

Selecting Diagnoses/Codes for Claiming

Specialty Mental Health Services (SMHS) and Drug Medi-Cal Organized Delivery System (DMC-ODS)

This document provides information about selecting diagnoses and codes for claiming in the DMC-ODS and SMHS delivery systems. Following the Department of Health Care Services' (DHCS) example, ACBHD will not publish specific lists of diagnoses/codes. This document is a review of considerations and requirements related to diagnosis and claiming.

General Information

- SMHS and DMC-ODS claims are submitted to DHCS using the Short-Doyle Medi-Cal (SDMC) claims system.
- Per Centers for Medicare and Medicaid Services (CMS) requirements, all Medi-Cal/Medicaid claims must be sent with an allowable billable ICD-10-CM code.
- Effective January 1, 2022, per [BHINs 21-073](#) and [21-075](#), except for psychiatric inpatient hospital, psychiatric health facility services, and SUD residential/inpatient, DHCS no longer limits SMHS or DMC-ODS to lists of included diagnoses; instead, DHCS provides categorical guidance.
- The SDMC claims system accepts a wide range of ICD-10-CM codes, across many health disciplines. However, within the behavioral health delivery systems, only relevant behavioral health codes should be used (e.g., mental health codes in SMHS, substance use disorder (SUD) codes in DMC-ODS) for claiming.
- Per Welfare and Institutions Code section 14184.402(f)(1)(A), a mental health diagnosis is not a prerequisite for access to covered SMHS. This does not eliminate the requirement that all Medi-Cal claims, including SMHS claims, include a CMS approved ICD-10 diagnosis code. In cases where services are provided due to a suspected mental health disorder that has not yet been diagnosed or due to trauma as noted above, options are available in the CMS approved ICD-10 diagnosis code list. For example, these include codes for “Other specified” and “Unspecified” disorders,” or “Factors influencing health status and contact with health services” (i.e., Z codes).
- CMS, ICD, and DSM typically follow an October to November update cycle. ACBHD attempts to update its systems on the same schedule.

- Both the Mental Health Plan and DMC-ODS contract require use of the DSM¹ for diagnostic criteria. Only ICD-10-CM codes in the current edition of the DSM when the service is rendered, should be used.²
- Only diagnoses/codes related to claiming need to be entered into SmartCare. However, the clinical record should be reflective of the member’s full clinical picture.
- Additional flexibility during the assessment phase of treatment is allowed; refer to DHCS [BHIN 22-013](#) (and any that supersede it) for more information.

Guidance

The table below provides additional guidance based on the service and system of care.

SMHS Outpatient Claims	DMC-ODS Outpatient Claims
<ul style="list-style-type: none"> • All diagnoses defined as “mental health disorders” from the DSM, except neurocognitive (e.g., dementia) and substance-related disorders (e.g., stimulant use disorder). • All ICD-10-CM codes in the range of Z55-Z65, including ones not in the DSM. • Any additional Z codes in the DSM. • Any T codes in the DSM related to abuse or neglect. 	<ul style="list-style-type: none"> • All diagnoses from the Substance-Related and Addictive Disorders chapter of the DSM, with the exception of Tobacco-Related Disorders and Non-Substance-Related Disorders. • All ICD-10-CM codes in the range of Z55-Z65, including ones not in the DSM. • Any additional Z codes in the DSM. • For Recovery Incentives, R82.998 and Z71.51 are used for claiming test results (secondary diagnosis).
SMHS Inpatient claims	DMC-ODS Residential and Inpatient Claims
<p>Diagnoses for SMHS Inpatient claims remain informed by BHIN 22-043, Enclosure 1 - ICD-10 Inpatient/Outpatient Diagnosis Codes and Descriptions.</p>	<p>SUD Residential programs may only submit claims with ICD-10-CM codes that are in the DSM from the list in Appendix 5 – Covered Diagnoses of the DHCS DMC-ODS Short Doyle Medi-Cal Billing Manual.</p>

Sources:

[SMHS and DMC-ODS Short Doyle Medi-Cal Billing Manuals](#)
[CMS ICD-10-CM Information](#)

¹ For the purposes of this document, any reference to the DSM, means the current edition of the DSM at the time of the rendered service.

² All ICD-10-CM Z55 to Z65 codes are allowed.

[WHO ICD-10-CM Information](#)

[HIPAA Code Set](#)

[DHCS BHINs: 21-073, 22-013, 22-043, and 24-001](#)

[APA Diagnostic and Statistical Manual of Mental Disorders \(DSM\)](#)

[DSM-5-TR Updates](#)

[DHCS CalAIM BH FAQ](#)

[DHCS CalAIM Payment Reform FAQ](#)