

OFFICIAL STATEMENT

1111 North Fairfax Street
Alexandria, VA 22314-1488
703 684 2782
703 684 7343 fax
www.apta.org

Billing of Dry Needling by Physical Therapists

In recent years, APTA has been asked by various state regulatory entities to comment on whether or not dry needling is consistent with the physical therapist scope of practice.

Dry needling is a skilled intervention provided by physical therapists that uses a thin filiform needle to penetrate the skin and stimulate underlying myofascial trigger points, muscular tissues, and connective tissues for the management of neuromuscular pain and movement impairments. Dry needling is part of the physical therapist professional scope of practice and has been recognized as being part of the legal scope of practice in a majority of states.

It is been brought to our attention that there is question as to how this intervention should be coded and billed; specifically whether dry needling services should be billed utilizing the CPT code 97140 (manual therapy). There are many differences between the terms and description of *practice* by a physical therapist, and the description of categories of how such services should be coded and billed for *payment*. It is important for practitioners to be cognizant of the descriptors and nomenclature of the CPT code set that is maintained by the American Medical Association (AMA) through the Current Procedural Terminology (CPT) Editorial Panel. The CPT code set provides a uniform language that accurately describes medical, surgical, and diagnostic services, and thereby serves as an effective means for reliable communication among physicians, qualified health care professionals, patients, and third parties.

Practitioners who seek to bill any third party payer should first check the payer's coverage policy to determine if dry needling is a covered service and if the policy specifies which code is used to report the service. Absent a specific payer policy, the use of CPT code 97140 for the performance of dry needling should **not** be utilized. The CPT code 97140, published in 1998, represents a collapsing of five other CPT codes that were published prior to 1998. The codes that were collapsed and services that were represented prior to the publication of 97140 included; soft tissue mobilization, joint mobilization, manipulation by a physician, initial area, and each additional area, and manual traction. Currently, there is no CPT code that describes dry needling nor do any of the existing CPT codes include dry needling techniques in clinical vignettes utilized by AMA in their process to establish relative value units.

CPT specifically states to select the procedure or service that accurately identifies the service performed. Do not select a CPT code that merely approximates the service provided. If no such specific code exists, then report the service using the appropriate unlisted physical medicine/rehabilitation service or procedure code 97799.