

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, Primary Series**	Admin Code, Booster Dose**
Pfizer – 12+ yrs. Bivalent (Gray cap) <i>30mcg/0.3mL</i>	91312	0121A	0124A
Pfizer – 5-11yrs. Bivalent (Orange cap) <i>10mcg/0.2mL</i>	91315	0151A	0154A
Pfizer – 6 mos-4 yrs. Bivalent (Maroon cap) <i>3mcg/0.2mL</i>	91317	1 st dose: 0171A 2 nd dose: 0172A 3 rd dose: 0173A	0174A
Moderna –12+ yrs. Bivalent (Dark blue cap) <i>50mcg/0.5mL</i>	91313	0134A	0134A
Moderna - 6 mos.-11 yrs. Bivalent (Dark blue cap) <i>25mcg/0.25mL</i>	91314	1 st dose: 0141A 2 nd dose: 0142A (6mo-5y only)	0144A
Moderna - 6 mos.-5 yrs. Bivalent (Dark pink cap) <i>10mcg/0.2mL</i>	91316	N/A	0164A
NovaVax - age 12+ (Dark blue cap) <i>5mcg/0.5mL</i>	91304	1 st dose: 0041A 2 nd dose: 0042A	0044A (18+ only)

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

*Publicly supplied vaccine supply (supplied by CDC, NYS, HRSA, VFC) should not be charged. Submit claims without the supply CPT code or with the supply CPT 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.

As of June 2023, expected revenue is \$40 from Medicaid and Medicare. Commercial plans will vary.

For current COVID-19 vaccine immunization schedule, see: <https://www.cdc.gov/vaccines/covid-19/downloads/covid-19-immunization-schedule-ages-6months-older.pdf>; for detailed guidance, see: <https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html>

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

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