

# CMS Chronic Conditions Data Warehouse (CCW)

## Other Chronic or Potentially Disabling Condition Algorithms

(rev. 11/2017)

Algorithms <sup>1</sup>	Valid ICD-9 / MS DRG / HCPCS Codes <sup>2</sup>	Valid ICD-10 Codes <sup>2</sup>	Number/Type of Claims to Qualify <sup>3</sup>
Spina Bifida and Other Congenital Anomalies of the Nervous System	DX 740.0, 740.1, 740.2, 741, 741.0, 741.00, 741.01, 741.02, 741.03, 741.9, 741.90, 741.91, 741.92, 741.93, 742.0, 742.1, 742.2, 742.3, 742.4, 742.5, 742.51, 742.53, 742.59, 742.8, 742.9 (any DX on the claim)	DX G90.1, Q00.0, Q00.1, Q00.2, Q01.0, Q01.1, Q01.2, Q01.8, Q01.9, Q02, Q03.0, Q03.1, Q03.8, Q03.9, Q04.0, Q04.1, Q04.2, Q04.3, Q04.4, Q04.5, Q04.6, Q04.8, Q04.9, Q05.0, Q05.1, Q05.2, Q05.3, Q05.4, Q05.5, Q05.6, Q05.7, Q05.8, Q05.9, Q06.0, Q06.1, Q06.2, Q06.3, Q06.4, Q06.8, Q06.9, Q07.00, Q07.01, Q07.02, Q07.03, Q07.8, Q07.9 (any DX on the claim)	At least 1 inpatient <b>OR</b> 2 other non-drug claims of any service type with DX codes

<sup>1</sup> The reference period (# of years) for all algorithms included in this specification document is 2 years.

<sup>2</sup> ICD-10 codes are effective 10/2015; effective dates for ICD-9 codes vary, but are valid through 09/2015. Researchers may be interested in confirming the code(s) of interest in the accompanying claims data files.

<sup>3</sup> When 2 claims are required, they must occur at least one day apart. Note that the claims inclusion rules for these algorithms differ somewhat from the rules for the set of "[CCW Chronic Condition Algorithms](#)."

<sup>4</sup> The Viral Hepatitis (General) condition includes all other types of hepatitis covered; the variables for each specific type of hepatitis are not included in the Master Beneficiary Summary File (MBSF).