On Oct. 1, 2015, all HIPAA-covered entities must transition from using ICD-9 codes to using ICD-10 codes. This fact sheet provides information to help you transition to ICD-10 using DSM-5.

What is the relationship between the codes in my DSM and ICD codes?

Since 1980, every code that has been listed in DSM has been an ICD-9 code. However, DSM-5, unlike previous versions of DSM, contains both ICD-9 and ICD-10 codes. For most behavioral health providers, if you have a DSM-5, you are ready for the transition to ICD-10 on Oct. 1, 2015.

Where do I find the ICD-10 codes in DSM-5?

Below is an illustration taken from the DSM-5. The code on the left is an ICD-9 code. The code on the right is an ICD-10 code. Beginning Oct. 1, 2015, you will need to use the code on the right.

Since ICD-10 has more codes than ICD-9, how do I code disorders that now have multiple coding options?

Part of the reason the U.S. is upgrading to a newer version of ICD is because it allows providers to be more specific in their diagnoses. For example, there is only one ICD-9 code you can use to diagnose Anorexia Nervosa. The code is 307.1. ICD-10 provides a unique code for the two types of Anorexia Nervosa—the Binge-Eating/Purging type and a separate code for the Restricting type. With ICD-10, you can now be more specific by assigning a different code to each type.

Here is an excerpt from a page of DSM-5 to show what these more specific codes look like in the classification:
Here is an excerpt from the Feeding and Eating Disorders chapter of DSM-5 to show what these look like in the text:

**Coding note:** The ICD-9-CM code for anorexia nervosa is 307.1, which is assigned regardless of the subtype. The ICD-10-CM code depends on the subtype (see below). Specify whether:

(F50.01) Restricting type: During the last 3 months, the individual has not engaged in recurrent episodes of binge eating or purging behavior (i.e., self-induced vomiting or the misuse of laxatives, diuretics, or enemas). This subtype describes presentations in which weight loss is accomplished primarily through dieting, fasting, and/or excessive exercise.

(F50.02) Binge-eating/purging type: During the last 3 months, the individual has engaged in recurrent episodes of binge eating or purging behavior (i.e., self-induced vomiting or the misuse of laxatives, diuretics, or enemas).

**If I have a DSM-5, do I need to purchase an ICD-10 to identify correct billing codes?**

No. If you are a behavioral health provider, DSM-5 should remain your primary resource. It is a tool that provides you with diagnostic criteria and corresponding ICD-10 codes.

**Do I need a DSM-5 to practice, or can I just use the ICD-10 book?**

Providers should continue to use DSM-5 to determine the correct diagnosis of a mental disorder. ICD-10 does not contain information to help guide diagnosis; it is simply a listing of disease names and their corresponding codes. There is a diagnostic book, The ICD-10 Classification of Mental and Behavioural Disorders (referred to as the “Blue Book”), which contains diagnostic criteria and non-U.S. ICD-10 codes. However, this book was last updated in 1992 and is not in line with contemporary thinking about mental illness in the same way as the DSM-5.

**Does the U.S. Officially recognize DSM-5 for use in identifying ICD-10 codes?**

Yes. The National Center for Health Statistics and the Centers for Medicare & Medicaid Services (CMS) oversee the official implementation of ICD-10 in the U.S. CMS has posted the following on its website:

“DSM-5 contains the standard criteria and definitions of mental disorders now approved by the American Psychiatric Association (APA), and it also contains both ICD-9-CM and ICD-10-CM codes (in parentheses) selected by APA. Since DSM-IV only contains ICD-9-CM codes, it will cease to be recognized for criteria or coding for services with dates of service of October 1, 2015 or later. Updates for DSM-5 criteria and their associated ICD-10-CM codes (identified by APA) will be found at www.dsm5.org.”

See more at the following CMS web page: [http://1.usa.gov/1vqmdZP](http://1.usa.gov/1vqmdZP)

**Where can I learn more about the transition to DSM-5 and ICD-10?**

A free webinar with in-depth information about the transition is available at the American Psychiatric Association’s website: [www.psychiatry.org/ICD10transition](http://www.psychiatry.org/ICD10transition)

There also are several resources available via the DSM-5 website at [www.dsm5.org](http://www.dsm5.org). You are encouraged to visit this site often as updates in coding and other resources are often added.

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1. **Note:** Throughout this document, we use the terms ICD-10 and ICD-9 for readability. These actually refer to the U.S. versions of the publications, known formally as The International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) and The International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM).

2. **Note:** When “you” is used in this publication, we are referring to health care providers. Insurers and coders may require additional resources to prepare for the transition.”