH AND THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64201	BENIGN ESSENTIAL HYPERTENSION WITH DELIVERY
64202	BENIGN ESSENTIAL HYPERTENSION WITH DELIVERY WITH POSTPARTUM COMPLICATION
64203	ANTEPARTUM BENIGN ESSENTIAL HYPERTENSION
64204	POSTPARTUM BENIGN ESSENTIAL HYPERTENSION
64210	HYPERTENSION SECONDARY TO RENAL DISEASE COMPLICATING PREGNANCY CHILDBIRTH AND THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64211	HYPERTENSION SECONDARY TO RENAL DISEASE WITH DELIVERY
64212	HYPERTENSION SECONDARY TO RENAL DISEASE WITH DELIVERY WITH POSTPARTUM COMPLICATION
64213	HYPERTENSION SECONDARY TO RENAL DISEASE ANTEPARTUM
64214	HYPERTENSION SECONDARY TO RENAL DISEASE POSTPARTUM
64220	OTHER PRE-EXISTING HYPERTENSION COMPLICATING PREGNANCY CHILDBIRTH AND THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64221	OTHER PRE-EXISTING HYPERTENSION WITH DELIVERY
64222	OTHER PRE-EXISTING HYPERTENSION WITH DELIVERY WITH POSTPARTUM COMPLICATION
64223	OTHER PRE-EXISTING HYPERTENSION ANTEPARTUM
64224	OTHER PRE-EXISTING HYPERTENSION POSTPARTUM
64230	TRANSIENT HYPERTENSION OF PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
64231	TRANSIENT HYPERTENSION OF PREGNANCY WITH DELIVERY
64232	TRANSIENT HYPERTENSION OF PREGNANCY WITH DELIVERY WITH POSTPARTUM COMPLICATION
64233	ANTEPARTUM TRANSIENT HYPERTENSION
64234	POSTPARTUM TRANSIENT HYPERTENSION
64240	MILD OR UNSPECIFIED PRE-ECLAMPSIA UNSPECIFIED AS TO EPISODE OF CARE
64241	MILD OR UNSPECIFIED PRE-ECLAMPSIA WITH DELIVERY
64242	MILD OR UNSPECIFIED PRE-ECLAMPSIA WITH DELIVERY WITH POSTPARTUM COMPLICATION
64243	MILD OR UNSPECIFIED PRE-ECLAMPSIA ANTEPARTUM



<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
64244	MILD OR UNSPECIFIED PRE-ECLAMPSIA POSTPARTUM
64250	SEVERE PRE-ECLAMPSIA UNSPECIFIED AS TO EPISODE OF CARE
64251	SEVERE PRE-ECLAMPSIA WITH DELIVERY
64252	SEVERE PRE-ECLAMPSIA WITH DELIVERY WITH POSTPARTUM COMPLICATION
64253	SEVERE PRE-ECLAMPSIA ANTEPARTUM
64254	SEVERE PRE-ECLAMPSIA POSTPARTUM
64260	ECLAMPSIA COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64261	ECLAMPSIA WITH DELIVERY
64262	ECLAMPSIA WITH DELIVERY WITH POSTPARTUM COMPLICATION
64263	ECLAMPSIA ANTEPARTUM
64264	ECLAMPSIA POSTPARTUM
64270	PRE-ECLAMPSIA OR ECLAMPSIA SUPERIMPOSED ON PRE-EXISTING HYPERTENSION COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64271	PRE-ECLAMPSIA OR ECLAMPSIA SUPERIMPOSED ON PRE-EXISTING HYPERTENSION WITH DELIVERY
64272	PRE-ECLAMPSIA OR ECLAMPSIA SUPERIMPOSED ON PRE-EXISTING HYPERTENSION WITH DELIVERY WITH POSTPARTUM COMPLICATION
64273	PRE-ECLAMPSIA OR ECLAMPSIA SUPERIMPOSED ON PRE-EXISTING HYPERTENSION ANTEPARTUM
64274	PRE-ECLAMPSIA OR ECLAMPSIA SUPERIMPOSED ON PRE-EXISTING HYPERTENSION POSTPARTUM
64290	UNSPECIFIED HYPERTENSION COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64291	UNSPECIFIED HYPERTENSION WITH DELIVERY
64292	UNSPECIFIED HYPERTENSION WITH DELIVERY WITH POSTPARTUM COMPLICATION
64293	UNSPECIFIED HYPERTENSION ANTEPARTUM
64294	UNSPECIFIED HYPERTENSION POSTPARTUM
64300	MILD HYPEREMESIS GRAVIDARUM UNSPECIFIED AS TO EPISODE OF CARE
64301	MILD HYPEREMESIS GRAVIDARUM DELIVERED
64303	MILD HYPEREMESIS GRAVIDARUM ANTEPARTUM
64310	HYPEREMESIS GRAVIDARUM WITH METABOLIC DISTURBANCE UNSPECIFIED AS TO EPISODE OF CARE
64311	HYPEREMESIS GRAVIDARUM WITH METABOLIC DISTURBANCE DELIVERED
64313	HYPEREMESIS GRAVIDARUM WITH METABOLIC DISTURBANCE ANTEPARTUM
64320	LATE VOMITING OF PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE

<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
64321	LATE VOMITING OF PREGNANCY DELIVERED
64323	LATE VOMITING OF PREGNANCY ANTEPARTUM
64380	OTHER VOMITING COMPLICATING PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
64381	OTHER VOMITING COMPLICATING PREGNANCY DELIVERED
64383	OTHER VOMITING COMPLICATING PREGNANCY ANTEPARTUM
64390	UNSPECIFIED VOMITING OF PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
64391	UNSPECIFIED VOMITING OF PREGNANCY DELIVERED
64393	UNSPECIFIED VOMITING OF PREGNANCY ANTEPARTUM
64400	THREATENED PREMATURE LABOR UNSPECIFIED AS TO EPISODE OF CARE
64403	THREATENED PREMATURE LABOR ANTEPARTUM
64410	OTHER THREATENED LABOR UNSPECIFIED AS TO EPISODE OF CARE
64413	OTHER THREATENED LABOR ANTEPARTUM
64420	EARLY ONSET OF DELIVERY UNSPECIFIED AS TO EPISODE OF CARE
64421	EARLY ONSET OF DELIVERY WITH OR WITHOUT ANTEPARTUM CONDITION
64510	POST TERM PREGNANCY UNSPECIFIED EPISODE OF CARE
64511	POST TERM PREGNANCY DELIVERED WITH OR WITHOUT ANTEPARTUM CONDITION
64513	POST TERM PREGNANCY ANTEPARTUM CONDITION OR COMPLICATION
64520	PROLONGED PREGNANCY UNSPECIFIED EPISODE OF CARE
64521	PROLONGED PREGNANCY DELIVERED WITH OR WITHOUT ANTEPARTUM CONDITION
64523	PROLONGED PREGNANCY ANTEPARTUM CONDITION OR COMPLICATION
64600	PAPYRACEOUS FETUS UNSPECIFIED AS TO EPISODE OF CARE
64601	PAPYRACEOUS FETUS DELIVERED WITH OR WITHOUT ANTEPARTUM CONDITION
64603	PAPYRACEOUS FETUS ANTEPARTUM
64610	EDEMA OR EXCESSIVE WEIGHT GAIN IN PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
64611	EDEMA OR EXCESSIVE WEIGHT GAIN IN PREGNANCY WITH DELIVERY WITH OR WITHOUT ANTEPARTUM CONDITION
64612	EDEMA OR EXCESSIVE WEIGHT GAIN IN PREGNANCY WITH DELIVERY WITH POSTPARTUM COMPLICATION
64613	ANTEPARTUM EDEMA OR EXCESSIVE WEIGHT GAIN
64614	POSTPARTUM EDEMA OR EXCESSIVE WEIGHT GAIN
64620	UNSPECIFIED RENAL DISEASE IN PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
64621	UNSPECIFIED RENAL DISEASE IN PREGNANCY WITH DELIVERY

<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
64622	UNSPECIFIED RENAL DISEASE IN PREGNANCY WITH DELIVERY WITH POSTPARTUM COMPLICATION
64623	UNSPECIFIED ANTEPARTUM RENAL DISEASE
64624	UNSPECIFIED POSTPARTUM RENAL DISEASE
64630	RECURRENT PREGNANCY LOSS, UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
64631	RECURRENT PREGNANCY LOSS, DELIVERED, WITH OR WITHOUT MENTION OF ANTEPARTUM CONDITION
64633	RECURRENT PREGNANCY LOSS, ANTEPARTUM CONDITION OR COMPLICATION
64640	PERIPHERAL NEURITIS IN PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
64641	PERIPHERAL NEURITIS IN PREGNANCY WITH DELIVERY
64642	PERIPHERAL NEURITIS IN PREGNANCY WITH DELIVERY WITH POSTPARTUM COMPLICATION
64643	ANTEPARTUM PERIPHERAL NEURITIS
64644	POSTPARTUM PERIPHERAL NEURITIS
64650	ASYMPTOMATIC BACTERIURIA IN PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
64651	ASYMPTOMATIC BACTERIURIA IN PREGNANCY WITH DELIVERY
64652	ASYMPTOMATIC BACTERIURIA IN PREGNANCY WITH DELIVERY WITH POSTPARTUM COMPLICATION
64653	ANTEPARTUM ASYMPTOMATIC BACTERIURIA
64654	POSTPARTUM ASYMPTOMATIC BACTERIURIA
64660	INFECTIONS IN GENITOURINARY TRACT IN PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
64661	INFECTIONS IN GENITOURINARY TRACT IN PREGNANCY WITH DELIVERY
64662	INFECTIONS IN GENITOURINARY TRACT IN PREGNANCY WITH DELIVERY WITH POSTPARTUM COMPLICATION
64663	ANTEPARTUM INFECTIONS IN GENITOURINARY TRACT
64664	POSTPARTUM INFECTIONS IN GENITOURINARY TRACT
64670	LIVER DISORDERS IN PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
64671	LIVER DISORDERS IN PREGNANCY WITH DELIVERY
64673	ANTEPARTUM LIVER DISORDERS
64680	OTHER SPECIFIED COMPLICATIONS OF PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
64681	OTHER SPECIFIED COMPLICATIONS OF PREGNANCY WITH DELIVERY
64682	OTHER SPECIFIED COMPLICATIONS OF PREGNANCY WITH DELIVERY WITH POSTPARTUM COMPLICATION
64683	OTHER SPECIFIED ANTEPARTUM COMPLICATIONS

<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
64684	OTHER SPECIFIED POSTPARTUM COMPLICATIONS
64690	UNSPECIFIED COMPLICATIONS OF PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
64691	UNSPECIFIED COMPLICATIONS OF PREGNANCY WITH DELIVERY
64693	UNSPECIFIED ANTEPARTUM COMPLICATION
64700	SYPHILIS OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64701	SYPHILIS OF MOTHER COMPLICATING PREGNANCY WITH DELIVERY
64702	SYPHILIS OF MOTHER COMPLICATING PREGNANCY WITH DELIVERY WITH POSTPARTUM COMPLICATION
64703	ANTEPARTUM SYPHILIS
64704	POSTPARTUM SYPHILIS
64710	GONORRHEA OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64711	GONORRHEA OF MOTHER WITH DELIVERY
64712	GONORRHEA OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64713	ANTEPARTUM GONORRHEA
64714	POSTPARTUM GONORRHEA
64720	OTHER VENEREAL DISEASES OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64721	OTHER VENEREAL DISEASES OF MOTHER WITH DELIVERY
64722	OTHER VENEREAL DISEASES OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64723	OTHER ANTEPARTUM VENEREAL DISEASES
64724	OTHER POSTPARTUM VENEREAL DISEASES
64730	TUBERCULOSIS OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64731	TUBERCULOSIS OF MOTHER WITH DELIVERY
64732	TUBERCULOSIS OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64733	ANTEPARTUM TUBERCULOSIS
64734	POSTPARTUM TUBERCULOSIS
64740	MALARIA OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64741	MALARIA OF MOTHER WITH DELIVERY
64742	MALARIA OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64743	ANTEPARTUM MALARIA
64744	POSTPARTUM MALARIA

<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
64750	RUBELLA OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64751	RUBELLA OF MOTHER WITH DELIVERY
64752	RUBELLA OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64753	ANTEPARTUM RUBELLA
64754	POSTPARTUM RUBELLA
64760	OTHER VIRAL DISEASES OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64761	OTHER VIRAL DISEASES OF MOTHER WITH DELIVERY
64762	OTHER VIRAL DISEASES OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64763	OTHER ANTEPARTUM VIRAL DISEASES
64764	OTHER POSTPARTUM VIRAL DISEASES
64780	OTHER SPECIFIED INFECTIOUS AND PARASITIC DISEASES OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64781	OTHER SPECIFIED INFECTIOUS AND PARASITIC DISEASES OF MOTHER WITH DELIVERY
64782	OTHER SPECIFIED INFECTIOUS AND PARASITIC DISEASES OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64783	OTHER SPECIFIED INFECTIOUS AND PARASITIC DISEASES OF MOTHER ANTEPARTUM
64784	OTHER SPECIFIED INFECTIOUS AND PARASITIC DISEASES OF MOTHER POSTPARTUM
64790	UNSPECIFIED INFECTION OR INFESTATION OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64791	UNSPECIFIED INFECTION OR INFESTATION OF MOTHER WITH DELIVERY
64792	UNSPECIFIED INFECTION OR INFESTATION OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64793	UNSPECIFIED INFECTION OR INFESTATION OF MOTHER ANTEPARTUM
64794	UNSPECIFIED INFECTION OR INFESTATION OF MOTHER POSTPARTUM
64800	DIABETES MELLITUS OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64801	DIABETES MELLITUS OF MOTHER WITH DELIVERY
64802	DIABETES MELLITUS OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64803	ANTEPARTUM DIABETES MELLITUS
64804	POSTPARTUM DIABETES MELLITUS
64810	THYROID DYSFUNCTION OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE

<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
64811	THYROID DYSFUNCTION OF MOTHER WITH DELIVERY
64812	THYROID DYSFUNCTION OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64813	ANTEPARTUM THYROID DYSFUNCTION
64814	POSTPARTUM THYROID DYSFUNCTION
64820	ANEMIA OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64821	ANEMIA OF MOTHER WITH DELIVERY
64822	ANEMIA OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64823	ANTEPARTUM ANEMIA
64824	POSTPARTUM ANEMIA
64830	DRUG DEPENDENCE OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64831	DRUG DEPENDENCE OF MOTHER WITH DELIVERY
64832	DRUG DEPENDENCE OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64833	ANTEPARTUM DRUG DEPENDENCE
64834	POSTPARTUM DRUG DEPENDENCE
64840	MENTAL DISORDERS OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64841	MENTAL DISORDERS OF MOTHER WITH DELIVERY
64842	MENTAL DISORDERS OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64843	ANTEPARTUM MENTAL DISORDERS OF MOTHER
64844	POSTPARTUM MENTAL DISORDERS OF MOTHER
64850	CONGENITAL CARDIOVASCULAR DISORDERS OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64851	CONGENITAL CARDIOVASCULAR DISORDERS OF MOTHER WITH DELIVERY
64852	CONGENITAL CARDIOVASCULAR DISORDERS OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64853	CONGENITAL CARDIOVASCULAR DISORDERS ANTEPARTUM
64854	CONGENITAL CARDIOVASCULAR DISORDERS POSTPARTUM
64860	OTHER CARDIOVASCULAR DISEASES OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64861	OTHER CARDIOVASCULAR DISEASES OF MOTHER WITH DELIVERY
64862	OTHER CARDIOVASCULAR DISEASES OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64863	OTHER CARDIOVASCULAR DISEASES ANTEPARTUM

<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
64864	OTHER CARDIOVASCULAR DISEASES POSTPARTUM
64870	BONE AND JOINT DISORDERS OF BACK PELVIS AND LOWER LIMBS OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64871	BONE AND JOINT DISORDERS OF BACK PELVIS AND LOWER LIMBS OF MOTHER WITH DELIVERY
64872	BONE AND JOINT DISORDERS OF BACK PELVIS AND LOWER LIMBS OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64873	BONE AND JOINT DISORDERS OF BACK PELVIS AND LOWER LIMBS ANTEPARTUM
64874	BONE AND JOINT DISORDERS OF BACK PELVIS AND LOWER LIMBS POSTPARTUM
64880	ABNORMAL GLUCOSE TOLERANCE OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64881	ABNORMAL GLUCOSE TOLERANCE OF MOTHER WITH DELIVERY
64882	ABNORMAL GLUCOSE TOLERANCE OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64883	ABNORMAL GLUCOSE TOLERANCE ANTEPARTUM
64884	ABNORMAL GLUCOSE TOLERANCE POSTPARTUM
64890	OTHER CURRENT CONDITIONS CLASSIFIABLE ELSEWHERE OF MOTHER COMPLICATING PREGNANCY CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE
64891	OTHER CURRENT CONDITIONS CLASSIFIABLE ELSEWHERE OF MOTHER WITH DELIVERY
64892	OTHER CURRENT CONDITIONS CLASSIFIABLE ELSEWHERE OF MOTHER WITH DELIVERY WITH POSTPARTUM COMPLICATION
64893	OTHER CURRENT CONDITIONS CLASSIFIABLE ELSEWHERE ANTEPARTUM
64894	OTHER CURRENT CONDITIONS CLASSIFIABLE ELSEWHERE POSTPARTUM
64900	TOBACCO USE DISORDER COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
64901	TOBACCO USE DISORDER COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, DELIVERED WITH OR WITHOUT MENTION OF ANTEPARTUM CONDITION
64902	TOBACCO USE DISORDER COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, DELIVERED WITH MENTION OF POSTPARTUM COMPLICATION
64903	TOBACCO USE DISORDER COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, ANTEPARTUM CONDITION OR COMPLICATION
64904	TOBACCO USE DISORDER COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, POSTPARTUM CONDITION OR COMPLICATION



<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
64910	OBESITY COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
64911	OBESITY COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, DELIVERED WITH OR WITHOUT MENTION OF ANTEPARTUM CONDITION
64912	OBESITY COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, DELIVERED WITH MENTION OF POSTPARTUM COMPLICATION
64913	OBESITY COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, ANTEPARTUM CONDITION OR COMPLICATION
64914	OBESITY COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, POSTPARTUM CONDITION OR COMPLICATION
64920	BARIATRIC SURGERY STATUS COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
64921	BARIATRIC SURGERY STATUS COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, DELIVERED WITH OR WITHOUT MENTION OF ANTEPARTUM CONDITION
64922	BARIATRIC SURGERY STATUS COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, DELIVERED WITH MENTION OF POSTPARTUM COMPLICATION
64923	BARIATRIC SURGERY STATUS COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, ANTEPARTUM CONDITION OR COMPLICATION
64924	BARIATRIC SURGERY STATUS COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, POSTPARTUM CONDITION OR COMPLICATION
64930	COAGULATION DEFECTS COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
64931	COAGULATION DEFECTS COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, DELIVERED WITH OR WITHOUT MENTION OF ANTEPARTUM CONDITION
64932	COAGULATION DEFECTS COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, DELIVERED WITH MENTION OF POSTPARTUM COMPLICATION
64933	COAGULATION DEFECTS COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, ANTEPARTUM CONDITION OR COMPLICATION
64934	COAGULATION DEFECTS COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, POSTPARTUM CONDITION OR COMPLICATION
64940	EPILEPSY COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
64941	EPILEPSY COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, DELIVERED WITH OR WITHOUT MENTION OF ANTEPARTUM CONDITION
64942	EPILEPSY COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, DELIVERED WITH MENTION OF POSTPARTUM COMPLICATION
64943	EPILEPSY COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, ANTEPARTUM CONDITION OR COMPLICATION



<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
64944	EPILEPSY COMPLICATING PREGNANCY, CHILDBIRTH OR THE PUERPERIUM, POSTPARTUM CONDITION OR COMPLICATION
64950	SPOTTING COMPLICATING PREGNANCY, UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
64951	SPOTTING COMPLICATING PREGNANCY, DELIVERED WITH OR WITHOUT MENTION OF ANTEPARTUM CONDITION
64953	SPOTTING COMPLICATING PREGNANCY, ANTEPARTUM CONDITION OR COMPLICATION
64960	UTERINE SIZE DATE DISCREPANCY, UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
64961	UTERINE SIZE DATE DISCREPANCY, DELIVERED WITH OR WITHOUT MENTION OF ANTEPARTUM CONDITION
64962	UTERINE SIZE DATE DISCREPANCY, DELIVERED WITH MENTION OF POSTPARTUM COMPLICATION
64963	UTERINE SIZE DATE DISCREPANCY, ANTEPARTUM CONDITION OR COMPLICATION
64964	UTERINE SIZE DATE DISCREPANCY, POSTPARTUM CONDITION OR COMPLICATION
64970	CERVICAL SHORTENING, UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
64971	CERVICAL SHORTENING, DELIVERED WITH OR WITHOUT MENTION OF ANTEPARTUM CONDITION
64973	CERVICAL SHORTENING, ANTEPARTUM CONDITION OR COMPLICATION
65000	NORMAL DELIVERY
65100	TWIN PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
65101	TWIN PREGNANCY DELIVERED
65103	TWIN PREGNANCY ANTEPARTUM CONDITION OR COMPLICATION
65110	TRIPLET PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
65111	TRIPLET PREGNANCY DELIVERED
65113	TRIPLET PREGNANCY ANTEPARTUM CONDITION OR COMPLICATION
65120	QUADRUPLET PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
65121	QUADRUPLET PREGNANCY DELIVERED
65123	QUADRUPLET PREGNANCY ANTEPARTUM CONDITION OR COMPLICATION
65130	TWIN PREGNANCY WITH FETAL LOSS AND RETENTION OF ONE FETUS UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
65131	TWIN PREGNANCY WITH FETAL LOSS AND RETENTION OF ONE FETUS DELIVERED WITH OR WITHOUT ANTEPARTUM CONDITION
65133	TWIN PREGNANCY WITH FETAL LOSS AND RETENTION OF ONE FETUS ANTEPARTUM CONDITION OR COMPLICATION

<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
65140	TRIPLET PREGNANCY WITH FETAL LOSS AND RETENTION OF ONE OR MORE FETUS(ES) UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
65141	TRIPLET PREGNANCY WITH FETAL LOSS AND RETENTION OF ONE OR MORE FETUS(ES) DELIVERED WITH OR WITHOUT ANTEPARTUM CONDITION
65143	TRIPLET PREGNANCY WITH FETAL LOSS AND RETENTION OF ONE OR MORE FETUS(ES) ANTEPARTUM CONDITION OR COMPLICATION
65150	QUADRUPLET PREGNANCY WITH FETAL LOSS AND RETENTION OF ONE OR MORE FETUS(ES) UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
65151	QUADRUPLET PREGNANCY WITH FETAL LOSS AND RETENTION OF ONE OR MORE FETUS(ES) DELIVERED WITH OR WITHOUT ANTEPARTUM CONDITION
65153	QUADRUPLET PREGNANCY WITH FETAL LOSS AND RETENTION OF ONE OR MORE FETUS(ES) ANTEPARTUM CONDITION OR COMPLICATION
65160	OTHER MULTIPLE PREGNANCY WITH FETAL LOSS AND RETENTION OF ONE OR MORE FETUS(ES) UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
65161	OTHER MULTIPLE PREGNANCY WITH FETAL LOSS AND RETENTION OF ONE OR MORE FETUS(ES) DELIVERED WITH OR WITHOUT ANTEPARTUM CONDITION
65163	OTHER MULTIPLE PREGNANCY WITH FETAL LOSS AND RETENTION OF ONE OR MORE FETUS(ES) ANTEPARTUM CONDITION OR COMPLICATION
65170	MULTIPLE GESTATION FOLLOWING (ELECTIVE) FETAL REDUCTION UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
65171	MULTIPLE GESTATION FOLLOWING (ELECTIVE) FETAL REDUCTION DELIVERED WITH OR WITHOUT ANTEPARTUM CONDITION
65173	MULTIPLE GESTATION FOLLOWING (ELECTIVE) FETAL REDUCTION ANTEPARTUM CONDITION OR COMPLICATION
65180	OTHER SPECIFIED MULTIPLE GESTATION UNSPECIFIED AS TO EPISODE OF CARE
65181	OTHER SPECIFIED MULTIPLE GESTATION DELIVERED
65183	OTHER SPECIFIED MULTIPLE GESTATION ANTEPARTUM CONDITION OR COMPLICATION
65190	UNSPECIFIED MULTIPLE GESTATION UNSPECIFIED AS TO EPISODE OF CARE
65191	UNSPECIFIED MULTIPLE GESTATION DELIVERED
65193	UNSPECIFIED MULTIPLE GESTATION ANTEPARTUM CONDITION OR COMPLICATION
65200	UNSTABLE LIE UNSPECIFIED AS TO EPISODE OF CARE
65201	UNSTABLE LIE DELIVERED
65203	UNSTABLE LIE ANTEPARTUM CONDITION OR COMPLICATION

<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
65210	BREECH OR OTHER MALPRESENTATION SUCCESSFULLY CONVERTED TO CEPHALIC PRESENTATION UNSPECIFIED AS TO EPISODE OF CARE
65211	BREECH OR OTHER MALPRESENTATION SUCCESSFULLY CONVERTED TO CEPHALIC PRESENTATION DELIVERED
65213	BREECH OR OTHER MALPRESENTATION SUCCESSFULLY CONVERTED TO CEPHALIC PRESENTATION ANTEPARTUM
65220	BREECH PRESENTATION WITHOUT VERSION UNSPECIFIED AS TO EPISODE OF CARE
65221	BREECH PRESENTATION WITHOUT VERSION DELIVERED
65223	BREECH PRESENTATION WITHOUT VERSION ANTEPARTUM
65230	TRANSVERSE OR OBLIQUE PRESENTATION UNSPECIFIED AS TO EPISODE OF CARE
65231	TRANSVERSE OR OBLIQUE PRESENTATION DELIVERED
65233	TRANSVERSE OR OBLIQUE PRESENTATION ANTEPARTUM
65240	FACE OR BROW PRESENTATION UNSPECIFIED AS TO EPISODE OF CARE
65241	FACE OR BROW PRESENTATION DELIVERED
65243	FACE OR BROW PRESENTATION ANTEPARTUM
65250	HIGH HEAD AT TERM UNSPECIFIED AS TO EPISODE OF CARE
65251	HIGH HEAD AT TERM DELIVERED
65253	HIGH HEAD AT TERM ANTEPARTUM
65260	MULTIPLE GESTATION WITH MALPRESENTATION OF ONE FETUS OR MORE UNSPECIFIED AS TO EPISODE OF CARE
65261	MULTIPLE GESTATION WITH MALPRESENTATION OF ONE FETUS OR MORE DELIVERED
65263	MULTIPLE GESTATION WITH MALPRESENTATION OF ONE FETUS OR MORE ANTEPARTUM
65270	PROLAPSED ARM OF FETUS UNSPECIFIED AS TO EPISODE OF CARE
65271	PROLAPSED ARM OF FETUS DELIVERED
65273	PROLAPSED ARM ANTEPARTUM CONDITION OR COMPLICATION
65280	OTHER SPECIFIED MALPOSITION OR MALPRESENTATION UNSPECIFIED AS TO EPISODE OF CARE
65281	OTHER SPECIFIED MALPOSITION OR MALPRESENTATION DELIVERED
65283	OTHER SPECIFIED MALPOSITION OR MALPRESENTATION ANTEPARTUM
65290	UNSPECIFIED MALPOSITION OR MALPRESENTATION UNSPECIFIED AS TO EPISODE OF CARE
65291	UNSPECIFIED MALPOSITION OR MALPRESENTATION DELIVERED
65293	UNSPECIFIED MALPOSITION OR MALPRESENTATION ANTEPARTUM
65300	MAJOR ABNORMALITY OF BONY PELVIS NOT FURTHER SPECIFIED UNSPECIFIED AS TO EPISODE OF CARE

<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
65301	MAJOR ABNORMALITY OF BONY PELVIS NOT FURTHER SPECIFIED DELIVERED
65303	MAJOR ABNORMALITY OF BONY PELVIS NOT FURTHER SPECIFIED ANTEPARTUM
65310	GENERALLY CONTRACTED PELVIS UNSPECIFIED AS TO EPISODE OF CARE IN PREGNANCY
65311	GENERALLY CONTRACTED PELVIS DELIVERED
65313	GENERALLY CONTRACTED PELVIS ANTEPARTUM
65320	INLET CONTRACTION OF PELVIS UNSPECIFIED AS TO EPISODE OF CARE IN PREGNANCY
65321	INLET CONTRACTION OF PELVIS DELIVERED
65323	INLET CONTRACTION OF PELVIS ANTEPARTUM
65330	OUTLET CONTRACTION OF PELVIS UNSPECIFIED AS TO EPISODE OF CARE IN PREGNANCY
65331	OUTLET CONTRACTION OF PELVIS DELIVERED
65333	OUTLET CONTRACTION OF PELVIS ANTEPARTUM
65340	FETOPELVIC DISPROPORTION UNSPECIFIED AS TO EPISODE OF CARE IN PREGNANCY
65341	FETOPELVIC DISPROPORTION DELIVERED
65343	FETOPELVIC DISPROPORTION ANTEPARTUM
65350	UNUSUALLY LARGE FETUS CAUSING DISPROPORTION UNSPECIFIED AS TO EPISODE OF CARE
65351	UNUSUALLY LARGE FETUS CAUSING DISPROPORTION DELIVERED
65353	UNUSUALLY LARGE FETUS CAUSING DISPROPORTION ANTEPARTUM
65360	HYDROCEPHALIC FETUS CAUSING DISPROPORTION UNSPECIFIED AS TO EPISODE OF CARE
65361	HYDROCEPHALIC FETUS CAUSING DISPROPORTION DELIVERED
65363	HYDROCEPHALIC FETUS CAUSING DISPROPORTION ANTEPARTUM
65370	OTHER FETAL ABNORMALITY CAUSING DISPROPORTION UNSPECIFIED AS TO EPISODE OF CARE
65371	OTHER FETAL ABNORMALITY CAUSING DISPROPORTION DELIVERED
65373	OTHER FETAL ABNORMALITY CAUSING DISPROPORTION ANTEPARTUM
65380	DISPROPORTION OF OTHER ORIGIN UNSPECIFIED AS TO EPISODE OF CARE
65381	DISPROPORTION OF OTHER ORIGIN DELIVERED
65383	DISPROPORTION OF OTHER ORIGIN ANTEPARTUM
65390	UNSPECIFIED DISPROPORTION UNSPECIFIED AS TO EPISODE OF CARE
65391	UNSPECIFIED DISPROPORTION DELIVERED
65393	UNSPECIFIED DISPROPORTION ANTEPARTUM

<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
65400	CONGENITAL ABNORMALITIES OF UTERUS UNSPECIFIED AS TO EPISODE OF CARE
65401	CONGENITAL ABNORMALITIES OF UTERUS WITH DELIVERY
65402	CONGENITAL ABNORMALITIES OF UTERUS DELIVERED WITH POSTPARTUM COMPLICATION
65403	CONGENITAL ABNORMALITIES OF UTERUS ANTEPARTUM CONDITION OR COMPLICATION
65404	CONGENITAL ABNORMALITIES OF UTERUS POSTPARTUM CONDITION OR COMPLICATION
65410	TUMORS OF BODY OF UTERUS UNSPECIFIED AS TO EPISODE OF CARE
65411	TUMORS OF BODY OF UTERUS WITH DELIVERY
65412	TUMORS OF BODY OF UTERUS DELIVERED WITH POSTPARTUM COMPLICATION
65413	TUMORS OF BODY OF UTERUS ANTEPARTUM CONDITION OR COMPLICATION
65414	TUMORS OF BODY OF UTERUS POSTPARTUM CONDITION OR COMPLICATION
65420	PREVIOUS CESAREAN DELIVERY UNSPECIFIED AS TO EPISODE OF CARE IN PREGNANCY
65421	PREVIOUS CESAREAN DELIVERY WITH DELIVERY WITH OR WITHOUT ANTEPARTUM CONDITION
65423	PREVIOUS CESAREAN DELIVERY ANTEPARTUM CONDITION OR COMPLICATION
65430	RETROVERTED AND INCARCERATED GRAVID UTERUS UNSPECIFIED AS TO EPISODE OF CARE
65431	RETROVERTED AND INCARCERATED GRAVID UTERUS DELIVERED
65432	RETROVERTED AND INCARCERATED GRAVID UTERUS DELIVERED WITH POSTPARTUM COMPLICATION
65433	RETROVERTED AND INCARCERATED GRAVID UTERUS ANTEPARTUM
65434	RETROVERTED AND INCARCERATED GRAVID UTERUS POSTPARTUM
65440	OTHER ABNORMALITIES IN SHAPE OR POSITION OF GRAVID UTERUS AND OF NEIGHBORING STRUCTURES UNSPECIFIED AS TO EPISODE OF CARE
65441	OTHER ABNORMALITIES IN SHAPE OR POSITION OF GRAVID UTERUS AND OF NEIGHBORING STRUCTURES DELIVERED
65442	OTHER ABNORMALITIES IN SHAPE OR POSITION OF GRAVID UTERUS AND OF NEIGHBORING STRUCTURES DELIVERED WITH POSTPARTUM COMPLICATION
65443	OTHER ABNORMALITIES IN SHAPE OR POSITION OF GRAVID UTERUS AND OF NEIGHBORING STRUCTURES ANTEPARTUM
65444	OTHER ABNORMALITIES IN SHAPE OR POSITION OF GRAVID UTERUS AND OF NEIGHBORING STRUCTURES POSTPARTUM
65450	CERVICAL INCOMPETENCE UNSPECIFIED AS TO EPISODE OF CARE

<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
65451	CERVICAL INCOMPETENCE WITH DELIVERY
65452	CERVICAL INCOMPETENCE DELIVERED WITH POSTPARTUM COMPLICATION
65453	CERVICAL INCOMPETENCE ANTEPARTUM CONDITION OR COMPLICATION
65454	CERVICAL INCOMPETENCE POSTPARTUM CONDITION OR COMPLICATION
65460	OTHER CONGENITAL OR ACQUIRED ABNORMALITY OF CERVIX UNSPECIFIED AS TO EPISODE OF CARE
65461	OTHER CONGENITAL OR ACQUIRED ABNORMALITY OF CERVIX WITH DELIVERY
65462	OTHER CONGENITAL OR ACQUIRED ABNORMALITY OF CERVIX DELIVERED WITH POSTPARTUM COMPLICATION
65463	OTHER CONGENITAL OR ACQUIRED ABNORMALITY OF CERVIX ANTEPARTUM CONDITION OR COMPLICATION
65464	OTHER CONGENITAL OR ACQUIRED ABNORMALITY OF CERVIX POSTPARTUM CONDITION OR COMPLICATION
65470	CONGENITAL OR ACQUIRED ABNORMALITY OF VAGINA UNSPECIFIED AS TO EPISODE OF CARE
65471	CONGENITAL OR ACQUIRED ABNORMALITY OF VAGINA WITH DELIVERY
65472	CONGENITAL OR ACQUIRED ABNORMALITY OF VAGINA DELIVERED WITH POSTPARTUM COMPLICATION
65473	CONGENITAL OR ACQUIRED ABNORMALITY OF VAGINA ANTEPARTUM CONDITION OR COMPLICATION
65474	CONGENITAL OR ACQUIRED ABNORMALITY OF VAGINA POSTPARTUM CONDITION OR COMPLICATION
65480	CONGENITAL OR ACQUIRED ABNORMALITY OF VULVA UNSPECIFIED AS TO EPISODE OF CARE
65481	CONGENITAL OR ACQUIRED ABNORMALITY OF VULVA WITH DELIVERY
65482	CONGENITAL OR ACQUIRED ABNORMALITY OF VULVA DELIVERED WITH POSTPARTUM COMPLICATION
65483	CONGENITAL OR ACQUIRED ABNORMALITY OF VULVA ANTEPARTUM CONDITION OR COMPLICATION
65484	CONGENITAL OR ACQUIRED ABNORMALITY OF VULVA POSTPARTUM CONDITION OR COMPLICATION
65490	OTHER AND UNSPECIFIED ABNORMALITY OF ORGANS AND SOFT TISSUES OF PELVIS UNSPECIFIED AS TO EPISODE OF CARE IN PREGNANCY
65491	OTHER AND UNSPECIFIED ABNORMALITY OF ORGANS AND SOFT TISSUES OF PELVIS WITH DELIVERY
65492	OTHER AND UNSPECIFIED ABNORMALITY OF ORGANS AND SOFT TISSUES OF PELVIS DELIVERED WITH POSTPARTUM COMPLICATION
65493	OTHER AND UNSPECIFIED ABNORMALITY OF ORGANS AND SOFT TISSUES OF PELVIS ANTEPARTUM CONDITION OR COMPLICATION
65494	OTHER AND UNSPECIFIED ABNORMALITY OF ORGANS AND SOFT TISSUES OF PELVIS POSTPARTUM CONDITION OR COMPLICATION

<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
65500	CENTRAL NERVOUS SYSTEM MALFORMATION IN FETUS UNSPECIFIED AS TO EPISODE OF CARE
65501	CENTRAL NERVOUS SYSTEM MALFORMATION IN FETUS WITH DELIVERY
65503	CENTRAL NERVOUS SYSTEM MALFORMATION IN FETUS ANTEPARTUM
65510	CHROMOSOMAL ABNORMALITY IN FETUS AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
65511	CHROMOSOMAL ABNORMALITY IN FETUS AFFECTING MANAGEMENT OF MOTHER WITH DELIVERY
65513	CHROMOSOMAL ABNORMALITY IN FETUS AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM
65520	HEREDITARY DISEASE IN FAMILY POSSIBLY AFFECTING FETUS AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
65521	HEREDITARY DISEASE IN FAMILY POSSIBLY AFFECTING FETUS AFFECTING MANAGEMENT OF MOTHER WITH DELIVERY
65523	HEREDITARY DISEASE IN FAMILY POSSIBLY AFFECTING FETUS AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM CONDITION OR COMPLICATION
65530	SUSPECTED DAMAGE TO FETUS FROM VIRAL DISEASE IN THE MOTHER AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
65531	SUSPECTED DAMAGE TO FETUS FROM VIRAL DISEASE IN THE MOTHER AFFECTING MANAGEMENT OF MOTHER WITH DELIVERY
65533	SUSPECTED DAMAGE TO FETUS FROM VIRAL DISEASE IN THE MOTHER AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM CONDITION OR COMPLICATION
65540	SUSPECTED DAMAGE TO FETUS FROM OTHER DISEASE IN THE MOTHER AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
65541	SUSPECTED DAMAGE TO FETUS FROM OTHER DISEASE IN THE MOTHER AFFECTING MANAGEMENT OF MOTHER WITH DELIVERY
65543	SUSPECTED DAMAGE TO FETUS FROM OTHER DISEASE IN THE MOTHER AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM CONDITION OR COMPLICATION
65550	SUSPECTED DAMAGE TO FETUS FROM RADIATION AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
65551	SUSPECTED DAMAGE TO FETUS FROM RADIATION AFFECTING MANAGEMENT OF MOTHER DELIVERED
65553	SUSPECTED DAMAGE TO FETUS FROM RADIATION AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM CONDITION OR COMPLICATION
65570	DECREASED FETAL MOVEMENTS AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
65571	DECREASED FETAL MOVEMENTS AFFECTING MANAGEMENT OF MOTHER DELIVERED
65573	DECREASED FETAL MOVEMENTS AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM CONDITION OR COMPLICATION



<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
65580	OTHER KNOWN OR SUSPECTED FETAL ABNORMALITY NOT ELSEWHERE CLASSIFIED AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
65581	OTHER KNOWN OR SUSPECTED FETAL ABNORMALITY NOT ELSEWHERE CLASSIFIED AFFECTING MANAGEMENT OF MOTHER DELIVERED
65583	OTHER KNOWN OR SUSPECTED FETAL ABNORMALITY NOT ELSEWHERE CLASSIFIED AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM CONDITION OR COMPLICATION
65590	UNSPECIFIED FETAL ABNORMALITY AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
65591	UNSPECIFIED FETAL ABNORMALITY AFFECTING MANAGEMENT OF MOTHER DELIVERED
65593	UNSPECIFIED FETAL ABNORMALITY AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM CONDITION OR COMPLICATION
65600	FETAL-MATERNAL HEMORRHAGE UNSPECIFIED AS TO EPISODE OF CARE IN PREGNANCY
65601	FETAL-MATERNAL HEMORRHAGE WITH DELIVERY
65603	FETAL-MATERNAL HEMORRHAGE ANTEPARTUM CONDITION OR COMPLICATION
65610	RHESUS ISOIMMUNIZATION UNSPECIFIED AS TO EPISODE OF CARE IN PREGNANCY
65611	FETAL-MATERNAL HEMORRHAGE WITH DELIVERY
65613	FETAL-MATERNAL HEMORRHAGE ANTEPARTUM CONDITION OR COMPLICATION
65620	ISOIMMUNIZATION FROM OTHER AND UNSPECIFIED BLOOD-GROUP INCOMPATIBILITY UNSPECIFIED AS TO EPISODE OF CARE IN PREGNANCY
65621	ISOIMMUNIZATION FROM OTHER AND UNSPECIFIED BLOOD-GROUP INCOMPATIBILITY DELIVERED
65623	ISOIMMUNIZATION FROM OTHER AND UNSPECIFIED BLOOD-GROUP INCOMPATIBILITY ANTEPARTUM
65630	FETAL DISTRESS AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE IN PREGNANCY
65631	FETAL DISTRESS AFFECTING MANAGEMENT OF MOTHER DELIVERED
65633	FETAL DISTRESS AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM
65640	INTRAUTERINE DEATH AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
65641	INTRAUTERINE DEATH AFFECTING MANAGEMENT OF MOTHER DELIVERED
65643	INTRAUTERINE DEATH AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM
65650	POOR FETAL GROWTH AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
65651	POOR FETAL GROWTH AFFECTING MANAGEMENT OF MOTHER DELIVERED



<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
65653	POOR FETAL GROWTH AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM
65660	EXCESSIVE FETAL GROWTH AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
65661	EXCESSIVE FETAL GROWTH AFFECTING MANAGEMENT OF MOTHER DELIVERED
65663	EXCESSIVE FETAL GROWTH AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM
65670	OTHER PLACENTAL CONDITIONS AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
65671	OTHER PLACENTAL CONDITIONS AFFECTING MANAGEMENT OF MOTHER DELIVERED
65673	OTHER PLACENTAL CONDITIONS AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM
65680	OTHER SPECIFIED FETAL AND PLACENTAL PROBLEMS AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
65681	OTHER SPECIFIED FETAL AND PLACENTAL PROBLEMS AFFECTING MANAGEMENT OF MOTHER DELIVERED
65683	OTHER SPECIFIED FETAL AND PLACENTAL PROBLEMS AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM
65690	UNSPECIFIED FETAL AND PLACENTAL PROBLEM AFFECTING MANAGEMENT OF MOTHER UNSPECIFIED AS TO EPISODE OF CARE
65691	UNSPECIFIED FETAL AND PLACENTAL PROBLEM AFFECTING MANAGEMENT OF MOTHER DELIVERED
65693	UNSPECIFIED FETAL AND PLACENTAL PROBLEM AFFECTING MANAGEMENT OF MOTHER ANTEPARTUM
65700	POLYHYDRAMINOS UNSPECIFIED AS TO EPISODE OF CARE
65701	POLYHYDRAMINOS WITH DELIVERY
65703	POLYHYDRAMINOS ANTEPARTUM COMPLICATION
65800	OLIGOHYDRAMINOS UNSPECIFIED AS TO EPISODE OF CARE
65801	OLIGOHYDRAMINOS DELIVERED
65803	OLIGOHYDRAMINOS ANTEPARTUM
65810	PREMATURE RUPTURE OF MEMBRANES UNSPECIFIED AS TO EPISODE OF CARE
65811	PREMATURE RUPTURE OF MEMBRANES DELIVERED
65813	PREMATURE RUPTURE OF MEMBRANES ANTEPARTUM
65820	DELAYED DELIVERY AFTER SPONTANEOUS OR UNSPECIFIED RUPTURE OF MEMBRANES UNSPECIFIED AS TO EPISODE OF CARE
65821	DELAYED DELIVERY AFTER SPONTANEOUS OR UNSPECIFIED RUPTURE OF MEMBRANES DELIVERED
65823	DELAYED DELIVERY AFTER SPONTANEOUS OR UNSPECIFIED RUPTURE OF MEMBRANES ANTEPARTUM

<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
65830	DELAYED DELIVERY AFTER ARTIFICIAL RUPTURE OF MEMBRANES UNSPECIFIED AS TO EPISODE OF CARE
65831	DELAYED DELIVERY AFTER ARTIFICIAL RUPTURE OF MEMBRANES DELIVERED
65833	DELAYED DELIVERY AFTER ARTIFICIAL RUPTURE OF MEMBRANES ANTEPARTUM
65840	INFECTION OF AMNIOTIC CAVITY UNSPECIFIED AS TO EPISODE OF CARE
65841	INFECTION OF AMNIOTIC CAVITY DELIVERED
65843	INFECTION OF AMNIOTIC CAVITY ANTEPARTUM
65880	OTHER PROBLEMS ASSOCIATED WITH AMNIOTIC CAVITY AND MEMBRANES UNSPECIFIED AS TO EPISODE OF CARE
65881	OTHER PROBLEMS ASSOCIATED WITH AMNIOTIC CAVITY AND MEMBRANES DELIVERED
65883	OTHER PROBLEMS ASSOCIATED WITH AMNIOTIC CAVITY AND MEMBRANES ANTEPARTUM
65890	UNSPECIFIED PROBLEMS ASSOCIATED WITH AMNIOTIC CAVITY AND MEMBRANES UNSPECIFIED AS TO EPISODE OF CARE
65891	UNSPECIFIED PROBLEMS ASSOCIATED WITH AMNIOTIC CAVITY AND MEMBRANES DELIVERED
65893	UNSPECIFIED PROBLEMS ASSOCIATED WITH AMNIOTIC CAVITY AND MEMBRANES ANTEPARTUM
65900	FAILED MECHANICAL INDUCTION OF LABOR UNSPECIFIED AS TO EPISODE OF CARE
65901	FAILED MECHANICAL INDUCTION OF LABOR DELIVERED
65903	FAILED MECHANICAL INDUCTION OF LABOR ANTEPARTUM
65910	FAILED MEDICAL OR UNSPECIFIED INDUCTION OF LABOR UNSPECIFIED AS TO EPISODE OF CARE
65911	FAILED MEDICAL OR UNSPECIFIED INDUCTION OF LABOR DELIVERED
65913	FAILED MEDICAL OR UNSPECIFIED INDUCTION OF LABOR ANTEPARTUM
65920	UNSPECIFIED TYPE MATERNAL PYREXIA DURING LABOR UNSPECIFIED AS TO EPISODE OF CARE
65921	UNSPECIFIED TYPE MATERNAL PYREXIA DURING LABOR DELIVERED
65923	UNSPECIFIED TYPE MATERNAL PYREXIA DURING LABOR ANTEPARTUM
65930	GENERALIZED INFECTION DURING LABOR UNSPECIFIED AS TO EPISODE OF CARE
65931	GENERALIZED INFECTION DURING LABOR DELIVERED
65933	GENERALIZED INFECTION DURING LABOR ANTEPARTUM
65940	GRAND MULTIPARITY WITH CURRENT PREGNANCY UNSPECIFIED AS TO EPISODE OF CARE
65941	GRAND MULTIPARITY WITH CURRENT PREGNANCY DELIVERED
65943	GRAND MULTIPARITY WITH CURRENT PREGNANCY ANTEPARTUM

<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
65950	ELDERLY PRIMIGRAVIDA UNSPECIFIED AS TO EPISODE OF CARE
65951	ELDERLY PRIMIGRAVIDA DELIVERED
65953	ELDERLY PRIMIGRAVIDA ANTEPARTUM
65960	OTHER ADVANCED MATERNAL AGE UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
65961	OTHER ADVANCED MATERNAL AGE DELIVERED WITH OR WITHOUT ANTEPARTUM CONDITION
65963	OTHER ADVANCED MATERNAL AGE ANTEPARTUM CONDITION OR COMPLICATION
65970	ABNORMALITY IN FETAL HEART RATE OR RHYTHM UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
65971	ABNORMALITY IN FETAL HEART RATE OR RHYTHM DELIVERED WITH OR WITHOUT ANTEPARTUM CONDITION
65973	ABNORMALITY IN FETAL HEART RATE OR RHYTHM ANTEPARTUM CONDITION OR COMPLICATION
65980	OTHER SPECIFIED INDICATIONS FOR CARE OR INTERVENTION RELATED TO LABOR AND DELIVERY UNSPECIFIED AS TO EPISODE OF CARE
65981	OTHER SPECIFIED INDICATIONS FOR CARE OR INTERVENTION RELATED TO LABOR AND DELIVERY DELIVERED
65983	OTHER SPECIFIED INDICATIONS FOR CARE OR INTERVENTION RELATED TO LABOR AND DELIVERY ANTEPARTUM
65990	UNSPECIFIED INDICATION FOR CARE OR INTERVENTION RELATED TO LABOR AND DELIVERY UNSPECIFIED AS TO EPISODE OF CARE
65991	UNSPECIFIED INDICATION FOR CARE OR INTERVENTION RELATED TO LABOR AND DELIVERY DELIVERED
65993	UNSPECIFIED INDICATION FOR CARE OR INTERVENTION RELATED TO LABOR AND DELIVERY ANTEPARTUM
67900	MATERNAL COMPLICATIONS FROM IN UTERO PROCEDURE, UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
67901	MATERNAL COMPLICATIONS FROM IN UTERO PROCEDURE, DELIVERED, WITH OR WITHOUT MENTION OF ANTEPARTUM CONDITION
67902	MATERNAL COMPLICATIONS FROM IN UTERO PROCEDURE, DELIVERED, WITH MENTION OF POSTPARTUM COMPLICATION
67903	MATERNAL COMPLICATIONS FROM IN UTERO PROCEDURE, ANTEPARTUM CONDITION OR COMPLICATION
67904	MATERNAL COMPLICATIONS FROM IN UTERO PROCEDURE, POSTPARTUM CONDITION OR COMPLICATION
67910	FETAL COMPLICATIONS FROM IN UTERO PROCEDURE, UNSPECIFIED AS TO EPISODE OF CARE OR NOT APPLICABLE
67911	FETAL COMPLICATIONS FROM IN UTERO PROCEDURE, DELIVERED, WITH OR WITHOUT MENTION OF ANTEPARTUM CONDITION
67912	FETAL COMPLICATIONS FROM IN UTERO PROCEDURE, DELIVERED, WITH MENTION OF POSTPARTUM COMPLICATION

<b>Step 1 (diagnosis of pregnancy or pregnancy-related diagnosis)</b>	
<b>Required diagnosis: 1</b>	
<b>Look back timeframe: 310 days</b>	
<b>ICD-9 Code</b>	<b>Description</b>
67913	FETAL COMPLICATIONS FROM IN UTERO PROCEDURE, ANTEPARTUM CONDITION OR COMPLICATION
67914	FETAL COMPLICATIONS FROM IN UTERO PROCEDURE, POSTPARTUM CONDITION OR COMPLICATION

<b>Step 4 (history of benzodiazepine therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	

For the list of benzodiazepine medications that pertain to this step, see the [Benzodiazepine Therapies](#) table in the previous "Supporting Tables" section.

**Note:** Click the hyperlink to navigate directly to the table.

<b>Step 5 (history of buprenorphine therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	
<b>Description</b>	<b>GCN</b>
BUPRENORPHINE HCL 2MG TABLET SL	64672
BUPRENORPHINE HCL 8MG TABLET SL	64673

<b>Step 6 (history of opioid analgesic therapy)</b>	
<b>Number of claims: 1</b>	
<b>Look back timeframe: 30 days</b>	

For the list of opioid analgesic medications that pertain to this step, see the [Opioid Analgesic Therapies](#) table in the previous "Supporting Tables" section.

**Note:** Click the hyperlink to navigate directly to the table.



## Suboxone/Buprenorphine

### Clinical Edit Criteria References

1. Suboxone Prescribing Information. Richmand, VA: Reckitt Benckiser Pharmaceuticals Inc.; April 2014.
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5. Center for Substance Abuse Treatment (2004). Clinical guidelines for the use of buprenorphine in the treatment of opioid addiction. Treatment Improvement Protocol (TIP) Series, No. 40. Available at [www.buprenorphine.samhsa.gov](http://www.buprenorphine.samhsa.gov). Accessed on October 17, 2014.
6. World Health Organization (2009). Guidelines for the Psychosocially Assisted Pharmacological Treatment of Opioid Dependence. Available at [www.who.int](http://www.who.int).

## Publication History

The Publication History records the publication iterations and revisions to this document. Notes for the *most current revision* are also provided in the **Revision Notes** on the first page of this document.

<b>Publication Date</b>	<b>Notes</b>
03/27/2013	Initial publication and posting to website
10/17/2014	Removed Subutex GCNs from buprenorphine edit
	Updated Clinical Edit Criteria References