

START SMART CODING TIP

G2211

Add-on code for E/M care – proposed 2027 changes & documentation

STATUS

Proposed for the 2027 MPFS • not yet final

What's Changing for G2211

CMS has proposed a significant shift in how G2211 is billed and reimbursed



CURRENT USE

G2211 recognizes providers who serve as the ongoing focal point for a patient's care – or who manage a single serious or complex condition over time.

Today it is billed as a **separate HCPCS add-on code** with a flat reimbursement amount.



PROPOSED FOR 2027

No longer billed as a separate HCPCS add-on code.

Instead, it becomes a **modifier** appended directly to the office/outpatient E/M code.

Payment increases by **16% of the base E/M reimbursement** – scaling with the visit level instead of a flat amount.

ELIGIBILITY

When G2211 Applies

Reserved for ongoing, relationship-based management – not isolated visits



ELIGIBLE VISITS

Office / outpatient E/M (**99202-99215**), home / residence E/M visits, and certain preventive services.



ONGOING MANAGEMENT

Ongoing management of **chronic or complex conditions**.



LONGITUDINAL CARE PLAN

Visits that advance a documented longitudinal care plan through **medication management, care coordination, or chronic disease management**.

FOR CODERS & AUDITORS

Documentation Review Tips

Verify the medical record supports each of these



FOCAL POINT OF CARE

The provider is the continuing focal point for the patient's overall care, or for managing a serious or complex condition.



ADVANCES A CARE PLAN

The encounter advances an ongoing, documented care plan – not just an isolated or acute problem.



LONGITUDINAL CARE

The note reflects chronic disease management, medication adjustments, care coordination, review of outside records, or shared decision-making.



COMPLEXITY BEYOND THE CC

Documentation shows complexity beyond the chief complaint – multiple comorbidities, high-risk medications, or coordination with other clinicians.

Example Provider Statements

Language that helps support G2211 in the record



"I serve as the patient's primary care clinician and ongoing focal point for management of their chronic and acute conditions."



"Today's visit reflects ongoing longitudinal care; I continue to coordinate and integrate care for this patient's multiple chronic conditions across settings and specialties."



"We reviewed interval events, test results, and outside records and updated the patient's chronic care plan, including medication adjustments and follow-up arrangements."

BOTTOM LINE

A Significant Shift – Stay Tuned

Proposed for 2027 and not yet final



These billing and reimbursement changes are **proposed for 2027 and are not yet final** – but they represent a significant shift in how CMS plans to recognize and reimburse longitudinal, relationship-based care.

Stay informed as CMS releases the final 2027 Physician Fee Schedule.