

- ii. QUALIFIER: HCPCS procedure codes 99201 and 99202 are exceptions to the requirements outlined in the qualifier for the initial visit. For codes 99201 and 99202, the provider is expected to follow the qualifier applied to routine visit or follow-up care visit for reimbursement purposes.
- iii. QUALIFIER: As described at N.J.A.C. 10:58A-1.4, Evaluation and Management services pertain to patients presenting with symptoms, and as such, exclude Preventive Health Care. Preventive services for patients including newborns through persons 20 years of age are billed under EPSDT, when the procedure requirements are met, as described at N.J.A.C. 10:58A-2.10. Preventive Health Care for adults is described below, at Section (j) of this Chapter.

99203, 99204

Office or other outpatient services: new patient

99221

Hospital inpatient services: initial hospital care;

- iv. QUALIFIER: When reference is made in the CPT-4 manual to the procedures listed above, the intent of Medicaid is to consider this service as the Initial Visit.
- v. QUALIFIER: Reimbursement for an initial office visit or initial residential health care facility visit will be disallowed, if a preventive medicine service, EPSDT examination or office consultation were billed within a twelve month period by a practitioner, group, shared health care facility, or practitioners sharing a common record.
- vi. QUALIFIER: In reference to a nursing facility or hospital, the Initial Visit concept will still apply for reimbursement purposes. Subsequent readmissions to the same facility may be reimbursed as Initial Visits, if the readmission occurs more than 30 days from a previous discharge from the same facility by the same provider. When the readmission occurs within 30 days from a previous discharge, the provider shall bill the relevant HCPCS procedure codes specified under the headings Subsequent Hospital Care or Subsequent Nursing Facility Care.
- vii. QUALIFIER: Initial Hospital Visit during a single admission will be disallowed to the same practitioner, group, shared health care facility, or practitioners sharing a common record who submit a claim for a consultation and transfer the patient to their service.

2. Follow-up visit:

99212, 99213, 99214

Office or other outpatient services: established patient; 99231, 99232

Hospital inpatient services: subsequent hospital care; 99313

Nursing facility services: subsequent nursing facility care; 99333

Domiciliary, rest home or custodial care services: established patient; and

99351, 99352

Home visit.

- i. QUALIFIER: When reference is made in the CPT manual to the services specified above, the intent of Medicaid is to consider this service as the Routine Visit or Follow-Up Care visit. The setting could be office, hospital, nursing facility or residential health care facility.

(i) Preventive Medicine Services: Annual Health Maintenance Examination

<u>New Patient</u>	<u>Established Patient</u>
99382 AV	99392 AV
99383 AV	99393 AV
99384 AV	99394 AV
99385 AV	99395 AV
99386 AV	99396 AV
99387 AV	99397 AV

QUALIFIER: Preventive medicine services codes (new patient) 99382, 99383, 99384, 99385, 99386, and 99387 may only be billed once within 12 months when the recipient is seen by the same practitioner, group of practitioners sharing a common record, or member(s) of a shared health care facility. These codes will also be automatically denied for payment when used following an EPSDT examination (procedure code W9820) performed within the preceding 12 months.

QUALIFIER: Preventive medicine services codes (established patient) 99392, 99393, 99394, 99395, 99396 and 99397 may be used only once in a 12-month period for any individual over 2 years of age. For well-child care provided to children under the age of two, it is suggested that the provider bill for an EPSDT examination.

QUALIFIER: Preventive medicine services code 99392 may be used up to 5 times during the patient's first year of life and up to 3 times during the patient's second year of life, respectively, in accordance with the periodicity sched-



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