New COVID-19 Vaccine Codes: May Update

Current Procedural Terminology (CPT®) codes for a new vaccine product from Novavax and its administration have been 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 has approved the latest vaccine product code, which will become effective upon receiving the Emergency Use Authorization (EUA) or approval from the Food and Drug Administration (FDA).

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 CPT Editorial Panel actions.

The most recent COVID-19 update was in the CPT® Assistant Special Edition: January Update (2021) in which vaccine product code 91303 (Janssen, single-dose vaccine) was established with its corresponding administration code (0031A). This article introduces the Novavax two-dose vaccine code (91304) and its associated administration codes (0041A, 0042A).

It also provides guidance on the appropriate use of these new codes.

### Immunization Administration for Vaccines/Toxoids

#### 90460
Immunoization 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
Each additional vaccine or toxoid component administered (List separately in addition to code for primary procedure)

*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*

*continued on next page*
(Do not report 90460, 90461 in conjunction with 91300, 91301, 91302, 91303, 91304, 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, 90756 are administered at the same encounter)  

**0041A** Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, recombinant spike protein nanoparticle, saponin-based adjuvant, preservative free, 5 mcg/0.5mL dosage; first dose

**0042A** second dose

(Report 0041A, 0042A for the administration of vaccine 91304)

**Vaccines, Toxoids**

**#** **01304** Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, recombinant spike protein nanoparticle, saponin-based adjuvant, preservative free, 5 mcg/0.5mL dosage, for intramuscular use

(Report 91304 with administration codes 0041A, 0042A)

Previously established COVID-19 vaccine code 91303 describes the use of a single-dose vaccine that uses recombinant, replication-incompetent human adenovirus type 26 (Ad26) as the vector. This vaccine has a single-dose regimen that requires a single administration code (0031A).

However, the new Novavax vaccine product (91304) is different in that it is a two-dose vaccine that requires two administration codes (0041A, 0042A). The purified protein used in this vaccine is “encoded by the genetic sequence of the SARS-CoV-2 spike (S) protein and is produced in insect cells.” The vaccine, which is described in code 91304 has a dosage regimen of 5 mcg/0.5mL, for intramuscular use.

To accommodate the new coding structure, a new Appendix Q has been 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 Novavax vaccine product code (91304) and its respective administration codes (0041A, 0042A) have also been added to Appendix Q.


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

**Clinical Example (91304)**

A 33-year-old individual seeks immunization against SARS-CoV-2 to decrease the risk of contracting this disease, consistent with evidence-supported guidelines. The individual is offered and accepts an intramuscular injection of SARS-CoV-2 vaccine for this purpose.

**Description of Procedure (91304)**

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

**Clinical Example (0041A)**

A 33-year-old individual seeks immunization against SARS-CoV-2 to decrease the risk of contracting this disease, consistent with evidence-supported guidelines. The individual is offered and accepts an intramuscular injection of SARS-CoV-2 vaccine for this purpose.

**Description of Procedure (0041A)**

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 patient 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 (0042A)**

A 33-year-old individual seeks immunization against SARS-CoV-2 to decrease the risk of contracting this disease, consistent with evidence-supported guidelines. The individual is offered and accepts an intramuscular injection of SARS-CoV-2 vaccine for this purpose.

**Description of Procedure (0042A)**

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 patient on the benefits and risks of vaccination to decrease the risk of COVID-19 and obtain consent. Administer the second 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.

**Reference**
