

**Rapivab**<sup>®</sup>  
*peramivir injection*

**CODING**  
— AND —  
**BILLING**  
— GUIDE —

For more information,  
**call the *Rapivab Reimbursement Hotline***  
**1-844-RAPIVAB (1-844-727-4822)**

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*Please see accompanying full Prescribing Information  
and full Important Safety Information on page 7.*

**Reimbursement specialists  
are available from 9AM to 5PM ET,  
Monday through Friday (excluding holidays)  
to assist you with:**

**Rapivab<sup>®</sup>**  
peramivir injection

**Benefit verification**

**Prior authorization**

**Coding questions**

**Reimbursement support**

**General payer research**

**Claims tracking/appeals**

**Sample letter of appeal**

**Disclaimer**

The billing and coding information contained in this document is presented as a resource and guide to billing and coding for the antiviral treatment Rapivab<sup>®</sup> (peramivir injection). Billing and coding information is gathered from several sources and is subject to change without notice. While every effort is made to ensure the accuracy of this information, appropriate billing and coding for health care services is the provider's responsibility and should always be based on the patient's clinical condition, services provided, and payer guidelines.

Please see accompanying full Prescribing Information  
and full Important Safety Information on page 7.

# Coding for Rapivab

Some payers will require the National Drug Code (NDC) to identify Rapivab<sup>1</sup>

2016-2017 NDC carton	2016-2017 NDC unit-of-use	Presentation and dose
61364-181-03	61364-181-01	Each single-use vial contains 200 mg per 20 mL (10 mg/mL) of peramivir and is supplied in cartons containing 3 single-use vials

# Coding for the administration of Rapivab

The administration of Rapivab should be reported in addition to the treatment product code. Assign the appropriate administration code based on the documentation in the medical record. The following *Current Procedural Terminology (CPT)* codes are for treatments administered via injection to individuals.<sup>2</sup>

CPT Code	Description
96365	Intravenous (IV) infusion for therapy, prophylaxis, or diagnosis; initial, up to first hour
96366	IV med therapy—each additional hour
96374	IV med injection—first med
96375	IV med injection—second med subsequent injection
96376	IV med injection—first med subsequent injection
96360	IV hydration—first hour
96361	IV hydration—each additional hour

Medicare requires the use of a Healthcare Common Procedure Coding System (HCPCS) code for the administration of Rapivab. Some payers may also require that an HCPCS code be used to report Rapivab.<sup>3</sup>

HCPCS Code	Description
J2547	Injection, peramivir, 1 mg

## Disclaimer

Prior authorizations or appeals may not be completed or filed on the HCP's behalf.

# Influenza treatment *International Classification of Diseases, Tenth Revision* diagnosis codes



Below are suggested *International Classification of Diseases, Tenth Revision (ICD-10)* diagnosis codes that may be appropriate when submitting claims for Rapivab® (peramivir injection) and its administration. The code(s) should be linked to both the product and administration codes.<sup>4</sup>

ICD-10 Code	Description
J10.00	Influenza due to other identified influenza virus with unspecified type of pneumonia
J10.01	Influenza due to other identified influenza virus with the same other identified influenza virus pneumonia
J10.08	Influenza due to other identified influenza virus with other specified pneumonia
J11.00	Influenza due to unidentified influenza virus with unspecified type of pneumonia
J11.08	Influenza due to unidentified influenza virus with specified pneumonia
J12.9	Viral pneumonia, unspecified
J10.1	Influenza due to other identified influenza virus with other respiratory manifestations
J11.1	Influenza due to unidentified influenza virus with other respiratory manifestations
J10.2	Influenza due to other identified influenza virus with gastrointestinal manifestations
J10.81	Influenza due to other identified influenza virus with encephalopathy
J10.82	Influenza due to other identified influenza virus with myocarditis

ICD-10 Code	Description
J10.83	Influenza due to other identified influenza virus with otitis
J10.89	Influenza due to other identified influenza virus with other manifestations
J11.2	Influenza due to unidentified influenza virus with gastrointestinal manifestations
J11.81	Influenza due to unidentified influenza virus with encephalopathy
J11.82	Influenza due to unidentified influenza virus with myocarditis
J11.83	Influenza due to unidentified influenza virus with otitis media
J11.89	Influenza due to unidentified influenza virus with other manifestations
J09.X1	Influenza due to identified novel influenza A virus with pneumonia
J09.X2	Influenza due to identified novel influenza A virus with other respiratory manifestations
J09.X3	Influenza due to identified novel influenza A virus with gastrointestinal manifestations
J09.X9	Influenza due to identified novel influenza A virus with other manifestations

**Note: Rapivab is only indicated for the treatment of acute uncomplicated influenza in patients 18 years and older who have been symptomatic for no more than 2 days.<sup>1</sup>**

Please see accompanying full Prescribing Information and full Important Safety Information on page 7.

## Influenza treatment revenue codes

Below are suggested revenue codes that are used to attribute hospital charges to specific cost centers. Revenue codes vary by service provided and also vary depending on patient status.<sup>5</sup>

Revenue Code	Description
0636	Drugs requiring detailed coding required by Medicare to obtain pass-through payment for drugs in the outpatient department
0250	Pharmacy, general
0260	Intravenous therapy, general
0450	Emergency room
0510	Clinic
0520	IV hydration—first hour

## Examples for billing Rapivab

### Rapivab administered at a problem-focused visit in an urgent care facility

A 23-year-old woman visits an urgent care facility for evaluation of her flu symptoms. The physician recommends she receive Rapivab.<sup>2,4</sup>

J12.9 = viral pneumonia, unspecified

19. ADDITIONAL CLAIM INFORMATION (Designated by NUCC)										20. OUTSIDE LAB?	
N4 61364-181-03 Rapivab (peramivir injection), 600 mg										<input type="checkbox"/> YES <input type="checkbox"/> NO	
21. DIAGNOSIS OF NATURE OF ILLNESS OR INJURY: Relate A-L to service line below (24E)										22. RESUBMISSION CODE	
A. J12.9										23. PRIOR AUTHORIZATION	
B. _____											
C. _____											
D. _____											
E. _____											
F. _____											
G. _____											
H. _____											
I. _____											
J. _____											
K. _____											
L. _____											
24. A. DATE(S) OF SERVICE										B. PLACE OF SERVICE	
From To										EMG	
MM	DD	YY	MM	DD	YY	C. D. PROCEDURES, SERVICES, OR SUPPLIES		E. DIAGNOSIS		F. \$ CHARGES	
(Explain Unusual Circumstances)										POINT	
N4 61364-181-01											
1	12	15	16	12	15	16	11	J2547	1	6	
2	12	15	16	12	15	16	11	96365	1		

96365 = IV infusion

# Rapivab administered at a problem-focused visit in the hospital setting

A 71-year-old man visits the emergency department for evaluation of his flu symptoms. The physician recommends he receive Rapivab.<sup>2-5</sup>

0636 = Medicare revenue code

HCPCS for Medicare = J2547

96365 = IV infusion

J10.2 = Influenza due to other identified influenza virus with gastrointestinal manifestations

42 REV. CD.	43 DESCRIPTION	44 HCPCS / RATE / HIPPS CODE	45 SERV. DATE	46 SERV. QTY
0636	Injection, Rapivab	J2547	06/29/16	600
0450	Intravenous Infusion	96365	06/29/16	1

  

PAGE ____ OF ____		CREATION DATE		TOT
50 PAYER NAME		51 HEALTH PLAN ID	52 REL INFO	53 ADD BEN
54 PRIOR PAYMENTS		55		
56 INSURED'S NAME		59 PREL	60 INSURED'S UNIQUE ID	61 GROUP NA
63 TREATMENT AUTHORIZATION CODES		64 DOCUMENT CONTROL NUMBER		
65 J10.2				

**Note:** Because these services are provided in a hospital setting, a CMS-1450 claim form must be used for proper reimbursement.

# Important Safety Information

Rapivab® (peramivir injection) is indicated for the treatment of acute uncomplicated influenza in patients 18 years and older who have been symptomatic for no more than 2 days.

Efficacy of Rapivab was based on clinical trials in which the predominant influenza virus type was influenza A; a limited number of subjects infected with influenza B virus were enrolled.

Influenza viruses change over time. Emergence of resistance substitutions could decrease drug effectiveness. Other factors (for example, changes in viral virulence) might also diminish clinical benefit of antiviral drugs. Prescribers should consider available information on influenza drug susceptibility patterns and treatment effects when deciding whether to use Rapivab.

Efficacy could not be established in patients with serious influenza requiring hospitalization.

## Contraindications

Rapivab is contraindicated in patients with known serious hypersensitivity or anaphylaxis to peramivir or any component of the product. Severe allergic reactions have included anaphylaxis, erythema multiforme, and Stevens-Johnson syndrome.

## Warnings and Precautions

- Rare cases of serious skin reactions, including erythema multiforme, have been reported with Rapivab in clinical studies and in postmarketing experience. Cases of anaphylaxis and Stevens-Johnson syndrome have been reported in postmarketing experience with Rapivab. Discontinue Rapivab and institute appropriate treatment if anaphylaxis or a serious skin reaction occurs or is suspected. The use of Rapivab is contraindicated in patients with known serious hypersensitivity or anaphylaxis to Rapivab.

- Patients with influenza may be at an increased risk of hallucinations, delirium, and abnormal behavior early in their illness. There have been postmarketing reports (from Japan) of delirium and abnormal behavior leading to injury in patients with influenza who were receiving neuraminidase inhibitors, including Rapivab. Because these events were reported voluntarily during clinical practice, estimates of frequency cannot be made, but they appear to be uncommon. These events were reported primarily among pediatric patients. The contribution of Rapivab to these events has not been established. Patients with influenza should be closely monitored for signs of abnormal behavior.
- Serious bacterial infections may begin with influenza-like symptoms or may coexist with or occur as complications during the course of influenza. Rapivab has not been shown to prevent such complications.

## Adverse Reactions

The most common adverse reaction was diarrhea (8% Rapivab vs 7% placebo).

Lab abnormalities (incidence  $\geq 2\%$ ) occurring more commonly with Rapivab than placebo were elevated ALT 2.5 times the upper limit of normal (3% vs 2%), elevated serum glucose  $>160$  mg/dL (5% vs 3%), elevated CPK at least 6 times the upper limit of normal (4% vs 2%), and neutrophils  $<1.0 \times 10^9/L$  (8% vs 6%).

## Concurrent Use With Live Attenuated Influenza Vaccine

Antiviral drugs may inhibit viral replication of a live attenuated influenza vaccine (LAIV). The concurrent use of Rapivab with LAIV intranasal has not been evaluated. Because of the potential for interference between these two products, avoid use of Rapivab within 2 weeks after or 48 hours before administration of LAIV unless medically indicated.

Please see full prescribing information for Rapivab.  
You are encouraged to report negative side effects of prescription drugs to the FDA.  
Visit [www.fda.gov/medwatch](http://www.fda.gov/medwatch) or call 1-800-FDA-1088.



# **Rapivab<sup>®</sup>**

*peramivir injection*

**References:** 1. Rapivab [package insert]. Durham, NC: BioCryst Pharmaceuticals, Inc; 2016. 2. *Procedural Coding Expert: The Ultimate Guide to CPT<sup>®</sup> Coding*. Salt Lake City, UT: Contexto Media; 2013. 3. Parman C. Oncology reimbursement update 2016. [https://www.accc-cancer.org/oncology\\_issues/articles/JF16/JF16-Oncology-Coding-Reimbursement-Update.pdf](https://www.accc-cancer.org/oncology_issues/articles/JF16/JF16-Oncology-Coding-Reimbursement-Update.pdf). Accessed March 11, 2016. 4. Nelson ME. *ICD-10 cometh*. 2015. [https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=5&cad=rja&uact=8&ved=0ahUKEwih4NKzJfLAhXLTCYKHc2LAAUQFgg5MAQ&url=https%3A%2F%2Fwww.chestnet.org%2F~%2Fmedia%2Fchesnetorg%2FPublications%2FDocuments%2FCHEST%2520Physician%2FICD10InfluenzaCodes.ashx&usg=AFQjCNH5tCT-\\_gZ8SmRF\\_CZi0vB-OvUyFQ&sig2=JQocAaPEHmQ0wQsagrgHLQ&bvm=bv.116573086,d.cWw](https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=5&cad=rja&uact=8&ved=0ahUKEwih4NKzJfLAhXLTCYKHc2LAAUQFgg5MAQ&url=https%3A%2F%2Fwww.chestnet.org%2F~%2Fmedia%2Fchesnetorg%2FPublications%2FDocuments%2FCHEST%2520Physician%2FICD10InfluenzaCodes.ashx&usg=AFQjCNH5tCT-_gZ8SmRF_CZi0vB-OvUyFQ&sig2=JQocAaPEHmQ0wQsagrgHLQ&bvm=bv.116573086,d.cWw). Accessed March 10, 2016. 5. US Department of Health and Human Services. Pub. 100-04 Medicare claims processing. <https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/r167cp.pdf>. Accessed July 15, 2016.

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