HIV CODING CONCEPTS

HIV infection/illness is coded as a diagnosis only for confirmed cases.

Confirmation of HIV infection/illness does not require documentation of a positive blood test or culture. The physician's diagnostic statement that the patient is HIV positive or has an HIV-related illness is sufficient.

The following table compares ICD-9 coding of HIV with ICD-10. You can see that with ICD-10, there are some instances when additional diagnosis codes are necessary. In some cases, if an additional code is not used, the claim for services rendered could be denied for payment.

HIV Codes: ICD-10 Comparison			
ICD-9	Description	ICD-10	Description
V70.0	Routine general medical examination at a health care facility	Z00.00 Z00.01	Encounter for general adult medical without abnormal findings Encounter for general adult medical examination abnormal findings* *Use additional code to identify abnormal findings (R70-R94)
V73.89	Special screening examination for other specified viral diseases (HIV/AIDS)	Z11.4	Encounter for screening for human immunodeficiency virus (HIV)
V65.44	HIV counseling	Z71.7	HIV counseling
V69.2	High-risk sexual behavior	Z72.51 Z72.52 Z72.53	High-risk heterosexual behavior High-risk homosexual behavior High-risk bisexual behavior
V69.8	Other problems related to lifestyle	Z72.89	Other problems related to lifestyle (self- damaging behavior)
042	HIV disease	B20	*Code first HIV disease complicating pregnancy, childbirth and the puerperium, if applicable (098.7-) *Use additional code(s) to identify all manifestations of HIV infection