

Outpatient Facility Coding Alert

Reader Question: Tie the Trigger Point Injections With 20552 and 20553

Question: A patient suffered whiplash from crashing his car into a parked vehicle, and the physician performed trigger point injections to four sites to treat the condition. Based on our charge sheet, I reported 20552x2 and got a denial for the second code. Why? The descriptor for 20552 states "one or two muscle[s]," so I thought four muscles meant reporting the code twice.

Illinois Subscriber

Answer: For four muscles, the appropriate code is 20553 (Injection[s]; single or multiple trigger point[s], 3 or more muscle[s]).

You should use 20552 (...single or multiple trigger point[s], one or two muscle[s]) for one or two muscles only. Ensure your charge sheet includes both options so you may choose between them based on the patient's case. When you resubmit your claim, report a single unit of 20553 for all four trigger point injections. Also, remember to link the appropriate diagnosis codes to represent the patient's whiplash and cause of injury. ICD-10 includes multiple options for both neck sprain and motor vehicle accidents, so report the one that best matches your provider's documentation.