

What's fair?

Fair healthcare pricing from Healthcare Blue Book

Healthcare Blue Book is a free consumer guide to help you determine fair prices in your area healthcare services

Lap-Band

Alternate name:
Laparoscopic placement of a gastric band
(CPT code 43770)

Fair price:

Includes: Physician fee, facility fee, anesthesia fee

National fair price: **\$12,980**

National range: **\$8,900 – 22,000**

Local fair prices:

Boston, Massachusetts 02102 **\$14,640**

Milwaukee, Wisconsin 53202 **\$14,640**

Minneapolis, Minnesota 55402 **\$12,370**

Jacksonville, Florida 32202 **\$12,790**

Los Angeles, California 90006 **\$13,930**

Houston, Texas 77010 **\$13,350**

New York, NY 10003 **\$15,340**

Check the fair price in your region at healthcarebluebook.com

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Details:

How were these prices calculated and what are they based on?

This is Healthcare Blue Book's recommended price for a Lap-Band surgery.

The fair price recommendation is based on the typical negotiated payment amount that providers accept from insurance companies.

If you have insurance, you should be able to find in-network providers that accept prices at or below the Blue Book fair price, although many providers may charge more.

How should consumers use this information?

You can use the Blue Book fair price as a guide to help you compare prices when you shop for care and to make sure that you receive treatment at a fair price.

If you have health insurance, you should use your provider directory to identify in-network providers in your area. The Lap-Band procedure is typically performed by a bariatric surgeon (a surgeon that specializes in weight loss related surgeries) or a general surgeon trained in weight loss surgical techniques.

You can call the providers or your health insurance company to get a cost estimate. You will need to know the name of the procedure and possibly the Current Procedural Terminology (CPT) code for the service you need. It is also useful to have your insurance card available.

Different in-network providers often charge different prices. Prices for Lap-Band surgery may range from \$9,000 to over \$20,000 in many areas. We recommend that you call several providers to find one that charges a fair price.

If you do not have insurance, make sure to let the office know that you are a self-paying patient. Self-pay patients are frequently quoted the billed charges amount (retail price) for the service, which can be 2 to 3 times what the provider would accept from an insurance company. Many providers will offer a discount to self pay patients – but you must remember to ask for the discount.

Key points to consider when shopping for breast reduction surgery.

- Lap-Band surgery pricing frequently varies by over 200% in many locations. It is not uncommon to find Lap-Band surgery pricing below \$10,000 or more than \$20,000. You should call several providers to ask about the price of your Lap-Band surgery before you have your procedure.
- Make sure that the price estimate includes the physician fee, the facility fee and the anesthesia fee. You may need to call your physician, the facility and the anesthesia practice to get prices.
- Be sure to ask whether the price includes follow up visits for adjustments to the Lap-Band for a period of time, such as the first year.
- Be sure to also ask about other costs you may have to pay that are related to the surgery. These costs may include laboratory tests before and after the procedure, imaging tests and medications.

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- If your Primary Care Physician has already referred you to a specialist, make sure to ask for their price and compare it to the Blue Book fair price before receiving treatment.
- If you get a price estimate that is significantly higher than the fair price, you may want to talk to your doctor about other options for where you will have your procedure performed. Some doctors can perform the procedure at a free standing Ambulatory Surgery Center (ASC). Receiving treatment at an independent ASC is typically less expensive than having the procedure at a hospital's outpatient facility.

If you have a Health Savings Account (HSA) or Health Reimbursement Account (HRA) you can apply those funds to any deductible, co-insurance or other out of pocket costs.

Is Lap-Band surgery typically covered by health insurance plans?

Lap-Band surgery may be covered by your insurance company. Most insurers have patient clinical criteria that must be met before approving the treatment. The most common criteria is that the patient must have a Body Mass Index (BMI) in excess of 40.

Your insurer may also have other criteria that must be met before granting approval, such as requiring the patient to participate in a 3 month weight-loss program supervised by a nutritionist. Patients may also be required to use certain certified providers and facilities for their surgery.

Lap-Band may be approved for patients with a BMI below 40 when accompanied by other clinical conditions such as:

- Weight related disabling joint disease; or
- Pulmonary hypertension from obesity; or
- Coronary artery disease; or
- Insulin-resistant type II diabetes

Patients should talk to their doctor about whether or not they meet the criteria. Always check with your insurer to make sure a procedure is covered before seeking treatment.

Your insurer may require pre-certification prior to agreeing to cover your Lap-Band surgery. You should always ask and then confirm that your provider is going to obtain pre-certification for your Lap-Band surgery before you receive treatment.

If your provider does not obtain pre-certification prior to your Lap-Band surgery, you will need to call the health plan and request pre-certification yourself. Always make sure that your Lap-Band surgery is pre-certified before receiving treatment. Insurers may deny payment of the claim if you have not obtained pre-certification.

Is Lap-Band surgery typically covered by Medicare or Medicaid plans?

Medicare will pay all or part of Lap-Band surgery if the procedure is considered a medical necessity. Cases are evaluated on an individual basis and patients must meet sev-

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eral criteria. These criteria include a BMI in excess of 35 and one or more clinical complications related to obesity. If approved, Medicare also requires the patient to receive treatment at a Medicare approved bariatric surgery center.

Medicaid coverage for Lap-Band surgery is covered on a state-by state basis. Patients should check their state Medicaid website for more information.

What kind of out-of-pocket costs should I expect to pay?

Your out of pocket costs will depend on the type of insurance that you have. You may be responsible for copays, deductibles or coinsurance amounts. In order to determine your out of pocket costs, always review your co-pay amounts, current deductible balance and current co-insurance obligation before seeking treatment. If you have questions about your benefit plan or out of pocket costs, talk to your insurance company.

Remember, if you have a Health Savings Account (HSA) or Health Reimbursement Account (HRA) you can apply those funds to any deductible, co-insurance or other out of pocket costs.

Do the costs for this service vary depending on which provider I use?

The price variation in most locations varies by 200% or more depending on where you get your care. Make sure to ask about the price of this service before you get your care to make sure that you will be charged a fair price. If you are not satisfied with a provider's price, you can consider other providers that may offer you a more reasonable price.

What other trends or variations in cost should I be aware of?

- Lap-Band surgery is an outpatient procedure. Patients should talk to their doctor to see if they can have the surgery performed at a qualified independent bariatric surgery center. Many times the independent facilities offer better prices with equal or better care quality.
- Patients should also ask about other costs you may have to pay that are related to the surgery. These costs may include laboratory tests before and after the procedure, imaging tests and medications.
- Lap-Band patients will have on-going costs related to periodic adjustment of the band. Be sure to discuss follow up and ongoing costs related to band adjustment or other diagnostic tests.

What other tips can help me ensure I get the best price?

The choice of facility for your Lap-Band surgery will usually have the biggest impact on your total price. When seeking a surgeon, patients will want to make sure to ask if the surgeon can perform the procedure at an independent ambulatory surgery center (ASC). Independent ASCs are not affiliated with major hospitals, and generally charge less than hospital based outpatient facilities for equivalent or better quality care.

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Qualifications

Patients should choose a facility that has been certified as a Bariatric Surgery Center of Excellence. Several organizations accredit Bariatric surgery centers, including American Society for Metabolic and Bariatric Surgery and the American College of Surgeons.

Hospitals should also be accredited by The Joint Commission on Accreditation for Healthcare Organizations (JCAHO). ASCs should also be accredited by one of the major agencies, including the Accreditation Association for Ambulatory Health Care (AAAHC), American Association for Accreditation of Ambulatory Surgery Facilities (AAAASF) or the Joint Commission on Accreditation for Healthcare Organizations (JCAHO).

Surgeons should be board certified by the American College of Surgeons. You can also ask if your surgeon is a member of the American Society for Metabolic and Bariatric Surgery.

Alternatives

Patients should talk to their doctor about alternatives to surgical procedures for weight loss. Patients should always try to achieve weight loss through non-invasive surgical techniques such as diet and exercise. Patients may want to ask their doctor about working with a nutritionist or finding an exercise therapist.

There are other surgical techniques for addressing weight loss, including gastrointestinal bypass surgery. Gastric bypass surgery is a more invasive inpatient procedure that involves surgery of the stomach. Gastric bypass generally has higher complication rates and requires a longer recovery period following surgery.

The pricing and benefits information reflected in this report is based upon the common pricing and practices found in most markets and may not reflect the specific pricing or health benefits available to you. Some providers charge amounts well in excess of the Blue Book fair price. Some insurance plans cover services differently. If possible, you should check with your medical provider and health insurance company to confirm pricing and benefit coverage for services before you get care. In addition, you will want to check on your providers' quality information.

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