

HOW TO GET A BREAST PUMP

through Healthy Louisiana (Medicaid)

Birthing persons with health insurance through **Healthy Louisiana (Medicaid)** can get a breast pump and supplies *after* the baby is born, but it's best to start the process during pregnancy.

STEPS TO GET A BREAST PUMP

Step 1: Call Your Health Insurance Plan

Look at your Healthy Louisiana insurance card for contact information. Ask if there is a Durable Medical Equipment supplier that will allow you to order your breast pump at any time during your pregnancy. Many times, such suppliers have a team that will take care of the details such as, verifying your benefits with your insurance provider and contacting your doctor. If this isn't an option continue to Steps 2-3.

Step 2: Get a Breast Pump Prescription and Proof of Birth

- If you get a prescription before the baby is born, be sure it includes your expected due date. Once the baby is born, be sure to get a medical document that lists your baby's birth date such as hospital discharge paperwork.
- If you get the prescription after the baby is born, the baby's birth date should be included.

Step 3: Call Your Health Insurance Plan

After the birth, look at your Healthy Louisiana insurance card for contact information. Call to let them know you are breastfeeding and need a breast pump. Depending on the health plan, you may need to contact an in-network Durable Medical Equipment company to get a pump.

Step 3. Turn in the Paperwork.

You will be asked to email or fax the documents listed in Step 2 and sign a form that states you have not received a pump through WIC. You will receive your breast pump in the mail or you may be able to pick it up from a distribution site.

TIPS FOR SUCCESS

- Throughout your pregnancy, talk to your doctor and those close to you about breastfeeding.
- Call your health plan before baby is born to better understand the process and to learn how quickly you may receive a pump.
- Follow the steps above before your Medicaid plan expires.
- To find breastfeeding support in your community, visit [LABreastfeedingSupport.org](https://www.la.gov/health/breastfeeding) OR call 1-800-251-BABY.

DO YOU HAVE A HEALTHY LOUISIANA PLAN?

Healthy Louisiana is Louisiana's Medicaid program. If you have one of the following health plans, you are covered by Healthy Louisiana. For the most current health plan options, call 1-855-229-6848 (TTY: 1-855-526-3346) or visit [MyPlan.Health.La.gov](https://www.myplan.health.la.gov). For customer service, call 1-888-342-6207.

- Aetna Better Health Louisiana
- AmeriHealth Caritas of Louisiana
- Healthy Blue
- Louisiana Healthcare Connections
- United Healthcare Community Plan

Questions or concerns? Email Breastfeeding@la.gov for help.

Healthy Louisiana (Medicaid) Breast Pump Policy FAQs

Who is eligible?

Lactating persons with full Medicaid benefits are eligible to get one breast pump per delivery.

Limitations:

- If a birthing person received a breast pump from WIC, they cannot get one through Medicaid.
- A birthing person cannot get a breast pump through Medicaid during pregnancy. However, a provider can write a prescription that includes the expected date of delivery. Medicaid is the payer of last resort. If a mother has private (commercial) insurance, the private insurer should be contacted first. If private insurance doesn't cover breast pumps, the insurance plan's Explanation of Benefits must be presented to show that a breast pump is not covered.

How can uninsured birthing persons get a breast pump?

- Persons who are enrolled in WIC may be eligible for a breast pump. Find WIC clinic locations at LouisianaWic.org/Find.
- In a clinical setting, providers should connect uninsured birthing persons with a social worker.

What kind of pumps are available?

Only personal use, double electric pumps are available. Hospital, manual and single breast pumps are not covered. There are no brand limitations, however, the pump must be within the rate limitations on file for the date of service.

Are pump rentals covered?

Breast pump rentals are **not** a covered benefit.

Are pump supplies covered?

The following supplies are covered: tubing, adapter for the pump, cap for breast pump bottle, breast shield, splash protector, polycarbonate bottle, and locking ring for the pump.

Can a breast pump be replaced?

Medicaid will cover a replacement if the pump is more than three years old and if the manufacturer's warranty has expired. There may be limitations due to equipment misuse.

PROVIDERS ONLY

How do I help a parent get a pump when Medicaid is through Fee For Service (FFS)? If pumps are provided by Medicaid through FFS (i.e. the mom receives only behavioral health and transportation services from Medicaid), the provider should contact DXC technology for a list of Durable Medical Equipment (DME) providers and ordering instructions. Breast pumps dispensed by DME providers must meet the criteria outlined in the DME manual on pages 14 – 16. To view the manual, click here: <https://bit.ly/3cGdQlq> to be redirected to the DME manual on the Louisiana Medicaid site.

DME Provider List: To develop a list for your area, click [HERE](#) for a template.