

Documentation and Coding: Opioids Abuse/Use

CMS-HCC_V28 Model Updates

August 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 Model Updates**, on services submitted to Healthfirst—specifically for **Opioids 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 opioid disorders.

Description	Abuse	Dependence	Use
Unspecified induced disorder	F11.19 [†]	F11.29 [†]	F11.99 [†]
Delusions	F11.150	F11.250	F11.950
Hallucinations	F11.151	F11.251	F11.951
Intoxication	F11.12 [*]	F11.22 [*]	F11.92 [*]
Mood disorder	F11.14	F11.24	F11.94
Psychotic disorder, unspecified	F11.159 [†]	F11.259 [†]	F11.959 [†]
Sexual dysfunction	F11.181	F11.281	F11.981
Sleep disorder	F11.182	F11.282	F11.982
Withdrawal	F11.13	F11.23	F11.93
Other induced disorder	F11.188	F11.288	F11.988
In remission	F11.11	F11.21	–
Uncomplicated	F11.10	F11.20	–

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

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

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Other common drug classifications associated with substance use disorders:

Hallucinogens (F16*)	Inhalants (F18*)	Sedatives (F13*)	Other Stimulants (F15*)	Other Psychoactive Substance (F19*)
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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 dependence.
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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Additional codes associated with substance abuse:

Z63.72	Z71.51	Z71.52	Z81.3
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

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 Example

Case	A 30-year-old male was admitted for acute respiratory failure due to fentanyl abuse with intoxication and delirium. He is now being transferred to an inpatient drug rehabilitation facility for treatment of fentanyl abuse.
ICD-10-CM	<p>J96.00 – Acute respiratory failure, unspecified whether with hypoxia or hypercapnia</p> <p>F11.121 – Opioid abuse with intoxication delirium</p>
Rationale	Per ICD-10 guidelines, if the documentation supports both use and abuse, abuse will be coded. Based on the scenario above, the provider documents the patient has acute respiratory failure due to fentanyl abuse with intoxication and delirium.

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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.

References

- [ICD 10 CM Official Coding Guidelines 2024](#)
- CodingClinicAdvisor.com