

**XIAFLEX® (collagenase clostridium histolyticum)  
Coding Scenario 2: Modifier Required**

1 Hometown Hospital 123 Main Street Anycity, Anystate 12345		2	3a PAT. CNTL. # b. MED. REC. #	4 TYPE OF BILL																				
8 PATIENT NAME a Doe, John Q.			9 PATIENT ADDRESS a Anycity, Anystate 12345																					
10 BIRTHDATE	11 SEX	12 DATE	13 ADMISSION HR	14 TYPE	15 SRC	16 DHR	17 STAT	18	19	20	21	CONDITION CODES			22	23	24	25	26	27	28	29 ACCT STATE	30	
31 OCCURRENCE CODE	32 OCCURRENCE DATE	33 OCCURRENCE CODE	34 OCCURRENCE DATE	35 OCCURRENCE CODE	36 OCCURRENCE DATE	37	OCCURRENCE SPAN FROM		THROUGH	OCCURRENCE SPAN FROM		THROUGH	OCCURRENCE SPAN FROM		THROUGH	OCCURRENCE SPAN FROM		THROUGH	OCCURRENCE SPAN FROM		THROUGH	OCCURRENCE SPAN FROM		THROUGH
38												39 VALUE CODES AMOUNT		40 VALUE CODES AMOUNT		41 VALUE CODES AMOUNT								
42 REV. CD.		43 DESCRIPTION		44 HCPCS / RATE / HIPPS CODE		45 SERV. DATE		46 SERV. UNITS		47 TOTAL CHARGES		48 NON-COVERED CHARGES		49										
1	0250	Drugs and Biologicals		J0775		012016		180		XXX : XX														
2	0342	Therapeutic Procedure		20527		012016		1		XXX : XX														
3	0342	Therapeutic Procedure		20527		012016		1		XXX : XX														
4	0342	Therapeutic Procedure		26341		012016		1		XXX : XX														
5	0342	Therapeutic Procedure		26341		012016		1		XXX : XX														

It is possible that any given payor may accept or require a different coding paradigm for same-day, dual cord treatments such as the use of modifier 51, 76, 59, or XS (which is effective Jan. 1, 2015, and may replace modifier 59) and/or billing service individually on separate line items. Please contact the XIAFLEX® Reimbursement Helpline (1-877-942-3539) or the payor's Provider Service Representative to acquire more information on coding guidance.

This value indicates 2 vials of 90 units each.

**SAMPLE 1450 FORM  
TREATMENT BILLING  
WHEN TREATING 2 CORDS/JOINTS**

Based on prior policy, this sample represents how your Medicare Administrative Contractor (MAC) is likely to require completion of claim forms for J0775, and the CPT® codes 20527 and 26341. This sample form is not intended to replace or modify your MAC's policy, and use of this form does not guarantee payment or take the place of professional coding advice. Coding is part of the clinical decision, and each provider is responsible for selecting the billing codes that most accurately describe the services provided and for adhering to all payor guidance. Information is subject to change. Please refer to the policy on the MAC's Web site. This sample claim form does not represent any clinical or treatment recommendation.

50 PA		58 INSURED'S NAME		59 P.REL.	60 INSURED'S UNIQUE ID		61 GROUP NAME		62 INSURANCE GROUP NO.		
63 TREATMENT AUTHORIZATION CODES				64 DOCUMENT CONTROL NUMBER				65 EMPLOYER NAME			
66 DX M72.0		70 PATIENT REASON DX		71 PPS CODE		72 ECI		73		68	
74 PRINCIPAL PROCEDURE CODE		a. OTHER PROCEDURE CODE		b. OTHER PROCEDURE CODE		75		76 ATTENDING NPI		QUAL	
77 OPERATING NPI		c. OTHER PROCEDURE CODE		d. OTHER PROCEDURE CODE		e. OTHER PROCEDURE CODE		78 OTHER NPI		QUAL	
80 REMARKS		81CC a		b		c		79 OTHER NPI		QUAL	
		d						LAST		FIRST	

## INDICATION

XIAFLEX® (collagenase clostridium histolyticum) is indicated for the treatment of adult patients with Dupuytren's contracture with a palpable cord.

## IMPORTANT SAFETY INFORMATION FOR XIAFLEX®

- XIAFLEX® is contraindicated in patients with a history of hypersensitivity to XIAFLEX® or to collagenase used in any other therapeutic application or application method
- In the controlled and uncontrolled portions of clinical trials in Dupuytren's contracture, flexor tendon ruptures occurred after XIAFLEX® injection. Injection of XIAFLEX® into collagen-containing structures such as tendons or ligaments of the hand may result in damage to those structures and possible permanent injury such as tendon rupture or ligament damage. Therefore, XIAFLEX® should be injected only into the collagen cord with a MP or PIP joint contracture, and care should be taken to avoid injecting into tendons, nerves, blood vessels, or other collagen-containing structures of the hand. When injecting a cord affecting a PIP joint of the fifth finger, the needle insertion should not be more than 2 to 3 mm in depth and avoid injecting more than 4 mm distal to the palmar digital crease
- Other XIAFLEX®-associated serious local adverse reactions in the controlled and uncontrolled portions of the studies included pulley rupture, ligament injury, complex regional pain syndrome (CRPS), sensory abnormality of the hand, and skin laceration (tear). In a historically controlled post-marketing trial, the incidence of skin laceration (22%) was higher for subjects treated with two concurrent injections of XIAFLEX® compared with subjects treated with up to three single injections in the placebo-controlled premarketing trials (9%). Cases of skin laceration requiring skin graft after finger extension procedures have been reported post-marketing. Signs or symptoms that may reflect serious injury to the injected finger/hand should be promptly evaluated because surgical intervention may be required
- In the controlled portions of the clinical trials in Dupuytren's contracture, a greater proportion of XIAFLEX®-treated patients (15%) compared to placebo-treated patients (1%) had mild allergic reactions (pruritus) after up to 3 injections. The incidence of XIAFLEX®-associated pruritus increased after more XIAFLEX® injections in patients with Dupuytren's contracture
- Because XIAFLEX® contains foreign proteins, severe allergic reactions to XIAFLEX® can occur. Anaphylaxis was reported in a post-marketing clinical study in one patient who had previous exposure to XIAFLEX® for the treatment of Dupuytren's contracture. Healthcare providers should be prepared to address severe allergic reactions following XIAFLEX® injections
- In the XIAFLEX® trials in Dupuytren's contracture, 70% and 38% of XIAFLEX®-treated patients developed an ecchymosis/contusion or an injection site hemorrhage, respectively. Patients with abnormal coagulation (except for patients taking low-dose aspirin, eg, up to 150 mg per day) were excluded from participating in these studies. Therefore, the efficacy and safety of XIAFLEX® in patients receiving anticoagulant medications (other than low-dose aspirin, eg, up to 150 mg per day) within 7 days prior to XIAFLEX® administration is not known. In addition, it is recommended to avoid use of XIAFLEX® in patients with coagulation disorders, including patients receiving concomitant anticoagulants (except for low-dose aspirin)
- In the XIAFLEX® clinical trials for Dupuytren's contracture, the most common adverse reactions reported in ≥25% of patients treated with XIAFLEX® and at an incidence greater than placebo were edema peripheral (eg, swelling of the injected hand), contusion, injection site hemorrhage, injection site reaction, and pain in the injected extremity

Please [click here](#) for full Prescribing Information, including Medication Guide.

**XIAFLEX®**  
collagenase clostridium histolyticum

 **endo**  
pharmaceuticals  
an endo international company

**Rx Only**

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**XD-03534(1)b/January 2016** www.xiaflex.com 1-800-462-ENDO (3636)