



### **Bariatric Surgery Insurance Coverage Verification- Work Sheet**

This worksheet provides helpful information to use when you call your insurance provider to determine if your health insurance policy provides weight loss surgery coverage. Your employer elects which benefits to provide their employees and whether or not to provide the additional "rider"/coverage for obesity surgery.

After determining if you have surgery coverage, or if you have questions, please contact us to schedule your initial consultation please call 1 (484) 273-4222

Your insurance card (front and back) should provide the information you will need to verify your coverage.

Patient Name: \_\_\_\_\_ Date of Birth: \_\_\_/\_\_\_/\_\_\_

Insurance Name: \_\_\_\_\_ I.D. Number: \_\_\_\_\_

Subscriber Name: \_\_\_\_\_ Group # \_\_\_\_\_

**Please call the toll-free customer or member service phone number on your insurance card. Tell the representative that you wish to check your policy benefits. Please ask and write down the representative's name and date of the call:**

\_\_\_\_\_

**The representative will ask your name, policy (I.D.) number, your date of birth, etc. to look up your policy.**

**Please ask the following questions to obtain the necessary coverage information:**

1. Let the representative know you are calling to verify whether or not you have the Morbid Obesity Surgery coverage (rider) for Bariatric (weight loss) surgery.

**Ask: Do I have coverage? Yes \_\_\_\_\_/ No \_\_\_\_\_**

If asked for a Diagnosis Code (Insurance uses) for Morbid Obesity, it is **278.01 or E66.01.**

Note: If you do not have coverage, please contact us for further options

We can also provide self- pay amounts and payment guidelines for your review.

2. Does my policy require a Medical Supervised Weight Loss Trial that is documented for any length of time? (3), (6) or (12) months?
3. Does my policy require my primary care physician to provide a referral to see a specialist for consultation and treatment? Yes \_\_\_\_\_/ No \_\_\_\_\_

**INSURANCE CODES: Surgical Procedure Codes (if asked): Bypass (43644)/Sleeve (43775)**

Please note: completion of this form does not guarantee your approval for weight loss surgery or payment for medical services. Surgical pre-approval can only be obtained after necessary documentation is provided to your insurance provider. Should your health insurance provider deny payment for any services, you will be responsible for those charges. We cannot be held liable for any incorrect information provided to you by your health provider.