

Evaluation and Management Services

2021 vs 2022 National Payment Comparison

Note: 2021 conversion factor = 34.8931; 2022 REVISED conversion factor = \$33.5983

CPT	Descriptor	2021 Payment	2022 Payment	Change
99202	Office/outpatient visit new patient	\$73.97	\$ 71.90	(\$2.07)
99203	Office/outpatient visit new patient	\$113.75	\$ 110.54	(\$3.21)
99204	Office/outpatient visit new patient	\$169.93	\$ 164.63	(\$5.30)
99205	Office/outpatient visit new patient	\$224.36	\$ 217.72	(\$6.64)
99211	Office/outpatient visit established patient	\$23.03	\$ 22.85	(\$0.18)
99212	Office/outpatient visit established patient	\$56.88	\$ 55.77	(\$1.11)
99213	Office/outpatient visit established patient	\$92.47	\$ 89.37	(\$3.10)
99214	Office/outpatient visit established patient	\$131.20	\$ 125.99	(\$5.21)
99215	Office/outpatient visit established patient	\$183.19	\$ 177.74	(\$5.45)

HCPCS Add-on Codes*	Descriptor	2021 Payment	2022 Payment	Change
G2212	Prolonged office or other outpatient evaluation and management service(s) beyond the maximum required time of the primary procedure which has been selected using total time on the date of the primary service; each additional 15 minutes by the physician or qualified healthcare professional, with or without direct patient contact	\$33.50	\$32.25	(\$1.25)

*G2211 implementation delayed until 2024



2021 vs. 2022 Relative Value Unit Comparison

CPT	Descriptor	2021 RVU	2022 RVU	Change
99202	Office/outpatient visit new	2.12	2.14	0.02
99203	Office/outpatient visit new	3.26	3.29	0.03
99204	Office/outpatient visit new	4.87	4.90	0.03
99205	Office/outpatient visit new	6.43	6.48	0.05
99211	Office/outpatient visit est	0.66	0.68	0.02
99212	Office/outpatient visit est	1.63	1.66	0.03
99213	Office/outpatient visit est	2.65	2.66	0.01
99214	Office/outpatient visit est	3.76	3.75	0.01
99215	Office/outpatient visit est	5.25	5.29	0.04

HCPCS Add-on Codes	Descriptor	2021 RVU	2022 RVU	Change
G2212	Prolonged office or other outpatient evaluation and management service(s) beyond the maximum required time of the primary procedure which has been selected using total time on the date of the primary service; each additional 15 minutes by the physician or qualified healthcare professional, with or without direct patient contact	0.96	0.96	0.00

*G2211 implementation delayed until 2024