Billing and Coding Guidelines

LCD Database ID Number
L31359

LCD Title
Sacroiliac Joint Injections

Contractor's Determination Number
MS-009

General

1. Procedure code 27096 is to be used only with imaging confirmation of intra-articular needle positioning.
2. If the muscles surrounding the sacroiliac joint are injected in lieu of the joint, then a trigger point injection should be reported and not a sacroiliac joint injection.
3. It is not appropriate to use CPT code 20610, Arthrocentesis, aspiration and/or injection; major joint or bursa (eg, shoulder, hip, knee joint, subacromial bursa) for SI joint injections.
4. Procedure code 27096 represents a unilateral procedure. If bilateral SI joint arthrography is performed, 27096 should be reported with a –50 modifier.
5. A SI joint injection (27096) is not a stand-alone code and one of the following codes should be billed in conjunction with this code:
   a. When a formal SI joint arthrography is performed with the SI joint injection, procedure code 73542 should be reported for the radiologic supervision and interpretation of sacroiliac joint arthrography.
   b. Do not bill CPT code 73542 (Radiologic examination, sacroiliac joint arthrography, radiological supervision and interpretation) for injection of contrast to verify needle position. The CPT code 73542 is only to be billed for a medically necessary diagnostic study and requires a full interpretation and report.
   c. When fluoroscopic guidance is used to locate the specific anatomic site for needle insertion, procedure code 77003 should be reported.
   d. When CT guidance is used to locate the specific anatomic site for needle insertion, procedure code 77012 should be reported.
6. CPT code G0260 should be billed by facilities paid by OPPS.
7. Use CPT code 64999 (Unlisted procedure, nervous system) for pulsed radiofrequency and the denervation procedures of the sacro-iliac joint/nerves. Pulsed radiofrequency for denervation is considered investigational and therefore, not medically necessary. Sacro-iliac joint/nerve denervation procedures are also considered investigational and not medically necessary.

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