



**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

Podiatry/Podiatric Services

Benefit

Podiatric surgical and non-surgical services are covered benefits if the PCP refers the member for these services. However, routine foot care (such as treatment or removal of corns and calluses) is not covered.

Interpretation

Non-routine foot care, such as diabetic foot care or treatment of infections, is covered. The Primary Care Physician determines whether the member should be seen by a podiatrist or by another specialist, such as an orthopedist or sports medicine physician

Examples of covered surgical podiatry services include:

- Surgical removal and care of bunions
- Surgical removal of foreign bodies of the foot
- Repair of fractures
- Amputation of digits
- Surgical repair of ingrown toenails

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|----------------|---|------------|
| Paid by | Professional charges | IPA |
| | Inpatient and/or Outpatient Surgical Facility charges | HMO |

Note: See related benefit Guideline on Orthotics