

ICD-10 Dementia Fact Sheet¹

Revised with ICD-10 Diagnosis Codes

First code the underlying physiological condition present when using the following dementia codes. These code ranges are *NOT* to be used as the principal diagnosis:

F01.50-F01.51 Vascular Dementia
F03.90-F03.91 Unspec. Dementia
F05 Delirium d/t known phys condition
F06.0-F06.34, F06.8 Other mental disorders d/t known phys condition
F07.0-F07.9 Personality/behavior disorders d/t known phys condition
F09 Unspec Mental Disorder

These codes may, however, be listed as secondary diagnosis

F01 Vascular Dementia

Vascular dementia as a result of infarction of the brain due to vascular disease, including hypertensive cerebrovascular disease.;e.g. arteriosclerotic dementia. Code first the underlying physiological condition or sequelae of CVD.

And use an additional code to identify wandering if applicable (Z91.83)

You may consider one of the following ICD-10 codes as primary:

G30.0* – Alzheimer’s disease with early onset

G30.1* – Alzheimer’s disease with late onset

G31.83 - Dementia with Lewy bodies, with Parkinsonism

*Use additional code to identify delirium if applicable (**F05**), or dementia with behavioral disturbance (**F02.81**) or without behavioral disturbance (**F02.80**). Use an additional code to identify wandering if applicable (**Z91.83**)

Best practices when documenting for dementia would include some or all of the following:

- The type of Dementia; senile, presenile, vascular etc.
- What is the underlying neurological condition?
- Information regarding presence of delirium, delusions or depression.
- Are there any behavioral disturbances present (e.g., aggressive, violent or combative behavior)?

How to recognize a manifestation code when you see one....

Does the condition have an underlying etiology?

Does the note in the ICD-10 book state “code first”?

Is “in diseases classified elsewhere” in the code title?

If the answer to any of these is “yes,” the condition/code is probably a manifestation code.

“In diseases classified elsewhere” codes are never permitted to be used as first listed or principal diagnosis codes. They must be used in conjunction with an underlying condition code and they must be listed following the underlying condition.

In these cases, code the etiology (the cause) first, followed by the manifestation. Do NOT use the manifestation code as the principal diagnosis.

¹ This is not intended to be an all-inclusive list of codes and exclusions. As in all coding matters, clinical documentation should drive code selection along with coding guidelines and conventions, and payer policies. It is not possible to include all exceptions here.