

Welcome to the Rex Surgical Bariatric program. We are excited to help you start your journey. Please take advantage as much as possible of the educational opportunities that we have available for you.

The first step to getting started is to begin working on the attached checklist. The steps can be done at the same time. You do not need to complete one step before moving on to the next one. **This checklist will need to be completed before we send anything to insurance for approval.**

Step 1:

Make your first **nutrition class** appointment. You will have 3 nutrition classes before you have your surgery. The second nutrition class will be scheduled once you attend the first class and will be about a month from the first class to give you time to work on your dietary changes. The third class will be scheduled once you have a date for your surgery. **There is a \$50.00 no show fee for nutrition appointments.**

- First class (Getting Started) Date _____ . **Please read your notebook that you will receive at this first class.**
- Second Class (Vitamins and Supplements) Date _____ . **Please try the samples that are given to you and mark which ones that you like on the order form. BRING YOUR NOTEBOOK.**
- Third Class (Before and After Surgery diet Phases) Date _____ . **Please come prepared to purchase your supplement kit. You can purchase your protein shakes from the Rex Surgical store or bring your protein choice with you for the dietitians to check off. This may affect your surgery date if you do not come prepared for class. BRING YOUR NOTEBOOK.**

Gastric Bypass/Sleeve Kit cost is \$85.00.

Duodenal Switch/Sips Kit cost is \$115.00

Step 2:

Look at the attached **support group** dates. **You must attend at least two before we will schedule surgery.** Our recommendation is that you attend more than two to help prepare you for the lifestyle changes. There will not be a charge for support groups. You do not need to register for support groups unless you are attending a grocery store tour. You will need to register for grocery store tours with Krista Herrell at 919-784-2769 or Krista.herrell@unchealth.unc.edu. Reminders of support groups will be emailed to you or you can find the dates on our website at rexbariatrics.com.

- 1. _____ 2. _____

Step 3

Schedule your **psychological exam**. You may call any of the following to schedule. You will first be required to complete some bariatric testing. Then the counselor will go over the results with you and make a recommendation for you to proceed with surgery.

- Testing Date _____ Results Date _____

1. Dr. Dan Shattuck- He **does not** participate with Medicare.
919-359-9700
2501 Atrium Drive, Suite 100
Raleigh, NC 27607
2. Dr. Allan Bloom-He participates with Medicare
4000 Blue Ridge Road, Suite 380
Raleigh, NC 27612
919-787-7307
3. Western Wake Counseling- They participate with Medicare.
919-467-3831
8000 Regency Parkway, Suite 570
Cary, NC 27518
4. Dr. Mary Anne Etheridge-She participates with Medicare.
919-600-4906
1120 Southeast Cary Parkway, Suite 201
Cary, NC 27518
5. Perkins Counseling & Psychological Services
10520 Ligon Mill Rd., Suite 108
Wake Forest, NC 27587
919-263-9592

Step 4

Lab orders will be given to you at your first visit. You may have your lab work drawn at the lab of your choice. If you have them done at one of the Rex labs then you will be able to have access to your lab results through My Chart. You will need to choose a day where you cannot eat or drink after midnight before going to the lab. The Rex lab does not require you to make an appointment. You will not need to take any paper orders with you to the Rex lab. **All medicare patients will need to have a normal thyroid test before the hospital will allow us to schedule your surgery.**

- Date labs drawn _____

Step 5

A referral will be sent to Rex Radiology for your **Gall Bladder ultrasound**. They will call you to schedule your appointment. You cannot eat or drink after midnight before going for your ultrasound. You may also get your labs drawn on the same day as your ultrasound. Rex Radiology Scheduling Number 919-784-3419.

- Ultrasound Date _____

Step 6

A referral will be sent to a **Gastroenterologist** to schedule your upper endoscopy. This is an important procedure to confirm that there are not any issues, such as a gastric ulcer, which could cause complications after surgery. The gastroenterology office will call you to schedule an appointment. You should receive a phone call within 2 weeks.

- Upper Endoscopy Date _____

Step 7

A referral will be sent to a **sleep study** office. That office will call you to schedule a time for you to go to their facility to sleep over night. If you test positive for sleep apnea then you may be required to go a second night to get fitted with a mask and settings for a CPAP/Bipap machine. You will receive a phone call within 2 weeks.

- Sleep Test Date _____

Step 8

Other referrals will be sent to specialists as ordered by your surgeon. You will be informed of these referrals at your consultation appointment. The specialists may be a Cardiologist, Hematologist, Kidney, or Lung specialist,

Step 9

You will need to get a **medical clearance** form signed by your primary medical physician. You will also need to get a **5 year weight history** form completed in order to complete the authorization process. These forms are attached with this packet.

Medicare patients will also need to get a referral form signed from their medical physician.

Step 10

The use of all **tobacco products will need to be completely stopped** at least 6 weeks prior to surgery. Electric cigarettes cannot be used as an alternative. The use of any tobacco products after surgery can cause serious complications. Please inform the doctor if you are not able to stop using these products.

Step 11

An **exercise plan** will be discussed with you at your consultation. Please follow this plan for the best results after surgery.

Step 12

You have now **completed your checklist**. You may inform the office when you have completed your checklist so that a packet can be made to send to your insurance company.

1. Once your insurance packet is **completed** then it will be submitted to your insurance within 7 business days.
2. Once Rex Surgical receives your insurance authorization from the insurance company then you will be placed on the scheduler's work list to be scheduled.

*****The patient may receive authorization before the office. We will still need a copy of your letter before proceeding with scheduling.*

3. Please allow 15 business days once your packet has been submitted before calling to check your status. Multiple phone calls and emails only slow the process for everyone.
4. Once authorization is received then you will receive a call from our surgery scheduler. She will then give you the updated estimate of what you will need to pay prior to scheduling surgery and will help you choose a date.
5. **We schedule on a first come first serve basis once authorizations are received.** We will not be able to honor any requests for scheduling your surgery before others. We strive to be fair to all patients.

Step 13

It is now time for your **surgery**. Please read through your "What to Expect in the Hospital" and your discharge instructions that will be given to you at your third nutrition class.

Recommendations for a Successful Before and After Surgery Journey

Please attend support groups before and after surgery. These groups will help to keep you focused in the right direction.

Read your notebook that will be given to you at your first nutrition class. This notebook has all the information you need to be successful long-term.

Financial Worksheet

You will be responsible prior to scheduling surgery for any portion of payment that your insurance will not pay for. This will include whatever is remaining on your deductible and your co-insurance amount.

The final estimate will be given to you once we have your authorization. You can then pay that amount and then you will be able to schedule your surgery.

The following does not apply to Medicare patients. Please read the Medicare form for information on financial obligations.

Please check your benefits with your insurance company so that you have an understanding of your financial obligations.

- Deductible amount _____. You must meet this amount in order for your plan to start paying toward your surgery.
- Co-Insurance amount _____ for example 80/20 plan, 90/10 plan, etc...
- Out of Pocket amount _____. Once you meet your out of pocket then your plan should pay at 100%

The average co-insurance amount can range from \$700 to \$1500 depending on your insurance plan. This is for the surgeon's charge only. This is not an estimate for the hospital or anesthesia charges.