

Bariatric Surgery

The Plan pays benefits for charges incurred for bariatric surgery recommended by a physician; if the Participant or Dependent has a Body Mass Index (BMI) [weight (kilograms)/height (meters)²] of 40 or higher, or has a BMI of 35 or higher with one or more related co-morbid conditions; as determined in the sole and absolute discretion of the Board of Trustees or its Delegate; limited to one surgery per lifetime. Covered Services must be incurred at an in-network bariatric surgery Center of Excellence. There is no coverage for bariatric surgery performed out of the applicable network. Prior authorization is required for all bariatric surgery services.