

## SAMPLE CODING FOR AVLAYAH (tividenofusp alfa-eknm)

Type	CMS-1450 (UB-04) Locator Box	CMS-1500 Item #	Code	Description
<b>Place of Service: Site of Care</b>	<b>Initial Infusion - Inpatient Facility</b>			
	4	N/A	111 TOB	Hospital Inpatient, admit through discharge (including Medicare Part A)
	<b>Second Infusion - Outpatient Facility</b>			
	N/A	24B	11	Office
			12	Home
			19	Off-campus outpatient hospital
			22	On-campus outpatient hospital
49			Independent clinic	
<b>Revenue Code</b>	42 and 43	N/A	0250	Pharmacy (General Classification)
			0258	IV solutions
			0260	General IV therapy service
			0261	Infusion pump
			0636	Drugs and biologicals requiring an HCPCS code
<b>HCPCS: Drug</b>	44	24D	Until a permanent J-code is issued, please check with the patient's plan to determine whether miscellaneous code J3490 or J3590 should be used on claim forms, as it may vary. An update will be provided once a permanent J-code is available.	
			J3490	Unclassified drugs
			J3590	Unclassified biologics
<b>CPT: Administration Procedures and Units for Items/ Services Provided</b>	44 and 46	24D and 24G	<b>Standard IV Infusion</b>	
			96365	Initial IV infusion, lasting up to 1 hour (bill only 1 unit per day)
			96366	Each additional hour after initial hour (bill 1 unit per hour, document start and end time)
			<b>Home Infusion</b>	
			99601	Initial home infusion, lasting up to 2 hours (bill only 1 unit per day)
			99602	Each additional hour after initial 2 hours (bill 1 unit per hour, document start and end time)

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<b>HCPCS Modifiers: JW/JZ Drug Wastage Modifiers</b>	44	24D	JW		With single-dose vials, you may need to use modifiers like JW to bill for any discarded drug and JZ to bill when no drug has been discarded, in compliance with payer guidelines
			JZ		
<b>ICD-10-CM</b>	66 and 69	21A	E76.1		Mucopolysaccharidosis, type II
			E76.3		Mucopolysaccharidosis, unspecified
<b>NDC*</b>	80	19	<b>10-digit</b>	<b>11-digit</b>	One 150-mg single-dose vial
			84976-001-01	84976-0001-01	
<b>Remarks/Additional Claim Information</b>	80	19	See "Description"		When submitting claims with an unclassified drug code, enter drug name, quantity administered, route of administration, and the NDC in 11-digit format

CPT, Current Procedural Terminology; HCPCS, Healthcare Common Procedure Coding System; ICD-10-CM, International Classification of Diseases, 10th Revision, Clinical Modification; NDC, National Drug Code.

\*Health plan requirements regarding use of a 10-digit or 11-digit NDC may vary. Both formats are listed here for your reference.

**This list of codes and the completion of all forms are not exhaustive; appropriate codes can vary by patient, setting of care, and health plan. Correct coding and the completion of all forms are the responsibility of the provider submitting the claim for the item or service. Please check with the health plan to verify codes and special billing requirements. Denali Therapeutics does not make any representation or guarantee concerning reimbursement or coverage for any item or service.**

If you have any questions on coding and billing for AVLAYAH, please reach out to your Denali Therapeutics representative or call our Denali Patient Services at **1-844-DNLI365 (1-844-365-4365)**, Monday-Friday, 8:30 AM - 8 PM ET (except holidays).