APONVIE™
(aprepitant) injectable emulsion

C9145

Effective April 1, 2023, use C9145 when billing for APONVIE

APONVIE is the only product in its class separately reimbursed by Medicare in HOPDs and ASCs

Under 3-year transitional pass-through status effective April 1, 2023

REIMBURSEMENT GUIDE

- APONVIE is separately reimbursed by Medicare at ASP + 6% in HOPDs and ASCs under 3-year transitional pass-through status effective April 1, 2023[a]
- Generic PONV medications like oral aprepitant and other drugs without pass-through status are packaged across all settings of care[b]
- Some commercial payers reimburse separately for APONVIE as a percentage of billed charges. However, most will reimburse APONVIE as part of the surgical supply package across all sites of care. Contact payers to verify coverage.

Key Reimbursement Details

HCPCS Code	Description	NDC (11 Digit)	Billable Unit
C9145	Injection, aprepitant	47426-0401-01	1 mg

The billable unit for C9145 is 1 mg. The 32 mg (4.4 mL) single dose in each APONVIE vial corresponds to 32 billable units. To indicate that the complete single-dose vial was administered, use the HCPCS modifier JZ.[c] Use the JW modifier to separately bill unused and discarded drug amounts.

[a]APONVIE will be reimbursed at WAC + 3% until ASP is established. Medicare reimbursement is subject to CMS updates, co-pay amounts, sequestration, and other factors.

[b]Reimbursement comparisons do not imply safety or efficacy.

[c]For dates of service on or after July 1, 2023, the JZ modifier is required on claims for single-dose containers when no amount was discarded.

HOPD: hospital outpatient department. **ASC:** ambulatory surgical center. **ASP:** average sales price. **WAC:** wholesale acquisition cost. **CMS:** Centers for Medicare & Medicaid Services.

INDICATION

APONVIE is a substance P/neurokinin-1 (NK_1) receptor antagonist, indicated for the prevention of postoperative nausea and vomiting (PONV) in adults.

Limitations of Use: APONVIE has not been studied for treatment of established nausea and vomiting.

IMPORTANT SAFETY INFORMATION

Contraindications

APONVIE is contraindicated in patients with a history of hypersensitivity to aprepitant or any component of the product, and in patients taking pimozide. Increased pimozide levels may cause serious or life-threatening reactions, such as QT prolongation.

Please see Important Safety Information throughout and full Prescribing Information.

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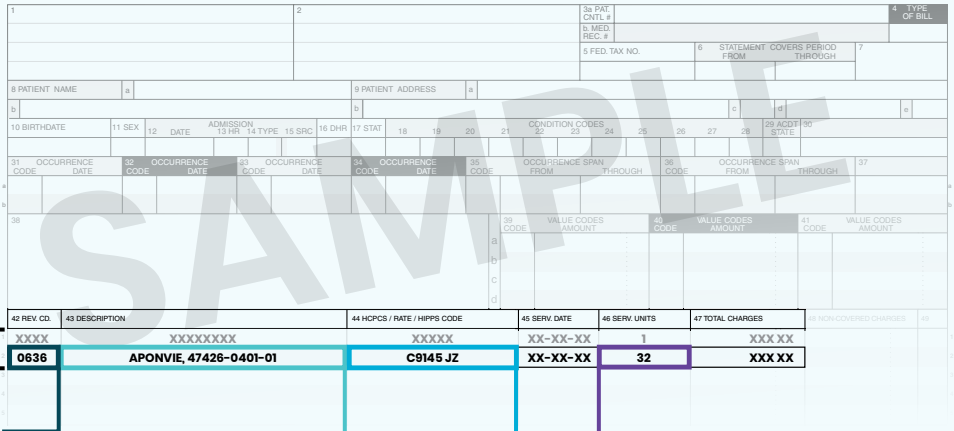
SAMPLE CLAIM FORM CMS-1450 (UB-04)

HOPD (Medicare); HOPD, ASC (Non-Medicare Payers; Confirm with Payer)

Complete the information needed to bill for the procedure. **APONVIE must be billed using a separate line.**



Field 42
Include revenue code 0636.

Field 43
Include the required additional information (eg, product name and NDC).

Payer NDC requirements and placement may vary; confirm with payer or Heron Connect.

Field 44
Specify appropriate HCPCS code. For dates of service on or after April 1, 2023, use **C9145.**

To indicate that the complete single-dose vial was administered, use the HCPCS modifier JZ.[a]

If a portion of the single-use vial was discarded, document it on a separate line using the HCPCS modifier JW.

Field 46
Specify the number of units administered. **The billable unit for C9145 is 1 mg.** The 32 mg (4.4 mL) single dose in each APONVIE vial corresponds to 32 billable units.

HERON CONNECT®

QUESTIONS?

Contact Heron Connect at **1-844-HERON11 (1-844-437-6611)** from 8 AM to 5 PM ET, Monday through Friday, or **HeronConnect.com**

[a]For dates of service on or after July 1, 2023, the JZ modifier is required on claims for single-dose containers when no amount was discarded.

Note: This document is provided for your guidance only. Coding requirements may vary by payer; please consult the payer to determine which codes are required.

HOPD: hospital outpatient department.

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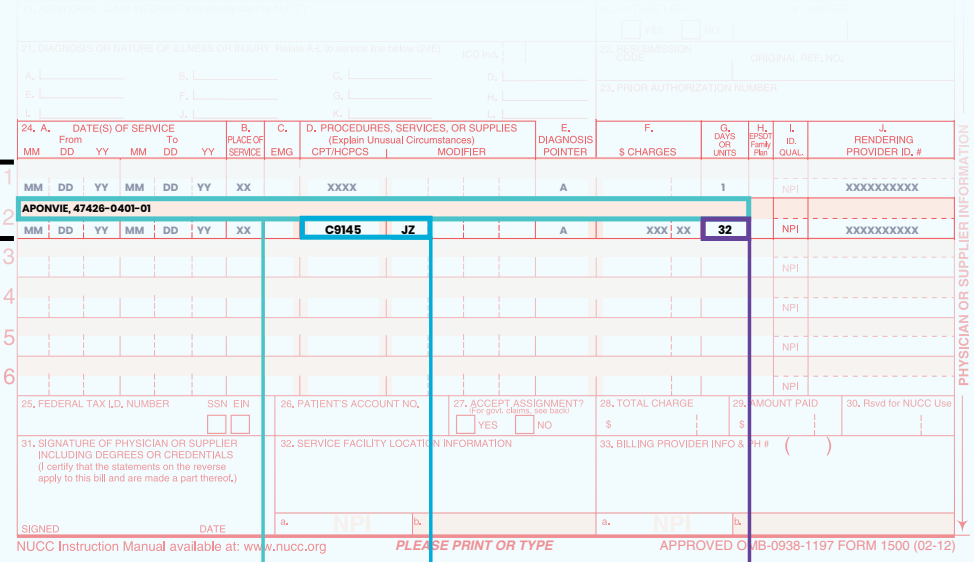
SAMPLE CLAIM FORM CMS-1500

ASC, Physician Office (Medicare)

Complete the information needed to bill for the procedure. **APONVIE must be billed using a separate line.**



Field 24 (Shaded Area)
Include the required additional information (eg, product name and NDC).

Payer NDC requirements and placement may vary; confirm with payer or Heron Connect.

Field 24D
Specify appropriate HCPCS code. For dates of service on or after April 1, 2023, use **C9145.**

To indicate that the complete single-dose vial was administered, use the HCPCS modifier JZ.[a]

If a portion of the single-use vial was discarded, document it on a separate line using the HCPCS modifier JW.

Field 24G
Specify the number of units administered. **The billable unit for C9145 is 1 mg.** The 32 mg (4.4 mL) single dose in each APONVIE vial corresponds to 32 billable units.

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[a]For dates of service on or after July 1, 2023, the JZ modifier is required on claims for single-dose containers when no amount was discarded.

Note: This document is provided for your guidance only. Coding requirements may vary by payer; please consult the payer to determine which codes are required.

ASC: ambulatory surgical center.

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CLAIM SUBMISSION CHECKLIST

Have you included the HCPCS code for APONVIE?

☐ C9145

Have you included the following information to support utilization of C9145?

☐ Drug name ☐ NDC

Have you utilized the appropriate modifier to document use of the complete single-dose vial (JZ) or to document that a portion of the vial was discarded (JW)?

☐ Yes

Have you included other modifiers as applicable, such as TB or JG for drugs acquired through the 340B Program?

☐ Yes

IMPORTANT SAFETY INFORMATION (CONT)

Warnings and Precautions

Hypersensitivity Reactions: Serious hypersensitivity reactions, including anaphylaxis, during or soon after administration of aprepitant have occurred. Symptoms including dyspnea, eye swelling, flushing, pruritus, and wheezing have been reported. Monitor patients during and after administration. If hypersensitivity reactions occur, administer appropriate medical therapy. Do not administer APONVIE in patients who experienced these symptoms with previous use of aprepitant.

Clinically Significant CYP3A4 Drug Interactions: Aprepitant is a substrate, weak-to-moderate (dose-dependent) inhibitor, and an inducer of CYP3A4. Use of pimozide, a CYP3A4 substrate, with APONVIE is contraindicated. Use of APONVIE with strong CYP3A4 inhibitors (eg, ketoconazole) may increase plasma concentrations of aprepitant and result in an increased risk of adverse reactions related to APONVIE. Use of APONVIE with strong CYP3A4 inducers (eg, rifampin) may result in a reduction in aprepitant plasma concentrations and decreased efficacy of APONVIE.

Decrease in INR with Concomitant Warfarin: Use of aprepitant with warfarin, a CYP2C9 substrate, may result in a clinically significant decrease in the International Normalized Ratio (INR) of prothrombin time. Monitor the INR in patients on chronic warfarin therapy in the 2-week period particularly at 7 to 10 days, following administration of APONVIE.

Risk of Reduced Efficacy of Hormonal Contraceptives: The efficacy of hormonal contraceptives may be reduced for 28 days following administration of APONVIE. Advise patients to use effective alternative or back-up methods of non-hormonal contraception for 1 month following administration of APONVIE.

Use in Specific Populations

Avoid use of APONVIE in pregnant women as alcohol is an inactive ingredient in APONVIE. There is no safe level of alcohol exposure in pregnancy.

Adverse Reactions

Most common adverse reactions (incidence ≥3%) for APONVIE are constipation, fatigue, and headache and for oral aprepitant are constipation and hypotension.

Report side effects to Heron at 1-844-437-6611 or to the FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

Please see full Prescribing Information.

HERON CONNECT®

QUESTIONS?

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HERON THERAPEUTICS®

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