



State of New Jersey  
Department of Human Services  
Division of Medical Assistance & Health Services

# NEWSLETTER

Volume 12 No. 31

April 2002

**TO:** Independent Clinics - **For Action**  
HMOs - **For Information Only**

**SUBJECT:** Updates to the Healthcare Common Procedure Coding System (HCPCS)

**EFFECTIVE:**

1. Additions Effective for Claims with Dates of Service on or after January 1, 2002
2. Deletions Effective for Claims with Dates of Service on or after June 1, 2002

**PURPOSE:** To notify independent clinics of additions and deletions to the 2002 Healthcare Common Procedure Coding System (HCPCS) and reimbursement for Medicaid and NJ FamilyCare fee-for-service covered medical and surgical services.

**ACTION:** The New Jersey Division of Medical Assistance and Health Services (DMAHS) has added new HCPCS procedure codes and their applicable maximum fee allowances. These procedure codes reflect services and maximum fee allowances, which are reimbursable to independent clinics by the New Jersey Medicaid and NJ FamilyCare programs. Providers should use these HCPCS procedure codes when submitting claims for processing.

Attachments to this Newsletter include:

Additions to N.J.A.C. 10:66-2, HCPCS procedure codes and maximum fee allowances.

Independent Clinics, please add these attachments to Subchapter 6 (dated 12/98) in your Independent Clinic Manual (N.J.A.C. 10:66).

If there are any questions regarding this Newsletter, please contact the Office of Utilization Management at (609) 588-2718.

**RETAIN THIS NEWSLETTER BEHIND THE NEWSLETTER TAB  
(BLUE TAB MARKED "5")**

**10:66-2 HCPCS procedure codes and maximum fee allowance schedule**

**Additions, effective for claims with dates of services on or after January 1, 2002**

<u>IND</u>	<u>HCPCS CODE</u>	<u>MOD</u>	<u>MAXIMUM FEE ALLOWANCE</u>	
			<u>SPECIALIST</u>	<u>\$ NON-SPECIALIST</u>
	90473		BR	BR
	90474		BR	BR
	90939		BR	BR
	92136		40.00	38.50
	92136	TC	30.00	30.00
	92136	26	10.00	8.50
	96150		14.00	12.00
	96151		14.00	12.00
	96152		13.00	11.00
	96153		5.00	4.00
	96154		13.00	11.00
	96155		12.00	10.00

**NOTE:** Mental Health Clinics must use modifier "ZI" for the following HCPCS codes 96150, 96151, 96152, 96153, 96154 and 96155 when billing the Medicaid program.

<u>HCPCS CODE</u>	<u>MOD</u>	<u>FOLLOW UP-DAYS</u>	<u>MAXIMUM FEE ALLOWANCE</u>		<u>ANES. BASIC UNITS</u>
			<u>SPECIALIST</u>	<u>\$ NON-SPECIALIST</u>	
20526		0	13.00	11.00	3
20551		0	13.00	11.00	3
20552		0	13.00	11.00	3
20553		0	13.00	11.00	3
59001		0	47.00	40.00	4

**Deletions, effective for claims with dates of service on or after June 1, 2002**

**CODES DELETED**

93737  
 93738  
 26597  
 29815  
 29909