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Note: This Exclusion Does Not Exclude Coverage For Drugs When Preauthorized As Medically Necessary To Treat Extreme Obesity. Examples Of Items/services That Are Not Covered Include, But Are Not Limited To: O Dietary Evaluations And Counseling Except As Provided By The Primary Care Phy 2th, 2024

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1/4 7/16 135 31 - 35 10,000 5/16 1/2 190 36 - 40 15,000 3/8 9/16 225 41 - 45 20,000 7/16 5/8 240 46 - 50 30,000 1/2 11/16 315 ... 4th, 2024

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