

Authorization criteria: Ethmoidectomy, endoscopic

For BCN HMOSM (commercial) and BCN AdvantageSM members
For Blue Cross Medicare Plus BlueSM PPO members

Clinical review is required for adult members (age ≥18). The medical necessity criteria are outlined below.

CPT codes: *31255, *31257, *61580 and *61581

Acute ethmoid rhinosinusitis, complicated (urgent)

The following must be met:

1. Rhinosinusitis identified by CT AND EITHER of the following:
 - a. Air fluid levels
 - b. Opacification
2. Complications or complicating factors, identified by ONE or more of the following:
 - a. Immunocompromised host
 - b. Focal neurologic finding
 - c. Facial cellulitis
 - d. Orbital cellulitis or abscess identified by physical examination or CT
 - e. Periorbital abscess identified by physical examination
 - f. Meningitis identified by lumbar puncture
 - g. Intracranial abscess identified by CT or MRI
 - h. Cavernous sinus thrombosis identified by CT or MRI
 - i. Osteomyelitis identified by CT or MRI

Anterior cranial base fracture or tumor

Anterior cranial base fracture or tumor identified by imaging

Chronic ethmoid rhinosinusitis

All the following must be met:

1. TWO OR MORE of the following symptoms for ≥12 weeks:
 - a. Purulent nasal discharge
 - b. Nasal obstruction, blockage or congestion
 - c. Facial pain, pressure, or fullness
 - d. Decreased or altered sense of smell
2. Rhinosinusitis identified by CT AND ONE or MORE of the following:
 - a. Air fluid levels
 - b. Mucosal thickening of >2 mm
 - c. Opacification
3. Continued symptoms or findings after treatment after BOTH of the following:
 - a. Antibiotic treatment ≥3 weeks
 - b. Intranasal corticosteroid spray ≥3 weeks (unless contraindicated or not tolerated)

CSF leak or encephalocele

ONE of the following must be met:

1. CSF leak or encephalocele identified by ONE of the following:
 - a. CSF leak by high resolution CT
 - b. CSF leak by CT or MRI cisternography
2. CSF leak suspected post surgery or trauma and ONE OR MORE of the following:
 - a. Unilateral clear rhinorrhea
 - b. Meningitis by LP

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Ethmoid sinus mass

Ethmoid sinus mass identified by CT or MRI

Ligation of anterior ethmoid artery (urgent)

EITHER of the following must be met:

1. At least ONE of the following:
 - a. Epistaxis uncontrolled by anterior or posterior packing
 - b. Epistaxis and known coagulopathy
2. Epistaxis and patient cannot tolerate packing and EITHER of the following:
 - a. Cardiopulmonary disease
 - b. Uncontrolled pain from packing

Medial orbital wall decompression

ONE of the following must be met:

1. Fracture of medial orbit and ALL of the following:
 - a. ONE or MORE of the following:
 - i. Restriction of extraocular motion
 - ii. Diplopia
 - iii. Enophthalmos
 - b. Globe injury excluded by physical exam
 - c. Fracture diagnosed by imaging
2. Thyroid-related orbitopathy and EITHER
 - a. Continued exposure keratopathy after treatment WITH ALL of the following:
 - i. Lid taping during sleep
 - ii. Artificial tears
 - iii. Systemic corticosteroids (unless contraindicated or not tolerated)
 - b. Compressive optic neuropathy uncontrolled by systemic corticosteroids (unless contraindicated or not tolerated).

Nasal polyposis

ALL of the following must be met:

1. Nasal obstruction by history
2. Nasal polyps identified by CT
3. Continued symptoms or findings after treatment with corticosteroids or intranasal corticosteroid spray (unless contraindicated or not tolerated)

Recurrent acute ethmoid rhinosinusitis

The following must be met:

1. At least 4 episodes of acute bacterial rhinosinusitis within 1 year AND an absence of signs or symptoms of rhinosinusitis between episodes
2. Ethmoid involvement identified by CT

References

McKesson's InterQual[®] 2017 Procedures Adult Criteria, Ethmoidectomy, Endoscopic
BCBS/BCN Michigan Medical Policy Title: *Balloon Dilation for Treatment of Chronic Sinusitis*