

BCA's Favorite Behavioral Health Diagnosis Codes A Work-in-Progress

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Section IV. Diagnostic Coding and Reporting Guidelines for Outpatient Services

These coding guidelines for outpatient diagnoses have been approved for use by hospitals/ providers in coding and reporting hospital-based outpatient services and provider-based office visits. Guidelines in Section I, Conventions, general coding guidelines and chapter-specific guidelines, should also be applied for outpatient services and office visits.

Information about the use of certain abbreviations, punctuation, symbols, and other conventions used in the ICD-10-CM Tabular List (code numbers and titles), can be found in Section IA of these guidelines, under “Conventions Used in the Tabular List.” Section I.B. contains general guidelines that apply to the entire classification. Section I.C. contains chapter-specific guidelines that correspond to the chapters as they are arranged in the classification. Information about the correct sequence to use in finding a code is also described in Section I.

The terms encounter and visit are often used interchangeably in describing outpatient service contacts and, therefore, appear together in these guidelines without distinguishing one from the other.

Though the conventions and general guidelines apply to all settings, coding guidelines for outpatient and provider reporting of diagnoses will vary in a number of instances from those for inpatient diagnoses, recognizing that:

The Uniform Hospital Discharge Data Set (UHDDS) definition of principal diagnosis does not apply to hospital-based outpatient services and provider-based office visits.

Coding guidelines for inconclusive diagnoses (probable, suspected, rule out, etc.) were developed for inpatient reporting and do not apply to outpatients.

A. Selection of first-listed condition

In the outpatient setting, the term first-listed diagnosis is used in lieu of principal diagnosis.

In determining the first-listed diagnosis the coding conventions of ICD-10-CM, as well as the general and disease specific guidelines take precedence over the outpatient guidelines.

Diagnoses often are not established at the time of the initial encounter/visit. It may take two or more visits before the diagnosis is confirmed.

The most critical rule involves beginning the search for the correct code assignment through the Alphabetic Index. Never begin searching initially in the Tabular List as this will lead to coding errors.

1. **Outpatient Surgery:** When a patient presents for outpatient surgery (same day surgery), code the reason for the surgery as the first-listed diagnosis (reason for the encounter), even if the surgery is not performed due to a contraindication.
2. **Observation Stay:** When a patient is admitted for observation for a medical condition, assign a code for the medical condition as the first-listed diagnosis. When a patient presents for outpatient surgery and develops complications requiring admission to observation, code the reason for the surgery as the first reported diagnosis (reason for the encounter), followed by codes for the complications as secondary diagnoses.

B. Codes from A00.0 through T88.9, Z00-Z99

The appropriate code(s) from A00.0 through T88.9, Z00-Z99 must be used to identify diagnoses, symptoms, conditions, problems, complaints, or other reason(s) for the encounter/visit.

C. Accurate reporting of ICD-10-CM diagnosis codes

For accurate reporting of ICD-10-CM diagnosis codes, the documentation should describe the patient’s condition, using terminology which includes specific diagnoses as well as symptoms, problems, or reasons for the encounter. There are ICD-10-CM codes to describe all of these.

D. Codes that describe symptoms and signs

Codes that describe symptoms and signs, as opposed to diagnoses, are acceptable for reporting purposes when a diagnosis has not been established (confirmed) by the provider. Chapter 18 of ICD-10-CM, Symptoms, Signs, and Abnormal Clinical and Laboratory Findings Not Elsewhere Classified (codes R00-R99) contain many, but not all codes for symptoms.

E. Encounters for circumstances other than a disease or injury

ICD-10-CM provides codes to deal with encounters for circumstances other than a disease or injury. The Factors Influencing Health Status and Contact with Health Services codes (Z00-Z99) are provided to deal with occasions when circumstances other than a disease or injury are recorded as diagnosis or problems. *See Section I.C.21. Factors influencing health status and contact with health services.*

F. Level of Detail in Coding

1. **ICD-10-CM codes with 3, 4, 5, 6 or 7 characters:** ICD-10-CM is composed of codes with 3, 4, 5, 6 or 7 characters. Codes with three characters are included in ICD-10-CM as the heading of a category of codes that may be further subdivided by the use of fourth, fifth, sixth or seventh characters to provide greater specificity.
2. **Use of full number of characters required for a code:** A three-character code is to be used only if it is not further subdivided. A code is invalid if it has not been coded to the full number of characters required for that code, including the 7th character, if applicable.

G. ICD-10-CM code for the diagnosis, condition, problem, or other reason for encounter/visit: List first the ICD-10-CM code for the diagnosis, condition, problem, or other reason for encounter/visit shown in the medical record to be chiefly responsible for the services provided. List additional codes that describe any coexisting conditions. In some cases the first-listed diagnosis may be a symptom when a diagnosis has not been established (confirmed) by the physician.

H. Uncertain diagnosis: Do not code diagnoses documented as “probable”, “suspected,” “questionable,” “rule out,” or “working diagnosis” or other similar terms indicating uncertainty. Rather, code the condition(s) to the highest degree of certainty for that encounter/visit, such as symptoms, signs, abnormal test results, or other reason for the visit. **Please note:** This differs from the coding practices used by short-term, acute care, long-term care and psychiatric hospitals.

I. Chronic diseases: Chronic diseases treated on an ongoing basis may be coded and reported as many times as the patient receives treatment and care for the condition(s)

J. Code all documented conditions that coexist

Code all documented conditions that coexist at the time of the encounter/visit, and require or affect patient care treatment or management. Do not code conditions that were previously treated and no longer exist. However, history codes (categories Z80- Z87) may be used as secondary codes if the historical condition or family history has an impact on current care or influences treatment.

K. Patients receiving diagnostic services only

For patients receiving diagnostic services only during an encounter/visit, sequence first the diagnosis, condition, problem, or other reason for encounter/visit shown in the medical record to be chiefly responsible for the outpatient services provided during the encounter/visit. Codes for other diagnoses (e.g., chronic conditions) may be sequenced as additional diagnoses.

For encounters for routine laboratory/radiology testing in the absence of any signs, symptoms, or associated diagnosis, assign Z01.89, Encounter for other specified special examinations. If routine testing is performed during the same encounter as a test to evaluate a sign, symptom, or diagnosis, it is appropriate to assign both the Z code and the code describing the reason for the non-routine test.

For outpatient encounters for diagnostic tests that have been interpreted by a physician, and the final report is available at the time of coding, code any confirmed or definitive diagnosis(es) documented in the interpretation. Do not code related signs and symptoms as additional diagnoses.

Please note: This differs from the coding practice in the hospital inpatient setting regarding abnormal findings on test results.

L. Patients receiving therapeutic services only

For patients receiving therapeutic services only during an encounter/visit, sequence first the diagnosis, condition, problem, or other reason for encounter/visit shown in the medical record to be chiefly responsible for the outpatient services provided during the encounter/visit. Codes for other diagnoses (e.g., chronic conditions) may be sequenced as additional diagnoses.

The only exception to this rule is that when the primary reason for the admission/encounter is chemotherapy or radiation therapy, the appropriate Z code for the service is listed first, the diagnosis or problem for which the service is being performed listed second.

M. Patients receiving preoperative evaluations only

For patients receiving preoperative evaluations only, sequence first a code from subcategory Z01.81, Encounter for pre-procedural examinations, to describe the pre-op consultations. Assign a code for the condition to describe the reason for the surgery as an additional diagnosis. Code also any findings related to the pre-op evaluation.

N. Ambulatory surgery

For ambulatory surgery, code the diagnosis for which the surgery was performed. If the postoperative diagnosis is known to be different from the preoperative diagnosis at the time the diagnosis is confirmed, select the postoperative diagnosis for coding, since it is the most definitive.

O. Routine outpatient prenatal visits

See Section I.C.15. Routine outpatient prenatal visits.

P. Encounters for general medical examinations with abnormal findings

The subcategories for encounters for general medical examinations, Z00.0- and encounter for routine child health examination, Z00.12-, provide codes for with and without abnormal findings. Should a general medical examination result in an abnormal finding, the code for general medical examination with abnormal finding should be assigned as the first-listed diagnosis. An examination with abnormal findings refers to a condition/diagnosis that is newly identified or a change in severity of a chronic condition (such as uncontrolled hypertension, or an acute exacerbation of chronic obstructive pulmonary disease) during a routine physical examination. A secondary code for the abnormal finding should also be coded.

Q. Encounters for routine health screenings

See Section I.C.21. Factors influencing health status and contact with health services, Screening

See also Disease Specific Guidelines (e.g., diabetes, HTN etc. in Section A in your ICD-10 book or on CDC website.

End of HIPPA ICD-10-CM Section IV Guidelines

See section I.C.19.e for coding of adverse effects and poisoning, and section I.C.20 for external cause code reporting.

5. Chapter 5: Mental, Behavioral and Neurodevelopmental disorders (F01 – F99)

a. Pain disorders related to psychological factors

Assign code F45.41, for pain that is exclusively related to psychological disorders. As indicated by the Excludes 1 note under category G89, a code from category G89 should not be assigned with code F45.41.

Code F45.42, Pain disorders with related psychological factors, should be used with a code from category G89, Pain, not elsewhere classified, if there is documentation of a psychological component for a patient with acute or chronic pain.

See Section I.C.6. Pain

b. Mental and behavioral disorders due to psychoactive substance use

1) In Remission

Selection of codes for “in remission” for categories F10-F19, Mental and behavioral disorders due to psychoactive substance use (categories F10-F19 with -.11, -.21) requires the provider’s clinical judgment. The appropriate codes for “in remission” are assigned only on the basis of provider documentation (as defined in the Official Guidelines for Coding and Reporting), unless otherwise instructed by the classification.

Mild substance use disorders in early or sustained remission are classified to the appropriate codes for substance abuse in remission, and moderate or severe substance use disorders in early or sustained remission are classified to the appropriate codes for substance dependence in remission.

2) Psychoactive Substance Use, Abuse and Dependence

When the provider documentation refers to use, abuse and dependence of the same substance (e.g. alcohol, opioid, cannabis, etc.), only one code should be assigned to identify the pattern of use based on the following hierarchy:

- If both use and abuse are documented, assign only the code for abuse
- If both abuse and dependence are documented, assign only the code for dependence
- If use, abuse and dependence are all documented, assign only the code for dependence
- If both use and dependence are documented, assign only the code for dependence.

3) Psychoactive Substance Use, *Unspecified*

As with all other **unspecified** diagnoses, the codes for **unspecified** psychoactive substance use (F10.9-, F11.9-, F12.9-, F13.9-, F14.9-, F15.9-, F16.9-, **F18.9-**, **F19.9-**) should only be assigned based on provider documentation and when they meet the definition of a reportable diagnosis (see Section III, Reporting Additional Diagnoses). These codes are to be used only when the psychoactive substance use is associated with a physical, mental or behavioral disorder, and such a relationship is documented by the provider.

c. Factitious Disorder

Factitious disorder imposed on self or Munchausen’s syndrome is a disorder in which a person falsely reports or causes his or her own physical or psychological signs or symptoms. For patients with documented factitious disorder on self or Munchausen’s syndrome, assign the appropriate code from subcategory F68.1-, Factitious disorder imposed on self.

Munchausen’s syndrome by proxy (MSBP) is a disorder in which a caregiver (perpetrator) falsely reports or causes an illness or injury in another person (victim) under his or her care, such as a child, an elderly adult, or a person who has a disability. The condition is also referred to as “factitious disorder imposed on another” or “factitious disorder by proxy.” The perpetrator, not the victim, receives this diagnosis. Assign code F68.A, Factitious disorder imposed on another, to the perpetrator’s record. For the victim of a patient suffering from MSBP, assign the appropriate code from categories T74, Adult and child abuse, neglect and other maltreatment, confirmed, or T76, Adult and child abuse, neglect and other maltreatment, suspected.

See Section I.C.19.f. Adult and child abuse, neglect and other maltreatment

PSYCHIATRIC DX CODE SHEET

ADHD - Features are predominately...(choose)	Code	Major Depressive Disorders (MDD)	Code
ADHD; inattentive type	F90.0	MDD, single episode code choices	
ADHD; hyperactive type	F90.1	<i>"Single episode" is the first-ever episode. DSM-5, pg 162: Dx code for MDD based on single vs recurrent and severity.</i>	
ADHD; combined (inattentive and hyperactive types)	F90.2		
ADHD; other type, which is not considered as above three types	F90.8	MDD, single episode; <i>(The patient's 1st Dx of MDD - may last months/years)</i>	
Anxiety and Related Dx's F40 F41 F43 and F93?		MDD, single episode; mild severity HCC 58 F32.0	
Anxiety; generalized	F41.1	MDD, single episode, moderate severity	HCC 58 F32.1
Anxiety, mixed (with prominent features of other disorder)	F41.3	MDD, single; severe, WITHOUT psychotic symptoms	HCC 58 F32.2
Panic disorder; w/o agoraphobia (panic attack) DEF in note	F41.0	MDD, single; severe, WITH psychotic symptoms	HCC 58 F32.3
with agoraphobia	F40.01	MDD, single episode; in PARTIAL remission	HCC 58 F32.4
Separation anxiety (of childhood)	F93.0	MDD, single episode; in FULL remission	HCC 58 F32.5
Other specified anxiety disorder (doc in record, but no code)	F41.8	MDD, single episode; severity cannot be specified avoid No	F32.9
Social phobia (anxiety) disorder, generalized	F40.11	MDD, recurrent episode code choices (more common than single episode)	
Acute stress reaction	F43.0	<i>An "episode" likely to last many mos/years. DSM-5, pg 162: "recurrent" = interval of ≥ 2 consecutive months between separate episodes in which criteria for MDD are not met.</i>	
Post-traumatic Stress Disorder			
PTSD; acute	F43.11	MDD, recurrent episode; mild	HCC 58 F33.0
PTSD; chronic	F43.12	MDD, recurrent episode; & moderate severity	HCC 58 F33.1
Anxiety; unspecified avoid	F41.9	MDD, recurrent; severe, WITHOUT psychotic symptoms	HCC 58 F33.2
Adjustment Disorders F43.2			
Adjustment disorder; with depressed mood (grief reaction)	F43.21	MDD, recurrent episode in PARTIAL remission	HCC 58 F33.41
with anxiety	F43.22	MDD, recurrent episode in FULL remission	HCC 58 F33.42
with mixed mood (anxiety & depression)	F43.23	MDD, other recurrent depressive disorder (specified)	HCC 58 F33.8
with disturbance of conduct	F43.24	MDD, recurrent episode, unspecified avoid HCC 58	F33.9
with mixed disturbance (emotion/conduct)	F43.25	Other Depressive Episodes (Added 2016)	
with other symptoms not noted in available codes	F43.29	• Premenstrual dysphoric disorder	No F32.81
Adjustment disorder unspecified avoid	F43.20	• Other specified depressive episode (specified in record)	No F32.89
Bipolar Disorders F31		Obsessive-compulsive disorder (OCD) F42	
<i>Consider: manic, depressed or mixed, & mild, moderate or severe. If "severe" select code based on presence/absence of psychosis.</i>		• Mixed obsession thoughts and acts	F42.2
		• Hoarding disorder	F42.3
Bipolar, current episode is manic & mild HCC 58	F31.11	• Excoriation (skin-picking) disorder	F42.4
Bipolar; current episode is: manic & moderate HCC 58	F31.12	• Other obsessive-compulsive dis. (documented, but not listed above)	F42.8
manic & severe WITHOUT psychotic features HCC 58	F31.13	• Obsessive-compulsive disorder, unspecified avoid	F42.9
manic & severe and WITH psychotic features HCC 58	F31.2	Persistent mood (affective) disorders F34	
Bipolar, current episode depressed & mild HCC 58	F31.31	Cyclothymic disorder	F34.0
current episode depressed & moderate HCC 58	F31.32	Dysthymic disorder DSM5 = persistent depressive disorder	F34.1
depressed but WITHOUT psychotic features HCC 58	F31.4	• Disruptive mood dysregulation disorder HCC 58	F34.81
depressed and WITH psychotic features HCC 58	F31.5	• Other specified persistent mood disorder HCC 58	F34.89
Bipolar, current episode mixed (manic & dep.) mild HCC 58	F31.61	Mood disorder, unspec. (Active psychosis NOS) avoid HCC 58	F39
Bipolar; current episode mixed & moderate HCC 58	F31.62	Personality Disorders F60	
mixed & severe, WITHOUT psychotic features HCC 58	F31.63	Antisocial	F60.2
mixed & severe, and WITH psychotic features HCC 58	F31.64	Avoidant	F60.6
Bipolar, current episode hypomanic HCC 58	F31.0	Borderline	F60.3
Bipolar Disorders IN REMISSION (Partial or Full Remission)		Dependent	F60.7
Bipolar PARTIAL remission		Histrionic	F60.4
hypomanic HCC 58 F31.71		Narcissistic	F60.81
manic HCC 58 F31.73		Obsessive-compulsive	F60.5
depressed HCC 58 F31.75		Paranoid	F60.0
mixed HCC 58 F31.77		Schizoid	F60.1
Bipolar disorder, unspecified avoid HCC 58	F31.9	Schizophrenia/Schizoaffective	
Bipolar II disorder HCC 58	F31.81	Paranoid HCC 57	F20.0
Manic Episode F30		Disorganized HCC 57	F20.1
Manic episode w/o psychotic symptoms mild HCC 58	F30.11	Catatonic HCC 57	F20.2
Manic episode w/o psychotic symptoms moderate HCC 58	F30.12	Undifferentiated HCC 57	F20.3
Manic episode w/o psychotic symptoms severe HCC 58	F30.13	Residual HCC 57	F20.5
Manic episode with psychotic symptoms severe HCC 58	F30.2	Schizophreniform disorder HCC 57	F20.81
Other manic episodes (like hypomania) HCC 58	F30.8	Schizophrenia (a documented but no code exists) HCC 57	F20.89
Manic episode in PARTIAL remission HCC 58	F30.3	Schizoaffective disorder, bipolar type HCC 57	F25.0
Manic episode in FULL remission HCC 58	F30.4	depressive type HCC 57	F25.1
Manic episode, unspecified avoid HCC 58	F30.9	other specified (documented type, not bipolar or depressive) HCC 57	F25.8
		Schizoaffective disorder, unspecified avoid HCC 57	F25.9
Screening for Mental Health and Behavioral Disorders		Factitious Disorders	
• Screening; mental health & behavioral disorders, unspec	Z13.30	Δ Factitious disorder imposed on self; unspecified	F68.10
• depression	Z13.31	Δ with predominantly psychological signs and symptoms	F68.11
• maternal depression	Z13.32	Δ with predominantly physical signs and symptoms	F68.12
• other mental health and behavioral disorders	Z13.39	Δ with combined psychological physical signs and symptoms	F68.13
• autism	Z13.41	• Factitious disorder imposed on another	F68.A

PSYCHIATRIC DX CODE SHEET

CHILD MALTREATMENT		ADULT MALTREATMENT	
Code	Code	Code	Code
<i>Replace dash with A -initial, D-FU or S-sequela</i>		<i>Replace dash with A -initial, D-FU or S-sequela</i>	
Child physical abuse, confirmed	T74.12X -	Adult physical abuse, confirmed	T74.11X -
Δ Psychological abuse, confirmed	T74.32X -	Δ Psychological abuse, confirmed	T74.31X -
Sexual abuse, confirmed	T74.22X -	sexual	T74.21X -
Child neglect	T74.02X -	other abuse and neglect	T74.01X -
Shaken infant syndrome	T74.4XX -	Adult neglect (nutritional)	T74.01X -
• Sexual exploitation, confirmed	T74.52X-	• Sexual exploitation, confirmed	T74.51X-
• Sexual exploitation, suspected	T76.52X-	• Sexual exploitation, suspected	T76.51X-
• Labor exploitation, confirmed	T74.62X-	• Labor exploitation, confirmed	T74.61X-
• Labor exploitation, suspected	T76.62X-	• Labor exploitation, suspected	T76.61X-
Other Child Dx's		Adult Related Info Dx Codes	
Autistic disorder	F84.0	Perpetrator of spousal/partner abuse	Z69.12
Heller's syndrome	F84.3	Parent child problems, unspecified.	Z71.89
Child psychosis NOS	F84.9	Perpetrator of parental child abuse	Z69.011
Schizophrenia, childhood type	F84.5	Parent-biological child problem	Z71.89
Child Conduct Disorders		Counseling: parent-adopted child problem	Z71.89
Oppositional defiant disorder	F91.3	Counseling: parent-foster child problem	Z71.89
Adolescent onset type	F91.2	Parental overprotection	Z62.1
Childhood onset type	F91.1	Problems with aged parents or in-laws	Z63.79
Other conduct disorders	F91.8	Alcoholism in family	Z63.72
Unspecified	F91.9	Substance abuse in family	Z63.72
Disorder - Social Functioning Child/Adolescence		Personal current military deployment	Z65.8
Selective mutism	F94.0	Personal Hx return from military deploy	Z65.5
Reactive attachment disorder	F94.1	Occupational concerns, loss of job	Z56.0
Disinhibited attachment disorder	F94.2	Change of job	Z56.1
Other childhood disorder	F94.8	Threat of loss of job	Z56.2
Child - Additional Social Status Dx's		Stressful work schedule	Z56.3
Parent child problems, unspecified.	Z71.89	Discord with boss and workmates	Z56.4
Parent-biological child problem	Z71.89	Difficult conditions at work	Z56.5
Counseling-parent-adopted child problem	Z71.89	Other physical and mental strain	Z56.6
Counseling-parent-foster child problem	Z71.89	Social maladjustment	Z60.3
Other parent-child problems	Z62.820	Legal circumstances	Z65.3
Other specific problem related to upbringing	Z62.898	Refusal of tx for religious reasons	Z53.1
Alcoholism in family	Z63.72	Bereavement (disappearance/death)	Z63.4
Substance abuse in family	Z63.72	Religious or spiritual problem	Z65.8
Other psychosocial circumstances	Z65.8	Life circumstance problem	Z65.8
Social maladjustment	Z60.3	Person awaiting admission to facility	Z75.0
Legal circumstances	Z65.3	Exploitation Dx Codes (Any age)	
Refusal of tx for religious reasons	Z53.1	• Exam and observation; following forced sexual exploitation	Z04.81
Relational problem, NOS	Z65.8	• following forced labor exploitation	Z04.82
Bereavement, uncomplicated	Z63.4	• Forced labor or sexual exploitation in childhood	Z62.813
Counseling perpetrator of physical/sexual abuse	Z69.021	• Forced labor or sexual exploitation	Z91.42
Religious or spiritual problem	Z65.8	Emotional State Dx Codes (Any age)	
Life circumstance problem	Z65.8	Nervousness	R45.0
Personal History of Mental Disorders (Any age)		Irritability & Anger	R45.4
Affective disorders	Z86.59	Impulsiveness	R45.87
Neurosis	Z86.59	Emotional Liability	R45.86
Alcoholism <i>HCC 55</i>	F10.21	Demoralization/Apathy	R45.3
Combat and operational stress	Z86.51	Other emotional state	R45.89
Other mental disorders	Z86.59	Cognitive Defects (Any age)	
Unspecified mental disorder <i>avoid</i>	Z86.59	Attention/concentration	R41.840
Family hx of psychiatric condition	Z81.8	Cognitive communication	R41.841
Other/Miscellaneous Dx's (Any Age)		Visuospatial	R41.842
Insomnia	G47.00	Psychomotor	R41.843
Hypersomnia <i>Several codes available Check F51.0 - F51.9</i>	F51.11	Frontal lobe/executive function	R41.844
Self mutilation (personal hx)	Z91.5	Other cognitive deficits	R41.89
Noncompliance	Z91.19	Dementia in disease classified elsewhere	F02.80
Anorexia nervosa	F50.00	<i>Code first, underlying condition</i>	<i>code first</i>
Bulimia nervosa	F50.2	with behavioral disturbances	F02.81
Intellectual Disabilities; mild	F70	(OB) Puerperium Mental & Behavioral Disorders	
moderate	F71	• Postpartum depression	F53.0
severe	F72	• Peurperal psychosis	F53.1
profound	F73		

PSYCHIATRIC DX CODE SHEET

Signs and Symptoms (Any age)	Code	Dx - Medication Management	Code also clinical condition(s)	Code
Memory loss	R41.3	Code:	Therapeutic drug level monitoring	Z51.81
Excessive crying	R45.83	Code +	Long term (current) drug therapy	Z79.899
Altered mental status	R41.82	Code +	Long term (current) use of opiate analgesic	Z79.891
Other general symptoms	R68.89	Code also the medical/psych diagnosis(es)		See code
Lack of coordination	R27.9	Underdosing of Prescribed Medication by Patient (requires 2 codes)		
Abnormal weight gain	R63.5	Refer these cases to coder for code assignment		
Abnormal weight loss	R63.4	Code first, underdosing of medication (T36-T50) with fifth or sixth character of "6", then code intent and reason (below)		
Other speech disturbance	R47.89			
Senility w/o mention psychosis	R41.81	1. Look up med or med class in ICD		TXX.XXX -
Headache	R51	When assigning the "T" code, the 7th character will be;		
Sleep disturbance	G47.9	"A" Initial eval of this med management, "D" FU or "S" Sequela		
Hallucinations	R44.3	Patient Medication Noncompliance by Self Underdosing of;		
Dizziness/giddiness	R42	Replace dash (-) w/A=initial (active tx); D=FU (healing); or S=sequela		
Decreased libido	R68.82	tetracyclic antidepressants		T43.026 -
Fatigue	R53.83	tricyclic antidepressants		T43.016 -
Generalized pain	R52	other antidepressant		T43.296 -
Night terrors (child)	F51.4	antipsychotics (phenothiazine)		T43.3x6 -
Nicotine Dependence vs Tobacco Use and Exposure		amphetamines		T43.626 -
Cigarette , uncomplicated (no related illness)	F17.210	other psychostimulant		T43.696 -
in remission	F17.211	antipsychotics and neuroleptics		T43.596 -
in withdrawal	F17.213	barbiturates		T42.3x6 -
Vapor or "Other" uncomplicated	F17.290	benzodiazepines		T42.4x6 -
in remission	F17.291	butyrophenone/thiothixene narcoleptics		T43.4x6 -
in withdrawal	F17.293	cannabis		T40.7x6 -
Chewing tobacco , uncomplicated	F17.220	MAOIs		T43.1x6 -
in remission	F17.221	methadone		T40.3x6 -
in withdrawal	F17.223	methyphenidate (ADD)		T43.636 -
2nd hand tobacco smoke exposure	Z77.22	narcotics (synthetic)		T40.4x6 -
Occupational tobacco smoke exposure	Z57.31	opium		T40.0x6 -
History of tobacco dependence	Z87.891	other opioid		T40.2x6 -
Tobacco use, [no dependence] <i>avoid</i>	Z72.0	psychotropic (other)		T43.8x6 -
"PROVISIONAL DX" / "RULE OUT DX" TODAY??		SSRIs		T43.226 -
<i>ICD-10 Guidelines prohibit assignment of a diagnosis when that Dx. is only being "considered" at this time. One might consider assignment of R69 in cases where a definitive diagnosis cannot yet be assigned. R69 may or may not represent reimbursement problems, Coder/biller should monitor.</i>		2. Code also intent and reason from self underdosing		
		INTENTIONAL underdosing of med(s) by patient;		
		due to financial hardship		Z91.120
		for any other reason		Z91.128
Mental illness, NOS	F99	UNINTENTIONAL underdosing by patient;		
Illness, unspecified	R69	due to age-related debility		Z91.130
		for any other reason		Z91.138
		Other Patient Noncompliance Diagnoses		
		Other med. noncompliance (e.g., self overdosing)		Z91.14
		Noncompliance involving other than medication		Z91.19
		Noncompliance with diet		Z91.11
Social Determinates				
Illiteracy and low-level literacy	Z55.0	Foster care (status)		Z62.21
Underachievement in school	Z55.3	Family disrupt; due to military deployment		Z63.31
Edu. maladjustment, discord w/teachers & classmates	Z55.4	due to other absence of family member		Z63.32
Unemployment, unspecified	Z56.0	due to divorce/legal separation		Z63.5
Change of job	Z56.1	due to return from military deployment		Z63.71
Threat of job loss	Z56.2	Problem related to primary support group, unspecified		Z63.9
Discord with boss and workmates	Z56.4	Conviction civil/criminal proceedings w/o imprisonment		Z65.0
Other physical and mental strain related to work	Z56.6	Imprisonment and other incarceration		Z65.1
Homelessness	Z59.0	Lack of physical exercise		Z72.3
Inadequate housing	Z59.1	Inappropriate diet and eating habits		Z72.4
Person living in residential institution	Z59.3	Burn-out		Z73.0
Lack of adequate food and safe drinking water	Z56.4	Type A behavior pattern		Z73.1
Extreme poverty	Z59.5	Stress, not elsewhere classified		Z73.3
Insufficient social insurance and welfare support	Z59.7	Inadequate social skills, not elsewhere classified		Z73.4
Other housing/economic circumstance	Z59.8	Social role conflict, not elsewhere classified		Z73.5
Problems related to living alone	Z60.2	Limitation of activities due to disability		Z73.6
Acculturation difficulty	Z60.3	No household member to render care		Z74.2
Social exclusion and rejection	Z60.4	Holiday relief care		Z75.5
Other problems related to social environment	Z60.8	Personal history of adult physical and sexual abuse		Z91.410

CHRONIC PAIN AND SUBSTANCE ABUSE DX CODE SHEET

Chronic Pain & Medication Management	Code	Cannabis Dependence (DSM "moderate / severe")	Code
<i>Coding chronic pain management: List 1st the chronic pain Dx, then the clinical reason Dx, followed by "Therapeutic monitoring" Dx, and finally High-risk medication Dx, if appropriate. See 1-4 below.</i>		Cannabis dependence; uncomplicated	HCC 55 F12.20
		Cannabis dependence; in remission	HCC 55 F12.21
		Cannabis dependence; with withdrawal	F12.23
		with cannabis-induced; with anxiety disorder	HCC 55 F12.280
1. Chronic Pain Syndrome	G89.4	with psychotic disorder with delusions	HCC 54 F12.250
Chronic Pain, unspecified	G89.29	with psychotic disorder with hallucinations	HCC 54 F12.251
due to; trauma	G89.21	Cannabis dependence with intoxication; uncomplicated	HCC 55 F12.220
neoplasm related	G89.3	with delirium	HCC 55 F12.221
2. Common conditions causing chronic pain		with perceptual disturbance	HCC 55 F12.222
Arthropathy	M12.9	Cannabis Use (w/o abuse or dependence) & Cannabis Poisoning	
Fibromyalgia	M79.7	Cannabis use, unspecified & uncomplicated	
Lumbago	M54.5	See F12.9x for other cannabis "use" diagnoses	
Rheumatoid arthritis	M06.9 <small>HCC 40</small>	Cannabis poisoning - intent undetermined	
Pain disorder with related psychological factors	F45.42	T40.7x4 -	
Medication Management (detailed documentation)		Replace dash (-) with; A=initial (active tx);D= FU (healing); or S=sequela	
3. Therapeutic drug monitoring (code also #4 and/or #5)	Z51.81	Cocaine Abuse ("mild") See DSM5 pg. 561	
4. + Long term (current) use of opiate analgesic	Z79.891	Cocaine abuse; uncomplicated	F14.10
5. + Other long term (current) drug therapy	Z79.899	Cocaine abuse; in remission	F14.11
Alcohol Abuse ("mild") See DSM5 pg.490		Cocaine abuse; with other cocaine-induced disorder	HCC 55 F14.188
Alcohol abuse; uncomplicated	F10.10	with cocaine-induced; with anxiety disorder	HCC 55 F14.180
Alcohol abuse; in remission	F10.11	with mood disorder	HCC 55 F14.14
with alcohol-induced; with anxiety disorder	HCC 55 F10.180	with psychotic disorder with delusions	HCC 54 F14.150
with mood disorder	HCC 55 F10.14	with psychotic disorder with hallucinations	HCC 54 F14.151
with psychotic disorder with delusions	HCC 54 F10.150	with sexual dysfunction	HCC 55 F14.181
with psychotic disorder with hallucinations	HCC 54 F10.151	with sleep disorder	HCC 55 F14.182
with sexual dysfunction	HCC 55 F10.181	Cocaine abuse with intoxication; uncomplicated	HCC 55 F14.120
with sleep disorder	HCC 55 F10.182	with delirium	HCC 55 F14.121
Alcohol abuse with intoxication; uncomplicated (today)	HCC 55 F10.120	with perceptual disturbance	HCC 55 F14.122
with delirium	HCC 55 F10.121	Cocaine Dependence (DSM "moderate / severe")	
Alcohol Dependence (DSM "moderate / severe")		Cocaine dependence; uncomplicated	HCC 55 F14.20
Alcohol dependence; uncomplicated	HCC 55 F10.20	Cocaine dependence; in remission	HCC 55 F14.21
Alcohol dependence; in remission	HCC 55 F10.21	with withdrawal;	HCC 55 F14.23
with withdrawal; uncomplicated	HCC 55 F10.230	with cocaine-induced; with anxiety disorder	HCC 55 F14.280
with delirium	HCC 54 F10.231	with mood disorder	HCC 55 F14.24
with perceptual disturbance	HCC 54 F10.232	with psychotic disorder with delusions	HCC 54 F14.250
with alcohol-induced; with anxiety disorder	HCC 55 F10.280	with psychotic disorder with hallucinations	HCC 54 F14.251
with mood disorder	HCC 55 F10.24	with sexual dysfunction	HCC 55 F14.281
with persisting amnesic disorder	HCC 54 F10.26	with sleep disorder	HCC 55 F14.282
with persisting dementia	HCC 54 F10.27	Cocaine dependence with intoxication; uncomplicated	HCC 55 F14.220
with psychotic disorder delusions	HCC 54 F10.250	with delirium	HCC 55 F14.221
with psychotic disorder hallucinations	HCC 54 F10.251	with perceptual disturbances	HCC 55 F14.222
with sexual dysfunction	HCC 55 F10.281	Cocaine Use (w/o abuse or dependence) & Cocaine Poisoning	
with sleep disorder	HCC 55 F10.282	Cocaine use unspecified & uncomplicated	
Alcohol dependence with intoxication; uncomplicated	HCC 55 F10.220	See F14.9x for other cocaine "use" diagnoses	
with delirium	HCC 55 F10.221	Cocaine poisoning - intent undetermined	
Alcohol Use (w/o abuse or dependence) & Alcohol Poisoning		T40.5x4 -	
Alcohol use unspecified with unspecified alcohol-induced disorder		Replace dash (-) with; A=initial (active tx);D= FU (healing); or S=sequela	
See F10.9x for other alcohol "use" diagnoses		Opioid Abuse ("mild") See DSM5 pg. 540	
Replace dash (-) with; A=initial (active tx);D= FU (healing); or S=sequela		Opioid abuse; uncomplicated	F11.10
Alcohol poisoning - intent undetermined	T51.0x4 -	Opioid abuse; in remission	F11.11
Blood alcohol level codes		with opioid-induced; with mood disorder	HCC 55 F11.14
< 20 mg/100 ml	Y90.0	with psychotic disorder with delusions	HCC 54 F11.150
20-39 mg/100 ml	Y90.1	with psychotic disorder with hallucinations	HCC 54 F11.151
40-59 mg/100 ml	Y90.2	with sexual dysfunction	HCC 55 F11.181
60-79 mg/100 ml	Y90.3	with sleep disorder	HCC 55 F11.182
80-99 mg/100 ml	Y90.4	Opioid abuse with other induced disorder	HCC 55 F11.188
		with delirium	HCC 55 F11.121
		with perceptual disturbance	HCC 55 F11.122
		Opioid Dependence (DSM "moderate / severe")	
Cannabis Abuse ("mild") See DSM5 pg. 509		Opioid dependence; uncomplicated	HCC 55 F11.20
Cannabis abuse; uncomplicated	F12.10	Opioid dependence; in remission	HCC 55 F11.21
Cannabis abuse; in remission	F12.11	with withdrawal	HCC 55 F11.23
with cannabis-induced; with anxiety disorder	HCC 55 F12.180	with opioid-induced; with mood disorder	HCC 55 F11.24
with psychotic disorder with delusions	HCC 54 F12.150	with psychotic disorder with delusions	HCC 54 F11.250
with psychotic disorder with hallucinations	HCC 54 F12.151	with psychotic disorder with hallucinations	HCC 54 F11.251
Cannabis abuse with intoxication; uncomplicated	HCC 55 F12.120	with sexual dysfunction	HCC 55 F11.281
with delirium	HCC 55 F12.121	with sleep disorder	HCC 55 F11.282
with perceptual disturbance	HCC 55 F12.122		

SUBSTANCE ABUSE DX CODE SHEET

Opioid Dependence <i>continued from prev. page</i>		Code	Psychoactive Use (not abuse) & Poisoning	Code
Opioid dependence with other induced disorder	HCC 55	F11.288	Psychoactive use unspecified & uncomplicated	F19.90
Opioid dependence with intoxication; uncomplicated	HCC 55	F11.220	<i>See F19.9x for other psychoactive "use" diagnoses</i>	
with delirium	HCC 55	F11.221	Psychoactive poisoning - <i>intent undetermined</i>	T43.94x -
with perceptual disturbances	HCC 55	F11.222	<i>Replace dash (-) with; A=initial (active tx);D= FU (healing); or S=sequela</i>	
Opioid Use (w/o abuse or dependence) & Opioid Poisoning		Sedative/hypnotic/anxiolytic Abuse ("mild") <i>See DSM5 pg. 550</i>		
Opioid use unspecified & uncomplicated		F11.90	Sedative abuse; uncomplicated	F13.10
<i>See F11.9x for other opioid "use" diagnoses</i>			Sedative, hypnotic or anxiolytic abuse; in remission	F13.11
Opioid poisoning - <i>Intent undetermined</i>		T40.2x4 -	with sedative-induced; with anxiety disorder	HCC 55 F13.180
<i>Replace dash (-) with; A=initial (active tx);D= FU (healing); or S=sequela</i>			with mood disorder	HCC 55 F13.14
Stimulant Abuse ("mild") <i>See DSM5 pg. 561</i>			with psychotic disorder with delusions	HCC 54 F13.150
Stimulant abuse; uncomplicated		F15.10	with psychotic disorder with hallucinations	HCC 54 F13.151
Other stimulant abuse; in remission.		F15.11	with sexual dysfunction	HCC 55 F13.181
with stimulant induced; with anxiety disorder	HCC 55	F15.180	with sleep disorder	HCC 55 F13.182
with mood disorder	HCC 55	F15.14	Sedative abuse with other induced disorder	HCC 55 F13.188
with psychotic disorder with delusions	HCC 54	F15.150	Sedative abuse with intoxication; uncomplicated	HCC 55 F13.120
with psychotic disorder with hallucinations	HCC 54	F15.151	with delirium	HCC 55 F13.121
with sexual dysfunction	HCC 55	F15.181	Sedative Dependence (DSM "moderate / severe")	
with sleep disorder	HCC 55	F15.182	Sedative dependence; uncomplicated	HCC 55 F13.20
Stimulant abuse with intoxication; uncomplicated	HCC 55	F15.120	Sedative dependence; in remission	HCC 55 F13.21
with delirium	HCC 55	F15.121	with withdrawal; uncomplicated	HCC 55 F13.230
with perceptual disturbance	HCC 55	F15.122	with delirium	HCC 54 F13.231
Stimulant Dependence			with perceptual disturbance	HCC 54 F13.232
Stimulant dependence; uncomplicated	HCC 55	F15.20	with sedative-induced; with anxiety disorder	HCC 55 F13.280
Stimulant dependence; in remission	HCC 55	F15.21	with mood disorder	HCC 55 F13.24
with withdrawal	HCC 55	F15.23	with persisting amnesic disorder	HCC 54 F13.26
with stimulant-induced; anxiety disorder	HCC 55	F15.280	with persisting dementia	HCC 54 F13.27
with mood disorder	HCC 55	F15.24	with psychotic disorder delusions	HCC 54 F13.250
with psychotic disorder with delusions	HCC 54	F15.250	with psychotic disorder hallucinations	HCC 54 F13.251
with psychotic disorder with hallucinations	HCC 54	F15.251	with sexual dysfunction	HCC 55 F13.281
with sexual dysfunction	HCC 55	F15.281	with sleep disorder	HCC 55 F13.282
with sleep disorder	HCC 55	F15.282	Sedative dependence with other induced disorder	HCC 55 F13.288
Stimulant dependence with intoxication; uncomplicated	HCC 55	F15.220	Sedative dependence with intoxication; uncomplicated	HCC 55 F13.220
with delirium	HCC 55	F15.221	with delirium	HCC 55 F13.221
with perceptual disturbances	HCC 55	F15.222	Sedative Use (w/o abuse or dependence) & Sedative Poisoning	
Stimulant Use (w/o abuse or dependence) & Stimulant Poisoning			Sedative use unspecified & uncomplicated	F13.90
Stimulant use unspecified/uncomplicated		F15.90	<i>See F13.9x for other sedative "use" diagnoses</i>	
<i>See F15.9x for other stimulant "use" diagnoses</i>			Sedative poisoning - <i>intent undetermined</i>	T42.74x -
Stimulant poisoning - <i>Intent undetermined</i>		T43.604 -	<i>Replace dash (-) with; A=initial (active tx);D= FU (healing); or S=sequela</i>	
<i>Replace dash (-) with; A=initial (active tx);D= FU (healing); or S=sequela</i>			Hallucinogen Related Abuse ("mild") <i>See DSM5 pg. 520</i>	
Psychoactive Abuse ("mild") <i>See DSM5 pg. 577</i>			Hallucinogen abuse; uncomplicated	F16.10
Psychoactive abuse; uncomplicated		F19.10	Hallucinogen abuse; in remission	F16.11
Other psychoactive substance abuse; in remission		F19.11	with Hallucinogen-induced; with anxiety disorder	HCC 55 F16.180
with psychoactive-induced; anxiety disorder	HCC 55	F19.180	with induced mood disorder	HCC 55 F16.14
with mood disorder	HCC 55	F19.14	with persisting perception disorder (flashbacks)	HCC 55 F16.183
with persisting amnesic disorder	HCC 54	F19.16	with psychotic disorder with delusions	HCC 54 F16.150
with persisting dementia	HCC 54	F19.17	with psychotic disorder with hallucinations	HCC 54 F16.151
with psychotic disorder with delusions	HCC 54	F19.150	Hallucinogen abuse with other induced disorder	HCC 55 F16.188
with psychotic disorder with hallucinations	HCC 54	F19.151	Hallucinogen abuse with intoxication; uncomplicated	HCC 55 F16.120
with sexual dysfunction	HCC 55	F19.181	with delirium	HCC 55 F16.121
with sleep disorder	HCC 55	F19.182	with perceptual disturbance	HCC 55 F16.122
Psychoactive abuse with other induced disorder	HCC 55	F19.188	Hallucinogen Dependence (DSM "moderate / severe")	
Psychoactive abuse with intoxication; uncomplicated	HCC 55	F19.120	Hallucinogen dependence; uncomplicated	HCC 55 F16.20
with delirium	HCC 55	F19.121	Hallucinogen dependence; in remission	HCC 55 F16.21
with perceptual disturbance	HCC 55	F19.122	with Hallucinogen-induced; with anxiety disorder	HCC 55 F16.280
Psychoactive Dependence (DSM "moderate / severe")			with mood disorder	HCC 55 F16.24
Psychoactive dependence; uncomplicated	HCC 55	F19.20	with persisting perception disorder (flashbacks)	HCC 55 F16.283
Psychoactive dependence; in remission	HCC 55	F19.21	with psychotic disorder with delusions	HCC 54 F16.250
with withdrawal; uncomplicated	HCC 55	F19.230	with psychotic disorder with hallucinations	HCC 54 F16.251
with delirium	HCC 54	F19.231	Hallucinogen dependence with other induced disorder	HCC 55 F16.288
with perceptual disturbance	HCC 54	F19.232	Hallucinogen dependence with intoxication; uncompl	HCC 55 F16.220
with Psychoactive-induced; with anxiety disorder	HCC 55	F19.280	with delirium	HCC 55 F16.221
with mood disorder	HCC 55	F19.24	Hallucinogen Use (w/o abuse or dependence) & Poisoning	
with psychotic disorder with delusions	HCC 54	F19.250	Hallucinogen use unspecified & uncomplicated	F16.90
with psychotic disorder with hallucinations	HCC 54	F19.251	<i>See F16.9x for other sedative "use" diagnoses</i>	
with sexual dysfunction	HCC 55	F19.281	Hallucinogen poisoning; <i>intent undetermined</i>	T40.904 -
with sleep disorder	HCC 55	F19.282	<i>Replace dash (-) with; A=initial (active tx);D= FU (healing); or S=sequela</i>	
Psychoactive dependence with other induced disorder	HCC 55	F19.288		
Psychoactive dependence with intoxication; uncomp	HCC 55	F19.220		
with delirium	HCC 55	F19.221		
with perceptual disturbances	HCC 55	F19.222		

SUBSTANCE ABUSE DX CODE SHEET

Nicotine Dependence & Exposure <i>See DSM5 pg. 571</i>	Code	Substance Abuse In Pregnancy (see ICD Chapter 15)	Code
Cigarette ; uncomplicated (current smoker) (<i>no related illness</i>)	F17.210	<i>Use additional code(s) from F10 to identify manifestations of alcohol use</i>	
in remission	F17.211	Alcohol use complicating pregnancy ; 1st trimester	O99.311
in withdrawal	F17.213	2nd trimester	O99.312
Vapor or "Other" uncomplicated	F17.290	3rd trimester	O99.313
in remission	F17.291	<i>Use additional code(s) from F11-F16 to identify manifestations of the drug use</i>	
in withdrawal	F17.293	Drug use complicating pregnancy ; 1st trimester	O99.321
Chewing tobacco , uncomplicated	F17.220	2nd trimester	O99.322
in remission	F17.221	3rd trimester	O99.323
in withdrawal	F17.223	<i>Use additional code(s) from F17 to identify type of tobacco nicotine dependence</i>	
2nd hand tobacco smoke exposure	Z77.22	Smoking complicating pregnancy : 1st trimester	O99.331
Occupational tobacco smoke exposure	Z57.31	2nd trimester	O99.332
History of tobacco dependence	Z87.891	3rd trimester	O99.333
Tobacco use, [<i>no dependence</i>] <i>avoid</i>	Z72.0	Miscellaneous and Signs/Symptoms	
Screening for		Noncompliance with medical treatment	Z91.19
Alcoholism	Z13.89	Abnormal involuntary movements	R25.9
Behavioral disorder		Abnormal weight gain	R63.5
Depression		Abnormal weight loss	R63.4
Neurologic disorder		Underweight	R63.6
HIV	Z11.4	BMI of 19 or less	Z68.1
STD/STI	Z11.3	Malnourished; moderate	<small>HCC 21</small> E44.0
HPV	Z11.51	Abnormality of gait	R26.9
Intellectual disability	Z13.4	Altered mental status	R41.82
Malnutrition	Z13.29	Decreased libido	R68.82
Medication Management <i>Code also clinical condition(s)</i>		Dizziness/giddiness	R42
Code 1st: Therapeutic drug level monitoring	Z51.81	Excessive crying	R45.83
Code †: Other long term (current) drug therapy	Z79.899	Fatigue	R53.83
Patient Medication Noncompliance by Self Underdosing of;		Generalized pain	R52
<i>Replace dash (-) w/ A =initial (active tx); D= FU (healing); or S=sequela</i>		Headache	R51
tetracyclic antidepressants	T43.026 -	Hepatitis C, chronic	<small>HCC 29</small> B18.2
tricyclic antidepressants	T43.016 -	Hepatitis C, acute	B17.10
other antidepressant	T43.296 -	Insomnia	G47.00
antipsychotics (phenothiazine)	T43.3x6 -	Memory loss	R41.3
amphetamines	T43.626 -	Nausea	R11.0
other psychostimulant	T43.696 -	Senility w/o mention psychosis	R41.81
antipsychotics and neuroleptics	T43.596 -	Sleep disturbance	G47.9
barbiturates	T42.3x6 -	Lab Studies - Search for additional in EMR	
benzodiazepines	T42.4x6 -	[Urine drug screen] Encounter other specified exam.	Z01.89
butyrophenone & thiothixene neuroleptics	T43.4x6 -	Finding, abnormal substance in urine	R82.99
cannabis	T40.7x6 -	Blood test for alcohol/drugs <i>Code results</i>	Z02.83
MAOIs	T43.1x6 -	<i>Codes for results listed below, assign if known</i>	
methadone	T40.3x6 -	<i>Abnormal findings in blood study</i>	
methyphenidate (ADD)	T43.636 -	Opiate drug in blood	R78.1
narcotics (synthetic)	T40.4x6 -	Cocaine in blood	R78.2
opium	T40.0x6 -	Hallucinogen in blood	R78.3
other opioid	T40.2x6 -	Psychotropic in blood	R78.5
psychotropic (other)	T43.8x6 -	Other addictive substance in blood	R78.4
SSRIs	T43.226 -	Other substance in blood	R78.9
<i>Code also PATIENT'S INTENT of underdosing</i>		Physical Abuse Diagnosis Codes	
INTENTIONAL underdosing of med(s) by patient;		<i>Replace dash (-) with; A=initial (active tx);D= FU (healing); or S=sequela</i>	
due to financial hardship	Z91.120	Suspected abuse ; physical abuse/adult	T76.11x -
for any other reason	Z91.128	sexual abuse of adult	T76.21x -
UNINTENTIONAL underdosing by patient;		physical abuse of a child	T76.12x -
due to age-related debility	Z91.130	sexual abuse of a child	T76.22x -
for any other reason	Z91.138	Confirmed abuse ; physical abuse/adult	T74.11x -
Other Patient Noncompliance Diagnoses		sexual abuse of adult	T74.21x -
Other med. noncompliance (<i>e.g., self overdosing</i>)	Z91.14	physical abuse of a child	T74.12x -
Noncompliance with other medical treatment and regimen	Z91.19	sexual abuse of a child	T74.22x -
Patient's noncompliance with dietary regimen	Z91.11	Social Issues - Assign as an Additional Dx Code	
Personal History and Family History Diagnosis Codes		Homelessness	Z59.0
Personal History of ; Alcoholism <small>HCC 55</small>	F10.21	Inadequate housing	Z59.1
Combat and operational stress	Z86.51	Lack of adequate food and drinking water	Z59.4
Other Mental & Behavioral Disorders	Z86.59	Extreme poverty	Z59.5
Family History of psychiatric condition	Z81.8	Low income	Z59.6
Family History of substance abuse	Z81.4	Insufficient social ins and welfare support	Z59.7
		Child in welfare custody (foster care)	Z62.21
		Institutional upbringing	Z62.22
		Problems in relationship with spouse/partner	Z63.0