

# **SHBP 2016 Bariatric Surgery Pilot Program Member Application Process**

October 19, 2015

## **SHBP 2016 Bariatric Surgery Pilot Program Description**

The Georgia Legislature has established a two-year pilot program (House Bill 511) to provide benefit coverage by the State Health Benefit Plan (SHBP) for certain bariatric surgical procedures for the treatment and management of obesity and related conditions for those SHBP members selected for inclusion in this pilot program. The bariatric surgical procedures covered in the pilot program are: gastric band, laparoscopic sleeve gastrectomy and laparoscopic Rouen-Y gastric bypass. The SHBP 2016 Bariatric Surgery Pilot Program established by House Bill 511 includes qualifying criteria; however, it is not limited to the criteria listed in House Bill 511. House Bill 511 also provides for a review panel, provision of an evaluation report of this pilot program and subsequent reviews.

The pilot program is limited to 75 (non-Medicare Advantage) members for the 2016 Plan Year. SHBP members must agree to the program requirements and complete the SHBP 2016 Bariatric Surgery Pilot Program application. A member is defined as an employee, non-Medicare Advantage retiree, spouse or dependent, 18 years and older, covered as primary by SHBP for two or more years. Members will be chosen through a random selection process held by the medical claims administrator that the member has enrolled in for Plan Year 2016.

## **What Interested Members Must Do**

Review the program description and requirements. The SHBP 2016 Bariatric Surgery Pilot Program application and program description are available on the DCH website (<http://dch.georgia.gov/shbp>).

The member agrees he/she meets the following eligibility requirements as outlined in Section A of the SHBP 2016 Bariatric Surgery Pilot Program application:

- He/she is primary under the SHBP
- Is 18 years and older
- Does not use tobacco
- Has been covered under SHBP as primary for two years immediately prior to submission of the application. He/she intends to continue active coverage under SHBP for two years following the approved surgical procedure date
- He/she has not had previous bariatric surgery

Member must have their physician complete Section B of the SHBP 2016 Bariatric Surgery Pilot Program application certifying the member meets the clinical requirements of the application. Section B may be completed and signed by the member's physician before January 1, 2016.

Members must complete an online 2016 health assessment no earlier than January 1, 2016. Healthways will administer the health assessment referred to as "Well-Being Assessment" for both Blue Cross and Blue Shield of Georgia (BCBSGa) and UnitedHealthcare, and will be available at [www.BeWellSHBP.com](http://www.BeWellSHBP.com). Kaiser Permanente will administer their health assessment referred to as "Total Health Assessment" and will be available at [www.my.kp.org/shbp](http://www.my.kp.org/shbp).

The member agrees he/she will satisfy the following participation requirements also outlined in Section A of the application if member is selected to participate in this pilot program:

- The member agrees to provide a primary phone number and email address where he/she can be easily reached by their medical claims administrator.
- The member consents to provide personal and medical information as requested by the SHBP or their medical claims administrator for pre-operative surgical and post-surgical records in the timeframes requested.
- The member agrees to enroll in a pre-operative and 24-month post-operative SHBP case management program which requires regular calls with nurse case managers.

- The member agrees to return his/her case manager calls in a timely manner. Failure to do so may result in disenrollment from the SHBP 2016 Bariatric Surgery Pilot Program.
- The member agrees if he/she is selected to participate in the SHBP 2016 Bariatric Surgery Pilot Program, approved bariatric surgery and related services will be considered a covered benefit. **The member agrees he/she will be responsible for applicable co-pays, deductibles, and/or co-insurance that apply to all covered services up to the maximum allowed amount for his/her health plan.**
- Any travel or lodging costs associated with the bariatric surgery, including attempts to qualify, are not covered.
- **The member understands their surgeon may charge additional pre-operative fees that may not be covered under his/her health plan.** The member also understands if he/she is selected to participate in the SHBP 2016 Bariatric Surgery Pilot Program, **their bariatric surgeon may require additional fees, not covered by the plan to cover items such as vitamins, protein shakes and other supplements.**
- The member intends to continue active coverage under SHBP for two years following the approved surgical procedure date;
- The member will comply with any and all requests by the SHBP for post-surgical medical and productivity information, and such agreement will survive his/her Plan participation in the SHBP for two years following the approved surgical procedure date.

The completed SHBP 2016 Bariatric Surgery Pilot Program application form should be submitted to the member's medical claim administrator **no earlier** than January 1, 2016, and should be postmarked **no later** than February 4, 2016. **Applications received or postmarked before January 1, 2016 or after February 4, 2016 will not be accepted.**

Member applications must be sent to the medical claims administrator elected for Plan Year 2016 SHBP coverage at the addresses listed below:

**Blue Cross and Blue Shield of Georgia**

Blue Cross and Blue Shield of Georgia

Attention: SHBP 2016 Bariatric Surgery Pilot Program, Administrator: Kellie Kirven  
6087 Technology Parkway  
Midland, Georgia 31820

Member Services number to contact for verification and questions: 855-641-4862

**Kaiser Permanente**

Kaiser Foundation Health Plan of Georgia, Inc.

Attention: SHBP 2016 Bariatric Surgery Pilot Program, Administrator: Kameshia Jones  
3495 Piedmont Road, NE  
Building 9, 2nd floor  
Atlanta, GA 30305-1736

Member Services number to contact for verification and questions: 855-512-5997

**UnitedHealthcare**

UnitedHealthcare

Attention: SHBP 2016 Bariatric Surgery Pilot Program, Administrator: Arlene James  
4170 Ashford Dunwoody Road, Suite 100  
Atlanta, GA 30319

Member Services number to contact for verification and questions: 888-364-6352

**Note: Any applications mailed in error to the Georgia Department of Community of Health or State Health Benefit Plan will not be considered for the SHBP 2016 Bariatric Surgery Pilot Program.**

A list of SHBP 2016 Bariatric Surgery Pilot Program Frequently Asked Questions (FAQ) is available on the DCH website (<http://dch.georgia.gov/shbp>).

*Applications determined to be incomplete by the member's medical claims administrator will not be in the random drawing selection process.*

Each complete application placed in the random selection process will be assigned and recorded the selection number as each is drawn.

Only the first drawn slots allotted to each medical claims administrator (based on each medical claim administrator's 2016 enrollment) will be offered acceptance into this SHBP 2016 Bariatric Surgery Pilot Program. These 75 randomly selected eligible applicants will be notified of their inclusion in the SHBP 2016 Bariatric Surgery Pilot Program via phone and mail by their medical claims administrator after March 1, 2016. The remaining eligible and complete applications will be held by each administrator and assigned to their 2016 wait-list.

<b>Members selected, will be contacted by their 2016 medical claims administrator by phone &amp; mail. Members selected will be advised of the program process, timeframes and requirements.</b>	
1. Medical claims administrator's clinical case management staff will assist the member's chosen bariatric surgeon in completing the prior authorization and medical necessity requirements	<b>Note:</b> If a member rescinds request to proceed at any point in the authorization process, does not respond to outreach by their medical claims administrator or is denied authorization for surgery, a letter will be sent confirming withdrawal or denial. Then the next randomly selected member is notified via mail that they are now eligible.
2. When program requirements and medical necessity are met, surgical authorization is provided to the member	
3. Case manager works with bariatric surgeon scheduling the surgery	
4. Case manager engages with the member and bariatric surgeon throughout the process to support goals	