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## SHP Bronchial Thermoplasty for the Treatment of Asthma

AUTH: SHP Medical 285 v5 (AC)

**MCG Health**  
Ambulatory Care  
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### Coverage

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See the appropriate benefit document for specific coverage determination. Member specific benefits take precedence over medical policy.

### Application to Products

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Policy is applicable to all products.

### Authorization Requirements

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Pre-certification by the Plan is required.

### Description of Item or Service

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Bronchial Thermoplasty is the delivery of thermal energy into the airways through a thin flexible tube introduced through the nose or mouth to provide treatments to each lobe of the lung.

### Exceptions and Limitations

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There is insufficient scientific evidence to support the medical necessity of this service as it is not shown to improve health outcomes upon technology review.

### Clinical Indications for Procedure

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- NA

### Document History

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- Revised Dates:
  - 2020: May, December
  - 2016: April, November
  - 2014: October, November
  - 2013: October
  - 2021: May
- Reviewed Dates:
  - 2023: January
  - 2022: January
  - 2021: January
  - 2020: January
  - 2018: December
  - 2017: December
  - 2016: August
  - 2015: August
  - 2014: August
  - 2013: March
  - 2012: March
  - 2011: March
- Effective Date: December 2010

### Coding Information

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- CPT/HCPCS codes covered if policy criteria is met:
  - NONE
- CPT/HCPCS codes considered not medically necessary per this Policy:
  - CPT 31660 - Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 1 lobe
  - CPT 31661 - Bronchoscopy, rigid or flexible, including fluoroscopic guidance, when performed; with bronchial thermoplasty, 2 or more lobes

### References

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References used include but are not limited to the following:

Specialty Association Guidelines; Government Regulations; Winifred S. Hayes, Inc; Uptodate; Literature Review; Specialty Advisors; National Coverage Determination (NCD); Local Coverage Determination (LCD).

2020 Focused Updates to the Asthma Management Guidelines. (2020, Dec 1). Retrieved Nov 8, 2022, from NATIONAL ASTHMA EDUCATION AND PREVENTION PROGRAM COORDINATING COMMITTEE EXPERT PANEL WORKING GROUP (NAEPPCC): [https://www.jacionline.org/article/s0091-6749\(20\)31404-4/fulltext](https://www.jacionline.org/article/s0091-6749(20)31404-4/fulltext)

(2022). Retrieved Nov 8, 2022, from CMS.gov: <https://www.cms.gov/medicare-coverage-database/search-results.aspx?keyword=Bronchial+Thermoplasty&keywordType=starts&areald=all&docType=NCA,CAL,NCD,MEDCAC,TA,MCD,6,3,5,1,F,P&contractOption=all>

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Alair® Bronchial Thermoplasty System. (2013). Retrieved Nov 8, 2022, from Boston Scientific: [https://www.bostonscientific.com/content/dam/bostonscientific/endo/portfolio-group/Bronchial%20Thermoplasty/135609\\_bronchial\\_thermoplasty\\_FINAL.pdf](https://www.bostonscientific.com/content/dam/bostonscientific/endo/portfolio-group/Bronchial%20Thermoplasty/135609_bronchial_thermoplasty_FINAL.pdf)

Thermoplasty. (2022). Retrieved Nov 7, 2022, from MCG 26th Edition: <https://careweb.careguidelines.com/ed26/index.html>

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Bronchial Thermoplasty for Treatment of Asthma in Adults - Jul 5, 2022. (n.d.). Retrieved Nov 8, 2022, from HAYES: <https://evidence.hayesinc.com/report/dir.alair2095>

Treatment of severe asthma in adolescents and adults. (2022, Oct 21). Retrieved Nov 8, 2022, from UpToDate: [https://www.uptodate.com/contents/treatment-of-severe-asthma-in-adolescents-and-adults?sectionName=BRONCHIAL%20THERMOPLASTY&search=Bronchial%20Thermoplasty&topicRef=106085&anchor=H601983207&source=see\\_link#](https://www.uptodate.com/contents/treatment-of-severe-asthma-in-adolescents-and-adults?sectionName=BRONCHIAL%20THERMOPLASTY&search=Bronchial%20Thermoplasty&topicRef=106085&anchor=H601983207&source=see_link#)

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