

**Texas Prior Authorization Program  
Clinical Criteria****Drug/Drug Class****Binge Eating Disorder (BED) Agents****Clinical Criteria Information included in this Document**

- [Drugs requiring prior authorization](#): the list of drugs requiring prior authorization for this clinical criteria
- [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); provided when applicable
- [References](#): clinical publications and sources relevant to this clinical criteria

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

**Revision Notes**

Annual review by staff

Updated severe renal impairment maximum dose to less than or equal to 50 mg/day

Added question for maximum dose of less than or equal to 70 mg/day

Added ICD-10 codes F50811 and F50812 to the Diagnosis of BED supporting table

Added ICD-10 codes F1011, F10130, F10131, F10132, F10139, F1021, F1111, F1113, F1211, F1213, F1223, F1311, F13130, F13131, F13132, F13139, F1411, F1413, F1421, F1511, F1513, F1521, F1611, F1621, F1811, F1821, F1911, F19130, F19131, F19132, F19139, F1921, and Z7151 to the Diagnosis of Substance Abuse supporting table

Added ICD-10 codes I219, I21A1, I21A9, I21B, I4710, I4711, I4719, I4720, I4721, I4729, I4811, I4819, I4820, I4821, I50810, I50811, I50812, I50813, I50814, I5082, I5083, I5084, and I5089 to the Diagnosis of Severe Cardiac Disease supporting table

Added GCNs for Xelstrym (52127, 52133, 52134, 52135) to the ER Stimulant supporting table

Added ICD-10 code Z992 to the Diagnosis of ESRD supporting table

Added ICD-10 codes I120, I1311, and I132 to the Diagnosis of Severe Renal Impairment supporting table

Updated references

**Vyvanse (Lisdexamfetamine)****Drugs Requiring Prior Authorization**

*The listed GCNs may not be an indication of Texas Medicaid Formulary coverage. To learn the current formulary coverage, visit [txvendordrug.com/searches/formulary-drug-search](http://txvendordrug.com/searches/formulary-drug-search).*

<b>Drugs Requiring Prior Authorization</b>	
<b>Label Name</b>	<b>GCN</b>
LISDEXAMFETAMINE 10 MG CAPSULE	37674
LISDEXAMFETAMINE 20 MG CAPSULE	99366
LISDEXAMFETAMINE 30 MG CAPSULE	98071
LISDEXAMFETAMINE 40 MG CAPSULE	99367
LISDEXAMFETAMINE 50 MG CAPSULE	98072
LISDEXAMFETAMINE 60 MG CAPSULE	99368
LISDEXAMFETAMINE 70 MG CAPSULE	98073
VYVANSE 10MG CAPSULE	37674
VYVANSE 10MG CHEWABLE TABLET	42969
VYVANSE 20MG CAPSULE	99366
VYVANSE 20MG CHEWABLE TABLET	43058
VYVANSE 30MG CAPSULE	98071
VYVANSE 30MG CHEWABLE TABLET	43059
VYVANSE 40MG CAPSULE	99367
VYVANSE 40MG CHEWABLE TABLET	43063
VYVANSE 50MG CAPSULE	98072
VYVANSE 50MG CHEWABLE TABLET	43064
VYVANSE 60MG CAPSULE	99368
VYVANSE 60MG CHEWABLE TABLET	43065
VYVANSE 70MG CAPSULE	98073

**Vyvanse (Lisdexamfetamine)****Clinical Criteria Logic**

**Note:** [ADHD](#) and [Binge Eating Disorder](#) criteria are applicable to Vyvanse. The client must meet one or the other of the criteria sets but is not required to meet both.

1. Is the client less than (<) 18 years of age?  
[ ] Yes – Deny  
[ ] No – Go to #2
2. Does the client have a [diagnosis of binge eating disorder \(BED\)](#) in the last 730 days?  
[ ] Yes – Go to #3  
[ ] No – Deny
3. Does the client have at least 60 days therapy with an [agent for the treatment of BED](#) in the last 180 days?  
[ ] Yes – Go to #4  
[ ] No – Deny
4. Does the client have a [history of substance abuse](#) in the last 365 days?  
[ ] Yes – Deny  
[ ] No – Go to #5
5. Does the client have a paid claim for another [ER stimulant](#) in the last 14 days?  
[ ] Yes – Deny  
[ ] No – Go to #6
6. Does the client have a [diagnosis of severe cardiac disease](#) in the last 365 days?  
[ ] Yes – Deny  
[ ] No – Go to #7
7. Does the client have treatment with a [monoamine oxidase inhibitor \(MAOI\)](#) in the last 14 days?  
[ ] Yes – Deny  
[ ] No – Go to #8
8. Does the client have a [diagnosis of end stage renal disease \(ESRD\)](#) in the last 365 days?  
[ ] Yes – Go to #9

[ ] No – Go to #10

9. Is the requested dose less than or equal to ( $\leq$ ) 30 mg per day?

[ ] Yes – Approve (180 days)

[ ] No – Deny

10. Does the client have a [diagnosis of severe renal impairment](#) in the last 365 days?

[ ] Yes – Go to #11

[ ] No – Go to #12

11. Is the requested dose less than or equal to ( $\leq$ ) 50 mg per day?

[ ] Yes – Approve (180 days)

[ ] No – Deny

12. Is the requested dose less than or equal to ( $\leq$ ) 70 mg per day?

[ ] Yes – Approve (180 days)

[ ] No – Deny



## Vyvanse (Lisdexamfetamine) Clinical Criteria Logic Diagram

**Note:** [ADHD](#) and [Binge Eating Disorder](#) criteria are applicable to Vyvanse. The client must meet one or the other of the criteria sets but is not required to meet both.





## Vyvanse (Lisdexamfetamine)

### Clinical Criteria Supporting Tables

#### Table 2 (diagnosis of BED)

Required diagnosis: 1

Look back timeframe: 730 days

ICD-10 Code	Description
F5081	BINGE EATING DISORDER
F50811	MODERATE BINGE EATING DISORDER
F50812	SEVERE BINGE EATING DISORDER

#### Table 3 (alternate therapy for BED)

Required days supply: 60

Look back timeframe: 180 days

GCN	Label Name
16345	CELEXA 10MG TABLET
16342	CELEXA 20MG TABLET
16343	CELEXA 40MG TABLET
16344	CELEXA 10 MG/5 ML SOLUTION
16345	CITALOPRAM 10MG TABLET
16344	CITALOPRAM 10MG/5ML SOLUTION
16342	CITALOPRAM 20MG TABLET
16343	CITALOPRAM 40MG TABLET
17851	ESCITALOPRAM 10MG TABLET
17987	ESCITALOPRAM 20MG TABLET
18975	ESCITALOPRAM 5MG TABLET
19035	ESCITALOPRAM 5MG/5ML SOLUTION

**Table 3 (alternate therapy for BED)****Required days supply: 60****Look back timeframe: 180 days**

GCN	Label Name
16353	FLUOXETINE 10MG CAPSULE
16356	FLUOXETINE 10MG TABLET
16354	FLUOXETINE 20MG CAPSULE
16359	FLUOXETINE 20MG TABLET
16357	FLUOXETINE 20MG/5ML SOLUTION
16355	FLUOXETINE 40MG CAPSULE
30817	FLUOXETINE 60MG TABLET
12929	FLUOXETINE DR 90MG CAPSULE
16349	FLUVOXAMINE 100MG TABLET
16347	FLUVOXAMINE 25MG TABLET
16348	FLUVOXAMINE 50MG TABLET
99481	FLUVOXAMINE ER 100MG CAPSULE
99482	FLUVOXAMINE ER 150MG CAPSULE
17851	LEXAPRO 10MG TABLET
17987	LEXAPRO 20MG TABLET
18975	LEXAPRO 5 MG TABLET
19035	LEXAPRO 5 MG/5 ML SOLUTION
20870	OLANZAPINE-FLUOXETINE 12-25MG
20872	OLANZAPINE-FLUOXETINE 12-50MG
98648	OLANZAPINE-FLUOXETINE 3-25MG
20868	OLANZAPINE-FLUOXETINE 6-25MG
20869	OLANZAPINE-FLUOXETINE 6-50MG
16364	PAROXETINE 10MG TABLET

**Table 3 (alternate therapy for BED)****Required days supply: 60****Look back timeframe: 180 days**

GCN	Label Name
16366	PAROXETINE 20MG TABLET
16367	PAROXETINE 30MG TABLET
16368	PAROXETINE 40MG TABLET
17078	PAROXETINE CR 12.5MG TABLET
17077	PAROXETINE CR 25MG TABLET
17079	PAROXETINE CR 37.5MG TABLET
34876	PAROXETINE MESYLATE 7.5MG CAP
16364	PAXIL 10MG TABLET
16369	PAXIL 10MG/5ML SUSPENSION
16366	PAXIL 20MG TABLET
16367	PAXIL 30MG TABLET
16368	PAXIL 40MG TABLET
17078	PAXIL CR 12.5MG TABLET
17077	PAXIL CR 25MG TABLET
17079	PAXIL CR 37.5MG TABLET
16353	PROZAC 10MG PULVULE
16354	PROZAC 20MG PULVULE
16355	PROZAC 40MG PULVULE
16357	PROZAC 20 MG/5 ML SOLUTION
16356	PROZAC 10 MG TABLET
12929	PROZAC WEEKLY 90 MG CAPSULE
36233	QUDEXY XR 100 MG CAPSULE
36234	QUDEXY XR 150 MG CAPSULE

**Table 3 (alternate therapy for BED)****Required days supply: 60****Look back timeframe: 180 days**

GCN	Label Name
36235	QUDEXY XR 200 MG CAPSULE
36229	QUDEXY XR 25 MG CAPSULE
36232	QUDEXY XR 50 MG CAPSULE
16375	SERTRALINE 100MG TABLET
16376	SERTRALINE 20MG/ML ORAL CONCENTRATE
16373	SERTRALINE 25MG TABLET
16374	SERTRALINE 50MG TABLET
36551	TOPAMAX 100 MG TABLET
36556	TOPAMAX 15 MG SPRINKLE CAP
36552	TOPAMAX 200 MG TABLET
36557	TOPAMAX 25 MG SPRINKLE CAP
36553	TOPAMAX 25 MG TABLET
36550	TOPAMAX 50 MG TABLET
36551	TOPIRAMATE 100 MG TABLET
36556	TOPIRAMATE 15 MG SPRINKLE CAP
36552	TOPIRAMATE 200 MG TABLET
36557	TOPIRAMATE 25 MG SPRINKLE CAP
36553	TOPIRAMATE 25 MG TABLET
36550	TOPIRAMATE 50 MG TABLET
36233	TOPIRAMATE ER 100 MG CAPSULE
36234	TOPIRAMATE ER 150 MG CAPSULE
36235	TOPIRAMATE ER 200 MG CAPSULE
36229	TOPIRAMATE ER 25 MG CAPSULE

**Table 3 (alternate therapy for BED)****Required days supply: 60****Look back timeframe: 180 days**

GCN	Label Name
36232	TOPIRAMATE ER 50 MG CAPSULE
35106	TROKENDI XR 100 MG CAPSULE
35107	TROKENDI XR 200 MG CAPSULE
35103	TROKENDI XR 25 MG CAPSULE
35104	TROKENDI XR 50 MG CAPSULE
16375	ZOLOFT 100MG TABLET
16373	ZOLOFT 25MG TABLET
16374	ZOLOFT 50MG TABLET
16376	ZOLOFT 20 MG/ML ORAL CONC

**Table 4 (history of substance abuse)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
F1010	ALCOHOL ABUSE UNCOMPLICATED
F1011	ALCOHOL ABUSE, IN REMISSION
F10120	ALCOHOL ABUSE WITH INTOXICATION UNCOMPLICATED
F10121	ALCOHOL ABUSE WITH INTOXICATION DELIRIUM
F10129	ALCOHOL ABUSE WITH INTOXICATION UNSPECIFIED
F10130	ALCOHOL ABUSE WITH WITHDRAWAL, UNCOMPLICATED
F10131	ALCOHOL ABUSE WITH WITHDRAWAL DELIRIUM
F10132	ALCOHOL ABUSE WITH WITHDRAWAL WITH PERCEPTUAL DISTURBANCE
F10139	ALCOHOL ABUSE WITH WITHDRAWAL, UNSPECIFIED

**Table 4 (history of substance abuse)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
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
F1021	ALCOHOL DEPENDENCE, IN REMISSION
F10220	ALCOHOL DEPENDENCE WITH INTOXICATION UNCOMPLICATED
F10221	ALCOHOL DEPENDENCE WITH INTOXICATION DELIRIUM
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

**Table 4 (history of substance abuse)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
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
F1111	OPIOID ABUSE IN REMISSION
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
F1113	OPIOID ABUSE WITH INTOXICATION WITH WITHDRAWAL
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

**Table 4 (history of substance abuse)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
F11182	OPIOID ABUSE WITH OPIOID-INDUCED SLEEP DISORDER
F11188	OPIOID ABUSE WITH OTHER OPIOID-INDUCED DISORDER
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
F1211	CANNABIS ABUSE, IN REMISSION
F12120	CANNABIS ABUSE WITH INTOXICATION UNCOMPLICATED

**Table 4 (history of substance abuse)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
F12121	CANNABIS ABUSE WITH INTOXICATION DELIRIUM
F12122	CANNABIS ABUSE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F12129	CANNABIS ABUSE WITH INTOXICATION UNSPECIFIED
F1213	CANNABIS ABUSE WITH WITHDRAWAL
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
F12221	CANNABIS DEPENDENCE WITH INTOXICATION DELIRIUM
F12222	CANNABIS DEPENDENCE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F12229	CANNABIS DEPENDENCE WITH INTOXICATION UNSPECIFIED
F1223	CANNABIS DEPENDENCE WITH WITHDRAWAL
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

**Table 4 (history of substance abuse)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
F1229	CANNABIS DEPENDENCE WITH UNSPECIFIED CANNABIS-INDUCED DISORDER
F1310	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE, UNCOMPLICATED
F1311	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE, IN REMISSION
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
F13130	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH WITHDRAWAL, UNCOMPLICATED
F13131	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH WITHDRAWAL DELIRIUM
F13132	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH WITHDRAWAL WITH PERCEPTUAL DISTURBANCE
F13139	SEDATIVE, HYPNOTIC OR ANXIOLYTIC ABUSE WITH WITHDRAWAL, 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

**Table 4 (history of substance abuse)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
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
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

**Table 4 (history of substance abuse)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
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
F1329	SEDATIVE, HYPNOTIC OR ANXIOLYTIC DEPENDENCE WITH UNSPECIFIED SEDATIVE, HYPNOTIC OR ANXIOLYTIC-INDUCED DISORDER
F1410	COCAINE ABUSE UNCOMPLICATED
F1411	COCAINE ABUSE, IN REMISSION
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
F1413	COCAINE ABUSE, UNSPECIFIED WITH WITHDRAWAL
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

**Table 4 (history of substance abuse)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
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
F1421	COCAINE DEPENDENCE, IN REMISSION
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

**Table 4 (history of substance abuse)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
F1429	COCAINE DEPENDENCE WITH UNSPECIFIED COCAINE-INDUCED DISORDER
F1510	OTHER STIMULANT ABUSE UNCOMPLICATED
F1511	OTHER STIMULANT ABUSE, IN REMISSION
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
F1513	OTHER STIMULANT ABUSE WITH WITHDRAWAL
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
F1521	OTHER STIMULANT DEPENDENCE, IN REMISSION
F15220	OTHER STIMULANT DEPENDENCE WITH INTOXICATION UNCOMPLICATED

**Table 4 (history of substance abuse)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
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
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
F1611	HALLUCINOGEN ABUSE, IN REMISSION
F16120	HALLUCINOGEN ABUSE WITH INTOXICATION UNCOMPLICATED
F16121	HALLUCINOGEN ABUSE WITH INTOXICATION WITH DELIRIUM
F16122	HALLUCINOGEN ABUSE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE

**Table 4 (history of substance abuse)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
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
F1621	HALLUCINOGEN DEPENDENCE, IN REMISSION
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
F16259	HALLUCINOGEN DEPENDENCE WITH HALLUCINOGEN-INDUCED PSYCHOTIC DISORDER UNSPECIFIED

**Table 4 (history of substance abuse)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
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
F1811	INHALANT ABUSE, IN REMISSION
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
F1821	INHALANT DEPENDENCE, IN REMISSION
F18220	INHALANT DEPENDENCE WITH INTOXICATION UNCOMPLICATED

**Table 4 (history of substance abuse)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
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
F18288	INHALANT DEPENDENCE WITH OTHER INHALANT-INDUCED DISORDER
F1829	INHALANT DEPENDENCE WITH UNSPECIFIED INHALANT-INDUCED DISORDER
F1910	OTHER PSYCHOACTIVE SUBSTANCE ABUSE UNCOMPLICATED
F1911	OTHER PSYCHOACTIVE SUBSTANCE ABUSE, IN REMISSION
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
F19130	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH WITHDRAWAL, UNCOMPLICATED
F19131	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH WITHDRAWAL DELIRIUM
F19132	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH WITHDRAWAL WITH PERCEPTUAL DISTURBANCE

**Table 4 (history of substance abuse)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
F19139	OTHER PSYCHOACTIVE SUBSTANCE ABUSE WITH WITHDRAWAL, 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
F1921	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE, IN REMISSION
F19220	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH INTOXICATION, UNCOMPLICATED
F19221	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH INTOXICATION DELIRIUM

**Table 4 (history of substance abuse)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
F19222	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH INTOXICATION WITH PERCEPTUAL DISTURBANCE
F19229	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH INTOXICATION UNSPECIFIED
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

**Table 4 (history of substance abuse)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
F19288	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH OTHER PSYCHOACTIVE SUBSTANCE-INDUCED DISORDER
F1929	OTHER PSYCHOACTIVE SUBSTANCE DEPENDENCE WITH UNSPECIFIED PSYCHOACTIVE SUBSTANCE-INDUCED DISORDER
Z7151	DRUG ABUSE COUNSELING AND SURVEILLANCE OF DRUG ABUSER

**Table 5 (paid claim for another ER stimulant)****Required quantity: 1****Look back timeframe: 14 days**

GCN	Label Name
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
44356	ADHANSIA XR 25MG CAPSULE
44358	ADHANSIA XR 35MG CAPSULE
44362	ADHANSIA XR 45MG CAPSULE
44363	ADHANSIA XR 55MG CAPSULE
44364	ADHANSIA XR 70MG CAPSULE
44365	ADHANSIA XR 85MG CAPSULE
43864	ADZENYS ER 1.25 MG/ML SUSP
40647	ADZENYS XR-ODT 3.1MG TABLET

**Table 5 (paid claim for another ER stimulant)****Required quantity: 1****Look back timeframe: 14 days**

GCN	Label Name
40648	ADZENYS XR-ODT 6.3MG TABLET
40649	ADZENYS XR-ODT 9.4MG TABLET
40650	ADZENYS XR-ODT 12.5MG TABLET
40653	ADZENYS XR-ODT 15.7MG TABLET
40654	ADZENYS XR-ODT 18.8MG TABLET
14635	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 10MG EXTENDED-RELEASE CAPSULE
17468	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 15MG EXTENDED-RELEASE CAPSULE
14636	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 20MG EXTENDED-RELEASE CAPSULE
17469	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 25MG EXTENDED-RELEASE CAPSULE
14637	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 30MG EXTENDED-RELEASE CAPSULE
17459	AMPHETAMINE/DEXTROAMPHETAMINE SALTS 5MG EXTENDED-RELEASE CAPSULE
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
12567	CONCERTA ER 18MG TABLET
17123	CONCERTA ER 27MG TABLET

**Table 5 (paid claim for another ER stimulant)****Required quantity: 1****Look back timeframe: 14 days**

GCN	Label Name
12568	CONCERTA ER 36MG TABLET
12248	CONCERTA ER 54MG TABLET
43535	COTEMPLA XR-ODT 17.3MG TABLET
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
19850	DEXEDRINE SPANSULE 10MG
19851	DEXEDRINE SPANSULE 15MG
19852	DEXEDRINE SPANSULE 5MG
24734	DEXMETHYLPHENIDATE 10MG EXTENDED RELEASE CAPSULE
97111	DEXMETHYLPHENIDATE 15MG EXTENDED RELEASE CAPSULE
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
19850	DEXTROAMPHETAMINE 10MG EXTENDED-RELEASE CAPSULE
19851	DEXTROAMPHETAMINE 15MG EXTENDED-RELEASE CAPSULE
19852	DEXTROAMPHETAMINE 5MG EXTENDED-RELEASE CAPSULE

**Table 5 (paid claim for another ER stimulant)****Required quantity: 1****Look back timeframe: 14 days**

GCN	Label Name
39686	DYANAVEL XR 2.5MG/ML SUSP
51439	DYANAVEL XR 5 MG TABLET
51452	DYANAVEL XR 10 MG TABLET
51453	DYANAVEL XR 15 MG TABLET
51454	DYANAVEL XR 20 MG 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
37674	LISDEXAMFETAMINE 10 MG CAPSULE
99366	LISDEXAMFETAMINE 20 MG CAPSULE
98071	LISDEXAMFETAMINE 30 MG CAPSULE
99367	LISDEXAMFETAMINE 40 MG CAPSULE
98072	LISDEXAMFETAMINE 50 MG CAPSULE
99368	LISDEXAMFETAMINE 60 MG CAPSULE
98073	LISDEXAMFETAMINE 70 MG CAPSULE
45110	JORNAY PM 100 MG CAPSULE
45106	JORNAY PM 20 MG CAPSULE
45107	JORNAY PM 40 MG CAPSULE

**Table 5 (paid claim for another ER stimulant)****Required quantity: 1****Look back timeframe: 14 days**

GCN	Label Name
45108	JORNAY PM 60 MG CAPSULE
45109	JORNAY PM 80 MG CAPSULE
21763	METHYLPHENIDATE 10MG EXTENDED-RELEASE CAPSULE
12567	METHYLPHENIDATE 18MG EXTENDED-RELEASE TABLET
20387	METHYLPHENIDATE 20MG EXTENDED-RELEASE CAPSULE
16180	METHYLPHENIDATE 20MG EXTENDED-RELEASE TABLET
17123	METHYLPHENIDATE 27MG EXTENDED-RELEASE TABLET
20388	METHYLPHENIDATE 30MG EXTENDED-RELEASE CAPSULE
12568	METHYLPHENIDATE 36MG EXTENDED-RELEASE TABLET
20391	METHYLPHENIDATE 40MG EXTENDED-RELEASE CAPSULE
12248	METHYLPHENIDATE 54MG EXTENDED-RELEASE TABLET
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
93075	METHYLPHENIDATE ER 10 MG TAB
43538	MYDAYIS ER 12.5 MG CAPSULE
43539	MYDAYIS ER 25 MG CAPSULE
43542	MYDAYIS ER 37.5 MG CAPSULE

**Table 5 (paid claim for another ER stimulant)****Required quantity: 1****Look back timeframe: 14 days**

GCN	Label Name
43543	MYDAYIS ER 50 MG CAPSULE
40289	QUILLICHEW ER 20MG CHEW TAB
40292	QUILLICHEW ER 30MG CHEW TAB
40293	QUILLICHEW ER 40MG CHEW TAB
33887	QUILLIVANT XR 25MG/5ML SUSP
21763	RITALIN LA 10MG CAPSULE
20387	RITALIN LA 20MG CAPSULE
20388	RITALIN LA 30MG CAPSULE
20391	RITALIN LA 40MG CAPSULE
36195	RITALIN LA 60 MG CAPSULE
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

**Table 5 (paid claim for another ER stimulant)****Required quantity: 1****Look back timeframe: 14 days**

GCN	Label Name
52127	XELSTRYM 13.5 MG/9 HR PATCH
52133	XELSTRYM 18 MG/9 HR PATCH
52134	XELSTRYM 4.5 MG/9 HR PATCH
52135	XELSTRYM 9 MG/9 HR PATCH

**Table 6 (diagnosis of severe cardiac disease)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
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
I211	ST elevation (STEMI) myocardial infarction of inferior 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
I214	NON-ST ELEVATION (NSTEMI) MYOCARDIAL INFARCTION
I219	ACUTE MYOCARDIAL INFARCTION, UNSPECIFIED

**Table 6 (diagnosis of severe cardiac disease)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
I21A1	MYOCARDIAL INFARCTION TYPE 2
I21A9	OTHER MYOCARDIAL INFARCTION TYPE
I21B	MYOCARDIAL INFARCTION WITH CORONARY MICROVASCULAR DYSFUNCTION
I220	SUBSEQUENT ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF ANTERIOR WALL
I221	SUBSEQUENT ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF INFERIOR WALL
I222	SUBSEQUENT NON-ST ELEVATION (NSTEMI) MYOCARDIAL INFARCTION
I228	SUBSEQUENT ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF OTHER SITES
I229	SUBSEQUENT ST ELEVATION (STEMI) MYOCARDIAL INFARCTION OF UNSPECIFIED SITE
I240	ACUTE CORONARY THROMBOSIS NOT RESULTING IN MYOCARDIAL INFARCTION
I241	DRESSLER'S SYNDROME
I248	OTHER FORMS OF ACUTE ISCHEMIC HEART DISEASE
I249	ACUTE ISCHEMIC HEART DISEASE, UNSPECIFIED
I25110	ATHEROSCLEROTIC HEART DISEASE OF NATIVE CORONARY ARTERY WITH UNSTABLE ANGINA PECTORIS
I25700	ATHEROSCLEROSIS OF CORONARY ARTERY BYPASS GRAFT(S), UNSPECIFIED, WITH UNSTABLE ANGINA PECTORIS
I25701	ATHEROSCLEROSIS OF CORONARY ARTERY BYPASS GRAFT(S), UNSPECIFIED, WITH UNSTABLE ANGINA PECTORIS WITH DOCUMENTED SPASM
I25708	ATHEROSCLEROSIS OF CORONARY ARTERY BYPASS GRAFT(S), UNSPECIFIED, WITH OTHER FORMS OF ANGINA PECTORIS
I25709	ATHEROSCLEROSIS OF CORONARY ARTERY BYPASS GRAFT(S), UNSPECIFIED, WITH UNSPECIFIED ANGINA PECTORIS

**Table 6 (diagnosis of severe cardiac disease)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
I25710	ATHEROSCLEROSIS OF AUTOLOGOUS VEIN CORONARY ARTERY BYPASS GRAFT(S) WITH UNSTABLE ANGINA PECTORIS
I25720	ATHEROSCLEROSIS OF AUTOLOGOUS ARTERY CORONARY ARTERY BYPASS GRAFT(S) WITH UNSTABLE ANGINA PECTORIS
I25730	ATHEROSCLEROSIS OF NONAUTOLOGOUS BIOLOGICAL CORONARY ARTERY BYPASS GRAFT(S) WITH UNSTABLE ANGINA PECTORIS
I25750	ATHEROSCLEROSIS OF NATIVE CORONARY ARTERY OF TRANSPLANTED HEART WITH UNSTABLE ANGINA
I25760	ATHEROSCLEROSIS OF BYPASS GRAFT OF CORONARY ARTERY OF TRANSPLANTED HEART WITH UNSTABLE ANGINA
I25790	ATHEROSCLEROSIS OF OTHER CORONARY ARTERY BYPASS GRAFT(S) WITH UNSTABLE ANGINA PECTORIS
I462	CARDIAC ARREST DUE TO UNDERLYING CARDIAC CONDITION
I468	CARDIAC ARREST DUE TO OTHER UNDERLYING CONDITION
I469	CARDIAC ARREST, CAUSE UNSPECIFIED
I470	RE-ENTRY VENTRICULAR ARRHYTHMIA
I471	SUPRAVENTRICULAR TACHYCARDIA
I4710	SUPRAVENTRICULAR TACHYCARDIA, UNSPECIFIED
I4711	INAPPROPRIATE SINUS TACHYCARDIA, SO STATED
I4719	OTHER SUPRAVENTRICULAR TACHYCARDIA
I472	VENTRICULAR TACHYCARDIA
I4720	VENTRICULAR TACHYCARDIA, UNSPECIFIED
I4721	TORSADES DE POINTES
I4729	OTHER VENTRICULAR TACHYCARDIA
I479	PAROXYSMAL TACHYCARDIA, UNSPECIFIED
I480	PAROXYSMAL ATRIAL FIBRILLATION

**Table 6 (diagnosis of severe cardiac disease)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
I481	PERSISTENT ATRIAL FIBRILLATION
I4811	LONGSTANDING PERSISTENT ATRIAL FIBRILLATION
I4819	OTHER PERSISTENT ATRIAL FIBRILLATION
I482	CHRONIC ATRIAL FIBRILLATION
I4820	CHRONIC ATRIAL FIBRILLATION, UNSPECIFIED
I4821	PERMANENT ATRIAL FIBRILLATION
I483	TYPICAL ATRIAL FLUTTER
I484	ATYPICAL ATRIAL FLUTTER
I4891	UNSPECIFIED ATRIAL FIBRILLATION
I4892	UNSPECIFIED ATRIAL FLUTTER
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
I501	LEFT VENTRICULAR FAILURE
I5020	UNSPECIFIED SYSTOLIC (CONGESTIVE) HEART FAILURE
I5021	ACUTE SYSTOLIC (CONGESTIVE) HEART FAILURE

**Table 6 (diagnosis of severe cardiac disease)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
I5022	CHRONIC SYSTOLIC (CONGESTIVE) HEART FAILURE
I5023	ACUTE ON CHRONIC SYSTOLIC (CONGESTIVE) HEART FAILURE
I5030	UNSPECIFIED DIASTOLIC (CONGESTIVE) HEART FAILURE
I5031	ACUTE DIASTOLIC (CONGESTIVE) HEART FAILURE
I5032	CHRONIC DIASTOLIC (CONGESTIVE) HEART FAILURE
I5033	ACUTE ON CHRONIC DIASTOLIC (CONGESTIVE) HEART FAILURE
I5040	UNSPECIFIED COMBINED SYSTOLIC (CONGESTIVE) AND DIASTOLIC (CONGESTIVE) HEART FAILURE
I5041	ACUTE COMBINED SYSTOLIC (CONGESTIVE) AND DIASTOLIC (CONGESTIVE) HEART FAILURE
I5042	CHRONIC COMBINED SYSTOLIC (CONGESTIVE) AND DIASTOLIC (CONGESTIVE) HEART FAILURE
I5043	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
I5083	HIGH OUTPUT HEART FAILURE
I5084	END STAGE HEART FAILURE
I5089	OTHER HEART FAILURE
I509	HEART FAILURE, UNSPECIFIED

**Table 7 (claim for an MAOI)****Required claims: 1****Look back timeframe: 14 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
26871	LINEZOLID 100 MG/5 ML SUSP
26873	LINEZOLID 600 MG/300 ML-D5W
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
24654	RASAGILINE MESYLATE 1 MG TAB
27081	RASAGILINE MESYLATE 0.5MG TAB
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

**Table 8 (diagnosis of ESRD)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
N186	END STAGE RENAL DISEASE
Z992	DEPENDENCE ON RENAL DIALYSIS

**Table 10 (diagnosis of severe renal impairment)****Required diagnosis: 1****Look back timeframe: 365 days**

ICD-10 Code	Description
I120	HYPERTENSIVE CHRONIC KIDNEY DISEASE WITH STAGE 5 CHRONIC KIDNEY DISEASE OR END STAGE RENAL DISEASE
I1311	HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE WITHOUT HEART FAILURE, WITH STAGE 5 CHRONIC KIDNEY DISEASE, OR END STAGE RENAL DISEASE
I132	HYPERTENSIVE HEART AND CHRONIC KIDNEY DISEASE WITH HEART FAILURE AND WITH STAGE 5 CHRONIC KIDNEY DISEASE, OR END STAGE RENAL DISEASE
N184	CHRONIC KIDNEY DISEASE, STAGE 4 (SEVERE)
N185	CHRONIC KIDNEY DISEASE, STAGE 5



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### Clinical Criteria References

1. Texas Health and Human Services. Psychotropic Medication Utilization Parameters for Children and Youth in Texas Public Behavioral Health (6<sup>th</sup> version). Developed by The Parameters Workgroup of the Psychiatric Executive Formulary Committee, Health and Specialty Care Division, Texas Health and Human Services Commission. Review and Input provided by The University of Texas at Austin College of Pharmacy, The UT System Medical Schools, Texas A&M Health Science Center and Texas Tech University Health Sciences Center. June 2019.
2. 2025 ICD-10-CM Diagnosis Codes. 2025. Available at [www.icd10data.com](http://www.icd10data.com). Accessed on August 11, 2025.
3. Clinical Pharmacology [online database]. Tampa, FL: Elsevier/Gold Standard, Inc.; 2025. Available at [www.clinicalpharmacology.com](http://www.clinicalpharmacology.com). Accessed on August 11, 2025.
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## Binge Eating Disorder (BED) Agents

### 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
10/23/2020	<ul style="list-style-type: none"><li>Initial publication and presentation to DUR Board</li></ul>
03/01/2021	<ul style="list-style-type: none"><li>Added the following statement for Vyvanse: ADHD and Binge Eating Disorder criteria are applicable to Vyvanse. The client must meet one or the other of the criteria sets but is not required to meet both.</li><li>Removed check for ADD/ADHD diagnosis and dosing</li></ul>
11/11/2021	<ul style="list-style-type: none"><li>Annual review by staff</li><li>Updated table 7 (MAOIs) – added GCNs for linezolid (26871 and 26873)</li><li>Updated references</li></ul>
02/13/2024	<ul style="list-style-type: none"><li>Annual review by staff</li><li>Added GCNs for lisdexamfetamine (37647, 99366, 98071, 99367, 98072, 99368, 98073)</li><li>Updated references</li></ul>
01/17/2025	<ul style="list-style-type: none"><li>Annual review by staff</li><li>Updated maximum dose to less than or equal to 70 mg/day</li><li>Added GCNs for Celexa (16344), Lexapro (19035), Prozac (16357, 16356, 12929), Zoloft (16376), Dyanavel (51439, 51452, 51453, 51454), and Ritalin (36195) to the Supporting Tables section</li><li>Updated references</li></ul>
08/29/2025	<ul style="list-style-type: none"><li>Annual review by staff</li><li>Updated severe renal impairment maximum dose to less than or equal to 50 mg/day</li><li>Added question for maximum dose of less than or equal to 70 mg/day</li><li>Added ICD-10 codes F50811 and F50812 to the Diagnosis of BED supporting table</li><li>Added ICD-10 codes F1011, F10130, F10131, F10132, F10139, F1021, F1111, F1113, F1211, F1213, F1223, F1311, F13130, F13131, F13132, F13139, F1411, F1413, F1421, F1511, F1513, F1521, F1611, F1621, F1811, F1821, F1911, F19130, F19131, F19132, F19139, F1921, and Z7151 to the Diagnosis of Substance Abuse supporting table</li></ul>

Publication Date	Notes
	<ul style="list-style-type: none"><li>Added ICD-10 codes I219, I21A1, I21A9, I21B, I4710, I4711, I4719, I4720, I4721, I4729, I4811, I4819, I4820, I4821, I50810, I50811, I50812, I50813, I50814, I5082, I5083, I5084, and I5089 to the Diagnosis of Severe Cardiac Disease supporting table</li><li>Added GCNs for Xelstrym (52127, 52133, 52134, 52135) to the ER Stimulant supporting table</li><li>Added ICD-10 code Z992 to the Diagnosis of ESRD supporting table</li><li>Added ICD-10 codes I120, I1311, and I132 to the Diagnosis of Severe Renal Impairment supporting table</li><li>Updated references</li></ul>