

Insurance Verification

The Bariatric Clinic staff is committed to assisting you in the insurance approval process. However, it is your responsibility to call your insurance company and verify that you have coverage for bariatric surgery and what the specific criteria are. This call *must* be made and this form *must* be filled out before you can schedule any appointments.

The following questions will help start your discussion with your insurance carrier regarding coverage:

1. Do I have coverage for bariatric surgery?
2. What criteria (i.e. BMI, Comorbidities) do I need to meet in order to be considered for bariatric surgery?
3. Is there a requirement for a medically supervised weight loss program and if so, how long must I be in the program?
4. What medical documentation needs to be submitted for consideration of bariatric surgery?
5. Do I have a pre-existing clause?
6. Am I required to have a referral from my Primary Care Physician?
7. Am I required to have a prior authorization for bariatric consultation and/or surgery?

Other information your insurance carrier may need:

1. Diagnosis Code for Morbid Obesity = E66.01
2. Procedure Code for Laparoscopic Vertical Sleeve Gastrectomy = 43775
3. Procedure Code for Laparoscopic Roux-En-Y Gastric Bypass = 43644
4. Procedure Code for Laparoscopic Gastric Band = 43770
5. Procedure Code for Biliopancreatic Diversion with Duodenal Switch = 43845
6. Procedure Code for a Bariatric Surgical Revision = 43848

I have called my insurance company to verify that I have coverage for bariatric surgery, what the requirements are, and if there is a pre-existing clause. I understand that if my claim is denied due to any of the above mentioned conditions, I will be responsible for all charges.

Patient Signature

Date