

## Part B Insider (Multispecialty) Coding Alert

### Reader Question: Medicare Typically Won't Reimburse You for Self-Administered Drugs

Question: I do the coding and billing for a urologist who is under the impression that when a patient takes home medicine like testosterone and Glukor injections for erectile dysfunction we should bill the service with the place of service (POS) being the office because the patient came to the office to pick up the injections to administer at home. The patient has come to the office for the E/M service and a urinalysis, and then takes the medication home with him. The doctor wants to bill everything on one claim with the same POS.

I have explained to the doctor that if he codes for an office visit and a urinalysis that would be on one superbill or encounter form and the place of service is the office (11) and the medication he sends home with the patient should be on a separate super bill or encounter form with a place of service of home (12). He insists they should all be on one claim and coded as the office as POS. Which of us is correct?

Answer: Since there was no drug administration performed in the office, and these drugs will be self-administered by the patient himself out of the office at home, you cannot bill. You should not submit a claim for the injection of the drugs or for the drugs supplied by the physician.

For this clinical scenario the patient should purchase the drugs by prescription from a pharmacy, especially if he has a drug plan for reimbursement or payment for the drugs purchased.

In black and white: CMS maintains a firm policy about paying for self-administered drugs. According to Transmittal 1790, "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 (including blood clotting factors, drugs used in immunosuppressive therapy, erythropoietin (EPO), certain oral anti-cancer drugs and their associated antiemetics), or the ordinarily non-covered, self-administered drug insulin is administered in an emergency situation to a patient in a diabetic coma."