



**Date:** March 23, 2017

**To:** All ACHBCS Providers  
*Mental Health & SUD Providers*

**From:** ACBHCS-Quality Assurance Department

**Re:** **Revisions to 2/22/17 Memo: Final Implementation of ICD-10 and DSM-5 Documentation Requirements—Required by 4/1/17**

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## INTRODUCTION

As a result of changes to documentation requirements from DHCS issued after 2/22/17, this memo replaces the 2/22/17 *Final Implementation of ICD-10 & DSM-5 Documentation Requirements—required by 4/1/17*. Significant changes are highlighted in [Blue](#).

Up until 4/1/17, providers may continue to utilize DSM-IV-TR Codes in InSyst and within their Medical Records—if they are accompanied by the designated cross-walked ICD-10 codes.

Beginning 4/1/17 all new and annual episode renewals require the use of ICD-10 Codes which meet the DSM-5 diagnostic criteria (please note exceptions below).

[For all cases open prior to 4/1/17, the client's MH & SUD records will need to be updated](#) on or before their next face-to-face visit (both the Medical record and InSyst data screens) per the new requirements outlined below. (See the attached InSyst *MHS One Time Open Update Episode Form* which may be utilized for data entry guidance.)

Diagnosis Guidelines:

1. Who may diagnose:
  - a. Licensed LPHA
  - b. Waivered or Registered Interns who require a Licensed LPHA co-signature.

2. Where the diagnosis is documented:
  - a. MH Clients: MH Assessment
  - b. SUD Clients: SUD Plan
3. Where the diagnosis update is documented for existing clients:
  - a. MH Clients: MH Assessment or MH Assessment Addendum/Update
  - b. SUD Clients: SUD Plan
4. When the diagnosis exists in other documents:
  - a. MH: If it exists in the Client Plan, the Plan must be updated with all new signatures required.

### **INSYST DATA ENTRY (See Power Point with Instructions)**

**For MH Clients:** ICD-10 codes will be entered directly into InSyst for claiming purposes (see below and attached power point for instructions).

- Enter on InSyst line: “ ICD10Dx 1 to 5” (this represents 5 Diagnosis fields—not Axis 1-5):
  - 1.) **Required** ICD-10 Primary M/C Included MH Diagnosis (F01-99 see attached)
  - 2.) **Optional** ICD-10 Secondary ICD-10 M/C Included MH Diagnosis (F01- 99)
  - 3.) **Optional** ICD-10 Secondary ICD-10 M/C Included MH Diagnosis (F01-99) OR physical health Diagnosis
  - 4.) **Optional** ICD-10) Secondary ICD-10 M/C Included MH Diagnosis (F01-99) OR physical health Diagnosis
  - 5.) **Optional** ICD-10 Secondary ICD-10 M/C Included MH Diagnosis (F01-99) OR physical health Diagnosis
- **Required** General Medical Codes (GMC, see attached); *up to 3 codes may be added*
- **Required** Substance Abuse/Dependence issue (Yes or No, do not enter Unknown) and Substance Abuse/Dependence Diagnosis fields (If yes, enter *DSM-5 Dx*)

[Please note, Axis 4 and 5 are no longer collected and entered into InSyst \(indicated as required in the prior memo\).](#)

### **For SUD Services enter in InSyst:**

- 1.) **Required** ICD-10 Primary Included Medi-Cal SUD Dx (see attached)
- 2.) **Optional** ICD-10 Secondary SUD Diagnoses (may be Included or Excluded)

See Table 1 below when needing to enter “No Diagnosis” or “Deferred Diagnosis” into InSyst.

Table 1	
Diagnosis	Code
No Diagnosis (no Medical Necessity)	Z03.89
Deferred (only for initial 30 days)	R69

When a client is first opened into InSyst a provider may enter a “Provisional” (enter ICD-10 Code) or a “Deferred” diagnosis. “Deferred” must be updated to an Included Dx within 30 days for services to meet Medical Necessity and to continue service. If “No Diagnosis” is found—that may be entered, and the case is then closed to Medi-Cal claiming. Please note, one may only indicate a “Rule-Out” diagnosis for secondary diagnoses—not for the Primary Included Diagnosis. “Provisional” and “Rule-Out” are indicated in the Medical Record—there are no such fields in InSyst.

See updated InSyst forms (*MHS Client Registration Form, MHS Client Episode Update Form, MHS Client Episode Opening Form, and MHS Client Episode Closing Form*) attached to reflect these new requirements. The SUD InSyst form revisions are forthcoming. You may find the revised forms on the Provider Website/InSyst/Forms: <http://www.acbhcs.org/providers/Insyst/Insyst.htm#Forms>

**MEDICAL RECORD DIAGNOSIS DOCUMENTATION:**

Medical Record Documentation will follow DSM-5 guidelines (utilizing DSM-5/ ICD-10 codes). **DSM-IV-TR codes and conventions will no longer be followed.**

Medi-Cal will require that documentation for each Dx *within the Assessment* (MH Clients) *or within the Plan* (SUD Clients) [clearly records the diagnostic criteria met](#) as listed in the DSM-5. The only exception to this is for a secondary Dx which may be listed as “by history” (such as for an excluded or physical health Dx). In that case, indicate “by history” and the source of the data (client report, previous provider, etc.).

[When updating an existing client’s Dx within the Assessment \(MH\) or Plan \(SUD\) the provider must clearly indicate the signs and symptoms that meet that diagnosis’ criteria in the DSM within the updated Medical Record.](#)

For MH Clients, the only exceptions to utilizing the DSM-5 criteria are for those diagnoses listed below in Table 2, where the DSM-IV-TR descriptions (names) and criteria will continue to be utilized (with the ICD-10 code indicated):

<b>Table 2</b>	
<b>ICD-10 Code</b>	<b>DSM-IV-TR Diagnosis</b>
F84.5	Asperger’s Disorder
F84.9	Pervasive Developmental Disorder, NOS
F84.2	Rett’s Disorder
F84.3	Childhood Disintegrative Disorder
F84.0	Autism ( <b>excluded</b> ) Dx for Outpatient MH Svcs)

**See attached Medi-Cal Included Dx Lists for:**

1. *ACBHCS MH Outpatient Services M/C Included Dx List (by ICD-10 Code and DSM Name) rev. 3.23.17*
2. *ACBHCS MH Inpatient Services M/C Included Dx List (by ICD-10 Code and DSM Name) rev. 3.23.17*
3. *ACBHCS SUD Services M/C Included Dx List (by ICD-10 Code and by DSM Name) rev. 3.23.17*

*Please note that the attached Included MH Dx Lists were most recently updated on 3-23-17.*

We recommend that Providers do not use the M/C Included Lists posted by DHCS (on their website) as those lists include ICD-10 Diagnoses which do not exist in the DSM-5. Therefore, there is no established criteria to utilize for establishment of the diagnosis. Please note, if a Medical Record is audited and a CBO Provider\* used a diagnosis on the DHCS Included Diagnosis list which is not listed on one of the ACBHCS included diagnosis crosswalks —this would not be a reason for disallowance. The CBO Provider must have recorded the client’s signs and symptoms and indicated that these clinically meet the professionally accepted criteria for the diagnosis given (of course the problem being—that the criteria are not established in the DSM-IV-TR or DSM-5).

*\*ACBHCS County Clinic Staff must use the appropriate ACBHCS M/C Included Dx Lists—and not the DHCS Included Dx Lists published on [www.DHCS.CA.Gov](http://www.DHCS.CA.Gov)*

Also see attached:

- *ACBHCS MH Outpatient Medi-Cal Included Dx: DSM-IV-TR to DSM-5 Crosswalk: by DSM-5 Chapters, rev.3.23.17*

NOTE: This crosswalks offers ICD-10 alternatives to the DSM-IV-TR Included Dx's. However, it is always the diagnostician's responsibility to choose the most clinically appropriate diagnosis. It was updated on 3-23-17.

**When listing the ICD-10 Diagnoses in the Medical Record:**

The full DSM Description (Dx name) with Specifiers must be indicated along with the ICD-10 Code. DHCS also recommends additionally including the ICD-10 Description (Dx name), although not required by ACBHCS.

**For MH Services:**

- 1.) ICD-10 Primary Included Medi-Cal MH Diagnosis (see attached lists by alpha and numeric)
- 2.) ICD-10 Additional MH Diagnoses (start with any additional Included, followed by any additional Excluded Dx's)
- 3.) ICD-10 SUD Diagnoses (all Excluded Dx's)
- 4.) ICD-10 Medical Diagnoses—are usually “By History” (or General Medical Codes—see attached list. If GMC Codes are utilized in the Medical Record they must also be described by name)
- 5.) ICD-10 Psycho-Social Conditions-principal listed first (see attached lists-by alpha and numeric)

Note, that Axis 4 (A-I) and Axis 5 (GAF) are no longer required (indicated as required in the prior memo). Providers may additionally utilize the WHODAS, or another measure of disability, but are no longer are required to assess or document the GAF.

**For SUD Services:**

- 1.) ICD-10 Primary Included Medi-Cal SUD Dx (see attached lists by alpha and numeric)
- 2.) ICD-10 Additional SUD Diagnoses
- 3.) ICD-10 MH Diagnoses (Excluded Dx—may be “By History”)
- 4.) ICD-10 Medical Diagnoses—are usually “By History” (or General Medical Codes—see attached list. If GMC Codes are utilized in the Medical Record they must also be described by name)
- 5.) ICD-10 Psycho-Social Diagnoses-principal listed first (see attached lists by alpha and numeric)

## **TECHNICAL ASSISTANCE**

Thank you all for your cooperation as ACBHCS makes this required transition. As usual with computer updates and system changes, there may be “bugs” that are revealed during the process. As well additional changes may come down from DHCS. We will keep you posted with any changes or “fixes”. Please utilize the Technical Assistance contacts below whenever needed.

Quality Assurance Coordinators: for assistance with Medical Record Documentation requirements (as outlined in this memo) please contact your ACBHCS Quality Assurance Technical Assistance Contact. See attached Contact List or: <http://www.acbhcs.org/providers/QA/memos.htm>

Designated Agency/Clinic Staff: for assistance with the changes to the InSyst forms (and data entry into InSyst) please contact the Information Systems Help Desk @ 510.567.8181.

### **RECEIVE ALL UPDATES:**

**Sign up to receive all ACBHCS QA memos and website updates:**

#### **Network Providers:**

[https://public.govdelivery.com/accounts/CAALAME/subscriber/new?topic\\_id=CAALAME\\_90](https://public.govdelivery.com/accounts/CAALAME/subscriber/new?topic_id=CAALAME_90)

#### **Community Based Organizations and County Programs:**

[https://public.govdelivery.com/accounts/CAALAME/subscriber/new?topic\\_id=CAALAME\\_88](https://public.govdelivery.com/accounts/CAALAME/subscriber/new?topic_id=CAALAME_88)

### **ATTACHMENTS:**

- **InSyst Forms (Also Available on Provider Website/InSyst/Forms):**
  - MHS Client One-Time Update Opening Episode Form
  - MHS Client Registration Form
  - MHS Client Episode Opening Form
  - MHS Client Episode Update Form
  - MHS Client Episode Closing Form
  
- **InSyst Data Entry Power Point Presentation (Also Available on Provider Website/InSyst/Forms):**

- **Mental Health Diagnosis Lists (Also Available on Provider Website/QA/Memos):**
  - PsychoSocial Conditions – by Alpha
  - PsychoSocial Conditions – by Numeric
  - General Medical Codes
  - MH Outpatient Medi-Cal Included Dx – by Alpha
  - MH Outpatient Medi-Cal Included Dx – by Alpha
  - MH Outpatient Medi-Cal Included Dx – by Numeric
  - MH Outpatient Medi-Cal Included Dx – DSM-IV-TR to DSM-5 Crosswalk – by Chapters
  - MH Inpatient Medi-Cal Included Dx – by Alpha
  - MH Inpatient Medi-Cal Included Dx – by Numeric
  
- **SUD Diagnosis Lists (Also Available on Provider Website/QA/Memos):**
  - SUD Medi-Cal Included Dx – by Alpha
  - SUD Medi-Cal Included Dx – by Numeric
  
- **QA Technical Assistance Contact List**