What is weight loss surgery?

Weight loss surgery (bariatric surgery) is a treatment for people who are obese. People who are obese frequently have more medical problems, like diabetes, high blood pressure and breathing problems during sleep. They may live shorter lives, too. Being a healthy weight is important, and losing weight can help you feel better. It also may help relieve any medical problems you have because of your extra weight.

Why might your doctor recommend weight loss surgery?

Severely obese people who have tried but can’t lose enough weight from healthy eating, exercise and, in certain situations, medication, may be helped by weight loss surgery. Your doctor might suggest you think about weight loss surgery if you have not been able to reach or stay at a healthy weight. For the surgery to work, you have to be ready to change the way you eat, and be ready and able to follow strict rules about the way you eat.

If you can’t or don’t follow the diet after the surgery it does not work. However, if you do follow the diet and remain active, the surgery can help you lose weight. This may help you if you have diseases associated with obesity, such as heart disease, high blood pressure, type 2 diabetes and certain types of arthritis.

Is weight loss surgery for you?

Since it can be hard to change the way you eat and follow the rules after the surgery, your doctor will talk to you about the risks and benefits of surgery. One important item in the decision is how overweight an individual is. Doctors calculate the body mass index (BMI), a measure for how overweight a person is, and take a careful medical history to see if you might be helped by the surgery. BMI tells you and your doctor if your weight is right for your height. A normal BMI is between 18.5 and 25. Your doctor will also check your overall health to find out if surgery can help. BMI over 35 is called obesity, and BMI over 40 is called morbid obesity. Morbid is a word which means deadly and tells you that having that high a BMI is very serious.

How does your doctor know if weight loss surgery might help you? Your doctor might suggest weight loss surgery if you have a:

- **BMI of 40 or more.**
- **BMI of 35 or more** and a serious health issue. This includes serious sleep issues, type 2 diabetes, high blood pressure or heart disease. To determine your BMI, use the calculator on nhlbi-support.com/bmi.

Types of weight loss surgery

There are different kinds of weight loss surgeries. Some limit the amount of food you can eat at one meal by making your stomach smaller. Others change the way your bowels work to limit the amount of calories you can absorb. Some surgeries do both. The following weight loss surgery options may be viewed as Medically Necessary:

- **Adjustable Gastric Band** limits the amount of food you can eat by putting a bracelet-like band around the top of your stomach to make your stomach opening smaller.

- **Gastric Bypass (Roux-en-Y):** This surgery changes the way you absorb food. Your stomach is cut into a small and large section, and then hooked back up to your small intestine. The small section (pouch) is where the food you eat will go. Since it is smaller than your current stomach, you will feel full sooner. If you pay attention to this, you should eat less. In addition, the pouch is hooked up to your bowel in a different place (middle of the small intestine) so some of the food you eat skips (bypasses) the places in your intestines where calories and nutrients are absorbed. Eating smaller meals and not absorbing all the calories you eat helps you lose weight.

- **Biliopancreatic Bypass with Duodenal Switch:** A part of your stomach is removed and a portion of the stomach is left intact and it rearranges your intestines.

- **Sleeve gastrectomy:** Most of your stomach (80-85%) is removed.
There are other weight loss surgery options. However, evidence regarding the risks and benefits are less clear for these procedures. Because of this, the following weight loss surgery options are considered Investigational:

- Mini gastric bypass
- Biliopancreatic Bypass Procedure (the Scopinaro procedure)
- Long Limb Gastric Bypass
- Other restrictive procedures including the EndoGastric StomaphyX™ endoluminal fastener and delivery system and laparoscopic gastric plication.

What to expect

After surgery, you’ll need to watch how much food you eat – and what kind. As with any surgery there are some risks, too. Some people get infections, blood clots and hernias (organs bulging through your muscle). Talk to your doctor about your risks.

Ask your doctor

- Are there are other ways of losing weight that I should try first?
- Why do people choose weight loss surgery?
- What should I expect about eating and diet after the surgery, if I have the surgery?
- Am I aware of the risks and complications of each procedure?
- Is this for me?

Your health plan

Make sure to read our medical policy on weight loss surgery. You may also learn more at Network of the National Institute of Diabetes and Digestive and Kidney Diseases. Bariatric Surgery for Severe Obesity (http://www.win.niddk.nih.gov/publications/gastric.htm). Also, find out what your health plan covers by looking at your policy or by calling customer service at 877-875-1223.

Read other medical policies at anthem.com, by selecting Providers > Select your state from the drop down menu and select Enter > Select Enter under Medical Policy, Clinical UM Guidelines, and Pre-Cert Requirements > Select Medical Policies and Clinical UM Guidelines (for Local Plan members).

This Consumer Tool is intended to provide you with general background information about this procedure or service, however it is not intended to summarize, list all applicable clinical criteria in the medical policy or clinical UM guideline, nor does it replace the applicable medical policy or clinical UM guideline which will be used to determine the available benefits under the terms of your Health Benefit Plan. In accordance with terms of your Plan, the medical policy or clinical UM guideline is the controlling document and this Consumer Tool does not supersedes it. If there is any conflict between this Consumer Tool and the medical policy or clinical UM guideline, the medical policy or clinical UM guideline will be the governing document. In addition, this Consumer Tool is not intended to serve as medical advice. Please check with your physician for any advice about your health.

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