

# Insurance Gastric Band for Lap Band and Weight Loss Surgery

## Frequently Asked Questions

Before you head to the doctor, get the facts on Gastric Band procedures.

- How overweight do I need to be for my insurance to approve me for this surgery?
  - I heard that you have to go on a diet before your insurance will cover your gastric band surgery?
  - If my doctor writes letter to my insurance company, am I guaranteed to receive coverage for gastric banding?
  - I have Medicare, will they cover my procedure?
  - My insurance company will not cover the total cost of the procedure, what should I do?
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- You need to be beyond overweight. An obese individual has a BMI of 30 or more. The gastric banding procedure is indicated only for those who are morbidly obese. Typical insurance guidelines require a patient to have a BMI (Body Mass Index) over 40. A BMI as low as 35 will be considered if you suffer from another serious medical condition such as diabetes. Other medical comorbidities may include hypertension, sleep apnea and others. Your surgeon can determine if you are at risk for any of these serious ailments.
  - Your insurance company wants to know that you've tried to lose weight without medical intervention first.
  - Your insurance company will require a written letter from your doctor outlining the medical necessity of this procedure.
  - Medicare will cover gastric banding, but you must be considered morbidly obese and meet other requirements.
  - You can always try financing the remaining portion of your gastric band expenses.

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