# CMS Chronic Condition Warehouse (CCW)
## CCW Condition Algorithms  (rev. 02/2021)

| Algorithm | Reference Period (# of years)
<table>
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<tbody>
<tr>
<td>Human Immunodeficiency Virus and/or Acquired Immunodeficiency Syndrome (HIV/AIDS)</td>
<td>2 Years</td>
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### Valid ICD-9/MS DRG/HCPCS Codes
- DX 042, 042.0, 042.1, 042.2, 042.9, 043, 043.1, 043.2, 043.3, 043.9, 044, 044.0, 044.9, 079.53, 795.71, V08 (any DX on the claim)
- Medicare DRG Codes (old codes used through 09/2007): 488, 489, 490
- MS DRG Codes: 969, 970, 974, 975, 976, 977
- HCC Code*: 1 (HIV/AIDS)

### Valid ICD-10/CPT4/HCPCS Codes
- DX B20, B97.35, R75, Z21 (any DX on the claim)
- EXCEPTION: R75 requires a second qualifying claim that is not R75 (a screening code)
- MS DRG Codes: 969, 970, 974, 975, 976, 977
- HCC Code*: 1 (HIV/AIDS)

### Number/Type of Claims to Qualify
- At least 1 inpatient claim OR 2 other non-drug claims of any service type during the two-year period

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1. **CCW data begins in 1999. When working with condition files prior to 2003, conditions with a reference period of two to five years will not have a sufficient length of data to fully meet the condition criteria in some years.**

2. **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.**

3. **When two 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.”**