



Insurance Summary

Please check with your insurance company to make sure the procedure you are looking for is covered. Currently we perform Roux-En-Y Gastric Bypass, Duodenal Switch and Sleeve Gastrectomy.

Blue Care Network

Blue Care Network requires documentation showing a supervised weight loss program for six (6) consecutive months within the last three (3) years. If you have completed a six (6) month program, please have this documentation sent to us. The documentation should include regular weigh-ins, any dietary and behavioral counseling, and any prescribed medications for weight loss. A summary letter from your physician is not acceptable. Blue Care Network requires actual copies of the office notes. If your BMI (body mass index) is over 50, the weight loss requirement is waived. You will need to have a psychological evaluation with a Blue Care Network provider that is approved for bariatric surgery and then a follow up visit with our behaviorist. The visit for the follow up behaviorist appointment is out of pocket as the providers do not participate with Blue Care Network. Please have a copy of the psychological evaluation from the outside psychologist sent to our office and once we receive it, we will schedule your evaluation here. Please note that if you are from the east side of the state, Blue Care Network requires an authorization in place for you to see our physicians. Please have your primary care physician request the authorization. Once the dictation is complete and the team feels you are a candidate for surgery, copies of the dictation and the weight loss documentation will be faxed to Blue Care Network for authorization for surgery. It can take 30 to 45 days before we hear back from Blue Care Network if you are authorized. Your surgery will be scheduled once authorization is received and all tests/lab results are in.

Blue Cross Blue Shield/Blue Cross Blue Shield PPO/Blue Choice

You should check with your individual carrier to see what their requirements are. ***If you have purchased your BCBS of Michigan yourself and your plan is NOT through an employer, bariatric surgery is NOT a covered benefit.*** BCBS of Michigan requires a supervised weight loss program for six (6) consecutive months within the four (4) years prior to surgery. This supervised weight loss program must include monthly visits with a physician that address diet, exercise and behavior. You may do this either through our office or your primary care provider. If your BMI (body mass index) is over 50, the weight loss requirement is waived. If you have an out-of-state plan, you must check with them on their weight loss program requirements. After the dictation for all of the evaluations is complete and the team feels you are a candidate for surgery, copies will be sent into your insurance for authorization for the surgery if required for your type of BCBS. All out of state plans require authorization. It can take 30 to 45 days before we hear back from your insurance if you are authorized for surgery. For employer groups that do not require prior authorization, your surgery will be scheduled as long as the entire team agrees that you are a candidate for surgery and all of your test/lab results are in.



Commercial Carriers

You should check with your individual carrier to see what their requirements are. Appointments will be scheduled after we receive the signed Wellness Commitment Plan and we have authorizations for the visits if they are required. After the dictation for all of the evaluations is complete and the team feels you are a candidate for surgery, copies will be sent into your insurance for authorization for the surgery. Your surgery will be scheduled once the authorization is received and all tests/lab results are in.

Managed Care Medicaid

Our physicians only participate with Priority Health Medicaid. You will be given a pre-certification form at orientation. This should be given to your primary care physician to be filled out and faxed in to Priority Health Medicaid. Once we have received your signed Wellness Commitment Plan and an authorization from Priority Health Medicaid for your visits, your appointments will be scheduled. Please note, that if your BMI (body mass index) is below 50, Priority Health Medicaid will require that you do a Physician Supervised weight loss program for twelve (12) months. You can do this through our office or through your primary care physician's office. After the dictation from your visits is complete and the team feels you are an appropriate candidate for surgery, copies of the dictation will be faxed into Priority Health Medicaid for the authorization for surgery. Please note that Priority Health Medicaid requires that patients are smoke free before they will authorize the surgery. If you are currently a smoker, we will not be able to send your documentation into Priority Health Medicaid until we have a negative urine nicotine test. Once we have received an authorization for surgery and your tests/labs are in, surgery will be scheduled.

Managed Care Medicare

Our physicians only participate with Medicare Plus Blue and Priority Health Medicare. We do accept other managed care Medicare plans, but the services will be processed as Out of Network. Please contact the office in regards to your specific plan. For Medicare Plus Blue, you will need to contact them to make sure it is a covered benefit and what their requirements are. For Priority Health Medicare, we will send to your Primary Care Provider the authorization form for them to fill out and send in to Priority Health requesting an authorization for you to be seen here. Once we have received your signed Wellness Commitment Plan and an authorization from Priority Health Medicare for your visits, your appointments will be scheduled. After the dictation from your visits is complete and the team feels you are an appropriate candidate for surgery, copies of the dictation will be faxed into Priority Health Medicare. Please note that Priority Health Medicare requires that patients are smoke free before they will authorize the surgery. If you are currently a smoker, we will not be able to send your documentation into Priority Health Medicare until we have a negative urine nicotine test. Once we have received an authorization for surgery, and all tests/lab results, surgery will be scheduled.



Medicare

Medicare requires that you have at least one qualifying comorbid condition on their list of approved comorbid conditions in order for you to qualify for surgery. Our physicians will determine if you have one of the qualifying conditions when you are here for your history and physical. If you meet the criteria, you will then be scheduled for your surgical and psychological evaluations. After you have had your medical, psychological and surgical evaluation, and the physicians feel there is medical necessity for you to have surgery, the team feels you are a good candidate for surgery and all tests/lab results are in, your surgery will be scheduled.

Priority Health

For Priority Health, we will send to your Primary Care Provider the authorization form for them to fill out and send in to Priority Health requesting an authorization for you to be seen here. Once we have received your signed fee agreement and an authorization from Priority Health for your initial visits, your appointments will be scheduled. Please note that if your BMI (body mass index) is below 50, Priority Health will require that you do a Physician Supervised weight loss program for six (6) months. You can do this through our office or through your primary care physician's office. After the dictation from your visits are complete and the team feels you are an appropriate candidate for surgery, copies of the dictation will be faxed into Priority Health. Please note that Priority Health requires that patients are smoke free before they will authorize the surgery. If you are currently a smoker, we will not be able to send your documentation into Priority Health until we have a negative urine nicotine test. Once we have received an authorization for surgery and all tests/lab results are in, surgery will be scheduled.