Annotated Claim Form

Ryoncil® (remestemcel-L-rknd) Suspension for IV infusion

CMS-1500 Claim Form for Physician Offices

The annotations on the CMS-1500 claim form below may help you as you complete your RYONCIL® (remestemcel-L-rknd) infusion claim submission.

Box 19
When using a miscellaneous code, include detailed information for proper processing*: *Drug name, strength, route of administration, dosage administered, amount wasted (if applicable), and NDC*

Box 21
Enter the appropriate ICD-10-CM diagnosis code[1]

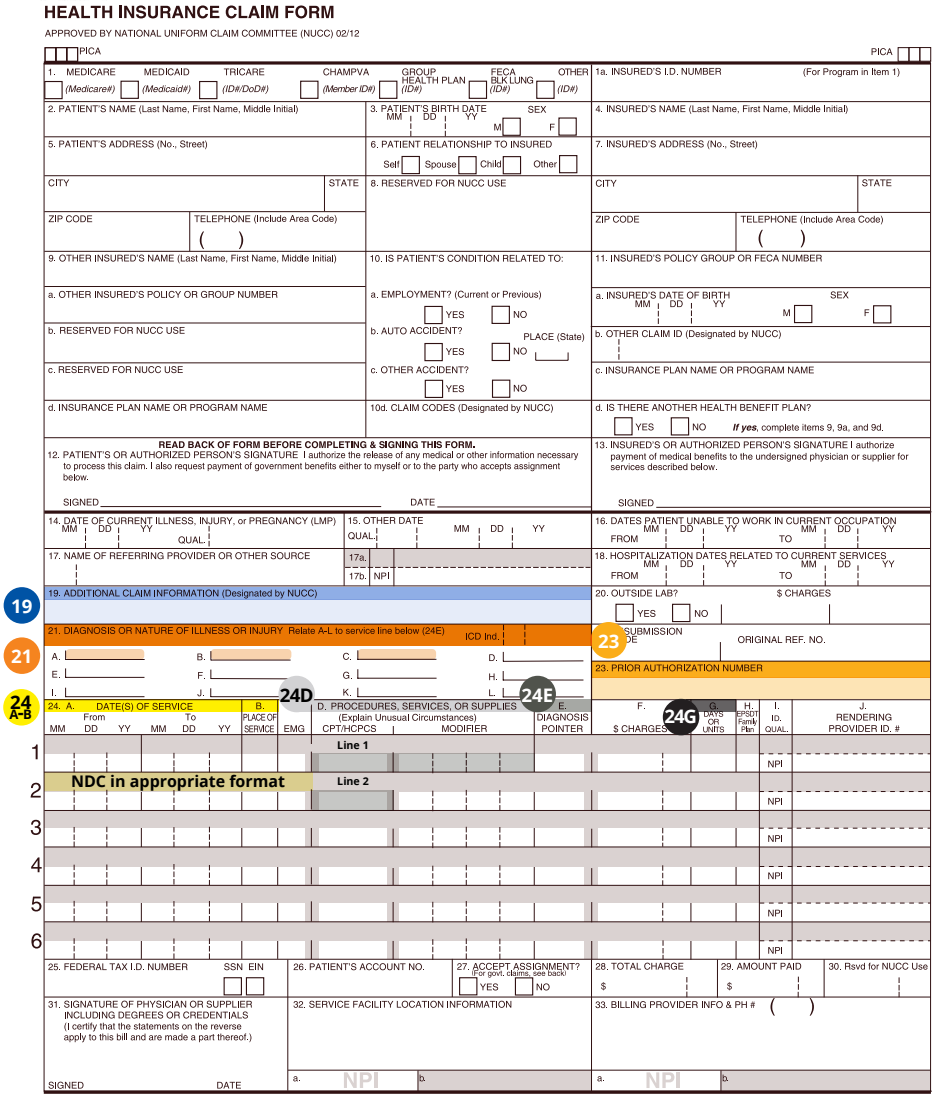
Box 23
Enter prior authorization referral number from the payer (if applicable)

Boxes 24A-B
Enter the date of service and the appropriate place of service code. When using a miscellaneous J-code, include the following in the shaded portion of Item 24A for each NDC*: *N4+11-digit NDC+ML+unit quantity (administered or discarded)*

Box 24D
Enter the appropriate HCPCS, modifier, and CPT® codes.[2,3] For example†:
- Drug: HCPCS code
- Modifier - JW (Discarded product from single-dose containers should be reported on a separate line with the JW modifier. If no wastage occurs, include the JZ modifier inline with the HCPCS code.)
- Administration: CPT code

Box 24E
Refer to the diagnosis (Box 21), relating to the drug or procedure listed in Box 24D

Box 24G
Enter the number of units for each line item. With miscellaneous codes, "1" is typically used, as these codes do not have a specific unit value, but payer requirements may vary



*Always refer to specific payer policies, as billing requirements for miscellaneous codes may vary by payer.
†Please refer to payer policies, as other miscellaneous codes may be required.

If you have any questions or want to request a meeting with a Key Account Manager, please visit www.ryoncil.com or contact us at keyaccountmanager@mesoblast.com.

For Medicare, Medicaid, and other government payers, the use of the CMS-1500 claim form may be appropriate for treatment with RYONCIL® in a physician's office. For commercial claims, please consult with the applicable third-party payer. Note that payers may require use of the electronic version of the CMS-1500 claim form; we suggest adapting this information to the electronic equivalent fields in your software systems.

Mesoblast provides this information for educational purposes only and cannot guarantee insurance coverage or reimbursement, which may vary significantly by payer, plan, patient, and site of care. It is the healthcare provider's sole responsibility to select proper codes and ensure statement accuracy for coverage and reimbursement.

CPT, Current Procedural Terminology; HCPCS, Healthcare Common Procedure Coding System; ICD-10-CM, ICD-10 Clinical Modification; NDC, National Drug Code.

References: 1. AAPC. Codify. Accessed January 22, 2025. https://www.aapc.com/codes/ **2.** AAPC. Codify. Accessed January 22, 2025. https://www.aapc.com/codes/hcpcs-codes **3.** Intravenous infusion, for therapy, prophylaxis, or diagnosis (specify substance or drug). FindACode.com. Accessed January 22, 2025. https://www.findacode.com/code-set.php?set=CPT&i=37339

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