New COVID-19 Vaccine Codes: March Update

In September 2021, Current Procedural Terminology (CPT®) vaccine product and administration codes for Moderna’s vaccine product booster dose were established to address severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease 2019 [COVID-19]) in patients aged 18 years and older. The CPT Editorial Panel (the Panel) has approved a new vaccine product code (91309) and its associated vaccine administration code (0094A) for the Moderna booster dose–specific COVID-19 vaccine product for adult patients aged 18 years and older, which will become effective upon receiving the emergency use authorization (EUA) 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 Panel’s actions. The last COVID-19 update was in the CPT® Assistant Special Edition: February Update (2022) in which the Pfizer tris-sucrose formulation vaccine product (91308) and vaccine administration codes (0081A, 0082A) for pediatric patients ages 6 months through 4 years was discussed.

This issue of CPT® Assistant Special Edition introduces and provides guidance on the appropriate use of the new Moderna booster dose–specific COVID-19 vaccine product code (91309) and its associated vaccine administration code (0094A).

Immunization Administration for Vaccines/Toxoids

#0094A 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, 50 mcg/0.5 mL dosage, booster dose

▶(Report 0094A for the administration of vaccine 91309)▶

▶(Do not report 0094A in conjunction with 91301, 91306)▶
**Vaccines, Toxoids**

**#~\$91309** Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 50 mcg/0.5 mL dosage, for intramuscular use

- (Report 91309 with administration code 0094A)
- (Do not report 91309 in conjunction with administration codes 0011A, 0012A, 0013A, 0064A)

Code 91309 describes Moderna’s booster dose–specific COVID-19 vaccine product for adult patients aged 18 years and older. In contrast to the existing booster dose formulation for adults aged 18 years and older that uses a 50 mcg/0.25 mL dosage concentration, the new product code utilizes a 50 mcg/0.5 mL dosage concentration and is delivered in new booster dose–only packaging. The intent behind creating the new booster dose–only packaging is to add a level of safety to ensure that the correct booster dose is administered. Currently, the booster dose for this product is pulled from primary dose vials, which contain a 100 mcg/0.5mL dose (91301). Note that there will be some overlap in that the booster dose will continue to be pulled from the primary dose vaccine vials (91301) until the booster dose–only product (91309) is available.

The vaccine schedule currently specifies that the booster dose (0094A) is to be administered 5 months after the patient completes the primary vaccine series. As with previous COVID-19 vaccine administration codes, counseling is included as part of the administration visit and should not be reported separately. The physician or other qualified health care professional (QHP) should exercise clinical judgment to determine whether the administration of the vaccine product is appropriate for a given patient. More information on current guidance from the Centers for Disease Control and Prevention regarding which patients should receive a COVID-19 vaccine booster dose is available at https://www.cdc.gov/coronavirus/2019-ncov/vaccines/different-vaccines.html.

Note that vaccine administration code 0094A is not intended to be reported in conjunction with the initial Moderna vaccine product code (91301) or the previously established Moderna booster vaccine product code (91306). Parenthetical notes have been added following the administration and product codes to clarify the appropriate use of these new 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 Moderna booster dose–specific vaccine product (91309) and vaccine administration code (0094A) 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 (91309)

A 33-year-old individual who was previously immunized with a primary series seeks booster 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 (91309)

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

### Clinical Example (0094A)

A 33-year-old individual who was previously immunized with a primary series seeks booster 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 (0094A)

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 booster 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.