Understanding the ICD-10-CM

GREG J. NEIMEYER, PHD

ICD-10
Are you ready?
When it comes to my level of familiarity with the ICD-10-CM, I would characterize myself as....
When it comes to my level of familiarity with the ICD-10-CM, I would characterize myself as...

A. HIGHLY INFORMED. I KNOW MOST, IF NOT ALL OF ITS FEATURES AND COULD EASILY TEACH THIS COURSE MYSELF- BUT I DON’T WANT TO.
When it comes to my level of familiarity with the ICD-10-CM, I would characterize myself as....

B. MODERATELY WELL-INFORMED. I’VE HEARD ABOUT SOME, IF NOT MOST, OF THE DISTINGUISHING FEATURES, AND PROBABLY KNOW MOST OF THE MAJOR ONES AT LEAST
C. SOMEWHAT WELL-INFORMED. I’VE HEARD BITS AND PIECES OF ITS FEATURES HERE AND THERE BUT I’M NOT SURE HOW MANY OF THEM I COULD RECALL OFF HAND.

When it comes to my level of familiarity with the ICD-10-CM, I would characterize myself as....
When it comes to my level of familiarity with the ICD-10-CM, I would characterize myself as....

D. I AM GENUINELY CLUELESS. IF I’VE HEARD ANYTHING AT ALL ABOUT THE ICD-10 I HONESTLY CAN’T RECALL A SINGLE ONE OF THEM AT THE MOMENT.
Disclaimers

- Not representing WHO
- Not representing APA
- Not representing the other ApA
- No proprietary or commercial interests
- We all bring perspectives. I will share mine but there is nothing sacrosanct about it.
Overview

1. Setting the Stage
   *Dueling Diagnostic Systems*

2. Back to the Future with the ICD
   *Looking forward by glancing backward*

3. ICD-10-CM
   *The anatomy of the ICD-10-CM*

4. Diagnostic Convergence and Divergence Between the ICD-10-CM and the DSM-5
   *Harmony and Disharmony in Psychodiagnosis*
Diagnostic Systems

- The DSM-5 (2013)
- The ICD-10 (1990)
- The PDM (2006)
1. Setting the Stage: Classification Used by Global Psychiatrists

Q8 - ‘In your day-to-day clinical work, which classification system for mental disorders do you use most?’

- ICD-10: 70%
- ICD-9 or ICD-8: 10%
- DSM-IV: 20%
- Other Diagnostic System: 5%

Reed et al, *World Psychiatry*, 2011
2. Back to the Future with the ICD
History of ICD

- Early medical history nomenclatures
- Nomenclatures evolved into classification systems, organized according to topography and later etiology
- Stimulus for development of ICD:
  - 1851 Great Exhibition, visiting statisticians interested in comparing quantity/quality of goods
  - 1853 First International Statistical Conference in Brussels - causes of death a topic considered for comparison across nations.
  Succeeded by ISI, which continues to meet biennially
1893, ISI adopted 1st edition of international classification system – the *International List of Causes of Death.*

By 1899, ‘Causes of Death’ in English, French, German, & Spanish languages - adopted in US, Mexico, Canada, So America, & some cities in Europe.

U.S. committed to ICD from outset.
History of ICD, continued

- **ICD-1** first revision 1900 (in use 1900-1909). No MBD
- **ICD-2** 1909 (1910-1920), *International Classification of Causes of Sickness & Death*
- **ICD-3** 1920 (1921-1929)
- **ICD-4** 1929 (1930-1938), transfer to categories based on etiology.
- **ICD-5** 1938 (1939-1948), practical consideration to comparability between successive ICD versions.
- And then WWII occurred.......
The United Nations and the World Health Organization

- UN founded WHO in 1945 to develop specialized agencies/organizations to handle global matters in areas such as health, labor, and trade.
- WHO headquarters, Geneva, Switzerland - linked global health & global peace –
- 7,000 employees
History of ICD, continued

- WHO constitution ratified 1948; entrusted with ICD.
- 800 categories of disease.
- Morbidity 1st time inclusion, added to mortality.
- **New main category introduced:** Mental, Psychoneurotic, and Personality Disorders.
Introduction:
Diagnostic & Statistical Manual of Mental Disorders

1952: DSM-I
1968: DSM-II
1980: DSM-III
1987: DSM-III-R
1994: DSM-IV
2000: DSM-IV-TR
2013: DSM-5
History of ICD, continued

  - 20,000 scientific citations globally.
- **ICD-11** (WHA approval expected 2017)
Comparing Timetables:
The United States’ Timetable

- Currently - The U.S. still uses the ICD-9-CM system, put into place in 1979. Not used by most countries in over two decades.
- 2015 – The U.S. implements the ICD-10-CM (now more than 20 years old), shortly before the rest of the world ushers in the ICD-11.
## Differences between Versions

<table>
<thead>
<tr>
<th>ICD-9-CM</th>
<th>ICD-10-CM</th>
</tr>
</thead>
<tbody>
<tr>
<td>14,025 codes</td>
<td>68,069 codes</td>
</tr>
<tr>
<td>3-5 characters</td>
<td>3-7 characters</td>
</tr>
<tr>
<td>First character is a number or letter</td>
<td>First character is a letter</td>
</tr>
<tr>
<td>Characters 2-5 are numbers</td>
<td>Second character is a number</td>
</tr>
<tr>
<td>Always at least 3 characters</td>
<td>Characters 3-7 are letter or number</td>
</tr>
<tr>
<td>Decimal is used after 3 characters</td>
<td>Decimal is used after 3 characters</td>
</tr>
<tr>
<td>Letters are not case-sensitive</td>
<td>Use of dummy placeholder “x”</td>
</tr>
</tbody>
</table>
Purposes of ICD

- Monitor epidemics/threats to public health/disease burden
- Identify vulnerable/at risk populations
- Define obligations of WHO member states to provide free or subsidized care to their populations
- Facilitate access to appropriate health care services
- Form basis of guidelines for care & standards of practice
- Facilitate research into more effective treatments
Global Health Monitoring Reveals

- Mental & neurological disorders account for greater disease burden than any category, except communicable diseases (WHO, 2008)
- Depression - leading cause of years lost due to disability globally; disease burden 50% higher for females than males (WHO, 2012)
- Treatment gap for serious mental disorders it is 32 - 78%, depending on disorder (Kohn et al of WHO, 2004).
3. Anatomy of the ICD-10-CM
### ICD-10-CM Sample Chapters and Codes

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Range of Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td>I. Certain infectious and parasitic diseases</td>
<td>A00-B99</td>
</tr>
<tr>
<td>II. Neoplasms</td>
<td>C00-D48</td>
</tr>
<tr>
<td>III. Disease of the blood</td>
<td>D50-D89</td>
</tr>
<tr>
<td>IV. Endocrine, nutritional and metabolic diseases</td>
<td>E00-E90</td>
</tr>
<tr>
<td><strong>V. Mental and behavioral disorders</strong></td>
<td><strong>F00-F99</strong></td>
</tr>
<tr>
<td>VI. Diseases of the nervous system</td>
<td>G00-G99</td>
</tr>
<tr>
<td>VII. Diseases of the eye and adnexa</td>
<td>H00-H59</td>
</tr>
<tr>
<td>VIII. Diseases of the ear and mastoid process</td>
<td>H60-H95</td>
</tr>
<tr>
<td>IX. Diseases of the circulatory system</td>
<td>I00-I99</td>
</tr>
<tr>
<td>X. Diseases of the respiratory system</td>
<td>J00-J99</td>
</tr>
<tr>
<td>...continues through XXI. Factors influencing health status and contact with health services (Z00-Z98)</td>
<td></td>
</tr>
</tbody>
</table>
Mental & Behavioral Disorders-Chap 5

- F01-F09 Mental disorders due to known physiological conditions
- F10-F19 Mental and behavioral disorders due to psychoactive substance use
- F20-F29 Schizophrenia, schizotypal, delusional, and other non-mood psychotic disorders
- F30-F39 Mood [affective] disorders
- F40-F48 Anxiety, dissociative, stress-related, somatoform and other nonpsychotic mental disorders
- F50-F59 Behavioral syndromes associated with physiological disturbances and physical factors
- F60-F69 Disorders of adult personality and behavior
- F70-F79 Intellectual disabilities
- F80-F89 Pervasive and specific developmental disorders
- F90-F98 Behavioral and emotional disorders with onset usually occurring in childhood and adolescence
- F99 Unspecified mental disorder
Some Clinical Examples

1. Unipolar Depression
2. Panic Disorder
3. Alzheimer's
4. Panic Disorder
5. Obsessive-Compulsive Disorder
6. Schizophrenia
7. PTSD
8. ADHD
9. Asperger’s
10. Learning Disorder
F33.2

F = Mental and Behavioral Disorders
F30-39 = Mood [affective] disorders
F33 = Recurrent Depressive Disorder
F33.2 = Recurrent Depressive Disorder, current episode severe, without psychotic symptoms

DSM-5 codes: 296.33 while the ICD-9-CM is in effect, and F33.2 for when ICD-10-CM is implemented.
Clinical Guidelines for ICD-10-CM

- Blue Book - Clinical Descriptions and Diagnostic Guidelines (CDDG), for ICD-10, dropped for U.S.
  - No clinical descriptions accompany the U.S. modified versions of ICD-9-CM or ICD-10-CM.
- U.S. government not publishing CDDG or Crosswalk between ICD-10 and 10-CM; advises clinicians to use current criteria in their area of health practice
Clinical Descriptions and Diagnostic Guidelines (CDDG)

- CDDG guidelines are general and flexible - in contrast to DSM dx criteria
- Clinical judgment may be used in ICD system if symptom duration is longer or shorter than specified
- CDDG is being updated for ICD-11.
4. Diagnostic Convergence and Divergence
<table>
<thead>
<tr>
<th>ICD</th>
<th>DSM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Produced by global health agency of UN</td>
<td>Produced by single national professional association</td>
</tr>
<tr>
<td>Covers all health conditions</td>
<td>Covers only mental disorders</td>
</tr>
<tr>
<td>Free and open resource for public health benefit</td>
<td>Provides large proportion of ApA revenue</td>
</tr>
<tr>
<td>For countries; front-line service providers</td>
<td>For (US) psychiatrists</td>
</tr>
<tr>
<td>Global, multidisciplinary, multilingual development</td>
<td>Dominated by US, Anglophone perspective</td>
</tr>
<tr>
<td>Approved by World Health Assembly</td>
<td>Approved by ApA Assembly</td>
</tr>
</tbody>
</table>
## Coding Example: Depression

<table>
<thead>
<tr>
<th>Substance</th>
<th>ICD-9</th>
<th>ICD-10-CM With Use, Mild</th>
<th>ICD-10-CM With Use, Moderate</th>
<th>ICD-10-CM Without Use Disorder</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol</td>
<td>291.89</td>
<td>F10.14</td>
<td>F10.24</td>
<td>F10.94</td>
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<tr>
<td>Hallucinogen</td>
<td>292.84</td>
<td>F16.14</td>
<td>F16.24</td>
<td>F16.94</td>
</tr>
<tr>
<td>Inhalant</td>
<td>292.84</td>
<td>F18.14</td>
<td>F18.24</td>
<td>F18.94</td>
</tr>
<tr>
<td>Opioid</td>
<td>292.84</td>
<td>F11.14</td>
<td>F11.24</td>
<td>F11.94</td>
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<tr>
<td>Sedative</td>
<td>292.84</td>
<td>F13.14</td>
<td>F13.24</td>
<td>F13.94</td>
</tr>
<tr>
<td>Amphetamine</td>
<td>292.84</td>
<td>F15.14</td>
<td>F15.24</td>
<td>F15.94</td>
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<tr>
<td>Cocaine</td>
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<td>F14.24</td>
<td>F14.94</td>
</tr>
<tr>
<td>Other</td>
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<td>F19.14</td>
<td>F19.24</td>
<td>F19.94</td>
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</table>
### ICD-11 Work Plan

<table>
<thead>
<tr>
<th>Task</th>
<th>2014 Q1 &amp; Q2</th>
<th>2014 Q3 &amp; Q4</th>
<th>2015 Q1 &amp; Q2</th>
<th>2015 Q3 &amp; Q4</th>
<th>2016 Q1 &amp; Q2</th>
<th>2016 Q3 &amp; Q4</th>
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</thead>
<tbody>
<tr>
<td>Complete draft diagnostic guideline for field studies</td>
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<tr>
<td>Case-controlled field studies</td>
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<tr>
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<td>Complete</td>
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<tr>
<td>Review and comment on draft guidelines</td>
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<td>Complete</td>
<td>Complete</td>
<td>Complete</td>
<td>Complete</td>
<td>Complete</td>
</tr>
<tr>
<td>Prepare additional material for CDDG</td>
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<td>Complete</td>
<td>Complete</td>
<td>Complete</td>
<td>Complete</td>
<td>Complete</td>
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<tr>
<td>Revise guidelines per field studies and comments</td>
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<td>Complete</td>
<td>Complete</td>
<td>Complete</td>
<td>Complete</td>
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<tr>
<td>Finalize CDDG</td>
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<td>Complete</td>
<td>Complete</td>
</tr>
<tr>
<td>Translations, educational, implementation material</td>
<td>Complete</td>
<td>Complete</td>
<td>Complete</td>
<td>Complete</td>
<td>Complete</td>
<td>Complete</td>
</tr>
</tbody>
</table>
Test Your Knowledge of the ICD-10-CM
The Mental and Behavioral Codes in the ICD-10-CM are all start with which letter?

A. “A”
B. “M”
C. “V”
D. “F”
The World Health Organization is operated under the auspices of

A. The American Red Cross
B. The American Psychiatric Association
C. The American Psychological Association
D. The United Nations
The “CM” in the ICD-10-CM refers to

A. “Compact Manual,” which is the abridged version of the manual with just the codes themselves
B. “Conceptual Manifesto” that lays out the underlying theoretical precepts that undergird the diagnostic system
C. “Clinical Modification” which refers to the modifications that were made for the version used in the United States
D. None of the above
Which of the following disorders are included in the ICD-10-CM but not in the DSM-5?

A. Alcohol Dependence  
B. Somatoform Disorders  
C. Asperger’s  
D. All of the above
When the United States adopts the ICD-10-CM (October, 2015) we will be approving the use of a coding system that is ____ years old instead of the ICD-9 codes that we are currently using that are approximately ____ years old?

A. 5; 10  
B. 10; 20  
C. 20; 30  
D. 25; 40