

Understanding the Changes Coming to Your BCBS-IL Coverage



In October 2012, Blue Cross Blue Shield of Illinois (BCBS-IL) announced changes in how it will handle all “Chiropractic services, Occupational therapy (OT), and Physical therapy (PT)”¹ services. The following information is intended to explain these changes and how they may affect the care you are receiving.

In short, BCBS-IL announced that “Effective in early 2013, professional providers will be responsible for obtaining prior authorization through OrthoNet™ for the following outpatient physical medicine services: Chiropractic services, Occupational therapy (OT), and Physical therapy (PT).”² BCBS-IL has indicated that the vast majority (80%) of independently contracted health care providers offering these important services to their patients will be required to seek “prior authorization”³ after the first 1 to 8 visits.

How will this affect me as the patient?

BCBS has told the Illinois Chiropractic Society (ICS) that 80% of health care providers will experience pre-authorization requirements. Thus, there is a great likelihood at some point during your care that BCBS-IL will require your chiropractic physician to obtain pre-authorization in order for BCBS-IL to cover (pay for) your care or portions of it.

In our experience, as a provider with other insurance companies who have required prior authorization, there have been numerous instances in which the insurance companies have not authorized payment for the full number of visits the doctor and patient deemed necessary for the proper treatment. This means that BCBS-IL may refuse to pay for your treatment or a portion of your treatment, and you will be financially responsible for the visits that BCBS-IL does not pre-authorize.

Is my BCBS-IL health insurance plan included in this program?

Although BCBS-IL has stated the program will initially only apply to some plans, BCBS-IL has stated “expansion is likely to occur as plan sponsors elect to participate in the program.”⁴ It appears BCBS-IL is planning to expand the program to physical medicine services in ALL BCBS-IL health care plans in the near future.

Why is BCBS-IL implementing this program?

BCBS-IL claims they are “implementing the program due to an increasing number of employer groups requesting management of escalating physical medicine costs, and to support quality while helping our members maximize benefits under their plans.”⁵

Does BCBS-IL believe my doctor is giving me too much care?

Although BCBS-IL states the program emphasizes “greater responsibilities required of providers who appear to fall outside the norm,”⁶ they have also told the ICS they will be requiring some level of prior authorization from 80% of health care providers.

This seems to indicate BCBS-IL is extending the pre-authorization program well beyond only those doctors who may be deemed to be outliers and will include additional responsibilities for those providing care within the statistical “norm.” From a statistical perspective, outliers should be “those that appear to deviate markedly from other members of the sample,”⁷ which should not include 80% of the doctors.

I am not comfortable with insurance companies making my health care decisions for me.

What can I do?

The Illinois Chiropractic Society and this practice believe that patients who are interested in maintaining full control of their personal health care could take the following actions:

A) Discuss your needs and preferences with your union, employer, or human resources director. Emphasize your desire to maintain full control to make health care decisions in conjunction with your physicians, and that you do not want insurance companies making professional decisions about your care.

B) Contact BCBS-IL directly to indicate your position on these changes.

Blue Cross and Blue Shield of Illinois
300 East Randolph Street
Chicago, Illinois 60601-5099

Call the number on the back of your
insurance card OR call (800) 654-7385.

C) Contact the Illinois Department of Insurance or U.S. Department of Labor to ask for their assistance in protecting your full rights as a patient.

File a complaint with the Illinois Department of Insurance:

On-line at <https://insurance.illinois.gov/applications/ComplaintForms/default.aspx>

By email at consumer_complaints@ins.state.il.us

By fax to (217) 558-2083

By mail to 320 W. Washington Street, Springfield, IL 62767

File a complaint with the U.S. Department of Labor:

By phone to (866) 444-3272



¹ BlueReview, October 2012 page 3. Available here: http://www.bcbsil.com/pdf/education/bluereview/oct_12.pdf

² BlueReview, October 2012 page 3. Available here: http://www.bcbsil.com/pdf/education/bluereview/oct_12.pdf

³ BlueReview, October 2012 page 3. Available here: http://www.bcbsil.com/pdf/education/bluereview/oct_12.pdf

⁴ BlueReview, October 2012 page 3. Available here: http://www.bcbsil.com/pdf/education/bluereview/oct_12.pdf

⁵ BCBSIL PPO Network – OrthoNet UM Program - Frequently Asked Questions, 12/12 page 1. Available here: http://www.bcbsil.com/pdf/claims/orthonet_faqs.pdf

⁶ BlueReview, January 2013 page 6. Available here: http://www.bcbsil.com/pdf/education/bluereview/jan_13.pdf

⁷ Grubbs, F. E.: 1969, Procedures for detecting outlying observations in samples. Technometrics 11, 1–21