

**▲Measure #85: HCV Genotype Testing Prior to Therapy**

**DESCRIPTION:**

Percentage of patients aged 18 years and older with a diagnosis of chronic hepatitis C who are receiving antiviral treatment for whom HCV genotype testing was performed prior to initiation of treatment

**INSTRUCTIONS:**

This measure is to be reported a minimum of once per reporting period for all patients with a diagnosis of chronic hepatitis C seen during the reporting period. This measure is intended to reflect the quality of services provided for patients with chronic hepatitis C who are receiving antiviral treatment. This measure may be reported by clinicians who perform the quality actions described in the measure based on the services provided and the measure-specific denominator coding.

**This measure is reported using CPT Category II codes and/or G-codes:**

ICD-9 diagnosis codes, CPT E/M service codes, and patient demographics (age, gender, etc.) are used to identify patients who are included in the measure's denominator. CPT Category II codes and/or G-codes are used to report the numerator of the measure.

When reporting the measure, submit the listed ICD-9 diagnosis codes, CPT E/M service codes and the appropriate CPT Category II code **AND/OR** G-code **OR** the CPT Category II code **with** the modifier **AND** G-code. There are no allowable performance exclusions for this measure.

**NUMERATOR:**

Patients for whom HCV genotype testing was performed prior to initiation of treatment

***NUMERATOR NOTE:** The correct combination of numerator code(s) must be reported on the claim form in order to properly report this measure. The "correct combination" of codes may require the submission of multiple numerator codes.*

**Numerator Coding:**

**Hepatitis C Genotype Testing Performed**

*(One CPT II code & one G-code [3266F & G8459] are required on the claim form to submit this category)*

**CPT II 3266F:** Hepatitis C genotype testing documented as performed prior to initiation of antiviral treatment for hepatitis C

**AND**

**G8459:** Clinician documented that patient is receiving antiviral treatment for Hepatitis C

**OR**

**If patient is not eligible for this measure because patient is not receiving antiviral treatment, report:**

*(One G-code [G8458] is required on the claim form to submit this category)*

**G8458:** Clinician documented that patient is not an eligible candidate for genotype testing; patient not receiving antiviral treatment for Hepatitis C

**OR**

**Genotype Testing not Performed, Reason not Specified**

*(One CPT II code & one G-code [3266F-8P & G8459] are required on the claim form to submit this category)*

Append a reporting modifier (**8P**) to CPT Category II code **3266F** to report circumstances when the action described in the numerator is not performed and the reason is not otherwise specified.

- **3266F with 8P:** Hepatitis C genotype testing was not documented as performed prior to initiation of antiviral treatment for Hepatitis C, reason not otherwise specified

**AND**

**G8459:** Clinician documented that patient is receiving antiviral treatment for Hepatitis C

**DENOMINATOR:**

All patients aged 18 years and older with a diagnosis of chronic hepatitis C who are receiving antiviral treatment

**Denominator Coding:**

An ICD-9 diagnosis code for chronic hepatitis C and a CPT E/M service code are required to identify patients for denominator inclusion.

**ICD-9 diagnosis codes:** 070.54

**AND**

**CPT E/M service codes:** 99201, 99202, 99203, 99204, 99205, 99212, 99213, 99214, 99215, 99241, 99242, 99243, 99244, 99245

**RATIONALE:**

To guide treatment decisions regarding duration of therapy and likelihood of response. There are 6 HCV genotypes and more than 50 subtypes. These genotypes differ by as much as 31 to 34 percent in their nucleotide sequences, whereas subtypes differ by 20 to 23 percent based on full-length genomic sequence comparisons. Genotype determinations influence treatment decisions. Patients with genotypes 2 or 3 have better response rates to re-treatment than those with genotype 1. (NIH)

**CLINICAL RECOMMENDATION STATEMENTS:**

HCV genotype should be determined in all HCV-infected persons prior to treatment in order to determine the duration of therapy and likelihood of response (Grade I). (AASLD)

Information on the genotype of the virus is important to guide treatment decisions. Genotype 1, most commonly found in the United States, is less amenable to treatment than genotypes 2 or 3. (NIH)

All candidates for antiviral therapy should be tested for HCV RNA with a quantitative amplification assay and should be tested for HCV genotype. (AGA)