

## Personality Disorders

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, on services submitted to Healthfirst—specifically for **Personality Disorders**. It provides information from industry sources about proper coding practice. However, this document does not represent or guarantee that Healthfirst will cover and/or pay for the 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 amount that Healthfirst or the member owes the provider.

**Personality Disorders** are a group of mental health conditions characterized by long-term patterns of thinking, feeling, and behaving that are significantly different from the expectations of the individual's culture. These patterns cause a person significant distress and/or impair their ability to function which typically begin in adolescence or early adulthood.

### ICD-10 Codes and Descriptions

Code	Description
F21	Schizotypal Disorder
F60.0	Paranoid Personality Disorder <ul style="list-style-type: none"><li>• Expansive Paranoid Personality</li><li>• Fanatic Personality</li><li>• Querulant Personality</li><li>• Sensitive Paranoid Personality</li></ul>
F60.1	Schizoid Personality Disorder
F60.2	Antisocial Personality Disorder <ul style="list-style-type: none"><li>• Amoral Personality</li><li>• Asocial Personality</li><li>• Dissocial Personality Disorder</li><li>• Psychopathic Personality</li><li>• Sociopathic Personality</li></ul>

# Documentation and Coding

Code	Description
<b>F60.3</b>	Borderline Personality Disorder <ul style="list-style-type: none"> <li>• Aggressive Personality</li> <li>• Emotionally Unstable Personality</li> <li>• Explosive Personality</li> </ul>
<b>F60.4</b>	Histrionic Personality Disorder <ul style="list-style-type: none"> <li>• Hysterical Personality</li> <li>• Psychoinfantile Personality</li> </ul>
<b>F60.5</b>	Obsessive-Compulsive Personality Disorder <ul style="list-style-type: none"> <li>• Anakastic Personality</li> <li>• Compulsive Personality</li> <li>• Obsessional Personality</li> </ul>
<b>F60.6</b>	Avoidant Personality Disorder <ul style="list-style-type: none"> <li>• Anxious Personality</li> </ul>
<b>F60.7</b>	Dependent Personality Disorder
<b>F60.81</b>	Narcissistic Personality Disorder
<b>F60.89</b>	Other Specific Personality Disorders
<b>F60.9</b>	Personality Disorder, Unspecified

## Clinical Documentation Recommendations

Updated Status of Condition	Signs and Symptoms	Causes	Diagnostic Test	Treatment Plan
<ul style="list-style-type: none"> <li>• Stable</li> <li>• Improved</li> <li>• Worsening</li> </ul>	<ul style="list-style-type: none"> <li>• Cluster A (Unusual and eccentric thinking)</li> <li>• Cluster B (Dramatic and erratic)</li> <li>• Cluster C (Severe anxiety and fear)</li> </ul>	<ul style="list-style-type: none"> <li>• Genetics</li> <li>• Brain changes</li> <li>• Childhood trauma</li> <li>• Verbal abuse</li> <li>• Cultural factors</li> </ul>	<ul style="list-style-type: none"> <li>• DSM-5</li> <li>• PDQ</li> <li>• MMPI</li> </ul>	<ul style="list-style-type: none"> <li>• Psychotherapy</li> <li>• SSRI's (Zoloft, Prozac, Luvox, etc.)</li> <li>• Mood Stabilizers</li> <li>• Antidepressants</li> <li>• Antipsychotic medications</li> <li>• Anti-anxiety medications</li> <li>• Hospital, residential or outpatient program</li> </ul>

# Documentation and Coding

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## Coding Tips

- **Do not** code **F91\*** - Conduct Disorders for **F60.2** - Antisocial Personality Disorder
- Be specific with the type of personality disorder diagnosed. Avoid vague terms like “personality issues.”
- Document any comorbid psychiatric conditions (e.g., depression, anxiety, OCD).
- Coordinate documentation between psychiatry and primary care to endure consistency.

\*Requires additional digits to complete the code.

## Coding Example

<b>Case</b>	A 42-year-old male presents for a psychiatric evaluation due to difficulties in interpersonal relationships and chronic perfectionism. The patient is described as excessively devoted to work and productivity. Patient has a strong need for order and control, struggles to delegate tasks, and exhibits rigid standards that interfere with task completion. The psychiatrist recommends cognitive behavioral therapy once a week and prescribed Fluoxetine. The psychiatrist diagnosed the patient with Obsessive-Compulsive Personality Disorder.
<b>Diagnosis Reported</b>	<b>F60.5</b> - Obsessive-Compulsive Personality Disorder
<b>Rationale</b>	<b>F60.5</b> specifically captures Obsessive-Compulsive Personality Disorder (OCPD), a distinct diagnosis from Obsessive-compulsive disorder (OCD) which is coded under <b>F42.X</b> Obsessive-Compulsive Personality Disorder is characterized by rigidity, perfectionism and control without the presence of intrusive thoughts and compulsion found in OCD.

# Documentation and Coding

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## References

- [ICD-10-CM Official Coding Guidelines](#)
- [American Psychiatric Association](#)
- [Cleveland Clinic Personality Disorders](#)
- [Merck Manual](#)

## Questions?

Contact us at [#Risk Adjustments and clinical Documentation@healthfirst.org](mailto:#Risk_Adjustments_and_clinical_Documentation@healthfirst.org).

For additional documentation and coding guidance, please visit the coding section on [HFproviders.org](http://HFproviders.org)

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