UDENYCA™ (pegfilgrastim-cbqv) Coding Reference Guide

| HCPCS Code | Description |
|--|--|
| Q5111 | Injection, pegfilgrastim-cbqv, biosimilar, (UDENYCA), 0.5 mg |
| Transitional pass-throu | ıgh status has been assigned to UDENYCA™ effective April 1, 2019* |
| Billable Units | Description |
| 12 | Billable units for administration of one syringe For administration of less than one syringe please use the billable units and JW modifier as appropriate |
| Modifier | Description |
| JG Modifier [†] | Modifier for drug or biological acquired with 340B drug pricing program discount |
| TB Modifier [†] | Modifier for drug or biological acquired with 340B drug pricing program discount; reported for informational purposes |
| JW Modifier | Modifier to report the amount of drug or biological that is discarded and eligible for payment under the discarded drug policy |
| CPT® Code | Description |
| 96372 [‡] | Therapeutic, prophylactic, or diagnostic injection; subcutaneous or intramuscular |
| Patient Diagnosis Code | Description |
| ICD-10-CM | ICD-10 codes vary by patient diagnosis |
| Hospital Services and Supplies Revenue Code | Description |
| _ | |
| 0636⁵ | Drugs requiring detailed coding |
| 0636 [§] 0510 [¶] | Clinic visit |
| | Clinic visit |
| 0510 [¶] | |

^{*}Applies to UDENYCA™ administered to Medicare patients in the hospital outpatient department.

For questions regarding UDENYCA™ billing and coding please call Coherus COMPLETE™ at I-844-4-UDENYCA (1-844-483-3692) from 8 AM to 8 PM ET, Monday through Friday or visit www.CoherusCOMPLETE.com.

The coding information contained herein is for informational purposes only, and is not a guarantee of coverage or reimbursement for any product or service. This information is not intended to substitute for the physician's independent diagnosis or treatment of each patient.



[†]The use of informational modifier "TB" for pass-through drugs acquired with a 340B discount is required. "JG" modifier is for use with each separately payable, non-pass through 340B-acquired drug.

^{*}Please contact the payer to determine appropriate HCPCS coding for UDENYCA™.

[§]Used in combination with HCPCS drug code.