



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

NEWSLETTER

Volume 13 No. 6

February 2003

TO: Family Planning Clinics - For Action
 HMOs - For Information Only

SUBJECT: Increase in Reimbursement for Selected Services

EFFECTIVE: For claims with service dates on or after September 16, 2002

PURPOSE: To notify Medicaid/NJ FamilyCare (NJFC) fee-for-service (FFS) Family Planning Clinic providers of increases in reimbursement for selected services.

BACKGROUND: The Division of Medical Assistance and Health Services is pleased to announce that reimbursement for selected services listed below shall increase, effective September 16, 2002.

ACTION: For claims with service dates on or after September 16, 2002, the maximum fee allowance for the following HCPCS procedure codes shall increase as follows:

HCPCS CODE	MOD	MAXIMUM FEE ALLOWANCE
11976	WF	\$ 190.00
57452	WF	\$ 39.90
57454	WF	\$ 64.60
57511	WF	\$ 45.60
58300	WF	\$ 74.10
58301	WF	\$ 31.20
90782	WF	\$ 4.80
99201	WF	\$ 83.70
99202	WF	\$ 83.70
99203	WF	\$ 83.70
99203	WF 52	\$ 79.70
99204	WF	\$ 83.70
99204	WF 52	\$ 79.70
99205	WF	\$ 83.70
99211	WF	\$ 41.90

HCPCS CODE	MOD	MAXIMUM FEE ALLOWANCE
99211	WF 52	\$ 37.90
99212	WF	\$ 41.90
99212	WF 52	\$ 37.90
99213	WF	\$ 41.90
99213	WF 52	\$ 37.90
99214	WF	\$ 41.90
99214	WF 52	\$ 37.90
99215	WF	\$ 41.90
99215	WF 52	\$ 37.90
99395	WF	\$ 83.70
99395	WF 52	\$ 79.70
G0001	WF	\$ 3.40
Y7633	WF	\$ 95.00
Y7634	WF	\$ 47.50

If there are any questions regarding this Newsletter, please contact the Office of Utilization Management at (609) 588-4610.

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