

Multiple generic manufacturers (Hikma, Accord, Sagent, Dr. Reddy's, Apotex, Viatris, others) 350 mg & 500 mg single-dose vials

Once-daily IV infusion (30 min) or 2-min IV push Reviewed: Jul 14, 2026 ASP: Q2 2026

#1 BILLER RULE — not for pneumonia. Pulmonary surfactant inactivates daptomycin. A pneumonia diagnosis paired with J0878 is a medical-necessity flag, not a coding nuance. Confirm the actual indication (cSSSI, bacteremia, endocarditis) before billing.

HCPCS J0878 1 mg = 1 unit	BACTEREMIA DOSE 6 mg/kg q24h, actual body weight	CSSSI DOSE 4 mg/kg q24h, actual body weight	ADMIN CPT 96365 or 96374 IV push	VIALS 350 / 500 mg single-dose → JW/JZ	MEDICARE ASP+6% \$0.036 /mg, Q2 2026 (~\$0.034 ASP)
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J-CODE MAP — MOST NDCS BILL J0878, NOT ALL

Brand Cubicin + ANDA generics bill **J0878**. But live **manufacturer-specific codes exist**: Hospira/Pfizer = J0877, Xellia = J0872 / J0873, Baxter = J0874 — separately priced, NOT therapeutically equivalent to J0878.

Match the code to the NDC purchased via the CMS NDC-HCPCS crosswalk; auto-map in the CDM.

DOSING BY INDICATION

INDICATION	DOSE	LABEL STATUS
cSSSI	4 mg/kg q24h	FDA-labeled
<i>S. aureus</i> bacteremia / right-sided endocarditis	6 mg/kg q24h	FDA-labeled
Salvage bacteremia / endocarditis, VRE, osteomyelitis	8–10 mg/kg q24h	Off-label, IDSA-supported
Renal (CrCl <30, incl. HD)	Same mg/kg, q48h	FDA-labeled adjustment

Calculate on actual body weight, not adjusted/ideal weight. Off-label doses need the IDSA citation on the PA.

UNIT MATH & JW/JZ — WORKED EXAMPLE

70 kg × 6 mg/kg = 420 mg → one 500 mg vial → 420 admin (no modifier) + 80 JW discard
70 kg × 4 mg/kg = 280 mg → one 350 mg vial → 280 admin (no modifier) + 70 JW discard

JW and JZ never appear together on the same drug, same date of service. Administered line = no modifier when a JW line exists. JZ alone = only when nothing is discarded (rare exact-match dose).

ADMIN CODES

CODE	WHEN
96365	30-min IV infusion (primary code)
96374	2-min IV push (label-supported; OPAT-friendly)
96413	NOT appropriate — not chemotherapy

ICD-10 — INDICATION ANCHORS

CODE	FOR
L02.x / L03.x	cSSSI (abscess / cellulitis) — 4 mg/kg
A41.01 / A41.02	MSSA / MRSA bacteremia — 6 mg/kg
I33.0	Right-sided infective endocarditis — 6 mg/kg
M86.x	Osteomyelitis (off-label OPAT course)
B95.2	Enterococcus (VRE, off-label)

Never pair with a pneumonia code (J12–J18). Not effective — surfactant inactivation.

NDC (REPRESENTATIVE)

MFR	NDC (11-DIGIT)	PACKAGE
Hikma	00143-9444-01	500 mg SDV
Accord	16729-0434-05	350 mg SDV
Sagent	25021-0174-15	500 mg SDV
Dr. Reddy's	43598-0476-11	350 mg SDV
Apotex	60505-6229-04	500 mg SDV

SITE OF CARE

SETTING	POS	NOTES
Infusion suite / office	11	Initial dose(s) before OPAT handoff
HOPD	19 / 22	Facility bills drug (often 340B)
Home infusion / OPAT	12	Primary long-term setting — S9500 q24h per diem (S9494 = umbrella total diem) or G0068–G0070 (Medicare HIT)

TOP DENIALS

- Pneumonia diagnosis — clinical-appropriateness flag, not coding
- Missing/mismatched JW discard reconciliation
- Weight-basis error (adjusted vs actual body weight)
- Off-label dose (8–10 mg/kg) without IDSA citation
- Missing weekly CPK monitoring documentation on extended OPAT courses
- Wrong admin CPT for route (96365 infusion vs 96374 push)

Monitoring: baseline + weekly CPK (skeletal-muscle toxicity risk); more often with statins/renal impairment. Document the monitoring plan for OPAT PA and post-payment audit.

No manufacturer copay card. Merck Helps (Cubicin patient assistance) is closed. Generic, low-ASP drug — Part B coinsurance on a typical dose is a

few dollars, not a few hundred.

Sources: FDA daptomycin PI (DailyMed), CMS HCPCS/ASP file Q2 2026, CMS CR 12056 (JW/JZ), AMA CPT, IDSA MRSA/OPAT guidelines, ICD-10-carecostestimate.com/drugs/cubicin CM FY2026, merckhelps.com (confirmed closed Jul 2026).