

SAMPLE CODING

Diabetic Macular Edema (DME)

ICD-10-CM Diagnosis Codes*

Add the appropriate digit to the end of each code to indicate laterality: 1=RIGHT EYE 2=LEFT EYE 3=BILATERAL 9=UNSPECIFIED	DM DUE TO UNDERLYING CONDITION	DRUG- OR CHEMICAL- INDUCED DM	TYPE 1 DM	TYPE 2 DM	OTHER SPECIFIED DM
DR NOS w DME	E08.311	E09.311	E10.311	E11.311	E13.311
Mild NPDR w DME	E08.321	E09.321	E10.321	E11.321	E13.321
Moderate NPDR w DME	E08.331	E09.331	E10.331	E11.331	E13.331
Severe NPDR w DME	E08.341	E09.341	E10.341	E11.341	E13.341
PDR w DME	E08.351	E09.351	E10.351	E11.351	E13.351

Drug and Administration Codes for Implantation Procedure

BILLER	CODE		DESCRIPTION
Surgical centers [†]	NDC	10-digit 50242-078-55	SUSVIMO (100 mg/mL) single-dose vial and initial fill needle (34-gauge needle with a 5-µm integrated filter)
		11-digit 50242-0078-55	
	HCPCS	J2779	Injection, ranibizumab, via intravitreal implant (susvimo), 0.1 mg
	HCPCS modifier [‡]	JW	Drug amount discarded/not administered to any patient
		JZ	Zero drug amount discarded/not administered to any patient
	Facility fee: CPT	67027	Implantation of intravitreal drug delivery system, includes concomitant removal of vitreous
	CPT modifier	–LT	Left eye modifier
		–RT	Right eye modifier

SUSVIMO Billing Direction

- Bill 20 units with J2779 for the 2-mg administered dose of SUSVIMO
- On a second line, bill 80 units using J2779 and the JW modifier for discarded drug[‡]

CMS=Centers for Medicare & Medicaid Services; CPT=Current Procedural Terminology; DM=diabetes mellitus; DR=diabetic retinopathy; HCPCS=Healthcare Common Procedure Coding System; ICD-10-CM=International Classification of Diseases, 10th Revision, Clinical Modification; LT=left; NDC=National Drug Code; NOS=not otherwise specified; NPDR=nonproliferative diabetic retinopathy; PDR=proliferative diabetic retinopathy; RT=right.

*Remember: All codes need an additional digit to indicate laterality (1=right eye; 2=left eye; 3=bilateral).

[†]For Medicare, hospital outpatient departments should also report the cost of the implant using HCPCS code C1889 (implantable/insertable device, not otherwise classified).

[‡]SUSVIMO meets criteria for an exemption for wastage based on requiring filtration prior to administration for both the implantation and refill procedures. The JW modifier is required on claims for all single-dose containers or single-use drugs when an amount is discarded. The JZ modifier is required to be used as of July 1, 2023. For more information on the JW and JZ modifiers, visit CMS.gov.

These codes are not all-inclusive; appropriate codes can vary by patient, setting of care and payer. Correct coding is the responsibility of the provider submitting the claim for the item or service. Please check with the payer to verify codes and special billing requirements. Genentech does not make any representation or guarantee concerning reimbursement or coverage for any item or service.

Many payers will not accept unspecified codes. If you use an unspecified code, please check with your payer.

for **SUSVIMO**[®]
(ranibizumab injection)

Diabetic Macular Edema (DME) (cont)

Drug and Administration Codes for Refill Procedure

BILLER	CODE		DESCRIPTION
Retina specialist office	NDC	10-digit 50242-078-12	SUSVIMO (100 mg/mL) single-dose vial
		11-digit 50242-0078-12	
	HCPCS	J2779	Injection, ranibizumab, via intravitreal implant (susvimo), 0.1 mg
	HCPCS modifier*	JZ	Zero drug amount discarded/not administered to any patient
	Professional services: CPT	67028	Intravitreal injection of a pharmacologic agent (separate procedure)
	CPT modifier	–LT	Left eye modifier
		–RT	Right eye modifier

SUSVIMO Billing Direction

Bill 100 units with J2779 and the JZ modifier for the 10-mg single-dose vial of SUSVIMO.*

CMS=Centers for Medicare & Medicaid Services; CPT=Current Procedural Terminology; HCPCS=Healthcare Common Procedure Coding System; LT=left; NDC=National Drug Code; RT=right.

*SUSVIMO meets criteria for an exemption for wastage based on requiring filtration prior to administration for both the implantation and refill procedures. The JZ modifier is required on claims for all single-dose containers or single-use drugs when no drug is discarded/administered to any patient as of July 1, 2023. For more information on the JZ modifier, visit CMS.gov.

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Many payers will not accept unspecified codes. If you use an unspecified code, please check with your payer.

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Please see Important Safety Information in the full SUSVIMO [Prescribing Information](#), including BOXED WARNING.