

MEDICAID BREAST PUMP ALERT

Did you know that as of June 20th Medicaid's Durable Medical Equipment Fee schedule covers breast pumps?

TAKE ACTION...



Pump codes:

- E0604 - breast pump, hospital grade, electric (AC and/or DC), any type –rental only
- E0603 - Breast pump electric (AC and/or DC) any type

Reimbursement:

- E0604 - \$58.07 with 3 month maximum
- E0603 - \$124.00 per 5 years

[Click here to view the fee schedule](#)

Questions & Answers:

Q: What Medicaid plan cover pumps?

A: Currently it is dependent on each plan's own criteria.

Q: How long does it take to receive a pump?

A: Varies per policy.

Q: Can moms leave the hospital with a breast pump?

A: After preauthorization most E0603 pumps are mailed home.

1. Request a pump

- Provide mom a prescription
- Direct moms to their insurance provider for DME information
- Preauthorization required

2. File a complaint

If access to a pump is denied

- [click here](#) to let ACHA know—this is the only link they track claims! You may also
- Call toll free 1-877-254-1055 to file via phone or
- Go to: https://apps.ahca.myflorida.com/smmc_cirts/

EVERYONE - Doctors, nurse practitioners, lactation consultants, WIC employees and patients or family should complete file!

3. Help with the policy

- ACHA will be hosting a full day workshop this fall and needs our help with development
- Add your suggestions on the FBC blog

<https://flmedicaidbreastpump.blogspot.com/>



Photo provided by the United States Breastfeeding Committee