NOVEMBER 2026 | NO. 2026-38

ForwardHealth UPDATE
Wisconsin serving you

Your First Source of ForwardHealth Policy and Program Information



NEW PRIOR AUTHORIZATION CRITERIA FOR BARIATRIC SURGERY

Bariatric surgery is an evidence-based treatment for the disease of obesity. Due to the chronic, complex nature of obesity, bariatric surgery is an effective treatment option. It results in significant weight loss while allowing for the prevention, improvement, and resolution of many associated medical conditions.

This ForwardHealth Update provides new prior authorization (PA) criteria to expand coverage for bariatric surgery in alignment with best practices.

This Update includes information on:

- PA Approval Criteria for Bariatric Surgery.
- PA Approval Criteria for Revision of Bariatric Surgery.
- PA Approval Criteria for Repeat Bariatric Surgery.
- PA Documentation Requirements.
- Length of Authorization.

AFFECTED PROGRAMS
BadgerCare Plus, Medicaid

TO
Anesthesiologist Assistants, Certified Registered Nurse Anesthetists, Community Health Centers, High-Cost Medically Complex Case Management, Hospital Providers, Nurse Practitioners, Physician Assistants, Physician Clinics, Physicians, Rural Health Clinics, Tribal Federally Qualified Health Centers, HMOs and Other Managed Care Programs

The information provided in this ForwardHealth Update is published in accordance with Wis. Admin. Code §§ DHS 107.06(2)(b)–(c).

WISCONSIN DEPARTMENT of HEALTH SERVICES

PA Approval Criteria for Bariatric Surgery

PA Criteria for Adults

ForwardHealth may approve PA requests for bariatric surgery for members 18 years of age and older if **one of these criteria** is met:

- The member has a body mass index (BMI) of at least 35 kg/m^2.
- The member has a BMI between 30 and 34.9 kg/m^2 **and** has a metabolic or other obesity-related disease.
- The member is of Asian descent **and** has a BMI of at least 32.5 kg/m^2.
- The member is of Asian descent **and** has a BMI of at least 27.5 kg/m^2 **and** has a metabolic or other obesity-related disease.

PA Criteria for Adolescents

ForwardHealth may approve PA requests for bariatric surgery for members between the ages of 13 and 17 if **one of these criteria** is met:

- The member has a BMI of at least 40 kg/m^2.
- The member's weight is at least 140% of the 95th percentile for their age and sex.
- The member has a BMI greater than or equal to 35 kg/m^2 **and** has a metabolic or other obesity-related disease.
- The member's weight is at least 120% of the 95th percentile for their age and sex, **and** they have a metabolic or other obesity-related disease.

Metabolic and Obesity-Related Diseases

For the purposes of requesting PA, metabolic and obesity-related diseases include:

- Type 2 diabetes mellitus.
- Moderate to severe obstructive sleep apnea.
- Cardiovascular disease.
- Liver disease, including:
  - Metabolic dysfunction-associated steatohepatitis (MASH), formerly known as nonalcoholic steatohepatitis (NASH).
  - Metabolic dysfunction-associated steatotic liver disease (MASLD), formerly known as nonalcoholic fatty liver disease (NAFLD).
- Gastroesophageal reflux disease (GERD).
- Hyperlipidemia.
- Hypertension.
- Idiopathic intracranial hypertension.

QUICK LINKS

Bariatric Surgery topic #12177

The information provided in this ForwardHealth Update is published in accordance with Wis. Admin. Code §§ DHS 107.06(2)(b)–(c).

- Polyendocrine metabolic ovarian syndrome (PMOS), formerly known as polycystic ovary syndrome (PCOS).
- Adolescent Blount's Disease.
- Slipped capital femoral epiphysis (SCFE).
- Osteoarthritis.
- Anxiety.
- Asthma.
- Depression.
- Other diagnoses that the treating physician determines are related to the member's obesity.

Additional Criteria for Members of All Ages

In addition to the criteria already listed, members of all ages must meet **all of these criteria**:

- A multidisciplinary bariatric team assessed the member within 12 months of the proposed surgery and decided surgery is appropriate for the member. The assessment must include:
  - The member's medical history and physical exam results.
  - The bariatric surgeon's proposed plan.
  - A psychological or psychiatric evaluation to determine whether the member is ready for surgery and to identify any mental health barriers to the surgery's success.
    - Note: If the member also has a psychiatric diagnosis, the team should coordinate with the member's mental health providers as needed.
  - Documented participation in a surgical preparatory regimen that includes:
    - Nutrition assessment, evaluation, and counseling.
    - Mental health evaluation and counseling.
    - Physical activity education.
  - Documentation that the member understands the risks, benefits, expected outcomes, alternatives, and required lifestyle changes.
- The member is not currently pregnant and does not plan to be within 18 months of surgery.
- For members with a history of substance use disorder:
  - The member has stopped using the substance.
  - The team has evaluated whether surgery is appropriate for the member at this time.

The information provided in this ForwardHealth Update is published in accordance with Wis. Admin. Code §§ DHS 107.06(2)(b)–(c).

Wisconsin Medicaid requires centers and teams performing bariatric surgery to make sure that the member is receiving treatment in a program experienced in metabolic surgery that can provide all of these:

- Surgical care
- Preoperative medical and mental health evaluation and counseling
- Nutrition counseling
- Exercise counseling

DOCUMENT CHECKLIST

- ✓PA/RF, F-11018 (04/2026)
- ✓Documentation supporting approval criteria

PA Approval Criteria for Revision of Bariatric Surgery

PA requests for revision of bariatric surgery may be approved if **one of these criteria** is met:

- Removal of a gastric band is medically necessary and recommended by the member's physician.
- Surgery is medically necessary to correct complications (like obstruction, stricture, erosion, band slippage, or port or tubing malfunction) from an earlier bariatric surgery.
- Revision is medically necessary and recommended by the member's physician because the member hasn't lost enough weight, has gained significant weight, or has had other complications or side effects.

PA Approval Criteria for Repeat Bariatric Surgery

Due to the chronic, complex nature of obesity, ForwardHealth doesn't limit bariatric surgery to one per lifetime. PA requests for repeat bariatric surgery may be approved for members who meet all criteria for an initial bariatric surgery and require a conversion or revision based on their anatomy, symptoms, or goals.

> **"Due to the chronic, complex nature of obesity, ForwardHealth doesn't limit bariatric surgery to one per lifetime.**

PA Documentation Requirements

When requesting PA for an initial bariatric surgery, a revision of bariatric surgery, or repeat bariatric surgery, providers must submit a completed Prior Authorization Request Form (PA/RF), F-11018 (04/2026), and documentation that supports the approval criteria.

Length of Authorization

An approved PA request for an initial bariatric surgery, revision of bariatric surgery, or repeat bariatric surgery is authorized for 12 months.

The information provided in this ForwardHealth Update is published in accordance with Wis. Admin. Code §§ DHS 107.06(2)(b)–(c).

Documentation Retention

As a reminder, providers must follow the documentation retention requirements per Wis. Admin. Code § DHS 106.02(9). Providers are required to produce or submit documentation, or both, to the Wisconsin Department of Health Services (DHS) upon request. Per Wis. Stat. § 49.45(3)(f), providers of services shall maintain records as required by DHS for verification of provider claims for reimbursement. DHS may audit such records to verify the actual provision of services and the appropriateness and accuracy of claims. DHS may deny or recoup payment for services that fail to meet these requirements. Refusal to produce documentation may result in denial of submitted claims, recoupment of paid claims, application of intermediate sanctions, or termination from the Medicaid program.

Information Regarding Managed Care Organizations

This Update applies to bariatric surgery that members receive on a fee-for-service basis and through BadgerCare Plus, Medicaid SSI, and other managed care programs. For information about managed care implementation of the updated policy, contact the appropriate managed care organization (MCO). MCOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The information provided in this ForwardHealth Update is published in accordance with Wis. Admin. Code §§ DHS 107.06(2)(b)–(c).

The ForwardHealth Update is the first source of program policy and billing information for providers.

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Medicaid Services within the Wisconsin Department of Health Services (DHS). The Wisconsin HIV Drug Assistance Program and the Wisconsin Well Woman Program are administered by the Division of Public Health within DHS.

For questions, call Provider Services at 800-947-9627 or visit our website at www.forwardhealth.wi.gov/.