

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

## **Health Examinations**

## Benefit

Routine health exams including medical history, physical examination, necessary lab and diagnostic testing, immunizations, and other services that are clinically appropriate to the age, sex, and history of member are in benefit. Exams required by law, such as premarital exams and school exams are covered. Exams required by an agency or organization, but not by statute, are not covered.

## Interpretation

The frequency and content of the examination may be determined by the IPA Physician, but must meet or exceed standards of generally accepted medical practice and quality assurance guidelines. An exception to this is the school eye exam mandated by law – refer to the Vision Screening Scope in this section. The HMO preventive care guidelines provide evidence-based guidance to preventive care services.

Physical examinations solely for employment or insurance purposes are not covered. However, if a member receives a physical that can serve as both an employment/insurance exam and a routine physical exam, then the exam is covered. If a non-covered physical examination requires specific laboratory or diagnostic procedures that are not clinically indicated, the member is responsible for payment of such services.

Paid by	Professional Charges	IPA
	Outpatient Test Charges	IPA
	Non-covered examinations	Member