



Texas Prior Authorization Program Clinical Criteria

Appetite Suppressant Agents

This criteria was recommended for review by the Texas Medicaid Vendor Drug Program to ensure appropriate and safe utilization

Clinical Criteria Information Included in this Document

Appetite Suppressant Agents

- **Drugs requiring clinical prior authorization:** the list of drugs requiring prior authorization for this clinical criteria
- Clinical prior authorization criteria logic: a description of how the prior authorization request will be evaluated against the clinical criteria rules
- Logic diagram: a visual depiction of the clinical 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 criteria

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

Revision Notes

• Updated dose check to greater than 37.5 mg/day for phentermine or 210 mg/day for phendimetrazine



Drugs Requiring Clinical Prior Authorization

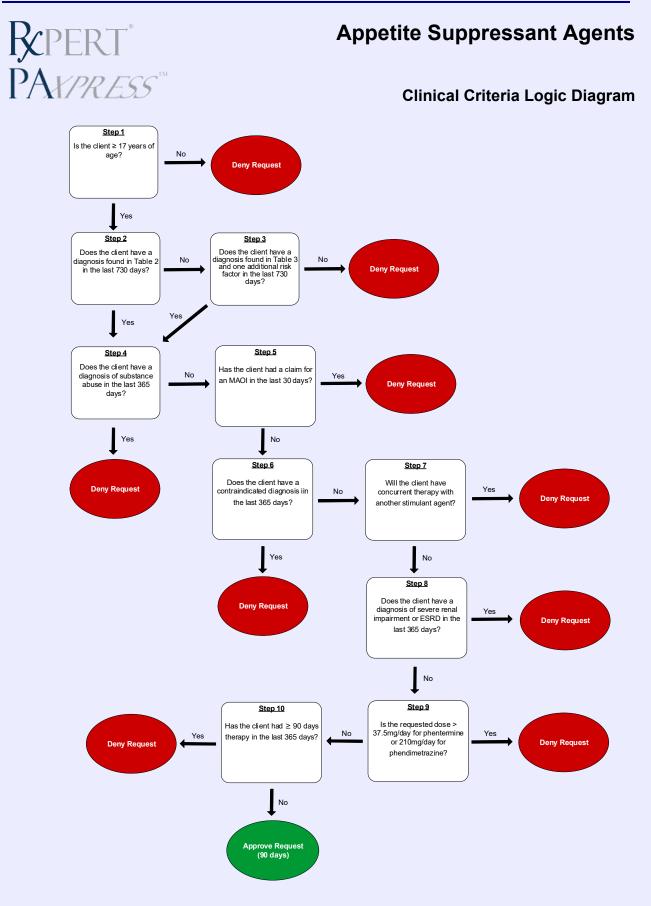
The listed GCNS may not be an indication of TX Medicaid Formulary coverage. To learn the current formulary coverage, visit TxVendorDrug.com/formulary/formulary-search.

Label Name	GCN
ADIPEX-P 37.5 MG TABLET	20713
LOMAIRA 8 MG TABLET	20715
PHENDIMETRAZINE 35 MG TABLET	20852
PHENTERMINE 15 MG CAPSULE	20691
PHENTERMINE 15 MG CAPSULE SA	20730
PHENTERMINE 30 MG CAPSULE	20692
PHENTERMINE 30 MG CAPSULE SA	20731
PHENTERMINE 37.5 MG CAPSULE	20693
PHENTERMINE 37.5 MG TABLET	20713



Clinical Criteria Logic

- Is the client greater than or equal to (≥) 17 years of age?
 [] Yes Go to #2
 [] No Deny
- Does the client have a diagnosis found in Table 2 in the last 730 days?
 [] Yes Go to #4
 [] No Go #3
- 3. Does the client have a diagnosis found in Table 3 and have at least one additional risk factor in the last 730 days?
 [] Yes Go to #4
 [] No Deny
- 4. Does the client have a diagnosis of **substance abuse** in the last 365 days?
 [] Yes Deny
 [] No Go to #5
- 5. Has the client had a claim for a monoamine oxidase inhibitor (MAOI) in the last 30 days?
 [] Yes Deny
 [] No Go to #6
- 6. Does the client have a contraindicated diagnosis in the last 365 days?
 [] Yes Deny
 [] No Go to #7
- 7. Will the client have concurrent therapy with another stimulant agent?
 [] Yes Deny
 [] No Go to #8
- 8. Does the client have a diagnosis of severe renal impairment or end-stage renal disease (ESRD) in the last 365 days?
 [] Yes Deny
 [] No Go to #9
- 9. Is the requested dose greater than (>) 37.5 mg/day for phentermine or 210 mg/day for phendimetrazine?
 [] Yes Deny
 [] No Go to #10
- 10.Has the client had greater than or equal to (\geq) 90 days therapy in the last 365 days?
 - [] Yes Deny
 - [] No Approve (90 days)





Clinical Criteria Supporting Tables

Step 2 (BMI ≥ 30 kg/m²)	
Required quantity: 1	
	Look back timeframe: 730 days
ICD-10 Code	Description
E6601	MORBID (SEVERE) OBESITY DUE TO EXCESS CALORIES
E6609	OTHER OBESITY DUE TO EXCESS CALORIES
E661	DRUG-INDUCED OBESITY
E662	MORBID (SEVERE) OBESITY WITH ALVEOLAR HYPOVENTILATION
E668	OTHER OBESITY
E669	OBESITY, UNSPECIFIED

Step 3a (BMI ≥ 27 kg/m²) Required quantity: 1		
Look back timeframe: 730 days		
ICD-10 Code	Description	
E663	OVERWEIGHT	

Step 3b (Risk factors) Required quantity: 1	
	Look back timeframe: 730 days
ICD-10 Code	Description
E1100	TYPE 2 DIABETES MELLITUS WITH HYPEROSMOLARITY WITHOUT NONKETOTIC HYPERGLYCEMIC-HYPEROSMOLAR COMA (NKHHC)
E1101	TYPE 2 DIABETES MELLITUS WITH HYPEROSMOLARITY WITH COMA
E1121	TYPE 2 DIABETES MELLITUS WITH DIABETIC NEPHROPATHY
E1122	TYPE 2 DIABETES MELLITUS WITH DIABETIC CHRONIC KIDNEY DISEASE
E1129	TYPE 2 DIABETES MELLITUS WITH OTHER DIABETIC KIDNEY COMPLICATION
E11311	TYPE 2 DIABETES MELLITUS WITH UNSPECIFIED DIABETIC RETINOPATHY WITH MACULAR EDEMA
E11319	TYPE 2 DIABETES MELLITUS WITH UNSPECIFIED DIABETIC RETINOPATHY WITHOUT MACULAR EDEMA
E11321	TYPE 2 DIABETES MELLITUS WITH MILD NONPROLIFERATIVE DIABETIC RETINOPATHY WITH MACULAR EDEMA

Step 3b (Risk factors)	
Required quantity: 1 Look back timeframe: 730 days	
ICD-10 Code	Description
E11329	TYPE 2 DIABETES MELLITUS WITH MILD NONPROLIFERATIVE
	DIABETIC RETINOPATHY WITHOUT MACULAR EDEMA
E11331	TYPE 2 DIABETES MELLITUS WITH MODERATE NONPROLIFERATIVE DIABETIC RETINOPATHY WITH MACULAR EDEMA
E11339	TYPE 2 DIABETES MELLITUS WITH MODERATE NONPROLIFERATIVE
	DIABETIC RETINOPATHY WITHOUT MACULAR EDEMA
E11341	TYPE 2 DIABETES MELLITUS WITH SEVERE NONPROLIFERATIVE DIABETIC RETINOPATHY WITH MACULAR EDEMA
E11349	TYPE 2 DIABETES MELLITUS WITH SEVERE NONPROLIFERATIVE
	DIABETIC RETINOPATHY WITHOUT MACULAR EDEMA
E11351	TYPE 2 DIABETES MELLITUS WITH PROLIFERATIVE DIABETIC RETINOPATHY WITH MACULAR EDEMA
E11359	TYPE 2 DIABETES MELLITUS WITH PROLIFERATIVE DIABETIC
	RETINOPATHY WITHOUT MACULAR EDEMA
E1136	TYPE 2 DIABETES MELLITUS WITH DIABETIC CATARACT
E1139	TYPE 2 DIABETES MELLITUS WITH OTHER DIABETIC OPHTHALMIC COMPLICATION
E1140	TYPE 2 DIABETES MELLITUS WITH DIABETIC NEUROPATHY, UNSPECIFIED
E1141	TYPE 2 DIABETES MELLITUS WITH DIABETIC MONONEUROPATHY
E1142	TYPE 2 DIABETES MELLITUS WITH DIABETIC POLYNEUROPATHY
E1143	TYPE 2 DIABETES MELLITUS WITH DIABETIC AUTONOMIC (POLY)NEUROPATHY
E1144	TYPE 2 DIABETES MELLITUS WITH DIABETIC AMYOTROPHY
E1149	TYPE 2 DIABETES MELLITUS WITH OTHER DIABETIC NEUROLOGICAL COMPLICATION
E1151	TYPE 2 DIABETES MELLITUS WITH DIABETIC PERIPHERAL ANGIOPATHY WITHOUT GANGRENE
E1152	TYPE 2 DIABETES MELLITUS WITH DIABETIC PERIPHERAL ANGIOPATHY WITH GANGRENE
E1159	TYPE 2 DIABETES MELLITUS WITH OTHER CIRCULATORY COMPLICATIONS
E11610	TYPE 2 DIABETES MELLITUS WITH DIABETIC NEUROPATHIC ARTHROPATHY
E11618	TYPE 2 DIABETES MELLITUS WITH OTHER DIABETIC ARTHROPATHY
E11620	TYPE 2 DIABETES MELLITUS WITH DIABETIC DERMATITIS
E11621	TYPE 2 DIABETES MELLITUS WITH FOOT ULCER
E11622	TYPE 2 DIABETES MELLITUS WITH OTHER SKIN ULCER
E11628	TYPE 2 DIABETES MELLITUS WITH OTHER SKIN COMPLICATIONS
E11630	TYPE 2 DIABETES MELLITUS WITH PERIODONTAL DISEASE
E11638	TYPE 2 DIABETES MELLITUS WITH OTHER ORAL COMPLICATIONS

Step 3b (Risk factors) Required quantity: 1	
	Look back timeframe: 730 days
ICD-10 Code	Description
E11641	TYPE 2 DIABETES MELLITUS WITH HYPOGLYCEMIA WITH COMA
E11649	TYPE 2 DIABETES MELLITUS WITH HYPOGLYCEMIA WITHOUT COMA
E1165	TYPE 2 DIABETES MELLITUS WITH HYPERGLYCEMIA
E1169	TYPE 2 DIABETES MELLITUS WITH OTHER SPECIFIED COMPLICATION
E118	TYPE 2 DIABETES MELLITUS WITH UNSPECIFIED COMPLICATIONS
E119	TYPE 2 DIABETES MELLITUS WITHOUT COMPLICATIONS
E7800	PURE HYPERCHOLESTEROLEMIA, UNSPECIFIED
E7801	FAMILIAL HYPERCHOLESTEROLEMIA
E782	MIXED HYPERLIPIDEMIA
E785	HYPERLIPIDEMIA, UNSPECIFIED
I10	ESSENTIAL (PRIMARY) HYPERTENSION
I1AO	RESISTANT HYPERTENSION

Step 4 (history of substance abuse)		
	Required quantity: 1	
	Look back timeframe: 365 days	
ICD-10 Code	Description	
F1010	ALCOHOL ABUSE UNCOMPLICATED	
F10120	ALCOHOL ABUSE WITH INTOXICATION UNCOMPLICATED	
F10121	ALCOHOL ABUSE WITH INTOXICATION DELIRIUM	
F10129	ALCOHOL ABUSE WITH INTOXICATION UNSPECIFIED	
F1014	ALCOHOL ABUSE WITH ALCOHOL-INDUCED MOOD DISORDER	
F10150	ALCOHOL ABUSE WITH ALCOHOL-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS	
F10151	ALCOHOL ABUSE WITH ALCOHOL-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS	
F10159	ALCOHOL ABUSE WITH ALCOHOL-INDUCED PSYCHOTIC DISORDER UNSPECIFIED	
F10180	ALCOHOL ABUSE WITH ALCOHOL-INDUCED ANXIETY DISORDER	
F10181	ALCOHOL ABUSE WITH ALCOHOL-INDUCED SEXUAL DYSFUNCTION	
F10182	ALCOHOL ABUSE WITH ALCOHOL-INDUCED SLEEP DISORDER	
F10188	ALCOHOL ABUSE WITH OTHER ALCOHOL-INDUCED DISORDER	
F1019	ALCOHOL ABUSE WITH UNSPECIFIED ALCOHOL-INDUCED DISORDER	
F1020	ALCOHOL DEPENDENCE UNCOMPLICATED	
F10220	ALCOHOL DEPENDENCE WITH INTOXICATION UNCOMPLICATED	
F10221	ALCOHOL DEPENDENCE WITH INTOXICATION DELIRIUM	

Step 4 (history of substance abuse) Required quantity: 1 Look back timeframe: 365 days	
ICD-10 Code	Description
F10229	ALCOHOL DEPENDENCE WITH INTOXICATION UNSPECIFIED
F10230	ALCOHOL DEPENDENCE WITH WITHDRAWAL UNCOMPLICATED
F10231	ALCOHOL DEPENDENCE WITH WITHDRAWAL DELIRIUM
F10232	ALCOHOL DEPENDENCE WITH WITHDRAWAL WITH PERCEPTUAL DISTURBANCE
F10239	ALCOHOL DEPENDENCE WITH WITHDRAWAL UNSPECIFIED
F1024	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED MOOD DISORDER
F10250	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F10251	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F10259	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F1026	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED PERSISTING AMNESTIC DISORDER
F1027	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED PERSISTING DEMENTIA
F10280	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED ANXIETY DISORDER
F10281	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED SEXUAL DYSFUNCTION
F10282	ALCOHOL DEPENDENCE WITH ALCOHOL-INDUCED SLEEP DISORDER
F10288	ALCOHOL DEPENDENCE WITH OTHER ALCOHOL-INDUCED DISORDER
F1029	ALCOHOL DEPENDENCE WITH UNSPECIFIED ALCOHOL-INDUCED DISORDER
F1110	OPIOID ABUSE UNCOMPLICATED
F11120	OPIOID ABUSE WITH INTOXICATION UNCOMPLICATED
F11121	OPIOID ABUSE WITH INTOXICATION DELIRIUM
F11122	OPIOID ABUSE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F11129	OPIOID ABUSE WITH INTOXICATION UNSPECIFIED
F1114	OPIOID ABUSE WITH OPIOID-INDUCED MOOD DISORDER
F11150	OPIOID ABUSE WITH OPIOID-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F11151	OPIOID ABUSE WITH OPIOID-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F11159	OPIOID ABUSE WITH OPIOID-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F11181	OPIOID ABUSE WITH OPIOID-INDUCED SEXUAL DYSFUNCTION
F11182	OPIOID ABUSE WITH OPIOID-INDUCED SLEEP DISORDER
F11188	OPIOID ABUSE WITH OTHER OPIOID-INDUCED DISORDER

	Step 4 (history of substance abuse)
Required quantity: 1	
	Look back timeframe: 365 days
ICD-10 Code	Description
F1119	OPIOID ABUSE WITH UNSPECIFIED OPIOID-INDUCED DISORDER
F1120	OPIOID DEPENDENCE, UNCOMPLICATED
F1121	OPIOID DEPENDENCE, IN REMISSION
F11220	OPIOID DEPENDENCE WITH INTOXICATION UNCOMPLICATED
F11221	OPIOID DEPENDENCE WITH INTOXICATION DELIRIUM
F11222	OPIOID DEPENDENCE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F11229	OPIOID DEPENDENCE WITH INTOXICATION UNSPECIFIED
F1123	OPIOID DEPENDENCE WITH WITHDRAWAL
F1124	OPIOID DEPENDENCE WITH OPIOID-INDUCED MOOD DISORDER
F11250	OPIOID DEPENDENCE WITH OPIOID-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F11251	OPIOID DEPENDENCE WITH OPIOID-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F11259	OPIOID DEPENDENCE WITH OPIOID-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F11281	OPIOID DEPENDENCE WITH OPIOID-INDUCED SEXUAL DYSFUNCTION
F11282	OPIOID DEPENDENCE WITH OPIOID-INDUCED SLEEP DISORDER
F11288	OPIOID DEPENDENCE WITH OTHER OPIOID-INDUCED DISORDER
F1129	OPIOID DEPENDENCE WITH UNSPECIFIED OPIOID-INDUCED DISORDER
F1210	CANNABIS ABUSE UNCOMPLICATED
F12120	CANNABIS ABUSE WITH INTOXICATION UNCOMPLICATED
F12121	CANNABIS ABUSE WITH INTOXICATION DELIRIUM
F12122	CANNABIS ABUSE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F12129	CANNABIS ABUSE WITH INTOXICATION UNSPECIFIED
F12150	CANNABIS ABUSE WITH PSYCHOTIC DISORDER WITH DELUSIONS
F12151	CANNABIS ABUSE WITH PSYCHOTIC DISORDER WITH HALLUCINATIONS
F12159	CANNABIS ABUSE WITH PSYCHOTIC DISORDER UNSPECIFIED
F12180	CANNABIS ABUSE WITH CANNABIS-INDUCED ANXIETY DISORDER
F12188	CANNABIS ABUSE WITH OTHER CANNABIS-INDUCED DISORDER
F1219	CANNABIS ABUSE WITH UNSPECIFIED CANNABIS-INDUCED DISORDER
F1220	CANNABIS DEPENDENCE, UNCOMPLICATED
F1221	CANNABIS DEPENDENCE, IN REMISSION
F12220	CANNABIS DEPENDENCE WITH INTOXICATION UNCOMPLICATED

Step 4 (history of substance abuse)	
Required quantity: 1	
ICD-10 Code	Look back timeframe: 365 days Description
F12221	CANNABIS DEPENDENCE WITH INTOXICATION DELIRIUM
F12222	CANNABIS DEPENDENCE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F12229	CANNABIS DEPENDENCE WITH INTOXICATION UNSPECIFIED
F12250	CANNABIS DEPENDENCE WITH PSYCHOTIC DISORDER WITH DELUSIONS
F12251	CANNABIS DEPENDENCE WITH PSYCHOTIC DISORDER WITH HALLUCINATIONS
F12259	CANNABIS DEPENDENCE WITH PSYCHOTIC DISORDER UNSPECIFIED
F12280	CANNABIS DEPENDENCE WITH CANNABIS-INDUCED ANXIETY DISORDER
F12288	CANNABIS DEPENDENCE WITH OTHER CANNABIS-INDUCED DISORDER
F1229	CANNABIS DEPENDENCE WITH UNSPECIFIED CANNABIS-INDUCED DISORDER
F1310	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE, UNCOMPLICATED
F13120	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH INTOXICATION UNCOMPLICATED
F13121	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH INTOXICATION DELIRIUM
F13129	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH INTOXICATION UNSPECIFIED
F1314	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED MOOD DISORDER
F13150	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F13151	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F13159	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F13180	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED ANXIETY DISORDER
F13181	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED SEXUAL DYSFUNCTION
F13182	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED SLEEP DISORDER
F13188	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH OTHER SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED DISORDER
F1319	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH UNSPECIFIED SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED DISORDER

	Step 4 (history of substance abuse)
Required quantity: 1	
	Look back timeframe: 365 days
ICD-10 Code	Description
F1320	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE UNCOMPLICATED
F1321	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE IN REMISSION
F13220	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH INTOXICATION UNCOMPLICATED
F13221	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH INTOXICATION DELIRIUM
F13229	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH INTOXICATION, UNSPECIFIED
F13230	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH WITHDRAWAL UNCOMPLICATED
F13231	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH WITHDRAWAL DELIRIUM
F13232	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH WITHDRAWAL WITH PERCEPTUAL DISTURBANCE
F13239	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH WITHDRAWAL UNSPECIFIED
F1324	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED MOOD DISORDER
F13250	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED PSYCHOTIC DISORDER UNCOMPLICATED
F13251	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F13259	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED PSYCHOTIC DISORDER, UNSPECIFIED
F1326	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED PERSISTING AMNESTIC DISORDER
F1327	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED PERSISTING DEMENTIA
F13280	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED ANXIETY DISORDER
F13281	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED SEXUAL DYSFUNCTION
F13282	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED SLEEP DISORDER
F13288	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH OTHER SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED DISORDER

Step 4 (history of substance abuse)	
Required quantity: 1	
	Look back timeframe: 365 days
ICD-10 Code	Description
F1329	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH UNSPECIFIED SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED DISORDER
F1410	COCAINE ABUSE UNCOMPLICATED
F14120	COCAINE ABUSE WITH INTOXICATION UNCOMPLICATED
F14121	COCAINE ABUSE WITH INTOXICATION WITH DELIRIUM
F14122	COCAINE ABUSE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F14129	COCAINE ABUSE WITH INTOXICATION UNSPECIFIED
F1414	COCAINE ABUSE WITH COCAINE-INDUCED MOOD DISORDER
F14150	COCAINE ABUSE WITH COCAINE-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F14151	COCAINE ABUSE WITH COCAINE-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F14159	COCAINE ABUSE WITH COCAINE-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F14180	COCAINE ABUSE WITH COCAINE-INDUCED ANXIETY DISORDER
F14181	COCAINE ABUSE WITH COCAINE-INDUCED SEXUAL DYSFUNCTION
F14182	COCAINE ABUSE WITH COCAINE-INDUCED SLEEP DISORDER
F14188	COCAINE ABUSE WITH OTHER COCAINE-INDUCED DISORDER
F1419	COCAINE ABUSE WITH UNSPECIFIED COCAINE-INDUCED DISORDER
F1420	COCAINE DEPENDENCE UNCOMPLICATED
F14220	COCAINE DEPENDENCE WITH INTOXICATION UNCOMPLICATED
F14221	COCAINE DEPENDENCE WITH INTOXICATION DELIRIUM
F14222	COCAINE DEPENDENCE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F14229	COCAINE DEPENDENCE WITH INTOXICATION UNSPECIFIED
F1423	COCAINE DEPENDENCE WITH WITHDRAWAL
F1424	COCAINE DEPENDENCE WITH COCAINE-INDUCED MOOD DISORDER
F14250	COCAINE DEPENDENCE WITH COCAINE-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F14251	COCAINE DEPENDENCE WITH COCAINE-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F14259	COCAINE DEPENDENCE WITH COCAINE-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F14280	COCAINE DEPENDENCE WITH COCAINE-INDUCED ANXIETY DISORDER
F14281	COCAINE DEPENDENCE WITH COCAINE-INDUCED SEXUAL DYSFUNCTION
F14282	COCAINE DEPENDENCE WITH COCAINE-INDUCED SLEEP DISORDER
F14288	COCAINE DEPENDENCE WITH OTHER COCAINE-INDUCED DISORDER

	Step 4 (history of substance abuse) Required quantity: 1
	Look back timeframe: 365 days
ICD-10 Code	Description
F1429	COCAINE DEPENDENCE WITH UNSPECIFIED COCAINE-INDUCED DISORDER
F1510	OTHER STIMULANT ABUSE UNCOMPLICATED
F15120	OTHER STIMULANT ABUSE WITH INTOXICATION UNCOMPLICATED
F15121	OTHER STIMULANT ABUSE WITH INTOXICATION DELIRIUM
F15122	OTHER STIMULANT ABUSE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F15129	OTHER STIMULANT ABUSE WITH INTOXICATION UNSPECIFIED
F1514	OTHER STIMULANT ABUSE WITH STIMULANT-INDUCED MOOD DISORDER
F15150	OTHER STIMULANT ABUSE WITH STIMULANT-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F15151	OTHER STIMULANT ABUSE WITH STIMULANT-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F15159	OTHER STIMULANT ABUSE WITH STIMULANT-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F15180	OTHER STIMULANT ABUSE WITH STIMULANT-INDUCED ANXIETY DISORDER
F15181	OTHER STIMULANT ABUSE WITH STIMULANT-INDUCED SEXUAL DYSFUNCTION
F15182	OTHER STIMULANT ABUSE WITH STIMULANT-INDUCED SLEEP DISORDER
F15188	OTHER STIMULANT ABUSE WITH OTHER STIMULANT-INDUCED DISORDER
F1519	OTHER STIMULANT ABUSE WITH UNSPECIFIED STIMULANT-INDUCED DISORDER
F1520	OTHER STIMULANT DEPENDENCE UNCOMPLICATED
F15220	OTHER STIMULANT DEPENDENCE WITH INTOXICATION UNCOMPLICATED
F15221	OTHER STIMULANT DEPENDENCE WITH INTOXICATION DELIRIUM
F15222	OTHER STIMULANT DEPENDENCE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F15229	OTHER STIMULANT DEPENDENCE WITH INTOXICATION UNSPECIFIED
F1523	OTHER STIMULANT DEPENDENCE WITH WITHDRAWAL
F1524	OTHER STIMULANT DEPENDENCE WITH STIMULANT-INDUCED MOOD DISORDER
F15250	OTHER STIMULANT DEPENDENCE WITH STIMULANT-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F15251	OTHER STIMULANT DEPENDENCE WITH STIMULANT-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F15259	OTHER STIMULANT DEPENDENCE WITH STIMULANT-INDUCED PSYCHOTIC DISORDER UNSPECIFIED

	Step 4 (history of substance abuse) Required quantity: 1
	Look back timeframe: 365 days
ICD-10 Code	Description
F15280	OTHER STIMULANT DEPENDENCE WITH STIMULANT-INDUCED ANXIETY DISORDER
F15281	OTHER STIMULANT DEPENDENCE WITH STIMULANT-INDUCED SEXUAL DYSFUNCTION
F15282	OTHER STIMULANT DEPENDENCE WITH STIMULANT-INDUCED SLEEP DISORDER
F15288	OTHER STIMULANT DEPENDENCE WITH OTHER STIMULANT-INDUCED DISORDER
F1529	OTHER STIMULANT DEPENDENCE WITH UNSPECIFIED STIMULANT- INDUCED DISORDER
F1610	HALLUCINOGEN ABUSE UNCOMPLICATED
F16120	HALLUCINOGEN ABUSE WITH INTOXICATION UNCOMPLICATED
F16121	HALLUCINOGEN ABUSE WITH INTOXICATION WITH DELIRIUM
F16122	HALLUCINOGEN ABUSE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F16129	HALLUCINOGEN ABUSE WITH INTOXICATION UNSPECIFIED
F1614	HALLUCINOGEN ABUSE WITH HALLUCINOGEN-INDUCED MOOD DISORDER
F16150	HALLUCINOGEN ABUSE WITH HALLUCINOGEN-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F16151	HALLUCINOGEN ABUSE WITH HALLUCINOGEN-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F16159	HALLUCINOGEN ABUSE WITH HALLUCINOGEN-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F16180	HALLUCINOGEN ABUSE WITH HALLUCINOGEN-INDUCED ANXIETY DISORDER
F16183	HALLUCINOGEN ABUSE WITH HALLUCINOGEN PERSISTING PERCEPTION DISORDER (FLASHBACKS)
F16188	HALLUCINOGEN ABUSE WITH OTHER HALLUCINOGEN-INDUCED DISORDER
F1619	HALLUCINOGEN ABUSE WITH UNSPECIFIED HALLUCINOGEN- INDUCED DISORDER
F1620	HALLUCINOGEN DEPENDENCE UNCOMPLICATED
F16220	HALLUCINOGEN DEPENDENCE WITH INTOXICATION UNCOMPLICATED
F16221	HALLUCINOGEN DEPENDENCE WITH INTOXICATION WITH DELIRIUM
F16229	HALLUCINOGEN DEPENDENCE WITH INTOXICATION UNSPECIFIED
F1624	HALLUCINOGEN DEPENDENCE WITH HALLUCINOGEN-INDUCED MOOD DISORDER
F16250	HALLUCINOGEN DEPENDENCE WITH HALLUCINOGEN-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F16251	HALLUCINOGEN DEPENDENCE WITH HALLUCINOGEN-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS

	Step 4 (history of substance abuse)
	Required quantity: 1 Look back timeframe: 365 days
ICD-10 Code	Description
F16259	HALLUCINOGEN DEPENDENCE WITH HALLUCINOGEN-INDUCED
	PSYCHOTIC DISORDER UNSPECIFIED
F16280	HALLUCINOGEN DEPENDENCE WITH HALLUCINOGEN-INDUCED ANXIETY DISORDER
F16283	HALLUCINOGEN DEPENDENCE WITH HALLUCINOGEN PERSISTING PERCEPTION DISORDER (FLASHBACKS)
F16288	HALLUCINOGEN DEPENDENCE WITH OTHER HALLUCINOGEN- INDUCED DISORDER
F1629	HALLUCINOGEN DEPENDENCE WITH UNSPECIFIED HALLUCINOGEN- INDUCED DISORDER
F1810	INHALANT ABUSE UNCOMPLICATED
F18120	INHALANT ABUSE WITH INTOXICATION UNCOMPLICATED
F18121	INHALANT ABUSE WITH INTOXICATION DELIRIUM
F18129	INHALANT ABUSE WITH INTOXICATION UNSPECIFIED
F1814	INHALANT ABUSE WITH INHALANT-INDUCED MOOD DISORDER
F18150	INHALANT ABUSE WITH INHALANT-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F18151	INHALANT ABUSE WITH INHALANT-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F18159	INHALANT ABUSE WITH INHALANT-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F1817	INHALANT ABUSE WITH INHALANT-INDUCED DEMENTIA
F18180	INHALANT ABUSE WITH INHALANT-INDUCED ANXIETY DISORDER
F18188	INHALANT ABUSE WITH OTHER INHALANT-INDUCED DISORDER
F1819	INHALANT ABUSE WITH UNSPECIFIED INHALANT-INDUCED DISORDER
F1820	INHALANT DEPENDENCE, UNCOMPLICATED
F18220	INHALANT DEPENDENCE WITH INTOXICATION UNCOMPLICATED
F18221	INHALANT DEPENDENCE WITH INTOXICATION DELIRIUM
F18229	INHALANT DEPENDENCE WITH INTOXICATION UNSPECIFIED
F1824	INHALANT DEPENDENCE WITH INHALANT-INDUCED MOOD DISORDER
F18250	INHALANT DEPENDENCE WITH INHALANT-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F18251	INHALANT DEPENDENCE WITH INHALANT-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F18259	INHALANT DEPENDENCE WITH INHALANT-INDUCED PSYCHOTIC DISORDER, UNSPECIFIED
F1827	INHALANT DEPENDENCE WITH INHALANT-INDUCED DEMENTIA
F18280	INHALANT DEPENDENCE WITH INHALANT-INDUCED ANXIETY DISORDER

	Step 4 (history of substance abuse)
	Required quantity: <i>1</i> Look back timeframe: <i>365 days</i>
ICD-10 Code	Description
F18288	INHALANT DEPENDENCE WITH OTHER INHALANT-INDUCED DISORDER
F1829	INHALANT DEPENDENCE WITH UNSPECIFIED INHALANT-INDUCED DISORDER
F1910	OTHER PSYCHOACTIVE SUBSTANCE ABUSE UNCOMPLICATED
F19120	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH INTOXICATION UNCOMPLICATED
F19121	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH INTOXICATION DELIRIUM
F19122	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCES
F19129	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH INTOXICATION UNSPECIFIED
F1914	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED MOOD DISORDER
F19150	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F19151	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F19159	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F1916	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PERSISTING AMNESTIC DISORDER
F1917	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PERSISTING DEMENTIA
F19180	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED ANXIETY DISORDER
F19181	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED SEXUAL DYSFUNCTION
F19182	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH PSYCHOACTIVE SUBSTANCE-INDUCED SLEEP DISORDER
F19188	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH OTHER PSYCHOACTIVE SUBSTANCE-INDUCED DISORDER
F1919	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH UNSPECIFIED PSYCHOACTIVE SUBSTANCE-INDUCED DISORDER
F1920	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE UNCOMPLICATED
F19220	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH INTOXICATION, UNCOMPLICATED
F19221	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH INTOXICATION DELIRIUM
F19222	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F19229	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH INTOXICATION UNSPECIFIED

Step 4 (history of substance abuse) Required quantity: 1	
Look back timeframe: 365 days	
ICD-10 Code	Description
F19230	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH WITHDRAWAL UNCOMPLICATED
F19231	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH WITHDRAWAL DELIRIUM
F19232	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH WITHDRAWAL WITH PERCEPTUAL DISTURBANCE
F19239	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH WITHDRAWAL UNSPECIFIED
F1924	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED MOOD DISORDER
F19250	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PSYCHOTIC DISORDER WITH DELUSIONS
F19251	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PSYCHOTIC DISORDER WITH HALLUCINATIONS
F19259	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PSYCHOTIC DISORDER UNSPECIFIED
F1926	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PERSISTING AMNESTIC DISORDER
F1927	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED PERSISTING DEMENTIA
F19280	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED ANXIETY DISORDER
F19281	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED SEXUAL DYSFUNCTION
F19282	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH PSYCHOACTIVE SUBSTANCE-INDUCED SLEEP DISORDER
F19288	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH OTHER PSYCHOACTIVE SUBSTANCE-INDUCED DISORDER
F1929	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH UNSPECIFIED PSYCHOACTIVE SUBSTANCE-INDUCED DISORDER

Step 5 (MAO inhibitor) Required number of claims: 1 Look back timeframe: 30 days	
GCN	Label Name
27081	AZILECT 0.5MG TABLET
24654	AZILECT 1MG TABLET
26614	EMSAM 12MG/24 HOURS PATCH
26612	EMSAM 6MG/24 HOURS PATCH
26613	EMSAM 9MG/24 HOURS PATCH
26870	LINEZOLID 600MG TABLET
26873	LINEZOLID 600MG/300ML IV SOLN
16416	MARPLAN 10MG TABLET
16417	NARDIL 15MG TABLET
16418	PARNATE 10MG TABLET
16417	PHENELZINE SULFATE 15MG TABLET
15603	SELEGILINE HCL 5MG CAPSULE
15600	SELEGILINE HCL 5MG TABLET
16418	TRANYLCYPROMINE 10MG TABLET
22783	ZELAPAR 1.25 MG ODT TABLET
26871	ZYVOX 100MG/5ML SUSPENSION
26870	ZYVOX 600MG TABLET
26873	ZYVOX 600MG/300ML IV SOLN

Step 6 (contraindicated diagnoses) Required quantity: 1 Look back timeframe: 365 days	
ICD-10 Code	Description
E0500	THYROTOXICOSIS WITH DIFFUSE GOITER, WITHOUT THYROTOXIC CRISIS OR STORM
E0501	THYROTOXICOSIS WITH DIFFUSE GOITER, WITH THYROTOXIC CRISIS OR STORM
E0510	THYROTOXICOSIS WITH TOXIC SINGLE THYROID NODULE, WITHOUT THYROTOXIC CRISIS OR STORM
E0511	THYROTOXICOSIS WITH TOXIC SINGLE THYROID NODULE, WITH THYROTOXIC CRISIS OR STORM
E0520	THYROTOXICOSIS WITH TOXIC MULTINODULAR GOITER, WITHOUT THYROTOXIC CRISIS OR STORM
E0521	THYROTOXICOSIS WITH TOXIC MULTINODULAR GOITER, WITH THYROTOXIC CRISIS OR STORM
E0530	THYROTOXICOSIS FROM ECTOPIC THYROID TISSUE, WITHOUT THYROTOXIC CRISIS OR STORM

Step 6 (contraindicated diagnoses)		
	Required quantity: 1	
	Look back timeframe: 365 days	
ICD-10 Code	Description	
E0531	THYROTOXICOSIS FROM ECTOPIC THYROID TISSUE, WITH THYROTOXIC CRISIS OR STORM	
E0540	THYROTOXICOSIS FACTITIAL, WITHOUT THYROTOXIC CRISIS OR STORM	
E0541	THYROTOXICOSIS FACTITIAL, WITH THYROTOXIC CRISIS OR STORM	
E0580	OTHER THYROTOXICOSIS, WITHOUT THYROTOXIC CRISIS OR STORM	
E0581	OTHER THYROTOXICOSIS, WITH THYROTOXIC CRISIS OR STORM	
E0590	THYROTOXICOSIS, UNSPECIFIED, WITHOUT THYROTOXIC CRISIS OR STORM	
E0591	THYROTOXICOSIS, UNSPECIFIED, WITH THYROTOXIC CRISIS OR STORM	
F410	PANIC DISORDER [EPISODIC PAROXYSMAL ANXIETY]	
F411	GENERALIZED ANXIETY DISORDER	
F413	OTHER MIXED ANXIETY DISORDERS	
F418	OTHER SPECIFIED ANXIETY DISORDERS	
F419	ANXIETY DISORDER, UNSPECIFIED	
G450	VERTEBRO-BASILAR ARTERY SYNDROME	
G451	CAROTID ARTERY SYNDROME (HEMISPHERIC)	
G452	MULTIPLE AND BILATERAL PRECEREBRAL ARTERY SYNDROMES	
G453	AMAUROSIS FUGAX	
G454	TRANSIENT GLOBAL AMNESIA	
G458	OTHER TRANSIENT CEREBRAL ISCHEMIC ATTACKS AND RELATED SYNDROMES	
G459	TRANSIENT CEREBRAL ISCHEMIC ATTACK, UNSPECIFIED	
H40001	PREGLAUCOMA, UNSPECIFIED RIGHT EYE	
H40002	PREGLAUCOMA, UNSPECIFIED LEFT EYE	
H40003	PREGLAUCOMA, UNSPECIFIED BILATERAL	
H40009	PREGLAUCOMA, UNSPECIFIED UNSPECIFIED EYE	
H40011	OPEN ANGLE WITH BORDERLINE FINDINGS, LOW RISK RIGHT EYE	
H40012	OPEN ANGLE WITH BORDERLINE FINDINGS, LOW RISK LEFT EYE	
H40013	OPEN ANGLE WITH BORDERLINE FINDINGS, LOW RISK BILATERAL	
H40019	OPEN ANGLE WITH BORDERLINE FINDINGS, LOW RISK UNSPECIFIED EYE	
H40021	OPEN ANGLE WITH BORDERLINE FINDINGS, HIGH RISK RIGHT EYE	
H40022	OPEN ANGLE WITH BORDERLINE FINDINGS, HIGH RISK LEFT EYE	
H40023	OPEN ANGLE WITH BORDERLINE FINDINGS, HIGH RISK BILATERAL	
H40029	OPEN ANGLE WITH BORDERLINE FINDINGS, HIGH RISK UNSPECIFIED EYE	

	Step 6 (contraindicated diagnoses)
	Required quantity: 1
ICD-10 Code	Look back timeframe: 365 days Description
H40031	ANATOMICAL NARROW ANGLE RIGHT EYE
H40032	ANATOMICAL NARROW ANGLE LEFT EYE
H40033	ANATOMICAL NARROW ANGLE BILATERAL
H40039	ANATOMICAL NARROW ANGLE UNSPECIFIED EYE
H40041	STEROID RESPONDER, RIGHT EYE
H40042	STEROID RESPONDER, LEFT EYE
H40043	STEROID RESPONDER
H40049	STEROID RESPONDER
H40051	OCULAR HYPERTENSION, RIGHT EYE
H40051	OCULAR HYPERTENSION, RIGHT EYE
H40052	OCULAR HYPERTENSION, LEFT EYE
H40052	OCULAR HYPERTENSION, LEFT EYE
H40053	OCULAR HYPERTENSION
H40053	OCULAR HYPERTENSION, BILATERAL
H40059	OCULAR HYPERTENSION
H40059	OCULAR HYPERTENSION, UNSPECIFIED EYE
H40061	PRIMARY ANGLE CLOSURE WITHOUT GLAUCOMA DAMAGE, RIGHT EYE
H40062	PRIMARY ANGLE CLOSURE WITHOUT GLAUCOMA DAMAGE, LEFT EYE
H40063	PRIMARY ANGLE CLOSURE WITHOUT GLAUCOMA DAMAGE, BILATERAL
H40069	PRIMARY ANGLE CLOSURE WITHOUT GLAUCOMA DAMAGE, UNSPECIFIED EYE
H4010X0	UNSPECIFIED OPEN-ANGLE GLAUCOMA, STAGE UNSPECIFIED
H4010X1	UNSPECIFIED OPEN-ANGLE GLAUCOMA, MILD STAGE
H4010X2	UNSPECIFIED OPEN-ANGLE GLAUCOMA, MODERATE STAGE
H4010X3	UNSPECIFIED OPEN-ANGLE GLAUCOMA, SEVERE STAGE
H4010X4	UNSPECIFIED OPEN-ANGLE GLAUCOMA, INDETERMINATE STAGE
H401110	PRIMARY OPEN-ANGLE GLAUCOMA, RIGHT EYE, STAGE UNSPECIFIED
H401111	PRIMARY OPEN-ANGLE GLAUCOMA, RIGHT EYE, MILD STAGE
H401112	PRIMARY OPEN-ANGLE GLAUCOMA, RIGHT EYE, MODERATE STAGE
H401113	PRIMARY OPEN-ANGLE GLAUCOMA, RIGHT EYE, SEVERE STAGE
H401114	PRIMARY OPEN-ANGLE GLAUCOMA, RIGHT EYE, INDETERMINATE STAGE
H401120	PRIMARY OPEN-ANGLE GLAUCOMA, LEFT EYE, STAGE UNSPECIFIED
H401121	PRIMARY OPEN-ANGLE GLAUCOMA, LEFT EYE, MILD STAGE
H401122	PRIMARY OPEN-ANGLE GLAUCOMA, LEFT EYE, MODERATE STAGE
H401123	PRIMARY OPEN-ANGLE GLAUCOMA, LEFT EYE, SEVERE STAGE

	Step 6 (contraindicated diagnoses)
	Required quantity: 1
	Look back timeframe: 365 days
ICD-10 Code	Description
H401124	PRIMARY OPEN-ANGLE GLAUCOMA, LEFT EYE, INDETERMINATE STAGE
H401130	PRIMARY OPEN-ANGLE GLAUCOMA, BILATERAL, STAGE UNSPECIFIED
H401131	PRIMARY OPEN-ANGLE GLAUCOMA, BILATERAL, MILD STAGE
H401132	PRIMARY OPEN-ANGLE GLAUCOMA, BILATERAL, MODERATE STAGE
H401133	PRIMARY OPEN-ANGLE GLAUCOMA, BILATERAL, SEVERE STAGE
H401134	PRIMARY OPEN-ANGLE GLAUCOMA, BILATERAL, INDETERMINATE STAGE
H401190	PRIMARY OPEN-ANGLE GLAUCOMA, UNSPECIFIED EYE, STAGE UNSPECIFIED
H401191	PRIMARY OPEN-ANGLE GLAUCOMA, UNSPECIFIED EYE, MILD STAGE
H401192	PRIMARY OPEN-ANGLE GLAUCOMA, UNSPECIFIED EYE, MODERATE STAGE
H401193	PRIMARY OPEN-ANGLE GLAUCOMA, UNSPECIFIED EYE, SEVERE STAGE
H401194	PRIMARY OPEN-ANGLE GLAUCOMA, UNSPECIFIED EYE, INDETERMINATE STAGE
H401210	LOW-TENSION GLAUCOMA, RIGHT EYE, STAGE UNSPECIFIED
H401211	LOW-TENSION GLAUCOMA, RIGHT EYE, MILD STAGE
H401212	LOW-TENSION GLAUCOMA, RIGHT EYE, MODERATE STAGE
H401213	LOW-TENSION GLAUCOMA, RIGHT EYE, SEVERE STAGE
H401214	LOW-TENSION GLAUCOMA, RIGHT EYE, INDETERMINATE STAGE
H401220	LOW-TENSION GLAUCOMA, LEFT EYE, STAGE UNSPECIFIED
H401221	LOW-TENSION GLAUCOMA, LEFT EYE, MILD STAGE
H401222	LOW-TENSION GLAUCOMA, LEFT EYE, MODERATE STAGE
H401223	LOW-TENSION GLAUCOMA, LEFT EYE, SEVERE STAGE
H401224	LOW-TENSION GLAUCOMA, LEFT EYE, INDETERMINATE STAGE
H401230	LOW-TENSION GLAUCOMA, BILATERAL, STAGE UNSPECIFIED
H401231	LOW-TENSION GLAUCOMA, BILATERAL, MILD STAGE
H401232	LOW-TENSION GLAUCOMA, BILATERAL, MODERATE STAGE
H401233	LOW-TENSION GLAUCOMA, BILATERAL, SEVERE STAGE
H401234	LOW-TENSION GLAUCOMA, BILATERAL, INDETERMINATE STAGE
H401290	LOW-TENSION GLAUCOMA, UNSPECIFIED EYE, STAGE UNSPECIFIED
H401291	LOW-TENSION GLAUCOMA, UNSPECIFIED EYE, MILD STAGE
H401292	LOW-TENSION GLAUCOMA, UNSPECIFIED EYE, MODERATE STAGE
H401293	LOW-TENSION GLAUCOMA, UNSPECIFIED EYE, SEVERE STAGE
H401294	LOW-TENSION GLAUCOMA, UNSPECIFIED EYE, INDETERMINATE STAGE
H401310	PIGMENTARY GLAUCOMA, RIGHT EYE, STAGE UNSPECIFIED
H401311	PIGMENTARY GLAUCOMA, RIGHT EYE, MILD STAGE

Step 6 (contraindicated diagnoses) Required quantity: 1	
	Look back timeframe: 365 days
ICD-10 Code	Description
H401312	PIGMENTARY GLAUCOMA, RIGHT EYE, MODERATE STAGE
H401313	PIGMENTARY GLAUCOMA, RIGHT EYE, SEVERE STAGE
H401314	PIGMENTARY GLAUCOMA, RIGHT EYE, INDETERMINATE STAGE
H401320	PIGMENTARY GLAUCOMA, LEFT EYE, STAGE UNSPECIFIED
H401321	PIGMENTARY GLAUCOMA, LEFT EYE, MILD STAGE
H401322	PIGMENTARY GLAUCOMA, LEFT EYE, MODERATE STAGE
H401323	PIGMENTARY GLAUCOMA, LEFT EYE, SEVERE STAGE
H401324	PIGMENTARY GLAUCOMA, LEFT EYE, INDETERMINATE STAGE
H401330	PIGMENTARY GLAUCOMA, BILATERAL, STAGE UNSPECIFIED
H401331	PIGMENTARY GLAUCOMA, BILATERAL, MILD STAGE
H401332	PIGMENTARY GLAUCOMA, BILATERAL, MODERATE STAGE
H401333	PIGMENTARY GLAUCOMA, BILATERAL, SEVERE STAGE
H401334	PIGMENTARY GLAUCOMA, BILATERAL, INDETERMINATE STAGE
H401390	PIGMENTARY GLAUCOMA, UNSPECIFIED EYE, STAGE UNSPECIFIED
H401391	PIGMENTARY GLAUCOMA, UNSPECIFIED EYE, MILD STAGE
H401392	PIGMENTARY GLAUCOMA, UNSPECIFIED EYE, MODERATE STAGE
H401393	PIGMENTARY GLAUCOMA, UNSPECIFIED EYE, SEVERE STAGE
H401394	PIGMENTARY GLAUCOMA, UNSPECIFIED EYE, INDETERMINATE STAGE
H401410	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, RIGHT EYE, STAGE UNSPECIFIED
H401411	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, RIGHT EYE, MILD STAGE
H401412	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, RIGHT EYE, MODERATE STAGE
H401413	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, RIGHT EYE, SEVERE STAGE
H401414	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, RIGHT EYE, INDETERMINATE STAGE
H401420	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, LEFT EYE, STAGE UNSPECIFIED
H401421	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, LEFT EYE, MILD STAGE
H401422	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, LEFT EYE, MODERATE STAGE
H401423	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, LEFT EYE, SEVERE STAGE
H401424	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, LEFT EYE, INDETERMINATE STAGE
H401430	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, BILATERAL, STAGE UNSPECIFIED

	Step 6 (contraindicated diagnoses)
	Required quantity: <i>1</i> Look back timeframe: <i>365 days</i>
ICD-10 Code	Description
H401431	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, BILATERAL, MILD STAGE
H401432	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, BILATERAL, MODERATE STAGE
H401433	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, BILATERAL, SEVERE STAGE
H401434	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, BILATERAL, INDETERMINATE STAGE
H401490	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, UNSPECIFIED EYE, STAGE UNSPECIFIED
H401491	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, UNSPECIFIED EYE, MILD STAGE
H401492	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, UNSPECIFIED EYE, MODERATE STAGE
H401493	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, UNSPECIFIED EYE, SEVERE STAGE
H401494	CAPSULAR GLAUCOMA WITH PSEUDOEXFOLIATION OF LENS, UNSPECIFIED EYE, INDETERMINATE STAGE
H40151	RESIDUAL STAGE OF OPEN-ANGLE GLAUCOMA, RIGHT EYE
H40152	RESIDUAL STAGE OF OPEN-ANGLE GLAUCOMA, LEFT EYE
H40153	RESIDUAL STAGE OF OPEN-ANGLE GLAUCOMA, BILATERAL
H40159	RESIDUAL STAGE OF OPEN-ANGLE GLAUCOMA, UNSPECIFIED EYE
H4020X0	UNSPECIFIED PRIMARY ANGLE-CLOSURE GLAUCOMA, STAGE UNSPECIFIED
H4020X1	UNSPECIFIED PRIMARY ANGLE-CLOSURE GLAUCOMA, MILD STAGE
H4020X2	UNSPECIFIED PRIMARY ANGLE-CLOSURE GLAUCOMA, MODERATE STAGE
H4020X3	UNSPECIFIED PRIMARY ANGLE-CLOSURE GLAUCOMA, SEVERE STAGE
H4020X4	UNSPECIFIED PRIMARY ANGLE-CLOSURE GLAUCOMA, INDETERMINATE STAGE
H40211	ACUTE ANGLE-CLOSURE GLAUCOMA, RIGHT EYE
H40212	ACUTE ANGLE-CLOSURE GLAUCOMA, LEFT EYE
H40213	ACUTE ANGLE-CLOSURE GLAUCOMA, BILATERAL
H40219	ACUTE ANGLE-CLOSURE GLAUCOMA, UNSPECIFIED EYE
H402210	CHRONIC ANGLE-CLOSURE GLAUCOMA, RIGHT EYE, STAGE UNSPECIFIED
H402211	CHRONIC ANGLE-CLOSURE GLAUCOMA, RIGHT EYE, MILD STAGE
H402212	CHRONIC ANGLE-CLOSURE GLAUCOMA, RIGHT EYE, MODERATE STAGE
H402213	CHRONIC ANGLE-CLOSURE GLAUCOMA, RIGHT EYE, SEVERE STAGE
H402214	CHRONIC ANGLE-CLOSURE GLAUCOMA, RIGHT EYE, INDETERMINATE STAGE

Step 6 (contraindicated diagnoses) Required quantity: 1	
	Look back timeframe: 365 days
ICD-10 Code	Description
H402220	CHRONIC ANGLE-CLOSURE GLAUCOMA, LEFT EYE, STAGE UNSPECIFIED
H402221	CHRONIC ANGLE-CLOSURE GLAUCOMA, LEFT EYE, MILD STAGE
H402222	CHRONIC ANGLE-CLOSURE GLAUCOMA, LEFT EYE, MODERATE STAGE
H402223	CHRONIC ANGLE-CLOSURE GLAUCOMA, LEFT EYE, SEVERE STAGE
H402224	CHRONIC ANGLE-CLOSURE GLAUCOMA, LEFT EYE, INDETERMINATE STAGE
H402230	CHRONIC ANGLE-CLOSURE GLAUCOMA, BILATERAL, STAGE UNSPECIFIED
H402231	CHRONIC ANGLE-CLOSURE GLAUCOMA, BILATERAL, MILD STAGE
H402232	CHRONIC ANGLE-CLOSURE GLAUCOMA, BILATERAL, MODERATE STAGE
H402233	CHRONIC ANGLE-CLOSURE GLAUCOMA, BILATERAL, SEVERE STAGE
H402234	CHRONIC ANGLE-CLOSURE GLAUCOMA, BILATERAL, INDETERMINATE STAGE
H402290	CHRONIC ANGLE-CLOSURE GLAUCOMA, UNSPECIFIED EYE, STAGE UNSPECIFIED
H402291	CHRONIC ANGLE-CLOSURE GLAUCOMA, UNSPECIFIED EYE, MILD STAGE
H402292	CHRONIC ANGLE-CLOSURE GLAUCOMA, UNSPECIFIED EYE, MODERATE STAGE
H402293	CHRONIC ANGLE-CLOSURE GLAUCOMA, UNSPECIFIED EYE, SEVERE STAGE
H402294	CHRONIC ANGLE-CLOSURE GLAUCOMA, UNSPECIFIED EYE, INDETERMINATE STAGE
H40231	INTERMITTENT ANGLE-CLOSURE GLAUCOMA, RIGHT EYE
H40232	INTERMITTENT ANGLE-CLOSURE GLAUCOMA, LEFT EYE
H40233	INTERMITTENT ANGLE-CLOSURE GLAUCOMA, BILATERAL
H40239	INTERMITTENT ANGLE-CLOSURE GLAUCOMA, UNSPECIFIED EYE
H40241	RESIDUAL STAGE OF ANGLE-CLOSURE GLAUCOMA, RIGHT EYE
H40242	RESIDUAL STAGE OF ANGLE-CLOSURE GLAUCOMA, LEFT EYE
H40243	RESIDUAL STAGE OF ANGLE-CLOSURE GLAUCOMA, BILATERAL
H40249	RESIDUAL STAGE OF ANGLE-CLOSURE GLAUCOMA, UNSPECIFIED EYE
H4030X0	GLAUCOMA SECONDARY TO EYE TRAUMA, UNSPECIFIED EYE, STAGE UNSPECIFIED
H4030X1	GLAUCOMA SECONDARY TO EYE TRAUMA, UNSPECIFIED EYE, MILD STAGE
H4030X2	GLAUCOMA SECONDARY TO EYE TRAUMA, UNSPECIFIED EYE, MODERATE STAGE
H4030X3	GLAUCOMA SECONDARY TO EYE TRAUMA, UNSPECIFIED EYE, SEVERE STAGE

	Step 6 (contraindicated diagnoses)
Required quantity: 1	
ICD-10 Code	Look back timeframe: 365 days Description
10D-10 Code	GLAUCOMA SECONDARY TO EYE TRAUMA, UNSPECIFIED EYE,
H4030X4	INDETERMINATE STAGE
H4031X0	GLAUCOMA SECONDARY TO EYE TRAUMA, RIGHT EYE, STAGE UNSPECIFIED
H4031X1	GLAUCOMA SECONDARY TO EYE TRAUMA, RIGHT EYE, MILD STAGE
H4031X2	GLAUCOMA SECONDARY TO EYE TRAUMA, RIGHT EYE, MODERATE STAGE
H4031X3	GLAUCOMA SECONDARY TO EYE TRAUMA, RIGHT EYE, SEVERE STAGE
H4031X4	GLAUCOMA SECONDARY TO EYE TRAUMA, RIGHT EYE, INDETERMINATE STAGE
H4032X0	GLAUCOMA SECONDARY TO EYE TRAUMA, LEFT EYE, STAGE UNSPECIFIED
H4032X1	GLAUCOMA SECONDARY TO EYE TRAUMA, LEFT EYE, MILD STAGE
H4032X2	GLAUCOMA SECONDARY TO EYE TRAUMA, LEFT EYE, MODERATE STAGE
H4032X3	GLAUCOMA SECONDARY TO EYE TRAUMA, LEFT EYE, SEVERE STAGE
H4032X4	GLAUCOMA SECONDARY TO EYE TRAUMA, LEFT EYE, INDETERMINATE STAGE
H4033X0	GLAUCOMA SECONDARY TO EYE TRAUMA, BILATERAL, STAGE UNSPECIFIED
H4033X1	GLAUCOMA SECONDARY TO EYE TRAUMA, BILATERAL, MILD STAGE
H4033X2	GLAUCOMA SECONDARY TO EYE TRAUMA, BILATERAL, MODERATE STAGE
H4033X3	GLAUCOMA SECONDARY TO EYE TRAUMA, BILATERAL, SEVERE STAGE
H4033X4	GLAUCOMA SECONDARY TO EYE TRAUMA, BILATERAL, INDETERMINATE STAGE
H4040X0	GLAUCOMA SECONDARY TO EYE INFLAMMATION, UNSPECIFIED EYE, STAGE UNSPECIFIED
H4040X1	GLAUCOMA SECONDARY TO EYE INFLAMMATION, UNSPECIFIED EYE, MILD STAGE
H4040X2	GLAUCOMA SECONDARY TO EYE INFLAMMATION, UNSPECIFIED EYE, MODERATE STAGE
H4040X3	GLAUCOMA SECONDARY TO EYE INFLAMMATION, UNSPECIFIED EYE, SEVERE STAGE
H4040X4	GLAUCOMA SECONDARY TO EYE INFLAMMATION, UNSPECIFIED EYE, INDETERMINATE STAGE
H4041X0	GLAUCOMA SECONDARY TO EYE INFLAMMATION, RIGHT EYE, STAGE UNSPECIFIED
H4041X1	GLAUCOMA SECONDARY TO EYE INFLAMMATION, RIGHT EYE, MILD STAGE
H4041X2	GLAUCOMA SECONDARY TO EYE INFLAMMATION, RIGHT EYE, MODERATE STAGE

Step 6 (contraindicated diagnoses)	
Required quantity: 1 Look back timeframe: 365 days	
ICD-10 Code	Description
H4041X3	GLAUCOMA SECONDARY TO EYE INFLAMMATION, RIGHT EYE, SEVERE STAGE
H4041X4	GLAUCOMA SECONDARY TO EYE INFLAMMATION, RIGHT EYE, INDETERMINATE STAGE
H4042X0	GLAUCOMA SECONDARY TO EYE INFLAMMATION, LEFT EYE, STAGE UNSPECIFIED
H4042X1	GLAUCOMA SECONDARY TO EYE INFLAMMATION, LEFT EYE, MILD STAGE
H4042X2	GLAUCOMA SECONDARY TO EYE INFLAMMATION, LEFT EYE, MODERATE STAGE
H4042X3	GLAUCOMA SECONDARY TO EYE INFLAMMATION, LEFT EYE, SEVERE STAGE
H4042X4	GLAUCOMA SECONDARY TO EYE INFLAMMATION, LEFT EYE, INDETERMINATE STAGE
H4043X0	GLAUCOMA SECONDARY TO EYE INFLAMMATION, BILATERAL, STAGE UNSPECIFIED
H4043X1	GLAUCOMA SECONDARY TO EYE INFLAMMATION, BILATERAL, MILD STAGE
H4043X2	GLAUCOMA SECONDARY TO EYE INFLAMMATION, BILATERAL, MODERATE STAGE
H4043X3	GLAUCOMA SECONDARY TO EYE INFLAMMATION, BILATERAL, SEVERE STAGE
H4043X4	GLAUCOMA SECONDARY TO EYE INFLAMMATION, BILATERAL, INDETERMINATE STAGE
H4050X0	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, UNSPECIFIED EYE, STAGE UNSPECIFIED
H4050X1	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, UNSPECIFIED EYE, MILD STAGE
H4050X2	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, UNSPECIFIED EYE, MODERATE STAGE
H4050X3	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, UNSPECIFIED EYE, SEVERE STAGE
H4050X4	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, UNSPECIFIED EYE, INDETERMINATE STAGE
H4051X0	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, RIGHT EYE, STAGE UNSPECIFIED
H4051X1	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, RIGHT EYE, MILD STAGE
H4051X2	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, RIGHT EYE, MODERATE STAGE
H4051X3	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, RIGHT EYE, SEVERE STAGE
H4051X4	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, RIGHT EYE, INDETERMINATE STAGE

	Step 6 (contraindicated diagnoses)
Required quantity: 1	
Look back timeframe: 365 days	
ICD-10 Code	Description
H4052X0	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, LEFT EYE, STAGE UNSPECIFIED
H4052X1	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, LEFT EYE, MILD STAGE
H4052X2	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, LEFT EYE, MODERATE STAGE
H4052X3	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, LEFT EYE, SEVERE STAGE
H4052X4	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, LEFT EYE, INDETERMINATE STAGE
H4053X0	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, BILATERAL, STAGE UNSPECIFIED
H4053X1	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, BILATERAL, MILD STAGE
H4053X2	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, BILATERAL, MODERATE STAGE
H4053X3	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, BILATERAL, SEVERE STAGE
H4053X4	GLAUCOMA SECONDARY TO OTHER EYE DISORDERS, BILATERAL, INDETERMINATE STAGE
H4060X0	GLAUCOMA SECONDARY TO DRUGS, UNSPECIFIED EYE, STAGE UNSPECIFIED
H4060X1	GLAUCOMA SECONDARY TO DRUGS, UNSPECIFIED EYE, MILD STAGE
H4060X2	GLAUCOMA SECONDARY TO DRUGS, UNSPECIFIED EYE, MODERATE STAGE
H4060X3	GLAUCOMA SECONDARY TO DRUGS, UNSPECIFIED EYE, SEVERE STAGE
H4060X4	GLAUCOMA SECONDARY TO DRUGS, UNSPECIFIED EYE, INDETERMINATE STAGE
H4061X0	GLAUCOMA SECONDARY TO DRUGS, RIGHT EYE, STAGE UNSPECIFIED
H4061X1	GLAUCOMA SECONDARY TO DRUGS, RIGHT EYE, MILD STAGE
H4061X2	GLAUCOMA SECONDARY TO DRUGS, RIGHT EYE, MODERATE STAGE
H4061X3	GLAUCOMA SECONDARY TO DRUGS, RIGHT EYE, SEVERE STAGE
H4061X4	GLAUCOMA SECONDARY TO DRUGS, RIGHT EYE, INDETERMINATE STAGE
H4062X0	GLAUCOMA SECONDARY TO DRUGS, LEFT EYE, STAGE UNSPECIFIED
H4062X1	GLAUCOMA SECONDARY TO DRUGS, LEFT EYE, MILD STAGE
H4062X2	GLAUCOMA SECONDARY TO DRUGS, LEFT EYE, MODERATE STAGE
H4062X3	GLAUCOMA SECONDARY TO DRUGS, LEFT EYE, SEVERE STAGE
H4062X4	GLAUCOMA SECONDARY TO DRUGS, LEFT EYE, INDETERMINATE STAGE
H4063X0	GLAUCOMA SECONDARY TO DRUGS, BILATERAL, STAGE UNSPECIFIED

Step 6 (contraindicated diagnoses) Required quantity: 1	
Look back timeframe: 365 days	
ICD-10 Code	Description
H4063X1	GLAUCOMA SECONDARY TO DRUGS, BILATERAL, MILD STAGE
H4063X2	GLAUCOMA SECONDARY TO DRUGS, BILATERAL, MODERATE STAGE
H4063X3	GLAUCOMA SECONDARY TO DRUGS, BILATERAL, SEVERE STAGE
H4063X4	GLAUCOMA SECONDARY TO DRUGS, BILATERAL, INDETERMINATE STAGE
H40811	GLAUCOMA WITH INCREASED EPISCLERAL VENOUS PRESSURE, RIGHT EYE
H40812	GLAUCOMA WITH INCREASED EPISCLERAL VENOUS PRESSURE, LEFT EYE
H40813	GLAUCOMA WITH INCREASED EPISCLERAL VENOUS PRESSURE, BILATERAL
H40819	GLAUCOMA WITH INCREASED EPISCLERAL VENOUS PRESSURE, UNSPECIFIED EYE
H40821	HYPERSECRETION GLAUCOMA, RIGHT EYE
H40822	HYPERSECRETION GLAUCOMA, LEFT EYE
H40823	HYPERSECRETION GLAUCOMA, BILATERAL
H40829	HYPERSECRETION GLAUCOMA, UNSPECIFIED EYE
H40831	AQUEOUS MISDIRECTION, RIGHT EYE
H40832	AQUEOUS MISDIRECTION, LEFT EYE
H40833	AQUEOUS MISDIRECTION, BILATERAL
H40839	AQUEOUS MISDIRECTION, UNSPECIFIED EYE
H4089	OTHER SPECIFIED GLAUCOMA
H409	UNSPECIFIED GLAUCOMA
H42	GLAUCOMA IN DISEASES CLASSIFIED ELSEWHERE
I200	UNSTABLE ANGINA
I2101	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING LEFT MAIN CORONARY ARTERY
I2102	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING LEFT ANTERIOR DESCENDING CORONARY ARTERY
I2109	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING OTHER CORONARY ARTERY OF ANTERIOR WALL
I2111	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING RIGHT CORONARY ARTERY
I2119	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING OTHER CORONARY ARTERY OF INFERIOR WALL
I2121	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING LEFT CIRCUMFLEX CORONARY ARTERY
I2129	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION INVOLVING OTHER SITES
I213	ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF UNSPECIFIED SITE

Step 6 (contraindicated diagnoses) Required quantity: 1 Look back timeframe: 365 days	
ICD-10 Code	Description
I214	NON-ST ELEVATION (NSTEMI) MYOCARDIAL INFARCTION
1240	ACUTE CORONARY THROMBOSIS NOT RESULTING IN MYOCARDIAL INFARCTION
I248	OTHER FORMS OF ACUTE ISCHEMIC HEART DISEASE
I4901	VENTRICULAR FIBRILLATION
I4902	VENTRICULAR FLUTTER
I491	ATRIAL PREMATURE DEPOLARIZATION
I492	JUNCTIONAL PREMATURE DEPOLARIZATION
I493	VENTRICULAR PREMATURE DEPOLARIZATION
I4940	UNSPECIFIED PREMATURE DEPOLARIZATION
I4949	OTHER PREMATURE DEPOLARIZATION
I495	SICK SINUS SYNDROME
I498	OTHER SPECIFIED CARDIAC ARRHYTHMIAS
I499	CARDIAC ARRHYTHMIA, UNSPECIFIED
1501	LEFT VENTRICULAR FAILURE, UNSPECIFIED
15020	UNSPECIFIED SYSTOLIC (CONGESTIVE) HEART FAILURE
I5021	ACUTE SYSTOLIC (CONGESTIVE) HEART FAILURE
15022	CHRONIC SYSTOLIC (CONGESTIVE) HEART FAILURE
I5023	ACUTE ON CHRONIC SYSTOLIC (CONGESTIVE) HEART FAILURE
15030	UNSPECIFIED DIASTOLIC (CONGESTIVE) HEART FAILURE
I5031	ACUTE DIASTOLIC (CONGESTIVE) HEART FAILURE
15032	CHRONIC DIASTOLIC (CONGESTIVE) HEART FAILURE
I5033	ACUTE ON CHRONIC DIASTOLIC (CONGESTIVE) HEART FAILURE
15040	UNSPECIFIED COMBINED SYSTOLIC (CONGESTIVE) AND DIASTOLIC (CONGESTIVE) HEART FAILURE
15041	ACUTE COMBINED SYSTOLIC (CONGESTIVE) AND DIASTOLIC (CONGESTIVE) HEART FAILURE
15042	CHRONIC COMBINED SYSTOLIC (CONGESTIVE) AND DIASTOLIC (CONGESTIVE) HEART FAILURE
15043	ACUTE ON CHRONIC COMBINED SYSTOLIC (CONGESTIVE) AND DIASTOLIC (CONGESTIVE) HEART FAILURE
I50810	RIGHT HEART FAILURE UNSPECIFIED
I50811	ACUTE RIGHT HEART FAILURE
I50812	CHRONIC RIGHT HEART FAILURE
I50813	ACUTE ON CHRONIC RIGHT HEART FAILURE
I50814	RIGHT HEART FAILURE DUE TO LEFT HEART FAILURE
I5082	BIVENTRICULAR HEART FAILURE
15083	HIGH OUTPUT HEART FAILURE

	Step 6 (contraindicated diagnoses) Required quantity: 1 Look back timeframe: 365 days
ICD-10 Code	Description
15084	END STAGE HEART FAILURE
15089	OTHER HEART FAILURE
1509	HEART FAILURE, UNSPECIFIED
I63011	CEREBRAL INFARCTION DUE TO THROMBOSIS OF RIGHT VERTEBRAL ARTERY
I63012	CEREBRAL INFARCTION DUE TO THROMBOSIS OF LEFT VERTEBRAL ARTERY
I63019	CEREBRAL INFARCTION DUE TO THROMBOSIS OF UNSPECIFIED VERTEBRAL ARTERY
16302	CEREBRAL INFARCTION DUE TO THROMBOSIS OF BASILAR ARTERY
163031	CEREBRAL INFARCTION DUE TO THROMBOSIS OF RIGHT CAROTID ARTERY
163032	CEREBRAL INFARCTION DUE TO THROMBOSIS OF LEFT CAROTID ARTERY
163039	CEREBRAL INFARCTION DUE TO THROMBOSIS OF UNSPECIFIED CAROTID ARTERY
16309	CEREBRAL INFARCTION DUE TO THROMBOSIS OF OTHER PRECEREBRAL ARTERY
I6310	CEREBRAL INFARCTION DUE TO EMBOLISM OF UNSPECIFIED PRECEREBRAL ARTERY
I63111	CEREBRAL INFARCTION DUE TO EMBOLISM OF RIGHT VERTEBRAL ARTERY
I63112	CEREBRAL INFARCTION DUE TO EMBOLISM OF LEFT VERTEBRAL ARTERY
I63119	CEREBRAL INFARCTION DUE TO EMBOLISM OF UNSPECIFIED VERTEBRAL ARTERY
16320	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF UNSPECIFIED PRECEREBRAL ARTERIES
I63211	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF RIGHT VERTEBRAL ARTERIES
I63212	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF LEFT VERTEBRAL ARTERIES
I63219	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF UNSPECIFIED VERTEBRAL ARTERIES
16322	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF BASILAR ARTERIES
I63231	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF RIGHT CAROTID ARTERIES
163232	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF LEFT CAROTID ARTERIES
163239	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF UNSPECIFIED CAROTID ARTERIES

	Step 6 (contraindicated diagnoses)
Required quantity: 1	
ICD-10 Code	Look back timeframe: 365 days Description
16329	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF OTHER PRECEREBRAL ARTERIES
16330	CEREBRAL INFARCTION DUE TO THROMBOSIS OF UNSPECIFIED CEREBRAL ARTERY
I63311	CEREBRAL INFARCTION DUE TO THROMBOSIS OF RIGHT MIDDLE CEREBRAL ARTERY
I63312	CEREBRAL INFARCTION DUE TO THROMBOSIS OF LEFT MIDDLE CEREBRAL ARTERY
I63319	CEREBRAL INFARCTION DUE TO THROMBOSIS OF UNSPECIFIED MIDDLE CEREBRAL ARTERY
I63321	CEREBRAL INFARCTION DUE TO THROMBOSIS OF RIGHT ANTERIOR CEREBRAL ARTERY
163322	CEREBRAL INFARCTION DUE TO THROMBOSIS OF LEFT ANTERIOR CEREBRAL ARTERY
163329	CEREBRAL INFARCTION DUE TO THROMBOSIS OF UNSPECIFIED ANTERIOR CEREBRAL ARTERY
I63331	CEREBRAL INFARCTION DUE TO THROMBOSIS OF RIGHT POSTERIOR CEREBRAL ARTERY
163332	CEREBRAL INFARCTION DUE TO THROMBOSIS OF LEFT POSTERIOR CEREBRAL ARTERY
163339	CEREBRAL INFARCTION DUE TO THROMBOSIS OF UNSPECIFIED POSTERIOR CEREBRAL ARTERY
I63341	CEREBRAL INFARCTION DUE TO THROMBOSIS OF RIGHT CEREBELLAR ARTERY
163342	CEREBRAL INFARCTION DUE TO THROMBOSIS OF LEFT CEREBELLAR ARTERY
I63349	CEREBRAL INFARCTION DUE TO THROMBOSIS OF UNSPECIFIED CEREBELLAR ARTERY
16339	CEREBRAL INFARCTION DUE TO THROMBOSIS OF OTHER CEREBRAL ARTERY
16340	CEREBRAL INFARCTION DUE TO EMBOLISM OF UNSPECIFIED CEREBRAL ARTERY
I63411	CEREBRAL INFARCTION DUE TO EMBOLISM OF RIGHT MIDDLE CEREBRAL ARTERY
I63412	CEREBRAL INFARCTION DUE TO EMBOLISM OF LEFT MIDDLE CEREBRAL ARTERY
I63419	CEREBRAL INFARCTION DUE TO EMBOLISM OF UNSPECIFIED MIDDLE CEREBRAL ARTERY
I63421	CEREBRAL INFARCTION DUE TO EMBOLISM OF RIGHT ANTERIOR CEREBRAL ARTERY
163422	CEREBRAL INFARCTION DUE TO EMBOLISM OF LEFT ANTERIOR CEREBRAL ARTERY
163429	CEREBRAL INFARCTION DUE TO EMBOLISM OF UNSPECIFIED ANTERIOR CEREBRAL ARTERY

Step 6 (contraindicated diagnoses) Required quantity: 1	
Look back timeframe: 365 days	
ICD-10 Code	Description
I63431	CEREBRAL INFARCTION DUE TO EMBOLISM OF RIGHT POSTERIOR CEREBRAL ARTERY
163432	CEREBRAL INFARCTION DUE TO EMBOLISM OF LEFT POSTERIOR CEREBRAL ARTERY
163439	CEREBRAL INFARCTION DUE TO EMBOLISM OF UNSPECIFIED POSTERIOR CEREBRAL ARTERY
I63441	CEREBRAL INFARCTION DUE TO EMBOLISM OF RIGHT CEREBELLAR ARTERY
163442	CEREBRAL INFARCTION DUE TO EMBOLISM OF LEFT CEREBELLAR ARTERY
I63449	CEREBRAL INFARCTION DUE TO EMBOLISM OF UNSPECIFIED CEREBELLAR ARTERY
16349	CEREBRAL INFARCTION DUE TO EMBOLISM OF OTHER CEREBRAL ARTERY
16350	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF UNSPECIFIED CEREBRAL ARTERY
I63511	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF RIGHT MIDDLE CEREBRAL ARTERY
I63512	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF LEFT MIDDLE CEREBRAL ARTERY
I63519	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF UNSPECIFIED MIDDLE CEREBRAL ARTERY
I63521	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF RIGHT ANTERIOR CEREBRAL ARTERY
I63522	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF LEFT ANTERIOR CEREBRAL ARTERY
163529	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF UNSPECIFIED ANTERIOR CEREBRAL ARTERY
I63531	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF RIGHT POSTERIOR CEREBRAL ARTERY
163532	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF LEFT POSTERIOR CEREBRAL ARTERY
163539	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF UNSPECIFIED POSTERIOR CEREBRAL ARTERY
I63541	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF RIGHT CEREBELLAR ARTERY
163542	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF LEFT CEREBELLAR ARTERY
163549	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF UNSPECIFIED CEREBELLAR ARTERY
16359	CEREBRAL INFARCTION DUE TO UNSPECIFIED OCCLUSION OR STENOSIS OF OTHER CEREBRAL ARTERY
1636	CEREBRAL INFARCTION DUE TO CEREBRAL VENOUS THROMBOSIS, NONPYOGENIC

Step 6 (contraindicated diagnoses) Required quantity: 1 Look back timeframe: 365 days	
ICD-10 Code	Description
I638	OTHER CEREBRAL INFARCTION
I639	CEREBRAL INFARCTION, UNSPECIFIED
I658	OCCLUSION AND STENOSIS OF OTHER PRECEREBRAL ARTERIES
I659	OCCLUSION AND STENOSIS OF UNSPECIFIED PRECEREBRAL ARTERY
16609	OCCLUSION AND STENOSIS OF UNSPECIFIED MIDDLE CEREBRAL ARTERY
I6619	OCCLUSION AND STENOSIS OF UNSPECIFIED ANTERIOR CEREBRAL ARTERY
16629	OCCLUSION AND STENOSIS OF UNSPECIFIED POSTERIOR CEREBRAL ARTERY
1669	OCCLUSION AND STENOSIS OF UNSPECIFIED CEREBRAL ARTERY
I672	CEREBRAL ATHEROSCLEROSIS
I6781	ACUTE CEREBROVASCULAR INSUFFICIENCY
16782	CEREBRAL ISCHEMIA
I67848	OTHER CEREBROVASCULAR VASOSPASM AND VASOCONSTRICTION
I6789	OTHER CEREBROVASCULAR DISEASE
170201	UNSPECIFIED ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES, RIGHT LEG
170202	UNSPECIFIED ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES, LEFT LEG
170203	UNSPECIFIED ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES, BILATERAL LEGS
170208	UNSPECIFIED ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES, OTHER EXTREMITY
170209	UNSPECIFIED ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES, UNSPECIFIED EXTREMITY
170211	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH INTERMITTENT CLAUDICATION, RIGHT LEG
170212	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH INTERMITTENT CLAUDICATION, LEFT LEG
170213	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH INTERMITTENT CLAUDICATION, BILATERAL LEGS
170218	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH INTERMITTENT CLAUDICATION, OTHER EXTREMITY
170219	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH INTERMITTENT CLAUDICATION, UNSPECIFIED EXTREMITY
170221	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH REST PAIN, RIGHT LEG
170222	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH REST PAIN, LEFT LEG
170223	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH REST PAIN, BILATERAL LEGS

Step 6 (contraindicated diagnoses)	
Required quantity: 1 Look back timeframe: 365 days	
ICD-10 Code	Description
170228	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH REST PAIN, OTHER EXTREMITY
170229	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH REST PAIN, UNSPECIFIED EXTREMITY
170231	ATHEROSCLEROSIS OF NATIVE ARTERIES OF RIGHT LEG WITH ULCERATION, OF THIGH
170232	ATHEROSCLEROSIS OF NATIVE ARTERIES OF RIGHT LEG WITH ULCERATION, OF CALF
170233	ATHEROSCLEROSIS OF NATIVE ARTERIES OF RIGHT LEG WITH ULCERATION, OF ANKLE
170234	ATHEROSCLEROSIS OF NATIVE ARTERIES OF RIGHT LEG WITH ULCERATION, OF HEEL AND MIDFOOT
170235	ATHEROSCLEROSIS OF NATIVE ARTERIES OF RIGHT LEG WITH ULCERATION, OF OTHER PART OF FOOT
170238	ATHEROSCLEROSIS OF NATIVE ARTERIES OF RIGHT LEG WITH ULCERATION, OF OTHER PART OF LOWER RIGHT LEG
170239	ATHEROSCLEROSIS OF NATIVE ARTERIES OF RIGHT LEG WITH ULCERATION, OF UNSPECIFIED SITE
170241	ATHEROSCLEROSIS OF NATIVE ARTERIES OF LEFT LEG WITH ULCERATION, OF THIGH
170242	ATHEROSCLEROSIS OF NATIVE ARTERIES OF LEFT LEG WITH ULCERATION, OF CALF
170243	ATHEROSCLEROSIS OF NATIVE ARTERIES OF LEFT LEG WITH ULCERATION, OF ANKLE
170244	ATHEROSCLEROSIS OF NATIVE ARTERIES OF LEFT LEG WITH ULCERATION, OF HEEL AND MIDFOOT
170245	ATHEROSCLEROSIS OF NATIVE ARTERIES OF LEFT LEG WITH ULCERATION, OF OTHER PART OF FOOT
170248	ATHEROSCLEROSIS OF NATIVE ARTERIES OF LEFT LEG WITH ULCERATION, OF OTHER PART OF LOWER LEFT LEG
170249	ATHEROSCLEROSIS OF NATIVE ARTERIES OF LEFT LEG WITH ULCERATION, OF UNSPECIFIED SITE
17025	ATHEROSCLEROSIS OF NATIVE ARTERIES OF OTHER EXTREMITIES WITH ULCERATION
170261	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH GANGRENE, RIGHT LEG
170262	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH GANGRENE, LEFT LEG
170263	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH GANGRENE, BILATERAL LEGS
170268	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH GANGRENE, OTHER EXTREMITY
170269	ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES WITH GANGRENE, UNSPECIFIED EXTREMITY

Step 6 (contraindicated diagnoses)Required quantity: 1Look back timeframe: 365 days	
ICD-10 Code	Description
170291	OTHER ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES, RIGHT LEG
170292	OTHER ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES, LEFT LEG
170293	OTHER ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES, BILATERAL LEGS
170298	OTHER ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES, OTHER EXTREMITY
170299	OTHER ATHEROSCLEROSIS OF NATIVE ARTERIES OF EXTREMITIES, UNSPECIFIED EXTREMITY
R451	RESTLESSNESS AND AGITATION

Step 7 (Stimulant Agent)	
Concurrent Therapy	
GCN	Label Name
56971	ADDERALL 10MG TABLET
29008	ADDERALL 12.5MG TABLET
29009	ADDERALL 15MG TABLET
56973	ADDERALL 20MG TABLET
56972	ADDERALL 30MG TABLET
56970	ADDERALL 5MG TABLET
29007	ADDERALL 7.5MG TABLET
14635	ADDERALL XR 10MG CAPSULE
17468	ADDERALL XR 15MG CAPSULE
14636	ADDERALL XR 20MG CAPSULE
17469	ADDERALL XR 25MG CAPSULE
14637	ADDERALL XR 30MG CAPSULE
17459	ADDERALL XR 5MG CAPSULE
43864	ADZENYS ER 1.25 MG/ML SUSP
40650	ADZENYS XR-ODT 12.5MG TABLET
40653	ADZENYS XR-ODT 15.7MG TABLET
40654	ADZENYS XR-ODT 18.8MG TABLET
40647	ADZENYS XR-ODT 3.1MG TABLET
40648	ADZENYS XR-ODT 6.3MG TABLET
40649	ADZENYS XR-ODT 9.4MG TABLET
43864	AMPHETAMINE ER 1.25 MG/ML SUSP
19821	AMPHETAMINE SULFATE 10MG TABLET

Step 7 (Stimulant Agent) Concurrent Therapy	
GCN	Label Name
19822	AMPHETAMINE SULFATE 5MG TABLET
14635	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 10MG EXTENDED- RELEASE CAPSULE
56971	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 10MG TABLET
29008	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 12.5MG TABLET
17468	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 15MG EXTENDED- RELEASE CAPSULE
29009	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 15MG TABLET
14636	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 20MG EXTENDED- RELEASE CAPSULE
56973	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 20MG TABLET
17469	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 25MG EXTENDED- RELEASE CAPSULE
14637	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 30MG EXTENDED- RELEASE CAPSULE
56972	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 30MG TABLET
17459	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 5MG EXTENDED- RELEASE CAPSULE
56970	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 5MG TABLET
29007	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 7.5MG TABLET
97234	APTENSIO XR 10MG CAPSULE
97235	APTENSIO XR 15MG CAPSULE
97236	APTENSIO XR 20MG CAPSULE
97237	APTENSIO XR 30MG CAPSULE
97238	APTENSIO XR 40MG CAPSULE
97239	APTENSIO XR 50MG CAPSULE
97240	APTENSIO XR 60MG CAPSULE
98590	ARMODAFINIL 150MG TABLET
36082	ARMODAFINIL 200MG TABLET
98592	ARMODAFINIL 250MG TABLET
98591	ARMODAFINIL 50MG TABLET
49319	AZSTARYS 26.1/5.2MG CAPSULE
49322	AZSTARYS 39.2/7.8 MG CAPSULE
49323	AZSTARYS 52.3/10.4 MG CAPSULE
12567	CONCERTA ER 18MG TABLET
17123	CONCERTA ER 27MG TABLET
12568	CONCERTA ER 36MG TABLET
12248	CONCERTA ER 54MG TABLET
43535	COTEMPLA XR-ODT 17.3MG TABLET

Step 7 (Stimulant Agent) Concurrent Therapy	
GCN	Label Name
43536	COTEMPLA XR-ODT 25.9MG TABLET
43534	COTEMPLA XR-ODT 8.6MG TABLET
26801	DAYTRANA 10MG/9HR PATCH
26802	DAYTRANA 15MG/9HR PATCH
26803	DAYTRANA 20MG/9HR PATCH
26804	DAYTRANA 30MG/9HR PATCH
19932	DESOXYN 5MG TABLET
19850	DEXEDRINE SPANSULE 10MG
19851	DEXEDRINE SPANSULE 15MG
19852	DEXEDRINE SPANSULE 5MG
24734	DEXMETHYLPHENIDATE 10MG EXTENDED RELEASE CAPSULE
14975	DEXMETHYLPHENIDATE 10MG TABLET
97111	DEXMETHYLPHENIDATE 15MG EXTENDED RELEASE CAPSULE
14973	DEXMETHYLPHENIDATE 2.5MG TABLET
24735	DEXMETHYLPHENIDATE 20MG EXTENDED RELEASE CAPSULE
30305	DEXMETHYLPHENIDATE 25MG EXTENDED RELEASE CAPSULE
28035	DEXMETHYLPHENIDATE 30MG EXTENDED RELEASE CAPSULE
30306	DEXMETHYLPHENIDATE 35MG EXTENDED RELEASE CAPSULE
28933	DEXMETHYLPHENIDATE 40MG EXTENDED RELEASE CAPSULE
24733	DEXMETHYLPHENIDATE 5MG EXTENDED RELEASE CAPSULE
14974	DEXMETHYLPHENIDATE 5MG TABLET
19850	DEXTROAMPHETAMINE 10MG EXTENDED-RELEASE CAPSULE
19880	DEXTROAMPHETAMINE 10MG TABLET
19851	DEXTROAMPHETAMINE 15MG EXTENDED-RELEASE CAPSULE
19852	DEXTROAMPHETAMINE 5MG EXTENDED-RELEASE CAPSULE
19881	DEXTROAMPHETAMINE 5MG TABLET
99801	DEXTROAMPHETAMINE 5MG/5ML SOLUTION
51452	DYANAVEL XR 10MG TABLET
51453	DYANAVEL XR 15MG TABLET
39686	DYANAVEL XR 2.5MG/ML SUSP
51454	DYANAVEL XR 20MG TABLET
51439	DYANAVEL XR 5MG TABLET
19821	EVEKEO 10MG TABLET
19822	EVEKEO 5MG TABLET
45977	EVEKEO ODT 10MG
45978	EVEKEO ODT 15MG

Step 7 (Stimulant Agent) Concurrent Therapy	
GCN	Label Name
45979	EVEKEO ODT 20MG
45976	EVEKEO ODT 5MG
14975	FOCALIN 10MG TABLET
14973	FOCALIN 2.5MG TABLET
14974	FOCALIN 5MG TABLET
24734	FOCALIN XR 10MG CAPSULE
97111	FOCALIN XR 15MG CAPSULE
24735	FOCALIN XR 20MG CAPSULE
30305	FOCALIN XR 25MG CAPSULE
28035	FOCALIN XR 30MG CAPSULE
30306	FOCALIN XR 35MG CAPSULE
28933	FOCALIN XR 40MG CAPSULE
24733	FOCALIN XR 5MG CAPSULE
45110	JORNAY PM 100 MG CAPSULE
45106	JORNAY PM 20 MG CAPSULE
45107	JORNAY PM 40 MG CAPSULE
45108	JORNAY PM 60 MG CAPSULE
45109	JORNAY PM 80 MG CAPSULE
19932	METHAMPHETAMINE 5MG TABLET
22686	METHYLIN 10MG/5ML SOLUTION
22685	METHYLIN 5MG/5ML SOLUTION
22684	METHYLPHENIDATE 10 MG CHEW TB
26801	METHYLPHENIDATE 10 MG/9HR PTCH
21763	METHYLPHENIDATE 10MG EXTENDED-RELEASE CAPSULE
15911	METHYLPHENIDATE 10MG TABLET
22686	METHYLPHENIDATE 10MG/5ML SOL
26802	METHYLPHENIDATE 15 MG/9HR PTCH
12567	METHYLPHENIDATE 18MG EXTENDED-RELEASE TABLET
22682	METHYLPHENIDATE 2.5 MG CHEW TB
26803	METHYLPHENIDATE 20 MG/9HR PTCH
20387	METHYLPHENIDATE 20MG EXTENDED-RELEASE CAPSULE
16180	METHYLPHENIDATE 20MG SUSTAINED-RELEASE TABLET
15920	METHYLPHENIDATE 20MG TABLET
17123	METHYLPHENIDATE 27MG EXTENDED-RELEASE TABLET
26804	METHYLPHENIDATE 30 MG/9HR PTCH
20388	METHYLPHENIDATE 30MG EXTENDED-RELEASE CAPSULE

Step 7 (Stimulant Agent) Concurrent Therapy	
GCN	Label Name
12568	METHYLPHENIDATE 36MG EXTENDED-RELEASE TABLET
20391	METHYLPHENIDATE 40MG EXTENDED-RELEASE CAPSULE
22683	METHYLPHENIDATE 5 MG CHEW TB
12248	METHYLPHENIDATE 54MG EXTENDED-RELEASE TABLET
15913	METHYLPHENIDATE 5MG TABLET
22685	METHYLPHENIDATE 5MG/5ML SOL
36195	METHYLPHENIDATE 60MG EXTENDED-RELEASE CAPSULE
44239	METHYLPHENIDATE 72 MG EXTENDED-RELEASE TABLET
20384	METHYLPHENIDATE CD 10MG EXTENDED-RELEASE CAPSULE
20385	METHYLPHENIDATE CD 20MG EXTENDED-RELEASE CAPSULE
20386	METHYLPHENIDATE CD 30MG EXTENDED-RELEASE CAPSULE
26734	METHYLPHENIDATE CD 40MG EXTENDED-RELEASE CAPSULE
26735	METHYLPHENIDATE CD 50MG EXTENDED-RELEASE CAPSULE
26736	METHYLPHENIDATE CD 60MG EXTENDED-RELEASE CAPSULE
97234	METHYLPHENIDATE ER 10 MG CAP
93075	METHYLPHENIDATE ER 10 MG TAB
97235	METHYLPHENIDATE ER 15 MG CAP
97236	METHYLPHENIDATE ER 20 MG CAP
16180	METHYLPHENIDATE ER 20 MG TAB
97237	METHYLPHENIDATE ER 30 MG CAP
97238	METHYLPHENIDATE ER 40 MG CAP
97239	METHYLPHENIDATE ER 50 MG CAP
97240	METHYLPHENIDATE ER 60 MG CAP
20387	METHYLPHENIDATE LA 20 MG CAP
20388	METHYLPHENIDATE LA 30 MG CAP
20391	METHYLPHENIDATE LA 40 MG CAP
26101	MODAFINIL 100 MG TABLET
26102	MODAFINIL 200 MG TABLET
43538	MYDAYIS ER 12.5 MG CAPSULE
43539	MYDAYIS ER 25 MG CAPSULE
43542	MYDAYIS ER 37.5 MG CAPSULE
43543	MYDAYIS ER 50 MG CAPSULE
98590	NUVIGIL 150MG TABLET
36082	NUVIGIL 200MG TABLET
98592	NUVIGIL 250MG TABLET
98591	NUVIGIL 50MG TABLET

Step 7 (Stimulant Agent) Concurrent Therapy	
GCN	Label Name
99801	PROCENTRA 5MG/5ML SOLUTION
26101	PROVIGIL 100 MG TABLET
26102	PROVIGIL 200 MG TABLET
40289	QUILLICHEW ER 20MG CHEW TAB
40292	QUILLICHEW ER 30MG CHEW TAB
40293	QUILLICHEW ER 40MG CHEW TAB
33887	QUILLIVANT XR 25MG/5ML SUSP
15911	RITALIN 10MG TABLET
15920	RITALIN 20MG TABLET
15913	RITALIN 5MG TABLET
21763	RITALIN LA 10MG CAPSULE
20387	RITALIN LA 20MG CAPSULE
20388	RITALIN LA 30MG CAPSULE
20391	RITALIN LA 40MG CAPSULE
46127	SUNOSI 150MG TABLET
46126	SUNOSI 75MG TABLET
37674	VYVANSE 10MG CAPSULE
42969	VYVANSE 10MG CHEWABLE TABLET
99366	VYVANSE 20MG CAPSULE
43058	VYVANSE 20MG CHEWABLE TABLET
98071	VYVANSE 30MG CAPSULE
43059	VYVANSE 30MG CHEWABLE TABLET
99367	VYVANSE 40MG CAPSULE
43063	VYVANSE 40MG CHEWABLE TABLET
98072	VYVANSE 50MG CAPSULE
43064	VYVANSE 50MG CHEWABLE TABLET
99368	VYVANSE 60MG CAPSULE
43065	VYVANSE 60MG CHEWABLE TABLET
98073	VYVANSE 70MG CAPSULE
45949	WAKIX 17.8 MG TABLET
45948	WAKIX 4.45 MG TABLET
52133	XELSTRYM 10MG/9HR PATCH
52127	XELSTRYM 13.5MG/9HR PATCH
52134	XELSTRYM 4.5MG/9HR PATCH
52135	XELSTRYM 9MG/9HR PATCH
19880	ZENZEDI 10MG TABLET

Step 7 (Stimulant Agent) Concurrent Therapy	
GCN	Label Name
19885	ZENZEDI 15MG TABLET
34734	ZENZEDI 2.5MG TABLET
36463	ZENZEDI 20MG TABLET
36464	ZENZEDI 30MG TABLET
19881	ZENZEDI 5MG TABLET
34735	ZENZEDI 7.5MG TABLET

Step 8 (diagnosis of severe renal impairment or ESRD)	
Required diagnosis: 1	
Look back timeframe: 365 days	
ICD-10 Code	Description
N185	CHRONIC KIDNEY DISEASE, STAGE 5
N186	END STAGE RENAL DISEASE



Clinical Criteria References

- 1. Clinical Pharmacology [online database]. Tampa, FL: Elsevier / Gold Standard, Inc. 2024. Available at www.clinicalpharmacology.com. Accessed on April 26, 2024.
- 2. Drug Facts and Comparisons. eFacts [online]. 2024. Available from Wolters Kluwer Health, Inc. Accessed on April 26, 2024.

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.

Publication Date	Notes
04/26/2024	Initial publication and presentation to the DUR Board
04/27/2024	Modified diagnosis criteria steps based on DUR Board recommendations by removing manual BMI check and using ICD-10 codes for diagnosis Updated the lookback periods in steps 2 and 3 to two years for consistency with automated clinical PA processing
08/12/2024	Corrected Table 2, 3a, and 3b to a lookback of 730 days
08/19/2024	Updated dose check to greater than 37.5 mg/day for phentermine or 210 mg/day for phendimetrazine