

COVERAGE CRITERIA FOR BREAST PUMPS

Medicaid and some private insurances will cover the cost of breast pumps if they are medically necessary.

STANDARD WRITTEN ORDER: A valid order must be obtained prior to delivery of a breast pump.

DIAGNOSIS: A qualifying diagnosis must be included on the prescription in order to qualify for a breast pump.

Z34.03	Encounter for supervision of normal first pregnancy third trimester	Z39.0	Encounter for care and examination of mother immediately after delivery
Z34.83	Encounter for supervision of other normal pregnancy third trimester	Z39.1	Encounter for care and examination of lactating mother
Z39	Encounter for maternal postpartum care and examination	Z39.2	Encounter for routine postpartum follow-up

TRICARE: Patients who are insured through Tricare are subject to additional documentation. See the Tricare Breast Pump PDF of our website to fill out the necessary documentation for Tricare members.

E-PRESCRIBE: Frontier Home Medical makes ordering equipment easier with electronic ordering through Parachute. Visit our website (*FrontierHomeMedical.com*) to learn more about Parachute and get started with electronic ordering.

COVERAGE CRITERIA FOR MATERNITY BELTS

Maternity belts may be covered by insurances with a qualifying order.

STANDARD WRITTEN ORDER: A valid order must be obtained prior to delivery of a maternity belt.

SIZING: Maternity belts are sizes based on the patient's dress size prior to pregnancy.

Small (2-6) **Medium** (6-14) **Large** (16-20)

FAX PRESCRIPTION & FACE-TO-FACE NOTES TO THE LOCAL FRONTIER BRANCH.

If you have any questions or concerns, please contact Frontier Home Medical. Thank you for your cooperation!

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