

Billing and Coding Guide for ABRYSVO®



The information provided in this document is not intended to be conclusive, exhaustive, or to replace the guidance of a qualified professional advisor. This information is current as of **[May 2026]** and is compiled from sources believed to be accurate, but Pfizer makes no representation as to accuracy. Coding and coverage policies change periodically and often without notice, so it is important to regularly check with each payer as to payer-specific requirements. The HCP is solely responsible for determining coverage and reimbursement parameters and appropriate coding for the treatment of their patients. Use of this information does not guarantee payment, coverage, or reimbursement for ABRYSVO or that payment received will cover costs.

Vaccine information

CPT® code for the vaccine¹	90678 (Respiratory Syncytial Virus vaccine, preF, subunit, bivalent, for intramuscular use)
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Diagnosis codes (ICD-10-CM)

ALL PATIENTS²	Z23 (Encounter for immunization)
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Additional diagnosis codes for maternal immunization

Pregnancy care (choose the appropriate code from the family of Z34 codes) ³	Z34 family (encounter of supervision of normal pregnancy)
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Gestational age diagnosis codes required for coverage for maternal use ⁴	Z3A.32 – (32 weeks gestation of pregnancy) Z3A.33 – (33 weeks gestation of pregnancy) Z3A.34 – (34 weeks gestation of pregnancy) Z3A.35 – (35 weeks gestation of pregnancy) Z3A.36 – (36 weeks gestation of pregnancy)
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CPT procedure codes for vaccine administration

Patients ≤18 years of age ⁵	90460 – Immunization administration through 18 years of age with counseling
Patients 19 years or older or 18 years of age if counseling is not provided ^{5,6}	90471 – 1 vaccine administered 90472 – Each additional vaccine administered during the same encounter

Additional manufacturer and product codes that may be required

MXV code⁷	PFR
CVX code⁸	305

CPT is a registered trademark of the American Medical Association. CPT = Current Procedural Terminology; HCP = healthcare professional; ICD-10-CM = International Classification of Diseases, Tenth Revision, Clinical Modification.

INDICATIONS

ABRYSVO is a vaccine indicated for:

- active immunization for the prevention of lower respiratory tract disease (LRTD) caused by respiratory syncytial virus (RSV) in individuals 60 years of age and older
- active immunization of pregnant individuals at 32 through 36 weeks gestational age for the prevention of LRTD and severe LRTD caused by RSV in infants from birth through 6 months of age
- active immunization for the prevention of LRTD caused by RSV in individuals 18 through 59 years of age who are at increased risk for LRTD caused by RSV

IMPORTANT SAFETY INFORMATION

- Do not administer ABRYSVO to individuals with a history of a severe allergic reaction (e.g., anaphylaxis) to any component of ABRYSVO

(Continued on next page)

Please see [full Prescribing Information](#) for ABRYSVO.

Using NDC codes

	Unit-of-sale NDCs for the ABRYSVO [®] carton ⁹	WAC price	Unit-of-use NDCs for the lyophilized ABRYSVO vial ¹⁰	
	11-digit NDC		11-digit NDC	10-digit NDC
ACT-O-VIAL [®] *	Carton: 1 ACT-O-VIAL NDC 00069-2465-01	[\$319.07]	00069-2465-19	0069-2465-19
	Carton: 10 ACT-O-VIALs NDC 00069-2465-10	[\$3190.70]	00069-2465-19	0069-2465-19

*Needle required for intramuscular injection is not included.

NOTE: The unit-of-sale NDC codes shown in the left column above appear on the outside of the ABRYSVO carton. The unit-of-sale (outer carton) 11-digit NDCs often are preferred by payers for billing purposes. When recording ABRYSVO use for insurance coverage or reimbursement, payers generally require a variety of codes including but not limited to: the unit-of-sale NDC, the unit-of-use NDC that appears on the lyophilized ABRYSVO vaccine vial, CVX code, or in some cases the vaccine lot number. The NDC for the unit-of-use lyophilized ABRYSVO vial varies by presentation, as seen in the 2 columns on the right. Contact the payer to confirm payer-specific requirements.

IMPORTANT SAFETY INFORMATION (continued)

- The results of a postmarketing observational study suggest an increased risk of Guillain-Barré syndrome during the 42 days following vaccination with ABRYSVO
- A numerical imbalance in preterm births was observed compared to placebo in 2 clinical studies. Data are insufficient to establish or exclude a causal relationship between preterm birth and ABRYSVO. To avoid potential risk of preterm birth with use of ABRYSVO before 32 weeks of gestation, administer to pregnant individuals at 32 through 36 weeks gestational age
- Appropriate medical treatment must be available in case of an anaphylactic reaction
- Syncope (fainting) may occur with administration of injectable vaccines, including ABRYSVO. Procedures should be in place to avoid injury from fainting
- Immunocompromised individuals, including those receiving immunosuppressive therapy, may have a diminished immune response to ABRYSVO
- Vaccination with ABRYSVO may not protect all recipients
- In clinical trials with adults aged 60+, the most commonly reported ($\geq 10\%$) adverse reactions were fatigue (15.7%), headache (12.9%), pain at the injection site (10.6%), and muscle pain (10.2%)
- In clinical trials with adults aged 18-59, the most commonly reported ($\geq 10\%$) adverse reactions were pain at the injection site (35.3%), muscle pain (24.4%), joint pain (12.4%), and nausea (11.8%)
- In clinical trials with pregnant individuals, the most commonly reported ($\geq 10\%$) adverse reactions were pain at the injection site (40.6%), headache (31.0%), muscle pain (26.5%), and nausea (20.0%)
- In clinical trials with infants born to pregnant individuals, low birth weight (5.1% ABRYSVO versus 4.3% placebo) and neonatal jaundice (7.3% ABRYSVO versus 6.9% placebo) were observed

Individuals who received ABRYSVO during pregnancy are encouraged to contact 1-800-616-3791 to enroll in a Pregnancy Exposure Registry.

Please see full Prescribing Information for ABRYSVO.

1. Robeznieks A. Big changes will streamline CPT coding for immunization. American Medical Association. January 5, 2024. Accessed May 4, 2026. <https://www.ama-assn.org/practice-management/cpt/big-changes-will-streamline-cpt-coding-immunization> 2. National Adult and Influenza Immunization Summit. Top questions on coding and billing for vaccines: avoiding common errors. 2023. Accessed May 4, 2026. <https://www.izsummitpartners.org/naiis-workgroups/access-provider-workgroup/coding-and-billing/top-questions> 3. American Academy of Professional Coders (AAPC). ICD-10-CM Code for Encounter for supervision of normal pregnancy Z34. Accessed May 4, 2026. <https://www.aapc.com/codes/icd-10-codes/Z34> 4. AAPC. ICD-10-CM Code for Weeks of gestation of pregnancy, weeks 30-39 Z3A.3. Accessed May 4, 2026. <https://www.aapc.com/codes/icd-10-codes/Z3A.3> 5. American Academy of Family Physicians. Coding for vaccine administration. Accessed May 4, 2026. <https://www.aafp.org/family-physician/practice-and-career/getting-paid/coding/vaccine-administration.html> 6. North Carolina Department of Health and Human Services. Influenza vaccine and reimbursement guidelines for 2024-2025 for NC Medicaid. Accessed May 4, 2026. <https://medicaid.ncdhhs.gov/blog/2024/10/15/influenza-vaccine-and-reimbursement-guidelines-2024-2025-nc-medicaid> 7. Centers for Disease Control and Prevention (CDC). IIS: HL7 standard code set MVX — manufacturers of vaccines. April 17, 2026. Accessed May 4, 2026. <https://www2a.cdc.gov/vaccines/iis/iisstandards/vaccines.asp?rpt=mx> 8. CDC. IIS: Current HL7 standard code set CVX — vaccines administered. April 17, 2026. Accessed May 4, 2026. <https://www2.cdc.gov/vaccines/iis/iisstandards/vaccines.asp?rpt=cvx> 9. ABRYSVO[®] Prescribing Information. Pfizer Inc., 2026. 10. CDC. IIS: NDC lookup crosswalk. February 12, 2026. Accessed May 4, 2026. <https://www2a.cdc.gov/vaccines/iis/iisstandards/vaccines.asp?rpt=ndc>