

## Pain Management Coding Alert

### Reader Question: Pinpoint Px Condition with Anxiety/Depression Smarts

**Question:** Our PM physician treated a patient with insomnia and documented "anxiety depression." The provider also notes that the patient said she has experienced the anxiety depression disorder a number of times in the last few months. What codes should we use to record this encounter?

South Carolina Subscriber

**Answer:** Use this ICD-10 coding advice to paint the most accurate picture of the patient's condition for this claim:

For the insomnia, you'll report G47.00 (Insomnia, unspecified). This isn't the greatest diagnosis code in terms of specificity, but it's about all you can rightfully choose based on the notes you describe. And for the anxiety depression diagnosis, the best bet is F34.1 (Dysthymic disorder).

**Explanation:** While anxiety and depression are not the same thing, having different behavioral and emotional symptoms, the Anxiety and Depression Association of America notes that they share similar characteristics, including "nervousness, irritability, and problems sleeping and concentrating."

That can lead to some confusion from a coding standpoint. For example, one code, F41.8 (Other specified anxiety disorders), contains two similar-sounding notes: "Mixed anxiety and depressive disorder" and "Anxiety depression (mild or not persistent)." And both notes look almost identical to one of the notes that accompanies F34.1 (Dysthymic disorder) - "Persistent anxiety depression."

However, the answer to your question lies in the additional wording used in the notes for both codes. The note to F41.8 describes the condition as either "mild or not persistent," while F34.1 contains the word "persistent." Since your provider has documented that your patient has experienced the condition repeatedly over the course of time, F34.1 is the most accurate way to report the encounter.