

for **Herceptin**<sup>®</sup>  
(trastuzumab)

**SAMPLE CODING**

**Metastatic Gastric Cancer**

| TYPE   | CODE         |               | DESCRIPTION   |
|--|--------------|---------------|---|
| Diagnosis: ICD-10-CM   | C16.0–C16.9  |               | Malignant neoplasm of the stomach   |
| Drug: HCPCS  | J9355        |               | Injection, trastuzumab, 10 mg   |
| Drug: NDC<br>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      | 150-mg single-dose vial   |
|  | 50242-132-01 | 50242-0132-01 |   |
| 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 item or service.

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

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Please see full [Prescribing Information](#), including **BOXED WARNINGS**, for Important Safety Information.