

CODING FOR XERAIVA: J CODE INCLUDED

Effective for dates of service on or after October 1, 2019, XERAIVA may be billed with a product-specific J code.

J code: J0122: Injection, eravacycline, 1 mg. Use JW modifier for wastage (see accompanying sample claim forms for details).

APC: 9325: Injection, eravacycline, 1 mg

Additional coding for XERAIVA and associated administration may also include the following:

CODING		SITE OF SERVICE		
Code Set	Code	Physician Office	Hospital Outpatient	Home Infusion*
NDC	10-digit: 71773-050-12 (12-vial carton) 10-digit: 71773-050-05 (single vial) 11-digit: 71773-0050-12 (12-vial carton) 11-digit: 71773-0050-05 (single vial)	X	X	X
CPT Codes	96365 IV infusion for therapy/prophylaxis/diagnosis, initial, up to 1 hour	X	X	
	96366 IV infusion for therapy/prophylaxis/diagnosis; each additional hour	X	X	
	99601 Home infusion/specialty drug administration, per visit (up to 2 hours)			X
ICD-10-PCS	3E03329 Introduction of other anti-infective into peripheral vein, percutaneous approach		X	
	3E04329 Introduction of other anti-infective into central vein, percutaneous approach		X	
HCPCS Codes	S9494 Home infusion therapy, antibiotic, antiviral, or antifungal therapy; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem (do not use this code with home infusion codes for hourly dosing schedules S9497-S9504)	X		X
	S9500 Home infusion therapy, antibiotic, antiviral, or antifungal therapy; once every 24 hours; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem	X		X
	S9501 Home infusion therapy, antibiotic, antiviral, or antifungal therapy; once every 12 hours; administrative services, professional pharmacy services, care coordination, and all necessary supplies and equipment (drugs and nursing visits coded separately), per diem	X		X
Revenue Codes	Product Revenue Codes			
	0250 Pharmacy – General		X	
	0258 Pharmacy – IV Solutions		X	
	0636 Pharmacy – Drugs requiring detailed coding		X	

*Please check with Medicare for specific reimbursement regarding home infusion site of care.

APC, Ambulatory Payment Classification; NDC, National Drug Code; CPT, Current Procedural Terminology; IV, intravenous; ICD-10-PCS, International Classification of Diseases, 10th Revision, Procedure Coding System; HCPCS, Healthcare Common Procedure Coding System.

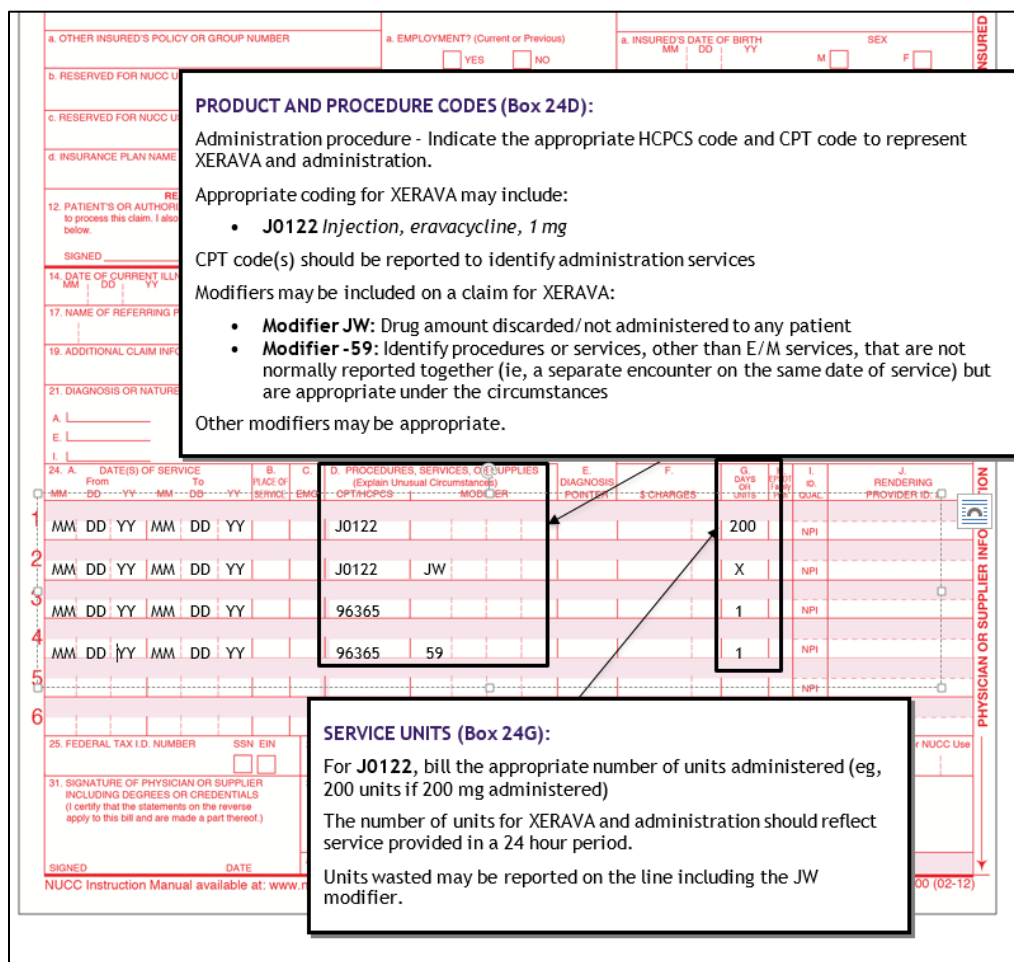
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CODING		SITE OF SERVICE		
Revenue Codes	Administration Revenue Codes	Physician Office	Hospital Outpatient	Home Infusion*
	0260 IV Therapy – General		X	
	0510 Clinic – General		X	
	0550-0559 – Skilled Nursing			X
	0580-0589 – Home Health Other Visits			X
	0640-0649 – Home IV Therapy Services			X

Sample Claim Forms

Sample CMS-1500 Claim Form Submitted to Medicare for XERAVA and Administration Services from the Physician Office Site of Care



PRODUCT AND PROCEDURE CODES (Box 24D):
Administration procedure - Indicate the appropriate HCPCS code and CPT code to represent XERAVA and administration.
Appropriate coding for XERAVA may include:

- J0122 Injection, eravacycline, 1 mg**

CPT code(s) should be reported to identify administration services

Modifiers may be included on a claim for XERAVA:

- Modifier JW:** Drug amount discarded/ not administered to any patient
- Modifier -59:** Identify procedures or services, other than E/M services, that are not normally reported together (ie, a separate encounter on the same date of service) but are appropriate under the circumstances

Other modifiers may be appropriate.

24. A. DATE(S) OF SERVICE	B. PLACE OF SERVICE	C. ICD-10-PCS	D. PROCEDURES, SERVICES, OR SUPPLIES	E. DIAGNOSIS	F. CHARGES	G. UNITS	H. DRUG IDENTIFICATION	I. NDC	J. RENDERING PROVIDER ID
MM DD YY	MM DD YY		J0122			200		NPI	
MM DD YY	MM DD YY		J0122 JW			X		NPI	
MM DD YY	MM DD YY		96365			1		NPI	
MM DD YY	MM DD YY		96365 59			1		NPI	

SERVICE UNITS (Box 24G):
For **J0122**, bill the appropriate number of units administered (eg, 200 units if 200 mg administered)
The number of units for XERAVA and administration should reflect service provided in a 24 hour period.
Units wasted may be reported on the line including the JW modifier.

*Please check with Medicare for specific reimbursement regarding home infusion site of care.

APC, Ambulatory Payment Classification; NDC, National Drug Code; CPT, Current Procedural Terminology; IV, intravenous; ICD-10-PCS, International Classification of Diseases, 10th Revision, Procedure Coding System; HCPCS, Healthcare Common Procedure Coding System.

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Sample UB-04 (CMS-1450) Claim Form Submitted to Medicare for XERAVA and Administration Services from the Hospital Outpatient Site of Care

PRODUCT AND PROCEDURE CODES (Field 44):
 Administration procedure - Indicate the appropriate HCPCS code and CPT code to represent XERAVA and administration.
 Appropriate coding for XERAVA may include:

- J0122 Injection, eravacycline, 1 mg

CPT code(s) should be reported to identify administration services.

Modifiers may be included on a claim for XERAVA:

- Modifier JW: Drug amount discarded/not administered to any patient
- Modifier -59: Identify procedures or services, other than E/M services, that are not normally reported together (ie, a separate encounter on the same date of service) but are appropriate under the circumstances

Other modifiers may be appropriate.

SEQ. NO.	DESCRIPTION	HCPCS / DATE / NDC / NDC CODE	SEQ. DATE	SEQ. UNITS	TOTAL CHARGES	UNCOVERED CHARGES
0636	Drugs requiring detailed coding	J0122	MM DD YY	200	XXX:XX	
0636	Drugs requiring detailed coding	J0122-JW	MM DD YY	X	XXX:XX	
0510	Clinic	96365	MM DD YY	1	XXX:XX	
0510	Clinic	96365-59	MM DD YY	1	XXX:XX	

REVENUE CODES (Field 42) AND DESCRIPTIONS (Field 43):
 Use the most appropriate revenue code corresponding to the cost center; eg.
 • 0636 for XERAVA
Note: Other revenue codes may apply

SERVICE UNITS (Field 46):
 For J0122, bill the appropriate number of units administered (eg, 200 units if 200 mg administered).

 The number of units for XERAVA and administration should reflect service provided in a 24 hour period.

 Units wasted may be reported on the line including the JW modifier.

Principal Procedure Code and Date (Field 74):
 Enter the appropriate ICD-10-PCS code(s) for XERAVA; eg,
 • 3E03329 Introduction of other anti-infective into peripheral vein, percutaneous approach
May not be required on claims submitted from the hospital outpatient site of care

PP ADMIT DATE		PP PATIENT REASON FOR ADMIT		PP PPS CODE		PP EDI	
T4 PRINCIPAL PROCEDURE CODE		T5 OTHER PROCEDURE CODE		T6 OTHER PROCEDURE CODE		T7 ATTENDING NPI	
3E03329 MMDDYY						LAST FIRST	
T8 OTHER PROCEDURE CODE		T9 OTHER PROCEDURE CODE		T10 OTHER PROCEDURE CODE		T11 OPERATING NPI	
						LAST FIRST	

Information provided in this resource is not intended to be a comprehensive description of potential coding requirements for XERAVA. Health care providers are solely responsible for determining coverage, coding, and reimbursement for patients treated with XERAVA. This information should not be considered a guarantee of coverage or reimbursement of XERAVA.

*Please check with Medicare for specific reimbursement regarding home infusion site of care.
 APC, Ambulatory Payment Classification; NDC, National Drug Code; CPT, Current Procedural Terminology; IV, intravenous; ICD-10-PCS, International Classification of Diseases, 10th Revision, Procedure Coding System; HCPCS, Healthcare Common Procedure Coding System.