

The following codes, medium descriptors, and abbreviated guidelines are a subset of the AMA's Current Procedural Terminology (CPT®) code set. For unabbreviated code descriptors and complete guidelines, please refer to the CPT 2021 codeword or data file.

EVALUATION AND MANAGEMENT

Office or Other Outpatient Services

- #99201 Office outpatient visit 10 minutes
- #99202 Office outpatient visit 20 minutes
- #99203 Office outpatient visit 30 minutes
- #99204 Office outpatient visit 45 minutes
- #99205 Office outpatient visit 60 minutes
- #99211 Office outpatient visit 5 minutes
- #99212 Office outpatient visit 10 minutes
- #99213 Office outpatient visit 15 minutes
- #99214 Office outpatient visit 25 minutes
- #99215 Office outpatient visit 40 minutes

Preventive Medicine Services

- Initial preventive medicine visit patient < 18 yrs
- Initial preventive medicine visit pt age 1-4 yrs
- Initial preventive medicine visit pt age 5-11 yrs
- Initial preventive medicine visit pt age 12-17 yrs
- Initial preventive medicine visit pt age 18-29 yrs
- Initial preventive medicine visit pt age 30-59 yrs
- Periodic preventive visit established patient < 18 yrs
- Periodic preventive visit established patient 1-17 yrs
- Periodic preventive visit established patient 18-59 yrs
- Prevent med (immunobil/immunobil med) age 10 mins
- Prevent med (immunobil/immunobil med) age 20 mins
- Prevent med (immunobil/immunobil med) age 45 mins
- Prevent med (immunobil/immunobil med) age 60 mins
- Tobacco use (counseling/intervention) 3-10 minutes
- #99407 Tobacco use (counseling/intervention) >10 minutes
- #99408 Alcohol/intervention screen & interview 15-30 mins
- #99409 Alcohol/intervention screen & intervention >30 mins
- #99411 Prevent med (counselor & risk factor redl/gp) age 50+ yrs
- #99412 Prevent med (counselor & risk factor redl/gp) age <50 yrs

Newborn Care Services

- 1st hospital/birth center care per day visit 10
- 1st care per day visit 10 days except hospital/birth center
- Subq hospital care per day visit normal newborns
- 1st hospital/birth center visit admit & discharge visit

Delivery/Birth/Birth Room Attendance and Resuscitation Services

- #99464 Atm at delivery, 1st stabilization of newborns
- Delivery/birth room resuscitation
- (Procedures that are performed as a necessary part of the resuscitation [eg, intubation, ventilator lines] are reported separately in addition to #99465. In order to report these procedures, they must be performed as a necessary component of the resuscitation and not as a component before admission to the neonatal intensive care unit)

Inpatient Neonatal Intensive Care Services and Pediatric and Neonatal Critical Care Services

- Inpatient Neonatal and Pediatric Critical Care

 - #99469 1st inpatient critical care per day age 28 days <c
 - Subq 1/p critical care per day age 28 days >c
 - Initial post critical care 29 days thru 24 months
 - Subq post critical care 29 days thru 24 mos
 - Initial post critical care 25 thru 5 years
 - Subsequent post critical care 2 thru 5 years

SURGERY

- 10120 Incision & removal foreign body (single)
- 10121 Incision & removal foreign body (two comp)
- 11000 Removal skin tags (single skin tag, any area <c)
- 11240 Excavation subungual (fingernail)
- 11760 Repair nail bed
- 17110 Debridement benign, limited up to 14
- 17111 Debridement benign lesions 15%+
- 17250 Chemical cauterization (granulation tissue)
- 25000 Clod to calcific fracture w/o manipulation
- 24640 Cts wth head/neck child (nonreduced efface w/o incision)
- 25000 Closed to radial shaft fracture w/o manipulation
- 25600 Cts chd radial & ulnar/physeal (single)
- 26720 Cts phalangeal (single/medial) w/o incision
- 26750 Cts phalangeal (single/lateral) w/o incision
- 28470 Closed to metatarsal fracture w/o incision each
- 28490 Cts to 1st toe phalangeal w/o incision
- 28510 Cts to phalangeal w/o incision
- 29125 Application (short) (one split) (one-time) (one-time)
- Application (short) (one split) (dynamic)
- Application (long) (static)
- Application (long) (dynamic)
- Scraping (shaver)
- Scraping (shaver) (w/clip)
- Application (short) long (single)
- Removal foreign body (intracanal office procedure)
- Control (short) (one-time)
- Rip tip heel thickness ventilation only
- Round (embroidered) (wound) (single)
- Incision (single) (tissue) (one)
- Round (single) (tissue) (one)
- Removal eye conjunctival superficial
- Round (single) eye-conjunctival w/o clip lamp
- Round (single) auditory canal w/o clip lamp
- Removal impacted (congenital) instrumentation w/out
- Mycroscopy (single) (nasotracheal tube only)

MEDICINE

- Immune Globulins, Serum, or Recombinant Products**

 - 96073 Hepatitis B immune globulin (HIG) human 1m
 - 96075 Rabies immune globulin 10g human lyophilized
 - 96076 Rubella, IgG human-treated human lyophilized
 - 96089 Tetanus immune globulin 10g human 1m
 - 96096 Varicella-zoster immune-globulin human 1m

- Immunizations/Administration (See Vaccines/Tonsils)**

 - Report vaccine immunization administration codes 90460, 90461, 90471-90474 in addition to the vaccine and tonse code(s) (90475-90749)

Report codes 90460 and 90461 only when the physician or qualified health care professional provides face-to-face counseling of the patient/family during the administration of a vaccine. For immunization administration of any vaccine that is not accompanied by face-to-face physician or qualified health care professional counseling to the patient/family or for administration of vaccines to patients over 18 years of age, report codes 90471-90474. (See also Instructions for Use of the CPT® Codebook for definition of reporting qualifications.)

also Instructions for Use of the CPT® Codebook for definition of reporting qualifications.)

If a significant, separately identifiable Evaluation and Management service (eg, new or established patient office or other outpatient services [99201-99202], office or other outpatient consultations [99204-99205], emergency department services [99281-99285], preventive medicine services [99351-99429]) is performed, the appropriate E/M service code should be reported in addition to the vaccine and tonse administration codes.

A component refers to all antigens in a vaccine that prevent disease(s) caused by one organism (90460 and 90461). Multi-valent antigens or multiple serotypes of antigens against a single organism are considered a single component of vaccines. Combination vaccines are those vaccines that contain multiple vaccine components. Components of adjuncts contained in vaccines are not considered to be components parts of the vaccine as defined above.

90460 **Im adm thru 10yr any one (1) vaccine comp**

• 90461 **Im adm thru 10yr any one addl vaccine comp**

(use 90460 for each vaccine administered. For vaccines with multiple components (combination vaccines), report 90460 in conjunction with 90461 for each additional component in a given vaccine)

90471 **Im adm (reg or subq/inj) ages 11 vaccine**

• 90472 **Im adm (reg or subq/inj) ages >11 vaccine**

90473 **Im adm (intrap/loc) 11 vaccine**

• 90474 **Im adm (intrap/loc) >11 vaccine**

Vaccines, Tonsils

Codes 90475-90749 identify the vaccine product only. To report the administration of a vaccine (tonse), the vaccine/tonse product codes 90475-90749 must be used in addition to an immunization administration code(s) (90460, 90461, 90471, 90472, 90473, 90474). (See also Instructions for Use of the CPT® Codebook for definition of reporting qualifications.)

If a significantly separately identifiable Evaluation and Management (E/M) service (eg, office or other outpatient services, preventive medicine services) is performed, the appropriate E/M service code should be reported in addition to the vaccine and tonse administration codes.

Separate codes are available for combination vaccines (eg, DTaP-IPa, DTaP-Hib, Hib-DTaP). It is inappropriate to code each component of a combination vaccine separately. If a specific vaccine code is not available, the related procedure code should be reported, until a new code becomes available.

90620 **Mon recombinant pentavalent vaccine w/o clip lamp**

90621 **Mon recombinant (liposomal) vaccine**

90630 **Influenza vac: IV-I split virus genes (one)**

90631 **HepA vaccine 2-dose schedule pref/adolesc 1m use**

90632 **HepA vaccine 3-dose schedule pref/adolesc 1m use**

• 90644 **Hib-Meningit vac: 4-dose schedule 1m infant 108 months**

90647 **Hib-PNP-PRP vaccine 2-dose schedule 1m use**

90648 **Hib-PNP-PRP vaccine 4-dose schedule 1m use**

90649 **4nHPV vaccine 2-dose schedule 1m use**

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**American Academy of Pediatrics, Joel
Bradley, Jr**

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