

## SAMPLE CODING

### Muscle Invasive Bladder Cancer (MIBC)

TYPE	CODE	DESCRIPTION
Diagnosis: ICD-10-CM	C67	Malignant neoplasm of bladder
	C67.0	Malignant neoplasm of trigone of bladder
	C67.1	Malignant neoplasm of dome of bladder
	C67.2	Malignant neoplasm of lateral wall of bladder
	C67.3	Malignant neoplasm of anterior wall of bladder
	C67.4	Malignant neoplasm of posterior wall of bladder
	C67.5	Malignant neoplasm of bladder neck
	C67.6	Malignant neoplasm of ureteric orifice
	C67.7	Malignant neoplasm of urachus
	C67.8	Malignant neoplasm of overlapping sites of bladder
	C67.9	Malignant neoplasm of bladder, unspecified
Drug: HCPCS	J9022	Injection, atezolizumab, 10 mg
HCPCS: Modifier*	JZ	Zero drug amount discarded/not administered to any patient

CMS=Centers for Medicare & Medicaid Services; HCPCS=Healthcare Common Procedure Coding System; ICD-10-CM=International Classification of Diseases, 10th Revision, Clinical Modification.

\*The JZ modifier is required on claims for all single-dose containers or single-use drugs when no drug is discarded/administered to any patient as of July 1, 2023. For more information on the JZ modifier, visit CMS.gov.

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.

for **TECENTRIQ®**  
(atezolizumab)

**Muscle Invasive Bladder Cancer (MIBC) (cont)**

TYPE	CODE		DESCRIPTION
	10-digit	11-digit	
<b>Drug: NDC</b> <b>Note: Payer requirements regarding use of a 10-digit or 11-digit NDC may vary. Both formats are listed here for your reference.</b>	50242-917-01	50242-0917-01	1200 mg/20 mL single-dose vial
	50242-918-01	50242-0918-01	840 mg/14 mL single-dose vial
<b>Administration procedures: CPT</b>	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; NDC=National Drug Code.

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