

For more information, visit [www.trodelvyhcp.com](http://www.trodelvyhcp.com)

1	2	3a PAT. CNTL #	4 TYPE OF BILL
		3b MED REC #	
		5 FED. TAX NO.	6 STATEMENT COVERS PERIOD FROM
			7 THROUGH
16	17	18	19
		39 VALUE CODES AMOUNT	40 VALUE CODES AMOUNT
		a CODE	41 VALUE CODES AMOUNT
		b CODE	
		c CODE	
		d CODE	
42 REV. CD.	43 DESCRIPTION	44 HCPCS / RATE / HIPPS CODE	45 SERV. DATE
			46 SERV. UNITS
			47 TOTAL CHARGES
			48 NON-COVERED CHARGES
			49
1	2	3	4
5	6	7	8
9	10	11	12
13	14	15	16
17	18	19	20
21	22	23	24
PAGE	OF	CREATION DATE	TOTALS
50 PAYER NAME	51 HEALTH PLAN ID	52 REL INFO	53 ASIG BEN.
		54 PRIOR PAYMENTS	55 EST. AMOUNT DUE
		56 NPI	57 OTHER PRV ID
59 P.REL.	60 INSURED'S UNIQUE ID	61 GROUP NAME	62 INSURANCE GROUP NO.
	64 DOCUMENT CONTROL NUMBER	65 EMPLOYER NAME	
66 DX	67	68	
69 ADMIT DX	70 PATIENT REASON DX	71 FPS CODE	72 ECI
74 PRINCIPAL PROCEDURE CODE	a. OTHER PROCEDURE CODE	b. OTHER PROCEDURE CODE	75
	c. OTHER PROCEDURE CODE	d. OTHER PROCEDURE CODE	76 ATTENDING NPI
	e. OTHER PROCEDURE CODE	f. OTHER PROCEDURE CODE	QUAL
80 REMARKS	81CC a		77 OPERATING NPI
	b		QUAL
	c		78 OTHER NPI
	d		QUAL
			79 OTHER NPI
			QUAL
			LAST FIRST
			LAST FIRST
			LAST FIRST
			LAST FIRST

**LOCATOR 42**

- ENTER APPROPRIATE REVENUE CODE FOR EACH LINE ITEM
- DRUGS THAT ARE BILLED WITH HCPCS CODES USUALLY REQUIRE REVENUE CODE 0636—*DRUGS REQUIRING DETAILED CODING*

**LOCATOR 43**

- FOR EACH LINE ITEM, ENTER THE DESCRIPTION OF THE REVENUE CODE USED

**LOCATOR 46**

- ENTER THE APPROPRIATE NUMBER OF UNITS FOR THE PRODUCT/SERVICE

**LOCATOR 44**

- ENTER THE APPROPRIATE HCPCS AND CPT CODES
- ENTER THE APPROPRIATE J-CODE (J9317)

**LOCATOR 47**

- ENTER THE AMOUNT OF THE FACILITY'S ACTUAL CHARGES FOR THE PRODUCT/SERVICE

**LOCATOR 66**

- ENTER APPROPRIATE DIAGNOSIS CODE(S)

Gilead Sciences cannot guarantee payment of any claim. Coding, coverage, and reimbursement may vary significantly by payer, plan, patient, and setting of care. Actual coverage and reimbursement decisions are made by individual payers following the receipt of claims. For additional information, customers should consult with their payers for all relevant coding, reimbursement, and coverage requirements. It is the sole responsibility of the provider to select the proper code and ensure the accuracy of all claims used in seeking reimbursement. All services must be medically appropriate and properly supported in the patient's medical record.

Please click to see the full [Prescribing Information](#), including **BOXED WARNING**.

