DUPIXENT® (dupilumab) Injection
200mg · 300mg

ICD-10-CM quick reference coding guide

The coding information in this document is provided for informational purposes only and is subject to change. The codes listed may not apply to all patients or to all health plans; healthcare providers should exercise independent clinical judgment when selecting codes and submitting claims to accurately reflect the services and products furnished to a specific patient.

Use this ICD-10-CM coding guide

when you submit claims to health plans for your patients who are prescribed DUPIXENT® (dupilumab) for an FDA-approved indication

FDA=US Food and Drug Administration; ICD-10-CM=*International Classification of Diseases, Tenth Revision, Clinical Modification.*

INDICATIONS

Atopic Dermatitis: DUPIXENT is indicated for the treatment of adult and pediatric patients aged 6 months and older with moderate-to-severe atopic dermatitis whose disease is not adequately controlled with topical prescription therapies or when those therapies are not advisable. DUPIXENT can be used with or without topical corticosteroids.

Asthma: DUPIXENT is indicated as an add-on maintenance treatment of adult and pediatric patients aged 6 years and older with moderate-to-severe asthma characterized by an eosinophilic phenotype or with oral corticosteroid dependent asthma. Limitation of Use: DUPIXENT is not indicated for the relief of acute bronchospasm or status asthmaticus.

Chronic Rhinosinusitis with Nasal Polyposis (CRSwNP): DUPIXENT is indicated as an add-on maintenance treatment in adult patients with inadequately controlled CRSwNP.

Eosinophilic Esophagitis: DUPIXENT is indicated for the treatment of adult and pediatric patients aged 1 year and older, weighing at least 15 kg, with eosinophilic esophagitis (EoE).

Prurigo Nodularis: DUPIXENT is indicated for the treatment of adult patients with prurigo nodularis (PN).

IMPORTANT SAFETY INFORMATION

CONTRAINDICATION: DUPIXENT is contraindicated in patients with known hypersensitivity to dupilumab or any of its excipients.

Please see additional Important Safety Information throughout and accompanying full Prescribing Information.

ICD-10-CM codes for moderate-to-severe atopic dermatitis[1]

For adult and pediatric patients aged 6 months and older with moderate-to-severe atopic dermatitis whose disease is not adequately controlled with topical prescription therapies or when those therapies are not advisable

- **L20** Atopic dermatitis
- **L20.0** Besnier's prurigo
- **L20.81** Atopic neurodermatitis
- **L20.82** Flexural eczema
- **L20.84** Intrinsic (allergic) eczema
- **L20.8 and L20.89** Other atopic dermatitis
- **L20.9** Atopic dermatitis, unspecified

ICD-10-CM code for prurigo nodularis[1]

For the treatment of adult patients with prurigo nodularis

- **L28.1** Prurigo nodularis

ICD-10-CM code for eosinophilic esophagitis[1]

For adult and pediatric patients aged 1 year and older, weighing at least 15 kg, with eosinophilic esophagitis (EoE)

- **K20.0** Eosinophilic esophagitis

For more information about the *DUPIXENT MyWay*® Patient Support Program, call **1-844-DUPIXEN(T)** (1-844-387-4936) Option 1, Monday–Friday, 8 am–9 pm ET or contact your FRM

FRM=Field Reimbursement Manager.

Healthcare providers should exercise clinical judgment when selecting codes and submitting claims to accurately reflect the services and products furnished to a specific patient.

IMPORTANT SAFETY INFORMATION (cont'd)

WARNINGS AND PRECAUTIONS

Hypersensitivity: Hypersensitivity reactions, including anaphylaxis, serum sickness or serum sickness- like reactions, angioedema, generalized urticaria, rash, erythema nodosum, and erythema multiforme have been reported. If a clinically significant hypersensitivity reaction occurs, institute appropriate therapy and discontinue DUPIXENT.

Conjunctivitis and Keratitis: Conjunctivitis and keratitis occurred more frequently in atopic dermatitis subjects who received DUPIXENT versus placebo, with conjunctivitis being the most frequently reported eye disorder. Conjunctivitis also occurred more frequently in chronic rhinosinusitis with nasal polyposis subjects and prurigo nodularis subjects who received DUPIXENT compared to those who received placebo. Conjunctivitis and keratitis have been reported with DUPIXENT in postmarketing settings, predominantly in AD patients. Some patients reported visual disturbances (e.g., blurred vision) associated with conjunctivitis or keratitis. Advise patients or their caregivers to report new onset or worsening eye symptoms to their healthcare provider. Consider ophthalmological examination for patients who develop conjunctivitis that does not resolve following standard treatment or signs and symptoms suggestive of keratitis, as appropriate.

ICD-10-CM codes for respiratory indications[1]

For patients aged 6 years and older who require add-on maintenance treatment for moderate-to-severe asthma characterized by an eosinophilic phenotype or with oral corticosteroid-dependent asthma

OR

For patients aged 18 years and older who require add-on maintenance treatment for inadequately controlled chronic rhinosinusitis with nasal polyposis (CRSwNP)

Moderate-to-severe asthma

- **J45.4** Moderate persistent asthma
- **J45.40** Moderate persistent asthma, uncomplicated
- **J45.41** Moderate persistent asthma with (acute) exacerbation
- **J45.5** Severe persistent asthma
- **J45.50** Severe persistent asthma, uncomplicated
- **J45.51** Severe persistent asthma with (acute) exacerbation
- **J45.9** Other and unspecified asthma
- **J45.90** Unspecified asthma
- **J45.901** Unspecified asthma with (acute) exacerbation
- **J82.83** Eosinophilic asthma

Chronic rhinosinusitis with nasal polyposis

- **J33** Nasal polyp
- **J33.0** Polyp of the nasal cavity
- **J33.1** Polypoid sinus degeneration
- **J33.8** Other polyp of sinus
- **J33.9** Nasal polyp, unspecified

Remember: If you deem it necessary, you may use as many secondary codes as needed to appropriately describe each patient's condition

Healthcare providers should exercise clinical judgment when selecting codes and submitting claims to accurately reflect the services and products furnished to a specific patient.

IMPORTANT SAFETY INFORMATION (cont'd)

WARNINGS AND PRECAUTIONS (cont'd)

Eosinophilic Conditions: Patients being treated for asthma may present with serious systemic eosinophilia sometimes presenting with clinical features of eosinophilic pneumonia or vasculitis consistent with eosinophilic granulomatosis with polyangiitis (EGPA), conditions which are often treated with systemic corticosteroid therapy. These events may be associated with the reduction of oral corticosteroid therapy. Healthcare providers should be alert to vasculitic rash, worsening pulmonary symptoms, cardiac complications, and/or neuropathy presenting in their patients with eosinophilia. Cases of eosinophilic pneumonia were reported in adult subjects who participated in the asthma development program and cases of vasculitis consistent with EGPA have been reported with DUPIXENT in adult subjects who participated in the asthma development program as well as in adult subjects with co-morbid asthma in the CRSwNP development program. A causal association between DUPIXENT and these conditions has not been established.

Acute Asthma Symptoms or Deteriorating Disease: Do not use DUPIXENT to treat acute asthma symptoms, acute exacerbations, acute bronchospasm or status asthmaticus. Patients should seek medical advice if their asthma remains uncontrolled or worsens after initiation of DUPIXENT.

Risk Associated with Abrupt Reduction of Corticosteroid Dosage: Do not discontinue systemic, topical, or inhaled corticosteroids abruptly upon initiation of DUPIXENT. Reductions in corticosteroid dose, if appropriate, should be gradual and performed under the direct supervision of a healthcare provider. Reduction in corticosteroid dose may be associated with systemic withdrawal symptoms and/or unmask conditions previously suppressed by systemic corticosteroid therapy.

Please see additional Important Safety Information throughout and accompanying full Prescribing Information.

DUPIXENT® (dupilumab) Injection
200mg · 300mg

IMPORTANT SAFETY INFORMATION (cont'd)

WARNINGS AND PRECAUTIONS (cont'd)

Patients with Co-morbid Asthma: Advise patients with co-morbid asthma not to adjust or stop their asthma treatments without consultation with their physicians.

Arthralgia: Arthralgia has been reported with the use of DUPIXENT with some patients reporting gait disturbances or decreased mobility associated with joint symptoms; some cases resulted in hospitalization. Advise patients to report new onset or worsening joint symptoms. If symptoms persist or worsen, consider rheumatological evaluation and/or discontinuation of DUPIXENT.

Parasitic (Helminth) Infections: It is unknown if DUPIXENT will influence the immune response against helminth infections. Treat patients with pre-existing helminth infections before initiating therapy with DUPIXENT. If patients become infected while receiving treatment with DUPIXENT and do not respond to anti-helminth treatment, discontinue treatment with DUPIXENT until the infection resolves. Helminth infections (5 cases of enterobiasis and 1 case of ascariasis) were reported in pediatric patients 6 to 11 years old in the pediatric asthma development program.

Vaccinations: Consider completing all age-appropriate vaccinations as recommended by current immunization guidelines prior to initiating DUPIXENT. Avoid use of live vaccines during treatment with DUPIXENT.

ADVERSE REACTIONS:

- **Atopic Dermatitis:** The most common adverse reactions (incidence ≥1%) in patients are injection site reactions, conjunctivitis, blepharitis, oral herpes, keratitis, eye pruritus, other herpes simplex virus infection, dry eye, and eosinophilia. The safety profile in pediatric patients through Week 16 was similar to that of adults with atopic dermatitis. In an open-label extension study, the long-term safety profile of DUPIXENT ± TCS in pediatric patients observed through Week 52 was consistent with that seen in adults with atopic dermatitis, with hand-foot-and-mouth disease and skin papilloma (incidence ≥2%) reported in patients 6 months to 5 years of age. These cases did not lead to study drug discontinuation.
- **Asthma:** The most common adverse reactions (incidence ≥1%) are injection site reactions, oropharyngeal pain, and eosinophilia.
- **Chronic Rhinosinusitis with Nasal Polyposis:** The most common adverse reactions (incidence ≥1%) are injection site reactions, eosinophilia, insomnia, toothache, gastritis, arthralgia, and conjunctivitis.
- **Eosinophilic Esophagitis:** The most common adverse reactions (incidence ≥2%) are injection site reactions, upper respiratory tract infections, arthralgia, and herpes viral infections.
- **Prurigo Nodularis:** The most common adverse reactions (incidence ≥2%) are nasopharyngitis, conjunctivitis, herpes infection, dizziness, myalgia, and diarrhea.

USE IN SPECIFIC POPULATIONS

- **Pregnancy:** A pregnancy exposure registry monitors pregnancy outcomes in women exposed to DUPIXENT during pregnancy. To enroll or obtain information call 1-877-311-8972 or go to https://mothertobaby.org/ongoing-study/dupixent/. Available data from case reports and case series with DUPIXENT use in pregnant women have not identified a drug-associated risk of major birth defects, miscarriage or adverse maternal or fetal outcomes. Human IgG antibodies are known to cross the placental barrier; therefore, DUPIXENT may be transmitted from the mother to the developing fetus.
- **Lactation:** There are no data on the presence of DUPIXENT in human milk, the effects on the breastfed infant, or the effects on milk production. Maternal IgG is known to be present in human milk. The developmental and health benefits of breastfeeding should be considered along with the mother's clinical need for DUPIXENT and any potential adverse effects on the breastfed child from DUPIXENT or from the underlying maternal condition.

Please see accompanying full Prescribing Information.

For any questions or concerns, or to report side effects with a Sanofi and Regeneron product while enrolled in *DUPIXENT MyWay®*, please contact **1-844-DUPIXEN(T)** (1-844-387-4936) Option 1, Monday–Friday, 8 am–9 pm ET.

Reference: 1. Centers for Medicare & Medicaid Services. 2022 ICD-10-CM. Updated February 1, 2022. Accessed September 30, 2022. https://www.cms.gov/medicare/icd-10/2022-icd-10-cm

sanofi | REGENERON

DUP.23.07.0004 01/2024

DUPIXENT®
(dupilumab) Injection
200mg · 300mg