



CLINICAL GUIDELINES

CMM-202: Trigger Point Injections

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VERSION 1.0.2026



EviCore healthcare Clinical Decision Support Tool Diagnostic Strategies: This tool addresses common symptoms and symptom complexes. Imaging requests for individuals with atypical symptoms or clinical presentations that are not specifically addressed will require physician review. Consultation with the referring physician, specialist, and/or individual's Primary Care Physician (PCP) may provide additional insight.

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Definitions

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Definitions

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Myofascial Trigger Point

a discrete, focal, hyperirritable spot found within a taut band of skeletal muscle or its fascia which, when provocatively compressed, causes local pain or tenderness as well as characteristic referred pain, tenderness, and/or autonomic phenomena. Digital palpation, as well as needle insertion into the trigger point, can often lead to a local twitch response. A local twitch response is a transient visible or palpable contraction of the muscle. The presence of characteristic referred pain, tenderness, muscle shortening, and/or autonomic phenomena (e.g., vasomotor changes, pilomotor changes, muscle twitches, etc.) is necessary to render the diagnosis of a myofascial trigger point.

- **Note:** Tender points within a muscle or its fascia (which do not refer pain, tenderness, and/or autonomic phenomena, and lack a local twitch response) cannot be considered a myofascial trigger point.

Trigger Point Injection:

an injection of a local anesthetic (with or without the addition of a corticosteroid) into clinically identified myofascial trigger points.

General Guidelines

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General Guidelines

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Application of Guideline

- The determination of medical necessity for the performance of trigger point injections is always made on a case-by-case basis.
- The guideline criteria are only applicable to trigger point injections performed for myofascial trigger point pain.
 - Trigger point injections performed for any other type of pain or condition (e.g., pelvic pain) are considered **not in scope** for this guideline criteria.

Injectates

- When criteria have been met, trigger point injections are considered **medically necessary** when performed with an anesthetic agent (with or without a steroid).

Frequency & Number of Injections/Procedures

- When criteria have been met, only one invasive modality or procedure performed on the same date of service is considered **medically necessary**.
- When criteria have been met, trigger point injections are considered **medically necessary** at an interval of two (2) months or more.
- When criteria have been met, up to four (4) sessions of trigger point injections per body region during a rolling 12-month period are considered **medically necessary**.

Health Equity Considerations

Health equity is the highest level of health for all individuals; health inequity is the avoidable difference in health status or distribution of health resources due to the social conditions in which individuals are born, grow, live, work, and age. Social determinants of health are the conditions in the environment that affect a wide range of health, functioning, and quality of life outcomes and risks. Examples include the following: safe housing, transportation, and neighborhoods; racism, discrimination, and violence; education, job opportunities, and income; access to nutritious foods and physical activity opportunities; access to clean air and water; and language and literacy skills.

Indications

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Indications

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Initial Trigger Point Injections

- Trigger point injections are considered **medically necessary** when BOTH of the following criteria have been met:
 - physical exam identifies a myofascial trigger point as evidenced by ANY of the following findings:
 - characteristic referred pain
 - tenderness
 - muscle shortening
 - autonomic phenomena (e.g., vasomotor changes, pilomotor changes, muscle twitches, etc.)
 - performed using a local anesthetic agent (with or without a steroid)

Repeat Trigger Point Injections

- Repeat trigger point injections are considered **medically necessary** when BOTH of the following criteria have been met:
 - documented pain relief of at least 50% with evidence of functional improvement for at least six (6) weeks following the prior trigger point injection(s)
 - performed as part of an adjuvant-care program which includes conservative self-care (i.e., muscle stretching, ADL training, or therapeutic exercise)

Non-Indications

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Non-Indications

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Not Medically Necessary

- Trigger point injections performed without meeting the criteria in the Definitions, the General Guidelines, and the Indications sections are considered **not medically necessary**.
- Trigger point injections performed with any other injectates, administered alone or in combination, are considered **not medically necessary**.

Codes (CMM-202)

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Codes (CMM-202)

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The inclusion of any code in this table does not imply that the code is under management or requires prior authorization. Refer to the applicable health plan for management details. Prior authorization of a code listed in this table is not a guarantee of payment. The Certificate of Coverage or Evidence of Coverage policy outlines the terms and conditions of the member's health insurance policy.

Code	Code Description/Definition
20552	Injection(s); single or multiple trigger point(s), 1 or 2 muscle(s)
20553	Injection(s); single or multiple trigger point(s), 3 or more muscle(s)

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