



Missouri
Care for Pregnant and Postpartum People with Substance Use Disorder
Collaborative (CPPPSUD)
Required Data Elements Sheet

Substance Use Disorder (SUD) Measurement Statement: For the purposes of quality improvement measurement and standardized data collection and reporting, AIM includes the following substances as part of its definition of SUD: opioids, amphetamines/stimulants, sedatives, cocaine, and substances that have not otherwise been specified in the medical record as prescriptions, i.e., marijuana, bath salts, huffing, etc. For inclusion in the data measures, SUD includes *either* a documented history of SUD or current documentation of *either* verbal or biologic confirmation of substance use, substance abuse or a substance/opioid use disorder diagnosis. Patients with a validated prescription based upon evidence/clinical-based medical necessity that is taken as prescribed should be excluded from these metrics; however, if the patient verbalizes or is noted to be abusing the prescription, they should be included in the metrics. For the purposes of quality care improvement, and the knowledge that documentation and medical coding do not always capture all relevant patients, participants are encouraged to also use alternative means of identifying patients who would benefit from brief intervention and referral to treatment beyond ICD-10 coding. To help ensure broad capture of patients for either inclusion or sampling, a draft list of ICD-10 codes and definitions is included as Appendix A of this document.

Instructions

1. This document is intended as a reference for the MO AIM CPPPSUD Collaborative for all state outcome, process, and structure measures definitions.
2. The below information outlines who will collect each data measure (MHA/organization) and how the measure is to be reported, along with inclusion and exclusion criteria if applicable.
3. All data measures for this project will be entered into the Life QI data platform unless otherwise noted.
4. All participating organizations should select a minimum of *one* OB provider or OB prenatal clinic to include in the implementation of this patient safety bundle. That chosen provider/clinic will be included in data measure reporting that includes implementation and monitoring of evidence-based practices in the prenatal period to improve health outcomes and reduce patient harm.

5. For questions, please contact Courtney McElyea, Director of Clinical Quality at cmcelyea@mhanet.com or (573) 893-3700, ext. 1406.

Measure Reporting Timeframes

- State surveillance measures (4) are reported quarterly (CY) with a lag of 45 to 60 days. SS4, the proportion of pregnancy-associated deaths due to overdose may lag by six months or more.
- Outcomes measures (4) are reported quarterly (CY) beginning with Q1 2022 (January through March 2022), submitted into Life QI by April 1, 2022.
- Process measures (6) are reported monthly (CY) beginning January 2022 (submitted into Life QI by March 1, 2022) with the exception of P5 and P6 which will be reported bi-annually in July and December. Data submitted between January and June 2022 will be marked as baseline data. Data submitted July 2022 and after is marked as test data. Organizations are looking to improve performance by metric over baseline throughout the project.
- Structure measures (5) are reported quarterly. In order to increase shared learning, organizations will not be marked as completing the structure measure until the item is shared with the collaborative as feasible and relevant. Files should be uploaded into the organization's project site files section.

Sampling Recommendations

Hospitals may choose to report process measures using a random sampling method. MHA recommends a minimum of a 20% random sampling rate for quality improvement purposes based on the average number of births per month from CY 2020, with a minimum of ten charts per month per measure expected. If random sampling is chosen, it is highly recommended that the method be used starting with baseline measurement and maintained throughout the collaborative to avoid skewing the data. For example, if your hospital averages 50 births per month, 10 charts would be abstracted monthly and reported into Life QI. If your hospital averages 20 births per month, a 20% sampling would only be four charts, so the organization would still abstract 10 charts to meet the minimum QI sampling requirement. If your hospital averages 100 births per month, 20 charts would be abstracted, and so on.

Member Engagement Metrics

MHA defines member engagement in the collaborative as at least one organizational attendee participating in the office hours calls and additional collaborative-related meetings and trainings. In order to meet AIM Star recognition criteria, a minimum of 75% attendance is required.

Definitions Relevant to The Data Set

Actively Engaged in Treatment: the patient is actively and willingly participating in recovery, whether through medication assisted treatment or through mental health support through a recovery treatment services program of any type.

Birth Parent: the birthing person and their intimate partner and/or the second biological parent. This definition is broadened to support respectful care and equity.

Referral: referring to a provider for OUD/SUD specific treatment.

Recovery Treatment Services: includes residential treatment/inpatient recovery program, outpatient treatment, behavioral health counseling, peer support counseling, 12-steps program, methadone treatment program.

Substance Use Disorder: refers to the misuse of the following substances: opioids, amphetamines/stimulants, sedatives, and/or cocaine and substances that have not otherwise been specified in the medical record as prescriptions, i.e., marijuana, bath salts, huffing, etc.

Maternal Death: the death of a woman while pregnant or within 42 days of termination of pregnancy.

Pregnancy-Associated Death: the death of a woman during pregnancy or within one year of the end of pregnancy from a cause that is not related to or directly caused by the pregnancy.

Pregnancy-Related Death: The death of a woman during pregnancy or within one year of the end of pregnancy from a pregnancy complication, a chain of events initiated by pregnancy, or the aggravation of an unrelated condition by the physiologic effects of the pregnancy.

State Surveillance

Measure Name	Measure Definition	Measure Source	Report As/Frequency
SS1: Rate of substance use disorders among pregnant and postpartum people	<i>Denominator:</i> All people during their birth admission, excluding those with ectopic pregnancies and miscarriages	HIDI Collected Claims Data/MHA	N/D, Disaggregated by race/ethnicity Quarterly with 45 to 60-day reporting lag
	<i>Numerator:</i> Among the denominator, those with any SUD diagnosis		
	<i>Denominator:</i> All people during their delivery hospitalization, excluding those with ectopic pregnancies and miscarriages		
	<i>Numerator:</i> Among the denominator, those with an OUD diagnosis		

<p>SS2: Severe maternal morbidity (SMM) (including transfusion codes) among people with SUD</p>	<p><i>Denominator:</i> All people during their birth admission, excluding those with ectopic pregnancies and miscarriages, with substance use disorder</p> <p><i>Numerator:</i> Among the denominator, cases with any SMM code</p> <p><i>Denominator:</i> All people during their birth admission, excluding those with ectopic pregnancies and miscarriages, with opioid use disorder</p> <p><i>Numerator:</i> Among the denominator, cases with any SMM code</p>	<p>HIDI Collected Claims Data/MHA</p>	<p>N/D, Disaggregated by race/ethnicity</p> <p>Quarterly with 45 to 60-day reporting lag</p>
<p>SS3: SMM (excluding transfusion codes) among people with SUD</p>	<p><i>Denominator:</i> All people during their birth admission, excluding those with ectopic pregnancies and miscarriages, with substance use disorder</p> <p><i>Numerator:</i> Among the denominator, all cases with any non-transfusion SMM code</p> <p><i>Denominator:</i> All people during their birth admission, excluding those with ectopic pregnancies and miscarriages, with opioid use disorder</p> <p><i>Numerator:</i> Among the denominator, cases with any non-transfusion SMM code</p>	<p>HIDI Collected Claims Data/MHA</p>	<p>N/D, Disaggregate by race/ethnicity</p> <p>Quarterly with 45 to 60-day reporting lag</p>
<p>SS4: Proportion of pregnancy-associated deaths due to overdose</p>	<p><i>Denominator:</i> Total pregnancy-associated deaths</p> <p><i>Numerator:</i> Pregnancy-associated deaths due to overdose</p>	<p>Missouri Pregnancy-Associated Mortality Review Board findings</p>	<p>N/D, Disaggregate by race/ethnicity</p> <p>Quarterly with 45 to 60-day reporting lag</p>

Outcome Measures

Measure Name	Measure Definition	Measure Source	Report As/Frequency
O2: Percent of pregnant and postpartum people with OUD who received or were referred to medication for opioid use disorder (MOUD)	<p><i>Denominator:</i> Pregnant and postpartum people with OUD (see codes list – Appendix A)</p> <p><i>Numerator:</i> Among the denominator, those with documentation of having received or been referred to MOUD (aka Medication Assisted Treatment (MAT))</p> <p>Inclusion criteria: measure is met if receipt or referral to MOUD was done at any time during the prenatal period or the birth admission whether or not the patient sustained therapy or completed the referral. Of note, efforts should be made to continue offering MAT at each visit if patient is actively using non-prescribed or illicit opioids or is found to be abusing prescribed opioids.</p>	Hospital Chart Abstraction	<p>N/D; Disaggregate by race/ethnicity</p> <p>Quarterly</p> <p>Jan. – Mar. 2022 Apr. – Jun. 2022 Jul. – Sept. 2022 Oct. – Dec. 2022 Jan. – Mar. 2023 Apr. – Jun. 2023 Jul. – Sept. 2023 Oct. – Dec. 2023</p>
O3: Percent of pregnant and postpartum people with SUD who received or were referred to recovery treatment services	<p><i>Denominator:</i> Pregnant and postpartum people with SUD (including OUD)</p> <p><i>Numerator:</i> Among the denominator, those with documentation of having received or been referred to recovery treatment services</p> <p>Inclusion criteria: Includes any type of inpatient or outpatient cognitive behavioral therapy or substance use recovery treatment services, including withdrawal symptom management at any time in the prenatal period or birth admission.</p>	Hospital Chart Abstraction	<p>N/D; Disaggregate by race/ethnicity</p> <p>Quarterly</p> <p>Jan. – Mar. 2022 Apr. – Jun. 2022 Jul. – Sept. 2022 Oct. – Dec. 2022 Jan. – Mar. 2023 Apr. – Jun. 2023 Jul. – Sept. 2023 Oct. – Dec. 2023</p>

<p>O4: Percent of pregnant and postpartum people with SUD who received or were prescribed Naloxone prior to delivery discharge</p>	<p><i>Denominator:</i> Pregnant and postpartum people with SUD</p> <p><i>Numerator:</i> Among the denominator, those with documentation of having received or been prescribed Naloxone prior to delivery discharge</p> <p>Inclusion criteria: includes receipt or prescription of Naloxone at any time in the prenatal period or birth admission.</p> <p>Note: ACOG (CO 711, October 2021) notes that patients at risk of overdose, such as those with long-term use or high doses of opioids, may benefit from having a naloxone kit available at all times. Standardized Naloxone prescribing with an opioid prescription is not a recommendation.</p>	<p>Hospital Chart Abstraction</p>	<p>N/D; Disaggregate by race/ethnicity</p> <p>Quarterly</p> <p>Jan. – Mar. 2022</p> <p>Apr. – Jun. 2022</p> <p>Jul. – Sept. 2022</p> <p>Oct. – Dec. 2022</p> <p>Jan. – Mar. 2023</p> <p>Apr. – Jun. 2023</p> <p>Jul. – Sept. 2023</p> <p>Oct. – Dec. 2023</p>
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Process Measures

Measure Name	Measure Definition	Measure Source	Report As/Frequency
<p>P1: Percent of pregnant and postpartum people screened for SUDs</p> <p>*Note: ACOG recommends universal screening of every patient upon initial prenatal visit and as needed throughout the prenatal/postpartum phase. Universal screening supports health equity constructs.</p>	<p><i>Denominator:</i> Pregnant and postpartum people during their birth admission</p> <p><i>Numerator:</i> Among the denominator, those with documentation of having been screened for SUD using a validated screening tool prenatally and during their birth admission</p> <p>Inclusion criteria: Screening quickly assesses the risk and severity of substance use and identifies the appropriate level of treatment. Screening can occur in any health care setting (SAMSHA, 2020). Validated screening tools include 4Ps, 4Ps Plus, 5Ps, NIDA Quick Screen, SURP-P and CRAFFT. Screening should have occurred at least once prenatally or during a patient’s hospitalization for birth.</p>	Hospital Chart Abstraction	<p>N/D</p> <p>Monthly Collection begins Jan. 2022. Data should be submitted to Life QI portal within 30 days of end of reported month. Example: January data is due by March 1, February data is due by April 1.</p>
<p>P2: Percent of pregnant and postpartum people with OUD who were counseled on medication for opioid use disorder (MOUD)</p>	<p><i>Denominator:</i> Pregnant and postpartum people with OUD during their birth admission</p> <p><i>Numerator:</i> Among the denominator, those with documentation of counseling for MOUD prenatally or during their birth admission</p> <p>Inclusion criteria: Counseling should have occurred at least once prenatally or during a patient’s hospitalization for birth.</p>	Hospital Chart Abstraction	<p>N/D</p> <p>Monthly Collection begins Jan. 2022. Data should be submitted to Life QI portal within 30 days of end of reported month. Example: January data is due by March 1, February data is due by April 1.</p>
<p>P3: Percent of pregnant and postpartum people with SUD who were counseled on recovery treatment services</p>	<p><i>Denominator:</i> Pregnant and postpartum people with SUD (including OUD) during their birth admission</p> <p><i>Numerator:</i> Among the denominator, those with documentation of counseling for recovery treatment services prenatally or during their birth admission</p> <p>Inclusion criteria: Counseling should have occurred at least once</p>	Hospital Chart Abstraction	<p>N/D</p> <p>Monthly Collection begins Jan. 2022. Data should be submitted to Life QI portal within 30 days of end of reported</p>

	prenatally or during a patient’s hospitalization for birth.		month. Example: January data is due by March 1, February data is due by April 1.
P4: Percent of pregnant and postpartum people with SUD who received Naloxone counseling	<p><i>Denominator:</i> Pregnant and postpartum people with SUD during their birth admission</p> <p><i>Numerator:</i> Among the denominator, those with documentation of counseling for Naloxone prenatally or during their birth admission</p> <p>*Note: Due to the high rate of polysubstance use that includes any mix of opioids, non-opioids and synthetic opioids, AIM recommends Naloxone be prescribed for all patients with a documented exposure or diagnosis of SUD to include OUD.</p>	Hospital Chart Abstraction	<p>N/D</p> <p>Monthly Collection begins Jan. 2022. Data should be submitted to Life QI portal within 30 days of end of reported month. Example: January data is due by March 1, February data is due by April 1.</p>
P5: Provider and Nursing Education – Substance Use Disorders	<p>At the end of each reporting period, what cumulative proportion of OB providers and nurses (as organizationally identified) has completed an educational training program on care for pregnant and postpartum people with SUD?</p> <p>*Note: The training should occur during the collaborative timeframe and/or within the past two years to count in the numerator. Consider methods to provide training to new providers and staff as well through updated orientation processes.</p>	Hospital Report	<p>Report proportion completed rounded up to nearest 10% increment</p> <p>Every 6 months (July and December)</p>
P6: Provider and Nursing Education – Respectful and Equitable Care	<p>At the end of each reporting period, what cumulative proportion of OB providers and nurses (as organizationally identified) have completed an educational training program(s) that included content on stigma and implicit bias reduction, trauma-informed care, and health equity specific to the perinatal population?</p> <p>*Note: The training should occur during the collaborative timeframe and/or within the past two years to count in the numerator. Consider methods to provide training to new providers and staff as well through updated orientation processes. Content may be covered in more than one training;</p>	Hospital Report	<p>Report proportion completed rounded up to nearest 10% increment</p> <p>Every 6 months (July and December)</p>

	however, staff should not be included in the numerator until training on all three components is complete. MHA will provide training options to support organizations.		
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Structure Measures

Measure Name	Measure Description	Measure Source	Report As
S1: Resource Mapping/Identification of Community Resources	<p>Has your hospital created a comprehensive list of community resources, customized to include resources relevant for pregnant and postpartum people, that will be shared with all birthing units and outpatient OB sites?</p> <p>(Hospitals are encouraged to look at current resources and identify who helps serve this population and how you plan to build them into your referral model.)</p>	Hospital Report	Report Initial Completion Date and Share Copy with the Collaborative

<p>S2: Patient Event Debriefs</p>	<p>Has your department established a standardized process to conduct debriefs <i>with patients</i> after any severe event (not just related to OUD/SUD)?</p> <p>Inclusion criteria: Include patient support networks during patient event debriefs, as requested by the patient. Severe events may include the TJC sentinel event definition, severe maternal morbidity, or fetal death.</p>	<p>Hospital Report</p>	<p>Report Start Date of Patient Event Debriefs that includes patients and Share Copy with the Collaborative</p>
<p>S3: General Pain Management Guidelines</p>	<p>Has your hospital implemented post-delivery and discharge pain management prescribing guidelines for routine vaginal and cesarean births focused on limiting opioid prescriptions?</p> <p>*Note: prescribing guidelines should be based on established evidence-based practice, such as ACOG, SMFM, SAMSHA, and/or CDC. This measure is met when all staff/provider education on the policy is complete, and the policy is “live.”</p>	<p>Hospital Report</p>	<p>Report Policy Implementation Date and Share Copy with the Collaborative</p>
<p>S4: OUD Pain Management Guidelines</p>	<p>Has your hospital implemented specific pain management and opioid prescribing guidelines for patients with OUD?</p>	<p>Hospital Report</p>	<p>Report Policy Implementation Date and Share Copy with the Collaborative</p>
<p>S5: Validated Verbal Screening Tools and Resources Shared with Prenatal Care Sites</p>	<p>Has your hospital shared with <i>all</i> its prenatal care sites validated verbal screening tools and follow up resources for OUD and SUD?</p> <p>*Note: at a minimum, hospitals should plan to share this information with prenatal care sites that have established providers with birthing unit privileges and credentials as well as clinics, providers and other birthing hospitals that routinely transfer patients for care.</p>	<p>Hospital Report</p>	<p>Report Completion Date and Share Copy with the Collaborative</p>

Appendix A
AIM SUD Codes List

Variable	ICD 10 Code	Definition
Opioids		
	F11.10	Opioid abuse, uncomplicated
	F11.11	Opioid abuse, in remission
	F11.120	Opioid abuse with intoxication, uncomplicated
	F11.121	Opioid abuse with intoxication delirium
	F11.122	Opioid abuse with intoxication with perceptual disturbance
	F11.129	Opioid abuse with intoxication, unspecified
	F11.14	Opioid abuse with opioid-induced mood disorder
	F11.150	Opioid abuse with opioid-induced psychotic disorder with delusions
	F11.151	Opioid abuse with opioid-induced psychotic disorder with hallucinations
	F11.159	Opioid abuse with opioid-induced psychotic disorder, unspecified
	F11.181	Opioid abuse with opioid-induced sexual dysfunction
	F11.188	Opioid abuse with other opioid-induced disorder
	F11.19	Opioid abuse with unspecified opioid-induced disorder
	F11.20	Opioid dependence, uncomplicated
	F11.21	Opioid dependence, in remission
	F11.221	Opioid dependence with intoxication delirium
	F11.222	Opioid dependence with intoxication with perceptual disturbance
	F11.229	Opioid dependence with intoxication, unspecified
	F11.23	Opioid dependence with withdrawal
	F11.29	Opioid dependence with unspecified opioid-induced disorder
	F11.250	Opioid dependence with opioid-induced psychotic disorder with delusions
	F11.251	Opioid dependence with opioid-induced psychotic disorder with hallucinations
	F11.259	Opioid dependence with opioid-induced psychotic disorder, unspecified
	F11.281	Opioid dependence with opioid-induced sexual dysfunction
	F11.282	Opioid dependence with opioid-induced sleep disorder
	F11.288	Opioid dependence with other opioid-induced disorder
	F11.29	Opioid dependence with unspecified opioid-induced disorder
	F11.90	Opioid use, unspecified, uncomplicated

F11.920	Opioid use, unspecified with intoxication, uncomplicated
F11.921	Opioid use, unspecified with intoxication delirium
F11.922	Opioid use, unspecified with intoxication with perceptual disturbance
F11.929	Opioid use, unspecified with intoxication, unspecified
F11.93	Opioid use, unspecified with withdrawal
F11.94	Opioid use, unspecified with opioid-induced mood disorder
F11.950	Opioid use, unspecified with opioid-induced psychotic disorder with delusions
F11.951	Opioid use, unspecified with opioid-induced psychotic disorder with hallucinations
F11.959	Opioid use, unspecified with opioid-induced psychotic disorder, unspecified
F11.981	Opioid use, unspecified with opioid-induced sexual dysfunction
F11.982	Opioid use, unspecified with opioid-induced sleep disorder
F11.988	Opioid use, unspecified with other opioid-induced disorder
F11.99	Opioid use, unspecified with unspecified opioid-induced disorder
Sedatives	
F13.10	Sedative, hypnotic or anxiolytic abuse, uncomplicated
F13.11	Sedative, hypnotic or anxiolytic abuse, in remission
F13.120	Sedative, hypnotic or anxiolytic abuse with intoxication, uncomplicated
F13.121	Sedative, hypnotic or anxiolytic abuse with intoxication delirium
F13.129	Sedative, hypnotic or anxiolytic abuse with intoxication, unspecified
F13.14	Sedative, hypnotic or anxiolytic abuse with sedative, hypnotic or anxiolytic-induced mood disorder
F13.150	Sedative, hypnotic or anxiolytic abuse with sedative, hypnotic or anxiolytic-induced psychotic disorder with delusions
F13.151	Sedative, hypnotic or anxiolytic abuse with sedative, hypnotic or anxiolytic-induced psychotic disorder with hallucinations
F13.159	Sedative, hypnotic or anxiolytic abuse with sedative, hypnotic or anxiolytic-induced psychotic disorder, unspecified
F13.180	Sedative, hypnotic or anxiolytic abuse with sedative, hypnotic or anxiolytic-induced anxiety disorder
F13.181	Sedative, hypnotic or anxiolytic abuse with sedative, hypnotic or anxiolytic-induced sexual dysfunction
F13.182	Sedative, hypnotic or anxiolytic abuse with sedative, hypnotic or anxiolytic-induced sleep disorder
F13.188	Sedative, hypnotic or anxiolytic abuse with other sedative, hypnotic or anxiolytic-induced disorder
F13.19	Sedative, hypnotic or anxiolytic abuse with unspecified sedative, hypnotic or anxiolytic-induced disorder
F13.120	Sedative, hypnotic or anxiolytic abuse with intoxication, uncomplicated
F13.21	Sedative, hypnotic or anxiolytic dependence, in remission
F13.220	Sedative, hypnotic or anxiolytic dependence with intoxication, uncomplicated
F13.221	Sedative, hypnotic or anxiolytic dependence with intoxication delirium

F13.229	Sedative, hypnotic or anxiolytic dependence with intoxication, unspecified
F13.230	Sedative, hypnotic or anxiolytic dependence with withdrawal, uncomplicated
F13.231	Sedative, hypnotic or anxiolytic dependence with withdrawal delirium
F13.232	Sedative, hypnotic or anxiolytic dependence with withdrawal with perceptual disturbance
F13.239	Sedative, hypnotic or anxiolytic dependence with withdrawal, unspecified
F13.24	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced mood disorder
F13.250	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced psychotic disorder with delusions
F13.251	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced psychotic disorder with hallucinations
F13.259	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced psychotic disorder, unspecified
F13.26	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced persisting amnesic disorder
F13.27	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced persisting dementia
F13.280	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced anxiety disorder
F13.281	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced sexual dysfunction
F13.282	Sedative, hypnotic or anxiolytic dependence with sedative, hypnotic or anxiolytic-induced sleep disorder
F13.288	Sedative, hypnotic or anxiolytic dependence with other sedative, hypnotic or anxiolytic-induced disorder
F13.29	Sedative, hypnotic or anxiolytic dependence with unspecified sedative, hypnotic or anxiolytic-induced disorder
F13.90	Sedative, hypnotic, or anxiolytic use, unspecified, uncomplicated
F13.920	Sedative, hypnotic or anxiolytic use, unspecified with intoxication, uncomplicated
F13.921	Sedative, hypnotic or anxiolytic use, unspecified with intoxication delirium
F13.929	Sedative, hypnotic or anxiolytic use, unspecified with intoxication, unspecified
F13.930	Sedative, hypnotic or anxiolytic use, unspecified with withdrawal, uncomplicated
F13.931	Sedative, hypnotic or anxiolytic use, unspecified with withdrawal delirium
F13.932	Sedative, hypnotic or anxiolytic use, unspecified with withdrawal with perceptual disturbances
F13.939	Sedative, hypnotic or anxiolytic use, unspecified with withdrawal, unspecified
F13.94	Sedative, hypnotic or anxiolytic use, unspecified with sedative, hypnotic or anxiolytic-induced mood disorder
F13.950	Sedative, hypnotic or anxiolytic use, unspecified with sedative, hypnotic or anxiolytic-induced psychotic disorder with delusions
F13.951	Sedative, hypnotic or anxiolytic use, unspecified with sedative, hypnotic or anxiolytic-induced psychotic disorder with hallucinations
F13.959	Sedative, hypnotic or anxiolytic use, unspecified with sedative, hypnotic or anxiolytic-induced psychotic disorder, unspecified

	F13.96	Sedative, hypnotic or anxiolytic use, unspecified with sedative, hypnotic or anxiolytic-induced persisting amnestic disorder
	F13.97	Sedative, hypnotic or anxiolytic use, unspecified with sedative, hypnotic or anxiolytic-induced persisting dementia
	F13.980	Sedative, hypnotic or anxiolytic use, unspecified with sedative, hypnotic or anxiolytic-induced anxiety disorder
	F13.981	Sedative, hypnotic or anxiolytic use, unspecified with sedative, hypnotic or anxiolytic-induced sexual dysfunction
	F13.982	Sedative, hypnotic or anxiolytic use, unspecified with sedative, hypnotic or anxiolytic-induced sleep disorder
	F13.988	Sedative, hypnotic or anxiolytic use, unspecified with other sedative, hypnotic or anxiolytic-induced disorder
	F13.99	Sedative, hypnotic or anxiolytic use, unspecified with unspecified sedative, hypnotic or anxiolytic-induced disorder
Cocaine		
	F14.10	Cocaine abuse, uncomplicated
	F14.11	Cocaine abuse, in remission
	F14.120	Cocaine abuse with intoxication, uncomplicated
	F14.121	Cocaine abuse with intoxication with delirium
	F14.122	Cocaine abuse with intoxication with perceptual disturbance
	F14.129	Cocaine abuse with intoxication, unspecified
	F14.14	Cocaine abuse with cocaine-induced mood disorder
	F14.150	Cocaine abuse with cocaine-induced psychotic disorder with delusions
	F14.151	Cocaine abuse with cocaine-induced psychotic disorder with hallucinations
	F14.159	Cocaine abuse with cocaine-induced psychotic disorder, unspecified
	F14.180	Cocaine abuse with cocaine-induced anxiety disorder
	F14.181	Cocaine abuse with cocaine-induced sexual dysfunction
	F14.182	Cocaine abuse with cocaine-induced sleep disorder
	F14.188	Cocaine abuse with other cocaine-induced disorder
	F14.19	Cocaine abuse with unspecified cocaine-induced disorder
	F14.20	Cocaine dependence, uncomplicated
	F14.21	Cocaine dependence, in remission
	F14.220	Cocaine dependence with intoxication, uncomplicated
	F14.221	Cocaine dependence with intoxication delirium
	F14.222	Cocaine dependence with intoxication with perceptual disturbance
	F14.229	Cocaine dependence with intoxication, unspecified
	F14.23	Cocaine dependence with withdrawal
	F14.24	Cocaine dependence with cocaine-induced mood disorder
	F14.250	Cocaine dependence with cocaine-induced psychotic disorder with delusions
	F14.251	Cocaine dependence with cocaine-induced psychotic disorder with hallucinations

F14.259	Cocaine dependence with cocaine-induced psychotic disorder, unspecified
F14.280	Cocaine dependence with cocaine-induced anxiety disorder
F14.281	Cocaine dependence with cocaine-induced sexual dysfunction
F14.282	Cocaine dependence with cocaine-induced sleep disorder
F14.288	Cocaine dependence with other cocaine-induced disorder
F14.29	Cocaine dependence with unspecified cocaine-induced disorder
F14.90	Cocaine use, unspecified, uncomplicated
F14.920	Cocaine use, unspecified with intoxication, uncomplicated
F14.921	Cocaine use, unspecified with intoxication delirium
F14.922	Cocaine use, unspecified with intoxication with perceptual disturbance
F14.929	Cocaine use, unspecified with intoxication, unspecified
F14.94	Cocaine use, unspecified with cocaine-induced mood disorder
F14.950	Cocaine use, unspecified with cocaine-induced psychotic disorder with delusions
F14.951	Cocaine use, unspecified with cocaine-induced psychotic disorder with hallucinations
F14.959	Cocaine use, unspecified with cocaine-induced psychotic disorder, unspecified
F14.980	Cocaine use, unspecified with cocaine-induced anxiety disorder
F14.981	Cocaine use, unspecified with cocaine-induced sexual dysfunction
F14.982	Cocaine use, unspecified with cocaine-induced sleep disorder
F14.988	Cocaine use, unspecified with other cocaine-induced disorder
F14.99	Cocaine use, unspecified with unspecified cocaine-induced disorder
Amphetamines/Stimulants	
F15.10	Other stimulant abuse, uncomplicated
F15.11	Other stimulant abuse, in remission
F15.120	Other stimulant abuse with intoxication, uncomplicated
F15.121	Other stimulant abuse with intoxication delirium
F15.122	Other stimulant abuse with intoxication with perceptual disturbance
F15.129	Other stimulant abuse with intoxication, unspecified
F15.14	Other stimulant abuse with stimulant-induced mood disorder
F15.150	Other stimulant abuse with stimulant-induced psychotic disorder with delusions
F15.151	Other stimulant abuse with stimulant-induced psychotic disorder with hallucinations
F15.159	Other stimulant abuse with stimulant-induced psychotic disorder, unspecified
F15.180	Other stimulant abuse with stimulant-induced anxiety disorder
F15.181	Other stimulant abuse with stimulant-induced sexual dysfunction
F15.182	Other stimulant abuse with stimulant-induced sleep disorder

F15.188	Other stimulant abuse with other stimulant-induced disorder
F15.19	Other stimulant abuse with unspecified stimulant-induced disorder
F15.20	Other stimulant dependence, uncomplicated
F15.21	Other stimulant dependence, in remission
F15.220	Other stimulant dependence with intoxication, uncomplicated
F15.221	Other stimulant dependence with intoxication delirium
F15.222	Other stimulant dependence with intoxication with perceptual disturbance
F15.229	Other stimulant dependence with intoxication, unspecified
F15.23	Other stimulant dependence with withdrawal
F15.24	Other stimulant dependence with stimulant-induced mood disorder
F15.250	Other stimulant dependence with stimulant-induced psychotic disorder with delusions
F15.251	Other stimulant dependence with stimulant-induced psychotic disorder with hallucinations
F15.259	Other stimulant dependence with stimulant-induced psychotic disorder, unspecified
F15.280	Other stimulant dependence with stimulant-induced anxiety disorder
F15.281	Other stimulant dependence with stimulant-induced sexual dysfunction
F15.282	Other stimulant dependence with stimulant-induced sleep disorder
F15.288	Other stimulant dependence with other stimulant-induced disorder
F12.59	Other stimulant dependence with unspecified stimulant-induced disorder
F15.90	Other stimulant use, unspecified, uncomplicated
F15.920	Other stimulant use, unspecified with intoxication, uncomplicated
F15.921	Other stimulant use, unspecified with intoxication delirium
F15.922	Other stimulant use, unspecified with intoxication with perceptual disturbance
F15.929	Other stimulant use, unspecified with intoxication, unspecified
F15.93	Other stimulant use, unspecified with withdrawal
F15.94	Other stimulant use, unspecified with stimulant-induced mood disorder
F15.950	Other stimulant use, unspecified with stimulant-induced psychotic disorder with delusions
F15.951	Other stimulant use, unspecified with stimulant-induced psychotic disorder with hallucinations
F15.959	Other stimulant use, unspecified with stimulant-induced psychotic disorder, unspecified
F15.980	Other stimulant use, unspecified with stimulant-induced anxiety disorder
F15.94	Other stimulant use, unspecified with stimulant-induced mood disorder
F15.950	Other stimulant use, unspecified with stimulant-induced psychotic disorder with delusions
F15.951	Other stimulant use, unspecified with stimulant-induced psychotic disorder with hallucinations
F15.959	Other stimulant use, unspecified with stimulant-induced psychotic disorder, unspecified
F15.980	Other stimulant use, unspecified with stimulant-induced anxiety disorder
F15.981	Other stimulant use, unspecified with stimulant-induced sexual dysfunction

	F15.982	Other stimulant use, unspecified with stimulant-induced sleep disorder
	F15.988	Other stimulant use, unspecified with other stimulant-induced disorder
	F15.99	Other stimulant use, unspecified with unspecified stimulant-induced disorder