Medical Policy

Balloon Sinuplasty for Treatment of Chronic Sinusitis

Table of Contents
- Policy: Commercial
- Policy: Medicare
- Authorization Information
- Coding Information
- Description
- Policy History
- Information Pertaining to All Policies
- References

Policy Number: 582
BCBSA Reference Number: 7.01.105

Related Policies
None

Policy
Commercial Members: Managed Care (HMO and POS), PPO, and Indemnity

Medicare HMO Blue<sup>SM</sup> and Medicare PPO Blue<sup>SM</sup> Members
The use of a catheter-based inflatable device (balloon sinuplasty) as a stand-alone procedure for the
treatment of sinusitis is INVESTIGATIONAL.

Note: A catheter-based inflatable device may be used as a tool during sinuplasty surgery, but it is not
reimbursed separately.

Prior Authorization Information
Commercial Members: Managed Care (HMO and POS)
This is NOT a covered service.

Commercial Members: PPO, and Indemnity
This is NOT a covered service.

Medicare Members: HMO Blue<sup>SM</sup>
This is NOT a covered service.

Medicare Members: PPO Blue<sup>SM</sup>
This is NOT a covered service.

CPT Codes / HCPCS Codes / ICD-9 Codes
The following codes are included below for informational purposes. Inclusion or exclusion of a code does
not constitute or imply member coverage or provider reimbursement. Please refer to the member’s
contract benefits in effect at the time of service to determine coverage or non-coverage as it applies to an individual member.

Providers should report all services using the most up-to-date industry-standard procedure, revenue, and diagnosis codes, including modifiers where applicable.

### CPT Code

<table>
<thead>
<tr>
<th>CPT codes:</th>
<th>Code Description</th>
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<tr>
<td>31295</td>
<td>Nasal/sinus endoscopy, surgical; with dilation of maxillary sinus ostium (eg, balloon dilation), transnasal or via canine fossa</td>
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<tr>
<td>31296</td>
<td>Nasal/sinus endoscopy, surgical; with dilation of frontal sinus ostium (eg, balloon dilation)</td>
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<tr>
<td>31297</td>
<td>Nasal/sinus endoscopy, surgical; with dilation of sphenoid sinus ostium (eg, balloon dilation)</td>
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### Description

Chronic rhinosinusitis is characterized by purulent nasal discharge, usually without fever, that persists for weeks to months. Symptoms of congestion, mild pain and/or headache often accompany the nasal discharge. Thickening of mucosa may restrict or close natural openings between sinus cavities and the nasal fossae. Considerable variation exists in the location and shape of these sinus ostia.

In some cases of chronic sinusitis, surgical drainage may be necessary. Functional endoscopic sinus surgery has become an important aspect for surgical management of chronic sinusitis and may be used when patients fail to respond to aggressive medical management. This procedure restores patency and allows air and mucus transport through the natural ostium. A new procedure, balloon sinuplasty, is being discussed as an alternative to endoscopic sinus surgery for those with chronic sinusitis who fail medical management. The procedure involves placing a guidewire in the sinus ostium, advancing a balloon over the guidewire, and then stretching the opening by inflating the balloon.

Examples of balloon sinuplasty devices for the treatment of chronic sinusitis include the Relieva Sinus Balloon Catheter and the FinESS Sinus Treatment. All balloon sinuplasty devices as a stand-alone treatment of chronic sinusitis are considered investigational regardless of the commercial name, the manufacturer or FDA approval status.

### Summary

There is evidence that balloon sinuplasty is relatively safe. However, there is still insufficient evidence on the impact of balloon sinuplasty as a stand-alone procedure for the treatment of sinusitis on health outcomes. The published literature consists of non-comparative results on only a small number of patients. Prospective comparative studies with larger patient populations are needed to determine the outcomes for this treatment compared with standard surgical or medical approaches. This information is important to determine symptom improvement, as well as the durability of the procedure and the need for subsequent revision.

In addition, more information is needed to determine which patients and which sinuses might be treated with the balloon technique and which require standard approaches. Given the limitations of the available data, the uncertain impact on clinical outcomes, and questions about which patients might be candidates for this procedure, this approach is considered investigational.

### Policy History

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<tr>
<th>Date</th>
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<tr>
<td>2/2014</td>
<td>New references added from BCBSA National medical policy.</td>
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References