



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

NEWSLETTER

Volume 19 No. 22

June 2009

TO: AIDS Community Care Alternative Programs – **For Action**
Health Maintenance Organizations - For Information Only

SUBJECT: Updates to the Local Procedure and Modifier Codes

EFFECTIVE: **Effective for claims with dates of service on or after July 1, 2009**

PURPOSE: To notify providers of **deletions of certain local procedure and modifier codes** for Medicaid and NJ FamilyCare fee-for-service covered services.

ACTION: Effective for claims with dates of service **on or after July 1, 2009**, the Division of Medical Assistance and Health Services will no longer accept certain New Jersey local procedure and modifier codes. Where there is "NO REPLACEMENT CODE" indicated, the local code has been deleted in its entirety.

CODES DELETED

TO REPORT, USE CODE

Z1830	NO REPLACEMENT CODE
Z1834	NO REPLACEMENT CODE
Z1835	NO REPLACEMENT CODE
Z1850	NO REPLACEMENT CODE
Z1851	NO REPLACEMENT CODE
Z1853	NO REPLACEMENT CODE

If you have any questions concerning this Newsletter, please do not hesitate to contact Michael A. Nuskey, located in the Division of Disability Services, at 1-609-984-5103.

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