

Eli's Rehab Report

Reader Question: Report Trigger Point Code Once for 3 Sites

Question: Our physiatrist performed trigger point injections into the patient's back (rhomboides minor), right arm (deltoid, biceps and triceps) and right leg (rectus femoris, biceps femoris, vastus intermedius and vastus medialis). Which codes can we report?

Idaho Subscriber

Answer: Although your physiatrist injected nine muscles, you should report 20553 (Injection[s]; single or multiple trigger point[s]; three or more muscles) only one time.

According to the September 2003 CPT Assistant, you should report 20553 "one time per session regardless of the number of injections or muscles injected."

Some practices attempt to circumvent this guideline in various ways. Some physicians inject three muscles and ask the patient to return the next day for three more, and another day for the final three, thus allowing the practices to report 20553 three times that week. If you bill this way, you will probably face denials for additional injections later in the year, because many carriers only allow you to report trigger point codes four times per year, after which the physiatrist must submit a letter explaining why more injections were necessary. And some insurers may consider this "unbundling," because the practice deliberately split up the injections, solely to go around the code's regulations and collect more money.

Other practices report multiple units of 20551 (Injection[s]; single tendon origin/insertion) instead of reporting 20553. While this might bring your practice additional reimbursement, it could also get you into trouble. According to the policy of Cigna Medicare (a Part B carrier in Tennessee, North Carolina and Idaho), "We have noted that some providers who had been billing multiple trigger point injections along the spine have now moved to billing for multiple tendon origin/insertion codes -- same locations/same beneficiaries (previously treated with trigger point injections)." The policy states that patients must have tendonitis or tenosynovitis to support medical necessity for 20551, and that multiple tendon injections "should be extraordinarily rare."