



New Patient Information

75 Francis Street
Boston, Massachusetts 02115
(617) 732-8500



In this packet, you will find:

BMI Chart	page 4
Surgery Comparison Chart.....	page 5
Administrative Program Fee	page 6
POWR Information.....	page 7-8
Next Steps	page 9
Bariatric Patient Checklist	page 10
PCP Recommendation Letter Template.....	page 11

Dear Prospective Patient:

Welcome to the New Patient Information Session for Brigham and Women's Center for Metabolic and Bariatric Surgery. We are happy that you are considering our program for weight loss surgery.

The goal of today's session is to help you understand the following:

- The qualifications for surgery
- The different weight loss surgery procedures we provide
- The risks and benefits of weight loss surgery
- How to handle insurance coverage
- The types of appointments you'll have before and after surgery
- What to expect during your hospital stay
- What your post-operative care will include
- How to have long-term success with weight loss surgery

Thank you for attending this information session. We hope to become part of your team throughout this lifelong journey towards your best health.

Sincerely,

Scott A. Shikora, MD, Director

Neil Ghushie, MD

Malcolm K. Robinson, MD

Eric Sheu, MD

David Spector, MD

Ali Tavakkoli, MD

Thomas Tsai, MD

Ashley H. Vernon, MD



To qualify for weight loss surgery, you must have:

- A **BMI of 35**, with weight-related health problems
 - Weight-related health problems include type 2 diabetes, high blood pressure, and sleep apnea

OR

- A **BMI of 40**, with or without weight-related health problems

Body Mass Index (BMI) Table																																				
Normal						Overweight					Obese										Extreme Obesity															
BMI	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47	48	49	50	51	52	53	54
Height (feet, inches)	Body Weight (pounds)																																			
4'10"	91	96	100	105	110	115	119	124	129	134	138	143	148	153	158	162	167	172	177	181	186	191	196	201	205	210	215	220	224	229	234	239	244	248	253	258
4'11"	94	99	104	109	114	119	124	128	133	138	143	148	153	158	163	168	173	178	183	188	193	198	203	208	212	217	222	227	232	237	242	247	252	257	262	267
5'0"	97	102	107	112	118	123	128	133	138	143	148	153	158	163	168	174	179	184	189	194	199	204	209	215	220	225	230	235	240	245	250	255	261	266	271	276
5'1"	100	106	111	116	122	127	132	137	143	148	153	158	164	169	174	180	185	190	195	201	206	211	217	222	227	232	238	243	248	254	259	264	269	275	280	285
5'2"	104	109	115	120	126	131	136	142	147	153	158	164	169	175	180	186	191	196	202	207	213	218	224	229	235	240	246	251	256	262	267	273	278	284	289	295
5'3"	107	113	118	124	130	135	141	146	152	158	163	169	175	180	186	191	197	203	208	214	220	225	231	237	242	248	254	259	265	270	278	282	287	293	299	304
5'4"	110	116	122	128	134	140	145	151	157	163	169	174	180	186	192	197	204	209	215	221	227	232	238	244	250	256	262	267	273	279	285	291	296	302	308	314
5'5"	114	120	126	132	138	144	150	156	162	168	174	180	186	192	198	204	210	216	222	228	234	240	246	252	258	264	270	276	282	288	294	300	306	312	318	324
5'6"	118	124	130	136	142	148	155	161	167	173	179	186	192	198	204	210	216	223	229	235	241	247	253	260	266	272	278	284	291	297	303	309	315	322	328	334
5'7"	121	127	134	140	146	153	159	166	172	178	185	191	198	204	211	217	223	230	236	242	249	255	261	268	274	280	287	293	299	306	312	319	325	331	338	344
5'8"	125	131	138	144	151	158	164	171	177	184	190	197	203	210	216	223	230	236	243	249	256	262	269	276	282	289	295	302	308	315	322	328	335	341	348	354
5'9"	128	135	142	149	155	162	169	176	182	189	196	203	209	216	223	230	236	243	250	257	263	270	277	284	291	297	304	311	318	324	331	338	345	351	358	365
5'10"	132	139	146	153	160	167	174	181	188	195	202	209	216	222	229	236	243	250	257	264	271	278	285	292	199	306	313	320	327	334	341	348	356	362	369	376
5'11"	136	143	150	157	165	172	179	186	193	200	208	215	222	229	236	243	250	257	265	272	279	286	293	301	305	315	322	329	338	343	351	358	365	372	379	386
6'0"	140	147	154	162	169	177	184	191	199	206	213	221	228	235	242	250	258	265	272	279	287	294	302	308	316	324	331	338	346	353	361	368	375	383	390	397
6'1"	144	151	159	168	174	182	189	197	204	212	219	227	235	242	250	257	265	272	280	288	295	302	310	318	325	333	340	348	355	363	371	378	386	393	401	408
6'2"	148	155	163	171	179	186	194	202	210	218	225	233	241	249	256	264	272	280	287	295	303	311	319	326	334	342	350	358	365	373	381	389	396	404	412	420
6'3"	152	160	168	176	184	192	200	208	216	224	232	240	248	256	264	272	279	287	295	303	311	319	327	335	343	351	359	367	375	383	391	399	407	415	423	431
6'4"	156	164	172	180	189	197	205	213	221	230	238	246	254	263	271	279	287	295	304	312	320	328	336	344	353	361	369	377	385	394	402	410	418	426	435	443



Comparison of Procedures

	Gastric Bypass	Sleeve Gastrectomy
Technique	Laparoscopic	Laparoscopic
Length of Surgery	2 hours	1-2 hours
Time in Hospital	1-2 days	1 day
Return to Work	2 weeks	2 weeks
Weight Loss	~30-35% Total Weight Loss at 2 years	~25% Total Weight Loss at 2 years



Administrative Program Fee

All patients are required to pay a **\$150 Administrative Program Fee** to help pay for services not covered by health insurance. We strive to provide the very best professional care and support while attaining your weight loss goals. This level of care requires a comprehensive program of dedicated specialists.

This fee will be due after you meet with your surgeon, at your Nutrition New Patient Assessment. The full payment will be expected. If the fee is not paid in full before your surgery date, your surgery will be cancelled.

Program Fee Frequently Asked Questions (FAQ)

What is the fee used for?

The fee is used to pay for services not covered by insurance. These services include but are not limited to: pre- and post-operative phone and email support, support groups, insurance assistance, educational materials, and technology to provide patient care.

Does my insurance cover the \$150 fee?

No, unfortunately. However, you can use your Health Savings Account (HSA).

What are the acceptable forms of payment?

You can pay with check, debit/credit card, or with your Health Savings Account (HSA).

Can I see the surgeon first and then pay?

Of course! You may see the surgeon first to assess your eligibility for weight loss surgery.

Can I get a refund if I change my mind?

Refunds are possible if your insurance company denies surgery coverage or if you are determined ineligible for surgery by CMBS.



POWR Questions & Answers

1. What is POWR?

- POWR stands for **Pre-Operative Weight Reduction**. This group covers topics to help patients get ready for surgery. It also meets insurance requirements for patients that need to participate in a mandated, medically supervised weight loss program prior to surgery. All are welcome to attend POWR!

2. What's the difference between POWR and a nutrition appointment?

- A nutrition appointment is a **scheduled** appointment with our dietitian that meets our program's preoperative requirements. POWR is an unscheduled nutrition education group meeting.

3. Do I need to make an appointment for POWR?

- You do **not** need to make an appointment! POWR groups meet at various times across all 3 locations. You may attend on the day that works best for you. See attached schedule.

4. How do I meet my insurance requirement?

- You **MUST** attend **at least 1** nutrition visit OR attend 1 POWR group **per month** for the amount of time required by your insurance (i.e. 3-6 consecutive months, depending on your insurance).

5. Do my nutrition appointments count for my insurance requirement?

- YES! Your Nutrition Class, Nutrition Assessment, and Nutrition Follow-up are mandatory for our bariatric program and count towards the insurance requirements.

6. What happens if I miss a month?

- If you **miss** a month, you must **restart** the monthly insurance requirement. (See examples below)

Completed POWR Example

Nutrition Visit/ POWR	Month	Attended?
Nutrition Class	March (month 1)	✓
Nutrition Assessment	April (month 2)	✓
POWR	May (month 3)	✓
Nutrition Follow-up	June (month 4)	✓
POWR	July (month 5)	✓
POWR	August (month 6)	✓
Completion of 6 months		

Incomplete POWR Example

Nutrition Visit/ POWR	Month	Attended?
Nutrition Class	March (month 1)	✓
Nutrition Assessment	April (month 2)	✓
POWR	April (month 3)	✓
Nutrition follow up Missed	May (month 4)	No
POWR	June (month 1)	*Restart

*please refer to #6

Please note that you **can** attend a POWR group **before** any of your scheduled visits.



POWR Locations for 2020

Brigham & Women's Faulkner Hospital 1153 Centre St. Boston MA 02130 (617) 983-7000

When: 1st Wednesday of the month

There will be no POWR on January 1, **POWR will be held on January 8 instead.*

Where: 4th floor, Sadowsky Conference Room (room can change; please check at Info Desk)

Time: 9:30-10:30am

Directions to Sadowsky: From 3rd floor entrance, take the elevators to the 4th floor. Take a right out of the elevators and a right around the corner. Sadowsky will be about 20 feet down the hallway on your left. **From 1st floor entrance,** take the elevators to the 4th floor. Turn right out of the elevators and walk all the way down the hallway until you are forced to turn. Turn right and Sadowsky will be about 20 feet down the hallway on your left.

Brigham and Women's Surgical Associates 51 Performance Dr. Weymouth MA 02189 (781) 624-4906

When: 2nd Monday of the month*

There will be no POWR on October 12, **POWR will be held on October 5 instead.*

Where: 3rd floor conference room in Suite 300

Time: 4:30-5:30pm

Directions to Suite 300: Enter the complex at Entry 2. Take the elevators on your left up to the 3rd floor. Suite 300 will be on your right.

Brigham & Women's Hospital 75 Francis St. Boston MA 02115 (617) 732-8500

When: 4th and 5th Wednesdays of the month*

**There will be no POWR on November 27th and December 25th*

Where: Anesthesia Conference Room

Time: 6:30-7:30pm

Directions to the Anesthesia Conference Room: From 75 Francis Street entrance, bear to your right down the Brigham & Women's "ground pike." You will see the "J" elevator on your left. If you walk past the copper statues, you have gone too far. Take the "J" elevator down to L1. Exit the elevator; you will see a sign pointing to the Anesthesia Conference Room. The room is located at the end of the hall on the right hand side.



What are My Next Steps?

- 1) **Everyone needs to contact their insurance company to ask:**
 - Make sure you speak to your **benefits representative**
 - Is bariatric surgery a covered procedure?
 - Are Brigham and Women's Hospital and/or Brigham and Women's Faulkner Hospital "Within Network"?
 - Do I need a referral for specialists?
- 2) Speak to your **HR representative** to make sure bariatric surgery is not excluded
- 3) **Contact Patient Registration at 866-489-4056 if:**
 - You are a new patient to BWH or BWFH
 - You are an existing patient but have demographic changes (phone number, address, insurance, etc.)
- 4) **Contact Primary Care Physician (PCP):**
 - For a referral (if needed)
 - For a recommendation letter (Requirement for ALL patients; see page 10)
- 5) **Contact our New Patient Coordinator at 617-732-6960** to schedule appointments.
 - If we are unable to answer the phone, please leave a detailed voice message and we will return your call within 48 hours.

Looking for More Information about Our Program?

- **Center for Weight Management and Metabolic Surgery (CWMMS)** offers non-surgical, medical treatment for weight management.
 - Call 617-983-7280 ext. 3
- **Visit our website** to learn about our team and upcoming program events, find and resources, and more! www.brighamandwomens.org/weightlosssurgery
- **We're on Facebook!** Let us know if you would like to join our group!
- **Attend a Bariatric Forum** to meet other pre-op and post-op patients as well as members of our team. The schedule for these monthly meetings is on our website.



Bariatric Patient Checklist

Please bring this checklist with you to each appointment.

- ☐ Surgeon Consult _____
- ☐ Group Nutrition Class _____
- ☐ Nutrition Individual Assessment _____
- ☐ Nutrition Follow-Up (as needed until cleared) _____
- ☐ Psych Consult _____
- ☐ UGI (or other abdominal imaging) _____
- ☐ Blood Draw (ordered by surgeon at first consult) _____
- ☐ Letter of Medical Necessity from primary care provider _____
- ☐ Clearance from other providers as needed _____
- ☐ POWR meetings 3 or 6 months in a row (if required by insurance)



Recommendation Letter Template for Primary Care Physician

All insurance companies require a recommendation letter from your primary care physician (PCP). Please feel free to provide the following information to your PCP.

The letter must include the following sections:

1. Identifying Demographics
2. History of Morbid Obesity
 - a. Minimum should be 2 years, best to include 5 years
 - i. History of actual weights should be documented (ex. 11/15/2016 weight 345lbs)
3. Past Medical History
 - a. History of any co-morbid factors as a result of or related to morbid obesity
 - i. Diabetes Mellitus
 - ii. Hypertension
 - iii. Asthma
 - iv. Obstructive Sleep Apnea
4. Statement of Medical Clearance and Recommendation for Bariatric Surgery

This note must be sent to your surgeon's office in order to allow us to obtain authorization for surgical intervention from the insurance carrier. This letter can be faxed to 617-734-0336.

List of Surgeons:

Scott A. Shikora, MD, Director
(no longer accepting new patients)

Neil Ghushie, MD

Malcolm K. Robinson, MD

Eric Sheu, MD

David Spector, MD

Ali Tavakkoli, MD

Ashley H. Vernon, MD

If you have any questions, please do not hesitate to contact us.

Sincerely,

The Center for Metabolic and Bariatric Surgery

Brigham and Women's Hospital, Brigham and Women's Faulkner Hospital, and Brigham and Women's Surgical Associates at South Shore Hospital

Tel: 617-732-8500 ext. 1 Fax: 617-734-0336