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#### **INSTRUCTIONS FOR USE DISCLAIMER:**

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Medical policies in conjunction with other nationally recognized standards of care are used to make medical coverage decisions.

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### **Vocal Cord Paralysis and Insufficiency Treatments Policy**

#### **Indication/Usage:**

Vocal cord paralysis occurs when nerve impulses to the larynx get interrupted by a neurological condition or by damage to the nerves from trauma, tumor or infection. Paralysis affects the ability to speak breathe and can cause aspiration. Unilateral vocal cord paralysis is the most common form of vocal cord paralysis. About one-third are caused by tumors, injury and unknown factors. Bilateral paralysis of both vocal cords is more commonly caused by an injury and is a life threatening condition because it interferes with breathing. Laryngeal injections of select injectable fillers, also referred to as bulking agents, have been proven to be effective in treating glottis insufficiency or vocal cord dysfunction. Medialization thyroplasty involves transcervical placement of an implant of silicone or Gore-Tex through a surgically created window in the thyroid cartilage.

## **Medical Indications for Authorization Commercial and Medicare Members**

SummaCare considers the following interventions for vocal cord paralysis medically necessary

- Injections of bulking agents for members with unilateral vocal cord paralysis using agents that are cleared by the Food and Drug Administration for this indication.
- Medialization thyroplasty with implant of Gore-Tex or Silastic for vocal cord paralysis.
- Calcium hydroxylapatite and hyaluronic acid gel for the treatment of permanent vocal cord paralysis/insufficiency.
- Harvesting and injection of autologous fat for the treatment of vocal cord paralysis/insufficiency.
- Injection of Cymetra for the management of voice loss and aspiration in cases where unilateral vocal cord paralysis is anticipated to be short-term.

There are currently no NCD or LCD for vocal cord paralysis per CMS

### **CPT Codes**

- 31513: Laryngoscopy, indirect; with vocal cord injection
- 31570: Laryngoscopy, direct, with injection into vocal cord(s), therapeutic
- 31571: With operating microscope or telescope
- 31573: Laryngoscopy, flexible; with therapeutic injection(s) unilateral
- 31574: Laryngoscopy, flexible; with injection(s) for augmentation
- 31591: Laryngoplasty, medialization, unilateral
- Q2026: Injection, radiess, 0.1 ml
- Q4112: Cymetra, injectable, 1 cc

## Limitations

Injectable fillers including calcium hydroxyapatite, autologous fat, collagen, hyaluronic acid and polyL-lactic acid, are considered cosmetic and not medically necessary for ANY other indication.

## Coverage Decisions

Coverage decisions made per CMS Guidelines, Hayes Research and industry standards research

## Plans Covered By This Policy

Commercial and Medicare

Self-funded Commercial groups refer to plan document for coverage

## Sources Reviewed

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American Academy of Otolaryngology – Head and Neck Surgery Vocal Cord Paralysis: Patient Health Information. <http://www.entnet.org/content/vocal-cord-paralysis>

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