



VISIT COMPLEXITY ADD-ON CODE G2211

Policy # CR-101

Implementation Date: 1/1/26

Review Dates:

Revision Dates:

Disclaimer:

1. Policies are subject to change without notice.
2. Policies outline coverage determinations for Select Health Commercial, Select Health Medicare (CMS), and Select Health Community Care (Medicaid) plans. Refer to the "Policy" section for more information.

Description

HCPCS code G2211 is an add-on code that is reported in addition to outpatient evaluation and management (E/M) CPT codes 99202–99215 for the visit complexity that is inherent to E/M services that serve as the continuing focal point for all needed healthcare services and/or E/M services that are part of ongoing care related to a patient's single, serious, or complex condition.

Select Health defines a single, serious, or complex condition as a health condition that requires a continuous and active collaborative plan of care directed by a practitioner with specialized clinical knowledge, skill, and experience. Human immunodeficiency virus (HIV) infection and sickle cell disease are examples of such conditions.

COMMERCIAL PLAN POLICY AND CHIP (CHILDREN'S HEALTH INSURANCE PROGRAM)

Effective January 1, 2026, Select Health does NOT reimburse for the add-on HCPCS code G2211, as the visit complexity inherent to such an E/M service is considered bundled into the E/M service itself. Select Health will NOT consider additional payment for HCPCS code G2211 upon appeal, regardless of the medical record documentation.

SELECT HEALTH MEDICARE (CMS)

Select Health Medicare reimburses add-on HCPCS code G2211 when **ALL** the following criteria are met:

1. The E/M documentation indicates there was visit complexity because the practitioner is the focal point for all needed healthcare services **OR** the practitioner is involved in ongoing care for the patient's serious or complex condition;
2. The primary E/M code (CPT code range 99202–99215) was covered for the same date of service;
3. The primary E/M code was not appended with modifier 25 **OR** the primary E/M code was appended with modifier 25 to distinguish it from a separately billed procedure code that appears in Attachment 1 of Medicare Benefit Policy Manual Change Request 13705 or a preventive medicine visit code (CPT code range 99381–99397);
4. A major or minor surgical procedure code was not reported for the same date of service.

SELECT HEALTH COMMUNITY CARE (MEDICAID)

Select Health Community Care does NOT reimburse add-on HCPCS code G2211.

Applicable Code

HCPSC Code	Description
G2211	Visit complexity inherent to evaluation and management associated with medical care services that serve as the continuing focal point for all needed health care services and/or with medical care services that are part of ongoing care related to a patient's single, serious condition or a complex condition. (add-on code, list separately in addition to office/outpatient evaluation and management visit, new or established)

Sources

1. CMS Manual System, Medicare Benefit Policy Manual, Transmittal 13015, Change Request 13705 (2025).
<https://www.cms.gov/files/document/r13015otn.pdf>
2. *Current Procedural Terminology (CPT®)*, (2025) – American Medical Association
3. *How to Use the Office & Outpatient Evaluation and Management Visit Complexity Add-on Code G2211* (2025).
<https://www.cms.gov/files/document/mm13473-how-use-office-and-outpatient-evaluation-and-management-visit-complexity-add-code-g2211.pdf>
4. Noridian Medicare web page “Complexity Add-on Code G2211” (2025).
(<https://med.noridianmedicare.com/web/jeb/specialties/em/complexity-add-on-code-g2211>)

Disclaimer

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The codes for treatments and procedures applicable to this policy are included for informational purposes. Inclusion or exclusion of a procedure, diagnosis or device code(s) does not constitute or imply member coverage or provider reimbursement policy. Please refer to the member's contract benefits in effect at the time of service to determine coverage or non-coverage of these services as it applies to an individual member.

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