

SAMPLE CODING

Breast Cancer

TYPE	CODE		DESCRIPTION
Diagnosis: ICD-10-CM	C50.011–C50.019 C50.111–C50.119 C50.211–C50.219 C50.311–C50.319 C50.411–C50.419 C50.511–C50.519 C50.611–C50.619 C50.811–C50.819 C50.911–C50.919		Malignant neoplasm of the female breast
	C50.021–C50.029 C50.121–C50.129 C50.221–C50.229 C50.321–C50.329 C50.421–C50.429 C50.521–C50.529 C50.621–C50.629 C50.821–C50.829 C50.921–C50.929		Malignant neoplasm of the male breast
Drug: HCPCS	J9306		Injection, pertuzumab, 1 mg
Drug: NDC Note: Payer requirements regarding use of a 10-digit or 11-digit NDC may vary. Both formats are listed here for your reference.	10-digit	11-digit	420 mg/14 mL single-dose vial
	50242-145-01	50242-0145-01	
Administration procedures: CPT	96413		Chemotherapy administration, intravenous infusion technique; up to 1 hour, single or initial substance/drug
	96415		Chemotherapy administration, intravenous infusion technique; each additional hour (List separately in addition to code for primary procedure)
	96417		Chemotherapy administration, intravenous infusion technique; each additional sequential infusion (different substance/drug), up to 1 hour (List separately in addition to code for primary procedure)

CPT=Current Procedural Terminology; HCPCS=Healthcare Common Procedure Coding System; ICD-10-CM=International Classification of Diseases, 10th Revision, Clinical Modification; NDC=National Drug Code.

These codes are not all-inclusive; appropriate codes can vary by patient, setting of care and payer. Correct coding is the responsibility of the provider submitting the claim for the item or service. Please check with the payer to verify codes and special billing requirements. Genentech does not make any representation or guarantee concerning reimbursement or coverage for any service or item.

Many payers will not accept unspecified codes. If you use an unspecified code, please check with your payer.

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