



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

# NEWSLETTER

Volume 7 No. 37

July 1997

**TO:** Physicians, Family Planning Clinics, Federally Qualified Health Centers, Certified Nurse Midwives, Certified Nurse Practitioners/Clinical Nurse Specialists, Health Maintenance Organizations (HMOs), and Hospitals - Chief Executive Officer

**ROUTE TO:** Hospital Outpatient Department; and the Obstetrical and Gynecology Clinical Departments; and Billing, Finance, and Accounting Offices

**SUBJECT:** Procedure Code J0696 (Ceftriaxone 250mg/ml) and Sexually Transmitted Diseases (STDs)

Procedure Code 90782 (Therapeutic or Diagnostic Injection (subcutaneous or intramuscular))

**EFFECTIVE:** Immediately

**PURPOSE:** To inform providers of additional information pertaining to Newsletter Volume 6 No. 30 dated July 1996.

**BACKGROUND:** The Medicaid Newsletter Volume 6 No. 30, dated July 1996, contains detailed information pertaining to the New Jersey Medicaid policy regarding AIDS/HIV and STD blood testing, and pre-and post-test counseling as a family planning service when provided to women and men in conjunction with a Family Planning encounter.

The information in this Newsletter has not changed and providers are encouraged to reference this Newsletter. However, we are now adding the following additional procedure to this process.

**ACTION:** As a follow-up to Newsletter Volume 6 No. 30, dated July 1996, Procedure Code J0696 (Ceftriaxone 250mg/ml), which is used for the treatment of STD, can be considered a family planning service if the procedure meets the description in the background of Newsletter Volume 6 No. 30.

Also, Procedure Code 90782 (Therapeutic or diagnostic injection; subcutaneous or intramuscular) can also be considered a family planning service if the injectable drugs can be billed as a family planning procedure as defined in Newsletter Volume 6 No. 30.

**PLEASE NOTE:** When billing for procedure code 90782, please use the modifier WF which relates to family planning services.

Providers must resubmit all unpaid claims retroactive back to January 1996, with proof of timely filing to be reimbursed for this procedure code. These claims are also subject to all other edits.

Providers must follow the procedures listed in 1 through 6 in Newsletter Volume 6 No. 30 in order to secure reimbursement for these services.

For information or questions concerning this Newsletter, please contact Constance Thomas, Administrator, Bureau of Policy and Intergovernmental Relations, Division of Medical Assistance and Health Services, at (609) 588-2629.

For information or questions concerning this Newsletter as it applies to a beneficiary enrolled in managed care, please contact Margaret Soltis at (609) 588-2705.

For information or questions concerning this Newsletter as it applies to a beneficiary enrolled in Garden State Health Plan, please contact the GSHP Hotline at 1-800-525-0047, or the GSHP at 1-609-588-3580.

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