HIV TESTING
It’s Routine!

ROUTINE HIV TESTING RECOMMENDATIONS

HIV testing is routine and reimbursable. HIV screening has a grade “A” rating from the U.S. Preventive Services Task Force (USPSTF).

Patient Protection and Affordable Care Act (PPACA) requires that qualified health plans provide at a minimum coverage without cost-sharing for preventive services rated A or B by USPSTF.

Listed are ICD-10 codes and CPT codes that can be used to evaluate the needs and objectives of the healthcare setting, and to bill for HIV screening.

**ICD-10-CM DIAGNOSIS CODES CHART**
[HTTPS://ICDCODELOOKUP.COM](https://icdcodelookup.com)

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<td>ICD-10 CODES</td>
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<td>B20</td>
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- Offer routine HIV Testing to all patients age 13–64 at their annual visit regardless of risk factors
- Train staff on billing and coding
- Make adequate time for staff to address billing and coding issues
- Seek reimbursement by billing Medicaid, Medicare, or other third-party payers for HIV/AIDS testing services
- Assess current billing and reimbursement practices, infrastructure for billing and reimbursement, status of health information technologies, and challenges and technical assistance needs
- If not already in place, use electronic health records (EHR) to maximize health information technology capacity
- Monitor rate of reimbursement for each payer
- Update of information technology infrastructure (billing software)
### OFFICE SERVICE

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<tr>
<td>99385</td>
<td>Initial comprehensive preventive medicine service evaluation and management 18–39 years of age (new patient)</td>
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<tr>
<td>99386</td>
<td>Initial comprehensive preventive medicine service evaluation and management 40–64 years of age (new patient)</td>
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<tr>
<td>99387</td>
<td>Initial comprehensive preventive medicine service evaluation and management 65 and older years of age (new patient)</td>
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<td>99211</td>
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<td>99215</td>
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### REFERENCES