

Understanding the cost of

Gastric Band

What is the cost of gastric band with private insurance?

- There are several components to the cost.
- The out of pocket cost (gap fee) is \$4300
- This includes:
 - Gastroscopy (surgeon's cost)
 - Dietician review (two sessions: one before and one after the operation)
 - Gastric band (surgeon and assistant surgeon's cost)
 - Reviews by surgeon after operation while in hospital and the first review after discharge from hospital.

What is a Gap Payment and Can I claim it back from Medicare?

- Gap payment or Out-of-pocket fee is what doctors charge in addition to Medicare and private insurance payment. Therefore no rebate is payable from either Medicare or your private insurance.

Are there any additional costs?

- Initial Consultation with surgeon
 - \$ 220 (Telehealth OR Face-to-face consult)
 - Medicare rebate \$76.15
 - You're out of pocket: \$143.85
- Review consultations with surgeon

- Before surgery
 - \$ 80. Medicare rebate \$38.
 - You're out of pocket: \$ 42
- After surgery
 - First review: \$ 0
 - Subsequent reviews: \$ 50. Medicare rebate \$38.
 - You're out of pocket: \$12.
- Hospital Excess fee
 - This is charged by the hospital, based on your insurance plan.
 - You only need to pay this once each calendar year on the first hospital admission.
- Anaesthetist fee
 - Your anaesthetist will advise you of their fees and bill directly from their practice.
 - This varies between each anaesthetist, from \$500 to \$1500.
- Pathology and Radiology
 - determined by the arrangements of your insurance company with different pathology and radiology service providers.

Is gastric band covered by my private health insurance?

- Most private health insurance covers "Bariatric Surgery" (Obesity surgery, Weight loss surgery) with their top level hospital cover (Gold level).
- The MBS number (Medicare Benefits Schedule) for gastric band is 31569.
- You are advised to confirm your cover with your insurance.
- If you have purchased your insurance or upgraded your hospital cover recently, you would be required to serve a 12-month waiting period before you could use your insurance. Obesity is usually considered as a pre-existing condition, therefore no exemption for the 12-month requirement could be applied.

- We still encourage you to contact us and start your weight loss process if you need to serve some waiting period. Most of your consultations and investigations before the surgery are not covered by insurance. Therefore you can complete them before your insurance becomes ready.

What is the cost of gastric band without insurance?

- Private health insurance pays the hospital most of the services during your in-patient stay.
- Without insurance, the hospital will provide you with a quote of “Estimation of Fees” and require full payment before your admission.
- The Hospital Fees are NOT claimable via Medicare.
- We will be providing you with an itemised quote, after you have seen the surgeon and confirmed the surgical planning.

What are important considerations for self-funding gastric band?

- All surgeries carry risks. For gastric band, the average risk for major complications is 1-2%.
- When complications occur, you may need return to theatre for control of bleeding, for example. You may also need Intensive Care Bed (\$4445 per night) instead of standard ward bed (\$1335 per night). Your hospital stay may be extended as a result.
- With insurance, you will not have to worry about the financial implications of any unexpected complications, as they will be covered by your insurance.
- If you are self-funding your surgery, you will be responsible for paying all the additional costs, should any complications arise. This could amount to a very significant sum beyond the initial “estimation of fees”.
- Despite the risk is small, we strongly encourage you to consider the potential impact on your financial situation with unexpected complications, before you decide to self-fund your surgery without private insurance.

Can I have gastric band without insurance?

- We offer low-risk patients the option of self-funding their gastric band without private insurance.
- Your surgeon need to decide with you if it is a good option to self-fund your surgery, after the first consultation.

- This is done to make sure that gastric band is the best option for treating your obesity and overall health condition and your risk of potential complications after the surgery is small.

Can I get free weight loss surgery?

- You can have bariatric (weight loss) surgery at some public hospitals in Melbourne, for free.
- Mr. Harry Frydenberg AM and Mr. Yuan Cheng are consultant surgeons at the Bariatric Unit, Box Hill Hospital (Eastern Health).
- You will need to obtain a referral from your GP to one of the public Bariatric services.
- Your waiting time is based on the urgency of your condition and the waiting list of that hospital.
- In general, the current waiting time for public bariatric clinic is much longer than private service.
- You would also need to expect part of or the whole surgery to be performed by fellows or registrars with supervision of the surgeon, in a public hospital. Fellows are qualified general surgeons having sub-specialty training in bariatric surgery. Registrars are hospital doctors at various stages of their training to become a surgeon.

Patients with DVA cards, Concession and Health Care Cards

- Please contact us and find out details about your cost.