

# ICD-10-CM Coding for Mental and Behavioral Disorders

Shelly Cronin, Director ICD-10 Training



ICD-10-CM Coding for Mental and Behavioral Disorders

---

---

---

---

---

---

---

---

No part of this presentation may be reproduced or transmitted in any form or by any means (graphically, electronically, or mechanically, including photocopying, recording, or taping) without the expressed written permission of AAPC.



ICD-10-CM Coding for Mental and Behavioral Disorders

---

---

---

---

---

---

---

---

## AGENDA

- Documentation Concepts
- Use, Abuse, and Dependence
- Depression
- Bipolar Disorder
- Pervasive Developmental Disorders
- Behavioral and Emotional Disorders with Onset Usually Occurring in Childhood and Adolescence



ICD-10-CM Coding for Mental and Behavioral Disorders

---

---

---

---

---

---

---

---

### Documentation Concepts

- Approximately 21 unique concepts
  - Breaking down ICD-10-CM into concepts
- Concepts for Mental and Behavioral Disorders include:
 

<ul style="list-style-type: none"> <li>– Concepts include               <ul style="list-style-type: none"> <li>• Type</li> <li>• Caused by/Contributing factors</li> <li>• Associated with</li> <li>• Episode</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>– Concepts include               <ul style="list-style-type: none"> <li>• Severity</li> <li>• Temporal Factors</li> </ul> </li> </ul>
--	--

---

---

---

---

---

---

---

---

### Documentation Concepts

- Type – A description of the condition that is typically considered a “type of...”
  - Type 1 Diabetes or Pathological fracture
- Temporal Factors – A concept that is related to some time parameter associated with a condition
  - Acute, Chronic, Paroxysmal, Recurrent
- Caused by/Contributing Factors – A concept that relates the cause of a condition to another condition
  - Drugs, alcohol, physical disease

---

---

---

---

---

---

---

---

### Documentation Concepts

- Associated with – A description of the condition that is typically considered a “associated with...”
  - Intoxication, speech impediment, psychotic features
- Episode – A concept that is related to the status of a condition
  - In remission verses not
- Severity – A concept that specifies the acuity of the condition
  - Mild, moderate, severe

---

---

---

---

---

---

---

---

### Use, abuse, and dependence

- Codes located in categories F10-F19
  - 3<sup>rd</sup> character indicates substance used
  - 4<sup>th</sup> and 5<sup>th</sup> characters indicate the psychopathological syndrome
- Examples:
- F10.23- Alcohol dependence with withdrawal
  - F12.12- Cannabis abuse with intoxication




---

---

---

---

---

---

---

---

### Use, abuse, and dependence

#### Hierarchy

- If both use and abuse are documented, code only abuse
- If both abuse and dependence are documented, code only dependence
- If both use and dependence are documented, code only dependence
- If use, abuse and dependence are all documented, code only dependence




---

---

---

---

---

---

---

---

### Examples

- Patient presents to the office and the family practitioner documents alcohol use and abuse in the assessment.  
F10.10 Alcohol abuse, uncomplicated
- Patient presents to the office with uncomplicated alcohol dependence and cocaine abuse with cocaine-induced anxiety disorder.  
F10.20 Alcohol dependence, uncomplicated  
F14.180 Cocaine abuse with cocaine-induced anxiety disorder




---

---

---

---

---

---

---

---

### Alcohol use, abuse, and dependence

The codes for alcohol use, abuse, and dependence are found in the following subcategories:

- F10.1- Alcohol abuse
- F10.2- Alcohol dependence
- F10.9- Alcohol use, unspecified

---

---

---

---

---

---

---

---

### Alcohol use, abuse, and dependence

The codes are further broken down into the following:

- Uncomplicated
- With intoxication
- With withdrawal
- With alcohol-induced psychotic disorder
- With alcohol-induced persisting amnesic disorder
- With alcohol-induced persisting dementia
- With other alcohol-induced disorder
- With unspecified alcohol-induced disorder

---

---

---

---

---

---

---

---

### Example

- Patient presents for visit stating he is having issues with alcohol. He says that in the past 6 months, his drinking has increased markedly. He states that he needs to drink twice as much to get "buzzed". He states that he thinks about drinking more often and desires alcohol most times of the day. He has missed family gatherings and a few appointments due to being inebriated. He has come for help as he has tried to quit on his own and has not been successful.

F10.20 Alcohol dependence, uncomplicated

---

---

---

---

---

---

---

---

### Nicotine use and dependence

Nicotine dependence is broken down by:

- Tobacco product
  - Cigarettes (F17.21-)
  - Chewing tobacco (F17.22-)
  - Other tobacco product (F17.29-)

---

---

---

---

---

---

---

---

### Nicotine use and dependence

The category is further broken down by complication:

- Uncomplicated
- In remission
- With withdrawal
- With other nicotine-induced disorder
- With unspecified nicotine-induced disorder

---

---

---

---

---

---

---

---

### Nicotine use and dependence

Additional codes relating to nicotine in ICD-10-CM include:

- Z72.0, Tobacco use
- Z87.891, History of tobacco dependence
- Z77.22, Exposure to environmental tobacco smoke
- Z57.31, Occupational exposure to environmental tobacco smoke
- P96.81, Exposure to tobacco smoke in the perinatal period
- O99.33-, Tobacco use (smoking) during pregnancy, childbirth, and the puerperium

---

---

---

---

---

---

---

---

### Example

- Patient presents requesting a nicotine patch to assist her to stop smoking. She has been smoking for 12 years with a pack and half of cigarettes per day habit. She quit a week ago and is experiencing withdrawal symptoms of agitation, sleeplessness, and nervousness.

F17.213 Nicotine dependence, cigarettes, with withdrawal

---

---

---

---

---

---

---

---



### Example

- Patient comes in for asthma check-up. She has mild persistent asthma and a history of cigarette smoking. She quit smoking five years ago.

J45.30 Mild persistent asthma, uncomplicated  
Z87.891 History of tobacco dependence

---

---

---

---

---

---

---

---



### Depression

- CDC estimates 5% of Americans older than age 11 may have depression.
- It is a disorder of the brain.
- It usually starts between the ages of 15 and 30.
- More common in women

---

---

---

---

---

---

---

---



### Depression

In ICD-10-CM depression is classified by the following:

- Episode – Single or Recurrent
- Severity – Mild, Moderate, Severe
- With or Without psychotic features
- Remission status – Partial or Full

---

---

---

---

---

---

---

---

### Example

- Vera, a 38-year-old single woman presents to her primary care physician with symptoms of depression for the past year. These include feelings of sadness, anhedonia, significant loss of energy, psychomotor retardation, and difficulty sleeping. She denies any significant medical issues and states her symptoms began when her relationship of 8 years ended. Patient scored a 24 on the Beck Depression Inventory (BDI), supporting a diagnosis of major depressive disorder, single episode, moderate.

F32.1 Major depressive disorder, single episode, moderate

---

---

---

---

---

---

---

---

### Bipolar disorder

- Most commonly diagnosed in persons between the ages of 18 and 24
- Patients suffer dramatic mood swings from mania to depression

---

---

---

---

---

---

---

---

### Bipolar disorder

In ICD-10-CM bipolar disorder is classified by the following parameters:

- Type- Type I or Type II
- Current episode - Hypomanic, Manic, Depressed, Mixed
- Severity - Mild, Moderate, Severe
- With or without psychotic features
- Remission status - partial or full

---

---

---

---

---

---

---

---



ICD-10-CM Coding for Mental and Behavioral Disorders

### Example

- Julie presents today for a check-up on her bipolar disorder. She states that she has recently begun feeling depressed, not wanting to get out of bed, not showering, etc. She says she wanted to come in to "nip it in the bud". Patient admits to being noncompliant with taking her Lithium and Seroquel recently, which may have set off this mild depression. She states that she does not like to be dependent on it. Discussed the importance of taking medications properly and on time. We will increase her Seroquel for a short period and have the patient return in 1 week. Patient informed to contact our office immediately or present to the ED if she has thoughts of harming herself. Plan reviewed with her mother who will ensure patient takes her medication.

---

---

---

---

---

---

---

---



ICD-10-CM Coding for Mental and Behavioral Disorders

### Answer

F31.31Bipolar disorder, current episode depressed, mild

Z91.128 Patient's intentional underdosing of medication regimen for other reason

---

---

---

---

---

---

---

---



ICD-10-CM Coding for Mental and Behavioral Disorders

### Pervasive developmental disorders

Pervasive developmental disorders(PDDs), refers to a group of conditions that involve delays in the development of many basic skills, including:

- Ability to socialize with others
- Ability to communicate
- Ability to use imagination

---

---

---

---

---

---

---

---

### Pervasive developmental disorders

There are five types of pervasive development disorders , indicated below with the corresponding ICD-10-CM code:

- Autism –F84.0
- Asperger’s syndrome – F84.5
- Childhood disintegrative disorder – F84.3
- Rett’s syndrome – F84.2
- Pervasive development disorder, not otherwise specified (PDD-NOS) – F84.9

---

---

---

---

---

---

---

---

### Example

- Tommy is brought in by his mother today for a recheck of his autism. He has been working well with the speech/language therapist on communication, including sign language. He has also been working with occupational therapy on daily living skills. His communication has improved and his tantrums have decreased.

F84.0 Autistic disorder

---

---

---

---

---

---

---

---

### Behavioral and emotional disorders in childhood and adolescence

Category F90-F98

- The codes within these categories may be used regardless of the age of a patient.
- These disorders generally have onset within the childhood or adolescent years, but may continue throughout life or not be diagnosed until adulthood.

---

---

---

---

---

---

---

---

### Attention-deficit hyperactivity disorder

- ADHD is a problem with inattentiveness, over-activity, impulsivity, or a combination. For these problems to be diagnosed as ADHD, they must be out of the normal range for a child's age and development.
- ADHD is the most commonly diagnosed behavioral disorder of childhood. It affects about 3 - 5% of school-aged children.

---

---

---

---

---

---

---

---

### Attention-deficit hyperactivity disorder

There are three different types of ADHD, depending on which symptoms are strongest in the patient. Coding of ADHD in ICD-10-CM is broken down by these types:

- Predominantly inattentive type – F90.0
- Predominantly hyperactive type – F90.1
- Combined type- F90.2

---

---

---

---

---

---

---

---

### Example

- Joey comes in for a check-up today for his ADHD, mostly inattentive type. His mother states the neurofeedback treatments seem to be helping greatly. She no longer has to repeat things over and over to get him to do them. Joey is more able to follow instructions and is more attentive. Mother still does not desire Ritalin® for Joey. She thinks that the neurodevelopmental program is achieving the desired outcomes.

F90.0 Attention-deficit hyperactivity disorder, predominantly inattentive type




---

---

---

---

---

---

---

---

### Tic Disorders

- Tic disorders in ICD-10-CM are coded to type:
- **Transient tic disorder (F95.0):** Transient tic disorder is characterized by the presence of one or more tics for at least one month but less than one year.
- **Chronic motor or vocal tic disorder (F95.1):** While transient tics disappear within a year, chronic tics can last for a year or more.
- **Tourette's syndrome (F95.2):** Tourette's is characterized by the presence of both motor tics and vocal tics.




---

---

---

---

---

---

---

---

### Example

- Carrie is brought in by her mother for a check-up of her transient tic disorder. Her symptoms began six weeks ago. Her head and arm jerking have improved on clonidine. Her mother states that her stress levels have decreased as she is in the *swing* of 5<sup>th</sup> grade. Her mother ensures that she is getting enough sleep, which also helps her tics. Will begin to decrease medications and recheck in two weeks, sooner if needed.

– F95.0 Transient tic disorder




---

---

---

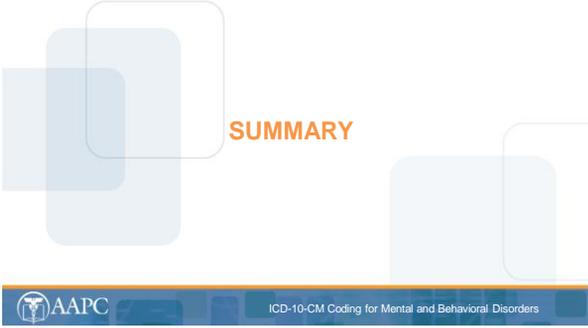
---

---

---

---

---



**SUMMARY**

AAPC ICD-10-CM Coding for Mental and Behavioral Disorders

---

---

---

---

---

---

---

---



*Thank you*

AAPC ICD-10-CM Coding for Mental and Behavioral Disorders

---

---

---

---

---

---

---

---