

G2211 INFOGRAPHIC

Q: When can you add G2211 to an office/outpatient E/M visit?

A: If you are ...

The assigned PCP

- acute or chronic care visit
- modifier 25 linked to 992XX office E/M code in conjunction with Medicare annual wellness visit, vaccine administration, or other Medicare preventive service
- established patient visit or new patient establishing care

Use G2211

Because you have established a continuity relationship with the patient

“Visit complexity inherent to E/M associated with medical care services that serve as the continuing focal point for all needed health care services ...” per code description

Not the assigned PCP

- chronic care visit

May use G2211

If you are providing ongoing care for a serious or complex condition

“Visit complexity inherent to E/M associated with ... medical care services that are part of ongoing care related to a patient’s single, serious condition or a complex condition,” per code description

Not the assigned PCP

- acute visit

Not likely to use G2211

Because you are not the assigned PCP and the visit does not involve a serious or complex condition for which you are providing ongoing care

The assigned PCP

- Medicare annual wellness visit (without 992XX office E/M code), transitional care management visit, or non-office E/M visit

Do not use G2211

Because complexity is already factored into the work of these codes, and G2211 only applies to office/outpatient E/M visits

Note: If you are covering for the assigned PCP, you are in the same specialty and group, and the patient has an ongoing relationship with your patient care team, it may be appropriate to report G2211. See <https://www.cms.gov/files/document/hcpcs-g2211-faq.pdf>.