

INSURANCE BENEFIT REQUEST FORM

Jaime Schwartz, MD

Tax ID # 46-0858507

NPI # 1336397660

TLC Surgical Center

Tax ID # 83-3724406

NPI # 1104469105

Total Lipedema Care

Tax ID# 85-2749142

NPI # 1003417833

Date _____

Surgery Date Oct 19 - 12/31/2022

Patient Name: Mary Berns

DOB: 9-6-58

Insurance: BXBS Atlanta GA

Phone #: 800 676-2583

ID #: UBC340A23550

Group # _____

Diagnosis: _____

Procedure: (158794) (15877 15839) (15879-50 15877x2)

Date of Verification: _____ Spoke to: Rain (15878-50)

Reference# _____

Pending Auth #
um34156867

Prior Authorization required yes

Effective Date _____

fax 877 663 2740

Provider Out of Network

Deductible / Met _____ / _____ % of coverage _____ / _____

Out of Pocket Max/Met _____ / _____

Provider In Network

Deductible / Met _____ / _____ % of coverage _____ / _____

Out of pocket Max/ Met _____ / _____

Facility

Deductible / Met _____ / _____ % of coverage _____ / _____

Out of Pocket Max /Met _____ / _____

Max per Day Yes No Amount _____

Pay Scale _____



MARY BERNIS

Member ID:

UBC340A23550

CDHP

Group:

270084M4MA

UBS CORE PLAN

Plan Code:

131

Products: Medical





Please submit claims to local Blue plan.
If Medicare is primary, please file claims
with Medicare. If a provider does not file
claims on your behalf, please file claims to:

Anthem Blue Cross and Blue Shield
PO Box 105187
Atlanta, GA 30348-5187

anthem.com

Member Services

24/7 Nurseline
Coverage While Traveling
Provider Services
LiveHealth Online
livehealthonline.com

1-800-875-6314
1-800-700-9184
1-800-810-2583
1-800-676-2583

Anthem Blue Cross and Blue Shield is the trade name of Anthem Insurance Companies, Inc. Independent licensee of the Blue Cross and Blue Shield Association. Anthem Blue Cross and Blue Shield provides administrative claims payment services only and does not assume any financial risk or obligation with respect to claims.

Possession of this card does not
guarantee eligibility for benefits.

Issue Date: 12/03/2019

320-492-7404

MARY BERNIS
15986 71 ST ST NW
South Haven, MD

When you have gathered and completed all the steps your insurer requires, we will review your packet and submit for prior authorization. We are happy to review your insurance packet even if you are currently working with another group or organization.

SS382

- When the packet is submitted, we will typically get a confirmation as a reference number. We will provide you with this number for use when you call your insurance company.
- Please follow up with your insurance provider regarding status. This could take days, weeks, or months. We have no control over this and do not have any more information than you do at this point. Any correspondence will be shared with you. Any information you find out, please let us know so we can better assist.

Our office will contact you once we have received an authorization to discuss how to proceed.

If your claim is denied:

- We will do a first and second level appeal on your behalf.

If the 2nd level appeal is denied:

- You will have to request an external appeal. We will be happy to provide all of your insurance records for that process.
- At this point it is out of our hands.

Total Lipedema Care Insurance Checklist

Copy of
INS. auth
→

1. PPO

You must have a PPO plan. Please call your provider's member services department to confirm you have out of network coverage. It is in your best interest to call your insurance prior to starting this process to ensure that a preauthorization and single case agreement can be obtained.

BCBS Anthem

2. Personal Documentation

We will need written documentation of your lipedema journey. Please write (type) your story in detail starting with onset of lipedema. How it's affected your life, what doctors you have seen, and any conservative treatments you have tried.

3. Diagnosis from two MD's

You will need two doctors' letters confirming your diagnosis. Dr. Jaime Schwartz and Dr. Karen Herbst can both provide a diagnosis and will count as the two doctors. In order to receive diagnosis from Dr. Jaime Schwartz or Dr. Karen Herbst, you must have a full evaluation, which is performed during a one-on-one consultation with each provider.

Dr. Herbst
Dr. Schwartz

4. Conservative Treatment

We need a list of the conservative/ non-surgical lipedema treatments you have tried and the time frame of the treatments. This list can include the use of compression garments, physical therapy, manual lymphatic drainage massages, exercise classes, any therapy you have tried, etc. In addition to this list, we will need supporting documentation or proof of treatment; receipts, notes from therapists, doctors, etc.

5. Treatment Receipts and Timeline

The history of your conservative treatment must be no less than three months; documentation is required for this bullet point. Example may include receipts, notes from the therapists, memberships, notes from doctors, etc.

✓ 6. Photos *Karen Herbst took Photos*

We will need photos of your lipedema-affected areas. Photos will be submitted to our office through our HIPAA compliant photo portal, and this step is done before the consultation, which allows the doctor to review your photos prior to diagnosis. Photo instructions will be provided to you by our office staff. If you are seen in person, photos can be taken in our in-office photo studio.

7. Letter of Medical Necessity

Letter of Medical Necessity: We will provide this letter following a consultation with Dr. Jaime Schwartz and/ or Dr. Karen Herbst.

8. Surgical Treatment Plan

You must have a long-term surgical treatment plan, which will be developed during the consultation. We will provide this documentation following the one-on-one consultation with Dr. Jaime Schwartz.

9. Consultation Notes

Consultation Notes: We will provide notes from your consultation with Dr. Jaime Schwartz and/or Dr. Karen Herbst. Any additional notes from other medical professionals that will help support your case are encouraged.

10. Functional Capacity Exam

Functional capacity examination: We recommend one of the following;

Impact Medical Inc.,
818-722-2142 Ext 407
National Company

VibrantCare Rehabilitation
520-721-0319
Tucson, AZ

Healthpointe,
310-218-4300
Los Angeles, CA

NOT DONE

We are happy to review your insurance packet if you're currently working with another group or organization.

From our experience, these are the minimum requirements for insurance submission. This list is subject to change, and please note that every patient, plan, and provider is different. Please understand the approval process comes from your insurance provider. Total Lipedema Care does not have control over your providers processes, however anything we can do to assist with the approval process we will.

We will do our best to get your procedure approved and obtain a single case agreement. However, please remember that we can never guarantee approval and that the insurance contract is between you and your carrier. Please stay involved to help us help you. We have been working for a long time to get in network with insurers. This process has taken us a few years as companies still figure out their Lipedema coverage and guidelines.