




Who should be screened for hepatitis B?

-  All adults 18 years and older once in their lifetime
-  Anyone who wants to be screened
-  Pregnant Persons (*see Key Considerations)

What tests should be run?

- **The triple panel hepatitis B test should be used to screen everyone for HBV.**
 - Hepatitis B Surface Antigen (HBsAg)
 - Hepatitis B Surface Antibody (HbsAb/anti-HBs)
 - Hepatitis B Core Antibody Total (HBcAb/total anti-HBc/IgG anti-HBc)**

Vaccination and Screening in Same Visit

If you are able to provide both screening and vaccination, the CDC recommends the following:

1. Collect blood first, as vaccinating before drawing blood can lead to a false positive.
2. After blood draw, offer HBV vaccine as per CDC recommendations at same visit.

** Please note that core antibody total (IgG anti-HBc) and core antibody IgM (IgM anti-HBc) are different tests. IgM anti-HBc **should not** be used as a routine test and only be used to rule out an acute infection.

Billing and Insurance

The below codes are not an exhaustive list. Please refer to CMS for information on how to properly code the tests needed for your patient.

Codes for non-pregnant adolescents/adults at high-risk

- ICD-10:** Z11.59 Encounter for screening for other viral diseases **AND/OR**
- ICD-10:** Z11.3 Encounter for screening for infections with a predominantly sexual mode of transmission **AND/OR**
- ICD-10:** Z72.89 Other problems related to lifestyle **AND/OR**
- ICD-10:** Z00 Encounter for general exam without complaint, suspected or reported diagnosis
- HCPCS Level II Code:** G0499 Hepatitis B screening in non-pregnant, high-risk individual - includes HBsAg followed by a neutralizing confirmatory test for initially reactive results, and antibodies to HBsAg (anti-HBs, anti-HBc)

Codes for pregnant adolescents/adults at high-risk

- Z34.00 – Encounter for supervision of normal first pregnancy, unspecified trimester
- Z34.80 – Encounter for supervision of other normal pregnancy, unspecified trimester
- Z34.90 – Encounter for supervision of normal pregnancy, unspecified, unspecified trimester
- O09.90 – Supervision of high risk pregnancy, unspecified, unspecified trimester

NOTE: Medicare requires both Z11.59 and a high risk code in addition to the HCPCS code.

Hepatitis B screening should be covered with no cost-shares for all insured adults at high-risk for hepatitis B with commercial insurance, Medicare, and states with expanded Medicaid. Individuals at low risk or identified risk-factors may have to pay out of pocket for some or all of the screening tests based upon their insurance.



Some patients may not understand the importance of hepatitis B testing. The following facts can be used to educate patients.

- Hepatitis B rarely has symptoms. Most adults in the U.S. are unaware of how they were exposed to the virus.
- More than 60% of U.S. infected adults are unaware that they are living with hepatitis B.
- Hepatitis B is up to 100 times more infectious than HIV.
- Hepatitis B screening and linkage to care (including oral therapy) can help prevent serious liver disease and liver cancer.

Key Considerations

* Pregnancy

Pregnant persons are recommended for HBV screening with the following guidance:

- **Pregnant persons with a history of appropriately timed triple panel screening and without subsequent risk for exposure to HBV (i.e., no new HBV exposures since triple panel screening) only need HBsAg screening**
- HBV screening for all pregnant persons during each pregnancy, preferably in the first trimester, **regardless of vaccination status or history of testing**

Vaccination/Screening

There is no need to wait for test results before vaccinating. However, this is dependent upon the populations you are serving.

Vaccination should not be a barrier to screening, and screening should not be a barrier to vaccination.

◆ Interpreting Hepatitis B Serology

HBsAg	Total Anti-HBc	Anti-HBs	Possible Interpretation	Management	HepB Vaccination needed?
+	+	-/+	Current infection	Refer for management of active HBV <i>*Refer household and sexual contacts for HBV screening and vaccination</i>	NO
-	+	+	Prior infection with immune control	Document “risk of reactivation with immunosuppressive medications” in health record	NO
-	+	-	Prior infection or Window period or Occult infection	Refer to hepatologist, gastroenterologist, infectious disease provider, or hepatitis B specialist for further evaluation; educate about reactivation as needed	NO
-	-	+	Immune from prior vaccination	No further action. Protected for life from chronic HBV infection.	NO
-	-	-	Susceptible	Vaccinate unless documented receipt of full vaccine series.	YES

This chart was modified by Camilla Graham, MD, MPH and HBF’s Medical Advisors from the “Hepatitis B Management: Simplified Guidance for the Primary Care Provider” developed by the Hepatitis B Primary Care Workgroup and produced in collaboration with the University of Washington Infectious Diseases Education & Assessment (IDEA) program. Visit www.hepatitisb.uw.edu to view the full guidance.

◆ Initial Management/Counseling of HBsAg Positive Patients and Resources

If a patient tests positive for hepatitis B, providers should take the following steps:

1. **Evaluate** the patient’s current hepatitis B status with follow-up tests including a viral load (HBV DNA), liver enzymes/liver function tests, and a baseline abdominal ultrasound. (See *Hepatitis B Management: Guidance for the Primary Care Provider* for more information). If HBV evaluation and management cannot be provided in the primary care setting, link the patient to a hepatitis B provider.
2. **Educate** patient on how to maintain a healthy liver, including avoiding alcohol and smoking, and how to prevent transmission to loved ones (e.g. testing of household members, vaccination, etc.). Multi-lingual resources can be found on the Hepatitis B Foundation website - www.hepb.org.
3. **Prepare** patient for follow up by explaining what additional tests might be needed and how often they will need to see a provider depending upon their diagnosis.
4. **Assure** patient that they can live a long, healthy life with proper management, and treatment if needed.



CDC’s Adult HBV Screening and Testing Recommendation



Hepatitis B Management: Guidance for the Primary Care Provider



CDC’s Adult HBV Vaccination Recommendation