

Bariatric Surgery Criteria by Market

The purpose of this document is to provide an overview of the list of criteria FEHB members must meet in order to qualify for bariatric surgery.

We cover diagnosis and treatment of morbid obesity that is recognized by the National Institutes of Health and is consistent with guidelines approved by the National Institutes of Health. BMI means a practical marker that is used to assess the degree of obesity and is calculated by dividing the weight in kilograms divided by height in meters squared.

For more information, please refer to your Market's FEHB brochure or Medicare Advantage EOC. You may also contact Member Services for assistance.

California

- have a Body Mass Index (BMI) greater than 40. If your BMI is 35 to 40, bariatric surgery may be covered if the Medical Group authorizes the services in accord with the Medical Group's bariatric surgery referral guidelines. The guidelines may require that a significant co-morbidity directly related to obesity be present, such as: moderate to severe sleep apnea, hypertension requiring medication, and diabetes; and
- meet all other bariatric surgery referral guidelines, including but not limited to: nutritional, psychological, medical, and social readiness for surgery, and complete a Medical Group approved pre-surgical educational preparatory program regarding lifestyle changes necessary for long-term bariatric surgery success

Hawaii

- be 18 years of age or older; and
- have a Body Mass Index (BMI) greater than 40. If your BMI is 35 to 40, bariatric surgery may be covered if the Medical Group authorizes the services in accord with the Medical Group's bariatric surgery referral guidelines. The guidelines may require that a significant co-morbidity directly related to obesity be present, such as: moderate to severe sleep apnea, hypertension requiring medication, and diabetes; and
- meet all other bariatric surgery referral guidelines, including but not limited to: nutritional, psychological, medical, and social readiness for surgery, and complete a Medical Group approved pre-surgical educational preparatory program regarding lifestyle changes necessary for long-term bariatric surgery success

This is a summary of the features of the Kaiser Permanente health plan. Before making a final decision, please read the Plan's Federal brochure (Northern California RI 73-003; Fresno California RI 73-889; Southern California RI 73-822; Colorado RI 73-019; Georgia RI 73-321; Hawaii RI 73-005; Maryland, Virginia, Washington D.C. RI 73-047; Oregon, Southwest Washington RI 73-004; Washington Core RI 73-012; Washington Options Federal RI 73-051). All benefits are subject to the definitions, limitations, and exclusions set forth in the Federal brochure.

Northwest

- must be 18 years of age or older and have a Body Mass Index (BMI) that is:
 - equal to or greater than 35 with one or more severe or life-threatening conditions in the following categories: uncontrolled sleep apnea, congestive heart failure, obesity hypoventilation, uncontrolled diabetes mellitus, uncontrolled severe hypertriglyceridemia, hypertension with high blood pressure, refractory extremity edema with ulceration, end-stage renal disease with difficulty dialyzing, uncontrolled gastroesophageal reflux, stress incontinence related to obesity, pseudotumor cerebri; or
 - equal to or greater than 40 with no severe or life-threatening condition
- you must participate in a recognized commercial behavioral weight management program for at least six months
- you will need to meet the above qualifications and obtain an approved referral from your Plan provider to our bariatric surgery program. You must sign and comply with the "Severe Obesity Evaluation and Management Program Contract for Participation." Final approval for surgical treatment will be required from the Northwest Permanente Medical Group's designated physician.

Washington Core

- be 20 years of age or older; and
- your BMI (Body Mass Index) must be 40 or greater (or between 35 and 39, with medical record documentation of one or more complicating medical conditions)
- you must have failed all non-surgical methods of weight loss
- your medical record must show the absence of medical contraindications for the procedure
- You will need to meet the above qualifications before your Plan provider will refer you to our bariatric surgery program. This program may refer you to other Plan providers to determine if you meet the additional criteria necessary for bariatric surgery, including nutritional, psychological, medical and social readiness for surgery. Final approval for surgical treatment will be required from the Kaiser Permanente clinical review physician.

Washington Options

- surgical treatment (bariatric surgery) and all services associated with the surgical treatment of morbid obesity
- must be at least 18 years or older, have no other health conditions with a Body Mass Index (BMI) of 40 or greater, or have at least one complicating medical condition with a BMI of 35 or greater
- all inpatient and outpatient surgical treatment for morbid obesity must be preauthorized and performed through a bariatric surgery Center of Excellence

Colorado

- be 18 years of age or older; and
- have a Body Mass Index (BMI) of 40 or greater, with or without the presence of co-morbidities; or have a BMI of 35 to 39.9 and diabetes; or have a BMI of 35 to 39.9, without diabetes, when any one of the following life-threatening co-morbidities are present and if they have failed standard medical therapy: obesity-related pulmonary or cardiovascular disease (lung or heart disease); uncontrolled hypertension (uncontrolled high blood pressure); severe osteoarthritis (swelling of a weight bearing joint); pseudotumor cerebri (high pressure in fluid around the brain); and severe dyslipidemia (disorder of fats and cholesterol in the blood)
- You will need to meet the qualifications before your Plan provider will refer you to our bariatric surgery program. This program may refer you to other Plan providers to determine if you meet the additional criteria necessary for bariatric surgery, including nutritional, psychological, medical and social readiness for surgery. Final approval for surgical treatment will be required from the Colorado Permanente Medical Group's designated physician.

Mid-Atlantic States

- be 18 years of age or older; and
- a body mass index (BMI) equal to or greater than 35 kilograms per meter squared with a co-morbid medical condition, including hypertension, a cardiopulmonary condition, sleep apnea, or diabetes; or
- a BMI greater than 40 kilograms per meter squared without co-morbidity
- not be excluded due to a history alcohol or drug use within the past 2 years or have certain behavioral health diagnoses
- sleep apnea, diabetes, degenerative joint disease of weight bearing joints, hypertension, congestive heart failure and/or cardiomyopathy
- You will need to meet the above qualifications before your network provider will refer you to our bariatric surgery program. This program may refer you to other network providers to determine if you meet the additional criteria necessary for bariatric surgery, including nutritional, psychological, medical and social readiness for surgery. Final approval for surgical treatment will be required from the plan-designated physician.

Georgia

- be 18 years of age or older; and
- have a Body Mass Index (BMI) greater than 40; or a BMI greater than 35 with another severe or life-threatening condition such as: sleep apnea, cardiomyopathy or severe diabetes; and
- have weight control failure; and have made a commitment to a long term weight management plan and a behavioral health and nutrition assessment; and have no untreated metabolic cause of obesity
- You will need to meet the above qualifications before your Plan provider will refer you to our bariatric surgery program. This program may refer you to other Plan providers to determine if you meet the additional criteria necessary for bariatric surgery, including nutritional, psychological, medical and social readiness for surgery. Final approval for surgical treatment will be required from The Southeast Permanente Medical Group's designated physician.