Important information about

Billing and Coding

J1951 – Injection, leuprolide acetate for depot suspension (Fensolvi), 0.25 mg



J-CODE **J1951**

Effective July 1, 2021

The information contained in this piece is intended for informational purposes only. It is not a comprehensive listing of all potential billing and coding requirements for FENSOLVI® (leuprolide acetate) for injectable suspension in the physician office and outpatient hospital department sites of care. Tolmar does not guarantee coverage or payment. The healthcare provider should follow all billing and coding requirements established by the insurance company to submit compliant claims for FENSOLVI. All codes on the claim form should be supported by the documentation in the patient's medical record.

SAMPLE CLAIM FORM

Physician Office

(claim form CMS 1500/electronic equivalent 837P)1

This section provides healthcare providers guidance for submitting claims for the administration of FENSOLVI in the physician office

1

LINE ITEM **24-A**²

Shaded area above the drug line item

Enter the appropriate 11-digit National Drug Code (NDC) for FENSOLVI preceded by NDC qualifier N4, e.g., N462935015350

Υ																
24. A.	. DATE(S) OF SERVICE					B.	C.	D. PROCEDURES, SERVICES, OR SUPPLIES					E.	F.		G.
1	From To				PLACE OF		(Explain Unusual Circumstances)					DIAGNOSIS			DAYS OR	
MM	DD	YY	MM	DD	YY	SERVICE	EMG	CPT/HCPCS	MODIFIER				POINTER	\$ CHARGES		UNITS
N462935015 <mark>350</mark>																
XX	XX	XX	XX	XX	XX	XX		J1951	JB				Χ	XXXXX	XX	180
								A								A

NOTE: Fields with an "X" are required

2

LINE ITEM **24-D**²

Procedures, Services or Supplies

Enter the applicable HCPCS/CPT codes and modifiers for the encounter such as:

FENSOLVI: HCPCS J1951³ JB administered subcutaneously is an informational modifier and specifies the administration approach of FENSOLVI³. Check with individual payer requirements for the use of the JB modifier

3

LINE ITEM **24–G**² **Days or Units**

Enter the billing units associated with each line item

When billing FENSOLVI (J1951): 1 billing unit equals 0.25 mg of FENSOLVI (e.g., Enter 180 units per J1951 to denote 45 mg used)



Billing and Coding



SAMPLE CLAIM FORM

Hospital Outpatient Department

(claim form **CMS 1450** [UB04]/ electronic equivalent 837I)⁴

This section provides healthcare providers guidance for submitting claims for the administration of FENSOLVI® in the hospital outpatient department.

field locator 42⁵
Revenue Codes

Enter the revenue codes (in ascending order)

FENSOLVI is most commonly reported with revenue code 0636⁶ (Drugs requiring detailed coding). Other revenue codes may apply.

FIELD LOCATOR 43⁵
Revenue Description

Enter the HCPCS/CPT description associated with the code(s) in FL 44

Enter the appropriate 11-digit National Drug Code (NDC) for FENSOLVI preceded by NDC qualifier N4; eg, N462935015350

42 REV. CD. 43 DESCRIPTION 44 HCPCS / RATE / HIPPS CODE 45 SERV. DATE 46 SERV. UNITS 47 TOTAL CHARGES 48 NON-COVERED CHARGES

N462935015350

Drugs requiring detailed coding (brand) J1951 JB XXXXXX 180 XXXXXXXXXXX

NOTE: Fields with an "X" are required

FIELD LOCATOR 445

Enter the applicable HCPCS/CPT codes and modifiers for the encounter such as:

FENSOLVI: HCPCS J1951³ per J1951 to denote 45 mg used JB *administered subcutaneously* is an informational modifier and specifies the administration approach of FENSOLVI³. Check with individual payer requirements for the use of the JB modifier

FIELD LOCATOR 46⁵
Units of Service

Enter the billing units associated with each line item

When billing FENSOLVI (J1951): 1 billing unit equals 0.25 mg of FENSOLVI (e.g., Enter 180 units per J1951 to denote 45 mg used)

Tolmar Support Services

For additional information regarding...

J-code-related billing inquiries, please email questions to **fensolvi@tolmar.com**Additional FENSOLVI product information, please visit **info.fensolvi.com**

REFERENCES

- CMS 1500 Health Insurance Claim Form. https://www.cms.gov/Medicare/CMS-Forms/ CMS-Forms/Downloads/CMS1500.pdf. Accessed June 2021
- NUCC. 1500 Health Insurance Claim Form Reference Instruction Manual for Form Version 02/12. https://www.nucc.org/images/stories/PDF/1500_claim_form_instruction_manual_2020_07-v8.pdf. Accessed June 2021
- Centers for Medicare & Medicaid Services (CMS) Healthcare Common Procedure Coding System (HCPCS) Application Summaries and Coding Decisions First Quarter 2021 Coding Cycle for Drug and Biological Products. https://www.cms.gov/files/ document/2021-hcpcs-application-summary-quarter-1-2021-drugs-and-biologicsupdated-05262021.pdf. Accessed June 2021.
- 4. CMS 1450. https://www.cms.gov/Regulations-and-Guidance/Legislation/ PaperworkReductionActof1995/PRA-Listing-Items/CMS-1450. Accessed June 2021
- Centers for Medicare & Medicaid Services. Medicare Claims Processing Manual Chapter 25 – Completing and Processing the Form CMS-1450 Data Set. https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/ clm104c25.pdf. Accessed June 2021
- Revenue Codes. https://med.noridianmedicare.com/web/jea/topics/claim-submission/ revenue-codes. Accessed June 2021

