



Physical Medicine Therapies Codes 2025 – HMSA

Physical and Occupational Therapy and Chiropractic modalities

CPT Code	Description
97012	Application of a modality to 1 or more areas; traction, mechanical
97014	Application of a modality to 1 or more areas; electrical stimulation (unattended
97016	Application of a modality to 1 or more areas; vasopneumatic devices
97018	Application of a modality to 1 or more areas; paraffin bath
97022	Application of a modality to 1 or more areas; whirlpool
97024	Application of a modality to 1 or more areas; diathermy (e.g., microwave)
97032	Application of a modality to 1 or more areas; electrical stimulation (manual), each 15 minutes
97034	Application of a modality to 1 or more areas; contrast baths, each 15 minutes
97035	Application of a modality to 1 or more areas; ultrasound, each 15 minutes
97036	Hubbard tank, each 15 minutes
97039	Unlisted modality (specify type and time if constant attendance)
97110	Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises to
7,110	develop strength and endurance, range of motion and flexibility
97112	Therapeutic procedure, 1 or more areas, each 15 minutes; neuromuscular reeducation of
	movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities
97113	Therapeutic procedure, 1 or more areas, each 15 minutes; aquatic therapy with therapeutic exercises
97116	Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair climbing)
97124	Therapeutic procedure, 1 or more areas, each 15 minutes; massage, including effleurage, petrissage and/or tapotement (stroking, compression, percussion)
97139	Unlisted therapeutic procedure (specify)
97140	Manual therapy techniques (e.g., mobilization/manipulation, manual lymphatic drainage, manual traction), one or more regions, each 15 minutes
97161	Physical therapy evaluation; low complexity, requiring these components: A history with no personal factors and/or comorbidities that impact the plan of care; An examination of body system(s) using standardized tests and measures addressing 1-2 elements from any of the following: body structures and functions, activity limitations, and/or participation restrictions; A clinical presentation with stable and/or uncomplicated characteristics; and Clinical decision making of low complexity using standardized patient assessment instrument and/or measurable assessment of functional outcome Typically, 20 minutes are spent face-to-face with the patient and/or family
97162	Physical therapy evaluation; moderate complexity, requiring these components: A history of present problem with 1-2 personal factors and/or comorbidities that impact the plan of care; An examination of body systems using standardized test and measure in addressing a total of 3 or more elements from any of the following: body structures and functions, activity limitations, and/or participation restrictions; An evolving clinical presentation with changing characteristics; and Clinical decision making of moderate complexity using standardized patient assessment instrument and/or measurable assessment of functional outcome Typically, 30 minutes are spent face-to-face with the patient and/or family

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97163	Physical therapy evaluation; high complexity, requiring these components: A history of present problem with 3 or more personal factors and/or comorbidities
	that impact the plan of care;
	An examination of body systems using standardized tests and measures addressing
	a total of 4 or more elements from any of the following: body structures and
	functions, activity limitations, and/or participation restrictions;
	A clinical presentation with unstable and unpredictable characteristics; and
	Clinical decision making of high complexity using standardized patient
	assessment instrument and/or measurable assessment of functional outcome
	Typically, 45 minutes are spent face-to-face with the patient and/or family
97164	Re-evaluation of physical therapy established plan of care, requiring these components:
	 An examination including a review of history and use of standardized tests and
	measures is required; and
	Revised plan of care using a standardized patient assessment instrument
	and/or measurable assessment of functional outcome
	Typically, 20 minutes are spent face-to-face with patient and/or family
97530	Therapeutic activities, direct (one-on-one) patient contact by the provider (use of
	dynamic activities to improve functional performance), each 15 minutes
97535	Self-care/home management techniques to enhance sensory processing and promote
	adaptive responses to environmental demands, direct (one-on-one) patient contact by the
	provider, each 15 minutes
97542	Wheelchair management (e.g., assessment, fitting, training), each 15 minutes
97550	Caregiver training in strategies and techniques to facilitate the patient's functional
	performance in the home or community (eg, activities of daily living [ADLs], instrumental
	ADLs [iADLs], transfers, mobility, communication, swallowing, feeding, problem solving,
	safety practices) (without the patient present), face to face; initial 30 minutes
97551	Caregiver training in strategies and techniques to facilitate the patient's functional
	performance in the home or community (eg, activities of daily living [ADLs], instrumental
	ADLs [iADLs], transfers, mobility, communication, swallowing, feeding, problem solving,
	safety practices) (without the patient present), face to face; each additional 15 minutes (List
	separately in addition to code for primary service)
97552	Group caregiver training in strategies and techniques to facilitate the patient's functional
	performance in the home or community (eg, activities of daily living [ADLs], instrumental
	ADLs [iADLs], transfers, mobility, communication, swallowing, feeding, problem solving,
	safety practices) (without the patient present), face to face with multiple sets of caregivers
97760	Orthotic(s) management and training (including assessment and fitting when not
	otherwise reported), upper extremity(s), lower extremity(s) and/or trunk, each 15 minutes
97761	Prosthetic training, upper and/or lower extremity(s), each 15 minutes
97763	Orthotic(s)/prosthetic(s) management and/or training, upper extremity(ies), lower
	extremity(ies), and/or trunk, subsequent orthotic(s)/prosthetic(s) encounter, each 15
	minutes
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97799	Unlisted physical medicine/rehabilitation service or procedure
HCPCS Codes	Description
G0283	Electrical stimulation (unattended), to one or more areas for indication(s) other than wound care, as part of a therapy plan of care
S8950	Complex lymphedema therapy, each 15 minutes

Occupational Therapy Applicable Codes:

CPT Code	Description
96112	Developmental test administration (including assessment of fine and/or gross motor, language,
	cognitive level, social, memory and/or executive functions by standardized
	developmental instruments when performed), by physician or other qualified health care
	professional, with interpretation and report; first hour
96113	Developmental test administration (including assessment of fine and/or gross motor, language,
	cognitive level, social, memory and/or executive functions by standardized developmental
	instruments when performed), by physician or other qualified health care professional, with
	interpretation and report; each additional 30 minutes (List separately in addition to code for
07012	primary procedure)
97012	Application of a modality to 1 or more areas; traction, mechanical
97014	Application of a modality to 1 or more areas; electrical stimulation (unattended)
97016	Application of a modality to 1 or more areas; vasopneumatic devices
97018	Application of a modality to 1 or more areas; paraffin bath
97022	Application of a modality to 1 or more areas; whirlpool
97024	Application of a modality to 1 or more areas; diathermy (e.g., microwave)
97032	Application of a modality to 1 or more areas; electrical stimulation (manual), each 15 minutes
97034	Application of a modality to 1 or more areas; contrast baths, each 15 minutes
97035	Application of a modality to 1 or more areas; ultrasound, each 15 minutes
97036	Application of a modality to 1 or more areas; Hubbard tank, each 15 minutes
97039	Unlisted modality (specify type and time if constant attendance)
97110	Therapeutic procedure, one or more areas, each 15 minutes; therapeutic exercises to
	develop strength and endurance, range of motion and flexibility
97112	Therapeutic procedure, 1 or more areas, each 15 minutes; neuromuscular reeducation
	of movement, balance, coordination, kinesthetic sense, posture, and/or proprioception for sitting
	and/or standing activities
97113	Therapeutic procedure, 1 or more areas, each 15 minutes; aquatic therapy with
,,,,,	therapeutic exercises
97116	Therapeutic procedure, 1 or more areas, each 15 minutes; gait training (includes stair
<i>//</i> 110	climbing)
97124	Therapeutic procedure, 1 or more areas, each 15 minutes; massage, including
	effleurage, petrissage and/or tapotement (stroking, compression, percussion)
97139	Unlisted therapeutic procedure (specify)
97140	Manual therapy techniques (e.g., mobilization/manipulation, manual lymphatic
> / I IV	drainage, manual traction), one or more regions, each 15 minutes
97165	Occupational therapy evaluation: low complexity, requiring these components:
	An occupational profile and medical and therapy history, which includes a brief history
	including review of medical and/or therapy records relating to the presenting problem; An
	assessment(s) that identifies 1-3 performance deficits (ie, relating to physical, cognitive, or
	psychosocial skills) that result in activity limitations and/or participation restrictions; and
	Clinical decision making of low complexity, which includes an analysis of the occupational
	profile, analysis of data from problem- focused assessment(s), and consideration of a limited
	profile, analysis of data from problem- focused assessment(s), and consideration of a limited

	number of treatment options. Patient presents with no comorbidities that affect occupational
	performance.
	Modification of tasks or assistance (eg, physical or verbal) with assessment(s) is not necessary to enable completion of evaluation component
	Typically, 30 minutes are spent face-to-face with the patient and/or family
97166	Occupational therapy evaluation: moderate complexity, requiring these components: An occupational profile and medical and therapy history, which includes an expanded review of medical and/or therapy records and additional review of physical, cognitive, or psychosocial history related to current functional performance; An assessment(s) that identifies 3-5 performance deficits (ie, relating to physical, cognitive, or psychosocial skills) that result in activity limitations and/or participation restrictions; and Clinical decision making of moderate analytic complexity, which includes an analysis of the occupational profile, analysis of data from detailed assessment(s), and consideration of several treatment options. Patient may present with comorbidities that affect occupational performance. Minimal to moderate modification of tasks or assistance (eg, physical or verbal) with assessment(s) is necessary to enable patient to complete evaluation component
	Typically, 45 minutes are spent face-to-face with the patient and/or family
97167	Occupational therapy evaluation: high complexity, requiring these components: An occupational profile and medical and therapy history, which includes review of medical and/or therapy records and extensive additional review of physical, cognitive, or psychosocial history related to current functional performance; An assessment(s) that identifies 5 or more performance deficits (i.e., relating to physical, cognitive, or psychosocial skills) that result in activity limitations and/or participation restrictions; and Clinical decision making of high analytic complexity, which includes an analysis of the patient profile, analysis of data from comprehensive assessment(s), and consideration of multiple treatment options. Patient presents with comorbidities that affect occupational performance. Significant modification of tasks or assistance (e.g., physical or verbal) with assessment(s) is necessary to enable patient to complete evaluation component
	Typically, 60 minutes are spent face to face with the nations and/or family
97168	Typically, 60 minutes are spent face-to-face with the patient and/or family Re-evaluation of occupational therapy established plan of care, requiring these components: An assessment of changes in patient functional or medical status with revised plan of care; An update to the initial occupational profile to reflect changes in condition or environment that affect future interventions and/or goals; and A revised plan of care. A formal reevaluation is performed when there is a documented change in functional status or a significant change to the plan of care is required
	Typically, 30 minutes are spent face-to-face with the patient and/or family
97530	Therapeutic activities, direct (one-on-one) patient contact by the provider (use of
97535	dynamic activities to improve functional performance), each 15 minutes Self-care/home management training (e.g., activities of daily living (ADL) and compensatory training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment), direct (one-on-one) patient contact, each 15 minutes
97542	Wheelchair management (e.g., assessment, fitting, training), each 15 minutes
97760	Orthotic(s) management and training (including assessment and fitting when not otherwise reported), upper extremity(ies), lower extremity(ies) and/or trunk, initial
97761	orthotic(s) encounter, each 15 minutes Prosthetic(s) training, upper and/or lower extremity(s), initial prosthetic(s) encounter, each 15 minutes

97763	Orthotic(s)/prosthetic(s) management and/or training, upper extremity(ies), lower
	extremity(ies), and/or trunk, subsequent orthotic(s)/prosthetic(s) encounter, each 15 minutes
97799	Unlisted physical medicine/rehabilitation service or procedure
HCPCS	Description
Code	
G0283	Electrical stimulation, (unattended), to one or more areas for indication(s) other than wound care, as part of a therapy plan of care
S8950	
	Complex lymphedema therapy, each 15 minutes

Chiropractic Applicable Codes:

CPT Code	Description
97012	Application of a modality to 1 or more areas; traction, mechanical
97014	Application of a modality to 1 or more areas; electrical stimulation (unattended)
97016	Application of a modality to 1 or more areas; vasopneumatic devices
97022	Application of a modality to 1 or more areas; whirlpool
97024	Application of a modality to 1 or more areas; diathermy (e.g., microwave)
97032	Application of a modality to 1 or more areas; electrical stimulation (manual), each 15 minutes
97035	Application of a modality to 1 or more areas; ultrasound, each 15 minutes
97110	Therapeutic procedure, 1 or more areas, each 15 minutes; therapeutic
	exercises to develop strength and endurance, range of motion and flexibility
97112	Therapeutic procedure, 1 or more areas, each 15 minutes; neuromuscular
	reeducation of movement, balance, coordination, kinesthetic sense, posture, and/or
	proprioception for sitting and/or standing activities
97140	Manual therapy techniques (e.g., mobilization/manipulation, manual
	lymphatic drainage, manual traction), 1 or more regions, each 15 minutes
97530	Therapeutic activities, direct (one-on-one) patient contact (use of dynamic
	activities to improve functional performance), each 15 minutes
97535	Self-care/home management training (e.g., activities of daily living (ADL) and compensatory
	training, meal preparation, safety procedures, and instructions in use of assistive technology devices/adaptive equipment), direct one-on-one
	contact, each 15 minutes
97799	Unlisted physical medicine/rehabilitation service or procedure
98940	Chiropractic manipulative treatment (CMT); spinal, one or two regions
98941	Chiropractic manipulative treatment (CMT); spinal, three to four regions
98942	Chiropractic manipulative treatment (CMT); spinal, five regions
	Office or other outpatient visit for the evaluation and management of a new patient, which
99202	requires a medically appropriate history and/or examination and straightforward medical
	decision making. When using time for code
	selection, 15-29 minutes of total time is spent on the date of the encounter.
99203	Office or other outpatient visit for the evaluation and management of a new patient, which
77203	requires a medically appropriate history and/or examination and low level of medical decision
	making. When using time for code selection,
	30-44 minutes of total time is spent on the date of the encounter.

99204	Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using time for code selection, 45-59 minutes of total time is spent on the date of the encounter.
99205	Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using time for code selection, 60-74 minutes of total time is spent on the date of the encounter.
99211	Office or other outpatient visit for the evaluation and management of an established patient, that may not require the presence of a physician or other qualified health care professional. Usually, the presenting problem(s) are minimal.
99212	Office or other outpatient 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 time for code selection, 10-19 minutes of total time is spent on the date of the encounter.
99213	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 20-29 minutes of total time is spent on the date of the encounter.
99214	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using time for code selection, 30-39 minutes of total time is spent on the date of the encounter.
99215	Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and high level of medical decision making. When using time for code selection, 40-54 minutes of total time is spent on the date of the encounter.
HCPCS Code	Description
G0283	Electrical stimulation (unattended), to one or more areas for indication(s) other than wound care, as part of a therapy plan of care