

# KyPQC's Identifying, Diagnosing and Coding for Neonatal Abstinence Syndrome and Intrauterine Substance Exposure

**Healthcare providers should use the following criteria to diagnose and document neonatal abstinence syndrome (NAS) and intrauterine substance exposure in infant(s)' medical record and for reporting exposed and affected cases in the State NAS Registry.**

**What is NAS?** NAS is neonatal withdrawal from many substances, not just opiates, in which the infant experiences clinical symptoms of withdrawal. NAS is not limited to those cases that require pharmacological treatment. Opioid related NAS is also known as neonatal opioid withdrawal syndrome (NOWS).

**When should a diagnosis of NAS be made?** NAS should be diagnosed when a baby has prenatal exposure to a neurological active substance *and* exhibits clinical signs/symptoms of withdrawal, regardless of whether or not pharmacological treatment is required. Providers should document the presence of withdrawal symptoms in the newborn's discharge summary.

## **Why is it Important to code NAS appropriately?**

A Quality Improvement initiative on identifying, diagnosing, and caring for substance exposed newborns and those with neonatal withdrawal is underway. Some of the goals of the initiative include decreasing the incidence of NAS along with reducing length of stay and length of treatment among newborns diagnosed with NAS. It is important for all Kentucky hospitals to diagnose and code NAS consistently to measure the effectiveness of these efforts.

**How is NAS coded?** The current ICD-10 code for NAS is P96.1, *Neonatal withdrawal symptoms from maternal use of drugs of addiction*. This does not include newborns that are withdrawing from opioids or other substances that were given after birth for treatment.

All NAS diagnoses should also include a diagnosis of **substance exposure** to at least one substance in utero.

**What is substance exposure?** Exposure is when there is known maternal use of neurological active substances at any time during pregnancy. Documentation of exposure should be made when there is known maternal use of neurological active substances during pregnancy (biological test or self-report) and/or confirmation of baby's biological specimen for any neurological active substance(s), and/or confirmation of baby's withdrawal symptoms (if biological specimen is not collected/available or there is a false negative test result).

**How is substance exposure coded?** It is important that both NAS *and* exposure to neurological active substances during pregnancy are clearly documented in the medical record so that medical coders can code for NAS and intrauterine exposure. Beginning October 1, 2018, ICD-10 diagnosis codes were added to further specify the classification of drugs to which a newborn may have been exposed to prenatally (See Table on back page). These codes are listed underneath the code P04, *Newborn affected by noxious substances transmitted via placenta or breast milk*. KyPQC is encouraging coders to utilize the terms "affected by" and "exposure" synonymously.

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Not all babies with documented exposure to opioids will develop NAS. Regardless of whether or not the baby is diagnosed with NAS, if there is known exposure, the exposure should be clearly documented in the medical record so that the appropriate code can be assigned. KyPQC encourages hospitals to not only code for opioid exposure, but other neurological active substances as well. Please refer to exposure codes below.

Neuroactive Substance	ICD-10 Diagnostic Codes for Newborns with “Exposure” to Substances
<b>Opiates: Buprenorphine, Codeine, Fentanyl, Heroin, Methadone, Morphine, Meperidine, Pentazocine</b>	<b>P04.14: Newborn affected by maternal use of opiates</b>
Neurontin (Gabapentin)	P04.13: Newborn affected by maternal use of anticonvulsants
Selective Serotonin Reuptake Inhibitors (SSRIs) and anti-depressants	P04.15: Newborn affected by maternal use of antidepressants
Adderall, methamphetamine	P04.16: Newborn affected by maternal use of amphetamines
Barbiturates, Diazepam, lorazepam, Chlordiazepoxide	P04.17: Newborn affected by maternal use of sedative-hypnotics
Tobacco	P04.2: Newborn affected by maternal use of tobacco
Alcohol	P04.3: Newborn affected by maternal use of alcohol
Cocaine	P04.41: Newborn affected by maternal use of cocaine
Phencyclidine	P04.42: Newborn affected by maternal use of hallucinogens
Other Drugs	P04.49: Newborn affected by maternal use of other drugs of addiction *Note: there are other P04.* codes available. Please determine if a more specific code is applicable prior to assigning this code
Marijuana, THC	P04.81: Newborn affected by maternal use of cannabis
<b>Neonatal withdrawal</b>	<b>ICD-10 Diagnostic Code for Newborns with Withdrawal</b>
NAS	P96.1 – Neonatal Withdrawal symptoms from maternal use of drugs of addiction

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