Codify
BY AAPC

Outpatient Facility Coding Alert

Reader Question: 20552 Might Be Bundled Into 20610

Question: Is 20552 bundled into 20610?

New Jersey Subscriber

Answer: According to the latest Correct Coding Initiative (CCI) edits, you cannot bill 20552 (Injection[s]; single or multiple trigger point[s], 1 or 2 muscle[s]) with 20610 (Arthrocentesis, aspiration and/or injection; major joint or bursa [e.g., shoulder, hip, knee joint, subacromial bursa]) in the same anatomic location.

Pay attention: If the injections are administered in different anatomic locations, you can report both codes. However, because code 20552 is a Column 2 code for 20610, append a modifier to 20552 to differentiate the services and override the CCI bundle.

Tips: Trigger point codes are grouped to reflect the total number of muscles treated and not how many injections the provider performs. When the provider treats one or two muscles with injections, regardless of the number of injections, use 20552. When the provider performs trigger points on three or more muscles, you should use 20553 (Injections, single or multiple trigger point(s), 3 or more muscle(s)).