Substance use, abuse and dependence

Tips to improve documentation and coding accuracy

Accurately and completely coding and documenting substance use helps capture our members' health status and promote continuity of care. Following is information for outpatient and professional services from the ICD-10-CM Official Guidelines for Coding and Reporting.

Coding accuracy depends on specificity in documentation and in code selection. Understanding the level of available details within the code sets enables complete documentation of confirmed diagnoses and ensures the highest degree of specificity of codes.

Reporting substance use essentials

Each of these elements should be documented to ensure accurate specificity for each assessed condition.

Type of substance (e.g., alcohol, opioids, cannabis, sedatives, cocaine, nicotine, hallucinogens, inhalants, other stimulants)

- Use, abuse or dependence
- Highest degree of specificity for complications
- Follow DSM criteria for disorder

Document a complete treatment plan

Each assessed condition must include a treatment plan that details an actionable roadmap for treatment, outlining diagnosis goals and objectives, interventions, and care guides.

- Treatment plans should detail the steps taken to manage the substance disorder, including:
  - Medications
  - Counseling and behavioral therapy
  - Referrals to psychiatry or psychology
  - Twelve-step programs offering mutual aid, such as Alcoholics Anonymous, Narcotics Anonymous, etc.
  - Close monitoring of patient's behavior (i.e., regular follow-ups)
- Document findings to support the diagnosis of substance use, abuse, dependence and the current manifestations, when applicable. Secondary diagnoses, such as depression or anxiety, should be coded separately.
- Medical complications, including liver disease (e.g., cirrhosis) or neurological diseases (e.g., dementia), require additional codes to describe comorbidities.

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ICD-10-CM code structure for substance use, abuse and dependence

(See the ICD-10-CM code set for alcohol and other substance codes.)

ICD-10 CODES	ICD-10 DESCRIPTION	DESCRIPTION/TIPS
F11.1-	Opioid abuse	See ICD-10-CM coding manual for further specificity in assignment of fifth and sixth characters, when applicable. For frequency and associated conditions when these additional characters are present: • Uncomplicated • In remission • With intoxication • With withdrawal • With delirium • With specified-induced disorders
F11.2-	Opioid dependence	
F11.9-	Opioid use, unspecified	
F12.1-	Cannabis abuse	
F12.2-	Cannabis dependence	
F12.9-	Cannabis, unspecified	
F13.1-	Sedative, hypnotic, or anxiolytic-related abuse	
F13.2-	Sedative, hypnotic, or anxiolytic-related dependence	
F13.9-	Sedative, hypnotic, or anxiolytic-use, unspecified	
F14.1-	Cocaine abuse	
F14.2-	Cocaine dependence	
F14.9-	Cocaine use, unspecified	

ICD-10-CM code examples

Profile

The patient has experienced multiple episodes of severe cocaine use disorder. Dependence spans approximately eight years.

Assessment and plan

Cocaine dependence. Patient has been in complete remission for five years. Continue counseling program and group therapy.

Coded as

F14.21 – Cocaine dependence in remission

Profile

Patient admitted to unit with anxiety, irritability and paranoia. Previous admissions for cocaine use disorder.

Assessment and plan

Cocaine withdrawal. Follow standard detox protocols with withdrawal monitoring.

Coded as

F14.93 – Cocaine use, unspecified, with withdrawal