



HAWAII STATE
DEPARTMENT
OF HEALTH

Coding and Billing for HIV Services in Healthcare Facilities



The Hawai'i State Department of Health STD/AIDS Prevention Branch is pleased to provide you information on billing and reimbursement for routine HIV testing for insured persons age 14 – 65 living in Hawai'i.

Appropriate Coding

Appropriate Current Procedural Terminology (CPT®) and ICD-9 codes are required for each claim submission for the performance of HIV screening. The CPT® code identifies the service performed and the ICD-9 code identifies the corresponding diagnosis to justify the service performed. The following sections will list some of the possible codes that can be used for submitting claims, including examples.

Claim Denial

If denied by the insurer, contact the insurance company and request a review of the initial claim submission. An effective claim appeals letter will need to be developed if the telephone call to reverse the claim denial is unsuccessful. In many instances, it is advisable to request benefit verification before service is performed to avoid the denial of the claim submission.

The information provided in this document is for illustrative purposes only and does not guarantee coverage. As policies change frequently, we strongly recommend that you consult specific payers for any questions that arise when completing or submitting a claim for services.

HIV Testing Recommendations

The Revised CDC Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health Care Settings (Morbidity and Mortality Weekly Report, 2006) encourage HIV testing for patients aged 13 to 64 in all health care settings

HIV screening is supported by the revised CDC recommendations as a normal part of medical practice, comparable to screening for other treatable conditions. Screening as a basic health tool is used to identify unrecognized health conditions so treatment can be offered before symptoms develop and to implement interventions to reduce the likelihood of continued transmission of communicable diseases.

In 2013, the [US Preventive Services Task Force](#) (USPSTF) issued a grade “A” recommendation for routine HIV screening for anyone aged 15-65 years. Under the Affordable Care Act, any USPSTF preventive services graded “A” or “B” should be covered by most insurance plans (including Medicare/Medicaid) *without cost-sharing*.

The Law Regarding HIV Testing in Hawaii

[§325-16](#), removes barriers to increase routine Human Immunodeficiency Virus (HIV) testing by healthcare providers in Hawaii so more people can learn their HIV status. The law no longer requires pre-test HIV counseling or written informed consent specifically, the law states that healthcare providers may test for HIV infection after:

- (1) Verbally explaining that some test results are maintained by the Hawaii Department of Health (DOH) in accordance with strict confidentiality protocols established by law;
- (2) Verbally advising that free HIV testing is available through the DOH and certain community agencies;
- (3) Providing the person reasonable opportunity to decline the HIV test; and
- (4) Receiving the person’s express oral consent by declining to sign the form.

Coding Guidelines for Routine HIV Testing in Health Care Setting

CPT® Codes

Test Product	
CODE	DESCRIPTION
86689	Antibody; HTLV or HIV antibody; confirmatory test (e.g. Western Blot)
86701	Antibody; HIV-1
86703	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 re-evaluation and management 18-39 years of age (established patient)
99396	Periodic comprehensive preventive medicine re-evaluation and management 40-64 years of age (established patient)
99211-99215	Office or other outpatient visit for the evaluation and management of an established patient that may not require the presence of a physician
Emergency Service	
99281-99288	Emergency department visit for the evaluation and management of a patient

Providers can bill for performing an HIV test with a rapid test kit by adding modifier “92” for **Alternative Laboratory Platform Testing** to the usual laboratory procedure code for HIV testing within the CPT® (Current Procedural Terminology) system. The CPT guidance for this modifier is as follows: “When laboratory testing is being performed using a kit or transportable instrument that wholly 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).

CODE	MODIFIER	DESCRIPTION
86701	92	Antibody; HIV-1
86702	92	Antibody; HIV-2
86703	92	Antibody; HIV-1 and HIV-2, single assay

ICD-9-CM Diagnostic Codes		
CODE	DESCRIPTION	SITUATION
V70.0	Routine general medical examination at a health care facility	Patient seen as part of a routine medical exam
V73.89	Special screening for other specified viral diseases	Patient seen to determine his/her HIV status (can be used in addition to routine medical exam - V70.0)
V69.8	Other problems related to lifestyle	Asymptomatic patient in a known high-risk group (can be used in addition to routine medical exam – V70.0)
V65.44	HIV counseling	Counseling provided during the encounter for the test
V65.44	HIV counseling	Returning patient informed of his/her HIV negative test result
V65.44	HIV counseling	Returning patient informed of his/her HIV positive test result
V08	Asymptomatic HIV infection status	positive test results AND patient is asymptomatic
V042	HIV disease	Returning patient informed of his/her HIV positive test results, AND patient is symptomatic
Test Product		
CODE	DESCRIPTION	
86689	Antibody; HTLV or HIV antibody; confirmatory test (e.g. Western Blot)	
86701	Antibody; HIV-1	
86703	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	
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Coding Scenarios for Routine and Rapid HIV Testing in Health Care Facilities

(See descriptive ICD-9 and CPT Codes to identify the set of codes that best reflect the status of the patient being tested)

Example 1: Non-established Patient—Annual Exam

A private practice physician sees a 25-year-old male for his annual wellness exam. The patient, who is **not an established** patient, states that he has had multiple sexual partners, both male and female. The physician should perform a **rapid** HIV test.

To bill use:

ICD-9-CM Diagnosis Codes: V70.0; V73.89 or V69.8; V65.44; V08; 042; V65.44

CPT CODES

Test Product: 86701 with modifier **92**, or **86703** with modifier **92**, or **87390** with modifier **92**

Office service: 99385

Example 2: Established Patient—Annual Exam

A 35-year-old single married female with allergy complaints visits her primary care physician. She is an established patient; therefore, the physician can perform either the **conventional** or a **rapid** HIV test.

To bill use:

ICD-9-CM Diagnosis Codes: V73.89; V08 or 042; V65.44

Note: These codes should be reported in addition to those codes appropriate to allergy complaints reported by the patient (either a confirmed diagnosis of allergy, or the specific signs or symptoms).

CPT CODES

Test product: 86701

Test administration: 36415

Office service: 99211-99215

Example 3: Emergency Department Visit

A 64-year-old single female reports to the emergency department with complaints of abdominal pain and indicates sexual risk behavior. The physician should perform a **rapid** HIV test.

To bill use:

ICD-9-CM Diagnosis Codes: V73.89 or V69.8; V65.44; V08; 042; V65.44

CPT CODES

Test product: 86701 with modifier **92**, or **86703** with modifier **92**, or **87390** with modifier **92**

Office service: 99281-99288

Note: Physician billing for emergency department services provided to patient by both the patient's personal physician and/or ED physician.