

Claim filing checklist

Once your patient is administered LEQVIO[®], a claim for reimbursement is submitted to their health insurance provider. When submitting a claim, it is a best practice to understand the payer's specific billing and coding requirements and ensure that the submitted claim is as complete as possible. You may want to reference the following general tips when filing claims for LEQVIO:

- Use appropriate codes to report the patient's condition, the drugs the patient received, and the services you have provided**
 - ICD-10-CM code
 - NDC
 - CPT code
 - HCPCS code

- Attach additional information to the claim if necessary**
 - Letter of medical necessity
 - Prescribing Information
 - Patient notes

- Review claim for accuracy, including patient identification numbers and coding**

- File claim as soon as possible and within health plan filing time limits**

- Reconcile claim reports promptly and thoroughly to ensure claims have been appropriately processed and paid**

- Verify that payment amounts correspond with your public health plan allowables and your private health plan contracts**

This checklist is provided for educational purposes only. Health care professionals can reference this checklist, in addition to other sources of information, to determine for themselves the appropriate claims to file for LEQVIO and the related services. Novartis does not guarantee payment or coverage for any product or service. It is always the provider's responsibility to determine the appropriate health care setting, and to submit true and correct claims for the products and services rendered. Providers should contact third-party payers for specific information on their coding, coverage, payment policies, and fee schedules.

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