



BILLING AND CODING GUIDE

Product Codes

ELITEK may be identified by a Healthcare Common Procedure Coding System (HCPCS) Level II code, National Drug Code (NDC), and a Current Procedural Terminology (CPT) code.

The coding information provided below is for informational purposes only.

HCPCS Level II Code

J2783 Injection, rasburicase, 0.5 mg for hospital inpatient, physician office and most payers

NDC Codes

0024-5150-10 ELITEK is supplied in a carton with 3 single-use vials each containing 1.5 mg of rasburicase and 3 ampules each containing 1 mL diluent

0024-5151-75 ELITEK is supplied in a carton with 1 single-use vial containing 7.5 mg of rasburicase and 1 ampule containing 5 mL diluent

CPT Code

96365 Intravenous infusion for therapy, prophylaxis, or diagnosis; (specify substance of drug); initial, up to 1 hour

| | | Hospital Inpatient | Hospital Outpatient |
|---------------------------------|-----------------------|---|---|
| Administration of ELITEK | Revenue code | 0260 IV therapy, general | 0260 IV therapy, general |
| | ICD-10 procedure code | 3E033GC Introduction of other therapeutic substance into peripheral vein, percutaneous approach | 3E033GC Introduction of other therapeutic substance into peripheral vein, percutaneous approach |
| ELITEK | Revenue code | 0250 Pharmacy, general | 0636 Drugs requiring detailed coding |

Indication – ELITEK is indicated for the initial management of plasma uric acid levels in pediatric and adult patients with leukemia, lymphoma, and solid tumor malignancies who are receiving anticancer therapy expected to result in tumor lysis and subsequent elevation of plasma uric acid. ELITEK is indicated only for a single course of treatment.

Important Safety Information

WARNING: HYPERSENSITIVITY REACTIONS, HEMOLYSIS, METHEMOGLOBINEMIA, AND INTERFERENCE WITH URIC ACID MEASUREMENTS

- **Hypersensitivity Reactions: ELITEK can cause serious and fatal hypersensitivity reactions including anaphylaxis. Immediately and permanently discontinue ELITEK in patients who experience a serious hypersensitivity reaction.**

Please see additional Important Safety Information throughout and accompanying full [Prescribing Information](#) including Boxed WARNING.

Diagnosis Codes ICD-10

| ICD-10 | Description |
|---------------|---|
| C00.0-D49.9 | Malignant neoplasm of external upper lip – Neoplasm of unspecified behavior of unspecified site |
| C82.90-C82.98 | Follicular lymphoma, unspecified, unspecified site – Follicular lymphoma, unspecified, lymph nodes of multiple sites |
| C83.10-C83.18 | Mantle cell lymphoma, unspecified site – Mantle cell lymphoma, lymph nodes of multiple sites |
| C83.30-C83.38 | Diffuse large B-cell lymphoma, unspecified site – Diffuse large B-cell lymphoma, lymph nodes of multiple sites |
| C83.38-C83.39 | Diffuse large B-cell lymphoma, lymph nodes of multiple sites – Diffuse large B-cell lymphoma, extranodal and solid organ sites |
| C83.50-C83.58 | Lymphoblastic (diffuse) lymphoma, unspecified site – Lymphoblastic (diffuse) lymphoma, lymph nodes of multiple sites |
| C83.70-C83.78 | Burkitt's lymphoma, unspecified site – Burkitt's lymphoma, lymph nodes of multiple sites |
| C83.80-C83.88 | Other non-follicular lymphoma, unspecified site – Other non-follicular lymphoma, lymph nodes of multiple sites |
| C84.40-C84.48 | Peripheral T-cell lymphoma, not classified, unspecified site – Peripheral T-cell lymphoma, not classified, lymph nodes of multiple sites |
| C84.60-C84.68 | Anaplastic large cell lymphoma, ALK-positive, unspecified site – Anaplastic large cell lymphoma, ALK-positive, lymph nodes of multiple sites |
| C85.80-C85.88 | Other specified types of non-Hodgkin lymphoma, unspecified site – Other specified types of non-Hodgkin lymphoma, lymph nodes of multiple sites |
| C90.10-C90.12 | Plasma cell leukemia not having achieved remission – Plasma cell leukemia, in relapse |
| C91.00-C91.02 | Acute lymphoblastic leukemia not having achieved remission – Acute lymphoblastic leukemia, in relapse |
| C91.10-C91.12 | Chronic lymphocytic leukemia of B-cell type not having achieved remission – Chronic lymphocytic leukemia of B-cell type, in relapse |
| C91.Z0-C91.Z2 | Other lymphoid leukemia not having achieved remission – Other lymphoid leukemia, in relapse |
| C91.40 | Hairy cell leukemia not having achieved remission |
| C91.90-C91.92 | Lymphoid leukemia, unspecified not having achieved remission – Lymphoid leukemia, unspecified, in relapse |
| C92.00-C92.02 | Acute myeloblastic leukemia, not having achieved remission – Acute myeloblastic leukemia, in relapse |

Important Safety Information cont'd

- **Hemolysis: Do not administer ELITEK to patients with glucose-6-phosphate dehydrogenase (G6PD) deficiency. Immediately and permanently discontinue ELITEK in patients developing hemolysis. Screen patients at higher risk for G6PD deficiency (e.g., patients of African or Mediterranean ancestry) prior to starting ELITEK.**

Please see additional Important Safety Information throughout and accompanying full [Prescribing Information](#) including **Boxed WARNING**.



Diagnosis Codes ICD-10 cont'd

| ICD-10 | Description |
|---------------|---|
| C92.10-C92.12 | Chronic myeloid leukemia BCR/ABL-positive, not having achieved remission – Chronic myeloid leukemia BCR/ABL-positive, in relapse |
| C92.20-C92.22 | Atypical chronic myeloid leukemia, BCR/ABL-negative, not having achieved remission – Atypical chronic myeloid leukemia, BCR/ABL-negative, in relapse |
| C92.Z0-C92.Z2 | Other myeloid leukemia, not having achieved remission – Other myeloid leukemia, in relapse |
| C92.90-C92.92 | Myeloid leukemia, unspecified, not having achieved remission – Myeloid leukemia, unspecified, in relapse |
| C93.00-C93.02 | Acute monoblastic/monocytic leukemia, not having achieved remission – Acute monoblastic/monocytic leukemia, in relapse |
| C93.10-C93.12 | Chronic myelomonocytic leukemia not having achieved remission – Chronic myelomonocytic leukemia, in relapse |
| C93.90-C93.92 | Monocytic leukemia, unspecified, not having achieved remission – Monocytic leukemia, unspecified, in relapse |
| C93.Z0-C93.Z2 | Other monocytic leukemia, not having achieved remission – Other monocytic leukemia, in relapse |
| C94.20-C94.22 | Acute megakaryoblastic leukemia, not having achieved remission – Acute megakaryoblastic leukemia, in relapse |
| C94.30-C94.82 | Mast cell leukemia, not having achieved remission – Other specified leukemias, in relapse |
| C95.00-C95.02 | Acute leukemia of unspecified cell type, not having achieved remission – Acute leukemia of unspecified cell type, in relapse |
| C95.10-C95.12 | Chronic leukemia of unspecified cell type, not having achieved remission – Chronic leukemia of unspecified cell type, in relapse |
| C95.90-C95.92 | Leukemia, unspecified, not having achieved remission – Leukemia, unspecified, in relapse |
| C96.4-C96.9 | Sarcoma of dendritic cells (accessory cells) – Malignant neoplasm of lymphoid, hematopoietic and related tissue, unspecified |
| E88.3 | Tumor lysis syndrome |

Important Safety Information cont'd

- **Methemoglobinemia: ELITEK can result in methemoglobinemia in some patients. Immediately and permanently discontinue ELITEK in patients developing methemoglobinemia.**
- **Interference with Uric Acid Measurements: ELITEK enzymatically degrades uric acid in blood samples left at room temperature. Collect blood samples in pre-chilled tubes containing heparin and immediately immerse and maintain sample in an ice water bath. Assay plasma samples within 4 hours of collection.**

Please see additional Important Safety Information throughout and accompanying full [Prescribing Information](#) including Boxed WARNING.



Important Safety Information cont'd

- Among the 347 (265 pediatric; 82 adult) patients for whom all adverse reactions (ARs) regardless of severity were assessed in Studies 1, 2 and 3, as well as an uncontrolled safety trial, the most frequently observed ARs (incidence $\geq 10\%$) were vomiting (50%), fever (46%), nausea (27%), headache (26%), abdominal pain (20%), constipation (20%), diarrhea (20%), mucositis (15%), and rash (13%).
- Among the 275 adult patients in Study 4, hypersensitivity reactions occurred in 4.3% of patients treated with ELITEK alone and 1.1% of patients treated with the ELITEK/oral allopurinol combination. Hypersensitivity reactions included arthralgia, injection site irritation, peripheral edema, and rash. The most common Grade 3 or 4 ARs regardless of relationship to study drug in the 3 arms of Study 4 (ELITEK alone; ELITEK combined with oral allopurinol; oral allopurinol alone) were sepsis (5.4%; 6.5%; 4.4%), hypophosphatemia (4.3%; 6.5%; 6.6%), anxiety (3.3%; 0%; 0%), abdominal pain (3.3%; 4.3%; 2.2%), hyperbilirubinemia (3.3%; 2.2%; 4.4%), and increased alanine aminotransferase (3.3%; 4.3%; 2.2%), respectively.
- The following serious ARs occurred with a difference in incidence of greater than or equal to 2% in patients receiving ELITEK compared to patients receiving oral allopurinol in randomized studies (Study 1 and Study 4): pulmonary hemorrhage, respiratory failure, supraventricular arrhythmias, ischemic coronary artery disorders, and abdominal and gastrointestinal infections.

Please see accompanying full [Prescribing Information](#) including **Boxed WARNING**.