

Medicare risk adjustment coding focus: personality disorders

Overview

A personality disorder is a type of mental disorder defined by unhealthy patterns of thinking, functioning and behaving.¹ An individual with a personality disorder displays behaviors that deviate from the perceived norm, causing long-term difficulties in personal relationships as well as functioning in society.

According to a study conducted by the National Institutes of Mental Health (NIMH), the prevalence of personality disorders amongst adults 18 years and older in the United States is approximately 9.1%. The study did not find sex or race to be associated with the prevalence of the disorder.²

Cause

The exact cause of personality disorders is unknown; however, there are contributing factors that may result in personality disorders such as biological and environmental factors.³ Because one's personality forms during childhood, an individual's thoughts, emotions, and behaviors are a direct reflection of their genetic makeup and life experiences, sometimes referred to as nature and nurture. Nature and nurture each play a critical role in the formation of a personality disorder, however, more research is needed to better identify how these forces affect personality development.

Signs and symptom

Personality disorder types are grouped into three clusters based on similar symptoms and characteristics:

1. Cluster A — characterized as having odd, eccentric thoughts or behaviors (includes paranoid, schizoid, and schizotypal personality disorder)
2. Cluster B — characterized by dramatic or overly emotional behaviors (includes antisocial, borderline, histrionic, and narcissistic personality disorder)
3. Cluster C — characterized by experiences of anxious or fearful behaviors (includes avoidant, dependent, and obsessive-compulsive personality disorder)

It is common for an individual to have more than one personality disorder¹.

Treatment

Treatment for personality disorders depends greatly on an established diagnosis by a mental health clinician. The clinician will observe, analyze and interpret the functioning patterns and symptoms of the patient's behavior for a prognosis and treatment. Treatment options are geared towards the specific type of personality disorder, its severity, and the patient's life situations.

¹ Mayo Clinic. (n.d.) Personality Disorders. Accessed May 14, 2019 from mayoclinic.org

² National Institutes of Mental Health. (n.d.) Personality Disorders. Accessed May 14, 2019 from nimh.nih.gov

³ American Psychiatric Association. (n.d.) What are Personality Disorders? Accessed May 14, 2019 from psychiatry.org

Psychotherapy is the main source for treating personality disorders. Although there are no current medications to treat these disorders directly, there are psychiatric medications that may help with the symptoms.

Coding guidance

Chapter 5 of the ICD-10-CM codebook contains diagnoses codes related to specific personality disorders (category F60).⁴ To accurately code from this category, documentation must explicitly state the type of personality disorder(s). Documentation of such detail is key as coders cannot make assumptions.

F60 Personality Disorders (HCC 60)

- F60.0 — Paranoid
- F60.1 — Schizoid
- F60.2 — Antisocial
- F60.3 — Borderline
- F60.4 — Histrionic
- F60.5 — Obsessive-compulsive
- F60.6 — Avoidant
- F60.7 — Dependent
- F60.81 — Narcissistic
- F60.89 — Other specific
- F60.9 — Unspecified

⁴ Schmidt, A. & Patterson, L. (2019). ICD-10-CM Expert for Physicians. Optum Insight Inc.