

## Purpose

To clarify reimbursement impact on self-administered drugs (SAD) / medications that are excluded from coverage under the medical benefit.

## Policy

Medications administered by the patient that do not require direct supervision by a qualified provider or licensed/certified health professional are considered self-administered drugs and not covered under the medical benefit.

## Non-Covered Services

Medications administered by the patient that do not require direct supervision by a qualified provider or licensed/certified health professional are considered self-administered drugs and not covered under the medical benefit.

### Non-Covered:

Revenue Code	Description
0637	Self-administered drug (use this revenue code for self-administered drugs not requiring detailed coding)

Please refer to the [Self-Administered Medications list](#) for applicable HCPCS and NDC codes for medications Community Health Options has determined to be “self-administered” based upon clinical coverage rationale.

## References

[Drugs@FDA: FDA-Approved Drugs](#)

## Related Policies

[National Drug Billing Requirements](#)

## Document Publication History

8/12/2025 Policy creation

This policy provides information on Community Health Options' claims adjudication processing guidelines. As every claim is unique, the use of this policy is neither a guarantee of payment nor a final prediction of how specific claim(s) will be adjudicated. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization and utilization management guidelines when applicable, adherence to plan policies and procedures, and claims editing logic. Community Health Options reserves the right to amend a payment policy at its discretion. Policies are enforced unless underpinning direction stated otherwise.