NJ Medicaid Urine Drug Testing Policy FAQs

Q – What is the new policy?

A – The new policy changes billing procedures related to presumptive drug screening and definitive (confirmation) drug testing.

Q – Who does the policy affect?

A – All Physicians, Advanced Nurse Practitioners, Independent Clinics- Drug/Alcohol, and Independent Laboratories that treat NJ Medicaid beneficiaries

Q – When does the new policy take effect?

A – The new policy affects all claims submitted on or after 4/1/2021.

How will it affect your program?

Q – Which CPT codes are no longer covered?

A – Definitive (confirmation) testing (G0481, 8-14 drug classes, G0482, 15-21 drugs classes, G0483, 22+ drug classes).

Q – Which CPT codes are still available for definitive testing (confirmations)?

A – G0480 (1-7 drug classes) will be the only option for definitive (confirmation) testing.

- Can not be performed on the same date of service as the presumptive drug screen
- Must be performed within 7 days of a previous positive presumptive drug screen

Q – What are the new frequency limits for presumptive testing (screens)?

A – 1 urine toxicology sample per date of service and no more than 10 urine toxicology samples per rolling 30 day period.

• You can not order a screen and confirmation on the same day

Q – What are the new frequency limits for definitive testing (confirmations)?

A-1 urine toxicology sample per date of service and no more than 2 urine toxicology samples per rolling 30 day period.

- You cannot order a confirmation without a positive screen
- This eliminates your ability to test for drugs that are not commercially available as an EIA screening methodology (see list below)
- Q Can I order a definitive test (confirmation) to confirm a negative presumptive test (screen)?
- A A definitive test (confirmation) after a negative presumptive (screen) is not allowed.
- Q Can I just order a definitive test (confirmation) without a presumptive test (screen)?
- A No, claims billed by independent labs for a definitive drug test will not be allowed when a previously paid claim for a presumptive drug test is not found within seven (7) days prior to the service date of the definitive drug claim.
 - It is unclear if a confirmation on a positive screen can be performed on the original urine toxicology sample or if an additional urine toxicology sample collected on a different day is required.
- Q Can I order a definitive test (confirmation) and a presumptive test (screen) on the same day?
- A No, claims for a definitive drug test will not be allowed when a claim for a presumptive drug test is found for the same provider, same beneficiary and the same service date.
- Q What is a blanket order?
- A A blanket order is defined as test requests that are identical orders for all patients in a clinician's practice without individualized decision making at every visit.
- Q Are blanket orders allowed?
- A No, blanket orders are not allowed.
- Q Why do we need to comply with the NJ Medicaid policy changes?

A – If policy changes (including frequency limits) are not complied with, it will result in non-payment and possible audits for all stakeholders.

Q – Who can I contact with my questions and concerns about this policy?

A - Please contact the Division of Medical Assistance, Office of the Medical Director, at 609-588-2739.

Tests not commercially available as EIA screens

Tests not commercially available as LIA screens	
FENTANYL EXPANDED Acetyl fentanyl	
Acetyl norfentanyl	
Acryl fentanyl	
Alfentanil	
Benzyl carfentanil	
Benzyl fentanyl	
Butyryl (or Iso Butyryl) fentanyl	
Butyryl norfentanyl	
Carfentanil	
Despropionyl para-Flu orofentanyl	
Furanyl fentanyl	
Furanyl norfentanyl	
Metho xyacetyl fentanyl	
Norcarfentanil	
Norsufentanil	

Ocfentanil

Remifentanil

Sufentanil

Thienyl fentanyl

Taleryl fentanyl

4-ANPP
TAPENTADOL
Tapentadol
SEDATIVE HYPNOTICS

Zolpidem Metabolite

Zaleplon

SKELETAL MUSCLE RELAXANTS

Cyclobenzaprine

METHYLPHENIDATE

Ritalinic Acid

Methylphenidate

PREGABLIN

Pregabalin

GABAPENTIN

Gabapentin

KETAMINE

Ketamine

OPIOIDS AND OPIATE ANALOGS

Meperidine

Normeperidine

Naloxone

Naltrexone

Dextromethorphan ANTIDEPRESSANTS, SEROTONERGIC Fluoxetine
Paroxetine
Sertraline
Duloxetine ANTIDEPRESSANTS, OTHER Venlafaxine
Bupropion SYNTHETIC STIMULANTS Mephedrone
Methylone
Methedrone
3,4-methylendioxypyrovalerone
Buphedrone SYNTHETIC STIMULANTS EXPANDED (BATH SALTS) 2,5-Dimethoxy-4-ethylphenethyl amine
25C-NBOMe
25I-NBF
25I-NBMD

25I-NBMD
25I-NBOH
25I-NBOMe
3,4-Dimethylmethcathinone (3,4-DMMC)
3,4-Dimethylmethcathinone Norephedrine Metabolite

3,4-Methylenedioxypyrovalerone HCI (MDPV)
3-Fluoromethcathinone
4-Bromo-2,5-dimethoxyphenethyl amine
4-Chloro-2,5-Dimethoxyphenethylamine
4-Ethylmethcathinone
4- Fluoromethcath inon
4-Methylethcathinone
alpha-PVP (alpha-Pyrrolidinova lerophenone)
Methedrone
Norpseudoephedrine Metabolite
N-Ethylcathinone
N-Ethylcathinone Ephedrine Metabolite
Pentedrone ANTI-PSYCHOTICS Quietapine
Risperidone
Aripiprazole
Chlorpromazine
Fluphenazine
Haloperidol
Lurasidone
Clozapine
Olanzapine

Promethazine

Trifluoperazine

Ziprasidone
CANNABIDIOL
Cannabidiol (CBD)

Cannabidivarin (CBDV)

Cannabidivarin (CBDV)

Cannabidivarinic Acid (CBDA)

BLOOD PRESSURE

Lofexedine

Clonidine
ANTIHISTAMINES
Cetirizine

Hydroxyzine
SYNTHETIC OPIATES
nor-W-18

U-47700

W-15

W-18

MT-45

N-desmethyl-U47700

SEDATIVE

Gamma-Hydroxybutyrate

Selective Serotonin Reuptake Inhibitor (SSRI)-

Escitalopram

Anxiolytic

Buspirone

HIV antiviral

Escitalopram

Tenofovir

Emtricitabine