



<Address/PO Box>
<City>, <State>, <Zip>

Sterilization Consent Requirements and Billing Guidelines

Missouri Care has established notification policies and procedures to meet the Centers for Medicare and Medicaid Services 42 CFR 441.250 through 441.259 requirements for sterilization. These requirements are noted below.

This notification changes billing requirements, effective immediately. To avoid denial of the claim, the fully executed sterilization consent form must be included with the claim submitted for any sterilization procedure listed below.

Failure to comply with all the CFR and Missouri Care policy requirements will result in a denial of the claim.

- ✓ The member must be at least 21 years of age on the date of signing the consent form;
- ✓ The member must be mentally competent;
- ✓ Informed consent has been given; and
- ✓ The member must sign the Sterilization Consent Form (PSFL-200) at least 30 days but not more than 180 days prior to the date of the sterilization procedure. (There must be 30 days between the signature date and the surgery date)
- ✓ The only exceptions to the 30-day time requirement are premature delivery or emergency abdominal surgery:
 - For premature delivery, the consent form must be completed and signed by the member at least 72 hours prior to sterilization and at least 30 days prior to the expected date of delivery;
 - For emergency abdominal surgery, the consent form must be completed and signed by the member at least 72 hours prior to the sterilization procedure.

The following codes require the submission of an appropriately executed *Sterilization Consent Form*

Sterilization Procedure Code Table

55250	Vasectomy; unilateral or bilateral, including postoperative semen exam
58565	Hysteroscopy, surgical; with bilateral fallopian tube cannulation to induce occlusion by placement of permanent implants.
58600	Ligation or transaction of fallopian tube(s); abdominal or vaginal approach, unilateral or bilateral
58605	Ligation or transaction of fallopian tube(s); abdominal or vaginal approach, postpartum, unilateral or bilateral, during same hospitalization
58611	Ligation or transaction of fallopian tube(s); when done at the time of Cesarean delivery or intra-abdominal surgery
58615	Occlusion of fallopian tube(s) by device (e.g., band, clip, Falope ring); vaginal or suprapubic approach
58670	Laparoscopy, surgical; with fulguration of oviducts (with or without transaction)
58671	Laparoscopy, surgical; with occlusion of oviducts by device (e.g., band, clip or Falope ring)



Physician Certification and Submission of Consent Form

The physician certifies by signing the consent form that the physician:

- Advised the recipient to be sterilized,
- Confirms that no federal benefits will be withdrawn if the recipient chooses not to be sterilized,
- Explained the requirements for informed consent; and
- Affirms that to the best of the physician's knowledge and belief, the recipient to be sterilized appeared mentally competent and knowingly and voluntarily consented to be sterilized.

All applicable items of the Sterilization Consent Form* must be completely filled out. All fields must be legible.

The physician's statement on the Sterilization Consent Form must be signed and dated by the physician who performed the sterilization on or after the date the sterilization procedure was performed. Claims must still meet timely filing requirements.

The date of the sterilization must match the date of service on the claim form.

To avoid denial of the claim, the fully executed sterilization consent form must be included with the claim submitted for a sterilization procedure.

*For any emergency voluntary sterilization service provided in non-bordering states for which a consent form is required, a consent form approved for use in another state may be accepted, providing it includes all the federally prescribed content and the same required information that the Missouri-approved form contains.

Informed Consent Guidelines and Definitions

Informed consent is considered given only if the person who is obtaining consent for the sterilization procedure has answered any questions the member to be sterilized may have concerning the procedure and if a copy of the Sterilization Consent Form has been provided to the member.

- The member has been advised that he/she is free to withhold or withdraw consent to this procedure at any time before the sterilization.
- This decision does not affect the right to future care or treatment, and it does not cause the loss or withdrawal of any federally funded program benefits to which the individual might otherwise be entitled.
- The member has been given a description of available alternative methods of family planning and birth control.
- The member has been advised the sterilization procedure is considered permanent and irreversible.
- The member has been given a thorough explanation, verbally and in writing, of the specific sterilization procedure to be performed.
- The member has been advised of the discomforts and risk that may accompany or follow the procedure, including type and possible side effects of anesthesia to be used.
- The member has been given a full description of the benefits expected as a result of the sterilization.
- The member has been advised the sterilization will not be performed for at least 30 days after the signing of the consent form except under circumstances specified on the form related to premature delivery or emergency abdominal surgery.
- Blind, deaf or otherwise disabled members have had suitable arrangements made to ensure all information has been effectively communicated to the satisfaction of the member.
- A language interpreter has been provided if the member did not understand either the language used on the consent form or the language used by the person obtaining consent.
- The member was permitted to have a witness of his/her choice present when consent was obtained.

Informed consent for a sterilization procedure may not be obtained from a member under the following conditions:

- ✓ The member is in labor or childbirth.
- ✓ The member is seeking to obtain, or is obtaining an abortion.
- ✓ The member is under the influence of alcohol or other substances that affect the individual's state of awareness.

The Sterilization Consent Form must be signed and dated by:

- ✓ Member requesting the sterilization. NOTE: The form must be signed and dated at the same time. The form will not be returned to the provider for addition of the participant's missing signature or date. If either of these requirements is not met, the procedure will be denied.
- ✓ The Interpreter (if one was necessary).
- ✓ Person who obtained the consent (on or after the date of the participant signature).
- ✓ Physician who performed the sterilization (on or after the date of surgery).

Mentally incompetent member is someone who has been declared mentally incompetent for any purpose by a federal, state, or local court of competent jurisdiction unless the individual has been declared competent for purposes that include the ability to consent to sterilization.



Institutionalized member is someone who is involuntarily confined or detained under a civil or criminal statute in a correctional or rehabilitative facility, including a mental hospital or other facility for the care and treatment of mental illness, or a member who is confined under a voluntary commitment in a mental hospital or other facility for the care and treatment of mental illness.