MAHP Bariatric Surgery Guidelines for Coverage

Description:
Surgery for morbid obesity is an alternative to traditional weight loss methods when such methods have failed to yield sufficient weight loss in Members who are at great risk of complication due to their obesity.

Criteria:
Members may receive surgical intervention for obesity when the following criteria are met:

1. Must be at least 18 years of age

2. BMI >35 and two life endangering co-morbidities.

    Co-morbidities include but not limited to:
    • Poorly controlled diabetes mellitus.
    • Symptomatic sleep apnea not controlled by C-Pap.
    • Severe cardio-pulmonary condition
    • Hypertension inadequately controlled with optimal conventional treatment
    • Uncontrolled Hyperlipidemia not amenable to optimal conventional treatment

3. BMI > 40 with or without co-morbid conditions.

4. Prior authorization by the Medical Director based on the following criteria and subject to providers as authorized by Plan.

5. **Physician documented successful participation in a physician supervised weight loss program involving a weight loss diet, exercise and behavioral modification for a minimum of one (1) year, performed within the last two (2) years.** Successful participation is determined at a minimum by documented regular attendance (at least monthly) and demonstration of consistent weight loss. The weight loss program must be medically supervised and provided by a plan provider. A physician’s summary letter will not be considered sufficient documentation. The documentation must include medical records/clinical notes of the physician’s contemporaneous

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assessment of the member’s progress throughout the course of the weight loss program.

6. The weight loss program must be medically supervised and provided by a plan provider and available and accessible to members. Members will be covered for all medical services but not for food supplements. All medical services related to the program including laboratory, EKGs, physician office visits, psychological testing will be covered with applicable co-payments and/or deductibles required under the certificate. The facility must utilize a multidisciplinary approach, including but not limited to: involvement of a physician with a special interest in obesity, a dietitian, a social worker (MSW), psychologist or psychiatrist interested in behavioral modification and eating disorders. Plans should have pre and post surgical support both available and accessible with coverage clearly stated to its members.

7. A psychological evaluation must be performed by a licensed independent behavioral specialist prior to surgery in order to establish the member’s emotional stability and ability to comply with post-surgical limitations.

8. Requires referral by primary care physician to a multidisciplinary team.

9. The member must receive treatment at a facility utilizing a multidisciplinary approach, involving a physician with a special interest in obesity, a dietitian, a psychologist or psychiatrist interested in behavior modification and eating disorders, and a surgeon with experience in all aspects of bariatric procedures.

10. Long term behavioral modification support and lifelong medical surveillance after surgical therapy is a necessity.

11. Member has undergone medical evaluation to rule out other treatable causes of morbid obesity.

12. A member shall only have one bariatric surgical procedure per lifetime unless medically necessary complication to correct or reverse a previous bariatric procedure from complications.

Exclusion:

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1. Those procedures that lack evidence-based medicine to support the long term safety and efficacy

2. Members with one or more of the following conditions: Active substance abuse, defined non-compliance with previous medical care, terminal disease, pregnancy, or severe psychopathology.