



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

# NEWSLETTER

Volume 9 No. 54

September 1999

- TO:** Independent Clinical Laboratories - **For Action**  
Hospitals - **For Action**  
Health Maintenance Organizations - **For Information Only**
- SUBJECT:** Adjustments to Reimbursement Amounts for Specified HCPCS Procedure Codes for Laboratory/Pathology Services
- EFFECTIVE:** For claims with dates of service on or after October 1, 1999
- PURPOSE:** To notify providers of reimbursement amount changes for Medicaid and NJ KidCare covered pathology/laboratory services.
- ACTION:** The New Jersey Division of Medical Assistance and Health Services (DMAHS) has lowered the reimbursement amount of specified HCPCS procedure codes. This was done in accordance with N.J.A.C. 10:61-1.7, which states that Medicaid and NJ KidCare maximum fee allowances for covered laboratory services must not exceed fees established for these same services when covered by the Medicare program. In response to decreases in Medicare fee allowances for laboratory services, the Division is adjusting the maximum fee allowances for these services.

A list of the effected codes, with the old and new reimbursment amounts listed, is attached to this Newsletter.

Independent Clinical Laboratories, please **add** this attachment to Subchapter 3 in your Independent Clinical Laboratories Manual (N.J.A.C. 10:54).

Hospitals, please retain these attachments with this Newsletter.

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

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

**10:61-3.2 HCPCS procedure codes and maximum fee allowance schedule for Level I**

**1999 Reimbursement Amount Reductions**

(old reimbursement amounts are paid for claims with dates of service prior to October 1, 1999, new rates are effective for claims with dates of service on or after October 1, 1999,)

<u>HCPCS Code</u>	<u>MOD</u>	<u>Maximum Fee Allowance</u>		<u>Prof. Comp.</u>
		<u>Old</u>	<u>New</u>	
80168		24.50	18.00	
80185		19.00	14.65	
80412	BR		364.36	
80418	BR		640.73	
80439		100.00	74.27	
81007		3.82	2.84	
82017		24.00	18.60	
82085		13.75	11.00	
82108		38.00	28.17	
82131		24.00	18.64	
82136		24.00	18.64	
82139		24.00	18.64	
82154		40.00	31.88	
82160		38.00	27.65	
82232		24.50	17.80	
82261		24.00	18.64	
82331		7.50	5.72	
82379		24.00	18.64	
82415		18.50	15.00	
82441		8.92	8.00	
82482		11.27	10.00	
82495		30.00	27.00	
82507		40.00	37.00	
82600		27.50	25.00	
82615		11.50	11.00	
82626		37.00	29.60	
82627		33.00	29.00	
82633		43.50	38.52	
82638		18.00	15.20	
82652		55.00	47.87	
82690		25.00	21.50	
82742		29.50	26.55	
82757		25.00	22.50	
82775		30.00	27.00	
82787		49.00	39.20	
<u>HCPCS Code</u>	<u>MOD</u>	<u>Maximum Fee Allowance</u>		<u>Prof. Comp.</u>
		<u>Total Fee</u>		

		<u>Old</u>	<u>New</u>	
82938		26.00	22.00	
82943		20.00	19.00	
82975		22.00	19.80	
82979		10.00	9.00	
83008		24.00	21.60	
83019		BR	48.00	
83030		12.00	10.00	
83071		10.00	9.00	
83080		24.00	19.20	
83500		34.00	30.00	
83505		40.00	30.00	
83527		22.00	16.11	
83605		15.00	13.50	
83719		17.00	15.50	
83785		35.00	30.00	
83805		26.00	23.00	
83858		22.00	19.80	
83866		15.00	12.00	
82873		25.00	20.00	
83890		5.71	5.00	
83891		5.71	5.00	
83892		5.71	5.00	
83893		5.71	5.00	
83894		5.71	5.00	
83896		5.71	5.00	
83897		5.71	5.00	
83898		30.00	20.00	
83901		30.00	20.00	
83902		25.23	19.00	
83903		30.00	20.00	
83904		30.00	20.00	
83905		30.00	20.00	
83906		30.00	20.00	
83912		31.39	5.54	
83930		9.50	9.00	
83935		9.90	9.00	
83937		65.00	40.00	
84066		14.00	12.60	
84081		24.00	20.00	
84087		15.00	13.50	
84126		37.00	34.50	
84140		50.00	27.50	
84143		60.00	30.00	
<u>HCPCS</u>		<u>Maximum Fee Allowance</u>		<u>Prof.</u>
<u>Code</u>	<u>MOD</u>	<u>Total Fee</u>		<u>Comp.</u>
		<u>Old</u>	<u>New</u>	

84153		26.00	24.50	
84154		26.00	24.50	
84181		25.00	20.00	
84182		26.00	23.50	
84207		40.00	32.00	
84210		16.00	12.80	
84228		17.00	13.60	
84252		30.00	24.00	
84255		37.00	29.60	
84260		44.00	35.20	
84375		29.00	23.20	
84376		14.00	7.00	
84377		14.00	7.00	
84392		7.00	5.60	
84402		38.00	30.40	
84425		32.00	29.00	
84443		24.00	23.00	
84446		21.00	16.80	
84449		30.00	24.00	
84466		19.00	15.20	
84478		8.30	7.30	
84512		BR	10.00	
84586		50.00	48.00	
84588		49.50	45.00	
84630		16.00	15.00	
85220		25.00	24.00	
85230		25.00	24.00	
85240		25.00	24.00	
85244		29.00	28.00	
85250		27.00	26.00	
85260		26.00	24.00	
85270		26.00	24.00	
85292		28.00	26.00	
85293		28.00	26.00	
85301		16.00	14.00	
85302		17.00	16.00	
85305		17.00	16.00	
85360		12.00	11.00	
85421		15.00	14.00	
85441		6.00	5.00	
85520		19.00	18.00	
85525		17.00	16.00	
85549		28.00	25.00	
<b><u>HCP</u></b>		<b><u>Maximum Fee Allowance</u></b>		<b><u>Prof.</u></b>
<b><u>Code</u></b>	<b><u>MOD</u></b>	<b><u>Total Fee</u></b>		<b><u>Comp.</u></b>
		<b><u>Old</u></b>	<b><u>New</u></b>	
86147		38.00	35.00	
86148		38.00	22.00	

86215		18.50	18.00
86235		25.00	24.00
86291		15.00	14.00
86311		26.00	24.00
86316		30.00	28.00
86329		20.00	19.00
86334		31.20	30.00
86588		13.20	13.00
86618		25.00	23.00
86664		23.00	21.00
86687		12.00	11.60
86701		13.00	12.00
86703		21.00	18.00
86717		18.00	16.00
86790		BR	17.00
86807		55.00	54.00
87175		15.00	14.00
87178		24.00	22.00
87179		24.00	23.00
87186		13.00	11.00
87250		28.00	25.50
88162		60.00	59.00
88162 26		NA	34.61
88162 TC		NA	12.90
88150		43.50	26.60
88150 26		NA	19.00
88150 TC		NA	7.00
88182		300.00	64.11
88182 26		NA	45.05
88182 TC		NA	19.07
88262		184.00	172.00
88264		184.00	172.00
88280		37.00	34.00
88291		31.39	26.82
88300		7.00	6.55
88302		21.00	20.85
88302 26		15.00	10.80
88302 TC		NA	10.05
88304		26.00	26.00
88304 26		19.00	16.67
88304 TC		NA	9.33

<u>HCPCS</u> <u>Code</u>	<u>MOD</u>	<u>Maximum Fee Allowance</u> <u>Total Fee</u>	<u>Prof.</u> <u>Comp.</u>
88348		184.00	144.81
88348 26		151.00	98.22
88348 TC		NA	46.59
88349		184.00	88.70

88349 26	151.00	56.06
88349 TC	NA	32.63
88350	20.00	16.61
88371	32.00	30.00
88372	33.00	31.00

**1999 Reimbursement Amount Corrections**

The old reimbursement amounts are paid for claims with dates of service prior to October 1, 1999, new rates are effective for claims with dates of service on or after October 1, 1999. These HCPCS originally had the fee schedules reversed.

<u>HCPCS Code</u>	<u>MOD</u>	<u>Maximum Fee Allowance</u>		<u>Prof. Comp.</u>
		<u>Old</u>	<u>New</u>	
83013		48.00	9.00	
83014		9.00	48.00	