

LA.CLI.038 Bariatric Surgery

Effective Date:	January 1, 2023	Accountable Dept.:	LA Medicaid Care Management
Last Reviewed Date:	May 15, 2023		

Summary of Changes:

No changes; reviewed due to annual review

Scope:

This policy applies to all Humana Healthy Horizons® in Louisiana (Plan) associates who administer, review, or communicate covered physical and behavioral health benefits and services to eligible enrolled members.

Procedures:

1. Bariatric Surgery

Bariatric surgery consists of open or laparoscopic procedures that revise the gastrointestinal anatomy to restrict the size of the stomach, reduce absorption of nutrients, or both.

Bariatric surgery is medically necessary, as determined by meeting ALL the following criteria:

- 1.1 The member has received a preoperative evaluation within the previous 12 months that is conducted by a multidisciplinary team including, at a minimum, a physician, nutritionist, or dietician, and a licensed qualified mental health professional. For members under the age of 18, the multidisciplinary team must have pediatric expertise. For all members, the preoperative evaluation must document all of the following:
 - 1.1.1 A determination that previous attempt(s) at weight loss have been unsuccessful and that future attempts, other than bariatric surgery, are not likely to be successful; and
 - 1.1.2 A determination that the member is capable of adhering to the post-surgery diet and follow-up care; and
 - 1.1.3 For individuals capable of becoming pregnant, counseling to avoid pregnancy preoperatively and for at least 12 months postoperatively and until weight has stabilized.
- 1.2 Members age 18 and older must have:
 - 1.2.1 A body mass index equal to or greater than 40 kg/m², or more than 100 pounds overweight; or
 - 1.2.2 A body mass index of greater or equal to 35 kg/m² with one or more comorbidities related to obesity:
 - 1.2.2.1 Type 2 diabetes mellitus,

- 1.2.2.2 Cardiovascular disease (e.g., stroke, myocardial infarction, poorly controlled hypertension (systemic blood pressure greater than 140 mm Hg or diastolic blood pressure 90 mm Hg or greater, despite pharmacotherapy),
- 1.2.2.3 History of coronary artery disease with a surgical intervention such as coronary artery Bypass or percutaneous transluminal coronary angioplasty,
- 1.2.2.4 History of cardiomyopathy,
- 1.2.2.5 Obstructive sleep apnea confirmed on polysomnography with an AHI or RDI of 30, or
- 1.2.2.6 Any other comorbidity related to obesity that is determined by the preoperative evaluation to be improved by weight loss; or
- 1.2.3 A body mass index of 30 to 34.9 kg/m² with type 2 diabetes mellitus if hyperglycemia inadequately controlled despite optimal medical control by oral or injectable medications.
- 1.3 Members age 13 through 17 years old must have:
 - 1.3.1 A body mass index equal to or greater than 40 kg/m² or 140% of the 95th percentile for age and sex, whichever is lower; or
 - 1.3.2 A body mass index of 35 to 39.9 kg/m² or 120% of the 95th percentile for age and sex, whichever is lower, with one or more comorbidities related to obesity:
 - 1.3.2.1 Obstructive sleep apnea confirmed on polysomnography with an AHI > 5,
 - 1.3.2.2 Type 2 diabetes mellitus,
 - 1.3.2.3 Idiopathic intracranial hypertension
 - 1.3.2.4 Nonalcoholic steatohepatitis,
 - 1.3.2.5 Blount's disease,
 - 1.3.2.6 Slipped capital femoral epiphysis,
 - 1.3.2.7 Gastroesophageal reflux disease,
 - 1.3.2.8 Hypertension, or
 - 1.3.2.9 Any other comorbidity related to obesity that is determined by the preoperative evaluation to be improved by weight loss.
- 1.4 Requests for bariatric surgery for members under the age of 13 will be reviewed on a case-by-case basis.
- 2. Panniculectomy Subsequent to Bariatric Surgery

Panniculectomy after bariatric surgery meets medically necessary, as determined by the following criteria:

 - 2.1 The member had bariatric surgery at least 18 months prior and the member's weight has been stable for at least 6 months; and
 - 2.2 The pannus is at or below the level of the pubic symphysis; and
 - 2.3 The pannus causes significant consequences, as indicated by at least one of the following:
 - 2.3.1 Cellulitis, other infections, skin ulcerations, or persistent dermatitis that failed to respond to at least 3 months of non-surgical treatment; or
 - 2.3.2 Functional impairment such as interference with ambulation.

Definitions:

N/A

References:

Louisiana Department of Health, Louisiana Medicaid Managed Care Organization (MCO) Manual; Updated June 30, 2022. MCO_Manual_2022-06-30.pdf (la.gov).

Version Control:

8/22/22: Policy creation-Approved by LDH for Readiness

5/15/23: Approved by LA UM Committee

9/26/23: Changed to new template for Annual Review Due by 5.15.24. K Wise, MCD Clinical Delivery Experience

1/11/24: Minor changes made. K Wise, RN MCD Clinical Delivery Experience

Owner:	Kelli Wise	Executive Team Member:	LORI DUNNE/DR GUPTA
Accountable VP / Director:	Nicole Thibodeaux		

Non-Compliance:

Failure to comply with any part of Humana’s policies, procedures, and guidelines may result in disciplinary actions up to and including termination of employment, services, or relationship with Humana. In addition, state and/or federal agencies may take action in accordance with applicable laws, rules, and regulations.

Any unlawful act involving Humana systems or information may result in Humana turning over all evidence of unlawful activity to appropriate authorities. Information on handling sanctions related to noncompliance with this policy may be found in the Expectations for Performance, and Critical Offenses policies, both of which may be found in the Associate Support Center via Humana’s secure intranet on Hi! (Workday & Apps/Associate Support Center).