

5221.6200

Subp. 5. **Therapeutic injections** Injection modalities. Injection modalities are indicated as set forth in items A to ~~C~~ D. Use of injections can extend past the 12-week limit on passive treatment modalities so long as the maximum treatment for injections is not exceeded.

A. Therapeutic injections, including injections of trigger points, facet joints, facet nerves, sacroiliac joints, sympathetic nerves, epidurals, ~~nerve roots~~, and peripheral nerves. Therapeutic injections can only be given in conjunction with active treatment modalities directed to the same anatomical site. Need for subsequent therapeutic injections is determined based on progressive improvement as described in part 5221.6050, subpart 1, item B.

(1) Trigger point injections:

- (a) time for treatment response, within 30 minutes;
- (b) maximum treatment frequency, once per week to any one site if a positive response to the first injection at that site. If subsequent injections at that site demonstrate diminishing control of symptoms or fail to facilitate objective functional gains, then trigger point injections should be redirected to other areas or discontinued. No more than three injections to different sites are reimbursable per patient visit; and
- (c) maximum treatment, four injections to any one site.

(2) Sacroiliac joint injections:

- (a) time for treatment response, within one week;
- (b) maximum treatment frequency, can repeat injection two weeks after the previous injection if a positive response to the first injection. Only two injections are reimbursable per patient visit; and
- (c) maximum treatment, two injections to any one site.

(3) Facet joint or nerve injections:

- (a) time for treatment response, within one week;
- (b) maximum treatment frequency, once every two weeks to any one site if a positive response to the first injection. If subsequent injections demonstrate diminishing control of symptoms or fail to facilitate objective functional gains, then injections should be discontinued. No more than three injections to different sites are reimbursable per patient visit; and

(c) maximum treatment, three injections to any one site.

~~(4) Nerve root blocks:~~

~~(a) time for treatment response, within one week;~~

~~(b) maximum treatment frequency, can repeat injection two weeks after the previous injection if a positive response to the first injection. Only three injections to different sites are reimbursable per patient visit; and~~

~~(c) maximum treatment, two injections to any one site.~~

~~(5 4) Epidural injections:~~

~~(a) time for treatment response, within ~~one~~ two weeks;~~

~~(b) maximum treatment frequency, no more than one injection at a single level may be injected per patient visit. A bilateral injection is allowed and is considered one injection for maximum treatment purposes. Subsequent injections may occur once every two weeks if a positive response to the first injection. If subsequent injections fail to demonstrate progressive improvement under item A, diminishing control of symptoms or fail to facilitate objective functional gains, then injections should be discontinued at that level. Only one injection is reimbursable per patient visit; and~~

~~(c) maximum treatment, ~~three~~ four injections in a 12-month period.~~

B. Permanent lytic or sclerosing injections, including radio frequency denervation of the facet joints. These injections can only be given in conjunction with active treatment modalities directed to the same anatomical site:

(1) time for treatment response, within one week;

(2) maximum treatment frequency, may repeat once for any site; and

(3) maximum duration, two injections to any one site.

C. Nerve root blocks. These diagnostic injections are designed to assess if a particular nerve root is the cause of symptoms and if the patient would benefit from other treatment modalities:

(1) time for treatment response, immediately or within one day; and

(2) maximum treatment, no more than one injection to a single nerve root and no more than one injection per patient visit. Subsequent injections must be to an alternative nerve root.

€ D. Prolotherapy and botulinum toxin injections are not indicated in the treatment of low back problems and are not reimbursable.