

# State Health Plan MA Self-Administered Drugs



**Blue Cross  
Blue Shield**  
of Michigan

A nonprofit corporation and independent licensee  
of the Blue Cross and Blue Shield Association

Applies to:

Medicare Plus Blue PPO<sup>SM</sup>  Medicare Plus Blue Group PPO<sup>SM</sup>  Both

## Self-administered drugs

Self-administered drugs are medications that are usually self-administered by the patient, such as pills or those used for self-injection.

## Original Medicare

Original Medicare Part B generally does not cover drugs that can be self-administered, such as pills or those used for self-injection. However, the statute provides for the coverage of some self-administered drugs. Examples of self-administered drugs that are covered:

- Blood-clotting factors
- Drugs used in immunosuppressive therapy
- Erythropoietin for dialysis patients
- Osteoporosis drugs for certain homebound patients
- Certain oral cancer drugs.
- The ordinarily noncovered, self-administered drug insulin administered in an emergency situation to a patient in a diabetic coma.

Drugs and biologicals furnished to outpatients for therapeutic purposes that are self-administered are not covered by Medicare unless those drugs and biologicals must be put directly into an item of durable medical equipment or a prosthetic device. The statute provides for such coverage as described.

## Medicare Plus Blue<sup>SM</sup> Group PPO enhanced benefit for State Health Plan MA

Medicare Plus Blue is a Medicare Advantage plan, which provides at least the same level of benefit coverage as Original Medicare (Part A and Part B) and may provide enhanced benefits beyond the scope of Original Medicare within a single health care plan. This flexibility allows Blue Cross to offer enriched plans by using Original Medicare as the base program and adding desired benefit options.

Coverage for self-administered drugs are provided to members under the State of Michigan's Medicare Plus Blue Group PPO plan. Because Original Medicare only covers this service with limitations, the scope of benefit, reimbursement methodology, maximum payment amounts and the member's cost sharing are determined by the group.

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[bcbsm.com/provider/ma](https://bcbsm.com/provider/ma)

## Conditions for payment

This table below specifies payment conditions for self-administered drugs.

Conditions for payment	
Eligible provider	No restrictions
Payable location	Inpatient, outpatient, skilled nursing facility
Frequency	No frequency limitations
CPT codes	Revenue code: 0637 Self-Administered Drugs
Diagnosis restrictions	No restrictions
Age restrictions	No restrictions

## Policy Guidelines

1. Self-administered drugs are not payable in an ambulatory surgery center.
2. No payment for revenue code 0637 if billed with surgical revenue codes 0360, 0361 and 0490.
3. \$200 maximum payment per claim.
4. Exception: If services are rendered in emergency room only, the ER copay will apply due to CMS restrictions on ER cost share limits.

## Member cost sharing

10% after deductible

### Revision history

Policy number: MAPPO

Effective: 01/01/2020

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