



**BlueCross BlueShield
of Illinois**

Blue Cross and Blue Shield of Illinois Provider Manual

HMO Scope of Benefits Section

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company,
an Independent Licensee of the Blue Cross and Blue Shield Association

Emergency Services

Benefit

Emergency services are covered.

Interpretation

The HMO is responsible for paying for facility charges for all services for Emergency Medical Conditions provided to a Member within 30 miles of the IPA. In addition, the HMO pays for facility, physician and ancillary charges for all services for Emergency Medical Conditions provided to a Member outside of 30 miles of the IPA. Prior authorization or approval by the IPA is not required for payment of hospital-based emergency services.

The IPA is responsible for paying physician and other professional charges for all services for an Emergency Medical Condition provided to a Member within 30 miles of the IPA. Prior authorization or approval by the IPA is not required for hospital emergency room services for an Emergency Medical Condition. The IPA is not responsible for services for an Emergency Medical Condition provided to Members outside of 30 miles of the IPA.

In the event that the Member is hospitalized within 30 miles of the IPA for an Emergency Medical Condition, the IPA is responsible for the Physician and other professional charges from the point of notification. For services within 30 miles of the IPA, all units will be charged for inpatient days when a member is admitted through an emergency room even if the IPA is not notified.

Paid by	Professional charges	IPA
	Facility charges	HMO

Note: The emergency copayment listed in the Benefit Matrix is applicable ONLY to treatment provided in a hospital emergency room.