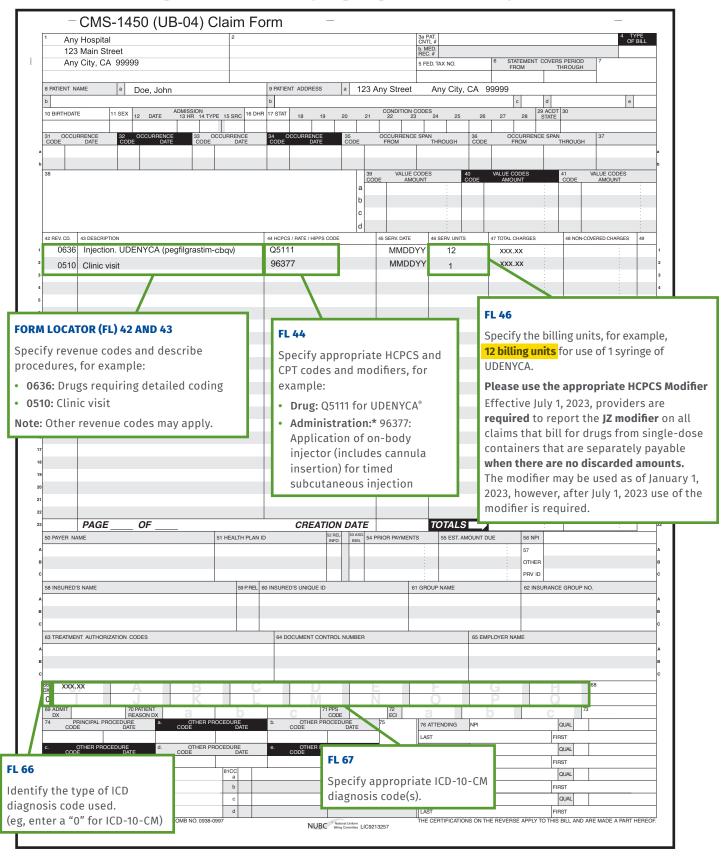
## Sample CMS-1450 (UB-04) Claim Form for Hospital Outpatient Billing: UDENYCA® (pegfilgrastim-cbqv) ONBODY



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.

