

Screening is the first step to treatment

HIV, STIs, VIRAL HEPATITIS AND LTBI ROUTINE SCREENING TOOLKIT



Medicare coding guide

Due to the Affordable Care Act (ACA), when physicians order certain evidence-based preventive services for patients, the insurance company may cover the cost of the service, with the patient having no cost-sharing responsibility (zero-dollar). The ACA requires that most private insurance plans provide zero-dollar coverage for the preventive services recommended by four ACA designated organizations (the U.S. Preventive Services Task Force [USPSTF], the Advisory Committee on Immunization Practices [ACIP], Women’s Preventive Services Initiative, and Bright Futures).

As coverage is directly aligned with these evidence-based recommendations, it is important to recognize which patient populations are eligible for each preventive service without cost-sharing and which patients may require cost-sharing for the same services. This “Medicare coding guide” helps physicians ensure that they are coding services correctly to be eligible for zero-dollar coverage. [Click here for more information.](#)

Below is a list of procedural codes related to HIV, STIs, viral hepatitis and latent tuberculosis infection screening that may be applicable in your clinical practice. The information provided does not make recommendations for the specific tests that need to be ordered. Please check all recent Medicare National Coverage Determinations (NCDs) and Local Coverage Determinations (LCDs) to determine the most up to date, accurate information related to coverage.

HIV

HIV screening

Coverage guidance: Certain Medicare beneficiaries without regard to perceived risk or who are at increased risk for HIV infection, including anyone who asks for the test, or pregnant persons.

CPT® code	Code descriptor	Co-pay/coinsurance waived (Yes/No)?	Deductible waived (Yes/No)?
80081	Obstetric panel (includes HIV testing) This panel must include the following: Blood count, complete (CBC), and automated differential WBC count (85025 or 85027 and 85004) OR Blood count, complete (CBC), automated (85027) and appropriate manual differential WBC count (85007 or 85009) Hepatitis B surface antigen (HBsAg) (87340) HIV-1 antigen(s), with HIV-1 and HIV-2 antibodies, single result (87389) Antibody, rubella (86762) Syphilis test, non-treponemal antibody; qualitative (e.g., VDRL, RPR, ART) (86592) Antibody screen, RBC, each serum technique (86850) Blood typing, ABO (86900) AND Blood typing, Rh (D) (86901)	YES	YES
HCPCS code	Code descriptor	Co-pay/coinsurance waived (Yes/No)?	Deductible waived (Yes/No)?
G0432	Infectious agent antibody detection by enzyme immunoassay (eia) technique, HIV-1 and/or HIV-2, screening	YES	YES
G0433	Infectious agent antibody detection by enzyme-linked immunosorbent assay (elisa) technique, HIV-1 and/or HIV-2, screening	YES	YES
G0435	Infectious agent antibody detection by rapid antibody test, HIV-1 and/or HIV-2, screening	YES	YES
G0475	HIV antigen/antibody, combination assay, screening	YES	YES

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STIs

Screening for STIs and high intensity behavioral counseling to prevent STIs

Coverage guidance: Certain Medicare beneficiaries when all of the following are true:

- Sexually active adolescents and adults at increased risk for STIs
- Referred for this service by a primary care provider and provided by a Medicare-eligible primary care provider in a primary care setting

CPT® code	Code descriptor	Co-pay/coinsurance waived (Yes/No)?	Deductible waived (Yes/No)?
86631	Antibody; Chlamydia	YES	YES
86632	Antibody; Chlamydia, IgM	YES	YES
87110	Culture, chlamydia, any source	YES	YES
87270	Infectious agent antigen detection by immunofluorescent technique; Chlamydia trachomatis	YES	YES
87320	Infectious agent antigen detection by immunoassay technique, (e.g., enzyme immunoassay [EIA], enzymelinked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; Chlamydia trachomatis	YES	YES
87490	Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, direct probe technique	YES	YES
87491	Infectious agent detection by nucleic acid (DNA or RNA); Chlamydia trachomatis, amplified probe technique	YES	YES
87810	Infectious agent antigen detection by immunoassay with direct optical (i.e., visual) observation; Chlamydia trachomatis	YES	YES
87800	Infectious agent detection by nucleic acid (DNA or RNA), multiple organisms; direct probe(s) technique	YES	YES
87590	Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, direct probe technique	YES	YES
87591	Infectious agent detection by nucleic acid (DNA or RNA); Neisseria gonorrhoeae, amplified probe technique	YES	YES
87850	Infectious agent antigen detection by immunoassay with direct optical (i.e., visual) observation; Neisseria gonorrhoeae	YES	YES
86592	Syphilis test, non-treponemal antibody; qualitative (e.g., VDRL, RPR, ART)	YES	YES
86593	Syphilis test, non-treponemal antibody; quantitative	YES	YES
86780	Antibody; Treponema pallidum	YES	YES
87340	Infectious agent antigen detection by immunoassay technique, (e.g., enzyme immunoassay [EIA], enzymelinked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; hepatitis B surface antigen (HBsAg)	YES	YES
87341	Infectious agent antigen detection by immunoassay technique, (e.g., enzyme immunoassay [EIA], enzymelinked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; hepatitis B surface antigen (HBsAg) neutralization	YES	YES

Medicare coding guide

Screening for STIs and high intensity behavioral counseling to prevent STIs (continued)

HCPCS code	Code descriptor	Co-pay/ coinsurance waived (Yes/No)?	Deductible waived (Yes/No)?
G0445	High intensity behavioral counseling to prevent sexually transmitted infection; face-to-face, individual, includes: education, skills training and guidance on how to change sexual behavior; performed semiannually, 30 minutes	YES	YES

VIRAL HEPATITIS

Hepatitis B virus (HBV) screening

Coverage guidance: Certain Medicare beneficiaries who fall into any of the following categories:

- Asymptomatic, nonpregnant adolescents and adults at high risk for HBV infection
- Pregnant persons

CPT® code	Code descriptor	Co-pay/ coinsurance waived (Yes/No)?	Deductible waived (Yes/No)?
86704, pregnant female	Hepatitis B core antibody (HBcAb); total	YES	YES
86706, pregnant female	Hepatitis B surface antibody (HBsAb)	YES	YES
87340, pregnant female	Infectious agent antigen detection by immunoassay technique, (e.g., enzyme immunoassay [EIA], enzymelinked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; hepatitis B surface antigen (HBsAg)	YES	YES
87341, pregnant female	Infectious agent antigen detection by immunoassay technique, (e.g., enzyme immunoassay [EIA], enzymelinked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; hepatitis B surface antigen (HBsAg) neutralization	YES	YES

HCPCS code	Code descriptor	Co-pay/ coinsurance waived (Yes/No)?	Deductible waived (Yes/No)?
G0499, Asymptomatic, Nonpregnant, High Risk	Hepatitis B screening in non-pregnant, high risk individual includes hepatitis b surface antigen (hbsag), antibodies to hbsag (anti-hbs) and antibodies to hepatitis B core antigen (anti-hbc), and is followed by a neutralizing confirmatory test, when performed, only for an initially reactive hbsag result	YES	YES

Medicare coding guide

Hepatitis C virus (HCV) screening

Coverage guidance: Certain adult Medicare beneficiaries who fall into at least one of the following categories:

- High risk for HCV infection
- Born between 1945 and 1965
- Had a blood transfusion before 1992

CPT® code	Code descriptor	Co-pay/coinsurance waived (Yes/No)?	Deductible waived (Yes/No)?
G0472	Hepatitis C antibody screening, for individual at high risk and other covered indication(s)	YES	YES