



Billing and Insurance Patient Information Sheet

Thank you for choosing Allina Health Weight Management – Surgical Program. Our mission is to provide an exceptional experience in our clinic and hospital settings.

We know that insurance coverage, billing, payments, co-payments and deductibles can be confusing. Although it is **your responsibility** to know this information the following tips may help clarify your individual coverage and insurance eligibility for weight loss surgery.

Determining Your Health Insurance Coverage

Questions to ask your insurance provider before your surgery

To learn about your specific coverage, call your insurance provider before you start the steps toward having weight loss surgery.

Look for the telephone number on your membership card. Use this worksheet as a guide to help you get a clear idea of your coverage.

Date/Time of call _____

Person spoken to _____

Reference number of call _____

1. Is weight loss surgery covered under my insurance plan if I meet all the criteria needed to have the surgery? ☐ yes ☐ no
2. Is weight loss surgery at _____ (hospital) covered under my insurance plan. ☐ yes ☐ no
3. Is Dr. _____ (name of surgeon) in-network? ☐ yes ☐ no

If “yes” to the first three questions:

1. Is laparoscopic _____ (name of surgery) covered?
☐ yes ☐ no (Choose from: Roux-en-Y gastric bypass, sleeve gastrectomy or duodenal switch)

2. What is the effective date of my insurance plan? _____

Is this a plan year or calendar year? _____

If a plan year, plan start date _____ to _____

3. What is my maximum out-of-pocket? _____

4. What is my deductible? _____

5. What is my co-pay for clinic visits? _____

6. Do I need to have a BMI of 40 or higher to qualify for surgery? ☐ yes ☐ no

Important

The person you speak with may need the following information:

■ Diagnosis code: E66.01

■ CPT codes:

____ Roux-en-Y gastric
bypass: 43644

____ Sleeve gastrectomy:
43775

____ Duodenal switch:
43659

■ Provider Visit Codes

____ 98003

____ 98004

____ 98005

____ 98006

____ 98007

____ 99205

____ 99245

____ 99214

7. If I have a BMI of 35 or higher, what other medical (co-morbid) conditions qualify me for surgery?

8. Will I need to have nutritional counseling before surgery?

☐ yes ☐ no

If yes, how many months? _____

Will these appointments be covered? ☐ yes ☐ no

9. Will my psychological evaluation be covered? ☐ yes ☐ no

10. Is there a weight history requirement? ☐ yes ☐ no

If yes, how many years? _____

11. Is there any other criteria I need to meet before having surgery? ☐ yes ☐ no

Nutrition Counseling

CPT codes:

■ 97802

■ 97803

Insurance and Billing Tips

As part of the Weight Loss Management program, you will have appointments with nurses, registered dietitians and your surgeon. These visits are an important part of the program.

It is important for you to understand your benefits, deductibles and coinsurance. You may be responsible for part or all of the payment for these appointments.

Important

- If additional testing or procedures are needed, check with your insurance provider to find out if you need a referral from your primary care provider before you have the test or procedure.
- If you have a secondary insurance, prior authorization will need to be received from that insurance provider as well. Please tell a weight loss surgery staff member or referral specialist of all of your insurance plan information.
- If you have any changes in your insurance coverage during your care, make sure a weight loss surgery staff member or referral specialist is aware of the change, termination or addition of insurance.