



**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

Chemotherapy

Benefit

Outpatient or inpatient treatment of malignant neoplastic conditions with pharmaceutical or antineoplastic agents, including administration of drugs by parenteral, infusion, perfusion, intracavitary or intrathecal means, is a covered benefit. The benefit includes the cost of drugs, administration of drugs, and ancillary services and supplies.

Interpretation

The IPA is responsible for all charges including the cost of chemotherapy drugs provided in the physician's office or outpatient facility. Injectable chemotherapeutic drugs are **not** covered under the Prescription Drug Program.

Investigational drugs are not in benefit.

Paid by	Professional Charges	IPA
	Inpatient and/or Outpatient Surgical Facility Charges	HMO
	Outpatient Facility Charges	IPA
	Outpatient Drug Charges	IPA
	Home Health Care Charges (for homebound member- from contracted provider).	HMO
	Home Health Care Charges (for ambulatory member or from non-contracted provider):	IPA

Note: Hospital days or home health care visits are charged to the Utilization Management Fund.

Note: Therapy should be provided in the most clinically-appropriate and cost-effective setting. If care is provided at home and the member is homebound, the HMO is responsible for charges under the home health benefit. However, the IPA is responsible for one hundred percent of home health charges inappropriately ordered for ambulatory members for whom care could have been provided in the office or an outpatient setting (see Medical Service Agreement).

Note: If the member has limited or no pharmacy benefits for self-administered home-based chemotherapy, please contact the HMO Customer Assistance Unit.