

Time-Based Codes Subject to Efficiency Adjustment in Error

Time-Based Code	Long Descriptor
76000	Fluoroscopy (separate procedure), up to 1 hour physician or other
80503	Pathology clinical consultation; for a clinical problem, with limited review of patient's history and medical records and straightforward medical decision making When using time for code
80504	Pathology clinical consultation; for a moderately complex clinical problem, with review of patient's history and medical records and moderate level of medical decision making When using time for code
80505	Pathology clinical consultation; for a highly complex clinical problem, with comprehensive review of patient's history and medical records and high level of medical decision making When using time
80506	Pathology clinical consultation; prolonged service, each additional 30 minutes (List separately in addition to code for primary
90912	Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMG and/or manometry, when performed; initial
90913	Biofeedback training, perineal muscles, anorectal or urethral sphincter, including EMG and/or manometry, when performed; each additional 15 minutes of one-on-one physician or other qualified
91038	Esophageal function test, gastroesophageal reflux test with nasal catheter intraluminal impedance electrode(s) placement, recording,
92605	Evaluation for prescription of non-speech-generating augmentative and alternative communication device, face-to-face with the
92618	Evaluation for prescription of non-speech-generating augmentative and alternative communication device, face-to-face with the
92620	Evaluation of central auditory function, with report; initial 60
92621	Evaluation of central auditory function, with report; each additional 15 minutes (List separately in addition to code for
92622	Diagnostic analysis, programming, and verification of an auditory osseointegrated sound processor, any type; first 60 minutes
92623	Diagnostic analysis, programming, and verification of an auditory osseointegrated sound processor, any type; each additional 15
92640	Diagnostic analysis with programming of auditory brainstem implant,
94780	Car seat/bed testing for airway integrity, for infants through 12 months of age, with continual clinical staff observation and
94781	Car seat/bed testing for airway integrity, for infants through 12 months of age, with continual clinical staff observation and continuous recording of pulse oximetry, heart rate and respiratory
95076	Ingestion challenge test (sequential and incremental ingestion of test items, eg, food, drug or other substance); initial 120 minutes
95079	Ingestion challenge test (sequential and incremental ingestion of test items, eg, food, drug or other substance); each additional 60
95180	Rapid desensitization procedure, each hour (eg, insulin,

95922	Testing of autonomic nervous system function; vasomotor adrenergic innervation (sympathetic adrenergic function), including beat-to-beat blood pressure and R-R interval changes during Valsalva
95924	Testing of autonomic nervous system function; combined parasympathetic and sympathetic adrenergic function testing with at
95940	Continuous intraoperative neurophysiology monitoring in the operating room, one on one monitoring requiring personal
95961	Functional cortical and subcortical mapping by stimulation and/or recording of electrodes on brain surface, or of depth electrodes, to provoke seizures or identify vital brain structures; initial
95962	Functional cortical and subcortical mapping by stimulation and/or recording of electrodes on brain surface, or of depth electrodes, to provoke seizures or identify vital brain structures; each
96547	Intraoperative hyperthermic intraperitoneal chemotherapy (HIPEC) procedure, including separate incision(s) and closure, when
96548	Intraoperative hyperthermic intraperitoneal chemotherapy (HIPEC) procedure, including separate incision(s) and closure, when
96570	Photodynamic therapy by endoscopic application of light to ablate abnormal tissue via activation of photosensitive drug(s); first 30 minutes (List separately in addition to code for endoscopy or
96571	Photodynamic therapy by endoscopic application of light to ablate abnormal tissue via activation of photosensitive drug(s); each additional 15 minutes (List separately in addition to code for
97032	Application of a modality to 1 or more areas; electrical
97033	Application of a modality to 1 or more areas; iontophoresis, each
97034	Application of a modality to 1 or more areas; contrast baths, each
97035	Application of a modality to 1 or more areas; ultrasound, each 15
97036	Application of a modality to 1 or more areas; Hubbard tank, each 15
97113	Therapeutic procedure, 1 or more areas, each 15 minutes; aquatic
97124	Therapeutic procedure, 1 or more areas, each 15 minutes; massage, including effleurage, petrissage and/or tapotement (stroking,
97140	Manual therapy techniques (eg, mobilization/ manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 15
97533	Sensory integrative techniques to enhance sensory processing and promote adaptive responses to environmental demands, direct (one-on-
97810	Acupuncture, 1 or more needles; without electrical stimulation, initial 15 minutes of personal one-on-one contact with the patient
97811	Acupuncture, 1 or more needles; without electrical stimulation, each additional 15 minutes of personal one-on-one contact with the
97813	Acupuncture, 1 or more needles; with electrical stimulation, initial 15 minutes of personal one-on-one contact with the patient
97814	Acupuncture, 1 or more needles; with electrical stimulation, each additional 15 minutes of personal one-on-one contact with the
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.

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
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
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
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
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
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.
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
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
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
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
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
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
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
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
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

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
98970	Nonphysician qualified health care professional online digital assessment and management, for an established patient, for up to 7
98971	Nonphysician qualified health care professional online digital assessment and management, for an established patient, for up to 7
98972	Nonphysician qualified health care professional online digital assessment and management, for an established patient, for up to 7
98980	Remote therapeutic monitoring treatment management services, physician or other qualified health care professional time in a calendar month requiring at least one interactive communication
98981	Remote therapeutic monitoring treatment management services, physician or other qualified health care professional time in a calendar month requiring at least one interactive communication
98XX7	Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring 1 real-time interactive communication with the patient/caregiver during the calendar month; each additional 20 minutes (List separately in addition to code for primary procedure) (Use 99458 in conjunction with 99457) (Do not
99091	Collection and interpretation of physiologic data (eg, ECG, blood pressure, glucose monitoring) digitally stored and/or transmitted by the patient and/or caregiver to the physician or other qualified
99151	Moderate sedation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the
99152	Moderate sedation services provided by the same physician or other qualified health care professional performing the diagnostic or therapeutic service that the sedation supports, requiring the presence of an independent trained observer to assist in the
99155	Moderate sedation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic
99156	Moderate sedation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic
99157	Moderate sedation services provided by a physician or other qualified health care professional other than the physician or other qualified health care professional performing the diagnostic
99XX5	Remote physiologic monitoring treatment management services, clinical staff/physician/other qualified health care professional time in a calendar month requiring 1 real-time interactive communication with the patient/caregiver during the calendar month;

G0017	Psychotherapy for crisis furnished in an applicable site of service (any place of service at which the non-facility rate for
G0018	Psychotherapy for crisis furnished in an applicable site of service (any place of service at which the non-facility rate for psychotherapy for crisis services applies, other than the office
G0076	Brief (20 minutes) care management home visit for a new patient. for use only in a medicare-approved cmmi model. (services must be
G0077	Limited (30 minutes) care management home visit for a new patient. for use only in a medicare-approved cmmi model. (services must be
G0078	Moderate (45 minutes) care management home visit for a new patient. for use only in a medicare-approved cmmi model. (services must be
G0079	Comprehensive (60 minutes) care management home visit for a new patient. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home, domiciliary, rest
G0080	Extensive (75 minutes) care management home visit for a new patient. for use only in a medicare-approved cmmi model. (services
G0081	Brief (20 minutes) care management home visit for an existing patient. for use only in a medicare-approved cmmi model. (services
G0082	Limited (30 minutes) care management home visit for an existing patient. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home, domiciliary, rest
G0083	Moderate (45 minutes) care management home visit for an existing patient. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home, domiciliary, rest
G0084	Comprehensive (60 minutes) care management home visit for an existing patient. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home,
G0085	Extensive (75 minutes) care management home visit for an existing patient. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home, domiciliary, rest
G0086	Limited (30 minutes) care management home care plan oversight. for use only in a medicare-approved cmmi model. (services must be
G0087	Comprehensive (60 minutes) care management home care plan oversight. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home,
G0181	receiving medicare-covered services provided by a participating home health agency (patient not present) requiring complex and multidisciplinary care modalities involving regular physician or
G0182	Physician supervision of a patient under a medicare-approved hospice (patient not present) requiring complex and multidisciplinary care modalities involving regular physician development and/or revision of care plans, review of subsequent reports of patient status, review of laboratory and other studies,
G0271	Medical nutrition therapy, reassessment and subsequent intervention(s) following second referral in same year for change in diagnosis, medical condition, or treatment regimen (including
G0453	Continuous intraoperative neurophysiology monitoring, from outside the operating room (remote or nearby), per patient, (attention

G0500	Moderate sedation services provided by the same physician or other qualified health care professional performing a gastrointestinal endoscopic service that sedation supports, requiring the presence of an independent trained observer to assist in the monitoring of
G0537	Administration of a standardized, evidence-based atherosclerotic cardiovascular disease (ascvd) risk assessment, 5-15 minutes, not
G0546	Interprofessional telephone/internet/electronic health record assessment and management service provided by a practitioner in a specialty whose covered services are limited by statute to services for the diagnosis and treatment of mental illness,
G0547	Interprofessional telephone/internet/electronic health record assessment and management service provided by a practitioner in a specialty whose covered services are limited by statute to services for the diagnosis and treatment of mental illness, including a
G0548	Interprofessional telephone/internet/electronic health record assessment and management service provided by a practitioner in a specialty whose covered services are limited by statute to services for the diagnosis and treatment of mental illness, including a
G0549	Interprofessional telephone/internet/electronic health record assessment and management service provided by a practitioner in a specialty whose covered services are limited by statute to services for the diagnosis and treatment of mental illness, including a
G0550	Interprofessional telephone/internet/electronic health record assessment and management service provided by a practitioner in a specialty whose covered services are limited by statute to services for the diagnosis and treatment of mental illness, including a
G0551	Interprofessional telephone/internet/electronic health record referral service(s) provided by a treating/requesting practitioner in a specialty whose covered services are limited by statute to
G0553	First 20 minutes of monthly treatment management services directly related to the patient's therapeutic use of the digital mental health treatment (dmht) device that augments a behavioral therapy plan, physician/other qualified health care professional time reviewing information related to the use of the dmht device,
G0554	Each additional 20 minutes of monthly treatment management services directly related to the patient's therapeutic use of the digital mental health treatment (dmht) device that augments a behavioral therapy plan, physician/other qualified health care professional time reviewing data generated from the dmht device from patient

G0559	Post-operative follow-up visit complexity inherent to evaluation and management services addressing surgical procedure(s), provided by a physician or qualified health care professional who is not the practitioner who performed the procedure (or in the same group practice) and is of the same or of a different specialty than the practitioner who performed the procedure, within the 90-day global period of the procedure(s), once per 90-day global period, when there has not been a formal transfer of care and requires the following required elements, when possible and applicable: reading available surgical note to understand the relative success of the procedure, the anatomy that was affected, and potential complications that could have arisen due to the unique
G2001	Brief (20 minutes) in-home visit for a new patient post-discharge. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home, domiciliary, rest home,
G2002	Limited (30 minutes) in-home visit for a new patient post-discharge. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home,
G2003	Moderate (45 minutes) in-home visit for a new patient post-discharge. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home,
G2004	Comprehensive (60 minutes) in-home visit for a new patient post-discharge. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home,
G2005	Extensive (75 minutes) in-home visit for a new patient post-discharge. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home,
G2006	Brief (20 minutes) in-home visit for an existing patient post-discharge. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home,
G2007	Limited (30 minutes) in-home visit for an existing patient post-discharge. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home,
G2008	Moderate (45 minutes) in-home visit for an existing patient post-discharge. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home,
G2009	Comprehensive (60 minutes) in-home visit for an existing patient post-discharge. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home,
G2013	Extensive (75 minutes) in-home visit for an existing patient post-discharge. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home,
G2014	Limited (30 minutes) care plan oversight. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home, domiciliary, rest home, assisted living and/or
G2015	Comprehensive (60 mins) home care plan oversight. for use only in a medicare-approved cmmi model. (services must be furnished within a beneficiary's home, domiciliary, rest home, assisted living and/or

G2082	Office or other outpatient visit for the evaluation and management of an established patient that requires the supervision of a physician or other qualified health care professional and provision
G2083	Office or other outpatient visit for the evaluation and management of an established patient that requires the supervision of a physician or other qualified health care professional and provision
G2251	Brief communication technology-based service, e.g. virtual check-in, by a qualified health care professional who cannot report evaluation and management services, provided to an established patient, not originating from a related service provided within the
G2252	Brief communication technology-based service, e.g. 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 e/m service
G9978	Remote in-home visit for the evaluation and management of a new patient for use only in a medicare-approved bundled payments for care improvement advanced (bpci advanced) model episode of care, which requires these 3 key components: a problem focused history; a problem focused examination; and straightforward medical decision making, furnished in real time using interactive audio and video technology. counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the
G9979	Remote in-home visit for the evaluation and management of a new patient for use only in a medicare-approved bundled payments for care improvement advanced (bpci advanced) model episode of care, which requires these 3 key components: an expanded problem focused history; an expanded problem focused examination; straightforward medical decision making, furnished in real time using interactive audio and video technology. counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s)
G9980	Remote in-home visit for the evaluation and management of a new patient for use only in a medicare-approved bundled payments for care improvement advanced (bpci advanced) model episode of care, which requires these 3 key components: a detailed history; a detailed examination; medical decision making of low complexity, furnished in real time using interactive audio and video technology. counseling and coordination of care with other
G9981	Remote in-home visit for the evaluation and management of a new patient for use only in a medicare-approved bundled payments for care improvement advanced (bpci advanced) model episode of care, which requires these 3 key components: a comprehensive history; a comprehensive examination; medical decision making of moderate complexity, furnished in real time using interactive audio and video technology. counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the

G9982	Remote in-home visit for the evaluation and management of a new patient for use only in a medicare-approved bundled payments for care improvement advanced (bpci advanced) model episode of care, which requires these 3 key components: a comprehensive history; a comprehensive examination; medical decision making of high complexity, furnished in real time using interactive audio and video technology. counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the nature of the problem(s) and the
G9983	Remote in-home visit for the evaluation and management of an established patient for use only in a medicare-approved bundled payments for care improvement advanced (bpci advanced) model episode of care, which requires at least 2 of the following 3 key components: a problem focused history; a problem focused examination; straightforward medical decision making, furnished in real time using interactive audio and video technology. counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with
G9984	Remote in-home visit for the evaluation and management of an established patient for use only in a medicare-approved bundled payments for care improvement advanced (bpci advanced) model episode of care, which requires at least 2 of the following 3 key components: an expanded problem focused history; an expanded problem focused examination; medical decision making of low complexity, furnished in real time using interactive audio and video technology. counseling and coordination of care with other physicians, other qualified health care professionals or agencies
G9985	Remote in-home visit for the evaluation and management of an established patient for use only in a medicare-approved bundled payments for care improvement advanced (bpci advanced) model episode of care, which requires at least 2 of the following 3 key components: a detailed history; a detailed examination; medical decision making of moderate complexity, furnished in real time using interactive audio and video technology. counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the
G9986	Remote in-home visit for the evaluation and management of an established patient for use only in a medicare-approved bundled payments for care improvement advanced (bpci advanced) model episode of care, which requires at least 2 of the following 3 key components: a comprehensive history; a comprehensive examination; medical decision making of high complexity, furnished in real time using interactive audio and video technology. counseling and coordination of care with other physicians, other qualified health care professionals or agencies are provided consistent with the

NPRM for 2026 work RVU (includes 2.5% efficiency adjustment)
0.29
0.42
0.89
1.67
0.78
0.88
0.49
1.07
1.71
0.63
1.46
0.34
1.22
0.32
1.72
0.47
0.17
1.46
1.35
1.96

0.94
1.69
0.59
2.90
3.13
6.37
2.93
1.07
0.54
0.24
0.25
0.20
0.20
0.27
0.47
0.34
0.42
0.47
0.59
0.45
0.72
0.46
0.91

1. 56
2. 54
3. 41
0. 68
1. 27
1. 87
2. 54
0. 88
1. 51
2. 36
3. 12
0. 63
1. 17
1. 71
2. 54

0. 29
0. 24
0. 43
0. 67
0. 60
0. 59
0. 30
1. 07
0. 49
0. 24
1. 85
1. 61
1. 22
0. 30

4. 58
2. 19
0. 98
1. 48
2. 47
3. 30
3. 99
0. 98
1. 52
2. 27
3. 20
3. 99
1. 22
1. 76
1. 69
1. 69
0. 24
0. 59

0.10
0.18
0.34
0.68
1.02
1.37
0.68
0.68
0.60
0.59

0.16

0.98

1.48

2.47

3.30

3.99

0.98

1.52

2.27

3.20

3.99

1.22

1.76

0.68
0.68
0.24
0.49
0.47
0.91
1.38
2.37

3.09

0.47

0.95

1.46

2.06