

## Part B Insider (Multispecialty) Coding Alert

### **PHYSICIAN NOTES :Know Diabetic Patient's BMI to Determine Eligibility for Bariatric Weight Loss Surgery**

**Plus: In a new decision memorandum, CMS announces that it will not cover virtual colonoscopies.**

Physicians that perform bariatric surgery procedures on diabetic patients should take note of the patients body mass index (BMI) -- it could be your magic number in determining the patients eligibility for Medicare payment for the surgery, according to MLN Matters article MM6419, with an implementation date of May 18.

Effective for any services performed on Feb. 12 or thereafter, the following three procedures are not covered for patients with type 2 diabetes and a BMI under 35:

- " Open and laparoscopic Rouxen- Y gastric bypass
- " Laparoscopic adjustable gastric banding
- " Open and laparoscopic biliopancreatic diversion with duodenal switch.

CMS will cover these procedures in patients who have type 2 diabetes and a BMI of 35 or higher.

Visit [www.cms.hhs.gov/MLNMattersArticles/downloads/MM6419.pdf](http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM6419.pdf) for more information.