

Psychiatry Coding & Reimbursement Alert

ICD-10 Update: Shrink Your Schizoid Personality Disorder Reporting Choices With F60.1

Choose a different code to report schizoid disorder of childhood.

If you are reporting a diagnosis of schizoid personality disorder, you will be relieved to know that you have one simplified code choice for this condition in ICD-10. Unlike ICD-9, a diagnosis of schizotypal personality disorder is not covered under the same parental code in ICD-10.

ICD-9: When reporting a diagnosis of schizoid personality disorder using ICD-9, you report it with 301.2 (Schizoid personality disorder). This diagnosis code also includes character neurosis, and you need to report an additional code to identify the associated neurosis or psychosis. Specifically, you have a 5th digit expansion to 301.2 to help report the following diagnoses:

- 301.20 (Schizoid personality disorder, unspecified)
- 301.21 (Introverted personality)
- 301.22 (Schizotypal personality disorder)

Reminder: You have to report from one of the above mentioned ICD-9 codes depending on what type of schizoid personality disorder your psychiatrist diagnoses. But, you cannot use 301.2x for a diagnosis of schizophrenia. You have to report this from the ICD-9 range, 295.0-295.9. Similarly, you cannot report 301.2x for a diagnosis of nonpsychotic personality disorder associated with organic brain syndromes. You have to report this with one of the ICD-9 codes from the range, 310.0-310.9.

ICD-10: You have more simplified reporting for schizoid personality disorder in ICD-10. In ICD-10, you will not have to go deep into the documentation to find if the person has an introverted personality as you had to do in ICD-9. When reporting with ICD-10, you have one code choice for schizoid personality disorder. You report the diagnosis with F60.1 (Schizoid personality disorder).

Caveat: For a diagnosis of schizotypal disorder, you cannot report it with F60.1. Instead, you have a specific code choice for this condition, and you report it with F21 (Schizotypal disorder). You also cannot report schizoid disorder of childhood with F60.1. You report this with F84.5 (Asperger's syndrome). For a diagnosis of delusional disorder, you have to report F22 (Delusional disorders) instead of using F60.1. As in ICD-9, you cannot use F60.1 for reporting a diagnosis of schizophrenia. You report this diagnosis with a code from F20.-, depending on the type of schizophrenia.

Check These Basics Briefly

Documentation spotlight: Your psychiatrist will arrive at a diagnosis of schizoid personality disorder 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 and interpretation of screening and evaluation questionnaires.

Some of the findings that your clinician would most likely record in a patient with schizoid personality disorder will include difficulty in maintaining interpersonal relationships, isolation from social circles, difficulty in developing emotional intimacy, difficulty to express emotions, indifference to criticism or praise, and reduced or absent desire for sexual intimacy. Your clinician might note that the person has no close friends and generally does not enjoy participating in any kind of group activities.

When your clinician examines the patient, he might not find any important relevant findings that will help in arriving at a

definitive diagnosis of schizoid personality disorder. Even mental status findings will not have direct relevance in arriving at the diagnosis. Usually, these patients have normal thought processes, and they will generally have no problems with cognitive functioning. However, your clinician might note limitations of insight.

Tests: There are no specific diagnostic tests that your psychiatrist will order or perform to arrive at a diagnosis of schizoid personality disorder. Instead, he might want to undertake some tests to rule out other problems that might present with the similar kind of findings.

Your psychiatrist might ask for a toxicology screening to rule out substance abuse. In some cases, your clinician might order a CT scan or other imaging studies to rule out any other systemic conditions or trauma.

For evaluating the patient, your clinician might resort to psychological tests such as the Minnesota Multiphasic Personality Inventory (MMPI). Some of the other tests that your clinician might resort to when he suspects a diagnosis of schizoid personality disorder include the Eysenck Personality Inventory, the Structured Clinical Interview for DSM-IV-TR for Axis II Disorders (SCID-II), or the Personality Diagnostic Questionnaire.

The care planning may include medical management and cognitive behavioral psychotherapy that includes individual and family therapy.

Example: Your psychiatrist reviews a 26-year-old male patient who has been brought in by his mother. She complains that her son is a loner and does not seem to be interested in making any friends. She says that whenever she has tried to get him to date, he develops cold feet and does not seem interested in pursuing any relationships.

She says that her son has difficulty in maintaining jobs, as he does poorly in maintaining and developing interpersonal relationships that are important in the work environment. He also does not like participating in any kind of group activities that are planned in the office or by her. She says that she is worried for him, as he has difficulty in social circles and in career prospects. She says that she brought him to your psychiatrist because she read an article on the internet which pointed out that these traits are a psychiatry-related problem and can be overcome with appropriate psychiatric treatment.

Your clinician found no abnormalities during physical or mental status examination. Your clinician then subjected the patient to some psychological tests such as the MMPI and the personality diagnostic questionnaire.

Based on the history, findings during examination, and the interpretation of the tests, your clinician arrives at a diagnosis of schizoid personality disorder.

What to report: You report the psychodiagnostic evaluation of the patient with 90792 (Psychiatric diagnostic evaluation with medical services). You also report the psychological testing with an appropriate code, such as 96101 (Psychological testing [includes psychodiagnostic assessment of emotionality, intellectual abilities, personality and psychopathology, e.g., MMPI, Rorschach, WAIS], per hour of the psychologist's or physician's time, both face-to-face time administering tests to the patient and time interpreting these test results and preparing the report). You report the diagnosis with F60.1 if you are using ICD-10 codes or report 301.20 when reporting with the ICD-9 coding system, since the psychiatrist has not specified the type of schizoid personality disorder.