

Blue Cross Blue Shield of Michigan
Medicare Advantage Private Fee-for-Service

Travel, Meals and Lodging

January 1, 2008

TRAVEL, MEALS and LODGING

Travel, meals and lodging coverage associated with specified organ transplants.

ORIGINAL MEDICARE¹

Original Medicare does not cover costs related to travel, meals and lodging.

MEDICARE ADVANTAGE

Coverage for travel, meals and lodging associated with specified organ transplants is provided to members under select Medicare Advantage private fee-for-service plans.

Travel, meals and lodging expenses are a covered benefit only when associated with the following specified organ transplantation services:

- Combined small intestine - liver
- Heart
- Heart-lung
- Kidney - liver
- Liver
- Lobar lung
- Lung
- Multivisceral transplants
- Pancreas
- Partial liver
- Simultaneous pancreas-kidney
- Small intestine (small bowel)

The transplant surgery is performed at one of the designated Blue Distinction Center for Transplant facilities which are also Medicare approved facilities.

The travel, meal and lodging benefit starts five days prior to the transplant and extend through the patient's episode of care.

Travel

Travel refers to the cost of transportation to and from the designated transplant facility for the patient and another person eligible to accompany the patient (two persons if the patient is a child under age 18 or if the transplant involves a living donor.)

¹ Medicare Benefit Policy Manual – 100-02, chapter 16, section 10
<http://www.cms.hhs.gov/manuals/Downloads/bp102c16.pdf>

Meals

Meals refer to the reasonable and necessary costs of meals for the patient and person(s) eligible to accompany the patient.

Lodging

Reasonable and necessary costs of lodging for the person(s) eligible to accompany the patient until discharged from care.

Excluded Services

Items that are not considered directly related to travel, meals and lodging expenses are not payable. They include, but are not limited to the following:

- Alcoholic beverages
- Car maintenance
- Cards, stationery, stamps
- Clothing
- Dry cleaning
- Entertainment (cable televisions, books, magazines, movie rentals)
- Flowers
- Household products
- Household utilities, including cell phone charges, maid, baby-sitter or day care services
- Kennel fees
- Laundry services
- Security deposits
- Toiletries
- Toys

Travel, meals and lodging is payable if the services are performed at a National Cancer Institution - designated cancer center for specified bone marrow and or peripheral blood stem cell transplants and related services to treat stages II, III and IV breast cancer and or all stages of ovarian cancer during an approved clinical trial. The expenses must be incurred during the period that begins with the first date of service and ends 180 days after the transplant.

Conditions for Payment

BCBSM Medicare Advantage private fee-for-service plans use the Centers for Medicare & Medicaid Services deemed provider² concept for group specific benefits.

The table below specifies payment conditions for travel, meals and lodging:

² 2008 Terms and conditions

Conditions For Payment	
Eligible providers	Does not apply
Deemed provider	See terms and conditions on bcbsm.com/ma
Payable locations	Medicare/Blue Distinction Center for Transplant Facilities
Frequency	Associated with an approved organ transplant
CPT codes	A0090, A0180, A0190, A0200, A0210
Age restrictions	Does not apply

Reimbursement

The maximum payable amount for travel, meals and lodging expenses directly related to services rendered during an approved clinical trial is \$5,000. The expenses must be incurred during the period that begins with the first date of service and ends 180 days after the transplant in order for the member to be reimbursed.

The following per day amounts apply to the combined expenses of the patient and persons eligible to accompany the patient up to: \$60 per day for travel, \$50 per day for lodging and up to a combined maximum of \$40 per day for meals.

The maximum amount payable for travel, meals and lodging services related to the initial solid organ transplant is \$10,000.00.

Allowable Amounts

The table below indicates Medicare Advantage private fee-for-service allowable amounts for travel, meals and lodging.

CPT/HCPCS Level II Codes	Description	MA PFFS Allowable Amount			
		Pay Member Claims			
		Solid Organ Transplants		Specified Oncology Clinical Trials BCBSM, City of Detroit and State of MI Retirees	
		2007	2008	2007	2008
A0090	Interest escort in non emergency, per mile	<ul style="list-style-type: none"> Daily allowances may be adjusted periodically. Original receipts must be submitted and must not exceed \$10,000 maximum per specified organ transplant type. 		<ul style="list-style-type: none"> Daily allowances may be adjusted periodically. Original receipts must be submitted and must not exceed \$5,000 maximum per approved clinical trial. 	
A0180	Non-emergency transport, lodging recipient				
A0190	Non-emergency transport, meals recipient				

CPT/HCPCS Level II Codes	Description	MA PFFS Allowable Amount			
		Pay Member Claims			
		Solid Organ Transplants		Specified Oncology Clinical Trials BCBSM, City of Detroit and State of MI Retirees	
		2007	2008	2007	2008
A0200	Non-emergency transportation: ancillary lodging escort	<ul style="list-style-type: none"> Daily Allowances may be adjusted periodically. Original receipts must be submitted and must not exceed \$10,000 maximum per specified organ transplant. 	<ul style="list-style-type: none"> Daily Allowances may be adjusted periodically. Original receipts must be submitted and must not exceed \$5,000 maximum per approved clinical trial. 		
A0210	Non-emergency transport, meals escort				

Member Cost-Sharing

- The member cost-sharing responsibilities do not apply to travel, meals and lodging.
- If the member elects to receive a noncovered service, he or she is responsible for the entire charge associated with the noncovered service.

The travel, meals and lodging table below identifies members with coverage:

Travel, Meals and Lodging Coverage Group Name and Number	
BCBSM Retirees ³ 80311, 80312	City of Detroit Option E ⁴ 81100, 81101
City of Detroit Option F ⁵ 54731, 81097	City of Detroit Option G ⁶ 04436

³ BCBSM Retirees Benefit grid

⁴ City of Detroit - Option E Benefit grid

⁵ City of Detroit - Option F Benefit grid

⁶ City of Detroit - Option G Benefit grid

Travel, Meals and Lodging Coverage Group Name and Number	
MPSERS ⁷ 59000	State of MI Retirees ⁸ 81820, 81821, 81828

Billing Instructions

1. Members will submit bills, itemized statements and paid receipts to:

Human Organ Transplant Program
Blue Cross Blue Shield of Michigan
600 East Lafayette Blvd
Detroit, MI 48226
Mail Code J607

⁷ MPSERS Benefit grid

⁸ State of Michigan Retirees Benefit grid