

Insurance: Medicare

(Traditional Medicare, Blue Medicare, United Health Care Medicare, Aetna Medicare, Cigna Health Springs, Humana, HealthTeam Advantage) Must lose 6.6 lbs. in 1st 6 months for coverage to continue after that point.

<p>COST</p> <p>\$350.00 plus any remaining balance not covered by insurance (payment plans available) <i>Price subject to change based on provided services</i></p>
<p>SUPPORT</p> <ul style="list-style-type: none"> ❖ 52 weeks of active program involvement ❖ Program materials ❖ Weekly support group* ❖ “On Track” (Carium and wireless scale) ❖ Billed to Insurance: <ul style="list-style-type: none"> ➢ Ongoing remote support through On Track remote monitoring system (procedure codes: 99453, 99454)
<p>MEDICAL</p> <ul style="list-style-type: none"> ❖ Initial Clinic Visit: <ul style="list-style-type: none"> ➢ RMR, initial clinic visit with medical provider, and initial set of labs <ul style="list-style-type: none"> ▪ Initial visit with the medical provider is subject to your specialist co-pay ▪ Any remaining balance not covered is due ❖ Once in Program: <ul style="list-style-type: none"> ➢ 5 visits with a medical provider <ul style="list-style-type: none"> ▪ Any remaining balance not covered is due ▪ Any labs will be billed to insurance
<p>NUTRITION</p> <ul style="list-style-type: none"> ❖ Once in program <ul style="list-style-type: none"> ➢ At least 5 visits with a registered dietitian ➢ If you elect to do the OPTIFAST treatment plan, you must use OPTIFAST product from the WMC Nutrition Shop <ul style="list-style-type: none"> ▪ Weekly Optifast product cost, average \$90, is an additional cost and not included in the program fee
<p>EXERCISE</p> <ul style="list-style-type: none"> ❖ Once in program <ul style="list-style-type: none"> ➢ 2 exercise consults with an exercise physiologist ➢ 5 (30)-minute personal training sessions included in the program fee
<p>BEHAVIOR</p> <ul style="list-style-type: none"> ❖ Once in Program <ul style="list-style-type: none"> ➢ 6 visits with the health behaviorist

To determine if your plan has coverage for the visits in our By Design Medicare program, we recommend all patients call their insurance provider and ask, "**Do I have coverage for G0447 performed in an outpatient setting?**"