

# 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 used 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:

- J3490† (unclassified drug)
- 96367 (intravenous infusion, for therapy, prophylaxis, or diagnosis; additional sequential infusion of a new drug/substance, up to 1 hour)

Other administration codes may be applicable.

#Heron Therapeutics has filed an application for a product-specific J-code with the Centers for Medicare and Medicaid Services (CMS) under the HCPCS Level II Coding Procedures process.

**HEALTH INSURANCE CLAIM FORM**  
APPROVED BY NATIONAL UNIFORM CLAIM COMMITTEE (NUCC) 02/12

**FL 19:** NDC number(s) - Box 1 (Medicare/Medicaid/etc.)

**FL 21:** Diagnosis or nature of illness or injury - Box 21 (ICD-10 code)

**FL 24D:** Procedures, services, or supplies - Box 24 (CPT/HCPCS codes)

**FL 24G:** Days or units - Box 24 (Units)

NUCC Instruction Manual available at: [www.nucc.org](http://www.nucc.org) PLEASE PRINT OR TYPE APPROVED OMB-0938-1197 FORM 1500 (02-12)

### FL 24G: Days or units

Enter the appropriate number of units.

#### Example:

- Enter 1 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.