

Internal Medicine Coding Alert

CPT 2004 Update: New Injection Descriptors Make Your Coding Easier

Although CPT revised injection codes 20550-20552 to clarify injection site and physician administration, the revisions will not change the way you report the internist's tendon sheath and trigger point injections.

Three injection codes will carry revised descriptors in 2004:

- 1. 20550 Injection(s); single tendon sheath, or ligament, aponeurosis (e.g., plantar "fascia"). You can now assign 20550 when the internist injects a patient's "aponeurosis," a sheetlike fibrous membrane that resembles a flattened tendon and binds muscles together or connects muscle to bone. Before CPT 2004, 20550's descriptor didn't specify whether the code included aponeurosis injection.
- 2. 20551 ... single tendon origin/insertion. This code now specifically represents a physician administering a single injection into a single tendon. The old descriptor didn't specify a single tendon or insertion.
- 3. 20552 Injection(s); single or multiple trigger point(s), one or two muscle(s). CPT added "injection(s)" to the definition, which does not change how you should report 20552. You should still submit 20552 for the physician's trigger point injection of one or two muscles.