Understanding the Sterilization and Hysterectomy Process

Brown Bag Training ::: June 28, 2016
Agenda

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Hysterectomy Process

Providers are required to complete the Acknowledgement of Receipt of Hysterectomy Information form, F-01160, prior to performing a non-emergency hysterectomy.

In addition to the English version, the Acknowledgement of Receipt of Hysterectomy Information form and instructions are also available in:

- Spanish, F-01160S
- Hmong, F-01160H

Refer to the Forms page of the ForwardHealth Portal for a copy of each of these forms and instructions.
Exceptions to completing the Acknowledgement of Receipt of Hysterectomy Information form include:

- The member was already sterile. Sterility may include menopause.
- The hysterectomy was required as a result of a life-threatening emergency situation.
- The hysterectomy was performed during a period of retroactive member eligibility and one of the following circumstances applied:
  - The member was informed before the surgery that the procedure would make her permanently incapable of reproducing.
  - The member was already sterile.
  - The member was in a life-threatening emergency situation that required a hysterectomy.

The provider is required to include signed and dated documentation with the claim if any of these circumstances apply.
Sterilization Process

General Guidelines

- State and federal regulations require completion of the Consent for Sterilization form, F-01164.

- In addition to the English version, the Consent for Sterilization form is also available in Spanish, F-01164S, and is located on the Forms page of the Portal along with completion instructions for the English version.

- Providers are recommended to use the PDF version of the form rather than the Microsoft® Word document.
General Guidelines (Cont.)

- A claim for sterilization cannot be paid without a timely, valid, and complete Consent for Sterilization form attached. Use of the form is mandatory. There are no exceptions.
- The form itself may not be altered.
- Use of opaque correction fluid is prohibited. If the provider needs to correct information on the form:
  - Strike out the error.
  - Correct the error.
  - Have the correction signed by the member, person obtaining consent, or performing surgeon, as appropriate.
- Providers are encouraged to complete a Consent for Sterilization form before all sterilizations in the event that the person being sterilized receives retroactive Medicaid enrollment.
Sterilization Process (Cont.)

**Obtaining Consent**

- Only the member may give consent for sterilization. A relative may not give consent on behalf of a member.
- Any physician or clinic can obtain consent. It does not have to be the physician who will actually perform the sterilization procedure.
- Sterilization of an incompetent or institutionalized individual is not covered by Wisconsin Medicaid.
Sterilization Process (Cont.)

**Interpreter and Witnesses**

- An interpreter must be provided if the member does not understand English or the person obtaining consent cannot speak and explain the form in the member’s language.
- Interpreters must sign the consent form. The date may be signed on or prior to the member’s signature date.
Sterilization Process (Cont.)

**Signatures**
The Consent for Sterilization form must be signed and dated by:
- The member, on the date of consent
- The interpreter, if applicable
- The individual who obtains consent
- The physician who actually performed the surgery

The Consent for Sterilization form may not be signed by:
- Nurses and physician assistants for the physician
- Signature stamps or computer generated signatures
Sterilization Process (Cont.)

**Time Frames**

* Consent is valid for no more than 180 days.
* The physician performing the sterilization is required to certify that **at least 30 days** have passed between the date the consent was obtained and the sterilization procedure was performed, except in the following instances:
  
  - In the case of premature delivery:
    * Consent must be obtained no less than 72 hours before the actual delivery and at least 30 days before the expected date of delivery.
    * The physician must state on the form the expected date of delivery.
  
  - In the case of an emergency abdominal surgery:
    * Consent must have been obtained at least 72 hours prior to the surgery.
    * The physician must state on the form the reason for emergency abdominal surgery.
Common Reasons for Denial

- The form is missing or has invalid or completely mismatched names and signatures.
- The form is missing or has invalid dates.
- The member was younger than 21 years of age when consent was obtained.
- Insufficient time has elapsed following obtaining of consent.
- The form is missing the expected date of delivery in the case of premature delivery.
- The form is missing the reason for emergency abdominal surgery.
Questions
Thank You