

# Sample UB-04 (also known as CMS 1450) Claim Form for Hospital Outpatient Department Billing: KEYTRUDA® (pembrolizumab) Injection 100 mg

Note: For questions on billing if a portion of a package is wasted, consult the applicable payer's policy regarding wastage. Record the amount of drug administered and the amount wasted in the patient's medical record. Please note that CMS has announced that effective January 1, 2017, Medicare will require the use of the JW modifier on all claims that include wasted product.

1		2		3a PAT. CNTL #		4 TYPE OF BILL	
b PATIENT NAME		c PATIENT ADDRESS		5 FED. TAX NO.		6 STATEMENT COVERS PERIOD FROM	
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99		100		101		102	

### Locator 42

- Enter appropriate revenue code for each line item
- Drugs that are billed with HCPCS codes usually require revenue code 0636—*Drugs requiring detailed coding*

### Locator 43

- For each line item, enter the description of the revenue code used
- For the line item for KEYTRUDA (pembrolizumab), also enter the drug's brand and generic names

### Locator 46

- Enter the appropriate number of units. For J9271, each unit corresponds to 1 mg of KEYTRUDA (pembrolizumab)
- On a separate line enter the appropriate number of units discarded (if applicable) and include in Locator 44 the JW modifier

### Locator 44

- Effective January 1, 2016, use J9271 to bill for KEYTRUDA (pembrolizumab)
- The infusion time corresponds to CPT code 96413. Some payers may prefer the use of 96365. Check with the applicable payer

### Locator 66

- Enter appropriate diagnosis code(s)

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