

# BILL FOR EXPAREL WITH HCPCS CODE C9290

Effective January 1, 2019, EXPAREL is eligible for separate Medicare reimbursement in a Medicare-certified ambulatory surgery center (ASC) setting.

- EXPAREL is priced at \$1.22/mg\* and should be billed using Healthcare Common Procedure Coding System (HCPCS) code **C9290**. Based on the \$1.22/mg\* pricing,
  - For the 266 mg (20 mL) dose, the allowed amount for reimbursement is \$324.52
  - For the 133 mg (10 mL) dose, the allowed amount for reimbursement is \$162.50
- ✓ Document the amount of EXPAREL administered in the patient's medical record. The amount must be expressed in mg
- ✓ Medicare will reimburse EXPAREL in the 2 doses that are available: 266 mg (20 mL) and 133 mg (10 mL)
- ✓ Commercial payors that follow the current (2019) Medicare payment methodology and policy are also expected to reimburse EXPAREL when billed with HCPCS code **C9290**. Check with your payor's Provider Network Representative to confirm
- ✓ Check your ASC contracts to verify the reimbursement amount if your commercial contract reimburses at a percentage of the current Medicare payment rate. Contact your payor's Provider Network Representative to confirm
- ✓ In the event that your ASC successfully negotiates reimbursement for EXPAREL with any of its commercial payors, it is important that your insurance verification process is updated to include EXPAREL
- ✓ It is important to notify the surgeons, anesthesiologists, and their office staff by providing a list of payors and the applicable benefit plan that will reimburse EXPAREL in an ASC setting

\*Pricing is subject to Centers for Medicare & Medicaid Services (CMS) Medicare updates.



**C9290**  
BILLING GUIDANCE

For reimbursement questions, please call 1-855-RX-EXPAREL (793-9727), email [reimbursement@pacira.com](mailto:reimbursement@pacira.com), or visit [www.EXPAREL.com/reimbursement](http://www.EXPAREL.com/reimbursement).

**EXPAREL**<sup>®</sup>  
(bupivacaine liposome injectable suspension)

# CAPTURE REIMBURSEMENT WHEN EXPAREL IS USED IN A SURGERY CASE

For Medicare and commercial payors that require the CMS 1500 form or electronic 837P form, follow these steps:

## STEP 1: DOCUMENTATION

- ✓ The amount of EXPAREL used in a surgery case is to be documented in the patient's medical record
- ✓ If any amount of EXPAREL is not used, known as *drug wastage*, it must also be documented in the medical record and indicated that the unused amount was discarded. EXPAREL drug wastage may be billed using the HCPCS modifier, "JW" on a separate line of the form

## STEP 2: BILLING FOR EXPAREL

- ✓ Bill for EXPAREL using HCPCS code **C9290**
- ✓ Document and bill the dosage as units (266 mg or 133 mg)
- ✓ Enter the number of units given in box 24G

24. A. DATES OF SERVICE												23. PRIOR AUTHORIZATION NUMBER											
From				To				C. PLACE OF SERVICE (ICD-9-CM)	D. PROCEDURES, SERVICES, OR SUPPLIES (ICD-9-CM, HCPCS, CPT, HCPCS)				E. DIAGNOSIS POINTER	F. \$ CHARGES		G. \$ UNIT PRICE	H. \$ TOTAL CHARGE	I. NPI	J. RENDERING PROVIDER ID #				
MM	DD	YY	MM	DD	YY	1	2		3	4	\$	UNIT PRICE		\$	TOTAL CHARGE								
01	07	19	01	07	19	24		63030			A	8500	00	1			NPI						
01	07	19	01	07	19	24		C9290			A	262	50	200			NPI						
01	07	19	01	07	19	24		C9290	JW		A	87	50	66			NPI						
																	NPI						
																	NPI						
																	NPI						

  

25. FEDERAL TAX ID NUMBER			26. PATIENT'S ACCOUNT NO.			27. ACCEPT ASSIGNMENT? (YES/NO)			28. TOTAL CHARGE			29. AMOUNT PAID			30. FILE FOR NUCC USE		
31. SIGNATURE OF PHYSICIAN OR SUPPLIER INCLUDING DEGREES OR CREDENTIALS			32. SERVICE FACILITY LOCATION INFORMATION			33. BILLING PROVIDER INFO & PH #											
SIGNED _____ DATE _____			NPI			NPI											

NUCC Instruction Manual available at: [www.nucc.org](http://www.nucc.org) PLEASE PRINT OR TYPE APPROVED OMB-0938-1197 FORM 1500 (02-12)

## STEP 3: BILLING FOR DRUG WASTAGE

- ✓ Drug amounts that are unused and discarded may be billed separately using the HCPCS modifier "JW"
- ✓ The modifier is noted as "**C9290 JW**" and is billed on a separate line. In order for the drug wastage to be reimbursed, providers must report 2 claim lines to represent both the used and unused amount of the drug

Check with your Provider Network Representative regarding the appropriate claim form and process to bill for EXPAREL if they do not use the CMS 1500 form or electronic 837P form.

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