

COVID-19 Vaccine CPT/HCPCS Coding Guide

The American Medical Association (AMA) and Center for Medicare and Medicaid Services (CMS) have finalized updated CPT/HCPCS codes for COVID-19 vaccine supply and administration. See below coding updates:

Vaccine Brand	CPT for vaccine supply/dose*	Admin Code, 1 st Dose	Admin Code, 2 nd Dose	Admin Code, 3 rd Dose**	Admin Code, Booster Dose**
Pfizer – under age 5 (Maroon Cap Vials)	91308	0081A	0082A	N/A	N/A
Pfizer – age 5-11 (Orange Cap Vials)	91307	0071A	0072A	0073A	N/A
Pfizer – Adult (age 12+) (Gray Cap Vials; no dilution)	91305	0051A	0052A	0053A	0054A
Pfizer – Adult (age 12+) (Purple Cap Vials; requiring dilution)	91300	0001A	0002A	0003A	0004A
Moderna 6 months to 5 years (Blue Cap, Magenta Border)	91308	0081A	0082A	N/A	N/A
Moderna 0.5mL - age 6-11 Primary Series (Blue Cap, Purple Border)	91311	0111A	0112A	N/A	N/A
Moderna 0.5 mL – age 12+ Primary Series (Red Cap)	91301	0011A	0012A	0013A	N/A
Moderna 0.25mL Booster – age 12+ (Red Cap)	91306	N/A	N/A	N/A	0064A
Moderna 0.5mL Booster – age 12+ (Blue Cap, Purple Border)	91309	N/A	N/A	N/A	0094A

For vaccines administered at a patient’s home, use the additional CPT/HCPCS code, **M0201**.

*Publicly supplied vaccine supply (supplied by CDC, NYS, HRSA) should not be charged. Submit claims without the supply code or with the supply code and a charge amount of \$0.00. If your billing system requires a charge amount, you can charge \$0.01 or \$0.10, which will be adjusted to \$0.00 during claims processing by the payer.

**For Pfizer and Moderna vaccines, there is a distinction in coding between third doses (for patients who are moderately to severely immunocompromised) and booster doses (for patients who completed their primary series of Pfizer or Moderna 5+ months ago, or their J&J vaccination 2+ months ago).

References: [American Medical Association](#), [Center for Medicare & Medicaid Services](#)

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