

# SINUVA® (mometasone furoate) sinus implant

## Office Reimbursement Guide

**Effective 04/01/2021**

### Coding and Billing

POSSIBLE ICD-10-CM CODES	DESCRIPTOR
J33.0	Polyp of nasal cavity
J33.1	Polypoid sinus degeneration
J33.8	Other polyp of sinus
J33.9	Nasal polyp, unspecified

HCPCS	BILLING UNITS	DESCRIPTOR
J7402	1 unit for every 10 mcg = 135 billing units	Mometasone furoate sinus implant, (sinuva), 10 micrograms

NDC NUMBER	DESCRIPTOR
10599000301	SINUVA (mometasone furoate) 1350 mcg

#### WHOLESALE ACQUISITION COST (WAC)

**\$1,474.35**

Multiple procedure modifiers do not apply to HCPCS Codes.

### CPT® Codes

Providers should report the CPT code(s) which most accurately describe the services performed in association with placement of a drug-eluting sinus implant.

#### INDICATION

SINUVA Sinus Implant is a corticosteroid-eluting (mometasone furoate) implant indicated for the treatment of nasal polyps in patients ≥ 18 years of age who have had ethmoid sinus surgery.

#### IMPORTANT SAFETY INFORMATION

#### CONTRAINDICATIONS

Patients with known hypersensitivity to mometasone furoate, or to any of the copolymers of the SINUVA Sinus Implant.

**Please see additional Important Safety Information on the next page.**

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## Physician Office Billing

21. DIAGNOSIS OR NATURE OF ILLNESS OR INJURY Relate A-L to service line below (24E) ICD Ind.										22. RESUBMISSION CODE		ORIGINAL REF. NO.	
A. <b>XXX.X</b>		B.		C.		D.		E.		F.		G.	
I.		J.		K.		L.		M.		N.		O.	
24. A. DATE(S) OF SERVICE From To B. PLACE OF SERVICE C. EMG D. PROCEDURES, SERVICES, OR SUPPLIES (Explain Unusual Circumstances) CPT/HCPCS MODIFIER E. DIAGNOSIS POINTER F. \$ CHARGES G. DAYS OR UNITS H. EPSDT Family Plan I. ID. QUAL. J. RENDERING PROVIDER ID. #										23. PRIOR AUTHORIZATION NUMBER			
1 <b>N410599000301 UN2</b>													
04		01		21		11		<b>C J7402</b>		<b>D XXX</b>		NPI	
04		01		21		11		<b>E XXXXX</b>		<b>F A</b>		01 NPI	

**A** Item 21A report ICD-10-CM Diagnosis Code.

**B** Shaded area of Box 24 add the following: N4 qualifier, 11 digit NDC code (insert one space) and UN followed by the quantity. UN1 is inserted for SINUVA unilateral procedures and UN2 is used for bilateral procedures.

**Please Note:** Payer NDC requirements and placement may vary, check with payer.

**C** Item 24D report HCPCS Code J7402 for SINUVA.

**D** If reporting unilateral/1 unit of SINUVA, input 135 units.  
If reporting bilateral/2 units of SINUVA, input 270 units.

**E** Item 24D report applicable CPT Procedure Code.

**F** Item 24E indicate A to associate SINUVA with diagnosis code entered in Item 21A above.

The information above is provided for the benefit of Intersect ENT customers and offers general coverage, coding and payment information; it is not legal advice or instruction on how to code. CPT copyright 2020 American Medical Association. All rights reserved. CPT is a registered trademark of the American Medical Association.

### IMPORTANT SAFETY INFORMATION (CONTINUED)

#### WARNINGS AND PRECAUTIONS

##### Local Effects

Monitor nasal mucosa adjacent to the SINUVA Sinus Implant for any signs of bleeding (epistaxis), irritation, infection, or perforation. Avoid use in patients with nasal ulcers or trauma.

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## Billing the National Drug Code (NDC)


When billing physician administered drugs with a J Code, payers may require the 11-digit NDC to be included on claims. The 11-digit billable NDC for SINUVA is **10599000301**.

For proper claim filing this information must be captured in a specific format as shown below.

Electronic claims (ANSI 5010 837)			LOOP	SEGMENT
			2410	LIN02
	PRODUCT ID QUALIFIER	Enter <b>N4</b> in this field		
	NATIONAL DRUG CODE	Enter 11-digit NDC <b>10599000301</b>	2410	LIN03
	NATIONAL DRUG CODE UNIT COUNT	Enter quantity (number of NDC units) <b>1</b> (unilateral) or <b>2</b> (bilateral)	2410	LIN04
	UNIT OF MEASURE	Enter NDC unit of measure as <b>UN</b> followed by units billed 1 unit = <b>UN1</b>	2410	CTP05

## CMS-1500 Paper Claim

In the shaded area of Field 24A of the CMS-1500 Form, enter the NDC Qualifier N4 in the first two positions, followed by the 11-digit NDC (NO dashes or spaces) and then a space and the NDC Units of Measure Qualifier (UN), followed by the Quantity 2 for bilateral (two) SINUVA units or Quantity 1 for unilateral (one) SINUVA unit. This information must be left justified in the pink shaded area above the Date of Service. For a SINUVA bilateral procedure this should be captured as **N410599000301 UN2**.

See page 1 for NDC input into CMS-1500 Claim Form (reference ).

## Obtaining SINUVA

To order SINUVA for in-office use, please call the Specialty Distributor Besse Medical at **1-800-543-2111** or McKesson Med Surg at **1-855-571-2100**.

### IMPORTANT SAFETY INFORMATION (CONTINUED)

#### WARNINGS AND PRECAUTIONS (CONTINUED)

##### Ocular Effects

Glaucoma, cataracts, and clinically significant elevation of intraocular pressure were not observed in patients from the treatment group of one randomized controlled clinical study (N = 53) who underwent bilateral placement of SINUVA Sinus Implants. Close monitoring is warranted in patients with a change in vision or with a history of increased intraocular pressure, glaucoma, and/or cataracts.

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## IMPORTANT SAFETY INFORMATION (CONTINUED)

### WARNINGS AND PRECAUTIONS (CONTINUED)

#### **Hypersensitivity Reactions**

Hypersensitivity reactions, including rash, pruritus, and angioedema have been reported with use of corticosteroids.

#### **Immunosuppression**

Persons who are using drugs that suppress the immune system are more susceptible to infections than healthy individuals. Corticosteroids should be used with caution, if at all, in patients with active or quiescent tuberculosis infection of the respiratory tract; untreated systemic fungal, bacterial, viral, or parasitic infections; or ocular herpes simplex.

#### **Hypercorticism and Adrenal Suppression**

If corticosteroid effects such as hypercorticism and adrenal suppression appear in patients, consider sinus implant removal.

### ADVERSE REACTIONS

The most common adverse reactions observed (> 1% of subjects and that occurred more frequently in the treatment group compared to control) in clinical studies were asthma, headache, epistaxis, presyncope, bronchitis, otitis media, and nasopharyngitis.

### POSTMARKETING EXPERIENCE

The following adverse reactions have been identified during post-approval use of the SINUVA sinus implant. These events include implant migration, lack of efficacy, nasal pain, headache, epistaxis.

**Rx only. Please see attached Full Prescribing Information for SINUVA also available at [SINUVA.com/PI](http://SINUVA.com/PI)**

## DISCLAIMER

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