

Provider Documentation: Substance Use Disorders Documentation Tips & Best Practices

Did you know that documenting the level of use in substance use disorders is essential to complete and accurate coding?

Key elements to document are:

- Each condition to the highest level of specificity
 - Specific substance involved
 - Level of use-use, abuse, or dependence
 - Remission—partial or full, early or sustained
 - All related symptoms/conditions, such as intoxication, psychotic behavior, sleep disturbance, withdrawal, etc.
- Additional considerations:
 - If a patient becomes sober through detox or a rehab program, they still carry a diagnosis of substance use dependence. Document as drug/alcohol/substance dependence, in remission.
 - When a substance use disorder is being followed and managed by a different provider, it is still appropriate to include the diagnosis in the final assessment (when the condition impacts patient care, treatment, or management).

Monitor	Evaluate	Assess	Treat
Signs Symptoms Disease progression Disease regression	Test results Medication effectiveness Response to treatment Physical exam findings	Test ordered Counseling Record review Discussion	Medication Therapies Referral Other modalities
MEAT Examples: Substance Use Disorders			
Alcohol dependence, in sustained remission – Quit drinking 7 years ago. Will order CMP.	Alcohol dependence, in early remission – Has been sober from alcohol for 3 months following inpatient treatment stay.	Opioid dependence, in remission – Per records from his treating psychiatrist, Dr. X.	Alcohol abuse with anxiety disorder – Referred to outpatient rehab program.

Utilize MEAT (Monitor, Evaluate, Assess, Treat) to specifically address patient conditions:

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