



Diagnosing and Coding for Drug use complicating pregnancy, childbirth, and the puerperium

Oklahoma obstetric providers may use the following guidelines to diagnose and document substance use during pregnancy, childbirth and the puerperium.

What is opioid use disorder and substance use disorder?

Opioid use disorder (OUD) is a pattern of opioid use characterized by tolerance, craving, inability to control use, and continued use despite adverse consequences. Opioid use disorder is a chronic, treatable disease that can be managed successfully by combining medications with behavioral therapy and recovery support, which enables those with opioid use disorder to regain control of their health and their lives. Substance use disorder (SUD) is a general term which indicates a problematic pattern of substance use, within which individual substances may be specified.

How should a diagnosis of OUD be made?

OUD is defined in the Diagnostic and Statistical Manual of Mental Disorders-5 (DSM-5) as a problematic pattern of opioid use leading to clinically significant impairment or distress. In order to make the diagnosis, a person must meet two or more of the DSM-5 diagnostic criteria for OUD (listed in the Appendix).

Why is it important to code substance use complicating pregnancy, childbirth, and the puerperium appropriately?

Complete and accurate coding helps provide the data for identification and management of substance use and substance use disorders in pregnant women, with the target of improving outcomes for both the pregnant women and infant. The OMNO quality improvement initiative aims to identify, diagnose and provide care for the obstetric patient with opioid use disorder. Some of the goals of the initiative include: reduce opioid use in pregnancy and fetal exposure to opioids, identify pregnant women with OUD and refer for MAT, and prevent opioid overdose and death. It is important for all Oklahoma hospitals to diagnose and code substance use disorders in pregnant women consistently to measure the effectiveness of these efforts.

How to code substance use complicating pregnancy?

ICD-10 codes for substance use complicating pregnancy, childbirth, and the puerperium should be assigned for any pregnancy case when a mother uses substances during the pregnancy or postpartum. This can involve illicit substances (e.g., heroin, methamphetamines, cocaine), inappropriate use or abuse of prescription drugs, and medication-assisted treatment for opioid use disorder (i.e. buprenorphine, methadone). Substance use during pregnancy, childbirth and the puerperium **codes under subcategory O99.32 and is further specified as to trimester.**

Secondary code(s) from **categories F11-F16 and F18-F19** should also be assigned to identify manifestations of substance use.

Appendix.

DSM-5 criteria for diagnosis of opioid use disorder (person must meet two or more of these criteria):

- Opioids are often taken in larger amounts or over a longer period of time than intended.
- There is a persistent desire or unsuccessful efforts to cut down or control opioid use.
- A great deal of time is spent in activities necessary to obtain the opioid, use the opioid, or recover from its effects.
- Craving, or a strong desire to use opioids.
- Recurrent opioid use resulting in failure to fulfill major role obligations at work, school, or home.
- Continued opioid use despite having persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of opioids.
- Important social, occupational or recreational activities are given up or reduced because of opioid use.
- Recurrent opioid use in situations in which it is physically hazardous
- Continued use despite knowledge of having a persistent or recurrent physical or psychological problem that is likely to have been caused or exacerbated by opioids
- Tolerance, as defined by either of the following:
 - A need for markedly increased amounts of opioids to achieve intoxication or desired effect, and/or
 - Markedly diminished effect with continued use of the same amount of an opioid
- Withdrawal, as manifested by either of the following:
 - The characteristic opioid withdrawal syndrome, and/or
 - The same (or a closely related) substance are taken to relieve or avoid withdrawal symptoms