



BILLING & CODING

— GUIDE —

for VEOPOZ® (pozelimab-bbfg)

A concise reference of diagnostic, administration, product, and revenue codes that can help payers recognize, process, and pay claims for VEOPOZ.

INDICATION

VEOPOZ is a complement inhibitor indicated for the treatment of adult and pediatric patients 1 year of age and older with CD55-deficient protein-losing enteropathy (PLE), also known as CHAPLE disease.

IMPORTANT SAFETY INFORMATION

WARNING: SERIOUS MENINGOCOCCAL INFECTIONS

- Life-threatening and fatal meningococcal infections have occurred in patients treated with complement inhibitors. Meningococcal infection may become rapidly life-threatening or fatal if not recognized and treated early.
- Complete or update meningococcal vaccination (for serogroups A, C, W, and Y, and serogroup B) at least 2 weeks prior to administering the first dose of VEOPOZ, unless the risks of delaying therapy outweigh the risk of developing a meningococcal infection. Follow the most current Advisory Committee on Immunization Practices (ACIP) recommendations for meningococcal vaccination in patients receiving a complement inhibitor.
- Patients receiving VEOPOZ are at increased risk for invasive disease caused by *Neisseria meningitidis*, even if they develop antibodies following vaccination. Monitor patients for early signs of meningococcal infections and evaluate immediately if infection is suspected.

Please see additional Important Safety Information throughout and [click here](#) for full Prescribing Information, including Boxed WARNING, and [Medication Guide](#).



A resource for billing, coding, and reimbursement for VEOPOZ

This guide provides **billing and coding information** to assist with understanding the **reimbursement for VEOPOZ administered in the office or hospital outpatient setting.**



**This
resource
includes:**

- **Diagnosis coding:** *International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM) codes*
- **Administration coding:** Current Procedural Terminology (CPT) codes
- **Product coding:** Healthcare Common Procedure Coding System (HCPCS) Level II codes
- **Revenue codes**
- **Product information**

The coding information discussed in this guide is provided for informational purposes only, is subject to change and interpretation, and should not be construed as legal advice. The codes listed herein may not apply to all patients or to all health plans. Conversely, additional codes not listed in this guide may apply to some patients. Providers should follow payer-specific coding requirements and exercise independent clinical judgment when selecting codes and submitting claims to accurately reflect the services and products furnished to a specific patient. Providers must determine whether it is appropriate to submit any particular claim for reimbursement. Information provided in this guide is effective as of **April 2024**.

IMPORTANT SAFETY INFORMATION (cont'd)

Contraindications

- Patients with unresolved *Neisseria meningitidis* infection

Warnings and Precautions

Serious Meningococcal Infections: Life-threatening and fatal meningococcal infections have occurred in both vaccinated and unvaccinated patients treated with complement inhibitors. The use of VEOPOZ increases a patient's susceptibility to serious and life-threatening meningococcal infections (septicemia and/or meningitis) caused by any serogroup, including nongroupable strains.

Complete or update meningococcal vaccination (for serogroups A, C, W, and Y [MenACWY] and serogroup B [MenB]) at least 2 weeks prior to administering the first dose of VEOPOZ, according to the most current ACIP recommendations for patients receiving a complement inhibitor. Revaccinate patients in accordance with ACIP recommendations considering the duration of VEOPOZ therapy.

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A resource for billing, coding, and reimbursement for VEOPOZ (cont'd)

The following 2 most common billing claim forms from the Centers for Medicare & Medicaid Services (CMS) are available at www.cms.gov/Medicare/CMS-Forms/CMS-Forms/CMS-Forms-List:



- **CMS-1500** (print) or **837P** (electronic) for physician office reimbursement



- **CMS-1450** (print), also known as UB-04, or **837I** (electronic) for hospital outpatient reimbursement

Diagnosis coding: ICD-10-CM codes

The diagnosis code selected should reflect the highest level of specificity available as documented in the patient's medical record. At least 1 ICD-10-CM diagnosis code is required on all claim forms.

The following ICD-10-CM diagnosis code is the most specific code available for CHAPLE disease. VEOPOZ is indicated for the treatment of adult and pediatric patients 1 year of age and older with CD55-deficient protein-losing enteropathy (PLE), also known as CHAPLE disease.

ICD-10-CM code	Description
D84.1	Defects in the complement system

CHAPLE=CD55 deficiency with hyperactivation of complement, angiopathic thrombosis and protein-losing enteropathy.

IMPORTANT SAFETY INFORMATION (cont'd)

Warnings and Precautions (cont'd)

Serious Meningococcal Infections: (cont'd)

If urgent VEOPOZ therapy is indicated in a patient who is not up-to-date with both MenACWY and MenB vaccines according to ACIP recommendations, administer meningococcal vaccine(s) as soon as possible and provide the patient with antibacterial drug prophylaxis. The efficacy, duration, and drug regimens for antibacterial drug prophylaxis have not been studied in patients receiving complement inhibitors.

Please see additional Important Safety Information throughout and [click here](#) for full Prescribing Information, including Boxed WARNING, and Medication Guide.



Administration coding: CPT codes for VEOPOZ

CPT codes are assigned by physicians and by hospitals for outpatient services involving the administration of medications, including VEOPOZ.

VEOPOZ is delivered by an intravenous (IV) infusion loading dose and subsequent subcutaneous maintenance dosing.

The following CPT codes apply to the administration of VEOPOZ.

CPT code	Description
<i>IV infusion loading dose—therapeutic code</i>	
96365	IV infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug); initial, up to 1 hour
CPT code	Description
<i>Subcutaneous maintenance dosing—therapeutic code</i>	
96369	Subcutaneous infusion for therapy or prophylaxis; initial, up to 1 hour, including pump setup and establishment of subcutaneous infusion site(s)

IMPORTANT SAFETY INFORMATION (cont'd)

Warnings and Precautions (cont'd)

Serious Meningococcal Infections: (cont'd)

Because of inhibition of complement activity by VEOPOZ, as well as risk of infection caused by nongroupable strains of *Neisseria meningitidis*, vaccination does not eliminate the risk of meningococcal infections, despite development of antibodies following vaccination.

Closely monitor patients for early signs and symptoms of meningococcal infection and evaluate patients immediately if infection is suspected. Inform patients and caregivers of these signs and symptoms, and instruct patients to seek immediate medical care if these signs and symptoms occur.

Meningococcal infection may become rapidly life-threatening or fatal if not recognized and treated early. Interrupt treatment with VEOPOZ in patients who are undergoing treatment for serious meningococcal infection until the infection is resolved.

Please see additional Important Safety Information throughout and [click here](#) for full Prescribing Information, including Boxed WARNING, and Medication Guide.



Product coding: HCPCS Level II codes for VEOPOZ

Permanent J-code

HCPCS Level II codes help identify medications, including VEOPOZ, and are assigned in addition to the CPT code.

HCPCS J-code	Description	
J9376	Injection, pozelimab-bbfg, 1 mg ¹	1 mg=1 billing unit

Medicare requires the use of the JW modifier for reporting discarded amounts of drug. **Effective July 1, 2023**, the JZ modifier is required for reporting there was no discarded drug.

IMPORTANT SAFETY INFORMATION (cont'd)

Warnings and Precautions (cont'd)

Other Bacterial Infections: VEOPOZ blocks terminal complement activation; therefore, patients may have increased susceptibility to encapsulated bacterial infections, especially infections with *Neisseria meningitidis*, but also *Streptococcus pneumoniae* and *Haemophilus influenzae*, and to a lesser extent, *Neisseria gonorrhoeae*. Patients treated with VEOPOZ may be at increased risk of developing serious infections due to *Streptococcus pneumoniae* and *Haemophilus influenzae* type b (Hib). Vaccinate for the prevention of *Streptococcus pneumoniae* and Hib infections according to ACIP guidelines. Patients receiving VEOPOZ are at increased risk for infections due to these organisms, even if they develop antibodies following vaccination. Interrupt treatment with VEOPOZ in patients who are undergoing treatment for a serious encapsulated bacterial infection until the infection is resolved. Counsel patients about gonorrhea prevention and advise regular testing for patients at risk.

Systemic Hypersensitivity Reactions: Hypersensitivity reactions, including anaphylaxis, have been reported with administration of complement inhibitors. Interrupt VEOPOZ and institute appropriate supportive measures if signs of cardiovascular instability or respiratory compromise occur.

Immune Complex Formation: Immune complex formation has been reported during the transition of therapy between complement inhibitors, resulting in transient decrease in drug concentrations as well as symptoms suggestive of hypersensitivity reactions. However, this has not been studied in patients with CD55-deficient protein-losing enteropathy (PLE) switching from other complement inhibitors to VEOPOZ. The potential for immune complex formation should be considered if switching complement inhibitors.

Drug Interactions

Intravenous Immunoglobulin (IVIg): Avoid concomitant use of IVIg with VEOPOZ. If concomitant use cannot be avoided, monitor patients for worsening of clinical signs and symptoms of CD55-deficient PLE.

Please see additional Important Safety Information throughout and [click here](#) for full Prescribing Information, including Boxed WARNING, and Medication Guide.



Revenue coding for hospital administration

Use of revenue codes allow hospitals to bill for services provided.

Revenue code	Description
<i>Administration</i>	
0510	Clinic
<i>Drug</i>	
0636	Drugs requiring detailed coding
0250	Drugs and biologicals

Claims processing may vary with different hospital systems and commercial payers, especially if there is different direction in their payer-provider contract.

Product information for VEOPOZ

Drug name/strength	11-digit NDC #
VEOPOZ[®] (pozelimab-bbfg) 400 mg/2 mL (200 mg/mL)	61755-0014-01

Note: The product's NDC has been "zero-filled" to ensure creation of an 11-digit code that meets general billing standards. The zero-fill location is indicated in bold.

IMPORTANT SAFETY INFORMATION (cont'd)

Use in Specific Populations

Pregnancy: Although there are no data on VEOPOZ use in pregnant women to inform a drug-associated risk of major birth defects, miscarriage, or adverse maternal or fetal outcomes, monoclonal antibodies can be actively transported across the placenta.

Lactation: There are no data on the presence of VEOPOZ in human milk or animal milk, the effects on the breastfed infant, or the effects on milk production. Endogenous maternal IgG and monoclonal antibodies are transferred into human milk. The development and health benefits of breastfeeding should be considered along with the mother's clinical need for VEOPOZ and any potential adverse effects on the breastfed infant from VEOPOZ or from the underlying maternal condition.

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If you have questions about billing and coding for VEOPOZ, please call us at

1-855-5VEOPOZ (1-855-583-6769) Option 1,
Monday–Friday, 9 AM–9 PM Eastern time

For returns of product damaged in shipment and unused drugs appropriately discarded, please call **1-855-5VEOPOZ** (1-855-583-6769) Option 4, Monday–Friday, 9 AM–9 PM Eastern time

IMPORTANT SAFETY INFORMATION (cont'd)

Use in Specific Populations (cont'd)

Pediatric: The safety and effectiveness of VEOPOZ have not been established in pediatric patients less than 1 year of age.

Adverse Reactions

The most common adverse reactions (in two or more patients) are upper respiratory tract infection, fracture, urticaria, and alopecia.

Please [click here](#) for full Prescribing Information, including Boxed WARNING, and Medication Guide.

Reference: 1. Centers for Medicare & Medicaid Services. Centers for Medicare & Medicaid Services (CMS) Healthcare Common Procedure Coding System (HCPCS) application summaries and coding recommendations: fourth quarter, 2023 HCPCS coding cycle. Accessed February 26, 2024. <https://www.cms.gov/files/document/2023-hcpcs-application-summary-quarter-4-2023-drugs-and-biologicals-updated-02/05/2024.pdf>

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The logo features a stylized graphic of a person's head and shoulders in shades of green, yellow, and red, positioned to the left of the word "Veopoz" in a large, blue, sans-serif font. Below "Veopoz" is the text "(pozelimab-bbfg)" in a smaller blue font, and "Injection" in an even smaller blue font below that.

Veopoz®
(pozelimab-bbfg)
Injection