



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

# NEWSLETTER

Volume 14 No. 51

October 2004

**TO:** Freestanding ESRD Providers - **For Action**  
Hospital-Based ESRD Providers - **For Information Only**  
Health Maintenance Organizations - **For Information Only**

**SUBJECT:** Epoetin Alfa, Recombinant  
(Erythropoietin; EPO)

**EFFECTIVE:** Claims with service dates on or after October 1, 2004

**PURPOSE:** To notify freestanding End Stage Renal Dialysis (ESRD) providers of the need to report HCPCS procedure code Q4055 and the EPO units provided, as well as, to notify providers of a change in reimbursement.

**BACKGROUND:** EPO claims are submitted to Unisys for payment using the UB-92 claim form using revenue codes 634 and 635.

**ACTION:** **Effective for claims with service dates on or after October 1, 2004:**

Freestanding ESRD Centers must continue to report Revenue Codes 634 (administration of less than 10,000 units) and 635 (administration of 10,000 or more units) on the UB-92 claim form when requesting EPO payments; as of October 1, 2004, ESRD Centers shall also report:

1. The HCPCS procedure code Q4055 in Field No. 44 (HCPCS/Rates) on the UB-92 claim form; and
2. The actual number of EPO units provided, expressed "per 1000" in Field 46. For example, if 10,000 EPO units were provided, "10" must be reported in Field 46.

**NOTE:** As of October 1, 2004, freestanding ESRD Center EPO reimbursement will be \$12.26 per 1000 units.

If you have any questions concerning this Newsletter, please do not hesitate to contact the Office of Utilization Management at (609) 588-2721, or Unisys Provider Services at (800) 776-6334.

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