Coding guidelines for routine HIV testing in health care settings

Background

In September 2006, the Centers for Disease Control and Prevention (CDC) issued recommendations for HIV testing in health care settings. "The Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health-Care Settings" (*Morbidity and Mortality Weekly Report*, 2006) encourages HIV testing as a routine part of medical care. For patients in all health care settings, there are four key differences from previously published CDC recommendations:

- **HIV screening**—another term for broad-based testing—is recommended for patients ages 13 to 64 in all health care settings after the patient is notified that testing will be performed unless the patient declines (opt-out screening).
- **HIV testing** of people at high risk for HIV infection is recommended at least once a year.
- **Screening** should be incorporated into the general consent for medical care; separate written informed consent is not recommended.
- **Prevention counseling** should not be required with HIV diagnostic testing or as part of HIV screening programs in health care settings.

Laws in states differ regarding counseling and written informed consent; check your state laws and policies (see the Resources section of this flier for more information).

Data suggests that targeted testing on the basis of risk behaviors fails to identify a substantial number of persons who are HIV infected. A significant number of persons, including persons with HIV infection, do not perceive themselves to be at risk for HIV or do not disclose their risks. Routine voluntary HIV testing may reduce the stigma associated with assessment of risk behaviors. More patients accept recommended HIV testing when it is offered routinely to everyone, without a risk assessment. And as a health care provider, routine voluntary screening removes the step for you of identifying and assigning risk.

HIV infection is consistent with all generally accepted criteria that justify screening: (1) HIV infection is a serious health disorder that can be diagnosed before symptoms develop; (2) HIV can be detected by reliable, inexpensive and noninvasive screening tests; (3) infected patients have years of life to gain if treatment is initiated early, before symptoms develop; and (4) the costs of screening are reasonable in relation to the anticipated benefits.

With routine HIV screening in place, the ability to link patients who receive a diagnosis of HIV infection into care, treatment and prevention services is critical. HIV screening without such linkages confers little or no benefit to the patient. Providers should be prepared to appropriately refer people into care programs with the capacity to absorb new patients.

2008 status of testing and reimbursement:

With the latest CDC recommendations and the move toward HIV testing as a routine part of care, more providers are using rapid test kits. Effective Jan. 1, 2008, providers can bill for performing an HIV test with a rapid test kit. Providers can add modifier "92" for "**Alternative Laboratory Platform Testing**" to the usual laboratory procedure code for HIV testing within the CPT® system. The following is the CPT language for this service: "When laboratory testing is being performed using a kit or transportable instrument that wholly

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or in part consists of a single use, disposable analytical chamber, the service may be identified by adding modifier **92** to the usual laboratory procedure code (HIV testing 86701–86703)."
The test does not require permanent dedicated space; hence, by its design, it may be hand carried or transported to the vicinity of the patient for immediate testing at that site, although location of testing is not in itself determinative of the use of this modifier.

Example 1:

A private practice physician sees a 20-year-old single male for a physical examination before his senior year of college. The patient, who is not an established patient, has had multiple sexual partners, both male and female. The physician performs the HIV rapid test. To bill use:

- **ICD-9-CM diagnosis codes**

1. **V70.0 Routine** general medical examination
2. **V73.89** Special screening for other specified viral diseases
3. **V69.8** Other problems related to lifestyle (since patient is asymptomatic but in a known high risk group)
4. **V65.44** HIV Counseling (if counseling is provided during the encounter for the test or after the results are available)
5. **V08** Asymptomatic HIV infection status if the results are positive but the patient is asymptomatic
6. **042** HIV disease, with codes for the HIV-related manifestations or conditions, if the results are positive and the patient exhibits symptoms

- **CPT codes**

1. **Test product**
   86701 with modifier 92 for the antibody HIV-1 test
   or
   86703 with modifier 92 for the antibody HIV-1 and HIV-2 single assay
2. **Office service**
   99385 if the patient is new for initial comprehensive preventive medicine service evaluation and management
   or
   99395 if the patient is established for periodic comprehensive preventive medicine reevaluation and management

   99211–99215 for the evaluation and management of an established patient if the results are positive and HIV counseling is provided

Example 2:

A 34-year-old, married female with allergy complaints shows up at her primary care physician's office. As a returning patient, the physician can either perform the conventional HIV test or the rapid HIV test. To bill use:

- **ICD-9-CM diagnosis codes**

1. **V73.89** Special screening for other specified viral diseases
2. **V65.44** HIV counseling (if counseling is provided during the encounter for the test or after the results are available)
3. **V08** Asymptomatic HIV infection status if the results are positive but the patient is asymptomatic
4. **042** HIV disease, with codes for the HIV-related manifestations or conditions, if the results are positive and the patient exhibits symptoms

CPT® codes

Test product		
Code	**Rapid test modifier**	**Description**
86689		Antibody; HTLV or HIV antibody, confirmatory test (e.g, Western Blot)
86701	92	Antibody; HIV-1
86702	92	Antibody; HIV-2
86703	92	Antibody; HIV-1 and HIV-2, single assay
87534		Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, direct probe technique
87535		Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, amplified probe technique
87536		Infectious agent detection by nucleic acid (DNA or RNA); HIV-1, quantification
87390		Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semi-quantitative, multiple step method; HIV-1

Test administration	
Code	**Description**
36415	Collection of venous blood by venipuncture

Office service	
Code	**Description**
99385	Initial comprehensive preventive medicine service evaluation and management 18–39 years of age (new patient)
99386	Initial comprehensive preventive medicine service evaluation and management 40–64 years of age (new patient)
99395	Periodic comprehensive preventive medicine reevaluation and management 18–39 years of age (established patient)
99396	Periodic comprehensive preventive medicine reevaluation and management 40–64 years of age (established patient)
99211-99215	HIV counseling for patients with positive test results; office or other outpatient visit for the evaluation and management of an established patient

Situation	Code	Description
Patient seen as part of a routine medical exam	V70.0	Routine general medical examination at a health care facility
Patient seen to determine his/her HIV status (can be used in addition to routine medical exam)	V73.89	Special screening for other specified viral diseases
Asymptomatic patient in a known high-risk group for HIV (can be used in addition to routine medical exam)	V69.8	Other problems related to lifestyle
Counseling provided during the encounter for the test (add additional code if applicable)	V65.44	HIV counseling
Returning patient informed of his/her HIV **negative** test results	V65.44	HIV counseling
Returning patient informed of his/her HIV **positive** test results AND patient is **asymptomatic**	V08	Asymptomatic HIV infection status
Returning patient informed of his/her HIV **positive** test results, AND patient is **symptomatic**	042	HIV disease
HIV counseling provided to patient with **positive** test results	V65.44	HIV counseling

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