



THE STATE  
of ALASKA  
GOVERNOR BILL WALKER

Department of  
Health and Social Services

DIVISION OF BEHAVIORAL HEALTH  
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September 4, 2015

RE: **DHSS/BH ICD-10 Conversion - Guidance Document 2: Change to AKAIMS Diagnosis Screens**

Dear Behavioral Health Services Provider:

This letter is to inform you of changes to AKAIMS related to the entry of client diagnosis within the clinical record. These changes are part of the Division's effort to comply with the Federal CMS mandate to transition to ICD-10 codification for all electronic health care transactions on October 1, 2015. The changes to AKAIMS will take effect as requested on September 1, 2015. This will allow agencies the opportunity to modify clinical records as they choose in preparation for the new requirements. How this transition affects agencies using AKAIMS for minimal data set only and for agencies that use AKAIMS as an electronic clinical record is explained in detail below.

AKAIMS currently utilizes DSM-IV TR / ICD-9 diagnostic codes and descriptors within the Assessment, Admissions, Treatment Plan and Discharge screens. Effective September 1, 2015 AKAIMS will transition to the addition of ICD-10 codes and descriptors within these screens of the clinical record. The transition to the ICD-10 codes will include a change in the diagnosis format as well. A screenshot of this new format is attached to this letter.

AKAIMS will retain all DSM-IV TR / ICD-9 codes and descriptors for a minimum of one year following September 30, 2015. The purpose for the retention of these codes and descriptors is twofold. Provider agencies will still be required to utilize DSM-IV TR codes for recipient multi-axial diagnosis in clinical records opened on or prior to September 30, 2015. Provider agencies must also use DSM-IV TR / ICD-9 diagnosis for billing of any service provided on or before September 30, 2015. And, because Medicaid billing may be submitted up to one year from the date of service, the diagnosis relevant at the time the service was delivered must be available to providers.

The Division has determined that the new AKAIMS ICD-10 diagnosis tables will continue to fulfill the current regulatory requirements for recording a DSM-IV TR multi-axial diagnosis. Axis I and Axis II diagnoses are to be recorded under Behavioral Health. Axis III is to be recorded under Medical. Axis IV is to be recorded under Psychosocial. And, Axis V is to be recorded in the GAF field.

**Provider agencies that utilize AKAIMS for minimal data set only (MDS) will not be required to change diagnosis in any clinical record opened on or prior to September 30, 2015.** However, once these recipients are discharged from treatment, providers will be required to record in the AKAIMS discharge screen the ICD-10 diagnosis that is relevant and current at the time of discharge. Please note that all clinical records opened in AKAIMS on or after October 1, 2015 will require an ICD-10 diagnosis. As part of the minimal data set requirements agencies must enter information into the encounter note screen whenever a service is provided to a recipient. AKAIMS automatically displays in the encounter note screen the diagnosis which was originally recorded at admission. Agencies have the option to manually

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change this diagnosis if they choose to match the current diagnosis that appears in the official recipient record maintained within the agency's own electronic clinical record system. The diagnosis in the AKAIMS encounter note would then match the diagnosis used by the agency for service billing.

**Provider agencies that utilize AKAIMS as an electronic clinical record** have the option to update recipient clinical records to relevant ICD-10 diagnosis between September 1 and September 30, 2015. Provider agencies may accomplish this task by first creating a new version of the assessment and then adding the new ICD-10 diagnostic code(s). Though the new version of the assessment may be saved, providers should not click the "sign-off" link for the new assessment until October 1, 2015 or thereafter. This action will then cause the new ICD-10 diagnosis to automatically populate in the treatment plan, encounter note, and discharge screens. All clinical records must show justification for any existing diagnosis. Providers may need to add an explanatory note to the new version of the assessment if the criteria for the new ICD-10 diagnosis is not supported in the existing assessment report.

The Division is committed to making the transition to the requirements for ICD-10 electronic health care transactions as easy as possible for providers. If you have questions related to the change in AKAIMS diagnosis reporting please contact either Patrick Swiger ([patrick.swiger@alaska.gov](mailto:patrick.swiger@alaska.gov) ; 269-3608) or Lisa Good ([lisa.good@alaska.gov](mailto:lisa.good@alaska.gov) ; 269-0864).

Respectfully,



Albert E. Wall  
Director

17:25:3

**WITS AKAIMS** Diagnostics Logout

User: Good, Lisa | Location: aaaPatrick's Test Agency, Behavioral Health

**Client:** Bear Jr., Jeremy | M119193EB706100 | 2 Clear Client

- Home Page
- Emergency Services
- Agency
- Group List
- Client List
  - Client Profile
  - Linked Consents
  - Emergency Services
  - Non-Episode Contact
  - Activity List
    - Intake
    - Lab/Radiology
    - Drug Testing
    - Wait List
    - Tx Team
    - AST FY2011
    - Client Status Review
  - Assessments
    - ASAM
    - Mental Status
    - TAP
    - BHA
      - Identifying Info
      - Family History
      - Patient History 1
      - Patient History 2
      - Patient History 3
      - Diagnosis

Client Diagnosis
Edit Diagnosis

Effective Date: 8/7/2015 Time: 12:00 AM

Expiration Date: \_\_\_\_\_ Time: \_\_\_\_\_

Diagnosing Clinician: \_\_\_\_\_

GAF Score: \_\_\_\_\_

Behavioral Diagnosis	Code	Description	Comments	Principal

  

Medical Diagnosis	Code	Description	Comments	Principal

  

Psychosocial Diagnosis	Code	Description	Comments	Principal

Cancel
Save
Finish

Actions: