

BREAST PUMP INFORMATION

Will my insurance company pay for a breast pump?

The Affordable Care Act (ACA) signed into law in 2010, encourages insurance health plans to provide coverage for breastfeeding support and supplies. This coverage varies among insurance plans.

Therefore, patients are encouraged to speak with their individual insurance providers to understand what coverage benefits are available through their plan.

Most companies offer a toll free customer service number that you can call with specific questions. This number is typically found on the back side of your insurance card.

The insurance representative should be able to explain your coverage for breastfeeding support and services. Don't accept, "I don't know" for an answer. Keep asking until you get a clear answer to what benefits you are eligible for.

Questions to ask your Insurance carrier (NOTE: most insurances will allow a patient to order a pump up to 30 days prior to expected delivery date, this does vary.)

***Does my insurance plan cover expenses related to breastfeeding?**

***Where can I get my breast pump?**

Does it need to be from a designated place (in network provider) or can I choose where to get it?

If I need to use an in network provider, how do I get a list of those companies and their contact info?

What do I do if the in network providers do not have a breast pump available for me?

*** What services and products are covered? Are there any restrictions?**

Do I need a written prescription from my physician?

Do I need to pay a copay?

Do I need to meet a deductible first?

What will I pay out of pocket?

Is there a set dollar limit for coverage of a pump and/or supplies?

*** What type of breast pump can I get?**

Hospital grade rental pump, double or single electric personal use pump or manual pump?

***Do I need to get the "recommended" pump or can I choose to purchase one and submit for reimbursement?**

If yes, what amount will I be reimbursed? Is there a dollar limit on coverage for breast pumps?

***If I have already obtained a breast pump, can I submit a claim for reimbursement?**

***When can I get my breast pump? Before giving birth or after?**

Is there an expiration date for eligibility to get a pump after the baby reaches a certain age?

***What type of feeding supplies are covered by my plan?**

Milk storage containers/bags? Replacement breast pump parts? Nursing bras? Breast pump bras?

Nursing shawl/cover up? Nursing pillows?

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***Patients are responsible for verifying benefits/coverage with their insurance company. Once this is done, go to any of the websites below to initiate the process of obtaining a pump. You will need to have you insurance ID available for reference. ***

www.aeroflowbreastpumps.com

www.breastpumps.byramhealthcare.com

Edgepark Medical Supply <http://pages.email.edgepark.com/bp/eligibility/form>

ph: 1-800-321-0591 *Does NOT contract w/ straight KS Medicaid. Does accept Amerigroup.

www.Medelabreastfeedingus.com/breastfeeding-insurance

<http://yummymummysstore.com>

Patient needs vary regarding which pump/style works best for them.

If you have any questions regarding what breast pump will best fit your needs, we encourage you to speak to an International Board Certified Lactation Consultant.