

Table 1: Codes to Identify Sickle Cell Disease

Condition Name	Hemoglobin Screening Result	ICD-9 Code(s)
Hb beta zero-thalassemia	Hb F only	282.49
Hb S beta-thalassemia	Hb F,S,A	282.41, 282.42
Hb SC-disease	Hb F,S,C	282.63, 282.64
Hb SD-disease	Hb F,S,D	282.68, 282.69
Hb SS-disease (sickle cell anemia)	Hb F,S	282.6, 282.61, 282.62

Table 2: Pain Assessments for Children with Sickle Cell Disease

Definitions	Procedure Code	Short Description	Long Description
Pain Assessment	709110	Emer treat of pain minor prp46	Emer treat of pain minor PRP46
Pain Assessment	1125F	Amnt pain noted pain prsnt	Pain severity quantified; pain present (ONC)1
Pain Assessment	1126F	Amnt pain noted none prsnt	Pain severity quantified; no pain present (ONC)1
Pain Assessment	G8440	Pain assess f/u pln document	Documentation of pain assessment (including location, intensity and description) prior to initiation of treatment or documentation of the absence of pain as a result of assessment through discussion with the patient including the use of a standardized tool and a follow-up plan is documented
Pain Assessment	G8509	Pain assess no f/u pln doc	Documentation of pain assessment (including location, intensity and description) prior to initiation of treatment or documentation of the absence of pain as a result of assessment through discussion with the patient including the use of a standardized tool; no documentation of a follow-up plan, reason not specified
Pain Assessment	G8512	Pain sev quant present	Pain severity quantified; pain present
Pain Assessment	G8730	Pain doc pos and plan	Pain assessment documented as positive utilizing a standardized tool and a follow-up plan is documented
Pain Assessment	G8731	Pain neg no plan	Pain assessment documented as negative, no follow-up plan is required

Table 3: Excluded Pain Assessment Procedure Codes

Definitions	Procedure Code	Short Description	Long Description
Pain Assessment	G8441	No document of pain assess	No documentation of pain assessment (including location, intensity and description) prior to initiation of treatment
Pain Assessment	G8442	Pt inelig pain assessment	Documentation that patient is not eligible for pain assessment
Pain Assessment	G8508	Pt inelig; pain asses no f/u	Documentation of pain assessment (including location, intensity and description) prior to initiation of treatment or documentation of the absence of pain as a result of assessment through discussion with the patient including the use of a standardized tool; no documentation of a follow-up plan, patient not eligible

Table 4: Excluded Sickle Cell Disease Diagnosis Codes

Condition Name	Hemoglobin Screening Result	ICD-9 Code(s)
Hb C beta-thalassemia	Hb F,C,A	282.49
Hb D beta-thalassemia	Hb F,D,A	282.49
Hb E beta-thalassemia	Hb F,E,A	282.49
Hb C-disease	Hb F,C	282.7
Hb E-disease	Hb F,E	282.7
Hb H-disease	Hb F,H	282.49
Hb SE-disease	Hb F,S,E	282.68, 282.69
Hb C-carrier	Hb F,A,C	282.7
Hb D-carrier	Hb F,A,D	282.7
Hb E-carrier	Hb F,A,E	282.7
Hb S (sickle)-carrier	Hb F,A,S	282.5