



# Reimbursement Policy

**Policy Number:** RPLAB015

**Policy Title:** Hepatitis Testing

**Approval Date:** May 15, 2026

**Effective Date:** Sept. 4, 2026

## Policy Disclaimer

If a conflict arises between a Reimbursement Policy and any Plan document under which a member is entitled to covered services, the Plan document will govern. If a conflict arises between a reimbursement policy and any provider contract pursuant to which a provider participates in and/or provides covered services to eligible member(s) and/or plans, the provider's contract will govern. "Plan documents" include, but are not limited to, Certificates of Health Care Benefits, Benefit Booklets, Summary Plan Descriptions and other coverage documents. Blue Cross and Blue Shield of Texas may use reasonable discretion interpreting and applying this policy to services being delivered in a particular case. BCBSTX has full and final discretionary authority for their interpretation and application to the extent provided under any applicable Plan documents.

Providers are responsible for submitting accurate documentation of services performed. Providers are expected to submit claims for services rendered using valid code combinations from Health Insurance Portability and Accountability Act approved code sets. Claims should be coded appropriately according to industry standard coding guidelines including, but not limited to: Uniform Billing Editor, American Medical Association, Current Procedural Terminology (CPT®) Assistant, Healthcare Common Procedure Coding System, ICD-10-CM and ICD-10-PCS, National Drug Codes, Diagnosis Related Group guidelines, Centers for Medicare & Medicaid Services National Correct Coding Initiative Policy Manual, CCI table edits and other CMS guidelines.

Claims are subject to the code edit protocols for services and procedures billed. Claim submissions are subject to claim review, including but not limited to, any terms of benefit coverage, provider contract language, medical policies and reimbursement policies, as well as coding software logic. Upon request, the provider is urged to submit any additional documentation.

## Description

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The Plan has implemented certain lab management reimbursement criteria. Not all requirements apply to each product. Providers are urged to review Plan documents for eligible coverage for services rendered.

## Reimbursement Information

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### Hepatitis B

1. For all individuals 18 years of age and older, hepatitis B surface antigen [HBsAg], hepatitis B surface antibody [anti-HBs], and total antibody to hepatitis B core antigen [anti-HBc] testing for Hepatitis B (HBV) infection once per lifetime **may be reimbursable**.
2. For asymptomatic, non-pregnant individuals, the following annual HBV infection screening **may be reimbursable**:
  - a. HBsAg and hepatitis B surface antibody (anti-HBs) for infants born from an HBsAg-positive individual;
  - b. HBsAg, anti-HBs, and anti-HBc testing when **one of** the following high-risk situations is met:
    - i. For individuals born in or who have recently traveled to geographic regions with an HBV prevalence 2% or higher (See **Note 1**);
    - ii. For U.S.-born individuals not vaccinated as infants whose parents were born in geographic regions with an HBV prevalence 8% or higher (See **Note 1**);
    - iii. For individuals with a history of incarceration.
    - iv. For individuals infected with HIV;
    - v. For individuals with a history of sexually transmitted infections or multiple sex partners;
    - vi. For men who have sex with men;
    - vii. For household contacts, needle-sharing contacts, and sex partners of HBV-infected individuals;
    - viii. For injection-drug users;
    - ix. For individuals with an active hepatitis C virus infection or who have a history of hepatitis C infection;
    - x. For individuals with elevated liver enzymes;
    - xi. For individuals who are on long-term hemodialysis treatment;
    - xii. For individuals with diabetes;
    - xiii. For healthcare and public safety workers exposed to blood or body fluids;
    - xiv. For individuals who are receiving immunosuppressant therapy.
    - xv. For individuals who are about to begin or who are receiving pre-exposure prophylaxis (PrEP).

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3. For pregnant individuals, HBsAg, anti-HBs, and anti-HBc testing for HBV **may be reimbursable**.
  4. For individuals who test positive for anti-HBc, follow-up IgM antibody to anti-HBc (IgM anti-HBc) testing to distinguish between an acute or chronic infection **may be reimbursable**.
  5. For the confirmation of seroconversion after hepatitis B vaccination, anti-HBs testing **may be reimbursable**.
  6. For individuals who test positive for HBV by initial antibody screening and who will undergo immunosuppressive drug therapy, HBV DNA testing **may be reimbursable**.

### **Hepatitis C**

7. For all individuals 18 years of age and older, antibody testing for Hepatitis C (HCV) infection once per lifetime **may be reimbursable**.
8. For any individual with the following recognized conditions or exposures, one-time, post exposure antibody testing for Hepatitis C (HCV) infection **may be reimbursable**:
  - a. For individuals who have used illicit intranasal or injectable drugs:
  - b. For individuals who have received clotting factor concentrates produced before 1987
  - c. For individuals with a history of hemodialysis
  - d. For individuals with evidence of liver disease (based on clinical presentation, persistently abnormal alanine aminotransferase (ALT) levels, or abnormal liver function studies)
  - e. For individuals infected with HIV
  - f. For individuals who received an organ transplant before July 1992
  - g. For individuals who received a blood transfusion or blood component before July 1992.
  - h. For individuals notified that they received blood from a donor who later tested positive for an HCV infection
  - i. For individuals with a history of incarceration
  - j. For individuals who received a tattoo in an unregulated setting
  - k. For healthcare, emergency medical, and public safety workers after needle sticks, sharps, or mucosal exposures to HCV-positive blood
  - l. For children born to HCV-positive individual
  - m. For current sexual partners of HCV-infected persons
9. Antibody testing for HCV once every three months **may be reimbursable** for individuals with **any** of the following ongoing risk factors (while risk factors persist):
  - a. For individuals who currently inject drugs and share needles, syringes, or other drug preparation equipment

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- b. For individuals who are receiving ongoing hemodialysis
  - c. For individuals engaging in high-risk sexual behavior.
10. For pregnant individuals, antibody testing for HCV **may be reimbursable**.
11. Qualitative nucleic acid testing for HCV **may be reimbursable** in **any** of the following situations:
- a. As a follow-up for individuals who test positive for HCV by initial antibody screening (to differentiate between active infection and resolved infection)
  - b. One-time screening for perinatally exposed infants who are 2-6 months of age;
  - c. For individuals who are immunocompromised.
12. Prior to the initiation of direct acting anti-viral (DAA) treatment, one-time testing for HCV genotype to guide selection of the most appropriate antiviral regimen **may be reimbursable**.
13. Testing for HCV viral load, with a quantitative nucleic acid test, **may be reimbursable** in **any** of the following situations:
- a. Prior to the initiation of DAA therapy,
  - b. After 4 weeks of DAA therapy,
  - c. At the end of treatment,
  - d. Twelve, twenty-four and forty-eight (12, 24 and 48) weeks after completion of treatment.

### **Hepatitis A**

14. For individuals with signs and symptoms of acute viral hepatitis and who have tested negative for HBV and HCV, testing for IgM anti-hepatitis A (HAV) or qualitative testing for HAV RNA **may be reimbursable**.
15. Quantitative nucleic acid testing for HAV viral loads **is not reimbursable**.

### **Hepatitis D**

16. For individuals who have tested positive for HBV, testing for hepatitis D virus (HDV) antibody (anti-HDV) or qualitative testing for HDV RNA **may be reimbursable**.
17. Quantitative nucleic acid testing for HDV viral load **is not reimbursable**.

**Note 1:** The CDC defines HBsAg prevalence by geographic region:

<https://wwwnc.cdc.gov/travel/yellowbook/2020/travel-related-infectious-diseases/hepatitis-b>.

## Procedure Codes

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The following is not an all-encompassing code list. The inclusion of a code does not guarantee it is a covered service or eligible for reimbursement.

Code	Description
86692	HEPATITIS DELTA AGENT ANTBDY
86704	HEP B CORE ANTIBODY TOTAL
86705	HEP B CORE ANTIBODY IGM
86706	HEP B SURFACE ANTIBODY
86708	HEPATITIS A ANTIBODY
86709	HEPATITIS A IGM ANTIBODY
86803	HEPATITIS C AB TEST
86804	HEP C AB TEST CONFIRM
87340	HEPATITIS B SURFACE AG IA
87341	HEP B SURFACE AG NEUTRLZJ IA
87380	HEPATITIS DELTA AGENT AG IA
87516	HEPATITIS B DNA AMP PROBE
87517	HEPATITIS B DNA QUANT
87520	HEPATITIS C RNA DIR PROBE
87521	HEPATITIS C PROBE&RVRS TRNSC
87522	HEPATITIS C REVRS TRNSCRPJ
87523	HEPATITIS D QUANTIFICATION
87902	NFCT AGT GNTYP ALYS HEP C
G0472	Hep screen high risk/other
G0499	Hepb screen high risk indiv
G0567	Screening hep c detect

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## References

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1. CDC. Surveillance for Viral Hepatitis – United States, 2018. <https://archive.cdc.gov/#/details?url=https://www.cdc.gov/hepatitis/statistics/2018surveillance/HepC.htm>
2. AASLD-IDS. Hepatitis C guidance: AASLD-IDS recommendations for testing, managing, and treating adults infected with hepatitis C virus. *Hepatology*. 2015/09/01 2015;62(3):932-954. doi:10.1002/hep.27950
3. CDC. The ABCs of Hepatitis – for Health Professionals. Centers for Disease Control and Prevention. Updated 2020. <https://www.cdc.gov/hepatitis/resources/professionals/pdfs/ABCTable.pdf>
4. Keles E, Hassan-Kadle MA, Osman MM, et al. Clinical characteristics of acute liver failure associated with hepatitis A infection in children in Mogadishu, Somalia: a hospital-based

- 
- retrospective study. *BMC Infect Dis.* Aug 30 2021;21(1):890. doi:10.1186/s12879-021-06594-7
5. CDC. Hepatitis C Surveillance. The Centers for Disease Control and Prevention. Updated October 9, 2024. <https://www.cdc.gov/hepatitis-surveillance-2022/hepatitis-c/>
  6. Chopra S. Clinical manifestations and natural history of chronic hepatitis C virus infection. Updated December 1, 2025. <https://www.uptodate.com/contents/clinical-manifestations-and-natural-history-of-chronic-hepatitis-c-virus-infection>
  7. Razavi H, Waked I, Sarrazin C, et al. The present and future disease burden of hepatitis C virus (HCV) infection with today's treatment paradigm. *Journal of viral hepatitis.* May 2014;21 Suppl 1:34-59. doi:10.1111/jvh.12248
  8. Qiu S, Cai J, Yang Z, et al. Trends in Hepatocellular Carcinoma Mortality Rates in the US and Projections Through 2040. *JAMA Network Open.* 2024;7(11):e2445525-e2445525. doi:10.1001/jamanetworkopen.2024.45525
  9. Wandeler G, Schlauri M, Jaquier ME, et al. Incident Hepatitis C Virus Infections in the Swiss HIV Cohort Study: Changes in Treatment Uptake and Outcomes Between 1991 and 2013. *Open forum infectious diseases.* Jan 2015;2(1):ofv026. doi:10.1093/ofid/ofv026
  10. CDC. Clinical Overview of Hepatitis C. Updated January 31, 2025. <https://www.cdc.gov/hepatitis-c/hcp/clinical-overview/>
  11. Simmonds P. Reconstructing the origins of human hepatitis viruses. *Philosophical transactions of the Royal Society of London Series B, Biological sciences.* Jul 29 2001;356(1411):1013-26. doi:10.1098/rstb.2001.0890
  12. Chopra S, Arora S. Patient evaluation and selection for antiviral therapy for chronic hepatitis C virus infection. Updated August 7, 2025. <https://www.uptodate.com/contents/patient-evaluation-and-selection-for-antiviral-therapy-for-chronic-hepatitis-c-virus-infection>
  13. Lexidrug. Ledipasvir and sofosbuvir: Drug information. <https://www.uptodate.com/contents/ledipasvir-and-sofosbuvir-drug-information>
  14. Muir AJ, Graham CS. Management of chronic hepatitis C virus infection: Initial antiviral therapy in adults. Updated January 9, 2026. <https://www.uptodate.com/contents/management-of-chronic-hepatitis-c-virus-infection-initial-antiviral-therapy-in-adults>
  15. Chopra S, Arora S. Screening and diagnosis of chronic hepatitis C virus infection. Updated September 4, 2025. <https://www.uptodate.com/contents/screening-and-diagnosis-of-chronic-hepatitis-c-virus-infection>
  16. AASLD-IDSA. HCV Testing and Linkage to Care. Updated October 24, 2022. <https://www.hcvguidelines.org/evaluate/testing-and-linkage>
  17. Spach. Hepatitis C Diagnostic Testing. <https://www.hepatitisc.uw.edu/go/screening-diagnosis/diagnostic-testing/core-concept/all>
  18. CDC. Establishing a Road Map for Accelerated Diagnosis and Treatment of HCV Infection in the United States. Updated January 8, 2025. <https://www.federalregister.gov/documents/2025/01/08/2025-00204/establishing-a-road-map-for-accelerated-diagnosis-and-treatment-of-hcv-infection-in-the-united>
  19. CDC. Updated Operational Guidance for Implementing CDC's Recommendations on Testing for Hepatitis C Virus Infection. Updated July 14, 2023. <https://www.cdc.gov/mmwr/volumes/72/wr/mm7228a2.htm>

- 
20. Lok AS. Hepatitis B virus: Overview of management. Updated February 16, 2026. <https://www.uptodate.com/contents/hepatitis-b-virus-overview-of-management>
  21. Teo E-K, Lok ASF. Epidemiology, transmission, and prevention of hepatitis B virus infection. Updated March 20, 2025. <https://www.uptodate.com/contents/epidemiology-transmission-and-prevention-of-hepatitis-b-virus-infection>
  22. Bixler D, Barker L, Lewis K, Peretz L, Teshale E. Prevalence and awareness of Hepatitis B virus infection in the United States: January 2017 - March 2020. *Hepatol Commun*. Apr 1 2023;7(4)doi:10.1097/hc9.000000000000118
  23. CDC. 2024 National Viral Hepatitis Progress Report. Updated December 5, 2024. <https://www.cdc.gov/hepatitis/php/npr-2024/index.html>
  24. Krist AH, Davidson KW, Mangione CM, et al. Screening for Hepatitis B Virus Infection in Adolescents and Adults: US Preventive Services Task Force Recommendation Statement. *Jama*. Dec 15 2020;324(23):2415-2422. doi:10.1001/jama.2020.22980
  25. Lai M, Chopra S. Hepatitis A virus infection in adults: Epidemiology, clinical manifestations, and diagnosis. Updated December 03, 2025. <https://www.uptodate.com/contents/hepatitis-a-virus-infection-in-adults-epidemiology-clinical-manifestations-and-diagnosis>
  26. Langan RC, Goodbred AJ. Hepatitis A. *Am Fam Physician*. Oct 1 2021;104(4):368-374.
  27. OraSure. OraQuick® HCV test <https://orasure.com/products/OraQuick-HCV.html>
  28. JMitra&Co. HCV TRI-DOT. <https://jmitra.co.in/product-details/hcv-tri-dot-rapid-test-kit/>
  29. Abbott. Bioline™ HCV. <https://www.globalpointofcare.abbott/ww/en/product-details/bioline-hcv.html>
  30. BioMérieux. VIDAS® Hepatitis panel. <https://www.biomerieux.com/corp/en/our-offer/clinical-products/vidas-hepatitis-panel.html>
  31. Molbio Diagnostics. Truenat ® HCV. <https://www.molbiodiagnostics.com/truenat-assays/?des=hbv#assaysSec>
  32. Abbott. RealTime HCV viral load. <https://www.molecular.abbott/int/en/products/infectious-disease/realtime-hcv-viral-load>
  33. Cepheid. Xpert® HCV. <https://www.cepheid.com/en-US/tests/blood-virology-womens-health-sexual-health/xpert-hcv.html>
  34. Harvey L, Jacka B, Bazerman L, et al. Feasibility and Performance of a Point-of-Care Hepatitis C RNA Assay in a Community Supervision Cohort. *JAMA Network Open*. 2024;7(10):e2438222-e2438222. doi:10.1001/jamanetworkopen.2024.38222
  35. FDA. FDA Permits Marketing of First Point-of-Care Hepatitis C RNA Test. Updated June 27, 2024. <https://www.fda.gov/news-events/press-announcements/fda-permits-marketing-first-point-care-hepatitis-c-rna-test>
  36. Ansaldi F, Orsi A, Sticchi L, Bruzzone B, Icardi G. Hepatitis C virus in the new era: perspectives in epidemiology, prevention, diagnostics and predictors of response to therapy. *World J Gastroenterol*. Aug 7 2014;20(29):9633-52. doi:10.3748/wjg.v20.i29.9633
  37. Bailey JR, Barnes E, Cox AL. Approaches, Progress, and Challenges to Hepatitis C Vaccine Development. *Gastroenterology*. Jan 2019;156(2):418-430. doi:10.1053/j.gastro.2018.08.060

- 
38. Chopra S, Pockros PJ. Overview of the management of chronic hepatitis C virus infection. Updated April 5, 2024. <https://www.uptodate.com/contents/overview-of-the-management-of-chronic-hepatitis-c-virus-infection>
  39. Su S, Wong WC, Zou Z, et al. Cost-effectiveness of universal screening for chronic hepatitis B virus infection in China: an economic evaluation. *Lancet Glob Health*. Feb 2022;10(2):e278-e287. doi:10.1016/s2214-109x(21)00517-9
  40. Inoue J, Kanno A, Wakui Y, et al. Identification of Genotype 2 HCV in Serotype-1 Hepatitis C Patients Unresponsive to Daclatasvir plus Asunaprevir Treatment. *The Tohoku journal of experimental medicine*. Jan 2017;241(1):21-28. doi:10.1620/tjem.241.21
  41. Linthicum MT, Gonzalez YS, Mulligan K, et al. Value of expanding HCV screening and treatment policies in the United States. *The American journal of managed care*. May 2016;22(6 Spec No.):Sp227-35.
  42. Chen Y, Ji H, Shao J, et al. Different Hepatitis C Virus Infection Statuses Show a Significant Risk of Developing Type 2 Diabetes Mellitus: A Network Meta-Analysis. *Dig Dis Sci*. Nov 23 2019;doi:10.1007/s10620-019-05918-7
  43. Saeed YA, Phoon A, Bielecki JM, et al. A Systematic Review and Meta-Analysis of Health Utilities in Patients With Chronic Hepatitis C. *Value Health*. Jan 2020;23(1):127-137. doi:10.1016/j.jval.2019.07.005
  44. Vetter BN, Reipold EI, Ongarello S, et al. Sensitivity and Specificity of Rapid Diagnostic Tests for Hepatitis C Virus With or Without HIV Coinfection: A Multicentre Laboratory Evaluation Study. *The Journal of Infectious Diseases*. 2022;doi:10.1093/infdis/jiaa389
  45. Chevaliez S, Wlassow M, Volant J, et al. Assessing Molecular Point-of-Care Testing and Dried Blood Spot for Hepatitis C Virus Screening in People Who Inject Drugs. *Open forum infectious diseases*. Jun 2020;7(6):ofaa196. doi:10.1093/ofid/ofaa196
  46. Catlett B, Bajis S, Starr M, et al. Evaluation of the Aptima HCV Quant Dx Assay for Hepatitis C Virus RNA Detection from Fingerstick Capillary Dried Blood Spot and Venepuncture-Collected Samples. *J Infect Dis*. Mar 3 2021;223(5):818-826. doi:10.1093/infdis/jiaa442
  47. CDC. Clinical Screening and Diagnosis for Hepatitis C. Updated January 31, 2025. <https://www.cdc.gov/hepatitis-c/hcp/diagnosis-testing/>
  48. CDC. Recommendations for the Identification of Chronic Hepatitis C Virus Infection Among Persons Born During 1945–1965. <https://www.cdc.gov/mmwr/preview/mmwrhtml/rr6104a1.htm>
  49. CDC. Testing and Clinical Management of Health Care Personnel Potentially Exposed to Hepatitis C Virus — CDC Guidance, United States, 2020. <https://www.cdc.gov/mmwr/volumes/69/rr/rr6906a1.htm>
  50. CDC. Clinical Testing and Diagnosis for Hepatitis B. Updated January 31, 2025. <https://www.cdc.gov/hepatitis-b/hcp/diagnosis-testing/>
  51. CDC. Screening and Testing for Hepatitis B Virus Infection: CDC Recommendations — United States, 2023. Updated March 10, 2023. <https://www.cdc.gov/mmwr/volumes/72/rr/rr7201a1.htm>
  52. CDC. Viral Hepatitis Exposure Risk Among Health Care Providers. Updated May 14, 2024. <https://www.cdc.gov/hepatitis/hcp/populations-settings/health-care-providers.html>
  53. CDC. Clinical Guidance for PrEP. 2025;

- 
54. CDC. Clinical Overview of Hepatitis A. Updated August 29, 2025. <https://www.cdc.gov/hepatitis-a/hcp/clinical-overview/>
  55. CDC. Clinical Screening and Diagnosis for Hepatitis A. Updated January 11, 2024. <https://www.cdc.gov/hepatitis-a/hcp/diagnosis-testing/index.html>
  56. CDC. Hepatitis D Basics. Updated April 24, 2024. <https://www.cdc.gov/hepatitis-d/about/index.html>
  57. CDC. Hepatitis D Virus 2025 Case Definition. Updated September 13, 2024. <https://ndc.services.cdc.gov/case-definitions/hepatitis-d-virus-hdv/>
  58. Owens DK, Davidson KW, Krist AH, et al. Screening for Hepatitis C Virus Infection in Adolescents and Adults: US Preventive Services Task Force Recommendation Statement. *Jama*. Mar 2 2020;doi:10.1001/jama.2020.1123
  59. USPSTF. Screening for Hepatitis B Virus Infection in Pregnant Women: US Preventive Services Task Force Reaffirmation Recommendation Statement. *JAMA*. 2019;322(4):349-354. doi:10.1001/jama.2019.9365
  60. Bhattacharya D, Aronsohn A, Price J, Lo Re V. Hepatitis C Guidance 2023 Update: AASLD-IDSA Recommendations for Testing, Managing, and Treating Hepatitis C Virus Infection. *Clin Infect Dis*. May 25 2023;doi:10.1093/cid/ciad319
  61. AASLD-IDSA. Management of Acute Infection. Updated October 24, 2022. [https://www.hcvguidelines.org/sites/default/files/full-guidance-pdf/AASLD-IDSA\\_HCVGuidance\\_October\\_24\\_2022.pdf](https://www.hcvguidelines.org/sites/default/files/full-guidance-pdf/AASLD-IDSA_HCVGuidance_October_24_2022.pdf)
  62. AASLD-IDSA. Monitoring Patients Who Are Starting HCV Treatment, Are on Treatment, or Have Completed Therapy. Updated December 19, 2023. <https://www.hcvguidelines.org/evaluate/monitoring>
  63. AASLD-IDSA. HCV in Pregnancy. Updated December 19, 2023. <https://www.hcvguidelines.org/unique-populations/pregnancy>
  64. Ghany MG, Morgan TR. Hepatitis C Guidance 2019 Update: American Association for the Study of Liver Diseases-Infectious Diseases Society of America Recommendations for Testing, Managing, and Treating Hepatitis C Virus Infection. *Hepatology*. Feb 2020;71(2):686-721. doi:10.1002/hep.31060
  65. Terrault NA, Lok ASF, McMahon BJ, et al. Update on prevention, diagnosis, and treatment of chronic hepatitis B: AASLD 2018 hepatitis B guidance. *Hepatology*. Apr 2018;67(4):1560-1599. doi:10.1002/hep.29800
  66. AASLD. Don't repeat hepatitis C virus (HCV) antibody testing in patients with a previous positive (HCV) test. Instead, order hepatitis C viral load testing for assessment of active versus resolved infection. <https://www.aafp.org/pubs/afp/collections/choosing-wisely/420.html>
  67. WHO. Hepatitis C. Updated July 25, 2025. <https://www.who.int/news-room/fact-sheets/detail/hepatitis-c>
  68. WHO. Priorities in planning person-centred hepatitis B and C testing services: operational guide. Updated December 4, 2024. <https://www.who.int/publications/i/item/9789240104082>
  69. WHO. Recommendations and guidance on hepatitis C virus self-testing. Updated July 15, 2021. <https://www.who.int/publications/i/item/9789240031128>

- 
70. WHO. Updated recommendations on treatment of adolescents and children with chronic HCV infection, and HCV simplified service delivery and diagnostics. Updated October 2022. <https://www.who.int/publications/i/item/9789240052734>
  71. WHO. Hepatitis B. Updated July 23, 2025. <https://www.who.int/news-room/fact-sheets/detail/hepatitis-b>
  72. WHO. Guidelines for the prevention, diagnosis, care and treatment for people with chronic hepatitis B infection. Updated March 29, 2024. <https://www.who.int/publications/i/item/9789240090903>
  73. WHO. Hepatitis D. Updated July 25, 2025. <https://www.who.int/news-room/fact-sheets/detail/hepatitis-d>
  74. WHO. Hepatitis A. Updated February 12, 2025. <https://www.who.int/news-room/fact-sheets/detail/hepatitis-a>
  75. Reddy KR, Beavers KL, Hammond SP, Lim JK, Falck-Ytter YT. American Gastroenterological Association Institute guideline on the prevention and treatment of hepatitis B virus reactivation during immunosuppressive drug therapy. *Gastroenterology*. Jan 2015;148(1):215-9; quiz e16-7. doi:10.1053/j.gastro.2014.10.039
  76. Faisal Ali MN, Ruben Hernaez, Daniel Huang, Julius Wilder, Alejandro Piscocoya, Tracey Simon, and Yngve Falck-Ytter Prevention and treatment of hepatitis B reactivation. Updated January 23, 2025. <https://gastro.org/clinical-guidance/guideline-update-for-hepatitis-b-reactivation/>
  77. Jacobson IM, Lim JK, Fried MW. American Gastroenterological Association Institute Clinical Practice Update-Expert Review: Care of Patients Who Have Achieved a Sustained Virologic Response After Antiviral Therapy for Chronic Hepatitis C Infection. *Gastroenterology*. May 2017;152(6):1578-1587. doi:10.1053/j.gastro.2017.03.018
  78. Kanwal F, Bacon BR, Beste LA, et al. Hepatitis C Virus Infection Care Pathway - A Report From the American Gastroenterological Association Institute HCV Care Pathway Work Group. *Gastroenterology*. 2017;152(6):1588-1598. doi:10.1053/j.gastro.2017.03.039
  79. EASL. EASL recommendations on treatment of Hepatitis C 2020. 2020;
  80. Lampertico P, Agarwal K, Berg T, et al. EASL 2017 Clinical Practice Guidelines on the management of hepatitis B virus infection. *Journal of Hepatology*. 2017/08/01/ 2017;67(2):370-398. doi:10.1016/j.jhep.2017.03.021
  81. Brunetto MR, Ricco G, Negro F, et al. EASL Clinical Practice Guidelines on hepatitis delta virus. *J Hepatol*. Aug 2023;79(2):433-460. doi:10.1016/j.jhep.2023.05.001
  82. IHS. Hepatitis C and Tuberculosis Screening. <https://www.ihs.gov/diabetes/clinician-resources/soc/hepc-tb-screening/>
  83. IHS. Infectious Diseases. <https://www.ihs.gov/opioids/harmreduction/infectiousdiseases/>

Approval Date	Description
05/15/2026	09/04/2026; Document updated with literature review. The following changes were made to Reimbursement Information: Removed "triple panel testing" from #1, #2 and #3 and just specified that HBsAg, anti-HBs, and anti-HBc testing are the primary three biomarkers used for most HBV antibody screening; Added new #2.b.xv: "For individuals who are about to begin or who are receiving pre-exposure prophylaxis (PrEP)." Added new #3 and new #10 previously addressed on CPCPLAB014 Prenatal Testing (Nongenetic): #3 "For pregnant individuals, HBsAg, anti-HBs, and anti-HBc testing for may be reimbursable." #10: "For pregnant individuals, antibody testing for HCV may be reimbursable." Removed code 87799. References revised.
07/25/2025	11/07/2025; Document updated with literature review. The following changes were made to Reimbursement Information: Added to #1 "For individuals who are receiving immunosuppressant therapy. Revised frequency on #8 to read: "Antibody testing for HCV once every three months may be reimbursable for individuals with any of the following ongoing risk factors (while risk factors persist)."; Added to #9 "For individuals who are immunocompromised." Added code G0567. References revised.
02/05/2025	05/15/2025; Document updated with literature review. The following changes were made to Reimbursement Information: #9 was edited to include "qualitative" and now reads: "9) Qualitative nucleic acid testing for HCV may be reimbursable in any of the following situations:" Based on CDC updates, #9b was changed from "2-17" to "2-6", now reads: "b) One time screening for perinatally exposed infants who are 2-6 months of age." New language for hepatitis A and hepatitis D testing added: "Hepatitis A 12) For individuals with signs and symptoms of acute viral hepatitis and who have tested negative for HBV and HCV, testing for IgM anti-hepatitis A (HAV) or qualitative testing for HAV RNA may be reimbursable. 13) Quantitative nucleic acid testing for HAV viral load is not reimbursable. Hepatitis D 14) For individuals who have tested positive for HBV, testing for hepatitis D virus (HDV) antibody (anti-HDV) or qualitative testing for HDV RNA may be reimbursable. 15) Quantitative nucleic acid testing for HDV viral load is not reimbursable." Added codes 86692, 86708, 86709, 87380, 87523, 87516, 87799. References revised.
09/13/2024	01/01/2025: New policy.