

DSM-5 Frequently Asked Questions

This FAQ details functionality questions regarding the transition to DSM-5 criteria in WITS. For all clinical questions, please contact your clinical supervisor. These changes will be implemented in the 17.25 WITS release tentatively scheduled for 9/28/2015.

Diagnosis:

- **Do all of the previously filled diagnosis fields still remain populated?**
 - All records created prior to the 17.25 update will remain populated in the DSM IV format.
- **Will I need to update the diagnosis on the Admission?**
 - No.
- **What will I need to do to update my diagnosis?**
 - The first time the client record is accessed after the update, the diagnosis fields will be blank. Review the Diagnosis List and add a new diagnosis.
- **Why is the Primary Diagnosis a “Read-Only” Field?**
 - The Primary Diagnosis is a “Read-Only” field due to new functionality in WITS. Users will add/update diagnosis through the Edit Diagnosis link.
- **Will WITS know which category to place the medical, behavioral and psychosocial diagnosis even if I select the wrong type?**
 - Yes. If a medical diagnosis is selected under the type of behavioral, WITS will automatically place the diagnosis in the correct medical placement in the diagnosis table.
- **Will the “review prior diagnosis” link disappear from the diagnosis list?**
 - Yes. The “Review Prior Diagnosis” link will disappear as soon as the initial DSM-5 update has been created. This link will only be visible if the client has a recorded diagnosis in an open episode of care prior to the 17.25 update.
- **Where can I find the prior DSM IV diagnosis?**
 - Prior DSM IV Diagnosis will be available for review through the Diagnosis List.
- **What if I started my admission before the release?**
 - If the admission was started prior to 9/28/2015, it will need to be completed using the DSM IV Diagnosis screen. A new diagnosis will then need to be entered using the DSM-5. **It is suggested that all admissions in progress are completed prior to 9/28/2015.**

Billing:

- **How will these changes affect billing, before and after the September 28th change?**
 - If encounters are entered with a date of service before 9/28/2015, WITS will use an DSM IV code on the claim item.
 - If encounters are entered with a date of service on or after 9/28/2015, WITS will use an DSM-5 code on the claim item.
- **What if I have an encounter with dates of services which span date prior to and after 9/28/2015?**
 - You will need to create two encounter notes. The first encounter will include dates of service prior to 9/28/2015, and the second will include dates of services for 9/28/2015 or later.

Other:

- **Will the search functionality change while searching for a diagnosis? Can I still start typing the first few letters of the diagnosis to search?**
 - Yes. The search functionality in the drop down menus will remain consistent with other WITS functionality.
- **How does this change affect treatment plans?**
 - If the treatment plan was started prior to 9/28/2015, it will need to be completed using the DSM IV. A new diagnosis will then need to be entered using the DSM-5. **It is suggested that all treatment plans in progress are completed prior to 9/28/2015.**
- **Will I need to update all clients the transition to DSM-5 (9/28/15)?**
 - For client with MH services:
Changes to the Dx due to DSM5 changes must be made on the Diagnosis List in WITS by the end of the year, 12-31-2015.
Changes to the Assessment and Treatment Plans must be made within 1 year of the change to DSM 5 (so by Oct 2016).
 - For Meds Only
Change in DX should be made in the Diagnosis List in WITS by the end of the year, 12-31-2015
Notation of changes in Dx may be made in a Progress Note rather than an updated Assessment or Treatment Plan within one year.
- **It is my understanding that the APA did away with the GAF in DSM 5. Do you know why the GAF score is still going to be required in the WITS diagnosis fields?**
 - The State of Idaho is requiring the GAF in the Mental Health Diagnosis as it is required for Federal reporting requirements.

- **It is required to have a diagnosis in each dimensions of the DSM-5?**
 - **Yes.** For MH Clients it is required to have a diagnosis in each dimension. Below is the information that has been identified and approved by the QA team about acceptable ICD-10 codes to use in place of the No Diagnosis/Diagnosis Deferred ICD-9 code.

Diagnosis Type	ICD-10
Medical	R69 (799.9) Illness, unspecified
Psychosocial	Z03.89 (V71.09) Encounter for observation for other suspected diseases and conditions ruled out
Behavioral	F99 (300.9) Mental disorder, not otherwise specified

- **The drop down on the “Diagnosis List” does not match the DSM5. I can’t add Amphetamine Use disorders.**
 - The drop down “Diagnosis List” in WITS has the ICD-10 values in them, not the DSM-5. The amphetamine –related disorders are now under the ICD-10 F15.xx (Other stimulant related disorders) category in Behavioral. The only “Amphetamine” codes that I can find for ICD-10 are under the T43.62xx codes under Medical.