

# NEW J-CODE (J0791)<sup>1</sup>

## For ADAKVEO® (crizanlizumab-tmca)

### 1 unit = 5 mg

### Effective July 1, 2020



The Centers for Medicare & Medicaid Services (CMS) has issued a product-specific J-code.

#### **J0791: Injection, crizanlizumab-tmca, 5 mg**

The Healthcare Common Procedure Coding System (HCPCS) J-code, J0791, for ADAKVEO® (crizanlizumab-tmca) is effective for dates of services on or after July 1, 2020. This new and unique code for ADAKVEO should be used instead of all previous HCPCS codes.

**Please note:** For dates of service before July 2020, use either J3490<sup>2</sup> (unclassified drugs, all sites of care) or J3590<sup>3</sup> (unclassified biologics, all sites of care). For dates of service between April 1, 2020, and June 30, 2020, some payers may allow the use of C9053<sup>4</sup> (Injection, crizanlizumab-tmca, 1 mg, Hospital outpatient).

Unique J-code for ADAKVEO	Description	Single-dose vial size	Billing unit
J0791	Injection, crizanlizumab-tmca, 5 mg	100 mg/10 mL (10 mg/mL)	20

- ◆ 1 unit = 5 mg
- ◆ The JW modifier must be used to report the amount of drug in single-dose or single-use packaging that is discarded and eligible for payment<sup>5</sup>

If your system does not auto-update, please add the ADAKVEO J-code to your claims processing system as appropriate for the July 1 implementation of the code.

**If you have any questions, please contact your Novartis Access Relations or Reimbursement Manager team member.**

Name:  
Title:

Phone:  
Cell:  
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#### **INDICATION**

ADAKVEO® (crizanlizumab-tmca) is indicated to reduce the frequency of vaso-occlusive crises (VOCs) in adults and pediatric patients, aged 16 years and older, with sickle cell disease.

#### **IMPORTANT SAFETY INFORMATION**

##### **Infusion-Related Reactions**

In the SUSTAIN clinical trial, infusion-related reactions (defined as occurring within 24 hours of infusion) were observed in 2 (3%) patients treated with ADAKVEO 5 mg/kg. Monitor patients for signs and symptoms of infusion-related reactions, which may include fever, chills, nausea, vomiting, fatigue, dizziness, pruritus, urticaria, sweating, or shortness of breath or wheezing. Discontinue ADAKVEO infusion for severe reactions and institute appropriate medical care.

**Please see [page 2](#) for additional Important Safety Information. Please see full Prescribing Information [here](#).**

## IMPORTANT SAFETY INFORMATION (continued)

### Laboratory Test Interference: Platelet Counts

Interference with automated platelet counts (platelet clumping) has been observed following administration of ADAKVEO, in particular, when blood samples were collected in tubes containing EDTA.

Run blood samples within 4 hours of blood collection or collect blood samples in tubes containing citrate. When needed, estimate platelet count via peripheral blood smear.

### Pregnancy

Based on animal data ADAKVEO has the potential to cause fetal harm when administered to a pregnant woman. Advise pregnant women of the potential risk to a fetus. ADAKVEO should only be used during pregnancy if the expected benefit to the patient justifies the potential risk to the fetus.

### Most Common Adverse Reactions

The most frequently reported adverse reactions ( $\geq 10\%$ ) in patients treated with ADAKVEO were nausea (18%), arthralgia (18%), back pain (15%), and pyrexia (11%).

### Other Clinically Important Adverse Reactions

Clinically relevant adverse reactions (all grades) that were reported in  $<10\%$  of patients treated with ADAKVEO included: oropharyngeal pain, abdominal pain (abdominal pain, upper abdominal pain, lower abdominal pain, abdominal discomfort, and abdominal tenderness), diarrhea, vomiting, pruritus (pruritus and vulvovaginal pruritus), musculoskeletal chest pain, myalgia, infusion-site reaction (infusion-site extravasation, infusion-site pain, and infusion-site swelling), and infusion-related reaction.

Please see full Prescribing Information [here](#).

**IMPORTANT:** This document is intended solely for educational purposes. The information provided contains general reimbursement information only and represents Novartis understanding of current reimbursement policies as of March 30, 2020. Information should not be construed as legal advice, nor is it advice about how to code, complete, or submit any particular claim for payment. Coding and reimbursement information is subject to change. Information provided is not intended to increase or maximize reimbursement by any payer. Novartis disclaims any responsibility for claims submitted by providers or physicians. Providers should accurately report the products and procedures furnished to the patient. It is the provider's and physician's responsibility to determine appropriate codes, charges, and modifiers, and to submit bills for services and products consistent with what was rendered as well as the patient's insurer requirements. Third-party payers may have different coverage, reimbursement policies, and coding requirements. Such policies can change over time. Providers are encouraged to contact third-party payers for each patient to verify specific information on their coding policies.

**References:** **1.** Centers for Medicare & Medicaid Services. Healthcare Common Procedure Coding System (HCPCS) Application Summaries and Coding Decisions. <https://www.cms.gov/files/document/2020-hcpcs-application-summary-quarter-1-2020-drugs-and-biologicals-updated-04142020.pdf>. Accessed April 21, 2020. **2.** Find-A-Code. J3490 - Unclassified drugs. InnoviHealth Systems, Inc. <https://www.findacode.com/hcpcs/j3490-unclassified-drugs-hcpcs-code.html>. Accessed May 26, 2020. **3.** Find-A-Code. J3590 - Unclassified biologics. InnoviHealth Systems, Inc. <https://www.findacode.com/hcpcs/j3590-unclassified-biologics-hcpcs-code.html>. Accessed May 26, 2020. **4.** Find-A-Code. 96365 - CPT® Code in category: Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug). InnoviHealth Systems, Inc. <https://hcpcs.codes/c-codes/C9053>. Accessed May 26, 2020. **5.** Centers for Medicare & Medicaid Services. Medicare Program JW Modifier: Drug/Biological Amount Discarded/Not Administered To Any Patient Frequently Asked Questions. <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalOutpatientPPS/Downloads/JW-Modifier-FAQs.pdf>. Accessed May 13, 2020.



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