



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

NEWSLETTER

Volume 7 No. 22

April 1997

TO: Vision Care Providers, Physicians-Ophthalmologist
Ambulatory Surgical Center (ASC) - FYI
Health Maintenance Organizations (HMO's) - FYI
Hospitals - FYI

SUBJECT: Changes in Medicaid Reimbursement for "Processing
Preserving, and Transporting Corneal Tissue," Procedure
Code V2785

EFFECTIVE: Claims with service dates on or after April 15, 1997

BACKGROUND: Currently, the New Jersey Division of Medical Assistance and Health Services (DMAHS) provides Medicaid coverage for processing, preserving, and transporting corneal tissue under procedure code V2785. Coverage of this procedure is limited to those services performed by an ophthalmologist in either a hospital setting, or Ambulatory Surgical Center (ASC). Current reimbursement for this procedure is \$500.00.

Due to changes in the marketplace which have resulted in significant increases in the cost of providing this procedure, the Division is changing the methodology used to determine Medicaid reimbursement for this service, and related prior authorization requirements.

ACTION: For claims with service dates on or after April 15, 1997, the maximum fee allowance of \$500.00 currently assigned to this procedure code is being discontinued. Providers may request reimbursement for "Processing, Preserving, and Transporting Corneal Tissue" by reporting procedure code **V2785** on the MC-9 optical appliance claim form. Reimbursement shall be based on its cost, as reported on a provider's laboratory invoice. A copy of the invoice must be attached to the MC-9 optical appliance claim form.

For claims with service dates on or after April 15, 1997, ophthalmologists must also request prior authorization for procedure code **V2785** by submitting a completed "Request for Prior Authorization of Optical Appliances" to:

State of New Jersey
Department of Human Services
Division of Medical Assistance and Health Services
Office of Health Services Administrator
Chief Vision Care Consultant
Unit #16
CN 712
Trenton, N.J. 08625-0712

It is important to note that this change in billing procedure will have no impact on the crossover process currently used by the State to determine Medicaid payments for deductible and co-insurance related to services provided to dually-eligible Medicaid/Medicare beneficiaries.

Also note, this procedure is not to be billed by ophthalmologists when performed in a hospital.

If you have any questions, regarding this Newsletter, please contact the Chief Vision Care Consultant at (609) 588-2745.

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