



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

NEWSLETTER

Volume 6 No. 58

November 1996

TO: Hospitals - Chief Executive Officer

ROUTE TO: Accounting, Billing and Finance Offices

SUBJECT: 1996 HCFA Common Procedure Coding System (HCPCS)
Pertaining to Hospital Clinical Laboratory Service Codes

EFFECTIVE: Immediately

PURPOSE: To notify Medicaid providers of the additions to the 1996
Hospital Outpatient Laboratory Services , HCFA Common
Procedure Coding Systems (HCPCS) CPT-4.

ACTION: The New Jersey Medicaid program has added and amended
HCPCS procedure codes and their applicable Maximum Fee
Allowances to the procedure code file.

Attached to this Newsletter are the additions and amendments.

Hospitals should add the contents to Subchapter 11 of the Hospital Services
Manual (N.J.A.C. 10:52-11) - HCFA Common Procedure Coding System
(HCPCS) for Hospital Outpatient Laboratory Services.

N.J.A.C. 10:52-11.2

HCPCS Procedure Codes and Maximum Fee Allowance Schedule for Pathology/Laboratory

<u>HCPCS Code</u>	<u>Descriptions</u>	<u>Maximum Fee Allowance Total Fee</u>
1996 ADDITIONS		
80416	Renal vein renin stimulation panel	\$150.00
80417	Peripheral vein renin stimulation panel	\$ 50.00
81001	Urinalysis by dip stick automated with microscopy	\$ 1.20
85652	Sedimentation rate, erythrocyte automated	\$ 1.50
89250	Culture and fertilization of oocyte(s)	\$ 25.00
G0026	Fecal leukocyte examination	\$ 4.20
G0027	Semen Analysis	\$ 2.40

The following new temporary codes are to be used when a glucose tolerance test is performed on a device that is approved by the FDA for quantitative determination of glucose for use in the diagnosis and treatment of the diabetic patient (at this time, the only approved device in the marketplace is manufactured by Hemocue).

G0055	glucose; post dose (includes glucose)	\$ 3.00
G0056	glucose tolerance test (GTT) three specimens (includes glucose)	\$ 5.00
G0057	glucose tolerance test (GTT) each additional beyond three specimens (includes glucose)	\$ 1.00

1996 changes to Nomenclature

Procedure codes 80019-19 clinical chemistry tests	\$ 11.00
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The following new temporary codes are to be utilized when more than 19 automated lab tests are performed

G0058	Automated multichannel test; 20 clinical chemistry tests
G0059	Automated multichannel test; 21 clinical chemistry tests
G0060	Automated multichannel test; 22 clinical chemistry tests

If there are any questions regarding this Newsletter, please contact the Office of Health Service Administration, Division of Medical Assistance and Health Services, at (609) 588-2721.

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