

# Doctors' Weight Management Fees – Out-of-Network

## Explanation of Fees:

**There are three components to the fees for the in-clinic program.**

1. **Food - HMR Shakes/Entrees (Meal Replacements)** - The average spent on meal replacements is \$155 per week (HMR Decision Free® Diet). This will replace your current food costs. You'll purchase these weekly at Sansum Clinic with cash or a credit/debit card. Insurance does not cover the cost of the meal replacements. These are out-of-pocket costs which will vary depending on your food consumption.
2. **Classes/Coaching** – The cost for classes/coaching is \$100 every 4 weeks. Insurance does not cover the cost of the classes/coaching. The first payment for classes/coaching will be due at Week 2, and the second set at Week 5, then every 4 weeks thereafter. The Doctors' Weight Management Program will collect these at the clinic; you may pay with cash, a credit/debit card or your FSA or HSA card.
3. **Medical Supervision** – This consists of program physician visits and lab work. The cost for your medical supervision depends on the program physician's assessment of your health conditions. Your share of that cost will depend on your insurance plan's coverage for an out-of-network provider.

The Doctors' Weight Management will collect the full payment for the visit each time you see the program physician. We will submit the claims to your insurance for them to reimburse you directly for any coverage that your plan may offer. **The average patient is seen by the program physician every 2 weeks.**

Ongoing lab work (also based on the program physician's assessment of your health conditions) will be done at Sansum Clinic (Weight Management). Pacific Diagnostic Labs or Quest Diagnostics will bill your insurance for blood drawn at Sansum Clinic. There is pre-diet lab work and an EKG required; these costs may be included in your Primary Care visit prior to joining the program.

Please see the following pages for fees that will be due for the Meal Replacements, Classes/Coaching and Medical Supervision.

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1. Please call your insurance company to determine what your coverage and out-of-pocket costs will be for medical visits provided by an out-of-network provider.
2. Give your insurance company the CPT Codes below. Ask what the percentage split, “co-insurance”, that your insurance will cover and you’ll be expected to cover (70/30, 60/40, 50/50 etc.). You will then apply the co-insurance percentage split to the prices for the CPT codes below. The program physician will charge one of the CPT Codes listed below at each visit. If you have a **deductible** that you have not met, you will need to satisfy that before your insurance will begin paying a percentage.
3. The CPT code used depends on your *health conditions*. See **Diagnosis Codes** below. The first visit will be the first one listed (99202). Ongoing visits will be one of the next two (99212 or 99213).
4. The *frequency* of visits depends on the program physician's assessment of your health conditions. The average patient is seen by the program physician every 2 weeks and is charged the 99212 CPT code.

Medical Supervision Pricing: When/Visit Type	CPT Code	Price
Week 2 - First Visit with Doctors' Weight Management Physician	99202	\$207
Ongoing Visits – weekly, bi-weekly, or every 3 weeks – average health condition(s)	99212	\$155
Ongoing Visits – weekly, bi-weekly, or every 3 weeks – more chronic condition(s)	99213	\$249

5. Ask your insurance company what the co-insurance coverage is for the following labs. These will be done at a similar frequency as the visits with the program physician:

Lab draw frequencies and pricing:	Price
Every 2 weeks - Comprehensive Metabolic Panel	\$50

6. Your insurance company may also need to know the **Diagnosis Codes**. See below for those.

**Diagnosis Codes** - Your insurance company will also likely need to know your diagnosis to make a determination of coverage. Our physicians will use the following **primary** diagnosis codes, according to your BMI (Body Mass Index) range at the time of the visit:

BMI Range	Level	Primary Diagnosis Code	BMI is based on weight and height. If you need help determining your BMI, please let us know.
25 - 29	Overweight	E66.3	
30 - 39	Obesity	E66.9	
40+	Morbid Obesity	E66.01	

**Additional Diagnoses** - The following conditions which could be alleviated as a result of weight loss may also have an impact on coverage:

Pre-diabetes	High Blood Pressure	Sleep Apnea
Type II Diabetes	High Cholesterol	

These have very specific diagnosis codes depending on severity and other factors. If your insurance company needs these codes to determine coverage, please let us know.

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See previous pages for explanation of fees.

**The tables below reflect:**

Meal Replacements (Shakes, Entrees) - average costs

Classes/Coaching – actual costs

Medical Supervision – average costs *before* insurance coverage. See previous page for instructions on how to determine your share of the cost.

First 4 weeks of the HMR Decision Free® Diet:

Visits	Average Shakes & Entrees (HMR Meal Replacements)	Classes/Coaching (Due every 4 weeks)	Medical Supervision Patient Responsibility		Weekly Total
			Physician Visits	Lab Work	
Foundations - Class					
Week 2 –Start Diet	\$205*	\$100	\$207		\$512
Week 3	\$155		\$155	\$50	\$360
Week 4	\$155		\$155		\$310
Total 1 <sup>st</sup> 4 weeks					\$1,182

\*First meal replacement purchase requirement is higher than the ongoing weeks.

Ongoing months of the HMR Decision Free® Diet:

Visits	Average Shakes & Entrees (HMR Meal Replacements)	Classes/Coaching (Due every 4 weeks)	Medical Supervision Patient Responsibility		Weekly Total
			Physician Visits	Lab Work	
Weekly	\$155	\$100		\$50	\$305
Weekly	\$155		\$155		\$310
Weekly	\$155			\$50	\$205
Weekly	\$155		\$155		\$310
Total Ongoing Months					\$1,130

**The tables above reflect the average costs. These are examples only.**

*Prices subject to change.*

*Payments are not refundable.*

2022

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