

**Medical and Behavioral Health Policy Manual**

Section: Surgery

Policy Number: IV-01

Effective Date: 11/23/2011

**BALLOON CATHETER THERAPY FOR CHRONIC SINUSITIS**

**Description:** Chronic sinusitis, which fails to respond to medical therapy, may be treated with endoscopic sinus surgery. Endoscopic sinus surgery allows the surgeon to visualize the sinus ostia, correct any obstruction, and restore patency which allows mucous transport through the natural ostium.

Catheter-based inflatable balloon therapy has been proposed as an alternative to endoscopic sinus surgery for patients with chronic sinusitis. To date, two device systems have received 510(k) marketing clearance from the U.S. Food and Drug Administration (FDA):

- Balloon Sinuplasty™ system (Acclarent, Inc) and
- FinESS™ Sinus Treatment (Entellus Medical, Inc)

Balloon sinuplasty™ involves placing a catheter-based inflatable balloon device in the sinus ostium, inflating the balloon, and stretching the ostium. General anesthesia may be needed to minimize patient movement. This technique is said to allow improved sinus drainage.

FinESS™, which is proposed as a less invasive option for treating chronic rhinosinusitis, is an endoscopic treatment performed under local anesthesia with or without light sedation. This procedure remodels the maxillary ostium and ethmoid infundibulum using a small balloon catheter and a micro-endoscope for visualization. Unlike surgical procedures for sinusitis, FinESS™ does not require removal of delicate bone or sinus tissue because it enables direct access to the affected sinus through a small entry point under the lip using a micro-trocar.

**Policy:** Catheter-based inflatable balloon therapy, (e.g., Balloon Sinuplasty™ System or FinESS™ Sinus Treatment) is considered **INVESTIGATIVE as a stand-alone procedure** for the treatment of chronic sinusitis due to the lack of clinical evidence demonstrating its impact on improved health outcomes.

When a catheter-based inflatable balloon device is used as an instrument in performance of a medically necessary functional endoscopic sinus surgery (FESS) for chronic sinusitis, it is considered **INCIDENTAL** to the FESS procedure.

**Coverage:**            **Pre-Certification/Pre-Authorization: No.**

**Claims for this service as a stand-alone procedure are subject to retrospective review and denial, as investigative services are not eligible for reimbursement.**

**Coding:**            *The following codes are included below for informational purposes only, and are subject to change without notice. Inclusion or exclusion of a code does not constitute or imply member coverage or provider reimbursement.*

**CPT:**

31295 Nasal/sinus endoscopy, surgical; with dilation of maxillary sinus ostium (eg, balloon dilation), transnasal or via canine fossa

31296 Nasal/sinus endoscopy, surgical; with dilation of frontal sinus ostium (eg, balloon dilation)

31297 Nasal/sinus endoscopy, surgical; with dilation of sphenoid sinus ostium (eg, balloon dilation)

**Deleted Codes:** S2344

**Policy History:**            **Medical and Behavioral Health  
Policy Committee Review:**  
Revised November 12, 2008  
Reviewed November 11, 2009  
Revised Formatting July 20, 2010  
Reviewed November 10, 2010  
Coding Updated January 3, 2011  
Reviewed November 9, 2011  
Coding Updated January 3, 2012

**Medical Policy  
Committee Review:**  
Developed December 13, 2006  
Reviewed September 12, 2007

**Cross  
Reference:**

*Current Procedural Terminology (CPT®)* is copyright 2011 American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use.

Copyright 2012 Blue Cross Blue Shield of Minnesota.

---