

Medical Coverage Policy



Self-Treatment or Treatment of Immediate Family Members

☐ Device/Equipment ☐ Drug ☐ Medical ☐ Surgery ☐ Test ☒ Other

Effective Date:	10/6/2009	Policy Last Updated:	10/16/2012
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☐ Prospective review is recommended/required. Please check the member agreement for preauthorization guidelines.

☒ Prospective review is not required.

NOTE: The effective date of this policy relates to the date BCBSRI created documentation to reflect reimbursement processes that are established and do not indicate a change in the payment process.

Description:

Member contracts for all products do not cover services provided to a family member or member of the provider's household. In part this is because such persons would not be charged for these services absent insurance coverage. Also it is consistent with ethical principles. The American Medical Association Code of Medical Ethics states:

Opinion 8.19 - Self-Treatment or Treatment of Immediate Family Members

Physicians generally should not treat themselves or members of their immediate families. Professional objectivity may be compromised when an immediate family member or the physician is the patient; the physician's personal feelings may unduly influence his or her professional medical judgment, thereby interfering with the care being delivered. Physicians may fail to probe sensitive areas when taking the medical history or may fail to perform intimate parts of the physical examination. Similarly, patients may feel uncomfortable disclosing sensitive information or undergoing an intimate examination when the physician is an immediate family member. This discomfort is particularly the case when the patient is a minor child, and sensitive or intimate care should especially be avoided for such patients. When treating themselves or immediate family members, physicians may be inclined to treat problems that are beyond their expertise or training. If tensions develop in a physician's professional relationship with a family member, perhaps as a result of a negative medical outcome, such difficulties may be carried over into the family member's personal relationship with the physician.

Concerns regarding patient autonomy and informed consent are also relevant when physicians attempt to treat members of their immediate family. Family members may be reluctant to state their preference for another physician or decline a recommendation for fear of offending the physician. In particular, minor children will generally not feel free to refuse care from their parents. Likewise, physicians may feel obligated to provide care to immediate family members even if they feel uncomfortable providing care.

It would not always be inappropriate to undertake self-treatment or treatment of immediate family members. In emergency settings or isolated settings where there is no other qualified physician available, physicians should not hesitate to treat themselves or family members until another

physician becomes available. In addition, while physicians should not serve as a primary or regular care provider for immediate family members, there are situations in which routine care is acceptable for short-term, minor problems. Except in emergencies, it is not appropriate for physicians to write prescriptions for controlled substances for themselves or immediate family members. (I, II, IV).¹

In Rhode Island, the Rhode Island Department of Health endorses the AMA Statement E-8.19 on self-prescribing." Specifically, the Board emphasized that, "Except in emergencies, it is not appropriate for physicians to write prescriptions for controlled substances for themselves or immediate family members."

Medical Criteria:

Not applicable.

Policy:

All providers are contractually obligated to maintain practice consistent with ethical standards. Services to self, family or members of your household are not covered. Services to self, family members or members of your household shall not be billed.

A physician may not serve as a primary care physician (PCP) for self, a family member or household member in any plan that has a PCP designation plan design.

Services ordered by a physician for self, a family member or member of the household, or services performed and billed by others that are related to such services are covered, but ordering physicians must follow ethical and legal standards (e.g. in ordering controlled substances without an ethical doctor patient relationship). For this policy BCBSRI defines family members as a spouse or domestic partner, natural, adopted or step- children, grand-children, parents, parents-in-law or grand-parents.

Coverage:

Services provided for yourself, relatives, or members of your household are a contract exclusion. Please refer to the appropriate Evidence of Coverage, Subscriber Agreement, or Benefit Booklet for applicable not covered services.

Also known as:

Not applicable

Related topics:

Not applicable

Published:

Provider Update, December 2009

Provider Update, January 2013

References:

¹American Medical Association. Referenced on 10/4/12: <http://www.ama-assn.org/ama/pub/physician-resources/medical-ethics/code-medical-ethics/opinion819.shtml>.

Christman KD. AMA Attacks Physicians Caring for Their Families. *Journal of American Physicians and Surgeons*;16(3): Fall 2011. <http://www.jpands.org/vol16no3/christman.pdf>.

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to continue with the treatment at their own expense. Please refer to your participation agreement(s) for the applicable provisions. This policy is current at the time of publication; however, medical practices, technology, and knowledge are constantly changing. BCBSRI reserves the right to review and revise this policy for any reason and at any time, with or without notice.