



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

NEWSLETTER

Volume 9 No. 57

October 1999

TO: Physicians (For Action)
Hospitals (For Action)
Health Maintenance Organizations (For Information Only)

SUBJECT: Updates to the HCFA Common Procedure Coding System (HCPCS)

EFFECTIVE: Additions effective for claims with dates of service on or after January 1, 1999, unless otherwise indicated on the attachments

Adjustments effective for claims with dates of service on or after October 1, 1999, unless otherwise indicated on the attachments

PURPOSE: To notify physicians of additions and deletions to the 1999 HCFA Common Procedure Coding System (HCPCS) and reimbursement amount changes for Medicaid and NJ KidCare covered medical, surgical, radiological/ultrasound, and pathology/laboratory services.

ACTION: The New Jersey Division of Medical Assistance and Health Services (DMAHS) has added new HCPCS procedure codes and their applicable maximum fee allowances to the Physician Services Manual. These procedure codes reflect physician services and maximum fee allowances which are reimbursable to physicians and physician groups by the New Jersey Medicaid and NJ KidCare programs. Providers should use these procedure codes when submitting claims for processing.

In addition, the Division is deleting certain HCPCS procedure codes for medical, surgical, pathology/laboratory and radiological/ultrasound services for claims with service dates on or after October 1, 1999. These procedure codes are listed separately on each attachment based on the service specialty.

Specified existing HCPCS procedure codes, relating to medicine, surgical services and pathology/laboratory services have had their reimbursement amounts adjusted. These reimbursement amounts are effective for claims with dates of service on or after October 1, 1999. Some of the fees were adjusted upward because the current practice of medicine may have both a technical component and a professional component, which was not the case when the composite fees were originally set. In other cases, we are printing fees that previously have been paid; however, this information was

inadvertantly excluded from the earlier HCPCS code fee schedule. Some of the fees were adjusted downward consistent with the Medicare fee schedule for the specified HCPCS. In some cases, we are also providing the Anesthesia Basic Units (ABUs) for specified HCPCS which were also inadvertently missing from previous publications.

Attachments to this Newsletter include:

- Additions/deletions to N.J.A.C. 10:54-9.4, HCPCS procedure codes and maximum fee allowances for Medicine;
- Adjusted reimbursement amounts for specified HCPCS procedure codes at N.J.A.C. 10:54-9.4;
- Additions/deletions to N.J.A.C. 10:54-9.5, HCPCS procedure codes and maximum fee allowances for Surgery;
- Reduced reimbursement amounts for specified HCPCS procedure codes at N.J.A.C. 10:54-9.5, (HCPCS procedure codes and maximum fee allowances for Surgery);
- Additions/deletions to N.J.A.C. 10:54-9.6, HCPCS procedure codes and maximum fee allowances for Radiology/Ultrasound; and
- Additions/deletions to N.J.A.C. 10:54-9.7, HCPCS procedure codes and maximum fee allowances for Pathology/Laboratory with a notation of specified HCPCS which have been adjusted since the distribution of Medicaid Newsletter Vol. 9, No. 51, dated August 1999.

Physicians, please **add** these attachments to Subchapter 9 (dated 2/20/96) in your Physician Services 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")**

10:54-9.4 HCPCS Procedure Codes and Maximum Fee Schedule for Medicine

<u>IND</u>	<u>HCPCS Code</u>	<u>1999 Additions</u>		<u>Anes. Basic Units</u>
		<u>Specialist</u>	<u>Non-Specialist</u>	
	92135	20.00	18.00	5
	92135 26	12.00	10.00	
	92135 TC	8.00	8.00	
	93561 TC	13.00	13.00	
	93562 TC	7.00	7.00	
	93571	146.00	138.00	
	93571 TC	92.00	92.00	
	93571 26	54.00	46.00	
	93572	135.00	129.00	
	93572 TC	92.00	92.00	
	93572 26	43.00	37.00	
	94014	15.00	14.00	
	94015	6.00	6.00	
	94016	9.00	8.00	
	94621	BR	BR	
	94621 TC	BR	BR	
	94621 26	BR	BR	
	95970	14.00	12.00	
	95971	20.00	17.00	
	95972	37.00	32.00	
	95973	24.00	20.00	
	95974	73.00	62.00	
	95975	44.00	38.00	
N	99298	45.00	40.00	

1999 Reimbursement Amount Adjustments

(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>IND</u>	<u>HCPCS Code</u>	<u>Specialist</u>		<u>Non-Specialist</u>		<u>Anes. Basic Units</u>
		<u>Old</u>	<u>New</u>	<u>Old</u>	<u>New</u>	
	93561	26.00	39.00	NA	35.00	7
	93561 26	26.00	26.00	NA	22.00	
	93562	14.00	21.00	NA	19.00	7
	93562 26	14.00	14.00	NA	12.00	

10:54-9.5 HCPCS Procedure Codes and Maximum Fee Schedule for Surgery

1999 Additions

<u>IND</u>	<u>HCPCS</u> <u>CODE</u>	<u>Follow-up</u>		<u>Maximum Fee Allowance</u>		<u>Anes. Basic</u>
		<u>MOD</u>	<u>Days</u>	<u>Specialist</u>	<u>Non-Specialist</u>	<u>Units</u>
	15001		0	\$ 40.00	\$ 34.00	0
	15351		0	54.00	46.00	0
	15401		0	50.00	43.00	0
	27347		90	214.00	182.00	4
	28289		90	228.00	194.00	3
E N	31623		0	113.00	96.00	6
E N	31624		0	113.00	96.00	6
	31643		0	120.00	102.00	6
	32001		0	120.00	102.00	6
	35500		0	98.00	83.00	0
	35681		0	352.00	299.00	0
	35682		0	411.00	349.00	0
	35683		0	469.00	399.00	0
	36823		30	214.00	182.00	6
	36831		30	194.00	165.00	6
	36833		30	226.00	192.00	6
E	38792		0	114.00	97.00	3
	45126		90	783.00	666.00	8
	56321		15	396.00	337.00	6
	57106		90	200.00	170.00	4
	57107		90	428.00	364.00	4
	57109		90	532.00	452.00	4
	57111		90	532.00	452.00	4
	57112		90	581.00	494.00	4
	67220		90	272.00	236.00	6
	69990		0	170.00	145.00	0

10:54-9.5 HCPCS Procedure Codes and Maximum Fee Schedule for Surgery

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,)

IND	HCPCS CODE	Follow-up MOD Days	Maximum Fee Allowance		Anes. Basic		Units
			Specialist	Non-Specialist	Old	New	
S	22840	90	<u>Old</u> 936.00	<u>New</u> 583.00	NA	496.00	10
S	22842	90	1000.00	603.00	NA	513.00	10
S	22843	90	1456.00	685.00	1237.00	582.00	10
S	22844	90	1768.00	887.00	1503.00	754.00	10
S	22845	90	1350.00	556.00	NA	473.00	10
S	22846	90	1300.00	632.00	1105.00	537.00	10
S	22847	90	1456.00	701.00	1237.00	596.00	10
S	22848	90	884.00	387.00	751.00	329.00	10
	22851	90	988.00	405.00	840.00	344.00	10
	22855	90	1350.00	722.00	NA	613.00	10

1999 Deletions

11731	61130
16040	61712
16041	63690
16042	63691
57108	64830
61106	

**10:54-9.6 HCPCS Procedure Codes and Maximum Fee Schedule for
Radiology/Ultrasound**

1999 Additions

<u>IND</u>	<u>HCPCS Code</u>	<u>MOD</u>	<u>Maximum Fee Allowance Total Fee</u>	<u>ABU</u>
	76006		12.00	
	76006	TC	5.00	
	76006	26	7.00	
	76977		42.00	
	76977	26	11.00	
	76977	TC	31.00	
	77380		BR	
	77381		BR	
	78020		24.00	
	78020	26	14.00	
	78020	TC	10.00	
	78206		117.00	3
	78206	26	27.00	
	78206	TC	90.00	
	78494		117.00	3
	78494	26	26.00	
	78494	TC	91.00	
	78496		60.00	3
	78496	26	18.00	
	78496	TC	42.00	
	78588		66.00	0
	78588	26	20.00	
	78588	TC	46.00	

1999 Deletions

71038
71038 26
71038 TC
74405
74405 26
74405 TC
78017
78017 26
78017 TC

**10:54-9.7 HCPCS Procedure Codes and Maximum Fee Schedule for
Pathology/Laboratory**

1999 Additions

<u>IND</u>	<u>HCP</u>	<u>CS</u>	<u>MOD</u>	<u>Maximum Fee Allowance</u>	<u>Prof.</u>
	<u>Code</u>			<u>Total Fee</u>	<u>Comp.</u>
	82016			\$ 12.90	
	82127			12.90	
	82247			3.00	
	82248			4.50	
	82492			21.50	
	82541			4.40	
	82542			21.50	
	82543			21.50	
	82544			21.50	
	82657			21.50	
	82658			21.50	
	82726			21.50	
	82731			6.50	
	83021			21.50	
	83716			22.00	
	83788			4.40	
	83789			4.40	
	83919			19.00	
	84378			14.00	
	84379			14.00	
	85046			2.75	
	88143			18.00	
	88144			18.00	
	88145			18.00	
	88147			6.00	
	88148			6.00	
	88153			6.00	
	88154			6.00	
	88164			6.00	
	88165			6.00	
	88166			6.00	
	88167			6.00	
	88240			7.75	
	88241			7.75	
	88249			230.00	
	88271			16.00	
	88273			35.00	
	88274			45.00	
	88275			55.00	
	88291			31.39	
10:54-9.7	HCP	CS	Procedure Codes	and Maximum Fee	Schedule for
	Pathology/Laboratory				

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>HCP</u> <u>CS</u> <u>Code</u>	<u>MOD</u>	<u>Maximum Fee Allowance</u>		<u>Prof.</u> <u>Comp.</u>
		<u>Total Fee</u>	<u>Total Fee</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>HCP</u> <u>CS</u> <u>Code</u>	<u>MOD</u>	<u>Maximum Fee Allowance</u>		<u>Prof.</u> <u>Comp.</u>
		<u>Total Fee</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>HPCPS</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	
<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>	
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>HPCPS</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>	
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 from January 1, 1999 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	

10:54-9.7 HCPCS Procedure Codes and Maximum Fee Schedule for Pathology/Laboratory

1999 Deletions

82130
82250
83019
83717
85029
85030
88156
88158
88250