

## 2025 Final Medicare RVUs and Reimbursement for Allergy Services

CPT Code	Description	2024 RVUs (Mar. 9 - Dec. 31)	2024 National Payment Amt. (CF of \$33.2875) (Mar. 9 - Dec. 31)	Final 2025 RVUs	Final 2025 National Payment Amt. (CF of \$ 32.3465)	Payment Percent Change
95004	Percutaneous allergy skin tests	0.11	\$3.66	0.11	\$3.56	-2.83%
95012	Nitric oxide expired gas determination	0.57	\$18.97	0.56	\$18.11	-4.53%
95017	Venom testing; percutaneous and intradermal	0.26	\$8.65	0.25	\$8.09	-6.56%
95018	Drug/biological testing; percutaneous and intradermal	0.60	\$19.97	0.59	\$19.08	-4.45%
95024	Allergy test, intradermal	0.24	\$7.99	0.23	\$7.44	-6.88%
95027	Allergy test, intradermal for airborne	0.15	\$4.99	0.14	\$4.53	-9.31%
95070	Inhalation bronchial challenge testing	1.05	\$34.95	1.06	\$34.29	-1.90%
95076	Ingestion challenge test; first 120 minutes	3.70	\$123.16	3.74	\$120.98	-1.78%
95079	Ingestion challenge test; each additional hour	2.56	\$85.22	2.58	\$83.45	-2.07%
95115	Immunotherapy, one injection	0.31	\$10.32	0.32	\$10.35	0.31%
95117	Immunotherapy, two or more injections	0.37	\$12.32	0.37	\$11.97	-2.83%
95144	Antigen therapy services (single dose vial)	0.50	\$16.64	0.49	\$15.85	-4.77%
95145	Antigen therapy services (1 venom)	1.09	\$36.28	1.05	\$33.96	-6.39%
95146	Antigen therapy services (2 venoms)	2.03	\$67.57	1.93	\$62.43	-7.61%
95147	Antigen therapy services (3 venoms)	1.95	\$64.91	1.86	\$60.16	-7.31%

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95148	Antigen therapy services (4 venoms)	2.90	\$96.53	2.76	\$89.28	-7.52%
95149	Antigen therapy services (5 venoms)	3.86	\$128.49	3.67	\$118.71	-7.61%
95165	Professional services for the supervision of preparation and provision of antigens for allergen immunotherapy; single or multiple antigens (specify number of doses)	0.44	\$14.65	0.43	\$13.91	-5.04%
95170	Whole body extract of biting insect or other arthropod (specify number of doses)	0.33	\$10.98	0.32	\$10.35	-5.77%
95180	Rapid desensitization procedure, each hour	4.15	\$138.14	4.19	\$135.53	-1.89%
94010	Spirometry, including graphic record, total and timed vital capacity, expiratory flow rate measurement(s), with or without maximal voluntary ventilation	0.82	\$27.30	0.82	\$26.52	-2.83%

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94014	Patient-initiated spirometric recording per 30-day; includes education, transmission of spirometric tracing, data capture, analysis of transmitted data, periodic recalibration and review and interpretation	1.68	\$55.92	1.68	\$54.34	-2.83%
94060	Bronchodilation responsiveness, spirometry pre and post bronchodilator admin.	1.17	\$38.95	1.17	\$37.85	-2.83%
94070	Bronchospasm provocation eval. multiple spirometric determinations, with administered agents	1.89	\$62.91	1.90	\$61.46	-2.31%
96401	Anti-neoplastic injection	2.15	\$71.57	2.05	\$66.31	-7.35%
96372	Therapeutic injection	0.43	\$14.31	0.43	\$13.91	-2.83%
99202	Office/outpatient visit new	2.17	\$72.23	2.16	\$69.87	-3.27%
99203	Office/outpatient visit new	3.35	\$111.51	3.37	\$109.01	-2.25%
99204	Office/outpatient visit new	5.02	\$167.10	5.05	\$163.35	-2.25%
99205	Office/outpatient visit new	6.62	\$220.36	6.67	\$215.75	-2.09%
99211	Office/outpatient visit est	0.70	\$23.30	0.70	\$22.64	-2.83%
99212	Office/outpatient visit est	1.70	\$56.59	1.70	\$54.99	-2.83%
99213	Office/outpatient visit est	2.73	\$90.87	2.75	\$88.95	-2.11%
99214	Office/outpatient visit est	3.85	\$128.16	3.87	\$125.18	-2.32%
99215	Office/outpatient visit est	5.42	\$180.42	5.43	\$175.64	-2.65%