

INSURANCE CRITERIA

*This is a summary of the requirements from your insurance company that must be met to obtain approval for surgery. For a detailed list, please contact your insurance company. This list is subject to change without notice from your insurance company. **These requirements only apply if surgery is a covered benefit under your policy.** Some policies will have an exclusion, meaning they do not cover bariatric surgery. If your insurance plan does not cover bariatric surgery or you choose not to meet their criteria, we do have a comprehensive self pay option available. Please speak to one of our staff for details.*

The criteria below are for gastric bypass and gastric banding procedures only unless otherwise noted (we must check with your insurance for coverage of sleeve gastrectomy or duodenal switch. Criteria for revisional procedures, if covered, vary plan by plan and may include additional criteria not listed). Please do not schedule any appointments until advised by our office.

BlueCross New York Excellus

BMI greater than 40 OR BMI 35-40 with certain co morbidities (18 years of age or older)

1. Medical records for past 5 years
2. Diet requirement-Documentation, from either the bariatric surgeon or primary care physician, of one or more rigorous attempts at weight reduction, totaling a minimum of 6 months. Documentation should include the name of each weight loss program, length of participation and any weight loss achieved.
3. Lab work- showing no significant liver, kidney or gastrointestinal disease and no adrenal or thyroid disorder (your physician must complete and have results sent to our office)
4. Letter from Primary Care Physician-A letter of support from the physician currently providing primary care to the member and who is familiar with his/her attempts at weight reduction, medical history and current health status
5. Psychological evaluation - Athena Consulting 615-320-1155 or Evelyn Frye Center 615-385-4090
6. Nutritional evaluation - Centennial Outpatient Dietitian 615-342-3977

Gastric-band has these additional requirements: all the criteria listed above, dietary history does not include a consumption of high caloric liquids or sweets, no significant history of esophageal or gastric disease, must participate in a pre-operative bariatric program that requires a 5% weight loss to demonstrate commitment to behavioral and dietary changes. The 5% weight loss will be measured from the date of the patient's initial visit to the bariatric surgeon to the date of the request.

DS procedure is covered



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