BCHN002 – ATTACHMENT A

Health Home Serious Mental Illness (SMI)
Qualifying Diagnoses

Policy Number	BCHN002
Attachment	A
Effective Date	10/1/2026
Last Revised	September 21, 2026

Purpose

This attachment provides the Serious Mental Illness (SMI) qualifying diagnoses and associated ICD-10 diagnosis codes referenced in BCHN002, Standards and Requirements for Referrals, Eligibility Verification, Outreach and Enrollment into Health Home Care Management Services.

When a Care Manager determines that SMI is being used as a qualifying condition, the Care Manager must ensure that the member has an active, associated DSM-5 diagnosis and maintain supporting documentation in the member's Care Management Record.

Important: An SMI diagnosis alone does not establish Health Home eligibility. Applicable NYS DOH eligibility and Initial Appropriateness requirements must also be met and documented.

Approved SMI Qualifying Diagnoses and Codes

Diagnostic Category	ICD-10 Diagnosis Codes
A. Psychotic Disorders	F21, F22, F23, F20.81, F20.9, F25.0, F25.1, F06.2, F06.0, F06.1, F28, F29
B. Bipolar Disorders	F31.11, F31.12, F31.14, F31.2, F31.73, F31.74, F31.9, F31.0, F31.31, F31.32, F31.4, F31.5, F31.75, F31.76, F31.9, F31.81, F34.0, F06.33, F06.34, F31.89
C. Obsessive-Compulsive Disorders	F42
D. Depression	F34.8, F32.0, F32.1, F32.2, F32.3, F32.4, F32.5, F32.9, F33.0, F33.1, F33.2, F233.3, F33.41, F33.42, F33.9, F34.1, N94.3, F06.31, F06.32, F06.34, F32.8, F32.9, F34, F32.08
E. Anxiety Disorders	F41.9, F41.0, F41.1, F44.81, F40.0, F43.10
F. Personality Disorders	F60.0, F60.1, F60.3, F60.04, F60.5, F60.6, F60.9, F60.81, F21

Care Manager Documentation Requirements

• Verify that the member has an active, associated diagnosis corresponding to an applicable SMI qualifying diagnosis listed in this attachment.
• Document the qualifying diagnosis and associated diagnosis code in the member's Care Management Record.
• Maintain supporting clinical documentation used to establish the qualifying condition.
• Complete the applicable SMI functional criteria and Initial Appropriateness determination in accordance with BCHN002 and current NYS DOH Health Home requirements.

Source / Version Control

This attachment reflects the SMI diagnosis codes provided in the BCHN002 working policy draft and is intended to be maintained with BCHN002. Changes to NYS DOH qualifying-condition requirements or diagnosis codes should be reviewed and incorporated through the BCHN policy revision process.