

Coding for Bio-Rad Laboratories' BioPlex 2200 HIV Ag-Ab Assay

Bio-Rad Laboratories' BioPlex 2200 HIV Ag-Ab assay simultaneously detects and differentiates the individual analytes HIV-1 p24 antigen, HIV-1 (groups M & O) antibodies and HIV-2 antibodies in human serum or plasma using multiplex flow immunoassay to report an overall composite result (Ag-Ab) along with the three individual HIV results.

When testing for HIV-1 p24 antigen and HIV-1 and HIV-2 antibodies with an overall composite single result (Ag-Ab) the following CPT code is reported:

87389 Antibody; HIV-1 antigen(s), with HIV-1 and HIV-2 antibodies, single result

When the BioPlex 2200 HIV Ag-Ab assay is used to determine separate results for HIV-1 antibody, HIV-2 antibody or HIV-1 p24 antigen, the following CPT codes are utilized:

For HIV-1 Antibody: **86701 Antibody; HIV-1**

For HIV-2 Antibody: **86702 Antibody; HIV-2**

For HIV-1 p24 Antigen: **87390 Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semi-quantitative, multi-step method; HIV-1**

Medicare Coverage for HIV Screening

Medicare covers one annual voluntary HIV screening for individuals at increased risk for HIV infection and three screenings for pregnant Medicare beneficiaries: once during each term of a pregnancy. Details of this coverage policy may be found in Publication 100-03, National Coverage Determinations Manual (NCD), Sections 190.14 and 210.7 and Publication 100-04, Medicare Claims Processing Manual (CPM), Chapter 18, Section 130.

Medicare Coding for HIV Screening Tests

The following HCPCS code is reported when billing HIV screening for covered individuals using whole blood (finger stick or venous), serum, or plasma specimens:

G0432 Infectious agent antibody detection by enzyme immunoassay (EIA) technique, HIV-1 and/or HIV-2, screening

CodeMap® believes that G0432 is the correct code to use for the BioPlex 2200 HIV-1 p24 antigen and HIV-1 and HIV-2 antibodies overall single assay result based on the fact that it most closely describes the BioPlex 2200 HIV Ag-Ab overall test. Medicare coding guidance for HIV screening is currently under review by CMS and is expected to clarify the coding for such composite tests in the near future.

Summary of HIV Diagnostic and Screening Coding

Description		Screening	Diagnostic
HIV-1 p24 Ag and HIV-1 and HIV-2 Ab, single overall assay (Ag-Ab):	Medicare	G0432	87389
	Non-Medicare	87389	87389
HIV-1 Antibody:	Medicare	G0432	86701
	Non-Medicare	86701	86701
HIV-2 Antibody:	Medicare	G0432	86702
	Non-Medicare	86702	86702
HIV-1 p24 Antigen:	Medicare	Not covered	87390
	Non-Medicare	87390	87390

National Correct Coding Initiative Edits

A National Correct Initiative Coding (NCCI) edit prohibits billing 87390 on the same date of service as 87389. **However**, these edits may be bypassed by using a -59 modifier with the prohibited codes **as of July 1, 2015**. According to the NCCI: “If the result of testing described by CPT code 87389 is positive [reactive], a provider may use an NCCI-associated modifier to additionally report CPT code 87390 if such testing is medically reasonable and necessary.”

NCCI edits also prohibits billing 86701 or 86702 on the same date of service as 87389. **However**, these edits may be bypassed by using a -59 modifier with the prohibited codes.

Reimbursement for HIV Tests

Medicare Part B payment for HIV tests is based on the current Clinical Laboratory Fee Schedule. Medicare fees can be viewed on www.codemap.com/biorad. For other payers, please contact the payer.

If you have further questions, please contact your local Bio-Rad’s Account Executive. You may also contact the CodeMap® Reimbursement Support Service at: (847) 381-5465.