



PROPEL™ mometasone furoate sinus implant

Positive coverage with the following payers:*

Payers

UnitedHealthcare

Highmark

Blue Cross and Blue Shield**

Blue Cross and Blue Shield Federal Employee Plan

Kaiser Permanente

Medi-Cal

MVP Health Care

HealthPartners

Geisinger Health Plan

CareOregon

EmblemHealth

Quartz

HAP of Michigan

Capital District Physicians Health Plan

ConnectiCare

UPMC

Disclaimer

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*Coverage information as of July 2022

**Includes TX, IL, NM, OK, MT, HI, MD, DC, NC, SC, ND, KS

Indications, contraindications and precautions

The PROPEL sinus implants are intended to maintain patency and locally deliver steroid to the sinus mucosa in patients ≥ 18 years of age following sinus surgery: PROPEL for the ethmoid sinus, PROPEL Mini for the ethmoid sinus/frontal sinus opening, and PROPEL Contour for the frontal/maxillary sinus ostia. Contraindications include patients with confirmed hypersensitivity or intolerance to mometasone furoate (MF) or hypersensitivity to bioabsorbable polymers. Safety and effectiveness of the implant in pregnant or nursing females have not been studied. Risks may include, but are not limited to, pain/pressure, displacement of the implant, possible side effects of intranasal MF, sinusitis, epistaxis, and infection. For full prescribing information see IFU at www.IntersectENT.com/technologies/. Rx only.

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MPM-11799 Rev 3.0