

Online Seminar Packet Instructions:

- View Online Bariatric Seminar-This can be reached by accessing freemanhealth.com and watching the Bariatric Seminar. This will be identified on the homepage with a red arrow when you hover over it.
- After viewing the content of the video take the Online Seminar test questions that have been included in your folder.
- Fill out the 4 pages of health information (front and back), new patient/update completely and sign and date. This page is very important for our insurance department to accurately determine your insurance coverage and requirements. Please copy your insurance card if possible (front and back).
- Fill out the Authorization for Release of Information. The purpose for this is to legally be able to request records from a physician/provider that is outside of Freeman Health System. Fill it out as completely as possible. Sign and print your name with the date at bottom of the form.
- Return the completed papers as discussed above in the postage paid envelope. Keep the folder with business card, support group information, program checklist and welcome booklet. These are yours.
- In approximately 7-10 days from mailing back to the program you should receive a phone call from our insurance department. If you prefer you may deliver the completed packet to the office. The address is located on the business card in your packet.

Thank you for your interest in the Bariatric Program at Freeman Health System. We look forward to helping you be successful in every step of your progress!

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- After viewing the content of the video answer the Online Seminar test questions that have been included in your folder.
- Fill out completely the following:
 1. The 4 pages of health information (front and back)
 2. New patient/ update form-this form is very important for our insurance department to accurately determine your insurance coverage and requirements
 3. Mental Health and Readiness for Surgery Questions
 4. Please copy your insurance card and photo I.D. (front and back).

Fill out the Authorization for Release of Information. The purpose of this is to legally be able to request records from a physician/provider that is outside of Freeman Health System. Provide as much information as possible. Sign and print your name with the date at bottom of the form.

- Return the completed all the papers as discussed above in the postage paid envelope. Keep the folder with business card, support group information, program checklist and welcome booklet. These are for your records.
 - In approximately 7-10 days after mailing your paper work to us you should receive a phone call from our insurance department. If you prefer you may deliver the completed packet to our office. The address is 3302 McIntosh Circle Suite 1, Joplin Mo 64804.

Thank you for your interest in our Bariatric Program here at Freeman Health System. We look forward to helping you be successful in every step of your Journey!

Janice and Opal

