

**CPT Pediatric Coding Updates 2025**

The 2025 *Current Procedural Terminology* (CPT) codes are effective as of January 1, 2025. This is not an all-inclusive list of 2025 changes. TNAAP has listed below the codes we believe are of most interest to general pediatricians. Please see the 2025 CPT code book for a complete list of changes and to verify all new and revised codes.

**►****◄** - **New or Revised Text/Codes**

**+**  - **Add-on Code**

● - **New Code**

**▲** - **Revised Code**

**# - Out of Numeric Sequence**

**ϟ**  - **FDA Approval Pending**

★ - **Telemedicine**

**New and Revised Language/Codes**

**Evaluation and Management Services**

**►****Telemedicine Services****◄**

**\***See CPT 2025 for revisions to Telemedicine Services Guidelines.

**►Synchronous Audio-Video Evaluation and Management Services◄**

**►**Codes **98000, 98001, 98002, 98003, 98004, 98005, 98006, 98007** may be reported for new or established patients. Synchronous audio and video telecommunication is required. These services may be reported based on time on the date of the encounter or MDM.**◄**

**►New Patient◄**

**#●98000** Synchronous audio-video visit for the evaluation and management of a new patient,

which requires a medically appropriate history and/or examination and straightforward medical decision making. When using total time on the date of the encounter for code selection, 15 minutes must be met or exceeded.

**#●98001** Synchronous audio-video visit for the evaluation and management of a new patient,

which requires a medically appropriate history and/or examination and low medical

decision making. When using total time on the date of the encounter for code selection, 30 minutes must be met or exceeded.

**#●98002** Synchronous audio-video visit for the evaluation and management of a new patient,

which requires a medically appropriate history and/or examination and moderate medical decision making. When using total time on the date of the encounter for code selection, 45 minutes must be met or exceeded.

**#●98003** Synchronous audio-video visit for the evaluation and management of a new patient,

which requires a medically appropriate history and/or examination and high medical

decision making. When using total time on the date of the encounter for code selection, 60 minutes must be met or exceeded.

►**Established Patient**◄

**#●98004** Synchronous audio-video visit for the evaluation and management of an established

patient, which requires a medically appropriate history and/or examination and

straightforward medical decision making. When using total time on the date of the

encounter for code selection, 10 minutes must be met or exceeded.

**#●98005** Synchronous audio-video visit for the evaluation and management of an established

patient, which requires a medically appropriate history and/or examination and low

medical decision making. When using total time on the date of the encounter for code

selection, 20 minutes must be met or exceeded.

**#●98006** Synchronous audio-video visit for the evaluation and management of an established

patient, which requires a medically appropriate history and/or examination and moderate medical decision making. When using total time on the date of the encounter for code selection, 30 minutes must be met or exceeded.

**#●98007** Synchronous audio-video visit for the evaluation and management of an established

patient, which requires a medically appropriate history and/or examination and high

medical decision making. When using total time on the date of the encounter for code

selection, 40 minutes must be met or exceeded.

**►Synchronous Audio-Only Evaluation and Management Services****◄**

**►**Codes **98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015** may be reported for new or established patients. They require more than 10 minutes of medical discussion. For services of 5 to 10 minutes of medical discussion, report 98016. If 10 minutes of medical discussion is exceeded, total time of the date of the counter or MDM may be used for code level selection.**◄**

**►New Patient◄**

**#●98008** Synchronous audio-only visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination, straightforward medical decision making, and more than 10 minutes of medical discussion. When using total time on the date of the encounter for code selection, 15 minutes must be met or exceeded.

**#●98009** Synchronous audio-only visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination, low medical decision making, and more than 10 minutes of medical discussion. When using total time on the date of the encounter for code selection, 30 minutes must be met or exceeded.

**#●98010** Synchronous audio-only visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination, moderate medical decision making, and more than 10 minutes of medical discussion. When using total time on the date of the encounter for code selection, 45 minutes must be met or exceeded.

**#●98011** Synchronous audio-only visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination, high medical decision making, and more than 10 minutes of medical discussion. When using total time on the date of the encounter for code selection, 60 minutes must be met or exceeded.

**#●98012** Synchronous audio-only visit for the evaluation and management of an established

patient, which requires a medically appropriate history and/or examination,

straightforward medical decision making, and more than 10 minutes of medical

discussion. When using total time on the date of the encounter for code selection, 10

minutes must be exceeded.

**#●98013** Synchronous audio-only visit for the evaluation and management of an established

patient, which requires a medically appropriate history and/or examination, low medical decision making, and more than 10 minutes of medical discussion. When using total time on the date of the encounter for code selection, 20 minutes must be met or exceeded.

**#●98014** Synchronous audio-only visit for the evaluation and management of an established

patient, which requires a medically appropriate history and/or examination, moderate

medical decision making, and more than 10 minutes of medical discussion. When using total time on the date of the encounter for code selection, 30 minutes must be met or exceeded.

**#●98015** Synchronous audio-only visit for the evaluation and management of an established

patient, which requires a medically appropriate history and/or examination, high medical decision making, and more than 10 minutes of medical discussion. When using total time on the date of the encounter for code selection, 40 minutes must be met or exceeded.

**►Brief Synchronous Communication Technology Service (eg. Virtual Check-In)****◄**

**►**Code **98016** is reported for established patients only. The service is patient-initiated and intended to evaluate whether a more extensive visit type is required (eg. An office or other outpatient E/M service [99212, 99213. 99214, 99215]). Video technology is not required. Code **98016** describes a service of shorter duration than the audio-only services and has other restrictions that are related to the intended use as a “virtual check-in” or triage to determine if another E/M service is necessary. When the patient-initiated check-in leads to an E/M service on the same calendar date, and when time is used to select the level of that E/M service, the time from **98016** may be added to the time of the E/M service for total time on the date of the encounter.**◄**

**#****●98016** Brief communication technology-based service (eg, virtual check-in) by a physician or other qualified health care professional who can report evaluation and management

services, provided to an established patient, not originating from a related evaluation and management service provided within the previous 7 days nor leading to an evaluation and management service or procedure within the next 24 hours or soonest available appointment, 5-10 minutes of medical discussion

**►**(Do not report **98016** in conjunction with **98000-98015**)**◄**

**►**(Do not report services of less than 5 minutes of medical discussion)**◄**

**Medicine**

**Education and Training for Patient Self-Management**

**\***See CPT 2025 for revisions to Guidelines for Education and Training for Patient Self-Management.

**★▲98960** Education and training for patient self-management by a nonphysician qualified health care professional using a standardized curriculum, face-to-face with the patient (could include caregiver/family) each 30 minutes; individual patient

**★▲98961** Education and training for patient self-management by a nonphysician qualified health care professional using a standardized curriculum, face-to-face with the patient (could include caregiver/family) each 30 minutes; 2-4 patients

**★**▲**98962** Education and training for patient self-management by a nonphysician qualified health care professional using a standardized curriculum, face-to-face with the patient (could include caregiver/family) each 30 minutes; 5-8 patients

**Non-Face-to-Face Nonphysician Qualified Health Care Professional Services**

**\***See CPT 2025 for revisions to Guidelines for Non-Face-to-Face Nonphysician Qualified Health Care Professional Services.

▲**98966** Telephone assessment and management service provided by a nonphysician qualified

health care professional to an established patient, parent, or guardian not originating

from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion

▲**98967** Telephone assessment and management service provided by a nonphysician qualified

health care professional to an established patient, parent, or guardian not originating

from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 11-20 minutes of medical discussion

▲**98968** Telephone assessment and management service provided by a nonphysician qualified

health care professional to an established patient, parent, or guardian not originating

from a related assessment and management service provided within the previous 7 days nor leading to an assessment and management service or procedure within the next 24 hours or soonest available appointment; 21-30 minutes of medical discussion

**Nonphysician Qualified Health Care Professional Online Digital Assessment and Management Service**

**\***See CPT 2025 for revisions to Guidelines for Nonphysician Qualified Health Care Profession Online Digital Assessment and Management.

▲**98970** Nonphysician qualified health care professional online digital assessment and

management, for an established patient, for up to 7 days, cumulative time during the 7

days; 5-10 minutes Evaluation and Management

▲**98971** Nonphysician qualified health care professional online digital assessment and

management, for an established patient, for up to 7 days, cumulative time during the 7

days; 11-20 minutes

▲**98972** Nonphysician qualified health care professional online digital assessment and

management, for an established patient, for up to 7 days, cumulative time during the 7

days; 21 or more minutes

▲**98975** Remote therapeutic monitoring (eg, therapy adherence, therapy response, digital

therapeutic intervention); initial set-up and patient education on use of equipment

▲**98976** Remote therapeutic monitoring (eg, therapy adherence, therapy response, digital

therapeutic intervention); device(s) supply for data access or data transmissions to

support monitoring of respiratory system, each 30 days

▲**98977** Remote therapeutic monitoring (eg, therapy adherence, therapy response, digital

therapeutic intervention); device(s) supply for data access or data transmissions to

support monitoring of musculoskeletal system, each 30 days

▲**98978** Remote therapeutic monitoring (eg, therapy adherence, therapy response, digital

therapeutic intervention); device(s) supply for data access or data transmissions to

support monitoring of cognitive behavioral therapy, each 30 days

**Vaccines, Toxoids**

**●ϟ# 90624** Meningococcal pentavalent vaccine, Men B-4C recombinant proteins and outer membrane vesicle and conjugated Men A, C, W, Y-diphtheria toxoid carrier, for intramuscular use

**●ϟ#90637** Influenza virus vaccine, quadrivalent (qIRV), mRNA; 30 mcg/0.5 mL dosage, for

intramuscular use

**●ϟ#90638** Influenza virus vaccine, quadrivalent (qIRV), mRNA; 60 mcg/0.5 mL dosage, for

intramuscular use

●**ϟ#90593** Chikungunya virus vaccine, recombinant, for intramuscular use

▲**90661** Influenza virus vaccine, trivalent (ccIIV3), derived from cell cultures, subunit, preservative and antibiotic free, 0.5 mL dosage, for intramuscular use

**●#90684** Pneumococcal conjugate vaccine, 21 valent (PCV21), for intramuscular use

**●90695** Influenza virus vaccine, H5N8, derived from cell cultures, adjuvanted, for intramuscular use

**#●96380** Administration of respiratory syncytial virus, monoclonal antibody, seasonal dose by

intramuscular injection, with counseling by physician or other qualified health care

professional

**#●96381** Administration of respiratory syncytial virus, monoclonal antibody, seasonal dose by

intramuscular injection

Resources:

American Medical Association, CPT 2025

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