

## Bariatric Benefit

Not all patients have the bariatric benefit.

Add-on benefit that not all employers choose to add

Always best for provider to refer interested patients and let Clinical Review make an official determination

**How much will the surgery cost?** Aside from the \$500 out-of-pocket fee for the nutrition counseling (required), patients should be directed to Kaiser Permanente Member Services for information about co-payments and cost-shares

## Bariatric Referrals

**Kaiser Permanente providers:** EPIC referral: BVU Bariatric Surgery

- Bariatric Nurse enters all bariatric referrals from work que into One Health Port
- Clinic Review will review each referral for bariatric benefit and medical criteria
- Determination letter mailed to the patient within 30 days of referral entry

**Contracted Providers:** Bariatric Checklist Referral (paper copy)

Faxed to Clinical Review (fax number on the form), along with medical records and names of 2 diets that patient has tried in the past

**Self-Pay** (if patient does not have the bariatric benefit)

Kaiser Permanente is not providing bariatric surgery for self-pay patients. There is an insurance that is available (BLIS) to bariatric surgeons (*not individual patients*), that covers complications of bariatric surgery (though not the actual bariatric surgical procedure). If bariatric surgeons elect to carry this insurance, it must apply to all self-pay patients that they operate on. Kaiser Permanente has elected not to carry this benefit. Complications, though rare, can be very expensive. Kaiser Permanente has opted to recommend that patients wanting to pay for their bariatric surgery, contact Overlake Bariatric Clinic (Dr. Nguyen- 425-467-3957, office manager Shiree).

## Bariatric Pre-Op Case Management

- Chart Review Completed
- Orders placed for medical work up (based on program protocol), pending to PCP
- Note encounter routed to PCP, asking them to sign the orders
- Email sent to patient and PCP
- New patient packet mailed to patient outlining program and requirements
- Patient schedule for the Bariatric Education Class (must be in the program to attend)
- When required work up completed, consults scheduled with surgeon and dietitian
- Surgery date scheduled following consults

## Frequent Questions

### **I've decided that I don't want to proceed in the program:**

Nearly all patients that have been approved into the bariatric program have tried multiple diets. Diets have a hard time working on people with excessive weight to lose. We never want to pressure a patient to move forward with surgery – however knowing that they have tried everything else, we want them to have the opportunity to make the most educated decision possible. We recommend that they attend the Bariatric Education Class and read their notebook.

We keep their case management active until their referral expires (for one year – regardless of the expiration date on the auth letter – we give them one year from the date of the auth letter). So long as they are in case management – they are fine to proceed with us.

### **If I got approved into the program, am I approved for surgery?**

The initial referral is authorization into the program. Once the patient has completed the pre-op requirements, has been seen by the surgeon and a consult for surgery signed, *our* office will submit a new referral request for the surgery. Patients must still have the bariatric benefit at the time of surgery (i.e. not change jobs or in rare cases their employers drops the benefit).

### **It's been determined that the risk is too high – but “I'm willing to take that risk”:**

If it's been determined that the risk is too great – for whatever reason – the surgeon will not proceed – even if the patient is willing to take the risk. We provide care that is the meant to improve the health and quality of life and Do No Harm.

## Dietitian

Bariatric nutrition counseling is *not* a covered benefit.

All pre-op patients are required to pay \$500 and work with our bariatric program dietitian (pre-op consult, post op apt, 2 month and 6 month follow ups) – no referral needed for this.