Coding Resource

It is important to note that the codes identified below are examples only. Each provider is responsible for ensuring all coding is accurate and documented in the medical record based on the condition of the patient. The use of the following codes does not guarantee reimbursement.

National Drug Code (NDC)

10-digit NDC

Dosage	Code
30 mg single-dose prefilled syringe	0310-1730-30

11-digit NDC

Dosage	Code
30 mg single-dose prefilled syringe	00310-1730-30

Current Procedural Terminology (CPT)[1]

	Code	Description
INJECTION ADMINISTRATION	96372	Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular
	96401	Chemotherapy administration, subcutaneous or intramuscular; nonhormonal antineoplastic

Healthcare Common Procedure Coding System (HCPCS)[2,3]

	Code	Description
PHYSICIAN OFFICE	J3490	Unclassified drugs
	J3590	Unclassified biologics

	Code	Description	Package Size	Billing Units
HOSPITAL OUTPATIENT	C9466	Injection, benralizumab, 1 mg	30 mg single-dose prefilled syringe	30

Diagnosis Codes[4]

ICD-10-CM	Description
J45.50	Severe persistent asthma, uncomplicated
J45.51	Severe persistent asthma with (acute) exacerbation

Please read Important Safety Information on page 2 and accompanying full Prescribing Information including Patient Information.

For more information, call AstraZeneca Access 360™ at **1-833-360-4357**, Monday through Friday, 8 AM to 8 PM ET.

1-833-360-HELP (1-833-360-4357) **1-833-FAX-A360** (1-833-329-2360) **www.FasenraResources.com**
Access360@AstraZeneca.com **One MedImmune Way,** Gaithersburg, MD 20878

INDICATION

FASENRA is indicated for the add-on maintenance treatment of patients with severe asthma aged 12 years and older, and with an eosinophilic phenotype.

- FASENRA is not indicated for treatment of other eosinophilic conditions
- FASENRA is not indicated for the relief of acute bronchospasm or status asthmaticus

IMPORTANT SAFETY INFORMATION

CONTRAINDICATIONS

Known hypersensitivity to benralizumab or excipients.

WARNINGS AND PRECAUTIONS

Hypersensitivity Reactions

Hypersensitivity reactions (eg, anaphylaxis, angioedema, urticaria, rash) have occurred after administration of FASENRA. These reactions generally occur within hours of administration, but in some instances have a delayed onset (ie, days). Discontinue in the event of a hypersensitivity reaction.

Acute Asthma Symptoms or Deteriorating Disease

FASENRA should not be used to treat acute asthma symptoms, acute exacerbations, or acute bronchospasm.

Reduction of Corticosteroid Dosage

Do not discontinue systemic or inhaled corticosteroids abruptly upon initiation of therapy with FASENRA. Reductions in corticosteroid dose, if appropriate, should be gradual and performed under the direct supervision of a physician. Reduction in corticosteroid dose may be associated with systemic withdrawal symptoms and/or unmask conditions previously suppressed by systemic corticosteroid therapy.

Parasitic (Helminth) Infection

It is unknown if FASENRA will influence a patient's response against helminth infections. Treat patients with pre-existing helminth infections before initiating therapy with FASENRA. If patients become infected while receiving FASENRA and do not respond to anti-helminth treatment, discontinue FASENRA until infection resolves.

ADVERSE REACTIONS

The most common adverse reactions (incidence ≥ 5%) include headache and pharyngitis.

Injection site reactions (eg, pain, erythema, pruritus, papule) occurred at a rate of 2.2% in patients treated with FASENRA compared with 1.9% in patients treated with placebo.

USE IN SPECIFIC POPULATIONS

The data on pregnancy exposure from the clinical trials are insufficient to inform on drug-associated risk. Monoclonal antibodies such as benralizumab are transported across the placenta during the third trimester of pregnancy; therefore, potential effects on a fetus are likely to be greater during the third trimester of pregnancy.

Please read accompanying full Prescribing Information, including Patient Information.

You are encouraged to report negative side effects of AstraZeneca prescription drugs by calling 1-800-236-9933. If you prefer to report these to the FDA, either visit www.FDA.gov/medwatch or call 1-800-FDA-1088.

References: 1. American Medical Association. *CPT® 2017 Professional Edition.* Chicago, IL: American Medical Association; 2017. **2.** Centers for Medicare & Medicaid Services. HCPCS Release & Code Sets. https://www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/Alpha-Numeric-HCPCS.html. Accessed February 21, 2018. **3.** Centers for Medicare & Medicaid Services (CMS). CMS Manual System, Pub 100-04 Medicare Claims Processing, Transmittal 3988, Change Request 10515: April 2018 Update of the Hospital Outpatient Prospective Payment System (OPPS). https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/2018Downloads/R3988CP.pdf. Accessed March 2, 2018. **4.** American Medical Association. *ICD-10-CM 2017: The Complete Official Codebook.* Chicago, IL: American Medical Association; 2017.

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