# **Antiviral Treatment Prescribed**

# **Coding Specifications**

Codes required to document patient has hepatitis C and a visit occurred:

An ICD-9-CM diagnosis code for hepatitis C and a CPT code are required to identify patients to be included in this measure.

All measure specific coding should be reported on the claim(s) representing the eligible encounter.

### Hepatitis C ICD-9-CM diagnosis codes

070.54 (chronic Hepatitis C without hepatic coma)

#### AND

#### **CPT** codes

- 99201, 99202, 99203, 99204, 99205
- 99212, 99213, 99214, 99215

Quality codes for this measure:

## **CPT II Code descriptors**

(Data collection sheet should be used to determine appropriate code.)

- *CPT II 4153F:* Combination peginterferon and ribavirin therapy prescribed
- *CPT II 4153F-1P:* Documentation of medical reason(s) for not prescribing peginterferon and ribavarin therapy within 12 month reporting period (eg, patient was not a candidate for therapy, could not tolerate, not indicated, contraindicated, other medical reason).
- *CPT II 4153F-2P:* Documentation of patient reason(s) for not prescribing peginterferon and ribavirin therapy within 12 month reporting period (eg, patient declined, economic, social, religious, other patient reason).
- *CPT II 4153F-3P*: Documentation of system reason(s) for not prescribing peginterferon andribavirin therapy within 12 month reporting period (eg, resources to perform the services not available, or other reason attributable to health care delivery system).
- *CPT II 4153F-8P*: Combination peginterferon and ribavirin therapy was not prescribed, reason not otherwise specified

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