



Billing and Coding Guide for SUBLOCADE® (buprenorphine extended-release)

WARNING: RISK OF SERIOUS HARM OR DEATH WITH INTRAVENOUS ADMINISTRATION; SUBLOCADE RISK EVALUATION AND MITIGATION STRATEGY

- **Serious harm or death could result if administered intravenously. SUBLOCADE forms a solid mass upon contact with body fluids and may cause occlusion, local tissue damage, and thrombo-embolic events, including life threatening pulmonary emboli, if administered intravenously.**
- **Because of the risk of serious harm or death that could result from intravenous self-administration, SUBLOCADE is only available through a restricted program called the SUBLOCADE REMS Program. Healthcare settings and pharmacies that order and dispense SUBLOCADE must be certified in this program and comply with the REMS requirements.**

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Sublocade®
(buprenorphine extended-release)
injection for subcutaneous use Ⓜ
100mg-300mg

Disclaimer

The individual or entity submitting a claim using INSUPPORT® reimbursement and coding information must ensure that all information submitted on or with the claim is accurate, complete, and applicable to the claim being filed.

The codes listed in this guide are provided for informational, nonpromotional purposes only. Third-party coverage and reimbursement are complex and may change frequently. Providers are responsible for determining and submitting appropriate codes and charges and utilizing appropriate medical services and products in accordance with providers' independent professional judgment.

Indivior makes no representations or warranties or guarantees of any kind relating to access, coverage, or reimbursement.

The appropriateness of filing any particular claim is and remains the responsibility of that claim's submitter based on the submitter's own judgment. The information provided in this guide is accurate on the publication date, but it should be independently verified.

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Indivior INSUPPORT® program

INSUPPORT was created by Indivior to provide information on access and reimbursement processes on behalf of patients seeking treatment with SUBLOCADE® (buprenorphine extended-release). INSUPPORT provides information for healthcare providers (HCPs) and their offices in support of these patients, including:



BENEFIT COVERAGE INFORMATION

- Conduct a benefit investigation of the patient's insurance coverage for SUBLOCADE for the patient's current site of care
- Provide information on prior authorization and appeals processes, and confirm product acquisition requirements from the patient's health insurance provider
- If applicable, determine eligibility and enroll an eligible patient in the Copay Assistance Program for SUBLOCADE, or provide alternate funding information



COPAY ASSISTANCE PROGRAM

- Designed to help eligible^a patients with their out-of-pocket costs for SUBLOCADE
- Eligible^a patients may pay as little as \$0 per injection of SUBLOCADE for the first 2 injections. Restrictions apply



PATIENT ACCESS SPECIALIST

- A local specialist can provide in-person information about INSUPPORT, including patient insurance benefits and requirements



TRANSITION OF CARE

- Assistance is available for patients who are receiving treatment with SUBLOCADE and transitioning to a new healthcare setting to continue SUBLOCADE treatment



INSUPPORT ONLINE

- Enroll patients electronically by emailing the SUBLOCADE patient enrollment form to enroll@insupport.com
- Find information about the steps in the patient access process, utilize tools, and access other resources on INSUPPORT.com

^a The INSUPPORT Copay Assistance Program is valid ONLY for patients with private insurance who are prescribed SUBLOCADE for on-label use. Patients with government insurance are not eligible for the Copay Assistance Program, including, but not limited to, Medicare, Medicaid, Medigap, VA, DoD, TRICARE, CHAMPVA, or any other federally or state-funded government-assisted program. Other restrictions apply. See insert or visit INSUPPORT.com to view complete Terms and Conditions.

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Coding overview

Accurately billing by reporting codes that reflect a patient's condition and the services rendered is crucial for facilitating claims processing. Medical record documentation must support all reported codes. The following codes in this section may be appropriate to report services for SUBLOCADE® (buprenorphine extended-release) and its administration when provided in outpatient sites of care. SUBLOCADE should be used as part of a complete treatment program that includes counseling and psychosocial support.

Outpatient sites of care for SUBLOCADE and administration

Payers typically recognize the following codes for SUBLOCADE and its administration when provided in outpatient sites of care, such as:

Emergency department (ED)	Community mental health center (CMHC)	Hospital outpatient department (HOPD)	Physician office	Opioid treatment program (OTP)
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Check payer policies for specific reporting requirements.

International Classification of Diseases, 10th Revision, Clinical Modification (ICD-10-CM) codes¹

ICD-10-CM codes support the medical necessity of services rendered. ICD-10-CM codes are used in all sites of care to report the patient-specific condition that necessitated treatment. SUBLOCADE, with counseling and psychosocial support, is for moderate to severe opioid use disorder in those who have initiated treatment with a dose of transmucosal buprenorphine or are being treated with buprenorphine.² The following ICD-10-CM codes may be appropriate to report moderate to severe opioid use disorder:

ICD-10-CM CODE	DESCRIPTION
F11.20	Opioid dependence, uncomplicated
F11.21	Opioid dependence, in remission
F11.220	Opioid dependence with intoxication, uncomplicated
F11.221	Opioid dependence with intoxication, delirium
F11.222	Opioid dependence with intoxication with perceptual disturbance
F11.229	Opioid dependence with intoxication, unspecified
F11.23	Opioid dependence with withdrawal
F11.24	Opioid dependence with intoxication with opioid-induced mood disorder
F11.250	Opioid dependence with opioid-induced psychotic disorder with delusions
F11.251	Opioid dependence with opioid-induced psychotic disorder with hallucinations
F11.259	Opioid dependence with opioid-induced psychotic disorder, unspecified
F11.281	Opioid dependence with opioid-induced sexual dysfunction
F11.282	Opioid dependence with opioid-induced sleep disorder
F11.288	Opioid dependence with other opioid-induced disorder
F11.29	Opioid dependence with unspecified opioid-induced disorder

Social determinants of health (ICD-10-CM Z-codes) describe social problems, conditions, or risk factors that may influence a patient's health and may be reported when documented in the medical record.

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Healthcare Common Procedure Coding System (HCPCS) codes³

SUBLOCADE® (buprenorphine extended-release) may be reported with 1 of 2 product-specific HCPCS codes.

HCPCS CODE	DESCRIPTION	APPROPRIATE USE	SITE OF CARE
Q9991	Injection, buprenorphine extended-release (Sublocade), ≤ 100 mg	Report 1 billing unit for patients receiving the 100 mg monthly maintenance dose	ED, HOPD, CMHC, physician office
Q9992	Injection, buprenorphine extended-release (Sublocade), > 100 mg	Report 1 billing unit for patients receiving the 300 mg initial dose	ED, HOPD, CMHC, physician office

HCPCS modifiers³

Modifiers provide payers with more information regarding services rendered. The following modifiers may be applicable to SUBLOCADE:

HCPCS MODIFIER	DESCRIPTION	APPROPRIATE USE	SITE OF CARE
JZ	Zero drug amount discarded/not administered to any patient	Append modifier -JZ to Q9991 or Q9992 to identify that no amount of drug was discarded (required on Medicare claims; check other payer policies)	ED, HOPD, CMHC, physician office
TB	Drug or biological acquired with the 340B Drug Pricing Program discount; reported for informational purposes	Append modifier -TB to Q9991 or Q9992 to identify that the drug was acquired under the 340B Drug Pricing Program by a 340B-covered entity (required on Medicare claims); check other payer policies)	340B-covered entities
RE	Furnished in full compliance with an FDA-mandated Risk Evaluation and Mitigation Strategy (REMS)	Append modifier -RE to Q9991 or Q9992 to identify that the drug was administered in full compliance with the REMS policy (required on Medicare claims; check other payer policies)	ED, HOPD, CMHC, physician office

Other modifiers may apply; check with individual payers to confirm modifier reporting requirements.

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National Drug Codes (NDCs)^{2,4}

NDCs may also be required on claims by some payers, in addition to the SUBLOCADE® (buprenorphine extended-release) HCPCS code. For claims reporting, the Health Insurance Portability and Accountability Act (HIPAA) mandates converting the 10-digit NDC to an 11-digit format by adding a leading “0” in the appropriate segment to achieve a 5-4-2 configuration.

10-DIGIT NDC	11-DIGIT NDC	DESCRIPTION
12496-0100-1	12496-0100- <u>0</u> 1	100 mg/0.5 mL single dose, prefilled syringe
12496-0300-1	12496-0300- <u>0</u> 1	300 mg/1.5 mL single dose, prefilled syringe

The “N4” qualifier is required before the 11-digit NDC, and some payers may also require a unit of measure (UoM) qualifier and NDC quantity. For SUBLOCADE, the UoM qualifier is “ML” (milliliter), and the quantity will vary based on the dosage. For example, the monthly 100 mg injection may be reported as:

NDC REPORTING REQUIREMENT	VALUE
NDC qualifier	N4
11-digit NDC	12496010001
UoM qualifier	ML
NDC quantity	0.5
N412496010001 ML0.5	

Check payer requirements and formats for reporting the NDC.

Current Procedural Terminology (CPT) code⁵

The following CPT code may be used to report the subcutaneous injection of SUBLOCADE. SUBLOCADE is for administration by an HCP **by subcutaneous injection only. Do not administer SUBLOCADE intravenously, intradermally, or intramuscularly.**²

CPT CODE	DESCRIPTION	SITE OF CARE
96372	Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular	ED, HOPD, CMHC, physician office

Revenue codes⁶

The following revenue codes may be appropriate to report the use of SUBLOCADE and its administration in an HOPD:

REVENUE CODE	DESCRIPTION	SITE OF CARE
SUBLOCADE	0636	Drugs requiring detailed coding
Subcutaneous injection	0940	Other therapeutic services, general
		ED, HOPD, CMHC

Other revenue codes may apply.

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Place of service (POS) codes⁷

POS codes identify the location where services are rendered by an HCP. The following POS codes may be appropriate for an HCP to report on a CMS-1500 claim form for professional services:

POS CODE	POS NAME	DESCRIPTION
9	Prison/ correctional facility	A prison, jail, reformatory, work farm, detention center, or any other similar facility maintained by either federal, state, or local authorities for the purpose of confinement or rehabilitation of adult or juvenile criminal offenders
11	Office	Location, other than a hospital, skilled nursing facility, military treatment facility, community health center, state or local public health clinic, or intermediate care facility, where the health professional routinely provides health examinations, diagnosis, and treatment of illness or injury on an ambulatory basis
23	Emergency Room – Hospital	A portion of a hospital where emergency diagnosis and treatment of illness or injury is provided
50	Federally qualified health center	A facility located in a medically underserved area that provides Medicare beneficiaries preventive primary medical care under the general direction of a physician
53	Community mental health center (CMHC)	A facility that provides the following services: outpatient services, including specialized outpatient services for children, the elderly, individuals who are chronically ill, and residents of the CMHC's mental health services area who have been discharged from inpatient treatment at a mental health facility; 24 hour a day emergency care services; day treatment, other partial hospitalization services, or psychosocial rehabilitation services; screening for patients being considered for admission to State mental health facilities to determine the appropriateness of such admission; and consultation and education services.
55	Residential substance abuse treatment facility	A facility which provides treatment for substance (alcohol and drug) abuse to live-in residents who do not require acute medical care. Services include individual and group therapy and counseling, family counseling, laboratory tests, drugs and supplies, psychological testing, and room and board.
57	Non-residential substance abuse treatment facility	A location that provides treatment for substance (alcohol and drug) abuse on an ambulatory basis. Services include individual and group therapy and counseling, family counseling, laboratory tests, drugs and supplies, and psychological testing
58	Non-residential opioid treatment facility	A location that provides treatment for opioid use disorder on an ambulatory basis. Services include methadone and other forms of medication-assisted treatment

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Medicare billing for opioid use disorder services

G-codes are used to report medication-assisted treatment (MAT) in opioid treatment programs (OTPs), principal illness navigation (PIN) services, and other services associated with SUBLOCADE® (buprenorphine extended-release) for opioid use disorder. Please note the relevant G-codes in the following table are for weekly or monthly episodes of care, as specified in the code description. Check each payer policy, as other payers may or may not recognize the Medicare-specific codes.

HCPCS G-CODE ³	DESCRIPTION	APPROPRIATE USE
G0533^a	MAT, buprenorphine (injectable) administered on a weekly basis; weekly bundle including dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology testing if performed (provision of the services by a Medicare-enrolled OTP)	May be billed weekly and represents a bundled buprenorphine and episode of care payment, including the medication, for opioid use disorder services performed in an OTP ; eg, this code may be used for the second full injection when administered as early as 1 week after the initial injection
G2069^a	MAT, buprenorphine (injectable) administered on a monthly basis; bundle including dispensing and/or administration, substance use counseling, individual and group therapy, and toxicology testing if performed (provision of the services by a Medicare-enrolled OTP)	May be billed monthly and represents a bundled buprenorphine and episode of care payment, including the medication, for opioid use disorder services performed in an OTP ; eg, this code may be used for maintenance injections
G2074^a	MAT, weekly bundle not including the drug, including substance use counseling, individual and group therapy, and toxicology testing if performed (provision of the services by a Medicare-enrolled OTP)	May be billed weekly for OTP services furnished during an episode of care when a medication is not administered but other services in the bundle are furnished
G2086	Office-based treatment for opioid use disorder, including development of the treatment plan, care coordination, individual therapy and group therapy and counseling; at least 70 minutes in the first calendar month	May be used for the first calendar month and represents a bundled episode of care payment for substance use disorder services performed in an office
G2087	Office-based treatment for opioid use disorder, including care coordination, individual therapy and group therapy and counseling; at least 60 minutes in a subsequent calendar month	May be used for a subsequent calendar month and represents a bundled episode of care payment for substance use disorder services performed in an office
G0023^b	PIN services by certified or trained auxiliary personnel under the direction of a physician or other practitioner, including a patient navigator, 60 minutes per calendar month The full code description is available at https://www.cms.gov/medicare/coding-billing/healthcare-common-procedure-system/quarterly-update	PIN services are provided to Medicare patients with high-risk conditions, such as substance use disorders, who receive a patient-centered assessment to better identify their needs and connect them to clinical and support resources
G0024^b	PIN services, additional 30 minutes per calendar month (list separately in addition to G0023)	
G0140^b	PIN-peer support by certified or trained auxiliary personnel under the direction of a physician or other practitioner, including a certified peer specialist, 60 minutes per calendar month The full code description is available at https://www.cms.gov/medicare/coding-billing/healthcare-common-procedure-system/quarterly-update	
G0146^b	PIN-peer support, additional 30 minutes per calendar month (list separately in addition to G0140)	

^a Medicare reimburses OTPs with a bundled payment for opioid use disorder treatment services. An OTP is defined as “a program or practitioner engaged in opioid treatment of individuals with an opioid agonist medication.” The Substance Abuse and Mental Health Services Administration certifies and requires that OTPs must:

- Be accredited by a federally deemed accrediting body
- Be accredited under the Behavioral Health Care Accreditation Program (if the OTP “is part of an organization accredited under a different program by The Joint Commission”)
- Have an active patient eligible for survey³

^b PIN services are performed by certified or trained auxiliary personnel incidental to the professional services of a physician or other practitioner. An HCP initiates PIN services during an initiating visit, where they identify the medical necessity of PIN services and establish an appropriate treatment plan. The same practitioner bills for the subsequent PIN services that auxiliary personnel provide. The billing practitioner personally performs initiating visits. Auxiliary personnel may perform subsequent PIN services. Certain evaluation/management (E/M) visits, such as inpatient and observation visits, ED visits, and SNF visits, would not serve as PIN-initiating visits because the practitioner providing the E/M visit would not typically provide continuing care to the patient. This includes providing necessary PIN services in subsequent months.³

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Professional CMS-1500 (837P) and Institutional CMS-1450 (UB-04) (837I) claim forms

Both claim forms and their electronic equivalents are used to submit healthcare claims to payers. The type of provider submitting a claim determines the appropriate claim form to use. The CMS-1500 (or electronic format 837P) is used by an HCP to report professional services that are commonly provided in a physician office or independent treatment clinic. The CMS-1450 (or electronic format 837I) is used by institutional providers to report services that are commonly provided in an HOPD, such as an ED or a hospital-affiliated treatment facility.

Professional CMS-1500 (837P) claim form example

This claim form serves as a guide for billing and coding of an initial 300 mg SUBLOCADE® (buprenorphine extended-release) injection when billing professional services. Using the suggested codes does not ensure reimbursement. The reported codes must be supported by medical record documentation and adhere to payer requirements.

Item Number 21, Diagnosis: Enter the appropriate diagnosis code based on HCP documentation.

- ICD-10-CM: F11.2XX for opioid dependence

An "X" indicates that additional characters are required. Final code depends on medical record documentation.

Item Number 24A, Date(s) of Service: Enter the NDC in the shaded area above the month/day/year row. The "N4" qualifier is required before the NDC; do not include dashes. When required, follow with 1 space, then the appropriate 2-character UoM qualifier and quantity.

Check payer requirements and format for reporting the NDC and UoM.

Item Number 24E, Diagnosis Pointer: Enter the letter (A-L) that corresponds to the diagnosis in Item Number 21

Item Number 24B, Place of Service: Enter the appropriate place of service code to reflect where services are rendered.

Item Number 24D, Procedures/Services/Supplies: Enter the appropriate CPT/HCPCS codes and modifiers; eg,

- Drug: Q9992 for SUBLOCADE
- Modifier: JZ to show that no amount of product was wasted
- Modifier: RE to show compliance with REMS policy
- Administration: 96372 for subcutaneous injection

Item Number 24G, Units: Enter the appropriate number of billing units for each line item.

- For Q9992, 1 billing unit is equal to >100 mg of SUBLOCADE

19. ADDITIONAL CLAIM INFORMATION (Designated)										\$ CHARGES												
21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY										ORIGINAL REF. NO.												
A. F11.2XX		B.		C.		D.		E.		23. PRIOR AUTHORIZATION NUMBER												
E.		F.		G.		H.		I.		J.												
I.		J.		K.		L.																
24. A. DATE(S) OF SERVICE				B. PLACE OF SERVICE		C.		D. PROCEDURES, SERVICES, OR SUPPLIES			E. DIAGNOSIS POINTER		F. \$ CHARGES		G. DAYS OR UNITS		H. EP/SDT Family Plan		I. ID. QUAL.		J. RENDERING PROVIDER ID. #	
From		To				EMG		(Explain Unusual Circumstances)														
MM	DD	YY	MM	DD	YY	XX		CPT/HCPCS	MODIFIER													
N4	12	49	60	30	00	01	ML	1.5														
MM	DD	YY	MM	DD	YY	XX		Q9992	JZ	RE			A	XXX	XX	1				NPI		
MM	DD	YY	MM	DD	YY	XX		96372					A	XXX	XX	1				NPI		
MM	DD	YY	MM	DD	YY	XX													NPI			

SUPPLIER INFORMATION

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Institutional CMS-1450 (UB-04) (837I) claim form example

This claim form serves as a guide for billing and coding of a maintenance 100 mg SUBLOCADE® (buprenorphine extended-release) injection when billing institutional services. Using the suggested codes does not ensure reimbursement. The reported codes must be supported by medical record documentation and adhere to payer requirements.

Form Locator (FL) 42, Revenue Code: Enter the appropriate revenue code; eg,

- 0636 for SUBLOCADE
- 0940 for other therapeutic services

Other revenue codes may apply.

42 REV. CD.	43 DESCRIPTION	44 HCPCS / RATE / HIPPS CODE	45 SERV. DATE	46 SERV. UNITS	47 TOTAL CHARGES	48 NON-COVERED CHARGES	49
0636	N412496010001 ML0.5	Q9991 JZ RE	MMDDYY	1	XXX XX		1
0940	Subcutaneous injection	96372	MMDDYY	1	XXX XX		2
							3
							4

FL 43, Revenue Description: Enter the NDC. The “N4” qualifier is required before the NDC; do not include dashes. When required, follow with 1 space, then the appropriate 2-character UoM qualifier and quantity.

Check payer requirements and format for reporting the NDC and UoM.

FL 44, HCPCS: Enter the appropriate CPT/HCPCS codes and modifiers; eg,

- Drug: Q9991 for SUBLOCADE
- Modifier: JZ to show that no amount of product was wasted
- Modifier: RE to show compliance with REMS policy
- Administration: 96372 for subcutaneous injection

FL 46, Units of Service: Enter the appropriate number of billing units for each line item.

- For Q9991, 1 billing unit is ≤100 mg of SUBLOCADE

FL 67, Principal Diagnosis Code and 67A-67Q, Other Diagnosis Codes: Enter the appropriate diagnosis code based on HCP documentation.

- ICD-10-CM: F11.2XX for opioid dependence

An “X” indicates that additional characters are required. Final code depends on medical record documentation.

66 DX	F11.2XX	A	B	C	D	E	F	G	H	68
69 ADMIT DX		70 PATIENT REASON DX				71 PPS CODE		72 ECI		73
74 PRINCIPAL PROCEDURE CODE		a. OTHER PROCEDURE CODE		b. OTHER PROCEDURE CODE		75	76 ATTENDING NPI		QUAL	
							LAST		FIRST	
c. OTHER PROCEDURE CODE		d. OTHER PROCEDURE CODE		e. OTHER PROCEDURE CODE			77 OPERATING NPI		QUAL	
							LAST		FIRST	
80 REMARKS		81CC a					78 OTHER NPI		QUAL	
		b					LAST		FIRST	
		c					79 OTHER NPI		QUAL	
		d					LAST		FIRST	

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COPAY ASSISTANCE

Once the patient is enrolled in the INSUPPORT® Copay Assistance Program if you intend to submit copay claims directly to INSUPPORT, you can refer to the copay claim submission instructions here:



INSUPPORT Copay Claim Submission Instructions

<https://www.insupport.com/pdf/copay-claim-submission-instructions.pdf>

ADDITIONAL RESOURCES



INSUPPORT Patient Enrollment Form

<https://www.insupport.com/enrollment>



Network Specialty Pharmacy Locator

<https://www.insupport.com/specialty-product/specialty-pharmacy-locator>



INSUPPORT Resources & Tools for HCPs

The Network Specialty Distributors List can be found under Acquisition of SUBLOCADE

<https://www.insupport.com/resources>

REFERENCES

- Centers for Medicare and Medicaid Services. 2025 ICD-10-CM tabular list of diseases and injuries. Accessed April 9, 2025. <https://www.cms.gov/medicare/coding-billing/icd-10-codes>
- SUBLOCADE. Prescribing information. Indivior Inc. 2025.
- Centers for Medicare & Medicaid Services. April 2025 alpha-numeric HCPCS file. Accessed April 9, 2025. <https://www.cms.gov/medicare/coding-billing/healthcare-common-procedure-system/quarterly-update>
- Centers for Medicare & Medicaid Services. Medicare claims processing manual. Chapter 26 – completed and processing form CMS-1500 data set. Accessed April 9, 2025. <https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/clm104c26pdf.pdf>
- American Medical Association. CPT 2025 Professional Edition. AMA; 2024. All rights reserved. CPT® is a registered trademark of the American Medical Association.
- Noridian Healthcare Solutions. Revenue codes. Accessed April 9, 2025. <https://med.noridianmedicare.com/web/jea/topics/claim-submission/revenue-codes>
- Centers for Medicare & Medicaid Services. Place of service code set. Accessed April 9, 2025. <https://www.cms.gov/medicare/coding-billing/place-of-service-codes/code-sets>
- The Joint Commission. Opioid treatment program (OTP) accreditation fact sheet. Accessed April 9, 2025. <https://www.jointcommission.org/resources/news-and-multimedia/fact-sheets/facts-about-opioid-treatment-program-accreditation/>
- Centers for Medicare & Medicaid Services. Health equity services in the 2024 Physician Fee Schedule final rule. MLN9201074. Accessed April 9, 2025. <https://wcaap.org/wp-content/uploads/2025/01/MLN9201074-10.pdf>

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