

Documentation and Coding: Cannabis Abuse/Use

CMS-HCC_V28 Model Updates

September 2023

At Healthfirst, we are committed to helping providers accurately document and code their patients' health records. This tip sheet is intended to assist providers and coding staff with the documentation and **ICD-10-CM selection, along with the Centers for Medicare & Medicaid Services (CMS) Hierarchical Condition Category (HCC) Version 28 Updates**, on services submitted to Healthfirst—specifically for **cannabis abuse/use**. It provides information from industry sources about proper coding practices. However, this document does not represent or guarantee that Healthfirst will cover and/or pay for services outlined. Coverage decisions are based on the terms of the applicable evidence of coverage and the provider's participation agreement. This includes the determination of any amounts that Healthfirst or the member owes the provider.

ICD-10-CM provides categories for each type of substance. The table below will assist with coding cannabis disorders.

Description	Abuse	Dependence	Use
Unspecified induced disorder	-	F12.29 [†]	-
Anxiety	F12.180	F12.280	F12.980
Intoxication	-	F12.22*	-
Psychotic disorder, unspecified	F12.159 [†]	F12.259 [†]	F12.959 [†]
Delusions	F12.150	F12.250	F12.950
Hallucinations	F12.151	F12.251	F12.951
Withdrawal	F12.13	F12.23	F12.93
Other induced disorder	F12.188	F12.288	F12.988
In remission	-	F12.21	-
Uncomplicated	-	F12.20	-

[†]Use only in the event no other code describes the condition.

*= 6th character required: 0 uncomplicated, 1 w/ delirium, 2 w/ perceptual disturbances, 9 unspecified.

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Other common drug classifications associated with substance use

Sedatives	Other Stimulants	Hallucinogens	Inhalants	Other Psychoactive Substance
F13*	F15*	F16*	F18*	F19*

Keywords for coding substance use disorders

Use	is irregular or low-frequency use of a substance that is not habitual.
Abuse	is habitual use of a substance that negatively impacts a patient's health or social functioning but has not arrived at the point of physical and/or mental dependency.
Dependence	a chronic mental and physical state where the patient has to use a substance in order to function normally; generally, these patients experience signs of withdrawal upon cessation of the substance.
In Remission	In all subcategories for dependence, abuse, and use there are codes available for in remission to indicate that the clinical criteria for dependence on or abuse or use of a psychoactive substance are no longer met.

Coding Tips

- If documentation supports both use and abuse, **Abuse will be coded.**
- If documentation supports both abuse and dependence, **Dependence will be coded.**
- If use and dependence are documented, **Dependence will be coded.**
- If use, abuse, and dependence are documented, **Dependence will be coded.**
- If withdrawal is documented, **Dependence will be coded.**
- If mild, moderate, and severe substance use disorder in early or sustained is classified in the category, **Substance abuse in remission will be coded.**

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Other common drug classifications associated with substance use

Alcoholism and drug addiction in family	Drug abuse counseling and surveillance of drug abuser	Counseling for family member of drug abuser	Family history of other psychoactive substance abuse and dependence
Z63.72	Z71.51	Z71.52	Z81.3

Coding Tips

- Utilize Z-codes (listed above) as a secondary diagnosis when a history of substance or drug abuse exists.
- When counseling is documented, use additional code for drug abuse or dependence (F11–F16, F18–F19).

Coding Examples

Case 1	ICD-10-CM	Rationale
<p>A 26-year-old female presents with complaints of a pounding heartbeat and anxiousness. She reports that she uses marijuana daily and believes that her symptoms may be related. She also reports that she is without stressors. The provider evaluates the patient and documents, "cannabis use with anxiety and palpitations." What codes should be reported?</p>	<p>R00.2 – Palpitations F12.980 – Cannabis use, unspecified with anxiety disorder</p>	<p>ICD-10 guidelines state that codes for psychoactive substance use disorders should be reported only when the psychoactive substance use is associated with a physical, mental, or behavioral disorder and the relationship is documented in the physician's note for the encounter.</p>

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Case 2	ICD-10-CM	Rationale
A provider documents in the history and physical exam section of a note, "cannabis dependence and ongoing cannabis abuse." How is this scenario coded?	F12.20 – Cannabis dependence, uncomplicated	In the hierarchy, the dependence code is used if both abuse and dependence are documented.

Questions?

Contact us at #Risk_Adjustments_and_clinical_Documentation@healthfirst.org.

For additional documentation and coding guidance, please visit the coding section at [HFproviders.org](https://www.healthfirst.org/providers).

References

- <https://www.cms.gov/files/document/fy-2024-icd-10-cm-coding-guidelines.pdf>
- [Coding Clinic Advisor](#)