



AGENT™

Drug-Coated Balloon

HCPCS C-Code Use in the Outpatient Hospital Setting

Effective January 1, 2025, there is a new HCPCS C-code to describe the AGENT™ drug-coated balloon.

C9610: Catheter transluminal drug delivery with or without angioplasty, coronary, non-laser; (insertable)

C9610 is reported by the facility for procedures done in the outpatient setting.

C9610 also qualifies for the new technology transitional pass-through (TPT) payment.

If you have questions or would like additional information, please email: IC.Reimbursement@bsci.com.

Important Information

Health economic and reimbursement information provided by Boston Scientific Corporation is gathered from third-party sources and is subject to change without notice as a result of complex and frequently changing laws, regulations, rules, and policies. This information is presented for illustrative purposes only and does not constitute reimbursement or legal advice.

Boston Scientific encourages providers to submit accurate and appropriate claims for services. It is always the provider's responsibility to determine medical necessity, the proper site for delivery of any services, and to submit appropriate codes, charges, and modifiers for services rendered.

It is also always the provider's responsibility to understand and comply with Medicare national coverage determinations (NCD), Medicare local coverage determinations (LCD), and any other coverage requirements established by relevant payers which can be updated frequently. Boston Scientific recommends that you consult with your payers, reimbursement specialists, and/or legal counsel regarding coding, coverage, and reimbursement matters.

Boston Scientific does not promote the use of its products outside their FDA-approved label.

Payer policies will vary and should be verified prior to treatment for limitations on diagnosis, coding, or site of service requirements. The coding options listed within this guide are commonly used codes and are not intended to be an all-inclusive list. We recommend consulting your relevant manuals for appropriate coding options.

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References

CMS. CY2025 Hospital Outpatient Prospective Payment System, Final Rule: CMS-1809-FC, Addenda CPage 2 displaying header 2