AAVBC
AMERICAN ACADEMY OF VALUE BASED CARE

Personality Disorders

Quick Reference Guide

2026

Table of Contents

1 CLINICAL SNAPSHOT

Definition: Personality disorders (PDs) are **enduring, pervasive patterns of inner experience and behavior** that deviate markedly from cultural expectations, manifest across multiple domains (cognition, affectivity, interpersonal functioning, impulse control), and cause clinically significant distress or functional impairment beginning in adolescence or early adulthood. The DSM-5-TR organizes 10 PD subtypes into three clusters: **Cluster A** (paranoid, schizoid, schizotypal — odd/eccentric), **Cluster B** (antisocial, borderline, histrionic, narcissistic — dramatic/impulsive), and **Cluster C** (avoidant, dependent, obsessive-compulsive — anxious/fearful). Borderline personality disorder (BPD) carries the greatest acute morbidity burden and the largest evidence base.[1]

ICD-10 Codes:

F60.0 Paranoid **F60.1** Schizoid **F60.2** Antisocial **F60.3** Borderline **F60.4** Histrionic **F60.5** Obsessive-compulsive **F60.6** Avoidant **F60.7** Dependent **F60.81** Narcissistic **F60.89** Other specific PDs **F60.9** Unspecified (avoid — see Section 5). **All F60.x codes map to HCC 153 (Personality Disorders), RAF 0.396 (CNA, CMS-HCC v28)**. Documentation must include a definitive diagnostic statement, reference to the enduring pattern since adolescence/early adulthood, functional impairment across ≥2 domains, and the specific subtype — not "consistent with" or "traits of."[2]

Prevalence: The prevalence of personality disorders in the United States is substantial, with the two largest nationally representative studies providing the most authoritative estimates. US-Specific Prevalence Data: The NESARC (National Epidemiologic Survey on Alcohol and Related Conditions), the largest US study (N = 43,093), found that **14.79%** (95% CI 14.08–15.50) of adult Americans — approximately **30.8 million people** — had at least one personality disorder. Individual subtype prevalences were: **Obsessive-compulsive PD: 7.88%** (most prevalent), **Paranoid PD: 4.41%; Antisocial PD: 3.63%; Schizoid PD: 3.13%; Avoidant PD: 2.36%; Histrionic PD: 1.84%; Dependent PD: 0.49%** (least prevalent).[3] BPD, narcissistic PD, and schizotypal PD were not assessed. The DSM-5-TR cites a review of epidemiological studies reporting median prevalences of **3.6% for Cluster A, 4.5% for Cluster B, 2.8% for Cluster C, and 10.5% for any PD.**[1]

HCC/RAF V28 Mapping

ICD-10 CODE[8]	HCC CATEGORY	RAF WEIGHT	DOCUMENTATION REQUIREMENT
F60.0 (Paranoid), F60.1 (Schizoid)	HCC 153 — Personality Disorders	0.396	**Cluster A (paranoid, schizoid)**. Document **pervasive distrust** (**F60.0**) or **detachment from social relationships with restricted emotional expression** (**F60.1**); enduring pattern since early adulthood. Paranoid PD is among the most prevalent in elderly
F60.2 (Antisocial)	HCC 153 — Personality Disorders	0.396	**Antisocial PD.** Document **pervasive disregard for and violation of others' rights; pattern present since age 15; patient must be ≥18 for diagnosis**. Higher prevalence in older men