



Behavioral Health

Best Practice Documentation

Click on the desired Diagnoses link or press Enter to view all information.

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DSM-5 and ICD-10 Codes

- ◉ DSM-5 was released in May 2013 and took effect on 1/1/14
- ◉ DSM-5 is both ICD-9 and ICD-10 compatible. This means that you should already be using it to diagnose!
- ◉ Both DSM and ICD codes are used for diagnosis, and they are actually the same codes: the DSM is simply a guide to selecting the right ICD-10 code



Major Depressive Disorder

The diagnosis of Depression without identifying the three (3) key elements below is equivalent to Major Depressive Order, Single Episode in ICD-10 CM

- Type
 - Single episode
 - Recurrent
- Severity
 - Mild
 - Moderate
 - Severe without psychotic features
 - Severe with psychotic features
- If in Remission & include
 - In partial remission
 - In full remission



Major Depressive Disorder Documentation Example

Insufficient Documentation

- Major depressive disorder

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- Major depressive disorder, **single episode, severe**
- Major depressive disorder, **recurrent, in full remission**



Bipolar Disorder

- Specify Current Episode as:
 - ❑ Depressed
 - ❑ Hypomanic
 - ❑ Manic
 - ❑ Mixed
 - ❑ Severe depression
 - ❑ Organic
 - ❑ Single manic episode
 - ❑ Bipolar II
 - ❑ In remission (including most recent episode type from above)
 - Partial
 - Full

- Specify Severity:
 - ❑ Mild
 - ❑ Moderate
 - ❑ Severe
 - ❑ Severe



Bipolar Disorder Documentation Example

Insufficient Documentation

- Manic-depressive psychosis
- Bipolar disorder

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- Manic-depressive psychosis, **currently depressed, moderate**
- **Bipolar disorder, currently in partial remission, most recent episode, manic**



Eating Disorders

- Anorexia = Loss of Appetite (not an eating disorder)
- Anorexia Nervosa = specific eating disorder characterized further by type
- Anorexia Nervosa, specify type:
 - Atypical
 - Binge eating type
 - Binge eating with purging type
 - Restricting
- Bulimia = vague term that is equivalent to an unspecified eating disorder
- Bulimia Nervosa = specific eating disorder characterized further by type
- Using the word Nervosa with the diagnosis of Anorexia or Bulimia will provide clarity in reporting these diagnoses to the highest degree of specificity



Attention-Deficit Hyperactivity Disorder (ADHD)

- Specify type:
 - Predominantly inattentive
 - Predominantly hyperactive
 - Combined
 - Other



Posttraumatic Stress Disorder

- Specify Acuity:
 - Acute
 - Chronic



Substance Use, Abuse, Dependence

- Specify pattern of consumption and be consistent in your documentation:
 - Use
 - Abuse
 - Dependence
- When documenting the pattern of consumption be mindful that:
 - If the patient uses and abuses the same substance this will be captured as abuse.
 - If the patient abuses and is dependent on the same substance this will be captured as dependence.
 - If the patient uses, abuses, and is dependent on the same substance, this will be captured as dependence
 - If the patient uses and is dependent on the same substance this will be captured as dependence
- Document the association of the psychoactive substance with the patient's mental or behavioral disorder (e.g. Cocaine dependence with mood disorder, Sleep disorder due to amphetamine abuse)



Drug and Alcohol Withdrawal

- By definition a patient who is going through withdrawal is dependent on the substance they are abusing
- Conflicting documentation by the provider of Use, Abuse, and Dependence interchangeably in the setting of withdrawal will require additional clarification to determine the severity of illness related to your patient
- When documenting Withdrawal it must always be linked with Dependence
 - Alcohol Dependence being treated for withdrawal



Dementia

- Identify the type of dementia
 - Vascular dementia
 - Includes:
 - Arteriosclerotic
 - Multi-infarct
 - Dementia due to a specific disease, such as:
 - Alzheimer's Disease
 - Early Onset
 - Late Onset
 - Parkinson's Disease
 - Alcohol Dependence
 - AID's
- Document any associated Behavioral disturbance
 - Aggressive
 - Combative
 - Violent



Key Documentation Concepts

- Link diagnoses to the underlying physiologic or other underlying condition
- Specify use, abuse, or dependence when appropriate
- Document any associated manifestations or conditions
 - i.e., delirium, delusions, hallucinations, anxiety, mood disorders, etc.
- Document severity – mild, moderate, severe, severe with psychotic features when appropriate
- Document status – current, in remission