

Psychiatry Coding & Reimbursement Alert

ICD-10 Coding: Tackle Animal Related Phobias with Two Expansions to F40.21-

Your clinician might want to conduct tests to rule out other medical conditions.

When your psychiatrist arrives at a diagnosis of an animal related phobia, you will need to check documentation to see which specific animal the patient has a fear of as this has a bearing on the diagnosis code that you will report for the condition. So, based on the animal the patient has a fear of, you will have to choose one of the two codes that are available to report the condition.

Look for Specific Code for Arachnophobia Diagnosis

When your clinician arrives at a diagnosis of any phobias, you will have to look through F40.- (Phobic anxiety disorders) and arrive at the specific diagnosis code you will have to report for the particular phobia. If the patient is suffering from a phobia of any animals, you will have to look at F40.2- (Specific [isolated] phobias) as this section of ICD-10 codes covers animal phobias, phobias of natural environment, injury and blood related phobias, situational phobias, and a few other specified phobias.

"Per ICD-10, section F40.2- does not include non-delusional dysmorphobia (an obsessive focus on a perceived flaw in appearance) or nosophobia (the irrational fear of contracting a disease). Both of those are separately reportable with F45.22 (Body dysmorphic disorder)," notes **Kent Moore**, senior strategist for physician payment at the American Academy of Family Physicians.

If your clinician is diagnosing any animal related phobias, then you will have two code choices to report this diagnosis. You have a specific code to report if your clinician's diagnosis is arachnophobia or the fear of spiders and any other arachnids, like scorpions. When your clinician diagnoses the patient's phobia as arachnophobia, you will have to report this diagnosis with F40.210 (Arachnophobia).

If the patient suffers from any phobia of animals other than spiders or other arachnids, you will have to settle for a more generalized ICD-10 diagnosis code. So, if the patient suffers from a phobia of any other animal apart from spiders or other arachnids, you will have to report F40.218 (Other animal type phobia) for the condition. So, for instance, if the patient has an intense fear of snakes, you will have to report this phobia with F40.218.

Brush up on These Basics Briefly

Documentation spotlight: Your clinician will arrive at a diagnosis of arachnophobia or other animal type phobias based on a complete history and a complete evaluation of the patient. Your psychiatrist will perform a complete mental status examination, a complete psychiatric and medical history of the patient and family, and a review of systems along with ordering of certain lab tests.

Some of the findings that your clinician would most likely record in a patient diagnosed with arachnophobia or other animal type phobias will include an intense fear and anxiety when the patient is in a situation where he/ she sees the particular animal that they are scared of or is in an environment wherein he/ she expects that particular animal to be present. For instance, if the patient is suffering from arachnophobia, the patient might get very anxious when he/ she

sees a spider or even a spider web. Your clinician might note that the patient might even express this state of anxiety even on seeing a picture or even on seeing the animal he/ she is scared of in a movie or on television.

Your clinician might note that the patient tends to avoid situations or environments where he/ she suspects the feared animal to be. For instance, if the patient has a fear of snakes, he might not go into the garden or any other natural area, expecting it to be filled with these creatures. "In this situation, the psychiatrist needs to be clear whether the patient is afraid of snakes or the natural environment in question. If it is the latter, then you will need to choose a code from the F40.22- family (Natural environment type phobia)," Moore says.

Your clinician might note that the patient experiences fear which might also be accompanied by panic attacks that are so intense that the person might experience palpitations, dizziness, sweating, disorientation, high blood pressure, and increased heart rate. Many a times, the patient might mistake these symptoms for a heart attack and might try to seek treatment for the same in an emergency department.

In many situations of animal type of phobias, your clinician will note that the patient realizes that there is no justification for the fear that he/she is experiencing, but the person says that they are just not unable to control their feeling of fear. Apart from the intense feeling of fear and anxiety, your clinician might note that the patient's mental status in other environments and situations is normal.

Since the patient experiences anxiety, your clinician will want to rule out other medical conditions that can produce similar symptoms. In order to rule out other conditions that can produce similar symptoms of anxiety, your clinician might subject the patient to certain tests.

Tests: Your clinician will arrive at the diagnosis of arachnophobia or any other animal related phobias based on history, signs and symptoms, and physical and mental status examination of the patient. But, as mentioned earlier, your clinician might perform certain tests to rule out the occurrence of other medical conditions or comorbid conditions that can present with similar symptoms.

Some of the tests to which your clinician might subject the patient, depending on the type of symptoms the patient is experiencing, include thyroid function tests and blood and urine tests to check the levels of calcium and sugar. Your clinician might also check for drug or other substance abuse as these can also precipitate the feelings of anxiety in the person.