What are Ancillary Services?

Ancillary services are services your physician may request to aid in the diagnosis or treatment of an illness or injury.

Ancillary services are defined as services from an Independent Clinical Laboratory (ICL), Durable/Home Medical Equipment (D/HME) and Supply or Medical Specialty Pharmacy.

- ICL services are provided by any non-hospital-based laboratory and generally include but are not limited to testing of blood/urine specimens and samples, analysis, etc.
- D/HME and Supply generally include, but are not limited to hospital beds, crutches, wheelchairs, oxygen tanks or respiratory therapy machines that are rented or purchased from a retail store or ordered and shipped to your home.
- Medical Specialty Pharmacy generally includes but is not limited to injectable and infusion therapies, high-cost therapies and therapies that require complex care. (This does not apply to prescription drugs typically purchased at the pharmacy).

Reduce Member costs for Ancillary Services

It is your responsibility to ensure all ancillary services are a covered benefit under your health plan. If you receive Ancillary Services, it is recommended you verify the network participation status of the Ancillary Provider in the state or area you will be receiving the services or having the service performed.

- ICL services will be billed to referring provider’s Blue Cross Blue Shield Plan. Patients need to ask their provider what laboratory will be used and if the laboratory participates with the Blue Plan in the area where their referring provider is located.
- D/HME will be billed to the Blue Plan in the area where the D/HME was delivered or physically purchased. Patients, particularly those who travel, need to understand their D/HME provider may not be participating with all Blue Cross Blue Shield Plans and in some circumstances they may now be billed either up front or after the claim is considered, for the entire cost by the provider. Patients need to ask their DME providers if they are par with the Blue Plan in area where the patient is located when they receive or purchase the D/HME.
- Medical Specialty Pharmacy claims will be billed to the Blue Plan in the area where the ordering provider is located. Patients need to ask the MSP provider if they participate with the Blue Cross Blue Shield Plan in the ordering provider’s area. If the MSP does not participate, then to reduce costs, patients may need to find a MSP who is participating or they may be billed for the entire cost.

To locate a participating in-network provider in the state or area where you will be receiving services as indicated above, please go to [https://www.excellusbcbs.com/wps/portal/xl/mbr/fnd/otherproviders/](https://www.excellusbcbs.com/wps/portal/xl/mbr/fnd/otherproviders/) or call the Customer Care number on the back of your member I.D. card.