

Humana Healthy Horizons™ in Louisiana

Department: Utilization Management	Policy and Procedure No:		
Policy and Procedure Title: Bariatric Surgery Clinical Coverage Policy			
Process Cycle: Annually		Responsible Departments: Clinical	
Approved By: Patricia Jones, RN		Issue Date: 1/1/23	Revised:

PURPOSE: The purpose of this policy is to define Bariatric Surgery and the criteria for medical necessity for Humana Healthy Horizons in Louisiana.

POLICY AND PROCEDURE:

Policy: Bariatric Surgery Clinical Coverage Policy

Procedure:

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:

- ❖ 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 dietitian, 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:
 - 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**
 - A determination that the member is capable of adhering to the post-surgery diet and follow-up care; **and**
 - For individuals capable of becoming pregnant, counseling to avoid pregnancy preoperatively and for at least 12 months postoperatively and until weight has stabilized.
- ❖ Members **age 18 and older** must have:
 - A body mass index equal to or greater than 40 kg/m² , or more than 100 pounds overweight; **or**
 - A body mass index of greater or equal to 35 kg/m² with one or more comorbidities related to obesity:
 - Type 2 diabetes mellitus,
 - 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),

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- History of coronary artery disease with a surgical intervention such as coronary artery Bypass or percutaneous transluminal coronary angioplasty,
 - History of cardiomyopathy,
 - Obstructive sleep apnea confirmed on polysomnography with an AHI or RDI of ≥ 30 , or
 - Any other comorbidity related to obesity that is determined by the preoperative evaluation to be improved by weight loss; **or**
- A body mass index of 30 to 34.9 kg/m² with type 2 diabetes mellitus if hyperglycemia is inadequately controlled despite optimal medical control by oral or injectable medications.
- ❖ Members **age 13 through 17 years** old must have:
 - 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**
 - 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:
 - Obstructive sleep apnea confirmed on polysomnography with an AHI > 5 ,
 - Type 2 diabetes mellitus,
 - Idiopathic intracranial hypertension
 - Nonalcoholic steatohepatitis,
 - Blount's disease,
 - Slipped capital femoral epiphysis,
 - Gastroesophageal reflux disease,
 - Hypertension, or
 - Any other comorbidity related to obesity that is determined by the preoperative evaluation to be improved by weight loss.
- ❖ Requests for bariatric surgery for members under the age of 13 will be reviewed on a case-by-case basis.

Panniculectomy Subsequent to Bariatric Surgery

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

- ❖ The member had bariatric surgery at least 18 months prior and the member's weight has been stable for at least 6 months; **and**

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- ❖ The pannus is at or below the level of the pubic symphysis; **and**
- ❖ The pannus causes significant consequences, as indicated by at least one of the following:
 - Cellulitis, other infections, skin ulcerations, or persistent dermatitis that has failed to respond to at least 3 months of non-surgical treatment; **or**
 - Functional impairment such as interference with ambulation.

ADDITIONAL RESOURCES:

Louisiana Department of Health, Louisiana Medicaid Managed Care Organization (MCO) Manual; Updated June 30, 2022. [MCO Manual 2022-06-30.pdf \(la.gov\)](#). Accessed August 16, 2022.

VERSION CONTROL:

Version.Review.Approval History				
Department:	Purpose of Review	Reviewed and Approved By:	Date:	Additional Comments:
Clinical	Policy Development	Tiffany LeBlanc	8/18/2022	
Clinical	Policy Review	Patricia Jones/Cali Brou	8/22/2022	
Clinical	Policy Review	Dr. Ian Nathanson, VP Medicaid Clinical	8/22/2022	
Clinical	Adoption Review	Medicaid Quality Governance Committee	8/25/2022	Committee approved. Ben Thompson, Committee Chair

DISCLAIMER:

Humana follows all federal and state laws and regulations. Where more than one state is impacted by an issue, to allow for consistency, Humana will follow the most stringent requirement.

This document is intended as a guideline. Situations may arise in which professional judgment may necessitate actions that differ from the guideline. Circumstances that justify the variation from the guideline should be noted and submitted to the appropriate business area for review and documentation. This (policy/procedure) is subject to change or termination by Humana at any

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time. Humana has full and final discretionary authority for its interpretation and application. This (policy/procedure) supersedes all other policies, requirements, procedures or information conflicting with it. If viewing a printed version of this document, please refer to the electronic copy maintained by CMU to ensure no modifications have been made.

NON-COMPLIANCE:

Failing 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 non-compliance 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 of Hi! (Workday & Apps/Associate Support Center).