

Ocrevus (ocrelizumab) — HCPCS J2350

CARECOST ESTIMATE · BILLING CHEAT SHEET

Genentech, Inc. Single-dose 300 mg / 10 mL vial IV infusion every 6 months **Reviewed:** May 2, 2026 **ASP:** Q2 2026

HCPCS J2350 1 mg = 1 unit	MAINTENANCE 600 units 600 mg q6mo · 2 vials	MODIFIER JZ Required, every claim	ADMIN CPT 96413/96365 Chemo or therapeutic	MEDICARE ASP+6% \$59.596 /mg · \$35,757.60/dose
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CODES & NDC

HCPCS	J2350 — "Injection, ocrelizumab, 1 mg" (permanent, eff. 1/1/2018)
NDC	50242-150-01 (10) / 50242-0150-01 (11) — N4 qualifier
VIAL	300 mg / 10 mL single-dose, 30 mg/mL
ROUTE	IV infusion, dilute in 250 mL 0.9% NaCl
BENEFIT	Medical (provider buy-and-bill); not specialty pharmacy

- ### DOSE SCHEDULE (FDA LABEL)
- Initial:** 300 mg IV × 2 infusions, 14 days apart (bill 300 units each)
 - Maintenance:** 600 mg IV every 6 months (bill 600 units; 2 × 300 mg vials)

YEAR-1 UNIT MATH (NEW PATIENT)

Day 0 — 300 mg infusion: **300 units**

Day 14 — 300 mg infusion: **300 units**

Month 6 — 600 mg maintenance: **600 units**

Month 12 — 600 mg maintenance: **600 units**

Total year 1: 1,800 units

ADMINISTRATION CODES

CODE	WHEN
96413	Chemo IV, 1st hr (Genentech-recommended)
96415	Chemo IV, each addl hr
96365	Therapeutic IV, 1st hr (payer fallback)
96366	Therapeutic IV, each addl hr
S9329 + 99601/99602	Home infusion

Payer fork: default 96413/96415; flip to 96365/96366 for payers that don't recognize ocrelizumab as chemo-eligible.

ICD-10-CM (EFF. 10/1/2025)

CODE	FOR
G35.A	RRMS
G35.B0	PPMS, unspecified
G35.B1	Active PPMS
G35.B2	Non-active PPMS
G35.C0	SPMS, unspecified
G35.C1	Active SPMS (covered)
G35.D	MS, unspecified

Avoid parent code G35 — many payers reject.

PAYER REQUIREMENTS (MAY 2026)

PAYER	PA	STEP	RE-AUTH
UnitedHealthcare (2026D0056P)	Yes	No	12 mo
Aetna (CPB 0264)	Yes	No	w/ response
Horizon BCBS-NJ (Policy 150)	Yes	No	6 mo

No commercial step therapy. Site-of-care steering (off hospital outpatient) is the dominant UM lever at UHC and Aetna.

MEDICARE REIMBURSEMENT (Q2 2026)

FIELD	VALUE
ASP + 6%	\$59.596 / mg (effective 4/1 – 6/30/2026)
600 mg dose	\$35,757.60 (600 units × \$59.596)
After ~2% sequestration	~\$35,043 (actual paid)
NCD/LCD	None drug-specific; LCD L33394 (generic drug coverage)

SITE OF CARE

SETTING	POS	FORM
Physician office	11	CMS-1500 / 837P
Ambulatory infusion suite	49	CMS-1500 / 837P
Hospital outpatient	19/22	UB-04 / 837I
Patient home	12	CMS-1500 / 837P

MODIFIERS

MOD	WHEN
JZ	Required every claim (single-dose vial, no waste)
JW	Does NOT apply — no drug discarded
25	On E/M when separately identifiable from infusion
JG / TB	340B — per MAC policy

Common denial: Using JW instead of JZ. Resubmit with JZ.

PATIENT ASSISTANCE

- **OCREVUS Co-pay Program** — commercial only
- **Genentech Patient Foundation** — uninsured/underinsured
- **Patient Navigator:** 1-844-OCREVUS / 1-844-627-3887 (M–F 9–8 ET)
- **Spoilage:** 1-800-551-2231
- Enroll: genentech-access.com

Different drug, different code: Ocrevus Zunovo (SC) = J2351, NDC 50242-554-01, 920 units, admin 96401. Confirm formulation before billing.