

# ARC of Support® Reimbursement Services

Phone: 800.564.0216, Opt 3 Fax: 866.242.4141

**ABRAXANE® for Injectable Suspension**

(paclitaxel protein bound particles for injectable suspension) (albumin-bound)



## Q3 2009 Coding and Reimbursement

| ABRAXANE<br>J9264, per 1 mg | CPT   | 2009 Reimbursement              | Q3 2009<br>Medicare Allowable |
|-----------------------------|-------|---------------------------------|-------------------------------|
| Clinic                      | 96413 | \$147.51<br>(national average*) | \$9.22 per mg (ASP + 6%)      |
| Hospital<br>Outpatient      | 96413 | \$187.96<br>(national average)  | \$9.05 per mg (ASP + 4%)      |

The Abraxis Resource Center, ARC of Support, can assist with all questions regarding ABRAXANE for Injectable Suspension (paclitaxel protein-bound particles for injectable suspension) (albumin-bound).

The Abraxis Patient Access Program (APAP) is designed to assist uninsured and underinsured patients that have been prescribed ABRAXANE. APAP patient assistance applications and Benefit Investigation request forms can now be submitted on-line.

Visit the ARC of Support section of [www.AbraxisOncology.com](http://www.AbraxisOncology.com) or [www.Abraxane.com](http://www.Abraxane.com) to submit requests electronically to ARC of Support or download and fax the editable versions. Additionally you can complete sample LMNs.

Coming soon.....[www.AbraxisReimbursement.com](http://www.AbraxisReimbursement.com). A website dedicated to ABRAXANE reimbursement and patient resources.

J9264: injection, paclitaxel protein-bound particles per 1 mg effective January 1, 2006  
CPT 96413: Chemotherapy administration, intravenous infusion technique, up to 1 hour

**We're Here for You  
So You Can Be There for Your Patients**



CPT codes are provided for informational purposes only. This coding tool is not intended to be a specific directive on Abraxane coding and is not a guarantee of reimbursement. Health care providers need to make coding decisions based on the unique diagnosis and treatment of each patient and the specific requirements of each payer.

\*non-facility MPFS allowable (national average)

**Please see Important Safety Information (including Boxed Warning) on reverse page.**

**Please see full Prescribing Information (including Boxed Warning) accompanying this Coding Tool.**



# To Learn More, Call ARC of Support<sup>®</sup> Reimbursement Services: 1.800.564.0216, Press 3

ABRAXANE for Injectable Suspension (paclitaxel protein-bound particles for injectable suspension) (albumin bound) is indicated for the treatment of breast cancer after failure of combination chemotherapy for metastatic disease or relapse within 6 months of adjuvant chemotherapy. Prior therapy should have included an anthracycline unless clinically contraindicated.

## IMPORTANT SAFETY INFORMATION

**WARNING: ABRAXANE for Injectable Suspension (paclitaxel protein-bound particles for injectable suspension) (albumin-bound) should be administered under the supervision of a physician experienced in the use of cancer chemotherapeutic agents. Appropriate management of complications is possible only when adequate diagnostic and treatment facilities are readily available.**

**ABRAXANE therapy should not be administered to patients with metastatic breast cancer who have baseline neutrophil counts of less than 1,500 cells/mm<sup>3</sup>. In order to monitor the occurrence of bone marrow suppression, primarily neutropenia, which may be severe and result in infection, it is recommended that frequent peripheral blood cell counts be performed on all patients receiving ABRAXANE.**

**Note: An albumin form of paclitaxel may substantially affect a drug's functional properties relative to those of drug in solution. DO NOT SUBSTITUTE FOR OR WITH OTHER PACLITAXEL FORMULATIONS.**

The use of ABRAXANE has not been studied in patients with hepatic or renal dysfunction. In the randomized controlled trial, patients were excluded for baseline serum bilirubin >1.5 mg/dL or baseline serum creatinine >2 mg/dL.

ABRAXANE can cause fetal harm when administered to a pregnant woman. Women of childbearing potential should be advised to avoid becoming pregnant while receiving treatment with ABRAXANE.

Men should be advised to not father a child while receiving treatment with ABRAXANE.

It is recommended that nursing be discontinued when receiving ABRAXANE therapy.

ABRAXANE contains albumin (human), a derivative of human blood.

Caution should be exercised when administering ABRAXANE concomitantly with known substrates or inhibitors of CYP2C8 and CYP3A4.

ABRAXANE therapy should not be administered to patients with metastatic breast cancer who have baseline neutrophil counts of less than 1,500 cells/mm<sup>3</sup>. It is recommended that frequent peripheral blood cell counts be performed on all patients receiving ABRAXANE. Patients should not be retreated with subsequent cycles of ABRAXANE until neutrophils recover to a level >1,500 cells/mm<sup>3</sup> and platelets recover to a level >100,000 cells/mm<sup>3</sup>.

In the case of severe neutropenia (<500 cells/mm<sup>3</sup> for 7 days or more) during a course of ABRAXANE therapy, a dose reduction for subsequent courses is recommended.

Sensory neuropathy occurs frequently with ABRAXANE.

If grade 3 sensory neuropathy develops, treatment should be withheld until resolution to grade 1 or 2 followed by a dose reduction for all subsequent courses of ABRAXANE.

Severe cardiovascular events possibly related to single-agent ABRAXANE occurred in approximately 3% of patients in the randomized trial. These events included chest pain, cardiac arrest, supraventricular tachycardia, edema, thrombosis, pulmonary thromboembolism, pulmonary embolism, and hypertension.

In the randomized metastatic breast cancer study, the most important adverse events included alopecia (90%), neutropenia (all cases 80%; severe 9%), sensory neuropathy (any symptoms 71%; severe 10%), asthenia (any 47%; severe 8%), myalgia/arthralgia (any 44%; severe 8%), anemia (all 33%; severe 1%), infections (24%), nausea (any 30%; severe 3%), vomiting (any 18%; severe 4%), diarrhea (any 27%; severe <1%), and mucositis (any 7%; severe <1%).

Other adverse reactions have included ocular/visual disturbances (any 13%; severe 1%), fluid retention (any 10%; severe 0%), hepatic dysfunction (elevations in bilirubin 7%, alkaline phosphatase 36%, AST [SGOT] 39%), renal dysfunction (any 11%; severe 1%), thrombocytopenia (any 2%; severe <1%), hypersensitivity reactions (any 4%; severe 0%), cardiovascular reactions (severe 3%), and injection site reactions (<1%). During post marketing surveillance, rare occurrences of severe hypersensitivity reactions have been reported with ABRAXANE.

Please see enclosed ABRAXANE full Prescribing Information (including Boxed Warning) accompanying this Coding Tool.

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**Abraxane<sup>®</sup>**  
**for Injectable Suspension**  
(paclitaxel protein-bound particles for injectable suspension)  
(albumin-bound)  
**BOUND AND DETERMINED**