190.33 - Hepatitis Panel/Acute Hepatitis Panel

Description

This panel consists of the following tests:

Hepatitis A antibody (HAAb), IgM antibody;
Hepatitis B core antibody (HBcAb), IgM antibody;
Hepatitis B surface antigen (HBsAg); and
Hepatitis C antibody.

Hepatitis is an inflammation of the liver resulting from viruses, drugs, toxins, and other etiologies. Viral hepatitis can be due to one of at least five different viruses, designated hepatitis A, B, C, and E. Most cases are caused by hepatitis A virus (HAV), hepatitis B virus (HBV), or hepatitis C virus (HCV).

HAV is the most common cause of hepatitis in children and adolescents in the United States. Prior exposure is indicated by a positive IgG anti-HAV. Acute HAV is diagnosed by IgM anti-HAV, which typically appears within four weeks of exposure, and which disappears within three months of its appearance. IgG anti-HAV is similar in the timing of its appearance, but it persists indefinitely. Its detection indicates prior effective immunization or recovery from infection. Although HAV is spread most commonly by fecal-oral exposure, standard immune globulin may be effective as a prophylaxis.

HBV produces three separate antigens (surface, core, and e (envelope) antigens) when it infects the liver, although only hepatitis B surface antigen (HBsAg) is included as part of this panel. Following exposure, the body normally responds by producing antibodies to each of these antigens; one of which is included in this panel: hepatitis B surface antibody (HBsAb)-IgM antibody. HBsAg is the earlier marker, appearing in serum four to eight weeks after exposure, and typically disappearing within six months after its appearance. If HBsAg remains detectable for greater than six months, this indicates chronic HBV infection. HBcAb, in the form of both IgG and IgM antibodies, are next to appear in serum, typically becoming detectable two to three months following exposure. The IgM antibody gradually declines or disappears entirely one to two years following exposure, but the IgG usually remains detectable for life. Because HBsAg is present for a relatively short period and usually displays a low titer, a negative result does not exclude an HBV diagnosis. HBcAb, on the other hand, rises to a much higher titer and remains elevated for a longer period of time, but a positive result is not diagnostic of acute disease, since it may be the result of a prior infection. The last marker to appear in the course of a typical infection is HBsAb, which appears in serum four to six months following exposure to infected blood or body fluids; in the U.S., sexual transmission accounts for 30% to 60% of new cases of HBV infection.

The diagnosis of acute HBV infection is best established by documentation of positive IgM antibody against the core antigen (HBcAb-IgM) and by identification of a positive hepatitis B surface antigen (HBsAg). The diagnosis of chronic HBV infection is established primarily by identifying a positive hepatitis B surface antigen (HBsAg) and demonstrating positive IgG antibody directed against the core antigen (HBcAb-IgG). Additional tests such as hepatitis B e antigen

(HBeAg) and hepatitis B e antibody (HBeAb), the envelope antigen and antibody, are not included in the hepatitis panel, but may be of importance in assessing the infectivity of patients with HBV. Following completion of a HBV vaccination series, HBsAb alone may be used monthly for up to six months, or until a positive result is obtained, to verify an adequate antibody response.

HCV is the most common cause of post-transfusion hepatitis; overall HCV is responsible for 15% to 20% of all cases of acute hepatitis, and is the most common cause of chronic liver disease. The test most commonly used to identify HCV measures HCV antibodies, which appear in blood two to four months after infection. False positive HCV results can occur. For example, a patient with a recent yeast infection may produce a false positive anti-HCV result. For this reason, at present positive results usually are confirmed by a more specific technique. Like HBV, HCV is spread exclusively through exposure to infected blood or body fluids.

This panel of tests is used for differential diagnosis in a patient with symptoms of liver disease or injury. When the time of exposure or the stage of the disease is not known, a patient with continued symptoms of liver disease despite a completely negative hepatitis panel may need a repeat panel approximately two weeks to two months later to exclude the possibility of hepatitis. Once a diagnosis is established, specific tests can be used to monitor the course of the disease.

HCPCS Codes (Alphanumeric, CPT© AMA)

Code	Description
80074	Acute Hepatitis Panel

ICD-10-CM Codes Covered by Medicare Program

The ICD-10-CM codes in the table below can be viewed on CMS' website as part of Downloads: Lab Code List, at
http://www.cms.gov/Medicare/Coverage/CoverageGenInfo/LabNCDsICD10.html

Code	Description
A92.5	Zika virus disease
B15.0	Hepatitis A with hepatic coma
B15.9	Hepatitis A without hepatic coma
B16.0	Acute hepatitis B with delta-agent with hepatic coma
B16.1	Acute hepatitis B with delta-agent without hepatic coma
B16.2	Acute hepatitis B without delta-agent with hepatic coma
B16.9	Acute hepatitis B without delta-agent and without hepatic coma
B17.0	Acute delta-(super) infection of hepatitis B carrier
B17.10	Acute hepatitis C without hepatic coma
B17.11	Acute hepatitis C with hepatic coma
B17.2	Acute hepatitis E
B17.8	Other specified acute viral hepatitis

Code	Description
B17.9	Acute viral hepatitis, unspecified
B18.0	Chronic viral hepatitis B with delta-agent
B18.1	Chronic viral hepatitis B without delta-agent
B18.2	Chronic viral hepatitis C
B18.8	Other chronic viral hepatitis
B18.9	Chronic viral hepatitis, unspecified
B19.0	Unspecified viral hepatitis with hepatic coma
B19.10	Unspecified viral hepatitis B without hepatic coma
B19.11	Unspecified viral hepatitis B with hepatic coma
B19.20	Unspecified viral hepatitis C without hepatic coma
B19.21	Unspecified viral hepatitis C with hepatic coma
B19.9	Unspecified viral hepatitis without hepatic coma
F11.11	Opioid abuse, in remission
F11.91	Opioid use, unspecified, in remission
F12.91	Cannabis use, unspecified, in remission
F12.93	Cannabis use, unspecified with withdrawal
F14.11	Cocaine abuse, in remission
F14.91	Cocaine use, unspecified, in remission
F15.11	Other stimulant abuse, in remission
F15.91	Other stimulant use, unspecified, in remission
G93.31	Postviral fatigue syndrome
G93.32	Myalgic encephalomyelitis/chronic fatigue syndrome
G93.39	Other post infection and related fatigue syndromes
I85.00	Esophageal varices without bleeding
I85.01	Esophageal varices with bleeding
I85.10	Secondary esophageal varices without bleeding
I85.11	Secondary esophageal varices with bleeding
K70.41	Alcoholic hepatic failure with coma
K71.0	Toxic liver disease with cholestasis
K71.10	Toxic liver disease with hepatic necrosis, without coma
K71.11	Toxic liver disease with hepatic necrosis, with coma
K71.2	Toxic liver disease with acute hepatitis
K71.3	Toxic liver disease with chronic persistent hepatitis
K71.4	Toxic liver disease with chronic lobular hepatitis

Code	Description
K71.50	Toxic liver disease with chronic active hepatitis without ascites
K71.51	Toxic liver disease with chronic active hepatitis with ascites
K71.6	Toxic liver disease with hepatitis, not elsewhere classified
K71.7	Toxic liver disease with fibrosis and cirrhosis of liver
K71.8	Toxic liver disease with other disorders of liver
K71.9	Toxic liver disease, unspecified
K72.00	Acute and subacute hepatic failure without coma
K72.01	Acute and subacute hepatic failure with coma
K72.10	Chronic hepatic failure without coma
K72.11	Chronic hepatic failure with coma
K72.90	Hepatic failure, unspecified without coma
K72.91	Hepatic failure, unspecified with coma
K74.00	Hepatic fibrosis, unspecified
K74.01	Hepatic fibrosis, early fibrosis
K74.02	Hepatic fibrosis, advanced fibrosis
K74.60	Unspecified cirrhosis of liver
K74.69	Other cirrhosis of liver
K75.0	Abscess of liver
K75.1	Phlebitis of portal vein
K75.2	Nonspecific reactive hepatitis
K75.3	Granulomatous hepatitis, not elsewhere classified
K75.81	Nonalcoholic steatohepatitis (NASH)
K75.89	Other specified inflammatory liver diseases
K75.9	Inflammatory liver disease, unspecified
K76.2	Central hemorrhagic necrosis of liver
K76.4	Peliosis hepatis
K76.6	Portal hypertension
K76.7	Hepatorenal syndrome
K76.81	Hepatopulmonary syndrome
K76.82	Hepatic encephalopathy
M04.1	Periodic fever syndromes
R10.0	Acute abdomen
R10.10	Upper abdominal pain, unspecified
R10.11	Right upper quadrant pain

Code	Description
R10.12	Left upper quadrant pain
R10.13	Epigastric pain
R10.20	Pelvic and perineal pain unspecified side
R10.21	Pelvic and perineal pain right side
R10.22	Pelvic and perineal pain left side
R10.23	Pelvic and perineal pain bilateral
R10.24	Suprapubic pain
R10.30	Lower abdominal pain, unspecified
R10.31	Right lower quadrant pain
R10.32	Left lower quadrant pain
R10.33	Periumbilical pain
R10.811	Right upper quadrant abdominal tenderness
R10.821	Right upper quadrant rebound abdominal tenderness
R10.83	Colic
R10.84	Generalized abdominal pain
***R10.85**	***Abdominal pain of multiple sites**
***R10.8A1**	***Right flank tenderness**
***R10.8A2**	***Left flank tenderness**
***R10.8A3**	***Suprapubic tenderness**
R10.9	Unspecified abdominal pain
***R10.A1**	***Flank pain, right side**
***R10.A2**	***Flank pain, left side**
***R10.A3**	***Flank pain, bilateral**
R11.0	Nausea
R11.10	Vomiting, unspecified
R11.11	Vomiting without nausea
R11.12	Projectile vomiting
R11.14	Bilious vomiting
R11.15	Cyclical vomiting syndrome unrelated to migraine
***R11.16**	***Cannabis hyperemesis syndrome**
R11.2	Nausea with vomiting, unspecified
R16.0	Hepatomegaly, not elsewhere classified
R16.2	Hepatomegaly with splenomegaly, not elsewhere classified
R17	Unspecified jaundice

Code	Description
R40.2410	Glasgow coma scale score 13-15, unspecified time
R40.2411	Glasgow coma scale score 13-15, in the field [EMT or ambulance]
R40.2412	Glasgow coma scale score 13-15, at arrival to emergency department
R40.2413	Glasgow coma scale score 13-15, at hospital admission
R40.2414	Glasgow coma scale score 13-15, 24 hours or more after hospital admission
R40.2420	Glasgow coma scale score 9-12, unspecified time
R40.2421	Glasgow coma scale score 9-12, in the field [EMT or ambulance]
R40.2422	Glasgow coma scale score 9-12, at arrival to emergency department
R40.2423	Glasgow coma scale score 9-12, at hospital admission
R40.2424	Glasgow coma scale score 9-12, 24 hours or more after hospital admission
R40.2430	Glasgow coma scale score 3-8, unspecified time
R40.2431	Glasgow coma scale score 3-8, in the field [EMT or ambulance]
R40.2432	Glasgow coma scale score 3-8, at arrival to emergency department
R40.2433	Glasgow coma scale score 3-8, at hospital admission
R40.2434	Glasgow coma scale score 3-8, 24 hours or more after hospital admission
R40.2440	Other coma, without documented Glasgow coma scale score, or with partial score reported, unspecified time
R40.2441	Other coma, without documented Glasgow coma scale score, or with partial score reported, in the field [EMT or ambulance]
R40.2442	Other coma, without documented Glasgow coma scale score, or with partial score reported, at arrival to emergency department
R40.2443	Other coma, without documented Glasgow coma scale score, or with partial score reported, at hospital admission
R40.2444	Other coma, without documented Glasgow coma scale score, or with partial score reported, 24 hours or more after hospital admission
R40.2A	Nontraumatic coma due to underlying condition
R53.0	Neoplastic (malignant) related fatigue
R53.1	Weakness
R53.2	Functional quadriplegia
R53.81	Other malaise
R53.82	Chronic fatigue, unspecified
R53.83	Other fatigue
R56.00	Simple febrile convulsions
R56.01	Complex febrile convulsions
R56.1	Post traumatic seizures
R62.0	Delayed milestone in childhood

Code	Description
R62.50	Unspecified lack of expected normal physiological development in childhood
R62.51	Failure to thrive (child)
R62.52	Short stature (child)
R62.59	Other lack of expected normal physiological development in childhood
R63.0	Anorexia
R63.1	Polydipsia
R63.2	Polyphagia
R63.30	Feeding difficulties, unspecified
R63.31	Pediatric feeding disorder, acute
R63.32	Pediatric feeding disorder, chronic
R63.39	Other feeding difficulties
R63.4	Abnormal weight loss
R63.5	Abnormal weight gain
R63.6	Underweight
R74.01	Elevation of levels of liver transaminase levels
R74.02	Elevation of levels of lactic acid dehydrogenase [LDH]
R94.5	Abnormal results of liver function studies
T86.40	Unspecified complication of liver transplant
T86.41	Liver transplant rejection
T86.42	Liver transplant failure
T86.43	Liver transplant infection
T86.49	Other complications of liver transplant
Z01.89	Encounter for other specified special examinations
Z05.0	Observation and evaluation of newborn for suspected cardiac condition ruled out
Z05.1	Observation and evaluation of newborn for suspected infectious condition ruled out
Z05.2	Observation and evaluation of newborn for suspected neurological condition ruled out
Z05.3	Observation and evaluation of newborn for suspected respiratory condition ruled out
Z05.41	Observation and evaluation of newborn for suspected genetic condition ruled out
Z05.42	Observation and evaluation of newborn for suspected metabolic condition ruled out
Z05.43	Observation and evaluation of newborn for suspected immunologic condition ruled out
Z05.5	Observation and evaluation of newborn for suspected gastrointestinal condition ruled out
Z05.6	Observation and evaluation of newborn for suspected genitourinary condition ruled out
Z05.71	Observation and evaluation of newborn for suspected skin and subcutaneous tissue condition ruled out

Code	Description
Z05.72	Observation and evaluation of newborn for suspected musculoskeletal condition ruled out
Z05.73	Observation and evaluation of newborn for suspected connective tissue condition ruled out
Z05.81	Observation and evaluation of newborn for suspected condition related to home physiologic monitoring device ruled out
Z05.89	Observation and evaluation of newborn for other specified suspected condition ruled out
Z05.9	Observation and evaluation of newborn for unspecified suspected condition ruled out
Z19.1	Hormone sensitive malignancy status
Z19.2	Hormone resistant malignancy status
Z29.11	Encounter for prophylactic immunotherapy for respiratory syncytial virus (RSV)
Z84.82	Family history of sudden infant death syndrome

Indications

1. To detect viral hepatitis infection when there are abnormal liver function test results, with or without signs or symptoms of hepatitis.
2. Prior to and subsequent to liver transplantation.

Limitations

After a hepatitis diagnosis is established, only individual tests are needed.

ICD-10-CM Codes That Do Not Support Medical Necessity

Any ICD-10-CM code not listed in either of the ICD-10-CM covered or non-covered sections.

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