

CPT® Category I and Proprietary Laboratory Analyses (PLA) Codes for Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])

Most recent changes to this long descriptor document:

- Addition of 7 Category I codes (87428, 0001A, 0002A, 0011A, 0012A, 91300, 91301), new and revised guidelines and parenthetical notes, and new Appendix Q accepted by the CPT Editorial Panel.
- Deleted codes in this document appear with a ~~strike through~~.

It is important to note that further CPT Editorial Panel or Executive Committee actions may affect these codes and/or descriptors. For this reason, code numbers and/or descriptor language in the CPT code set may differ at the time of publication. In addition, further Panel actions may result in gaps in code number sequencing.

The following code was accepted at the March 2020 CPT Editorial Panel meeting for the 2021 CPT production cycle. This code is effective immediately on March 13, 2020. *Note that code 87635 will be a child code under parent code 87471. It is represented here as the full long descriptor including the language from parent code 87471.

Code	Long Code Descriptor	Released to AMA website	Effective	Publication
●87635	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), amplified probe technique	March 13, 2020	March 13, 2020	CPT® 2021

The following codes, guidelines, and parenthetical notes were accepted and/or revised at the April 2020 CPT Editorial Panel meeting for the 2021 CPT production cycle. The codes, guidelines, and parenthetical notes are effective immediately on April 10, 2020.

▲86318	Immunoassay for infectious agent antibody(ies), qualitative or semiquantitative, single-step method (eg, reagent strip)	April 10, 2020	April 10, 2020	CPT® 2021
#●86328	severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) ▶(For severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2] [Coronavirus disease {COVID-19}] antibody testing using multiple-step method, use 86769)◀	April 10, 2020	April 10, 2020	CPT® 2021

CPT® Category I and Proprietary Laboratory Analyses (PLA) Codes for Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])

	<p>►The following codes (86602-86804) are qualitative or semiquantitative immunoassays performed by multiple-step methods for the detection of antibodies to infectious agents. For immunoassays by single-step method (eg, reagent strips), use see codes 86318, 86328. Procedures for the identification of antibodies should be coded as precisely as possible. For example, an antibody to a virus could be coded with increasing specificity for virus, family, genus, species, or type. In some cases, further precision may be added to codes by specifying the class of immunoglobulin being detected. When multiple tests are done to detect antibodies to organisms classified more precisely than the specificity allowed by available codes, it is appropriate to code each as a separate service. For example, a test for antibody to an enterovirus is coded as 86658. Coxsackie viruses are enteroviruses, but there are no codes for the individual species of enterovirus. If assays are performed for antibodies to coxsackie A and B species, each assay should be separately coded. Similarly, if multiple assays are performed for antibodies of different immunoglobulin classes, each assay should be coded separately. When a coding option exists for reporting IgM specific antibodies (eg, 86632), the corresponding nonspecific code (eg, 86631) may be reported for performance of either an antibody analysis not specific for a particular immunoglobulin class or for an IgG analysis. ◀</p> <p style="padding-left: 40px;">(For the detection of antibodies other than those to infectious agents, see specific antibody [eg, 86021-86023, 86376, 86800, 86850-86870] or specific method [eg, 83516, 86255, 86256]).</p> <p style="padding-left: 40px;">(For infectious agent/antigen detection, see 87260-87899)</p>				
86602	Antibody; actinomyces				
86635	Coccidioides	<p>►(For severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2] [Coronavirus disease {COVID-19}] antibody testing, see 86328, 86769) ◀</p>	<p>Revised Guidelines Added to AMA Website April 10, 2020</p>	<p>Revised Guidelines Effective April 10, 2020</p>	<p>Revised Guidelines Publication CPT® 2021</p>
		<p>Parentetical Note Added to AMA Website April 10, 2020</p>	<p>Parentetical Note Effective April 10, 2020</p>	<p>Parentetical Note Publication CPT® 2021</p>	

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●86769	Antibody; severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) ▶(For severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2] [Coronavirus disease {COVID-19}] antibody testing using single-step method, use 86328)◀	April 10, 2020	April 10, 2020	CPT® 2021
<p>The following code was accepted by the Executive Committee of the CPT Editorial Panel. This code is effective immediately on June 25, 2020. *Note that code 87426 will be a child code under parent code 87301. It is represented here as the full long descriptor including the language from parent code 87301. *This code was revised at the October 2020 CPT Editorial Panel meeting. Please see the October 6, 2020 listing below.</p>				
●87426	Infectious agent antigen detection by immunoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative, multiple-step method; severe acute respiratory syndrome coronavirus (eg, SARS-CoV, SARS-CoV-2 [COVID-19])	June 25, 2020	June 25, 2020	CPT® 2022
<p>The following codes were accepted by the CPT Editorial Panel. These codes are effective immediately on August 10, 2020.</p>				
#●86408	Neutralizing antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]); screen	August 10, 2020	August 10, 2020	CPT® 2022
#●86409	titer	August 10, 2020	August 10, 2020	CPT® 2022
<p>The following guidelines, parenthetical note, and codes were accepted by the CPT Editorial Panel. These guidelines, parenthetical note, and codes are effective immediately on September 8, 2020. *Note that resequenced code 86413 will follow code 86409.</p>				
#●86413	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) antibody, quantitative	September 8, 2020	September 8, 2020	CPT® 2022

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99070	<p>Supplies and materials (except spectacles), provided by the physician or other qualified health care professional over and above those usually included with the office visit or other services rendered (list drugs, trays, supplies, or materials provided)</p> <p>(For supply of spectacles, use the appropriate supply codes)</p> <p>▶(For additional supplies, materials, and clinical staff time required during a Public Health Emergency, as defined by law, due to respiratory-transmitted infectious disease, use 99072)◀</p>	<p>Parenthetical Note Added to AMA Website</p> <p>September 8, 2020</p>	<p>Parenthetical Note Effective</p> <p>September 8, 2020</p>	<p>Parenthetical Note Publication</p> <p>CPT® 2022</p>
●99072	<p>▶Code 99072 is used to report the additional supplies, materials, and clinical staff time over and above the practice expense(s) included in an office visit or other non-facility service(s) when the office visit or other non-facility service(s) are rendered during a Public Health Emergency (PHE), as defined by law, due to respiratory-transmitted infectious disease. These required additional supplies, materials, and clinical staff time are intended to mitigate the transmission of the respiratory disease for which the PHE was declared. These include, but are not limited to, additional supplies, such as face masks and cleaning supplies, as well as clinical staff time for activities such as pre-visit instructions and office arrival symptom checks that support the safe provision of evaluation, treatment, or procedural service(s) during the respiratory infection-focused PHE. When reporting 99072, report only once per in-person patient encounter per day regardless of the number of services rendered at that encounter. Code 99072 may be reported during a PHE when the additional clinical staff duties as described are performed by the physician or other qualified health care professional in lieu of clinical staff.◀</p> <p>Additional supplies, materials, and clinical staff time over and above those usually included in an office visit or other non-facility service(s), when performed during a Public Health Emergency, as defined by law, due to respiratory-transmitted infectious disease</p>	<p>Guidelines and Code Added to AMA Website</p> <p>September 8, 2020</p>	<p>Guidelines and Code Effective</p> <p>September 8, 2020</p>	<p>Guidelines and Code Publication</p> <p>CPT® 2022</p>

CPT® Category I and Proprietary Laboratory Analyses (PLA) Codes for Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])

The following guidelines, parenthetical notes, and codes were accepted, revised, and deleted by the CPT Editorial Panel. These guidelines, parenthetical notes, and codes are effective immediately on October 6, 2020. *Please note the following: 1) Code 87426 was added at the June 25, 2020 CPT Editorial Panel meeting and further revised at the October 6, 2020 CPT Editorial Panel meeting; 2) codes 87449 and 87551 are now child codes under code 87301; and 3) code 87636 will follow code 87635.

86317	<p>Immunoassay for infectious agent antibody, quantitative, not otherwise specified</p> <p>►(For immunoassay techniques for <u>non-infectious agent</u> antigens, see 83516, 83518, 83519, 83520, 87301-87450, 87810-87899) ◀</p> <p>►(For infectious agent antigen detection by immunoassay technique, see 87301-87451. For infectious agent antigen detection by immunoassay technique with direct optical [ie, visual] observation, see 87802-87899) ◀</p> <p>(For particle agglutination procedures, use 86403)</p>	<p>New and Revised Parenthetical Notes Added to AMA Website</p> <p>October 6, 2020</p>	<p>New and Revised Parenthetical Notes Effective</p> <p>October 6, 2020</p>	<p>New and Revised Parenthetical Notes Publication</p> <p>CPT® 2022</p>
87250	<p>Virus isolation; inoculation of embryonated eggs, or small animal, includes observation and dissection</p> <p style="padding-left: 40px;">including identification by non-immunologic method, other than by cytopathic effect (eg, virus specific enzymatic activity)</p> <p>►These codes are intended for primary source only. For similar studies on culture material, refer to codes 87140-87158. Infectious agents by antigen detection, immunofluorescence microscopy, or nucleic acid probe techniques should be reported as precisely as possible. The molecular pathology procedures codes (81161, 81200-81408) are not to be used in combination with or instead of the procedures represented by 87471-87801. The most specific code possible should be reported. If there is no specific agent code, the general methodology code (eg, 87299, 87449, 87450, 87797, 87798, 87799, 87899) should be used. For identification of antibodies to many of the listed infectious agents, see 86602-86804. When separate results are reported for different species or strain of organisms, each result should be coded separately. Use modifier 59 when separate results are reported for different species or strains that are described by the same code. ◀</p> <p>►When identifying infectious agents on primary source specimens (eg, tissue, smear) microscopically by direct/indirect immunofluorescent assay [IFA] techniques, see 87260-87300. When identifying infectious agents on primary source specimens or derivatives via non-microscopic immunochemical techniques with fluorescence detection (ie, fluorescence immunoassay [FIA]), see 87301-87451, 87802-87899. When identifying infectious agents on primary source specimens using antigen detection by immunoassay with direct optical (ie, visual) observation, see 87802-87899. ◀</p>	<p>New and Revised Guidelines Added to AMA Website</p> <p>October 6, 2020</p>	<p>New and Revised Guidelines Effective</p> <p>October 6, 2020</p>	<p>New and Revised Guidelines Publication</p> <p>CPT® 2022</p>
87255				

CPT[®] Category I and Proprietary Laboratory Analyses (PLA) Codes for Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])

▲87301	Infectious agent antigen detection by immunoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], <u>fluorescence immunoassay [FIA]</u> , immunochemiluminometric assay [IMCA]) qualitative or semiquantitative, multiple-step method ; adenovirus enteric types 40/41	October 6, 2020	October 6, 2020	CPT [®] 2022
▲87305	Aspergillus	October 6, 2020	October 6, 2020	CPT [®] 2022
▲87320	Chlamydia trachomatis	October 6, 2020	October 6, 2020	CPT [®] 2022
▲87324	Clostridium difficile toxin(s)	October 6, 2020	October 6, 2020	CPT [®] 2022
▲87327	Cryptococcus neoformans (For Cryptococcus latex agglutination, use 86403)	October 6, 2020	October 6, 2020	CPT [®] 2022
▲87328	cryptosporidium	October 6, 2020	October 6, 2020	CPT [®] 2022
▲87329	giardia	October 6, 2020	October 6, 2020	CPT [®] 2022
▲87332	cytomegalovirus	October 6, 2020	October 6, 2020	CPT [®] 2022
▲87335	Escherichia coli 0157 (For giardia antigen, use 87329)	October 6, 2020	October 6, 2020	CPT [®] 2022
▲87336	Entamoeba histolytica dispar group	October 6, 2020	October 6, 2020	CPT [®] 2022
▲87337	Entamoeba histolytica group	October 6, 2020	October 6, 2020	CPT [®] 2022
▲87338	Helicobacter pylori, stool	October 6, 2020	October 6, 2020	CPT [®] 2022

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▲87339	Helicobacter pylori (For H. pylori, stool, use 87338. For H. pylori, breath and blood by mass spectrometry, see 83013, 83014. For H. pylori, liquid scintillation counter, see 78267, 78268)	October 6, 2020	October 6, 2020	CPT® 2022
▲87340	hepatitis B surface antigen (HBsAg)	October 6, 2020	October 6, 2020	CPT® 2022
▲87341	hepatitis B surface antigen (HBsAg) neutralization	October 6, 2020	October 6, 2020	CPT® 2022
▲87350	hepatitis Be antigen (HBeAg)	October 6, 2020	October 6, 2020	CPT® 2022
▲87380	hepatitis, delta agent	October 6, 2020	October 6, 2020	CPT® 2022
▲87385	Histoplasma capsulatum	October 6, 2020	October 6, 2020	CPT® 2022
▲87389	HIV-1 antigen(s), with HIV-1 and HIV-2 antibodies, single result	October 6, 2020	October 6, 2020	CPT® 2022
▲87390	HIV-1	October 6, 2020	October 6, 2020	CPT® 2022
▲87391	HIV-2	October 6, 2020	October 6, 2020	CPT® 2022
▲87400	Influenza, A or B, each	October 6, 2020	October 6, 2020	CPT® 2022
▲87420	respiratory syncytial virus	October 6, 2020	October 6, 2020	CPT® 2022
▲87425	rotavirus	October 6, 2020	October 6, 2020	CPT® 2022

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		Revised Code Added to AMA Website	Revised Code Effective	Revised Code Publication
●▲87426	severe acute respiratory syndrome coronavirus (eg, SARS-CoV, SARS-CoV-2 [COVID-19])	October 6, 2020	October 6, 2020	CPT® 2022
▲87427	Shiga-like toxin	October 6, 2020	October 6, 2020	CPT® 2022
▲87430	Streptococcus, group A	October 6, 2020	October 6, 2020	CPT® 2022
▲87449	Infectious agent antigen detection by immunoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], immunochromiluminometric assay [IMCA]), qualitative or semiquantitative; multiple step method, not otherwise specified, each organism	October 6, 2020	October 6, 2020	CPT® 2022
87450	single step method, not otherwise specified, each organism ▶(87450 has been deleted. For infectious agent antigen detection by immunoassay technique, see 87301-87451. For infectious agent antigen detection by immunoassay technique with direct optical [ie, visual] observation, see 87802-87899)◀	October 6, 2020	October 6, 2020	CPT® 2022
▲87451	multiple step method, polyvalent for multiple organisms, each polyvalent antiserum	October 6, 2020	October 6, 2020	CPT® 2022
87471	Infectious agent detection by nucleic acid (DNA or RNA); Bartonella henselae and Bartonella quintana, amplified probe technique			
●87636	severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) and influenza virus types A and B, multiplex amplified probe technique	October 6, 2020	October 6, 2020	CPT® 2022

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●87637	<p>severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), influenza virus types A and B, and respiratory syncytial virus, multiplex amplified probe technique</p> <p>▶(For nucleic acid detection of multiple respiratory infectious agents, not including severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2] [Coronavirus disease (COVID-19)], see 87631, 87632, 87633)◀</p> <p>▶(For nucleic acid detection of multiple respiratory infectious agents, including severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2] [Coronavirus disease (COVID-19)] in conjunction with additional target[s] beyond influenza virus types A and B and respiratory syncytial virus, see 87631, 87632, 87633)◀</p>	October 6, 2020	October 6, 2020	CPT® 2022
▲87802	Infectious agent antigen detection by immunoassay with direct optical (<u>ie, visual</u>) observation; Streptococcus, group B	October 6, 2020	October 6, 2020	CPT® 2022
▲87803	Clostridium difficile toxin A	October 6, 2020	October 6, 2020	CPT® 2022
#▲87806	HIV-1 antigen(s), with HIV-1 and HIV-2 antibodies	October 6, 2020	October 6, 2020	CPT® 2022
▲87804	Influenza	October 6, 2020	October 6, 2020	CPT® 2022
▲87807	respiratory syncytial virus	October 6, 2020	October 6, 2020	CPT® 2022
#●87811	severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])	October 6, 2020	October 6, 2020	CPT® 2022
▲87808	Trichomonas vaginalis	October 6, 2020	October 6, 2020	CPT® 2022
▲87809	adenovirus	October 6, 2020	October 6, 2020	CPT® 2022

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▲87810	Chlamydia trachomatis	October 6, 2020	October 6, 2020	CPT® 2022
▲87850	Neisseria gonorrhoeae	October 6, 2020	October 6, 2020	CPT® 2022
▲87880	Streptococcus, group A	October 6, 2020	October 6, 2020	CPT® 2022
▲87899	not otherwise specified	October 6, 2020	October 6, 2020	CPT® 2022
<p>The following codes were accepted by the CPT Editorial Panel. *Note that code 87428 will be a child code under parent code 87301. It is represented here as the full long descriptor including the language from parent code 87301. Additionally, this code will be resequenced to follow code 87426. Code 87428 is effective immediately on November 10, 2020. Codes 0001A, 0002A, 0011A, 0012A will follow code 90474 and resequenced codes 91300, 91301 will precede code 90476. These codes will be effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration.</p>				
#●87428	<p>Infectious agent antigen detection by immunoassay technique, (eg, enzyme immunoassay [EIA], enzyme-linked immunosorbent assay [ELISA], fluorescence immunoassay [FIA], immunochemiluminometric assay [IMCA]) qualitative or semiquantitative; severe acute respiratory syndrome coronavirus (eg, SARS-CoV, SARS-CoV-2 [COVID-19]) and influenza virus types A and B</p>	November 10, 2020	November 10, 2020	CPT® 2022
	<p>Medicine Immunization Administration for Vaccines/Toxoids</p> <p>► Report vaccine immunization administration codes (90460, 90461, 90471-90474, 0001A, 0002A, 0011A, 0012A) in addition to the vaccine and toxoid code(s) (90476-90749, 91300, 91301). ◀</p> <p>► Report codes 90460 and 90461 only when the physician or qualified health care professional provides face-to-face counseling of the patient/family during the administration of a vaccine <u>other than when performed for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccines</u>. For immunization administration of any vaccine, <u>other than SARS-CoV-2 (Coronavirus disease [COVID-19]) vaccines</u>, that is not accompanied by face-to-face physician or qualified health care professional counseling to the patient/family/<u>guardian</u> or for administration of vaccines to patients over 18 years of age, report 90471-90474.</p>	<p>New and Revised Guidelines Released to AMA Website</p> <p>November 10, 2020</p>	<p>New and Revised Guidelines</p> <p>Effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration</p>	<p>New and Revised Guidelines Publication</p> <p>CPT® 2022</p>

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	<p>(See also Instructions for Use of the CPT Codebook for definition of reporting qualifications.) ◀</p> <p>▶ Report 0001A, 0002A, 0011A, 0012A for immunization administration of SARS-CoV-2 (Coronavirus disease [COVID-19]) vaccines only. Each administration code is specific to each individual vaccine product (eg, 91300, 91301), the dosage schedule (eg, first dose, second dose), and counseling, when performed. The appropriate administration code is chosen based on the type of vaccine and the specific dose number the patient receives in the schedule. For example, 0012A is reported for the second dose of vaccine 91301. Do not report 90460-90474 for the administration of SARS-CoV-2 (Coronavirus disease [COVID-19]) vaccines. Codes related to SARS-CoV-2 (Coronavirus disease [COVID-19]) vaccine administration are listed in Appendix Q, with their associated vaccine code descriptors, vaccine administration codes, vaccine manufacturer, vaccine name(s), National Drug Code (NDC) Labeler Product ID, and interval between doses. In order to report these codes, the vaccine must fulfill the code descriptor and must be the vaccine represented by the manufacturer and vaccine name listed in Appendix Q. ◀</p> <p>If a significant separately identifiable Evaluation and Management service (eg, new or established patient office or other outpatient services [99202-99215], office or other outpatient consultations [99241-99245], emergency department services [99281-99285], preventive medicine services [99381-99429]) is performed, the appropriate E/M service code should be reported in addition to the vaccine and toxoid administration codes.</p> <p>A component refers to all antigens in a vaccine that prevent disease(s) caused by one organism (90460 and 90461). Multi-valent antigens or multiple serotypes of antigens against a single organism are considered a single component of vaccines. Combination vaccines are those vaccines that contain multiple vaccine components. Conjugates or adjuvants contained in vaccines are not considered to be component parts of the vaccine as defined above.</p> <p style="padding-left: 40px;">(For allergy testing, see 95004 et seq)</p> <p style="padding-left: 40px;">(For skin testing of bacterial, viral, fungal extracts, see 86485-86580)</p> <p style="padding-left: 40px;">(For therapeutic or diagnostic injections, see 96372-96379)</p>	<p style="text-align: center;">New and Revised Guidelines Released to AMA Website</p> <p style="text-align: center;">November 10, 2020</p>	<p style="text-align: center;">New and Revised Guidelines</p> <p style="text-align: center;">Effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration</p>	<p style="text-align: center;">New and Revised Guidelines Publication</p> <p style="text-align: center;">CPT® 2022</p>
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90460	Immunization administration through 18 years of age via any route of administration, with counseling by physician or other qualified health care professional; first or only component of each vaccine or toxoid administered			
+90461	<p>each additional vaccine or toxoid component administered (List separately in addition to code for primary procedure)</p> <p>(Use 90460 for each vaccine administered. For vaccines with multiple components [combination vaccines], report 90460 in conjunction with 90461 for each additional component in a given vaccine)</p> <p>► (Do not report 90460, 90461 in conjunction with 91300, 91301, unless both a severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2] [Coronavirus disease {COVID-19}] vaccine/toxoid product and at least one vaccine/toxoid product from 90476-90749 are administered at the same encounter) ◀</p>	<p>New Parenthetical Note Released to AMA Website</p> <p>November 10, 2020</p>	<p>New Parenthetical Note</p> <p>Effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration</p>	<p>New Parenthetical Note Publication</p> <p>CPT® 2022</p>
90471	Immunization administration (includes percutaneous, intradermal, subcutaneous, or intramuscular injections); 1 vaccine (single or combination vaccine/toxoid) (Do not report 90471 in conjunction with 90473)			
+90472	<p>each additional vaccine (single or combination vaccine/toxoid) (List separately in addition to code for primary procedure)</p> <p>(Use 90472 in conjunction with 90460, 90471, 90473)</p> <p>► (Do not report 90471, 90472 in conjunction with 91300, 91301, unless both a severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2] [Coronavirus disease {COVID-19}] vaccine/toxoid product and at least one vaccine/toxoid product from 90476-90749 are administered at the same encounter) ◀</p> <p>For immune globulins, see 90281-90399. For administration of immune globulins, see 96365, 96366, 96367, 96368, 96369, 96370, 96371, 96374)</p> <p>(For intravesical administration of BCG vaccine, see 51720, 90586)</p>	<p>New Parenthetical Note Released to AMA Website</p> <p>November 10, 2020</p>	<p>New Parenthetical Note</p> <p>Effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration</p>	<p>New Parenthetical Note Publication</p> <p>CPT® 2022</p>
90473	Immunization administration by intranasal or oral route; 1 vaccine (single or combination vaccine/toxoid) (Do not report 90473 in conjunction with 90471)			

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+90474	<p>each additional vaccine (single or combination vaccine/toxoid) (List separately in addition to code for primary procedure)</p> <p>(Use 90474 in conjunction with 90460, 90471, 90473)</p> <p>▶(Do not report 90473, 90474 in conjunction with 91300, 91301, unless both a severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2] [Coronavirus disease {COVID-19}] vaccine/toxoid product and at least one vaccine/toxoid product from 90476-90749 are administered at the same encounter) ◀</p>	<p>New Parenthetical Note Released to AMA Website</p> <p>November 10, 2020</p>	<p>New Parenthetical Note</p> <p>Effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration</p>	<p>New Parenthetical Note Publication</p> <p>CPT® 2022</p>
●0001A	<p>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/0.3mL dosage, diluent reconstituted; first dose</p>	<p>November 10, 2020</p>	<p>Effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration</p>	<p>CPT® 2022</p>
●0002A	<p style="text-align: center;">second dose</p> <p>▶(Report 0001A, 0002A for the administration of vaccine 91300) ◀</p>	<p>November 10, 2020</p>	<p>Effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration</p>	<p>CPT® 2022</p>
●0011A	<p>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, 100 mcg/0.5mL dosage; first dose</p>	<p>November 10, 2020</p>	<p>Effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration</p>	<p>CPT® 2022</p>
●0012A	<p style="text-align: center;">second dose</p> <p>▶(Report 0011A, 0012A for the administration of vaccine 91301) ◀</p>	<p>November 10, 2020</p>	<p>Effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration</p>	<p>CPT® 2022</p>



CPT® Category I and Proprietary Laboratory Analyses (PLA) Codes for Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])

	<p>Vaccines, Toxoids</p> <p>To assist users to report the most recent new or revised vaccine product codes, the American Medical Association (AMA) currently uses the CPT website, which features updates of CPT Editorial Panel actions regarding these products. Once approved by the CPT Editorial Panel, these codes will be made available for release on a semiannual (twice a year: July 1 and January 1) basis. As part of the electronic distribution, there is a six-month implementation period from the initial release date (ie, codes released on January 1 are eligible for use on July 1 and codes released on July 1 are eligible for use January 1).</p> <p>The CPT Editorial Panel, in recognition of the public health interest in vaccine products, has chosen to publish new vaccine product codes prior to approval by the US Food and Drug Administration (FDA). These codes are indicated with the \surd symbol and will be tracked by the AMA to monitor FDA approval status. Once the FDA status changes to approval, the \surd symbol will be removed. CPT users should refer to the AMA CPT website (www.ama-assn.org/go/cpt-vaccine) for the most up-to-date information on codes with the \surd symbol.</p> <p>► Codes 90476-90749, 91300, 91301 identify the vaccine product only. To report the administration of a vaccine/toxoid other than SARS-CoV-2 (Coronavirus disease [COVID-19]), the vaccine/toxoid product codes (90476-90749) must be used in addition to an immunization administration code(s) (90460, 90461, 90471, 90472, 90473, 90474). To report the administration of a SARS-CoV-2 (Coronavirus disease [COVID-19]) vaccine, the vaccine/toxoid product codes (91300, 91301) should be reported with the corresponding immunization administration code (0001A, 0002A, 0011A, 0012A). All SARS-CoV-2 (Coronavirus disease [COVID-19]) vaccine codes in this section are listed in Appendix Q with their associated vaccine code descriptors, vaccine administration codes, vaccine manufacturer, vaccine name(s), NDC Labeler Product ID, and interval between doses. In order to report these codes, the vaccine must fulfill the code descriptor and must be the vaccine represented by the manufacturer and vaccine name listed in Appendix Q. ◀</p>	<p style="text-align: center;">New and Revised Guidelines Released to AMA Website</p> <p style="text-align: center;">November 10, 2020</p>	<p style="text-align: center;">New and Revised Guidelines</p> <p style="text-align: center;">Effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration</p>	<p style="text-align: center;">New and Revised Guidelines Publication</p> <p style="text-align: center;">CPT® 2022</p>
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CPT® Category I and Proprietary Laboratory Analyses (PLA) Codes for Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])

	<p>▶ Do not report 90476-90749 in conjunction with the SARS-CoV-2 (Coronavirus disease [COVID-19]) immunization administration codes 0001A, 0002A, 0011A, 0012A, unless both a SARS-CoV-2 (Coronavirus disease [COVID-19]) vaccine/toxoid product and at least one vaccine/toxoid product from 90476-90749 are administered at the same encounter. ◀</p> <p>▶ Modifier 51 should not be reported with vaccine/toxoid codes 90476-90749, <u>91300, 91301</u>, when reported in conjunction with administration codes 90460, 90461, 90471, 90472, 90473, 90474, <u>0001A, 0002A, 0011A, 0012A</u>. ◀</p> <p>If a significantly separately identifiable Evaluation and Management (E/M) service (eg, office or other outpatient services, preventive medicine services) is performed, the appropriate E/M service code should be reported in addition to the vaccine and toxoid administration codes.</p> <p>To meet the reporting requirements of immunization registries, vaccine distribution programs, and reporting systems (eg, Vaccine Adverse Event Reporting System) the exact vaccine product administered needs to be reported. Multiple codes for a particular vaccine are provided in the CPT codebook when the schedule (number of doses or timing) differs for two or more products of the same vaccine type (eg, hepatitis A, Hib) or the vaccine product is available in more than one chemical formulation, dosage, or route of administration.</p> <p>The “when administered to” age descriptions included in CPT vaccine codes are not intended to identify a product’s licensed age indication. The term “preservative free” includes use for vaccines that contain no preservative and vaccines that contain trace amounts of preservative agents that are not present in a sufficient concentration for the purpose of preserving the final vaccine formulation. The absence of a designation regarding a preservative does not necessarily indicate the presence or absence of preservative in the vaccine. Refer to the product’s prescribing information (PI) for the licensed age indication before administering vaccine to a patient.</p>	<p style="text-align: center;">New and Revised Guidelines Released to AMA Website</p> <p style="text-align: center;">November 10, 2020</p>	<p style="text-align: center;">New and Revised Guidelines</p> <p style="text-align: center;">Effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration</p>	<p style="text-align: center;">New and Revised Guidelines Publication</p> <p style="text-align: center;">CPT® 2022</p>
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CPT® Category I and Proprietary Laboratory Analyses (PLA) Codes for Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])

	<p>Separate codes are available for combination vaccines (eg, Hib-HepB, DTap-IPV/Hib). It is inappropriate to code each component of a combination vaccine separately. If a specific vaccine code is not available, the unlisted procedure code should be reported, until a new code becomes available.</p> <p>▶The vaccine/toxoid abbreviations listed in codes 90476-90748, 91300, 91301 reflect the most recent US vaccine abbreviations references used in the Advisory Committee on Immunization Practices (ACIP) recommendations at the time of CPT code set publication. Interim updates to vaccine code descriptors will be made following abbreviation approval by the ACIP on a timely basis via the AMA CPT website (www.ama-assn.org/go/cpt-vaccine). The accuracy of the ACIP vaccine abbreviation designations in the CPT code set does not affect the validity of the vaccine code and its reporting function. ◀</p> <p>(For immune globulins, see 90281-90399. For administration of immune globulins, see 96365-96375)</p>	<p>New and Revised Guidelines Released to AMA Website</p> <p>November 10, 2020</p>	<p>New and Revised Guidelines</p> <p>Effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration</p>	<p>New and Revised Guidelines Publication</p> <p>CPT® 2022</p>
#/●91300	<p>Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3mL dosage, diluent reconstituted, for intramuscular use</p> <p>▶(Report 91300 with administration codes 0001A, 0002A)◀</p>	<p>November 10, 2020</p>	<p>Effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration</p>	<p>CPT® 2022</p>
#/●91301	<p>Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage, for intramuscular use</p> <p>▶(Report 91301 with administration codes 0011A, 0012A)◀</p>	<p>November 10, 2020</p>	<p>Effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration</p>	<p>CPT® 2022</p>
90476	<p>Adenovirus vaccine, type 4, live, for oral use</p>			

CPT® Category I and Proprietary Laboratory Analyses (PLA) Codes for Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])

96372	<p>Hydration, Therapeutic, Prophylactic, Diagnostic Injections and Infusions, and Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration Therapeutic, Prophylactic, and Diagnostic Injections and Infusions (Excludes Chemotherapy and Other Highly Complex Drug or Highly Complex Biologic Agent Administration)</p> <p>Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or intramuscular</p> <p>►(For administration of vaccines/toxoids, see 90460, 90461, 90471, 90472, <u>0001A, 0002A, 0011A, 0012A</u>) ◀</p>	<p>Revised Parenthetical Note Released to AMA Website</p> <p>November 10, 2020</p>	<p>Revised Parenthetical Note</p> <p>Effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration</p>	<p>Revised Parenthetical Note Publication</p> <p>CPT® 2022</p>
	<p>► Appendix Q Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) Vaccines ◀</p> <p>► This table links the individual severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine product codes (91300, 91301) to their associated immunization administration codes (0001A, 0002A, 0011A, 0012A), manufacturer name, vaccine name(s), 10 and 11-digit National Drug Code (NDC) Labeler Product ID, and interval between doses. These codes are also located in the Medicine section of the CPT code set. ◀</p> <p>► Additional introductory and instructional information for codes 0001A, 0002A, 0011A, 0012A, and 91300, 91301 can be found in the Immunization Administration for Vaccines/Toxoids and Vaccines, Toxoids guidelines in the Medicine section of the CPT code set. ◀</p>	<p>Appendix Q Released to AMA Website</p> <p>November 10, 2020</p>	<p>Appendix Q Effective</p> <p>Effective upon receiving Emergency Use Authorization or approval from the Food and Drug Administration</p>	<p>Appendix Q Publication</p> <p>CPT® 2022</p>

CPT[®] Category I and Proprietary Laboratory Analyses (PLA) Codes for Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])

Appendix Q Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) Vaccines					
Vaccine Code	Vaccine Administration Code(s)	Vaccine Manufacturer	Vaccine Name(s)	NDC 10/NDC 11 Labeler Product ID (vial)	Dosing Interval
# ✓ ●91300 Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 30 mcg/0.3mL dosage, diluent reconstituted, for intramuscular use	●0001A (1 st Dose) ●0002A (2 nd Dose)	Pfizer, Inc	Pfizer-BioNTech COVID-19 Vaccine	59267-1000-1 59267-1000-01	21 Days
# ✓ ●91301 Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage, for intramuscular use	●0011A (1 st Dose) ●0012A (2 nd Dose)	Moderna, Inc	Moderna COVID-19 Vaccine	80777-273-10 80777-0273-10	28 Days
The following code was accepted by the Executive Committee of the CPT Editorial Panel for the 2021 CPT production cycle. This code is effective immediately on May 20, 2020. *The duplicate PLA symbol and parenthetical note following the code descriptor for code 0202U will be published for the first time in CPT 2022.					
Proprietary Name and Clinical Laboratory or Manufacturer	Code	Long Code Descriptor	Released to AMA Website	Effective Date	Publication
BioFire [®] Respiratory Panel 2.1 (RP2.1), BioFire [®] Diagnostics, BioFire [®] Diagnostics, LLC	✕●0202U	Infectious disease (bacterial or viral respiratory tract infection), pathogen-specific nucleic acid (DNA or RNA), 22 targets including severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), qualitative RT-PCR, nasopharyngeal swab, each pathogen reported as detected or not detected ▶(For additional PLA code with identical clinical descriptor, see 0223U. See Appendix O or the most current listing on the AMA CPT website to determine appropriate code assignment)◀	May 20, 2020	May 20, 2020	CPT [®] 2021 <div style="background-color: #cccccc; padding: 5px; text-align: center;">Duplicate PLA Symbol and Parenthetical Note Added to Publication CPT[®] 2022</div>
The following codes were accepted by the Executive Committee of the CPT Editorial Panel. These codes are effective immediately on June 25, 2020.					
QIAstat-Dx Respiratory SARS CoV-2 Panel, QIAGEN Sciences, QIAGEN GmbH	✕●0223U	Infectious disease (bacterial or viral respiratory tract infection), pathogen-specific nucleic acid (DNA or RNA), 22 targets including severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), qualitative RT-PCR, nasopharyngeal swab, each pathogen reported as detected or not detected	June 25, 2020	June 25, 2020	CPT [®] 2022

CPT® Category I and Proprietary Laboratory Analyses (PLA) Codes for Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19])

		►(For additional PLA code with identical clinical descriptor, see 0202U. See Appendix O or the most current listing on the AMA CPT website to determine appropriate code assignment) ◀			
COVID-19 Antibody Test, Mt Sinai, Mount Sinai Laboratory	●0224U	Antibody, severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), includes titer(s), when performed ►(Do not report 0224U in conjunction with 86769) ◀	June 25, 2020	June 25, 2020	CPT® 2022
The following codes were accepted by the CPT Editorial Panel. These codes are effective immediately on August 10, 2020.					
ePlex® Respiratory Pathogen Panel 2, GenMark Dx, GenMark Diagnostics, Inc	●0225U	Infectious disease (bacterial or viral respiratory tract infection) pathogen-specific DNA and RNA, 21 targets, including severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2), amplified probe technique, including multiplex reverse transcription for RNA targets, each analyte reported as detected or not detected	August 10, 2020	August 10, 2020	CPT® 2022
Tru-Immune™, Ethos Laboratories, GenScript® USA Inc	●0226U	Surrogate viral neutralization test (sVNT), severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]), ELISA, plasma, serum	August 10, 2020	August 10, 2020	CPT® 2022
The following codes were accepted by the CPT Editorial Panel. These codes are effective immediately on October 6, 2020.					
Xpert® Xpress SARS-CoV-2/Flu/RSV (SARS-CoV-2 & Flu targets only), Cepheid	●0240U	Infectious disease (viral respiratory tract infection), pathogen-specific RNA, 3 targets (severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2], influenza A, influenza B), upper respiratory specimen, each pathogen reported as detected or not detected	October 6, 2020	October 6, 2020	CPT® 2022
Xpert® Xpress SARS-CoV-2/Flu/RSV (all targets), Cepheid	●0241U	Infectious disease (viral respiratory tract infection), pathogen-specific RNA, 4 targets (severe acute respiratory syndrome coronavirus 2 [SARS-CoV-2], influenza A, influenza B, respiratory syncytial virus [RSV]), upper respiratory specimen, each pathogen reported as detected or not detected	October 6, 2020	October 6, 2020	CPT® 2022