

ZYNRELEF[®]
(bupivacaine and meloxicam)
extended-release solution,
for instillation use
29.25 mg/mL and 0.88 mg/mL



C9088

REIMBURSEMENT OVERVIEW

Code	C9088
Description	Instillation, bupivacaine and meloxicam
Billable Unit	1 mg/0.03 mg

For example, 400 mg/12 mg (14 mL) corresponds to 400 billable units. Include the appropriate HCPCS modifiers (eg, use JZ when the complete single-dose vial was administered). For detailed guidance on billing and coding by site of care, sample claim forms, and other resources, visit [HeronConnect.com](https://www.heronconnect.com) or ask your Heron representative.

Medicare: ZYNRELEF Is Reimbursed Separately in HOPDs and ASCs Through 2027

Through March 2025	HOPD, ASC: Separate reimbursement at ASP + 6% (<i>pass-through status</i>)
April 2025 – December 2027	HOPD, ASC: Separate reimbursement under law promoting access to non-opioids (<i>HR 2617 §4135, signed December 2022</i>)

Note: Procedures coded as outpatient can include a hospital stay that spans less than 2 midnights.

Reimbursement Advantage

Exparel^{®a} is not currently separately reimbursed in the HOPD.^b Pumps and generic local anesthetics like bupivacaine HCl are currently packaged across all settings of care.^c

Commercial: Separate Payment Available for Many Patients

- Commercial payers have been notified that **C9088** has been assigned for ZYNRELEF; many customers have reported separate commercial payment
- Commercial reimbursement varies by payer and site of care; contact payers to verify coverage
- Heron offers resources to assist with billing and coding and to support separate payment requests

HERON CONNECT

Heron Connect offers customized support for ZYNRELEF billing and coding questions. Reimbursement Counselors are available at **1-844-HERON11 (1-844-437-6611)** from 8 AM to 5 PM ET, Monday through Friday.

For more information, visit [HeronConnect.com](https://www.HeronConnect.com)



^aExparel (bupivacaine liposome injectable suspension) is a trademark of Pacira Pharmaceuticals, Inc.

^bFrom January 1, 2025 through December 31, 2027, Medicare will reimburse separately in HOPDs and ASCs for certain non-opioid drugs without pass-through status, per HR 2617 §4135.

^cReimbursement comparisons do not imply comparative evaluations of safety or efficacy for the identified products.

ASC: ambulatory surgical center. **ASP:** average sales price. **HOPD:** hospital outpatient department.



INDICATION

ZYNRELEF is indicated in adults for instillation to produce postsurgical analgesia for up to 72 hours after soft tissue and orthopedic procedures including foot and ankle, and other procedures in which direct exposure to articular cartilage is avoided.

Limitations of Use: Safety and efficacy have not been established in highly vascular surgeries, such as intrathoracic, large 4 or more level spinal, and head and neck procedures.

IMPORTANT SAFETY INFORMATION

WARNING: RISK OF SERIOUS CARDIOVASCULAR AND GASTROINTESTINAL EVENTS

- **Nonsteroidal anti-inflammatory drugs (NSAIDs) cause an increased risk of serious cardiovascular thrombotic events, including myocardial infarction and stroke, which can be fatal. This risk may occur early in treatment and may increase with duration of use.**
- **ZYNRELEF is contraindicated in the setting of coronary artery bypass graft (CABG) surgery.**
- **NSAIDs cause an increased risk of serious gastrointestinal (GI) adverse events including bleeding, ulceration, and perforation of the stomach or intestines, which can be fatal. These events can occur at any time during use and without warning symptoms. Elderly patients and patients with a prior history of peptic ulcer disease and/or GI bleeding are at greater risk for serious GI events.**

Contraindications

ZYNRELEF is contraindicated in patients with a known hypersensitivity (eg, anaphylactic reactions and serious skin reactions) to any amide local anesthetic, NSAIDs, or other components of ZYNRELEF; with history of asthma, urticaria, or other allergic-type reactions after taking aspirin or other NSAIDs (severe, sometimes fatal, anaphylactic reactions to NSAIDs have been reported in such patients); undergoing obstetrical paracervical block anesthesia; or undergoing CABG.

Warnings and Precautions

Dose-Related Toxicity: Monitor cardiovascular and respiratory vital signs and patient's state of consciousness after application of ZYNRELEF. When using ZYNRELEF with other local anesthetics, overall local anesthetic exposure must be considered through 72 hours.

Hepatotoxicity: If abnormal liver tests persist or worsen, perform a clinical evaluation of the patient.

Hypertension: Patients taking some antihypertensive medication may have impaired response to these therapies when taking NSAIDs. Monitor blood pressure.

Heart Failure and Edema: Avoid use of ZYNRELEF in patients with severe heart failure unless benefits are expected to outweigh risk of worsening heart failure.

Renal Toxicity: Monitor renal function in patients with renal or hepatic impairment, heart failure, dehydration, or hypovolemia. Avoid use of ZYNRELEF in patients with advanced renal disease unless benefits are expected to outweigh risk of worsening renal failure.

Anaphylactic Reactions: Seek emergency help if an anaphylactic reaction occurs.

Risk of Joint Cartilage Necrosis and Degeneration with Unapproved Intra-articular Use: Animal studies evaluating the effects of ZYNRELEF following intra-articular administration in the knee joint demonstrated cartilage necrosis and degeneration.

Chondrolysis: Limit exposure to articular cartilage due to the potential risk of chondrolysis.

Methemoglobinemia: Cases have been reported with local anesthetic use.

Serious Skin Reactions: NSAIDs, including meloxicam, can cause serious skin adverse reactions. If symptoms present, evaluate clinically.

Drug Reaction with Eosinophilia and Systemic Symptoms (DRESS): If symptoms are present, evaluate clinically.

Fetal Toxicity: Due to the risk of oligohydramnios/fetal renal dysfunction and premature closure of the ductus arteriosus with NSAIDs, limit use of ZYNRELEF between about 20 to 30 weeks gestation, and avoid use after about 30 weeks.

Hematologic Toxicity: Monitor hemoglobin and hematocrit in patients with any signs or symptoms of anemia.

Drug Interactions

Drugs That Interfere with Hemostasis: Monitor patients for bleeding who are using ZYNRELEF with drugs that interfere with hemostasis (eg, warfarin, aspirin, SSRIs/SNRIs).

ACE Inhibitors, Angiotensin Receptor Blockers (ARBs), or Beta-Blockers: Use with ZYNRELEF may diminish the antihypertensive effect of these drugs. Monitor blood pressure.

ACE Inhibitors and ARBs: Use with ZYNRELEF in elderly, volume-depleted, or those with renal impairment may result in deterioration of renal function. In such high-risk patients, monitor for signs of worsening renal function.

Diuretics: NSAIDs can reduce natriuretic effect of furosemide and thiazide diuretics. Monitor patients to assure diuretic efficacy including antihypertensive effects.

Use in Specific Populations

Infertility: NSAIDs are associated with reversible infertility. Consider avoidance of ZYNRELEF in women who have difficulties conceiving.

Severe Hepatic Impairment: Only use if benefits are expected to outweigh risks; monitor for signs of worsening liver function.

Severe Renal Impairment: Not recommended.

Adverse Reactions

Most common adverse reactions (incidence $\geq 5\%$) in controlled clinical trials with ZYNRELEF are soft tissue procedures: vomiting and orthopedic procedures: constipation and headache.

Report side effects to Heron at 1-844-437-6611 or to FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

Please see full Prescribing Information, including Boxed Warning.