

Reminder: Sterilization Consent Form for Medicaid Members

November 1, 2024

Neighborhood Health Plan of Rhode Island (Neighborhood) is reminding providers they must adhere to [federal regulations](#) regarding sterilization procedures for Medicaid members. **Please note it is mandatory for these members to complete a [consent form](#) at least 30 days prior to undergoing any sterilization procedure.**

In addition, this form is considered a regulatory requirement as per the State of Rhode Island's [Executive Office of Health and Human Services](#) which outlines federally mandated guidelines and billing requirements.

While Neighborhood does not currently require submission of this consent form for claim processing, it is critical that the form be retained as documentation of compliance as it may be subject to review in future audits.

For additional guidance, please refer to the [Physician Services Payment Policy](#).

Thank you for your attention to this requirement. If you have any questions about this notification, please contact our Provider Services team at 1-800-963-1001.

Note: This notice was sent via email on November 1, 2024 to all providers registered for Neighborhood's News and Updates. If you would like to be added to the distribution list, please [click here](#) to sign up.