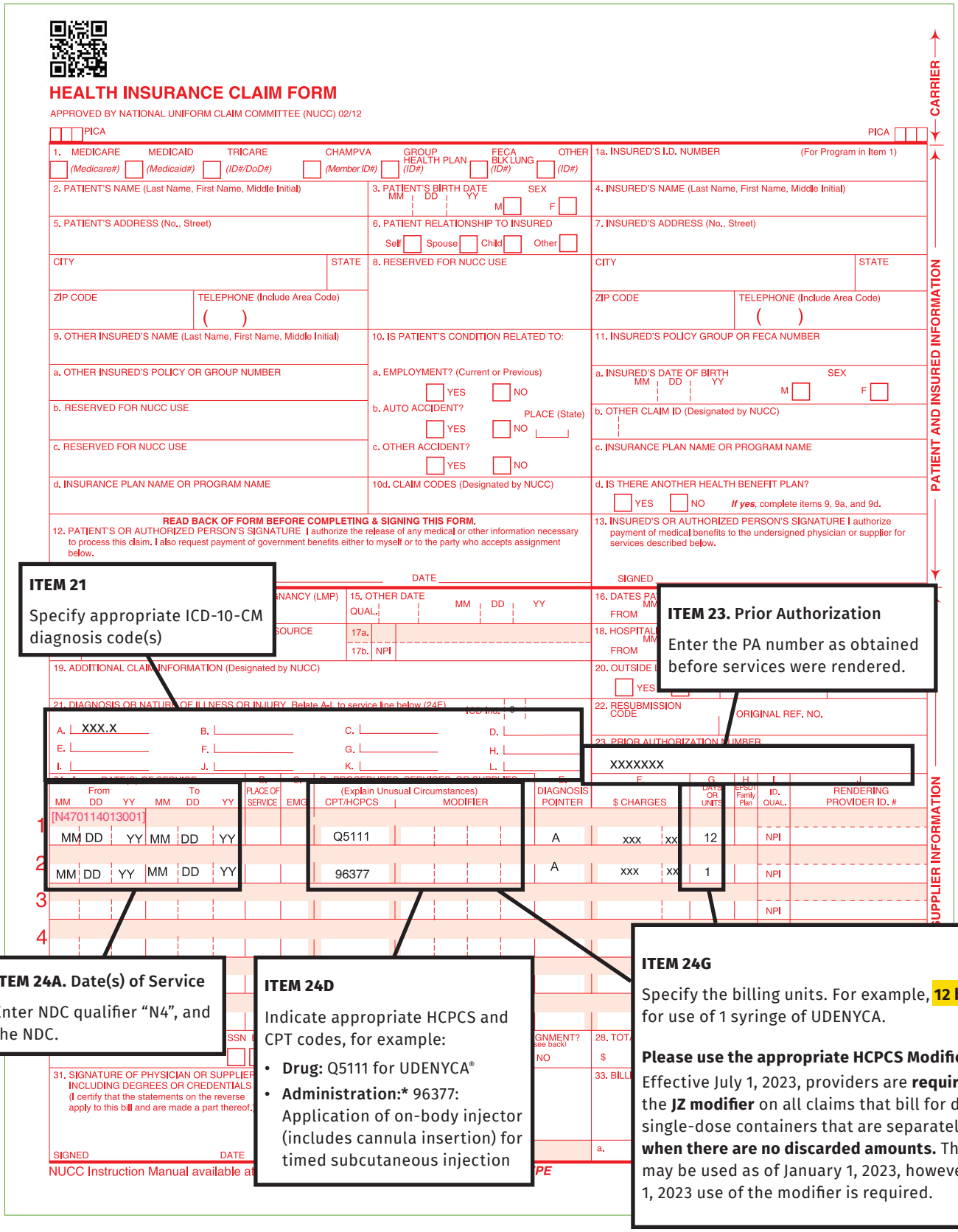
Sample CMS-1500 Claim Form for Physician Office Billing: UDENYCA® (pegfilgrastim-cbqv) ONBODY



ITEM 21

Specify appropriate ICD-10-CM diagnosis code(s)

ITEM 23. Prior Authorization

Enter the PA number as obtained before services were rendered.

ITEM 24A. Date(s) of Service

Enter NDC qualifier "N4", and the NDC.

ITEM 24D

Indicate appropriate HCPCS and CPT codes, for example:

- **Drug:** Q5111 for UDENYCA®
- **Administration:*** 96377: Application of on-body injector (includes cannula insertion) for timed subcutaneous injection

ITEM 24G

Specify the billing units. For example, **12 billing units** for use of 1 syringe of UDENYCA.

Please use the appropriate HCPCS Modifier

Effective July 1, 2023, providers are **required** to report the **JZ modifier** on all claims that bill for drugs from single-dose containers that are separately payable **when there are no discarded amounts.** The modifier may be used as of January 1, 2023, however, after July 1, 2023 use of the modifier is required.

This sample claims form is for informational purposes only and does not replace a medical provider's professional judgment. Before initiating UDENYCA treatment, the patient's health insurance provider should be contacted to confirm coverage, coding, and claims submission procedures. All claims should be reviewed for completeness, accuracy, and correct documentation from the patient's medical record. Coherus BioSciences does not guarantee UDENYCA coverage or reimbursement.

*Following an in-depth assessment by the American Medical Association, CPT Coding Advisors have determined that CPT code 96377 may be used to report the application of the UDENYCA on-body injector.

UDENYCA® (pegfilgrastim-cbqv) ONBODY™ Injection