



Thank you for your interest in Transfer of Care to Bluegrass Bariatric Surgical Associates for your bariatric healthcare needs.

**HOW DO YOU PROCEED?**

Enclosed you will find a patient registration packet to start your Transfer of Care process. Please complete the packet and insurance review form completely and to the best of your knowledge. **Send the following items to our office:**

- 1. A copy of your insurance card (front and back),**
- 2. A copy of your medical operative note from your original weight loss surgery,**
- 3. A copy of all follow up records**

**Once we receive** all information, a member of our staff will contact you with the next steps of what we hope will be setting up your first follow up visit with our office.

Financial obligations will apply and will be discussed with you during the initial call.

Please feel free to contact us if we can assist you in any way. We look forward to having you as a patient and assisting with your bariatric needs to a better and healthier life.

Thank you,  
Bluegrass Bariatrics