

Coding and Billing Units: **OUTPATIENT HOSPITAL UB-04 FORM**

FL 42

- Enter 4-digit revenue code for service provided¹
- For chemotherapy administration, 0260 (IV therapy) or 0335 (radiology-therapeutic: chemotherapy-IV) could be used²
- CMS recommends using 0636 (drugs requiring detailed coding)³

FL 44

Enter relevant codes¹:

- HCPCS: J9299 for OPDIVO® (nivolumab); J9228 for YERVOY® (ipilimumab)⁶
- CPT[†]: 96413 for OPDIVO; 96417 for YERVOY; 96415 (if needed) for time of treatment infusion⁷
- In addition, it is required that you enter J9299-JW and J9228-JW on next line to record waste⁸

FL 43

- For each product administered, enter qualifier "N4" followed by 11-digit NDC in positions 01–13¹
- Report quantity qualifier (ML) followed by quantity administered (40 mg/4 mL or 100 mg/10 mL for OPDIVO; 50 mg/10 mL or 200 mg/40 mL for YERVOY) beginning in position 14^{*1,4,5}

FL 46

- Billing units (service units) are entered here¹
- For OPDIVO and YERVOY, 1 mg = 1 billing unit

FLs 67A-67Q

Enter ICD-10-CM diagnosis codes for malignancy being treated.¹

FL 80

Enter the following^{1,9}:

- Drug name: OPDIVO and YERVOY
- Total dosage and strength
- Method of administration
- 11-digit NDC (for OPDIVO, 00003377211 or 00003377412; for YERVOY, 00003232711 or 00003232822)
- Basis of measurement

This sample form is for informational purposes only.

Abbreviations: CMS=Centers for Medicare & Medicaid Services; CPT=Current Procedural Terminology; FL=form locator; HCPCS=Healthcare Common Procedure Code System; IV=intravenous; NDC=National Drug Code.

*For example, for OPDIVO use "N400003377211ML4" for the 40-mg/4-mL vial or "N400003377412ML10" for the 100-mg/10-mL vial.⁴

For YERVOY, use "N400003232711ML10" for the 50-mg/10-mL vial or "N400003232822ML40" for the 200-mg/40-mL vial.⁵

[†]CPT codes and descriptions only are ©2015 by American Medical Association (AMA). All rights reserved. The AMA assumes no liability for data contained or not contained herein. CPT is a registered trademark of the American Medical Association.

The accurate completion of reimbursement- or coverage-related documentation is the responsibility of the healthcare provider and patient. Bristol-Myers Squibb and its agents make no guarantee regarding reimbursement for any service or item.

References

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9. Centers for Medicare & Medicaid Services. Medicare Claims Processing Manual. Chapter 26 - Completing and Processing Form CMS-1500 Data Set. Revision 3547, June 22, 2016. <http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/clm104c26.pdf>. Accessed July 26, 2016.