



**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

Immunizations

Benefit

Immunizations are covered if administered or recommended by the PCP. These include all childhood and adult immunizations, and those vaccines recommended or required for travel.

Interpretation

Childhood immunizations are defined as those recommended by the American Academy of Pediatrics, the American Academy of Family Practice, and the Advisory Committee on Immunization Practices of the Centers for Disease Control according to the designated schedule and dosages.

Adult immunizations, including influenza, meningococcal and pneumococcal vaccines, are in benefit if administered or recommended by the PCP.

Travel immunizations or prophylactic treatment (i.e., cholera vaccines, immunoglobulin), which are required and/or recommended for travel to foreign countries are covered.

Paid by	Inpatient Immunization	HMO
	Immunization in office or outpatient setting	IPA

Note: See Benefits Interpretation on Hepatitis B Vaccine