

A Patient's Guide to Advocating for Improved Access to Metabolic and Bariatric Surgery under Medicare

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This guide was created by the Obesity Action Coalition in an effort to encourage those affected by obesity to advocate for improved access to the surgical treatment of severe obesity under Medicare.

The Importance of Advocacy

Advocacy is defined as the act of pleading or arguing in favor of something, such as a cause, idea or policy. Advocacy comes in many forms. This guide specifically highlights how to effectively work with the Centers for Medicare & Medicaid Services (CMS), the government agency that oversees Medicare.

Regulatory officials at the local, state and federal level play a significant role in our society and healthcare. Often, the laws they administer directly influence our day-to-day lives or regulate the medical treatments we receive. However, the majority of regulatory officials know little about the disease of obesity, its effects and treatments. The OAC seeks to increase awareness among regulatory officials by encouraging patients affected by obesity to become advocates.

Medicare and Sleeve Gastrectomy

On March 22, 2012, CMS issued a proposed National Coverage Decision (NCD) surrounding bariatric surgery – specifically suggesting that Medicare should add sleeve gastrectomy (sometimes referred to as the gastric sleeve or sleeve) to the list of other bariatric surgical procedures that the program currently covers.

While this is good news, the OAC and the obesity community are extremely troubled that CMS is proposing that Medicare cover sleeve gastrectomy only when such procedures are performed as part of a randomized controlled trial. This approach is referred to as coverage with evidence development (CED), and not full coverage as the OAC hoped.

The OAC does not agree with CMS' suggestion that currently there is not enough scientific evidence to justify full coverage of gastric sleeve. Therefore, we are asking OAC members to contact CMS and urge the agency to drop its proposed CED requirement in favor of full coverage for gastric sleeve.

The OAC believes that there is sufficient scientific evidence to justify full coverage. For example, Schauer et al recently published "Bariatric Surgery versus Intensive Medical Therapy in Obese Patients with Diabetes" in the [New England Journal of Medicine](#). In this randomized controlled trial, the efficacy of intensive medical therapy alone versus Roux-en-Y gastric bypass or sleeve gastrectomy in 150 obese patients with uncontrolled type 2 diabetes was performed. The study found that both bariatric surgeries out-performed intensive medical therapy. In addition, this study found that the sleeve gastrectomy outcomes were equivalent to Roux-en-Y gastric bypass, a CMS covered surgical benefit.

Medicare's full decision memo can be accessed at:

<http://www.cms.gov/medicare-coverage-database/details/nca-proposed-decision-memo.aspx?NCAId=258&NcaName=Bariatric+Surgery+for+the+Treatment+of+Morbid+Obesity&ExpandComments=n&ver=3&bc=gIAAAAAAIBAA&>

Call to Action

The OAC requests that you send your own comments to Medicare regarding the gastric sleeve NCD by the comment deadline of April 28, 2012. Feel free to share your own thoughts on the NCD or echo the OAC's concerns that sleeve gastrectomy was not included as a regularly covered procedure.

This issue is very important as many commercial insurance companies already cover gastric sleeve and Medicare's proposed approach to coverage could lead private health plans to drop coverage until Medicare DOES provide full coverage.

What Can You Do to Advocate?

Anyone can be an advocate. Here are a few suggestions on what you can do.

- Share this information with family, friends and support groups and encourage them to get involved. The more individuals involved, the stronger our voice. Feel free to make copies of this guide, call the OAC National Office at (800) 717-3117 for additional copies or you may download an electronic version to send via e-mail by visiting the OAC Web site at www.obesityaction.org.
- Post a comment on the National Coverage Decision to CMS by accessing the CMS Web site (see below).
- Keep the OAC informed of your actions. Did you post a comment to CMS? Did you post a link to this guide on your online support group? Let us know by mailing or e-mailing (info@obesityaction.org) the OAC a copy of your letter or message.

How Do I Comment to CMS?

CMS will be accepting comments on the National Coverage Decision until April 28, 2012. To comment, follow the link below or paste it in your browser:

<http://www.cms.gov/medicare-coverage-database/details/submit-public-comment.aspx?DocID=258&ver=3&DocType=nca&DocName=Bariatric+Surgery+for+the+Treatment+of+Morbid+Obesity&NCAId=258&NcaName=Bariatric+Surgery+for+the+Treatment+of+Morbid+Obesity&ExpandComments=n&bc=glAAAAAIIAA&>

Looking for Tips on What to Write?

Below, please find some suggested topics, facts, do's, don'ts and a sample letter.

- If you are a post-metabolic and bariatric surgery patient, please share in your comment the difference your surgery has made in your life from both a quality of life and health standpoint. For instance, if you are no longer a diabetic, you now take a reduced number of medications and/or no longer suffer from sleep apnea. Your personal story is powerful.
- Please include if you were Medicare eligible when you received your surgery, if Medicare paid for the operation and your age at surgery.
- If you are seeking metabolic and bariatric surgery, explain your personal preparation, what health complications you are currently experiencing, how they affect your quality of life and the relief or burden placed on you by the new policies created by the NCD.
- If you are a family member or friend of a metabolic and bariatric surgery patient, detail the difference the procedure has made in your family member/friend's life or how much they would benefit from receiving these services.

Facts about Metabolic and Bariatric Surgery

- Extends the lives of patients
- Causes significant weight-loss
- Decreases the incidence and costs of obesity-related diseases, such as diabetes, hypertension, cancers and heart disease
- Improves the quality of life of the recipients
- For more facts, see the OAC publication, "**Fact Sheet: Why it makes sense to provide treatment for obesity through bariatric surgery**" (www.obesityaction.org/advocacy/fact-sheets/weight-loss-surgery-fact-sheet).

Do's

- Be brief and to the point. Short comments are the most effective.
- Give your reasons urging CMS to include sleeve gastrectomy as a regularly covered procedure
- Be courteous and reasonable.
- Include all of your contact information.
- Double check your information for accuracy.
- Use correct grammar and complete sentences.
- Use a spell check feature.
- Include your personal story.

Don'ts

- Try not to be longwinded.
- Avoid a righteous tone.
- Avoid abbreviations.
- Do not threaten anyone.
- Do not demand anything from the individual.
- Do not refer or allude to politics or government as sleazy or dishonorable.

Sample Comment

Below, please find a sample letter that will help you get started:

In your first paragraph, mention the following points:

1. Thank CMS for their efforts to improve access to weight-loss surgery through a National Coverage Decision. Highlight your concerns that you may have with the decision at this point.
2. Discuss how this specific issue affects you and your family.

In your second paragraph, mention the following items:

1. Further elaborate how the issue affects or has affected you.
2. Share your personal connection with the issue in question. (Remember to remain brief. A short comment can accomplish just as much as a long one.)

In your last paragraph, discuss the following closing items:

1. Urge them to continue their efforts to expand the treatment of severe obesity

Sincerely,

Your Full Name