

MEDICAL POLICY STATEMENT

Georgia Medicaid

Policy Name & Number	Date Effective
Trigger Point Injections-GA MCD-MM-0221	07/01/2024
Policy Type	
MEDICAL	

Medical Policy Statement prepared by CareSource and its affiliates are derived from literature based on and supported by clinical guidelines, nationally recognized utilization and technology assessment guidelines, other medical management industry standards, and published MCO clinical policy guidelines. Medically necessary services include, but are not limited to, those health care services or supplies that are proper and necessary for the diagnosis or treatment of disease, illness, or injury and without which the patient can be expected to suffer prolonged, increased or new morbidity, impairment of function, dysfunction of a body organ or part, or significant pain and discomfort. These services meet the standards of good medical practice in the local area, are the lowest cost alternative, and are not provided mainly for the convenience of the member or provider. Medically necessary services also include those services defined in any Evidence of Coverage documents, Medical Policy Statements, Provider Manua



A. Subject

Trigger Point Injections

B. Background

Myofascial trigger points are self-sustaining hyper-irritative foci in any skeletal muscle, often occurring in response to strain produced by acute or chronic overload. There is no associated neurologic deficit, and the pain may be aggravated by hyperextension of the spine, standing, and walking. These trigger points produce a referred pain pattern characteristic for that individual muscle. Each pattern becomes part of a single muscle myofascial pain syndrome (MPS) which is responsive to appropriate treatment. To successfully treat chronic myofascial pain syndrome, each single muscle syndrome needs to be identified along with every perpetuating factor. The purpose of a trigger point injection (TPI) is to treat not only the symptom but also the cause through the injection of a single substance (eg, a local anesthetic) or a mixture of substances (eg, a corticosteroid with a local anesthetic) directly into the affected body part in order to alleviate inflammation and pain.

Interventional procedures for management of pain should be part of a comprehensive pain management care plan that incorporates an initial trial of conservative treatment utilizing appropriate medications, physical therapy modalities, and behavioral support as

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- B. Injections may be repeated only with documented positive results to the most recent trigger point injection of the sal Tf 1 0 4 0 (t)-44 0 (t)-44 BT /F1 9 Tf 1 0 0 1 W* n BT

The MEDICAL Policy Statement detailed above has received due consideration as defined in the MEDICAL Policy Statement Policy and is approved.



	05/13/2020	Annual Update and Revision: PA is required for each trigger point injection.
	09/01/2020	Revisions include: <i>such as</i> was changed to <i>ONE of the following</i> : I. B. 2. and 3.
	05/26/2021	Annual Update: Removed PA language.
	04/15/2022	Annual Review. Updated references, formatting, split policy into initial and subsequent injections, added conservative care modalities
	03/29/2023	Annual review: updated references, added definition and payment information. Approved at Committee.
	02/28/2024	Annual review: editorial changes and updated references. Approved at Committee.
Date Effective	07/01/2024	
Date Archived		

H. References

1. Appasamy M, Lam C, Alm J, Chadwick AL. Trigger point injections. *Phys Med Rehabil Clin N Am.* 2022;33(2):307-329. doi:10.1016/j.pmr.2022.09.010. Epub 2022 Sep 15. PMID: 36115190

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