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Title 22@ Social Security

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Division 3@ Health Care Services

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Subdivision 1@ California Medical Assistance Program

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Chapter 3@ Health Care Services

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Article 4@ Scope and Duration of Benefits

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Section 51305.6@ Hysterectomy

51305.6 Hysterectomy

(a)

A hysterectomy shall not be covered if: (1) Performed solely for the purpose of rendering an individual permanently sterile. (2) There is more than one purpose to the procedure, and the hysterectomy would not be performed except for the purpose of rendering the individual permanently sterile.

(1)

Performed solely for the purpose of rendering an individual permanently sterile.

(2)

There is more than one purpose to the procedure, and the hysterectomy would not be performed except for the purpose of rendering the individual permanently sterile.

(b)

Except for previously sterile women, a nonemergency hysterectomy may be covered only if: (1) The person who secures the authorization to perform the hysterectomy has informed the individual and the individual's representatives, if any, orally and in writing, that the hysterectomy will render the individual permanently sterile. (2) The individual and the individual's representative, if any, has signed a written acknowledgment of the receipt of the information in (1). (3) The individual has been informed of the rights to consultation by a second physician.

(1)

The person who secures the authorization to perform the hysterectomy has informed the individual and the individual's representatives, if any, orally and in writing, that the hysterectomy will render the individual permanently sterile.

(2)

The individual and the individual's representative, if any, has signed a written acknowledgment of the receipt of the information in (1).

(3)

The individual has been informed of the rights to consultation by a second physician.

(c)

A copy of the signed statement shall be:(1) Provided to the patient. (2) Retained by the physician and the hospital in the patient's medical records. (3) Attached to the physician's billing form.

(1)

Provided to the patient.

(2)

Retained by the physician and the hospital in the patient's medical records.

(3)

Attached to the physician's billing form.

(d)

For previously sterile women, hysterectomy may be covered if the physician certifies the individual was previously sterile and states the cause of sterility on the claim form or an attachment.

(e)

An emergency hysterectomy may be covered only if the physician certifies on the claim form or an attachment that the hysterectomy was performed because of a life-threatening emergency situation in which the physician determined that prior

acknowledgement was not possible and includes a description of the nature of the emergency.