# CDT CAsistant

Official source for CPT coding guidance

#### **SPECIAL EDITION: October Update**

# New COVID-19 Vaccine Codes: October Update

Recently, new Current Procedural Terminology (CPT®) codes for a ready-to-use vaccine product (tris-sucrose formulation) from Pfizer and its administration were added to previously established vaccine codes for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease 2019 [COVID-19]). The CPT Editorial Panel (the Panel) has approved a new vaccine product code and its associated administration codes of the reformulated Pfizer vaccine product for pediatric use. This reformulated vaccine product involves the administration of two intramuscular injections of a diluted and reconstituted dosage of 10 mcg/0.2 mL volume of the tris-sucrose formula, which is administered 21 days apart, for use in patients ages 5 through 11 years of age. As with previous COVID-19 vaccine administration codes, counseling is included as part of the administration visit.

In order to assist CPT code users in differentiating and appropriately reporting the available vaccine product codes and their affiliated immunization administration codes, the American Medical Association (AMA) established a website (https://www.ama-assn.org/practice-management/cpt/covid-19-cpt-vaccine-and-immunization-codes) that features timely updates of the Panel's actions. The last COVID-19 update was in the *CPT®Assistant Special Edition: September Update* (2021) in which the Pfizer and Moderna third-dose vaccine administration

codes (0003A, 0013A); Pfizer's ready-to-use vaccine product code (91305) and its associated administration codes (0051A, 0052A, 0053A); Moderna's lower-dose vaccine product code (91306) and associated booster-dose administration code (0064A); and booster-dose administration codes for the Pfizer vaccine product (0004A, 0054A) were established.

This issue of *CPT* \* Assistant Special Edition introduces and provides guidance on the appropriate use of the new pediatric Pfizer vaccine product code (91307) for use in patients ages 5 through 11 years of age and its associated new administration codes (0071A, 0072A).

## **Immunization Administration for Vaccines/Toxoids**

●0001A

Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, diluent reconstituted; first dose

continued on next page



●0002A second dose ●0003A third dose ●0004A booster dose ► (Report 0001A, 0002A, 0003A, 0004A for the administration of vaccine 91300) ◀ ► (Do not report 0001A, 0002A, 0003A, 0004A in conjunction with 91305, 91307) ◀ #**0**0051A Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, tris-sucrose formulation; first dose # 0052A second dose # 0053A third dose # 0054A booster dose ► (Report 0051A, 0052A, 0053A, 0054A for the administration of vaccine 91305) ◀ ► (Do not report 0051A, 0052A, 0053A, 0054A in conjunction with 91300, 91307) ◀ # 0071A Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 10 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation; first dose

Vaccines, Toxoids

# 91300

Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, diluent reconstituted, for intramuscular use

- ► (Report 91300 with administration codes 0001A, 0002A, 0003A, 0004A)◀
- ▶ Do not report 91300 in conjunction with administration codes 0051A, 0052A, 0053A, 0054A, 0071A, 0072A)◀

#**#** 91305

Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3 mL dosage, tris-sucrose formulation, for intramuscular use

- ► (Report 91305 with administration codes 0051A, 0052A, 0053A, 0054A)◀
- ► (Do not report 91305 in conjunction with administration codes 0001A, 0002A, 0003A, 0004A, 0071A, 0072A)◀

**#≠**●91307

Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 10 mcg/0.2 mL dosage, diluent reconstituted, trissucrose formulation, for intramuscular use

- ► (Report 91307 with administration codes 0071A, 0072A)◀
- ► (Do not report 91307 in conjunction with administration codes 0001A, 0002A, 0003A, 0004A, 0051A, 0052A, 0053A, 0054A)◀

► (Report 0071A, 0072A for the

second dose

# 0072A

administration of vaccine 91307) ◀

► (Do not report 0071A, 0072A in conjunction with 91300, 91305) ◀ Newly established COVID-19 vaccine product code 91307 describes the new Pfizer two-dose pediatrictailored vaccine. In contrast to the adult formulation, which uses a 30 mcg/0.3 mL ready-to-use formula, the vaccine for patients ages 5 through 11 requires reconstitution using a diluent to reach the appropriate dosage of 10 mcg/0.2 mL. This vaccine product has a two-dose administration schedule, which is reflected in newly established codes 0071A and 0072A that are used to report administration of the first and second dose of the tris-sucrose diluent reconstituted Pfizer vaccine product. The vaccine schedule specifies that the second dose is to be administered 21 (or more) days from administration of the first dose. The physician or other qualified health care professional (QHP) should exercise clinical judgment to determine whether the vaccine is appropriate for a given pediatric patient.

Note that the new administration codes (0071A, 0072A) may not be reported in conjunction with the initial Pfizer vaccine product code (91300) or with the updated, ready-to-use formulation product code (91305). Parenthetical notes have been added to both code groups to clarify the appropriate use of these vaccine administration codes.

To accommodate the new coding structure, Appendix Q was added to the CPT code set. Appendix Q details the vaccine codes, their associated vaccine administration code(s), the vaccine manufacturers and names, the National Drug Code (NDC) labeler product ID, and dosing intervals. The new Pfizer pediatric vaccine product code (91307) and its respective administration codes (0071A, 0072A) have also been added to Appendix Q.

Additional details on the new vaccine coding structure and other pertinent information provided in multiple special editions of the *CPT* Assistant for COVID-19 guidance are available at https://www.ama-assn.org/practice-management/cpt/covid-19-cpt-coding-and-guidance.

The following clinical examples and procedural descriptions reflect typical clinical scenarios for which these new codes would be appropriately reported.

#### Clinical Example (91307)

A parent or guardian of an 8-year-old child seeks immunization against SARS-CoV-2 to decrease the risk of contracting this disease, consistent with evidence-supported guidelines. The parent or guardian is offered and agreed to an intramuscular injection of SARS-CoV-2 vaccine for the child for this purpose.

# **Description of Procedure** (91307)

The physician or other qualified healthcare professional (QHP) determines that the SARS-CoV-2 vaccine is appropriate for this patient and dispenses the vaccine according to the dose scheduled in the administration code for the SARS-CoV-2 vaccine.

#### Clinical Example (0071A)

A parent or guardian of an 8-year-old child seeks immunization against SARS-CoV-2 to decrease the risk of contracting this disease, consistent with evidence-supported guidelines. The parent or guardian is offered and agreed to an intramuscular injection of SARS-CoV-2 vaccine for the child for this purpose.

# **Description of Procedure** (0071A)

The physician or other QHP reviews the patient's chart to confirm that vaccination to decrease the risk of COVID-19 is indicated. Counsel the parent or guardian on the benefits and risks of vaccination to decrease the risk of COVID-19 and obtain consent. Administer the first dose of the COVID-19 vaccine by intramuscular injection in the upper arm. Monitor the patient for any adverse reaction. Update the patient's immunization record (and registry when applicable) to reflect the vaccine administered.

#### Clinical Example (0072A)

A parent or guardian of an 8-year-old child seeks immunization against SARS-CoV-2 to decrease the risk of contracting this disease, consistent with evidence-supported guidelines. The parent or guardian is offered and agreed to an intramuscular injection of SARS-CoV-2 vaccine for the child for this purpose.

# **Description of Procedure** (0072A)

The physician or other QHP reviews the patient's chart to confirm that vaccination to decrease the risk of COVID-19 is indicated. Counsel the parent or guardian on the benefits and risks of vaccination to decrease the risk of COVID-19 and obtain consent. Administer the first dose of the COVID-19 vaccine by intramuscular injection in the upper arm. Monitor the patient for any adverse reaction. Update the patient's immunization record (and registry when applicable) to reflect the vaccine administered.

The following frequently asked questions reflect question(s) that may be asked for different scenarios in relation to the new codes and how they should be reported.

### Frequently Asked Questions

**Question:** If physicians or other QHPs do not have the tris-sucrose, diluent-reconstituted vaccine product available (91307), can they create a pediatric dose from the tris-sucrose formulation represented by vaccine product (adult formulation) code 91305?

**Answer:** No, these two vaccine formulations are not the same and cannot be substituted. The vaccine product represented by code 91305 is a ready-to-use formulation at the appropriate dosage (30 mcg/0.3 mL) intended for use in patients ages 12 and older. The vaccine product represented by code 91307 requires reconstitution to achieve the correct dosage of 10 mcg/0.2 mL for patients ages 5 through 11. Therefore, the appropriate vaccine products need to be used for each respective age range as they are not interchangeable.

**Question:** What is the appropriate code to report when a patient receives both a COVID-19 vaccine and an influenza vaccine during the same encounter? For example, a 10-year-old patient came in for his or her second dose of the Pfizer pediatric vaccine product, and ended up receiving an annual influenza vaccination product (intranasal LAIV4 formula) as well the COVID-19 vaccine.

**Answer:** For an encounter in which both a COVID-19 vaccine product and influenza vaccine product were administered, the COVID-19 vaccine product code and its appropriate administration code should be reported. In addition, the influenza vaccine product code and the age- and route-appropriate (eg, intranasal) administration code should be reported. In the example provided, it would be appropriate to report vaccine product code (91307) and second-dose administration code (0072A). Note that code 0072A includes counseling provided before the COVID-19 vaccine administration, while codes 90460 and 90672 for the intranasal flu vaccine includes counseling. If the flu vaccination were an injection, report the appropriate vaccine product code (90653-90658, 90661), which is based on the type of formula and volume amount injected, together with the appropriate administration code. The guidelines in the Immunization Administration for Vaccines/Toxoids in the CPT 2022 code set state:

Report codes 90460 and 90461 only when the physician or other qualified health care professional provides face-to-face counseling of the patient/family during the administration of a vaccine other than when performed for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccines. For immunization administration of any vaccine, other than SARS-CoV-2 (coronavirus disease [COVID-19]) vaccines, that is not accompanied by face-to-face physician or other qualified health care professional counseling to the patient/family/guardian or for administration of vaccines to patients over 18 years of age, report codes 90471-90474.



# CDU LASSISTANT CPT coding guidance



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The CPT® Assistant Special Edition information is designed to provide accurate, up-to-date coding information. We continue to make every reasonable effort to ensure the accuracy of the material presented. However, this publication does not replace the CPT® codebook; it serves only as a guide.

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