📎 dsm-and-icd-guide-2015.pdf

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Hello! Happy New Year!

What's your 2015 plan for DSM / ICD? Maybe we can help: one of the biggest challenges to DSM / ICD is terminology and verbiage - the way we talk about and perceive the codes. Here are some things you may not know (and need to know to bill correctly):

• **DSM *is* ICD: it is a guide to picking the right ICD codes. You have been diagnosing in ICD, even though you may call it – or think of it – as DSM.**

• You must use DSM-5, especially if you are reimbursed by Medicaid, Medicare, and/or insurance companies. (see * in attached guide for more info).

• The DSM-5 deadline is 1/1/**2014**: you should be diagnosing with DSM-5 *now*.

• DSM-5 provides a different way to diagnosis than DSM-IV did, so you need to make sure you're following the new guidelines. Sometimes they will point you to the same codes you're used to using, other times, they won't: DSM-5 added some new codes and deleted others.

• DSM-5 also lists both ICD-9 and ICD-10. Until 10/1/15, use the ICD-9 code. After 10/1/15, use the ICD-10 code (in parentheses).

Check out the attached complimentary guide for details and resources.

DSM-5 Myths, Part 1

"The deadline for ICD-10 was pushed back, so the deadline for DSM-5 must be delayed too." **FALSE!** DSM-5 has been in effect since 1/1/**2014**, which means you should be using it now. Although the APA has not officially retired DSM-IV, you should make the transition from IV to 5 if you haven't already. Click here for details.

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