



2025 Coding and Reimbursement Guide

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Magtrace[®] (carboxydextran-coated superparamagnetic iron oxide) injection, for subcutaneous use.

The Magtrace[®] and Sentimag[®] Magnetic Localization System is indicated to assist in localizing lymph nodes draining a tumor site, as part of a sentinel lymph node biopsy procedure (SLNB), in patients with breast cancer undergoing a mastectomy or lumpectomy.

Facility Payment							
HCPCS/ CPT [®] Code	Descriptor	Hospital Outpatient ¹		Ambulatory Surgery Center ²			
		APC	Payment	Payment			
Magtrace [®] Lymphatic Tracer							
A9697	Injection, carboxydextran-coated superparamagnetic iron oxide, per study dose	0814	\$1,137.96	\$1,137.96			
Magtrace [®] Injection							
96372	Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular	5692	\$71.17	Not included on the ASC procedure list			
76492	Ultrasonic guidance for needle placement (eg, biopsy, aspiration, injection, localization device), imaging supervision and interpretation		Not separately payable	Not separately payable			
38999	Unlisted procedure, hemic or lymphatic system	5241	\$437.18	Not included on the ASC procedure list			
Intraoperative Procedures							
19301	Mastectomy, partial (eg, lumpectomy, tylectomy, quadrantectomy, segmentectomy)	5091	\$3,829.28	\$1,538.05			
19303	Mastectomy, simple, complete	5092	\$6,521.46	\$2,682.40			
+38900	Intraoperative identification (eg, mapping) of sentinel lymph node(s) includes injection of non-radioactive dye, when performed. (List separately in addition to the code for the primary procedure. Report 38900 in conjunction with 19302, 19307, or 38525)		Not separately payable				
38525	Biopsy or excision of lymph node(s); open, deep axillary node(s) (-51 Multiple Procedure may apply when reported with a mastectomy procedure)	5091	\$3,829.28	\$1,538.05			

HCPCS = Healthcare Common Procedure Coding System* CPT = Current Procedural Terminology APC = Ambulatory Payment Classification

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Centers for Medicare & Medicaid Services (CMS), 2025 Healthcare Common Procedure Coding System (HCPCS) codes, available at http://www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/Alpha-Numeric-HCPCS.html

Physician Payment							
CPT [®] Code	Descriptor	Facility ³		Non-Facility ³			
		RVUs	Payment	RVUs	Payment		
Magtrace [®] Injection							
96372	Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular	N/A	N/A	0.43	\$13.91		
76492	Ultrasonic guidance for needle placement (eg, biopsy, aspiration, injection, localization device), imaging supervision and interpretation	N/A	N/A	1.77	\$57.25		
38999	Unlisted procedure, hemic or lymphatic system		Contractor Priced		Contractor Priced		
Intraoperative Procedures							
19301	Mastectomy, partial (eg, lumpectomy, tylectomy, quadrantectomy, segmentectomy)	20.01	\$647.25	N/A	N/A		
19303	Mastectomy, simple, complete	29.07	\$940.31	N/A	N/A		
+38900	Intraoperative identification (eg, mapping) of sentinel lymph node(s) includes injection of non-radioactive dye, when performed. List separately in addition to the code for the primary procedure. Report 38900 in conjunction with 19302, 19307, or 38525)	4.11	\$132.94	4.11	\$132.94		
38525	Biopsy or excision of lymph node(s); open, deep axillary node(s) (-51 Multiple Procedure may apply when reported with a mastectomy procedure)	13.42	\$434.41	N/A	N/A		

Magtrace[®] Identifiers

Global Unique Device Identification Database (GUDID) Number:	15060391210206 (link to Access GUDID)		
UPC Number (10 digit):	60391-21024		
UPC Number (11 digit):	60391-0210-24		

Sources:

1. The national average 2025 Medicare hospital outpatient rates are from the 2025 Hospital Outpatient Prospective Payment System (OPPS) release, Addenda B, accessible at https://www.cms.gov/medicare/payment/prospective-payment-systems/hospital-outpatient/regulations-notices/cms-1809-fc. OPPS rates are subject to update in quarterly files released by CMS and do not reflect sequestration.

2. The national average 2025 Medicare ambulatory surgical center rates are from the 2025 Ambulatory Surgical Center (ASC) Payment Release, Addenda AA and BB, accessible at https://www.cms.gov/medicare/payment/prospective-payment-systems/ambulatory-surgical-center-asc/asc-regulations-and-notices/cms-1809-fc. ASC rates are subject to update in quarterly files released by CMS and do not reflect sequestration.

3. The national average 2025 Medicare rates to physicians shown are based on the 2025 conversion factor of \$32.3465 and do not reflect payment cuts due to sequestration. Medicare payment for a given procedure in a given locality in 2025 should be available in the Medicare Physician Fee Schedule Look-up file accessible through the CMS website at https://www.cms.gov/medicare/physician-fee-schedule/search. Actual payment to a physician will vary based on geographic location and may also differ based on policies and fee schedules outlined as terms in your health plan and/or payer contracts.

Frequently Asked Questions

Q1 What are the details on the pass-through payment for Magtrace (A9697)?

The Centers for Medicare & Medicaid Services (CMS) have approved transitional pass-through payment for Magtrace (A9697) effective January 1, 2025. Once effective, hospitals should receive separate reimbursement for any Medicare patients receiving Magtrace in the hospital outpatient department or ASC.

Q2 Should the Magtrace[®] lymphatic tracer be reported in all settings of care?

Yes. You may report the Magtrace[®] lymphatic tracer (A9697) with assigned charges, in all settings of care. Payer rules may vary. Maintain a copy of the invoice. The acquisition/invoice cost or a copy of the invoice for Magtrace[®] lymphatic tracer may be requested by the payer.

Q3 If the procedure to inject Magtrace[®] lymphatic tracer is performed with other procedures and services, such as the placement of a localization device, is it separately reported?

Not always. Please consult the National Correct Coding Initiative (NCCI) and other code edits to determine if the injection procedure is separately reported or if it is included in the primary procedure performed in the same episode of care.

Q4 Does Magtrace have an NDC number?

No, Magtrace is regulated by the FDA as a combination product with a device primary mode of action. As such it does not have an NDC number. Magtrace is now listed with First Databank and Red Book with the UPC numbers referenced. The UPC number may be reported in place of the NDC number to identify Magtrace.

MAG-TRACE-CODE-GUIDE-202502-206-US

Endomagnetics Ltd (Endomag). Registered in England and Wales (No. 06227698). 330 Cambridge Science Park, Milton Road, Cambridge, CB4 0WN, United Kingdom info@endomag.com +44 1223 652540 endomag.com

