Product Reimbursement	Product Code	Description
	<b>J1096</b> J-code*	Dexamethasone, lacrimal ophthalmic insert, 0.1mg

As of January 1, 2025, DEXTENZA has separate payment in the ASC and HOPD settings<sup>†</sup> due to meeting the criteria set forth in the non-opioid as a surgical supply provision by CMS<sup>1</sup>.

5. When submitting a claim, enter a unit of **4** for the DEXTENZA HCPCS code (J1096).

The HCPCS descriptor for DEXTENZA is 0.1mg.

As of July 1, 2023, Providers must report **JZ modifiers**<sup>2</sup> on Medicare Part B claims for single use drugs.

Procedure Reimbursement	Procedure Code	Description	
	<b>68841</b> CPT-code <sup>‡</sup>	Insertion of drug-eluting implant (including punctal dilation and implant removal when performed into lacrimal canaliculus, each)	

#### ICD<sup>§</sup>-10 Codes Associated with Ophthalmic Surgery

Ophthalmic Surgery	General	Right Eye	Left Eye	Bilateral	Unspecified Eye
Ocular pain	H57.1	H57.11	H57.12	H57.13	H57.10
Cataract extraction status	Z98.4	Z98.41	Z98.42	-	Z98.49
Presence of intraocular lens; presence of pseudophakia	Z96.1	-	-	-	-
Cortical age-related cataract	H25.01	H25.011	H25.012	H25.013	H25.019
Other acute postprocedural pain	G89.18	-	-	-	-

#### ICD-10 Codes Associated with Allergic Conjunctivitis

Allergic Conjunctivitis	General	Right Eye	Left Eye	Bilateral	Unspecified Eye		
Acute atopic conjunctivitis	H10.1	H10.11	H10.12	H10.13	H10.10		
Unspecified acute conjunctivitis	H10.3	H10.31	H10.32	H10.33	H10.30		
Chronic conjunctivitis	H10.4	H10.401	H10.402	H10.403	H10.409		
Chronic giant papillary conjunctivitis	H10.41	H10.411	H10.412	H10.413	H10.419		
Vernal conjunctivitis	H10.44						
Other chronic allergic conjunctivitis	H10.45	This may not be a complete list of ICD-10 codes, visit					
Other conjunctivitis	H10.89		www.cms.gov/medicare/coding/medhcpcsgeninfo for				
Unspecified conjunctivitis	H10.9	all codes.					
Conjunctivitis	H10						
Unspecified chronic conjunctivitis	H10.40						

(!) Customers are responsible for determining the appropriate coding and submission of accurate claims.

## National Drug Codes (NDC)

Product	Active Ingredient	Quantity	10-Digit NDC Number	11-Digit NDC Number
DEXTENZA (dexamethasone ophthalmic insert) 0.4 mg	(dexamethasone USP)	1	70382-204-01	70382-0204-01
DEXTENZA (dexamethasone ophthalmic insert) 0.4 mg	(dexamethasone USP)	10	70382-204-10	70382-0204-10

\* A permanent code used to report non-orally administered drugs that cannot be self-administered. May be accompanied by a procedure-based CPT code.

<sup>†</sup> Medicare Advantage (Part C) and Commercial plans may or may not follow Medicare recommendations in making coverage decisions. Payment rates may vary per facility contracts.

<sup>‡</sup> CPT is a registered trademark of the American Medical Association. Current Procedural Terminology (CPT), an alphanumeric coding system maintained by the American Medical Association to identify medical services and procedures provided by physicians and other healthcare professionals.

§ International Classifications of Diseases (ICD).

**References: 1.** Federal Register. https://www.federalregister.gov/documents/2024/11/27/2024-25521/medicare-and-medicaid-programs-hospital-outpatient-prospective-payment-and-ambulatory-surgical. Accessed January 27, 2025. **2.** Centers for Medicare & Medicaid Services. https://www.cms.gov/files/document/mm13056-new-jz-claims-modifier-certain-medicare-part-b-drugs.pdf. Accessed January 27, 2025.

#### Please see Important Safety Information on reverse side and <u>click here</u> for full Prescribing Information.

# DEXTENZA CODING OVERVIEW

# **Do You Have Reimbursement Questions?**

Your dedicated resource and support team is available to help answer your questions and find comprehensive solutions with you throughout the reimbursement process—from benefits identification to appeals support.

Learn more at: www.dextenza.com/reimbursement-services



Dextenza® (dexamethasone ophthalmic insert) 0.4 mg

for intracanalicular use

## **INDICATIONS**

DEXTENZA is a corticosteroid indicated for:

- The treatment of ocular inflammation and pain following ophthalmic surgery.
- The treatment of ocular itching associated with allergic conjunctivitis.

# **IMPORTANT SAFETY INFORMATION**

### **CONTRAINDICATIONS**

DEXTENZA is contraindicated in patients with active corneal, conjunctival or canalicular infections, including epithelial herpes simplex keratitis (dendritic keratitis), vaccinia, varicella; mycobacterial infections; fungal diseases of the eye, and dacryocystitis.

## WARNINGS AND PRECAUTIONS

**Intraocular Pressure Increase** - Prolonged use of corticosteroids may result in glaucoma with damage to the optic nerve, defects in visual acuity and fields of vision. Steroids should be used with caution in the presence of glaucoma. Intraocular pressure should be monitored during treatment.

**Bacterial Infections** - Corticosteroids may suppress the host response and thus increase the hazard for secondary ocular infections. In acute purulent conditions, steroids may mask infection and enhance existing infection.

**Viral Infections** - Use of ocular steroids may prolong the course and may exacerbate the severity of many viral infections of the eye (including herpes simplex).

**Fungal Infections** - Fungus invasion must be considered in any persistent corneal ulceration where a steroid has been used or is in use. Fungal culture should be taken when appropriate.

**Delayed Healing** - Use of steroids after cataract surgery may delay healing and increase the incidence of bleb formation.

**Other Potential Corticosteroid Complications** - The initial prescription and renewal of the medication order of DEXTENZA should be made by a physician only after examination of the patient with the aid of magnification, such as slit lamp biomicroscopy, and, where appropriate, fluorescein staining. If signs and symptoms fail to improve after 2 days, the patient should be re-evaluated.

## **ADVERSE REACTIONS**

**Ocular Inflammation and Pain Following Ophthalmic Surgery** The most common ocular adverse reactions that occurred in patients treated with DEXTENZA were: anterior chamber inflammation including iritis and iridocyclitis (10%), intraocular pressure increased (6%), visual acuity reduced (2%), cystoid macular edema (1%), corneal edema (1%), eye pain (1%), and conjunctival hyperemia (1%). The most common non-ocular adverse reaction was headache (1%).

## **Itching Associated with Allergic Conjunctivitis**

The most common ocular adverse reactions that occurred in patients treated with DEXTENZA were: intraocular pressure increased (3%), lacrimation increased (1%), eye discharge (1%), and visual acuity reduced (1%). The most common non-ocular adverse reaction was headache (1%).

## **<u>Click here</u>** for full Prescribing Information.

Click here to learn more at www.dextenza.com.

