Other Chronic Health, Mental Health, and Potentially Disabling Conditions Algorithms
MBSF_OTCC_{YYYY} FILE | REVISED 02/2023

Opioid Use Disorder (OUD) #1 — Overarching Opioid Use Disorder

Reference Period\(^1\):

2 Years

Number/Type of Claims to Qualify\(^2\):

See specifics for indicators from OUD#2, OUD#3, or OUD#4, below.

Valid ICD-10/CPT4/HCPCS Codes\(^3\):

Any positive result from indicators OUD#2, OUD#3, or OUD#4, below.

Valid ICD-9/MS DRG/HCPCS Codes\(^3\):

Any positive result from indicators OUD#2, OUD#3, or OUD#4, below.

OUD #2 — Diagnosis- and Procedure-code basis for OUD

Reference Period\(^1\):

2 Years

Number/Type of Claims to Qualify\(^2\):

At least 1 inpatient claim OR 2 other non-drug claims of any service type with DX (or ICD-10-PCS procedure) codes

Valid ICD-10/CPT4/HCPCS Codes\(^3\):


ICD-10 Procedure Codes: HZ81ZZZ, HZ84ZZZ, HZ85ZZZ, HZ86ZZZ, HZ91ZZZ, HZ94ZZZ, HZ95ZZZ, HZ96ZZZ (any position on the claim)
OUD #3 — Opioid-related Hospitalizations/ED Visits

Reference Period:
2 Years

Number/Type of Claims to Qualify:
One inpatient claim OR one emergency department (ED) claim

Valid ICD-10/CPT4/HCPCS Codes:

OUD #4 — Utilization of Medication-Assisted Therapy (MAT)

Reference Period:
2 Years

Number/Type of Claims to Qualify:
One or more drug claim with an NDC for opioid-MAT OR one or more non-drug claim with a HCPCs code.

(NOTE: Naltrexone NDCs are excluded if there is evidence of an alcohol or other drug use disorder where opioid DX [OUD #2] is not present.)

Valid ICD-10/CPT4/HCPCS Codes:

HCPCS codes for MAT:
G2067, G2068, G2069, G2070, G2072, G2073, G2078, G2079, H0020, J0571, J0572, J0573, J0574, J0575, J0592, J1230, J2315, S0109

NDCs for Buprenorphine:
00054017613, 00054017713, 00054018813, 00054018913, 00093537856, 00093537956, 00093572056, 00093572156, 00228315303, 00228315403, 00228315473, 00228315503, 00228315567, 00228315573, 00228315603, 00378092393, 00378092493, 0037886616, 003788667693, 00378867716, 00378867793, 00378876816, 00378876893, 00406192303, 00406192403, 00406800503, 00406802003, 00490005100, 00490005130, 00490005160, 00490005190, 00781721606, 00781721664, 00781722706, 00781722764, 00781723806, 00781723864, 00781724906, 00781724964, 00904700906, 00904701006, 12496010001, 12496010002, 12496010005, 12496030001, 12496030002, 12496030004, 12496120201, 12496120202, 12496120203, 12496120401, 12496120403, 12496120801, 12496120803, 12496121201, 12496121203, 12496127802, 12496128302, 12496130602, 12496131002, 16590066605, 16590066630, 16590066705, 16590066730, 16590066790, 16729054910, 16729055010, 23490927003, 23490927006, 23490927009, 35356000407, 353560005530, 35356055530, 42291017430, 42291017730, 42858050103, 42858050203, 42858060103, 42858060203, 43063018407, 43063066706, 43063075306, 43598057901, 43598058001, 43598058030, 43598058101, 43598058130, 43598058201, 43598058230, 47781035503, 47781035511, 47781035603, 47781035611, 47781035703, 47781035711, 47781035803, 47781035811, 49999039507, 49999039515, 49999039530, 49999063830, 49999063930, 50090157100, 50090292400, 50268014411, 50268014415, 50268014511, 50268014515, 50268014793, 50383028793, 50383029493, 50383092493, 50383093093, 51862060830, 52427069203, 52427069211, 52427069403, 52427069411, 52427069803, 52427069811, 52427071203, 52427071211, 52440010014, 52959030430, 52959074930, 53217013830, 53217024630, 54123011430, 54123090730, 54123091430, 54123092930, 54123095730, 54123098630, 54569549600, 54569573900, 54569573901, 54569573902, 54569639900, 54569640800, 54569657800, 54868570700, 54868570701, 54868570702, 54868570703, 54868570704, 54868570500, 55045378403, 55700014730, 55700018430, 55700030230, 55700030330, 55700090130, 58284010014, 59385001210, 59385001230, 59385001401, 59385001430, 59385001601, 59385001630, 60429058611, 60429058630, 60429058633, 60429058711, 60429058730, 60429058733, 60687048111, 60687048121, 60687049211, 60687049221, 62175045232, 62175045382, 62756045983, 62756046083, 62756046983, 62756097083, 63629042081, 63629043041, 63629043042, 63629049201, 63874108403, 63874108503, 63874117303, 65162041503, 65162041603, 66336001630, 68071138003, 68071151003, 68258299103, 68258299903, 68308020230, 68308020830, 71335095001, 71335095002, 71335095003,
71335115401, 71335115402, 71335115403, 71335116301, 71335116302, 71335116303, 71335129601, 71335185801, 71335185802

NDCs for Naltrexone (see exclusion criteria, below):

00056001122, 00056001130, 00056001170, 00056007950, 00056008050, 00185003901, 00185003930, 00406009201, 00406009203, 00406117001, 00406117003, 00555090201, 00555090202, 00904703604, 16729008101, 16729008110, 42291063230, 43063059115, 47335032683, 47335032688, 50090286600, 50436010501, 51224020630, 51224020650, 51285027501, 51285027502, 52152010502, 52152010504, 52152010530, 54868557400, 62135024230, 62135024290, 63459030042, 63629104601, 63629104701, 65694010003, 65694010010, 65757030001, 65757030202, 68084029111, 68084029121, 68094085362, 68115068030;

Exclude beneficiaries with NDC for Naltrexone, if the CCW alcohol use disorder indicator = Yes and opioid use disorder DX indicator (from measure #2 OUD using diagnoses) = No; or CCW drug use disorder indicator = Yes and opioid use DX disorder = No

Valid ICD-9/MS DRG/HCPCS Codes\(^3\):

Same as ICD-10

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\(^1\) CCW data begins in 1999. When working with condition files prior to 2003, conditions with a reference period of 2–5 years will not have a sufficient length of data to fully meet the condition criteria in some years.

\(^2\) SNF refers to skilled nursing facility; HHA refers to home health agency; HOP refers to hospital outpatient. Carrier claims refer to claim types 71 and 72 (not durable medical equipment [DME] claim types 81 or 82), and excludes any claims for which line item Berenson-Eggers Type of Service (BETOS) code variable equals D1A, D1B, D1C, D1D, D1E, D1F, D1G (which is DME), or O1A (which is ambulance services). The intent of the algorithm is to exclude claims where the services do not require a licensed health care professional. When two claims are required, they must occur at least one day apart.

\(^3\) 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.