



## **Intramuscular Manual Therapy Technique: Dry Needling and Athletic Trainers**

### **Intramuscular Manual Therapy: Dry Needling**

Athletic trainers (ATs) are credentialed health care providers who employ a myriad of techniques to support patient care outcomes. At the direction of and/or under the supervision of a physician, ATs provide health care/athletic training services to a defined patient population designated by their supervising physician and state practice act. Athletic trainers utilize their skillset gained through professional, post-professional, and/or continuing education training to provide quality care within the domains of clinical practice defined by the Board of Certification, Inc.<sup>1</sup> The Therapeutic Intervention domain for certified ATs includes the use of manual therapy techniques with and/or without adjunctive tools.<sup>1</sup> Implementing therapeutic techniques, such as intramuscular manual therapy (e.g., dry needling), ATs can use solid filiform needles for the application of Western medical concepts/theories for the treatment of musculoskeletal pain and soft tissue dysfunction. The insertion of filiform needles into specific targets may increase local blood flow to tissue and relax a trigger point related muscular tension, resulting in decreased pain and improved function.<sup>2,3,4,5</sup> Intramuscular manual therapy performed by an AT is not acupuncture and does not apply acupuncture theories. Clinical health care providers, including ATs, use intramuscular manual therapy techniques, such as dry needling, to support patient outcomes.<sup>2,3,4,5</sup> Numerous post-professional certification programs exist, including for dry needling, which provide ATs with the requisite knowledge and skills to safely administer intramuscular manual therapy techniques.<sup>7</sup>

### **Athletic Training Regulatory Information**

Athletic trainers, certified in good standing by the Board of Certification, Inc.<sup>6</sup> may utilize their education, training, and skillset defined within the practice domains to care for their patients to the extent allowable by state law. Athletic trainers should review regulatory documents and consult their supervising physician and/or legal counsel for guidance regarding their practice.

### **Commercial Insurance Coverage**

Athletic trainers who wish to bill a third-party payor for an intramuscular manual therapy technique, such as dry needling, should first check the patient's insurance policy to determine appropriate codes. Unless restricted by athletic training regulatory policy, ATs may use a self-pay (by the patient) schedule for billing and reimbursement.

### **Current Procedural Terminology (CPT) Coding**

In January 2020, CPT codes 20560 and 20561 were created for dry needling. If the insurer does not have a policy which specifies the CPT code to use, ATs could use the unlisted physical medicine/rehabilitation service or procedure code (CPT code 97799).

For more information, contact:

Amy Callender, Director of Government Affairs for NATA, at (972) 532-8853 or [amyc@nata.org](mailto:amyc@nata.org).

Resources: <sup>1</sup>[BOC Practice Analysis](#) (v.8), <sup>2</sup>[Article 1](#), <sup>3</sup>[Article 2](#), <sup>4</sup>[Article 3](#), <sup>5</sup>[Article 4](#), <sup>6</sup>[BOC Standards of Professional Practice](#) (v. January 2022), <sup>7</sup>[BOC Approved Provider Program Directory](#)