



## CPT + ICD-10-CM + NDC = proper coding for flu vaccines

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As the 2024-'25 influenza season approaches, it is important to be aware that codes for vaccine administration will differ from previous years.

This season, all influenza vaccines will be trivalent instead of quadrivalent due to the removal of the influenza B Yamagata strain, which has not circulated since March 2020. The trivalent vaccines will have an updated influenza A (H3N2) component. The influenza A (H1N1)pdm09 and influenza B Victoria lineage components will remain the same.

Multiple codes are required to receive appropriate payment for vaccines: Current Procedural Terminology (CPT) codes for the product and administration, an International Classification of Diseases, 10<sup>th</sup> Revision, Clinical Modification (ICD-10-CM) code for diagnosis and a National Drug Code (NDC).

### **Vaccine product coding**

Product codes indicate the formulation of the vaccine administered. It's important to note that multiple manufacturers will use the same CPT code. The medical record needs to reflect the formulation. You can document the brand name as well, but that alone will not support payment.

**Table 1**

CPT code	Descriptor
90656	Influenza virus vaccine, trivalent (IIV3), split virus, preservative free, 0.5 mL dosage, for intramuscular use
90657	Influenza virus vaccine, trivalent (IIV3), split virus, 0.25 mL dosage, for intramuscular use
90658	Influenza virus vaccine, trivalent (IIV3), split virus, 0.5 mL dosage, for intramuscular use
90660	Influenza virus vaccine, trivalent, live (LAIV3), for intranasal use
90661	Influenza virus vaccine, trivalent (ccIIV3), derived from cell cultures, subunit, antibiotic free, 0.5 mL dosage, for intramuscular use

### Vaccine administration coding

As with other vaccines, it is necessary to report administration codes. Appropriate code selection is based on physician documentation of when counseling was provided, who provided counseling and route of administration.

Another factor to consider when coding for vaccine administration is the number of components in a vaccine. Although three strains of influenza virus are included in this year's vaccines, they all protect against influenza. Thus, only one CPT code is reported for administering the flu vaccine.

Proper documentation for counseling must include the vaccine component (i.e., influenza), a notation that counseling was provided and authentication (electronic or written signature and date) by the physician or other qualified health care professional (QHP). Some payers also require documentation of parent or caregiver questions or concerns addressed during counseling. Providing the vaccine information statement without discussing risks and benefits does not constitute counseling.

**Table 2**

CPT code	Descriptor	Counseling provided by physician/QHP on the day of administration	Counseling provided by registered nurse/clinical staff
90460*	Immunization administration through 18 years of age via any route of administration, with counseling by a physician or other qualified health care professional; first or only component of each vaccine or toxoid administered	X	
90471	Immunization administration (includes percutaneous, intradermal, subcutaneous or intramuscular injections); 1 vaccine (single or combination vaccine/toxoid)		X
90473	Immunization administration by intranasal or oral route; 1 vaccine (single or combination vaccine/toxoid)	X	X

\*Do not report 90460 if the physician/QHP provides counseling before the day of administration or the patient is 19 years of age or older

### Diagnosis coding

All vaccines for patients of any age should be coded with ICD-10-CM code Z23, encounter for immunization.

### National Drug Codes

Most payers require the inclusion of NDCs and appropriate NDC units on claims for immunization products. Product labeling may contain a 10-digit NDC that must be converted by adding a zero (0) to one segment of the code, resulting in an 11-digit NDC in a 5-4-2 format.

**Table 3**

10-digit NDC	11-digit NDC in 5-4-2 format*
9999-9999-99 (4-4-2 format)	<u>0</u> 9999-9999-99
99999-999-99 (5-3-2 format)	99999- <u>0</u> 999-99
99999-9999-9 (5-4-1 format)	99999-9999- <u>09</u>

\*The bold underscored 0 (zero) in each example is added to convert the 10-digit NDC to 11 digits.

NDC units for immunization products typically are reported in milliliters (mL). In contrast, the units for each CPT procedure code for an immunization product are one unit. Reporting 1.0 in the NDC unit field could result in an inaccurate payment for the units administered. Review the volume of the product administered and the code descriptor to ensure NDC units are reported correctly.

NDC codes can be found at <https://dps.fda.gov/ndc>.

### Counseling without administration of vaccines

Some private payers and Medicaid plans allow payment for vaccine counseling (separate from payment for other evaluation and management (E/M) services on the same date) as a preventive medicine service (i.e., without application of deductible, coinsurance or co-pay) when immunization administration does not occur on that date. This service may be referenced as stand-alone vaccine counseling in Medicaid policies.

Individual Medicaid plan policies differ on how stand-alone vaccine counseling benefits are reported and the payment for the service. Some plans accept Healthcare Common Procedure Coding System (HCPCS) codes G0310-G0315 and/or CPT codes 99401-99404. Payers may require modifiers such as EP (Early and Periodic Screening, Diagnostic and Treatment service). Modifier 25 is required on a separate E/M code reported on the same date as 99401-99404 and, when required, on the same date as G0310-G0315.

Report and link diagnosis codes for underimmunization status, contraindications to immunization and immunization not carried out due to patient or caregiver reasons (found in category Z28) to codes reported for counseling without immunization.

For example, if you spend 10 minutes on immunization counseling without immunization administration due to parent refusal, report Z28.82 (immunization not carried out due to caregiver refusal) and link to 99401 (preventive medicine counseling, approximately 15 minutes) or G0312 (immunization counseling by a physician or other QHP when the vaccine(s) is not administered on the same date of service for ages under 21, 5 to 15 min time).

Thanks to advocacy by the AAP Committee on Coding and Nomenclature and AAP staff, the American Medical Association approved new CPT codes for 2026 that will reflect physician work related to vaccine counseling when no vaccine is administered (<https://bit.ly/4dsLwSC>). More information will be provided in Coding Corner columns after the codes are published.

### **Payment tip**

Payment policies can vary by payer and state Medicaid program. Review payer policies to ensure timely claims processing.

If payer policies conflict with CPT, HCPCS and ICD-10-CM guidelines, contact the AAP Coding Hotline at <https://bit.ly/3yTvLTI>.

### **Resources**

- [AAP policy statement \*Recommendations for Prevention and Control of Influenza in Children, 2024–2025\*](#)
- [Information from the Centers for Disease Control and Prevention on the 2024-'25 influenza season](#)
- [Information from the AAP on reporting NDCs](#)
- [AAP Pediatric Immunizations Coding Quick Reference Card 2025](#)
- [Coding for Pediatrics 2025](#)
- [AAP Pediatric Coding Newsletter](#)