

2025 Coding Updates

Brian Kennedy, CPC-A
Jan Blanchard, CPC, CPEDC, CPMA

Disclaimers

The information presented is shared for the sole purpose of examining medical coding approaches and issues.

Though every effort has been made to develop accurate materials, this guidance is informal and is not intended to be legal advice.

Decisions relating to the management of your practice, coding your work, setting your fees, etc., should be made independently.

Objectives

Review Relevant Outpatient
Pediatric Changes to:

ICD-10 Codeset

CPT Codeset

Coding vs. Billing

Coding: Guidelines, Manuals

Coders can help

Billing: Payers, Feds, States

Billers can help

2025

ICD - 10 Changes

Effective 10/1/24

2025 ICD-10 Updates - Eff 10/1/24

- [2025 ICD-10 All Addenda \(zip file\)](#)
 - Changes only and they're FREE!!!
- [2025 ICD-10 Guidelines](#)
 - No guideline changes relevant to outpatient Pediatrics

ICD-10 2025 - Chapter 4 Endocrine, nutritional and metabolic diseases (E00-E89)

E10 Type 1 diabetes mellitus

- E10.6w/other specified complications
 - E10.64 ... hypoglycemia

Use Additional code for hypoglycemia level, if applicable (E16.A-)

ICD-10 2025 - Chapter 4 Endocrine, nutritional and metabolic diseases (E00-E89)

E10 Type 1 diabetes mellitus (continued)

- E10.A ... presymptomatic
Early-stage type 1 diabetes mellitus
- E10.A0 ...presymptomatic, unspecified
- E10.A1 ... presymptomatic, Stage 1
Multiple confirmed islet autoantibodies with normoglycemia
- E10.A2 ... presymptomatic, Stage 2
Confirmed islet autoimmunity with dysglycemia

ICD-10 2025 - Chapter 4 Endocrine, nutritional and metabolic diseases (E00-E89)

E66 Overweight and obesity

- Use Additional
 - Revise to “code to identify body mass index (BMI), if known, for adults (Z68.1-Z68.45) or pediatrics (Z68.5-)”
- E66.8 Other obesity
 - NEW:
 - E66.81 Obesity class
 - E66.811 Obesity, class 1
 - E66.812 Obesity, class 2
 - E66.813 Obesity, class 3
 - Add E66.89 Other obesity not elsewhere classified

ICD-10 2025 - Chapter 5 Mental, Behavioral, Neurodevelopmental (F01-F99)

F50.01 Anorexia nervosa, restricting type

NEW:

- F50.010 Anorexia nervosa, ..., mild
- F50.011 Anorexia nervosa, ..., moderate
- F50.012 Anorexia nervosa, ..., severe
- F50.013 Anorexia nervosa, ..., extreme
- F50.014 Anorexia nervosa, ..., in remission
- F50.019 Anorexia nervosa, ..., unspecified

ICD-10 2025 - Chapter 5 Mental, Behavioral, Neurodevelopmental (F01-F99)

F50.02 Anorexia nervosa, binge eating/purging type

NEW CODES

- F50.020 Anorexia nervosa, ..., mild
- F50.021 Anorexia nervosa, ..., moderate
- F50.022 Anorexia nervosa, ..., severe
- F50.023 Anorexia nervosa, ..., extreme
- F50.024 Anorexia nervosa, ..., in remission
- F50.029 Anorexia nervosa, ..., unspecified

ICD-10 2025 - Chapter 5 Mental, Behavioral, Neurodevelopmental (F01-F99)

F50.2 Bulimia nervosa

NEW CODES

- F50.20 Bulimia nervosa, unspecified
- F50.21 Bulimia nervosa, mild
- F50.22 Bulimia nervosa, moderate
- F50.23 Bulimia nervosa, severe
- F50.24 Bulimia nervosa, extreme
- F50.25 Bulimia nervosa, in remission

ICD-10 2025 - Chapter 5 Mental, Behavioral, Neurodevelopmental (F01-F99)

F50.81 Binge eating disorder

NEW CODES

- F50.810 Binge eating disorder, mild
- F50.811 Binge eating disorder, moderate
- F50.812 Binge eating disorder, severe
- F50.813 Binge eating disorder, extreme
- F50.814 Binge eating disorder, in remission
- F50.819 Binge eating disorder, unspecified

ICD-10 2025 - Chapter 5 Mental, Behavioral, Neurodevelopmental (F01-F99)

F98 Other behavioral and emotional disorders with onset usually occurring in childhood and adolescence

- F98.2 Other feeding disorders of infancy and childhood
 - Revise to F98.21 Rumination disorder of infancy and childhood
 - Add Rumination disorder in infancy or childhood, in remission
- Add Excludes1: rumination disorder in adults (F50.84)
- No Change F98.3 Pica of infancy and childhood
 - Add Pica in infancy or childhood, in remission
 - Add Excludes1: pica in adults (F50.83)

ICD-10 2025 - Ch 10 Diseases of the respiratory system (J00-J99)

J34.8 Other specified disorders of nose and nasal sinuses NEW CODES

- J34.82 Nasal valve collapse
 - J34.820 Internal nasal valve collapse
 - J34.8200 Internal ... collapse, unspecified
 - J34.8201 Internal ... collapse, static
 - J34.8202 Internal ... collapse, dynamic
 - J34.821 External nasal valve collapse
 - J34.8210 External ... collapse, unspecified
 - J34.8211 External ... collapse, static
 - J34.8212 External ... collapse, dynamic
 - J34.829 Nasal valve collapse, unspecified

2025 ICD Changes - Guidelines

No meaningful outpatient Pediatric
changes to ICD 2025 Guidelines

2025 CPT Changes

Effective 1/1/25

CPT 2025: E&M

NEW - New Patient

Synchronous audio-video E&M, **New Pt**, requires medically appropriate hx &/or exam; MDM or Total time on DOS

- 98000 ... straightforward MDM or at least 15 mins
- 98001 ... low MDM or at least 30 mins or more
- 98002 ...moderate MDM or time 45 mins or more
- 98003 ...high MDM or time 60 mins or more

CPT 2025: E&M

NEW - Established Patient

Synchronous audio-video E&M, **Est Pt**, requires medically appropriate hx &/or exam; MDM or Total time on DOS

- 98004 ... straightforward MDM or at least 10 mins
- 98005 ... low MDM or at least 20 mins or more
- 98006 ...moderate MDM or time 30 mins or more
- 98007 ...high MDM or time 40 mins or more

CPT 2025: E&M

NEW - New Patient

Synchronous audio-only E&M, **New** Pt, w/medically appropriate hx &/or exam; At least 10 minutes of medical discussion required

- 98008 ... straightforward MDM or at least 15 mins managing patients care that day
- 98009 ... low MDM or at least 30 mins management
- 98010 ...moderate MDM or at least 45 mins management
- 98011 ...high MDM or at least 60 mins management

CPT 2025: E&M

NEW - Established Patient

Synchronous audio-only E&M, **Est** Pt, w/medically appropriate hx &/or exam; At least 10 minutes of *medical* discussion required

- 98012 ... straightforward MDM or at least 10 mins managing patients care that day
- 98013 ... low MDM or at least 20 mins management
- 98014 ...moderate MDM or at least 30 mins management
- 98015 ...high MDM or at least 40 mins management

CPT 2025: E&M

NEW:

98016 Brief communication technology-based service (eg, virtual check-in) by a MD/QHCP who can report E&Ms, established pt, not originating from a related E&M within previous 7d nor leading to E&M or procedure w/in next 24h/ soonest available, 5-10 mins medical discussion

CPT 2025: E&M

Grammatical change only for:

- Non-Physician QHCP Phone A&M
 - 98966, 98967, 98968
- Non-Physician QHCP Online Digital A&M
 - 98970, 98971, 98972

"qualified nonphysician health care professional"

changed to become

"nonphysician qualified health care professional"

CPT 2025: E&M

NEW: Education 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 - 2-4 patients
- 98962 - 5-8 patients

2025 CPT - TELEMEDICINE SERVICES GUIDELINES

Def: Synchronous, real-time, interactive encounters between Phys/QHP and pt utilizing combined audio-video or audio-only telecommunication

- Level based on either MDM or total time, unless otherwise stated in the code descriptor
- Used in lieu of an in-person service when medically appropriate to address care of pt and when pt/family/caregiver agree to this format
- NOT used to report routine telecom related to previous encounter

2025 CPT - TELEMEDICINE SERVICES GUIDELINES

-May be used for follow-up of a previous enc, when follow-up E/M required, in same manner as in-person E/M. (requiring re-assessment for response or complications rel'd to tx plan of previous visit).

-Except for 98016; does not require specific time interval from last in-person or telemed visit and may be initiated by Phys/QHP or pt/ family/caregiver.

-Telemed must be performed on separate calendar date from another E/M. Same day telemed services are summed and reported in aggregate; overlapping time is only counted once.

2025 CPT - TELEMEDICINE SERVICES GUIDELINES

- If min time for reporting telemed not met, time spent w/pt may count toward total time on DOS of an in-person E/M service.
- Audio-only telemed for est pts w/5 - 10 mins of medical discussion, report 98016; patient-initiated; intended to evaluate whether more extensive visit required
- Video not required for audio-only visits.
- When pt-initiated check-in leads to same day E/M and time is used to select level the E/M, time from 98016 may be added to the time of the E/M

2025 CPT - TELEMEDICINE SERVICES GUIDELINES

- Do not count the time performing telemed toward time CCM (99437, 99491) or PCM (99424, 99425)
- Audio-only (98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015) must exceed 10 mins med discussion
- Code 98016 (est pt, 5-10 mins med discussion)
 - Based only on med discussion time; not MDM
 - Do not count time for connecting, arranging appt, even when performed by the Phys/QHP
 - Services less than five minutes not reported

2025 CPT - TELEMEDICINE SERVICES GUIDELINES

-Audio-only (98008, 98009, 98010, 98011, 98012, 98013, 98014, 98015) med discussion is

- synchronous (real-time) interactive verbal
- does not include online digital comm (except telecommunication tech device for the deaf)
- Same MDM meaning as in E/M Guidelines and is a cognitive process by Phys/QHP

-If audio-video connection is lost and only audio is restored, report service accounting for majority of time of interactive portion.

CPT 2025: E&M - Removed

The following telephone E&M service codes are removed:

- ~~99441~~ Telephone evaluation and management service by a physician or other qualified health care professional who may report evaluation and management services provided to an established patient, parent, or guardian not originating from a related E/M service provided within the previous 7 days nor leading to an E/M service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of medical discussion
- ~~99442 11-20 minutes of medical discussion~~
- ~~99443 21-30 minutes of medical discussion~~

2025 E&M Coding Tool

TODAY'S PROBLEM LEVEL		TODAY'S DATA LEVEL	TODAY'S RISK LEVEL
(Circle one) Level: 2 3 4 5		(Circle one) Level: 2 3 4 5	(Circle one) Level: 2 3 4 5
Number & Complexity of problems addressed	Amount and/or Complexity of Data Each unique test, order, or document contributes to a combination of 2 or of 3 in Category 1 below.	Risk of morbidity from additional diagnostic testing or treatment	
Level 2 1 self-limited or minor problem	Level 2 Minimal or none	Level 2 Minimal risk	
Level 3 2 or more self-limited or minor problems; or 1 stable chronic illness; or • 1 acute, uncomplicated illness or injury • 1 stable, acute illness • 1 acute, uncomplicated illness or injury requiring hospital inpatient or observation level of care	Level 3 (One category required) CATEGORY 1: [Any 2 from the following] • Review of prior external note(s) from each unique source ; • Ordering of each unique test or • Review of the result(s) of each unique test ; CATEGORY 2: • Assessment requiring an independent historian(s) <i>For independent interpretation and discussion of management or test interpretation, see Level 4 or 5.</i>	Level 3 Low risk	
Level 4 • 1 or more chronic illnesses with exacerbation, progression, or side effects of treatment; or • 2 or more stable chronic illnesses; or • 1 undiagnosed new problem with uncertain prognosis; or • 1 acute illness with systemic symptoms; or • 1 acute complicated injury	Level 4 (One category required) CATEGORY 1: [Any 3 from the following] • Review of prior external note(s) from each unique source ; • Ordering of each unique test or • Review of the result(s) of each unique test ; • Assessment requiring an independent historian(s) or CATEGORY 2: • Independent interpretation of test performed by another MD/QHCP/appropriate source (not separately reported); or CATEGORY 3: • Discussion of management or test interpretation with external MD/QHCP/appropriate source (not separately reported)	Level 4 Moderate Risk EXAMPLES ONLY: • Prescription drug management • Decision regarding minor surgery with identified patient or procedure risk factors • Decision regarding elective major surgery without identified patient or procedure risk factors • Diagnosis or treatment significantly limited by social determinants of health	
Level 5 • 1 or more chronic illnesses with severe exacerbation, progression, or side effects of treatment; or • 1 acute or chronic illness or injury that poses a threat to life or bodily function	Level 5 (Two categories required) CATEGORY 1: [Any 3 from the following] • Review of prior external note(s) from each unique source ; • Ordering of each unique test or • Review of the result(s) of each unique test ; • Assessment requiring an independent historian(s) or CATEGORY 2: • Independent interpretation of test performed by another MD/QHCP (not separately reported); or CATEGORY 3: • Discussion of management or test interpretation with external MD/QHCP appropriate source (not separately reported)	Level 5 High Risk EXAMPLES ONLY: • Drug therapy requiring intensive monitoring for toxicity • Decision regarding elective major surgery with identified patient or procedure risk factors • Decision regarding emergency major surgery • Decision regarding hospitalization or escalation of hospital-level care • Decision not to resuscitate or to de-escalate care due to poor prognosis • Decision regarding parenteral controlled substances	
TODAY'S VISIT		(Circle one) Level: 2 3 4 5	Encounter Level assigned, based on MDM

Adapted from: Table 1: Levels of Medical Decision Making (MDM) | CPT is a registered trademark of the American Medical Association. Copyright 1983-2025 American Medical Association.

Evaluation and Management Time Requirements

Office E/M Total time on DOS		Synchronous Audio-Video E/M Total time on DOS		Synchronous Audio Only E/M Total time on DOS, At least least 10 mins medical discussion required for all (See 98016 for 5-10 min discussions)	
NEW PATIENT	ESTABLISHED PATIENT	NEW PATIENT	ESTABLISHED PATIENT	NEW PATIENT	ESTABLISHED PATIENT
99202 - 15 mins met or exceeded	99212 - 10 mins met or exceeded	98000 - 15 mins met or exceeded	98004 - 10 mins met or exceeded	98008 - At least 15 mins management	98012 - At least 10 mins management
99203 - 30 mins met or exceeded	99213 - 20 mins met or exceeded	98001 - 30 mins met or exceeded	98005 - 20 mins met or exceeded	98009 - At least 30 mins management	98013 - At least 20 mins management
99204 - 45 mins met or exceeded	99214 - 30 mins met or exceeded	98002 - 45 mins met or exceeded	98006 - 30 mins met or exceeded	98010 - At least 45 mins management	98014 - At least 30 mins management
99205 - 60 mins met or exceeded	99215 - 40 mins met or exceeded	98003 - 60 mins met or exceeded	98007 - 40 mins met or exceeded	98011 - At least 60 mins management	98015 - At least 40 mins management

CPT 2025: LABS

NEW

- 87626 - Human Papillomavirus (HPV), separately reported high-risk types (eg, 16, 18, 31, 45, 51, 52) and high-risk pooled result(s)
- 86581 - Streptococcus pneumoniae antibody (IgG), serotypes, multiplex immunoassay, quantitative
- 87513 - Helicobacter pylori (H. pylori), clarithromycin resistance, amplified probe technique

CPT 2025: LABS

CHANGED

- 87624 - Human Papillomavirus (HPV), high-risk types (eg, 16, 18, 31, 33, 35, 39, 45, 51, 52, 56, 58, 59, 68), pooled result

Added “pooled Result” to the end of the code descriptor

CPT 2025: Vaccines - NEW

- 90684 - Pneumococcal conjugate vaccine, 21 valent (PCV21), for intramuscular use
- 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

CPT 2025: Vaccine Admin - NEW

- 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

These admin codes are used in conjunction with 90380, 90381

CPT 2025: Flu Vaccines

NEW

- 90637 - Influenza virus vaccine, quadrivalent (qIRV), mRNA; 30 mcg/0.5 mL dosage, for intramuscular use
- 90638 - Influenza virus vaccine, quadrivalent (qIRV), mRNA; 60 mcg/0.5 mL dosage, for intramuscular use
- 90695 - Influenza virus vaccine, H5N8, derived from cell cultures, adjuvanted, for intramuscular use

CHANGED

- 90661 - Influenza virus vaccine, trivalent (ccIV3), derived from cell cultures, subunit, ~~preservative and~~ antibiotic free, 0.5 mL dosage, for intramuscular use

CPT 2025: Flu Vaccines-Removed

- ~~90630 - Influenza virus vaccine, quadrivalent (IIV4), split virus, preservative free, for intradermal use~~
- ~~90654 - Influenza virus vaccine, trivalent (IIV3), split virus, preservative free, for intradermal use~~

CPT 2025: COVID Vaccines

The only previously used COVID-19 vaccine product code in use is 91304

One admin code for all COVID-19 Vaccine Products - 90480

CPT 2025: COVID Vaccines - CHANGED

- 91304 - Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, recombinant spike protein nanoparticle, saponin-based adjuvant, ~~preservative-free~~, 5 mcg/0.5 mL dosage, for intramuscular use

CPT 2025: COVID Vaccines - NEW

- 91318 SARS-Cov-2 mRNA-LNP 6mo-4 yrs Pfizer
- 91319 SARS-Cov-2 mRNA-LNP 5 yrs-11 yrs Pfizer
- 91320 SARS-Cov-2 mRNA-LNP 12 yrs and + Pfizer
- 91321 SARS-Cov-2 mRNA-LNP 6mo-11 yrs Moderna
- 91322 SARS-Cov-2 mRNA-LNP 12 yrs and + Moderna

One Admin Code will be used for all COVID-19 vaccines

- 90480 - Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, single dose

CPT 2025: COVID Vaccines - Removed

● 91300	SARS Cov 2	mRNA LNP	12 yrs and +	Pfizer
● 91301	SARS Cov 2	mRNA LNP	12 yrs and +	Moderna
● 91302	SARS Cov 2	DNA	18 yrs and +	AstraZeneca
● 91303	SARS Cov 2	DNA	18 yrs and +	Janssen
● 91305	SARS Cov 2	mRNA LNP	12 yrs and +	Pfizer
● 91306	SARS Cov 2	mRNA LNP	18 yrs and +	Moderna
● 91307	SARS Cov 2	mRNA LNP	5 yrs 11 yrs	Pfizer
● 91308	SARS Cov 2	mRNA LNP	6m 4 yrs	Pfizer

CPT 2025: COVID Vaccines - Removed - Cont.

● 91309	SARS Cov 2	mRNA LNP	6 yrs 11 yrs	Moderna
● 91310	SARS Cov 2	monovalent	18 yrs +	Sanofi Pasteur
● 91311	SARS Cov 2	mRNA LNP	6m 5 yrs	Moderna
● 91312	SARS Cov 2	mRNA LNP	12 yrs and +	Pfizer
● 91313	SARS Cov 2	mRNA LNP	12 yrs and +	Moderna
● 91314	SARS Cov 2	mRNA LNP	6m 11 yrs	Moderna
● 91315	SARS Cov 2	mRNA LNP	5 11 yrs	Pfizer
● 91316	SARS Cov 2	mRNA LNP	6m 5 yrs	Moderna
● 91317	SARS Cov 2	mRNA LNP	6m 4 yrs	Pfizer

CPT 2025: COVID Vaccine Admin - Removed

● 91300

○ 0001A, 0002A, 0003A, 0004A

● 91301

○ 0011A, 0012A, 0013A

● 91302

○ 0021A, 0022A

● 91303

○ 0031A, 0034A

● 91304

○ 0041A, 0042A, 0044A

● 91305

○ 0051A, 0052A, 0053A, 0054A

● 91306

○ 0064A

● 91307

○ 0071A, 0072A, 0073A, 0074A

● 91308

○ 0081A, 0082A, 0083A

● 91309

○ 0091A, 0092A, 0093A, 0094A

CPT 2025: COVID Vaccine Admin - Removed

- Cont.

● ~~91310~~

○ ~~0104A~~

● ~~91311~~

○ ~~0111A, 0112A, 0113A~~

● ~~91312~~

○ ~~0121A, 0124A~~

● ~~91313~~

○ ~~0134A~~

● ~~91314~~

○ ~~0141A, 0142A, 0144A~~

● ~~91315~~

○ ~~0151A, 0154A~~

● ~~91316~~

○ ~~0164A~~

● ~~91317~~

○ ~~0171A, 0172A, 0173A, 0174A~~

Resources

COVID-19

- [AMA lab testing & vaccine codes](#)
(Complete form to receive .xls)
- [AAP Immunization Coding Table](#)
(Updated Oct 2024)

CPT 2025: Brand New Product Codes For July 1 2025

- 90382 - Respiratory syncytial virus, monoclonal antibody, seasonal dose, 0.7 mL, for intramuscular use
- 90635 - Influenza virus vaccine, H5N1, derived from cell cultures, adjuvanted, for intramuscular use
- 90612 - Influenza virus vaccine, trivalent, and severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, 31.7 mcg/0.32 mL dosage, for intramuscular use
- 90613 - Influenza virus vaccine, quadrivalent, and severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, 40 mcg/0.4 mL dosage, for intramuscular use
- 91323 - Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, 10 m

Please fill out the course survey in the
app

What Questions Do You Have?