Texas Prior Authorization Program
Clinical Criteria

Drug/Drug Class

COX-2 Inhibitors

Clinical Criteria Information included in this Document

Celebrex (Celecoxib)

- 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

Mobic (Meloxicam)

- Drugs requiring prior authorization: the list of drugs requiring prior authorization for this clinical criteria
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- Supporting tables: a collection of information associated with the steps within the criteria (diagnosis codes, procedure codes, and therapy codes); provided when applicable
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Note: Click the hyperlink to navigate directly to that section.

Revision Notes

Added GCN for Vyscoxa (58139) to the Celebrex Drugs Requiring PA table

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Celebrex (Celecoxib)

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.

Drugs Requiring Prior Authorization	
Label Name	**GCN**
CELEBREX 100 MG CAPSULE	42001
CELEBREX 200 MG CAPSULE	42002
CELEBREX 400 MG CAPSULE	18127
CELEBREX 50 MG CAPSULE	97785
CELECOXIB 100 MG CAPSULE	42001
CELECOXIB 200 MG CAPSULE	42002
CELECOXIB 400 MG CAPSULE	18127
CELECOXIB 50 MG CAPSULE	97785
VYSCOXA 10 MG/ML SUSPENSION	58139

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Clinical Criteria Logic

1. Is the client greater than or equal to (≥) 2 and less than (<) 18 years of age?

   [ ] Yes – Go to #2

   [ ] No – Go to #3

2. Does the client have a diagnosis of juvenile rheumatoid arthritis (JRA) in the last 730 days?

   [ ] Yes – Approve (180 days)

   [ ] No – Deny

3. Is the client greater than or equal to (≥) 18 years of age?

   [ ] Yes – Go to #4

   [ ] No – Deny

4. Is the client greater than or equal to (≥) 60 years of age?

   [ ] Yes – Approve (365 days)

   [ ] No – Go to #5

5. Does the client have a diagnosis of FAP or ankylosing spondylitis in the last 730 days?

   [ ] Yes – Approve (365 days)

   [ ] No – Go to #6

6. Does the client have a diagnosis of PUD or GI bleed in the last 730 days?

   [ ] Yes – Approve (365 days)

   [ ] No – Go to #7

7. Does the client have a history of warfarin therapy for 30 days in the last 45 days?

   [ ] Yes – Approve (365 days)

   [ ] No – Go to #8

8. Does the client have a history of corticosteroid therapy for greater than or equal to (≥) 35 days in the last 90 days?

   [ ] Yes – Approve (365 days)

   [ ] No – Go to #9

9. Has the client taken high dose NSAID therapy for 30 days in the last 45 days?

   [ ] Yes – Approve (365 days)

[ ] No – Go to #10

10. Does the client have a diagnosis of rheumatoid arthritis (RA), osteoarthritis (OA) or JRA in the last 730 days?

    [ ] Yes – Approve (365 days)

    [ ] No – Go to #11

11. Does the client have a history of a DMARD agent for 30 days in the last 60 days?

    [ ] Yes – Approve (365 days)

    [ ] No – Go to #12

12. Does the client have a history of 2 or more NSAID agents for 30 days in the last 180 days?

    [ ] Yes – Approve (365 days)

    [ ] No – Deny

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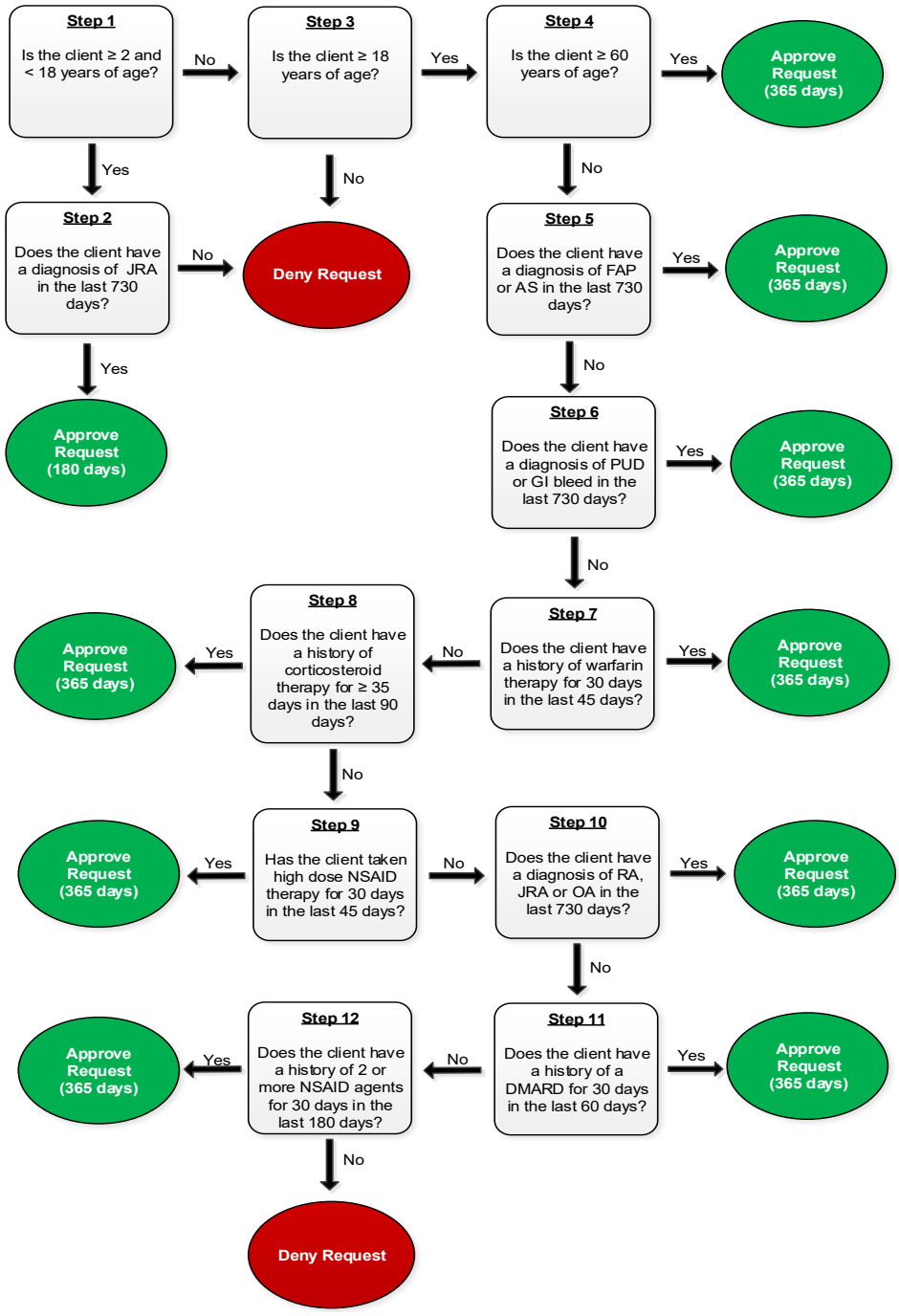
Clinical Criteria Logic Diagram



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Clinical Criteria Supporting Tables

Table 2 (diagnosis of JRA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M0800	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS OF UNSPECIFIED SITE
M08011	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, RIGHT SHOULDER
M08012	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, LEFT SHOULDER
M08019	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED SHOULDER
M08021	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, RIGHT ELBOW
M08022	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, LEFT ELBOW
M08029	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED ELBOW
M08031	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, RIGHT WRIST
M08032	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, LEFT WRIST
M08039	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED WRIST
M08041	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, RIGHT HAND
M08042	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, LEFT HAND
M08049	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED HAND
M08051	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, RIGHT HIP
M08052	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, LEFT HIP
M08059	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED HIP
M08061	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, RIGHT KNEE
M08062	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, LEFT KNEE
M08069	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED KNEE
M08071	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, RIGHT ANKLE AND FOOT

Table 2 (diagnosis of JRA) **Required diagnosis: *1*** **Look back timeframe: *730* days**	
ICD-10 Code	**Description**
M08072	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, LEFT ANKLE AND FOOT
M08079	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED ANKLE AND FOOT
M0808	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, VERTEBRAE
M0809	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, MULTIPLE SITES
M081	JUVENILE ANKYLOSING SPONDYLITIS
M0820	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, UNSPECIFIED SITE
M08211	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, RIGHT SHOULDER
M08212	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, LEFT SHOULDER
M08219	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, UNSPECIFIED SHOULDER
M08221	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, RIGHT ELBOW
M08222	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, LEFT ELBOW
M08229	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, UNSPECIFIED ELBOW
M08231	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, RIGHT WRIST
M08232	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, LEFT WRIST
M08239	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, UNSPECIFIED WRIST
M08241	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, RIGHT HAND
M08242	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, LEFT HAND
M08249	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, UNSPECIFIED HAND
M08251	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, RIGHT HIP

Table 2 (diagnosis of JRA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M08252	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, LEFT HIP
M08259	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, UNSPECIFIED HIP
M08261	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, RIGHT KNEE
M08262	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, LEFT KNEE
M08269	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, UNSPECIFIED KNEE
M08271	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, RIGHT ANKLE AND FOOT
M08272	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, LEFT ANKLE AND FOOT
M08279	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, UNSPECIFIED ANKLE AND FOOT
M0828	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, VERTEBRAE
M0829	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, MULTIPLE SITES
M083	JUVENILE RHEUMATOID POLYARTHRITIS (SERONEGATIVE)
M0840	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED SITE
M08411	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, RIGHT SHOULDER
M08412	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, LEFT SHOULDER
M08419	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED SHOULDER
M08421	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, RIGHT ELBOW
M08422	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, LEFT ELBOW
M08429	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED ELBOW
M08431	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, RIGHT WRIST
M08432	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, LEFT WRIST

Table 2 (diagnosis of JRA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M08439	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED WRIST
M08441	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, RIGHT HAND
M08442	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, LEFT HAND
M08449	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED HAND
M08451	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, RIGHT HIP
M08452	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, LEFT HIP
M08459	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED HIP
M08461	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, RIGHT KNEE
M08462	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, LEFT KNEE
M08469	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED KNEE
M08471	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, RIGHT ANKLE AND FOOT
M08472	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, LEFT ANKLE AND FOOT
M08479	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED ANKLE AND FOOT
M0848	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, VERTEBRAE
M0880	OTHER JUVENILE ARTHRITIS, UNSPECIFIED SITE
M08811	OTHER JUVENILE ARTHRITIS, RIGHT SHOULDER
M08812	OTHER JUVENILE ARTHRITIS, LEFT SHOULDER
M08819	OTHER JUVENILE ARTHRITIS, UNSPECIFIED SHOULDER
M08821	OTHER JUVENILE ARTHRITIS, RIGHT ELBOW
M08822	OTHER JUVENILE ARTHRITIS, LEFT ELBOW
M08829	OTHER JUVENILE ARTHRITIS, UNSPECIFIED ELBOW
M08831	OTHER JUVENILE ARTHRITIS, RIGHT WRIST

Table 2 (diagnosis of JRA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M08832	OTHER JUVENILE ARTHRITIS, LEFT WRIST
M08839	OTHER JUVENILE ARTHRITIS, UNSPECIFIED WRIST
M08841	OTHER JUVENILE ARTHRITIS, RIGHT HAND
M08842	OTHER JUVENILE ARTHRITIS, LEFT HAND
M08849	OTHER JUVENILE ARTHRITIS, UNSPECIFIED HAND
M08851	OTHER JUVENILE ARTHRITIS, RIGHT HIP
M08852	OTHER JUVENILE ARTHRITIS, LEFT HIP
M08859	OTHER JUVENILE ARTHRITIS, UNSPECIFIED HIP
M08861	OTHER JUVENILE ARTHRITIS, RIGHT KNEE
M08862	OTHER JUVENILE ARTHRITIS, LEFT KNEE
M08869	OTHER JUVENILE ARTHRITIS, UNSPECIFIED KNEE
M08871	OTHER JUVENILE ARTHRITIS, RIGHT ANKLE AND FOOT
M08872	OTHER JUVENILE ARTHRITIS, LEFT ANKLE AND FOOT
M08879	OTHER JUVENILE ARTHRITIS, UNSPECIFIED ANKLE AND FOOT
M0888	OTHER JUVENILE ARTHRITIS, OTHER SPECIFIED SITE
M0889	OTHER JUVENILE ARTHRITIS, MULTIPLE SITES
M0890	JUVENILE ARTHRITIS, UNSPECIFIED, UNSPECIFIED SITE
M08911	JUVENILE ARTHRITIS, UNSPECIFIED, RIGHT SHOULDER
M08912	JUVENILE ARTHRITIS, UNSPECIFIED, LEFT SHOULDER
M08919	JUVENILE ARTHRITIS, UNSPECIFIED, UNSPECIFIED SHOULDER
M08921	JUVENILE ARTHRITIS, UNSPECIFIED, RIGHT ELBOW
M08922	JUVENILE ARTHRITIS, UNSPECIFIED, LEFT ELBOW
M08929	JUVENILE ARTHRITIS, UNSPECIFIED, UNSPECIFIED ELBOW

Table 2 (diagnosis of JRA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M08931	JUVENILE ARTHRITIS, UNSPECIFIED, RIGHT WRIST
M08932	JUVENILE ARTHRITIS, UNSPECIFIED, LEFT WRIST
M08939	JUVENILE ARTHRITIS, UNSPECIFIED, UNSPECIFIED WRIST
M08941	JUVENILE ARTHRITIS, UNSPECIFIED, RIGHT HAND
M08942	JUVENILE ARTHRITIS, UNSPECIFIED, LEFT HAND
M08949	JUVENILE ARTHRITIS, UNSPECIFIED, UNSPECIFIED HAND
M08951	JUVENILE ARTHRITIS, UNSPECIFIED, RIGHT HIP
M08952	JUVENILE ARTHRITIS, UNSPECIFIED, LEFT HIP
M08959	JUVENILE ARTHRITIS, UNSPECIFIED, UNSPECIFIED HIP
M08961	JUVENILE ARTHRITIS, UNSPECIFIED, RIGHT KNEE
M08962	JUVENILE ARTHRITIS, UNSPECIFIED, LEFT KNEE
M08969	JUVENILE ARTHRITIS, UNSPECIFIED, UNSPECIFIED KNEE
M08971	JUVENILE ARTHRITIS, UNSPECIFIED, RIGHT ANKLE AND FOOT
M08972	JUVENILE ARTHRITIS, UNSPECIFIED, LEFT ANKLE AND FOOT
M08979	JUVENILE ARTHRITIS, UNSPECIFIED, UNSPECIFIED ANKLE AND FOOT
M0898	JUVENILE ARTHRITIS, UNSPECIFIED, VERTEBRAE
M0899	JUVENILE ARTHRITIS, UNSPECIFIED, MULTIPLE SITES

Table 5 (diagnosis of FAP or ankylosing spondylitis) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
D120	BENIGN NEOPLASM OF CECUM

Table 5 (diagnosis of FAP or ankylosing spondylitis) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
D121	BENIGN NEOPLASM OF APPENDIX
D122	BENIGN NEOPLASM OF ASCENDING COLON
D123	BENIGN NEOPLASM OF TRANSVERSE COLON
D124	BENIGN NEOPLASM OF DESCENDING COLON
D125	BENIGN NEOPLASM OF SIGMOID COLON
D126	BENIGN NEOPLASM OF COLON, UNSPECIFIED
K635	POLYP OF COLON
M450	ANKYLOSING SPONDYLITIS OF MULTIPLE SITES IN SPINE
M451	ANKYLOSING SPONDYLITIS OF OCCIPITO-ATLANTO-AXIAL REGION
M452	ANKYLOSING SPONDYLITIS OF CERVICAL REGION
M453	ANKYLOSING SPONDYLITIS OF CERVICOTHORACIC REGION
M454	ANKYLOSING SPONDYLITIS OF THORACIC REGION
M455	ANKYLOSING SPONDYLITIS OF THORACOLUMBAR REGION
M456	ANKYLOSING SPONDYLITIS LUMBAR REGION
M457	ANKYLOSING SPONDYLITIS OF LUMBOSACRAL REGION
M458	ANKYLOSING SPONDYLITIS SACRAL AND SACROCOCCYGEAL REGION
M459	ANKYLOSING SPONDYLITIS OF UNSPECIFIED SITES IN SPINE

Table 6 (diagnosis of PUD or GI bleed) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
K250	ACUTE GASTRIC ULCER WITH HEMORRHAGE

Table 6 (diagnosis of PUD or GI bleed) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
K251	ACUTE GASTRIC ULCER WITH PERFORATION
K252	ACUTE GASTRIC ULCER WITH BOTH HEMORRHAGE AND PERFORATION
K253	ACUTE GASTRIC ULCER WITHOUT HEMORRHAGE OR PERFORATION
K254	CHRONIC OR UNSPECIFIED GASTRIC ULCER WITH HEMORRHAGE
K255	CHRONIC OR UNSPECIFIED GASTRIC ULCER WITH PERFORATION
K256	CHRONIC OR UNSPECIFIED GASTRIC ULCER WITH BOTH HEMORRHAGE AND PERFORATION
K257	CHRONIC GASTRIC ULCER WITHOUT HEMORRHAGE OR PERFORATION
K259	GASTRIC ULCER, UNSPECIFIED AS ACUTE OR CHRONIC, WITHOUT HEMORRHAGE OR PERFORATION
K260	ACUTE DUODENAL ULCER WITH HEMORRHAGE
K261	ACUTE DUODENAL ULCER WITH PERFORATION
K262	ACUTE DUODENAL ULCER WITH BOTH HEMORRHAGE AND PERFORATION
K263	ACUTE DUODENAL ULCER WITHOUT HEMORRHAGE OR PERFORATION
K264	CHRONIC OR UNSPECIFIED DUODENAL ULCER WITH HEMORRHAGE
K265	CHRONIC OR UNSPECIFIED DUODENAL ULCER WITH PERFORATION
K266	CHRONIC OR UNSPECIFIED DUODENAL ULCER WITH BOTH HEMORRHAGE AND PERFORATION
K267	CHRONIC DUODENAL ULCER WITHOUT HEMORRHAGE OR PERFORATION
K269	DUODENAL ULCER, UNSPECIFIED AS ACUTE OR CHRONIC, WITHOUT HEMORRHAGE OR PERFORATION
K270	ACUTE PEPTIC ULCER, SITE UNSPECIFIED, WITH HEMORRHAGE
K271	ACUTE PEPTIC ULCER, SITE UNSPECIFIED, WITH PERFORATION
K272	ACUTE PEPTIC ULCER, SITE UNSPECIFIED, WITH BOTH HEMORRHAGE AND PERFORATION

Table 6 (diagnosis of PUD or GI bleed) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
K273	ACUTE PEPTIC ULCER, SITE UNSPECIFIED, WITHOUT HEMORRHAGE OR PERFORATION
K274	CHRONIC OR UNSPECIFIED PEPTIC ULCER, SITE UNSPECIFIED, WITH HEMORRHAGE
K275	CHRONIC OR UNSPECIFIED PEPTIC ULCER, SITE UNSPECIFIED, WITH PERFORATION
K276	CHRONIC OR UNSPECIFIED PEPTIC ULCER, SITE UNSPECIFIED, WITH BOTH HEMORRHAGE AND PERFORATION
K277	CHRONIC PEPTIC ULCER, SITE UNSPECIFIED, WITHOUT HEMORRHAGE OR PERFORATION
K279	PEPTIC ULCER, SITE UNSPECIFIED, UNSPECIFIED AS ACUTE OR CHRONIC, WITHOUT HEMORRHAGE OR PERFORATION
K280	ACUTE GASTROJEJUNAL ULCER WITH HEMORRHAGE
K281	ACUTE GASTROJEJUNAL ULCER WITH PERFORATION
K282	ACUTE GASTROJEJUNAL ULCER WITH BOTH HEMORRHAGE AND PERFORATION
K283	ACUTE GASTROJEJUNAL ULCER WITHOUT HEMORRHAGE OR PERFORATION
K284	CHRONIC OR UNSPECIFIED GASTROJEJUNAL ULCER WITH HEMORRHAGE
K285	CHRONIC OR UNSPECIFIED GASTROJEJUNAL ULCER WITH PERFORATION
K286	CHRONIC OR UNSPECIFIED GASTROJEJUNAL ULCER WITH BOTH HEMORRHAGE AND PERFORATION
K287	CHRONIC GASTROJEJUNAL ULCER WITHOUT HEMORRHAGE OR PERFORATION
K289	GASTROJEJUNAL ULCER, UNSPECIFIED AS ACUTE OR CHRONIC, WITHOUT HEMORRHAGE OR PERFORATION
K920	HEMATEMESIS
K921	MELENA
K922	GASTROINTESTINAL HEMORRHAGE, UNSPECIFIED

Table 7 (history of warfarin therapy for 30 days) Required quantity: *1* Look back timeframe: *45* days	
GCN	**Label Name**
25792	COUMADIN 1 MG TABLET
25791	COUMADIN 2 MG TABLET
25794	COUMADIN 2.5 MG TABLET
25796	COUMADIN 3 MG TABLET
25793	COUMADIN 5 MG TABLET
25792	JANTOVEN 1 MG TABLET
25791	JANTOVEN 2 MG TABLET
25794	JANTOVEN 2.5 MG TABLET
25796	JANTOVEN 3 MG TABLET
25797	JANTOVEN 4 MG TABLET
25793	JANTOVEN 5 MG TABLET
25798	JANTOVEN 6 MG TABLET
25795	JANTOVEN 7.5 MG TABLET
25790	JANTOVEN 10 MG TABLET
25792	WARFARIN SODIUM 1 MG TABLET
25791	WARFARIN SODIUM 2 MG TABLET
25794	WARFARIN SODIUM 2.5 MG TABLET
25796	WARFARIN SODIUM 3 MG TABLET
25797	WARFARIN SODIUM 4 MG TABLET
25793	WARFARIN SODIUM 5 MG TABLET
25798	WARFARIN SODIUM 6 MG TABLET
25795	WARFARIN SODIUM 7.5 MG TABLET

Table 7 (history of warfarin therapy for 30 days) Required quantity: *1* Look back timeframe: *45* days	
GCN	**Label Name**
25790	WARFARIN SODIUM 10 MG TABLET

Table 8 (history of a corticosteroid therapy for ≥ 35 days) Required quantity: *1* Look back timeframe: *90* days	
GCN	**Label Name**
28680	BUDESONIDE EC 3MG CAPSULE
26783	CORTEF 5 MG TABLET
26781	CORTEF 10 MG TABLET
26782	CORTEF 20 MG TABLET
27400	DEXAMETHASONE 0.5 MG/5 ML ELX
27411	DEXAMETHASONE 0.5 MG/5 ML LIQ
27412	DEXAMETHASONE 1 MG/1 ML SOLN
27422	DEXAMETHASONE 0.5 MG TABLET
27425	DEXAMETHASONE 0.75 MG TABLET
27424	DEXAMETHASONE 1 MG TABLET
27427	DEXAMETHASONE 1.5 MG TABLET
27426	DEXAMETHASONE 2 MG TABLET
27428	DEXAMETHASONE 4 MG TABLET
27429	DEXAMETHASONE 6 MG TABLET
66392	HYDROCORTISONE 100MG/60ML
26783	HYDROCORTISONE 5 MG TABLET
26781	HYDROCORTISONE 10 MG TABLET

Table 8 (history of a corticosteroid therapy for ≥ 35 days) Required quantity: *1* Look back timeframe: *90* days	
GCN	**Label Name**
26782	HYDROCORTISONE 20 MG TABLET
27056	MEDROL 4 MG TABLET
27058	MEDROL 8 MG TABLET
27051	MEDROL 16 MG TABLET
27055	MEDROL 32 MG TABLET
27056	METHYLPREDNISOLONE 4 MG TAB
27058	METHYLPREDNISOLONE 8 MG TAB
27051	METHYLPREDNISOLONE 16 MG TAB
27055	METHYLPREDNISOLONE 32 MG TAB
99610	MILLIPRED 10 MG/5 ML SOLUTION
26963	MILLIPRED 5 MG TABLET
09115	PREDNISOLONE 5 MG/5 ML SOLN
26800	PREDNISOLONE 15 MG/5 ML SOLN
33806	PREDNISOLONE 15 MG/5 ML SOLN
99610	PREDNISOLONE 10 MG/5 ML SOLN
93945	PREDNISOLONE 20 MG/5 ML SOLN
27108	PREDNISOLONE ODT 10MG TABLET
27109	PREDNISOLONE ODT 15MG TABLET
27114	PREDNISOLONE ODT 30MG TABLET
27171	PREDNISONE 1 MG TABLET
27173	PREDNISONE 2.5 MG TABLET
27176	PREDNISONE 5 MG TABLET
27172	PREDNISONE 10 MG TABLET

Table 8 (history of a corticosteroid therapy for ≥ 35 days) Required quantity: *1* Look back timeframe: *90* days	
GCN	**Label Name**
27174	PREDNISONE 20 MG TABLET
27177	PREDNISONE 50 MG TABLET
27160	PREDNISONE 5MG/5ML SOLUTION
27161	PREDNISONE 5MG/5ML SOLUTION

Table 9 (history of a high dose NSAID therapy for 30 days) Required quantity: *1* Look back timeframe: *45* days	
GCN	**Label Name**
62729	ARTHROTEC EC 50 MG-200 MCG TAB
06263	ARTHROTEC EC 75 MG-200 MCG TAB
35930	CHILDREN IBUPROFEN 100 MG/5 ML
01750	DAYPRO 600 MG CAPLET
13960	DICLOFENAC POT 50 MG TABLET
35851	DICLOFENAC SOD DR 50 MG TAB
35851	DICLOFENAC SOD EC 50 MG TAB
35852	DICLOFENAC SOD DR 75 MG TAB
35852	DICLOFENAC SOD EC 75 MG TAB
35850	DICLOFENAC SOD EC 25 MG TAB
35850	DICLOFENAC SOD DR 25 MG TAB
13310	DICLOFENAC SOD ER 100 MG TAB
86831	DICLOFENAC SODIUM 3% GEL
62729	DICLOFENAC-MISOPROST 50-200 TB

Table 9 (history of a high dose NSAID therapy for 30 days) Required quantity: *1* Look back timeframe: *45* days	
GCN	**Label Name**
06263	DICLOFENAC-MISOPROST 75-0.2 TB
16850	DIFLUNISAL 250 MG TABLET
16851	DIFLUNISAL 500MG TABLET
16850	DOLOBID 250 MG TABLET
57589	DOLOBID 375 MG TABLET
16851	DOLOBID 500 MG TABLET
30547	DUEXIS 800-26.6MG TABLET
33870	ETODOLAC 200 MG CAPSULE
33871	ETODOLAC 300 MG CAPSULE
61761	ETODOLAC 400 MG TABLET
61766	ETODOLAC 500 MG TABLET
61765	ETODOLAC ER 400 MG TABLET
61767	ETODOLAC ER 500 MG TABLET
61762	ETODOLAC ER 600 MG TABLET
35820	FELDENE 10 MG CAPSULE
35821	FELDENE 20 MG CAPSULE
35760	FENOPROFEN 600 MG TABLET
27999	FENOPROFEN CALCIUM 400 MG CAP
97958	FLECTOR 1.3% PATCH
35711	FLURBIPROFEN 100 MG TABLET
63101	HYDROCODONE BT-IBUPROFEN TAB
99371	HYDROCODONE-IBUPROFEN 10-200MG TABLET
22678	HYDROCODONE-IBUPROFEN 5-200MG TABLET

Table 9 (history of a high dose NSAID therapy for 30 days) Required quantity: *1* Look back timeframe: *45* days	
GCN	**Label Name**
35431	IBUPROFEN 200 MG SOFTGEL
35743	IBUPROFEN 200 MG TABLET
35740	IBUPROFEN 300 MG TABLET
35741	IBUPROFEN 400 MG TABLET
35742	IBUPROFEN 600 MG TABLET
35744	IBUPROFEN 800 MG TABLET
35749	IBUPROFEN JR STR 100 MG CHEW
36490	INDOCIN 25MG/5 ML SUSPENSION
35680	INDOMETHACIN 25 MG CAPSULE
35681	INDOMETHACIN 50 MG CAPSULE
35690	INDOMETHACIN ER 75 MG CAPSULE
35931	INFANT IBUPROFEN SUSP DROP
34420	KETOPROFEN 50 MG CAPSULE
34421	KETOPROFEN 75 MG CAPSULE
33792	KETOPROFEN ER 200 MG CAPSULE
32531	KETOROLAC 10 MG TABLET
35236	KETOROLAC 60 MG/2 ML VIAL
35811	MECLOFENAMATE 50 MG CAPSULE
35810	MECLOFENAMATE 100 MG CAPSULE
16530	MEFENAMIC ACID 250 MG CAPSULE
32961	NABUMETONE 500 MG TABLET
32962	NABUMETONE 750 MG TABLET
27999	NALFON 400MG CAPSULE

Table 9 (history of a high dose NSAID therapy for 30 days) Required quantity: *1* Look back timeframe: *45* days	
GCN	**Label Name**
41670	NAPROXEN 125 MG/5 ML SUSPEN
35790	NAPROXEN 250 MG TABLET
35792	NAPROXEN 375 MG TABLET
35793	NAPROXEN 500 MG TABLET
61850	NAPROXEN EC 375 MG TABLET
61851	NAPROXEN EC 500 MG TABLET
47132	NAPROXEN SODIUM 220 MG TABLET
47130	NAPROXEN SODIUM 275 MG TAB
47131	NAPROXEN SODIUM 550 MG TAB
92253	NAPROXEN SOD ER 500 MG TABLET
98900	NAPROXEN SOD CR 375 MG TABLET
28572	NAPROXEN-ESOMEPRAZOLE DR 375-20 MG
28570	NAPROXEN-ESOMEPRAZOLE DR 500-20 MG
01750	OXAPROZIN 600 MG TABLET
23827	OXYCODONE-IBUPROFEN 5-400 TAB
35936	PENNSAID 2% PUMP
35820	PIROXICAM 10 MG CAPSULE
35821	PIROXICAM 20 MG CAPSULE
35431	QC IBUPROFEN 200 MG SOFTGEL
35800	SULINDAC 150 MG TABLET
35801	SULINDAC 200 MG TABLET
99597	SUMATRIPTAN-NAPROXEN 85-500 MG
35780	TOLMETIN SODIUM 200 MG TAB

Table 9 (history of a high dose NSAID therapy for 30 days) Required quantity: *1* Look back timeframe: *45* days	
GCN	**Label Name**
35770	TOLMETIN SODIUM 400 MG CAP
35781	TOLMETIN SODIUM 600 MG TAB
99597	TREXIMET 85-500 MG TABLET
28572	VIMOVO 375-20 MG TABLET
28570	VIMOVO 500-20 MG TABLET
45680	VOLTAREN 1% GEL

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M0500	FELTY'S SYNDROME, UNSPECIFIED SITE
M05011	FELTY'S SYNDROME, RIGHT SHOULDER
M05012	FELTY'S SYNDROME, LEFT SHOULDER
M05019	FELTY'S SYNDROME, UNSPECIFIED SHOULDER
M05021	FELTY'S SYNDROME, RIGHT ELBOW
M05022	FELTY'S SYNDROME, LEFT ELBOW
M05029	FELTY'S SYNDROME, UNSPECIFIED ELBOW
M05031	FELTY'S SYNDROME, RIGHT WRIST
M05032	FELTY'S SYNDROME, LEFT WRIST
M05039	FELTY'S SYNDROME, UNSPECIFIED WRIST
M05041	FELTY'S SYNDROME, RIGHT HAND
M05042	FELTY'S SYNDROME, LEFT HAND

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M05049	FELTY'S SYNDROME, UNSPECIFIED HAND
M05051	FELTY'S SYNDROME, RIGHT HIP
M05052	FELTY'S SYNDROME, LEFT HIP
M05059	FELTY'S SYNDROME, UNSPECIFIED HIP
M05061	FELTY'S SYNDROME, RIGHT KNEE
M05062	FELTY'S SYNDROME, LEFT KNEE
M05069	FELTY'S SYNDROME, UNSPECIFIED KNEE
M05071	FELTY'S SYNDROME, RIGHT ANKLE AND FOOT
M05072	FELTY'S SYNDROME, LEFT ANKLE AND FOOT
M05079	FELTY'S SYNDROME, UNSPECIFIED ANKLE AND FOOT
M0509	FELTY'S SYNDROME, MULTIPLE SITES
M0510	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED SITE
M05111	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF RIGHT SHOULDER
M05112	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF LEFT SHOULDER
M05119	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED SHOULDER
M05121	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF RIGHT ELBOW
M05122	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF LEFT ELBOW
M05129	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED ELBOW
M05131	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF RIGHT WRIST

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M05132	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF LEFT WRIST
M05139	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED WRIST
M05141	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF RIGHT HAND
M05142	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF LEFT HAND
M05149	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED HAND
M05151	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF RIGHT HIP
M05152	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF LEFT HIP
M05159	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED HIP
M05161	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF RIGHT KNEE
M05162	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF LEFT KNEE
M05169	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED KNEE
M05171	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF RIGHT ANKLE AND FOOT
M05172	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF LEFT ANKLE AND FOOT
M05179	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED ANKLE AND FOOT
M0519	RHEUMATOID LUNG DISEASE WITH RHEUMATOID ARTHRITIS OF MULTIPLE SITES
M0520	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED SITE
M05211	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF RIGHT SHOULDER

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M05212	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF LEFT SHOULDER
M05219	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED SHOULDER
M05221	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF RIGHT ELBOW
M05222	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF LEFT ELBOW
M05229	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED ELBOW
M05231	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF RIGHT WRIST
M05232	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF LEFT WRIST
M05239	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED WRIST
M05241	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF RIGHT HAND
M05242	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF LEFT HAND
M05249	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED HAND
M05251	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF RIGHT HIP
M05252	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF LEFT HIP
M05259	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED HIP
M05261	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF RIGHT KNEE
M05262	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF LEFT KNEE
M05269	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED KNEE
M05271	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF RIGHT ANKLE AND FOOT
M05272	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF LEFT ANKLE AND FOOT

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M05279	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED ANKLE AND FOOT
M0529	RHEUMATOID VASCULITIS WITH RHEUMATOID ARTHRITIS OF MULTIPLE SITES
M0530	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED SITE
M05311	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF RIGHT SHOULDER
M05312	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF LEFT SHOULDER
M05319	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED SHOULDER
M05321	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF RIGHT ELBOW
M05322	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF LEFT ELBOW
M05329	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED ELBOW
M05331	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF RIGHT WRIST
M05332	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF LEFT WRIST
M05339	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED WRIST
M05341	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF RIGHT HAND
M05342	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF LEFT HAND
M05349	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED HAND
M05351	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF RIGHT HIP

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M05352	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF LEFT HIP
M05359	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED HIP
M05361	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF RIGHT KNEE
M05362	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF LEFT KNEE
M05369	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED KNEE
M05371	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF RIGHT ANKLE AND FOOT
M05372	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF LEFT ANKLE AND FOOT
M05379	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED ANKLE AND FOOT
M0539	RHEUMATOID HEART DISEASE WITH RHEUMATOID ARTHRITIS OF MULTIPLE SITES
M0540	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED SITE
M05411	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF RIGHT SHOULDER
M05412	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF LEFT SHOULDER
M05419	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED SHOULDER
M05421	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF RIGHT ELBOW
M05422	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF LEFT ELBOW
M05429	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED ELBOW
M05431	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF RIGHT WRIST

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M05432	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF LEFT WRIST
M05439	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED WRIST
M05441	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF RIGHT HAND
M05442	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF LEFT HAND
M05449	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED HAND
M05451	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF RIGHT HIP
M05452	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF LEFT HIP
M05459	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED HIP
M05461	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF RIGHT KNEE
M05462	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF LEFT KNEE
M05469	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED KNEE
M05471	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF RIGHT ANKLE AND FOOT
M05472	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF LEFT ANKLE AND FOOT
M05479	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED ANKLE AND FOOT
M0549	RHEUMATOID MYOPATHY WITH RHEUMATOID ARTHRITIS OF MULTIPLE SITES
M0550	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED SITE
M05511	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF RIGHT SHOULDER
M05512	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF LEFT SHOULDER

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M05519	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED SHOULDER
M05521	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF RIGHT ELBOW
M05522	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF LEFT ELBOW
M05529	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED ELBOW
M05531	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF RIGHT WRIST
M05532	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF LEFT WRIST
M05539	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED WRIST
M05541	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF RIGHT HAND
M05542	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF LEFT HAND
M05549	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED HAND
M05551	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF RIGHT HIP
M05552	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF LEFT HIP
M05559	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED HIP
M05561	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF RIGHT KNEE
M05562	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF LEFT KNEE

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M05569	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED KNEE
M05571	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF RIGHT ANKLE AND FOOT
M05572	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF LEFT ANKLE AND FOOT
M05579	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF UNSPECIFIED ANKLE AND FOOT
M0559	RHEUMATOID POLYNEUROPATHY WITH RHEUMATOID ARTHRITIS OF MULTIPLE SITES
M0560	RHEUMATOID ARTHRITIS OF UNSPECIFIED SITE WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05611	RHEUMATOID ARTHRITIS OF RIGHT SHOULDER WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05612	RHEUMATOID ARTHRITIS OF LEFT SHOULDER WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05619	RHEUMATOID ARTHRITIS OF UNSPECIFIED SHOULDER WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05621	RHEUMATOID ARTHRITIS OF RIGHT ELBOW WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05622	RHEUMATOID ARTHRITIS OF LEFT ELBOW WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05629	RHEUMATOID ARTHRITIS OF UNSPECIFIED ELBOW WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05631	RHEUMATOID ARTHRITIS OF RIGHT WRIST WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05632	RHEUMATOID ARTHRITIS OF LEFT WRIST WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05639	RHEUMATOID ARTHRITIS OF UNSPECIFIED WRIST WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M05641	RHEUMATOID ARTHRITIS OF RIGHT HAND WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05642	RHEUMATOID ARTHRITIS OF LEFT HAND WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05649	RHEUMATOID ARTHRITIS OF UNSPECIFIED HAND WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05651	RHEUMATOID ARTHRITIS OF RIGHT HIP WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05652	RHEUMATOID ARTHRITIS OF LEFT HIP WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05659	RHEUMATOID ARTHRITIS OF UNSPECIFIED HIP WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05661	RHEUMATOID ARTHRITIS OF RIGHT KNEE WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05662	RHEUMATOID ARTHRITIS OF LEFT KNEE WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05669	RHEUMATOID ARTHRITIS OF UNSPECIFIED KNEE WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05671	RHEUMATOID ARTHRITIS OF RIGHT ANKLE AND FOOT WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05672	RHEUMATOID ARTHRITIS OF LEFT ANKLE AND FOOT WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M05679	RHEUMATOID ARTHRITIS OF UNSPECIFIED ANKLE AND FOOT WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M0569	RHEUMATOID ARTHRITIS OF MULTIPLE SITES WITH INVOLVEMENT OF OTHER ORGANS AND SYSTEMS
M0570	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF UNSPECIFIED SITE WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05711	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF RIGHT SHOULDER WITHOUT ORGAN OR SYSTEMS INVOLVEMENT

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M05712	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF LEFT SHOULDER WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05719	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF UNSPECIFIED SHOULDER WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05721	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF RIGHT ELBOW WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05722	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF LEFT ELBOW WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05729	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF UNSPECIFIED ELBOW WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05731	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF RIGHT WRIST WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05732	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF LEFT WRIST WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05739	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF UNSPECIFIED WRIST WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05741	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF RIGHT HAND WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05742	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF LEFT HAND WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05749	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF UNSPECIFIED HAND WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05751	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF RIGHT HIP WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05752	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF LEFT HIP WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05759	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF UNSPECIFIED HIP WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05761	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF RIGHT KNEE WITHOUT ORGAN OR SYSTEMS INVOLVEMENT

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M05762	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF LEFT KNEE WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05769	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF UNSPECIFIED KNEE WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05771	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF RIGHT ANKLE AND FOOT WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05772	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF LEFT ANKLE AND FOOT WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M05779	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF UNSPECIFIED ANKLE AND FOOT WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M0579	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF MULTIPLE SITES WITHOUT ORGAN OR SYSTEMS INVOLVEMENT
M0580	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF UNSPECIFIED SITE
M05811	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF RIGHT SHOULDER
M05812	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF LEFT SHOULDER
M05819	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF UNSPECIFIED SHOULDER
M05821	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF RIGHT ELBOW
M05822	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF LEFT ELBOW
M05829	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF UNSPECIFIED ELBOW
M05831	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF RIGHT WRIST
M05832	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF LEFT WRIST

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M05839	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF UNSPECIFIED WRIST
M05841	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF RIGHT HAND
M05842	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF LEFT HAND
M05849	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF UNSPECIFIED HAND
M05851	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF RIGHT HIP
M05852	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF LEFT HIP
M05859	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF UNSPECIFIED HIP
M05861	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF RIGHT KNEE
M05862	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF LEFT KNEE
M05869	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF UNSPECIFIED KNEE
M05871	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF RIGHT ANKLE AND FOOT
M05872	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF LEFT ANKLE AND FOOT
M05879	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF UNSPECIFIED ANKLE AND FOOT
M0589	OTHER RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR OF MULTIPLE SITES
M059	RHEUMATOID ARTHRITIS WITH RHEUMATOID FACTOR, UNSPECIFIED
M0600	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, UNSPECIFIED SITE

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M06011	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, RIGHT SHOULDER
M06012	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, LEFT SHOULDER
M06019	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, UNSPECIFIED SHOULDER
M06021	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, RIGHT ELBOW
M06022	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, LEFT ELBOW
M06029	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, UNSPECIFIED ELBOW
M06031	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, RIGHT WRIST
M06032	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, LEFT WRIST
M06039	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, UNSPECIFIED WRIST
M06041	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, RIGHT HAND
M06042	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, LEFT HAND
M06049	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, UNSPECIFIED HAND
M06051	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, RIGHT HIP
M06052	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, LEFT HIP
M06059	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, UNSPECIFIED HIP
M06061	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, RIGHT KNEE
M06062	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, LEFT KNEE
M06069	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, UNSPECIFIED KNEE
M06071	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, RIGHT ANKLE AND FOOT

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M06072	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, LEFT ANKLE AND FOOT
M06079	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, UNSPECIFIED ANKLE AND FOOT
M0608	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, VERTEBRAE
M0609	RHEUMATOID ARTHRITIS WITHOUT RHEUMATOID FACTOR, MULTIPLE SITES
M061	ADULT-ONSET STILL'S DISEASE
M0620	RHEUMATOID BURSITIS, UNSPECIFIED SITE
M06211	RHEUMATOID BURSITIS, RIGHT SHOULDER
M06212	RHEUMATOID BURSITIS, LEFT SHOULDER
M06219	RHEUMATOID BURSITIS, UNSPECIFIED SHOULDER
M06221	RHEUMATOID BURSITIS, RIGHT ELBOW
M06222	RHEUMATOID BURSITIS, LEFT ELBOW
M06229	RHEUMATOID BURSITIS, UNSPECIFIED ELBOW
M06231	RHEUMATOID BURSITIS, RIGHT WRIST
M06232	RHEUMATOID BURSITIS, LEFT WRIST
M06239	RHEUMATOID BURSITIS, UNSPECIFIED WRIST
M06241	RHEUMATOID BURSITIS, RIGHT HAND
M06242	RHEUMATOID BURSITIS, LEFT HAND
M06249	RHEUMATOID BURSITIS, UNSPECIFIED HAND
M06251	RHEUMATOID BURSITIS, RIGHT HIP
M06252	RHEUMATOID BURSITIS, LEFT HIP
M06259	RHEUMATOID BURSITIS, UNSPECIFIED HIP
M06261	RHEUMATOID BURSITIS, RIGHT KNEE

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M06262	RHEUMATOID BURSITIS, LEFT KNEE
M06269	RHEUMATOID BURSITIS, UNSPECIFIED KNEE
M06271	RHEUMATOID BURSITIS, RIGHT ANKLE AND FOOT
M06272	RHEUMATOID BURSITIS, LEFT ANKLE AND FOOT
M06279	RHEUMATOID BURSITIS, UNSPECIFIED ANKLE AND FOOT
M0628	RHEUMATOID BURSITIS, VERTEBRAE
M0629	RHEUMATOID BURSITIS, MULTIPLE SITES
M0630	RHEUMATOID NODULE, UNSPECIFIED SITE
M06311	RHEUMATOID NODULE, RIGHT SHOULDER
M06312	RHEUMATOID NODULE, LEFT SHOULDER
M06319	RHEUMATOID NODULE, UNSPECIFIED SHOULDER
M06321	RHEUMATOID NODULE, RIGHT ELBOW
M06322	RHEUMATOID NODULE, LEFT ELBOW
M06329	RHEUMATOID NODULE, UNSPECIFIED ELBOW
M06331	RHEUMATOID NODULE, RIGHT WRIST
M06332	RHEUMATOID NODULE, LEFT WRIST
M06339	RHEUMATOID NODULE, UNSPECIFIED WRIST
M06341	RHEUMATOID NODULE, RIGHT HAND
M06342	RHEUMATOID NODULE, LEFT HAND
M06349	RHEUMATOID NODULE, UNSPECIFIED HAND
M06351	RHEUMATOID NODULE, RIGHT HIP
M06352	RHEUMATOID NODULE, LEFT HIP
M06359	RHEUMATOID NODULE, UNSPECIFIED HIP

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M06361	RHEUMATOID NODULE, RIGHT KNEE
M06362	RHEUMATOID NODULE, LEFT KNEE
M06369	RHEUMATOID NODULE, UNSPECIFIED KNEE
M06371	RHEUMATOID NODULE, RIGHT ANKLE AND FOOT
M06372	RHEUMATOID NODULE, LEFT ANKLE AND FOOT
M06379	RHEUMATOID NODULE, UNSPECIFIED ANKLE AND FOOT
M0638	RHEUMATOID NODULE, VERTEBRAE
M0639	RHEUMATOID NODULE, MULTIPLE SITES
M064	INFLAMMATORY POLYARTHROPATHY
M0680	OTHER SPECIFIED RHEUMATOID ARTHRITIS, UNSPECIFIED SITE
M06811	OTHER SPECIFIED RHEUMATOID ARTHRITIS, RIGHT SHOULDER
M06812	OTHER SPECIFIED RHEUMATOID ARTHRITIS, LEFT SHOULDER
M06819	OTHER SPECIFIED RHEUMATOID ARTHRITIS, UNSPECIFIED SHOULDER
M06821	OTHER SPECIFIED RHEUMATOID ARTHRITIS, RIGHT ELBOW
M06822	OTHER SPECIFIED RHEUMATOID ARTHRITIS, LEFT ELBOW
M06829	OTHER SPECIFIED RHEUMATOID ARTHRITIS, UNSPECIFIED ELBOW
M06831	OTHER SPECIFIED RHEUMATOID ARTHRITIS, RIGHT WRIST
M06832	OTHER SPECIFIED RHEUMATOID ARTHRITIS, LEFT WRIST
M06839	OTHER SPECIFIED RHEUMATOID ARTHRITIS, UNSPECIFIED WRIST
M06841	OTHER SPECIFIED RHEUMATOID ARTHRITIS, RIGHT HAND
M06842	OTHER SPECIFIED RHEUMATOID ARTHRITIS, LEFT HAND
M06849	OTHER SPECIFIED RHEUMATOID ARTHRITIS, UNSPECIFIED HAND
M06851	OTHER SPECIFIED RHEUMATOID ARTHRITIS, RIGHT HIP

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M06852	OTHER SPECIFIED RHEUMATOID ARTHRITIS, LEFT HIP
M06859	OTHER SPECIFIED RHEUMATOID ARTHRITIS, UNSPECIFIED HIP
M06861	OTHER SPECIFIED RHEUMATOID ARTHRITIS, RIGHT KNEE
M06862	OTHER SPECIFIED RHEUMATOID ARTHRITIS, LEFT KNEE
M06869	OTHER SPECIFIED RHEUMATOID ARTHRITIS, UNSPECIFIED KNEE
M06871	OTHER SPECIFIED RHEUMATOID ARTHRITIS, RIGHT ANKLE AND FOOT
M06872	OTHER SPECIFIED RHEUMATOID ARTHRITIS, LEFT ANKLE AND FOOT
M06879	OTHER SPECIFIED RHEUMATOID ARTHRITIS, UNSPECIFIED ANKLE AND FOOT
M0688	OTHER SPECIFIED RHEUMATOID ARTHRITIS, VERTEBRAE
M0689	OTHER SPECIFIED RHEUMATOID ARTHRITIS, MULTIPLE SITES
M069	RHEUMATOID ARTHRITIS, UNSPECIFIED
M0800	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS OF UNSPECIFIED SITE
M08011	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, RIGHT SHOULDER
M08012	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, LEFT SHOULDER
M08019	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED SHOULDER
M08021	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, RIGHT ELBOW
M08022	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, LEFT ELBOW
M08029	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED ELBOW
M08031	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, RIGHT WRIST
M08032	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, LEFT WRIST
M08039	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED WRIST
M08041	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, RIGHT HAND
M08042	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, LEFT HAND

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M08049	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED HAND
M08051	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, RIGHT HIP
M08052	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, LEFT HIP
M08059	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED HIP
M08061	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, RIGHT KNEE
M08062	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, LEFT KNEE
M08069	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED KNEE
M08071	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, RIGHT ANKLE AND FOOT
M08072	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, LEFT ANKLE AND FOOT
M08079	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED ANKLE AND FOOT
M0808	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, VERTEBRAE
M0809	UNSPECIFIED JUVENILE RHEUMATOID ARTHRITIS, MULTIPLE SITES
M081	JUVENILE ANKYLOSING SPONDYLITIS
M0820	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, UNSPECIFIED SITE
M08211	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, RIGHT SHOULDER
M08212	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, LEFT SHOULDER
M08219	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, UNSPECIFIED SHOULDER
M08221	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, RIGHT ELBOW
M08222	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, LEFT ELBOW
M08229	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, UNSPECIFIED ELBOW

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M08231	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, RIGHT WRIST
M08232	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, LEFT WRIST
M08239	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, UNSPECIFIED WRIST
M08241	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, RIGHT HAND
M08242	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, LEFT HAND
M08249	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, UNSPECIFIED HAND
M08251	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, RIGHT HIP
M08252	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, LEFT HIP
M08259	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, UNSPECIFIED HIP
M08261	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, RIGHT KNEE
M08262	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, LEFT KNEE
M08269	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, UNSPECIFIED KNEE
M08271	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, RIGHT ANKLE AND FOOT
M08272	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, LEFT ANKLE AND FOOT
M08279	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, UNSPECIFIED ANKLE AND FOOT
M0828	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, VERTEBRAE
M0829	JUVENILE RHEUMATOID ARTHRITIS WITH SYSTEMIC ONSET, MULTIPLE SITES
M083	JUVENILE RHEUMATOID POLYARTHRITIS (SERONEGATIVE)
M0840	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED SITE

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M08411	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, RIGHT SHOULDER
M08412	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, LEFT SHOULDER
M08419	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED SHOULDER
M08421	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, RIGHT ELBOW
M08422	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, LEFT ELBOW
M08429	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED ELBOW
M08431	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, RIGHT WRIST
M08432	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, LEFT WRIST
M08439	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED WRIST
M08441	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, RIGHT HAND
M08442	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, LEFT HAND
M08449	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED HAND
M08451	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, RIGHT HIP
M08452	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, LEFT HIP
M08459	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED HIP
M08461	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, RIGHT KNEE
M08462	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, LEFT KNEE
M08469	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED KNEE
M08471	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, RIGHT ANKLE AND FOOT
M08472	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, LEFT ANKLE AND FOOT
M08479	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, UNSPECIFIED ANKLE AND FOOT

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M0848	PAUCIARTICULAR JUVENILE RHEUMATOID ARTHRITIS, VERTEBRAE
M0880	OTHER JUVENILE ARTHRITIS, UNSPECIFIED SITE
M08811	OTHER JUVENILE ARTHRITIS, RIGHT SHOULDER
M08812	OTHER JUVENILE ARTHRITIS, LEFT SHOULDER
M08819	OTHER JUVENILE ARTHRITIS, UNSPECIFIED SHOULDER
M08821	OTHER JUVENILE ARTHRITIS, RIGHT ELBOW
M08822	OTHER JUVENILE ARTHRITIS, LEFT ELBOW
M08829	OTHER JUVENILE ARTHRITIS, UNSPECIFIED ELBOW
M08831	OTHER JUVENILE ARTHRITIS, RIGHT WRIST
M08832	OTHER JUVENILE ARTHRITIS, LEFT WRIST
M08839	OTHER JUVENILE ARTHRITIS, UNSPECIFIED WRIST
M08841	OTHER JUVENILE ARTHRITIS, RIGHT HAND
M08842	OTHER JUVENILE ARTHRITIS, LEFT HAND
M08849	OTHER JUVENILE ARTHRITIS, UNSPECIFIED HAND
M08851	OTHER JUVENILE ARTHRITIS, RIGHT HIP
M08852	OTHER JUVENILE ARTHRITIS, LEFT HIP
M08859	OTHER JUVENILE ARTHRITIS, UNSPECIFIED HIP
M08861	OTHER JUVENILE ARTHRITIS, RIGHT KNEE
M08862	OTHER JUVENILE ARTHRITIS, LEFT KNEE
M08869	OTHER JUVENILE ARTHRITIS, UNSPECIFIED KNEE
M08871	OTHER JUVENILE ARTHRITIS, RIGHT ANKLE AND FOOT
M08872	OTHER JUVENILE ARTHRITIS, LEFT ANKLE AND FOOT
M08879	OTHER JUVENILE ARTHRITIS, UNSPECIFIED ANKLE AND FOOT

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M0888	OTHER JUVENILE ARTHRITIS, OTHER SPECIFIED SITE
M0889	OTHER JUVENILE ARTHRITIS, MULTIPLE SITES
M0890	JUVENILE ARTHRITIS, UNSPECIFIED, UNSPECIFIED SITE
M08911	JUVENILE ARTHRITIS, UNSPECIFIED, RIGHT SHOULDER
M08912	JUVENILE ARTHRITIS, UNSPECIFIED, LEFT SHOULDER
M08919	JUVENILE ARTHRITIS, UNSPECIFIED, UNSPECIFIED SHOULDER
M08921	JUVENILE ARTHRITIS, UNSPECIFIED, RIGHT ELBOW
M08922	JUVENILE ARTHRITIS, UNSPECIFIED, LEFT ELBOW
M08929	JUVENILE ARTHRITIS, UNSPECIFIED, UNSPECIFIED ELBOW
M08931	JUVENILE ARTHRITIS, UNSPECIFIED, RIGHT WRIST
M08932	JUVENILE ARTHRITIS, UNSPECIFIED, LEFT WRIST
M08939	JUVENILE ARTHRITIS, UNSPECIFIED, UNSPECIFIED WRIST
M08941	JUVENILE ARTHRITIS, UNSPECIFIED, RIGHT HAND
M08942	JUVENILE ARTHRITIS, UNSPECIFIED, LEFT HAND
M08949	JUVENILE ARTHRITIS, UNSPECIFIED, UNSPECIFIED HAND
M08951	JUVENILE ARTHRITIS, UNSPECIFIED, RIGHT HIP
M08952	JUVENILE ARTHRITIS, UNSPECIFIED, LEFT HIP
M08959	JUVENILE ARTHRITIS, UNSPECIFIED, UNSPECIFIED HIP
M08961	JUVENILE ARTHRITIS, UNSPECIFIED, RIGHT KNEE
M08962	JUVENILE ARTHRITIS, UNSPECIFIED, LEFT KNEE
M08969	JUVENILE ARTHRITIS, UNSPECIFIED, UNSPECIFIED KNEE
M08971	JUVENILE ARTHRITIS, UNSPECIFIED, RIGHT ANKLE AND FOOT
M08972	JUVENILE ARTHRITIS, UNSPECIFIED, LEFT ANKLE AND FOOT

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M08979	JUVENILE ARTHRITIS, UNSPECIFIED, UNSPECIFIED ANKLE AND FOOT
M0898	JUVENILE ARTHRITIS, UNSPECIFIED, VERTEBRAE
M0899	JUVENILE ARTHRITIS, UNSPECIFIED, MULTIPLE SITES
M1200	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], UNSPECIFIED SITE
M12011	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], RIGHT SHOULDER
M12012	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], LEFT SHOULDER
M12019	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], UNSPECIFIED SHOULDER
M12021	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], RIGHT ELBOW
M12022	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], LEFT ELBOW
M12029	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], UNSPECIFIED ELBOW
M12031	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], RIGHT WRIST
M12032	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], LEFT WRIST
M12039	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], UNSPECIFIED WRIST
M12041	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], RIGHT HAND
M12042	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], LEFT HAND
M12049	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], UNSPECIFIED HAND
M12051	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], RIGHT HIP
M12052	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], LEFT HIP
M12059	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], UNSPECIFIED HIP
M12061	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], RIGHT KNEE
M12062	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], LEFT KNEE
M12069	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], UNSPECIFIED KNEE

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M12071	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], RIGHT ANKLE AND FOOT
M12072	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], LEFT ANKLE AND FOOT
M12079	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], UNSPECIFIED ANKLE AND FOOT
M1208	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], OTHER SPECIFIED SITE
M1209	CHRONIC POSTRHEUMATIC ARTHROPATHY [JACCOUD], MULTIPLE SITES
M150	PRIMARY GENERALIZED (OSTEO)ARTHRITIS
M151	HEBERDEN'S NODES (WITH ARTHROPATHY)
M152	BOUCHARD'S NODES (WITH ARTHROPATHY)
M153	SECONDARY MULTIPLE ARTHRITIS
M154	EROSIVE (OSTEO)ARTHRITIS
M158	OTHER POLYOSTEOARTHRITIS
M158	OTHER POLYOSTEOARTHRITIS
M159	POLYOSTEOARTHRITIS, UNSPECIFIED
M159	POLYOSTEOARTHRITIS, UNSPECIFIED
M160	BILATERAL PRIMARY OSTEOARTHRITIS OF HIP
M1610	UNILATERAL PRIMARY OSTEOARTHRITIS, UNSPECIFIED HIP
M1611	UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT HIP
M1612	UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT HIP
M162	BILATERAL OSTEOARTHRITIS RESULTING FROM HIP DYSPLASIA
M1630	UNILATERAL OSTEOARTHRITIS RESULTING FROM HIP DYSPLASIA, UNSPECIFIED HIP

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M1631	UNILATERAL OSTEOARTHRITIS RESULTING FROM HIP DYSPLASIA, RIGHT HIP
M1632	UNILATERAL OSTEOARTHRITIS RESULTING FROM HIP DYSPLASIA, LEFT HIP
M164	BILATERAL POST-TRAUMATIC OSTEOARTHRITIS OF HIP
M1650	UNILATERAL POST-TRAUMATIC OSTEOARTHRITIS, UNSPECIFIED HIP
M1651	UNILATERAL POST-TRAUMATIC OSTEOARTHRITIS, RIGHT HIP
M1652	UNILATERAL POST-TRAUMATIC OSTEOARTHRITIS, LEFT HIP
M166	OTHER BILATERAL SECONDARY OSTEOARTHRITIS OF HIP
M167	OTHER UNILATERAL SECONDARY OSTEOARTHRITIS OF HIP
M169	OSTEOARTHRITIS OF HIP, UNSPECIFIED
M169	OSTEOARTHRITIS OF HIP, UNSPECIFIED
M170	BILATERAL PRIMARY OSTEOARTHRITIS OF KNEE
M1710	UNILATERAL PRIMARY OSTEOARTHRITIS, UNSPECIFIED KNEE
M1711	UNILATERAL PRIMARY OSTEOARTHRITIS, RIGHT KNEE
M1712	UNILATERAL PRIMARY OSTEOARTHRITIS, LEFT KNEE
M172	BILATERAL POST-TRAUMATIC OSTEOARTHRITIS OF KNEE
M1730	UNILATERAL POST-TRAUMATIC OSTEOARTHRITIS, UNSPECIFIED KNEE
M1731	UNILATERAL POST-TRAUMATIC OSTEOARTHRITIS, RIGHT KNEE
M1732	UNILATERAL POST-TRAUMATIC OSTEOARTHRITIS, LEFT KNEE
M174	OTHER BILATERAL SECONDARY OSTEOARTHRITIS OF KNEE
M175	OTHER UNILATERAL SECONDARY OSTEOARTHRITIS OF KNEE
M179	OSTEOARTHRITIS OF KNEE, UNSPECIFIED
M179	OSTEOARTHRITIS OF KNEE, UNSPECIFIED

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M180	BILATERAL PRIMARY OSTEOARTHRITIS OF FIRST CARPOMETACARPAL JOINTS
M1810	UNILATERAL PRIMARY OSTEOARTHRITIS OF FIRST CARPOMETACARPAL JOINT, UNSPECIFIED HAND
M1811	UNILATERAL PRIMARY OSTEOARTHRITIS OF FIRST CARPOMETACARPAL JOINT, RIGHT HAND
M1812	UNILATERAL PRIMARY OSTEOARTHRITIS OF FIRST CARPOMETACARPAL JOINT, LEFT HAND
M182	BILATERAL POST-TRAUMATIC OSTEOARTHRITIS OF FIRST CARPOMETACARPAL JOINTS
M1830	UNILATERAL POST-TRAUMATIC OSTEOARTHRITIS OF FIRST CARPOMETACARPAL JOINT, UNSPECIFIED HAND
M1831	UNILATERAL POST-TRAUMATIC OSTEOARTHRITIS OF FIRST CARPOMETACARPAL JOINT, RIGHT HAND
M1832	UNILATERAL POST-TRAUMATIC OSTEOARTHRITIS OF FIRST CARPOMETACARPAL JOINT, LEFT HAND
M184	OTHER BILATERAL SECONDARY OSTEOARTHRITIS OF FIRST CARPOMETACARPAL JOINTS
M1850	OTHER UNILATERAL SECONDARY OSTEOARTHRITIS OF FIRST CARPOMETACARPAL JOINT, UNSPECIFIED HAND
M1851	OTHER UNILATERAL SECONDARY OSTEOARTHRITIS OF FIRST CARPOMETACARPAL JOINT, RIGHT HAND
M1852	OTHER UNILATERAL SECONDARY OSTEOARTHRITIS OF FIRST CARPOMETACARPAL JOINT, LEFT HAND
M189	OSTEOARTHRITIS OF FIRST CARPOMETACARPAL JOINT, UNSPECIFIED
M189	OSTEOARTHRITIS OF FIRST CARPOMETACARPAL JOINT, UNSPECIFIED
M19011	PRIMARY OSTEOARTHRITIS, RIGHT SHOULDER
M19012	PRIMARY OSTEOARTHRITIS, LEFT SHOULDER
M19019	PRIMARY OSTEOARTHRITIS, UNSPECIFIED SHOULDER

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M19021	PRIMARY OSTEOARTHRITIS, RIGHT ELBOW
M19022	PRIMARY OSTEOARTHRITIS, LEFT ELBOW
M19029	PRIMARY OSTEOARTHRITIS, UNSPECIFIED ELBOW
M19031	PRIMARY OSTEOARTHRITIS, RIGHT WRIST
M19032	PRIMARY OSTEOARTHRITIS, LEFT WRIST
M19039	PRIMARY OSTEOARTHRITIS, UNSPECIFIED WRIST
M19041	PRIMARY OSTEOARTHRITIS, RIGHT HAND
M19042	PRIMARY OSTEOARTHRITIS, LEFT HAND
M19049	PRIMARY OSTEOARTHRITIS, UNSPECIFIED HAND
M19071	PRIMARY OSTEOARTHRITIS, RIGHT ANKLE AND FOOT
M19072	PRIMARY OSTEOARTHRITIS, LEFT ANKLE AND FOOT
M19079	PRIMARY OSTEOARTHRITIS, UNSPECIFIED ANKLE AND FOOT
M19111	POST-TRAUMATIC OSTEOARTHRITIS, RIGHT SHOULDER
M19112	POST-TRAUMATIC OSTEOARTHRITIS, LEFT SHOULDER
M19119	POST-TRAUMATIC OSTEOARTHRITIS, UNSPECIFIED SHOULDER
M19121	POST-TRAUMATIC OSTEOARTHRITIS, RIGHT ELBOW
M19122	POST-TRAUMATIC OSTEOARTHRITIS, LEFT ELBOW
M19129	POST-TRAUMATIC OSTEOARTHRITIS, UNSPECIFIED ELBOW
M19131	POST-TRAUMATIC OSTEOARTHRITIS, RIGHT WRIST
M19132	POST-TRAUMATIC OSTEOARTHRITIS, LEFT WRIST
M19139	POST-TRAUMATIC OSTEOARTHRITIS, UNSPECIFIED WRIST
M19141	POST-TRAUMATIC OSTEOARTHRITIS, RIGHT HAND
M19142	POST-TRAUMATIC OSTEOARTHRITIS, LEFT HAND

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M19149	POST-TRAUMATIC OSTEOARTHRITIS, UNSPECIFIED HAND
M19171	POST-TRAUMATIC OSTEOARTHRITIS, RIGHT ANKLE AND FOOT
M19172	POST-TRAUMATIC OSTEOARTHRITIS, LEFT ANKLE AND FOOT
M19179	POST-TRAUMATIC OSTEOARTHRITIS, UNSPECIFIED ANKLE AND FOOT
M19211	SECONDARY OSTEOARTHRITIS, RIGHT SHOULDER
M19212	SECONDARY OSTEOARTHRITIS, LEFT SHOULDER
M19219	SECONDARY OSTEOARTHRITIS, UNSPECIFIED SHOULDER
M19221	SECONDARY OSTEOARTHRITIS, RIGHT ELBOW
M19222	SECONDARY OSTEOARTHRITIS, LEFT ELBOW
M19229	SECONDARY OSTEOARTHRITIS, UNSPECIFIED ELBOW
M19231	SECONDARY OSTEOARTHRITIS, RIGHT WRIST
M19232	SECONDARY OSTEOARTHRITIS, LEFT WRIST
M19239	SECONDARY OSTEOARTHRITIS, UNSPECIFIED WRIST
M19241	SECONDARY OSTEOARTHRITIS, RIGHT HAND
M19242	SECONDARY OSTEOARTHRITIS, LEFT HAND
M19249	SECONDARY OSTEOARTHRITIS, UNSPECIFIED HAND
M19271	SECONDARY OSTEOARTHRITIS, RIGHT ANKLE AND FOOT
M19272	SECONDARY OSTEOARTHRITIS, LEFT ANKLE AND FOOT
M19279	SECONDARY OSTEOARTHRITIS, UNSPECIFIED ANKLE AND FOOT
M1990	UNSPECIFIED OSTEOARTHRITIS, UNSPECIFIED SITE
M1990	UNSPECIFIED OSTEOARTHRITIS, UNSPECIFIED SITE
M1991	PRIMARY OSTEOARTHRITIS, UNSPECIFIED SITE
M1992	POST-TRAUMATIC OSTEOARTHRITIS, UNSPECIFIED SITE

Table 10 (diagnosis of RA, JRA, or OA) Required diagnosis: *1* Look back timeframe: *730* days	
ICD-10 Code	**Description**
M1992	POST-TRAUMATIC OSTEOARTHRITIS, UNSPECIFIED SITE
M1993	SECONDARY OSTEOARTHRITIS, UNSPECIFIED SITE
M1993	SECONDARY OSTEOARTHRITIS, UNSPECIFIED SITE
M450	ANKYLOSING SPONDYLITIS OF MULTIPLE SITES IN SPINE
M451	ANKYLOSING SPONDYLITIS OF OCCIPITO-ATLANTO-AXIAL REGION
M452	ANKYLOSING SPONDYLITIS OF CERVICAL REGION
M453	ANKYLOSING SPONDYLITIS OF CERVICOTHORACIC REGION
M454	ANKYLOSING SPONDYLITIS OF THORACIC REGION
M455	ANKYLOSING SPONDYLITIS OF THORACOLUMBAR REGION
M456	ANKYLOSING SPONDYLITIS LUMBAR REGION
M457	ANKYLOSING SPONDYLITIS OF LUMBOSACRAL REGION
M458	ANKYLOSING SPONDYLITIS SACRAL AND SACROCOCCYGEAL REGION
M459	ANKYLOSING SPONDYLITIS OF UNSPECIFIED SITES IN SPINE
M488X1	OTHER SPECIFIED SPONDYLOPATHIES, OCCIPITO-ATLANTO-AXIAL REGION
M488X2	OTHER SPECIFIED SPONDYLOPATHIES, CERVICAL REGION
M488X3	OTHER SPECIFIED SPONDYLOPATHIES, CERVICOTHORACIC REGION
M488X4	OTHER SPECIFIED SPONDYLOPATHIES, THORACIC REGION
M488X5	OTHER SPECIFIED SPONDYLOPATHIES, THORACOLUMBAR REGION
M488X6	OTHER SPECIFIED SPONDYLOPATHIES, LUMBAR REGION
M488X7	OTHER SPECIFIED SPONDYLOPATHIES, LUMBOSACRAL REGION
M488X8	OTHER SPECIFIED SPONDYLOPATHIES, SACRAL AND SACROCOCCYGEAL REGION
M488X9	OTHER SPECIFIED SPONDYLOPATHIES, SITE UNSPECIFIED

Table 11 (history of a DMARD agent for 30 days) Required quantity: *1* Look back timeframe: *60* days	
GCN	**Label Name**
67031	ARAVA 10 MG TABLET
67032	ARAVA 20 MG TABLET
46771	AZATHIOPRINE 50 MG TABLET
19170	AZATHIOPRINE 75 MG TABLET
19173	AZATHIOPRINE 100 MG TABLET
07091	CUPRIMINE 250 MG CAPSULE
13911	CYCLOSPORINE 25 MG CAPSULE
13910	CYCLOSPORINE 100 MG CAPSULE
13917	CYCLOSPORINE MODIFIED 100 MG/ML SOLN
13919	CYCLOSPORINE MODIFIED 100 MG
13918	CYCLOSPORINE MODIFIED 25 MG
13916	CYCLOSPORINE MODIFIED 50 MG
07100	DEPEN 250 MG TITRATAB
52651	ENBREL 25 MG KIT
48417	ENBREL 25 MG/0.5 ML VIAL
98398	ENBREL 25 MG/0.5 ML SYRINGE
97724	ENBREL 50 MG/ML SURECLICK SYR
23574	ENBREL 50 MG/ML SYRINGE
43924	ENBREL 50 MG/ML MINI CARTRIDGE
13918	GENGRAF 25 MG CAPSULE
13919	GENGRAF 100 MG CAPSULE
13917	GENGRAF 100 MG/ML SOLUTION
18924	HUMIRA 40 MG/0.8 ML SYRINGE

Table 11 (history of a DMARD agent for 30 days) Required quantity: *1* Look back timeframe: *60* days	
GCN	**Label Name**
97005	HUMIRA CROHN'S-UC-HS START
97005	HUMIRA PEN PS-UV-ADOL HS 40 MG
97005	HUMIRA 40MG/0.8ML PEN
44677	HUMIRA(CF) PEDI CROHN 80-40 MG
44014	HUMIRA(CF) PEN CRHN-UC-HS 80MG
44014	HUMIRA(CF) PEN 80 MG/0.8 ML
44014	HUMIRA(CF) PEN PEDIATRIC UC
43505	HUMIRA(CF) 40 MG/0.4 ML SYRING
43506	HUMIRA(CF) PEN 40 MG/0.4 ML
44664	HUMIRA(CF) 20 MG/0.2 ML SYRING
44659	HUMIRA(CF) 10 MG/0.1 ML SYRING
44954	HUMIRA(CF) PEN PS-UV-AHS 80-40
43904	HUMIRA(CF) PEDI CROHN 80MG/0.8
42940	HYDROXYCHLOROQUINE 200 MG TAB
14867	KINERET 100 MG/0.67 ML SYR
67031	LEFLUNOMIDE 10 MG TABLET
67032	LEFLUNOMIDE 20 MG TABLET
38489	METHOTREXATE 2.5 MG TABLET
18396	METHOTREXATE 50 MG/2 ML VIAL
18396	METHOTREXATE 250 MG/10 ML VIAL
18396	METHOTREXATE 1 GRAM/40 ML VIAL
38466	METHOTREXATE 50 MG/2 ML VIAL
38466	METHOTREXATE 250 MG/10 ML VIAL

Table 11 (history of a DMARD agent for 30 days) Required quantity: *1* Look back timeframe: *60* days	
GCN	**Label Name**
13917	NEORAL 100 MG/ML SOLUTION
13918	NEORAL 25 MG GELATIN CAPSULE
13919	NEORAL 100 MG GELATN CAPSULE
07100	PENICILLAMINE 250 MG TABLET
07091	PENICILLAMINE 250 MG CAPSULE
13911	SANDIMMUNE 25 MG CAPSULE
13910	SANDIMMUNE 100 MG CAPSULE
08220	SANDIMMUNE 100 MG/ML SOLN
41611	SULFASALAZINE 500 MG TABLET
41620	SULFASALAZINE DR 500 MG TABLET
13134	TREXALL 5 MG TABLET
06484	TREXALL 10 MG TABLET
13135	TREXALL 15 MG TABLET
38485	TREXALL 7.5 MG TABLET

Table 12 (history of 2 or more NSAID agents for 30 days) Required quantity: *2* Look back timeframe: *180* days

For the list of NSAID agents that pertain to this step, see the NSAID Agents table in this "Supporting Tables" section.

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

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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.

Drugs Requiring Prior Authorization	
Label Name	**GCN**
MELOXICAM 10 MG CAPSULE	40218
MELOXICAM 5 MG CAPSULE	40217
MELOXICAM 15 MG TABLET	31662
MELOXICAM 7.5 MG TABLET	31661
MELOXICAM 7.5 MG/5 ML SUSP	26227

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Clinical Criteria Logic

1. Is the client greater than or equal to (≥) 2 and less than (<) 18 years of age?
   [ ] Yes – Go to #2
   [ ] No – Go to #3
2. Does the client have a diagnosis of JRA in the last 730 days?
   [ ] Yes – Approve (180 days)
   [ ] No – Deny
3. Is the client greater than or equal to (≥) 18 years of age?
   [ ] Yes – Go to #4
   [ ] No – Deny
4. Is the client greater than or equal to (≥) 60 years of age?
   [ ] Yes – Approve (365 days)
   [ ] No – Go to #5
5. Does the client have a diagnosis of PUD or GI bleed in the last 730 days?
   [ ] Yes – Approve (365 days)
   [ ] No – Go to #6
6. Does the client have a history of warfarin therapy for 30 days in the last 45 days?
   [ ] Yes – Approve (365 days)
   [ ] No – Go to #7
7. Has the client had corticosteroid therapy for greater than or equal to (≥) 35 days in the last 90 days?
   [ ] Yes – Approve (365 days)
   [ ] No – Go to #8
8. Has the client taken high dose NSAID therapy for 30 days in the last 45 days?
   [ ] Yes – Approve (365 days)
   [ ] No – Go to #9
9. Does the client have a diagnosis of RA, JRA, or OA in the last 730 days?
   [ ] Yes – Approve (365 days)
   [ ] No – Go to #10

10. Does the client have a history of a DMARD agent for 30 days in the last 60 days?

    [ ] Yes – Approve (365 days)

    [ ] No – Go to #11

11. Does the client have a history of 2 or more NSAID agents for 30 days in the last 180 days?

    [ ] Yes – Approve (365 days)

    [ ] No – Deny

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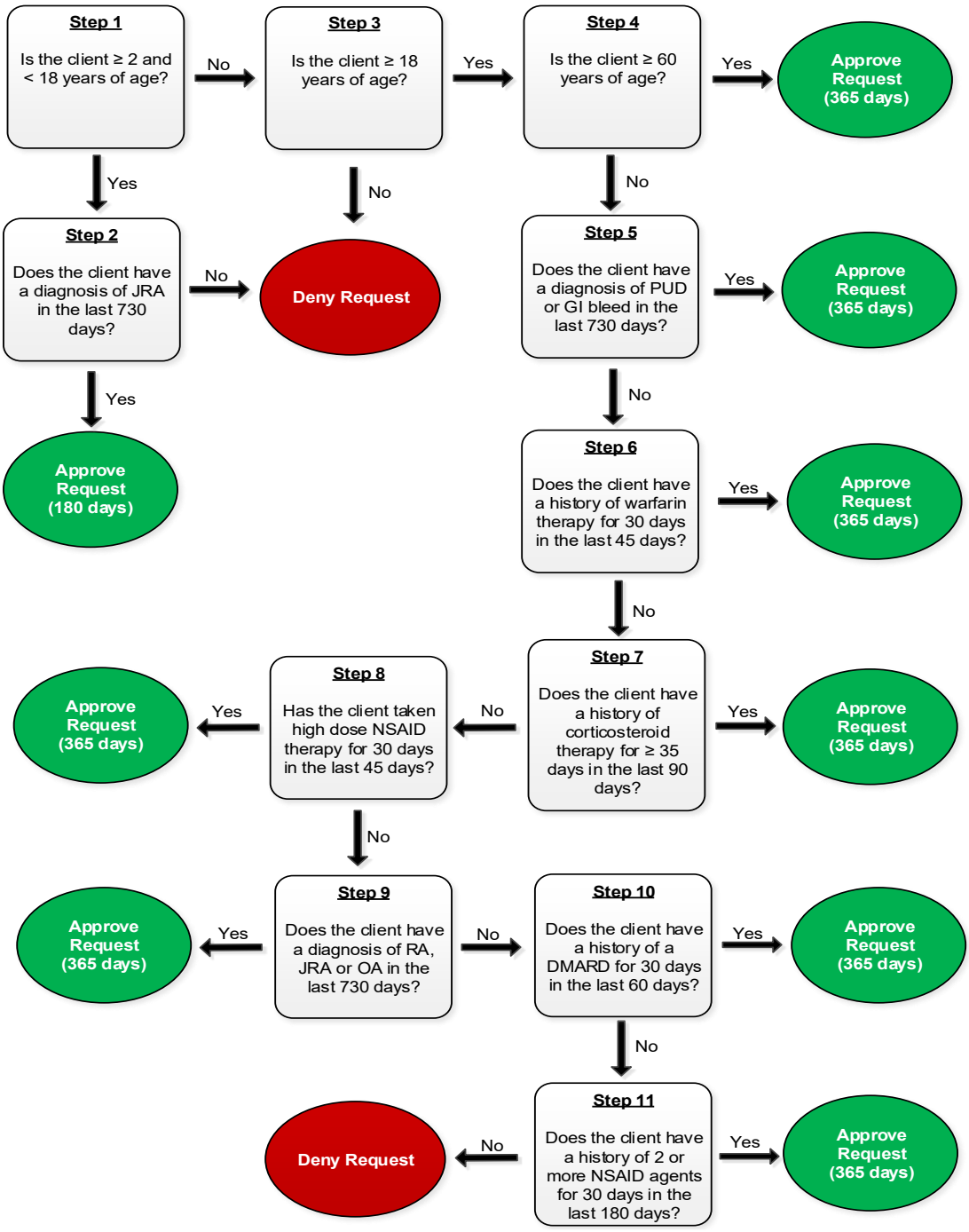
Clinical Criteria Logic Diagram



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Clinical Criteria Supporting Tables

Table 2 (diagnosis of JRA)

Required diagnosis: *1*

Look back timeframe: *730* days

For the list of diagnoses that pertain to this step, see the JRA Diagnoses table in the previous "Supporting Tables" section.
Note: Click the hyperlink to navigate directly to the table.

Table 5 (diagnosis of PUD or GI bleed)

Required diagnosis: *1*

Look back timeframe: *730* days

For the list of diagnoses that pertain to this step, see the PUD and GI Bleed Diagnoses table in the previous "Supporting Tables" section.
Note: Click the hyperlink to navigate directly to the table.

Table 6 (history of warfarin therapy for 30 days)

Required quantity: *1*

Look back timeframe: *45* days

For the list of therapies that pertain to this step, see the Warfarin Therapies table in the previous "Supporting Tables" section.
Note: Click the hyperlink to navigate directly to the table.

Table 7 (history of corticosteroid therapy for ≥ 35 days)

Required quantity: *1*

Look back timeframe: *90* days

For the list of therapies that pertain to this step, see the Corticosteroid Therapies table in the previous "Supporting Tables" section.
Note: Click the hyperlink to navigate directly to the table.

Table 8 (history of a high dose of NSAID therapy for 30 days)

Required quantity: *1*

Look back timeframe: *45* days

For the list of therapies that pertain to this step, see the High Dose NSAID Therapies table in the previous "Supporting Tables" section.
Note: Click the hyperlink to navigate directly to the table.

Table 9 (diagnosis of RA, JRA, or OA)

Required diagnosis: *1*

Look back timeframe: *730* days

For the list of diagnoses that pertain to this step, see the RA, JRA, and OA Diagnoses table in the previous "Supporting Tables" section.
Note: Click the hyperlink to navigate directly to the table.

Table 10 (history of a DMARD agent for 30 days)

Required quantity: *1*

Look back timeframe: *60* days

For the list of agents that pertain to this step, see the DMARD Agents table in the previous "Supporting Tables" section.
Note: Click the hyperlink to navigate directly to the table.

Table 11 (history of 2 or more NSAID agents for 30 days)

Required quantity: *2*

Look back timeframe: *180* days

For the list of agents that pertain to this step, see the NSAID Agents table in the previous "Supporting Tables" section.
Note: Click the hyperlink to navigate directly to the table.

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COX-2 Inhibitors

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
01/31/2011	• Initial publication and posting to website
11/18/2011	• Added a new section to specify the drugs requiring prior authorization for each form of COX-2 Inhibitors • In the "Clinical Edit Criteria Logic" and "Clinical Edit Criteria Logic Diagram" sections for Celebrex, clarified wording associated with step 6 • In the "Clinical Edit Criteria Logic" and "Clinical Edit Criteria Logic Diagram" sections for Mobic, clarified wording associated with step 5 • In the "Clinical Edit Supporting Tables" section for Celebrex, revised tables to specify the diagnosis codes pertinent to steps 3, 4, and 8 of the logic diagram • In the "Clinical Edit Supporting Tables" section for Celebrex, revised tables to specify the drug names and GCNs pertinent to steps 5, 6, 7, 9, and 10 of the logic diagram • In the "Clinical Edit Supporting Tables" section for Mobic, revised tables to specify the diagnosis codes pertinent to steps 3, 7, and 10 of the logic diagram • In the "Clinical Edit Supporting Tables" section for Mobic, revised tables to specify the drug names and GCNs pertinent to steps 4, 5, 6, 8, and 9 of the logic diagram
04/03/2015	• Updated to include ICD-10s
05/23/2016	• Updated Clinical Criteria Logic to include JRA approval pathway (questions 1 and 2 added), page 4 • Updated Clinical Criteria Logic Diagram to include JRA approval pathway (steps 1 and 2 added), page 6 • Added Table 2, page 7 • Reviewed and updated Table 8, page 18 • Reviewed and updated Table 9, page 19 • Reviewed and updated Table 11, page 46 • Updated Clinical Criteria Logic to include JRA approval pathway (questions 1 and 2 added), page 49

Publication Date	Notes
	• Updated Clinical Criteria Logic Diagram to include JRA approval pathway (steps 1 and 2 added), page 51 • Updated References, page 54
03/26/2019	• Updated to include formulary statement (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.) on each 'Drug Requiring PA' table
01/30/2020	• Added GCNs for Qmiiz ODT to drug table, page 44
02/18/2021	• Annual review by staff • Removed GCNs for Qmiiz ODT (drug not currently on formulary) • Updated Tables 7, 8, 9 and 11 • Updated references
05/24/2022	• Annual review by staff • Removed GCNs for steroid burst packs: Dexpak (16987, 97184, 22691), Medrol dosepak (37499), methylprednisolone dosepak (37499), Millipred dosepak (28879, 28878) • Added GCNs for meloxicam capsules (40218, 40217) to PA table • Removed GCN for Mobic suspension (26277) from PA table – product has been discontinued • Update references
08/15/2023	• Annual review by staff • Removed GCNs for Mobic (31662, 31661) from PA table – drug has been discontinued • Added GCNs for azathioprine (19170, 19173), Enbrel (48417) and penicillamine (07100, 07091) to DMARD supporting table • Update references
01/24/2025	• Annual review by staff • Updated ankylosing spondylitis table for Celebrex • Update references
04/29/2025	• Added GCNs for diflunisal (16850) and Dolobid (16850, 16851, 57589) to the Supporting Tables section
09/15/2025	• Added GCN for ibuprofen (35740) to the supporting tables section
10/29/2025	• Added GCN for Vyscoxa (58139) to the Celebrex Drugs Requiring PA table

