

MGI Pharma, Inc. Billing Codes
Aloxi Reimbursement Assistance Hotline: 866-302-5694

PRODUCT	PACKAGE SIZE	NDC#	STRENGTH	HCPCS CODE	HCPCS BILLING UNIT
Aloxi (palonosetron hydrochloride)	1 ct	58063-797-25	0.25 mg/5 ml vial	Misc. J-Code 3490 (make sure name of drug appears on claim)	1 billing unit=0.25 mg

Novartis Oncology
Reimbursement Hotline: 877-527-4357

PRODUCT	DESCRIPTION	NDC#	STRENGTH	HCPCS CODE	HCPCS BILLING UNIT
Sandostatin LAR**	Depot 10 mg	0078-0340-84	10 mg	J2353	1 unit= 1 mg
Sandostatin LAR**	Depot 20 mg	0078-0341-84	20 mg	J2353	1 unit= 1 mg
Sandostatin LAR**	Depot 30 mg	0078-0342-84	30 mg	J2353	1 unit= 1 mg
Zometa* (zoledronic acid)	4 mg/5ml vial	0078-0387-25	1 mg= 1.25 cc	J3487	1 unit = 1 mg

*(octreotide acetate for injectable suspension)

Ortho Biotech Billing Codes
Procrit Reimbursement Hotline: 800-553-3851

PRODUCT	PACKAGE SIZE	NDC#	STRENGTH	HCPCS CODE	HCPCS BILLING UNIT
Procrit (epoetin alfa)	4 x 1 ml	59676-0340-01	40,000 u/ml	Q0136	1000
	6/Box	59676-0320-01	20,000 u/1 ml	Q0136	1000
	6/Box	59676-0312-01	20,000 u/2 ml	Q0136	1000
	25 x 1 ml	59676-0310-02	10,000 u/ml	Q0136	1000
	6 x 1 ml	59676-0310-01	10,000 u/ml	Q0136	1000

* Some states may require the use of Q99XX codes. Consult your Medicare carrier for specifics.

Pharmion Corporation
Reimbursement Hotline: 866-742-7646

PRODUCT	PACKAGE SIZE	NDC#	STRENGTH	HCPCS CODE	HCPCS BILLING UNIT
Innohep (tinzaparin sodium for injection)	One 2 ml vial	67211-0342-08	20,000 IU per ml	J1655	1000 I.U.
	10 x 2 ml vial	67211-0342-53	20,000 IU per ml	J1655	1000 I.U.
Vidaza (azacitidine for injectable suspension)	100 mg/vial	67211-102-01	100 mg	J9999	1 unit=100 mg (make sure name of drug appears on claim)

Roche Product Billing Codes
Kytril Reimbursement Hotline: 800-443-6676

(press 2 to be connected directly to a representative)

PRODUCT	DESCRIPTION	NDC#	STRENGTH	HCPCS CODE	HCPCS BILLING UNIT
Kytril (granisetron hydrochloride)	1 mg/ml 1 ml Single dose vial	00004-0239-09	1 mg/ml	J1626	100 mcg
Kytril (granisetron hydrochloride)	1 mg/ml 4 ml Multi dose vial	00004-0240-09	1 mg/ml	J1626	100 mcg
Xeloda (capecitabine)	500 mg 120 Tablets/Bottle	0004-1100-50	500 mg	J8521	1 unit=1 pill
Xeloda (capecitabine)	150 mg 60 Tablets/Bottle	0004-1101-20	150 mg	J8520	1 unit=1 pill

Wyeth/Genetics Institute
Reimbursement Hotline: 617-876-1170

PRODUCT	DESCRIPTION	NDC#	STRENGTH	HCPCS CODE	HCPCS BILLING UNIT
Neumega (oprelvekin)	1 vial 1 x 10	58394-004-01	5 mg	J2355	1 billing unit=5 mg
	1 x 7	58394-004-02	5 mg	J2355	1 billing unit=5 mg

Guidelines for Using Modifiers:

- When billing for an E&M office service, use **modifier 25**. Make sure to indicate that it is a separate, identifiable service.
- The following codes must include **modifier 59**: 90780: use for first hour of a therapeutic infusion 90781: use for hours 2-8 with Medicare

Indication Administration of Chemotherapy and/or Therapeutic Agents by Different Agents

The following codes must also include modifier 59:

96408: use for chemotherapy by IV push (bill as many pushes as you give)

96410: use for chemotherapy infusion up to 1 hour. When billing more than 1 hour, the 2nd hour must be greater than 30 minutes to bill the 2nd hour (96412).