

To all, a Clarification for Using G2211

The article written on this topic in March 2023 stated:

CMS will NOT reimburse G2211 if paired with any CPT® that is not considered an E&M Code (99202-99215, 92002-92014) such as OCT, Fundus photos, Visual Fields, any surgical procedures

While this statement is true, I do not think it was clearly stated to indict the proper use.

The following are true:

CMS will reimburse G2211 when billed with E&M codes (99202-99215)

CMS will NOT reimburse G2211 when billed with General Ophthalmologic Codes (92002-92014)

CMS will reimburse if G2211 is used with E&M codes (99202-99215) PLUS Special Ophthalmologic Codes (92015-92499) or other procedures that do NOT require a -25 modifier when billed with an E&M code

HOWEVER, G2211 cannot be paired only with Special Ophthalmologic Codes when performing these procedures as stand-alone on a day other than with an E&M code service such as only a visual field or only an OCT.

Examples:

Valid: 99213 + 92134 + G2211 (will pay with any procedure not requiring the -25 modifier)

Invalid: 99213-25 + 68761 + G2211 (will not pay when -25 modifier is required)

Invalid: 92014 + 92134 + G2211 (will not pay on 92000 examination codes)

Invalid: 92134 + G2211 (will not pay without an E&M 99000 examination code)

I hope this clears up any confusion on the use of the G2211 add-on code.

Rebecca Wartman OD

MOA Third Party Consultant