



## GASTRIC SLEEVE PROCEDURE WHAT TO EXPECT

The plan covers services for providers and facilities at Blue Distinction Centers only.

Each facility has different criterion that must be met before an authorization request can be submitted to Florida Blue for medical necessity.

### Services that your provider may require:

- Initial consultation - Some providers require the member to have more than one office visit or group session(s).
- Psychological examination - Most psychologists will be out-of-network. The member pays at time of service and can submit a claim to Florida Blue for processing.
- Nutritional counseling – Most counselors will be out-of-network. The member pays at time of service and can submit a claim to Florida Blue for processing.
- Endoscopy
- Blood work

The member's cost share is based on the plan in which they are enrolled.

All services submitted with diagnosis code E66.01 (morbid obesity) will accumulate toward the \$40,000 lifetime maximum.

All services related to the procedure apply to the member's annual deductible and out-of-pocket maximums. If your plan requires a deductible and coinsurance, be prepared to pay those maximum amounts.

**DO YOUR RESEARCH:** We know that metropolitan areas like Orlando and Tampa Blue Distinction Centers charge more than those in rural areas. Call the facility's bariatric weight loss center and speak to the Program Manager about details on requirements and cost for the gastric sleeve procedure.

**DISCUSS COST WITH THE FACILITY:** Talk to the hospital finance office as to what your projected cost share will be for the entire gastric sleeve process. We recommend having this conversation early in the process to ensure the \$40,000 lifetime maximum will be sufficient.

### Exclusions:

- The plan will not cover revisions or complications to **ANY** prior bariatric surgery procedure that was not covered under the PRM plan
- The plan will not cover any cosmetic procedures or excess skin removal

