CODING UPDATE

SUPPLEMENT TO

DIAGNOSTIC AND STATISTICAL
MANUAL OF MENTAL DISORDERS,
FIFTH EDITION

American Psychiatric Association
March 2014
DSM-5® Coding Update

Supplement to
Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition

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This supplement and the digital versions of DSM-5® (including the DSM-5® Diagnostic Criteria Mobile App, DSM-5® eBook, and DSM-5® on PsychiatryOnline.org) are updated periodically to reflect any coding updates, changes, or corrections, and any other information necessary for compensation in mental health practice. For the latest updates, please go to http://dsm.psychiatryonline.org/DSM5CodingSupplement.

ICD-9-CM codes are followed by ICD-10-CM codes in parentheses as in DSM-5.

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Contents

Updates at a Glance.............................................................................................................. 3

Updates in Detail .................................................................................................................. 4

Neurodevelopmental Disorders .................................................................................. 4
Intellectual Disability (Intellectual Developmental Disorder)
Language Disorder

Bipolar and Related Disorders .................................................................................. 5
Bipolar I Disorder, Current or most recent episode hypomanic
In partial remission
In full remission

Anxiety Disorders .......................................................................................................... 6
Selective Mutism

Obsessive-Compulsive and Related Disorders .................................................. 6
Trichotillomania (Hair-Pulling Disorder)

Trauma- and Stressor-Related Disorders .................................................................. 7
Adjustment Disorders

Sleep-Wake Disorders .................................................................................................. 8
Insomnia Disorder
Hypersomnia

Disruptive, Impulse-Control, and Conduct Disorders ........................................ 9
Conduct Disorder, Adolescent-onset type
Kleptomania

Neurocognitive Disorders ............................................................................................ 10
Major Neurocognitive Disorder Due to Alzheimer’s Disease
Major Frontotemporal Neurocognitive Disorder
Major Neurocognitive Disorder With Lewy Bodies
Major Vascular Neurocognitive Disorder
Major Neurocognitive Disorder Due to Parkinson’s Disease
### Updates at a Glance

<table>
<thead>
<tr>
<th>Disorder</th>
<th>Original</th>
<th>Update</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Intellectual Disability</strong></td>
<td>319 (70) Mild</td>
<td>317 (70) Mild</td>
</tr>
<tr>
<td><em>(Intellectual Developmental Disorder)</em></td>
<td>319 (71) Moderate</td>
<td>318.0 (71) Moderate</td>
</tr>
<tr>
<td></td>
<td>319 (72) Severe</td>
<td>318.1 (72) Severe</td>
</tr>
<tr>
<td></td>
<td>319 (73) Profound</td>
<td>318.2 (73) Profound</td>
</tr>
<tr>
<td><strong>Language Disorder</strong></td>
<td>315.39 (F80.9)</td>
<td>315.32 (F80.2)</td>
</tr>
<tr>
<td><strong>Bipolar I Disorder, Current or most recent episode hypomanic, In partial remission</strong></td>
<td>296.45 (F31.73)</td>
<td>296.45 (F31.71)</td>
</tr>
<tr>
<td><strong>Bipolar I Disorder, Current or most recent episode hypomanic, In full remission</strong></td>
<td>296.46 (F31.74)</td>
<td>296.46 (F31.72)</td>
</tr>
<tr>
<td><strong>Selective Mutism</strong></td>
<td>312.23 (F94.0)</td>
<td>313.23 (F94.0)</td>
</tr>
<tr>
<td><strong>Trichotillomania (Hair-Pulling Disorder)</strong></td>
<td>312.39 (F63.2)</td>
<td>312.39 (F63.3)</td>
</tr>
<tr>
<td><strong>Adjustment Disorders</strong></td>
<td><strong>No specifiers</strong></td>
<td><strong>Add specifiers</strong></td>
</tr>
<tr>
<td></td>
<td>for “acute” and “persistent (chronic)”</td>
<td>“acute” and “persistent (chronic)”</td>
</tr>
<tr>
<td><strong>Insomnia Disorder</strong></td>
<td>780.52 (G47.00)</td>
<td>307.42 (F51.01)</td>
</tr>
<tr>
<td><strong>Hypersomnia Disorder</strong></td>
<td>780.54 (G47.10)</td>
<td>307.44 (F51.11)</td>
</tr>
<tr>
<td><strong>Conduct Disorder, Adolescent-onset type</strong></td>
<td>312.32 (F91.2)</td>
<td>312.82 (F91.2)</td>
</tr>
<tr>
<td><strong>Kleptomania</strong></td>
<td>312.32 (F63.3)</td>
<td>312.32 (F63.2)</td>
</tr>
</tbody>
</table>

### Major Neurocognitive Disorders With Possible Etiologies

The following coding updates ensure that insurance reimbursement can be obtained when the specifier “With behavioral disturbance” is used for the possible major neurocognitive disorders. The possible major neurocognitive disorders should be coded in the same way as their respective probable major neurocognitive disorders, as noted below. For excerpts of the DSM-5 sections with these changes, see pp. 10–22 of this Coding Update.

<table>
<thead>
<tr>
<th>Major Neurocognitive Disorder Possibly Due to Vascular Disease</th>
<th>331.9 (G31.9)</th>
<th>290.40 (F01.51)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>With behavioral disturbance</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Without behavioral disturbance</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Note:** Code first **331.0 (G30.9)** Alzheimer’s disease.

<table>
<thead>
<tr>
<th>Major Neurocognitive Disorder Due to Possible Frontotemporal Lobar Degeneration</th>
<th>331.9 (G31.9)</th>
<th>Code etiological medical condition first (noted at left with each disorder) then code</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>With behavioral disturbance</strong></td>
<td></td>
<td>294.11 (F02.81)</td>
</tr>
<tr>
<td><strong>Without behavioral disturbance</strong></td>
<td></td>
<td>294.10 (F02.80)</td>
</tr>
</tbody>
</table>

**Note:** Code first **331.19 (G31.09)** frontotemporal disease.

<table>
<thead>
<tr>
<th>Major Neurocognitive Disorder With Possible Lewy Bodies</th>
<th>331.9 (G31.9)</th>
<th>Code etiological medical condition first (noted at left with each disorder) then code</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>With behavioral disturbance</strong></td>
<td></td>
<td>294.11 (F02.81)</td>
</tr>
<tr>
<td><strong>Without behavioral disturbance</strong></td>
<td></td>
<td>294.10 (F02.80)</td>
</tr>
</tbody>
</table>

**Note:** Code first **331.82 (G31.83)** Lewy body disease.

<table>
<thead>
<tr>
<th>Major Neurocognitive Disorder Possibly Due to Parkinson’s Disease</th>
<th>331.9 (G31.9)</th>
<th>Code etiological medical condition first (noted at left with each disorder) then code</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>With behavioral disturbance</strong></td>
<td></td>
<td>294.11 (F02.81)</td>
</tr>
<tr>
<td><strong>Without behavioral disturbance</strong></td>
<td></td>
<td>294.10 (F02.80)</td>
</tr>
</tbody>
</table>

**Note:** Code first **332.0 (G20)** Parkinson’s disease.
Updates in Detail

Replacement codes and other notes are in boldface type to aid visual reference only. Shaded areas denote disorders with changes.

Neurodevelopmental Disorders

ICD-9-CM coding change for Intellectual Disability (Intellectual Developmental Disorder) (ICD-10-CM code remains UNCHANGED)

Codes are found on the following pages: DSM-5: pp. xiii, 33 (also delete coding note), 848, 872; Desk Reference: pp. ix, 18 (also delete coding note)


The ICD-9-CM code “319” should be deleted and replaced with blank lines: “___.__”. ICD-9-CM codes should be inserted as follows:

317 (F70) Mild
318.0 (F71) Moderate
318.1 (F72) Severe
318.2 (F73) Profound

DSM-5 criteria for Intellectual Disability (Intellectual Developmental Disorder) should be revised as follows, p. 33 (Desk Reference, p. 18):

DELETE the coding note.
ADD ICD-9-CM codes as follows:

Specify current severity (see Table 1):
317 (F70) Mild
318.0 (F71) Moderate
318.1 (F72) Severe
318.2 (F73) Profound

Alphabetical Listing, p. 848 (not applicable to Desk Reference)
Adjust the ICD-9-CM codes for Intellectual disability (intellectual developmental disorder) as follows (change placement of Profound as shown below):

DELETE 319
ADD ICD-9-CM codes:
317 (F70) Mild
318.0 (F71) Moderate
318.1 (F72) Severe
318.2 (F73) Profound

Numerical Listing (ICD-9-CM), p. 872 (not applicable to Desk Reference):

DELETE “319 Intellectual disability (intellectual developmental disorder)”
ADD the following:
317 Intellectual disability (intellectual developmental disorder), Mild
318.0 Intellectual disability (intellectual developmental disorder), Moderate
318.1 Intellectual disability (intellectual developmental disorder), Severe
318.2 Intellectual disability (intellectual developmental disorder), Profound
BEFORE
319 Unspecified intellectual disability (intellectual developmental disorder)
Neurodevelopmental Disorders (continued)

ICD-9-CM and ICD-10-CM coding changes for Language Disorder
Codes are found on the following pages: DSM-5: pp. xiii, 42, 848, 871, 891; Desk Reference: pp. x, 24

DSM-5 Classification, Neurodevelopmental Disorders, Communication Disorders, Language Disorder, p. xiii (Desk Reference, p. x):
- Change 315.39 to 315.32
- Change (F80.9) to (F80.2)

DSM-5 criteria, ICD-9-CM and ICD-10-CM codes for Language Disorder should be revised as follows, p. 42 (Desk Reference, p. 24):
- Change 315.39 to 315.32
- Change (F80.9) to (F80.2)

Alphabetical Listing, p. 848 (not applicable to Desk Reference)
Change the codes for Language disorder as follows:
- Change 315.39 to 315.32
- Change F80.9 to F80.2

Numerical Listing (ICD-9-CM), p. 871 (not applicable to Desk Reference)
Change the code for Language disorder as follows:
- Change 315.39 to 315.32
- Move 315.32 Language disorder to follow “315.2 Specific learning disorder, With impairment in written expression”

Numerical Listing (ICD-10-CM), p. 891 (not applicable to Desk Reference)
Change the code for Language disorder as follows:
- Change F80.9 to F80.2
- Move F80.2 Language disorder to follow “F80.0 Speech sound disorder”

Bipolar and Related Disorders

ICD-10-CM coding changes to Bipolar I Disorder,
Current or most recent episode hypomanic (ICD-9-CM code remains UNCHANGED)
Codes are found on the following pages: DSM-5: pp. xvi, 127, 842, 888; Desk Reference: pp. xiv, 70

DSM-5 Classification, Bipolar and Related Disorders, Bipolar I Disorder, Current or most recent episode hypomanic, p. xvi (Desk Reference, p. xiv):
- ICD-10-CM code F31.73 should be changed to F31.71, In partial remission
- ICD-10-CM code F31.74 should be changed to F31.72, In full remission

DSM-5 criteria, coding table for Bipolar I Disorder should be revised as follows, p. 127 (Desk Reference, p. 70):
- In partial remission, Current or most recent episode hypomanic:
  Change F31.73 to F31.71
- In full remission, Current or most recent episode hypomanic:
  Change F31.74 to F31.72
Bipolar and Related Disorders (continued)

Alphabetical Listing, p. 842 (not applicable to Desk Reference)
Replace the ICD-10-CM codes as follows for Bipolar I disorder, Current or most recent episode hypomanic:
- Change F31.74 to F31.72 In full remission
- Change F31.73 to F31.71 In partial remission

Numerical Listing (ICD-10-CM), p. 888 (not applicable to Desk Reference)
Please change codes and reorder listing as follows:
F31.71 Bipolar I disorder, Current or most recent episode hypomanic, In partial remission
F31.72 Bipolar I disorder, Current or most recent episode hypomanic, In full remission
F31.73 Bipolar I disorder, Current or most recent episode manic, In partial remission
F31.74 Bipolar I disorder, Current or most recent episode manic, In full remission

Anxiety Disorders

ICD-9-CM coding change for Selective Mutism (ICD-10-CM code remains UNCHANGED)
Codes are found on the following pages: DSM-5: pp. xviii, 195, 859, 871; Desk Reference: pp. xvii, 116

DSM-5 Classification, Anxiety Disorders, Selective Mutism, p. xviii
(Desk Reference, p. xvii):
- Change 312.23 to 313.23

DSM-5 criteria, ICD-9-CM code for Selective Mutism should be revised as follows, p. 195
(Desk Reference, p. 116):
- Change 312.23 to 313.23

Alphabetical Listing, p. 859 (not applicable to Desk Reference)
Replace the ICD-9-CM code as follows for Selective mutism:
- Change 312.23 to 313.23

Numerical Listing (ICD-9-CM), p. 871 (not applicable to Desk Reference)
Change the code for Selective mutism as follows:
- Change 312.23 to 313.23
- Move 313.23 Selective mutism to precede “313.81 Oppositional defiant disorder”

Obsessive-Compulsive and Related Disorders

ICD-10-CM coding change for Trichotillomania (Hair-Pulling Disorder) (ICD-9-CM code remains UNCHANGED)
Codes are found on the following pages: DSM-5: pp. xix, 251, 861, 890; Desk Reference: pp. xviii, 133

DSM-5 Classification, Obsessive-Compulsive and Related Disorders, Trichotillomania (Hair-Pulling Disorder), p. xix (Desk Reference, p. xviii):
- Change F63.2 to F63.3

DSM-5 criteria, ICD-10-CM code for Trichotillomania (Hair-Pulling Disorder) should be revised as follows, p. 251 (Desk Reference, p. 133):
- Change F63.2 to F63.3
Obsessive-Compulsive and Related Disorders (continued)

Alphabetical Listing, p. 861 (not applicable to Desk Reference)
Replace the ICD-10-CM code for Trichotillomania (hair-pulling disorder) as follows:
• Change F63.2 to F63.3

Numerical Listing (ICD-10-CM), p. 890 (not applicable to Desk Reference)
Change the ICD-10-CM code for Trichotillomania (hair-pulling disorder) as follows:
• Change F63.2 to F63.3
• Move F63.3 Trichotillomania (hair-pulling disorder) to precede “F63.81 Intermittent explosive disorder”

Trauma- and Stressor-Related Disorders

Add specifiers for Adjustment Disorders
(ICD-9-CM and ICD-10-CM codes remain UNCHANGED)
Specifiers are added on the following pages: DSM-5: pp. xx, 287; Desk Reference: pp. xix, 152

DSM-5 Classification, Trauma- and Stressor-Related Disorders, Adjustment Disorders, p. xx
(Desk Reference, p. xix):
New specifiers are added as shown (see highlighted text):

___.__ (___.__) Adjustment Disorders
AFTER
Specify whether:
309.0 (F43.21) With depressed mood
… [codes and subtypes continue as printed]
309.9 (F43.20) Unspecified

ADD
Specify if: Acute, Persistent (chronic)

DSM-5 criteria for Adjustment Disorders should be revised as follows (see highlighted text), p. 287 (Desk Reference, p. 152):

AFTER
Specify whether:
309.0 (F43.21) With depressed mood: Low mood, tearfulness, or feelings of hopelessness are predominant.
… [codes and subtypes continue as printed]
309.9 (F43.20) Unspecified: For maladaptive reactions that are not classifiable as one of the specific subtypes of adjustment disorder.

ADD
Specify if:
Acute: If the disturbance lasts less than 6 months
Persistent (chronic): If the disturbance lasts for 6 months or longer
Sleep-Wake Disorders

ICD-9-CM and ICD-10-CM coding changes for Insomnia Disorder and Hypersomnolence Disorder

Codes are found on the following pages:

- Insomnia Disorder: DSM-5: pp. xxii, 362 (also change code in coding note), 848, 870, 873, 890, 892
  Desk Reference: pp. xxii, 181, 182 (change code in coding note)
- Hypersomnolence Disorder: DSM-5: pp. xxii, 368, 369 (change code in coding note), 847, 870, 873, 890, 892
  Desk Reference: pp. xxii, 182, 183 (change code in coding note)

DSM-5 Classification, Sleep-Wake Disorders, change codes for Insomnia Disorder and Hypersomnolence Disorder, p. xxii (Desk Reference, p. xxii):

Insomnia Disorder
- Change 780.52 to 307.42
- Change (G47.00) to (F51.01)

Hypersomnolence Disorder
- Change 780.54 to 307.44
- Change (G47.10) to (F51.11)

DSM-5 criteria, ICD-9-CM and ICD-10-CM codes should be revised as follows:

Insomnia Disorder
Codes in “Diagnostic Criteria,” p. 362 (Desk Reference, p. 181):
- Change 780.52 to 307.42
- Change (G47.00) to (F51.01)
Coding note, p. 362 (Desk Reference, p. 182):
- Change 780.52 (G47.00) to 307.42 (F51.01)

Hypersomnolence Disorder
Codes in “Diagnostic Criteria,” p. 368 (Desk Reference, p. 182):
- Change 780.54 to 307.44
- Change (G47.10) to (F51.11)
Coding note, p. 369 (Desk Reference, p. 183):
- Change 780.54 (G47.10) to 307.44 (F51.11)

Alphabetical Listing (not applicable to Desk Reference)
Hypersomnolence disorder, p. 847
- Change 780.54 to 307.44
- Change G47.10 to F51.11

Insomnia disorder, p. 848
- Change 780.52 to 307.42
- Change G47.00 to F51.01

Numerical Listing (ICD-9-CM), p. 870 (not applicable to Desk Reference)
After “307.3 Stereotypic movement disorder,” ADD
- 307.42 Insomnia disorder
- 307.44 Hypersomnolence disorder
DELETE
- 780.52 Insomnia disorder, p. 873
- 780.54 Hypersomnolence disorder, p. 873
Sleep-Wake Disorders (continued)

Numerical Listing (ICD-10-CM), p. 890 (not applicable to Desk Reference)
After “F50.9 Unspecified feeding or eating disorder,” ADD

- F51.01 Insomnia disorder
- F51.11 Hypersomnolence disorder

DELETE

- G47.00 Insomnia disorder, p. 892
- G47.10 Hypersomnolence disorder, p. 892

Disruptive, Impulse-Control, and Conduct Disorders

ICD-9-CM coding change for Conduct Disorder, Adolescent-onset type
(ICD-10-CM code remains UNCHANGED)
Codes are found on the following pages: DSM-5: pp. xxiv, 846, 871; Desk Reference: p. xxv

DSM-5 Classification, Disruptive, Impulse-Control, and Conduct Disorders:
Conduct Disorder, Adolescent-onset type, p. xxiv (Desk Reference, p. xxv):
• Change 312.32 to 312.82

[NO CORRECTION NEEDED TO CODING IN CRITERIA SET]

Alphabetical Listing, p. 846 (not applicable to Desk Reference)
Replace the ICD-9-CM code as follows for Conduct Disorder, Adolescent-onset type:
• Change 312.32 to 312.82

Numerical Listing (ICD-9-CM), p. 871 (not applicable to Desk Reference):
• Change 312.32 to 312.82 Conduct Disorder, Adolescent-onset type
• Move 312.82 Conduct Disorder, Adolescent-onset type to precede “312.89 Conduct Disorder, Unspecified onset”

ICD-10-CM coding change for Kleptomania (ICD-9-CM code remains UNCHANGED)
Codes are found on the following pages: DSM-5: pp. xxiv, 478, 848, 890;
Desk Reference: pp. xxvi, 225

DSM-5 Classification, Disruptive, Impulse-Control, and Conduct Disorders:
Kleptomania, p. xxiv (Desk Reference, p. xxvi):
• Change F63.3 to F63.2

DSM-5 criteria, ICD-10-CM code for Kleptomania should be revised as follows, p. 478
(Desk Reference, p. 225):
• Change F63.3 to F63.2

Alphabetical Listing, p. 848 (not applicable to Desk Reference)
Replace the ICD-10-CM code as follows for Kleptomania:
• Change F63.3 to F63.2

Numerical Listing (ICD-10-CM), p. 890 (not applicable to Desk Reference):
• Change F63.3 to F63.2 Kleptomania
• Move F63.2 Kleptomania to precede “F63.3 Trichotillomania (hair-pulling disorder)”
Neurocognitive Disorders

DSM-5 Classification Excerpt for

Major Neurocognitive Disorders Due to Possible Etiologies
DSM-5, pp. xxx–xxxii; Desk Reference, pp. xxxiii–xxxvi

Updates to the DSM-5 Classification contain revised coding and notes for the major neurocognitive disorders due to possible etiologies (neurocognitive disorders without coding changes are not included):

- Major Neurocognitive Disorder Due to Alzheimer’s Disease
- Major Frontotemporal Neurocognitive Disorder
- Major Neurocognitive Disorder With Lewy Bodies
- Major Vascular Neurocognitive Disorder
- Major Neurocognitive Disorder Due to Parkinson’s Disease

Major and Mild Neurocognitive Disorders (602) [*299 in Desk Reference]
Specify whether due to: Alzheimer’s disease, Frontotemporal lobar degeneration, Lewy body disease, Vascular disease, Traumatic brain injury, Substance/medication use, HIV infection, Prion disease, Parkinson’s disease, Huntington’s disease, Another medical condition, Multiple etiologies, Unspecified

Specify Without behavioral disturbance, With behavioral disturbance. For mild neurocognitive disorder, behavioral disturbance cannot be coded but should still be indicated in writing.
Specify current severity: Mild, Moderate, Severe. This specifier applies only to major neurocognitive disorders (including probable and possible).

Note: As indicated for each subtype, an additional medical code is needed for major neurocognitive disorders, including those due to probable and possible medical etiologies. The medical etiology should be coded first before the code for the major neurocognitive disorder. An additional medical code should not be used for mild neurocognitive disorder.

Major or Mild Neurocognitive Disorder Due to Alzheimer’s Disease (611) [*305 in Desk Reference]

___.__ (___.__) Major Neurocognitive Disorder Due to Probable Alzheimer’s Disease
Note: Code first 331.0 (G30.9) Alzheimer’s disease.

294.10 (F02.80) Without behavioral disturbance

___.__ (___.__) Major Neurocognitive Disorder Due to Possible Alzheimer’s Disease
Note: Code first 331.0 (G30.9) Alzheimer’s disease.

294.10 (F02.80) Without behavioral disturbance

331.83 (G31.84) Mild Neurocognitive Disorder Due to Alzheimer’s Disease

Major or Mild Frontotemporal Neurocognitive Disorder (614) [*306 in Desk Reference]

___.__ (___.__) Major Neurocognitive Disorder Due to Probable Frontotemporal Lobar Degeneration
Note: Code first 331.19 (G31.09) frontotemporal disease.

294.10 (F02.80) Without behavioral disturbance

___.__ (___.__) Major Neurocognitive Disorder Due to Possible Frontotemporal Lobar Degeneration
Note: Code first 331.19 (G31.09) frontotemporal disease.

294.10 (F02.80) Without behavioral disturbance

331.83 (G31.84) Mild Neurocognitive Disorder Due to Frontotemporal Lobar Degeneration
Neurocognitive Disorders
DSM-5 Classification Excerpt for
Major Neurocognitive Disorders Due to Possible Etiologies (continued)

Major or Mild Neurocognitive Disorder With Lewy Bodies (618) [*308 in Desk Reference]  
___.__ (___.__) Major Neurocognitive Disorder With Probable Lewy Bodiesb
   \textbf{Note:} Code first 331.82 (G31.83) Lewy body disease.
294.11 (F02.81) With behavioral disturbance
294.10 (F02.80) Without behavioral disturbance
___.__ (___.__) Major Neurocognitive Disorder With Possible Lewy Bodiesb
   \textbf{Note:} Code first 331.82 (G31.83) Lewy body disease.
294.11 (F02.81) With behavioral disturbance
294.10 (F02.80) Without behavioral disturbance
331.83 (G31.84) Mild Neurocognitive Disorder With Lewy Bodiesa

Major or Mild Vascular Neurocognitive Disorder (621) [*309 in Desk Reference]  
___.__ (___.__) Major Neurocognitive Disorder Probably Due to Vascular Diseaseb
   \textbf{Note:} No additional medical code for vascular disease.
290.40 (F01.51) With behavioral disturbance
290.40 (F01.50) Without behavioral disturbance
___.__ (___.__) Major Neurocognitive Disorder Possibly Due to Vascular Diseaseb
   \textbf{Note:} No additional medical code for vascular disease.
290.40 (F01.51) With behavioral disturbance
290.40 (F01.50) Without behavioral disturbance
331.83 (G31.84) Mild Vascular Neurocognitive Disordera

Major or Mild Neurocognitive Disorder Due to Parkinson’s Disease (636)  
[*316 in Desk Reference]  
___.__ (___.__) Major Neurocognitive Disorder Probably Due to Parkinson’s Diseaseb
   \textbf{Note:} Code first 332.0 (G20) Parkinson’s disease.
294.11 (F02.81) With behavioral disturbance
294.10 (F02.80) Without behavioral disturbance
___.__ (___.__) Major Neurocognitive Disorder Possibly Due to Parkinson’s Diseaseb
   \textbf{Note:} Code first 332.0 (G20) Parkinson’s disease.
294.11 (F02.81) With behavioral disturbance
294.10 (F02.80) Without behavioral disturbance
331.83 (G31.84) Mild Neurocognitive Disorder Due to Parkinson’s Diseasea
# Neurocognitive Disorders

## Updated Coding Table

Incorporates revisions for major neurocognitive disorders due to possible etiologies

*DSM-5*, pp. 603–604; Desk Reference, pp. 302–304

**Coding note**: Code based on medical or substance etiology. In some cases, there is need for an additional code for the etiological medical condition, which must immediately precede the diagnostic code for major neurocognitive disorder, as follows:

<table>
<thead>
<tr>
<th>Etiological subtype</th>
<th>Associated etiological medical code for major neurocognitive disorder(^a)</th>
<th>Major neurocognitive disorder code(^b)</th>
<th>Mild neurocognitive disorder code(^c)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alzheimer’s disease</td>
<td>331.0 (G30.9)</td>
<td>294.1x (F02.8x)</td>
<td>331.83 (G31.84) (Do not use additional code for Alzheimer’s disease.)</td>
</tr>
<tr>
<td>Frontotemporal lobar degeneration</td>
<td>331.19 (G31.09)</td>
<td>294.1x (F02.8x)</td>
<td>331.83 (G31.84) (Do not use additional code for frontotemporal disease.)</td>
</tr>
<tr>
<td>Lewy body disease</td>
<td>331.82 (G31.83)</td>
<td>294.1x (F02.8x)</td>
<td>331.83 (G31.84) (Do not use additional code for Lewy body disease.)</td>
</tr>
<tr>
<td>Vascular disease</td>
<td>No additional medical code</td>
<td>290.40 (F01.5x)</td>
<td>331.83 (G31.84) (Do not use additional code for the vascular disease.)</td>
</tr>
<tr>
<td>Traumatic brain injury</td>
<td>907.0 (S06.2X9S)</td>
<td>294.1x (F02.8x)</td>
<td>331.83 (G31.84) (Do not use additional code for the traumatic brain injury.)</td>
</tr>
<tr>
<td>Substance/medication-induced</td>
<td>No additional medical code</td>
<td>Code based on the type of substance causing the major neurocognitive disorder(^c). (^d)</td>
<td>Code based on the type of substance causing the mild neurocognitive disorder(^d)</td>
</tr>
<tr>
<td>HIV infection</td>
<td>042 (B20)</td>
<td>294.1x (F02.8x)</td>
<td>331.83 (G31.84) (Do not use additional code for HIV infection.)</td>
</tr>
<tr>
<td>Prion disease</td>
<td>046.79 (A81.9)</td>
<td>294.1x (F02.8x)</td>
<td>331.83 (G31.84) (Do not use additional code for prion disease.)</td>
</tr>
<tr>
<td>Parkinson’s disease</td>
<td>332.0 (G20)</td>
<td>294.1x (F02.8x)</td>
<td>331.83 (G31.84) (Do not use additional code for Parkinson’s disease.)</td>
</tr>
<tr>
<td>Huntington’s disease</td>
<td>333.4 (G10)</td>
<td>294.1x (F02.8x)</td>
<td>331.83 (G31.84) (Do not use additional code for Huntington’s disease.)</td>
</tr>
</tbody>
</table>
# Neurocognitive Disorders

## Updated Coding Table (continued)

<table>
<thead>
<tr>
<th>Etiological subtype</th>
<th>Associated etiological medical code for major neurocognitive disorder&lt;sup&gt;a&lt;/sup&gt;</th>
<th>Major neurocognitive disorder code&lt;sup&gt;b&lt;/sup&gt;</th>
<th>Mild neurocognitive disorder code&lt;sup&gt;c&lt;/sup&gt;</th>
</tr>
</thead>
<tbody>
<tr>
<td>Due to another medical condition</td>
<td>Code the other medical condition first (e.g., 340 [G35] multiple sclerosis)</td>
<td>294.1x (F02.8x)</td>
<td>331.83 (G31.84)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Do not use additional codes for the presumed etiological medical conditions.)</td>
</tr>
<tr>
<td>Due to multiple etiologies</td>
<td>Code all of the etiological medical conditions first (with the exception of vascular disease)</td>
<td>294.1x (F02.8x) (Plus the code for the relevant substance/medication-induced major neurocognitive disorders if substances or medications play a role in the etiology.)</td>
<td>331.83 (G31.84)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>(Plus the code for the relevant substance/medication-induced mild neurocognitive disorders if substances or medications play a role in the etiology. Do not use additional codes for the presumed etiological medical conditions.)</td>
</tr>
<tr>
<td>Unspecified neurocognitive disorder</td>
<td>No additional medical code</td>
<td>799.59 (R41.9)</td>
<td>799.59 (R41.9)</td>
</tr>
</tbody>
</table>

<sup>a</sup> Code first, before code for major neurocognitive disorder.

<sup>b</sup> Code fifth character based on symptom specifier: .x0 without behavioral disturbance; .x1 with behavioral disturbance (e.g., psychotic symptoms, mood disturbance, agitation, apathy, or other behavioral symptoms).

<sup>c</sup> Note: Behavioral disturbance specifier cannot be coded but should still be indicated in writing.

<sup>d</sup> See “Substance/Medication-Induced Major or Mild Neurocognitive Disorder.”
# Neurocognitive Disorders
## Updated Coding Notes in DSM-5 Criteria Sets
See table for specific pages containing updates in DSM-5 and Desk Reference.

<table>
<thead>
<tr>
<th>Disorder</th>
<th>Updated coding note</th>
</tr>
</thead>
</table>
| **Major or Mild Neurocognitive Disorder Due to Alzheimer’s Disease** | **Coding note:** For major neurocognitive disorder due to probable Alzheimer’s disease, with behavioral disturbance, code first 331.0 (G30.9) Alzheimer’s disease, followed by 294.11 (F02.81). For major neurocognitive disorder due to probable Alzheimer’s disease, without behavioral disturbance, code first 331.0 (G30.9) Alzheimer’s disease, followed by 294.10 (F02.80).  
For major neurocognitive disorder due to possible Alzheimer’s disease, with behavioral disturbance, code first 331.0 (G30.9) Alzheimer’s disease, followed by 294.11 (F02.81). For major neurocognitive disorder due to possible Alzheimer’s disease, without behavioral disturbance, code first 331.0 (G30.9) Alzheimer’s disease, followed by 294.10 (F02.80).  
For mild neurocognitive disorder due to Alzheimer’s disease, code 331.83 (G31.84). *(Note: Do not use the additional code for Alzheimer’s disease. Behavioral disturbance cannot be coded but should still be indicated in writing.)*  
*This coding note appears in DSM-5, pp. 611–612; in Desk Reference, p. 306.* |
| **Major or Mild Frontotemporal Neurocognitive Disorder** | **Coding note:** For major neurocognitive disorder due to probable frontotemporal lobar degeneration, with behavioral disturbance, code first 331.19 (G31.09) frontotemporal disease, followed by 294.11 (F02.81). For major neurocognitive disorder due to probable frontotemporal lobar degeneration, without behavioral disturbance, code first 331.19 (G31.09) frontotemporal disease, followed by 294.10 (F02.80).  
For major neurocognitive disorder due to possible frontotemporal lobar degeneration, with behavioral disturbance, code first 331.19 (G31.09) frontotemporal disease, followed by 294.11 (F02.81). For major neurocognitive disorder due to possible frontotemporal lobar degeneration, without behavioral disturbance, code first 331.19 (G31.09) frontotemporal disease, followed by 294.10 (F02.80).  
For mild neurocognitive disorder due to frontotemporal lobar degeneration, code 331.83 (G31.84). *(Note: Do not use the additional code for frontotemporal disease. Behavioral disturbance cannot be coded but should still be indicated in writing.)*  
*This coding note appears in DSM-5, p. 615; in Desk Reference, pp. 307–308.* |
| **Major or Mild Neurocognitive Disorder With Lewy Bodies** | **Coding note:** For major neurocognitive disorder with probable Lewy bodies, with behavioral disturbance, code first 331.82 (G31.83) Lewy body disease, followed by 294.11 (F02.81). For major neurocognitive disorder with probable Lewy bodies, without behavioral disturbance, code first 331.82 (G31.83) Lewy body disease, followed by 294.10 (F02.80).  
For major neurocognitive disorder with possible Lewy bodies, with behavioral disturbance, code first 331.82 (G31.83) Lewy body disease, followed by 294.11 (F02.81). For major neurocognitive disorder with possible Lewy bodies, without behavioral disturbance, code first 331.82 (G31.83) Lewy body disease, followed by 294.10 (F02.80).  
For mild neurocognitive disorder with Lewy bodies, code 331.83 (G31.84). *(Note: Do not use the additional code for Lewy body disease. Behavioral disturbance cannot be coded but should still be indicated in writing.)*  
*This coding note appears in DSM-5, pp. 618–619; in Desk Reference, p. 309.* |
### Neurocognitive Disorders

#### Updated Coding Notes in DSM-5 Criteria Sets (continued)

<table>
<thead>
<tr>
<th>Disorder</th>
<th>Updated coding note</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Major or Mild Vascular Neurocognitive Disorder</strong></td>
<td><strong>Coding note:</strong> For major neurocognitive disorder probably due to vascular disease, with behavioral disturbance, code 290.40 (F01.51). For major neurocognitive disorder probably due to vascular disease, without behavioral disturbance, code 290.40 (F01.50). An additional medical code for the vascular disease is not needed. For major neurocognitive disorder possibly due to vascular disease, with behavioral disturbance, code 290.40 (F01.51). For major neurocognitive disorder possibly due to vascular disease, without behavioral disturbance, code 290.40 (F01.50). An additional medical code for the vascular disease is not needed. For mild neurocognitive disorder due to vascular disease, code 331.83 (G31.84). (Note: Do not use an additional code for the vascular disease. Behavioral disturbance cannot be coded but should still be indicated in writing.) <em>This coding note appears in DSM-5, p. 621; in Desk Reference, p. 310.</em></td>
</tr>
<tr>
<td><strong>Major or Mild Neurocognitive Disorder Due to Parkinson’s Disease</strong></td>
<td><strong>Coding note:</strong> For major neurocognitive disorder probably due to Parkinson’s disease, with behavioral disturbance, code first 332.0 (G20) Parkinson’s disease, followed by 294.11 (F02.81). For major neurocognitive disorder probably due to Parkinson’s disease, without behavioral disturbance, code first 332.0 (G20) Parkinson’s disease, followed by 294.10 (F02.80). For major neurocognitive disorder possibly due to Parkinson’s disease, with behavioral disturbance, code first 332.0 (G20) Parkinson’s disease, followed by 294.11 (F02.81). For major neurocognitive disorder possibly due to Parkinson’s disease, without behavioral disturbance, code first 332.0 (G20) Parkinson’s disease, followed by 294.10 (F02.80). For mild neurocognitive disorder due to Parkinson’s disease, code 331.83 (G31.84). (Note: Do not use the additional code for Parkinson’s disease. Behavioral disturbance cannot be coded but should still be indicated in writing.) <em>This coding note appears in DSM-5, pp. 636–637; in Desk Reference, p. 317.</em></td>
</tr>
</tbody>
</table>
### Neurocognitive Disorders

**Alphabetical Listing of DSM-5 Diagnoses and Codes (ICD-9-CM and ICD-10-CM)**

This excerpt provides the updated ICD-9-CM and ICD-10-CM codes for major neurocognitive disorders due to possible etiologies and reintegrates their placement within the listing.

(DSM-5 only, pp. 849–850; not applicable to Desk Reference)

ICD-9-CM codes are to be used for coding purposes in the United States through September 30, 2014. ICD-10-CM codes are to be used for coding purposes in the United States starting October 1, 2014.

<table>
<thead>
<tr>
<th>ICD-9-CM</th>
<th>ICD-10-CM</th>
<th>Disorder, condition, or problem</th>
</tr>
</thead>
<tbody>
<tr>
<td>294.11</td>
<td>F02.81</td>
<td>Major neurocognitive disorder due to another medical condition (With behavioral disturbance)</td>
</tr>
<tr>
<td>294.10</td>
<td>F02.80</td>
<td>Major neurocognitive disorder due to another medical condition (Without behavioral disturbance)</td>
</tr>
<tr>
<td>294.11</td>
<td>F02.81</td>
<td>Major neurocognitive disorder due to HIV infection (code first 042 [B20] HIV infection) (With behavioral disturbance)</td>
</tr>
<tr>
<td>294.10</td>
<td>F02.80</td>
<td>Major neurocognitive disorder due to HIV infection (code first 042 [B20] HIV infection) (Without behavioral disturbance)</td>
</tr>
<tr>
<td>294.11</td>
<td>F02.81</td>
<td>Major neurocognitive disorder due to Huntington’s disease (code first 333.4 [G10] Huntington’s disease) (With behavioral disturbance)</td>
</tr>
<tr>
<td>294.10</td>
<td>F02.80</td>
<td>Major neurocognitive disorder due to Huntington’s disease (code first 333.4 [G10] Huntington’s disease) (Without behavioral disturbance)</td>
</tr>
<tr>
<td>294.11</td>
<td>F02.81</td>
<td>Major neurocognitive disorder due to multiple etiologies (With behavioral disturbance)</td>
</tr>
<tr>
<td>294.10</td>
<td>F02.80</td>
<td>Major neurocognitive disorder due to multiple etiologies (Without behavioral disturbance)</td>
</tr>
<tr>
<td>294.11</td>
<td>F02.81</td>
<td>Major neurocognitive disorder due to possible Alzheimer’s disease (code first 331.0 [G30.9] Alzheimer’s disease) (With behavioral disturbance)</td>
</tr>
<tr>
<td>294.10</td>
<td>F02.80</td>
<td>Major neurocognitive disorder due to possible Alzheimer’s disease (code first 331.0 [G30.9] Alzheimer’s disease) (Without behavioral disturbance)</td>
</tr>
<tr>
<td>294.11</td>
<td>F02.81</td>
<td>Major neurocognitive disorder due to possible frontotemporal lobar degeneration (code first 331.19 [G31.09] frontotemporal disease) (With behavioral disturbance)</td>
</tr>
<tr>
<td>294.10</td>
<td>F02.80</td>
<td>Major neurocognitive disorder due to possible frontotemporal lobar degeneration (code first 331.19 [G31.09] frontotemporal disease) (Without behavioral disturbance)</td>
</tr>
</tbody>
</table>
### Neurocognitive Disorders

Alphabetical Listing of DSM-5 Diagnoses and Codes (ICD-9-CM and ICD-10-CM) (continued)

<table>
<thead>
<tr>
<th>ICD-9-CM</th>
<th>ICD-10-CM</th>
<th>Disorder, condition, or problem</th>
</tr>
</thead>
<tbody>
<tr>
<td>294.11</td>
<td>F02.81</td>
<td>With behavioral disturbance</td>
</tr>
<tr>
<td>294.10</td>
<td>F02.80</td>
<td>Without behavioral disturbance</td>
</tr>
<tr>
<td>294.11</td>
<td>F02.81</td>
<td>With behavioral disturbance</td>
</tr>
<tr>
<td>294.10</td>
<td>F02.80</td>
<td>Without behavioral disturbance</td>
</tr>
<tr>
<td>290.40</td>
<td>F01.51</td>
<td>With behavioral disturbance</td>
</tr>
<tr>
<td>290.40</td>
<td>F01.50</td>
<td>Without behavioral disturbance</td>
</tr>
<tr>
<td>294.11</td>
<td>F02.81</td>
<td>With behavioral disturbance</td>
</tr>
<tr>
<td>294.10</td>
<td>F02.80</td>
<td>Without behavioral disturbance</td>
</tr>
<tr>
<td>294.11</td>
<td>F02.81</td>
<td>With behavioral disturbance</td>
</tr>
<tr>
<td>294.10</td>
<td>F02.80</td>
<td>Without behavioral disturbance</td>
</tr>
</tbody>
</table>
Neurocognitive Disorders
Numerical Listing of DSM-5 Diagnoses and Codes (ICD-9-CM)

This excerpt provides the updated ICD-9-CM codes for major neurocognitive disorders due to possible etiologies and reintegrates their placement with other major neurocognitive disorders in the listing. Disorders outside this category or numerical set are not included here. (DSM-5 only, pp. 863, 866; on p. 872, delete the ICD-9-CM code 331.9 and all corresponding entries; not applicable to Desk Reference)

ICD-9-CM codes are to be used for coding purposes in the United States through September 30, 2014.

<table>
<thead>
<tr>
<th>ICD-9-CM</th>
<th>Disorder, condition, or problem</th>
</tr>
</thead>
<tbody>
<tr>
<td>290.40</td>
<td>Major neurocognitive disorder possibly due to vascular disease, With behavioral disturbance</td>
</tr>
<tr>
<td>290.40</td>
<td>Major neurocognitive disorder possibly due to vascular disease, Without behavioral disturbance</td>
</tr>
<tr>
<td>290.40</td>
<td>Major neurocognitive disorder probably due to vascular disease, With behavioral disturbance</td>
</tr>
<tr>
<td>290.40</td>
<td>Major neurocognitive disorder probably due to vascular disease, Without behavioral disturbance</td>
</tr>
<tr>
<td>294.10</td>
<td>Major neurocognitive disorder due to another medical condition, Without behavioral disturbance</td>
</tr>
<tr>
<td>294.10</td>
<td>Major neurocognitive disorder due to HIV infection, Without behavioral disturbance (code first 042 HIV infection)</td>
</tr>
<tr>
<td>294.10</td>
<td>Major neurocognitive disorder due to Huntington’s disease, Without behavioral disturbance (code first 333.4 Huntington’s disease)</td>
</tr>
<tr>
<td>294.10</td>
<td>Major neurocognitive disorder due to multiple etiologies, Without behavioral disturbance</td>
</tr>
<tr>
<td>294.10</td>
<td>Major neurocognitive disorder due to possible Alzheimer’s disease, Without behavioral disturbance (code first 331.0 Alzheimer’s disease)</td>
</tr>
<tr>
<td>294.10</td>
<td>Major neurocognitive disorder due to probable Alzheimer’s disease, Without behavioral disturbance (code first 331.0 Alzheimer’s disease)</td>
</tr>
<tr>
<td>294.10</td>
<td>Major neurocognitive disorder due to possible frontotemporal lobar degeneration, Without behavioral disturbance (code first 331.19 frontotemporal disease)</td>
</tr>
<tr>
<td>294.10</td>
<td>Major neurocognitive disorder due to probable frontotemporal lobar degeneration, Without behavioral disturbance (code first 331.19 frontotemporal disease)</td>
</tr>
<tr>
<td>ICD-9-CM</td>
<td>Disorder, condition, or problem</td>
</tr>
<tr>
<td>----------</td>
<td>-----------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>294.10</td>
<td>Major neurocognitive disorder with possible Lewy bodies, Without behavioral disturbance (code first 331.82 Lewy body disease)</td>
</tr>
<tr>
<td>294.10</td>
<td>Major neurocognitive disorder with probable Lewy bodies, Without behavioral disturbance (code first 331.82 Lewy body disease)</td>
</tr>
<tr>
<td>294.10</td>
<td>Major neurocognitive disorder possibly due to Parkinson’s disease, Without behavioral disturbance (code first 332.0 Parkinson’s disease)</td>
</tr>
<tr>
<td>294.10</td>
<td>Major neurocognitive disorder probably due to Parkinson’s disease, Without behavioral disturbance (code first 332.0 Parkinson's disease)</td>
</tr>
<tr>
<td>294.10</td>
<td>Major neurocognitive disorder due to prion disease, Without behavioral disturbance (code first 046.79 prion disease)</td>
</tr>
<tr>
<td>294.10</td>
<td>Major neurocognitive disorder due to traumatic brain injury, Without behavioral disturbance (code first 907.0 late effect of intracranial injury without skull fracture)</td>
</tr>
<tr>
<td>294.11</td>
<td>Major neurocognitive disorder due to another medical condition, With behavioral disturbance</td>
</tr>
<tr>
<td>294.11</td>
<td>Major neurocognitive disorder due to HIV infection, With behavioral disturbance (code first 042 HIV infection)</td>
</tr>
<tr>
<td>294.11</td>
<td>Major neurocognitive disorder due to Huntington’s disease, With behavioral disturbance (code first 333.4 Huntington’s disease)</td>
</tr>
<tr>
<td>294.11</td>
<td>Major neurocognitive disorder due to multiple etiologies, With behavioral disturbance</td>
</tr>
<tr>
<td>294.11</td>
<td>Major neurocognitive disorder due to possible Alzheimer’s disease, With behavioral disturbance (code first 331.0 Alzheimer’s disease)</td>
</tr>
<tr>
<td>294.11</td>
<td>Major neurocognitive disorder due to probable Alzheimer’s disease, With behavioral disturbance (code first 331.0 Alzheimer's disease)</td>
</tr>
<tr>
<td>294.11</td>
<td>Major neurocognitive disorder due to possible frontotemporal lobar degeneration, With behavioral disturbance (code first 331.19 frontotemporal disease)</td>
</tr>
<tr>
<td>294.11</td>
<td>Major neurocognitive disorder due to probable frontotemporal lobar degeneration, With behavioral disturbance (code first 331.19 frontotemporal disease)</td>
</tr>
</tbody>
</table>
### Neurocognitive Disorders
#### Numerical Listing of DSM-5 Diagnoses and Codes (ICD-9-CM) (continued)

<table>
<thead>
<tr>
<th>ICD-9-CM</th>
<th>Disorder, condition, or problem</th>
</tr>
</thead>
<tbody>
<tr>
<td>294.11</td>
<td>Major neurocognitive disorder with possible Lewy bodies, With behavioral disturbance (<em>code first</em> 331.82 Lewy body disease)</td>
</tr>
<tr>
<td>294.11</td>
<td>Major neurocognitive disorder with probable Lewy bodies, With behavioral disturbance (<em>code first</em> 331.82 Lewy body disease)</td>
</tr>
<tr>
<td>294.11</td>
<td>Major neurocognitive disorder possibly due to Parkinson’s disease, With behavioral disturbance (<em>code first</em> 332.0 Parkinson’s disease)</td>
</tr>
<tr>
<td>294.11</td>
<td>Major neurocognitive disorder probably due to Parkinson’s disease, With behavioral disturbance (<em>code first</em> 332.0 Parkinson’s disease)</td>
</tr>
<tr>
<td>294.11</td>
<td>Major neurocognitive disorder due to prion disease, With behavioral disturbance (<em>code first</em> 046.79 prion disease)</td>
</tr>
<tr>
<td>294.11</td>
<td>Major neurocognitive disorder due to traumatic brain injury, With behavioral disturbance (<em>code first</em> 907.0 late effect of intracranial injury without skull fracture)</td>
</tr>
</tbody>
</table>

### Neurocognitive Disorders
#### Numerical Listing of DSM-5 Diagnoses and Codes (ICD-10-CM)

This excerpt provides the updated ICD-10-CM codes for major neurocognitive disorders due to possible etiologies and reintegrates their placement with other major neurocognitive disorders in the listing. Disorders outside this category or alphanumerical set are not included here.

(DSM-5 only, pp. 877–878; on p. 892, delete the ICD-10-CM code G31.9 and all corresponding entries; not applicable to Desk Reference)

ICD-10-CM codes are to be used for coding purposes in the United States starting October 1, 2014.

<table>
<thead>
<tr>
<th>ICD-10-CM</th>
<th>Disorder, condition, or problem</th>
</tr>
</thead>
<tbody>
<tr>
<td>F01.50</td>
<td>Major neurocognitive disorder possibly due to vascular disease, Without behavioral disturbance</td>
</tr>
<tr>
<td>F01.50</td>
<td>Major neurocognitive disorder probably due to vascular disease, Without behavioral disturbance</td>
</tr>
<tr>
<td>F01.51</td>
<td>Major neurocognitive disorder possibly due to vascular disease, With behavioral disturbance</td>
</tr>
<tr>
<td>F01.51</td>
<td>Major neurocognitive disorder probably due to vascular disease, With behavioral disturbance</td>
</tr>
</tbody>
</table>
### Neurocognitive Disorders
#### Numerical Listing of DSM-5 Diagnoses and Codes (ICD-10-CM) (continued)

<table>
<thead>
<tr>
<th>ICD-10-CM</th>
<th>Disorder, condition, or problem</th>
</tr>
</thead>
<tbody>
<tr>
<td>F02.80</td>
<td>Major neurocognitive disorder due to another medical condition, Without behavioral disturbance</td>
</tr>
<tr>
<td>F02.80</td>
<td>Major neurocognitive disorder due to HIV infection, Without behavioral disturbance <em>(code first B20 HIV infection)</em></td>
</tr>
<tr>
<td>F02.80</td>
<td>Major neurocognitive disorder due to Huntington’s disease, Without behavioral disturbance <em>(code first G10 Huntington's disease)</em></td>
</tr>
<tr>
<td>F02.80</td>
<td>Major neurocognitive disorder due to multiple etiologies, Without behavioral disturbance</td>
</tr>
<tr>
<td>F02.80</td>
<td>Major neurocognitive disorder due to possible Alzheimer’s disease, Without behavioral disturbance <em>(code first 331.0 Alzheimer’s disease)</em></td>
</tr>
<tr>
<td>F02.80</td>
<td>Major neurocognitive disorder due to probable Alzheimer’s disease, Without behavioral disturbance <em>(code first G30.9 Alzheimer’s disease)</em></td>
</tr>
<tr>
<td>F02.80</td>
<td>Major neurocognitive disorder due to possible frontotemporal lobar degeneration, Without behavioral disturbance <em>(code first G31.09 frontotemporal disease)</em></td>
</tr>
<tr>
<td>F02.80</td>
<td>Major neurocognitive disorder due to probable frontotemporal lobar degeneration, Without behavioral disturbance <em>(code first G31.09 frontotemporal disease)</em></td>
</tr>
<tr>
<td>F02.80</td>
<td>Major neurocognitive disorder with possible Lewy bodies, Without behavioral disturbance <em>(code first G31.83 Lewy body disease)</em></td>
</tr>
<tr>
<td>F02.80</td>
<td>Major neurocognitive disorder with probable Lewy bodies, Without behavioral disturbance <em>(code first G31.83 Lewy body disease)</em></td>
</tr>
<tr>
<td>F02.80</td>
<td>Major neurocognitive disorder possibly due to Parkinson’s disease, Without behavioral disturbance <em>(code first G20 Parkinson’s disease)</em></td>
</tr>
<tr>
<td>F02.80</td>
<td>Major neurocognitive disorder probably due to Parkinson’s disease, Without behavioral disturbance <em>(code first G20 Parkinson’s disease)</em></td>
</tr>
<tr>
<td>F02.80</td>
<td>Major neurocognitive disorder due to prion disease, Without behavioral disturbance <em>(code first A81.9 prion disease)</em></td>
</tr>
<tr>
<td>F02.80</td>
<td>Major neurocognitive disorder due to traumatic brain injury, Without behavioral disturbance <em>(code first S06.2X9S diffuse traumatic brain injury with loss of consciousness of unspecified duration, sequela)</em></td>
</tr>
<tr>
<td>F02.81</td>
<td>Major neurocognitive disorder due to another medical condition, With behavioral disturbance</td>
</tr>
<tr>
<td>F02.81</td>
<td>Major neurocognitive disorder due to HIV infection, With behavioral disturbance <em>(code first B20 HIV infection)</em></td>
</tr>
<tr>
<td>F02.81</td>
<td>Major neurocognitive disorder due to Huntington’s disease, With behavioral disturbance <em>(code first G10 Huntington's disease)</em></td>
</tr>
<tr>
<td>F02.81</td>
<td>Major neurocognitive disorder due to multiple etiologies, With behavioral disturbance</td>
</tr>
</tbody>
</table>
### Neurocognitive Disorders
**Numerical Listing of DSM-5 Diagnoses and Codes (ICD-10-CM) (continued)**

<table>
<thead>
<tr>
<th>ICD-10-CM</th>
<th>Disorder, condition, or problem</th>
</tr>
</thead>
<tbody>
<tr>
<td>F02.81</td>
<td>Major neurocognitive disorder due to possible Alzheimer’s disease, With behavioral disturbance <em>(code first 331.0 Alzheimer’s disease)</em></td>
</tr>
<tr>
<td>F02.81</td>
<td>Major neurocognitive disorder due to probable Alzheimer’s disease, With behavioral disturbance <em>(code first G30.9 Alzheimer’s disease)</em></td>
</tr>
<tr>
<td>F02.81</td>
<td>Major neurocognitive disorder due to possible frontotemporal lobar degeneration, With behavioral disturbance <em>(code first G31.09 frontotemporal disease)</em></td>
</tr>
<tr>
<td>F02.81</td>
<td>Major neurocognitive disorder due to probable frontotemporal lobar degeneration, With behavioral disturbance <em>(code first G31.09 frontotemporal disease)</em></td>
</tr>
<tr>
<td>F02.81</td>
<td>Major neurocognitive disorder with possible Lewy bodies, With behavioral disturbance <em>(code first G31.83 Lewy body disease)</em></td>
</tr>
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<td>Major neurocognitive disorder with probable Lewy bodies, With behavioral disturbance <em>(code first G31.83 Lewy body disease)</em></td>
</tr>
<tr>
<td>F02.81</td>
<td>Major neurocognitive disorder possibly due to Parkinson’s disease, With behavioral disturbance <em>(code first G20 Parkinson’s disease)</em></td>
</tr>
<tr>
<td>F02.81</td>
<td>Major neurocognitive disorder probably due to Parkinson’s disease, With behavioral disturbance <em>(code first G20 Parkinson’s disease)</em></td>
</tr>
<tr>
<td>F02.81</td>
<td>Major neurocognitive disorder due to prion disease, With behavioral disturbance <em>(code first A81.9 prion disease)</em></td>
</tr>
<tr>
<td>F02.81</td>
<td>Major neurocognitive disorder due to traumatic brain injury, With behavioral disturbance <em>(code first S06.2X9S diffuse traumatic brain injury with loss of consciousness of unspecified duration, sequela)</em></td>
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