HIV Billing and Reimbursement



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Bronx District Public Health Office
NYC Department of Health and Mental Hygiene



Overview

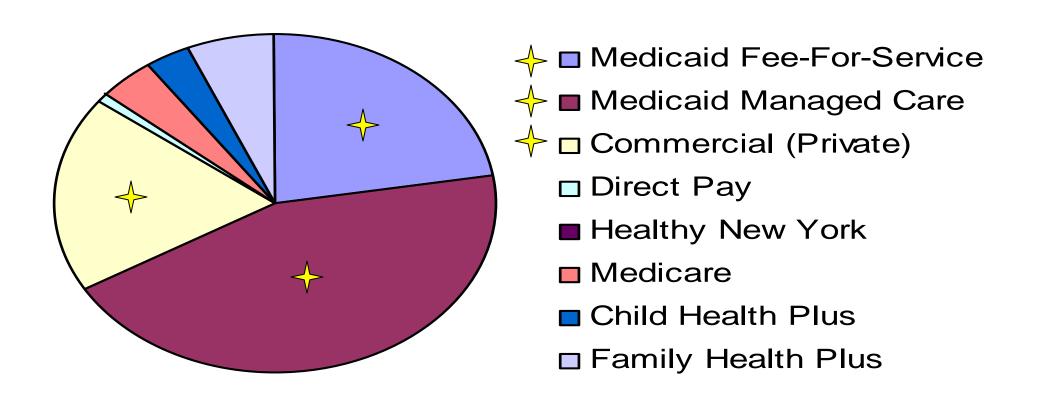
 HIV Primary Care Medicaid Program (Fee-for-Service Medicaid)

 Managed Care Medicaid and Commercial (Private) Plans

Billing Scenarios



Health Plan Coverage, Bronx





HIV PRIMARY CARE MEDICAID PROGRAM

(Fee-for-Service Medicaid)



HIV Primary Care Medicaid Program

- HIV Testing Visit
- HIV Post Counseling Positive Visit
- HIV Counseling Only (no test) Visit
- HIV Monitoring
- HIV Initial/Annual Medical Evaluation



HIV Primary Care Medicaid Program

- HIV Testing Visit
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- HIV Monitoring
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Visit Description	D&TC Rate Code	Hospital Rate Code	Current UT*	2006 Changes (New)
HIV Pre-Test with Testing	1695	2983	UT - 2	Extended to ED
HIV Pre-Test without Testing	3109	3109	UT - 2	CAP – 1
HIV Post Negative Counseling	1696	2984	UT – 1 Per Test	Eliminated
HIV Positive Counseling	1802	3111	UT - 2 Per Patient	Changed to UT – 3 With Initial Diagnosis UT - 1 Subsequent Year
Initial - Annual Comprehensive	1697	2985	CAP - 1** Per Year	No Change
HIV Monitoring	1699	2987	UT - 4 Per Year	UT - 3 Per Year
Drug and Immunotherapy	1698	2986	UT – 4 Per Month	Eliminated

^{* &}lt;u>Utilization Threshold:</u> Expected Visit Usage



^{**&}lt;u>Utilization CAP:</u> Maximum Visit Usage / Year

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HIV Primary Care Medicaid Program

- HIV Testing Visit
 HIV Post Counseling Positive Visit
 HIV Counseling Only (no test) Visit







Same Day Billing







HIV PRIMARY CARE MEDICAID PROGRAM ALLOWABLE SAME DAY PAYMENTS Chart 1

Visits Effective November 1, 2006

4040 0070					
1610/2870	2879	3109	1695/2983	1802/3111	1697/2985
Non-HIV Clinic Visit	Emergency Department Visit*	HIV Pre-Test Counseling Without Testing	HIV Testing Visit	HIV Counseling (Positive)	Initial/Annual HIV Medical Evaluation
YES	NO		reimbursement i	s claimed, the me	
YES	YES MUST USE RAPID HIV TEST DEVICE	NO			
YES	YES	NO	STANDARD TEST		
	Non-HIV Clinic Visit YES	Non-HIV Clinic Visit YES NO YES MUST USE RAPID HIV TEST DEVICE	Non-HIV Clinic Visit Pepartment Visit* NO When same day indicate that dis YES YES YES YES MUST USE RAPID HIV TEST DEVICE HIV Pre-Test Counseling Without Testing When same day indicate that dis	Non-HIV Clinic Visit Department Visit* Non-HIV Department Visit* No Department Visit* No Department Visit* No Department Visit* No Department Counseling Without Testing Visit No Department Counseling Visit Visit No Department Counseling Visit Visit No Department Counseling Visit Visit Visit Visit Visit Visit No Department Counseling Visit Vi	Non-HIV Clinic Visit Department Visit* YES NO YES MUST USE RAPID HIV TEST DEVICE YES YES YES YES YES YES YES NO HIV Testing Visit Counseling Without Testing Without Testing Visit Visit Positive) Important Notes When same day reimbursement is claimed, the mean of the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in the indicate that distinctively different services were provided in t

D &T C Codes



HIV PRIMARY CARE MEDICAID REIMBURSEMENT SYSTEM Chart 2

Billing Codes, Utilization Limits, Medical Documentation

Visit	Clinic Visit Rate Code	Hospital Visit Rate Code	Utilization Limits*	Medical Record Documentation Requirements
HIV Testing Visit	1695	2983	UT 2	First Visit The signed HIV Consent Form, HIV Test result, and Notation as to whether the results have been communicated to the patient. Second Visit An entry justifying the need for a second or subsequent HIV Testing Visit, e.g., patient had recent risk at the time of the first test.
HIV Pre-Test Counseling Without Testing	3109	3109	Cap 1	 A notation that counseling was provided, The reason the patient declined testing, Follow-up plan, including indications for further counseling and testing.
HIV Counseling (Positive)	1802	3111	UT 3	Initial Diagnosis Preliminary or confirmatory positive test result, Referrals to medical care and supportive services, Follow-up to ensure entry into care, Prevention/risk reduction counseling and follow-up plan, Partner counseling and assistance, including domestic violence screening Medical Provider HIV/AIDS Report and Partner Contact Form (DOH 4189) Annual assessments for patients with HIV Partner counseling and assistance, including domestic violence screening Prevention/risk reduction counseling and follow-up plan.

Utilization Thresholds (UT): represents the expected visit usage based on current clinical practice; justification for visits exceeding the threshold must be documented in the patient's medical record.

Utilization Cap is the maximum annual visit usage established by the Department. Billing above the cap will be denied.



HIV Primary Care Medicaid Program Contact Information

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WWW.NYHEALTH.GOV

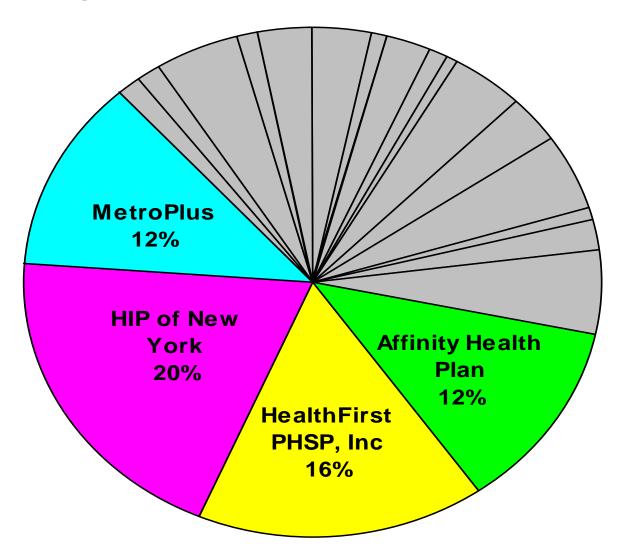
Key word - HIV Primary Care Medicaid Program



Managed Care Medicaid Organizations and Commercial (Private) Health Plans



Insurance Plan Enrollment, Bronx Managed Care Medicaid and Commercial Providers





Billing Codes

Regular Clinic Visit E&M Codes						
Avg. minutes spent	New pt.	Est. pt.				
5		99211				
10	99201	99212				
15		99213				
20	99202					
25		99214				
30	99203					
40		99215				
45	99204					
60	99205					

+ Modifier 25



Billing Codes

Preventive Medi Counseling Cod	
Avg. minutes spent	Code
15	99401
30	99402
45	99403
60	99404



Example of Billing Codes for Clinic Visit

RANK	Office visit	New	Est	R/
	Minimal		99211	Γ
	Problem focused	99201	99212	Γ
	Expanded problem focused	99202	99213	Γ
	Detailed	99203	99214	Γ
	Comprehensive	99204	99215	Γ
	Comprehensive (new patient)	99205		
	Significant, separate service	-25	-25	
	Well visit	New	Fst	

Source: Family Practice Management Superbill

Located at: http://www.aafp.org/fpm/20060900/fpmsuperbill.pdf



CPT Codes for lab tests

86701 HIV 1 only

86702 HIV 2 only

86703 HIV 1 & 2

86689 HIV confirmatory (WB)

Modifier -92 indicates rapid test

i.e. 86701-92



MCOs and Private Plans Billing Summary

1.

Bill E&M code (99212-99215)



Modifier 25

2.

Bill preventive medicine counseling code (99401-99404)



ICD-9 code v65.44

3.

Bill CPT code for lab test conducted (86701-86703)



Example 1

A female high school student shows up at her primary care physician's office concerned about having recently had unprotected sex with a number of partners and requests to be tested for HIV.



Medicaid Fee-for-Service

- This is an HIV Testing Visit
 - → Bill 1695
- If her rapid test comes back <u>negative</u>... There is nothing more to bill.
- If her rapid test comes back <u>positive</u>... This is an HIV Counseling (Positive) Visit
 - → Bill 1802

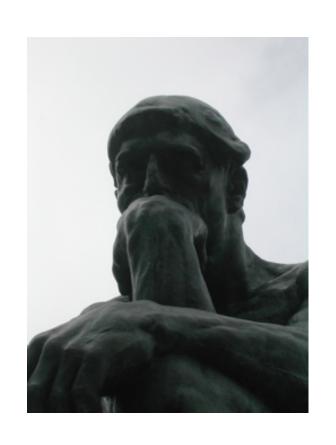


Bill Fee-for Service Medicaid for both the 1695* AND the 1802* on the day of the visit when test result is positive.



What if a <u>conventional</u> test is used?

Chart 2* says that a <u>test</u> result is required documentation to bill for the 1695 visit <u>but there</u> will not be a test result on the day of the visit.







You can still bill for the 1695 visit without yet having the result **BUT** chart notes must reflect when result is communicated to the patient (at a later date).

Documentation is key



If a conventional test is used...

And comes back <u>positive</u>...

Call in patient for 1802 visit

And comes back <u>negative</u>...

Communicate result to patient (phone call, NYS "Info on Negatives" Sheet) and document in chart notes that result was given.

MCO and Private Plans

Use a preventive medicine counseling code according to the time spent with pt. → Bill 99401 - 99404

Justify the preventive medicine counseling code with

+ result

Asymptomatic HIV Infection

→ Bill v08

Symptomatic HIV disease

→ Bill 042 (w/codes for HIV-related conditions)

Use the CPT code appropriate to the test used

→ Bill 86701 - 86703



Example 2

A 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.



ICD-9-CM Diagnosis Codes

1. <u>V70.0</u>

Routine general medical examination

2. <u>V73.89</u>

Special screening for other specific viral diseases

3. <u>V69.8</u>

Other problems related to lifestyle (since patient is asymptomatic but in a known high risk group)



ICD-9-CM Diagnosis Codes

4. V65.44

HIV Counseling

IF POSITIVE...

5. <u>V08</u>

Asymptomatic HIV infection if patient is asymptomatic

or

<u>042</u>

Symptomatic HIV disease (with codes for the HIV-related manifestations or conditions)

CPT Codes

1. Test product

86701-92

for rapid HIV-1 antibody test

or

86703-92

for rapid HIV-1/2 antibody test



CPT Codes

2. Office service

99385

new patient initial comprehensive preventive medicine service E & M

or

99395

established patient periodic comprehensive preventive medicine E & M

99401-99404

preventive medicine counseling for HIV testing



Example 3

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.



ICD-9-CM Diagnosis Codes

1. V73.89

Special screening for other specified viral diseases

2. V65.44

HIV Counseling

IF POSITIVE...

3. V08

Asymptomatic HIV infection if the patient is asymptomatic

or

<u>042</u>

Symptomatic HIV disease (with codes for the HIV-related manifestations or conditions)



CPT Codes

1. Test product

86701 HIV-1 antibody test

or

86701-92 for rapid HIV-1 antibody test

or

86703-92 for rapid HIV-1/2 antibody test

2. Test administration

36415

collection of venous blood by venipuncture



CPT Codes

2. Office service

99211-99215

appropriate office visit code for an established patient based upon the key components performed

99401-99404

preventive medicine counseling provided for HIV testing



Incorporating HIV visit codes into your billing sheets



Sample Superbill

Front Back

Date of service:			Water?□				
Patient mark		Insurance:					
Address:			Group #:	Previousbu lance:			
			Copage	Today's charges:			
Phone: DOB:			Acount#:	Today's payment: check#			
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924.9 Contraios, umpec.
                                                                           Insectible
Open wound, lower limb, suspec-
Open wound, apperlimb, suspec-
              Supplemental Claudification
VII.20 Confirmacem Pap distribution
VII.20 Confirmacem Pap distribution
VII.20 Contracepting, chair
VII.20 Contracepting, chair (dupletage), etc.)
VII.20 Contracepting, device (dupletage), etc.)
VII.20 Contracepting, development plan
VII.20 Exposely, in this is an distance, suspec.
                                                                                 appose, mware in declare, unique
Gymeological ware
times sization, combinative, other
imme sization, influenza
                                                                                 Well adult dwd:
Well thild cleds
```

HIV Testing Codes

ICD-9 codes			CPT codes					
		HIV.	HIV Testing and Counseling Visit					
V65.44	HIV counseling		Minimal	99401				
V08	Asymptomatic HIV		Expanded	99402				
042	Symptomatic HIV		Detailed	99403				
			Comprehensive	99404				
		Labo	oratory					
			HV1&2 rapid test	86703-92				



Sample Superbill with HIV Testing Codes

Front Back

Date	of service :				w?D						
Pati	ekt eserse			letu	mo:						
t de					orber same			Dec.			
Adi	nn:			Georg					usbalance:		
De-	-			Cop	ing Lant F:				charges:		
Phos DOG		Sea:			AMTH: Ádan same:			Da her	payment: check#		
	ngs :			ne			_	-2-01			
UAT.	Office visit	Here	Est	BURE	Office procedure:	_	_	Nex.	Laboratory		
	Win imal	1	98211		Anescope		46800		Veripuncture		260
	Problem focused	99301	98212		Audorwitz		96551		Blood gluxone, receitoring device		629
	Expanded problem focused		98213		Caramet arroyal		69211		Blood gluccae, when I dipatick		829
	Ewhalled	99203	98214		Софонкру		57953		CBC, w's studifferential		850
	Comprehensive		98215	\vdash	Colposicipily will biopsy		57955	\vdash	CBC, w/o auto differential		65
_	Comprehensive (see patient)	99205		_	SCG, w/latwp etution		R2800	┺	Cholestern		62.0
_	Significant, separate service	-25	-35	⊢	SCG, rhythm strip		828.00	⊢	Heracocalt, qualax		62
_	Well visit	Here	Est 98381	-	End was trial blopsy Reatible sig moid accopy		\$5100	⊢	Hernoccal t, immunoamny Hernoglobin ATC		82
_	1-17		98282	⊢	Realisie sig moid aucopy wibicp	-	45321	-	Lipit panel	_	80
	5-II y		96363		Fracture rate cast/splint		29	1	Liver parter!		80
	12-0 v		900 M		5 Be:			\vdash	60 8 grep (stin, hair, naits)		67
	18-28 y		98285	т	Nebulizer .		94600	T	Metabolic panel, basic		080
	80-68y		990 95		Nebulizer dwso		94664		Metabolic purel, comprehensive		80
	85 g+	99087	98287		Spiremetry		84010		Mismoss decais		86
	Medicare preventive services				Spire metry, pre- and post		94060		Pregnancy, blood		M
	Paci		Q0091		Tympurometry		12567		Pregnancy, units		61
	Polici ii b mast		60404		Valedony		55250		Beesl purvi		80
	Frestate (PSA		CONTR		Skin procedures	10000	Units		Sedires station rate		95
	Tabacco cou saul ing/3-10 m in		G0075 G0076		Durn care, in this	16000	-	-	Street, regid		82
-	Tabacco coe sael ing/>10 m in Welcome to Medica m ecom		GRMS		Foreign body, skin, simple Foreign body, skin, complex	10121		-	Stop Culture Stop A		87
-	ECG w/Welcome to Medica measure		C0066		T&D, sizec was	18060		+	TD 2009 A		86
	File sibile signal documpty		COLOR		180, tempoma/seroma	10140		\vdash	UA, complete, son-automated		51
	# erwocalt, qualax		CO100		Laceration sepair, simple	130		-	UA, w/s micro, nurr-automated		51
	File shot		G8000	${}^{-}$	Site: Site:		l	\Box	UA, w/ micro, sce-automated		61
	Privat mont is shot		G8008		Laxwarion sepair, layered	130			Urine colony count		625
	Consultation/presp disarrance				5 Box 5 Exx :				Urino calituno, peecampiliwe		621
	Expanded problem focused		98262	\vdash	Lealins, biogray can	11900			Wet makes 1904		67
_	Ewhaled		98212		Leeins, biograg wasth add*!	11901		\vdash	Vacdived		_
_	Comprehensive/modic emplexity		98266		Lecius, excision, benigs	TM	l		Df,<7 y		90
_	Comprehensive/high complexity		98265	⊢	5 Be:5be:		_	⊢	DIP		90
_	Other services After posted bosts		99050	-	Lecius, eccision, mailignant Site:Size:	116	l	\vdash	DtsP _i of y Ru, 6-25 months	_	90
_	Eventing Awarband appointment		99051	-	Lecins, paring it string, one	11055	-	-	Ru, 2 y +	_	90
_	i une tealth cordification		G0180		Locks, paring it at ting, 24	11056		-	Hep A, adult		90
	Form bealth moort fication		CO158		Locius, stave	113	-	-	Hep A, ped/adol, 2 dose		90
$\overline{}$	Post-op fall law-up		99034		Site: Site:		l	\vdash	Hep 8, ade it		90
	Prolonged/38-74 min		98754		Rail renoval, partial	11730			Hep 8, ped indol 2 dase		90
	Special reports if a time. Disability Mioriters comp		99000	$\overline{}$	Hall removal, w/matrix	11750			Hep 8-H th		90
	Disability Miorburs comp		9455		Stir tog, 1-15	1000			Hito & docu		90
	todistry				Wart, flat, 1-14	17110			HPV		90
_				\vdash	Wart plants ; stople	17000	—		PV		90
_	File			\vdash	Wart plants t each add 1	17000	H-b		MMR		90
_	Disgress				Hedicaless Januarille so to William	10290	Units		Procuments, x2 y		90
2				\vdash	Ampicilitis, up to 580mg D-12, up to 1,800 mcg	13430	-		Preumonia conjegate, <5 y Tit, >7 v		90
2				\vdash	Spinephrine, up to frei	JH170		\vdash	Varioda		90
4				т	Keralog, 10mg	15001			ham a significant & injections		Ur
	t effice visit				Lidocales, 10mg	12001			Alleegen, one	95115	
bel		D W	HY		Normal value, 1800cc	17090			Alleegen, ras liiple	95117	
rete	udime:				Phonocogun, up to 50mg	12550			line admir, use	90471	
					Progesteeone, 150mg	JR 055			inm admin, each add'i	90472	
					Receptin, 250mg Tectociseone, 290mg	10095			inm admin, intranausi, one	90472	
-					Terror and 200 mg	11880		-	irm admir, intransus (each add)		
	mi			\vdash	Tigan, apria 200 mg	11005	-	-	Injection, joint, small	30600	\vdash
lb:				Н	Totadol, 15 mg	11895	_	-	Injection, joint, intermediate	30605 30610	\vdash
hete	s diline:				Mitroelina sout pervious			1	injection, joint, major injection, the njaroph iding	90772	\vdash
				Н				1	in jection, triagger point	30552	\vdash
Phys	idan siquature								Supplies		
					Over						
					ı Uvel						
							- 1				

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Infections & Paraditic Diseases
           078.38 Wats, all sites
         Heephamu
Derlan Heoplasmu
1992 Shin, seffthase neoplasmy snapec.
216.8 Shin, unspec.
           Endocrine, Hetriffensi & Metabelic Diserders
344.8 http://www.maper.
274.8 Grad, unspect.
274.8 is pretioned in vision to
272.8 is pretioned in vision to
272.8 is pretioned and
274.8 Ohm is, model
274.80 Chan is, MOS
274.80 Chan is, MOS
274.80 Chan is, MOS
274.80 Chan is, MOS
           Mantal Disorders
           200.00 Accepts state, umpec.
200.00 Attention defict, who hyperactivity
200.00 Demonstra, seeile, HOS
301 Deposition, HOS
           Mervous System & Sense Organ Diserders
Norson System Records
           254.8 Carpolitansel
265.90 Spilippin umper, win status
265.90 Hillighilde uniper, net intentable
           Eye Disease:
272.30 Canjunctivitis, usapec.
260.18 Visital disturbusco, umper
           Circulatory System
Anythmia:
427.21 Arial forillation
                                  Angina perioris, 1935
Helat talkae, congestee, s sepec.
Ischweik beart dalease, chronic, unspec
Valeuland kunder, switz, 1935
                                 Ebrated 87 w/o hypertension
Hippertension, beriliph
Hippertension, erthall talls
PAP phonol vascular disease, anapoc.
                                    Thrombupit lebits, unspec.
Vesous flooff derry, stopec.
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Asymptomatic HIV

Symptomatic HIV

	Respirat	ary System pisto ip Tract
I	493.98	Anthers, umper. En sub Bis, silvate
	856 JI 896	COVE, NCS
	806	Priva monto, a super.
	Upper Res 852	pi stury Tract Pruntegitis, acute
NC.	477.9 461.9	8 für Bis, alleegir, cause arapec. Sinanitis, at affe, 1905 Depart respirators infection scale. MOS
	465.8	Upper respiratory infection, scote, MCS
berders	Digestive 568.80	• System
tions	962.18 962.11	Constiguation, a sepac. Dissertinglocks of claims Disserting its of colon, NCS
ations, net	525,58	Cartrida, proper, with terminal
time	528.81 528.81	Guiddis, empec win ternershape Guidowse file, numbfectious, ullepec Guidowsphingeal reflex, no woogling its 8 erzenholds, \$105
	#5.6 564.1	Serpréside, \$05
	57IL1	Initial is bowd systems Melong
	Geritaan	rinary System
	392.9	stem Diseases Calcular, orimany amper. Cystitis, acute
	398.7	
	593.9 598.0	Bornal imunficiones, neutro Uninary tract infection, unspecifyywia
	Hale Gent	
	907.84 302.72	tal Organ Diesews Impôteers, organic Impoteers positions sal destanction
_	901.9 257.2	Impotence constrone sal dysfunction Products, IRCS Twiticaler hypotenction
, py		
derz	Resent Blue 611.72	and the state of t
••••	Formale Go	neltal Capar Skogan
	616.0 622.18	Cervicifia Displacia cervia propec.
in .	625.9 616.10	Displacia, cervia, propec. Přěki: ppin, saspec řierale disease Vaglařia/sek til, propec.
	Dita stora	of Monataustian
	525.0 527.9	American
	626.2 625.3	Meconami disorderi, umper. Memirustos, econolesi triquert Memirustos constitui
	626.6	Menstruction painful Metrophogia
	Pregnan	cy, Childhirth Benerhage in prep, umper.
	V24.2	Benertuge in greg , umpec. Postpartuft following, colorine Pregnantistate, inddiretal Prednantistate, inddiretal Prednantistate, independing Presidal case, normal, interpregnancy Presidal case, normal, interpregnancy
	V02.2 V02.8	Predstati care normal, first predstatoj
	W21	Principal case normal, interpregnancy
	706.5	Kataeous Tisse Asso
urapec.	702.0 602.8	Acti nichemionin Cellulit kintowu, umpwc
	9,598 8,598	Cells lit is interess, unspec Contact demostris, MCE Ecoma, utopic demostris
	702.0	
	708.9 696.3	Days to messe & Other stan disease, unspec.
MC.	695.3	Products, other Bospons
	706.2 702.19	Sebacross cyst Sebarrteic Mentosis, NCS
	707.9 708.8	Ulos; sián, checeic, anspec. Urácseis, esspec.
HIV Testing	Codes	
inv resting	codes	

CPT codes

00.402

99403

HIV Testing and Counseling Visit

Detailed

Comprehensive Laboratory
HIV 1 & 2 rapid test | 86703-92

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remarkat (Jaffard)

179.2 Feeding publies, sewborn

190.09 Abdorming jan jumper.

190.00 Abdorming jan jumper.

190.00 Abdorming jan jumper.

190.01 Abdorming jan jumper.

190.01 Abdorming jan jumper.

190.02 Abdorming jan jumper.

190.03 Cheel jan jumper.

190.03 Cheel jan jumper.

190.04 Sandard jan jumper.

190.05 Sandard jan jumper.
                              Injuries & Adverse Effects
I filosofoni, Sprains & Strains
                         0419 Sprainhtrain: Inserting unspec.
0479 Sprainhtrain: sect. propec.
0479 Sprainhtrain: sect. propec.
042.01 Sprainhtrain: shootle stopper arm, sespec.
042.01 Sprainhtrain: wrist, unspec.
                         Other Trauma, Advence il flects
919.8 Abmains, umper.
92.69 Contrator, uniper.
                         Supplemental Classification
VI2.33 Confirm norm Pap after initial atm
VI2.501 Confirm norm Pap after initial atm
VI2.502 Confirmation, chall
VI3.50 Confirmaţinin, charle (duple tagre, etc.)
VI3.50 Paper initial charles, some qual
VI0.50 Reports, initialization deletine, ampec.
VI0.50 Reports, initialization deletine, ampec.
                                                                                                                                              appose, mware in declare, unique
Gymeological ware
times sization, combinative, other
imme sization, influenza
                                                                                                                                              Mell adult dwd:
Mell child ched:
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Muscaloskeletal & Connective Tissue General
716.98 Arthropaths, uniper.
729.1 Rhardens dis
715.90 Carboal throsis, uniper.
727.00 Carboal throsis, uniper.
727.90 Rheumateld arthritis
727.90 Specific Terrusyon St.,

Perinatal (Infant) 779.2 Feeding publish, sewborn

Back to Example 1

A female high school student shows up at her primary care physician's office concerned about having recently had unprotected sex with a number of partners and requests to be tested for HIV.



Example 1: Young woman seeking HIV test

- -test is performed
- -result is negative

HIV Testing Codes							
	ICD-9 codes CPT codes						
		HIV.	Testing and Counseling	g Visit			
<u>V65.44</u>	HIV counseling		Minimal	99401			
V08	Asymptomatic HIV	X	Expanded	99402			
042	Symptomatic HIV		Detailed	99403			
			Comprehensive	99404			
		Labo	oratory				
		X	HV 1 & 2 rapid test	86703-92			



HIV Testing Codes							
ICD-9 codes CPT codes							
		HIV.	Testing and Counseling	g Visit			
V65.44	HIV counseling		Minimal	99401			
∨ 08	Asymptomatic HIV	X	Expanded	99402			
042	Symptomatic HIV		Detailed	99403			
			Comprehensive	99404			
		Labo	oratory				
		X	HV1&2 rapid test	86703-92			

In Fee-for-Service Medicaid Codes, this is a 1695 HIV Testing Visit.



Example 1: Young woman seeking HIV test

- -test is performed
- -result is **positive**

HIV Testing Codes								
	ICD-9 codes		CPT codes					
		HIV.	Testing and Counseling	y Visit				
V65.44	HIV counseling		Minimal	99401				
V08	Asymptomatic HIV		Expanded	99402				
042	Symptomatic HIV	X	Detailed	99403				
			Comprehensive	99404				
		Labo	ratory					
		X	HV 1 & 2 rapid test	86703-92				



HIV Testing Codes								
	ICD-9 codes CPT codes							
		HIV.	Testing and Counseling	g Visit				
V65.44	HIV counseling		Minimal	99401				
V08	Asymptomatic HIV		Expanded	99402				
042	Symptomatic HIV	X	Detailed	99403				
			Comprehensive	99404				
		Labo	oratory					
		X	HV 1 & 2 rapid test	86703-92				

In Fee-for-Service Medicaid Codes, this is a 1695 HIV Testing Visit AND an 1802 HIV-positive Counseling Visit.



Example 1: Young woman seeking HIV test

- -counseling is given
- -she decides she is not ready to test after all

HIV Testing Codes							
	ICD-9 codes CPT codes						
		HIV	Testing and Counseling	g Visit			
V65.44	HIV counseling		Minimal	99401			
V08	Asymptomatic HIV	X	Expanded	99402			
042	Symptomatic HIV		Detailed	99403			
			Comprehensive	99404			
		Lab	oratory				
			HIV 1 & 2 rapid test	86703-92			



HIV Testing Codes							
	ICD-9 codes CPT codes						
		HIV.	Testing and Counseling	y Visit			
V65.44	HIV counseling		Minimal	99401			
V08	Asymptomatic HIV	X	Expanded	99402			
042	Symptomatic HIV		Detailed	99403			
			Comprehensive	99404			
Laboratory							
			HV 1 & 2 rapid test	86703-92			

In Fee-for-Service Medicaid Codes, this is a 3109 HIV Pre-test Counseling w/o testing Visit.



Summary

- The HIV Primary Care Medicaid Program (FFS Medicaid) covers 5 types of HIV visits, 3 have to do with testing
 → certain visits can be billed same day
- Managed Care Organizations and commercial (private) plans have an entirely separate set of codes to use but similarly, will allow for same day billing of these visits

Questions?



