

WE ORDER THE TEST

Routine HIV Testing:
Information For Texas Health
Providers

WHAT PROVIDERS NEED TO KNOW

- Routine HIV testing is common practice in Texas.
- An estimated 18,000 Texans living with HIV are unaware of their status. The purpose of routine HIV testing is to identify individuals who do not know they are living with HIV and link them to HIV medical care and support.
- Texas does not require separate written consent for HIV testing (see Texas Health and Safety Code Sections [81.105](#) and [81.106](#)).
- Language matters. An example of opt-out language: "We will include an HIV test in your blood work today. What questions do you have?"
- Patients have the right to refuse to test. If a patient declines to test, ask why, and explore barriers. It may surprise you that the patient tells you they have HIV.
- All patients testing positive for HIV should be notified face-to-face and immediately linked to medical care.
- To find HIV/STD service providers in Texas, visit dshs.texas.gov/hivstd/services/.
- For CDC routine HIV screening recommendations, visit cdc.gov/hiv/testing/clinical/.
- For the U.S. Preventive Services Task Force recommendation for HIV screening, visit uspreventiveservicestaskforce.org/Page/Document/UpdateSummaryFinal/human-immunodeficiency-virus-hiv-infection-screening.
- For HIV prevention services billing coding guidelines, visit nastad.org/resource/billing-coding-guide-hiv-prevention.
- For U.S. Department of Health and Human Services HIV/AIDS treatment guidelines, visit aidsinfo.nih.gov/guidelines.
- For more information on routine HIV testing in Texas, visit dshs.texas.gov/hivstd/routine-screening.



TEXAS
Health and Human
Services

Texas Department of State
Health Services

For HIV/STI questions, call
800-CDC-INFO (English/Espanol)
888-232-6348 (TTY).

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MEDICAL CODING

Medicare HCPCS Codes

Code	Description
G0475	HIV antigen/antibody, combination assay, screening
G0432	Infectious agent antigen detection by enzyme immunoassay (EIA) technique, qualitative or semi-quantitative, multiple- step method, HIV-1 or HIV-2, screening
G0433	Infectious agent antibody detection by enzyme-linked immunosorbent assay (ELISA) technique, HIV-1 and/or HIV-2, screening
G0435	Infectious agent antigen detection by rapid antibody test of oral mucosa transudate, HIV-1 or HIV-2, screening
Use ICD-10 Code Z11.4 with G-codes	

CPT Codes

Code	Rapid Test Modifier	Description
87389		4th Generation Combo HIV Ab/Ag test
86701	92	Antibody; HIV-1
86703	92	Antibody; HIV-1, HIV-2 (Supplemental assay)
87534		HIV-1: Nucleic Acid (DNA or RNA), direct probe (viral load)
87535		HIV-1 RNA assay (QUALITATIVE); reverse transcriptase
87536		HIV-1: (DNA or RNA); reverse transcriptase (viral load)
87390	92	Infectious agent antigen detection by enzyme immunoassay technique, qualitative or semi quantitative, multiple-step; HIV-1
36415		Collection of venous blood by venipuncture
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 reevaluation and management 18–39 years of age (established patient)
99396		Periodic comprehensive preventive medicine reevaluation 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.
The modifier 92 is added to the CPT code to identify point-of-care test technology.		

ICD-10-CM Diagnosis Codes

Code	Description
Z00.00	Encounter for general adult medical examination without abnormal findings
Z11.4	Encounter for screening for HIV
Z72.89	Other problems related to lifestyle
Z71.7	HIV counseling
Z21	Asymptomatic HIV infection status. Code first HIV disease complicating pregnancy, childbirth and the puerperium, if applicable (O98.7-)
B20	HIV disease. Code first HIV disease complicating pregnancy, childbirth and the puerperium, if applicable (O98.7-). Use additional code(s) to identify all manifestations of HIV infection
Z34.00	Encounter for supervision of normal first pregnancy
Z34.8	Encounter for supervision of other normal pregnancy
009	Supervision of high-risk pregnancy (requires 4th and 5th digits). Total of 18 high-risk pregnancy codes, most with the 4th and 5th digits

ROUTINE HIV TESTING

It is now the standard of care to provide routine voluntary HIV testing to all patients ages 13 to 64 in all medical settings. Follow the steps below:

- Inform patients that you provide routine HIV testing to all patients unless they decline.
- For negative results, treat as with negative lab results unless the patient needs further testing, a referral for Pre-Exposure Prophylaxis (PrEP) due to ongoing risk, or both.
- For positive results, explain the result face-to-face and immediately link your patient to ongoing HIV medical care.
- Report all acute HIV cases to your local health department within one working day, and all non-acute HIV cases to your local health department within one week of confirmatory test results.
- Antiretroviral therapy (ART) is recommended for all HIV-infected persons to reduce the risk of disease progression, regardless of CD4 cell count. ART is also recommended for HIV-infected persons to prevent further transmission of HIV.

MYTHS AND BARRIERS

I do not know how to talk to people about HIV, or do HIV counseling.

HIV is a young person's disease.

I will get inundated with HIV-positive patients.

I do not have time for routine testing.

I can tell which patients are at risk for HIV.

My patients must sign a separate consent form for HIV testing.

In that case, "routine" testing is "secret" testing.

My patients will refuse the test.

FACTS AND FACILITATORS

Doctors often diagnose serious, chronic diseases. The same skills apply to diagnosing HIV. An HIV specialist can provide additional support and planning.

Nearly one in five HIV diagnoses in Texas are among people age 45 and older.

Most practices will have a small number of diagnoses.

Order HIV testing with other tests.

Offering testing only to patients with reported risk factors misses many people who have HIV.

Texas does not require separate written consent for HIV testing.

Routine testing is not secret; it is voluntary. You should inform patients, verbally or in writing, of tests done unless they opt out.

Explain to your patients that you test everyone, why you recommend the test, and offer it again.