

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

Diagnosis Code	Diagnosis Code Description
001.9	UNSPECIFIED CHOLERA
005.0	STAPHYLOCOCCAL FOOD POISONING
005.1	BOTULISM FOOD POISONING
005.2	FOOD POISN-CLOSTRIDIUM PERFRINGENS
005.3	FOOD POISONING DUE OTHER CLOSTRIDIA
005.4	FOOD POISN-VIBRIO PARAHAEMOLYTICUS
005.81	FOOD POISN DUE VIBRIO VULNIFICUS
005.89	OTHER BACTERIAL FOOD POISONING
005.9	UNSPECIFIED FOOD POISONING
006.5	AMEBIC BRAIN ABSCESS
020.0	BUBONIC PLAGUE
020.2	SEPTICEMIC PLAGUE
020.3	PRIMARY PNEUMONIC PLAGUE
020.5	PNEUMONIC PLAGUE, UNSPECIFIED
020.8	OTHER SPECIFIED TYPES OF PLAGUE
022.1	PULMONARY ANTHRAX
022.3	ANTHRAX SEPTICEMIA
022.8	OTHER SPEC MANIFESTATIONS ANTHRAX
022.9	UNSPECIFIED ANTHRAX
031.2	DISSEMINATED DZ DUE OTH MYCOBACTER
032.82	DIPHTheritic Myocarditis
032.83	DIPHTheritic Peritonitis
036.0	MENINGOCOCCAL MENINGITIS
036.1	MENINGOCOCCAL ENCEPHALITIS
036.2	MENINGOCOCCEMIA
036.3	WATRHOUSE-FRIDRICHSN SYND MNGOCOCCCL
036.40	MENINGOCOCCAL CARDITIS, UNSPECIFIED
036.41	MENINGOCOCCAL PERICARDITIS
036.42	MENINGOCOCCAL ENDOCARDITIS
036.43	MENINGOCOCCAL MYOCARDITIS
036.81	MENINGOCOCCAL OPTIC NEURITIS
036.82	MENINGOCOCCAL ARTHROPATHY
036.89	OTHER SPEC MENINGOCOCCAL INFECTIONS
036.9	UNSPECIFIED MENINGOCOCCAL INFECTION
037	TETANUS
038.0	STREPTOCOCCAL SEPTICEMIA
038.10	UNSPEC STAPHYLOCOCCAL SEPTICEMIA
038.11	METH SUSCEPTIBLE STAPH SEPTICEMIA
038.12	METH RESISTANT STAPH SEPTICEMIA

038.19	OTHER STAPHYLOCOCCAL SEPTICEMIA
038.2	PNEUMOCOCCAL SEPTICEMIA
038.3	SEPTICEMIA DUE TO ANAEROBES
038.40	SEPTICEMIA DUE UNSPEC GM-NEG ORGNM
038.41	SEPTICEMIA DUE HEMOPHILUS FLUE
038.42	SEPTICEMIA DUE TO ESCHERICHIA COLI
038.43	SEPTICEMIA DUE TO PSEUDOMONAS
038.44	SEPTICEMIA DUE TO SERRATIA
038.49	OTH SEPTICEMIA DUE GM-NEG ORGANISM
038.8	OTHER SPECIFIED SEPTICEMIA
038.9	UNSPECIFIED SEPTICEMIA
040.0	GAS GANGRENE
040.41	INFANT BOTULISM
040.42	WOUND BOTULISM
041.12	METHICILLIN RESISTANT STAPH AUREUS
047.0	MENINGITIS DUE TO COXSACKIE VIRUS
047.1	MENINGITIS DUE TO ECHO VIRUS
047.8	OTHER SPECIFIED VIRAL MENINGITIS
047.9	UNSPECIFIED VIRAL MENINGITIS
053.22	HERPES ZOSTER IRIDOCYCLITIS
054.3	HERPETIC MENINGOENCEPHALITIS
055.0	POSTMEASLES ENCEPHALITIS
055.1	POSTMEASLES PNEUMONIA
055.2	POSTMEASLES OTITIS MEDIA
055.71	MEASLES KERATOCONJUNCTIVITIS
055.79	OTHER SPEC MEASLES COMPLICATIONS
055.8	UNSPECIFIED MEASLES COMPLICATION
056.01	ENCEPHALOMYELITIS DUE TO RUBELLA
062.0	JAPANESE ENCEPHALITIS
062.1	WESTERN EQUINE ENCEPHALITIS
062.2	EASTERN EQUINE ENCEPHALITIS
062.3	ST. LOUIS ENCEPHALITIS
062.4	AUSTRALIAN ENCEPHALITIS
062.9	UNS MOSQUITO-BORN VIRAL ENCEPHALIT
065.0	CRIMEAN HEMORRHAGIC FEVER
065.4	MOSQUITO-BORNE HEMORRHAGIC FEVER
070.41	ACUTE HEPATITIS C WITH HEPATIC COMA
071	RABIES
072.0	MUMPS ORCHITIS
072.1	MUMPS MENINGITIS

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072.2	MUMPS ENCEPHALITIS
072.3	MUMPS PANCREATITIS
072.71	MUMPS HEPATITIS
072.79	MUMPS W/OTHER SPEC COMPLICATIONS
072.8	UNSPECIFIED MUMPS COMPLICATION
074.20	COXSACKIE CARDITIS, UNSPECIFIED
074.21	COXSACKIE PERICARDITIS
074.22	COXSACKIE ENDOCARDITIS
074.23	COXSACKIE MYOCARDITIS
078.6	HEMORRHAGIC NEPHROSONEPHRITIS
078.7	ARENAVIRAL HEMORRHAGIC FEVER
079.2	COXSACKIEVIRUS INF CCE & UNS SITE
079.82	SARS-ASSOCIATED CORONAVIRUS
091.81	ERLY SYPH ACUT SYPHLIT MENINGITIS
093.0	ANEURYSM AORTA SPEC AS SYPHILITIC
093.81	SYPHILITIC PERICARDITIS
094.2	SYPHILITIC MENINGITIS
114.0	PRIMARY COCCIDIOIDOMYCOSIS
114.1	PRIM EXTRAPULM COCCIDIOIDOMYCOSIS
114.2	COCCIDIOIDAL MENINGITIS
114.3	OTH FORMS PROGS COCCIDIOIDOMYCOSIS
114.4	CHRONIC PULM COCCIDIOIDOMYCOSIS
114.5	UNSPEC PULMONARY COCCIDIOIDOMYCOSIS
114.9	UNSPECIFIED COCCIDIOIDOMYCOSIS
115.01	HISTOPLASMA CAPSULATUM MENINGITIS
115.02	HISTOPLASMA CAPSULATUM RETINITIS
115.03	HISTOPLASMA CAPSULATUM PERICARDITIS
115.04	HISTOPLASMA CAPSULATUM ENDOCARDITIS
115.05	HISTOPLASMA CAPSULATUM PNEUMONIA
115.11	HISTOPLASMA DUBOISII MENINGITIS
115.12	HISTOPLASMA DUBOISII RETINITIS
115.13	HISTOPLASMA DUBOISII PERICARDITIS
115.14	HISTOPLASMA DUBOISII ENDOCARDITIS
115.15	HISTOPLASMA DUBOISII PNEUMONIA
115.91	UNSPEC HISTOPLASMOSIS MENINGITIS
115.92	UNSPEC HISTOPLASMOSIS RETINITIS
115.93	UNSPEC HISTOPLASMOSIS PERICARDITIS
115.94	UNSPEC HISTOPLASMOSIS ENDOCARDITIS
115.95	UNSPEC HISTOPLASMOSIS PNEUMONIA
117.5	CRYPTOCOCCOSIS

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242.00	TOX DIFFUSE GOITER NO CRISIS
242.01	TOX DIFFUSE GOITER W/CRISIS
242.10	TOXIC UNINODULAR GOITER NO CRISIS
242.11	TOXIC UNINODULR GOITER W/CRISIS
242.20	TOXIC MULTINODULR GOITER W/O CRISIS
242.21	TOXIC MULTINODULR GOITER W/CRISIS
242.30	TOX NOD GOITER UNS TYPE NO CRISIS
242.31	TOX NODULR GOITER UNS TYPE W CRISIS
242.40	THYROTOX-ECT THYROID NODUL NO CRISIS
242.41	THYROTOX-ECT THYROID NODUL W/CRISIS
242.80	THYRTOX OTH SPEC ORGN NO CRISIS
242.81	THYROTOX OTH SPEC ORGN W/CRISIS
242.90	THYROTOX W/O GOITER W/O CRISIS
242.91	THYROTOX W/O MEN GOITER W/CRISIS
244.9	UNSPECIFIED HYPOTHYROIDISM
245.0	ACUTE THYROIDITIS
246.3	HEMORRHAGE&INFARCTION OF THYROID
249.11	SECONDARY DM W/KETOACIDOSIS UNCCTRL
249.20	SEC DM W/HYPEROSMOLARTY NOT UNCCTRL
249.21	SEC DM W/HYPEROSMOLARITY UNCONTROL
250.10	DB W/KA TYPE II/UNS NOT UNCCTRL
250.11	DB W/KETOACIDOS TYPE I NOT UNCCTRL
250.12	DB W/KETOACIDOS TYPE II/UNS UNCCTRL
250.13	DB W/KETOACIDOS TYPE I UNCCTRL
250.20	DB W/HYPEROSMLR TYPE II NOT UNCCTRL
250.21	DB W/HYPEROSMOLR TYPE I NOT UNCCTRL
250.22	DB W/HYPEROSMLR TYPE II/UNS UNCCTRL
250.23	DB W/HYPEROSMOLAR TYPE I UNCCTRL
250.30	DB OTH COMA TYPE II/UNS NOT UNCCTRL
250.31	DB W/OTH COMA TYPE I NOT UNCCTRL
250.32	DB W/OTH COMA TYPE II/UNS UNCCTRL
250.33	DB W/OTH COMA TYPE I UNCCTRL
250.80	DB W/OTH MANIFST TYPE II/UNS NOT UN
250.81	DB W/OTH MANIFST TYPE I NOT UNCCTRL
250.82	DB W/OTH MANIFST TYPE II/UNS UNCNR
250.83	DB W/OTH MANIFEST TYPE I UNCCTRL
250.90	DB UNS COMP TYPE II/UNS NOT UNCCTRL
250.91	DB W/UNS COMP TYPE I NOT UNCCTRL
250.92	DB W/UNS COMP TYPE II/UNS UNCCTRL
250.93	DB W/UNS COMP TYPE I [JUV] UNCCTRL

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251.0	HYPOGLYCEMIC COMA
251.2	HYPOGLYCEMIA, UNSPECIFIED
274.00	GOUTY ARTHROPATHY UNSPECIFIED
274.01	ACUTE GOUTY ARTHROPATHY
276.0	HYPEROSMOLALITY &OR HYPERNATREMIA
276.1	HYPOSMOLALITY AND/OR HYPONATREMIA
276.2	ACIDOSIS
276.3	ALKALOSIS
276.4	MIXED ACID-BASE BALANCE DISORDER
276.50	VOLUME DEPLETION UNSPECIFIED
276.51	DEHYDRATION
276.52	HYPOVOLEMIA
276.6	FLUID OVERLOAD
276.7	HYPERPOTASSEMIA
276.8	HYPOPOTASSEMIA
276.9	ELECTROLYTE AND FLUID DISORDERS NEC
277.88	TUMOR LYSIS SYNDROME
282.42	SICKLE-CELL THALASSEMIA WITH CRISIS
282.62	HB-SS DISEASE WITH CRISIS
282.64	SICKLE-CELL/HB-C DISEASE W/CRISIS
282.69	OTHER SICKLE-CELL DISEASE W/CRISIS
285.1	ACUTE POSTHEMORRHAGIC ANEMIA
286.4	VON WILLEBRANDS DISEASE
286.5	HEMORR D/O D/T INTRIN CIRC ANTICOAG
286.6	DEFIBRINATION SYNDROME
287.0	ALLERGIC PURPURA
287.9	UNSPECIFIED HEMORRHAGIC CONDITIONS
289.52	SPLenic SEQUESTRATION
289.7	METHEMOGLOBINEMIA
291.0	ALCOHOL WITHDRAWAL DELIRIUM
291.3	ALC-INDUCD PSYCHOT D/O W/HALLUCINAT
291.81	ALCOHOL WITHDRAWAL
292.11	DRUG-INDUCD PSYCHOT D/O W/DELUSIONS
292.12	DRUG-INDUCD PSYCHOT D/O W/HALLUCIN
292.81	DRUG-INDUCED DELIRIUM
292.82	DRUG-INDUCED PERSISTING DEMENTIA
292.83	DRUG-INDUCD PERSISTING AMNESTIC D/O
292.84	DRUG-INDUCED MOOD DISORDER
292.89	OTH SPEC DRUG-INDUCD MENTL DISORDER
293.0	DELIRIUM DUE CONDS CLASSIFIED ELSW

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293.1	SUBACUTE DELIRIUM
295.40	SCHIZOPHRENIFORM DISORDER UNSPEC
295.41	SCHIZOPHRENIFORM DISORDER SUBCHRON
295.42	SCHIZOPHRENIFORM DISORDER CHRONIC
295.43	SCHIZOPHRENIFORM SUBCHRN AC XACRBAT
295.44	SCHIZOPHRENIFORM CHRN AC XACRBAT
295.45	SCHIZOPHRENIFORM DISORDER REMISSION
296.00	BIPLR I D/O SINGLE MANIC EPIS UNS
296.01	BIPLR I D/O SINGLE MANIC EPIS MILD
296.02	BIPLR I D/O SINGLE MANIC EPIS MOD
296.03	BIPLR I D/O 1 MANIC EPIS NO PSYCHOT
296.04	BIPLR I D/O 1 MANIC EPIS W/PSYCHOT
296.05	BIPLR I D/O 1 MNIC EPIS PART REMISS
296.10	MANIC DISORDER RECUR EPIS UNSPEC
296.11	MANIC DISORDER RECURRENT EPIS MILD
296.12	MANIC DISORDER RECURRENT EPIS MOD
296.13	MANIC RECUR D/O EPIS SEVERE
296.14	RECUR MANIC-SEV W PSYCHO
296.15	MNIC D/O RECUR EPIS PART/UNS REMISS
296.20	MAJ DPRSV D/O SINGLE EPIS UNSPEC
296.21	MAJ DPRSV DISORDER SINGLE EPIS MILD
296.22	MAJ DPRSV DISORDER SINGLE EPIS MOD
296.23	MAJ DEPRESS D/O 1 EPIS SEVERE
296.24	MAJ DEPRESS 1 EPIS SEVR W/PSYCHOT
296.30	MAJ DPRSV D/O RECUR EPIS UNSPEC
296.31	MAJ DPRSV DISORDER RECUR EPIS MILD
296.32	MAJOR DPRSV DISORDER RECUR EPIS MOD
296.34	MJR DEPRES D/O RECUR EPIS-PSYCHOTIC
296.35	MJR DEPRESS D/O RECUR EPIS-PART REM
296.40	BIPLR I MOST RECENT EPIS MANIC UNS
296.41	BIPLR I MOST RECENT EPIS MANIC MILD
296.42	BIPLR I MOST RECENT EPIS MANIC MOD
296.43	BP I MOST RECNT MNIC SEV NO PSYCHOT
296.44	BP I MOST RECENT MNIC SEV W/PSYCHOT
296.45	BIPLR I RECENT MNIC PART/UNS REMISS
296.50	BIPLR I MOST RECENT EPIS DPRSD UNS
296.51	BIPLR I MOST RECENT EPIS DPRSD MILD
296.52	BIPLR I MOST RECENT EPIS DPRSD MOD
296.53	BIPLR I RECENT DPRSD SEV NO PSYCHOT
296.54	BIPLR I RECENT DPRSD SEV W/PSYCHOT

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296.55	BIPLR I RECENT DPRSD PART/UNS REMIS
296.63	BIPLR I RECENT MIX SEV W/O PSYCHOT
296.64	BIPLR I RECENT MIX SEV W/PSYCHOT
298.3	ACUTE PARANOID REACTION
300.10	HYSTERIA, UNSPECIFIED
300.11	CONVERSION DISORDER
300.12	DISSOCIATIVE AMNESIA
300.13	DISSOCIATIVE FUGUE
300.14	DISSOCIATIVE IDENTITY DISORDER
300.15	DISSOCIATIVE DISORDER/REACT UNSPEC
300.16	FACTITIOUS D/O PREDOM PSYCH SIGN&SX
300.19	OTHER&UNSPEC FACTITIOUS ILLNESS
303.00	ACUT ALCOHLIC INTOXICATION UNS
303.01	ACUT ALCOHLIC INTOXICATION CONT
303.02	AC ALCOHLIC INTOXICATION EPISODIC
305.00	NONDPND ALCOHL ABS UNS DRUNKENNESS
305.01	NONDPND ALCOHL ABS CONT DRUNKENNESS
305.02	NONDPND ALCOHL ABS EPISODIC
305.30	NONDEPEND HALLUCINOGEN ABS UNSPEC
305.31	NONDEPENDENT HALLUCINOGEN ABS CONT
305.32	NONDEPEND HALLUCINOGEN ABS EPISODIC
305.33	NONDPND HALLUCINOGEN ABS REMISSION
320.0	HEMOPHILUS MENINGITIS
320.1	PNEUMOCOCCAL MENINGITIS
320.2	STREPTOCOCCAL MENINGITIS
320.3	STAPHYLOCOCCAL MENINGITIS
320.7	MENINGITIS OTH BACT DZ CLASS ELSW
320.81	ANAEROBIC MENINGITIS
320.82	MENINGITIS DUE GM-NEG BACTER NEC
320.89	MENINGITIS DUE OTHER SPEC BACTERIA
320.9	MENINGITIS DUE UNSPEC BACTERIUM
321.0	CRYPTOCOCCAL MENINGITIS
321.1	MENINGITIS IN OTHER FUNGAL DISEASES
321.2	MENINGITIS DUE TO VIRUSES NEC
321.3	MENINGITIS DUE TO TRYPANOSOMIASIS
321.4	MENINGITIS IN SARCOIDOSIS
321.8	MENINGITIS-OTH NONBCTRL ORGNISMS CE
322.0	NONPYOGENIC MENINGITIS
322.1	EOSINOPHILIC MENINGITIS
322.2	CHRONIC MENINGITIS

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322.9	UNSPECIFIED MENINGITIS
323.01	ENCEPHALITIS VIRAL DZ CLASS ELSW
323.02	MYELITIS VIRAL DISEASES CLASS ELSW
323.1	ENCEPHALITIS MYELIT RICKETTS DZ CE
323.2	ENCEPHALITIS MYELIT PROTOZOAL DZ CE
323.41	OTH ENCEPHALITIS INF CLASS ELSW
323.42	OTH MYELITIS INFECTION CLASS ELSW
323.51	ENCEPHALITIS FOLLOW IMMUN PROC
323.52	MYELITIS FOLLOWING IMMUIZATION PROC
323.61	INF ACUTE DISSEMIN ENCEPHALOMYELIT
323.62	OTH POSTINFECTIOUS ENCEPHALITIS
323.63	POSTINFECTIOUS MYELITIS
323.71	TOXIC ENCEPHALIT & ENCEPHALOMYELIT
323.72	TOXIC MYELITIS
323.81	OTHER CAUSES OF ENCEPHALITIS
323.9	UNS CAUS ENCEPHALITIS MYELITIS & EM
324.0	INTRACRANIAL ABSCESS
324.1	INTRASPINAL ABSCESS
324.9	INTRACRAN&INTRASP ABSC UNSPEC SITE
333.72	ACUTE DYSTONIA DUE TO DRUGS
333.79	OTHER ACQUIRED TORSION DYSTONIA
336.1	VASCULAR MYELOPATHIES
337.01	CAROTID SINUS SYNDROME
338.11	ACUTE PAIN DUE TO TRAUMA
338.12	ACUTE POSTTHORACOTOMY PAIN
338.18	OTHER ACUTE POSTOPERATIVE PAIN
338.19	OTHER ACUTE PAIN
342.00	FLACID HEMIPL AFFECT UNSPEC SIDE
342.01	FLACID HEMIPL AFFECT DOMINANT SIDE
342.02	FLACID HEMIPL AFFCT NONDOM SIDE
342.10	SPASTIC HEMIPL AFFECT UNSPEC SIDE
342.11	SPASTIC HEMIPL AFFECT DOMINANT SIDE
342.12	SPASTIC HEMIPL AFFCT NONDOM SIDE
342.80	OTH SPEC HEMIPL AFFECT UNSPEC SIDE
342.81	OTH SPEC HEMIPL AFFCT DOMINANT SIDE
342.82	OTH SPEC HEMIPL AFFCT NONDOM SIDE
342.90	UNSPEC HEMIPL AFFECT UNSPEC SIDE
342.91	UNSPEC HEMIPL AFFECT DOMINANT SIDE
342.92	UNSPEC HEMIPL AFFCT NONDOM SIDE
344.00	UNSPECIFIED QUADRIPLEGIA



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344.01	QUADRPLEGIA&QUADRIPRESIS C1-C4 CMPL
344.02	QUADRPLEGIA&QUADRPRES C1-C4 INCMPL
344.03	QUADRPLEGIA&QUADRIPRESIS C5-C7 CMPL
344.04	C5-C7, INCOMPLETE
344.09	OTHER QUADRIPLEGIA&QUADRIPARESIS
344.9	UNSPECIFIED PARALYSIS
345.00	GEN NONCONVULS EPILEPSY W/O INTRACT
345.01	GEN NONCONVULS EPILEPSY W/INTRACT
345.10	GEN CONVULS EPILEPSY W/O INTRACT
345.11	GEN CONVULS EPILEPSY W/NTRACT
345.2	EPILEPTIC PETIT MAL STATUS
345.3	EPILEPTIC GRAND MAL STATUS
345.40	LOC-REL EPIL&ES CPS NO INTRACT EPIL
345.41	LOC-REL EPIL&ES CPS W/INTRACT EPIL
348.1	ANOXIC BRAIN DAMAGE
348.4	COMPRESSION OF BRAIN
348.5	CEREBRAL EDEMA
349.82	TOXIC ENCEPHALOPATHY
359.24	DRUG-INDUCED MYOTONIA
360.00	UNSPEC PURULENT ENDOPHTHALMITIS
360.01	ACUTE ENDOPHTHALMITIS
360.02	PANOPHTHALMITIS
360.04	VITREOUS ABSCESS
360.11	SYMPATHETIC UVEITIS
360.12	PANUVEITIS
360.13	PARASITIC ENDOPHTHALMITIS NOS
360.50	RETN (OLD) FB MAGN INTRAO
360.51	RETAINED (OLD) FB MAG ANT CHAMB EYE
360.52	RETN (OLD) FB MAG IRIS/CILIARY BODY
360.53	RETAIN (OLD) FB, MAGNETIC, IN LENS
360.54	RET (OLD) FB, MAGNETIC, IN VITREOUS
360.55	RETAIN (OLD) FB MAGN POSTERIOR WALL
360.60	RET (OLD) FB INTRAOCULAR UNSPEC
360.61	RETAIN (OLD) FB IN ANTERIOR CHAMBER
360.62	RETN (OLD) FB IRIS OR CILIARY BODY
360.63	RETAINED (OLD) FOREIGN BODY IN LENS
360.64	RETAINED (OLD) FB IN VITREOUS
360.65	RETN (OLD) FB POSTERIOR WALL OF EYE
361.00	RET DETACH W/RETINAL DEFECT UNSPEC
361.01	RECENT RET DETACH PART W/1 DEFEC

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361.02	RECENT RET DETACH PART W/MX DEFEC
361.03	RECENT RET DETACH PART W/GIANT TEAR
361.04	RECNT RET DTACH PRTL W/RETINL DIALY
361.05	RECENT RET DETACH TOTAL/SUBTOTAL
361.06	OLD RETINAL DETACHMENT, PARTIAL
361.07	OLD RET DETACH TOTAL/SUBTOTAL
361.30	UNSPECIFIED RETINAL DEFECT
361.31	ROUND HOLE RETINA W/O DETACHMENT
361.32	HORSESHOE TEAR RETINA W/O DETACHMNT
361.33	MX DEFEC RETINA WITHOUT DETACHMENT
361.81	TRACTION DETACHMENT OF RETINA
361.89	OTHER FORMS OF RETINAL DETACHMENT
361.9	UNSPECIFIED RETINAL DETACHMENT
362.30	UNSPEC RETINAL VASCULAR OCCLUSION
362.31	CENTRAL ARTERY OCCLUSION OF RETINA
362.32	ARTERIAL BRANCH OCCLUSION OF RETINA
362.33	PARTIAL ARTERIAL OCCLUSION RETINA
362.34	TRANSIENT ARTERIAL OCCLUSION RETINA
362.35	CENTRAL VEIN OCCLUSION OF RETINA
362.36	VENOUS TRIBUTARY OCCLUSION RETINA
362.37	VENOUS ENGORGEMENT OF RETINA
362.43	HEMORR DETACH RETINL PIGMNT EPITHEL
362.81	RETINAL HEMORRHAGE
364.00	UNSPEC ACUTE&SUBACUTE IRIDOCYCLITIS
364.01	PRIMARY IRIDOCYCLITIS
364.02	RECURRENT IRIDOCYCLITIS
364.03	SECONDARY IRIDOCYCLITIS, INFECTIOUS
364.04	SEC IRIDOCYCLITIS NONINFECTIOUS
364.05	HYPOPYON
364.3	UNSPECIFIED IRIDOCYCLITIS
364.41	HYPHEMA
365.20	UNSPEC PRIMARY ANG-CLOSURE GLAUCOMA
365.21	INTERMITTENT ANGLE-CLOSURE GLAUCOMA
365.22	ACUTE ANGLE-CLOSURE GLAUCOMA
368.11	SUDDEN VISUAL LOSS
370.00	UNSPECIFIED CORNEAL ULCER
370.01	MARGINAL CORNEAL ULCER
370.02	RING CORNEAL ULCER
370.03	CENTRAL CORNEAL ULCER
370.04	HYPOPYON ULCER

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370.05	MYCOTIC CORNEAL ULCER
370.06	PERFORATED CORNEAL ULCER
370.07	MOORENS ULCER
370.24	PHOTOKERATITIS
370.55	CORNEAL ABSCESS
371.20	UNSPECIFIED CORNEAL EDEMA
371.24	CORNLEDEMA DUE WEARING CONTACT LENSES
371.82	CORNEAL DISORDER DUE CONTACT LENS
372.06	ACUTE CHEMICAL CONJUNCTIVITIS
373.13	ABSCESS OF EYELID
375.01	ACUTE DACRYOADENITIS
376.00	UNSPEC ACUTE INFLAMMATION ORBIT
376.01	ORBITAL CELLULITIS
376.02	ORBITAL PERIOSTITIS
376.03	ORBITAL OSTEOMYELITIS
376.04	ORBITAL TENONITIS
376.11	ORBITAL GRANULOMA
376.32	ORBITAL HEMORRHAGE
376.33	ORBITAL EDEMA OR CONGESTION
377.01	PAPILLOEDEMA/INCR INTRACRAN PRESS
377.30	UNSPECIFIED OPTIC NEURITIS
377.31	OPTIC PAPILLITIS
377.32	RETROBULBAR NEURITIS
377.33	NUTRITIONAL OPTIC NEUROPATHY
377.34	TOXIC OPTIC NEUROPATHY
377.39	OTHER OPTIC NEURITIS
377.42	HEMORRHAGE IN OPTIC NERVE SHEATHS
377.49	OTHER DISORDER OF OPTIC NERVE
380.14	MALIGNANT OTITIS EXTERNA
383.02	ACUTE MASTOIDITIS W/OTH COMPS
384.21	CNTRL PERFORATION TYMPANIC MEMBRANE
391.0	ACUTE RHEUMATIC PERICARDITIS
391.1	ACUTE RHEUMATIC ENDOCARDITIS
391.2	ACUTE RHEUMATIC MYOCARDITIS
391.9	UNSPECIFIED ACUTE RHD
401.0	ESSENTIAL HYPERTENSION, MALIGNANT
402.00	MALIG HTN HRT DISEASE W/O HRT FAIL
402.01	MALIG HTN HRT DISEASE W/HRT FAIL
402.91	HTN HRT DISEASE UNSPEC W/HRT FAIL
403.00	HTN CHR KID DZ MAL KID DZ I-IV/UNS

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

403.01	HTN CHR KID DZ MAL KID DZ ST V/ESRD
404.00	HTN H & CKD MAL W/CKD ST I-IV/UNS
404.01	HTN H & CKD MAL HF&CKD ST 1-IV/UNS
404.02	HTN H&CKD MAL W/O HF&CKD ST V/ESRD
404.03	HTN HRT & CKD MAL HF&CKD ST V/ESRD
404.11	HTN H & CKD BEN HF&CKD ST I-IV/UNS
404.13	HTN H & CKD BEN HF & CKD ST V/ESRD
410.00	AC MI ANTEROLAT WALL EPIS CARE UNS
410.01	AC MI ANTEROLAT WALL INIT EPIS CARE
410.02	AC MI ANTEROLAT WALL SUBSQT EOC
410.10	ACUT MI OTH ANT WALL EPIS CARE UNS
410.11	ACUT MI OTH ANT WALL INIT EPIS CARE
410.12	AC MI OTH ANT WALL SUBSQT EPIS CARE
410.20	AC MI INFEROLAT WALL EPIS CARE UNS
410.21	AC MI INFEROLAT WALL INIT EPIS CARE
410.22	AC MI INFEROLAT WALL SUBSQT EOC
410.30	AC MI INFEROPOST WALL EPIS CARE UNS
410.31	AC MI INFEROPOST WALL INIT EOC
410.32	AC MI INFEROPOST WALL SUBSQT EOC
410.40	ACUT MI OTH INF WALL EPIS CARE UNS
410.41	ACUT MI OTH INF WALL INIT EPIS CARE
410.42	AC MI OTH INF WALL SUBSQT EPIS CARE
410.50	ACUT MI OTH LAT WALL EPIS CARE UNS
410.51	ACUT MI OTH LAT WALL INIT EPIS CARE
410.52	AC MI OTH LAT WALL SUBSQT EPIS CARE
410.60	ACUT MI POST WALL INFARCT EOC UNS
410.61	ACUT MI POST WALL INFARCT INIT EOC
410.62	ACUT MI POST WALL INFRCT SUBSQT EOC
410.70	ACUT MI SUBNDOCARDL INFARCT EOC UNS
410.71	ACUT MI SUBNDOCRDL INFARCT INIT EOC
410.72	ACUT MI SUBNDOCRDL INFRCT SBSQT EOC
410.80	ACUT MI OTH SITE EPIS CARE UNS
410.81	ACUT MI OTH SITE INIT EPIS CARE
410.82	ACUT MI OTH SITE SUBSQT EPIS CARE
410.90	ACUT MYOCARD INFARCT EPIS CARE UNS
410.91	ACUT MYOCARD INFARCT INIT EPIS CARE
410.92	ACUT MI SUBSQT EPIS CARE
411.0	POSTMYOCARDIAL INFARCTION SYNDROME
411.1	INTERMEDIATE CORONARY SYNDROME
411.81	ACUT COR OCCL W/O MYOCARD INFARCT

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

411.89	OTH AC&SUBAC FORM ISCHEMIC HRT DZ
413.0	ANGINA DECUBITUS
413.1	PRINZMETAL ANGINA
413.9	OTHER&UNSPECIFIED ANGINA PECTORIS
414.10	ANEURYSM OF HEART
414.11	ANEURYSM OF CORONARY VESSELS
414.12	DISSECTION OF CORONARY ARTERY
414.19	OTHER ANEURYSM OF HEART
415.0	ACUTE COR PULMONALE
415.11	IATROGENIC PULMONARY EMBO&INFARCT
415.12	SEPTIC PULMONARY EMBOLISM
415.19	OTH PULMONARY EMBOLISM&INFARCTION
417.0	AV FISTULA PULMONARY VESSELS
417.1	ANEURYSM OF PULMONARY ARTERY
420.0	ACUTE PERICARDITIS DZ CLASS ELSW
420.90	UNSPECIFIED ACUTE PERICARDITIS
420.91	ACUTE IDIOPATHIC PERICARDITIS
420.99	OTHER ACUTE PERICARDITIS
421.0	ACUTE&SUBACUTE BACTERL ENDOCARDITIS
421.1	AC&SUBACUT INFECTV ENDOCARDIT DZ CE
421.9	UNSPECIFIED ACUTE ENDOCARDITIS
422.0	ACUTE MYOCARDITIS DZ CLASS ELSW
422.90	UNSPECIFIED ACUTE MYOCARDITIS
422.91	IDIOPATHIC MYOCARDITIS
422.92	SEPTIC MYOCARDITIS
422.93	TOXIC MYOCARDITIS
422.99	OTHER ACUTE MYOCARDITIS
423.0	HEMOPERICARDIUM
423.1	ADHESIVE PERICARDITIS
423.2	CONSTRUCTIVE PERICARDITIS
423.3	CARDIAC TAMPONADE
423.9	UNSPECIFIED DISEASE OF PERICARDIUM
424.90	ENDOCARDITIS VALV UNS UNS CAUSE
424.91	ENDOCARDITIS DISEASES CLASS ELSW
425.4	OTHER PRIMARY CARDIOMYOPATHIES
426.0	ATRIOVENTRICULAR BLOCK, COMPLETE
426.13	OTH 2 DEGREE ATRIOVENTRICULAR BLOCK
426.6	OTHER HEART BLOCK
426.7	ANOMALOUS ATRIOVENT EXCITATION
427.0	PAROXYSMAL SUPRAV TACH

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

427.1	PAROXYSMAL VENTRICULAR TACHYCARDIA
427.2	UNSPECIFIED PAROXYSMAL TACHYCARDIA
427.31	ATRIAL FIBRILLATION
427.32	ATRIAL FLUTTER
427.41	VENTRICULAR FIBRILLATION
427.42	VENTRICULAR FLUTTER
427.5	CARDIAC ARREST
427.60	UNSPECIFIED PREMATURE BEATS
427.61	SUPRAVENTRICULAR PREMATURE BEATS
427.69	OTHER PREMATURE BEATS
427.81	SINOATRIAL NODE DYSFUNCTION
427.89	OTHER SPEC CARDIAC DYSRHYTHMIAS
427.9	UNSPECIFIED CARDIAC DYSRHYTHMIA
428.0	CHF UNSPECIFIED
428.1	LEFT HEART FAILURE
428.20	UNSPECIFIED SYSTOLIC HEART FAILURE
428.21	ACUTE SYSTOLIC HEART FAILURE
428.23	ACUTE CHRONIC SYSTOLIC HEART FAIL
428.30	UNSPECIFIED DIASTOLIC HEART FAILURE
428.31	ACUTE DIASTOLIC HEART FAILURE
428.33	ACUTE CHRONIC DIASTOLIC HEART FAIL
428.40	UNS COMB SYSTOL&DIASTOL HEART FAIL
428.41	AC COMB SYSTOLIC&DIASTOLIC HRT FAIL
428.43	ACUTE CHRN SYSTOL&DIASTOL HRT FAIL
428.9	UNSPECIFIED HEART FAILURE
429.5	RUPTURE OF CHORDAE TENDINEAE
429.6	RUPTURE OF PAPILLARY MUSCLE
429.83	TAKOTSUBO SYNDROME
430	SUBARACHNOID HEMORRHAGE
431	INTRACEREBRAL HEMORRHAGE
432.0	NONTRAUMATIC EXTRADURAL HEMORRHAGE
432.1	SUBDURAL HEMORRHAGE
432.9	UNSPECIFIED INTRACRANIAL HEMORRHAGE
433.00	OCCL&STENOS BASILAR ART W/O INFARCT
433.01	OCCL&STENOS BASILAR ART W/INFARCT
433.10	OCCL&STENOS CAROTID ART W/O INFARCT
433.11	OCCL&STENOS CAROTID ART W/INFARCT
433.20	OCCL&STENOS VERT ART W/O INFARCT
433.21	OCCLUSION&STENOS VERT ART W/INFARCT
433.30	OCCL MX&BIL PRECERB ART NO INFARCT

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

433.31	OCCL MX&BIL PRECERB ART-INFARCT
433.80	OCCL OTH PRECERB ART NO INFARCT
433.81	OCCL&STENOS OTH PRECERB ART-INFARCT
433.90	OCCL UNS PRECERB ART NO INFARCT
433.91	OCCL&STENOS UNS PRECERB ART-INFARCT
434.00	CERBRL THROMB W/O MENTION INFARCT
434.01	CEREBRAL THROMBOSIS W/INFARCT
434.10	CERBRL EMBO W/O MENTION INFARCT
434.11	CEREBRAL EMBOLISM W/INFARCT
435.0	BASILAR ARTERY SYNDROME
435.1	VERTEBRAL ARTERY SYNDROME
435.2	SUBCLAVIAN STEAL SYNDROME
435.3	VERTEBROBASILAR ARTERY SYNDROME
435.8	OTH SPEC TRANSIENT CERBRL ISCHEMIAS
435.9	UNSPEC TRANSIENT CEREBRAL ISCHEMIA
436	ACUT BUT ILL-DEFINED CEREBRVASC DZ
437.2	HYPERTENSIVE ENCEPHALOPATHY
440.22	ATHEROSCLER-ART EXTREM W/REST PAIN
440.23	ATHEROSCLER-ART EXTREM W/ULCERATION
440.24	ATHERSCLER-ART EXTREM W/GANGRENE
441.00	DISSECTING AORTIC ANEUR UNSPEC SITE
441.01	DISSECTING AORTIC ANEURYSM THORACIC
441.02	DISSECTING AORTIC ANEURYSM ABD
441.03	DISSECTING AORTIC ANEUR THORACOABD
441.1	THORACIC ANEURYSM, RUPTURED
441.2	THOR ANEUR WITHOUT MENTION RUPTURE
441.3	ABDOMINAL ANEURYSM, RUPTURED
441.4	ABD ANEUR WITHOUT MENTION RUPTURE
441.5	AORTIC ANEUR UNSPEC SITE RUPTURED
441.6	THORACOABDOMINAL ANEURYSM, RUPTURED
441.7	THORACOABD ANEUR W/O MENTION RUP
441.9	AORTC ANEUR UNS SITE W/O RUP
442.0	ANEURYSM ARTERY UPPER EXTREMITY
442.1	ANEURYSM OF RENAL ARTERY
442.2	ANEURYSM OF ILIAC ARTERY
442.3	ANEURYSM ARTERY LOWER EXTREMITY
442.81	ANEURYSM OF ARTERY OF NECK
442.82	ANEURYSM OF SUBCLAVIAN ARTERY
442.83	ANEURYSM OF SPLENIC ARTERY
442.84	ANEURYSM OF OTHER VISCERAL ARTERY

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

442.89	ANEURYSM OF OTHER SPECIFIED ARTERY
442.9	OTHER ANEURYSM OF UNSPECIFIED SITE
443.21	DISSECTION OF CAROTID ARTERY
443.22	DISSECTION OF ILIAC ARTERY
443.23	DISSECTION OF RENAL ARTERY
443.24	DISSECTION OF VERTEBRAL ARTERY
443.29	DISSECTION OF OTHER ARTERY
444.0	EMBOLISM&THROMBOSIS ABDOMINAL AORTA
444.1	EMBOLISM&THROMBOSIS THORACIC AORTA
444.21	EMBO&THROMBOSIS ART UPPER EXTREMITY
444.22	EMBO&THROMBOSIS ART LOWER EXTREMITY
444.81	EMBOLISM&THROMBOSIS OF ILIAC ARTERY
444.89	EMBOLISM&THROMBOSIS OTH SPEC ARTERY
444.9	EMBOLISM&THROMBOSIS UNSPEC ARTERY
445.01	ATHEROEMBOLISM OF UPPER EXTREMITY
445.02	ATHEROEMBOLISM OF LOWER EXTREMITY
445.81	ATHEROEMBOLISM OF KIDNEY
445.89	ATHEROEMBOLISM OF OTHER SITE
446.1	ACUTE FEB MUCOCUT LYMPH NODE SYND
446.5	GIANT CELL ARTERITIS
447.0	ARTERIOVENOUS FISTULA, ACQUIRED
447.2	RUPTURE OF ARTERY
447.5	NECROSIS OF ARTERY
449	SEPTIC ARTERIAL EMBOLISM
451.11	PHLEBITIS&THROMBOPHLEB FEMORAL VEIN
451.19	PHLEBITIS OTH DEEP VEIN LOW-EXTRM
451.2	PHLEBITIS&THROMBOPHLEB LW EXTRM UNS
452	PORTAL VEIN THROMBOSIS
453.2	OTH VENUS EMBO&THROMB INF VENA CAVA
453.3	EMBOLISM&THROMBOSIS OF RENAL VEIN
453.40	AC VNUS EMB&THRMB UNS DP VES LW EXT
453.41	AC VNUS EMB&THRMB DP VES PRX LW EXT
453.42	AC VNUS EMB&THRMB DP VES DST LW EXT
453.81	ACUT VNUS EMB&THROMB SUP VNS UP EXT
453.82	ACUT VENUS EMB&THROMB DP VNS UP EXT
453.83	ACUT VENUS EMBO&THROMB UPPR EXT UNS
453.84	ACUT VENUS EMBO&THROMB AXILLARY VNS
453.85	ACUT VNUS EMBO&THROMB SUBCLAV VEINS
453.86	ACUT VNUS EMB&THRMB INTRL JUGLR VNS
453.87	ACUT VENUS EMB&THRMB OTH THOR VEINS



**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

453.89	ACUT VENUS EMB&THRMB OTH SPEC VEINS
453.9	EMBOLISM&THROMBOSIS UNSPEC SITE
455.1	INTERNAL THROMBOSED HEMORRHIDS
455.2	INTERNAL HEMORRHIDS W/OTH COMP
455.4	EXTERNAL THROMBOSED HEMORRHIDS
455.5	EXTERNAL HEMORRHIDS W/OTH COMP
456.0	ESOPHAGEAL VARICES WITH BLEEDING
456.1	ESOPH VARICES WITHOUT MENTION BLEED
457.1	OTHER NONINFECTIOUS LYMPHEDEMA
457.8	OTH NONINF D/O LYMPHATIC CHANNELS
458.1	CHRONIC HYPOTENSION
459.0	UNSPECIFIED HEMORRHAGE
459.2	COMPRESSION OF VEIN
464.01	ACUTE LARYNGITIS WITH OBSTRUCTION
464.10	ACUT TRACHEITIS W/O MENTION OBST
464.11	ACUTE TRACHEITIS WITH OBSTRUCTION
464.20	ACUT LARYNGOTRACHEITIS W/O OBST
464.21	ACUT LARYNGOTRACHEITIS W/OBST
464.30	ACUT EPIGLOTTITIS W/O MENTION OBST
464.31	ACUTE EPIGLOTTITIS WITH OBSTRUCTION
464.4	CROUP
464.51	UNSPEC SUPRAGLOTTIS W/OBSTRUCTION
466.11	ACUTE BRONCHIOLITIS DUE TO RSV
466.19	ACUT BRONCHIOLITIS-OTH INF ORGNSMS
475	PERITONSILLAR ABSCESS
478.21	CELLULITIS PHARYNX OR NASOPHARYNX
478.22	PARAPHARYNGEAL ABSCESS
478.24	RETROPHARYNGEAL ABSCESS
478.30	UNSPEC PARALYSIS VOCAL CORDS/LARYNX
478.6	EDEMA OF LARYNX
480.1	PNEUMONIA DUE TO RSV
480.3	PNEUMON DUE SARS-ASSOC CORONAVIRUS
482.42	METHICLLN RESIST PN D/T STAPH AUREUS
482.9	UNSPECIFIED BACTERIAL PNEUMONIA
484.5	PNEUMONIA IN ANTHRAX
486	PNEUMONIA, ORGANISM UNSPECIFIED
493.00	EXTRINSIC ASTHMA, UNSPECIFIED
493.01	EXTRINSIC ASTHMA W/STATUS ASTHMATC
493.02	EXTRINSIC ASTHMA, WITH EXACERBATION
493.10	INTRINSIC ASTHMA, UNSPECIFIED

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

493.11	INTRINSIC ASTHMA W/STATUS ASTHMATC
493.20	CHRONIC OBSTRUCTIVE ASTHMA UNSPEC
493.21	CHRONIC OBST ASTHMA W/STS ASTHMATC
493.81	EXERCISE INDUCED BRONCHOSPASM
493.82	COUGH VARIANT ASTHMA
493.90	ASTHMA, UNSPECIFIED, UNSPEC STATUS
493.91	ASTHMA UNSPEC W/STATUS ASTHMATICUS
493.92	ASTHMA UNSPECIFIED W/EXACERBATION
506.1	ACUTE PULM EDEMA DUE FUMES&VAPORS
508.0	ACUTE PULM MANIFESTS DUE RADIATION
510.0	EMPHYEMA WITH FISTULA
510.9	EMPHYEMA WITHOUT MENTION OF FISTULA
512.0	SPONTANEOUS TENSION PNEUMOTHORAX
512.1	IATROGENIC PNEUMOTHROAX
512.8	OTHER SPONTANEOUS PNEUMOTHORAX
513.0	ABSCESS OF LUNG
513.1	ABSCESS OF MEDIASTINUM
517.3	ACUTE CHEST SYNDROME
518.0	PULMONARY COLLAPSE
518.1	INTERSTITIAL EMPHYSEMA
518.4	UNSPECIFIED ACUTE EDEMA OF LUNG
518.5	PULM INSUFF FOLLOW TRAUMA&SURGERY
518.7	TRANSFUSION RELATED ACUTE LUNG INJ
518.81	ACUTE RESPIRATORY FAILURE
518.82	OTHER PULMONARY INSUFFICIENCY NEC
518.84	ACUTE&CHRONIC RESPIRATORY FAILURE
519.09	OTHER TRACHEOSTOMY COMPLICATIONS
519.11	ACUTE BRONCHOSPASM
522.1	NECROSIS OF DENTAL PULP
523.8	OTHER SPEC PERIODONTAL DISEASES
530.21	ULCER OF ESOPHAGUS WITH BLEEDING
530.82	ESOPHAGEAL HEMORRHAGE
530.86	INFECTION OF ESOPHAGOSTOMY
530.87	MECH COMPLICATION ESOPHAGOSTOMY
531.00	ACUT GASTR ULCR W/HEM W/O OBST
531.01	ACUT GASTR ULCER W/HEMORR&OBST
531.10	ACUT GASTR ULCR W/PERF W/O OBST
531.11	ACUT GASTR ULCER W/PERF&OBSTRUCTION
531.20	AC GASTR ULCR W/HEMOR&PERF W/O OBST
531.21	ACUT GASTR ULCER W/HEMORR PERF&OBST

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

531.31	AC GASTR ULCR W/O HEMOR/PERF W/OBST
531.40	CHRN/UNS GASTR ULCR W/HEM W/O OBST
531.41	CHRON/UNS GASTR ULCR W/HEMORR&OBST
531.50	CHRN/UNS GASTR ULCR W/PERF W/O OBST
531.51	CHRON/UNSPEC GASTR ULCR W/PERF&OBST
531.60	CHRN/UNS GASTR ULCER W/HEMORR&PREF
531.61	CHRN/UNS GASTR ULCR W/HEM PERF&OBST
531.71	CHRN GSTR ULCR NO HEMOR/PERF W/OBST
531.91	GASTR ULCR UNS NO HEMOR/PERF W/OBST
532.00	ACUT DUOD ULCR W/HEM W/O OBST
532.01	ACUT DUOD ULCER W/HEMORR&OBST
532.10	ACUT DUOD ULCR W/PERF W/O OBST
532.11	ACUT DUOD ULCER W/PERF&OBSTRUCTION
532.20	AC DUOD ULCR W/HEMOR&PERF W/O OBST
532.21	ACUT DUOD ULCER W/HEMORR PERF&OBST
532.30	ACUT DUOD ULCR W/O HEMOR PERF/OBST
532.31	AC DUOD ULCR W/O HEMOR/PERF W/OBST
532.40	CHRN/UNS DUOD ULCR W/HEM W/O OBST
532.41	CHRON/UNS DUOD ULCR W/HEMORR&OBST
532.50	CHRN/UNS DUOD ULCR W/PERF W/O OBST
532.51	CHRON/UNSPEC DUOD ULCER W/PERF&OBST
532.60	CHRN/UNS DUOD ULCR W/HEMORR&PERF
532.61	CHRN/UNS DUOD ULCR W/HEM PERF&OBST
532.71	CHRN DUOD ULCR NO HEMOR/PERF W/OBST
532.91	DUOD ULCR UNS NO HEMOR/PERF W/OBST
533.00	ACUT PEPTC ULCR W/HEM W/O OBST
533.01	ACUT PEPTC ULCR W/HEMORR&OBST
533.10	ACUT PEPTC ULCR W/PERF W/O OBST
533.11	ACUT PEPTC ULCR W/PERF&OBST
533.20	ACUT PEP ULCR W/HEMOR&PERF W/O OBST
533.21	ACUT PEPTC ULCR W/HEM PERF&OBST
533.30	ACUT PEPTC ULCR W/O HEMOR PERF/OBST
533.31	ACUT PEP ULCR W/O HEMOR&PERF W/OBST
533.40	CHRN/UNS PEPTC ULCR W/HEM W/O OBST
533.50	CHRN/UNS PEPTC ULCR W/PERF W/O OBST
533.51	CHRN/UNS PEPTC ULCR W/PERF&OBST
533.60	CHRN/UNS PEPTC ULCR W/HEMORR&PERF
533.61	CHRN/UNS PEPTC ULCR W/HEM PERF&OBST
533.71	CHRN PEP ULCR W/O HEMOR/PERF W/OBST
533.91	PEPTC ULCR UNS NO HEMOR/PERF W/OBST

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

534.00	ACUT GASTROJEJ ULCR W/HEM W/O OBST
534.01	ACUT GASTROJEJUN ULCR W/HEMORR&OBST
534.10	ACUT GASTROJEJ ULCR W/PERF W/O OBST
534.11	ACUT GASTROJEJUN ULCER W/PERF&OBST
534.20	ACUTE GASTROJEJ ULCR W/HEMORR&PERF
534.21	ACUT GASTROJEJ ULCR W/HEM PERF&OBST
534.30	AC GSTROJEJ ULCR NO HEMOR-PERF/OBST
534.31	AC GSTROJEJ ULCR NO HMOR/PRF W/OBST
534.40	CHRN/UNS GSTROJEJ ULCR W/HEMORR
534.41	CHRON/UNS GSTROJEJ ULCR W/HMOR&OBST
534.50	CHRN/UNS GASTROJEJUN ULCER W/PERF
534.51	CHRN/UNS GASTROJEJ ULCR W/PERF&OBST
534.60	CHRN/UNS GSTROJEJ ULCR W/HEMOR&PERF
534.61	CHRN/UNS GSTROJEJ ULCR W/HMOR&OBST
534.71	CHRN GASTROJEJUN ULCER W/OBST
534.91	GASTROJEJUN ULCER UNS W/OBST
535.01	ACUTE GASTRITIS WITH HEMORRHAGE
535.10	ATROPHIC GASTRITIS W/O HEMOR
535.11	ATROPHIC GASTRITIS WITH HEMORRHAGE
535.20	GASTR MUCOS HYPERTROPHY W/O HEMOR
535.21	GASTRIC MUCOS HYPERTROPHY W/HEMORR
535.30	ALCOHOLIC GASTRITIS W/O HEMOR
535.31	ALCOHOLIC GASTRITIS WITH HEMORRHAGE
535.40	OTH SPEC GASTRITIS W/O HEMOR
535.41	OTHER SPEC GASTRITIS W/HEMORRHAGE
535.50	UNS GASTRIT&GASTRODUODIT NO HEMORR
535.51	UNS GASTRIT&GASTRODUODENIT W/HEMORR
535.61	DUODENITIS WITH HEMORRHAGE
537.83	ANGIODYSPLAS STOMACH&DUOD W/HEMORR
537.84	DIEULAFOY LESION STOMACH&DUODENUM
540.0	ACUT APPENDICITIS W/GEN PERITONITIS
540.1	ACUTE APPENDICITIS W/PERITON ABSC
540.9	ACUT APPENDICITIS W/O PERITONITIS
541	APPENDICITIS, UNQUALIFIED
542	OTHER APPENDICITIS
543.0	HYPERPLASIA OF APPENDIX
543.9	OTHER&UNSPECIFIED DISEASES APPENDIX
550.00	ING HERNIA W/GANGRENE UNILAT/UNSPEC
550.01	ING HERN W/GANGREN RECUR UNILAT/UNS
550.02	ING HERNIA W/GANGRENE BILATERAL

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

550.03	ING HERNIA W/GANGRENE RECUR BILAT
550.10	ING HERN W/OBST NO GANGRN UNILT/UNS
550.11	ING HERNIA W/OBST RECUR UNILAT/UNS
550.12	ING HERN W/OBST W/O GANGREN BILAT
550.13	INGUINAL HERNIA W/OBST RECUR BILAT
551.00	FEM HERNIA W/GANGRENE UNILAT/UNSPEC
551.01	FEM HERN W/GANGREN RECUR UNILAT/UNS
551.02	FEMORAL HERNIA W/GANGRENE BILATERAL
551.03	FEM HERNIA W/GANGRENE RECUR BILAT
551.1	UMBILICAL HERNIA WITH GANGRENE
551.20	UNSPEC VENTRAL HERNIA W/GANGRENE
551.21	INCI VENTRAL HERNIA W/GANGRENE
551.29	OTHER VENTRAL HERNIA WITH GANGRENE
551.3	DIAPHRAGMATIC HERNIA WITH GANGRENE
551.8	HERNIA OTHER SPEC SITES W/GANGRENE
551.9	HERNIA UNSPECIFIED SITE W/GANGRENE
552.00	UNILAT/UNSPEC FEM HERN W/OBST
552.01	RECUR UNILAT/UNSPEC FEM HERN W/OBST
552.02	BILAT FEMORAL HERNIA W/OBSTRUCTION
552.03	RECUR BILAT FEM HERN W/OBSTRUCTION
552.1	UMBILICAL HERNIA WITH OBSTRUCTION
552.20	UNSPEC VENTRAL HERNIA W/OBSTRUCTION
552.21	INCISIONAL HERNIA WITH OBSTRUCTION
552.29	OTHER VENTRAL HERNIA W/OBSTRUCTION
552.3	DIAPHRAGMATIC HERNIA W/OBSTRUCTION
552.8	HERNIA OTH SPEC SITE W/OBSTRUCTION
552.9	HERNIA UNSPEC SITE W/OBSTRUCTION
557.0	ACUTE VASCULAR INSUFF INTESTINE
557.1	CHRONIC VASCULAR INSUFF INTESTINE
557.9	UNSPEC VASCULAR INSUFF INTESTINE
560.0	INTUSSUSCEPTION
560.1	PARALYTIC ILEUS
560.2	VOLVULUS
560.30	UNSPECIFIED IMPACTION OF INTESTINE
560.31	GALLSTONE ILEUS
560.39	OTHER IMPACTION OF INTESTINE
560.81	INTEST/PERITON ADHES W/OBSTRUCTION
560.89	OTHER SPEC INTESTINAL OBSTRUCTION
560.9	UNSPECIFIED INTESTINAL OBSTRUCTION
562.01	DIVERTICULITIS OF SMALL INTESTINE

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

562.02	DIVERTICULOSIS SM INTEST W/HEMORR
562.03	DIVERTULITIS SM INTESTINE W/HEMORR
562.11	DIVERTICULITIS OF COLON
562.12	DIVERTICULOSIS COLON W/HEMORRHAGE
562.13	DIVERTICULITIS COLON W/HEMORRHAGE
566	ABSCESS OF ANAL AND RECTAL REGIONS
567.0	PERITONITIS INF DZ CLASS ELSW
567.1	PNEUMOCOCCAL PERITONITIS
567.21	PERITONITIS (ACUTE) GENERALIZED
567.22	PERITONEAL ABSCESS
567.23	SPONTANEOUS BACTERIAL PERITONITIS
567.29	OTHER SUPPURATIVE PERITONITIS
567.31	PSOAS MUSCLE ABSCESS
567.38	OTHER RETROPERITONEAL ABSCESS
567.39	OTHER RETROPERITONEAL INFECTIONS
567.81	CHOLEPERITONITIS
567.82	SCLEROSING MESENTERITIS
567.89	OTHER SPECIFIED PERITONITIS
567.9	UNSPECIFIED PERITONITIS
569.60	UNSPEC COMP COLOST/ENTEROSTOMY
569.61	INFECTION COLOSTOMY OR ENTEROSTOMY
569.69	OTH COMPLICATION COLOST/ENTEROSTOMY
569.71	POUCHITIS
569.79	OTH COMPLICATIONS INTESTINAL POUCH
569.83	PERFORATION OF INTESTINE
569.85	ANGIODYSPLASIA INTESTINE W/HEMORR
569.86	DIEULAFOY LESION OF INTESTINE
569.87	VOMITING OF FECAL MATTER
570	ACUTE&SUBACUTE NECROSIS OF LIVER
571.1	ACUTE ALCOHOLIC HEPATITIS
572.2	HEPATIC ENCEPHALOPATHY
573.4	HEPATIC INFARCTION
574.00	CALCU GB W/ACUT CHOLCYST W/O OBST
574.01	CALCU GB W/ACUT CHOLCYST&OBST
574.10	CALCU GB W/OTH CHOLCYST W/O OBST
574.11	CALCU GALLBLADD W/OTH CHOLCYST&OBST
574.20	CALCU GB W/O MENTION CHOLCYST/OBST
574.21	CALCU GB W/O CHOLCYST W/OBST
574.30	CALCU BD W/ACUT CHOLCYST W/O OBST
574.40	CALCU BD W/OTH CHOLCYST W/O OBST

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

574.41	CALCU BD W/OTH CHOLECYST&OBST
574.50	CALCU BD W/O MENTION CHOLECYST/OBST
574.51	CALCU BD W/O CHOLCYST W/OBST
574.60	CALCU GB&BD W/AC CHOLCYST W/O OBST
574.61	CALCU GB&BD W/ACUT CHOLCYST W/OBST
574.70	CALCU GB&BD W/OTH CHOLCYST W/O OBST
574.71	CALCU GB&BD W/OTH CHOLCYST W/OBST
574.80	CALCU GB&BD CHOLCYST NO OBST
574.81	CALCU GB&BD-ACUT&CHRN CHOLCYST-OBST
574.90	CALCU GB&BD W/O CHOLCYST W/O OBST
574.91	CALCU GB&BD W/O CHOLCYST W/OBST
575.0	ACUTE CHOLECYSTITIS
575.10	CHOLECYSTITIS, UNSPECIFIED
575.11	CHRONIC CHOLECYSTITIS
575.12	ACUTE AND CHRONIC CHOLECYSTITIS
575.2	OBSTRUCTION OF GALLBLADDER
575.3	HYDROPS OF GALLBLADDER
575.4	PERFORATION OF GALLBLADDER
575.5	FISTULA OF GALLBLADDER
575.6	CHOLESTEROLOSIS OF GALLBLADDER
576.0	POSTCHOLECYSTECTOMY SYNDROME
576.1	CHOLANGITIS
576.2	OBSTRUCTION OF BILE DUCT
576.3	PERFORATION OF BILE DUCT
576.4	FISTULA OF BILE DUCT
576.5	SPASM OF SPHINCTER OF ODDI
576.8	OTHER SPEC DISORDERS BILIARY TRACT
576.9	UNSPECIFIED DISORDER BILIARY TRACT
577.0	ACUTE PANCREATITIS
578.0	HEMATEMESIS
578.1	BLOOD IN STOOL
578.9	UNSPEC HEMORRHAGE GI TRACT
584.5	ACUT KIDNEY FAIL LES TUBULAR NECRO
584.6	AC KID FAIL LES RENL CORTICAL NECRO
584.7	AC KIDNEY FAIL LES MEDULLARY NECRO
584.8	AC KID FAIL OTH SPEC PATH LES KID
584.9	ACUTE KIDNEY FAILURE UNSPECIFIED
588.81	SECONDARY HYPERPARATHYROIDISM
590.10	AC PYLONPH NO LES RENL MDULRY NCROS
590.11	AC PYLONPH W/LES RENL MDULRY NECROS

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

590.2	RENAL AND PERINEPHRIC ABSCESS
590.9	UNSPECIFIED INFECTION OF KIDNEY
592.0	CALCULUS OF KIDNEY
592.1	CALCULUS OF URETER
592.9	UNSPECIFIED URINARY CALCULUS
594.0	CALCULUS IN DIVERTICULUM OF BLADDER
594.1	OTHER CALCULUS IN BLADDER
594.2	CALCULUS IN URETHRA
594.8	OTHER LOWER URINARY TRACT CALCULUS
594.9	UNSPEC CALCULUS LOWER URINARY TRACT
596.0	BLADDER NECK OBSTRUCTION
596.6	NONTRAUMATIC RUPTURE OF BLADDER
599.60	URINARY OBSTRUCTION UNSPECIFIED
599.69	URINARY OBSTRUCTION NEC
599.71	GROSS HEMATURIA
601.0	ACUTE PROSTATITIS
604.0	ORCHITIS WITH ABSCESS
607.1	BALANOPOSTHITIS
607.3	PRIAPISM
607.85	PEYRONIES DISEASE
608.20	TORSION OF TESTIS UNSPECIFIED
608.21	EXTRAVAGINAL TORSION SPERMATIC CORD
608.22	INTRAVAGINAL TORSION SPERMATIC CORD
608.23	TORSION OF APPENDIX TESTIS
608.24	TORSION OF APPENDIX EPIDIDYMIS
608.86	EDEMA OF MALE GENITAL ORGANS
611.0	INFLAMMATORY DISEASE OF BREAST
614.0	ACUTE SALPINGITIS AND OOPHORITIS
614.1	CHRONIC SALPINGITIS AND OOPHORITIS
614.2	SALPINGITIS&OOPHORITIS NOT SPEC
614.3	ACUTE PARAMETRITIS&PELV CELLULITIS
614.4	CHRN/UNS PARAMETRITIS&PELV CELLULIT
614.5	ACUTE/UNSPEC PELVIC PERITONITIS FE
614.6	PELVIC PERITONEAL ADHESIONS, FEMALE
614.7	OTH CHRONIC PELVIC PERITONITIS FE
614.8	OTH INFLAM DZ FE PELV ORGN&TISS
614.9	UNSPEC INFLAM DZ FE PELV ORGN&TISS
618.01	CYSTOCELE W/O UTERINE PROLAPS MIDLN
618.02	CYSTOCELE W/O UTERINE PROLAPS LAT
618.03	URETHROCELE W/O UTERINE PROLAPS



**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

618.04	RECTOCELE W/O MENTION UTERN PROLAPS
618.05	PERINEOCELE W/O UTERINE PROLAPS
620.5	TORSION OVARY OVARIAN PEDICLE/TUBE
624.5	HEMATOMA OF VULVA
629.29	OTH FEMALE GENITL MUTILATION STATUS
632	MISSED ABORTION
634.00	UNLAB COMP GENIT TRACT&PELV INF
634.01	INCLAB COMP GENIT TRACT&PELV INF
634.02	CMPLAB COMP GENIT TRACT&PELV INF
634.10	UNSPONT AB COMP DELAY/XCESS HEMOR
634.11	INCLAB COMP DELAY/XCESS HEMOR
634.12	CMPLAB COMP DELAY/XCESS HEMOR
634.20	UNLAB COMP DAMGE PELV ORGN/TOSS
634.21	INCLAB COMP DAMGE PELV ORGN/TOSS
634.22	CMPLAB COMP DAMGE PELV ORGN/TOSS
634.30	UNSPEC SPONT AB COMP RENAL FAIL
634.31	INCL SPONT AB COMP RENAL FAIL
634.32	COMPLETE SPONT AB COMP RENAL FAIL
634.40	UNSPEC SPONT AB COMP METAB DISORDER
634.41	INCL SPONT AB COMP METAB DISORDER
634.42	CMPL SPONT AB COMP METAB DISORDER
634.50	UNSPEC SPONTANEOUS AB COMP SHOCK
634.51	INCL SPONTANEOUS AB COMP SHOCK
634.52	COMPLETE SPONTANEOUS AB COMP SHOCK
634.60	UNSPEC SPONTANEOUS AB COMP EMBOLISM
634.61	INCOMPLETE SPONTANEOUS AB COMP EMBO
634.62	COMPLETE SPONTANEOUS AB COMP EMBO
634.70	UNSPEC SPONT AB W/OTH SPEC COMPS
634.71	INCL SPONT AB W/OTH SPEC COMPS
634.72	COMPLETE SPONT AB W/OTH SPEC COMPS
634.80	UNSPEC SPONTANEOUS AB W/UNSPEC COMP
634.81	INCL SPONTANEOUS AB W/UNSPEC COMP
634.82	COMPLETE SPONT AB W/UNSPEC COMP
634.90	UNSPEC SPONT AB W/O MENTION COMP
634.91	INCL SPONT AB WITHOUT MENTION COMP
634.92	COMPLETE SPONT AB W/O MENTION COMP
635.00	UNLEGL AB COMPL GEN TRCT&PELV INF
635.01	INCMPL LEGL AB COMPL GENIT&PELV INF
635.02	CMPL LEGL AB COMPL GENITAL&PELV INF
635.10	UNLEGL AB COMPL DELAY/EXCESS HEM

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

635.11	INCMPLEGL AB COMPL DELAY/XCSS HEM
635.12	CMPLLEGL AB COMPL DELAY/EXCESS HEM
635.20	UNSOLEGL AB COMPL DAMGE PELV ORGN
635.21	LEGL AB COMPL DMGE PELV ORGN INCMPL
635.22	CMPLLEGL AB COMPL DAMGE PELV ORGN
635.30	UNSOLEGL INDUCD AB COMP RENL FAIL
635.31	INCPLLEGL INDUCD AB COMP RENL FAIL
635.40	UNSOLEGL INDUCD AB COMP METAB D/O
635.41	INCPLLEGL INDUCD AB COMP METAB D/O
635.42	CMPLLEGL INDUCD AB COMP METAB D/O
635.50	UNSPEC LEGALLY INDUCD AB COMP SHOCK
635.51	LEGALLY INDUCED AB COMP SHOCK INCPL
635.52	COMPLETELEGL INDUCD AB COMP SHOCK
635.60	UNSPEC LEGALLY INDUCED AB COMP EMBO
635.61	INCPLLEGALLY INDUCED AB COMP EMBO
635.62	COMPLETELEGL INDUCD AB COMP EMBO
635.70	UNSOLEGL INDUCD AB W/OTH SPEC COMPS
635.71	INCPLLEGL INDUCD AB W/OTH COMPS
635.72	CMPLLEGL INDUCD AB W/OTH COMPS
635.80	UNSPECLEGL INDUCD AB W/UNSPEC COMP
635.81	INCPLLEGL INDUCD AB W/UNSPEC COMP
635.82	CMPLLEGL INDUCD AB W/UNSPEC COMP
636.00	UNSOLEGL AB COMPL GEN TRCT&PELV INF
636.01	INCMPLEGL AB COMPL GENIT&PELV INF
636.02	CMPLILEGL AB COMPL GENITAL&PELV INF
636.10	UNSOLEGL AB COMPL DELAY/EXCESS HEM
636.11	INCMPLEGL AB COMPL DELAY/XCSS HEM
636.12	CMPLILEGL AB COMPL DELAY/EXCESS HEM
636.20	UNSOLEGL AB COMPL DAMGE PELV ORGN
636.21	INCMPLEGL AB COMPL DMGE PELV ORGN
636.22	CMPLILEGL AB COMPL DAMGE PELV ORGN
636.30	UNSOLEGL INDUCD AB COMP RENL FAIL
636.31	INCPLILEGL INDUCD AB COMP RENL FAIL
636.32	CMPLILEGL INDUCD AB COMP RENAL FAIL
636.40	UNSOLEGL AB COMPL METABOLIC D/O
636.41	INCPLILEGL INDUCD AB COMP METAB D/O
636.42	CMPLILEGL INDUCD AB COMP METAB D/O
636.50	UNSPEC ILEG INDUCED AB COMP SHOCK
636.51	INCPLILEGL INDUCED AB COMP SHOCK
636.52	COMPLETE ILEG INDUCED AB COMP SHOCK

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

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636.60	UNSPEC ILEG INDUCED AB COMP EMBO
636.61	INCPL ILEG INDUCED AB COMP EMBO
636.62	COMPLETE ILEG INDUCED AB COMP EMBO
636.70	UNS ILEG INDUCD AB W/OTH SPEC COMPS
636.71	INCPL ILEG INDUCD AB W/OTH COMPS
636.72	CMPL ILEG INDUCD AB W/OTH COMPS
636.80	UNSPEC ILEG INDUCD AB W/UNSPEC COMP
636.81	INCPL ILEG INDUCED AB W/UNSPEC COMP
636.82	CMPL ILEG INDUCD AB W/UNSPEC COMP
636.90	UNS ILEG INDUCD AB W/O MENTION COMP
636.91	INCPL ILEG INDUCD AB W/O COMP
636.92	CMPL ILEG INDUCD AB W/O COMP
637.00	AB UNS-CMPL/LEGL COMPL GEN&PELV INF
637.01	LEGL UNS AB INCMPL COMPL PELV INF
637.02	LEGL UNS AB CMPL COMPL GEN&PELV INF
637.10	AB UNS CMPL/LEGL COMPL DELAY HEM
637.11	LEGL UNS AB INCMPL COMPL DELAY HEM
637.12	LEGL UNS AB CMPL COMPL DELAY HEM
637.20	AB UNS CMPL/LEGL COMPL DAMGE PELVIC
637.21	LEGL UNS AB INCMPL COMPL DAMGE PELV
637.22	LEGL UNS AB CMPL COMPL DAMGE PELV
637.30	AB UNS AS CMPL/LEGL COMP RENL FAIL
637.31	LEGL UNSPEC AB INCPL COMP RENL FAIL
637.32	LEGL UNSPEC AB CMPL COMP RENAL FAIL
637.40	AB UNS CMPLNESS/LEGL COMP METAB D/O
637.41	LEGL UNSPEC AB INCPL COMP METAB D/O
637.42	LEGL UNSPEC AB CMPL COMP METAB D/O
637.50	AB UNSPEC AS CMPL/LEGL COMP SHOCK
637.51	LEGALLY UNSPEC AB INCPL COMP SHOCK
637.52	LEGL UNSPEC AB COMPLETE COMP SHOCK
637.60	AB UNSPEC AS CMPL/LEGL COMP EMBO
637.61	LEGALLY UNSPEC AB INCPL COMP EMBO
637.62	LEGL UNSPEC AB COMPLETE COMP EMBO
637.70	AB UNS CMPL/LEGL W/OTH SPEC COMPS
637.71	LEGL UNS AB INCPL W/OTH SPEC COMPS
637.72	LEGL UNS AB CMPL W/OTH SPEC COMPS
637.80	AB UNS AS CMPL/LEGL W/UNS COMP
637.81	LEGL UNSPEC AB INCPL W/UNSPEC COMP
637.82	LEGL UNSPEC AB CMPL W/UNSPEC COMP
637.90	UNS TYPE AB UNS CMPL/LEGL W/O COMP

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

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637.91	LEGL UNS AB INCPL W/O MENTION COMP
637.92	LEGL UNS AB CMPL W/O MENTION COMP
639.0	GENIT&PELV INF FLW AB/ECTOP&MOLR PG
639.1	DLAY/XCESS HEM FLW AB/ECTOP&MOLR PG
639.2	DMGE PELV ORGN FLW AB/ECTOP&MOLR PG
639.3	COMP FLW AB&ECTOP&MOLAR PG KID FAIL
639.4	METAB D/O FOLLOW AB/ECTOP&MOLAR PG
639.5	SHOCK FOLLOW AB/ECTOPIC&MOLAR PG
639.6	EMBO FOLLOW AB/ECTOPIC&MOLAR PG
639.8	OTH SPEC COMP FLW AB/ECTOP&MOLAR PG
639.9	UNS COMP FOLLOW AB/ECTOPIC&MOLAR PG
640.00	THREATENED AB UNSPEC AS EPIS CARE
640.01	THREATENED ABORTION, DELIVERED
640.03	THREATENED ABORTION, ANTEPARTUM
640.80	OTH SPEC HEMOR ERLY PG UNS EOC
640.81	OTH SPEC HEMORR EARLY PG DELIV
640.83	OTH SPEC HEMORR EARLY PG ANTPRTM
640.90	UNS HEMORR ERLY PG UNS AS EPIS CARE
640.91	UNSPEC HEMORR EARLY PREGNANCY DELIV
640.93	UNSPEC HEMORR EARLY PG ANTPRTM
641.00	PLACNTA PREVIA W/O HEMOR UNS EOC
641.01	PLACENTA PREVIA W/O HEMORR DELIV
641.03	PLACENTA PREVIA W/O HEMORR ANTPRTM
641.10	HEMORR PLACNTA PREVIA UNS EPIS CARE
641.11	HEMORR FROM PLACENTA PREVIA W/DELIV
641.13	HEMORR FROM PLACENTA PREVIA ANTPRTM
641.20	PRMAT SEP PLACNTA UNS AS EPIS CARE
641.21	PRMAT SEPARATION PLACENTA W/DELIV
641.23	PRMAT SEPARATION PLACENTA ANTPRTM
641.30	ANTPRTM HEM W/COAGLAT DEFEC UNS EOC
641.31	ANTPRTM HEMORW/COAGULAT DEFEC DELIV
641.33	ANTPRTM HEM W/COAGLAT DEFEC ANTPRTM
641.80	OTH ANTPRTM HEMORR UNS AS EPIS CARE
641.81	OTH ANTPRTM HEMORRHAGE W/DELIVERY
641.83	OTH ANTPRTM HEMORRHAGE ANTPRTM
641.90	UNS ANTPRTM HEMORR UNS AS EPIS CARE
641.91	UNSPEC ANTPRTM HEMORRHAGE W/DELIV
641.93	UNSPEC ANTPRTM HEMORRHAGE ANTPRTM
642.40	MILD/UNS PRE-ECLAMP UNS EPIS CARE
642.41	MILD/UNSPEC PRE-ECLAMPسيا W/DELIV

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

642.42	MILD/UNS PRE-ECLAMP DEL W/CURR PPC
642.43	MILD/UNSPEC PRE-ECLAMPSIA ANTPRTM
642.44	MILD/UNSPEC PRE-ECLAMP PREV PP COND
642.50	SEV PRE-ECLAMP UNSPEC AS EPIS CARE
642.51	SEVERE PRE-ECLAMPSIA, WITH DELIVERY
642.52	SEV PRE-ECLAMP DELIV W/CURRNT PPC
642.53	SEVERE PRE-ECLAMPSIA, ANTEPARTUM
642.54	SEVERE PRE-ECLAMP PREVIOUS PP COND
642.60	ECLAMPSIA-UNSPECIFIED
642.61	ECLAMPSIA, WITH DELIVERY
642.62	ECLAMPSIA W/DELIVERY W/CURRENT PPC
642.63	ECLAMPSIA, ANTEPARTUM
642.64	ECLAMPSIA PREVIOUS POSTPARTUM COND
642.70	PRE-ECLMP/ECLMP PRE-XST HTN-UNS EOC
642.71	PRE-ECLAMP/ECLAMP PRE-XST HTN DELIV
642.72	PRE-ECLMP/ECLMP PRE-XST HTN-DEL-PPC
642.73	PRE-ECLMP/ECLMP PRE-XST HTN ANTPRTM
642.74	PRE-ECLAMP/ECLAMP PRE-XST HTN PP
642.90	HYPERTEN PREG NOS-UNSPEC
642.91	UNSPECIFIED HYPERTENSION W/DELIVERY
642.92	UNSPEC HTN W/DELIV W/CURRENT PPC
642.93	UNSPECIFIED HYPERTENSION ANTEPARTUM
642.94	UNSPEC HTN PREVIOUS POSTPARTUM COND
643.00	MILD HYPEREMESIS GRAVDA UNS EOC
643.01	MILD HYPEREMESIS GRAVIDARUM DELIV
643.03	MILD HYPEREMESIS GRAVIDARUM ANTPRTM
643.10	HYPEREMESIS W/METAB DSTUR UNS EOC
643.11	HYPEREMESIS W/METAB DISTURBANCE DEL
643.13	HYPEREMESIS W/METAB DISTURB ANTPRTM
643.20	LATE VOMITING PG UNS AS EPIS CARE
643.21	LATE VOMITING PREGNANCY DELIVERED
643.23	LATE VOMITING PREGNANCY ANTEPARTUM
643.80	OTH VOMITING COMP PG UNS EPIS CARE
643.81	OTH VOMITING COMP PREGNANCY DELIV
643.83	OTH VOMITING COMP PREGNANCY ANTPRTM
643.90	UNS VOMITING PG UNS AS EPIS CARE
643.91	UNSPEC VOMITING PREGNANCY DELIVERED
643.93	UNSPEC VOMITING PREGNANCY ANTPRTM
644.00	THREATENED PRMAT LABR UNS EPIS CARE
644.03	THREATENED PREMATURE LABOR ANTPRTM

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

644.10	OTH THREATENED LABR UNS EPIS CARE
644.13	OTHER THREATENED LABOR, ANTEPARTUM
644.20	ERLY ONSET DELIV UNS AS EPIS CARE
644.21	EARLY ONSET DELIVERY-DEL
649.10	OBES COMP PG BIRTH/PP UNSPEC EOC/NA
649.11	OBESITY COMP PG CHILDBIRTH/PP DEL
649.12	OBES COMP PG BIRTH/PP DEL W/PP COMP
649.13	OBES COMP PG BIRTH/PP AP COND/COMP
649.14	OBES COMP PG BIRTH/THE PP PPC/COMP
649.20	BARIATRC SURG COMP PG CB/PP UNS EOC
649.21	BARIATRIC SURG COMP PG BIRTH/PP DEL
649.22	BAR SURG COMP PG CB/PP DEL PP COMP
649.23	BAR SURG COMP PG CB/PP AP COND/COMP
649.24	BAR SURG COMP PG CB/PP PPC/COMP
649.30	COAG DEFEC COMP PG CB/PP UNSPEC EOC
649.31	COAGULAT DEFEC COMP PG BIRTH/PP DEL
649.32	COAG DEF COMP PG CB/PP DEL PP COMP
649.33	COAG DEF COMP PG CB/PP AP COND/COMP
649.34	COAG DEFEC COMP PG CB/PP PPC/COMP
649.40	EPIL COMP PG BIRTH/PP UNSPEC EOC/NA
649.41	EPIL COMP PG CHILDBIRTH/THE PP DEL
649.42	EPIL COMP PG BIRTH/PP DEL W/PP COMP
649.43	EPIL COMP PG BIRTH/PP AP COND/COMP
649.44	EPIL COMP PG BIRTH/PP PP COND/COMP
649.50	SPOTTING COMP PG UNS EPIS CARE/NA
649.51	SPOTTING COMPLICATING PREGNANCY DEL
649.53	SPOTTING COMP PG ANTEPRTM COND/COMP
651.11	TRIPLT PREGNANCY, DELIVERED
651.13	TRIPLT PREGNANCY, ANTEPARTUM
651.40	TRIPLT PG-FETL LOSS&RETN 1/>UNS EOC
651.41	TRIPLT PG W/FETL LOSS&RETN 1/> DEL
651.43	TRIPLT PG-FETL LOSS&RETN 1/>ANTPRTM
651.50	QUAD PG-FETL LOSS&RETN 1/>UNS EOC
651.51	QUAD PG W/FETAL LOSS&RETN 1/> DEL
651.53	QUAD PG-FETL LOSS&RETN 1/> ANTPRTM
655.70	DECR FETAL MOVMENTS UNS AS EPIS CARE
655.71	DECR FETAL MOVMENTS MGMT MOTH DELIV
655.73	DCRESF FETL MOVEMENT ANTPRTM COMPL
656.30	FETL DISTRESS MGMT MOTH UNS EOC
656.31	FETAL DISTRESS MGMT MOTH DELIV

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

656.33	FETAL DISTRESS MGMT MOTH ANTPRTM
656.40	INTRAUTERN DEATH MGMT MOTH UNS EOC
656.41	INTRAUTERN DEATH MGMT MOTH DELIV
656.43	INTRAUTERN DEATH MGMT MOTH ANTPRTM
659.70	ABN FETAL HEART RATE/RHYTHM UNS EOC
659.71	ABN FETAL HEART RATE/RHYTHM DEL
659.73	ABN FETAL HEART RATE ANTPRTM COMPL
663.13	CORD AROUND NECK-COMPRS ANTPRTM
663.20	OTH& UNS CORD-COMPRESS UNS EOC
663.21	OTH&UNS CORD-COMPPRS COMPL L&D DEL
663.23	OTH&UNS CORD-COMPRS COMPL L&D ANTPR
664.30	FOURTH-DEG PERINL LAC UNS EOC PG
664.31	FOURTH-DEG PERINL LACERATION DELIV
664.34	FOURTH-DEG PERINL LACERATION PP
665.00	RUP UTRUS BEFORE ONSET LABR UNS EOC
665.01	RUP UTERUS BEFORE ONSET LABR DELIV
665.03	RUP UTRUS BEFORE ONSET LABR ANTPRTM
665.10	RUP UTERUS DUR LABR UNSPEC AS EPIS
665.11	RUPTURE UTERUS DURING LABOR W/DELIV
666.00	THIRD-STAGE PP HEMORR UNS EPIS CARE
666.02	THIRD-STAGE PP HEMORR W/DELIV
666.04	THIRD-STAGE PP HEMORR PP
666.10	OTH IMMED PP HEMORR UNS EPIS CARE
666.12	OTH IMMEDIATE PP HEMORR W/DELIV
666.14	OTH IMMEDIATE PP HEMORR PP
666.20	DELAY&SEC PP HEMORR UNS EPIS CARE
666.22	DELAY&SEC POSTPARTUM HEMORR W/DELIV
666.24	DELAY&SEC PP HEMORR PP
666.30	PP COAGULAT DEFEC UNS AS EPIS CARE
666.32	POSTPARTUM COAGULAT DEFEC W/DELIV
666.34	PP COAGULAT DEFEC PP
667.00	RETN PLACNTA W/O HEMOR UNS EOC
667.02	RETN PLACNTA W/O HEMOR DELIV W/ PPC
667.04	RETN PLACNTA W/O HEMOR PP COND/COMP
667.10	RETN PLACNTA/MEMB NO HEM UNS EOC
667.12	RETN PLCNTA/MEMB NO HEM DEL W/COMPL
667.14	RETN PLACNTA/MEMB NO HEM PP COMPL
668.00	PULM COMPL ADMN ANES L&D UNS EOC
668.01	PULM COMPL ADMIN ANES/SEDAT L&D DEL
668.02	PULM COMPL ADMIN ANES DEL W/PPC

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

668.03	PULM COMPL ADMN ANES L&D ANTPRTM
668.04	PULM COMPL ADMIN ANES L&D PP
668.10	CARD COMPL ADMN ANES L&D UNS EOC
668.11	CARD COMPL ADMIN ANES L&D DEL
668.12	CARD COMPL ADMIN ANES L&D-DEL W/PPC
668.13	CARD COMPL ADMN ANES L&D ANTPARTUM
668.14	CARD COMPL ADMIN ANES/SEDAT L&D PP
668.20	CNA COMPL ADMN ANES L&D DEL UNS EOC
668.21	CNA COMPL ADMIN ANES/SEDAT L&D DEL
668.22	CNA COMPL ADMIN ANES L&D DEL W/PPC
668.23	CNA COMPL ADMIN ANES L&D ANTEPARTUM
668.24	CNA COMPL ADMIN ANES/SEDAT L&D PP
668.80	OTH COMPL ADMN ANES L&D UNS EOC
668.81	OTH COMPL ADMIN ANES/SEDAT L&D DEL
668.82	OTH COMPL ADMN ANES/SEDAT-DEL W/PPC
668.83	OTH COMPL ADMIN ANES L&D ANTEPARTUM
668.84	OTH COMPL ADMIN ANES/SEDAT L&D PP
669.10	SHOCK DUR/FOLLOW L&D UNS EPIS CARE
669.11	SHOCK DURING/FOLLOW L&D W/DELIVERY
669.12	SHOCK DUR/FLW L&D DELIV W/ PPC
669.13	SHOCK DUR/FOLLOW L&D ANTPRTM SHOCK
669.14	SHOCK DURING/FOLLOW L&D PP SHOCK
669.30	AC KID FAIL FLW L&D UNS AS EOC/N/A
669.32	ACUTE KIDNEY FAILURE FOLLOW L&D DEL
669.34	AC KID FAIL FLW L&D PP COND/COMP
670.10	PUERPRL ENDOMETRITIS UNS AS EOC/N/A
670.12	PUERPRL ENDOMTRITIS DEL MEN PP COMP
670.14	PUERPERAL ENDOMETRITIS PP COND/COMP
670.20	PUERPERAL SEPSIS UNS AS TO EOC/N/A
670.22	PUERPERAL SEPSIS DEL W/MEN PP COMP
670.24	PUERPERAL SEPSIS PP COND/COMP
670.30	PUERPERAL SEPTIC TP UNS AS EOC/N/A
670.32	PUERPERAL SEPTIC TP DEL MEN PP COMP
670.34	PUERPERAL SEPTIC TP PP COND/COMP
670.80	OTH MAJ PUERPERAL INF UNS EOC/N/A
670.82	OTH MAJ PUERPRL INF DEL MEN PP COMP
670.84	OTH MAJ PUERPERAL INF PP COND/COMP
671.30	DP PHLEBOTHROMB ANTPRTM UNS EOC
671.31	DEEP PHLEBOTHROMB ANTPRTM W/DELIV
671.33	DP PHLEBOTHROMBOS ANTPRTM-COND/COMP



**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

671.40	DP PHLEBOTHROMB PP UNS AS EPIS CARE
671.42	DEEP PHLEBOTHROMBOSIS PP W/DELIV
671.44	DP PHLEBOTHROMBOSIS PP-PP COND/COMP
673.00	OB AIR EMBO UNSPEC AS EPIS CARE
673.01	OB AIR EMBO DELIV W/WO ANTPRTM COND
673.02	OB AIR EMBO W/DELIV W/MENTION PPC
673.03	OB AIR EMBO ANTPRTM COND/COMP
673.04	OB AIR EMBO POSTPARTUM COND/COMP
673.10	AMNIOTIC FL EMBO UNS AS EPIS CARE
673.11	AMNIOTIC FLUID EMBOLISM W/DELIVERY
673.12	AMNIOTIC FL EMBO DELIV W/ PPC
673.13	AMNIOTIC FL EMBO ANTPRTM COND/COMP
673.14	AMNIOTIC FL EMBO PP COND/COMP
673.20	OB BLD-CLOT EMBO UNS AS EPIS CARE
673.21	OB BLOOD-CLOT EMBOLISM W/DELIVERY
673.22	OB BLD-CLOT EMBO W/MENTION PPC
673.23	OBSTETRICAL BLD-CLOT EMBO ANTPRTM
673.24	OB BLD-CLOT EMBO POSTPARTUM
673.30	OB PYEMIC&SEPTIC EMBO UNS EPIS CARE
673.31	OB PYEMIC&SEPTIC EMBOLISM W/DEL
673.32	OB PYEMIC&SEPTIC EMBO DEL W/PPC
673.33	OB PYEMIC&SEPTIC EMBO ANTPRTM
673.34	OB PYEMIC&SEPTIC EMBO POSTPARTUM
673.80	OTH OB PULM EMBO UNS AS EPIS CARE
673.81	OTH OB PULMARY EMBOLISM W/DELIVERY
673.82	OTH OB PULM EMBO DELIV W/ PPC
673.83	OTH OB PULMONARY EMBO ANTPRTM
673.84	OTH OB PULMONARY EMBO POSTPARTUM
674.00	CERBVASC D/O OCCUR PG CB/PP UNS EOC
674.01	CERBVASC D/O DEL W/WO ANTPRTM COND
674.02	CEREBRVASC D/O DELIV W/MENTION PPC
674.03	CEREBROVASCULAR DISORDER ANTEPARTUM
674.04	CEREBROVASCULAR DISORDER POSTPARTUM
674.10	DISRUPT C/S WOUND UNS AS EPIS CARE
674.12	DISRUPT C/S WND DELIV W/MENTION PPC
674.14	DISRUPTION C-SECT WOUND POSTPARTUM
674.20	DISRUPT PERINL WND UNS EPIS CARE PG
674.22	DISRUPT PERINL WOUND DEL W/PP COMPL
674.24	DISRUPT PERINEAL WOUND POSTPARTUM
674.30	OTH COMP OB SURG WNDS UNS EPIS CARE

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

674.32	OTH COMP OB SURG WNDS DELIV W/ PPC
674.34	OTH COMP OB SURG WNDS PP COND/COMP
681.00	UNSPEC CELLULITIS&ABSCESS FINGER
681.01	FELON
681.02	ONYCHIA AND PARONYCHIA OF FINGER
681.10	UNSPECIFIED CELLULITIS&ABSCESS TOE
681.11	ONYCHIA AND PARONYCHIA OF TOE
681.9	CELLULITIS&ABSCESS UNSPEC DIGIT
682.0	CELLULITIS AND ABSCESS OF FACE
682.1	CELLULITIS AND ABSCESS OF NECK
682.2	CELLULITIS AND ABSCESS OF TRUNK
682.3	CELLULITIS&ABSC UPPER ARM&FOREARM
682.4	CELLULITIS&ABSC HAND NO FNGR&THUMB
682.5	CELLULITIS AND ABSCESS OF BUTTOCK
682.6	CELLULITIS&ABSCESS LEG EXCEPT FOOT
682.7	CELLULITIS&ABSCESS FOOT EXCEPT TOES
682.8	CELLULITIS&ABSCESS OTHER SPEC SITE
682.9	CELLULITIS&ABSCESS UNSPECIFIED SITE
695.11	ERYTHEMA MULTIFORME MINOR
695.12	ERYTHEMA MULTIFORME MAJOR
695.13	STEVENS-JOHNSON SYNDROME
695.14	STEVENS-JOHNSN SYND-TEN OVRLAP SYND
695.15	TOXIC EPIDERMAL NECROLYSIS
695.19	OTHER ERYTHEMA MULTIFORME
709.4	FB GRANULOMA SKIN&SUBCUT TISSUE
711.00	PYOGENIC ARTHRITIS SITE UNSPECIFIED
711.01	PYOGENIC ARTHRITIS, SHOULDER REGION
711.02	PYOGENIC ARTHRITIS, UPPER ARM
711.03	PYOGENIC ARTHRITIS, FOREARM
711.04	PYOGENIC ARTHRITIS, HAND
711.05	PYOGENIC ARTHRIT PELV REGION&THIGH
711.06	PYOGENIC ARTHRITIS, LOWER LEG
711.07	PYOGENIC ARTHRITIS, ANKLE AND FOOT
711.08	PYOGENIC ARTHRITIS OTHER SPEC SITES
711.09	PYOGENIC ARTHRITIS, MULTIPLE SITES
711.10	ARTHROP ASSOC W/REITERS DZ-UNSP
711.11	ARTHROP ASSOC W/REITERS DZ-SHLDER
711.12	ARTHROP ASSOC W/REITERS DZ-UP/ARM
711.13	ARTHROP ASSOC W/REITERS DZ-FOREARM
711.14	ARTHROP ASSOC W/REITERS DZ-HAND

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

711.15	ARTHROP ASSOC W/REITERS DZ-PELVIS
711.16	ARTHROP ASSOC W/REITERS DZ-L/LEG
711.17	ARTHROP ASSOC W/REITERS DZ-ANKLE
711.18	ARTHROP ASSOC W/REITERS DZ-NEC
711.19	ARTHROP ASSOC W/REITERS DZ-MULT
711.20	ARTHROPATHY BEHCETS SYND SITE UNS
711.21	ARTHROPATHY BEHCETS SYND SHLDR RGN
711.22	ARTHROPATHY BEHCETS SYNDUPPER ARM
711.23	ARTHROPATHY BEHCETS SYND FOREARM
711.24	ARTHROPATHY BEHCETS SYNDROME HAND
711.25	ARTHROPATHY BEHCETS SYND PELV RGN&THI
711.26	ARTHROPATHY BEHCETS SYND LOWER LEG
711.27	ARTHROPATHY BEHCETS SYND ANK&FOOT
711.28	ARTHROPATHY BEHCETS SYND OTH SITE
711.29	ARTHROPATHY BEHCETS SYND MX SITES
711.30	POSTDYSENTERIC ARTHROPATHY SITE UNS
711.31	POSTDYSENTERIC ARTHROPATHY SHLDR RGN
711.32	POSTDYSENTERIC ARTHROPATHY UP ARM
711.33	POSTDYSENTERIC ARTHROPATHY, FOREARM
711.34	POSTDYSENTERIC ARTHROPATHY, HAND
711.35	POSTDYSENTERIC ARTHROPATHY PELV&THIGH
711.36	POSTDYSENTERIC ARTHROPATHY LOW LEG
711.37	POSTDYSENTERIC ARTHROPATHY ANK&FOOT
711.38	POSTDYSENTERIC ARTHROPATHY OTH SITE
711.39	POSTDYSENTERIC ARTHROPATHY MX SITES
711.40	ARTHROPATHY W/OTH BACTERL DZ SITE UNS
711.41	ARTHROPATHY W/OTH BACTERL DZ SHLDR REG
711.42	ARTHROPATHY W/OTH BACTERL DZ UP ARM
711.43	ARTHROPATHY W/OTH BACTERL DZ FOREARM
711.44	ARTHROPATHY W/OTH BACTERL DZ HAND
711.45	ARTHROPATHY W/OTH BACTERL DZ PELV&THI
711.46	ARTHROPATHY W/OTH BACTERL DZ LOW LEG
711.47	ARTHROPATHY W/OTH BACTERL DZ ANK&FOOT
711.48	ARTHROPATHY W/OTH BACTERL DZ OTH SITE
711.49	ARTHROPATHY W/OTH BACTERL DZ MX SITES
711.50	ARTHROPATHY W/OTH VIRAL DZ SITE UNS
711.51	ARTHROPATHY W/OTH VIRAL DZ SHLDR RGN
711.52	ARTHROPATHY W/OTH VIRAL DZ UPPER ARM
711.53	ARTHROPATHY W/OTH VIRAL DZ FOREARM
711.54	ARTHROPATHY W/OTH VIRAL DISEASES HAND

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

711.55	ARTHRPATH W/OTH VIRAL DZ PELV&THIGH
711.56	ARTHRPATH W/OTH VIRAL DZ LOWER LEG
711.57	ARTHRPATH W/OTH VIRAL DZ ANK&FOOT
711.58	ARTHRPATH W/OTH VIRAL DZ OTH SITE
711.59	ARTHRPATH W/OTH VIRAL DZ MX SITES
711.60	ARTHRPATH W/MYCOSES SITE UNSPEC
711.61	ARTHRPATH W/MYCOSES SHOULDER REGION
711.62	ARTHRPATH W/MYCOSES UPPER ARM
711.63	ARTHRPATH W/MYCOSES FOREARM
711.64	ARTHRPATH W/MYCOSES HAND
711.65	ARTHRPATH W/MYCOSES PELV REGION&THI
711.66	ARTHRPATH W/MYCOSES LOWER LEG
711.67	ARTHRPATH W/MYCOSES ANKLE AND FOOT
711.68	ARTHRPATH W/MYCOSES OTHER SPEC SITE
711.69	ARTHRPATH W/MYCOSES MULTIPLE SITES
711.70	ARTHRPATH W/HELMINTHIASIS SITE UNS
711.71	ARTHRPATH W/HELMINTHIASIS SHLDR RGN
711.72	ARTHRPATH W/HELMINTHIASIS UPPER ARM
711.73	ARTHRPATH W/HELMINTHIASIS FOREARM
711.74	ARTHRPATH W/HELMINTHIASIS HAND
711.75	ARTHRPATH W/HELMINTHIASIS PELV&THIGH
711.76	ARTHRPATH W/HELMINTHIASIS LOWER LEG
711.77	ARTHRPATH W/HELMINTHIASIS ANK&FOOT
711.78	ARTHRPATH W/HELMINTHIASIS OTH SITE
711.79	ARTHRPATH W/HELMINTHIASIS MX SITES
711.80	ARTHRPATH W/OTH INF&PARASIT DZ-UNS
711.81	ARTHRPATH-OTH INF&PARASIT DZ-SHLDR
711.82	ARTHRPATH-OTH INF&PARASIT DZ-UP ARM
711.83	ARTHRPATH-OTH INF&PARASIT DZ-FORARM
711.84	ARTHRPATH W/OTH INF&PARASIT DZ-HAND
711.85	ARTHRPATH-OTH INF&PARST DZ-PELV&THI
711.86	ARTHRPATH-OTH INF&PARASIT DZ-LW LEG
711.87	ARTHRPATH-OTH INF&PARST DZ-ANK&FOOT
711.88	ARTHRPATH-OTH INF&PARASIT DZ-OTH
711.89	ARTHRPATH W/OTH INF&PARASIT DZ-MX
711.90	UNSPEC INFECTV ARTHRIT SITE UNSPEC
711.91	UNSPEC INFECTV ARTHRIT SHLDR REGION
711.92	UNSPEC INFECTIVE ARTHRIT UPPER ARM
711.93	UNSPEC INFECTIVE ARTHRITIS FOREARM
711.94	UNSPEC INFECTIVE ARTHRITIS HAND

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

711.95	UNSPEC INFECTV ARTHRIT PELV RGN&THI
711.96	UNSPEC INFECTIVE ARTHRIT LOWER LEG
711.97	UNSPEC INFECTIVE ARTHRITIS ANK&FOOT
711.98	UNS INFECTV ARTHRIT OTH SPEC SITE
711.99	UNSPEC INFECTIVE ARTHRIT MX SITES
720.0	ANKYLOSING SPONDYLITIS
727.50	UNSPECIFIED RUPTURE OF SYNOVIUM
727.60	NONTRAUMATIC RUPTURE UNSPEC TENDON
727.61	COMPLETE RUPTURE OF ROTATOR CUFF
727.62	NONTRAUMATIC RUPTURE TENDONS BICEPS
727.63	NONTRAUMAT RUP EXT TEND HND&WRST
727.64	NONTRAUMAT RUP FLX TEND HND&WRST
727.65	NONTRAUMATIC RUPTURE QUAD TENDON
727.66	NONTRAUMATIC RUPTURE PATR TENDON
727.67	NONTRAUMAT RUPTURE ACHILLES TENDON
727.68	NONTRAUMAT RUP OTH TEND FOOT&ANK
727.69	NONTRAUMATIC RUPTURE OTHER TENDON
728.82	FOREIGN BODY GRANULOMA OF MUSCLE
728.86	NECROTIZING FASCIITIS
728.88	RHABDOMYOLYSIS
729.71	NONTRAUMAT CMPRTMT SYND UP EXTREM
729.72	NONTRAUMAT CMPRTMT SYND LWER EXTREM
729.73	NONTRAUMATIC COMPARTMENT SYND ABD
729.79	NONTRAUMAT COMPARTMT SYND OTH SITES
730.00	ACUTE OSTEOMYELITIS SITE UNSPEC
730.01	ACUTE OSTEOMYELITIS SHOULDER REGION
730.02	ACUTE OSTEOMYELITIS, UPPER ARM
730.03	ACUTE OSTEOMYELITIS, FOREARM
730.04	ACUTE OSTEOMYELITIS, HAND
730.05	ACUTE OSTEOMYEL PELVIC REGION&THIGH
730.06	ACUTE OSTEOMYELITIS, LOWER LEG
730.07	ACUTE OSTEOMYELITIS, ANKLE AND FOOT
730.08	ACUTE OSTEOMYELITIS OTHER SPEC SITE
730.09	ACUTE OSTEOMYELITIS, MULTIPLE SITES
733.10	PATHOLOGIC FRACTURE UNSPEC SITE
733.11	PATHOLOGIC FRACTURE OF HUMERUS
733.12	PATH FRACTURE DIST RADIUS&ULNA
733.13	PATHOLOGIC FRACTURE OF VERTEBRAE
733.14	PATHOLOGIC FRACTURE NECK FEMUR
733.15	PATH FRACTURE OTH SPEC PART FEM

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

733.16	PATHOLOGIC FRACTURE OF TIBIA&FIBULA
733.19	PATHOLOGIC FRACTURE OTHER SPEC SITE
733.93	STRESS FRACTURE OF TIBIA OR FIBULA
733.94	STRESS FRACTURE OF THE METATARSALS
733.95	STRESS FRACTURE OF OTHER BONE
733.96	STRESS FRACTURE OF FEMORAL NECK
733.97	STRESS FRACTURE OF SHAFT OF FEMUR
733.98	STRESS FRACTURE OF PELVIS
745.2	TETRALOGY OF FALLOT
746.84	CONGEN OBST ANOMALIES HEART NEC
747.10	COARCT AORTA PREDUCTAL POSTDUCTAL
747.11	CONGENITAL INTERRUPTION AORTIC ARCH
756.72	OMPHALOCELE
756.73	GASTROSCHISIS
760.77	NOX INFL FETUS/NB PL/BRST ANTICNVUL
760.78	NOX INFL FETUS/NB PL/BRST ANTMETABL
762.6	FETUS/NB AFFCTED UNS COND UMB CRD
765.00	EXTREME FETAL IMMATURITY UNSPEC
765.01	EXTREM FETAL IMMATURITY < 500 GRAMS
765.02	EXTREM FETAL IMMATURITY 500-749 GMS
765.03	EXTREM FETAL IMMATURITY 750-999 GMS
765.04	EXTREM FETAL IMMAT 1000-1249 GMS
765.05	EXTREM FETAL IMMAT 1250-1499 GMS
765.06	EXTREM FETAL IMMAT 1500-1749 GMS
765.07	EXTREM FETAL IMMAT 1750-1999 GMS
765.08	EXTREM FETAL IMMAT 2000-2499 GMS
765.09	EXTREM FETAL IMMAT 2500/MORE GMS
765.10	OTHER PRETERM INFANTS, UNSPECIFIED
765.11	OTHER PRETERM INFANTS < 500 GRAMS
765.12	OTHER PRETERM INFANTS 500-749 GRAMS
765.13	OTHER PRETERM INFANTS 750-999 GRAMS
765.14	OTH PRETERM INFANTS 1000-1249 GRAMS
765.15	OTH PRETERM INFANTS 1250-1499 GRAMS
765.16	OTH PRETERM INFANTS 1500-1749 GRAMS
765.17	OTH PRETERM INFANTS 1750-1999 GRAMS
765.18	OTH PRETERM INFANTS 2000-2499 GRAMS
765.19	OTH PRETERM INFANTS 2500/MORE GRAMS
767.11	BRTH TRM EPICRAN SUBAPONEURO HEMORR
767.2	FRACTURE OF CLAVICLE, BIRTH TRAUMA
767.4	INJURY SPN&SPINAL CORD BIRTH TRAUMA

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

767.6	INJURY BRACHIAL PLEXUS BIRTH TRAUMA
768.0	FETL DETH ASPHYX BFOR LABR/UNS TIME
768.1	FETL DEATH ASPHYXIA/ANOXIA DUR LABR
768.2	FETL DSTRSS BFOR ONSET LABR LIVEBRN
768.3	FD FIRST NOTED DUR L&D LIVE NEWBORN
768.4	FETL DSTRSS UNS TIME-ONSET LIVEBORN
768.5	SEVERE BIRTH ASPHYXIA
768.71	MILD HYPOXIC-ISCHEMIC ENCEPHALPATHY
768.72	MOD HYPOXIC-ISCHEMIC ENCEPHALOPATHY
768.73	SEV HYPOXIC-ISCHEMIC ENCEPHALOPATHY
769	RDS IN NEWBORN
770.10	FETAL AND NEWBORN ASPIRATION UNS
770.11	NB MECONIUM ASPIR W/O RESP SYMPTOMS
770.12	NB MECONIUM ASPIR W/RESP SYMPTOMS
770.13	NB ASPIR CLEAR AMNIO FL W/O RESP SX
770.14	NB ASPIR CLEAR AMNIO FL W/RESP SX
770.15	NB ASPIR BLOOD WITHOUT RESP SX
770.16	NB ASPIR BLOOD W/RESPIRATORY SX
770.17	OTH FETAL&NB ASPIR W/O RESP SYMPTOM
770.18	OTH FETAL&NB ASPIR W/RESP SYMPTOMS
770.83	CYANOTIC ATTACKS OF NEWBORN
770.84	RESPIRATORY FAILURE OF NEWBORN
770.85	ASPIR POSTNATL STOM CNTN NO RESP SX
770.86	ASPIR POSTNATAL STOM CNTN W/RESP SX
770.87	RESPIRATORY ARREST OF NEWBORN
770.88	HYPOXEMIA OF NEWBORN
771.5	NEONATAL INFECTIVE MASTITIS
771.6	NEONAT CONJUNCTIVIT&DACRYOCYST
771.7	NEONATAL CANDIDA INFECTION
772.10	INTRAVENTRICULAR HEMORR UNS GRADE
772.11	INTRAVENTRICULAR HEMORRHAGE GRADE I
772.12	INTRAVENTRICULAR HEMORR GRADE II
772.13	INTRAVENTRICULAR HEMORR GRADE III
772.14	INTRAVENTRICULAR HEMORR GRADE IV
772.2	FETAL&NEONAT SUBARACHNOID HEMORR NB
772.4	FETAL&NEONATAL GI HEMORRHAGE
772.9	UNSPECIFIED HEMORRHAGE OF NEWBORN
774.2	NEONAT JAUNDCE ASSOC W/PRTERM DELIV
774.30	NEONAT JAUNDCE-DLAY CONJUGAT UNS
774.31	NEONAT JAUNDICE-DLAY CONJUGAT DZ CE

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

775.1	NEONATAL DIABETES MELLITUS
775.2	NEONATAL MYASTHENIA GRAVIS
775.3	NEONATAL THYROTOXICOSIS
775.6	NEONATAL HYPOGLYCEMIA
775.81	OTHER ACIDOSIS OF NEWBORN
775.89	OTH NEONAT ENDOCRN&METAB DSTURANCES
776.0	HEMORRHAGIC DISEASE OF NEWBORN
776.2	DISSEMIN IVASC COAGULAT NEWBORN
776.9	UNS HEMATOLOGICAL D/O SPECIFIC NB
777.50	NECROTIZING ENTEROCOLITIS NB UNSPEC
777.51	STAGE I NEC IN NEWBORN
777.52	STAGE II NEC IN NEWBORN
777.53	STAGE III NEC IN NEWBORN
777.6	PERINATAL INTESTINAL PERFORATION
779.84	OTH SPEC COND ORIG PERINATL MEC STN
779.85	CARDIAC ARREST OF NEWBORN
780.01	COMA
780.02	TRANSIENT ALTERATION OF AWARENESS
780.03	PERSISTENT VEGETATIVE STATE
780.09	OTHER ALTERATION OF CONSCIOUSNESS
780.2	SYNCOPE AND COLLAPSE
780.31	FEBRILE CONVULSIONS SIMPLE UNSPEC
780.32	COMPLEX FEBRILE CONVULSIONS
780.39	OTHER CONVULSIONS
780.65	HYPOTHERMIA NOT ASSOC LW ENVIR TEMP
780.97	ALTERED MENTAL STATUS
781.7	TETANY
782.5	CYANOSIS
784.7	EPISTAXIS
784.8	HEMORRHAGE FROM THROAT
785.1	PALPITATIONS
785.4	GANGRENE
785.50	UNSPECIFIED SHOCK
785.51	CARDIOGENIC SHOCK
785.52	SEPTIC SHOCK
785.59	OTHER SHOCK WITHOUT MENTION TRAUMA
786.00	UNSPECIFIED RESPIRATORY ABNORMALITY
786.01	HYPERVENTILATION
786.02	ORTHOPNEA
786.03	APNEA



**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

786.04	CHEYNE-STOKES RESPIRATION
786.05	SHORTNESS OF BREATH
786.06	TACHYPNEA
786.07	WHEEZING
786.09	OTH DYSPNEA&RESPIRATORY ABNORM
786.1	STRIDOR
786.3	HEMOPTYSIS
786.50	CHEST PAIN UNSPECIFIED
786.51	PRECORDIAL PAIN
786.52	PAINFUL RESPIRATION
786.59	OTHER CHEST PAIN
787.20	DYSPHAGIA UNSPECIFIED
787.29	OTHER DYSPHAGIA
788.0	RENAL COLIC
788.20	UNSPECIFIED RETENTION OF URINE
788.21	INCOMPLETE BLADDER EMPTYING
788.29	OTHER SPECIFIED RETENTION OF URINE
789.51	MALIGNANT ASCITES
789.59	OTHER ASCITES
790.7	BACTEREMIA
798.0	SUDDEN INFANT DEATH SYNDROME
798.1	INSTANTANEOUS DEATH
798.2	DEATH < 24 HR AFTR SX ONSET-UNXPLND
798.9	UNATTENDED DEATH
799.01	ASPHYXIA
799.02	HYPOXEMIA
799.1	RESPIRATORY ARREST
800.00	CLOS FX VALT SKULL W/O ICI UNS SOC
800.01	CLOS FX VALT SKULL W/O ICI NO LOC
800.02	CLOS FX VALT SKUL W/O ICIR BRF LOC
800.03	CLOS FX VALT SKULL W/O ICI MOD LOC
800.04	CLOS FX VLT SKUL NO ICI LOC&RETURN
800.05	CLOS FX VLT SKUL NO ICI LOC NO RTRN
800.06	CLOS FX VLT SKL NO ICI COMA UNS DUR
800.09	CLOS FX VLT SKL NO ICI UNS CONCUSS
800.10	CLOS FX VLT SKUL-CERBRL LAC UNS SOC
800.11	CLOS FX VLT SKULL LAC&CONTUS NO LOC
800.12	CLOS FX VLT SKUL-LAC&CONTUS BRF LOC
800.13	CLOS FX VLT SKUL-LAC&CONTUS MOD LOC
800.14	CLOS FX VLT SKUL-LOC>24 HR & RETRN

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

800.15	CLOS FX VLT SKUL-LOC>24 HR&NO RETRN
800.16	CLOS FX VLT SKULL FX-LOC UNS DUR
800.19	CLOS FX VLT SKUL UNS CONCUSSION
800.20	CLOS FX VLT SKUL-DURL HEMOR UNS SOC
800.21	CLOS FX VLT SKUL-DURAL HEMOR NO LOC
800.22	CLOS FX VLT SKUL-DURL HEMOR BRF LOC
800.23	CLOS FX VLT SKUL-DURL HEM MOD LOC
800.24	CLOS FX VLT SKUL-HEMOR LOC>24&RTRN
800.25	CLOS FX VLT SKUL-HEMOR LOC NO RTRN
800.26	CLOS FX VLT SKUL-HEMOR LOC UNS DUR
800.29	CLOS FX VLT SKL-HEMOR UNS CONCUS
800.30	CLOS FX VLT SKULL OTH ICH UNS SOC
800.31	CLOS FX VLT SKULL OTH ICH NO LOC
800.32	CLOS FX VLT SKULL W/UNS ICH BRF LOC
800.33	CLOS FX VLT SKULL-OTH ICH MOD LOC
800.34	CLOS FX VLT SKL-OTH ICH LOC>24-RTRN
800.35	CLOS FX VLT SKL-OTH ICH LOC NO RTRN
800.36	CLOS FX VLT SKL-ICH LOC UNS DUR
800.39	CLOS FX VLT SKUL-UNS ICH UNS CONCUS
800.40	CLOS FX VLT SKULL-ICI UNS NATR-SOC
800.41	CLOS FX VLT SKL-ICI UNS NATR NO LOC
800.42	CLOS FX VLT SKULL-ICI BRIEF LOC
800.43	CLOS FX VLT SKULL-ICI MOD LOC
800.44	CLOS FX VLT SKUL W/OTH ICI LOC&RTRN
800.45	CLOS FX VLT SKL OTH ICI LOC NO RTRN
800.46	CLOS FX VLT SKULL-ICI LOC UNS DUR
800.49	CLOS FX VLT SKULL W/ICI UNS CONCUS
800.50	OPEN FX VAULT SKUL W/O ICI UNS SOC
800.51	OPEN FX VAULT SKULL W/O ICI NO LOC
800.52	OPEN FX VALT SKUL W/O ICIR BRF LOC
800.53	OPEN FX VAULT SKULL W/O ICI MOD LOC
800.54	OPN FX VLT SKUL NO ICI LOC>24&RTRN
800.55	OPN FX VLT SKL W/O ICI LOC NO RTRN
800.56	OPN FX VLT SKL W/O ICI-LOC UNS DUR
800.59	OPN FX VLT SKL W/O ICI-UNS CONCUS
800.60	OPN FX VLT SKL FX-CEREB LAC UNS SOC
800.61	OPN FX VLT SKUL-CERBRL LAC NO LOC
800.62	OPN FX VLT SKUL-CERBRL LAC BRF LOC
800.63	OPN FX VLT SKUL-CERBRL LAC MOC LOC
800.64	OPN FX VLT SKL-CEREB LAC LOC&RTRN

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

800.65	OPN FX VLT SKL-CERB LAC LOC NO RTRN
800.66	OPN FX VLT SKL-CERB LAC LOC UNS DUR
800.69	OPN FX VLT SKL-CEREB LAC UNS CONCUS
800.70	OPN FX VLT SKL-DURL HEMOR UNS SOC
800.71	OPN FX VLT SKL-DURL HEMOR NO LOC
800.72	OPN FX VLT SKL-DURL HEMORR BRF LOC
800.73	OPN FX VLT SKL-DURL HEMORR MOD LOC
800.74	OPN FX VLT SKL-DURL HEM LOC>24 RTRN
800.75	OPN FX VLT SKL-DURL HEM LOC NO RTRN
800.76	OPN FX VLT SKL-DURL HEM LOC UNS DUR
800.79	OPN FX VLT SKL-DURL HEM UNS CONCUSS
800.80	OPN FX VAULT SKULL-OTH ICH UNS SOC
800.81	OPN FX VAULT SKULL-OTH ICH NO LOC
800.82	OPN FX VAULT SKULL-OTH ICH BRF LOC
800.83	OPN FX VAULT SKULL-OTH ICH MOD LOC
800.84	OPN FX VLT SKL-OTH ICH LOC>24&RTRN
800.85	OPN FX VLT SKL-OTH ICH LOC NO RTRN
800.86	OPN FX VLT SKL-UNS ICH LOC UNS DUR
800.89	OPN FX VLT SKL W/UNS ICH UNS CONCUS
800.90	OPN FX VLT SKL-ICI UNS NATR UNS SOC
800.91	OPN FX VLT SKL-ICI UNS NATUR NO LOC
800.92	OPN FX VLT SKL-ICI UNS NATR BRF LOC
800.93	OPN FX VLT SKL-ICI UNS NATR MOC LOC
800.94	OPN FX VLT SKL-OTH ICI LOC>24&RETRN
800.95	OPN FX VLT SKL-OTH ICI LOC NO RETRAN
800.96	OPN FX VLT SKL-ICI LOC UNS DUR
800.99	OPN FX VLT SKL-ICI UNS CONCUS
801.00	CLOS FX BASE SKULL W/O ICI UNS SOC
801.01	CLOS FX BASE SKULL W/O ICI NO LOC
801.02	CLOS FX BASE SKUL W/O ICIR BRF LOC
801.03	CLOS FX BASE SKULL W/O ICI MOD LOC
801.04	CLOS FX BASE SKL NO ICI LOC&RTRN
801.05	CLOS FX BASE SKL NO ICI LOC NO RTRN
801.06	CLOS FX BASE SKL NO ICI LOC UNS DUR
801.09	CLOS FX BASE SKL-NO ICI UNS CONCUSS
801.10	CLOS FX BASE SKL-CERBRL LAC UNS SOC
801.11	CLOS FX BASE SKL-CERBRL LAC NO LOC
801.12	CLOS FX BASE SKL-CERBRL LAC BRF LOC
801.13	CLOS FX BASE SKL-CERBRL LAC MOD LOC
801.14	CLOS FX BASE SKL-CRBRL LAC LOC&RTRN

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

801.15	CLOS FX BASE SKL-CERBRL LAC NO RTRN
801.16	CLOS FX BASE SKL-CERBRL LAC UNS LOC
801.19	CLOS FX BASE SKL-CERBRL LAC CONCUSS
801.20	CLOS FX BASE SKL-DURL HEMOR UNS SOC
801.21	CLOS FX BASE SKUL-DURL HEMOR NO LOC
801.22	CLOS FX BASE SKL-DURAL HEM BRF LOC
801.23	CLOS FX BASE SKL-DURAL HEM MOD LOC
801.24	CLOS FX BASE SKL-DURL HEM LOC&RTRN
801.25	CLOS FX BASE SKL-DURL HEM NO RTRN
801.26	CLOS FX BASE SKL-DURL HEM LOC UNS
801.29	CLOS FX BASE SKL-DURL HEM CONCUSS
801.30	CLOS FX BASE SKULL-OTH ICH UNS SOC
801.31	CLOS FX BASE SKULL-OTH ICH NO LOC
801.32	CLOS FX BASE SKUL-UNS ICH BRF LOC
801.33	CLOS FX BASE SKUL-OTH ICH MOD LOC
801.34	CLOS FX BASE SKUL-OTH ICH LOC&RETRN
801.35	CLOS FX BASE SKL-ICH LOC&NO RTRN
801.36	CLOS FX BASE SKL-ICH LOC UNS DUR
801.39	CLOS FX BASE SKL-UNS ICH UNS CONCUS
801.40	CLOS FX BASE SKULL-ICI UNS SOC
801.41	CLOS FX BASE SKULL-ICI NO LOC
801.42	CLOS FX BASE SKULL-ICI BRIEF LOC
801.43	CLOS FX BASE SKULL-ICI MODERATE LOC
801.44	CLOS FX BASE SKUL-ICI LOC & RETURN
801.45	CLOS FX BASE SKUL-ICI LOC NO RETURN
801.46	CLOS FX BASE SKULL-ICI LOC UNS DUR
801.49	CLOS FX BASE SKULL-ICI UNS CONCUS
801.50	OPEN FX BASE SKUL W/O ICI UNS SOC
801.51	OPEN FX BASE SKUL W/O ICI NO LOC
801.52	OPEN FX BASE SKUL W/O ICIR BRF LOC
801.53	OPEN FX BASE SKUL W/O ICI MOD LOC
801.54	OPN FX BASE SKL NO ICI LOC>24&RTRN
801.55	OPN FX BASE SKL W/O ICI LOC NO RTRN
801.56	OPN FX BASE SKL-W/O ICI LOC UNS DUR
801.59	OPN FX BASE SKL-W/O ICI UNS CONCUSS
801.60	OPN FX BASE SKL-CERBRL LAC UNS SOC
801.61	OPN FX BASE SKL-CERBRL LAC NO LOC
801.62	OPN FX BASE SKL-CERBRL LAC BRF LOC
801.63	OPN FX BASE SKL-CERBRL LAC MOD LOC
801.64	OPN FX BASE SKL-CERBRL LAC >24&RTRN

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

801.65	OPN FX BASE SKL-CERBRL LAC NO RTRN
801.66	OPN FX BASE SKL-CERBRL LAC LOC UNS
801.69	OPN FX BASE SKL-CERBRL LAC CONCUSS
801.70	OPN FX BASE SKL-DURL HEMOR UNS SOC
801.71	OPN FX BASE SKL-DURL HEM LOC NO LOC
801.72	OPN FX BASE SKL-DURL HEM BRIEF LOC
801.73	OPN FX BASE SKL-DURL HEM MOD LOC
801.74	OPN FX BASE SKL DURL HEM LOC& RTRN
801.75	OPN FX BASE SKL-DURAL HEM NO RTRN
801.76	OPN FX BASE SKL-DURL HEMOR LOC UNS
801.79	OPN FX BASE SKL-DURL HEM UNS CONCUS
801.80	OPN FX BASE SKULL-OTH ICH UNS SOC
801.81	OPN FX BASE SKULL-OTH ICH NO LOC
801.82	OPN FX BASE SKULL-OTH ICH BRIEF LOC
801.83	OPN FX BASE SKULL-OTH ICH MOD LOC
801.84	OPN FX BASE SKL-OTH ICH LOC&RTRN
801.85	OPN FX BASE SKL-OTH ICH LOC NO RTRN
801.86	OPN FX BASE SKL-UNS ICH LOC UNS DUR
801.89	OPN FX BASE SKUL-UNS ICH UNS CONCUS
801.90	OPN FX BASE SKULL-ICI UNS SOC
801.91	OPN FX BASE SKULL-ICI NO LOC
801.92	OPN FX BASE SKULL-ICI BRIEF LOC
801.93	OPN FX BASE SKULL-ICI MODERATE LOC
801.94	OPN FX BASE SKUL-OTH ICI LOC & RTRN
801.95	OPN FX BASE SKL-OTH ICI LOC NO RTRN
801.96	OPN FX BASE SKULL-ICI LOC UNS DUR
801.99	OPN FX BASE SKULL-ICI UNS CONCUS
802.0	NASAL BONES, CLOSED FRACTURE
802.1	NASAL BONES, OPEN FRACTURE
802.20	CLOS FRACTURE UNSPEC SITE MANDIBLE
802.21	CLOS FRACTURE CONDYL R PROCESS MAND
802.22	CLOS FX SUBCONDYL R PROCESS MAND
802.23	CLOS FRACTURE CORONOID PROCESS MAND
802.24	CLOS FX UNSPEC PART RAMUS MAND
802.25	CLOSED FRACTURE OF ANGLE OF JAW
802.26	CLOS FRACTURE SYMPHYSIS BODY MAND
802.27	CLOS FX ALVEOL BORDER BDY MAND
802.28	CLOS FX OTH&UNSPEC PART BDY MAND
802.29	CLOS FRACTURE MULTIPLE SITES MAND
802.30	OPEN FRACTURE UNSPEC SITE MANDIBLE

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

802.31	OPEN FRACTURE CONDYLR PROCESS MAND
802.32	OPEN FX SUBCONDYLR PROCESS MAND
802.33	OPEN FRACTURE CORONOID PROCESS MAND
802.34	OPEN FX UNSPEC PART RAMUS MAND
802.35	OPEN FRACTURE OF ANGLE OF JAW
802.36	OPEN FRACTURE SYMPHYSIS BODY MAND
802.37	OPEN FX ALVEOL BORDER BDY MAND
802.38	OPEN FX OTH&UNSPEC PART BDY MAND
802.39	OPEN FRACTURE MULTIPLE SITES MAND
802.4	MALAR&MAX BONES CLOSED FRACTURE
802.5	MALAR&MAXILLARY BONES OPEN FRACTURE
802.6	ORBITAL FLOOR , CLOSED FRACTURE
802.7	ORBITAL FLOOR , OPEN FRACTURE
802.8	OTHER FACIAL BONES, CLOSED FRACTURE
802.9	OTHER FACIAL BONES, OPEN FRACTURE
803.00	OTH CLO SKUL FX W/O ICI UNS SOC
803.01	OTH CLO SKUL FX W/O ICI NO LOC
803.02	OTH CLO SKUL FX W/O ICI BRIEF LOC
803.03	OTH CLO SKUL FX W/O ICI MOD LOC
803.04	OTH CLOS SKL FX NO ICI LOC>24&RTRN
803.05	OTH CLOS SKUL FX NO ICI LOC NO RTRN
803.06	OTH CLOS SKL FX-NO ICI LOC UNS DUR
803.09	OTH CLO SKUL FX W/O ICI UNS CONCUSS
803.10	OTH CLOS SKL FX-CERBRL LAC UNS SOC
803.11	OTH CLOS SKL FX-CERBRL LAC NO LOC
803.12	OTH CLOS SKL FX-CERBRL LAC BRF LOC
803.13	OTH CLOS SKL FX-CERBRL LAC MOD LOC
803.14	OTH CLOS SKL FX-CERBRL LAC LOC&RTRN
803.15	OTH CLOS SKL FX-CERBRL LAC NO RTRN
803.16	OTH CLOS SKL FX-CERBRL LAC UNS LOC
803.19	OTH CLO SKL FX-CERBL LAC UNS CONCUS
803.20	OTH CLOS SKL FX-DURL HEMOR UNS SOC
803.21	OTH CLOS SKL FX-DURL HEMOR NO LOC
803.22	OTH CLOS SKL FX-DURL HEM BRIEF LOC
803.23	OTH CLOS SKL FX-DURL HEM MOD LOC
803.24	OTH CLOS SKL FX-DURL HEMOR LOC&RTRN
803.25	OTH CLO SKL FX-DURL HEM LOC NO RTRN
803.26	OTH CLOS SKL FX-DURL HEMOR LOC UNS
803.29	OTH CLOS SKL FX-DURL HEM UNS CONCUS
803.30	OTH CLOS SKULL FX-OTH ICH UNS LOC

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

803.31	OTH CLOS SKULL FX-OTH ICH NO LOC
803.32	OTH CLOS SKULL FX-OTH ICH BRF LOC
803.33	OTH CLOS SKULL FX-OTH ICH MOD LOC
803.34	OTH CLOS SKL FX-OTH ICH LOC&RTRN
803.35	OTH CLOS SKUL FOTH ICH LOC NO RTRN
803.36	OTH CLOS SKL FX-OTH ICH LOC UNS DUR
803.39	OTH CLOS SKL FX-OTH ICH UNS CONCUSS
803.40	OTH CLOS SKULL FX-ICI UNS SOC
803.41	OTH CLOS SKL FX-ICI UNS NATR NO LOC
803.42	OTH CLOS SKL FX-ICI UNS BRIEF LOC
803.43	OTH CLOS SKL FX-ICI UNS MOD LOC
803.44	OTH CLOS SKULL FX-OTH ICI LOC&RTRN
803.45	OTH CLOS SKL FX-OTH ICI LOC NO RTRN
803.46	OTH CLOS SKULL FX-ICI LOC UNS DUR
803.49	OTH CLOS SKULL FX-ICI UNS CONCUS
803.50	OTH OPEN SKULL FX W/O ICI SOC UNS
803.51	OTH OPEN SKULL FX W/O ICI NO LOC
803.52	OTH OPEN SKULL FX W/O ICI BRIEF LOC
803.53	OTH OPEN SKULL FX W/O ICI MOD LOC
803.54	OTH OPN SKL FX NO ICI LOC>24&RTRN
803.55	OTH OPN SKL FX NO ICI LOC NO RTRN
803.56	OTH OPN SKUL FX W/O ICI LOC UNS DUR
803.59	OTH OPN SKUL FX W/O ICI UNS CONCUSS
803.60	OTH OPN SKL FX-CERBRL LAC UNS SOC
803.61	OTH OPN SKL FX-CERBRL LAC NO LOC
803.62	OTH OPN SKL FX-CERBRL LAC BRF LOC
803.63	OTH OPN SKL FX-CERBRL LAC MOD LOC
803.64	OTH OPN SKL FX-CERBRL LAC LOC&RTRN
803.65	OTH OPN SKL FX CERBRL LAC NO RTRN
803.66	OTH OPN SKL FX CERBRL LAC LOC UNS
803.69	OTH OPN SKL FX CRBRL LAC UNS CONCUS
803.70	OTH OPN SKL FX-DURL HEMOR UNS SOC
803.71	OTH OPN SKL FX-DURL HEMO NO LOS
803.72	OTH OPN SKL FX-DURAL HEM BRF LOC
803.73	OTH OPN SKL FX-DURAL HEM MOD LOC
803.74	OTH OPN SKL FX-DURL HEMOR LOC&RTRN
803.75	OTH OPN SKL FX-DURL HEM LOC NO RTRN
803.76	OTH OPN SKL FX-DURL HEMOR LOC UNS
803.79	OTH OPN SKL FX-DURL HEM UNS CONCUSS
803.80	OTH OPN SKUL FX OTH&UNS ICH UNS SOC

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

803.81	OTH OPN SKUL FX OTH&UNS ICH NO LOC
803.82	OTH OPN SKUL FX OTH&UNS ICH BRF LOC
803.83	OTH OPN SKUL FX OTH&UNS ICH MOD LOC
803.84	OTH OPN SKL FX-UNS ICH LOC>24&RTRN
803.85	OTH OPN SKL FX-UNS ICH LOC&NO RTRN
803.86	OTH OPN SKL FX-UNS ICH LOC UNS DUR
803.89	OPN SKULL FX CONCUSS
803.90	OTH OPN SKL FX-ICI UN NATR UNS SOC
803.91	OTH OPN SKL FX-ICI UNS NATR NO LOC
803.92	OTH OPN SKL FX-ICI UNS NATR BRF LOC
803.93	OTH OPN SKL FX-ICI UNS NATR MOD LOC
803.94	OTH OPN SKL FX-OTH ICI LOC>24&RTRN
803.95	OTH OPN SKL FX-OTH ICI LOC NO RTRN
803.96	OTH OPN SKULL FX-ICI LOC UNS DUR
803.99	OTH OPN SKULL FX-ICI UNS CONCUS
804.00	CLOS FXS SKULL/FACE NO ICI UNS SOC
804.01	CLOS FXS SKULL/FACE NO ICI NO LOC
804.02	CLOS FXS SKULL/FACE NO ICI LOC<1 HR
804.03	CLOS FXS SKULL/FACE NO ICI MOD LOC
804.04	CLOS FXS SKL/FCE NO ICI LOC&RETURN
804.05	CLOS FXS SKL/FCE NO ICI LOC NO RTRN
804.06	CLOS FXS SKULL/FACE NO ICI LOC UNS
804.09	CLOS FXS SKL/FCE NO ICI UNS CONCUSS
804.10	CLOS FXS SKL/FACE CEREB LAC UNS SOC
804.11	CLOS FXS SKL/FACE CERBRL LAC NO LOC
804.12	CLOS FXS SKL/FCE CERBRL LAC BRF LOC
804.13	CLOS FXS SKL/FCE CERBRL LAC MOD LOC
804.14	CLOS FXS SKL/FCE CERBRL LAC>24&RTRN
804.15	CLOS FXS SKL/FCE CERBRL LAC NO RTRN
804.16	CLOS FXS SKL/FCE CERBRL LAC LOC UNS
804.19	CL SKUL W OTH FX-CONCUSS
804.20	CLOS FXS SKL/FACE DURL HEM UNS SOC
804.21	CLOS FXS SKULL/FACE DURL HEM NO LOC
804.22	CLOS FXS SKUL/FACE DURL HEM BRF LOC
804.23	CLOS FXS SKUL/FACE DURL HEM MOD LOC
804.24	CLOS FXS SKUL/FCE DURL HEM>24&RTRN
804.25	CLOS FXS SKUL/FCE DURL HEM NO RTRN
804.26	CLOS FXS SKUL/FCE DURL HEM LOC UNS
804.29	CLOS FXS SKL/FCE DURL HEM UNS CNCUS
804.30	CLOS FXS SKL/FCE-OTH ICH-UNS SOC



**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

804.31	CLOS FXS SKL/FCE-OTH&UNS ICH NO LOC
804.32	CLOS FXS SKL/FCE-OTH ICH BRIEF LOC
804.33	CLOS FXS SKULL/FACE-OTH ICH MOD LOC
804.34	CLOS FXS SKUL/FACE-OTH ICH LOC&RTRN
804.35	CLOS FXS SKL/FCE-OTH ICH-LOC NO RTN
804.36	CLOS FXS SKL/FCE-OTH ICH-UNS LOC
804.39	CLOS FXS SKL/FCE-OTH ICH UNS CONCUS
804.40	CLOS FXS SKUL/FACE-OTH ICI-UNS SOC
804.41	CLOS FXS SKL/FCE-OTH&UNS ICI-NO LOC
804.42	CLOS FXS SKL/FCE-OTH ICI-BRF LOC
804.43	CLOS FXS SKL/FCE-OTH ICI-MOD LOC
804.44	CLOS FXS SKL/FCE-OTH ICI LOC&RETURN
804.45	CLOS FXS SKL-OTH ICI-LOC NO RTRN
804.46	CLOS FXS SKL/FCE-OTH ICI-UNS LOC
804.49	CLOS FXS SKL/FCE-OTH ICI UNS CONCUS
804.50	OPN FXS SKULL/FACE NO ICI UNS SOC
804.51	OPN FXS SKULL/FACE W/O ICI NO LOC
804.52	OPEN FXS SKULL/FACE NO ICI BRF LOC
804.53	OPN FXS SKULL/FACE NO ICI MOD LOC
804.54	OPN FXS SKL/FCE NO ICI LOC>24&RTURN
804.55	OPEN FXS SKL/FCE NO ICI LOC NO RTRN
804.56	OPEN FXS SKULL/FACE NO ICI LOC UNS
804.59	OPEN FXS SKL/FCE NO ICI UNS CONCUSS
804.60	OPN SKULL/FACE-CERBRL LAC UNS SOC
804.61	OPEN FXS SKL/FCE-CERBRL LAC NO LOC
804.62	OPN FXS SKL/FCE-CERBRL LAC BRF LOC
804.63	OPN FXS SKL/FCE-CERBRL LAC-MOD LOC
804.64	OPN FXS SKL/FCE-CERBRL LAC LOC&RTRN
804.65	OPN FXS SKL CERBRL LAC LOC NO RTRN
804.66	OPN FXS SKL/FCE-CERBRL LAC LOC UNS
804.69	OPN SKL/FCE-CERBRL LAC UNS CONCUSS
804.70	OPN FXS SKL/FCE-DURL HEMORR-UNS SOC
804.71	OPN FXS SKL/FCE-DURAL HEMORR NO LOC
804.72	OPN FXS SKL/FCE-DURAL HEM BRIEF LOC
804.73	OPN FXS SKL/FCE-DURAL HEM-MOD LOC
804.74	OPN FXS SKL/FCE-DURL HEM LOC&RTRN
804.75	OPN FXS SKL/FCE-DURL HEM-LOC NO RTN
804.76	OPN FXS SKL/FCE-DURL HEMORR LOC UNS
804.79	OPN FXS SKL/FCE-DURL HEM UNS CONCUS
804.80	OPN FXS SKL/FCE-OTH&UNS ICH UNS SOC

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

804.81	OPN FXS SKUL/FCE-OTH&UNS ICH NO LOC
804.82	OPN FXS SKL/FCE OTH&UNS ICH BRF LOC
804.83	OPN FXS SKL/FCE-OTH&UNS ICH MOD LOC
804.84	OPN FXS SKL/FCE-OTH ICH LOC&RETURN
804.85	OPN FXS SKL/FCE-OTH ICH LOC NO RTRN
804.86	OPN FXS SKL/FCE-OTH&UNS ICH LOC UNS
804.89	OPN FXS SKL/FCE-OTH ICH UNS CONCUSS
804.90	OPN FXS SKL/FCE-OTH&UNS ICI UNS SOC
804.91	OPN FXS SKL/FCE-OTH&UNS ICI NO LOC
804.92	OPN FXS SKL/FCE OTH&UNS ICI-BRF LOC
804.93	OPN FXS SKL/FCE-OTH&UNS ICI MOD LOC
804.94	OPN FXS SKL/FCE-OTH ICI LOC&RTRN
804.95	OPN FXS SKL/FCE-OTH ICI LOC NO RTRN
804.96	OPN FXS SKL/FCE-OTH&UNS ICI LOC UNS
804.99	OPN FXS SKL/FCE-OTH ICI UNS CONCUSS
805.00	CLOS FX UNS CERV VERT W/O CRD INJR
805.01	CLOS FX C1 VERTEBRA NO SP CRD INJR
805.02	CLOS FX C2 VERTEBRA NO SP CRD INJR
805.03	CLOS FX C3 VERTEBRA NO SP CRD INJR
805.04	CLOS FX C4 VERTEBRA NO SP CRD INJR
805.05	CLOS FX C5 VERTEBRA NO SP CRD INJR
805.06	CLOS FX C6 VERTEBRA NO SP CRD INJR
805.07	CLOS FX C7 VERTEBRA NO SP CRD INJR
805.08	CLOS FX MX CERV VERT NO SP CRD INJR
805.10	OPEN FX UNS CERV VERT NO CORD INJR
805.11	OPN FX C1 VERTEBRA NO SP CRD INJR
805.12	OPN FX C2 VERTEBRA NO SP CRD INJR
805.13	OPN FX C3 VERTEBRA NO SP CRD INJR
805.14	OPN FX C4 VERTEBRA NO SP CRD INJR
805.15	OPN FX C5 VERTEBRA NO SP CRD INJR
805.16	OPN FX C6 VERTEBRA NO SP CRD INJR
805.17	OPN FX C7 VERTEBRA NO SP CRD INJR
805.18	OPN FX MX CERV VERT NO SP CORD INJR
805.2	CLOS FX DORS VERT W/O SP CORD INJR
805.3	OPEN FX DORS VERT W/O SP CORD INJR
805.4	CLOS FX LUMB VERT W/O SP CORD INJR
805.5	OPEN FX LUMB VERT W/O SP CORD INJR
805.6	CLOS FX SACRUM/COCCYX W/O CORD INJR
805.7	OPEN FX SACRUM/COCCYX W/O CORD INJR
805.8	CLOS FX UNS PRT VERT NO SP CRD INJR

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

805.9	OPN FX UNS PART VERT NO SP CRD INJR
806.00	CLOS FX C1-C4 W/UNS SP CORD INJR
806.01	CLOS FX C1-C4 LEVEL W/CMPL LES CORD
806.02	CLOS FX C1-C4 LEVEL W/ANT CORD SYND
806.03	CLOS FX C1-C4 LEVL W/CNTRL CRD SYND
806.04	CLOS FX C1-C4 W/OTH SP CORD INJR
806.05	CLOS FX C5-C7 W/UNS SP CORD INJR
806.06	CLOS FX C5-C7 LEVEL W/CMPL LES CORD
806.07	CLOS FX C5-C7 LEVEL W/ANT CORD SYND
806.08	CLOS FX C5-C7 LEVL W/CNTRL CRD SYND
806.09	CLOS FX C5-C7 W/OTH SP CORD INJR
806.10	OPEN FX C1-C4 W/UNS SP CORD INJR
806.11	OPEN FX C1-C4 LEVEL W/CMPL LES CORD
806.12	OPEN FX C1-C4 LEVEL W/ANT CORD SYND
806.13	OPEN FX C1-C4 LEVL W/CNTRL CRD SYND
806.14	OPEN FX C1-C4 W/OTH SP CORD INJR
806.15	OPEN FX C5-C7 W/UNS SP CORD INJR
806.16	OPEN FX C5-C7 LEVEL W/CMPL LES CORD
806.17	OPEN FX C5-C7 LEVEL W/ANT CORD SYND
806.18	OPEN FX C5-C7 LEVL W/CNTRL CRD SYND
806.19	OPEN FX C5-C7 W/OTH SP CORD INJR
806.20	CLOS FX T1-T6 W/UNS SP CORD INJR
806.21	CLOS FX T1-T6 LEVEL W/CMPL LES CORD
806.22	CLOS FX T1-T6 LEVEL W/ANT CORD SYND
806.23	CLOS FX T1-T6 LEVL W/CNTRL CRD SYND
806.24	CLOS FX T1-T6 W/OTH SP CORD INJR
806.25	CLOS FX T7-T12 W/UNS SP CORD INJR
806.26	CLOS FX T7-T12 LEVL W/CMPL LES CORD
806.27	CLOS FX T7-T12 LEVL W/ANT CORD SYND
806.28	CLOS FX T7-T12 W/CNTRL CORD SYND
806.29	CLOS FX T7-T12 W/OTH SP CORD INJR
806.30	OPEN FX T1-T6 W/UNS SP CORD INJR
806.31	OPEN FX T1-T6 LEVEL W/CMPL LES CORD
806.32	OPEN FX T1-T6 LEVEL W/ANT CORD SYND
806.33	OPEN FX T1-T6 LEVL W/CNTRL CRD SYND
806.34	OPEN FX T1-T6 W/OTH SP CORD INJR
806.35	OPEN FX T7-T12 W/UNS SP CORD INJR
806.36	OPEN FX T7-T12 LEVL W/CMPL LES CORD
806.37	OPEN FX T7-T12 LEVL W/ANT CORD SYND
806.38	OPEN FX T7-T12 W/CNTRL CORD SYND

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

806.39	OPEN FX T7-T12 W/OTH SP CORD INJR
806.4	CLOS FX LUMB SPN W/SP CORD INJURY
806.5	OPEN FX LUMB SPN W/SP CORD INJURY
806.60	CLOS FX SACRUM&COCCYX-UNS CRD INJR
806.61	CLOS FX SACR&COCC-CAUDA EQUINA LES
806.62	CLOS FX SACR&COCC-OTH CAUDA INJR
806.69	CLOS FX SACRUM&COCC-OTH CRD INJR
806.70	OPN FX SACRUM&COCC-UNS CRD INJR
806.71	OPN FX SACRUM&COCC-CAUDA EQUIN LES
806.72	OPN FX SACRUM&COCC-OTH CAUDA INJR
806.79	OPN FX SACRUM&COCC-OTH CRD INJR
806.8	CLOS FX UNS VERTEBRA W/SP CRD INJR
806.9	OPEN FX UNS VERTEBRA W/SP CRD INJR
807.00	CLOSED FRACTURE OF RIB, UNSPECIFIED
807.01	CLOSED FRACTURE OF ONE RIB
807.02	CLOSED FRACTURE OF TWO RIBS
807.03	CLOSED FRACTURE OF THREE RIBS
807.04	CLOSED FRACTURE OF FOUR RIBS
807.05	CLOSED FRACTURE OF FIVE RIBS
807.06	CLOSED FRACTURE OF SIX RIBS
807.07	CLOSED FRACTURE OF SEVEN RIBS
807.08	CLOSED FRACTURE OF 8 OR MORE RIBS
807.09	CLOS FRACTURE MULTIPLE RIBS UNSPEC
807.10	OPEN FRACTURE OF RIB, UNSPECIFIED
807.11	OPEN FRACTURE OF ONE RIB
807.12	OPEN FRACTURE OF TWO RIBS
807.13	OPEN FRACTURE OF THREE RIBS
807.14	OPEN FRACTURE OF FOUR RIBS
807.15	OPEN FRACTURE OF FIVE RIBS
807.16	OPEN FRACTURE OF SIX RIBS
807.17	OPEN FRACTURE OF SEVEN RIBS
807.18	OPEN FRACTURE OF EIGHT OR MORE RIBS
807.19	OPEN FRACTURE MULTIPLE RIBS UNSPEC
807.2	CLOSED FRACTURE OF STERNUM
807.3	OPEN FRACTURE OF STERNUM
807.4	FLAIL CHEST
807.5	CLOSED FRACTURE OF LARYNX&TRACHEA
807.6	OPEN FRACTURE OF LARYNX AND TRACHEA
808.0	CLOSED FRACTURE OF ACETABULUM
808.1	OPEN FRACTURE OF ACETABULUM

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

808.2	CLOSED FRACTURE OF PUBIS
808.3	OPEN FRACTURE OF PUBIS
808.41	CLOSED FRACTURE OF ILIUM
808.42	CLOSED FRACTURE OF ISCHIUM
808.43	MX CLOS PELV FX W/DISRUPT PELV CIRC
808.49	CLOS FX OTH SPEC PART PELVIS OTH
808.51	OPEN FRACTURE OF ILIUM
808.52	OPEN FRACTURE OF ISCHIUM
808.53	MX OPN PELV FX W/DISRUPT PELV CIRC
808.59	OPEN FX OTH SPEC PART PELVIS OTH
808.8	UNSPECIFIED CLOSED FRACTURE PELVIS
808.9	UNSPECIFIED OPEN FRACTURE OF PELVIS
809.0	FRACTURE OF BONES OF TRUNK, CLOSED
809.1	FRACTURE OF BONES OF TRUNK, OPEN
810.00	UNSPEC PART CLOSED FRACTURE CLAV
810.01	CLOSED FRACTURE STERNAL END CLAV
810.02	CLOSED FRACTURE SHAFT CLAVICLE
810.03	CLOSED FRACTURE ACROMIAL END CLAV
810.10	UNSPEC PART OPEN FRACTURE CLAVICLE
810.11	OPEN FRACTURE STERNAL END CLAVICLE
810.12	OPEN FRACTURE OF SHAFT OF CLAVICLE
810.13	OPEN FRACTURE ACROMIAL END CLAVICLE
811.00	CLOSED FRACTURE UNSPEC PART SCAPULA
811.01	CLOS FX ACROMIAL PROCESS SCAPULA
811.02	CLOS FX CORACOID PROCESS SCAPULA
811.03	CLOS FX GLENOID CAV&NCK SCAPULA
811.09	CLOSED FRACTURE OTHER PART SCAPULA
811.10	OPEN FRACTURE UNSPEC PART SCAPULA
811.11	OPEN FX ACROMIAL PROCESS SCAPULA
811.12	OPEN FRACTURE OF CORACOID PROCESS
811.13	OPEN FX GLENOID CAV&NCK SCAPULA
811.19	OPEN FRACTURE OTHER PART SCAPULA
812.00	CLOS FX UNSPEC PART UPPER END HUM
812.01	CLOS FRACTURE SURGICAL NECK HUMERUS
812.02	CLOSED FRACTURE ANAT NECK HUMERUS
812.03	CLOS FRACTURE GT TUBEROSITY HUMERUS
812.09	OTH CLOS FX UPPER END HUMERUS
812.10	OPEN FX UNSPEC PART UPPER END HUM
812.11	OPEN FRACTURE SURGICAL NECK HUMERUS
812.12	OPEN FRACTURE ANAT NECK HUMERUS

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

812.13	OPEN FRACTURE GT TUBEROSITY HUMERUS
812.19	OTH OPEN FRACTURE UPPER END HUMERUS
812.20	CLOSED FRACTURE UNSPEC PART HUMERUS
812.21	CLOSED FRACTURE OF SHAFT OF HUMERUS
812.30	OPEN FRACTURE UNSPEC PART HUMERUS
812.31	OPEN FRACTURE OF SHAFT OF HUMERUS
812.40	CLOS FX UNSPEC PART LOW END HUM
812.41	CLOS FRACTURE SUPRACONDYLAR HUMERUS
812.42	CLOS FRACTURE LATERAL CONDYLE HUM
812.43	CLOS FRACTURE MEDIAL CONDYLE HUM
812.44	CLOS FRACTURE UNSPEC CONDYLE HUM
812.49	OTH CLOS FRACTURE LOWER END HUMERUS
812.50	OPEN FX UNSPEC PART LOW END HUM
812.51	OPEN FRACTURE SUPRACONDYLAR HUMERUS
812.52	OPEN FRACTURE LATERAL CONDYLE HUM
812.53	OPEN FRACTURE MEDIAL CONDYLE HUM
812.54	OPEN FRACTURE UNSPEC CONDYLE HUM
812.59	OTH OPEN FRACTURE LOWER END HUMERUS
813.00	UNS FX RADIUS&ULNA UP FOREARM-CLOS
813.01	CLOS FRACTURE OLECRN PROCESS ULNA
813.02	CLOS FRACTURE CORONOID PROCESS ULNA
813.03	CLOSED MONTEGGIAS FRACTURE
813.04	OTH&UNSPEC CLOS FX PROX END ULNA
813.05	CLOSED FRACTURE OF HEAD OF RADIUS
813.06	CLOSED FRACTURE OF NECK OF RADIUS
813.07	OTH&UNSPEC CLOS FX PROX END RADIUS
813.08	CLOS FX RADIUS W/ULNA UPPER END
813.10	UNSPEC OPN FX UPPER END FORARM
813.11	OPEN FRACTURE OLECRN PROCESS ULNA
813.12	OPEN FRACTURE CORONOID PROCESS ULNA
813.13	OPEN MONTEGGIAS FRACTURE
813.14	OTH&UNSPEC OPEN FX PROX END ULNA
813.15	OPEN FRACTURE OF HEAD OF RADIUS
813.16	OPEN FRACTURE OF NECK OF RADIUS
813.17	OTH&UNSPEC OPEN FX PROX END RADIUS
813.18	OPEN FX RADIUS W/ULNA UPPER END
813.20	UNSPEC CLOS FX SHAFT RADIUS/ULNA
813.21	CLOSED FRACTURE OF SHAFT OF RADIUS
813.22	CLOSED FRACTURE OF SHAFT OF ULNA
813.23	CLOSED FRACTURE SHAFT RADIUS W/ULNA

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

813.30	UNSPEC OPN FX SHAFT RADIUS/ULNA
813.31	OPEN FRACTURE OF SHAFT OF RADIUS
813.32	OPEN FRACTURE OF SHAFT OF ULNA
813.33	OPEN FRACTURE SHAFT RADIUS W/ULNA
813.40	UNSPEC CLOS FRACTURE LOW END FORARM
813.41	CLOSED COLLES FRACTURE
813.42	OTH CLOS FRACTURES DIST END RADIUS
813.43	CLOSED FRACTURE DISTAL END ULNA
813.44	CLOS FRACTURE LOW END RADIUS W/ULNA
813.46	TORUS FRACTURE ULNA ALONE
813.47	TORUS FRACTURE OF RADIUS AND ULNA
813.50	UNSPEC OPN FRACTURE LOW END FOREARM
813.51	OPEN COLLES FRACTURE
813.52	OTH OPEN FRACTURES DIST END RADIUS
813.53	OPEN FRACTURE OF DISTAL END OF ULNA
813.54	OPEN FRACTURE LOW END RADIUS W/ULNA
813.80	CLOSED FRACTURE UNSPEC PART FOREARM
813.81	CLOSED FRACTURE UNSPEC PART RADIUS
813.82	CLOSED FRACTURE UNSPEC PART ULNA
813.83	CLOSED FRACTURE UNSPECIFIED PART RA
813.90	OPEN FRACTURE UNSPEC PART FOREARM
813.91	OPEN FRACTURE UNSPEC PART RADIUS
813.92	OPEN FRACTURE UNSPECIFIED PART ULNA
813.93	OPEN FRACTURE UNSPECIFIED PART RADI
814.00	UNSPEC CLOSED FRACTURE CARPAL BONE
814.01	CLOS FRACTURE NAVICULAR BONE WRIST
814.02	CLOSED FRACTURE LUNATE BONE WRIST
814.03	CLOS FRACTURE TRIQUETRAL BONE WRIST
814.04	CLOSED FRACTURE PISIFORM BONE WRIST
814.05	CLOS FRACTURE TRAPEZIUM BONE WRIST
814.06	CLOS FRACTURE TRAPEZOID BONE WRIST
814.07	CLOSED FRACTURE CAPITATE BONE WRIST
814.08	CLOSED FRACTURE HAMATE BONE WRIST
814.09	CLOSED FRACTURE OTHER BONE WRIST
814.10	UNSPEC OPEN FRACTURE CARPAL BONE
814.11	OPEN FRACTURE NAVICULAR BONE WRIST
814.12	OPEN FRACTURE LUNATE BONE WRIST
814.13	OPEN FRACTURE TRIQUETRAL BONE WRIST
814.14	OPEN FRACTURE PISIFORM BONE WRIST
814.15	OPEN FRACTURE TRAPEZIUM BONE WRIST

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

814.16	OPEN FRACTURE TRAPEZOID BONE WRIST
814.17	OPEN FRACTURE CAPITATE BONE WRIST
814.18	OPEN FRACTURE HAMATE BONE WRIST
814.19	OPEN FRACTURE OTHER BONE WRIST
815.00	CLOS FRACTURE MC BONE SITE UNSPEC
815.01	CLOS FRACTURE BASE THUMB MC BONE
815.02	CLOS FRACTURE BASE OTH MC BONE
815.03	CLOS FRACTURE SHAFT METACARPAL BONE
815.04	CLOS FRACTURE NECK METACARPAL BONE
815.09	CLOS FRACTURE MX SITES METACARPUS
815.10	OPEN FRACTURE MC BONE SITE UNSPEC
815.11	OPEN FRACTURE BASE THUMB MC BONE
815.12	OPEN FRACTURE BASE OTH MC BONE
815.13	OPEN FRACTURE SHAFT METACARPAL BONE
815.14	OPEN FRACTURE NECK METACARPAL BONE
815.19	OPEN FRACTURE MX SITES METACARPUS
816.00	CLOS FX UNSPEC PHALNX/PHALANG HAND
816.01	CLOS FX MID/PROX PHALNX/PHALANG HND
816.02	CLOS FX DIST PHALNX/PHALANG HAND
816.03	CLOS FX MX SITES PHALNX/PHALANG HND
816.10	OPEN FX PHALNX/PHALANG HAND UNSPEC
816.11	OPEN FX MID/PROX PHALNX/PHALANG HND
816.12	OPEN FX DIST PHALNX/PHALANG HAND
816.13	OPEN FX MX SITES PHALNX/PHALANG HND
817.0	MULTIPLE CLOSED FRACTURES HAND BNS
817.1	MULTIPLE OPEN FRACTURES HAND BONES
818.0	ILL-DEFINED CLOS FX UPPER LIMB
818.1	ILL-DEFINED OPEN FX UPPER LIMB
819.0	MX FX CLOS UP LIMBS-RIB&STERNUM
819.1	MX OPN FX UP LIMBS-RIB&STERNUM
820.00	CLOSED FX FEMUR UNS INTRCAPSULAR
820.01	CLOS FRACTURE EPIPHYSIS NECK FEMUR
820.02	CLOS FRACTURE MIDCERV SECTION FEMUR
820.03	CLOSED FRACTURE BASE NECK FEMUR
820.09	OTH CLOSED TRANSCERV FRACTURE FEMUR
820.10	OPEN FX FEMUR UNS INTRCAPSULAR
820.11	OPEN FRACTURE EPIPHYSIS NECK FEMUR
820.12	OPEN FRACTURE MIDCERV SECTION FEMUR
820.13	OPEN FRACTURE BASE NECK FEMUR
820.19	OTH OPEN TRANSCERV FRACTURE FEMUR



**SUDDEN AND SERIOUS CRITERIA LIST CODES**

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820.20	CLOS FX UNSPEC TROCH SECTION FEM
820.21	CLOS FX INTERTROCH SECTION FEM
820.22	CLOS FRACTURE SUBTROCH SECTION FEM
820.30	OPEN FX UNSPEC TROCH SECTION FEM
820.31	OPEN FX INTERTROCH SECTION FEM
820.32	OPEN FRACTURE SUBTROCH SECTION FEM
820.8	CLOS FRACTURE UNSPEC PART NECK FEM
820.9	OPEN FRACTURE UNSPEC PART NECK FEM
821.00	CLOSED FRACTURE UNSPEC PART FEMUR
821.01	CLOSED FRACTURE OF SHAFT OF FEMUR
821.10	OPEN FRACTURE UNSPEC PART FEMUR
821.11	OPEN FRACTURE OF SHAFT OF FEMUR
821.20	CLOS FX UNSPEC PART LOW END FEM
821.21	CLOSED FRACTURE OF FEMORAL CONDYLE
821.22	CLOS FRACTURE LOWER EPIPHYSIS FEMUR
821.23	CLOSED SUPRACONDYLAR FRACTURE FEMUR
821.29	OTH CLOSED FRACTURE LOWER END FEMUR
821.30	OPEN FX UNSPEC PART LOW END FEM
821.31	OPEN FRACTURE OF FEMORAL CONDYLE
821.32	OPEN FRACTURE LOWER EPIPHYSIS FEMUR
821.33	OPEN SUPRACONDYLAR FRACTURE FEMUR
821.39	OTHER OPEN FRACTURE LOWER END FEMUR
822.0	CLOSED FRACTURE OF PATELLA
822.1	OPEN FRACTURE OF PATELLA
823.00	CLOSED FRACTURE UPPER END TIBIA
823.01	CLOSED FRACTURE UPPER END FIBULA
823.02	CLOS FRACTURE UPPER END FIB W/TIBIA
823.10	OPEN FRACTURE OF UPPER END OF TIBIA
823.11	OPEN FRACTURE UPPER END FIBULA
823.12	OPEN FRACTURE UPPER END FIB W/TIBIA
823.20	CLOSED FRACTURE OF SHAFT OF TIBIA
823.21	CLOSED FRACTURE OF SHAFT OF FIBULA
823.22	CLOS FRACTURE SHAFT FIBULA W/TIBIA
823.30	OPEN FRACTURE OF SHAFT OF TIBIA
823.31	OPEN FRACTURE OF SHAFT OF FIBULA
823.32	OPEN FRACTURE SHAFT FIBULA W/TIBIA
823.80	CLOSED FRACTURE UNSPEC PART TIBIA
823.81	CLOSED FRACTURE UNSPEC PART FIBULA
823.82	CLOS FRACTURE UNSPEC PART FIB W/TIB
823.90	OPEN FRACTURE UNSPEC PART TIBIA

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

823.91	OPEN FRACTURE UNSPEC PART FIBULA
823.92	OPEN FRACTURE UNSPEC PART FIB W/TIB
824.0	CLOSED FRACTURE OF MEDIAL MALLEOLUS
824.1	OPEN FRACTURE OF MEDIAL MALLEOLUS
824.2	CLOSED FRACTURE LATERAL MALLEOLUS
824.3	OPEN FRACTURE OF LATERAL MALLEOLUS
824.4	CLOSED BIMALLEOLAR FRACTURE
824.5	OPEN BIMALLEOLAR FRACTURE
824.6	CLOSED TRIMALLEOLAR FRACTURE
824.7	OPEN TRIMALLEOLAR FRACTURE
824.8	UNSPECIFIED CLOSED FRACTURE ANKLE
824.9	UNSPECIFIED OPEN FRACTURE OF ANKLE
825.0	CLOSED FRACTURE OF CALCANEUS
825.1	OPEN FRACTURE OF CALCANEUS
825.20	CLOSED FRACTURE UNSPEC BONE FOOT
825.21	CLOSED FRACTURE OF ASTRAGALUS
825.22	CLOSED FRACTURE NAVICULAR BONE FOOT
825.23	CLOSED FRACTURE OF CUBOID BONE
825.24	CLOSED FRACTURE CUNEIFORM BONE FOOT
825.25	CLOSED FRACTURE OF METATARSAL BONE
825.29	OTH CLOS FRACTURE TARSAL&MT BNS
825.30	OPEN FRACTURE UNSPECIFIED BONE FOOT
825.31	OPEN FRACTURE OF ASTRAGALUS
825.32	OPEN FRACTURE NAVICULAR BONE FOOT
825.33	OPEN FRACTURE OF CUBOID BONE
825.34	OPEN FRACTURE CUNEIFORM BONE FOOT
825.35	OPEN FRACTURE OF METATARSAL BONE
825.39	OTH OPEN FX TARSAL&METATARSAL BNS
826.0	CLOS FRACTURE 1/MORE PHALANGES FOOT
826.1	OPEN FRACTURE 1/MORE PHALANGES FOOT
827.0	OTH MX&ILL-DEFINED CLOS FX LOW LIMB
827.1	OTH MX&ILL-DEFINED OPEN FX LOW LIMB
828.0	MX CLOS FX LEGS-LEGS W/ARM/RIBS
828.1	MX OPN FX LEGS-LEGS W/ARM/RIBS
829.0	CLOSED FRACTURE OF UNSPECIFIED BONE
829.1	OPEN FRACTURE OF UNSPECIFIED BONE
830.0	CLOSED DISLOCATION OF JAW
830.1	OPEN DISLOCATION OF JAW
831.00	CLOS DISLOC SHOULDER UNSPEC SITE
831.01	CLOSED ANTERIOR DISLOCATION HUMERUS

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

831.02	CLOS POSTERIOR DISLOCATION HUMERUS
831.03	CLOSED INFERIOR DISLOCATION HUMERUS
831.04	CLOSED DISLOCATION AC
831.09	CLOS DISLOCATION OTH SITE SHOULDER
831.10	OPEN UNSPEC DISLOCATION SHOULDER
831.11	OPEN ANTERIOR DISLOCATION HUMERUS
831.12	OPEN POSTERIOR DISLOCATION HUMERUS
831.13	OPEN INFERIOR DISLOCATION HUMERUS
831.14	OPEN DISLOCATION ACROMIOCLAVICULAR
831.19	OPEN DISLOCATION OTH SITE SHOULDER
832.00	CLOSED UNSPEC DISLOCATION ELBOW
832.01	CLOSED ANTERIOR DISLOCATION ELBOW
832.02	CLOSED POSTERIOR DISLOCATION ELBOW
832.03	CLOSED MEDIAL DISLOCATION OF ELBOW
832.04	CLOSED LATERAL DISLOCATION OF ELBOW
832.09	CLOSED DISLOCATION OTHER SITE ELBOW
832.10	OPEN UNSPECIFIED DISLOCATION ELBOW
832.11	OPEN ANTERIOR DISLOCATION OF ELBOW
832.12	OPEN POSTERIOR DISLOCATION OF ELBOW
832.13	OPEN MEDIAL DISLOCATION OF ELBOW
832.14	OPEN LATERAL DISLOCATION OF ELBOW
832.19	OPEN DISLOCATION OTHER SITE ELBOW
832.2	NURSEMAIDS ELBOW
833.00	CLOS DISLOCATION WRIST UNSPEC PART
833.01	CLOS DISLOCATION DISTAL RADIOULNAR
833.02	CLOSED DISLOCATION OF RADIOCARPAL
833.03	CLOSED DISLOCATION OF MIDCARPAL
833.04	CLOSED DISLOCATION CARPOMETACARPAL
833.05	CLOS DISLOC PROXIMAL END METACARPAL
833.09	CLOSED DISLOCATION OTHER PART WRIST
833.10	OPEN DISLOCATION WRIST UNSPEC PART
833.11	OPEN DISLOCATION DISTAL RADIOULNAR
833.12	OPEN DISLOCATION OF RADIOCARPAL
833.13	OPEN DISLOCATION OF MIDCARPAL
833.14	OPEN DISLOCATION OF CARPOMETACARPAL
833.15	OPEN DISLOC PROXIMAL END METACARPAL
833.19	OPEN DISLOCATION OTHER PART WRIST
834.00	CLOS DISLOCATION FINGER UNSPEC PART
834.01	CLOS DISLOC METACARPOPHALANGEAL
834.02	CLOS DISLOC INTERPHALANGEAL HAND

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

834.10	OPEN DISLOCATION FINGER UNSPEC PART
834.11	OPEN DISLOC METACARPOPHALANGEAL
834.12	OPEN DISLOC INTERPHALANGEAL HAND
835.00	CLOSED DISLOCATION HIP UNSPEC SITE
835.01	CLOSED POSTERIOR DISLOCATION OF HIP
835.02	CLOSED OBTURATOR DISLOCATION OF HIP
835.03	OTH CLOSED ANTERIOR DISLOCATION HIP
835.10	OPEN DISLOCATION HIP UNSPEC SITE
835.11	OPEN POSTERIOR DISLOCATION OF HIP
835.12	OPEN OBTURATOR DISLOCATION OF HIP
835.13	OTHER OPEN ANTERIOR DISLOCATION HIP
836.0	TEAR MED CART/MENISCUS KNEE CURRENT
836.1	TEAR LAT CART/MENISCUS KNEE CURRENT
836.2	OTH TEAR CART/MENISCUS KNEE CURRENT
836.3	CLOSED DISLOCATION OF PATELLA
836.4	OPEN DISLOCATION OF PATELLA
836.50	CLOSED DISLOCATION KNEE UNSPEC PART
836.51	CLOS ANT DISLOC TIBIA PROXIMAL END
836.52	CLOS POST DISLOC TIBIA PROXIMAL END
836.53	CLOS MED DISLOC TIBIA PROXIMAL END
836.54	CLOS LAT DISLOC TIBIA PROXIMAL END
836.59	OTH DISLOCATION OF KNEE CLOSED OTH
836.60	OPEN DISLOCATION KNEE UNSPEC PART
836.61	OPEN ANT DISLOC TIBIA PROXIMAL END
836.62	OPEN POST DISLOC TIBIA PROXIMAL END
836.63	OPEN MED DISLOC TIBIA PROXIMAL END
836.64	OPEN LAT DISLOC TIBIA PROXIMAL END
836.69	OTH DISLOCATION OF KNEE OPEN OTH
837.0	CLOSED DISLOCATION OF ANKLE
837.1	OPEN DISLOCATION OF ANKLE
838.00	CLOSED DISLOCATION FOOT UNSPEC PART
838.01	CLOS DISLOC TARSAL JOINT UNSPEC
838.02	CLOSED DISLOCATION OF MIDTARSAL
838.03	CLOSED DISLOCATION TARSOMETATARSAL
838.04	CLOS DISLOC METATARSAL JOINT UNSPEC
838.05	CLOS DISLOC METATARSOPHALANGEAL
838.06	CLOS DISLOC INTERPHALANGEAL FOOT
838.09	CLOSED DISLOCATION OTHER PART FOOT
838.10	OPEN DISLOCATION FOOT UNSPEC PART
838.11	OPEN DISLOC TARSAL JOINT UNSPEC

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

838.12	OPEN DISLOCATION OF MIDTARSAL
838.13	OPEN DISLOCATION OF TARSOMETATARSAL
838.14	OPEN DISLOC METATARSAL JOINT UNSPEC
838.15	OPEN DISLOC METATARSOPHALANGEAL
838.16	OPEN DISLOC INTERPHALANGEAL FOOT
838.19	OPEN DISLOCATION OTHER PART FOOT
839.00	CLOS DISLOC UNSPEC CERV VERTEBRA
839.01	CLOSED DISLOCATION 1 CERV VERTEBRA
839.02	CLOSED DISLOCATION 2 CERV VERTEBRA
839.03	CLOSED DISLOCATION1/3CERV VERTEBRA
839.04	CLOS DISLOCATION 1/4 CERV VERTEBRA
839.05	CLOS DISLOCATION 1/5 CERV VERTEBRA
839.06	CLOSED DISLOCATION1/6CERV VERTEBRA
839.07	CLOSED DISLOCATION1/7CERV VERTEBRA
839.08	CLOS DISLOC MULTIPLE CERV VERTEBRAE
839.10	OPEN DISLOC UNSPEC CERV VERTEBRA
839.11	OPEN DISLOCATION 1 CERV VERTEBRA
839.12	OPEN DISLOCATION 2 CERV VERTEBRA
839.13	OPEN DISLOCATION1/3CERV VERTEBRA
839.14	OPEN DISLOCATION 1/4 CERV VERTEBRA
839.15	OPEN DISLOCATION 1/5 CERV VERTEBRA
839.16	OPEN DISLOCATION1/6CERV VERTEBRA
839.17	OPEN DISLOCATION1/7CERV VERTEBRA
839.18	OPEN DISLOC MULTIPLE CERV VERTEBRAE
839.20	CLOSED DISLOCATION, LUMBAR VERTEBRA
839.21	CLOS DISLOCATION THORACIC VERTEBRA
839.30	OPEN DISLOCATION, LUMBAR VERTEBRA
839.31	OPEN DISLOCATION, THORACIC VERTEBRA
839.40	CLOS DISLOC VERTEBRA UNSPEC SITE
839.41	CLOSED DISLOCATION, COCCYX
839.42	CLOSED DISLOCATION, SACRUM
839.49	CLOSED DISLOCATION OTH VERTEBRA OTH
839.50	OPEN DISLOC VERTEBRA UNSPEC SITE
839.51	OPEN DISLOCATION, COCCYX
839.52	OPEN DISLOCATION, SACRUM
839.59	OPEN DISLOCATION OTH VERTEBRA OTH
839.61	CLOSED DISLOCATION, STERNUM
839.69	CLOSED DISLOCATION OTH LOCATION OTH
839.71	OPEN DISLOCATION, STERNUM
839.79	OPEN DISLOCATION OTH LOCATION OTH

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

839.8	CLOS DISLOC MX&ILL-DEFINED SITES
839.9	OPEN DISLOC MX&ILL-DEFINED SITES
850.0	CONCUSSION WITH NO LOC
850.11	CONCUSSION W/LOC 30 MINUTES OR LESS
850.12	CONCUSSION W/LOC FROM 31 59 MINUTES
850.2	CONCUSSION WITH MODERATE LOC
850.3	CONCUS W/LOC&RTRN PREV CONSC LEVEL
850.4	CONCUSW/LOC-NO RTRN PREV LEVEL
850.5	CONCUSSION W/LOC UNSPEC DURATION
850.9	UNSPECIFIED CONCUSSION
851.00	CORTX CONTUS W/O OPN ICW SOC UNS
851.01	CORTX CONTUS W/O OPN ICW NO LOC
851.02	CORTX CONTUS W/O OPN ICW BRF LOC
851.03	CORTX CONTUS W/O OPN ICW MOD LOC
851.04	CORTX CONTUS NO OPN ICW LOC&RTRN
851.05	CORTX CONTUS NO OPN ICW NO RETURN
851.06	CORTX CONTUS W/O OP ICW LOC UNS DUR
851.09	CORTX CONTUS W/O OPN ICW UNS CONCUS
851.10	CORTX CONTUS W/OPEN ICW UNS SOC
851.11	CORTX CONTUS W/OPEN ICW NO LOC
851.12	CORTX CONTUS W/OPEN ICW BRF LOC
851.13	CORTX CONTUS W/OPEN ICW MOD LOC
851.14	CORTX CONTUS-OPN ICW LOC>24 HR&RTRN
851.15	CORTX CONTUS-OPN ICW LOC>24 NO RTRN
851.16	CORTX CONTUS W/OPEN ICW LOC UNS DUR
851.19	CORTX CONTUS W/OPEN ICW UNS CONCUS
851.20	CORTX LAC W/O OPN ICW UNS SOC
851.21	CORTX LAC W/O OPN ICW NO LOC
851.22	CORTX LAC W/O OPN ICW BRF LOC
851.23	CORTX LAC W/O OPN ICW MOD LOC
851.24	CORTEX LAC NO OPN ICW LOC>24&RTRN
851.25	CORTEX LAC NO OPN ICW LOC NO RTRN
851.26	CORTX LAC W/O OPN ICW LOC UNS DUR
851.29	CORTX LAC W/O OPN ICW UNS CONCUS
851.30	CORTX LAC W/OPEN ICW UNS SOC
851.31	CORTX LAC W/OPEN ICW NO LOC
851.32	CORTX LAC W/OPEN ICW BRF LOC
851.33	CORTX LAC W/OPEN ICW MOD LOC
851.34	CORTX LAC-OPN ICW LOC>24 HR&RETRUN
851.35	CORTX LAC-OPN ICW LOC NO RETURN

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

851.36	CORTX LAC W/OPEN ICW LOC UNS DUR
851.39	CORTX LAC W/OPEN ICW UNS CONCUS
851.40	CERBLR CONTUS-NO OPN ICW UNS SOC
851.41	CERBLR CONTUS NO OPN ICW NO LOC
851.42	CERBLR CONTUS NO OPN ICW BRF LOC
851.43	CERBLR CONTUS NO OPN ICW MOD LOC
851.44	CERBLR CONTUS NO OPN ICW LOC&RTRN
851.45	CRBLR CNTUS NO OPN ICW LOC NO RTRN
851.46	CERBLR CONTUS NO OPN ICW UNS DUR
851.49	CERBLR CONTUS NO OPN ICW UNS CNCUS
851.50	CERBLR CONTUS-OPN ICW UNS SOC
851.51	CERBLR CONTUS-OPN ICU NO LOC
851.52	CERBLR CONTUS-OPN ICW BRF LOC
851.53	CERBLR CONTUS-OPN ICW MOD LOC
851.54	CERBLR CONTUS-OPN ICW LOC & RETURN
851.55	CERBLR CONTUS-OPN ICW LOC NO RTURN
851.56	CERBLR CONTUS-OPN ICW LOC UNS DUR
851.59	CERBLR CONTUS-OPN ICW UNS CONCUSS
851.60	CERBLR LAC NO OPN ICW UNS SOC
851.61	CERBLR LAC NO OPN ICW NO LOC
851.62	CERBLR LAC NO OPN ICW BRIEF LOC
851.63	CERBLR LAC NO OPN ICW MODERATE LOC
851.64	CERBLR LAC NO OPN ICW LOC & RETURN
851.65	CERBLR LAC NO OPN ICW LOC NO RTURN
851.66	CERBLR LAC NO OPN ICW LOC UNS DUR
851.69	CERBLR LAC NO OPN ICW UNS CONCUSS
851.70	CERBLR LAC W/OPN ICW SOC UNS
851.71	CERBLR LAC W/OPN ICW NO LOC
851.72	CERBLR LAC W/OPN ICW BRIEF LOC
851.73	CERBLR LAC W/OPN ICW MODERATE LOC
851.74	CERBLR LAC W/OPN ICW LOC & RETURN
851.75	CERBLR LAC W/OPN ICW LOC NO RETURN
851.76	CERBLR LAC W/OPN ICW LOC UNS DUR
851.79	CERBLR LAC W/OPN ICW UNS CONCUSS
851.80	OTH&UNS CERB LAC NO ICW UNS SOC
851.81	OTH&UNS CERB LAC NO OPN ICW NO LOC
851.82	OTH&UNS CERB LAC N-OPN ICW BRF LOC
851.83	OTH&UNS CERB LAC N-OPN ICW MOD LOC
851.84	OTH&UNS CERB LAC NO OPN ICW LOC&RTN
851.85	OTH&UNS CERB LAC NO ICW LOC NO RTN

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

851.86	OTH&UNS CERB LAC NO ICW LOC UNS DUR
851.89	OTH&UNS CERB LAC NO ICW UNS CNCUS
851.90	OTH&UNS CERBRL LAC-OPN ICW UNS SOC
851.91	OTH&UNS CERBRL LAC-OPN ICW NO LOC
851.92	OTH&UNS CERBRL LAC-OPN ICW BRF LOC
851.93	OTH&UNS CERBRL LAC-OPN ICW MOD LOC
851.94	OTH&UNS CERBRL LAC-OPN ICW LOC&RTRN
851.95	OTH&UNS CERB LAC-OPN ICW LOC NO RTN
851.96	OTH&UNS CERB LAC-OPN ICW LOC UNS DR
851.99	OTH&UNS CERB LAC-OPN ICW UNS CONCUS
852.00	SUBARACH HEMOR INJURY
852.01	SUBARACH HEMOR NO LOC
852.02	SUBARACH HEMOR BRIEF LOC
852.03	SUBARACH HEMOR MOD LOC
852.04	SUBARACH HEMOR LOC>24 RETRN
852.05	SUBARACH HEMOR LOC>24 NO RETRN
852.06	SUBARACH HEMOR LOC UNS DURAT
852.09	SUBARACH HEMOR CONCUSSION
852.10	SUBARACH HEMOR W/OPN ICW UNS LOC
852.11	SUBARACH HEMOR W/OPN ICW NO LOC
852.12	SUBARACH HEMOR W/OPN ICW BRIEF LOC
852.13	SUBARACH HEMOR W/OPN ICW MOD LOC
852.14	SUBARAC HEMOR W/OPN ICW LOC>24 RTRN
852.15	SUBARAC HEMOR OP ICW LOC>24 NO RTRN
852.16	SUBARACH HEMOR W/OPN ICW UNS DUR
852.19	SUBARAC HEM W/OPN ICW UNS CONCUSS
852.20	SUBDURAL HEMOR W/O OPN ICW UNS LOC
852.21	SUBDURAL HEMOR W/O OPN ICW NO LOC
852.22	SUBDURL HEMOR W/O OPN ICW BRIEF LOC
852.23	SUBDURAL HEMOR W/O OPN ICW MOD LOC
852.24	SUBDR HEMOR W/O OPN ICW LOC>24 RTRN
852.25	SUBDURAL HEMOR LOC>24 NO RETURN
852.26	SUBDURAL HEMOR LOC UNS DURATION
852.29	SUBDUR HEMOR W/O OP ICW UNS CONCUS
852.30	SUBDURAL HEMOR W/OPN ICW SOC UNS
852.31	SUBDURAL HEMOR W/OPN ICW NO LOC
852.32	SUBDURAL HEMOR W/OPN ICW BRIEF LOC
852.33	SUBDURAL HEMOR W/OPN ICW MOD LOC
852.34	SUBDURL HEMOR W/OPN ICW LOC>24 RTRN
852.35	SUBDRL HEM W/OPN ICW LOC>24 NO RTRN



**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

852.36	SUBDURL HEMOR W/OPN ICW LOC UNS DUR
852.39	SUBDURL HEM W/OPN ICW UNS CONCUSS
852.40	XTRADURL HEMOR W/O OPN ICW LOC UNS
852.41	XTRADURL HEMOR W/O OPN ICW NO LOC
852.42	XTRADUR HEMOR W/O OPN ICW BRIEF LOC
852.43	XTRADURL HEMOR W/O OPN ICW MOD LOC
852.44	XTRADUR HEMOR W/O ICW LOC>24 RETURN
852.45	XTRADUR HEMOR WO ICW LOC>24 NO RTRN
852.46	XTRADURAL HEMOR W/O ICW LOC UNS DUR
852.49	XTRADURAL HEMOR W/O ICW UNS CONCUSS
852.50	XTRADURAL HEMOR W/OPN ICW SOC UNS
852.51	XTRADURAL HEMOR W/OPN ICW NO LOC
852.52	XTRADURAL HEMOR W/OPN ICW BRIEF LOC
852.53	XTRADURAL HEMOR W/OPN ICW MOD LOC
852.54	XTRADUR HEMOR W/ICW LOC>24 RETURN
852.55	XTRADUR HEMOR W/ICW LOC>24 NO RTRN
852.56	XTRADUR HEMOR W/OPN ICW LOC UNS DUR
852.59	XTRADUR HEMOR W/OPN ICW UNS CONCUSS
853.00	OTH&UNS ICH W/O OPEN ICW UNS SOC
853.01	OTH&UNS ICH W/O OPEN ICW NO LOC
853.02	OTH&UNS ICH W/O OPEN ICW BRIEF LOC
853.03	OTH&UNS ICH W/O OPEN ICW MOD LOC
853.04	OTH&UNS ICH W/O OPN ICW >24 LOC RTN
853.05	OTH&UNS ICH W/O ICW >24 LOC NO RTN
853.06	OTH&UNS ICH W/O OPN ICW LOC UNS DUR
853.09	OTH&UNS ICH W/O OPN ICW UNS CONCUSS
853.10	OTH&UNS ICH W/OPEN ICW UNS SOC
853.11	OTH&UNS ICH W/OPEN ICW NO LOC
853.12	OTH&UNS ICH WOPEN ICW BRIEF LOC
853.13	OTH&UNS ICH W/OPEN ICW MOD LOC
853.14	OTH&UNS ICH W/OPEN ICW >24 LOC RTRN
853.15	OTH&UNS ICH W/ICW >24 LOC NO RTRN
853.16	OTH&UNS ICH W/OPN ICW LOC UNS DUR
853.19	OTH&UNS ICH W/OPN ICW UNS CONCUSS
854.00	ICI OTH&UNS NAT W/O OPN ICW UNS SOC
854.01	ICI OTH&UNS NATR W/O OPN ICW NO LOC
854.02	ICI OTH&UNS W/O OPN ICW BRIEF LOC
854.03	ICI OTH&UNS W/O OPN ICW MOD LOC
854.04	ICI OTH&UNS W/O OPN ICW LOC>24 RTN
854.05	ICI OTH&UNS W/O ICW LOC>24 NO RTRN

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

854.06	ICI OTH&UNS W/O OPN ICW LOC UNS DUR
854.09	ICI OTH&UNS W/O OPN ICW UNS CONCUSS
854.10	ICI OTH&UNS NATR W/OPEN ICW UNS SOC
854.11	ICI OTH&UNS NATR W/OPEN ICW NO LOC
854.12	ICI OTH&UNS W/OPEN ICW BRIEF LOC
854.13	ICI OTH&UNS W/OPEN ICW MOD LOC
854.14	ICI OTH&UNS W/OPEN ICW LOC>24 RTRN
854.15	ICI OTH&UNS W/ICW LOC>24 NO RTRN
854.16	ICI OTH&UNS W/OPEN ICW LOC UNS DUR
854.19	ICI OTH&UNS W/OPEN ICW UNS CONCUSS
860.0	TRAUMAT PNEUMO W/O OPN WND IN THOR
860.1	TRAUMAT PNEUMO W/OPEN WOUND IN THOR
860.2	TRAUMAT HEMOTHORAX-W/O OPN WND
860.3	TRAUMAT HEMOTHOR W/OPEN WND IN THOR
860.4	TRAUMAT PNEUMOHEMOTHOR W/O OP WOUND
860.5	TRAUMAT PNEUMOHEMOTHOR W/OPEN WOUND
861.00	UNS INJR HRT W/O OPN WND IN THOR
861.01	HRT CONTUS W/O OPN WND IN THOR
861.02	HRT LAC W/O PENETRAT HRT CHAMB/WND
861.03	HRT LAC W PENETRAT HRT CHAMB/OP WND
861.10	UNS INJURY HRT W/OPEN WOUND IN THOR
861.11	HEART CONTUS W/OPEN WOUND INTO THOR
861.12	HRT LAC W/O PENETRAT CHAMBRs W/WND
861.13	HRT LAC W PENETRAT HRT CHAMB&OP WND
861.20	UNS LUNG INJR W/O OPN WND IN THOR
861.21	LUNG CONTUS W/O OPN WND IN THOR
861.22	LUNG LAC W/O OPN WND IN THOR
861.30	UNS LUNG INJURY W/OPEN WND IN THOR
861.31	LUNG CONTUS W/OPEN WOUND INTO THOR
861.32	LUNG LAC W/OPEN WOUND IN THOR
862.0	DIAPHRAGM INJR W/O OPN WND IN CAV
862.1	DIAPHRAGM INJURY W/OPEN WND IN CAV
862.21	BRONCHUS INJR W/O OPN WND IN CAV
862.22	ESOPH INJR W/O OPN WND IN CAV
862.29	INJR OTH INTHR ORGN NO OPN CAV OTH
862.31	BRONCHUS INJURY W/OPEN WOUND IN CAV
862.32	ESOPH INJURY W/OPEN WOUND IN CAVITY
862.39	INJR OTH INTHR ORGN OPN WND CAV OTH
862.8	INJR MX&UNS INTHOR ORGNS W/O OP WND
862.9	INJR MX&UNS INTHOR ORGNS W/ OP WND

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

863.0	STOMACH INJR W/O OPN WND IN CAV
863.1	STOMACH INJURY W/OPEN WOUND IN CAV
863.20	SM INTST INJR W/O OPN WND IN CAV
863.21	DUODUM INJR W/O OPN WND IN CAV
863.29	OTH INJ SMALL INTST W/OPEN WND
863.30	SM INTST INJR W/OPEN WND IN CAV
863.31	DUODENUM INJURY W/OPEN WOUND IN CAV
863.39	OTH INJR SM INTST W/OPEN WND IN CAV
863.40	COLON INJR W/O OPN WND IN CAV
863.41	ASCENDING COLON INJ-W/O OPEN WND
863.42	TRNS COLON INJR W/O OPN WND IN CAV
863.43	DESCENDING COLON INJ-W/O OPEN WND
863.44	SIGMOID COLON INJ-W/O OPEN WND CAV
863.45	RECT INJR W/O OPN WND IN CAV
863.46	INJR MX SITE COLON&RECT W/O OP WND
863.50	COLON INJR W/OPEN WND IN CAV
863.51	ASCEND COLON INJR W/OPEN WND IN CAV
863.52	TRNS COLON INJURY W/OPEN WND IN CAV
863.53	DESCENDING COLON INJ-OPN WND CAV
863.54	SIGMOID COLON INJ-OPEN WND CAV
863.55	RECT INJURY W/OPEN WOUND IN CAVITY
863.56	INJR MULT SITE COLON&RECT W/ OP WND
863.59	OTH INJR COLON/RECTUM W/OPEN WND
863.80	GI TRACT INJR W/O OPN WND IN CAV
863.81	PANC HEAD INJR W/O OPN WND IN CAV
863.82	PANC BDY INJR W/O OPN WND IN CAV
863.83	PANC TAIL INJR W/O OPN WND IN CAV
863.84	PANC INJR MX& W/O OPN WND IN CAV
863.85	APPDX INJR W/O OPN WND IN CAV
863.89	INJR OTH&UNS GI NO OPN WND CAV OTH
863.90	GI TRACT INJR W/OPEN WND IN CAV
863.91	PANC HEAD INJURY W/OPEN WND IN CAV
863.92	PANC BDY INJURY W/OPEN WOUND IN CAV
863.93	PANC TAIL INJURY W/OPEN WND IN CAV
863.94	PANC INJR MX& W/OPEN WND IN CAV
863.95	APPDX INJURY W/OPEN WOUND IN CAVITY
863.99	INJR OTH&UNS GI W/OPN WND CAV OTH
864.00	UNS INJR LIVR W/O OPN WND IN CAV
864.01	LIVER HEMAT&CONTUS W/O MENTION WND
864.02	LIVER LAC MINOR W/O OPN WND IN CAV

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

864.03	LIVER LAC MOD W/O OPN WND IN CAV
864.04	LIVER LAC MAJ W/O OPN WND IN CAV
864.05	LIVER INJ W/O OPEN WND UNS LAC
864.09	OTH LIVR INJR W/O OPN WND IN CAV
864.10	UNS LIVR INJURY W/OPEN WOUND IN CAV
864.11	LIVER HEMATOM/CONTUS-W/OPEN WND
864.12	LIVER LAC MINOR W/OPEN WOUND IN CAV
864.13	LIVER LAC MOD W/OPEN WOUND IN CAV
864.14	LIVER LAC MAJ W/OPEN WOUND IN CAV
864.15	LIVER INJ W/OPEN WND UNS LACERATION
864.19	OTH LIVR INJURY W/OPEN WOUND IN CAV
865.00	UNS SPLEEN INJR W/O OPN WND IN CAV
865.01	SPLEEN HEMATOMA W/O RUPTURE CAPSULE
865.02	SPLEEN CAPSULAR TEARS NO MAJ DISRUP
865.03	SPLEEN INJURY LAC EXTEND PARENCHYMA
865.04	SPLEEN INJR MASSIVE PARENCHY DISRUP
865.09	OTH SPLEEN INJR W/O OPN WND IN CAV
865.10	UNS SPLEEN INJURY W/OPEN WND IN CAV
865.11	SPLEEN HEMA W/O RUPT CAPS W/WND CAV
865.12	SPLEEN CAPSUL TEARS W/OP WND CAVITY
865.13	SPLEEN LAC EXTND PARENCH W/WND CAV
865.14	SPLEEN MASS PARENCH DISRUP W/WND CAV
865.19	OTH SPLEEN INJURY W/OPEN WND IN CAV
866.00	UNS KIDNEY INJR W/O OPN WND IN CAV
866.01	KIDNEY HEMAT W/O RUP CAP/MENTN WND
866.02	KIDNEY LAC W/O OPN WND IN CAV
866.03	CMPL DISRUP KIDNEY PARENCH W/O WND
866.10	UNS IKIDNEY INJR W/OPEN WND IN CAV
866.11	KIDNEY HEMAT W/O RUP CAP W/ OP WND
866.12	KIDNEY LAC W/OPEN WOUND IN CAV
866.13	CMPL DISRUP KIDNEY PARENCHYM W/WND
867.0	BLADDER/URETHRA INJR W/O OPEN WND
867.1	BLADDER/URETHRA INJ W/OPEN WND CAV
867.2	URETER INJR W/O OPN WND IN CAV
867.3	URETER INJURY W/OPEN WOUND IN CAV
867.4	UTRUS INJR W/O OPN WND IN CAV
867.5	UTERUS INJURY W/OPEN WOUND IN CAV
867.6	INJR OTH PELV ORG W/O OPEN WND CAV
867.7	INJR OTH PELV ORG W/OPEN WND CAV
867.8	INJR UNS PELV ORG W/O OPEN WND CAV

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

867.9	INJR UNS PELV ORG W/OPEN WND CAV
868.00	INJR UNS INTR-ABD ORGNS W/O OP WND
868.01	ADRENAL GLAND INJURY-W/O OPEN WND
868.02	BD&GB INJR W/O OPN WND IN CAV
868.03	PERITON INJR W/O OPN WND IN CAV
868.04	RETROPERITONEUM INJ-W/O OPEN WND
868.09	INJR OTH&MX INTR-ABD ORGNS W/O WND
868.10	INJR UNS INTR-ABD ORGNS W/ OP WND
868.11	ADRENL GLAND INJR W/OPEN WND IN CAV
868.12	BD&GB INJURY W/OPEN WND IN CAV
868.13	PERITON INJURY W/OPEN WOUND IN CAV
868.14	RETROPERITON INJR W/OPEN WND IN CAV
868.19	INJR OTH&MX INTR-ABD ORGNS W/WOUND
869.0	INT INJR UNS/ILL-DEFIN ORGN W/O WND
869.1	INT INJR UNS/ILL-DEFINED ORGN W/WND
870.0	LAC SKIN EYELD&PERIOCLUR AREA
870.1	LAC EYELD NOT INVOLV LACRIML PASSAG
870.2	LACERATION EYELD INVLV LAC PASSAGES
870.3	PENETRATING WND ORBIT W/O FB
870.4	PENETRATING WOUND ORBIT W/FB
870.8	OTHER SPEC OPEN WOUND OCULAR ADNEXA
870.9	UNSPEC OPEN WOUND OCULAR ADNEXA
871.0	OCULR LAC W/O PROLAP INTRAOCLR TISS
871.1	OCULR LAC W/PROLAP/EXPOS OCULR TISS
871.2	RUP EYE W/PART LOSS INTRAOCLR TISS
871.3	AVULSION OF EYE
871.4	UNSPECIFIED LACERATION OF EYE
871.5	PENETRATION EYEBALL W/MAGNETIC FB
871.6	PENETRATION EYEBALL W/FOREIGN BODY
871.7	UNSPECIFIED OCULAR PENETRATION
871.9	UNSPECIFIED OPEN WOUND OF EYEBALL
872.00	OPEN WND EXT EAR UNS SITE W/O COMP
872.01	OPEN WOUND AURICLE W/O MENTION COMP
872.02	OPEN WND AUDITRY CANAL W/O COMP
872.10	OPEN WOUND EXT EAR UNSPEC SITE COMP
872.11	OPEN WOUND OF AURICLE, COMPLICATED
872.12	OPEN WOUND AUDITRY CANAL COMP
872.61	OPEN WND EAR DRUM W/O MENTION COMP
872.62	OPEN WND OSSICLES W/O MENTION COMP
872.63	OPEN WND EUSTACHIAN TUBE W/O COMP

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

872.64	OPEN WOUND COCHLEA W/O MENTION COMP
872.69	OPEN WND OTH&MX SITE W/O COMP
872.71	OPEN WOUND OF EAR DRUM, COMPLICATED
872.72	OPEN WOUND OF OSSICLES, COMPLICATED
872.73	OPEN WOUND EUSTACHIAN TUBE COMP
872.74	OPEN WOUND OF COCHLEA, COMPLICATED
872.79	OPEN WOUND OTH&MULTIPLE SITES COMP
872.8	OPEN WND EAR PART UNS W/O COMP
872.9	OPEN WOUND EAR PART UNSPEC COMP
873.0	OPEN WOUND SCLP W/O MENTION COMP
873.1	OPEN WOUND OF SCALP, COMPLICATED
873.20	OPEN WND NSE UNS SITE W/O COMP
873.21	OPEN WND NASL SEPTUM W/O COMP
873.22	OPEN WND NASL CAV W/O MENTION COMP
873.23	OPEN WND NASL SINUS W/O COMP
873.29	OPEN WND NSE MX SITE W/O COMP
873.30	OPEN WOUND NOSE UNSPEC SITE COMP
873.31	OPEN WOUND NASAL SEPTUM COMPLICATED
873.32	OPEN WOUND NASAL CAVITY COMPLICATED
873.33	OPEN WOUND NASAL SINUS COMPLICATED
873.39	OPEN WOUND NOSE MULTIPLE SITES COMP
873.40	OPEN WND FCE UNS SITE W/O COMP
873.41	OPEN WOUND CHEEK W/O MENTION COMP
873.42	OPEN WND FOREHEAD W/O MENTION COMP
873.43	OPEN WOUND LIP WITHOUT MENTION COMP
873.44	OPEN WOUND JAW WITHOUT MENTION COMP
873.49	OPEN WND FCE OTH&MX SITE W/O COMP
873.50	OPEN WOUND FACE UNSPEC SITE COMP
873.51	OPEN WOUND OF CHEEK, COMPLICATED
873.52	OPEN WOUND OF FOREHEAD, COMPLICATED
873.53	OPEN WOUND OF LIP, COMPLICATED
873.54	OPEN WOUND OF JAW, COMPLICATED
873.59	OPEN WOUND FACE OTH&MX SITES COMP
873.60	OPEN WND MOUTH UNS SITE W/O COMP
873.61	OPEN WND BUCCAL MUCOS W/O COMP
873.62	OPEN WOUND GUM WITHOUT MENTION COMP
873.63	TOOTH BROKEN FX TRAUMA W/O COMP
873.64	OPEN WND TONGUE&FLR MOUTH W/O COMP
873.65	OPEN WOUND PALATE W/O MENTION COMP
873.69	OPEN WND MOUTH OTH&MX SITE W/O COMP

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

873.70	OPEN WOUND MOUTH UNSPEC SITE COMP
873.71	OPEN WOUND BUCCAL MUCOSA COMP
873.72	OPEN WOUND OF GUM , COMPLICATED
873.73	TOOTH BROKEN FX TRAUMA COMPLICATED
873.74	OPEN WOUND TONGUE&FLOOR MOUTH COMP
873.75	OPEN WOUND OF PALATE, COMPLICATED
873.79	OPEN WOUND MOUTH OTH&MX SITES COMP
873.8	OTH&UNS OPN WND HEAD W/O COMP
873.9	OTH&UNSPEC OPEN WOUND HEAD COMP
874.00	OPEN WND LARYNX W/TRACH W/O COMP
874.01	OPEN WOUND LARYNX W/O MENTION COMP
874.02	OPEN WOUND TRACH W/O MENTION COMP
874.10	OPEN WOUND LARYNX W/TRACHEA COMP
874.11	OPEN WOUND OF LARYNX, COMPLICATED
874.12	OPEN WOUND OF TRACHEA, COMPLICATED
874.2	OPEN WND THYROID GLAND W/O COMP
874.3	OPEN WOUND THYROID GLAND COMP
874.4	OPEN WOUND PHARYNX W/O MENTION COMP
874.5	OPEN WOUND OF PHARYNX, COMPLICATED
874.8	OPEN WND OTH&UNS PART NCK W/O COMP
874.9	OPEN WOUND OTH&UNSPEC PART NCK COMP
875.0	OPEN WOUND CHST W/O MENTION COMP
875.1	OPEN WOUND OF CHEST , COMPLICATED
876.0	OPEN WOUND BACK W/O MENTION COMP
876.1	OPEN WOUND OF BACK, COMPLICATED
877.0	OPEN WOUND BUTTOCK W/O MENTION COMP
877.1	OPEN WOUND OF BUTTOCK, COMPLICATED
878.0	OPEN WOUND PENIS W/O MENTION COMP
878.1	OPEN WOUND OF PENIS, COMPLICATED
878.2	OPEN WND SCROTUM&TESTES W/O COMP
878.3	OPEN WOUND SCROTUM&TESTES COMP
878.4	OPEN WOUND VULVA W/O MENTION COMP
878.5	OPEN WOUND OF VULVA, COMPLICATED
878.6	OPEN WOUND VAGINA W/O MENTION COMP
878.7	OPEN WOUND OF VAGINA, COMPLICATED
878.8	OPEN WND UNS PART GNT ORGN W/O COMP
878.9	OPEN WND OTH&UNS PART GNT ORGN COMP
879.0	OPEN WOUND BREAST W/O MENTION COMP
879.1	OPEN WOUND OF BREAST, COMPLICATED
879.2	OPEN WND ABD WALL ANT W/O COMP

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

879.3	OPEN WOUND ABD WALL ANT COMPLICATED
879.4	OPEN WND ABD WALL LAT W/O COMP
879.5	OPEN WOUND ABD WALL LATERAL COMP
879.6	OPEN WND OTH&UNS PART TRNK W/O COMP
879.7	OPEN WOUND OTH&UNS PART TRNK COMP
879.8	OPEN WND UNS SITE W/O MENTION COMP
879.9	OPEN WOUND UNSPEC SITE COMPLICATED
880.00	OPEN WND SHLDR RGN W/O MENTION COMP
880.01	OPEN WND SCAP RGN W/O MENTION COMP
880.02	OPEN WOUND AX RGN W/O MENTION COMP
880.03	OPEN WOUND UP ARM W/O MENTION COMP
880.09	OPEN WND MX SITE SHLDR&UPPER ARM
880.10	OPEN WOUND SHOULDER REGION COMP
880.11	OPEN WOUND SCAPULAR REGION COMP
880.12	OPEN WOUND AX REGION COMPLICATED
880.13	OPEN WOUND OF UPPER ARM COMPLICATED
880.19	OPEN WND MX SITE SHLDR&UP ARM COMP
880.20	OPEN WOUND SHLDR RGN W/TENDON INVLV
880.21	OPEN WOUND SCAP RGN W/TENDON INVLV
880.22	OPEN WOUND AX REGION W/TENDON INVLV
880.23	OPEN WOUND UPPER ARM W/TENDON INVLV
880.29	OPEN WND MX SITE SHLDR W/TEND INVLV
881.00	OPEN WOUND FOREARM W/O MENTION COMP
881.01	OPEN WOUND ELB WITHOUT MENTION COMP
881.02	OPEN WOUND WRST W/O MENTION COMP
881.10	OPEN WOUND OF FOREARM, COMPLICATED
881.11	OPEN WOUND OF ELBOW, COMPLICATED
881.12	OPEN WOUND OF WRIST, COMPLICATED
881.20	OPEN WOUND FOREARM W/TENDON INVLV
881.21	OPEN WOUND ELB W/TENDON INVOLVEMENT
881.22	OPEN WOUND WRIST W/TENDON INVLV
882.0	OPEN WND HND NO FNGR ALONE W/O COMP
882.1	OPEN WOUND HAND NO FNGR ALONE COMP
882.2	OPEN WOUND HAND W/TENDON INVOLV
883.0	OPEN WOUND FINGER W/O MENTION COMP
883.1	OPEN WOUND OF FINGER, COMPLICATED
883.2	OPEN WOUND FINGER W/TENDON INVLV
884.0	MX&UNS OPN WND UP LIMB W/O COMP
884.1	MX&UNSPEC OPN WOUND UPPER LIMB COMP
884.2	MX&UNS OPN WND UP LIMB W/TEND INVLV



**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

885.0	TRAUMAT AMP THUMB W/O MENTION COMP
885.1	TRAUMATIC AMP THUMB COMPLICATED
886.0	TRAUMAT AMP OTH FNGR W/O COMP
886.1	TRAUMATIC AMP OTH FINGER COMP
887.0	AMP ARM&HND UNI BELOW ELB W/O COMP
887.1	AMP ARM&HAND UNI BELOW ELB COMPLIC
887.2	AMP ARM&HND UNI @/ABVE ELB W/O COMP
887.3	AMP ARM&HAND UNI @/ABVE ELB COMPLIC
887.4	AMP ARM&HAND UNI LEVEL NOS W/O COMP
887.5	AMP ARM&HAND UNI LEVEL NOS COMPLIC
887.6	TRAUMAT AMP ARM&HND BILAT W/O COMP
887.7	TRAUMATIC AMP ARM&HAND BILAT COMP
890.0	OPEN WOUND HIP&THI W/O MENTION COMP
890.1	OPEN WOUND OF HIP&THIGH COMPLICATED
890.2	OPEN WOUND HIP&THIGH W/TENDON INVLV
891.0	OPEN WND KNEE LEG&ANK W/O COMP
891.1	OPEN WOUND KNEE LEG&ANK COMPLICATED
891.2	OPEN WND KNEE LEG&ANK W/TEND INVLV
892.0	OPEN WND FT NO TOE ALONE W/O COMP
892.1	OPEN WOUND FT EXCEPT TOE ALONE COMP
892.2	OP WOUND FT EXP TOE W/TENDON INVOLV
893.0	OPEN WOUND TOE WITHOUT MENTION COMP
893.1	OPEN WOUND OF TOE, COMPLICATED
893.2	OPEN WOUND TOE W/TENDON INVOLVEMENT
894.0	MX&UNSP OPN WND LW LIMB W/O COMP
894.1	MX&UNSPEC OPEN WOUND LOW LIMB COMP
894.2	MX&UNSP OPN WND LW LIMB W/TEND INVLV
895.0	TRAUMAT AMP TOE W/O MENTION COMP
895.1	TRAUMATIC AMP TOE COMPLICATED
896.0	TRAUMAT AMP FOOT UNI NO MENTN COM
896.1	TRAUMATIC AMP FT UNILATERAL COMP
896.2	TRAUMAT AMP FT BILAT W/O COMP
896.3	TRAUMATIC AMP FT BILATERAL COMP
897.0	AMP LEG UNI BELOW KNEE W/O COMPLIC
897.1	AMP LEG UNI BELOW KNEE W/COMPLIC
897.2	AMP LEG UNI @/ABOVE KNEE W/O COMPLI
897.3	AMP LEG UNI @/ABOVE KNEE W/COMPLIC
897.4	AMP LEG UNI LEVEL NOS W/O COMPLIC
897.5	AMP LEG UNILAT LEVEL NOS W/COMPLIC
897.6	TRAUMAT AMP LEG BILAT W/O COMP

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

897.7	TRAUMATIC AMP LEG BILATERAL COMP
900.00	INJURY CAROTID ARTERY UNSPECIFIED
900.01	COMMON CAROTID ARTERY INJURY
900.02	EXTERNAL CAROTID ARTERY INJURY
900.03	INTERNAL CAROTID ARTERY INJURY
900.1	INTERNAL JUGULAR VEIN INJURY
900.81	EXTERNAL JUGULAR VEIN INJURY
900.82	INJURY MX BLD VESSELS HEAD&NECK
900.89	INJR OTH SPEC BLD VES HEAD&NECK OTH
900.9	INJURY UNSPEC BLD VESSEL HEAD&NECK
901.0	THORACIC AORTA INJURY
901.1	INNOMINATE&SUBCLAVIAN ARTERY INJURY
901.2	SUPERIOR VENA CAVA INJURY
901.3	INNOMINATE&SUBCLAVIAN VEIN INJURY
901.40	INJURY UNSPECIFIED PULMONARY VESSEL
901.41	PULMONARY ARTERY INJURY
901.42	PULMONARY VEIN INJURY
901.81	INTERCOSTAL ARTERY OR VEIN INJURY
901.82	INTERNAL MAMMARY ARTERY/VEIN INJURY
901.83	INJURY MULTIPLE BLD VESSELS THORAX
901.89	INJURY SPEC BLD VESSELS THORAX OTH
901.9	INJURY UNSPEC BLOOD VESSEL THORAX
902.0	ABDOMINAL AORTA INJURY
902.10	UNSPEC INFERIOR VENA CAVA INJURY
902.11	HEPATIC VEIN INJURY
902.19	INJURY SPEC BR INF VENA CAVA OTH
902.20	UNSPEC CELIAC&MESENTERIC ART INJURY
902.21	GASTRIC ARTERY INJURY
902.22	HEPATIC ARTERY INJURY
902.23	SPLENIC ARTERY INJURY
902.24	INJURY SPEC BRANCH CELIAC AXIS OTH
902.25	SUPERIOR MESENTERIC ARTERY INJURY
902.26	INJURY PRIM BR SUP MESENTERIC ART
902.27	INFERIOR MESENTERIC ARTERY INJURY
902.29	INJURY CELIAC&MESENTERIC ART OTH
902.31	INJR SUP MESNTRIC VEIN&PRIM SUBDIVS
902.32	INFERIOR MESENTERIC VEIN INJURY
902.33	PORTAL VEIN INJURY
902.34	SPLENIC VEIN INJURY
902.39	INJURY PORTAL&SPLENIC VEINS OTHER

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

902.40	RENAL VESSEL INJURY, UNSPECIFIED
902.41	RENAL ARTERY INJURY
902.42	RENAL VEIN INJURY
902.49	RENAL BLOOD VESSEL INJURY, OTHER
902.50	UNSPECIFIED ILIAC VESSEL INJURY
902.51	HYPOGASTRIC ARTERY INJURY
902.52	HYPOGASTRIC VEIN INJURY
902.53	ILIAC ARTERY INJURY
902.54	ILIAC VEIN INJURY
902.55	UTERINE ARTERY INJURY
902.56	UTERINE VEIN INJURY
902.59	INJURY TO ILIAC BLOOD VESSELS OTHER
902.81	OVARIAN ARTERY INJURY
902.82	OVARIAN VEIN INJURY
902.87	INJURY MX BLD VESSELS ABD&PELVIS
902.89	INJR OTH SPEC BLD VES ABD&PELV OTH
902.9	INJURY BLD VESSEL ABD&PELVIS UNSPEC
903.00	AXILLARY VESSEL INJURY, UNSPECIFIED
903.01	AXILLARY ARTERY INJURY
903.02	AXILLARY VEIN INJURY
903.1	BRACHIAL BLOOD VESSELS INJURY
903.2	RADIAL BLOOD VESSELS INJURY
903.3	ULNAR BLOOD VESSELS INJURY
903.4	PALMAR ARTERY INJURY
903.5	DIGITAL BLOOD VESSELS INJURY
903.8	INJURY SPEC BLD VES UP EXTREM OTH
903.9	INJURY UNS BLD VESSEL UPPER EXTREM
904.0	COMMON FEMORAL ARTERY INJURY
904.1	SUPERFICIAL FEMORAL ARTERY INJURY
904.2	FEMORAL VEIN INJURY
904.3	SAPHENOUS VEIN INJURY
904.40	UNSPECIFIED POPLITEAL VESSEL INJURY
904.41	POPLITEAL ARTERY INJURY
904.42	POPLITEAL VEIN INJURY
904.50	UNSPECIFIED TIBIAL VESSEL INJURY
904.51	ANTERIOR TIBIAL ARTERY INJURY
904.52	ANTERIOR TIBIAL VEIN INJURY
904.53	POSTERIOR TIBIAL ARTERY INJURY
904.54	POSTERIOR TIBIAL VEIN INJURY
904.6	DEEP PLANTAR BLOOD VESSELS INJURY

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

904.7	INJURY SPEC BLD VES LOW EXTREM OTH
904.8	INJURY UNSPEC BLD VESSEL LOW EXTREM
904.9	INJURY BLOOD VESSELS UNSPEC SITE
918.1	SUPERFICIAL INJURY OF CORNEA
918.2	SUPERFICIAL INJURY OF CONJUNCTIVA
918.9	OTH&UNSPEC SUPERFICIAL INJURIES EYE
921.0	BLACK EYE, NOT OTHERWISE SPECIFIED
921.1	CONTUSION EYELIDS&PERIOCLAR AREA
921.2	CONTUSION OF ORBITAL TISSUES
921.3	CONTUSION OF EYEBALL
921.9	UNSPECIFIED CONTUSION OF EYE
925.1	CRUSHING INJURY OF FACE AND SCALP
925.2	CRUSHING INJURY OF NECK
926.0	CRUSHING INJURY EXTERNAL GENITALIA
926.11	CRUSHING INJURY OF BACK
926.12	CRUSHING INJURY OF BUTTOCK
926.19	CRUSH INJR OTH SPEC SITES TRUNK OTH
926.8	CRUSHING INJURY MX SITES TRUNK
926.9	CRUSHING INJURY UNSPEC SITE TRUNK
927.00	CRUSHING INJURY OF SHOULDER REGION
927.01	CRUSHING INJURY OF SCAPULAR REGION
927.02	CRUSHING INJURY OF AXILLARY REGION
927.03	CRUSHING INJURY OF UPPER ARM
927.09	CRUSHING INJURY MX SITES UPPER ARM
927.10	CRUSHING INJURY OF FOREARM
927.11	CRUSHING INJURY OF ELBOW
927.20	CRUSHING INJURY OF HAND
927.21	CRUSHING INJURY OF WRIST
927.3	CRUSHING INJURY OF FINGER
927.8	CRUSHING INJURY MX SITES UPPER LIMB
927.9	CRUSHING INJURY UNS SITE UPPER LIMB
928.00	CRUSHING INJURY OF THIGH
928.01	CRUSHING INJURY OF HIP
928.10	CRUSHING INJURY OF LOWER LEG
928.11	CRUSHING INJURY OF KNEE
928.20	CRUSHING INJURY OF FOOT
928.21	CRUSHING INJURY OF ANKLE
928.3	CRUSHING INJURY OF TOE
928.8	CRUSHING INJURY MX SITES LOWER LIMB
928.9	CRUSHING INJURY UNS SITE LOW LIMB

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

929.0	CRUSHING INJURY MULTIPLE SITES NEC
929.9	CRUSHING INJURY OF UNSPECIFIED SITE
930.0	FOREIGN BODY IN CORNEA
930.1	FOREIGN BODY IN CONJUNCTIVAL SAC
930.2	FOREIGN BODY IN LACRIMAL PUNCTUM
930.8	FB OTH&COMB SITES EXTERNAL EYE
930.9	FB UNSPEC SITE EXTERNAL EYE
931	FOREIGN BODY IN EAR
932	FOREIGN BODY IN NOSE
933.0	FOREIGN BODY IN PHARYNX
933.1	FOREIGN BODY IN LARYNX
934.0	FOREIGN BODY IN TRACHEA
934.1	FOREIGN BODY IN MAIN BRONCHUS
934.8	FB OTH PART TRACH BRONCHUS&LUNG
934.9	FB RESPIRATORY TREE UNSPEC
935.0	FOREIGN BODY IN MOUTH
935.1	FOREIGN BODY IN ESOPHAGUS
935.2	FOREIGN BODY IN STOMACH
936	FOREIGN BODY IN INTESTINE AND COLON
937	FOREIGN BODY IN ANUS AND RECTUM
938	FB DIGESTIVE SYSTEM UNSPEC
939.0	FOREIGN BODY IN BLADDER AND URETHRA
939.1	FOREIGN BODY IN UTERUS, ANY PART
939.2	FOREIGN BODY IN VULVA AND VAGINA
939.3	FOREIGN BODY IN PENIS
939.9	FB UNSPEC SITE GENITOURINARY TRACT
940.0	CHEM BURN EYELIDS&PERIOCLAR AREA
940.1	OTHER BURNS EYELIDS&PERIOCLAR AREA
940.2	ALKALINE CHEM BRN CORN&CONJUNCT SAC
940.3	ACID CHEM BURN CORNEA&CONJUNCT SAC
940.4	OTHER BURN CORNEA&CONJUNCTIVAL SAC
940.5	BURN W/RSLT RUPTURE&DESTRUC EYEBALL
940.9	UNSPECIFIED BURN OF EYE AND ADNEXA
941.00	BURN UNS DEG UNS SITE FCE&HEAD
941.01	BURN OF UNSPECIFIED DEGREE OF EAR
941.02	BURN OF UNSPECIFIED DEGREE OF EYE
941.03	BURN OF UNSPECIFIED DEGREE OF LIP
941.04	BURN OF UNSPECIFIED DEGREE OF CHIN
941.05	BURN OF UNSPECIFIED DEGREE OF NOSE
941.06	BURN OF UNSPECIFIED DEGREE OF SCALP

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

941.07	BURN UNSPEC DEGREE FOREHEAD&CHEEK
941.08	BURN OF UNSPECIFIED DEGREE OF NECK
941.09	BURN UNS DEG MX SITE FCE HEAD&NCK
941.10	ERYTHMA DUE BURN UNS SITE FCE&HEAD
941.11	ERYTHEMA DUE TO BURN OF EAR
941.12	ERYTHEMA DUE TO BURN OF EYE
941.13	ERYTHEMA DUE TO BURN OF LIP
941.14	ERYTHEMA DUE TO BURN OF CHIN
941.15	ERYTHEMA DUE TO BURN OF NOSE
941.16	ERYTHEMA DUE TO BURN OF SCALP
941.17	ERYTHEMA DUE TO BURN FOREHEAD&CHEEK
941.18	ERYTHEMA DUE TO BURN OF NECK
941.19	ERYTHMA-BURN MX SITE FCE HEAD&NCK
941.20	BLISTR-2ND DEG BRN-FCE&HED UNS SITE
941.21	BLISTERS-2ND DEGREE BURN-EAR
941.22	BLISTERS-2ND DEGREE BURN-EYE
941.23	BLISTERS-2ND DEGREE BURN-LIP
941.24	BLISTERS-2ND DEGREE BURN-CHIN
941.25	BLISTR W/EPID LOSS DUE BURN NOSE
941.26	BLISTR W/EPID LOSS DUE BURN SCALP
941.27	BLISTRS-2ND DEG BURN-FOREHEAD&CHEEK
941.28	BLISTR W/EPID LOSS DUE BURN NECK
941.29	BLISTR-2ND DEG-MX SITE FCE HEAD&NCK
941.30	FULL-THICK SKN LOSS-BURN FCE&HEAD
941.31	FULL-THICK SKIN LOSS DUE BURN EAR
941.32	FULL-THICK SKIN LOSS DUE BURN EYE
941.33	FULL-THICK SKIN LOSS DUE BURN LIP
941.34	FULL-THICK SKIN LOSS DUE BURN CHIN
941.35	FULL-THICK SKIN LOSS DUE BURN NOSE
941.36	FULL-THICK SKIN LOSS DUE BURN SCLP
941.37	FULL-THCK SKN LOSS-BRN-FORHED&CHEEK
941.38	FULL-THICK SKIN LOSS DUE BURN NECK
941.39	FULL-THCK SKN LOSS-BRN-MX-HEAD&NECK
941.40	DEEP 3 DEG-UNS SITE FCE&HED NO LOBP
941.41	DEEP 3RD DEG BURN-EAR W/O LOBP
941.42	DEEP 3RD DEG BURN-EYE W/O LOBP
941.43	DEEP 3RD DEG BURN-LIP W/O LOBP
941.44	DEEP 3RD DEG BURN-CHIN W/O LOBP
941.45	DEEP 3RD DEG BURN-NOSE W/O LOBP
941.46	DEEP 3RD DEG BURN-SCALP W/O LOBP

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

941.47	DEEP 3RD DEG-FORHEAD&CHEEK NO LOBP
941.48	DEEP 3RD DEG BURN-NECK W/O LOBP
941.49	DEEP 3RD DEG-MX-FCE HED&NCK NO LOBP
941.50	DEEP 3RD DEG-FACE&HEAD UNS W/LOBP
941.51	DEEP 3RD DEGREE BURN-EAR W/LOBP
941.52	DEEP 3RD DEGREE BURN-EYE W/LOBP
941.53	DEEP 3RD DEGREE BURN-LIP W/LOBP
941.54	DEEP 3RD DEGREE BURN-CHIN W/LOBP
941.55	DEEP 3RD DEGREE BURN-NOSE W/LOBP
941.56	DEEP 3RD DEGREE BURN-SCALP W/LOBP
941.57	DEEP 3RD DEG BURN-FORHED&CHK W/LOBP
941.58	DEEP 3RD DEGREE BURN-NECK W/LOBP
941.59	DEEP 3RD DEG-MX FCE HEAD&NCK W/LOBP
942.00	BURN UNSPEC DEG TRUNK UNSPEC SITE
942.01	BURN TRUNK UNSPEC DEGREE BREAST
942.02	BURN-TRNK UNS DEG CHST WALL NO BRST
942.03	BURN TRUNK UNSPEC DEGREE ABD WALL
942.04	BURN TRUNK UNSPECIFIED DEGREE BACK
942.05	BURN TRUNK UNSPEC DEGREE GENITALIA
942.09	BURN TRUNK UNSPEC DEG OTH&MX SITES
942.10	ERYTHEMA DUE BURN UNSPEC SITE TRUNK
942.11	ERYTHEMA DUE TO BURN OF BREAST
942.12	ERYTHMA BURN-CHEST WALL NO BREAST
942.13	ERYTHEMA DUE TO BURN ABDOMINAL WALL
942.14	ERYTHEMA DUE TO BURN OF BACK
942.15	ERYTHEMA DUE TO BURN OF GENITALIA
942.19	ERYTHMA DUE BURN OTH&MX SITES TRUNK
942.20	BLISTERS-2ND DEGREE BURN-TRUNK
942.21	BLISTRS-2ND DEGREE BURN-BREAST
942.22	BLISTERS-2ND DEGREE BURN-CHEST WALL
942.23	BLISTR W/EPID LOSS-BURN ABD WALL
942.24	BLISTR W/EPID LOSS DUE BURN BACK
942.25	BLISTR W/EPID LOSS DUE BURN GENIT
942.29	BLSTR-W/EPID LOSS BURN-OTH&MX TRNK
942.30	FULL-THICK SKN LOSS DUE BURN TRNK
942.31	FULL-THICK SKIN LOSS DUE BURN BRST
942.32	FULL-THCK SKN LOSS-BRN-CHEST WALL
942.33	FULL-THICK SKN LOSS-BURN ABD WALL
942.34	FULL-THICK SKIN LOSS DUE BURN BACK
942.35	FULL-THICK SKIN LOSS DUE BURN GENIT

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

942.39	FULL-THICK SKIN LOSS-BURN-TRUNK
942.40	DEEP 3RD BURN-TRNK UNS SITE NO LOBP
942.41	DEEP 3RD DEG BURN-BREAST W/O LOBP
942.42	DEEP 3RD DEG BRN-CHEST WALL NO LOBP
942.43	DEEP 3RD DEG BURN-ABD WALL NO LOBP
942.44	DEEP 3RD DEG BURN-BACK W/O LOBP
942.45	DEEP 3RD DEG BURN-GENITALIA NO LOBP
942.49	DEEP 3RD DEG-OTH&MX TRUNK-NO LOBP
942.50	DEEP 3RD BURN-TRNK UNS SITE NO LOBP
942.51	DEEP 3RD DEGREE BURN-BREAST W/LOBP
942.52	DP 3RD DEG-CHST WALL NO BRST W/LOBP
942.53	DEEP 3RD DEG BURN-ABD WALL W/LOBP
942.54	DEEP 3RD DEGREE BURN-BACK W/LOBP
942.55	DEEP 3RD DEG BURN-GENITALIA W/LOBP
942.59	DP 3RD DEG-OTH&MX SITES TRNK-W/LOBP
943.00	BURN UNS DEG UNS SITE UPPER LIMB
943.01	BURN UNSPECIFIED DEGREE FOREARM
943.02	BURN OF UNSPECIFIED DEGREE OF ELBOW
943.03	BURN UNSPECIFIED DEGREE UPPER ARM
943.04	BURN UNSPECIFIED DEGREE AXILLA
943.05	BURN UNSPECIFIED DEGREE SHOULDER
943.06	BURN UNSPEC DEGREE SCAPULAR REGION
943.09	BURN UNS DEG MX-UP LIMB NO WRST&HND
943.20	BLISTR W/EPID LOSS DUE BURN UP LIMB
943.22	BLISTR W/EPID LOSS DUE BURN ELB
943.23	BLISTR W/EPID LOSS DUE BURN UP ARM
943.24	BLISTR W/EPID LOSS DUE BURN AXILLA
943.25	BLISTR W/EPID LOSS DUE BURN SHLDR
943.26	BLISTR W/EPID LOSS-BURN SCAP RGN
943.29	BLISTRS-2ND DEG BRN-MX SITE UP LIMB
943.30	FULL-THICK SKN LOSS-BURN UP LIMB
943.31	FULL-THICK SKN LOSS DUE BURN FORARM
943.32	FULL-THICK SKIN LOSS DUE BURN ELB
943.33	FULL-THICK SKN LOSS DUE BURN UP ARM
943.34	FULL-THICK SKIN LOSS DUE BURN AX
943.35	FULL-THICK SKIN LOSS DUE BURN SHLDR
943.36	FULL-THICK SKN LOSS-BURN SCAP RGN
943.39	FULL-THCK SKN LOSS-BURN-UP-LIMB-MX
943.40	DEEP 3RD DEG-UNS UP LIMB NO LOBP
943.41	DEEP 3RD DEG BURN-FOREARM W/O LOBP



**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

943.42	DEEP 3RD DEG BURN-ELBOW W/O LOBP
943.43	DEEP 3RD DEG BURN-UPPR ARM W/O LOBP
943.44	DEEP 3RD DEG BURN-AXILLA W/O LOBP
943.45	DEEP 3RD DEG BURN-SHOULDER W/O LOBP
943.46	DEEP 3RD DEG BURN-SCAPULA W/O LOBP
943.49	DEEP 3RD DEG BRN-MX-UP LIMB NO LOBP
943.50	DEEP 3RD DEG BRN-UNS UP LIMB W/LOBP
943.51	DEEP 3RD DEG BURN-FOREARM W/LOBP
943.52	DEEP 3RD DEGREE BURN-ELBOW W/LOBP
943.53	DEEP 3RD DEG BURN-UPPER ARM W/LOBP
943.54	DEEP 3RD DEGREE BURN-AXILLA W/LOBP
943.55	DEEP 3RD DEG BURN-SHOULDER W/LOBP
943.56	DEEP 3RD DEGREE BURN-SCAPULA W/LOBP
943.59	DEEP 3RD DEG BURN-MX-UP LIMB W/LOBP
944.00	BURN UNSPEC DEGREE UNSPEC SITE HAND
944.01	BURN-UNS DEGREE-1 FINGER NOT THUMB
944.02	BURN OF UNSPECIFIED DEGREE OF THUMB
944.03	BURN-UNS DEG-2/MORE FINGRS NOT THMB
944.04	BURN-UNS DEG-2/MORE FINGERS W/THUMB
944.05	BURN UNSPECIFIED DEGREE PALM HAND
944.06	BURN UNSPECIFIED DEGREE BACK HAND
944.07	BURN OF UNSPECIFIED DEGREE OF WRIST
944.08	BURN UNSPEC DEG MX SITES WRIST&HAND
944.10	ERYTHEMA DUE BURN UNSPEC SITE HAND
944.11	ERYTHMA-BURN 1 DIGIT OTH THAN THUMB
944.12	ERYTHEMA DUE TO BURN OF THUMB
944.13	ERYTHMA-BURN 2/MORE DIGTS NOT THUMB
944.14	ERYTHMA-BURN 2/MORE DIGITS W/THUMB
944.15	ERYTHEMA DUE TO BURN PALM HAND
944.16	ERYTHEMA DUE TO BURN BACK HAND
944.17	ERYTHEMA DUE TO BURN OF WRIST
944.18	ERYTHMA DUE BURN MX SITES WRST&HAND
944.20	BLISTR W/EPID LOSS DUE BURN HND
944.21	BLISTRS-2ND DEG BRN 1 DIGIT NO THMB
944.22	BLISTR W/EPID LOSS-BURN OF THUMB
944.23	BLISTRS-2ND DEG BRN-MX DIGT-NO THMB
944.24	BLISTRS-2ND DEG BRN 2 DIGIT NO THMB
944.25	BLISTERS-2ND DEG BURN-PALM OF HAND
944.26	BLISTERS-2ND DEGREE BURN-BACK HAND
944.27	BLISTERS-2ND DEGREE BURN-WRIST

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

944.28	BLISTERS-2ND DEG-MX SITE-WRIST&HAND
944.30	FULL-THICK SKN LOSS DUE BURN HND
944.31	FULL-THCK SKN LOSS-BRN-1 FINGR ONLY
944.32	FULL-THICK SKIN LOSS DUE BURN THUMB
944.33	FULL-THCK SKN LOSS-BRN-2/>FNGR ONLY
944.34	FULL-THCK SKN LOSS-BRN-2/> DIG-THMB
944.35	FULL-THICK SKN LOSS-BURN PALM HND
944.36	FULL-THICK SKN LOSS-BURN BACK HND
944.37	FULL-THICK SKIN LOSS DUE BURN WRIST
944.38	FULL-THCK SKN LOSS-BRN-MX-WRIST&HND
944.40	DEEP 3RD DEG-UNS SITE-HAND NO LOBP
944.41	DP 3RD DEG-1 DIGT NO THMB W/O LOBP
944.42	DEEP 3RD DEG BURN-THUMB W/O LOBP
944.43	DEEP 3RD DEG-FNGRS NO THMB W/O LOBP
944.44	DEEP 3RD DEG-FINGRS W/THMB W/O LOBP
944.45	DEEP 3RD DEG BRN-PALM HAND W/O LOBP
944.46	DEEP 3RD BURN-BACK OF HAND W/O LOBP
944.47	DEEP 3RD DEG BURN-WRIST W/O LOBP
944.48	DEEP 3RD DEG-MX-WRIST&HAND W/O LOBP
944.50	DEEP 3RD DEG-UNS SITE-HAND W/LOBP
944.51	DEEP 3RD DEG-1 DIGT NO THMB W/LOBP
944.52	DEEP 3RD DEGREE BURN-THUMB W/LOBP
944.53	DP 3RD DEG->/=2 DGT NO THMB W/LOBP
944.54	DEEP 3RD DEG->/=2 DGT W/THMB W/LOBP
944.55	DEEP 3RD DEG BURN-PALM HAND W/LOBP
944.56	DEEP 3RD DEG BURN-BACK HAND W/LOBP
944.57	DEEP 3RD DEGREE BURN-WRIST W/LOBP
944.58	DEEP 3RD DEG-MX-WRIST&HAND W/LOBP
945.00	BURN UNS DEG UNS SITE LOW LIMB
945.01	BURN OF UNSPECIFIED DEGREE OF TOE
945.02	BURN OF UNSPECIFIED DEGREE OF FOOT
945.03	BURN OF UNSPECIFIED DEGREE OF ANKLE
945.04	BURN UNSPECIFIED DEGREE LOWER LEG
945.05	BURN OF UNSPECIFIED DEGREE OF KNEE
945.06	BURN OF UNSPECIFIED DEGREE OF THIGH
945.09	BURN UNSPEC DEG MX SITES LOWER LIMB
945.10	ERYTHMA DUE BURN UNS SITE LOW LIMB
945.11	ERYTHEMA DUE TO BURN OF TOE
945.12	ERYTHEMA DUE TO BURN OF FOOT
945.13	ERYTHEMA DUE TO BURN OF ANKLE

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

945.14	ERYTHEMA DUE TO BURN OF LOWER LEG
945.15	ERYTHEMA DUE TO BURN OF KNEE
945.16	ERYTHEMA DUE TO BURN OF THIGH
945.19	ERYTHMA DUE BURN MX SITES LOW LIMB
945.20	BLISTR W/EPID LOSS DUE BURN LW LIMB
945.21	BLISTR W/EPID LOSS DUE BURN TOE
945.22	BLISTR W/EPID LOSS DUE BURN FOOT
945.23	BLISTR W/EPID LOSS DUE BURN ANK
945.24	BLISTR W/EPID LOSS DUE BURN LOW LEG
945.25	BLISTR W/EPID LOSS DUE BURN KNEE
945.26	BLISTR W/EPID LOSS DUE BURN THIGH
945.29	BLISTRS-2ND DEG-MX SITE LW LIMB
945.30	FULL-THICK SKN LOSS-BURN LW LIMB
945.31	FULL-THICK SKIN LOSS DUE BURN TOE
945.32	FULL-THICK SKIN LOSS DUE BURN FOOT
945.33	FULL-THICK SKIN LOSS DUE BURN ANK
945.34	FULL-THICK SKN LOSS DUE BURN LW LEG
945.35	FULL-THICK SKIN LOSS DUE BURN KNEE
945.36	FULL-THICK SKIN LOSS DUE BURN THIGH
945.39	FULL-THICK SKN LOSS-BURN-MX-LW LIMB
945.40	DEEP 3RD DEG-UNS SITE-LEG W/O LOBP
945.41	DEEP 3RD DEGREE BURN-TOE W/O LOBP
945.42	DEEP 3RD DEG BURN-FOOT W/O LOBP
945.43	DEEP 3RD DEG BURN-ANKLE W/O LOBP
945.44	DEEP 3RD DEG BURN-LW LEG W/O LOBP
945.45	DEEP 3RD DEG BURN-KNEE W/O LOBP
945.46	DEEP 3RD DEG BURN-THIGH W/O LOBP
945.49	DEEP 3RD DEG-MX SITES-LEG W/O LOBP
945.50	DEEP 3RD DEG-UNS SITE-LEG W/LOBP
945.51	DEEP 3RD DEGREE BURN-TOES W/LOBP
945.52	DEEP 3RD DEGREE BURN-FOOT W/LOBP
945.53	DEEP 3RD DEGREE BURN-ANKLE W/LOBP
945.54	DEEP 3RD DEG BURN-LOWER LEG W/LOBP
945.55	DEEP 3RD DEGREE BURN-KNEE W/LOBP
945.56	DEEP 3RD DEGREE BURN-THIGH W/LOBP
945.59	DEEP 3RD DEG BRN-MX SITE-LEG W/LOBP
946.0	BURNS MX SPEC SITES UNSPEC DEG
946.2	BLISTR W/EPID LOSS-BURN MX SITE
946.3	FULL-THICK SKN LOSS-BURN MX SITE
946.4	DEEP 3RD DEG-MX SPEC SITE W/O LOBP

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

946.5	DEEP 3RD DEG-MX SPEC SITES W/LOBP
947.0	BURN OF MOUTH AND PHARYNX
947.1	BURN OF LARYNX, TRACHEA, AND LUNG
947.2	BURN OF ESOPHAGUS
947.3	BURN OF GASTROINTESTINAL TRACT
947.4	BURN OF VAGINA AND UTERUS
947.8	BURN OTH SPEC SITES INTERNAL ORGANS
947.9	BURN INTERNAL ORGANS UNSPEC SITE
948.00	BURN<10% BDY SURF-3RD DEG<10%/UNS
948.10	BRN 10-19% BDY SRF-3RD DEG<10%/UNS
948.11	BURN 10-19% BDY SURF-3RD DEG 10-19%
948.20	BRN 20-29% BDY SRF-3RD DEG<10%UNS
948.21	BURN 20-29% BDY SURF-3RD DEG 10-19%
948.22	BURN 20-29% BDY SURF-3RD DEG 20-29%
948.30	BRN 30-39% BDY SRF-3RD DEG<10%/UNS
948.31	BURN 30-39% BDY SURF-3RD DEG 10-19%
948.32	BURN 30-39% BDY SURF-3RD DEG 20-29%
948.33	BURN 30-39% BDY SURF-3RD DEG 30-39%
948.40	BRN 40-49% BDY SRF-3RD DEG<10%/UNS
948.41	BURN 40-49% BDY SURF-3RD DEG 10-19%
948.42	BURN 40-49% BDY SURF-3RD DEG 20-29%
948.43	BURN 40-49% BDY SURF-3RD DEG 30-39%
948.44	BURN 40-49% BDY SURF-3RD DEG 40-49%
948.50	BRN 50-59% BDY SRF-3RD DEG<10%/UNS
948.51	BURN 50-59% BDY SURF-3RD DEG 10-19%
948.52	BURN 50-59% BDY SURF-3RD DEG 20-29%
948.53	BURN 50-59% BDY SURF-3RD DEG 30-39%
948.54	BURN 50-59% BDY SURF-3RD DEG 40-49%
948.55	BURN 50-59% BDY SURF-3RD DEG 50-59%
948.60	BRN 60-69% BDY SRF-3RD DEG<10%/UNS
948.61	BURN 60-69% BDY SURF-3RD DEG 10-19%
948.62	BURN 60-69% BDY SURF-3RD DEG 20-29%
948.63	BURN 60-69% BDY SURF-3RD DEG 30-39%
948.64	BURN 60-69% BDY SURF-3RD DEG 40-49%
948.65	BURN 60-69% BDY SURF-3RD DEG 50-59%
948.66	BURN 60-69% BDY SURF-3RD DEG 60-60%
948.70	BRN 70-79% BDY SRF-3RD DEG<10%/UNS
948.71	BURN 70-79% BDY SURF-3RD DEG 10-19%
948.72	BURN 70-79% BDY SURF-3RD DEG 20-29%
948.73	BURN 70-79% BDY SURF-3RD DEG 30-39%

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

948.74	BURN 70-79% BDY SURF-3RD DEG 40-49%
948.75	BURN 70-79% BDY SURF-3RD DEG 50-59%
948.76	BURN 70-79% BDY SURF-3RD DEG 60-69%
948.77	BURN 70-79% BDY SURF-3RD DEG 70-70%
948.80	BRN 80-89% BDY SRF-3RD DEG<10%/UNS
948.81	BURN 80-89% BDY SURF-3RD DEG 10-19%
948.82	BURN 80-89% BDY SURF-3RD DEG 20-29%
948.83	BURN 80-89% BDY SURF-3RD DEG 30-39%
948.84	BURN 80-89% BDY SURF-3RD DEG 40-49%
948.85	BURN 80-89% BDY SURF-3RD DEG 50-59%
948.86	BURN 80-89% BDY SURF-3RD DEG 60-69%
948.87	BURN 80-89% BDY SURF-3RD DEG 70-79%
948.88	BURN 80-89% BDY SURF-3RD DEG 80-89%
948.90	BRN>90% BDY SRF-3RD DEG<10%/UNS AMT
948.91	BRN 90%/MOR BDY SURF-3RD DEG 10-19%
948.92	BRN 90%/MOR BDY SURF-3RD DEG 20-29%
948.93	BRN 90%/MOR BDY SURF-3RD DEG 30-39%
948.94	BRN 90%/MOR BDY SURF-3RD DEG 40-49%
948.95	BRN 90%/MOR BDY SURF-3RD DEG 50-59%
948.96	BRN 90%/MOR BDY SURF-3RD DEG 60-69%
948.97	BRN 90%/MOR BDY SURF-3RD DEG 70-79%
948.98	BRN 90%/MOR BDY SURF-3RD DEG 80-89%
948.99	BRN 90%/MOR BDY SRF-3RD DEG 90%/MOR
949.0	BURN UNSPEC SITE UNSPEC DEGREE
949.3	FULL-THICK SKN LOSS DUE BURN
949.4	DEEP 3RD DEG BURN-UNS SITE W/O LOBP
949.5	DEEP 3RD DEG BURN-UNS SITE W/LOBP
950.0	OPTIC NERVE INJURY
950.1	INJURY TO OPTIC CHIASM
950.2	INJURY TO OPTIC PATHWAYS
950.3	INJURY TO VISUAL CORTEX
950.9	INJURY UNSPEC OPTIC NERVE&PATHWAYS
951.0	INJURY TO OCULOMOTOR NERVE
951.1	INJURY TO TROCHLEAR NERVE
951.2	INJURY TO TRIGEMINAL NERVE
951.3	INJURY TO ABDUCENS NERVE
951.4	INJURY TO FACIAL NERVE
951.5	INJURY TO ACOUSTIC NERVE
951.6	INJURY TO ACCESSORY NERVE
951.7	INJURY TO HYPOGLOSSAL NERVE

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

951.8	INJURY OTHER SPEC CRANIAL NERVES
951.9	INJURY TO UNSPECIFIED CRANIAL NERVE
952.00	C1-C4 LEVEL SP CORD INJURY UNSPEC
952.01	C1-C4 LEVEL W/CMPL LES SPINAL CORD
952.02	C1-C4 LEVEL W/ANT CORD SYNDROME
952.03	C1-C4 LEVEL W/CENTRAL CORD SYNDROME
952.04	C1-C4 LEVEL W/OTH SPEC SP CRD INJURY
952.05	C5-C7 LEVEL SP CORD INJURY UNSPEC
952.06	C5-C7 LEVEL W/CMPL LES SPINAL CORD
952.07	C5-C7 LEVEL W/ANT CORD SYNDROME
952.08	C5-C7 LEVEL W/CENTRAL CORD SYNDROME
952.09	C5-C7 LEVEL W/OTH SPEC SP CRD INJURY
952.10	T1-T6 LEVEL SP CORD INJURY UNSPEC
952.11	T1-T6 LEVEL W/CMPL LES SPINAL CORD
952.12	T1-T6 LEVEL W/ANT CORD SYNDROME
952.13	T1-T6 LEVEL W/CENTRAL CORD SYNDROME
952.14	T1-T6 LEVEL W/OTH SPEC SP CRD INJURY
952.15	T7-T12 LEVEL SP CORD INJURY UNSPEC
952.16	T7-T12 LEVEL W/CMPL LES SPINAL CORD
952.17	T7-T12 LEVEL W/ANT CORD SYNDROME
952.18	T7-T12 LEVEL W/CNTRL CORD SYNDROME
952.19	T7-T12 LEVEL W/OTH SPEC SP CRD INJR
952.2	LUMB SP CRD INJURY W/O SP BN INJURY
952.3	SAC SP CORD INJURY W/O SP BN INJURY
952.4	CAUDA EQUINA SCI W/O SP BN INJURY
952.8	MX SITE SP CRD INJR W/O SP BN INJR
952.9	UNS SITE SP CRD INJR W/O SP BN INJR
953.0	INJURY TO CERVICAL NERVE ROOT
953.1	INJURY TO DORSAL NERVE ROOT
953.2	INJURY TO LUMBAR NERVE ROOT
953.3	INJURY TO SACRAL NERVE ROOT
953.4	INJURY TO BRACHIAL PLEXUS
953.5	INJURY TO LUMBOSACRAL PLEXUS
953.8	INJURY MX SITE NERV ROOTS&SP PLEXUS
953.9	INJR UNS SITE NERV ROOTS&SP PLEXUS
954.0	INJR CERV SYMPHET NRV NO SHLDR&PLV
954.1	INJR OTH SYMPATHET NRV NO SHLDR&PLV
954.8	INJR OTH SPEC NRV TRNK NO SHLDR&PLV
954.9	INJR UNS NRV TRNK NO SHLDR&PLV GIRD
955.0	INJURY TO AXILLARY NERVE

955.1	INJURY TO MEDIAN NERVE
955.2	INJURY TO ULNAR NERVE
955.3	INJURY TO RADIAL NERVE
955.4	INJURY TO MUSCULOCUTANEOUS NERVE
955.5	INJURY CUT SENSORY NERVE UPPER LIMB
955.6	INJURY TO DIGITAL NERVE, UPPER LIMB
955.7	INJR OTH NRV SHLDR GIRDL&UP LIMB
955.8	INJURY MX NERV SHLDR GIRDL&UP LIMB
955.9	INJURY UNS NERV SHLDR GIRDL&UP LIMB
956.0	INJURY TO SCIATIC NERVE
956.1	INJURY TO FEMORAL NERVE
956.2	INJURY TO POSTERIOR TIBIAL NERVE
956.3	INJURY TO PERONEAL NERVE
956.4	INJURY CUT SENSORY NERVE LOWER LIMB
956.5	INJR OTH NRV PELV GIRDL&LW LIMB
956.8	INJURY MX NERV PELV GIRDL&LOW LIMB
956.9	INJURY UNS NERV PELV GIRDL&LOW LIMB
957.0	INJURY SUPERFICIAL NERVES HEAD&NECK
957.1	INJURY TO OTHER SPECIFIED NERVE
957.8	INJURY MX NERVES SEVERAL PARTS
957.9	INJURY TO NERVES, UNSPECIFIED SITE
958.0	AIR EMBO AS AN EARLY COMP TRAUMA
958.1	FAT EMBO AS AN EARLY COMP TRAUMA
958.2	SEC&RECUR HEMOR AN ERLY COMP TRAUMA
958.3	POSTTRAUMATIC WOUND INFECTION NEC
958.4	TRAUMATIC SHOCK
958.5	TRAUMATIC ANURIA
958.6	VOLKMANN'S ISCHEMIC CONTRACTURE
958.7	TRAUMATIC SUBCUTANEOUS EMPHYSEMA
958.8	OTHER EARLY COMPLICATIONS OF TRAUMA
958.90	COMPARTMENT SYNDROME UNSPECIFIED
958.91	TRAUMAT CMPRTMT SYND UPPER EXTREM
958.92	TRAUMAT CMPRTMT SYND LOWER EXTREM
958.93	TRAUMATIC COMPARTMENT SYNDROME ABD
958.99	TRAUMAT COMPARTMENT SYND OTH SITES
959.01	HEAD INJURY, UNSPECIFIED
959.13	FRACTURE OF CORPUS CAVERNOSUM PENIS
959.8	INJURY OTH&UNS OTH SPEC SITE W/MX
960.0	POISONING BY PENICILLINS
960.1	POISONING BY ANTIFUNGAL ANTIBIOTICS

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

960.2	POISONING BY CHLORAMPHENICOL GROUP
960.3	POISONING ERYTH&OTH MACROLIDES
960.4	POISONING BY TETRACYCLINE GROUP
960.5	POISONING OF CEPHALOSPORIN GROUP
960.6	POISONING ANTIMYCOBACTERIAL ABXS
960.7	POISONING ANTINEOPLASTIC ABXS
960.8	POISONING OTHER SPEC ANTIBIOTICS
960.9	POISONING BY UNSPECIFIED ANTIBIOTIC
961.0	POISONING BY SULFONAMIDES
961.1	POISONING ARSENICAL ANTI-INFECTIVES
961.2	POISN HEAVY METAL ANTI-INFECTIVES
961.3	POISN QUNOLIN&HYDROXYQUINOLIN DERIV
961.4	PSN ANTIMALRL&RX ACT OTH BLD PRTZOA
961.5	POISONING OTHER ANTIPROTOZOAL DRUGS
961.6	POISONING BY ANTHELMINTICS
961.7	POISONING BY ANTIVIRAL DRUGS
961.8	POISONING OTH ANTIMYCOBACTERL DRUGS
961.9	POISN OTH&UNSPEC ANTI-INFECTIVES
962.0	POISONING ADRENAL CORTICAL STEROIDS
962.1	POISN ANDROGENS&ANABOLIC CONGENERES
962.2	POISN OVARIAN HORMONES&SYNTH SUBSTS
962.3	POISN INSULINS&ANTIDIABETIC AGTS
962.4	POISONING ANT PITUITARY HORMONES
962.5	POISN POSTERIOR PITUITARY HORMONES
962.6	POISN PARATHYROID&PARATHYROID DERIV
962.7	POISN THYROID&THYROID DERIVATIVES
962.8	POISONING BY ANTITHYROID AGENTS
962.9	POISN OTH&UNS HORMONES&SYNTH SUBSTS
963.0	POISONING ANTIALLERG&ANTIEMETIC RX
963.1	PSN ANTINEOPLSTC&IMMUOSUPPRSSIVE RX
963.2	POISONING BY ACIDIFYING AGENTS
963.3	POISONING BY ALKALIZING AGENTS
963.4	POISONING BY ENZYMES NEC
963.5	POISONING BY VITAMINS NEC
963.8	POISONING OTH SPEC SYSTEMIC AGENTS
963.9	POISONING UNSPEC SYSTEMIC AGENT
964.0	POISONING BY IRON AND ITS COMPOUNDS
964.1	POISN LIVR PREP&OTH ANTIANEMIC AGTS
964.2	POISONING BY ANTICOAGULANTS
964.3	POISONING BY VITAMIN K



**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

964.4	POISONING FIBRINOLYSIS-AFFECT DRUGS
964.5	POISN ANTICOAGUL ANTAGN&OTH COAGLNT
964.6	POISONING BY GAMMA GLOBULIN
964.7	POISONING NATURAL BLD&BLD PRODUCTS
964.8	POISN OTH AGT AFFCT BLD CONSTITUNTS
964.9	POISN UNS AGT AFFCT BLD CONSTITUNTS
965.00	POISONING BY OPIUM , UNSPECIFIED
965.01	POISONING BY HEROIN
965.02	POISONING BY METHADONE
965.09	POISN OPIATES&RELATED NARCOTICS OTH
965.1	POISONING BY SALICYLATES
965.4	POISONING AROMATIC ANALGESICS NEC
965.5	POISONING BY PYRAZOLE DERIVATIVES
965.61	POISN PROPIONIC ACID DERIVATIVES
965.69	POISONING BY OTHER ANTIRHEUMATICS
965.7	POISONING OTH NON-NARCOTIC ANALGES
965.8	POISN OTH SPEC ANALGES&ANTIPYRETICS
965.9	POISN UNSPEC ANALGESIC&ANTIPYRETIC
966.0	POISONING OXAZOLIDINE DERIVATIVES
966.1	POISONING BY HYDANTOIN DERIVATIVES
966.2	POISONING BY SUCCINIMIDES
966.3	POISONING OTH&UNSPEC ANTICONVUL
966.4	POISONING ANTI-PARKINSONISM DRUGS
967.0	POISONING BY BARBITURATES
967.1	POISONING BY CHLORAL HYDRATE GROUP
967.2	POISONING BY PARALDEHYDE
967.3	POISONING BY BROMINE COMPOUNDS
967.4	POISONING BY METHAQUALONE COMPOUNDS
967.5	POISONING BY GLUTETHIMIDE GROUP
967.6	POISONING BY MIXED SEDATIVES NEC
967.8	POISONING OTHER SEDATIVES&HYPNOTICS
967.9	POISONING UNSPEC SEDATIVE/HYPNOTIC
968.0	POISON-CNS MUSCLE DEPRESS
968.1	POISONING BY HALOTHANE
968.2	POISONING OTHER GASEOUS ANESTHETICS
968.3	POISONING INTRAVENOUS ANESTHETICS
968.4	POISONING OTH&UNSPEC GENERAL ANES
968.5	POISONING SURFACE&INFILTRATION ANES
968.6	POISN PERIPH NERVE-&PLEXUS-BLK ANES
968.7	POISONING BY SPINAL ANESTHETICS

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

968.9	POISONING OTH&UNSPEC LOCAL ANES
969.00	POISONING BY ANTIDEPRESSANT UNS
969.01	POISON MONOAMINE OXIDASE INHIBITORS
969.02	POISONING BY SSRI AND NRI
969.03	POISONING BY SSRI
969.04	POISON TETRACYCLIC ANTIDEPRESSANTS
969.05	POISONING TRICYCLIC ANTIDEPRESSANTS
969.09	POISONING BY OTHER ANTIDEPRESSANTS
969.1	POISN PHENOTHIAZINE-BASED TRANQ
969.2	POISN BUTYROPHENONE-BASED TRANQ
969.3	PSN-OTH ANTIPSYCHOT-NEUROLEPT-TRANQ
969.4	POISN BENZODIAZEPINE-BASED TRANQ
969.5	POISONING BY OTHER TRANQUILIZERS
969.6	POISONING BY PSYCHODYSLEPTICS
969.70	POISONING BY PSYCHOSTIMULANT UNS
969.71	POISONING BY CAFFEINE
969.72	POISONING BY AMPHETAMINES
969.73	POISONING BY METHYLPHENIDATE
969.79	POISONING BY OTHER PSYCHOSTIMULANTS
969.8	POISN OTH SPEC PSYCHOTROPIC AGTS
969.9	POISONING UNSPEC PSYCHOTROPIC AGENT
970.0	POISONING BY ANALEPTICS
970.1	POISONING BY OPIATE ANTAGONISTS
970.8	POISN OTH SPEC CNTRL NERV SYS STIMS
970.9	POISN UNSPEC CNTRL NERV SYS STIM
971.0	POISONING BY PARASYMPATHOMIMETICS
971.1	PSN PARASYMPATHOLYTICS&SPASMOLYTICS
971.2	POISONING BY SYMPATHOMIMETICS
971.3	POISONING BY SYMPATHOLYTICS
971.9	POISN-UNS RX-AFFCT AUTONOM NRV SYS
972.0	POISONING CARDIAC RHYTHM REGULATORS
972.1	PSN-CRDIOTONC GLYCOSID&RX SIMLR ACT
972.2	PSN ANTILIPEMIC&ANTIARTRIOSCLROT RX
972.3	POISONING GANGLION-BLOCKING AGENTS
972.4	POISONING BY CORONARY VASODILATORS
972.5	POISONING BY OTHER VASODILATORS
972.6	POISONING OTH ANTIHYPERTENSIVE AGTS
972.7	PSN ANTIVARICOS RX W/SCLEROSING AGT
972.8	POISONING BY CAPILLARY-ACTIVE DRUGS
972.9	POISN OTH&UNS AGT PRIM AFFCT CV SYS

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

973.0	PSN ANTACIDS&ANTIGASTR SECRETION RX
973.1	POISONING BY IRRITANT CATHARTICS
973.2	POISONING BY EMOLLIENT CATHARTICS
973.3	POISN OTH CATHRT W/INTST ATONIA RX
973.4	POISONING BY DIGESTANTS
973.5	POISONING BY ANTIDIARRHEAL DRUGS
973.6	POISONING BY EMETICS
973.8	POISN OTH AGT PRIM AFFCT GI SYS
973.9	POISN UNSPEC AGT PRIM AFFCT GI SYS
974.0	POISONING BY MERCURIAL DIURETICS
974.1	POISN PURINE DERIVATIVE DIURETICS
974.2	POISN CARBONIC ACID ANHYDRASE INHIB
974.3	POISONING BY SALURETICS
974.4	POISONING BY OTHER DIURETICS
974.5	PSN ELECLYTIC CALORIC&WATR-BAL AGT
974.6	POISONING OTHER MINERAL SALTS NEC
974.7	POISONING URIC ACID METABOLISM RX
975.0	POISONING BY OXYTOCIC AGENTS
975.1	POISONING SMOOTH MUSCLE RELAXANTS
975.2	POISONING SKELETAL MUSCLE RELAXANTS
975.3	POISONING OTH&UNSPEC RX ACTING MUSC
975.4	POISONING BY ANTITUSSIVES
975.5	POISONING BY EXPECTORANTS
975.6	POISONING BY ANTI-COMMON COLD DRUGS
975.7	POISONING BY ANTI-ASTHMATICS
975.8	POISONING OTH&UNSPEC RESPIRATORY RX
976.0	POISN LOCL ANTI-INFCT&ANTI-INFLM RX
976.1	POISONING BY ANTIPRURITICS
976.2	POISN LOC ASTRINGENTS&LOC DETRGNTS
976.3	POISN EMOLLIENTS DEMULCENTS&PROTNT
976.4	POISONING HAIR/SCALP PREP
976.5	POISN EYE ANTI-INFECTVS&OTH EYE RX
976.6	POISONING ENT PREPARATION
976.7	POISN DENTAL RX TOPICALLY APPLIC
976.8	POISONING SKIN/MEMB OTH AGNT
976.9	POISONING SKIN/MEMB UNS AGNT
977.0	POISONING BY DIETETICS
977.1	POISONING BY LIPOTROPIC DRUGS
977.2	POISN ANTIDOTES&CHELATING AGTS NEC
977.3	POISONING BY ALCOHOL DETERRENTS

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

977.4	POISONING PHARMACEUTICAL EXCIPIENTS
977.8	POISN OTH SPEC RX&MEDICINAL SBSTNC
977.9	POISN UNSPEC RX/MEDICINAL SUBSTANCE
978.0	POISONING BY BCG VACCINE
978.1	POISN TYPHOID&PARATYPHOID VACCINE
978.2	POISONING BY CHOLERA VACCINE
978.3	POISONING BY PLAGUE VACCINE
978.4	POISONING BY TETANUS VACCINE
978.5	POISONING BY DIPHTHERIA VACCINE
978.6	POISONING PERTUSSIS VACCINE
978.8	POISN OTH&UNSPEC BACTERL VACCINES
978.9	POISONING MIX BACTERIAL VACCINES
979.0	POISONING BY SMALLPOX VACCINE
979.1	POISONING BY RABIES VACCINE
979.2	POISONING BY TYPHUS VACCINE
979.3	POISONING BY YELLOW FEVER VACCINE
979.4	POISONING BY MEASLES VACCINE
979.5	POISONING BY POLIOMYELITIS VACCINE
979.6	POISN OTH&UNS VIRAL&RICKETTS VACCS
979.7	POISONING-MIXED VACCINE
979.9	POISN OTH&UNS VACS&BIOLOGIC SBSTNC
980.0	TOXIC EFFECT OF ETHYL ALCOHOL
980.1	TOXIC EFFECT OF METHYL ALCOHOL
980.2	TOXIC EFFECT OF ISOPROPYL ALCOHOL
980.3	TOXIC EFFECT OF FUSEL OIL
980.8	TOXIC EFFECT OTHER SPEC ALCOHOLS
980.9	TOXIC EFFECT OF UNSPECIFIED ALCOHOL
981	TOXIC EFFECT OF PETROLEUM PRODUCTS
982.0	TOXIC EFFECT OF BENZENE&HOMOLOGUES
982.1	TOXIC EFFECT CARBON TETRACHLORIDE
982.2	TOXIC EFFECT OF CARBON DISULFIDE
982.3	TOXIC EFF CLORINAT-HYDRCARBN SOLV
982.4	TOXIC EFFECT OF NITROGLYCOL
982.8	TOX EFF OTH NONPETROL-BASED SOLVNTS
983.0	TOXIC EFFECT OF CORROSIVE AROMATICS
983.1	TOXIC EFFECT OF ACIDS
983.2	TOXIC EFFECT OF CAUSTIC ALKALIS
983.9	TOXIC EFFECT OF CAUSTIC UNSPECIFIED
984.0	TOXIC EFFECT INORGANIC LEAD COMPND
984.1	TOXIC EFFECT ORGANIC LEAD COMPOUNDS

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

984.8	TOXIC EFFECT OTHER LEAD COMPOUNDS
984.9	TOXIC EFFECT UNSPEC LEAD COMPOUND
985.0	TOXIC EFFECT MERCURY&ITS COMPOUNDS
985.1	TOXIC EFFECT ARSENIC&ITS COMPOUNDS
985.2	TOXIC EFFECT MANGANESE&ITS COMPND
985.3	TOXIC EFFECT BERYLLIUM&ITS COMPND
985.4	TOXIC EFFECT ANTIMONY&ITS COMPOUNDS
985.5	TOXIC EFFECT CADMIUM&ITS COMPOUNDS
985.6	TOXIC EFFECT OF CHROMIUM
985.8	TOXIC EFFECT OTHER SPECIFIED METALS
985.9	TOXIC EFFECT OF UNSPECIFIED METAL
986	TOXIC EFFECT OF CARBON MONOXIDE
987.0	TOXIC EFFECT LIQUEFIED PETROL GASES
987.1	TOXIC EFFECT OTHER HYDROCARBON GAS
987.2	TOXIC EFFECT OF NITROGEN OXIDES
987.3	TOXIC EFFECT OF SULFUR DIOXIDE
987.4	TOXIC EFFECT OF FREON
987.5	TOXIC EFFECT OF LACRIMOGENIC GAS
987.6	TOXIC EFFECT OF CHLORINE GAS
987.7	TOXIC EFFECT HYDROCYANIC ACID GAS
987.8	TOX EFF OTH SPEC GASES FUMES/VAPORS
987.9	TOXIC EFFECT UNSPEC GAS FUME/VAPOR
988.0	TOXIC EFFECT OF FISH AND SHELLFISH
988.1	TOXIC EFFECT OF MUSHROOMS
988.2	TOXIC EFFECT BERRIES&OTHER PLANTS
988.8	TOXIC EFF OTH SPEC NOXIOUS SBSTNC
988.9	TOXIC EFF UNSPEC NOXIOUS SUBSTANCE
989.0	TOXIC EFF HYDROCYANIC ACID&CYANIDES
989.1	TOXIC EFFECT OF STRYCHNINE&SALTS
989.2	TOXIC EFFECT CHLORINATED HYDROCARBS
989.3	TOXIC EFF ORGANOPHOSPHATE&CARBAMATE
989.4	TOXIC EFFECT OTHER PESTICIDES NEC
989.5	TOXIC EFFECT OF VENOM
989.6	TOXIC EFFECT OF SOAPS&DETERGENTS
989.7	TOXIC EFF AFLATOXIN&OTH MYCOTOXIN
989.81	TOXIC EFFECT OF ASBESTOS
989.82	TOXIC EFFECT OF LATEX
989.83	TOXIC EFFECT OF SILICONE
989.84	TOXIC EFFECT OF TOBACCO
989.89	TOXIC EFFECT OF OTHER SUBSTANCES

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

989.9	TOXIC EFFECT NONMED UNS SUBSTANCE
990	EFFECTS OF RADIATION, UNSPECIFIED
991.0	FROSTBITE OF FACE
991.1	FROSTBITE OF HAND
991.2	FROSTBITE OF FOOT
991.3	FROSTBITE OTHER&UNSPECIFIED SITES
991.4	EFFECTS OF IMMERSION OF FOOT
991.5	EFFECTS OF CHILBLAINS
991.6	EFFECTS OF HYPOTHERMIA
991.8	OTH SPEC EFF REDUCED TEMPERATURE
991.9	UNSPEC EFFECT REDUCED TEMPERATURE
992.0	HEAT STROKE AND SUNSTROKE
992.1	HEAT SYNCOPE
992.2	HEAT CRAMPS
992.3	HEAT EXHAUSTION, ANHYDROTIC
992.4	HEAT EXHAUSTION DUE SALT DEPLETION
992.5	HEAT EXHAUSTION, UNSPECIFIED
992.6	HEAT FATIGUE, TRANSIENT
992.7	HEAT EDEMA
992.8	OTHER SPECIFIED HEAT EFFECTS
992.9	UNSPECIFIED EFFECTS OF HEAT&LIGHT
993.0	BAROTRAUMA, OTITIC
993.1	BAROTRAUMA, SINUS
993.2	OTHER&UNSPEC EFFECTS HIGH ALTITUDE
993.3	CAISSON DISEASE
993.4	EFF AIR PRESSURE CAUSED EXPLOSION
993.8	OTHER SPEC EFFECTS AIR PRESSURE
993.9	UNSPECIFIED EFFECT OF AIR PRESSURE
994.0	EFFECTS OF LIGHTNING
994.1	DROWNING AND NONFATAL SUBMERSION
994.2	EFFECTS OF HUNGER
994.3	EFFECTS OF THIRST
994.4	EXHAUSTION DUE TO EXPOSURE
994.5	EXHAUSTION DUE EXCESSIVE EXERTION
994.6	MOTION SICKNESS
994.7	ASPHYXIATION AND STRANGULATION
994.8	ELECCUTION&NONFATAL EFF ELEC CURRNT
994.9	OTHER EFFECTS OF EXTERNAL CAUSES
995.0	OTHER ANAPHYLACTIC SHOCK NEC
995.1	ANGIONEUROTIC EDEMA NEC

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

995.20	UNS ADVRS EFF UNS RX MED&BIO SBSTNC
995.21	ARTHUS PHENOMENON
995.22	UNSPEC ADVERSE EFFECT OF ANESTHESIA
995.23	UNSPEC ADVERSE EFFECT OF INSULIN
995.27	OTHER DRUG ALLERGY
995.29	UNS ADVRS EFF OTH RX MED&BIO SBSTNC
995.3	ALLERGY UNSPECIFIED NEC
995.4	SHOCK DUE TO ANESTHESIA NEC
995.50	CHILD ABUSE, UNSPECIFIED
995.51	CHILD EMOTIONAL/PSYCHOLOGICAL ABUSE
995.52	CHILD NEGLECT
995.53	CHILD SEXUAL ABUSE
995.54	CHILD PHYSICAL ABUSE
995.55	SHAKEN INFANT SYNDROME
995.59	OTHER CHILD ABUSE AND NEGLECT
995.60	ANAPHYLACTIC SHOCK DUE UNSPEC FOOD
995.61	ANAPHYLACTIC SHOCK DUE TO PEANUTS
995.62	ANAPHYLACTIC SHOCK DUE CRUSTACEANS
995.63	ANAPHYLACT SHOCK-FRUITS&VEGETABLES
995.64	ANAPHYLACT SHOCK-TREE NUTS&SEEDS
995.65	ANAPHYLACTIC SHOCK DUE TO FISH
995.66	ANAPHYLACT SHOCK DUE FOOD ADDITIVES
995.67	ANAPHYLACT SHOCK DUE MILK PRODUCTS
995.68	ANAPHYLACTIC SHOCK DUE TO EGGS
995.69	ANAPHYLACT SHOCK DUE OTH SPEC FOOD
995.80	ADULT MALTREATMENT UNS NEC
995.81	ADULT PHYSICAL ABUSE NEC
995.82	ADULT EMOTIONL/PSYCHOLGIC ABUSE NEC
995.83	ADULT SEXUAL ABUSE NEC
995.84	ADULT NEGLECT NEC
995.85	OTHER ADULT ABUSE AND NEGLECT NEC
995.86	MALIGNANT HYPERTHERMIA NEC
995.89	CERTAIN ADVERSE EFFECTS NEC OTHER
996.00	MECH COMP UNS CARD DEVICE IMPL&GFT
996.01	MECH COMP DUE CARD PACEMAKER
996.02	MECH COMP DUE HEART VALVE PROSTH
996.03	MECH COMP DUE CORONARY BYPS GRAFT
996.04	MECH COMP DUE AUTO IMPL CARD DEFIB
996.09	MECH COMP CARD DEVICE IMPL&GFT OTH
996.1	MECH COMP OTH VASC DEVICE IMPL&GFT

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

996.2	MECH COMP NERV SYS DEVICE IMPL&GFT
996.30	MECH COMP UNSPEC GU DEVICE IMPL&GFT
996.31	MECH COMP DUE URETHRAL CATHETER
996.32	MECH COMP-INTRAUTERN CNTRACPT DEVC
996.39	MECH COMP GU DEVICE IMPLANT&GFT OTH
996.40	UNS MECH COMPL INT ORTHO IMPLNT&GFT
996.41	MECHANICAL LOOSENING PROSTHETIC JNT
996.42	DISLOCATION OF PROSTHETIC JOINT
996.43	BROKEN PROSTHETIC JOINT IMPLANT
996.44	PERIPROSTHETIC FX AROUND PROSTH JNT
996.45	PERIPROSTHETIC OSTEOLYSIS
996.46	ARTICULAR BEARING WEAR PROSTH JNT
996.47	OTH MECH COMPL PROSTH JOINT IMPLANT
996.49	OTH MECH COMPL OTH INT ORTHO IMP&GF
996.51	MECH COMPLICATION DUE CORNEAL GRAFT
996.52	MECH COMP DUE OTH TISSUE GRAFT NEC
996.53	MECH COMP DUE OCULR LENS PROSTHESIS
996.54	MECH COMP DUE BREAST PROSTHESIS
996.55	MECH COMP-ARTIFICIAL SKIN GRAFT
996.56	MECH COMPS-PERITON DIALYSIS CATH
996.59	MECH COMP-OTH IMPL&INTRL DEVC NEC
996.60	INF&INFLAM REACT-UNS DEVC IMPL&GFT
996.61	INF&INFLAM REACT-CARD DEVC IMPL&GFT
996.62	INF&INFLAM REACT TO VASC DEVICE
996.63	INF&INFLAM REACT TO NERV DEVICE
996.64	INF&INFLAM REACT-INDWLL URIN CATH
996.65	INF&INFLAM REACT TO GU DEVICE
996.66	INF&INFLAM REACT-INTRL JNT PROSTH
996.67	INF&INFLAM REACT INT ORTH DEVICE
996.68	INF&INFLAM REACT PERIT DIAL CATH
996.69	INF&INFLAM REACT INT PROS DEVICE
996.70	OTH COMPS DUE UNS DEVICE IMPL&GFT
996.71	OTH COMPS DUE HEART VALVE PROSTH
996.72	OTH COMPS-OTH CARD DEVC IMPL&GFT
996.73	OTH COMP-RENAL DIALYS DEV IMPL&GFT
996.74	OTH COMPS-OTH VASC DEVC IMPL&GFT
996.75	OTH COMPS DUE NRV SYS DEVC IMPL&GFT
996.76	OTH COMPS DUE GU DEVICE IMPLANT&GFT
996.77	OTH COMPS DUE INTRL JOINT PROSTH
996.78	OTH COMP OTH INT ORTH DEV IMPL&GFT



**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

996.79	OTH COMP OTH PROS DEV IMPL&GFT
996.80	COMPS TPLNT ORGAN UNSPEC SITE
996.81	COMPLICATIONS TRANSPLANTED KIDNEY
996.82	COMPLICATIONS OF TRANSPLANTED LIVER
996.83	COMPLICATIONS OF TRANSPLANTED HEART
996.84	COMPLICATIONS OF TRANSPLANTED LUNG
996.85	COMPS BONE MARROW TRANSPLANT
996.86	COMPLICATIONS TRANSPLANTED PANCREAS
996.89	COMPS OTH TRANSPLANTED ORGAN
996.90	COMPS UNSPEC REATTCH EXTREMITY
996.91	COMPLICATIONS OF REATTACHED FOREARM
996.92	COMPLICATIONS OF REATTACHED HAND
996.93	COMPLICATIONS OF REATTACHED FINGER
996.94	COMPS REATTCH UPPER EXTREM OTH&UNS
996.95	COMPLICATIONS REATTACHED FOOT&TOE
996.96	COMPS REATTCH LOW EXTREM OTH&UNSPEC
996.99	COMPS OTH SPEC REATTCH BODY PART
997.00	UNS NERVOUS SYS COMPLICATION NEC
997.01	CNS COMPLICATION NEC
997.02	IATROGN CERBROVASC INFRCT/HEMRR NEC
997.09	OTH NERVOUS SYS COMPLICATIONS NEC
997.1	CARDIAC COMPLICATIONS NEC
997.2	PERIPHERL VASCULR COMPLICATION NEC
997.4	DIGESTIVE SYSTEM COMPLICATION NEC
997.5	URINARY COMPLICATIONS NEC
997.60	LATE COMPLICATION AMP STUMP UNS NEC
997.61	NEUROMA OF AMPUTATION STUMP NEC
997.62	INFECTION OF AMPUTATION STUMP NEC
997.69	OTH LATE AMP STUMP COMPLICATION NEC
997.71	VASCULAR COMPS MESENTERIC ARTERY
997.72	VASCULAR COMPLICATIONS RENAL ARTERY
997.79	VASCULAR COMPLICATIONS OTH VESSELS
997.91	HYPERTENSION NEC
997.99	OTH COMPS AFFCT OTH BDY SYS NEC
998.0	POSTOPERATIVE SHOCK NEC
998.11	HEMORRHAGE COMPLICATING A PROC NEC
998.12	HEMATOMA COMPLICATING A PROC NEC
998.13	SEROMA COMPLICATING A PROC NEC
998.2	ACC PUNCT/LACRATION DURING PROC NEC
998.33	DISRUPT TRAUMATIC INJURY WOUND REPR

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

998.4	FB ACC LEFT DURING PROC NEC
998.51	INFECTED POSTOPERATIVE SEROMA NEC
998.59	OTHER POSTOPERATIVE INFECTION NEC
998.6	PERSISTENT POSTOPERATIVE FIST NEC
998.7	AC REACT FORGN SUBS LT DUR PROC NEC
998.81	EMPHYSEMA RESULTING FROM PROC NEC
998.82	CATARACT FRAGS EYE FOLLOW SURG NEC
998.83	NON-HEALING SURGICAL WOUND NEC
998.89	OTHER SPECIFIED COMPLICATIONS NEC
998.9	UNSPEC COMPLICATION PROCEDURE NEC
999.0	GEN VACCINIA AS COMP MED CARE NEC
999.1	AIR EMBO AS COMP MEDICAL CARE NEC
999.2	OTH VASCULAR COMPS MEDICAL CARE NEC
999.4	ANAPHYLACTIC SHOCK DUE TO SERUM NEC
999.5	OTHER SERUM REACTION NEC
999.6	ABO INCOMPATIBILITY REACTION NEC
999.7	RH INCOMPATIBILITY REACTION NEC
999.88	OTHER INFUSION REACTION
999.89	OTHER TRANSFUSION REACTION
999.9	OTH&UNSPEC COMPS MEDICAL CARE NEC
E800.2	RW COLL W/ROLL STOCK-PEDESTRIAN
E800.3	RW COLL W/ROLL STOCK-PEDL CYCLST
E800.8	RW COLL W/ROLL STOCK-OTH PERSON
E800.9	RW COLL W/ROLL STOCK-UNS PERSON
E801.2	RW COLL W/OTH OBJ-PEDESTRIAN
E801.3	RW COLL W/OTH OBJ-PEDAL CYCLIST
E801.8	RW COLL W/OTH OBJ-OTH PERSON
E801.9	RW COLL W/OTH OBJ-UNS PERSON
E802.2	RW ACC W/DERAIL-PEDESTRIAN
E802.3	RW ACC W/DERAIL-PED CYCLYIST
E802.8	RW ACC W/DERAIL-OTH PERSON
E802.9	RW ACC W/DERAIL-UNS PERSON
E803.2	RW ACC W/EXPLOSION-PEDESTRIAN
E803.3	RW ACC W/EXPLOSION-PED CYCLIST
E803.8	RW ACC W/EXPLOSION-OTH PERSON
E803.9	RW ACC W/EXPLOSION-UNS PERSON
E804.2	FALL/FROM RW TRAIN INJR PEDSTRN
E804.3	FALL/RW TRAIN INJR PEDAL CYCLIST
E804.8	FALL/RW TRAIN INJR OTH SPEC PERS
E804.9	FALL/FROM RW TRAIN INJR UNSPEC PERS

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E805.2	PEDESTRIAN HIT BY ROLLING STOCK
E805.3	PEDAL CYCLIST HIT BY ROLLING STOCK
E805.8	OTHER SPEC PERSON HIT ROLLING STOCK
E805.9	UNSPEC PERSON HIT ROLLING STOCK
E806.2	OTH SPEC RAILWAY ACC INJR PEDSTRN
E806.3	OTH SPEC RW ACC INJR PEDAL CYCLIST
E806.8	OTH SPEC RW ACC INJR OTH SPEC PERS
E806.9	OTH SPEC RW ACC INJR UNSPEC PERS
E807.2	RW ACC UNSPEC NATR INJR PEDSTRN
E807.3	RW ACC UNS NATR INJR PEDAL CYCLIST
E807.8	RW ACC UNS NATR INJR OTH SPEC PERS
E807.9	RW ACC UNSPEC NATR INJR UNSPEC PERS
E810.0	MOTR VEH COLL W/TRAIN-INJR DRIVER
E810.1	MOTR VEH COLL W/TRAIN- INJR PSGR
E810.2	MOTR VEH COLL W/TRAIN-MOTORCYCL
E810.3	MOTR VEH COLL W/TRAIN-MCYCL PSGR
E810.4	MOTR VEH COLL W/TRAIN-OCC ST CAR
E810.5	MOTR VEH COLL W/TRAIN-ANIM RIDER
E810.6	MOTR VEH COLL W/TRN INJR PEDL CYCLS
E810.7	MOTOR VEH COLL W/TRAIN INJR PEDSTRN
E810.8	MOTR VEH COLL W/TRN INJR OTH PERS
E810.9	MOTR VEH COLL W/TRAIN INJR UNS PERS
E811.0	MOTR VEH REENTRANT COLL-DRIVER
E811.1	MOTR VEH REENTRANT COLL-PASNGR
E811.2	MOTR VEH REENTRANT COLL-MOTCYCL
E811.3	MOTR VEH REENTRANT COLL-MCYC PSGR
E811.4	MOTR VEH REENTRANT COLL-ST CAR
E811.5	MOTR VEH REENTRANT COLL-ANIM RID
E811.6	MOTR VEH REENTRANT COLL-PED CYCL
E811.7	MOTR VEH REENTRANT COLL-PEDEST
E811.8	MOTR VEH REENTRANT COLL-OTH PERS
E811.9	MOTR VEH REENTRANT COLL-UNS PERS
E812.0	OTH MOTR VEH COLL W/MV-DRIVER
E812.1	OTH MOTR VEH COLL W/MV-PASNGR
E812.2	OTH MOTR VEH COLL W/MV-MTRCYCLST
E812.3	OTH MOTR VEH COLL W/MV-MC PSNGR
E812.4	OTH MOTR VEH COLL W/MV-ST CAR
E812.5	OTH MOTR VEH COLL W/MV-ANIM RID
E812.6	OTH MOTR VEH COLL W/MV-PED CYCL
E812.7	OTH MOTR VEH COLL W/MV-PEDEST

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E812.8	OTH MOTR VEH COLL W/MV-OTH PERS
E812.9	OTH MOTR VEH COLL W/MV-UNS PERS
E813.0	MOTR VEH COLL W/OTH VEH-DRIVER
E813.1	MOTR VEH COLL W/OTH VEH-PSNGR
E813.2	MOTR VEH COLL W/OTH VEH-MTRCYCLST
E813.3	MOTR VEH COLL W/OTH VEH-MC PSNGR
E813.4	MOTR VEH COLL W/OTH VEH-STREET CAR
E813.5	MOTR VEH COLL W/OTH VEH-ANIMAL RIDR
E813.6	MOTR VEH COLL W/OTH VEH-PED CYCLST
E813.7	MOTR VEH COLL W/OTH VEH-PEDSTRN
E813.8	MOTR VEH COLL W/OTH VEH-OTH PERS
E813.9	MOTR VEH COLL W/OTH VEH-UNS PERS
E814.0	MOTR VEH COLL W/PEDSTRN-DRIVER
E814.1	MOTR VEH COLL W/PEDSTRN-PASNGR
E814.2	MOTR VEH COLL W/PEDSTRN-MTRCYCLST
E814.3	MOTR VEH COLL W/PEDSTRN-MC PSNGR
E814.4	MOTR VEH COLL W/PEDSTRN-ST CAR
E814.5	MOTR VEH COLL W/PEDSTRN-ANIMAL RIDR
E814.6	MOTR VEH COLL W/PEDSTRN-PED CYCLST
E814.7	MOTR VEH COLL W/PEDSTRN-PEDSTRN
E814.8	MOTR VEH COLL W/PEDSTRN-OTH PERS
E814.9	MOTR VEH COLL W/PEDSTRN-UNS PERS
E815.0	OTH MOTR VEH COLL HIWAY-DRIVER
E815.1	OTH MOTR VEH COLL HIWAY-PSNGR
E815.2	OTH MOTR VEH COLL HIWAY-MTRCYCLST
E815.3	OTH MOTR VEH COLL HIWAY-MC PSNGR
E815.4	OTH MOTR VEH COLL HIWAY-ST CAR
E815.5	OTH MOTR VEH COLL HIWAY-ANIM RIDR
E815.6	OTH MOTR VEH COLL HIWAY-PED CYCL
E815.7	OTH MOTR VEH COLL HIWAY-PEDSTRN
E815.8	OTH MOTR VEH COLL HIWAY-OTH PERS
E815.9	OTH MOTR VEH COLL HIWAY-UNS PERS
E816.0	MOTR VEH LOSS CNTRL W/O COLL-DRIVER
E816.1	MOTR VEH LOSS CNTRL W/O COLL-PSNGR
E816.2	MOTR VEH LOSS CNTRL W/O COLL-MCYCL
E816.3	MOTR VEH LOSS CNTRL W/O COLL-MC PSG
E816.4	MOTR VEH LOSS CNTRL W/O COLL-ST CAR
E816.5	MOTR VEH LOSS CNTRL W/O COLL-ANM RD
E816.6	MOTR VEH LOSS CNTRL W/O COLL-PD CYC
E816.7	MOTR VEH LOSS CNTRL W/O COLL-PDSTRN

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E816.8	MOTR VEH LOSS CNTRL W/O COLL-OTH PE
E816.9	MOTR VEH LOSS CNTRL W/O COLL-UNS PE
E817.0	NONCOLL MV ACC BOARD/ALIGHT-DRIVER
E817.1	NONCOLL MV ACC BOARD/ALIGHT-PSNGR
E817.2	NONCOLL MV ACC BOARD/ALIGHT-MTRCYCL
E817.3	NONCOLL MV BOARD/ALIGHT-MCYCL PSNGR
E817.4	NONCOLL MV ACC BOARD/ALIGHT-ST CAR
E817.5	NONCOLL MV BOARD/ALIGHT-ANIM RIDER
E817.6	NONCOLL MV BOARD/ALIGHT-PED CYCL
E817.7	NONCOLL MV BOARD/ALIGHT-PEDSTRN
E817.8	NONCOLL MV BOARD/ALIGHT-OTH PERS
E817.9	NONCOLL MV BOARD/ALIGHT-UNS PERS
E818.0	OTH NONCOLL MOTOR VEH ACC-DRIVER
E818.1	OTH NONCOLL MOTOR VEH ACC-PSNGR
E818.2	OTH NONCOLL MOTOR VEH ACC-MTRCYCL
E818.3	OTH NONCOLL MOTOR VEH ACC-MC PSNGR
E818.4	OTH NONCOLL MOTOR VEH ACC-ST CAR
E818.5	OTH NONCOLL MOTOR VEH ACC-ANIM RIDR
E818.6	OTH NONCOLL MOTOR VEH ACC-PED CYC
E818.7	OTH NONCOLL MOTOR VEH ACC-PEDSTRN
E818.8	OTH NONCOLL MOTOR VEH ACC-OTH PERS
E818.9	OTH NONCOLL MOTOR VEH ACC-UNS PERS
E819.0	MOTOR VEH ACC UNS NATURE-DRIVER
E819.1	MOTOR VEH ACC UNS NATURE-PSNGR
E819.2	MOTOR VEH ACC UNS NATURE-MTRCYCLST
E819.3	MOTOR VEH ACC UNS NATURE-MC PSNGR
E819.4	MOTOR VEH ACC UNS NATURE-ST CAR
E819.5	MOTOR VEH ACC UNS NATURE-ANIM RIDER
E819.6	MOTOR VEH ACC UNS NATURE-PED CYCL
E819.7	MOTOR VEH ACC UNS NATURE-PEDSTRN
E819.8	MOTOR VEH ACC UNS NATURE-OTH PERS
E819.9	MOTOR VEH ACC UNS NATURE-UNS PERS
E820.0	NONTRFF ACC MOTOR SNOW VEH-DRIVER
E820.1	NONTRFF ACC MOTOR SNOW VEH-PSNGR
E820.2	NONTRFF ACC MOTOR SNOW VEH-MTRCYCL
E820.3	NONTRFF ACC MOTOR SNOW VEH-MC PSNGR
E820.4	NONTRFF ACC MOTOR SNOW VEH-ST CAR
E820.5	NONTRFF ACC MOTOR SNOW VEH-ANM RIDR
E820.6	NONTRFF ACC MOTOR SNOW VEH-PED CYCL
E820.7	NONTRFF ACC MOTOR SNOW VEH-PEDSTRN

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E820.8	NONTRFF ACC MOTOR SNOW VEH-OTH PERS
E820.9	NONTRFF ACC MOTOR SNOW VEH-UNS PERS
E821.0	NONTRFF OTH OFF-ROAD MV-DRIVER
E821.1	NONTRFF OTH OFF-ROAD MV-PASSENGER
E821.2	NONTRFF OTH OFF-ROAD MV-MTRCYCLST
E821.3	NONTRFF OTH OFF-ROAD MV-MCYCL PSNGR
E821.4	NONTRFF OTH OFF-ROAD MV-STREET CAR
E821.5	NONTRFF OTH OFF-ROAD MV-ANIMAL RIDR
E821.6	NONTRFF OTH OFF-ROAD MV-PED CYCLST
E821.7	NONTRFF OTH OFF-ROAD MV-PEDSTRN
E821.8	NONTRFF OTH OFF-ROAD MV-OTH PERS
E821.9	NONTRFF OTH OFF-ROAD MV-UNS PERS
E822.0	OTH MV NONTRFF COLL W/MOV OBJ-DRIVR
E822.1	OTH MV NONTRFF COLL W/MOV OBJ-PSNGR
E822.2	OTH MV NONTRFF COLL W/MOV OBJ-MCYCL
E822.3	OTH MV NONTRFF COLL MOV OBJ-MC PSGR
E822.4	OTH MV NONTRFF COLL MOV OBJ-ST CAR
E822.5	OTH MV NONTRFF COLL MOV OBJ-RIDER
E822.6	OTH MV NONTRFF COLL MOV OBJ-PED CYC
E822.7	OTH MV NONTRFF COLL MOV OBJ-PEDSTRN
E822.8	OTH MV NONTRFF COLL MOV OBJ-OTH PER
E822.9	OTH MV NONTRFF COLL MOV OBJ-UNS PER
E823.0	OTH MV COLL W/STATION OBJ-DRIVER
E823.1	OTH MV COLL W/STATION OBJ-PSNGR
E823.2	OTH MV COLL W/STATION OBJ-MTRCYCLST
E823.3	OTH MV COLL W/STATION OBJ-MC PSNGR
E823.4	OTH MV COLL W/STATION OBJ-ST CAR
E823.5	OTH MV COLL W/STATION OBJ-ANM RIDER
E823.6	OTH MV COLL W/STATION OBJ-PED CYCL
E823.7	OTH MV COLL W/STATION OBJ-PEDSTRN
E823.8	OTH MV COLL W/STATION OBJ-OTH PERS
E823.9	OTH MV COLL W/STATION OBJ-UNS PERS
E824.0	OTH MV NONTRFF BOARD&ALIGHT-DRIVER
E824.1	OTH MV NONTRFF BOARD&ALIGHT-PSNGR
E824.2	OTH MV NONTRFF BOARD&ALIGHT-MCYCLST
E824.3	OTH MV NONTRFF BOARD&ALIGHT-MC PSGR
E824.4	OTH MV NONTRFF BOARD&ALIGHT-ST CAR
E824.5	OTH MV NONTRFF BOARD&ALIGHT-ANM RID
E824.6	OTH MV NONTRFF BOARD&ALIGHT-PD CYCL
E824.7	OTH MV NONTRFF BOARD&ALIGHT-PEDSTRN

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E824.8	OTH MV NONTRFF BOARD&ALIGHT-OTH PER
E824.9	OTH MV NONTRFF BOARD&ALIGHT-UNS PER
E825.0	OTH MV NONTRFF OTH&UNS NATR-DRIVER
E825.1	OTH MV NONTRFF OTH&UNS NATR-PNSGR
E825.2	OTH MV NONTRFF OTH&UNS NATR-MCYCLST
E825.3	OTH MV NONTRFF OTH&UNS NATR-MC PSGR
E825.4	OTH MV NONTRFF OTH&UNS NATR-ST CAR
E825.5	OTH MV NONTRFF OTH&UNS NATR-AN RIDR
E825.6	OTH MV NONTRFF OTH&UNS NATR-PD CYCL
E825.7	OTH MV NONTRFF OTH&UNS NATR-PEDTRN
E825.8	OTH MV NONTRFF OTH&UNS NATR-OTH PER
E825.9	OTH MV NONTRFF OTH&UNS NATR-UNS PER
E826.0	PEDAL CYCLE ACCIDENT INJR PEDSTRN
E826.1	PEDAL CYCLE ACC INJR PEDAL CYCLIST
E826.2	PEDAL CYCLE ACC INJR RIDER ANIMAL
E826.3	PEDAL CYCLE ACC-INJR OCC ANIM VEH
E826.4	PEDAL CYCLE ACC INJR OCC STREETCAR
E826.8	PEDAL CYCLE ACC INJR OTH SPEC PERS
E826.9	PEDAL CYCLE ACC INJR UNSPEC PERSON
E827.0	ANIMAL-DRAWN VEH ACC INJR PEDSTRN
E827.2	ANIMAL DRAWN VEH ACC-ANIMAL RIDER
E827.3	ANIMAL DRAWN VEH ACC-OCCUPANT
E827.4	ANIMAL DRAWN VEH ACC-OCC ST CAR
E827.8	ANIMAL-DRAWN VEH ACC INJR OTH PERS
E827.9	ANIMAL-DRAWN VEH ACC INJR UNS PERS
E828.0	ACC INVLV RIDDEN ANIMAL-PEDSTRN
E828.2	ACC INVLV RIDDEN ANIMAL-RIDER
E828.4	ACC INVLV RIDDEN ANIMAL-OCC ST CAR
E828.8	ACC INVLV RIDDEN ANIMAL-OTH PERS
E828.9	ACC INVLV RIDDEN ANIMAL-UNS PERS
E829.0	OTH ROAD VEHICLE ACC INJR PEDSTRN
E829.4	OTH ROAD VEH ACC INJR OCC STREETCAR
E829.8	OTH ROAD VEH ACC INJR OTH SPEC PERS
E829.9	OTH ROAD VEH ACC INJR UNSPEC PERSON
E830.0	ACC WATRCRFT SUBMERS-UNPOWR BOAT
E830.1	ACC WATRCRFT SUBMERS-ACC POWR BOAT
E830.2	ACC WATRCRFT SUBMERSION-CREW
E830.3	ACC WATRCRFT SUBMERSION-NOT CREW
E830.4	ACC WATRCRFT SUBMERS-WATER SKIER
E830.5	ACC WATRCRFT SUBMERS-SWIMMER

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E830.6	ACC WATRCRFT SUBMERS-DOCKERS
E830.8	ACC WATRCRFT SUBMERS-OTH PERS
E830.9	ACC WATRCRFT SUBMERS-UNS PERS
E831.0	ACC WATRCRFT OTH INJR-UNPOWER BOAT
E831.1	ACC WATRCRFT OTH INJR-POWER BOAT
E831.2	ACC WATRCRFT OTH INJR-CREW
E831.3	ACC WATRCRFT OTH INJR-PASSENGER
E831.4	ACC WATRCRFT OTH INJR-WATER SKIER
E831.5	ACC WATRCRFT OTH INJR-SWIMMER
E831.6	ACC WATRCRFT OTH INJR-DOCKER
E831.8	ACC WATRCRFT OTH INJR-OTH PERS
E831.9	ACC WATRCRFT OTH INJR-UNS PERS
E832.0	OTH SUBMERS/DROWN-UNPOWERED BOAT
E832.1	OTH SUBMERS/DROWN-POWER BOAT
E832.2	OTH SUBMERS/DROWN-CREW
E832.3	OTH SUBMERS/DROWN-PASSENGER
E832.4	OTH SUBMERS/DROWN-WATER SKIER
E832.5	OTH SUBMERS/DROWN-SWIMMER
E832.6	OTH SUBMERS/DROWN-DOCKER
E832.8	OTH SUBMERS/DROWN-OTH PERSON
E832.9	OTH SUBMERS/DROWN-UNS PERSON
E833.0	FALL STAIRS WATR TRNSPRT-UNPOW BOAT
E833.1	FALL STAIRS WATR TRNSPRT-POWR BOAT
E833.2	FALL STAIRS WATR TRNSPRT-CREW
E833.3	FALL STAIRS WATR TRNSPRT-NOT CREW
E833.4	FALL STAIRS WATR TRNSPRT-WATR SKIER
E833.5	FALL STAIRS WATR TRNSPRT-SWIMMER
E833.6	FALL STAIRS WATR TRNSPRT-DOCKERS
E833.8	FALL STAIRS WATR TRNSPRT-OTH PERS
E833.9	FALL STAIRS WATR TRNSPRT-UNS PERS
E834.0	OTH FALL WATER TRANSPRT-UNPOWR
E834.1	OTH FALL WATER TRANSPORT-POWER
E834.2	OTH FALL WATER TRANSPORT-CREW
E834.3	OTH FALL WATER TRANSPORT-PSNGR
E834.4	OTH FALL WATER TRANSPORT-SKIER
E834.5	OTH FALL WATER TRANSPORT-SWIMMER
E834.6	OTH FALL WATER TRANSPORT-DOCKER
E834.8	OTH FALL WATER TRANSPORT-OTH PERS
E834.9	OTH FALL WATER TRANSPORT-UNS PERS
E835.0	OTH&UNS FALL WTR TRNSPRT-UNPOW



**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E835.1	OTH&UNS FALL WTR TRNSPRT-POWER
E835.2	OTH&UNS FALL WTR TRNSPRT-CREW
E835.3	OTH&UNS FALL WTR TRNSPRT-PSNGR
E835.4	OTH&UNS FALL WTR TRNSPRT-SKIER
E835.5	OTH&UNS FALL WTR TRNSPRT-SWIMR
E835.6	OTH&UNS FALL WTR TRNSPRT-DOCKR
E835.8	OTH&UNS FALL WTR TRNSPRT-OTH PERS
E835.9	OTH&UNS FALL WTR TRNSPRT-UNS PERS
E836.0	MACH ACC WATR TRNSPRT-UNPOWR
E836.1	MACH ACC WATR TRNSPRT-POWER
E836.2	MACH ACC WATR TRNSPRT-CREW
E836.3	MACH ACC WATR TRNSPRT-PSNGR
E836.4	MACH ACC WATR TRNSPRT-SKIER
E836.5	MACH ACC WATR TRNSPRT INJR SWIMR
E836.6	MACH ACC WATR TRNSPRT-DOCKER
E836.8	MACH ACC WATR TRNSPRT-OTH PERS
E836.9	MACH ACC WATR TRNSPRT-UNS PERS
E837.0	EXPLOSION WATRCRFT-OCC UNPOWR BOAT
E837.1	EXPLOSION WATRCRFT-OCC POWR BOAT
E837.2	EXPLOSION WATERCRAFT-CREW
E837.3	EXPLOSION WATERCRAFT-NOT CREW
E837.4	EXPLOSION WATERCRAFT-WATER SKIER
E837.5	EXPLO FIRE/BURNWATRCRAFT INJR SWMR
E837.6	EXPLOSION WATERCRAFT-DOCKERS
E837.8	EXPLOSION WATERCRAFT-OTH PERSON
E837.9	EXPLOSION WATERCRAFT-UNS PERSON
E838.0	OTH&UNS WATR TRNSPRT ACC-UNPOWR
E838.1	OTH&UNS WATR TRNSPRT ACC-POWER
E838.2	OTH&UNS WATR TRNSPRT ACC-CREW
E838.3	OTH&UNS WATR TRNSPRT ACC-PSNGR
E838.4	OTH&UNS WATR TRNSPRT ACC-SKIER
E838.5	OTH&UNS WATR TRNSPRT ACC-SWIMR
E838.6	OTH&UNS WATR TRNSPRT ACC-DOCKER
E838.8	OTH&UNS WATR TRNSPRT ACC-OTH PERS
E838.9	OTH&UNS WATR TRNSPRT ACC-UNS PERS
E840.0	ACC POWR AIRCRFT TKOFF/LAND-SPCRFT
E840.1	ACC POWR AIRCRFT TKOFF/LAND-MILITARY
E840.2	ACC POWR AIRCRFT TKOFF/LAND-CREW
E840.3	ACC POWR AIRCRFT TKOFF/LAND-OTH OCC
E840.4	ACC POWR AIRCRFT TKOFF/LAND-PSNGR

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E840.5	POW AIRCRFT TKOFF/LAND-OTH AIRCRFT
E840.6	POW AIRCRFT TKOFF/LAND-UNPOW CRFT
E840.7	POW AIRCRFT TKOFF/LAND-PARCHUTST
E840.8	POW AIRCRFT TKOFF/LAND-GRND CREW
E840.9	POW AIRCRFT TKOFF/LAND-OTH PERS
E841.0	ACC POWR AIRCRFT OTH&UNS-SPACECRFT
E841.1	ACC POWR AIRCRFT OTH&UNS-MILITARY
E841.2	ACC POWR AIRCRFT OTH&UNS-CREW
E841.3	ACC POWR AIRCRFT OTH&UNS-OTH OCC
E841.4	ACC POWR AIRCRFT OTH&UNS-OCC COMMR
E841.5	ACC POWR AIRCRFT OTH&UNS-OTH CRFT
E841.6	ACC POWR AIRCRFT OTH&UNS-UNPOWR
E841.7	ACC PWR AIRCRFT UNS INJR PRACHUTST
E841.8	ACC POWR AIRCRFT OTH&UNS-GRND CREW
E841.9	ACC PWR AIRCRFT UNS INJR OTH PERS
E842.6	ACCIDENT UNPOWER AIRCRAFT-INJR OCC
E842.7	ACC UNPOWER AIRCRFT INJR PRACHUTST
E842.8	ACC UNPOWR AIRCRFT-INJR GROUND CREW
E842.9	ACC UNPOWER AIRCRFT INJR OTH PERSON
E843.0	FALL/AIRCRFT INJR OCC SPACECRFT
E843.1	FALL/FROM AIRCRFT-OCC MILIT AIRCRAF
E843.2	FALL/FROM AIRCRFT-CREW COMM AIRCRFT
E843.3	FALL/FROM AIRCRAFT-OTH OCC AIRCRAFT
E843.4	FALL/FROM AIRCRFT-OCC COMM AIRCRFT
E843.5	FALL/FROM AIRCRFT-OCC POWR AIRCRFT
E843.6	FALL/FROM AIRCRFT-OCC UNPWR AIRCRFT
E843.7	FALL/FROM AIRCRAFT INJR PARACHUTIST
E843.8	FALL/FROM AIRCRAFT-GROUND CREW
E843.9	FALL/FROM AIRCRAFT INJR OTH PERSON
E844.0	OTH AIR TRNSPRT ACC-OCC SPACERAFT
E844.1	OTH AIR TRNSPRT ACC-OCC MILITARY
E844.2	OTH AIR TRNSPRT ACC-CREW COMM AIRC
E844.3	OTH AIR TRNSPRT ACC-OTH OCC COMM
E844.4	OTH AIR TRNSPRT ACC-OCC COMM AIRC
E844.5	OTH AIR TRNSPRT ACC-OTH POWR AIRC
E844.6	OTH AIR TRNSPRT ACC-UNPOWR AIRC
E844.7	OTH AIR TRNSPRT ACC INJR PRACHUTST
E844.8	OTH AIR TRNSPRT ACC-GROUND CREW
E844.9	OTH AIR TRNSPRT ACC INJR OTH PERS
E845.0	ACC INVLV SPACECRFT-OCCUPANT

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E845.8	ACC INVLV SPACECRFT-GROUND CREW
E845.9	ACC INVLV SPACECRFT INJR OTH PERSON
E846	ACC INVLV INDUST VEH ON PREMISE
E847	ACC INVLV CABLE CAR NOT RUN RAIL
E848	ACCS INVLV OTH VEHS NEC
E849.0	PLACE OF OCCURRENCE, HOME
E849.1	PLACE OF OCCURRENCE, FARM
E849.2	PLACE OF OCCURRENCE MINE AND QUARRY
E849.3	PLACE OCCUR INDUST PLACES&PREMISES
E849.4	PLACE OCCUR PLACE RECREAT&SPORT
E849.5	PLACE OF OCCURRENCE STREET&HIGHWAY
E849.6	PLACE OF OCCURRENCE PUBLIC BUILDING
E849.7	PLACE OCCUR RESIDENTIAL INSTITUTION
E849.8	OTHER SPECIFIED PLACE OF OCCURRENCE
E849.9	UNSPECIFIED PLACE OF OCCURRENCE
E850.0	ACCIDENTAL POISONING BY HEROIN
E850.1	ACCIDENTAL POISONING BY METHADONE
E850.2	ACC POISN OTH OPIATES&REL NARCOTICS
E850.3	ACCIDENTAL POISONING BY SALICYLATES
E850.4	ACC POISN AROMATIC ANALGES NEC
E850.5	ACC POISN PYRAZOLE DERIVATIVES
E850.6	ACCIDENTAL POISONING ANTIRHEUMATICS
E850.7	ACC POISN OTH NON-NARCOTIC ANALGES
E850.8	ACC POISN OTH ANALGES&ANTIPYRETICS
E850.9	ACC POISN UNS ANALGESIC/ANTIPYRETIC
E851	ACCIDENTAL POISONING BARBITURATES
E852.0	ACC POISN CHLORAL HYDRATE GROUP
E852.1	ACCIDENTAL POISONING BY PARALDEHYDE
E852.2	ACCIDENTAL POISONING BROMINE COMPND
E852.3	ACC POISN METHAQUALONE COMPND
E852.4	ACCIDENTAL POISN GLUTETHIMIDE GROUP
E852.5	ACCIDENTAL POISN MIX SEDATIVES NEC
E852.8	ACC POISN OTH SPEC SEDATIVE&HYPNOT
E852.9	ACC POISN UNSPEC SEDATIVE/HYPNOTIC
E853.0	ACC POISN PHENOTHIAZINE-BASED TRANQ
E853.1	ACC POISN BUTYROPHENONE-BASED TRANQ
E853.2	ACC PSN BENZODIAZEPINE-BASED TRANQ
E853.8	ACCIDENTAL POISN OTH SPEC TRANQ
E853.9	ACC POISN UNSPEC TRANQUILIZER
E854.0	ACCIDENTAL POISONING ANTIDEPTSSNT

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E854.1	ACCIDENTAL POISN PSYCHODYSLEPTICS
E854.2	ACCIDENTAL POISN PSYCHOSTIMULANTS
E854.3	ACC POISN CNTRL NERV SYS STIMS
E854.8	ACC POISN OTH PSYCHOTROPIC AGENTS
E855.0	ACC POISON ANTICONVULSANT
E855.1	ACC PSN OTH CNTRL NRV SYS DEPTSSNT
E855.2	ACCIDENTAL POISONING LOCAL ANES
E855.3	ACCIDENTAL POISN PRASYMPHTHOMIMET
E855.4	ACC POISON PARASYMPATHOLYTICS
E855.5	ACCIDENTAL POISN SYMPATHOMIMETICS
E855.6	ACCIDENTAL POISONING SYMPATHOLYTICS
E855.8	ACC POISON-OTH SPEC CNS DRUG
E855.9	ACC POISON-UNS CNS DRUG
E856	ACCIDENTAL POISONING BY ANTIBIOTICS
E857	ACC POISN OTH ANTI-INFECTIVES
E858.0	ACC POISN HORMONES&SYNTH SUBSTS
E858.1	ACCIDENTAL POISN PRIM SYSTEMIC AGTS
E858.2	ACC POISON-BLOOD AGENT
E858.3	ACC POISN AGTS PRIM AFFCT CV SYSTEM
E858.4	ACC POISN AGTS PRIM AFFCT GI SYSTEM
E858.5	ACC POISN METABOLISM DRUGS
E858.6	ACC POISN AGENT ACTING MUSC/RESP
E858.7	ACC POISN AGT AFF SKIN/MUCOUS MEMB
E858.8	ACCIDENTAL POISONING OTH SPEC DRUGS
E858.9	ACCIDENTAL POISONING UNSPEC DRUG
E860.0	ACC POISN ALCOHOLIC BEVERAGES
E860.1	ACC POISON OTH&UNS ETHYL ALCOHOL
E860.2	ACCIDENTAL POISONING METHYL ALCOHOL
E860.3	ACCIDENTAL POISN ISOPROPYL ALCOHOL
E860.4	ACCIDENTAL POISONING BY FUSEL OIL
E860.8	ACCIDENTAL POISN OTH SPEC ALCOHOLS
E860.9	ACCIDENTAL POISONING UNSPEC ALCOHOL
E861.0	ACC POISN SYNTH DETRGNTS&SHAMPOOS
E861.1	ACCIDENTAL POISONING SOAP PRODUCTS
E861.2	ACCIDENTAL POISONING BY POLISHES
E861.3	ACC PSN OTH CLEANSING&POLISHING AGT
E861.4	ACCIDENTAL POISONING DISINFECTANTS
E861.5	ACCIDENTAL POISONING BY LEAD PAINTS
E861.6	ACC POISN OTH PAINTS&VARNISHES
E861.9	ACC POISON-CLEANSER UNS

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E862.0	ACCIDENTAL POISON PETROL SOLVENTS
E862.1	ACCIDENTAL POISON PETROL FUELS&CLNRS
E862.2	ACCIDENTAL POISON LUBRICATING OILS
E862.3	ACCIDENTAL POISONING PETROL SOLIDS
E862.4	ACCIDENTAL POISON OTH SPEC SOLVENTS
E862.9	ACCIDENTAL POISONING UNSPEC SOLVENT
E863.0	ACC POISON CHLORINE INSECTICIDES
E863.1	ACC POISON PHOSPHORUS INSECTICIDE
E863.2	ACCIDENTAL POISONING BY CARBAMATES
E863.3	ACCIDENTAL POISON MIX INSECTICIDES
E863.4	ACC POISON OTH&UNSPEC INSECTICIDES
E863.5	ACCIDENTAL POISONING BY HERBICIDES
E863.6	ACCIDENTAL POISONING BY FUNGICIDES
E863.7	ACCIDENTAL POISONING RODENTICIDES
E863.8	ACCIDENTAL POISONING BY FUMIGANTS
E863.9	ACC POISON AGRICULTURAL OTH&UNS
E864.0	ACC POISON CORROSIVE AROMATICS NEC
E864.1	ACCIDENTAL POISONING BY ACIDS NEC
E864.2	ACC POISON CAUSTIC ALKALIS NEC
E864.3	ACC PSN OTH CORROSIVES&CAUSTICS NEC
E864.4	ACC PSN UNS CORROSIVES&CAUSTICS NEC
E865.0	ACCIDENTAL POISONING BY MEAT
E865.1	ACCIDENTAL POISONING BY SHELLFISH
E865.2	ACCIDENTAL POISONING FROM OTH FISH
E865.3	ACCIDENTAL POISON FROM BERRIES&SEEDS
E865.4	ACC POISON FROM OTH SPEC PLANTS
E865.5	ACC POISON FROM MUSHROOMS&OTH FUNGI
E865.8	ACC POISON FROM OTH SPEC FOODS
E865.9	ACC PSN UNS FOODSTUFF/PSNOUS PLANT
E866.0	ACC POISON LEAD&ITS COMPND&FUMES
E866.1	ACC POISON MERCURY&ITS COMPND&FUMES
E866.2	ACC POISON ANTIMONY&ITS COMPND&FUMES
E866.3	ACC POISON ARSENIC&ITS COMPND&FUMES
E866.4	ACC POISON-OTH METALS
E866.5	ACC POISON PLANT FOODS&FERTILIZERS
E866.6	ACCIDENTAL POISONING GLUES&ADHES
E866.7	ACCIDENTAL POISONING BY COSMETICS
E866.8	ACC POISON OTH SPEC SOLID/LQD SBSTNC
E866.9	ACC POISON UNSPEC SOLID/LQD SBSTNC
E867	ACC POISON GAS DSTRBD PIPELINE

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E868.0	ACC POISON-LIQUIFIED PETROL GAS
E868.1	ACC POISN OTH&UNSPEC UTILITY GAS
E868.2	ACC POISN MOTOR VEHICLE EXHAUST GAS
E868.3	ACC POISN-CO/DOMESTIC FUEL
E868.8	ACC POISN CARB MONOXIDE OTH SRC
E868.9	ACC POISN UNSPEC CARB MONOXIDE
E869.0	ACCIDENTAL POISONING NITRO OXIDES
E869.1	ACCIDENTAL POISONING SULFUR DIOXIDE
E869.2	ACCIDENTAL POISONING BY FREON
E869.3	ACCIDENTAL POISN LACRIMOGENIC GAS
E869.4	ACC POISN 2-HAND TOBACCO SMOKE
E869.8	ACC POISN OTH SPEC GASES&VAPORS
E869.9	ACC POISN UNSPEC GASES&VAPORS
E870.0	ACC CUT PUNCT PERF/HEM DUR SURG OP
E870.1	ACC CUT/HEMORR DUR INFUSION
E870.2	ACC CUT/HEMORR-DIALYS OTH PERFUSN
E870.3	ACC CUT PUNCT PERF/HEM DUR INJ/VACC
E870.4	ACC CUT PUNCT PERF/HEM DUR ENDO EX
E870.5	ACC CUT/HEMORR DUR CATHETERIZ
E870.6	ACC CUT PUNCT PERF/HEM DUR HRT CATH
E870.7	ACC CUT/HEMORR DUR ENEMA
E870.8	ACC CUT/HEMORR DUR OTH MED CARE
E870.9	ACC CUT/HEMORR DUR UNS MED CARE
E871.0	FOREIGN OBJ LT BDY DUR SURG OP
E871.1	FOREIGN OBJ LT BDY DURING INFUSION
E871.2	FOREIGN OBJ LT BDY DUR DIALYS/PRFSN
E871.3	FOREIGN OBJ LT BDY DUR INJ/VACC
E871.4	FOREIGN OBJ LT BDY DURING ENDO EXAM
E871.5	FOREIGN OBJ LT BDY DUR ASPIR/CATH
E871.6	FOREIGN OBJ LT BODY DURING HRT CATH
E871.7	FOREIGN OBJ LT BDY DUR REMVOL CATH
E871.8	FOREIGN OBJ LT BDY DUR OTH PROC
E871.9	FOREIGN OBJ LT BDY DUR UNSPEC PROC
E872.0	FAIL STERL PRECAUTION DUR SURG OP
E872.1	FAIL STERL PRECAUTION DUR INFUSION
E872.2	FAIL STERL PRECAUTION DUR PERFUSN
E872.3	FAIL STERL PRECAUTION DUR INJ/VACC
E872.4	FAIL STERL PRECAUTION DUR ENDO EXAM
E872.5	FAIL STERL PRECAUTION DUR CATH
E872.6	FAIL STERL PRECAUTION DUR HRT CATH

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E872.8	FAIL STERL PRECAUTION DUR OTH PROC
E872.9	FAIL STERL PRECAUTION DUR UNS PROC
E873.0	EXCESS BLOOD/FLUID DUR INFUSION
E873.1	INCORRECT DILUT FL DURING INFUSION
E873.2	OVERDOSE OF RADIATION IN THERAPY
E873.3	INADVERTENT EXPSPT RAD DUR MED CARE
E873.4	FAIL DOSAGE-SHOCK THERAPY
E873.5	INAPPROP TEMP LOCAL APPLIC&PACKING
E873.6	NONADMIN NECES RX/MEDICINAL SBSTNC
E873.8	OTHER SPECIFIED FAILURE IN DOSAGE
E873.9	UNSPECIFIED FAILURE IN DOSAGE
E874.0	MECH FAIL INSTRUM DUR SURGERY
E874.1	MECH FAIL INSTRUM DUR INFUSION
E874.2	MECH FAIL INSTRUM DUR DIALYSIS
E874.3	MECH FAIL INSTRUM DUR ENDO EXAM
E874.4	MECH FAIL INSTRUM DUR ASPIR CATH
E874.5	MECH FAIL INSTRUM DUR HEART CATH
E874.8	MECH FAIL INSTRUM DUR OTH PROC
E874.9	MECH FAIL INSTRUM DUR UNS PROC
E875.0	CONTAMIN SBSTNC TRANSFUSED/INFUSED
E875.1	CONTAMINAT SUBSTANCE INJ/USED VACC
E875.2	CONTAMINATED DRUG ADMIN OTH MEANS
E875.8	OTH CONTAMINATION PT DUR MED CARE
E875.9	UNS CONTAMINATION PT DUR MED CARE
E876.0	MISMATCHED BLOOD IN TRANSFUSION
E876.1	WRONG FLUID IN INFUSION
E876.2	FAIL SUT&LIG DURING SURG OPERATION
E876.3	ET WRONGLY PLCD DURING ANESPROC
E876.4	FAIL INTRODUCE/REMOVE TUBE
E876.5	PERF WRNG OP ON CORRCT PT
E876.8	OTH SPEC MISADVENTURE DUR MED CARE
E876.9	UNSPEC MISADVENTURE DUR MED CARE
E878.0	ABNORM REACT-ORG TRANSPLANT
E878.1	ABNORM REACT-ARTIF IMPLANT
E878.2	ABNORM REACT-ANASTOM/GRAFT
E878.3	ABNORM REACT-EXTERNAL STOMA
E878.4	ABNORM REACT-PLAST SURG
E878.5	ABNORM REACT-LIMB AMPUTAT
E878.6	ABNORM REAC-REMOVL OTH ORGAN
E878.8	ABNORM REACT-OTH SPEC SURG PROC

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E878.9	ABNORM REACT-UNS SURG PROC
E879.0	ABNORM REACT-CARDIAC CATH
E879.1	ABNORM REACT-RENAL DIALYSIS
E879.2	ABNORM REACT-RADIOTHERAPY
E879.3	ABNORM REACT-SHOCK THERAPY
E879.4	ABNORM REACT-FLUID ASPIRAT
E879.5	ABNORM REACT-GASTRIC SOUND
E879.6	ABNORM REACT-URINARY CATH
E879.7	ABNORM REACT-BLOOD SAMPLING
E879.8	ABNORM REACT-OTH SPEC PROCEDURE
E879.9	ABNORM REACT-UNS PROCEDURE
E880.0	ACCIDENTAL FALL OR FROM ESCALATOR
E880.1	ACCIDENTAL FALL/FROM SIDEWALK CURB
E880.9	ACC FALL/FROM OTH STAIRS/STEPS
E881.0	ACCIDENTAL FALL FROM LADDER
E881.1	ACCIDENTAL FALL FROM SCAFFOLDING
E882	ACC FALL FROM/OUT BLDG/OTH STRCT
E883.0	ACC FROM DIVING/JUMPING IN WATER
E883.1	ACCIDENTAL FALL INTO WELL
E883.2	ACC FALL INTO STORM DRAIN/MANHOLE
E883.9	FALL INTO OTHER HOLE/OPENING
E884.0	ACC FALL FROM PLAYGROUND EQUIPMENT
E884.1	ACCIDENTAL FALL FROM CLIFF
E884.2	ACCIDENTAL FALL FROM CHAIR
E884.3	ACCIDENTAL FALL FROM WHEELCHAIR
E884.4	ACCIDENTAL FALL FROM BED
E884.5	ACCIDENTAL FALL FROM OTH FURNITURE
E884.6	ACCIDENTAL FALL FROM COMMODE
E884.9	OTH ACC FALL FROM 1 LEVL TO ANOTHER
E885.0	FALL ON SAME LEVEL FROM SCOOTER
E885.1	FALL FROM ROLLER SKATES
E885.2	FALL FROM SKATEBOARD
E885.3	FALL FROM SKIS
E885.4	FALL FROM SNOWBOARD
E885.9	FALL FROM OTH SLIP TRIP/STUMBLING
E886.0	FALL SAME LEVEL PUSH/SHOVE SPORTS
E886.9	FALL SAME LEVEL PUSH/SHOVE OTH&UNS
E887	FRACTURE ACC FALL CAUSE UNSPEC
E888.0	FALL RSLT STRIKING AGNST SHARP OBJ
E888.1	FALL RESULT STRIKING AGNST OTH OBJ



**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E888.8	OTHER FALL
E888.9	UNSPECIFIED FALL
E890.0	EXPLO CAUS CONFLAGRAT PRIVATE DWELL
E890.1	PVC FUMES CONFLAGRAT PRIV DWELL
E890.2	OTH FUMES CONFLAGRAT PRIV DWELL
E890.3	BURNING CAUS CONFLAGRAT PRIV DWELL
E890.8	OTH ACC RSLT CONFLAGRAT PRIV DWELL
E890.9	UNS ACC RSLT CONFLAGRAT PRIV DWELL
E891.0	EXPLOSION CONFLAGRAT OTH&UNS BLDG
E891.1	PVC FUMES CONFLAGRAT OTH&UNS BLDG
E891.2	OTH FUMES CONFLAGRAT OTH&UNS BLDG
E891.3	BURNCAUS CONFLAGRAT UNS BLDG/STRCT
E891.8	OTH ACC CONFLAGRAT OTH&UNS BLDG
E891.9	UNS ACC CONFLAGRAT OTH&UNS BLDG
E892	CONFLAGRATION NOT BLDG/STRUCTURE
E893.0	ACC IGNITION CLOTHING-PRIV DWELL
E893.1	ACC IGNITION CLOTHING-IN BLDG
E893.2	ACC IGNITION CLOTHING-NOT IN BLDG
E893.8	ACC CAUS IGNITION CLOTHING OTH SRC
E893.9	ACC CAUS IGNITION CLOTHING UNS SRC
E894	IGNITION HILY INFLAMMABLE MATERIAL
E895	ACC CAUS CNTRL FIRE PRIVATE DWELL
E896	ACC CAUS CNTRL FIRE UNS BLDG/STRCT
E897	ACC CAUS CNTRL FIRE NOT BLDG/STRCT
E898.0	ACCIDENT CAUSED BURNING BEDCLOTHES
E898.1	ACCIDENT CAUSED OTH BURNING MATL
E899	ACCIDENT CAUSED BY UNSPECIFIED FIRE
E900.0	ACC DUE EXCESS HEAT WEATHER CONDS
E900.1	ACC DUE EXCESS HEAT MAN-MADE ORIGIN
E900.9	ACC DUE EXCESS HEAT UNSPEC ORIGIN
E901.0	ACC DUE EXCESS COLD WEATHER CONDS
E901.1	ACC DUE EXCESS COLD MAN-MADE ORIGIN
E901.8	ACC DUE EXCESS COLD OTH SPEC ORIGIN
E901.9	ACC DUE EXCESS COLD UNSPEC ORIGIN
E902.0	ACC DUE-HIGH ALTITUDE RESIDENCE
E902.1	ACCIDENT DUE CHGS AIRPRESS AIRCRAFT
E902.2	ACC DUE CHGS AIR PRESS DUE DIVING
E902.8	ACC-CHGS AIR PRSS-OTH SPEC CAUSE
E902.9	ACC DUE CHGS AIR PRESS UNS CAUSE
E903	ACCIDENT DUE TO TRAVEL AND MOTION

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E904.0	ACC DUE-ABANDONMENT/LACK OF CARE
E904.1	ACCIDENT DUE TO LACK OF FOOD
E904.2	ACCIDENT DUE TO LACK OF WATER
E904.3	ACC DUE EXPOS NOT ELSW CLASSIFIABLE
E904.9	ACCIDENT DUE UNQUALIFIED PRIVATION
E905.0	VENOMOUS SNAKE BITE
E905.1	VNOM SPIDERS CAUSE POISN&TOX REACT
E905.2	SCORPION STING CAUSE PSN&TOX REACT
E905.3	HORNET/WASP/BEE STING
E905.4	CENTIPEDE BITE
E905.5	OTH VENOMOUS ARTHROPODS
E905.6	VENOM SEA ANIMALS/PLANTS
E905.7	POISN&TOXIC REACT CAUSED OTH PLANTS
E905.8	POISN&TOX REACT OTH ANIMAL&PLANT
E905.9	POISN&TOX REACT UNS ANIMAL&PLANT
E906.0	DOG BITE
E906.1	RAT BITE
E906.2	BITE OF NONVENOMOUS SNAKES&LIZARDS
E906.3	BITE OTHER ANIMAL EXCEPT ARTHROPOD
E906.4	BITE OF NONVENOMOUS ARTHROPOD
E906.5	BITE BY UNSPECIFIED ANIMAL
E906.8	OTHER SPEC INJURY CAUSED ANIMAL
E906.9	UNSPECIFIED INJURY CAUSED BY ANIMAL
E907	ACCIDENT DUE TO LIGHTNING
E908.0	ACCIDENT DUE TO HURRICANE
E908.1	ACCIDENT DUE TO TORNADO
E908.2	ACCIDENT DUE TO FLOODS
E908.3	ACCIDENT DUE TO BLIZZARD
E908.4	ACCIDENT DUE TO DUST STORM
E908.8	ACCIDENT DUE OTH CATACLYSMIC STORMS
E908.9	UNS CATACLYSMIC STORMS
E909.0	EARTHQUAKES
E909.1	VOLCANIC ERUPTIONS
E909.2	AVALANCHE, LANDSLIDE, OR MUDSLIDE
E909.3	COLLAPSE DAM OR MAN-MADE STRUCTURE
E909.4	TIDALWAVE CAUSED BY EARTHQUAKE
E909.8	OTH EARTH MOVE/ERUPTION
E909.9	UNS EARTH MOVE/ERUPTION
E910.0	ACC DROWN&SUBMERS WATER-SKIING
E910.1	ACC DROWN/SUBMERS SCUBA DIVING

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E910.2	ACC DROWN/SUBMERS SWIMMING
E910.3	ACC DROWN/SUBMERS SWIM/DIVING
E910.4	ACCIDENTAL DROWN&SUBMERSION BATHTUB
E910.8	OTH ACCIDENTAL DROWNING/SUBMERSION
E910.9	UNSPEC ACCIDENTAL DROWN/SUBMERSION
E911	RESP OBSTR-FOOD INHAL
E912	RESP OBSTR-INHAL OTH OBJ
E913.0	ACCIDENTAL MECH SUFFOCAT BED/CRADLE
E913.1	ACCIDENTAL MECH SUFFOCAT PLSTC BAG
E913.2	ACC MECH SUFFOCAT DUE LACK AIR
E913.3	ACC MECH SUFFOCAT CAVE-IN
E913.8	ACC MECH SUFFOCAT OTH SPEC MEANS
E913.9	ACC MECH SUFFOCAT UNSPEC MEANS
E914	FB ACC ENTERING EYE&ADNEXA
E915	FB ACC ENTERING OTH ORIFICE
E916	STRUCK ACCIDENTALLY FALLING OBJECT
E917.0	STRIKE/STRUCK ACC SPORTS W/O FALL
E917.1	STRIKE/STRUCK ACC CROWD W/O FALL
E917.2	STRIKE/STRUCK ACC RUN WTR W/O FALL
E917.3	STRIK AGNST/STRUK ACC FURN W/O FALL
E917.4	STRIKE ACC OTH STATNRY OBJ W/O FALL
E917.5	STRIKE ACC OTH OBJ SPORTS W/FALL
E917.6	STRIK AGNST/STRUCK ACC CROWD W/FALL
E917.7	STRIK AGNST/STRUCK ACC FURN W/FALL
E917.8	STRIKE ACC OTH STATNRY OBJ W/FALL
E917.9	OTH STRIK AGNST W/WO SUBSQT FALL
E918	CAUGHT ACCIDENTALLY/BETWEEN OBJECTS
E919.0	ACCIDENT CAUSED AGRICULTURAL MACHS
E919.1	ACC CAUSED MINING MACHINE
E919.2	ACC CAUSED LIFTING MACHS&APPLINCS
E919.3	ACCIDENT CAUSED METALWORKING MACHS
E919.4	ACC CAUSED WOODWRK&FORMING MACHS
E919.5	ACC CAUS PRIME MOVERS NO ELEC MOTRS
E919.6	ACCIDENT CAUSED TRANSMISSION MACHRY
E919.7	ACC CAUSED EARTH MOVING MACHINE
E919.8	ACCIDENT CAUSED OTH SPEC MACHINERY
E919.9	ACCIDENT CAUSED UNSPEC MACHINERY
E920.0	ACCIDENT CAUSED POWERED LAWN MOWER
E920.1	ACC CAUSED OTH POWER HAND TOOLS
E920.2	ACC CAUSED POWER HOUSE APPLIANCE

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E920.3	ACC CAUSED KNIVES SWORDS&DAGGERS
E920.4	ACC CAUS OTH HAND TOOLS&IMPLEMENTS
E920.5	ACCIDENT CAUSED HYPODERMIC NEEDLE
E920.8	ACC CAUS OTH CUT&PIERC INSTRUM/OBJS
E920.9	ACC CAUS UNS CUT&PIERC INSTRUM/OBJ
E921.0	ACCIDENT CAUSED EXPLOSION BOILERS
E921.1	ACCIDENT CAUSED EXPLOSION GAS CYLS
E921.8	ACC CAUSED EXPLO OTH SPEC PRESS VES
E921.9	ACC CAUS EXPLO UNSPEC PRESS VESSEL
E922.0	ACCIDENT CAUSED BY HANDGUN
E922.1	ACCIDENT CAUSED BY SHOTGUN
E922.2	ACCIDENT CAUSED BY HUNTING RIFLE
E922.3	ACCIDENT CAUSED MILITARY FIREARMS
E922.4	ACCIDENT CAUSED BY AIR GUN
E922.5	ACCIDENT CAUSED BY PAINTBALL GUN
E922.8	ACC CAUSED OTH SPEC FIRARM MISSILE
E922.9	ACC CAUSED UNSPEC FIRARM MISSILE
E923.0	ACCIDENT CAUSED BY FIREWORKS
E923.1	ACCIDENT CAUSED BLASTING MATERIALS
E923.2	ACCIDENT CAUSED BY EXPLOSIVE GASES
E923.8	ACCIDENT CAUSED OTH EXPLOSIVE MATL
E923.9	ACC CAUS UNSPEC EXPLOSIVE MATERIAL
E924.0	ACC CAUS HOT LQDS&VAPORS INCL STEAM
E924.1	ACC CAUSED CAUSTIC&CORROSIVE SBSTNC
E924.2	ACCIDENT CAUSED BY HOT TAP WATER
E924.8	ACC CAUSED OTH HOT SUBSTANCE/OBJ
E924.9	ACC CAUSED UNSPEC HOT SUBSTANCE/OBJ
E925.0	ACC CAUSED BY DOMESTIC WIRING
E925.1	ACC CAUS ELECTRIC POWR GENERAT
E925.2	ACC CAUSED INDUST WIRING/MACHINE
E925.8	ACC CAUSED OTH ELECTRIC CURRENT
E925.9	ACC CAUSED UNSPEC ELECTRIC CURRENT
E926.0	EXPOSURE RADIOFREQUENCY RADIATION
E926.1	EXPSINFRARD RAD FROM HEATERS&LAMPS
E926.2	EXPOS VISIBLE&UV LIGHT SOURCES
E926.3	EXPOSURE X-RAY/GAMMA RAY
E926.4	EXPOSURE TO LASERS
E926.5	EXPOSURE TO RADIOACTIVE ISOTOPES
E926.8	EXPOSURE OTHER SPECIFIED RADIATION
E926.9	EXPOSURE TO UNSPECIFIED RADIATION

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E928.0	PROLONG STAY WEIGHTLESS ENVIRONMENT
E928.1	EXPOSURE TO NOISE
E928.2	ACCIDENT CAUSED BY VIBRATION
E928.3	ACCIDENTAL HUMAN BITE
E928.6	ENVIRON EXPOS HARMFUL ALGAE&TOXINS
E928.8	OTHER ACCIDENT
E928.9	UNSPECIFIED ACCIDENT
E929.0	LATE EFFECTS MOTOR VEHICLE ACCIDENT
E929.1	LATE EFFECTS OTH TRANSPORT ACCIDENT
E929.2	LATE EFFECTS ACCIDENTAL POISONING
E929.3	LATE EFFECTS OF ACCIDENTAL FALL
E929.4	LATE EFFECTS ACCIDENT CAUSED FIRE
E929.5	LATE EFF ACC DUE NATURAL&ENVIR FCT
E929.8	LATE EFFECTS OF OTHER ACCIDENTS
E929.9	LATE EFFECTS UNSPECIFIED ACCIDENT
E930.0	PCNS CAUS ADVRS EFF THERAPEUTIC USE
E930.1	ANTIFUNGAL ABXS CAUSE ADVRSE EFF
E930.2	CHLORAMPHENICAL CAUSE ADVRSE EFF
E930.3	ERYTHROMYCIN CAUSE ADVRSE EFF
E930.4	TETRACYCLINE CAUSE ADVRSE EFF
E930.5	CEPHALOSPORIN CAUSE ADVRSE EFF
E930.6	ANTIMYCOBACTERIAL CAUSE ADVRSE EFF
E930.7	ANTIMEOPLASTIC CAUSE ADVRSE EFF
E930.8	OTH SPEC ABXS CAUS ADVRS EFF TX USE
E930.9	UNSPEC ABX CAUS ADVRS EFF TX USE
E931.0	SULFONAMIDES CAUS ADVRS EFF TX USE
E931.1	ARSENIC ANTI-INF ADVRSE EFF TX USE
E931.2	METAL ANTI-INF ADVRSE EFF TX USE
E931.3	QUINOLINE CAUS ADVRSE EFF TX USE
E931.4	ANTIMALARIALS ADVRSE EFF TX USE
E931.5	OTH ANTPROTAZOAL ADVRSE EFF TX USE
E931.6	ANTHELMINTICS CAUS ADVRS EFF TX USE
E931.7	ANTIVIRAL RX CAUS ADVRS EFF TX USE
E931.8	OTH ANTIMYCOBAC ADVRSE EFF TX USE
E931.9	OTH&UNS ANTINFCT ADVRSE EFF TX USE
E932.0	CORTICOSTEROIDS ADVRSE EFF TX USE
E932.1	ANDROGENS CAUS ADVRSE EFF TX USE
E932.2	OVARIAN HORMONES ADVRSE EFF TX USE
E932.3	INSULIN/ANTIDIAB ADVRSE EFF TX USE
E932.4	ANT PITUITARY ADVRSE EFF TX USE

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E932.5	POST PITUITARY ADVRSE EFF TX USE
E932.6	PARATHYROID ADVRSE EFF TX USE
E932.7	THYROID & DERIV ADVRSE EFF TX USE
E932.8	ANTITHYROID AGT ADVRSE EFF TX USE
E932.9	OTH&UNS HORMONES ADVRSE EFF TX USE
E933.0	ANALLRG/ANTEMET ADVRSE EFF TX USE
E933.1	ANTINEOPLASTIC ADVRSE EFF TX USE
E933.2	ACIDIFYING AGENT ADVRSE EFF TX USE
E933.3	ALKALIZING AGENT ADVRSE EFF TX USE
E933.4	ENZYMES NEC CAUS ADVRS EFF TX USE
E933.5	VITS NEC CAUS ADVRS EFF TX USE
E933.6	DRUG ADV EFFCT ORAL BISPHTHOSPHONATES
E933.7	DRUG ADV EFFCT IV BISPHTHOSPHONATES
E933.8	SYSTEMIC AGT NEC ADVRSE EFF TX USE
E933.9	UNS SYS AGT CAUS ADVRS EFF TX USE
E934.0	IRON & COMPOUNDS ADVRSE EFF TX USE
E934.1	LIVER/ANTIANEMIC ADVRSE EFF TX USE
E934.2	ANTICOAG CAUS ADVRS EFF TX USE
E934.3	VIT K CAUS ADVRS EFF TX USE
E934.4	FIBRINOLYSIS AGT ADVRSE EFF TX USE
E934.5	ANTICOAG & COAG ADVRSE EFF TX USE
E934.6	GAMMA GLOB CAUS ADVRS EFF TX USE
E934.7	BLOOD PRODUCTS ADVRSE EFF TX USE
E934.8	OTH BLOOD AGENT ADVRSE EFF TX USE
E934.9	UNS BLOOD AGENT ADVRSE EFF TX USE
E935.0	HEROIN CAUS ADVRS EFF TX USE
E935.1	METHADONE CAUS AVERSE EFF TX USE
E935.2	OTH OPIATES&NARC ADVRSE EFF TX USE
E935.3	SALICYLATES CAUS ADVRS EFF TX USE
E935.4	AROM ANALGES NEC ADVRSE EFF TX USE
E935.5	PYRAZOLE DERIV ADVRSE EFF TX USE
E935.6	ANTIRHEUMATICS ADVRSE EFF TX USE
E935.7	NON-NARC ANALGES ADVRSE EFF TX USE
E935.8	OTH ANALGESICS ADVRSE EFF TX USE
E935.9	UNS ANALGESIC ADVRSE EFF TX USE
E936.0	OXAZOLIDIN DERIV ADVRSE EFF TX USE
E936.1	HYDANTOIN DERIV ADVRSE EFF TX USE
E936.2	SUCCINIMIDES CAUS ADVRS EFF TX USE
E936.3	OTH&UNS ANTCONVUL ADVRSE EFF TX USE
E936.4	ANTI-PARKINSON ADVRSE EFF TX USE

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E937.0	BARBITURATES CAUS ADVRS EFF TX USE
E937.1	CHLORAL HYDRATE ADVRSE EFF TX USE
E937.2	PARALDEHYDE CAUS ADVRS EFF TX USE
E937.3	BROMINE COMPNDS ADVRSE EFF TX USE
E937.4	METHAQUALONE ADVRSE EFF TX USE
E937.5	GLUTETHIMIDE ADVRSE EFF TX USE
E937.6	MIX SEDAT NEC CAUS ADVRS EFF TX USE
E937.8	OTH SEDAT/HYPNOT ADVRSE EFF TX USE
E937.9	UNS SEDAT/HYPNOT ADVRSE EFF TX USE
E938.0	CNS MUSC DEPRSSNT ADVRSE EFF TX USE
E938.1	HALOTHANE CAUS ADVRS EFF TX USE
E938.2	OTH GAS ANES CAUS ADVRSE EFF TX USE
E938.3	IV ANES CAUS ADVRS EFF TX USE
E938.4	UNS GEN ANES CAUS ADVRS EFF TX USE
E938.5	TOPIC/INFIL ANES ADVRSE EFF TX USE
E938.6	NERVE-BLOCK ANES ADVRSE EFF TX USE
E938.7	SP ANES CAUS ADVRS EFF TX USE
E938.9	UNS LOC ANES CAUS ADVRS EFF TX USE
E939.0	ANTIDEPTSSNT CAUS ADVRS EFF TX USE
E939.1	PHENOTHIAZ TRANQ ADVRSE EFF TX USE
E939.2	BUTYROPHEN TRANQ ADVRSE EFF TX USE
E939.3	OTH ANTIPSYCHOTC ADVRSE EFF TX USE
E939.4	BENZODIAZ TRANQ ADVRSE EFF TX USE
E939.5	OTH TRANQ CAUS ADVRS EFF TX USE
E939.6	HALLUCINOGENS ADVRSE EFF TX USE
E939.7	PSYCHOSTIMS CAUS ADVRS EFF TX USE
E939.8	OTH PSYCHOTROPIC ADVRSE EFF TX USE
E939.9	UNS PSYCHOTROPIC ADVRSE EFF TX USE
E940.0	ANALEPTICS CAUS ADVRS EFF TX USE
E940.1	OPIAT ANTAGONIST ADVRSE EFF TX USE
E940.8	OTH CNS STIMULNT ADVRSE EFF TX USE
E940.9	UNS CNS STIMULANT ADVRSE EFF TX USE
E941.0	CHOLINERGICS CAUS ADVRSE EFF TX USE
E941.1	PARASYMPATHOLYTC ADVRSE EFF TX USE
E941.2	SYMPATHOMIMETICS ADVRSE EFF TX USE
E941.3	SYMPATHOLYTICS ADVRSE EFF TX USE
E941.9	UNS AUTONOM AGT ADVRSE EFF TX USE
E942.0	CARD RHYTH REGUL ADVRSE EFF TX USE
E942.1	CARDIOTONICS ADVRSE EFF TX USE
E942.2	ANTIPEMICS ADVRSE EFF TX USE

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E942.3	GANG-BLK AGTS CAUS ADVRS EFF TX USE
E942.4	CORONARY VASODIL ADVRSE EFF TX USE
E942.5	OTH VASODILATORS ADVRSE EFF TX USE
E942.6	ANTIHYPERTEN AGT ADVRSE EFF TX USE
E942.7	ANTIVARICOSE ADVRSE EFF TX USE
E942.8	CAPILLARY-ACT ADVRSE EFF TX USE
E942.9	OTH&UNS CARDIOVAS ADVRSE EFF TX USE
E943.0	ANTACIDS CAUS ADVRSE EFF TX USE
E943.1	IRRIT CATHARTIC ADVRSE EFF TX USE
E943.2	EMOLL CATHARTICS ADVRSE EFF TX USE
E943.3	OTH CATHARTICS ADVRSE EFF TX USE
E943.4	DIGESTANTS CAUS ADVRS EFF TX USE
E943.5	ANTIDIARRHEA AGT ADVRSE EFF TX USE
E943.6	EMETICS CAUS ADVRS EFF TX USE
E943.8	OTH GI AGENT ADVRSE EFF TX USE
E943.9	UNS GI AGENT ADVRSE EFF TX USE
E944.0	MERCURY DIURETIC ADVRSE EFF TX USE
E944.1	PURINE DIURETICS ADVRSE EFF TX USE
E944.2	ACETAZOLAMIDE ADVRSE EFF TX USE
E944.3	SALURETICS CAUS ADVRS EFF TX USE
E944.4	OTH DIURETICS CAUS ADVRS EFF TX USE
E944.5	ELECTROLYTE AGT ADVRSE EFF TX USE
E944.6	OTH MINERAL SALT ADVRSE EFF TX USE
E944.7	URIC ACID METAB ADVRSE EFF TX USE
E945.0	OXYTOCIC AGTS CAUS ADVRS EFF TX USE
E945.1	SMOOTH MUSC RELX ADVRSE EFF TX USE
E945.2	SKELET MUSC RELX ADVRSE EFF TX USE
E945.3	OTH&UNS MUSC AGT ADVRSE EFF TX USE
E945.4	ANTITUSSIVES CAUS ADVRS EFF TX USE
E945.5	EXPECTORANTS CAUS ADVRS EFF TX USE
E945.6	ANTI-COMMON COLD ADVRSE EFF TX USE
E945.7	ANTIASTHMATICS ADVRSE EFF TX USE
E945.8	UNS RESP RX CAUS ADVRS EFF TX USE
E946.0	LOC ANTI-INFECTV ADVRSE EFF TX USE
E946.1	ANTIPRURITICS CAUS ADVRS EFF TX USE
E946.2	LOCAL ASTRINGENT ADVRSE EFF TX USE
E946.3	EMOLLIENT/DEMULC ADVRSE EFF TX USE
E946.4	HAIR/SCALP PREP ADVRSE EFF TX USE
E946.5	EYE ANTI-INF/RX ADVRSE EFF TX USE
E946.6	ENT ANTI-INF/RX ADVRSE EFF TX USE



**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E946.7	TOPIC DENTAL RX ADVRSE EFF TX USE
E946.8	OTH SKIN AGENT ADVRSE EFF TX USE
E946.9	UNS SKIN AGENT ADVRSE EFF TX USE
E947.0	DIETETICS CAUS ADVRS EFF TX USE
E947.1	LIPOTROPIC RX CAUS ADVRS EFF TX USE
E947.2	ANTIDOTES NEC ADVRSE EFF TX USE
E947.3	ALCOHOL DETER ADVRSE EFF TX USE
E947.4	PHARMACEUT EXCIP ADVRSE EFF TX USE
E947.8	OTH MEDICINAL ADVRSE EFF TX USE
E947.9	UNS MEDICINAL ADVRSE EFF TX USE
E948.0	BCG VACC CAUS ADVRS EFF TX USE
E948.1	TYPHOID VACCINE ADVRSE EFF TX USE
E948.2	CHOLERA VACC CAUS ADVRS EFF TX USE
E948.3	PLAGUE VACC CAUS ADVRS EFF TX USE
E948.4	TETANUS VACC CAUS ADVRS EFF TX USE
E948.5	DIPHTH VACC CAUS ADVRS EFF TX USE
E948.6	PERTUSSIS VACC ADVRSE EFF TX USE
E948.8	OTH&UNS BACT VACC ADVRSE EFF TX USE
E948.9	MIX BACT VACCINE ADVRSE EFF TX USE
E949.0	SMPOX VACC CAUS ADVRS EFF TX USE
E949.1	RABIES VACC CAUS ADVRS EFF TX USE
E949.2	TYPHUS VACC CAUS ADVRS EFF TX USE
E949.3	YELLOW FEVER VACC ADVRSE EFF TX USE
E949.4	MEASLES VACC CAUS ADVRS EFF TX USE
E949.5	POLIOMYEL VAC CAUS ADVRS EFF TX USE
E949.6	OTH&UNS VIRAL VAC ADVRSE EFF TX USE
E949.7	MIXED VIRAL-BACT ADVRSE EFF TX USE
E949.9	OTH&UNS BIOLOGIC ADVRSE EFF TX USE
E950.0	SUI&SLF-PSN-ANALGES-ANTIPYRET
E950.1	SUI&SLF-INFLICT POISN BARBITURATES
E950.2	SUI&SLF-INFLCT PSN-OTH SEDAT&HYPNOT
E950.3	SUI&SLF-INFLCT PSN-TRANQ&PSYCHOTROP
E950.4	SUI&SELF-POISON-OTH RX&MED SBSTNC
E950.5	SUI&SELF-POISON-UNS RX/MED SBSTNC
E950.6	SUI&SLF-PSN-AGRICUL-HORTICUL CHEM
E950.7	SUI&SLF-POISN CORROS&CAUSTIC SBSTNC
E950.8	SUI&SLF-INFLCT POISN-ARSENIC&COMPND
E950.9	SUI&SLF-POISN-UNS SOLID&LQD SBSTNC
E951.0	SUI&SELF-POISON GAS DSTRBD PIPLINE
E951.1	SUI&SLF-INFLCT PSN-LIQ PETRO GAS-MO

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E951.8	SUI&SLF-INFLICT PSN OTH UTILITY GAS
E952.0	SUI&SLF-INFLCT PSN-MTR VH EXHST GAS
E952.1	SUI&SLF-INFLCT PSN-OTH CARB MONOXID
E952.8	SUI&SELF-POISON-OTH SPEC GAS&VAPR
E952.9	SUI&SLF-INFLCT POISN-UNS GAS&VAPORS
E953.0	SUICIDE&SELF-INFLICT INJURY HANGING
E953.1	SUI&SLF-INJURY-SUFFOCAT-PLASTIC BAG
E953.8	SUI&SLF INJR HANG&SUFFOCAT OTH SPEC
E953.9	SUI&SLF INJR HANG&SUFFOCAT UNS
E954	SUICIDE&SELF-INFLICT INJURY SUBMERS
E955.0	SUI&SELF-INFLICT INJURY BY HANDGUN
E955.1	SUICIDE&SELF-INFLICT INJURY SHOTGUN
E955.2	SUI&SLF-INFLICT INJR HUNTING RIFLE
E955.3	SUI&SLF-INFLCT INJR-MILITRY FIRARMS
E955.4	SUICIDE&SLF-INFLICT INJR UNS FIRARM
E955.5	SUICIDE&SLF-INFLICT INJR EXPLOSIVES
E955.6	SUICIDE&SELF-INFLICT INJURY AIR GUN
E955.7	SUI&SLF-INFLICT INJR PAINTBALL GUN
E955.9	SUI&SLF-INJR-FIRARMS&EXPLOSIV UNS
E956	SUIE&SLF-INJURY-CUT&PIERC INSTRUM
E957.0	SUI&SLF-INFLCT INJR-JUMP-RES PREMIS
E957.1	SUI&SLF-INJR-JUMP-OTH MAN-MDE STRCT
E957.2	SUI&SLF-INFLCT INJR-JUMP-NTURL SITE
E957.9	SUI&SLF-INFLICT INJR JUMP UNS SITE
E958.0	SUI&SLF-INJR JUMP/LYING BFOR MV OBJ
E958.1	SUICIDE&SLF-INFLICT INJR BURNS FIRE
E958.2	SUICIDE&SELF-INFLICTED INJURY SCALD
E958.3	SUI&SLF-INFLICT INJR EXTRMS COLD
E958.4	SUICIDE&SLF-INFLICT INJR ELECCUTION
E958.5	SUIE&SLF-INFLCT INJR-CRASH MOTR VEH
E958.6	SUI&SLF-INFLCT INJR-CRASHING AIRC
E958.7	SUI&SLF-INJR CAUSTC SBSTNC NO PSN
E958.8	SUI&SELF-INFLCT INJR OTH SPEC MEANS
E958.9	SUICIDE&SLF-INFLCTED INJR UNS MEANS
E959	LATE EFFECTS SELF-INFLICTED INJURY
E960.0	UNARMED FIGHT OR BRAWL
E960.1	RAPE
E961	ASSAULT-CORROSV/CASTC SBSTNC NO PSN
E962.0	ASSAULT DRUGS&MEDICINAL SUBSTANCES
E962.1	ASSAULT OTH SOLID&LIQUID SUBSTANCES

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E962.2	ASSAULT BY OTHER GASES AND VAPORS
E962.9	ASSAULT BY UNSPECIFIED POISONING
E963	ASSAULT HANGING AND STRANGULATION
E964	ASSAULT BY SUBMERSION
E965.0	ASSAULT BY HANDGUN
E965.1	ASSAULT BY SHOTGUN
E965.2	ASSAULT BY HUNTING RIFLE
E965.3	ASSAULT BY MILITARY FIREARMS
E965.4	ASSAULT OTHER&UNSPECIFIED FIREARM
E965.5	ASSAULT BY ANTIPERSONNEL BOMB
E965.6	ASSAULT BY GASOLINE BOMB
E965.7	ASSAULT BY LETTER BOMB
E965.8	ASSAULT OTHER SPECIFIED EXPLOSIVE
E965.9	ASSAULT BY UNSPECIFIED EXPLOSIVE
E966	ASSAULT CUTTING&PIERCING INSTRUMENT
E967.0	CHLD&ADLT BATTR BY FATHER/STEFFATHR
E967.1	CHLD&ADLT BATTER&OTH MALT X OTH PERS
E967.2	CHLD&ADLT BATTR BY MOTHER/STPMOTHR
E967.3	CHLD&ADLT BATTR&OTH MALT X BY SPOUSE
E967.4	CHILD&ADLT BATTER&OTH MALT X CHILD
E967.5	CHILD&ADLT BATTER&OTH MALT X SIBLING
E967.6	CHLD&ADLT BATTR&OTH MALT X-GRNDPARNT
E967.7	CHLD&ADLT BATTER&OTH MALT X-OTH REL
E967.8	CHLD&ADLT BATTR&OTH MALT X-NON-REL
E967.9	CHLD&ADLT BATTER&OTH MALT X UNS PERS
E968.0	ASSAULT BY FIRE
E968.1	ASSAULT BY PUSHING FROM HIGH PLACE
E968.2	ASSAULT STRIKING BLUNT/TROWN OBJ
E968.3	ASSAULT BY HOT LIQUID
E968.4	CRIMINAL NEGLECT
E968.5	ASSAULT BY TRANSPORT VEHICLE
E968.6	ASSAULT BY AIR GUN
E968.7	ASSAULT BY HUMAN BITE
E968.8	ASSAULT BY OTHER SPECIFIED MEANS
E968.9	ASSAULT BY UNSPECIFIED MEANS
E969	LATE EFF INJR PRPOS INFLCT OTH PERS
E970	INJURY DUE LEGAL INTERVEN FIRARMS
E971	INJURY DUE LEGL INTERVEN EXPLOSIVES
E972	INJURY DUE LEGAL INTERVENTION GAS
E973	INJURY DUE LEGAL INTERVEN BLUNT OBJ

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E974	INJR-LEGL INTRVN CUT&PIERC INSTRUM
E975	INJR DUE LEGL INTRVN OTH SPEC MEANS
E976	INJURY DUE LEGL INTERVEN UNS MEANS
E977	LATE EFF INJURIES DUE LEGL INTERVEN
E978	LEGAL EXECUTION
E979.0	TERRORISM INVLV EXPLO MARINE WEAPON
E979.1	TERRORISM INVLV DESTRUC AIRCRAFT
E979.2	TERRORISM INVLV OTH EXPLOS&FRAGENTS
E979.3	TERRORISM INVOLVING FIRES
E979.4	TERRORISM INVOLVING FIREARMS
E979.5	TERRORISM INVOLVING NUCLEAR WEAPONS
E979.6	TERRORISM INVLV BIOLOGICAL WEAPONS
E979.7	TERRORISM INVOLVING CHEM WEAPONS
E979.8	TERRORISM INVOLVING OTHER MEANS
E979.9	TERRORISM SECONDARY EFFECTS
E980.0	PSN-ANALGES-ANTIPYRET-ANTIRHM-UNDET
E980.1	PSN BARBITURATS UNDETRM ACC/PURPOSE
E980.2	POISON-OTH SEDATIV-HYPNOTC-UNDET
E980.3	POISN-TRANQ-PSYCHOTROPIC-UNDET CAUS
E980.4	POISON-OTH RX&MED-UNDETERM CAUSE
E980.5	POISN-UNS DRUG/MEDICINE-UNDET CAUSE
E980.6	POISN-CORROSV-CAUST SBSTNC-UNDET
E980.7	POISN-AGRICULT-HORTCULT CHEM-UNDET
E980.8	POISN-ARSENC&COMPOUND-UNDETERM CAUS
E980.9	PSN-OTH&UNS SLID&LIQ SBSTNC-UNDET
E981.0	POISON-PIPELINE GAS-UNDETERM CAUS
E981.1	POISN-LIQ GAS MOBL CONTANR-UNDET
E981.8	POISON OTH UTILITY GAS-UNDETRM CAUS
E982.0	POISN-MOTR VEH EXHAUST GAS-UNDET
E982.1	POISON-OTH CARBN MONOXID-UNDET CAUS
E982.8	POISN-OTH SPEC GAS&VAPRS-UNDET CAUS
E982.9	POISON-UNS GASES&VAPORS-UNDET CAUS
E983.0	HANGING UNDET ACC/PRPOSLY INFLICTED
E983.1	SUFFOC PLSTC BAG-UNS ACC/SLF INFLCT
E983.8	STRNGULAT/SUFFOCAT-OTH-UNDETRM CAUS
E983.9	STRNGULAT/SUFFOCAT-UNS MEANS-UNDET
E984	SUBMERS UNDET ACC/PRPOSLY INFLICTED
E985.0	INJR-HNDGUN UNDET ACC/PURPOSE
E985.1	INJR-SHOTGUN UNDET ACC/PURPOSE
E985.2	INJR HUNT RIFLE UNDET ACC/PURPOSE

**SUDDEN AND SERIOUS CRITERIA LIST CODES**

APPLIES TO: • Priority Partners • Employer Health Programs (EHP) • US Family Health Plan

E985.3	INJR-MILITARY FIREARMS-UNDETRM CAUS
E985.4	INJR-UNS FIRARM UNDET ACC/PURPOSE
E985.5	INJR-EXPLOSIV UNDET ACC/PURPOSE
E985.6	INJR AIR GUN UNDET ACC/PURPOSE
E985.7	INJR PAINTBALL GUN ACC/PRPS INFLECT
E986	INJR-CUT-PIERCE INSTRUMENT-UNDET
E987.0	FALL-HI PLACE-RES PREMIS-UNDET CAUS
E987.1	FALL-HI PLACE-MAN-MADE STRUCT-UNDET
E987.2	FALL-HIGH PLACE-NATURL SITE-UNDET
E987.9	FALL-UNS HIGH PLACE-UNDETERM CAUSE
E988.0	INJR-JUMP/LYING BFOR MOVE OBJ-UNDET
E988.1	INJR-BURNS/FIRE UNDET ACC/PURPOSE
E988.2	INJR SCALD UNDET ACC/PRPSLY INFLECT
E988.3	INJR-EXTRM COLD UNDET ACC/PURPOSE
E988.4	INJR-ELECTROCUTE UNDET ACC/PURPOSE
E988.5	INJR-CRASH MOTOR VEH-UNDETERM CAUSE
E988.6	INJR CRASH AIRC UNDET ACC/PURPOSE
E988.7	INJ-CAUSTIC SBSTNC-NO POISN-UNDET
E988.8	INJR-OTH MEANS UNDET ACC/PURPOSE
E988.9	INJR-UNS MEANS UNDET ACC/PURPOSE
E989	LATE EFF INJR UNDET ACC/PURPOSE
E990.0	INJURY DUE WAR OP GASOLINE BOMB
E990.9	INJURY DUE WAR OP FROM OTH&UNS SRC
E991.0	INJURY DUE WAR OP FROM RUBR BULLETS
E991.1	INJURY DUE WAR OP FROM PELLETS
E991.2	INJURY DUE WAR OP FROM OTH BULLETS
E991.3	INJURY DUE WAR OP ANTIPERS BOMB
E991.9	INJURY DUE WAR OP OTH&UNS FRAGS
E997.0	INJURY DUE TO WAR OPERATIONS LASERS
E997.1	INJURY DUE WAR OP BIOLOGICAL WARFAR
E997.2	INJURY DUE WAR OP GASES FUMES&CHEMS
E997.8	INJR-OTH FORMS UNCONVNITION WARFAR
E997.9	INJR-UNS FORM UNCONVNITION WARFAR
E999.0	LATE EFFECT INJURY DUE WAR OP
E999.1	LATE EFFECT INJURY DUE TO TERRORISM
V01.82	EXPOSURE SARS-ASSOC CORONAVIRUS
V04.5	NEED PROPH VACC AGAINST RABIES
V61.21	COUNSELING VICTIM OF CHILD ABUSE
V70.1	GENERAL PSYC EXAM REQUEST AUTHORITY
V71.1	OBSERVATION SPCT MALIG NEOPLASM

