



# HIV/STI PREVENTION RESOURCES

## A BILLING CODE REFERENCE

June 2025

Descriptions provided for *ICD-10-CM* and *CPT*® codes are taken from the American Medical Association *ICD-10-CM 2025: The Complete Official Codebook* and the American Medical Association *CPT 2025: Professional Edition*. This information may be a resource when providing HIV and other STI prevention and diagnostic services, and when submitting insurance claims\* for reimbursement for these important services.

Content provided in this resource is for informational purposes only and does not guarantee that codes will be appropriate or that coverage and reimbursement will result.

Please note that codes can change and may differ from those found in this resource. This list of codes is not exhaustive. Providers should consult with their payers for all relevant coverage, coding, and reimbursement requirements. It is the full responsibility of the provider to select proper codes and ensure the accuracy of all claims used in seeking reimbursement. This resource is not intended to be legal advice or a substitute for a provider's independent professional judgment.

\*The *ICD-10-CM* and *CPT* codes and descriptions listed could be reported as part of filing a claim with a patient's insurance company or government payer.

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HIV/STI PREVENTION

Description of Services	ICD-10-CM Code
Encounter for HIV PrEP <sup>1</sup>	Z29.81
Contact with and (suspected) exposure to infections with a predominantly sexual mode of transmission <sup>1</sup>	Z20.2
Contact with and (suspected) exposure to viral hepatitis <sup>1</sup>	Z20.5
Contact with and (suspected) exposure to HIV <sup>1</sup>	Z20.6
Contact with and (suspected) exposure to other viral communicable diseases <sup>1</sup>	Z20.828
Contact with and (suspected) exposure to other communicable diseases <sup>1</sup>	Z20.89
Contact with and (suspected) exposure to unspecified communicable disease <sup>1</sup>	Z20.9
Encounter for therapeutic drug-level monitoring <sup>1</sup>	Z51.81
High-risk heterosexual behavior <sup>1</sup>	Z72.51
High-risk homosexual behavior <sup>1</sup>	Z72.52
High-risk bisexual behavior <sup>1</sup>	Z72.53
Used for long-term (current) drug therapy <sup>1</sup>	Z79.899
Personal history of other specified conditions <sup>1</sup>	Z87.898

EVALUATION AND MANAGEMENT

Description of Services	CPT Code
Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular <sup>2</sup>	96372
Injection of PrEP drug for HIV prevention under skin or into muscle <sup>3</sup>	G0012
If the patient is being seen by other qualified nonphysician healthcare professional staff, then the following may be billed: Self-management education and training face to face, 1 patient <sup>1,2</sup>	
– HIV counseling codes should be linked to ICD-10-CM Z71.7	98960
– Pre-exposure counseling codes should be linked to ICD-10-CM Z20.2	G0013
– STI counseling codes should be linked to ICD-10-CM Z11.3 or Z20.2	98960
Established Patient—online digital assessment and management service (document and bill based on time) <sup>2</sup>	98970-98972
Established Patient—telephone assessment and management service (document and bill based on time) <sup>2</sup>	98966-98968
Office or other outpatient visit	
New Patient—evaluation and management, which requires a medically appropriate history and/or examination and medical decision-making (document and bill based on time and/or complexity) <sup>2</sup>	99202-99205
New Patient—synchronous audio-video visit for evaluation and management, which requires a medically appropriate history and/or examination and medical decision-making (document and bill based on time and/or complexity) <sup>2</sup>	98000-98003
Established Patient—evaluation and management, which may not require the presence of a physician or other qualified healthcare professional <sup>2</sup>	99211

EVALUATION AND MANAGEMENT (cont'd)

Description of Services	CPT Code
Established Patient—brief communication technology-based service (eg, virtual check-in) by a physician or qualified healthcare professional who can report evaluation and management services, provided to an established patient, not originating from a related evaluation and management service provided within the previous 7 days nor leading to an evaluation and management service or procedure with the next 24 hours or soonest available appointment. Do not report services of less than 5 minutes of medical discussion <sup>2</sup>	98016
Established Patient—evaluation and management, which requires a medically appropriate history and/or examination and a specific level of medical decision-making and/or specific total time documented <sup>2</sup>	99212-99215
Established Patient—synchronous audio-only telehealth evaluation and management, which requires a medically appropriate history and/or examination and medical decision-making (document and bill based on time and/or complexity) <sup>2</sup>	98012-98015
Established Patient—synchronous audio-video for evaluation and management services <sup>2</sup>	98004-98007
Emergency department services	
Emergency department visit for the evaluation and management of a patient, which requires a medically appropriate history and/or examination (document and bill based on level of medical decision-making) <sup>2*</sup>	99282-99285
Organ- or disease-oriented panels	
Lipid panel <sup>2,4</sup>	80061
Renal function panel <sup>2</sup>	80069

\*Note: Time is not a descriptive component for documenting and billing emergency department levels of E/M services.

PREVENTIVE MEDICINE SERVICES

Description of Services	CPT Code
<b>New Patient—initial, comprehensive, preventive medicine</b> evaluation and management of an individual, including an age- and gender-appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures (document and bill based on patient age) <sup>2</sup> Codes for infant and early childhood ages not provided	<b>99384-99387</b>
<b>Established Patient—periodic, comprehensive, preventive medicine</b> reevaluation and management of an individual, including an age- and gender-appropriate history, examination, counseling/anticipatory guidance/risk factor reduction interventions, and the ordering of laboratory/diagnostic procedures (document and bill based on patient age) <sup>2</sup>	<b>99394-99397</b>
<b>New or Established Patient—preventive medicine counseling</b> and/or risk factor reduction intervention(s) provided to an individual (document and bill based on visit time) <sup>2</sup> Risk factor reduction services are used for persons without a specific illness for which the counseling might otherwise be used as part of treatment. These codes cover services such as counseling for smoke cessation, substance abuse, obesity, dental health, and lab results	<b>99401-99404</b>

HIV COUNSELING

Description of Services	ICD-10-CM Code
Counseling related to patient’s sexual behavior and orientation <sup>1†</sup>	<b>Z70.1</b>
Counseling related to combined concerns regarding sexual attitude, behavior, and orientation <sup>1†</sup>	<b>Z70.3</b>
Other sex counseling <sup>1†</sup>	<b>Z70.8</b>

HIV COUNSELING (cont’d)

Description of Services	ICD-10-CM/ HCPCS Code*
Sex counseling, unspecified <sup>1†</sup>	<b>Z70.9</b>
HIV counseling <sup>1†</sup>	<b>Z71.7</b>
Individual counseling for PrEP by physician or qualified healthcare professional to prevent HIV, includes: HIV risk assessment (initial or continued assessment of risk), HIV risk reduction, and medication adherence <sup>3</sup>	<b>G0011</b>
Individual counseling for PrEP by clinical staff to prevent HIV, includes: HIV risk assessment (initial or continued assessment of risk), HIV risk reduction, and medication adherence <sup>3</sup>	<b>G0013</b>

STI SCREENING TESTS

Description of Services	ICD-10-CM Code
<b>Reason for encounter (diagnosis)</b>	
Encounter for preprocedural laboratory examination <sup>1</sup>	<b>Z01.812</b>
Encounter for screening for infections with a predominantly sexual mode of transmission <sup>1</sup>	<b>Z11.3</b>
Encounter for screening for HIV <sup>1</sup>	<b>Z11.4</b>
Encounter for screening for other viral diseases <sup>1</sup>	<b>Z11.59</b>
Encounter for screening for other infectious and parasitic diseases <sup>1</sup>	<b>Z11.8</b>

\*HCPCS codes were accessed through CMS.  
†This code may be used for reason of encounter.

HIV SCREENING TESTS

Description of Services	CPT/HCPCS Code
Antibody screening tests	
HIV-1 <sup>2</sup>	86701
HIV-1 and HIV-2, single result <sup>2</sup>	86703
Oral HIV-1/HIV-2 screen <sup>4</sup>	G0435
HTLV or HIV antibody, confirmatory test (eg, Western blot) <sup>2</sup>	86689
Nucleic acid (DNA or RNA) screening tests	
HIV-1, direct probe technique <sup>2</sup>	87534
HIV-1, amplified probe technique, includes reverse transcription when performed <sup>2</sup>	87535
HIV-1, quantification, includes reverse transcription when performed <sup>2</sup>	87536
Immunoassay screening tests	
HIV-1 antigen(s), with HIV-1 and HIV-2 antibodies, single result; qualitative or semiquantitative <sup>2</sup>	87389
EIA HIV-1/HIV-2 screen <sup>4</sup>	G0432
HIV-1; qualitative or semiquantitative <sup>2</sup>	87390
ELISA HIV-1/HIV-2 screen <sup>4</sup>	G0433
HIV-1 antigen(s), with HIV-1 and HIV-2 antibodies; direct optical observation <sup>2</sup>	87806
HIV combination assay <sup>4</sup>	G0475

ADDITIONAL TESTS

Description of Services	CPT Code
Chlamydia screening tests	
Culture, chlamydia, any source <sup>2</sup>	87110
Chlamydia; antibody <sup>2</sup>	86631
Chlamydia, IgM; antibody <sup>2</sup>	86632
<i>Chlamydia trachomatis</i> ; detection by immunofluorescent technique <sup>2</sup>	87270
<i>Chlamydia trachomatis</i> ; detection by immunoassay technique, qualitative or semiquantitative <sup>2</sup>	87320
<i>Chlamydia trachomatis</i> ; detection by nucleic acid (DNA or RNA), direct probe technique <sup>2</sup>	87490
<i>Chlamydia trachomatis</i> ; detection by nucleic acid (DNA or RNA), amplified probe technique <sup>2</sup>	87491
<i>Chlamydia trachomatis</i> ; quantification <sup>2</sup>	87492
<i>Chlamydia trachomatis</i> ; detection by immunoassay with direct optical observation <sup>2</sup>	87810

ADDITIONAL TESTS (cont'd)

Description of Services	CPT/HCPCS Code
Herpes screening tests	
Herpes simplex, type 1; antibody <sup>2</sup>	86695
Herpes simplex, type 2; antibody <sup>2</sup>	86696
Hepatitis screening tests	
Hepatitis A antibody <sup>2</sup>	86708
Hepatitis B surface antigen; detection by immunoassay technique, qualitative or semiquantitative <sup>2</sup>	87340
Hepatitis B surface antigen neutralization; detection by immunoassay technique, qualitative or semiquantitative <sup>2</sup>	87341
Hepatitis B surface antibody <sup>2</sup>	86706
Hepatitis B high-risk individual <sup>4</sup>	G0499
Hepatitis C antibody; link to <b>ICD-10-CM Z11.3</b> or <b>Z20.2</b> when the provider is screening for hepatitis C as part of an STI screening process <sup>1,2</sup>	86803
Hepatitis C; detection by nucleic acid (DNA or RNA), quantification, includes reverse transcription when performed <sup>2</sup>	87522

ADDITIONAL TESTS (cont'd)

Description of Services	CPT Code
<i>Neisseria gonorrhoeae</i> screening tests	
<i>Neisseria gonorrhoeae</i> ; detection by nucleic acid (DNA or RNA), direct probe technique <sup>2</sup>	87590
<i>Neisseria gonorrhoeae</i> ; detection by nucleic acid (DNA or RNA), amplified probe technique <sup>2</sup>	87591
<i>Neisseria gonorrhoeae</i> ; detection by nucleic acid (DNA or RNA), quantification <sup>2</sup>	87592
<i>Neisseria gonorrhoeae</i> ; detection by immunoassay with direct optical observation <sup>2</sup>	87850
Syphilis screening tests	
Syphilis test, nontreponemal antibody; qualitative <sup>2</sup>	86592
Syphilis test, nontreponemal antibody; quantitative <sup>2</sup>	86593
<i>Treponema pallidum</i> ; antibody; link to <b>ICD-10-CM Z11.3</b> or <b>Z20.2</b> when the provider is screening for syphilis as part of an STI screening process <sup>1,2</sup>	86780

HIV PrEP MEDICATION CODES<sup>4</sup>

Drug codes such as NDCs and HCPCS codes may be relevant when filing claims. When using a Miscellaneous PrEP HCPCS code, an *ICD-10* diagnosis code indicating an encounter related to PrEP may be needed.

POS codes identify the location where a service was performed. POS codes may require additional modifiers, such as identification of expected and unexpected off-campus, provider-based departments in Medicare.

Generic Name	NDC	HCPCS Code	HCPCS Description	POS Code	POS Code Description
Cabotegravir NA	49702-0264-23	J0739	Injection, cabotegravir, long-acting, 1 mg	11	Office
				17	Walk-in retail health clinic
				19	Off-campus outpatient hospital
				22	On-campus outpatient hospital
				49	Independent clinic
				71	Public health clinic
				72	Rural health clinic
Cabotegravir NA	49702-0280-63	J0739	Injection, cabotegravir, long-acting, 1 mg	11	Office
				17	Walk-in retail health clinic
				19	Off-campus outpatient hospital
				22	On-campus outpatient hospital
				49	Independent clinic
				71	Public health clinic
				72	Rural health clinic
Emtricitabine and tenofovir alafenamide 200 mg/1, 25 mg/1	61958-2002-01	J0751	Tablet, emtricitabine 200 mg and tenofovir alafenamide 25 mg, oral per dose  (30 tablets in 1 bottle)	01	Pharmacy
				11	Office
Emtricitabine and tenofovir disoproxil fumarate 200 mg/300 mg	61958-0701-01	J0750	Tablet, emtricitabine 200 mg and tenofovir disoproxil fumarate 300 mg, oral, per dose	01	Pharmacy
				11	Office

HIV PrEP Medication Codes<sup>4</sup> (cont'd)

Generic Name	NDC	HCPCS Code	HCPCS Description	POS Code	POS Code Description
Lenacapavir for PrEP	61958-3401-01 (tablets) 61958-3402-01 (injection kit)	J0799	Tablet/injection, other therapeutic substance, not otherwise classified. This code should be used until a permanent J code is assigned for lenacapavir for PrEP	11	Office
				17	Walk-in retail health clinic
				19	Off-campus outpatient hospital
				22	On-campus outpatient hospital
				49	Independent clinic
				71	Public health clinic
PrEP Injection	N/A	G0012 <sup>†</sup>	Injection of pre-exposure prophylaxis (prep) drug for HIV prevention, under skin or into muscle	72	Rural health clinic
				11	Office
				17	Walk-in retail health clinic
				19	Off-campus outpatient hospital
				22	On-campus outpatient hospital
				49	Independent clinic
PrEP Miscellaneous	N/A	J0799	Injection, other therapeutic substance, not otherwise classified	71	Public health clinic
				72	Rural health clinic
				11	Office
				17	Walk-in retail health clinic
				19	Off-campus outpatient hospital
				22	On-campus outpatient hospital

\*Can be used for Medicare Part B.  
<sup>†</sup>HCPCS code accessed through CMS.



CMS=Centers for Medicare & Medicaid Services; CPT=Current Procedural Terminology; DNA=deoxyribonucleic acid; EIA=enzyme immunoassay; ELISA=enzyme-linked immunosorbent assay; HCPCS=Healthcare Common Procedure Coding System; HTLV=human T-lymphotropic virus; ICD-10-CM=International Classification of Diseases, Tenth Revision, Clinical Modification; IgM=immunoglobulin M; NA=sodium; NDC=National Drug Code; POS=Place of Service; PrEP=Pre-Exposure Prophylaxis; RNA=ribonucleic acid; STI=sexually transmitted infection.

**References:** **1.** Centers for Medicare & Medicaid Services. *ICD-10-CM* tabular list of diseases and injuries. Accessed May 1, 2025. <https://www.cms.gov/files/zip/2025-code-tables-tabular-and-index.zip> **2.** American Academy of Professional Coders. *CPT®* code lookup. Codify. Accessed June 14, 2025. <https://www.aapc.com/codes/cpt-codes-range/> **3.** MLN Matters. National Coverage Determination 210.15: pre-exposure prophylaxis (PrEP) for HIV prevention. Centers for Medicare & Medicaid Services. Published September 30, 2024. Accessed February 4, 2025. <https://www.cms.gov/files/document/mm13843-national-coverage-determination-21015-pre-exposure-prophylaxis-prep-hiv-prevention.pdf> **4.** Data on file, Gilead Sciences.



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