

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT201583 DECEMBER 15, 2015

IHCP expands age eligibility for coverage of bariatric surgery

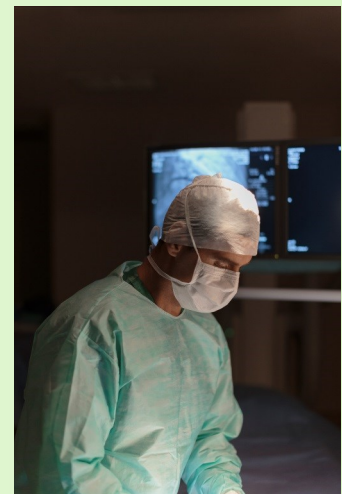
The Indiana Health Coverage Programs (IHCP) currently covers bariatric surgery for members 18 through 65 years of age who meet required coverage criteria. Effective January 15, 2016, the IHCP will expand coverage of bariatric surgeries to members older than 65 years of age and members younger than 18 years of age. Covered surgeries for members 65 and older are those outlined in the [Medical Policy Manual](#). Covered surgeries for adolescents under 18 years of age are limited to laparoscopic sleeve gastrectomy (LSG) and Roux-en-Y gastric bypass (RYGB). This expanded coverage policy applies to dates of service on or after January 15, 2016, for all IHCP programs, subject to limitations established for certain benefit packages.

Members in the expanded age ranges must meet the coverage criteria outlined in the *Medical Policy Manual*. Members under 18 years of age must also meet one of the following sets of criteria:

- The member must have reached sexual maturity and met the criteria for a Tanner Scale stage IV or V plus 95% of predicted adult stature based on bone age; and
- The member must have a body mass index (BMI) greater than 35 with at least one severe comorbidity listed below that has significant short-term effects on health and is uncontrolled with lifestyle or pharmacotherapy management:
 - Type II diabetes mellitus
 - Moderate to severe sleep apnea (Apnea-Hypopnea Index [API] of 15)
 - Severe nonalcoholic steatohepatitis
 - Pseudotumor cerebri

OR

- The member must have reached sexual maturity and met the criteria for a Tanner Scale stage IV or V plus 95% of predicted adult stature based on bone age; and
- The member must have a BMI greater than 40 with at least one comorbidity listed below that is uncontrolled with lifestyle or pharmacotherapy management:
 - Hypertension
 - Insulin resistance
 - Glucose intolerance
 - Substantially impaired quality of life or activities of daily living
 - Dyslipidemia
 - Sleep apnea with API of 5



The evaluation of members younger than 18 years of age must also include assessment of emotional maturity, decisional capacity, family support, and family willingness to participate in lifestyle changes.

Within the fee-for-service (FFS) delivery system, all types of bariatric surgeries require prior authorization (PA). Please see the [Medical Policy Manual](#) and [Chapter 6](#) of the *IHCP Provider Manual* for PA criteria. See [Chapter 8](#) of the *IHCP Provider Manual* for FFS billing instructions.

The individual managed care entities (MCEs) establish and publish reimbursement, PA, and billing criteria within the risk-based managed care (RBMC) delivery system. Questions about RBMC requirements should be directed to the MCE with which the member is enrolled.

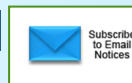
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