

# Reimbursement Guide

Aggrastat reimbursement will vary depending on setting of care and payer policy.

## Inpatient

**Medicare:** MS-DRG case rate; not separately reimbursed  
**Other Payers:** Per payer policy

## Outpatient

**Medicare:** Separately reimbursed  
**Other Payers:** Per payer policy

### Hospital Inpatient Reimbursement for Aggrastat

Aggrastat is reimbursed through the MS-DRG (Diagnosis Related Groups) payment for inpatient admissions. Medicare uses MS-DRGs to determine the amount of fixed, all-inclusive payments to pay hospitals. Certain high-cost cases may qualify for an outlier payment over and above the DRG payment. If so, qualification is determined by the Medicare claims processing system. Reimbursement from commercial payers to hospitals vary by individual policy and/or hospital contract but typically follow a DRG-type payment process.

### Hospital Outpatient Reimbursement for Aggrastat

Medicare will reimburse hospital outpatient departments and ambulatory surgery centers (ASC) separately for Aggrastat when used as part of the hospital or ASC outpatient procedure. The policy for private insurers and other payers may vary, but the vast majority will provide a separate reimbursement for Aggrastat in Outpatient hospital and physician office/free-standing clinic settings.



The drug codes and billing units for Aggrastat are listed in the table below. Reimbursement is processed through the specific J-code (J3246) for Aggrastat.

Product	NDC	HCPCS Code	Billing Description	Billing Units
15 mL Bolus Vial	25208-001-04	J3246	Injection, tirofiban HCl, 0.25 mg	15 Units
100 mL Vial	25208-002-03	J3246	Injection, tirofiban HCl, 0.25 mg	20 Units
250 mL Bag	25208-002-02	J3246	Injection, tirofiban HCl, 0.25 mg	50 Units

J3246 is listed on the OPPS (Outpatient Prospective Payment System) Addendum A & B. Medicare, state Medicaid programs, and virtually all private payers require UB-04 (CMS-1450) claim forms for the hospital outpatient setting. The above codes and suggested billing units may be used consistent with payer requirements.

This document is provided for informational purposes only. Please see accompanying full prescribing information.

In the UB-04 (CMS-1450) claim form, the following information should be included in the “Remarks” section for payers that expect the actual amount of product be administered:

**1. National Drug Code (NDC)**

- a. 15 mL Bolus Vial - NDC: 25208-001-04
- b. 100 mL Vial - NDC: 25208-002-03
- c. 250 mL Bag - NDC: 25208-002-02

**2. Date Aggrastat (tirofiban hydrochloride) was administered to the patient**

In cases where less than the full bag or vial was administered to the patient, the unused portion of the drug can be billed for reimbursement. Billing requirements for unused amounts may vary by payer. Please contact your payer directly to determine appropriate billing requirements.

## Disclaimer

This guide is for informational purposes only, and does not take in consideration all payer’s policies and guidance that may apply. It is not intended for purposes of providing clinical practice guidelines for use of Aggrastat. Please see full prescribing information for more information.

## IMPORTANT SAFETY INFORMATION

**Indication:** Aggrastat is indicated to reduce the rate of thrombotic cardiovascular events (combined endpoint of death, myocardial infarction, or refractory ischemia/ repeat cardiac procedure) in patients with non-ST elevation acute coronary syndrome (NSTEMI/ACS).

**Contraindications:** Known hypersensitivity to any component of Aggrastat; history of thrombocytopenia with prior exposure to Aggrastat; active internal bleeding, or history of bleeding diathesis, major

surgical procedure or severe physical trauma within the previous month.

**Warnings and Precautions:** Aggrastat can cause serious bleeding. If bleeding cannot be controlled discontinue Aggrastat; thrombocytopenia: discontinue Aggrastat and heparin.

**Adverse Reactions:** Bleeding is the most commonly reported adverse reaction.



Aggrastat is a registered trademark of Medicure Pharma.

Please see accompanying full Prescribing Information.