



**BlueCross BlueShield  
of Illinois**

# Blue Cross and Blue Shield of Illinois Provider Manual

## HMO Scope of Benefits Section

Blue Cross and Blue Shield of Illinois, a Division of Health Care Service Corporation, a Mutual Legal Reserve Company,  
an Independent Licensee of the Blue Cross and Blue Shield Association

# Obesity

## Benefit

Benefits are available for treatment of obesity in certain clinical situations.

## Interpretation

Obesity is caused by caloric intake persistently higher than caloric utilization. Obesity itself is not an illness. However, it may be caused by illnesses such as hypothyroidism, Cushing's disease, and hypothalamic lesions. Obesity can also aggravate a number of cardiac and respiratory diseases, diabetes, and hypertension.

Morbid obesity (or "clinically severe obesity") is a condition of persistent and uncontrollable weight maintenance or gain that constitutes a present or potential serious health risk. The member has a Body Mass Index (BMI) of at least 40, or 35 with at least two comorbidities (Hypertension, Dyslipidemia, Diabetes Mellitus, Coronary heart disease, and/or Sleep apnea).

## Medical Treatment

Medical management of obesity is in benefit except for the cost of food supplements.

## Surgical Treatment

Surgical treatment of obesity is in benefit if the PCP determines medical necessity. It is generally reserved for morbid obesity.

Surgical procedures in benefit include, but are not limited to:

- Gastric bypass using a Roux-en-Y anastomosis (short limb up to 100cm, open or laparoscopic)
- Vertical banded gastroplasty (open or laparoscopic)
- Adjustable gastric banding (adjustable Lap-Band®) performed laparoscopically or open and consisting of an external adjustable band placed high around the stomach creating a small pouch and a small stoma.
- Repeat bariatric surgery, if deemed medically necessary by the PCP.

## Removal of the Gallbladder at the time of an Approved Gastric Bypass Surgical Procedure

Coverage is allowed for gallbladder removal at the time of a covered gastric bypass surgical procedure, either for documented gallbladder disease or for prophylaxis.

<b>Paid by</b>	Professional Charges	<b>IPA</b>
	Inpatient and/or Outpatient Surgical Facility Charges	<b>HMO</b>

**Note: See related benefits interpretation on Nutritional Supplements**

## Coverage Variation

Benefit coverage and/or exclusions may vary for certain employer groups. To ensure current member benefit determination, please refer to the BCBS Benefit Matrix and/or contact customer service to confirm member coverage.