

# Coding and Billing Units

J9299, injection, nivolumab, 1 mg

PHYSICIAN OFFICE CMS-1500 FORM

**A Item 19**  
Many payers require detailed information about the drug in Box 19<sup>1</sup>:

- Drug name: OPDIVO (nivolumab)
- Total dosage and strength
- Method of administration
- 11-digit NDC
- Basis of measurement

**B Item 21**  
Enter site-specific ICD-10-CM codes in priority order.<sup>1</sup>

**C Item 24A**  
NDC information is required in the red shaded area. The NDC is preceded by the qualifier N4 and followed by the quantity qualifier (ML) and the quantity administered.<sup>1</sup> See table below for a full list of NDCs formatted for 24A.

**D Item 24D**  
Enter HCPCS code J9299 and CPT code<sup>2</sup> 96413.<sup>1,3</sup> In addition, it is required that you enter J9299-JW on next line to record waste. Alternatively, if no wastage, enter J9299-JZ to attest there were no discarded amounts.<sup>4</sup>

**E Item 24E**  
Enter the relevant diagnosis code reference letter or number from Item 21 to relate the date of service and the services or procedures performed that is entered on the same line under 24D.<sup>1</sup>

**F Item 24G**

- Billing units are reported here<sup>1</sup>
- For OPDIVO, 1 mg = 1 billing unit

<b>A</b> 19. ADDITIONAL CLAIM INFORMATION (Designated by NUCC)										20. OUTSIDE LAB? <input type="checkbox"/> YES <input type="checkbox"/> NO <b>\$ CHARGES</b>							
<b>B</b> 21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E)										ICD Ind.		22. RESUBMISSION CODE					
A. _____		B. _____		C. _____		<b>D</b>		D. _____		E. _____		ORIGINAL REF. NO.					
E. _____		F. _____		G. _____		H. _____		I. _____		J. _____		23. PRIOR AUTHORIZATION NUMBER					
I. _____		J. _____		K. _____		L. _____		E. DIAGNOSIS POINTER		F. \$ CHARGES		J. RENDERING PROVIDER ID. #					
<b>C</b> 24. A. DATE(S) OF SERVICE			B. PLACE OF SERVICE		C. EMG		D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances)			G. DAYS OR UNITS		H. EPSCOT Family Plan		I. ID QUAL			
From MM DD YY To MM DD YY			SERVICE				OPT/HCPCS MODIFIER										
1												NPI					
2												NPI					
3												NPI					
4												NPI					
5												NPI					
6												NPI					
25. FEDERAL TAX I.D. NUMBER				SSN EIN		26. PATIENT'S ACCOUNT NO.				27. ACCEPT ASSIGNMENT? (For govt claims, see back)		28. TOTAL CHARGE \$		29. AMOUNT PAID \$		30. Rsvd. for NUCC Use	
				<input type="checkbox"/> <input type="checkbox"/>						<input type="checkbox"/> YES <input type="checkbox"/> NO							

This sample form is for informational purposes only.

NDC Information for OPDIVO<sup>5</sup>

How Supplied (Single-Dose Vial)	NDC Format
40 mg/4 mL (10 mg/mL) solution	N400003377211ML4
100 mg/10 mL (10 mg/mL) solution	N400003377412ML10
120 mg/12 mL (10 mg/mL) solution	N400003375614ML12
240 mg/24 mL (10 mg/mL) solution	N400003373413ML24

In addition to coding specifics, some payers may require additional information, such as a drug purchase invoice or documentation of medical necessity. The accurate completion of reimbursement- or coverage-related documentation is the responsibility of the healthcare provider and the patient. Bristol Myers Squibb and its agents make no guarantee regarding reimbursement for any service or item. Please contact the payer or BMS Access Support<sup>®</sup> for additional information.

CMS=Centers for Medicare & Medicaid Services; CPT=Current Procedural Terminology; HCPCS=Healthcare Common Procedure Coding System; NDC=National Drug Code.

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References: 1. Centers for Medicare & Medicaid Services. Medicare Claims Processing Manual. Chapter 26 – Completing and Processing Form CMS-1500 Data Set. Revision 11037, May 27, 2022. Accessed May 10, 2023. <http://www.cms.gov/Regulations-and-Guidance/Manuals/downloads/clm104c26.pdf>. 2. American Medical Association. 2019 HCPCS Level II. Professional ed. Chicago, IL: American Medical Association; 2019. 3. American Medical Association. CPT Professional 2023. American Medical Association; 2022. 4. Centers for Medicare & Medicaid Services. Discarded Drugs and Biologicals – JW Modifier and JZ Modifier Policy. Accessed May 10, 2023. <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalOutpatientPPS/Downloads/JW-Modifier-FAQs.pdf>. 5. OPDIVO [package insert]. Princeton, NJ: Bristol-Myers Squibb Company. February 2023.

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