



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

# NEWSLETTER

Volume 9 No. 32

June 1999

**TO:** Medical Suppliers – For Action  
Health Maintenance Organizations – For Information Only

**SUBJECT:** 1999 HCFA Common Procedure Coding System (HCPCS)  
Pertaining to Medical Supply Services

**EFFECTIVE:** For claims with service dates on or after January 1, 1999

**PURPOSE:** To notify Medicaid providers of additions and deletions to the 1999 HCFA Common Procedure Coding System (HCPCS).

**ACTION:**

- (1) The New Jersey Medicaid and the NJ KidCare programs have **added** new HCPCS procedure codes and related maximum fee allowances for certain Medical Supply services, effective for claims with service dates on or after **January 1, 1999**.
- (2) Certain HCPCS procedure codes have been **deleted**, effective for claims with service dates on or after **June 30, 1999**.

Attached to this Newsletter are these additions and deletions to the HCFA Common Procedure Coding System (HCPCS) for medical supply services. Please **add** these attachments to your Medical Supply Services Manual, Subchapter 2 (HCPCS).

If you have any questions regarding this Newsletter, please contact the Medicaid Office of Health Service Administration at (609) 588-2724.

**Attachment:** Supplement to Subchapter 2, Medical Supply Services Manual.

**RETAIN THIS NEWSLETTER NUMERICALLY BEHIND THE NEWSLETTER TAB  
(BLUE TAB MARKED "5")**

**HCPCS Procedure Codes and Maximum Fee Allowance  
Schedule for Medical Supplies and Durable Medical Equipment**

**1999 ADDITIONS**

<u><b>HCPCS CODE</b></u>	<u><b>DESCRIPTION</b></u>	<u><b>MAXIMUM FEE ALLOWANCE</b></u>
A4614	Peak expiratory flow rate meter, hand held	B.R.
A5200	Percutaneous catheter/tube anchoring device, adhesive skin attachment	B.R.
A6154	Wound pouch, each	B.R.
A6200	Composite dressing, pad size 16 sq. in. or less, without adhesive border, each dressing	B.R.
A6201	Composite dressing, pad size more than 16 sq. in. but less than or equal to 48 sq. in., without adhesive border, each dressing	B.R.
A6202	Composite dressing, pad size more than 48 sq. in., without adhesive border, each dressing	B.R.
A6209	Foam dressing, wound cover, pad size 16 sq. in. or less, without adhesive border, each dressing.	B.R.
A6219	Gauze, non-impregnated, pad size 16 sq. in. or less, with any size adhesive border, each dressing	B.R.
A6224	Gauze, impregnated, other than water or normal saline, pad size more than 48 sq. in., without adhesive border, each dressing	B.R.
A6228	Gauze, impregnated, water or normal saline, pad size 16 sq. in. or less, without adhesive border, each dressing	B.R.

<u>HCPCS CODE</u>	<u>DESCRIPTION</u>	<u>MAXIMUM FEE ALLOWANCE</u>
K0456	Hospital bed, heavy duty, extra wide, with any type side rails, with mattress	B.R.
K0457	Extra wide/heavy duty commode chair, each	B.R.
K0458	Heavy duty walker, without wheels, each	B.R.
K0459	Heavy duty wheeled walker, each	B.R.
K0460	Power add-on, to convert manual wheelchair to motorized wheelchair, joystick control	B.R.
K0461	Power add-on, to convert manual wheelchair to power operated vehicle, tiller control	B.R.

**1999 DELETIONS**

K0154  
K0209  
K0219  
K0224  
K0228