DSM-5: Moving Forward
Implementation as announced, October 1, 2014

May 2014
ICD-10: Implementation Mandate is Delayed

On April 1, 2014, H.R. 4302, was signed into law. Included in the law is a one sentence provision delaying implementation of ICD-10 by at least one year:

**SEC. 212. DELAY IN TRANSITION FROM ICD–9 TO ICD–10 CODE SETS.**

The Secretary of Health and Human Services may not, prior to October 1, 2015, adopt ICD–10 code sets as the standard for code sets under section 1173(c) of the Social Security Act (42 U.S.C. 1320d–2(c)) and section 162.1002 of title 45, Code of Federal Regulations.

This ICD-10 delay was part of legislation that adjusted the Sustainable Growth Rate (SGR) (also called ‘doc-fix’) and amended the Social Security Act to extend Medicare payments to physicians and change other provisions of the Medicare and Medicaid programs. Historically ICD-10 was not tied to SGR.

In response to this legislation, we are adjusting plans for the ICD-10 implementation. In support of industry standardization and a uniform provider experience, we will continue with the DSM-5 implementation effective October 1, 2014 as previously announced.
Moving Forward with DSM-5

Provider Actions

• Obtain a print copy or online subscription to the DSM-5
• Attend a DSM-5 workshop to learn about changes from DSM-IV to DSM-5
• Identify your highest volume diagnostic categories
  – Focus on learning these first
  – Assess whether there are any changes in criteria or categorization
    (see DSM-5 pp 809-816. “Highlights of Changes from DSM-IV to DSM-5”)
• Initiate a brief period of concurrent use of DSM-IV and DSM-5 criteria and associated ICD-9 codes within your organization to support:
  – Understanding of changes
  – Familiarity with any new or different ICD-9 codes
• Documentation
  – As always, note presence or absence of signs and symptoms upon which diagnosis is made
  – Continue to list medical conditions, psychosocial and environmental factors that support understanding of mental health condition

Optum DSM-5 Timeline

As in previous editions, the American Psychiatric Association includes “mapping” from the DSM diagnostic criteria to the numeric ICD diagnostic code used for billing.

Through September 30, 2014
• Use DSM-IV-TR diagnostic criteria
• Use ICD-9 as aligned to the DSM-IV-TR for billing

Beginning October 1, 2014:
• Use DSM-5 diagnostic criteria
• Use ICD-9 as aligned to the DSM-5 for billing
Effective October 1, 2014

Assessment & Diagnosis
Use the DSM-5 diagnostic criteria

Nonaxial Assessment System
The DSM-5 advises that you continue documenting “medical conditions that are important to the understanding or management of an individual’s mental disorder(s)” and that you continue to use ICD-9-CM V codes to note relevant psychosocial or environmental factors. Optum is also retaining Axis V (GAF) reporting capability on clinical platforms pending establishment of an industry-wide alternative.

ICD Billing
The DSM-5 includes “mapping” to both ICD-9 and ICD-10 codes, until further notice, use the ICD-9 codes.
Further Updates

Please visit Provider Express for ongoing updates and information

DSM-5 / ICD-10 Information Page