



**BLUE CROSS AND BLUE SHIELD OF ILLINOIS
POLICY**

DEPARTMENT: Provider Network Performance	POLICY NUMBER: Administrative 71	ORIGINAL EFFECTIVE DATE: 1/1/2009
POLICY TITLE: Complex Case Management		EFFECTIVE DATE: 06/01/2022
		LAST REVISION DATE: 06/01/2021
EXECUTIVE OWNER: DSVP, IL Health Care Delivery	BUSINESS OWNER: Manager Clinical Operations	LAST REVIEW DATE: 06/01/2022

I. SCOPE

This Policy applies to the following lines of business and products:

Line of Business / Product Scope / Plan Scope/Contract Number (if applicable)	In Scope [X]
HMO Commercial	X
HMO Exchange	X
Health Care Delivery QI HMO Commercial	
Health Care Delivery QI PPOCommercial	
Health Care Delivery QI HMO Exchange	
Health Care Delivery QI PPO Exchange	

II. PURPOSE

- To have oversight of the Independent Practice Association (IPA) who coordinates care and services to members with catastrophic or multiple complex conditions.
- To identify the degree and complexity of the member's illness or conditions that are typically severe, intensive, and/or require extensive resources.
- To assist members in the access to care and obtain multiple services through assistance of an IPA.
- To assist members to regain optimal health, aid in obtaining multiple services, learn self-management and gain improvement in functional capabilities.

III. POLICY

Blue Cross and Blue Shield of Illinois (BCBSIL) will ensure members have access to Complex Case Management (CCM) based upon medical appropriateness and cost effectiveness.

IV. CONTROLS/MONITORING

Line of Business and/or Area	Control Requirements
HMO	Controls are detailed in the Policy itself.

V. POLICY REVIEWERS

Person Responsible for Review	Title	Date of Review
Deidre Meyers	Clinical Delegation Coordinator	05/10/2022

VI. POLICY REVISION HISTORY

Description of Changes	Revision Date

VII. POLICY APPROVALS

Company, Division, Department and/or Committee	By: Name	Title	Approval date
BCBSIL P&P			5/26/2022