

Behavioral Health Services (Terminology)

Introduction	Psychological disorders can cause disruptions in daily life. With appropriate diagnosis and treatment, people can discover ways to cope effectively and find relief from their symptoms. This document is not all inclusive. Included are the disorders that you will most likely encounter while helping members.				
Important	See Behavioral Health Services before quoting benefits. Tip: Policies apply for some products. Some services require Prior Authorization.				
See also	Similar, related, or easily confused documents. <ul style="list-style-type: none">• Behavioral Health Services - Behavioral Health (BH) includes all services related to the diagnosis and treatment of mental health (MH) conditions and substance use disorders (SUD). Benefits for Behavioral Health are quoted here for some products.• Behavioral Health (Levels of Care, Therapy Types, Provider Specialties) - Some lines of business quote BH services. This supplies levels of care, therapy types, and provider types.				
Diagnosis	Psychological diagnosis are performed by Psychiatrists, Psychologists, Psychiatric Nurse Practitioners, and by Medical Doctors. The criteria used is found in the Diagnostic and Statistical Manual of Psychological Disorders - Fifth Edition, also known as the DSM-V.				
Table of Contents	The following topics are included in this document: <ul style="list-style-type: none">• Anxiety Disorders• Dissociative Disorders• Feeding and Eating Disorders• Mood Disorders• Neuro-Developmental Disorders• Substance Use Disorders• Trauma and Stress Related Disorders				
Document history	<div>The document history for the past 12 months is outlined below.</div> <table><tr><th>Date</th><th>Description</th></tr><tr><td>8.25.24</td><td>Changed document title to <i>Behavioral Health Services (Terminology)</i> from <i>Common Psychological Disorders</i>.</td></tr></table>	Date	Description	8.25.24	Changed document title to <i>Behavioral Health Services (Terminology)</i> from <i>Common Psychological Disorders</i> .
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Anxiety Disorders

Introduction	Anxiety disorders are characterized by feelings of worry, anxiety, or fear that are strong enough to interfere with one's daily activities.				
Treatments	<div>These disorders are commonly treated with:</div> <div><ul style="list-style-type: none">• Medications• Nutrition and natural interventions• Psychotherapy (including CBT)</div>				
Generalized anxiety disorder	Generalized anxiety disorder (GAD) is marked by excessive worry about everyday events. It often interferes with a person’s well-being and functioning in daily life.				
Panic disorder	<div>Panic disorder is characterized by panic attacks that often seem to occur without reason.</div> <div><ul style="list-style-type: none">• People may begin to avoid situations and settings where attacks have occurred in the past or where they might occur in the future.• Can create significant impairments in many areas of everyday life and make it difficult to carry out normal routines.</div>				
Phobias	Phobia is an extreme fear of a specific object or situation in an environment. When confronted by a phobic object or situation, people may experience nausea, trembling, rapid heart rate, and/or fear of dying.				
Separation anxiety disorder	Separation anxiety disorder is marked by an excessive amount of fear or anxiety related to being separated from attachment figures. The person may avoid moving away from home, going to school, or getting married in order to remain close to the attachment figure.				
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Dissociative Disorders

Introduction	Dissociative disorders involve a dissociation or interruption in aspects of consciousness, including identity and memory.				
Treatments	<p>These disorders are commonly treated with:</p> <ul style="list-style-type: none">• Eye Movement Desensitization and Reprocessing• Medications• Psychotherapy (including CBT and DBT)				
De-personalization / derealization disorders	Depersonalization/derealization disorder is a sense of being outside of one’s own body (depersonalization) and being disconnected from reality (derealization). People with this disorder often feel a sense of unreality and involuntarily disconnect from their own memories, feelings, and consciousness.				
Dissociative amnesia	<p>Dissociative amnesia is a temporary loss of memory as a result of disassociation.</p> <ul style="list-style-type: none">• In many cases this memory loss is the result of a psychological trauma.• The memory loss can last for a brief period or may last for years.• Individual with this disorder may remember some details about events, but may have no recall of other details around a period of time.				
Dissociative identity disorder	<p>Dissociative identity disorder (DID) was formerly known as multiple personality disorder.</p> <ul style="list-style-type: none">• Involves the presence of two or more unique identities or personalities.• People with this disorder experience changes in behavior, memory, perception, emotional response, and consciousness.• Often caused by extreme trauma in early childhood.				
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Feeding and Eating Disorders

Introduction	Feeding and eating disorders include a range of psychological disorders characterized by abnormal or disturbed eating habits.				
Treatments	<p>These disorders are commonly treated with:</p> <ul style="list-style-type: none">• Medications• Nutrition Therapy• Occupational Therapy• Physical Therapy• Psychotherapy (CBT, CBT-E [specific to eating disorders], CRT, Family, Interpersonal, Psychodynamic, DBT, ACT) <p>Tip: Treatment benefits all depend on level of care (residential, inpatient, partial inpatient, intensive outpatient, or outpatient).</p>				
Anorexia nervosa	<p>Anorexia is characterized by restriction of food consumption.</p> <ul style="list-style-type: none">• Leads to weight loss and most commonly, a very low body weight.<ul style="list-style-type: none">– Body weight is no longer a diagnostic criteria in the DSM-V.• Those who experience this disorder also have a preoccupation and fear of gaining weight as well as a distorted view of their own appearance and behavior.				
Binge eating disorder	<p>Binge eating involves episodes of consuming an unusually large amount over the course of a couple of hours without compensatory actions following.</p> <ul style="list-style-type: none">• The individual feels as if they have no control over their eating.• Binge eating episodes are sometimes triggered by emotions, boredom, or following stressful events.				
Bulimia nervosa	Bulimia involves consuming an unusually large amount of food and then taking extreme steps to compensate for the caloric intake. Compensatory behaviors may include: self-induced vomiting, abuse of laxatives, abuse of diuretics, and/or excessive exercise.				
Pica	<p>Pica is the craving and consumption of non-food substances.</p> <ul style="list-style-type: none">• It commonly includes eating dirt, paint, or soap.• This most commonly affects children and those with developmental disabilities.				
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Mood Disorders

Introduction	Mood disorders are characterized by periods of depression, sometimes alternating with periods of elevated mood.				
Treatments	<p>These disorders are commonly treated with:</p> <ul style="list-style-type: none">• Electroconvulsive Therapy (ECT)• Medications• Psychotherapy (including CBT, DBT, family, and interpersonal)• Transcranial Magnetic Stimulation				
Bipolar disorder	<p>Bipolar disorder used to be referred to as manic depressive disorder. It is now divided into bipolar 1 and bipolar 2.</p> <ul style="list-style-type: none">• Bipolar 1: Defined by manic episodes that last at least seven (7) days, or manic symptoms so severe they require immediate hospital care.<ul style="list-style-type: none">– Usually depressive episodes also occur, typically lasting at least two (2) weeks.• Bipolar 2: Defined by a pattern of depressive episodes and hypomanic episodes, but no the full-blown manic episodes present in bipolar 1.				
Major depressive disorder	<p>Major depressive disorder is more commonly known as depression or clinical depression.</p> <ul style="list-style-type: none">• Depression affects how a person feels, thinks and behaves and can lead to a variety of emotional and physical problems.• The person may have trouble doing normal day-to-day activities, and sometimes may feel as if life isn't worth living.				
Seasonal affective disorder	Seasonal affective disorder (SAD) is marked by depression associated with late autumn and winter and thought to be caused by a lack of sun-light producing vitamin-D.				
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Neuro-Developmental Disorders

Introduction	Neuro-developmental disorders are brain function disorders that affect emotion, learning ability, self-control, and memory. These disorders unfold as an individual develops and grows.				
Treatments	<p>These disorders are commonly treated with:</p> <ul style="list-style-type: none">• Behavioral therapy• Medications• Neuropsychological rehabilitation• Psychosocial support				
Attention deficit hyperactivity disorder	<p>Attention deficit hyperactivity disorder is also known as ADHD.</p> <ul style="list-style-type: none">• Persistent pattern of hyperactivity-impulsivity and/or inattention that interferes with functioning.• Presents itself in two or more settings such as at home, work, school, and social situations.• DSM-5 specifies:<ul style="list-style-type: none">– Several symptoms must have been present prior to age 12.– Symptoms must have a negative impact on social, occupational, or academic functioning.				
Autism spectrum disorders	<p>Autism spectrum disorders are characterized by persistent deficits in social interaction and communication in multiple life areas as well as restricted and repetitive patterns of behaviors. See the following A-Z sheets:</p> <ul style="list-style-type: none">• Auditory Integration Therapy• Applied Behavioral Analysis• Sensory Integration Therapy				
Communication disorders	<p>Communication disorders are characterized by:</p> <ul style="list-style-type: none">• Limited ability to use, understand, or detect language and speech.• Such delays relate to cognition, social functioning, speech, language, and motor skills.• It is generally seen as a temporary diagnosis applying to kids who are still too young to take standardized IQ tests.				
Intellectual disability	<p>Intellectual disability was formerly known as mental retardation.</p> <ul style="list-style-type: none">• Individuals must be diagnosed prior to age 18.• Limitations to intellectual functioning are often identified through the use of IQ tests.• Individual has an IQ score between 70 and 75 often indicating the presence of a limitation.				
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Substance Use Disorders

Introduction	Substance abuse disorders occur when an individual’s use of alcohol or other substance (drug) leads to health issues or problems at work, school, or home.				
Treatments	<p>These disorders are commonly treated with:</p> <ul style="list-style-type: none">• 12-step programs• Detoxification• Medications• Psychotherapy (DBT, Rational Emotive Therapy, Contingency Management, Motivational Interviewing) <p>Tip: Treatment benefits all depend on level of care (residential, inpatient, partial inpatient, intensive outpatient, or outpatient).</p>				
Alcohol related disorders	Alcohol related disorders involve the abuse of alcohol. It involves the consumption of alcohol, the most widely used (and frequently overused) drug in the United States.				
Cannabis related disorders	<p>Cannabis related disorders involve the abuse of marijuana.</p> <ul style="list-style-type: none">• Includes symptoms such as using more than originally intended or prescribed.• Feeling unable to stop using the drug.• Continuing drug use despite adverse effects in the individual’s life.				
Inhalant use disorders	<p>Inhalant use disorders involve the abuse of inhalants of any kind.</p> <ul style="list-style-type: none">• It involves inhaling fumes from substances such as paints or solvents.• Individuals with this condition experience cravings for the substance and find it difficult to control or stop the behavior.				
Stimulant use disorder	Stimulant use disorder involves the abuse of stimulants of any kind. It is a new category in the DSM-V that involves the use of stimulants such as: meth, amphetamines, and cocaine.				
Tobacco use disorders	<p>Tobacco use disorders involves consuming more tobacco than intended.</p> <ul style="list-style-type: none">• Individuals have difficulty cutting back or quitting tobacco.• Individuals crave tobacco.• There may be adverse social consequences as a result of tobacco use.				
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Trauma and Stress Related Disorders

Introduction	Trauma and stress related disorders are disorders in which a person has difficulty recovering after experiencing or witnessing a terrifying event.				
Treatments	<p>These disorders are commonly treated with:</p> <ul style="list-style-type: none">• Cognitive Remediation Therapy• Eye Movement Desensitization and Reprocessing• Medications• Prolonged exposure therapy				
Acute stress disorder	Acute stress disorder is the onset of severe anxiety within a one month period after exposure to a traumatic event such as: natural disasters, war, accidents, or witnessing a death. The individual may experience dissociative symptoms such as a sense of altered reality, an inability to remember important aspects of the event, and flashbacks.				
Adjustment disorders	Adjustment disorders occur as a response to a sudden change such as divorce, job loss, end of a close relationship, a move, or some other loss or disappointment. Symptoms can include: anxiety, irritability, depressed mood, worry, anger, hopelessness, and feelings of isolation.				
Post-traumatic stress disorder	<p>Post-traumatic stress disorder (PTSD) can develop after an individual has experienced a traumatic event.</p> <ul style="list-style-type: none">• Civilians and Military alike can be diagnosed.• Include episodes of reliving or re-experiencing the event, avoiding things that remind the individual about the event, feeling on edge, and/or having negative thoughts.• Nightmares, flashbacks, bursts of anger, difficulty concentrating, exaggerated startle response, and gaps in memory are some high level symptoms.				
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