



The American College of
Obstetricians and Gynecologists
WOMEN'S HEALTH CARE PHYSICIANS

May 31, 2022

Xavier Becerra
Secretary
U.S. Department of Health and Human Services
200 Independence Avenue SW
Washington, DC 20201

[Via Online Submission](#)

RE: Information Request HHS 42 CFR subpart B; Sterilization of Persons in Federally Assisted Family Planning Projects (0937-0166)

Dear Secretary Becerra:

On behalf of the American College of Obstetricians and Gynecologists, representing more than 60,000 physicians and partners dedicated to advancing women's health and the health of individuals seeking obstetric and gynecologic care, I am pleased to offer the following comments in response to the Department of Health and Human Services' (HHS) Information Collection Request (ICR) on 42 CFR Subpart B: Sterilization of Persons in Federally Assisted Family Planning Projects. Female sterilization is safe, efficacious, and is an important strategy in our Nation's ongoing effort to improve birth outcomes by reducing rates of unintended and rapid repeat pregnancies. As physicians dedicated to providing quality care to women, ACOG is concerned that the current processes and required documentation for sterilization procedures interfere with our patients' ability to access care, particularly those who receive health coverage through Medicaid. ACOG previously submitted written comments outlining these concerns in the most recent information collection request and is disappointed to see the proposal to reinstate the form without change.

Ethical sterilization care requires access to the procedure without undue burden, and also protections from unjust or coercive practices.ⁱ To reiterate our previous request, **ACOG requests HHS to evaluate current approval processes governing coverage of sterilization for beneficiaries of Medicaid and other federally funded programs and update the policies to improve access, eliminate procedural barriers, and facilitate informed decision-making. Please find a summary of our previously submitted recommendations below.**

ACOG Recommendations:

- Reconsider the mandatory waiting period for the sterilization procedure as it is unnecessarily creating a barrier to care.
- Define "premature delivery" and "emergency abdominal surgery," consistent with evidence-based clinical guidance to ensure equitable implementation across jurisdictions.
- Develop processes to integrate the sterilization consent form into EHR technology and strengthen information sharing between health systems.

- Consider changes to the form for improved readability and supported decision-making.
- Amend the interpreter statement to cover language interpretation versus translation, remove the patient comprehension as an attestation for the interpreter.
- Evaluate current approval processes governing coverage of sterilization for beneficiaries of Medicaid and other federally funded programs and update the policies to improve access, eliminate procedural barriers, and facilitate informed decision-making.

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Thank you for the opportunity to comment on the Information Collection Request on 42 CFR Subpart B: Sterilization of Persons in Federally Assisted Family Planning Projects. We hope you have found our comments and recommendations useful, and we look forward to the opportunity to work collaboratively with HHS to improve women's health care. Should you have any questions, please contact Taylor Platt, Manager, Health Policy, at tplatt@acog.org or 202-314-2359.

Sincerely,



Lisa Satterfield, MS, MPH, CAE, CPH
Senior Director, Health Economics & Practice Management

ⁱ Brown BP, Chor J. Adding injury to injury: ethical implications of the Medicaid sterilization consent regulations. *Obstet Gynecol* 2014;123.6: 1348-1351.