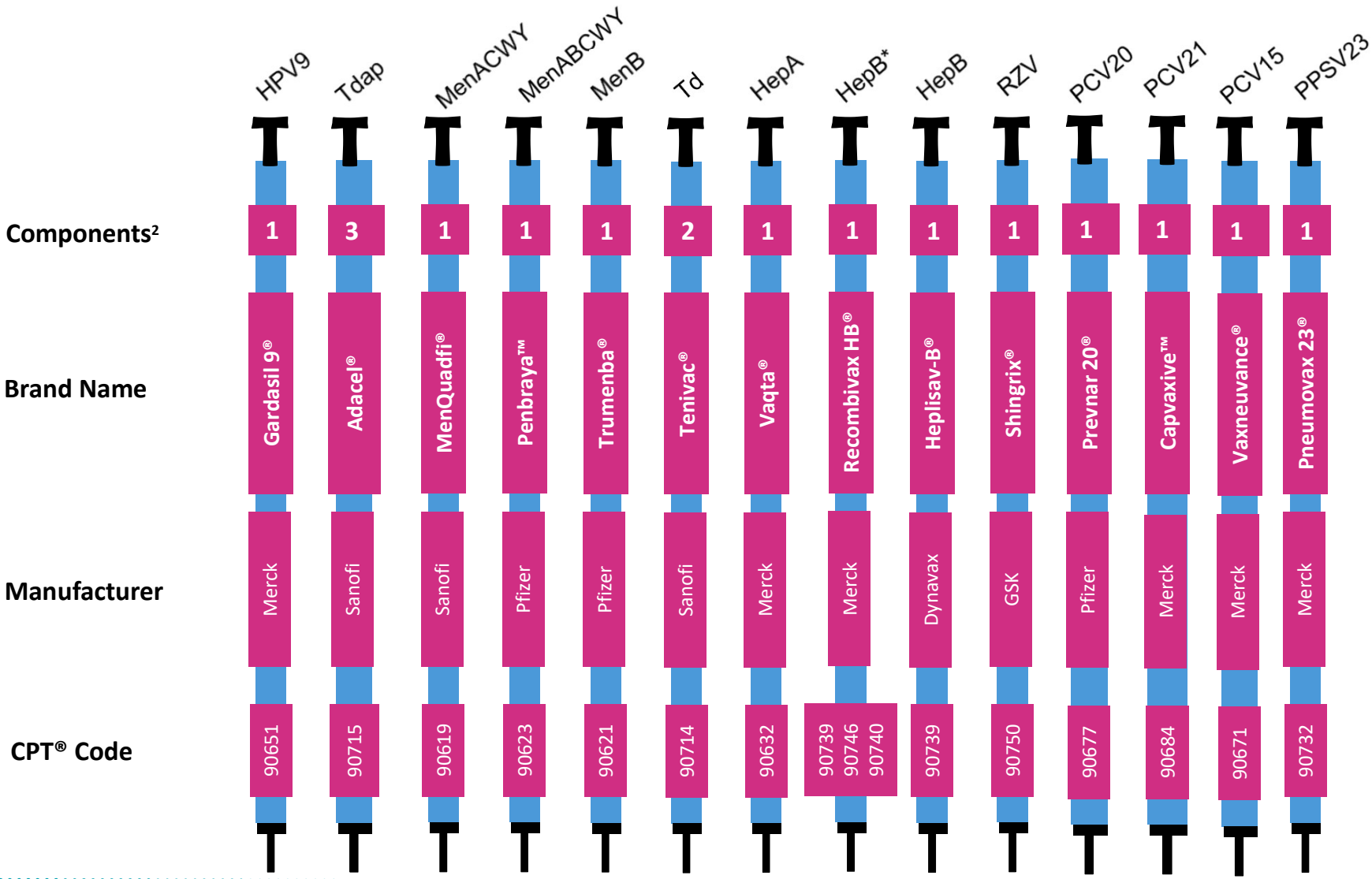
2025 Adolescent and Adult Routine Immunization Coding Cheat Sheet



LEGACY MEDICAL BILLING & CODING

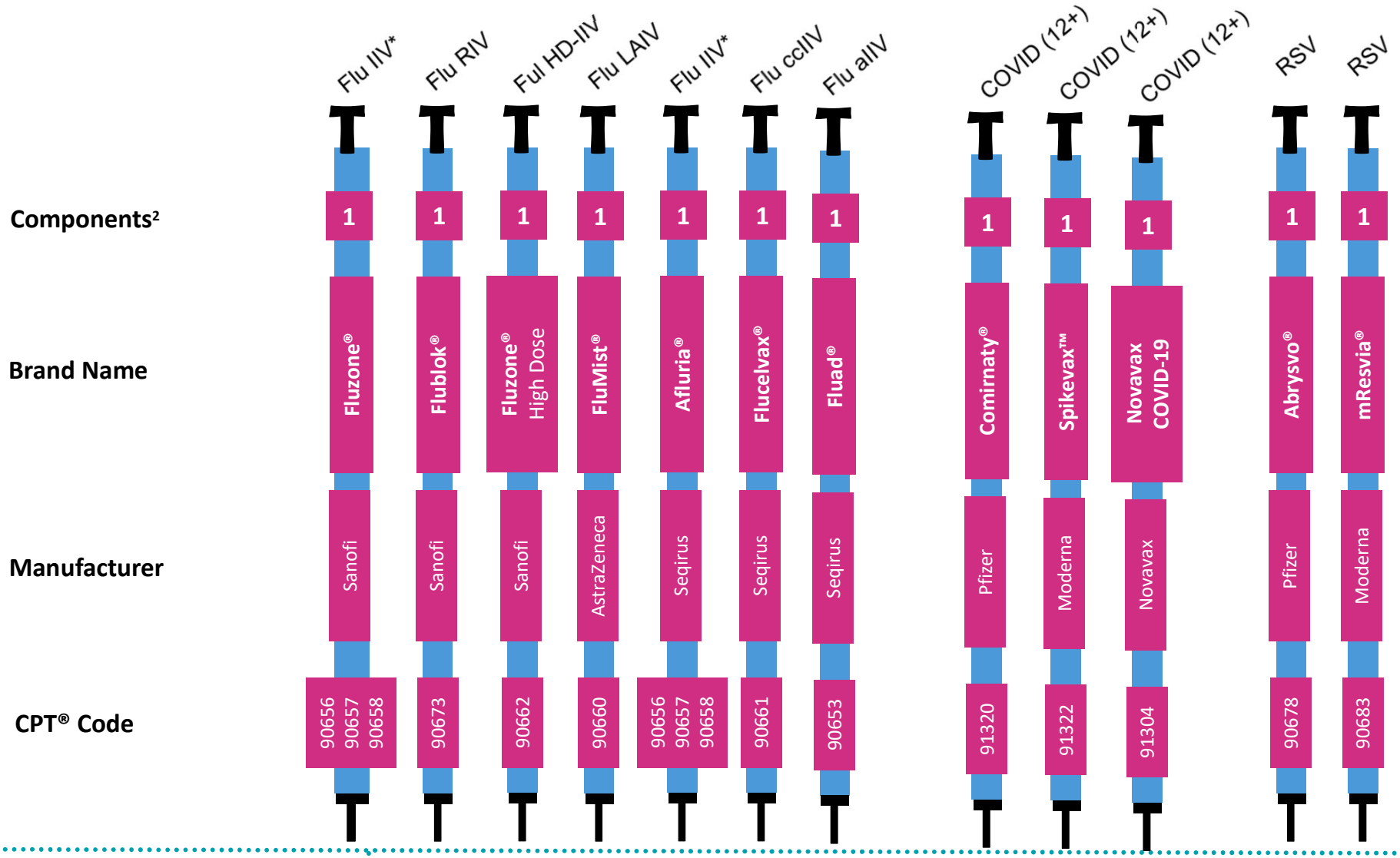
* Recombivax HB® CPT code is dependent upon adolescent, adult or dialysis patient criteria.

Immunization Administration Codes:

- Under 19 years, with counseling: 90460 – first vaccine/toxoid component; 90461 – each additional vaccine/toxoid component
- Over 19 years or pediatric without counseling: 90471 – immunization administration, one injection; 90472 – immunization administration, each additional injection; 90473 – intranasal/oral, first administration; 90474 – intranasal/oral, each additional vaccine
- Medicare Part B: Influenza – G0008, Pneumococcal – G0009, HepB – G0010
  Please note that medical practices cannot administer and bill Medicare for vaccines only covered under Part D pharmacy benefit.

ICD.10 Code: Z23 – Encounter for Immunization

2025 Adolescent and Adult Seasonal Immunization Coding Cheat Sheet



LEGACY MEDICAL BILLING & CODING

* Flu IIV CPT code determined by dosage and presentation.

Immunization Administration Codes:

- Under 19 years, with counseling: 90460
- Over 19 years or pediatric without counseling: 90471
- Medicare: G0008

COVID Immunization Administration Code:

- 90480 – IM injection of SARS-CoV-2 vaccine, single dose

ICD.10 Code: Z23 – Encounter for Immunization

LEGACY MEDICAL BILLING & CODING

Vaccine Products Separately report the administration with appropriate CPT code(s)				
CPT Code	**Descriptor**	**Manufacturer**	**Brand**	**# of Components**
90589	**Chikungunya virus** vaccine, live attenuated, for IM use	Valneva	**VLA1553**	1
90700	**Diphtheria tetanus toxoids, and acellular pertussis** vaccine (**DTaP**), when administered to <7 years, for IM use	SP GSK	**DAPTACEL** **Infanrix**	3
90702	**Diphtheria and tetanus toxoids** (**DT**), adsorbed when administered to younger than seven years, for IM use	SP	**Diphtheria and TETANUS TOXOIDS Adsorbed**	2
90696	**Diphtheria, tetanus toxoids, and acellular pertussis** vaccine **and inactivated poliovirus** vaccine (**DTaP-IPV**), when administered to children 4-6 years of age, for IM use	GSK SP	**KINRIX** **Quadracel**	4
90697	**Diphtheria, tetanus toxoids, acellular pertussis vaccine, inactivated poliovirus, haemophilus Influenza type b PRP-OMP conjugate, and hepatitis B** vaccine (**DTaP-IPV-Hib-HepB**), for IM use	Merck SP	**VAXELIS**	6
90723	**Diphtheria, tetanus toxoids, acellular pertussis, Hepatitis B, and inactivated poliovirus** vaccine (**DTaP-HepB-IPV**), for IM use	GSK	**Pediarix**	5
90698	**Diphtheria, tetanus toxoids, acellular pertussis, haemophilus Influenza Type B, and inactivated poliovirus** vaccine (**DTaP-IPV/Hib**), for IM use	SP	**Pentacel**	5
90633	**Hepatitis A** vaccine (**HepA**), pediatric/adolescent dosage, 2 dose, for IM use	GSK Merck	**Haxrix** **VAQTA**	1
90740	**Hepatitis B** vaccine (**HepB**), dialysis or immunosuppressed patient dosage, 3 dose, for IM use	Merck	**Recombivax HB**	1
90743	**Hepatitis B** vaccine (**HepB**), adolescent, 2 dose, for IM use	Merck	**Recombivax HB**	1
90744	**Hepatitis B** vaccine (**HepB**), pediatric/adolescent dosage, 3 dose, for IM use	Merck GSK	**Recombivax HB** **Energix-B**	1
90746	**Hepatitis B** vaccine (**HepB**), adult dosage, for IM use	Merck GSK	**Recombivax HB** **Energix-B**	1
90747	**Hepatitis B** vaccine (**HepB**), dialysis or immunosuppressed patient dosage, 4 dose, for IM use	GSK	**Energix-B**	1
90647	**Haemophilus influenzae** type b vaccine (**Hib**), PRP-OMP conjugate, 3 dose, for IM use	Merck	**PedvaxHIB**	1
90648	**Haemophilus influenzae** type b vaccine (**Hib**), PRP-T conjugate, 4 dose, for IM use	SP GSK	**ActHIB** **Hiberix**	1
90651	**Human Papillomavirus** vaccine types 6, 11, 16, 18, 31, 33, 45, 52, 58, nonavalent (9v **HPV**), 2 or 3 dose schedule, for IM use	Merck	**Gardasil 9**	1
90707	**Measles, mumps, and rubella** virus vaccine (**MMR**), live, for SQ use	Merck GSK	**M-M-R II** **PRIORIX**	3
90710	**Measles, mumps, rubella, and varicella** vaccine (**MMRV**), live, for SQ use	Merck	**ProQuad**	4
90619	**Meningococcal** conjugate vaccine, serogroups A, C, W, Y, quadrivalent, TETANUS TOXOIDS carrier (**MenACWY-TETANUS TOXOIDS**), for IM use	SP	**MenQuadfi**	1
90620	**Meningococcal** recombinant protein and outer membrane vesicle vaccine, serogroup B (**MenB-4C**), 2 dose schedule, for IM use	GSK	**Bexsero**	1
90621	**Meningococcal** recombinant lipoprotein vaccine, serogroup B, 2 or 3 dose schedule, for IM use	Pfizer	**TRUMENBA**	1
90734	**Meningococca**l conjugate vaccine, serogroups A, C, W, Y, quadrivalent, diphtheria toxoid carrier, (**MenACWY-D**) or CRM197 carrier(**MenACWY-CRM**), for IM use	GSK	**Menveo**	1
90623	**Meningococcal** pentavalent vaccine, conjugated Men A, C, W, Y- tetanus toxoid carrier, and Men B-FHbp, for IM use	Pfizer	**PENBRAYA**	1
90732	**Pneumococcal** polysaccharide vaccine, 23-valent (**PPSV23**), adult or immunosuppressed patient dosage, when administered to 2 years or older, for subcutaneous or IM use	Merck	**Pneumovax 23**	1
90671	**Pneumococcal** conjugate vaccine, 15 valent (**PCV15**), for IM use	Merck	**VAXNEUVANCE**	1

90677	**Pneumococcal** conjugate vaccine, 20 valent (**PCV20**), for IM use	Pfizer	**Prevnar 20**	1
90713	**Poliovirus** vaccine **(IPV)**, inactivated, for SQ or IM use	SP	**IPOL**	1
90680	**Rotavirus** vaccine, pentavalent **(RV5)**, 3 dose schedule, live, for oral use	Merck	**RotaTeq**	1
90681	**Rotavirus** vaccine, human, atetanus toxoidsenuated (**RV1**), 2 dose schedule, live, for oral use	GSK	**ROTARIX**	1
90714	**Tetanus and diphtheria** toxoids (**Td**) adsorbed, preservative free, when administered to seven years or older, for IM use	MBL SP	**TDVAX** **TENIVAC**	2
90715	**Tetanus, diphtheria toxoids and acellular pertussis** vaccine (**Tdap**), when administered to 7 years or older, for IM use	SP GSK	**Adacel** **Boostrix**	3
90622	**Vaccinia (smallpox)** virus vaccine, live, lyophilized, 0.3 mL dosage, percutaneous	SP	**ACAM2000**	1
90611	**Smallpox** and mpox vaccine, atetanus toxoidsenuated vaccinia virus, live, non-replicating, preserv free, 0.5 mL dosage, suspension, SUBQ	Jynneos	**Imvamune or Imvanex**	2
90716	**Varicella** virus vaccine (**VAR**), live, for subcutaneous use	Merck	**Varivax**	1
90749	**Unlisted** vaccine or toxoid	**Please see CPT manual**		

2024 - 2025
INFLUENZA VACCINE PRODUCTS
Please note that Flu Vaccine NDC's change each season

CPT	Descriptor	Manufacturer	Brand	# of Components
90656	**Influenza** virus vaccine, trivalent **(IIV3),** split virus, preservative free, 0.5 mL dosage, for IM use	Seqirus GSK GSK SP	**AFLURIA** **FLUARIX** **FLULAVAL** **Fluzone**	1
90657	**Influenza** virus vaccine, trivalent **(IIV3),** split virus, 0.25 mL dosage, for IM use	Seqirus SP	**AFLURIA** **Fluzone**	1
90658	**Influenza** virus vaccine, trivalent **(IIV3),** split virus, 0.5 mL dosage, for IM use	Seqirus SP	**AFLURIA** **Fluzone**	1
90660	**Influenza** virus vaccine, trivalent, live **(LAIV3),** for intranasal use	Astrazeneca	**FluMist**	1
90661	**Influenza** virus vaccine, trivalent **(ccIIV3),** derived from cell cultures, subunit, preservative and antibiotic free, 0.5 mL dosage, for IM use	Seqirus	**Flucelvax**	1

Vaccine Immunization Administration – Includes Counseling
Do not use with Covid-19 vaccines—see 90480 below

CPT	Descriptor
90460	IA 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 component administered (Do not report with 90471 or 90473)
+90461	IA through 18 years of age via any route of administration, with counseling by physician or other qualified health care professional; each additional vaccine or toxoid component administered

Vaccine Immunization Administration – without physician counseling on the day of administration)
Do not use with Covid-19 vaccines—see 90480 below

CPT	Descriptor
90471	IA, one injected vaccine (Do not report with 90460 or 90473)
+90472	IA, each additional injected vaccine
90473	IA by intranasal/oral route; one vaccine (Do not report with 90460 or 90471)
+90474	IA by intranasal/oral route; each additional vaccine

2024 – 2025
COVID-19 VACCINE PRODUCTS
ICD-10 Z23 (see below)

CPT	Descriptor	Manufacturer	Brand	# of Components
91319	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [**COVID-19**]) vaccine, **mRNA-LNP**, spike protein, 10 mcg/0.3 mL dosage, tris-sucrose formulation, for IM use	Pfizer	**N/A**	1
91320	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [**COVID-19**]) vaccine, **mRNA-LNP**, spike protein, 30 mcg/0.3 mL dosage, tris-sucrose formulation, for IM use	Pfizer	**Comirnaty**	1
91321	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [**COVID-19**]) vaccine, **mRNA-LNP**, 25 mcg/0.25 mL dosage, for IM use	Moderna	**N/A**	1
91322	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [**COVID-19**]) vaccine, **mRNA-LNP**, 50 mcg/0.5 mL dosage, for IM use	Moderna	**Spikevax**	1
91304	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [**COVID-19**]) vaccine, **recombinant spike protein**	Novavax	**N/A**	1

	nanoparticle, saponin-based adjuvant, 5 mcg/0.5 mL dosage, for IM use			
COVID-19 Vaccine Administration – Includes Counseling				
CPT	**Descriptor**			
90480	Immunization administration by IM injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, single dose			
Monoclonal Antibodies for RSV				
CPT	**Descriptor**	**Manufacturer**	**Brand**	**# of Components**
90378	**Respiratory syncytial virus**, monoclonal antibody, recombinant, for IM use, 50 mg, each	SOBI	**Synagis**	1
90380	**Respiratory syncytial virus**, monoclonal antibody, seasonal dose; 0.5 mL dosage, for IM use	SP	**Beyfortus**	1
90381	**Respiratory syncytial virus**, monoclonal antibody, seasonal dose; 1 mL dosage, for IM use	SP	**Beyfortus**	1
Monoclonal Antibody Administration; Synagis				
CPT	**Descriptor**			
96372	Therapeutic, prophylactic, or diagnostic injection (specify substance or drug); subcutaneous or IM			
Monoclonal Antibody Administration; Beyfortus				
CPT	**Descriptor**			
96380	Administration of respiratory syncytial virus, monoclonal antibody, seasonal dose by IM injection, **with counseling** by physician or other qualified health care professional			
96381	Administration of respiratory syncytial virus, monoclonal antibody, seasonal dose by IM injection (**without physician/QHP counseling** on the day of administration)			
Vaccine Diagnosis Report with product and administration codes				
ICD-10	**Descriptor**			
Z23	Encounter for immunization			
Monoclonal Antibodies Diagnosis Codes Report with product and administration				
ICD-10	**Descriptor**			
Z29.11	Encounter for prophylactic immunotherapy for respiratory syncytial virus (RSV)-Report only with **Beyfortus**			
report any condition code that supports the need for **Synagis,** Z29.11 does not apply				

Abbreviations: SP: Sanofi Pasteur, GSK: GlaxoSmithKline; IM: IM ; TETANUS TOXOIDS; tetanus toxoids; Severe acute respiratory syndrome coronavirus 2; SARS- CoV-2, QHP: qualified healthcare professional (RN or PA)

Do Not Report **Z23** for RSV Monoclonal Antibody Beyfortus; instead, report **Z29.11** Encounter for prophylactic immunotherapy for respiratory syncytial virus (RSV) and any condition that puts the patient at risk for RSV.

Vaccine pending FDA approval

+Denotes add-on code. Report code only with appropriate primary procedure. When multiple vaccines are administered, the administration type may differ based on counseling was performed by physician/QHP on the date of administration, or route of administration IM or intranasal/oral route. Each immunization should have a separate administration code (s) reported.

Immunization counseling must be performed by a physician or other qualified healthcare professional (eg, nurse practitioner or physician assistant), on the date of product administration. Immunization counseling by clinical staff (eg, RN) is insufficient for these codes.

For information on pricing and National Drug Codes, please visit https://www.cdc.gov/vaccines-for-children/php/awardees/current-cdc-vaccine-price-list.html?CDC_AAref_Val=htetanus toxoidsps://www.cdc.gov/vaccines/programs/vfc/awardees/vaccine-management/price-list/index.html

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