



Summary of Relevant Codes for Gamifant[®] (emapalumab-lzsg)

Indication and Usage

Gamifant[®] (emapalumab-lzsg) is an interferon gamma (IFN γ)-blocking antibody indicated for the treatment of adult and pediatric (newborn and older) patients with primary hemophagocytic lymphohistiocytosis (HLH) with refractory, recurrent, or progressive disease or intolerance with conventional HLH therapy.

Please see Important Safety Information on back cover and accompanying full Prescribing Information.

Important Safety Information

Before initiating Gamifant, patients should be evaluated for infection, including latent tuberculosis (TB). Prophylaxis for TB should be administered to patients who are at risk for TB or known to have positive purified protein derivative (PPD) test result or positive IFN γ release assay.

During Gamifant treatment, patients should be monitored for TB, adenovirus, Epstein-Barr virus (EBV), and cytomegalovirus (CMV) every 2 weeks and as clinically indicated.



Summary of Relevant Codes

ICD-10-CM Diagnosis Code¹

ICD-10-CM Code	Description
D76.1	Hemophagocytic lymphohistiocytosis

EAPG Code²

EAPG Code	Description
780	Other hematologic diagnoses

HCPCS Code for Product³

HCPCS Code	Description
J9210	Injection, emapalumab-lzsg, 1 mg

NDC Numbers⁴

NDC Numbers	Description
72171-501-01	One 10-mg/2-mL (5 mg/mL) single-dose vial
72171-505-01	One 50-mg/10-mL (5 mg/mL) single-dose vial

Concomitant Medication⁵

HCPCS Code	Description
J1100	Dexamethasone sodium phosphate, 1 mg

EAPG=Enhanced Ambulatory Patient Group; HCPCS=Healthcare Common Procedure Coding System; ICD-10-CM=*International Classification of Diseases, Tenth Revision, Clinical Modification*; NDC=National Drug Code.

Please see additional Important Safety Information on back cover and accompanying full Prescribing Information.

Summary of Relevant Codes (continued)

CPT Code Examples

Procedure Type	CPT Code	Indications for Testing
Administration	96365⁶	Therapeutic, prophylactic, and diagnostic injections and infusions
Monitoring or Treatment Observation Codes		
Platelet counts	85049⁷	Monitoring – Lab test
WBC and differential	85004⁸ 85048⁸	Monitoring – Lab test
Ferritin	82728⁹	Monitoring – Lab test
Coagulopathy (D-dimer or fibrinogen)	85610¹⁰	Monitoring – PT/INR lab test
	85730¹¹	Monitoring – APTT lab test
	85379¹²	Monitoring – D-dimer lab test
	85384¹³	Monitoring – Fibrinogen lab test
Splenomegaly	76700¹⁴	Ultrasound abdomen
	74160¹⁴	Computerized tomography (CT) scan of the abdomen with contrast
	74150¹⁴	CT scan of the abdomen without contrast
Fever (WBC)	85025¹⁵ 85027¹⁶	Complete blood count (CBC) with differential
		CBC without differential
Tuberculosis	86580¹⁷	Skin test for tuberculosis (PPD)
	86480¹⁷	Tuberculosis test, cell mediated immunity measurement of gamma interferon antigen response
Adenovirus	87798¹⁸	Adenovirus DNA, qualitative, real-time PCR
Epstein Barr Virus (EBV)	86664¹⁹	EBV immunoassay
Cytomegalovirus (CMV)	87252²⁰ 87254²⁰	CMV, conventional and rapid, culture

APTT=activated partial thromboplastin time; CPT=Current Procedural Terminology; PCR=polymerase chain reaction; PPD=purified protein derivative; PT/INR=prothrombin time/international normalized ratio; WBC=white blood cell count.

Important Safety Information (continued)

Patients should be administered prophylaxis for herpes zoster, *Pneumocystis jirovecii*, and fungal infections prior to Gamifant administration.

Do not administer live or live attenuated vaccines to patients receiving Gamifant and for at least 4 weeks after the last dose of Gamifant. The safety of immunization with live vaccines during or following Gamifant therapy has not been studied.

DRG/APR-DRG Codes

DRG Codes ²¹	Description
814	Reticuloendothelial & immunity disorders W MCC
815	Reticuloendothelial & immunity disorders W CC
816	Reticuloendothelial & immunity disorders W/O CC/MCC

Medicaid APR-DRG Codes ²²	Description
660-1– 660-4	Major hematologic/immunologic diagnosis, except sickle cell crisis & coagulation
663-1– 663-4	Other anemias and disorders of blood and blood-forming organs

APR-DRG=All Patient Refined Diagnosis Related Groups; DRG=Diagnosis-Related Group; W MCC=with major complications; W CC=with complications; W/O CC/MCC=without complications/major complications.

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References:

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Infusion-Related Reactions

Infusion-related reactions, including drug eruption, pyrexia, rash, erythema, and hyperhidrosis, were reported with Gamifant treatment in 27% of patients. In one-third of these patients, the infusion-related reaction occurred during the first infusion.

Adverse Reactions

In the pivotal trial, the most commonly reported adverse reactions ($\geq 10\%$) for Gamifant included infection (56%), hypertension (41%), infusion-related reactions (27%), pyrexia (24%), hypokalemia (15%), constipation (15%), rash (12%), abdominal pain (12%), CMV infection (12%), diarrhea (12%), lymphocytosis (12%), cough (12%), irritability (12%), tachycardia (12%), and tachypnea (12%).

Additional selected adverse reactions (all grades) that were reported in less than 10% of patients treated with Gamifant included vomiting, acute kidney injury, asthenia, bradycardia, dyspnea, gastro-intestinal hemorrhage, epistaxis, and peripheral edema.

Please see the full Prescribing Information for Gamifant.

