G2211 to B1 and B2 Switch Checklist

Use this sheet to move your clinic from G2211 to modifiers B1 and B2 without missed payments. Write a name next to each task, add a due date and tick the box once it's done.

Before December 2026

	TASK	OWNER	DUE DATE
☐	Pull every G2211 claim and sort it by clinician and visit level	**Billing lead**	
☐	Estimate your yearly B1 change from those visit counts	**Practice manager**	
☐	Get your accountable care organization's (ACO's) written yes or no on B2	**ACO lead**	
☐	Confirm each B2 clinician's Taxpayer Identification Number (TIN) and National Provider Identifier (NPI) on the ACO participant list	**Credentialing**	
☐	Ask each Medicare Advantage and private plan whether it accepts B1 and B2	**Billing lead**	

Early December 2026

	TASK	OWNER	DUE DATE
☐	Turn off G2211 for visits on or after January 1, 2027	**System admin**	
☐	Link B1 to the 17 eligible office and home visit codes	**System admin**	
☐	Limit B2 to clinicians on your ACO participant list	**System admin**	
☐	Add claim checks that stop B1 and B2 on one line and flag modifier 25	**Billing lead**	
☐	Set up modifier 99 the way your Medicare Administrative Contractor (MAC) asks	**Billing lead**	
☐	Set payment posting to expect 80% same-day payments	**Billing lead**	
☐	Review productivity pay formulas and doctor contracts	**Practice leader**	

Want help building and testing these rules?
OmniMD's billing team can set them up in your electronic health record (EHR) system. Visit omnimd.com/medical-billing-services

Late December 2026

	TASK	OWNER	DUE DATE
☐	Walk clinicians through the B1 vs B2 decision tree	Coding lead	
☐	Share the sample plan of care lines with every clinician	Coding lead	
☐	Send test claims for an office visit, telehealth visit, home visit, B2 visit and a modifier 25 visit with an Annual Wellness Visit	Billing lead	
☐	Show the front desk how the new visit charge looks on a patient bill	Front desk lead	
☐	Keep G2211 open for December 2026 visits that get billed late	Billing lead	

First weeks of January 2027

	TASK	OWNER	DUE DATE
☐	Hold your first batch of Medicare claims for a manual check	Billing lead	
☐	Review payments every week for modifier denials and 80% cuts	Billing lead	
☐	Check your MAC's website and new Medicare instructions for updates	Coding lead	
☐	Track B1 and B2 visit counts in your monthly reports	Practice manager	

NOTES AND OPEN QUESTIONS

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