



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

NEWSLETTER

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TO: Hospital Providers

SUBJECT: Reimbursement for End Stage Renal Disease (ESRD) Services Billed Using the Hospital's Provider Number

EFFECTIVE: May 7, 2012

PURPOSE: To make hospital providers aware of the regulations regarding reimbursement of ESRD services and to notify hospital providers of enhancements to the NJMMIS claim adjudication process.

BACKGROUND: In accordance with N.J.A.C 10:52-4.3, "All renal dialysis services for ESRD shall be reimbursed at one hundred percent of the base composite rate and shall include any add-on charge to the base composite rate approved by Medicare." Claims processed by the fiscal agent prior to May 7, 2012 have been subject to the cost-to-charge ratio for all revenue claims submitted and have not been processed in accordance with N.J.A.C.10:53-4.3.

ACTION: Claims for ESRD services submitted to Molina on or after May 7, 2012 will be reimbursed as follows. Claims with dates of service on or after January 1, 2011 with a Type of Bill 72X will be reimbursed for the ESRD bundled rate represented by a revenue code in the 8XX series, all other revenue codes will be denied for edit 1322 'Service/procedure included in composite rate'. Claims with dates of service prior to January 1, 2011 with a Type of Bill 72X will be reimbursed for the ESRD bundled rate represented by a revenue code in the 8XX series and any separately billable drug represented by a revenue code in the 63X series, all other revenue codes will be denied for edit 1322 'Service/procedure included in composite rate'.

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