**PROCRIT® (EPOETIN ALFA) CMS 1500 Sample Claim Form**

**How Supplied**

PROCRIT®
1 mL Single-Dose
Preservative-free Solution
Trays containing six (6) single-dose vials:
- 2000 Units/mL (NDC 59676-302-01)
- 3000 Units/mL (NDC 59676-303-01)
- 4000 Units/mL (NDC 59676-304-01)
- 10,000 Units/mL (NDC 59676-310-01)
Trays containing four (4) single-dose vials:
- 40,000 Units/mL (NDC 59676-340-01)

This is a partial list. Please click here to see a full list.

**Third-party reimbursement is affected by many factors. This document and the information and assistance provided by Janssen CarePath are presented for informational purposes only. They do not constitute reimbursement or legal advice. Janssen CarePath does not promise or guarantee coverage, levels of reimbursement, or payment.**

**1. Note**
Most recent HCT or Hb levels. Other documentation must be available upon request.

**2. Note**
Payer policies regarding the use of the 10-digit NDC format (59676-302-02) or the 11-digit format (59676-0302-02) may vary. Consult your payer or call Janssen CarePath at 877-227-3728 to obtain specific coding guidance.

**3. Note**
Indicate diagnosis using the appropriate ICD-10-CM code.

**4. Note**
Some payers may ask providers to specify name, dosage strength, & method of administration. Payer requirements vary. Note: Some payers require alternate product codes. Call Janssen CarePath at 877-227-3728 to confirm payer-specific coding requirements.

**5. Note**
Indicate appropriate CPT® and HCPCS codes and modifiers, if required. HCPCS code J0885 should be utilized for PROCRIT® and should be considered equivalent to 1000 units. Consult your local payer for coding policy. Call Janssen CarePath at 877-227-3728 to confirm payer requirements.

**6. Item 24E**
Refer to the diagnosis for this service (see item 21).

**7. Item 24F**
Indicate $ charges.

**8a-d. Items 17b, 24J, 32a, 33a**
For proper use of the NPI, please refer to the CMS Internet Only Manual (IOM), Publication 100-04, Medicare Claims Processing, Chapter 26; available at www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Internet-Only-Manuals-IOMs.html

**9. Item 24G**
Use the J0885 code to indicate units of PROCRIT® administered to a patient per kilogram of body weight. Consult your payer or call Janssen CarePath at 877-227-3728.