CINVANTI® (aprepitant) injectable emulsion Sample **CMS-1500** Claim Form

Form locator (FL) 19:
NDC number(s)

- CINVANTI (aprepitant), NDC 47426-0201-01 (single-dose vial) 130 mg IV

FL 21: Diagnosis or nature of illness or injury

Enter the appropriate ICD-10 diagnosis code as documented in the medical record.

Examples:

- R11.0 (nausea)
- R11.10 (vomiting, unspecified)
- R11.11 (vomiting without nausea)
- R11.12 (projectile vomiting)
- R11.13 (vomiting of fecal matter)
- R11.14 (bilious vomiting)
- R11.2 (nausea with vomiting, unspecified)
- T45.1X5* (adverse effects of antineoplastic and immunosuppressive drugs)
- Z41.9* (encounter for other procedures for purposes other than remedying health state)
- Z51.11*† (encounter for antineoplastic chemotherapy)

*Supplementary Classification Code

†Required when given within 48 hours of moderately or highly emetogenic chemotherapy

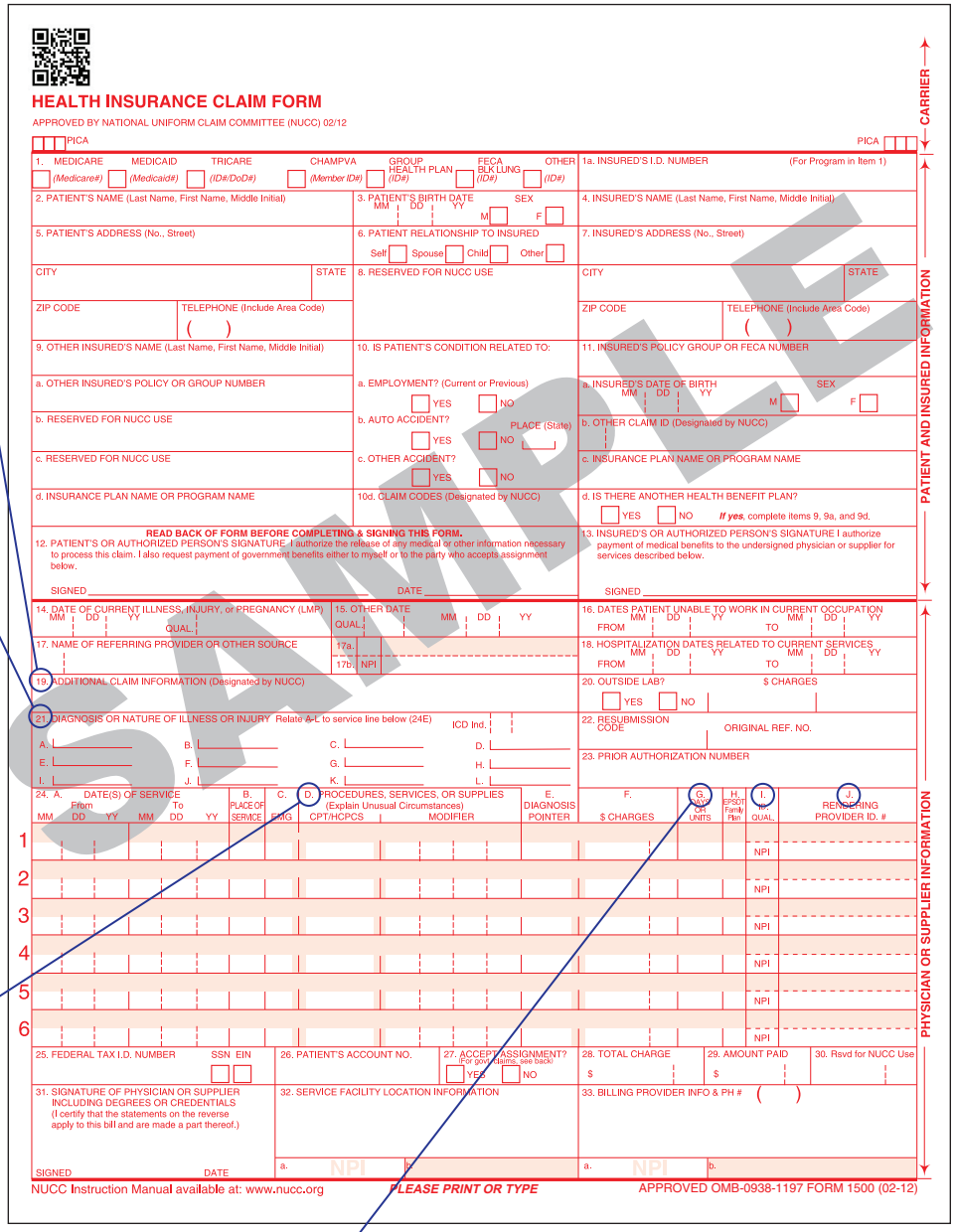
FL 24D: Procedures, services, or supplies

Enter the appropriate HCPCS and CPT codes.

Examples:

- J0185 (Injection, aprepitant, 1 mg)
- 96367 (intravenous infusion, for therapy, prophylaxis, or diagnosis; additional sequential infusion of a new drug/substance, up to 1 hour)
- 96375 (Therapeutic, prophylactic or diagnostic IV push, new substance/drug)

Other administration codes may be applicable.



FL 24G: Days or units

Enter the appropriate number of units.

Example:

- **Enter 130 for a single-dose vial containing 130 mg/18 mL aprepitant injectable emulsion**

This document is provided for your guidance only. Coding requirements may vary by payer; please consult the payer to determine which codes are required.

Please contact Heron Connect at **1-844-HERON11 (1-844-437-6611)** from 8 AM to 8 PM ET, Monday through Friday, to verify coding and claim information.

www.cinvanti.com

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