



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

NEWSLETTER

Volume 8 No. 1

January 1998

TO: Physicians, Independent Clinics (including Federally Qualified Health Centers) and Hospitals - Chief Executive Officer

ROUTE TO: Hospital Outpatient Department, Accounting, Billing, and Finance Offices

SUBJECT: General Assistance Beneficiaries and the Surgical Second Opinion Program

EFFECTIVE: Immediately

BACKGROUND: General Assistance (GA) program beneficiaries **are not** covered for services rendered in a hospital inpatient setting or an outpatient department, including the professional services provided by a physician in those settings. Therefore, there is no mandatory surgical second opinion requirement for services provided to GA beneficiaries in the hospital inpatient or outpatient settings.

This Newsletter **does not apply to or change** the policies for the Surgical Second Opinion Program for regular Medicaid beneficiaries. For reference for the Surgical Second Opinion Program for regular Medicaid beneficiaries, see Newsletters, Volume 4, No. 41, August 1994, and Volume 6, Nos. 28 and 29, June 1996.

ACTION: General Assistance beneficiaries are required to obtain a mandatory surgical second opinion for a limited number of surgical procedures when the GA beneficiary is 19 years of age or older and the surgical second opinion procedures are provided in an Ambulatory Surgical Center (ASC). The following is a list of HCPCS codes which require a surgical second opinion for a GA beneficiary over 19 years of age when provided in an ASC:

| | |
|-------|-------|
| 49505 | 49565 |
| 49520 | 49570 |
| 49525 | 49585 |
| 49550 | 49590 |
| 49555 | 56316 |
| 49560 | 56317 |

For further information or questions, please contact the Division of Medical Assistance and Health Services at (609) 588-2724.

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