Department of Veterans Affairs

following the veteran's discharge to determine whether a change in evaluation is warranted.

(Authority: 38 U.S.C. 1155) [61 FR 52700, Oct. 8, 1996]

§ 4.130 Schedule of ratings—Mental disorders.

The nomenclature employed in this portion of the rating schedule is based upon the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) (see § 4.125 for availability information). Rating agencies must be thoroughly familiar with this manual to properly implement the directives in § 4.125 through § 4.129 and to apply the general rating formula for mental disorders in § 4.130. The schedule for rating for mental disorders is set forth as follows:

- 9201 Schizophrenia
 9202 [Removed]
 9203 [Removed]
 9204 [Removed]
 9205 [Removed]
 9208 Delusional disorder
 9210 Other specified and unspecified schizo-
- 9210 Other specified and unspecified schizophrenia spectrum and other psychotic disorders
- 9211 Schizoaffective disorder
- 9300 Delirium
- 9301 Major or mild neurocognitive disorder due to HIV or other infections

- 9304 Major or mild neurocognitive disorder due to traumatic brain injury
- 9305 Major or mild vascular neurocognitive disorder
- 9310 Unspecified neurocognitive disorder
- 9312 Major or mild neurocognitive disorder due to Alzheimer's disease
- 9326 Major or mild neurocognitive disorder due to another medical condition or substance/medication-induced major or mild neurocognitive disorder
- 9327 [Removed]
- 9400 Generalized anxiety disorder
- 9403 Specific phobia; social anxiety disorder (social phobia)
- 9404 Obsessive compulsive disorder
- 9410 Other specified anxiety disorder
- 9411 Posttraumatic stress disorder
- 9412 Panic disorder and/or agoraphobia
- 9413 Unspecified anxiety disorder
- 9416 Dissociative amnesia; dissociative identity disorder
- 9417 Depersonalization/Derealization disorder
- 9421 Somatic symptom disorder
- 9422 Other specified somatic symptom and related disorder
- 9423 Unspecified somatic symptom and related disorder
- 9424 Conversion disorder (functional neurological symptom disorder)
- 9425 Illness anxiety disorder
- 9431 Cyclothymic disorder
- 9432 Bipolar disorder
- 9433 Persistent depressive disorder (dysthymia)

Rating

- 9434 Major depressive disorder
- 9435 Unspecified depressive disorder
- 9440 Chronic adjustment disorder

GENERAL RATING FORMULA FOR MENTAL DISORDERS

	nating
Total occupational and social impairment, due to such symptoms as: gross impairment in thought processes or communication; persistent delusions or hallucinations; grossly inappropriate behavior; persistent danger of hurting self or others; intermittent inability to perform activities of daily living (including maintenance of minimal personal hygiene); disorientation to time or place; memory loss for names of close relatives, own occupation, or own name.	100
Occupational and social impairment, with deficiencies in most areas, such as work, school, family relations, judgment, thinking, or mood, due to such symptoms as: suicidal ideation; obsessional rituals which interfere with routine activities; speech intermittently illogical, obscure, or irrelevant; near-continuous panic or depression affecting the ability to function independently, appropriately and effectively; impaired impulse control (such as unprovoked irritability with periods of violence); spatial disorientation; neglect of personal appearance and hygiene; difficulty in	
adapting to stressful circumstances (including work or a worklike setting); inability to establish and maintain effective relationships.	70
Occupational and social impairment with reduced reliability and productivity due to such symptoms as: flattened affect; circumstantial, circumlocutory, or stereotyped speech; panic attacks more than once a week; difficulty in understanding complex commands; impairment of short- and long-term memory (e.g., retention of only highly learned material, forgetting to complete tasks); impaired judgment; impaired abstract thinking; disturbances of motivation and mood; difficulty in establishing and maintaining effective work and social relationships.	50
Occupational and social impairment with occasional decrease in work efficiency and intermittent periods of inability to perform occupational tasks (although generally functioning satisfactorily, with routine behavior, self-care, and conversation normal), due to such symptoms as: depressed mood, anxiety, suspiciousness, panic attacks (weekly or less often), chronic sleep impairment, mild memory loss (such as forgetting names, directions, recent events).	30
Occupational and social impairment due to mild or transient symptoms which decrease work efficiency and ability to perform occupational tasks only during periods of significant stress, or symptoms controlled by continuous medication.	10
A mental condition has been formally diagnosed, but symptoms are not severe enough either to interfere with occupational and social functioning or to require continuous medication.	0

Not involving temporomandibular

articulation.

Not replaceable by prosthesis

9903 Mandible, nonunion of, confirmed by diagnostic imaging studies:

Replaceable by prosthesis

Rat-ing

20

10

§4.149

9520 Anorexia nervosa 9521 Bulimia nervosa

RATING FORMULA FOR EATING DISORDERS

	Rating
Self-induced weight loss to less than 80 percent of expected minimum weight, with incapacitating episodes of at least six weeks total duration per year, and requiring hospitalization more than twice a year for parenteral nutrition or tube feeding.	100
Self-induced weight loss to less than 85 percent of expected minimum weight with incapacitating episodes of six or more weeks total duration per year.	60
Self-induced weight loss to less than 85 percent of expected minimum weight with incapacitating episodes of more than two but less than six weeks total duration per year.	30
Binge eating followed by self-induced vomiting or other measures to prevent weight gain, or resistance to weight gain even when below expected minimum weight, with diagnosis of an eating disorder and incapacitating episodes of up to two weeks total duration per year.	10
Binge eating followed by self-induced vomiting or other measures to prevent weight gain, or resistance to weight gain even when below expected minimum weight, with diagnosis of an eating disorder but without incapacitating episodes.	0

Note 1: An incapacitating episode is a period during which bed rest and treatment by a physician are required.

Note 2: Ratings under diagnostic codes 9201 to 9440 will be evaluated using the General Rating Formula for Mental Disorders. Ratings under diagnostic codes 9520 and 9521 will be evaluated using the General Rating Formula for Eating Disorders.

[79 FR 45100, A	Aug. 4,	2014]	
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DENTAL AND ORAL CONDITIONS

§ 4.149 [Reserved]

(Authority: 38 U.S.C. 1155)

Note (1): For VA compensation purposes, diagnostic imaging studies include, but are not limited to, conventional radiography (X-ray), computed tomography (CT), magnetic resonance imaging (MRI), positron emission tomography (PET), radionuclide bone scanning, or ultrasonography Note (2): Separately evaluate loss of vocal articulation, loss of smell, loss of taste, neurological impairment, respiratory dysfunction, and other impairments under the appropriate diagnostic code and combine under § 4.25 for each separately rated condition 9900 Maxilla or mandible, chronic osteomyelitis, osteonecrosis or osteoradionecrosis of: Displacement, causing moderate anterior or posterior open bite Displacement, coausing moderate anterior or posterior open bite 1 Temporomandibular disorder (TMD): Interincial range: 0 to 10 millimeters (mm) of maximum unassisted vertical opening. With dietary restrictions to all mechanically altered foods Without dietary restrictions to mechanically altered
imaging studies include, but are not limited to, conventional radiography (X-ray), computed tomography (CT), magnetic resonance imaging (MRI), positron emission tomography (PET), radionuclide bone scanning, or ultrasonography Note (2): Separately evaluate loss of vocal articulation, loss of smell, loss of taste, neurological impairments under the appropriate diagnostic code and combine under § 4.25 for each separately rated condition 9900 Maxilla or mandible, chronic osteomyelitis, osteonecrosis or osteoradionecrosis of: 1 posterior open bite
ventional radiography (X-ray), computed tomography (CT), magnetic resonance imaging (MRI), positron emission tomography (PET), radionuclide bone scanning, or ultrasonography Note (2): Separately evaluate loss of vocal articulation, loss of smell, loss of taste, neurological impairment, respiratory dysfunction, and other impairments under the appropriate diagnostic code and combine under §4.25 for each separately rated condition 9900 Maxilla or mandible, chronic osteomyelitis, osteonecrosis or osteoradionecrosis of: Displacement, not causing antentor or posterio open bite 1 terior open bite 1 te
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Note (2): Separately evaluate loss of vocal articulation, loss of smell, loss of taste, neurological impairment, respiratory dysfunction, and other impairments under the appropriate diagnostic code and combine under § 4.25 for each separately rated condition 9900 Maxilla or mandible, chronic osteomyelitis, osteonecrosis or osteoradionecrosis of: 0 to 10 millimeters (mm) of maximum unassisted vertical openimum ing. With dietary restrictions to all mechanically altered foods
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9900 Maxilla or mandible, chronic osteomyelitis, osteonecrosis or osteoradionecrosis of: Without dietary restrictions to mechanically altered
osteonecrosis or osteoradionecrosis of: to mechanically altered
Rate as osteomyelitis, chronic under diag-
nostic code 5000 11 to 20 mm of maximum unas-
9901 Mandible, loss of, complete, between angles 100 sisted vertical opening.
9902 Mandible, loss of, including ramus, unilaterally or bilaterally all mechanically altered
of bilaterally.
Loss of one-fidit of fillote,.
Involving temporomandibular articulation.
Not replaceable by prosthesis
Poplaceable by prosthesis 50 21 to 29 mm of maximum unas-
Not involving temperemendibular sisted vertical opening.
With dietary restrictions to articulation. With dietary restrictions to full liquid and pureed
Not replaceable by prosthesis
Replaceable by prosthesis
Loss of less than one-half, soft and semi-solid
Involving temporomandibular articu- foods
lation. Without dietary restrictions
Not replaceable by prosthesis
Replaceable by prosthesis