

Important information about Billing and Coding



SAMPLE CLAIM FORM

Physician Office

(claim form CMS 1500/electronic equivalent 837P)¹

This section provides healthcare providers guidance for submitting claims for the administration of FENSOLVI in the physician office

J-code: J1951

Descriptions: Injection, leuprolide acetate for depot suspension, 0.25 mg

Billable Unit: 0.25 mg

Units: 180

1

LINE ITEM 24-A²

Shaded area above the drug line item

Enter the appropriate 11-digit National Drug Code (NDC) for FENSOLVI preceded by NDC qualifier N4, e.g., N462935016360

24. A. DATE(S) OF SERVICE						B. PLACE OF SERVICE	C. EMG	D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances)		E. DIAGNOSIS POINTER	F. \$ CHARGES		G. DAYS OR UNITS
From	To							CPT/HCPCS	MODIFIER				
MM	DD	YY	MM	DD	YY								
N462935016360						XX		J1951	JB	X	XXXXX	XX	180

NOTE: Fields with an "X" are required

2

LINE ITEM 24-D²

Procedures, Services or Supplies

Enter the applicable HCPCS/CPT codes and modifiers for the encounter such as:

FENSOLVI: HCPCS J1951³ JB administered subcutaneously is an informational modifier and specifies the administration approach of FENSOLVI³. Check with individual payer requirements for the use of the JB modifier

3

LINE ITEM 24-G²

Days or Units

Enter the billing units associated with each line item

When billing FENSOLVI (J1951):
1 billing unit equals 0.25 mg of FENSOLVI (e.g., Enter 180 units per J1951 to denote 45 mg used)

The information contained in this piece is intended for informational purposes only. It is not a comprehensive listing of all potential billing and coding requirements for FENSOLVI[®] (leuprolide acetate) for injectable suspension in the physician office and outpatient hospital department sites of care. Tolmar does not guarantee coverage or payment. The healthcare provider should follow all billing and coding requirements established by the insurance company to submit compliant claims for FENSOLVI. All codes on the claim form should be supported by the documentation in the patient's medical record.

SAMPLE CLAIM FORM

Hospital Outpatient Department

(claim form CMS 1450 [UB04]/
electronic equivalent 837I)⁴

This section provides healthcare providers guidance for submitting claims for the administration of FENSOLVI® in the hospital outpatient department.

1 **FIELD LOCATOR 42⁵**
Revenue Codes

Enter the revenue codes (in ascending order)

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FENSOLVI is most commonly reported with revenue code 0636⁶ (Drugs requiring detailed coding). Other revenue codes may apply.

2 **FIELD LOCATOR 43⁵**
Revenue Description

Enter the HCPCS/CPT description associated with the code(s) in FL 44

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Enter the appropriate 11-digit National Drug Code (NDC) for FENSOLVI preceded by NDC qualifier N4; eg, N462935016360

42 REV. CD.	43 DESCRIPTION	44 HCPCS / RATE / HIPPS CODE	45 SERV. DATE	46 SERV. UNITS	47 TOTAL CHARGES	48 NON-COVERED CHARGES
0636	N462935016360 Drugs requiring detailed coding (brand)	J1951 JB	XXXXXX	180	XXXXXXXXXX XX	

NOTE: Fields with an "X" are required

3 **FIELD LOCATOR 44⁵**
HCPCS

Enter the applicable HCPCS/CPT codes and modifiers for the encounter such as:

.....

FENSOLVI: HCPCS J1951³ per J1951 to denote 45 mg used JB *administered subcutaneously* is an informational modifier and specifies the administration approach of FENSOLVI³. Check with individual payer requirements for the use of the JB modifier

4 **FIELD LOCATOR 46⁵**
Units of Service

Enter the billing units associated with each line item

.....

When billing FENSOLVI (J1951):
1 billing unit equals 0.25 mg of FENSOLVI (e.g., Enter 180 units per J1951 to denote 45 mg used)

Tolmar Support Services
For additional information regarding...

J-code-related billing inquiries, please email questions to fensolvi@tolmar.com

Additional FENSOLVI product information, please visit info.fensolvi.com

REFERENCES

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3. Centers for Medicare & Medicaid Services (CMS) Healthcare Common Procedure Coding System (HCPCS) Application Summaries and Coding Decisions First Quarter 2021 Coding Cycle for Drug and Biological Products. <https://www.cms.gov/files/document/2021-hcpcs-application-summary-quarter-1-2021-drugs-and-biologics-updated-05262021.pdf>. Accessed June 2021.
4. CMS 1450. <https://www.cms.gov/Regulations-and-Guidance/Legislation/PaperworkReductionActof1995/PRA-Listing-Items/CMS-1450>. Accessed June 2021
5. Centers for Medicare & Medicaid Services. Medicare Claims Processing Manual Chapter 25 – Completing and Processing the Form CMS-1450 Data Set. <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/clm104c25.pdf>. Accessed June 2021
6. Revenue Codes. <https://med.noridianmedicare.com/web/jea/topics/claim-submission/revenue-codes>. Accessed June 2021