

# ZARXIO<sup>®</sup> (filgrastim-sndz) and ZIENTENZO<sup>®</sup> (pegfilgrastim-bmez)

Product Information and Billing and Coding Guide

# ZARXIO® (filgrastim-sndz) PRODUCT FACT SHEET

GENERAL INFORMATION	<b>Product Website</b>	www.zarxio.com			
	<b>Reference Product<sup>1</sup></b>	NEUPOGEN® (filgrastim)			
	<b>Sandoz Inc Contact Phone Numbers</b>	Medical Information: 1-800-525-8747 Sandoz One Source: 1-844-SANDOZ1 (1-844-726-3691) Hours: M-F 8 AM-8 PM ET Fax Claims To: 1-833-664-7127			
BILLING AND CODING INFORMATION	<b>List Price/Wholesale Acquisition Cost<sup>2</sup></b>	300 mcg/0.5 mL: \$274.36/syringe; price effective 4/2019	480 mcg/0.8 mL: \$438.98/syringe; price effective 4/2016		
	<b>Unit of Sale Quantity<sup>1</sup></b>	<ul style="list-style-type: none"> <li>• 1 carton containing 1 prefilled syringe</li> <li>• 1 carton containing 2 packs of 5 prefilled syringes*</li> </ul>			
SUPPLY INFORMATION	<b>How Supplied<sup>1</sup></b>	Injection: Single-dose, preservative-free, prefilled syringes with an UltraSafe Passive® Needle Guard, containing either 300 mcg/0.5 mL or 480 mcg/0.8 mL of a clear, colorless to slightly yellowish filgrastim-sndz solution†			
	<b>Storage Information<sup>1</sup></b>	<ul style="list-style-type: none"> <li>• Store in the refrigerator at 2°C to 8°C (36°F to 46°F) in the original pack to protect from light</li> <li>• Avoid shaking</li> <li>• Prior to injection, ZARXIO may be allowed to reach room temperature for a maximum of 4 days. Any prefilled syringe left above 25°C (77°F) for greater than 24 hours should be discarded</li> <li>• Avoid freezing; if frozen, thaw in the refrigerator before administration. Discard ZARXIO if frozen more than once</li> </ul>			
	<b>Ordering Information</b>	ZARXIO is available through wholesalers and specialty distributors			
	<b>Carton Dimensions and Weight<sup>3</sup></b>	<b>Formulation</b>	<b>Package Quantity</b>	<b>Dimensions (cm)</b>	<b>Weight (g)</b>
		300 mcg/ 0.5 mL	1 prefilled syringe	4.5x3x16.4	35g
	480 mcg/ 0.8 mL	1 prefilled syringe	4.5x3x16.4	37g	
	<b>Expiration Date</b>	The expiration date is printed on each ZARXIO prefilled syringe			



\*Although the inner packs will have a unique NDC, they are not available for individual sale.

† Latex-sensitive individuals: The removable needle cap of the ZARXIO prefilled syringe contains natural rubber latex which may cause allergic reaction. The safe use of ZARXIO in latex-sensitive individuals has not been studied. Persons with latex allergies should not administer these products.

SANDOZ recommends that the product name and the prescribing information within the package be reviewed before drug administration to ensure appropriate dosing. Please follow any guidance that your institution has regarding safe administration of medications.

ZARXIO is a registered trademark of NOVARTIS AG.

UltraSafe Passive is a registered trademark of Safety Syringes, Inc.

NEUPOGEN is a registered trademark of Amgen Inc.

**Please see ZARXIO Important Safety Information and accompanying full Prescribing Information and ZIEXTENZO Important Safety Information and accompanying full Prescribing Information.**

# ZIEXTENZO® (pegfilgrastim-bmez) PRODUCT FACT SHEET

GENERAL INFORMATION	<b>Product Website</b>	www.ziextenzo.com			
	<b>Reference Product<sup>4</sup></b>	Neulasta® (pegfilgrastim)			
	<b>Sandoz Inc Contact Phone Numbers</b>	Medical Information: 1-800-525-8747 Sandoz One Source: 1-844-SANDOZ1 (1-844-726-3691) Hours: M-F 8 AM-8 PM ET Fax Claims To: 1-833-664-7127			
BILLING AND CODING INFORMATION	<b>List Price/Wholesale Acquisition Cost<sup>2</sup></b>	6 mg/0.6 mL: \$3,925.53 per syringe; price effective November 2019			
	<b>Unit of Sale Quantity<sup>4</sup></b>	1 carton containing 1 prefilled syringe			
SUPPLY INFORMATION	<b>How Supplied<sup>4</sup></b>	Single-dose, prefilled syringe with an UltraSafe Passive® Needle Guard, containing 6 mg/0.6 mL of a clear, colorless to slightly yellowish pegfilgrastim-bmez solution*			
	<b>Storage Information<sup>4</sup></b>	<ul style="list-style-type: none"> <li>• Store in the refrigerator at 2°C to 8°C (36°F to 46°F) in the original pack to protect from light</li> <li>• Avoid shaking</li> <li>• Discard syringes stored at room temperature for more than 120 hours</li> <li>• Avoid freezing; if frozen, thaw in the refrigerator before administration. Discard syringe if frozen more than once</li> </ul>			
	<b>Ordering Information</b>	ZIEXTENZO is available through wholesalers and specialty distributors			
	<b>Carton Dimensions and Weight<sup>5</sup></b>	<b>Formulation</b>	<b>Package Quantity</b>	<b>Dimensions (cm)</b>	<b>Weight (g)</b>
		6 mg/0.6 mL	1 prefilled syringe	4.5x3x16.4	39.5
<b>Expiration Date</b>	The expiration date is printed on each ZIEXTENZO prefilled syringe				



\*Latex-sensitive individuals: The removable needle cap of the ZIEXTENZO prefilled syringe contains dry natural rubber (a derivative of latex), which may cause allergic reaction. Persons with latex allergies should not administer these products.

SANDOZ recommends that the product name and the prescribing information within the package be reviewed before drug administration to ensure appropriate dosing. Please follow any guidance that your institution has regarding safe administration of medications.



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UltraSafe Passive is a registered trademark of Safety Syringes, Inc.

Neulasta is a registered trademark of Amgen Inc.

Please see ZARXIO [Important Safety Information](#) and accompanying full [Prescribing Information](#) and ZIEXTENZO [Important Safety Information](#) and accompanying full [Prescribing Information](#).

# ZARXIO AND ZIEXTENZO BILLING AND CODING INFORMATION

	 <b>ZARXIO®</b> (filgrastim-sndz)	 <b>ZIEXTENZO®</b> (pegfilgrastim-bmez)
<b>HCPCS Code<sup>6,7</sup></b>	<b>Q5101</b> Injection, filgrastim-sndz, biosimilar (ZARXIO), 1 mcg	<b>Q5120</b> Injection, pegfilgrastim-bmez, biosimilar, (ZIEXTENZO), 0.5 mg
<b>Billable Units<sup>8-10</sup></b>	<b>300 mcg/0.5 mL</b>	<b>6 mg/0.6 mL</b>
	<b>300</b> Billable units for administration of 1 syringe*	<b>12</b> Billable units for administration of 1 syringe*
	<b>480 mcg/0.8 ml</b>	
	<b>480</b> Billable units for administration of 1 syringe*	
<b>NDC Codes<sup>1,4</sup></b>	<b>300 mcg/0.5 mL</b>	<b>6 mg/0.6 mL</b>
	1 prefilled syringe and 10 prefilled syringes (two 5-packs) <sup>†</sup>	(ZIEXTENZO), 1 prefilled syringe
	<b>61314-318-01 (10-digit)</b> <b>61314-0318-01 (11-digit)</b>	<b>61314-866-01 (10-digit)</b>
	<b>61314-318-10 (10-digit)</b> <b>61314-0318-10 (11-digit)</b>	<b>61314-0866-01 (11-digit)</b>
	<b>480 mcg/0.8 ml</b>	
	1 prefilled syringe and 10 prefilled syringes (two 5-packs) <sup>†</sup>	
	<b>61314-326-01 (10-digit)</b> <b>61314-0326-01 (11-digit)</b>	
	<b>61314-326-10 (10-digit)</b> <b>61314-0326-10 (11-digit)</b>	
<b>ZARXIO and ZIEXTENZO</b>		
<b>Modifiers<sup>11,12</sup></b>	<b>JW:</b> Modifier to report the amount of drug or biological that is discarded and eligible for payment under the discarded drug policy <b>JG:</b> Modifier for drug or biological acquired with 340B drug pricing program discount <b>TB:</b> Modifier for drug or biological acquired with 340B drug pricing program discount; reported for informational purposes	
<b>CPT® Code<sup>13</sup></b>	<b>96372</b> Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular	
<b>Patient Diagnosis Code<sup>14</sup></b>	<b>ICD-10-CM</b> Appropriate diagnosis code for the patient's condition. Allowable diagnosis codes vary by payer. Report the appropriate diagnosis code(s) to describe the patient's condition. Primary and secondary diagnosis codes may be required.	

\*For administration of less than 1 syringe, please use the billable units and JW modifier as appropriate.

<sup>†</sup> Although the inner packs have a unique NDC, they are not available for sale.

HCPCS=Healthcare Common Procedure Coding System; CPT=Current Procedural Terminology; ICD-10-CM=International Classification of Diseases - 10th Revision - Clinical Modification; NDC=National Drug Code.

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Please see ZARXIO [Important Safety Information](#) and accompanying full [Prescribing Information](#) and ZIEXTENZO [Important Safety Information](#) and accompanying full [Prescribing Information](#).

## Best practices to avoid claims denial and/or billing errors:



Provide appropriate documentation in the patient's medical record to justify the coding



If submitting an unclassified/miscellaneous code, include additional information



Monitor payer coding and coverage policies

## Common reasons for claims denial



Incorrect or transposed patient information



Incorrect modifier or lack of modifier



Invalid codes—CPT, HCPCS, ICD-10-CM



Service not deemed a medical necessity



Missing or incorrect number of units



Insufficient information to process the claim (eg, missing NDC, prior authorization number, invalid NPI)



Please call 1-844-SANDOZ1 (1-844-726-3691) if you require additional step-by-step guidance

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**References** **1.** ZARXIO [prescribing information]. Princeton, NJ: Sandoz Inc; September 2022. **2.** Data on file: CMS Published Reimbursement. Princeton, NJ: Sandoz Inc; February 2022. **3.** Data on file. Sandoz Inc. January 2023. **4.** ZIEXTENZO [prescribing information]. Princeton, NJ: Sandoz Inc; March 2021. **5.** Data on file. Sandoz Inc. January 2023. **6.** Centers for Medicare & Medicaid Services. HCPCS Quarterly Update July 2020. <https://www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/HCPCS-Quarterly-Update>. Published July 2020. Updated October 15, 2020. Accessed November 2, 2022. **7.** Centers for Medicare and Medicaid Services. Quarterly Healthcare Common Procedure Coding System [HCPCS] Drug Biological Code Changes – April 2018 Update. <https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/2018Downloads/R3966CP.pdf>. Published February 2, 2018. Accessed November 2, 2022. **8.** NDC 61314-318-01 ZARXIO Filgrastim-sndz. National Drug Codes List Website. <https://ndclist.com/ndc/61314-318/package/61314-318-01>. Accessed November 2, 2022. **9.** NDC 61314-326-01 ZARXIO Filgrastim-sndz. National Drug Codes List Website. <https://ndclist.com/ndc/61314-326/package/61314-326-01>. Accessed November 3, 2022. **10.** NDC 61314-866-01 ZIEXTENZO. Pegfilgrastim-bmez. National Drug Codes List Website. <https://ndclist.com/ndc/61314-866/package/61314-866-01>. Accessed November 2, 2022. **11.** Centers for Medicare and Medicaid Services. Medicare Program JW-Modifier: Drug/Biological Amount Discarded/Not Administered To Any Patient Frequently Asked Questions. <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalOutpatientPPS/Downloads/JWModifier-FAQs.pdf>. Published August 26, 2016. Accessed November 2, 2022. **12.** Centers for Medicare and Medicaid Services. Medicare-FFS Program: Billing 340B Modifiers Under the Hospital Outpatient Prospective Payment System (OPPS). <https://www.cms.gov/medicare/medicare-fee-for-service-payment/hospitaloutpatientpps/downloads/billing-340b-modifiers-under-hospital-ops.pdf>. Published April 2, 2018. Accessed November 2, 2022. **13.** American Medical Association. *CPT® 2019 Professional Edition*. Chicago, IL: American Medical Association; 2019. **14.** Centers for Medicare and Medicaid Services. ICD-10-CM Official Guidelines for Coding and Reporting FY 2019. <https://www.cms.gov/Medicare/Coding/ICD10/Downloads/2019-ICD10-Coding-Guidelines-.pdf>. Accessed November 2, 2022.

Please follow any guidance that your institution has regarding safe administration of medications. The coding information contained herein is for informational purposes only and is not a guarantee of coverage or reimbursement for any product or service. This information is not intended to substitute for the physician's independent diagnosis or treatment of each patient.

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