

# Commonly Administered Pediatric Vaccines

Updated 8/1/2019

CPT® Code	<i>Separately report the administration with CPT® codes 90460-90461 or 90471-90474 [See Table Below]</i>	Manufacturer	Brand	# of Vaccine Components
90702	Diphtheria and tetanus toxoids (DT), adsorbed when administered to younger than seven years, for IM use	SP	Diphtheria and Tetanus Toxoids Adsorbed	2
90700	Diphtheria, tetanus toxoids, and acellular pertussis vaccine (DTaP), when administered to <7 years, for IM use	SP GSK	DAPTACEL INFANRIX	3
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 vaccine, Haemophilus influenzae type b PRP-OMP conjugate vaccine, and hepatitis B vaccine (DTaP-IPV-Hib-HepB), for IM use	⚡	⚡	6
90723	Diphtheria, tetanus toxoids, acellular pertussis vaccine, Hepatitis B, and inactivated poliovirus vaccine (DTaP-Hep B-IPV), for IM use	GSK	PEDIARIX	5
90698	Diphtheria, tetanus toxoids, acellular pertussis vaccine, haemophilus influenzae Type B, and inactivated poliovirus vaccine (DTaP-IPV/Hib), for IM use	SP	Pentacel	5
90633	Hepatitis A vaccine (Hep A), pediatric/adolescent dosage, 2 dose, for IM use	GSK Merck	HAVRIX VAQTA	1
90740	Hepatitis B vaccine (Hep B), dialysis or immunosuppressed patient dosage, 3 dose, for IM use	Merck	RECOMBIVAX HB	1
90743	Hepatitis B vaccine (Hep B), adolescent, 2 dose, for IM use	Merck	RECOMBIVAX HB	1
90744	Hepatitis B vaccine (Hep B), pediatric/adolescent dosage, 3 dose, for IM use	Merck GSK	RECOMBIVAX HB ENERGIX-B	1
90746	Hepatitis B vaccine (Hep B), adult dosage, for IM use	Merck GSK	RECOMBIVAX HB ENERGIX-B	1
90747	Hepatitis B vaccine (Hep B), dialysis or immunosuppressed patient dosage, 4 dose, for IM use	GSK	ENERGIX-B	1
90647	Hemophilus influenzae B vaccine (Hib), PRP-OMP conjugate, 3 dose, for IM use	Merck	PedvaxHIB	1
90648	Hemophilus influenzae 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 (HPV), 2 or 3 dose schedule, for IM use	Merck	GARDASIL 9	1
90707	Measles, mumps, and rubella virus vaccine (MMR), live, for subcutaneous use	Merck	M-M-R II	3
90710	Measles, mumps, rubella, and varicella vaccine (MMRV), live, for subcutaneous use	Merck	ProQuad	4
90620	<b>Meningococcal</b> recombinant protein and outer membrane vesicle vaccine, serogroup B (MenB-4C), 2 dose schedule, for IM use	GSK	Bexsero	1
90621	<b>Meningococcal</b> recombinant lipoprotein vaccine, serogroup B, 2 or 3 dose schedule, for IM use	Pfizer	Trumenba	1
90619	<b>Meningococcal</b> conjugate vaccine, serogroups A, C, W, Y, quadrivalent, tetanus toxoid carrier (MenACWY-TT), for IM use	⚡	⚡	1
90734	<b>Meningococcal</b> conjugate vaccine, serogroups A, C, W, Y, quadrivalent, diphtheria toxoid carrier, (MenACWY-D) or CRM197 carrier (MenACWY-CRM), for IM use	SP GSK	Menactra Menveo	1
90670	<b>Pneumococcal</b> conjugate vaccine, 13 valent (PCV13), for IM use	Pfizer	PREVNAR 13	1
90732	<b>Pneumococcal</b> 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
90713	<b>Poliovirus</b> vaccine (IPV), inactivated, for subcutaneous or IM use	SP	IPOL	1
90680	<b>Rotavirus</b> vaccine, pentavalent (RV5), 3 dose schedule, live, for oral use	Merck	RotaTeq	1
90681	<b>Rotavirus</b> vaccine, human, attenuated (RV1), 2 dose schedule, live, for oral use	GSK	ROTARIX	1

CPT® Code	Separately report the administration (CPT® codes 90460-90461 or 90471-90474 [Please see table below])	Manufacturer	Brand	# of Vaccine Components
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
90716	Varicella virus vaccine (VAR), live, for subcutaneous use	Merck	VARIVAX	1
90749	Unlisted vaccine or toxoid	Please see CPT Manual		
<b>2019-2020 INFLUENZA VACCINES</b>				
90672	Influenza virus vaccine, quad (LAIV), live, intranasal use	AstraZeneca	Flumist Quad	1
90674	Influenza virus vaccine, quad (cclIV4), derived from cell cultures, subunit, preservative and antibiotic free, 0.5 mL dosage, IM (Do not use for multi-dose – report 90749)	Seqirus	Flucelvax	1
90682	Influenza virus vaccine, quad (RIV4), derived from recombinant DNA, HA protein only, preservative and antibiotic free, IM use	Seqirus	Flublok Quad	1
90685	Influenza virus vaccine, quad (IIV4), split virus, preservative free, 0.25ml dose, for IM use	Seqirus GSK GSK SP	Afluria Fluarix Flulaval Fluzone Quad	1
90686	Influenza virus vaccine, quad (IIV4), split virus, preservative free, 0.5ml dosage, for IM use	Seqirus GSK GSK SP	Afluria Quad FLUARIX Quad FLULAVAL Quad Fluzone Quad	1
90687	Influenza virus vaccine, quad (IIV4), split virus, 0.25ml dosage, for IM use	Seqirus GSK SP	Afluria Flulaval Fluzone Quad	1
90688	Influenza virus vaccine, quad (IIV4), split virus, 0.5ml dosage, for IM use	Seqirus GSK SP	Afluria Quad FLULAVAL Fluzone Quad	1
90756	Influenza virus vaccine, quad(cclIV4), derived from cell cultures, subunit, antibiotic free, 0.5mL dosage, for IM use	Seqirus	Flucelvax Quad	1
<b>Immunization Administration (IA) Codes</b>				
<b>IA Through Age 18 With Counseling<sup>^</sup></b>				
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			
<b>Immunization Administration</b>				
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			

ICD-10-CM code **Z23** is reported for all vaccine related encounters for all vaccines given. Link both the CPT vaccine product code and the CPT immunization administration code to **Z23**. Remember that the **Z23** is reported in addition to any health exam ICD-10-CM codes.

✓ Vaccine pending FDA approval [<https://www.ama-assn.org/practice-management/cpt-category-i-vaccine-codes>]

+ Denotes add-on code. Report code only with appropriate primary procedure. Report 90461 with 90460 only. Report 90472 and 90473 in addition to 90460 or 90471 or 90473.

<sup>^</sup> Counseling must be done by a qualified healthcare professional such as a physician, nurse practitioner, or physician assistant. Clinical staff is not included.

For information on pricing and National Drug Codes visit <https://www.cdc.gov/vaccines/programs/vfc/awardees/vaccine-management/price-list/index.html>

Abbreviations: GSK: GlaxoSmithKline; IM: intramuscular; MBL: Massachusetts Biological Labs; Quad: Quadrivalent; SP: Sanofi Pasteur

Developed and maintained by the American Academy of Pediatrics. For reporting purposes only. The AAP puts forth every effort to ensure this is updated; however, vaccine changes may occur more frequently than this is updated.

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