

FAQs: Your Moda Health **Lactation Benefits**

Healthcare can be confusing. We're here to help you get the most out of your benefits for breastfeeding and lactation support.

Are breast pumps covered in my plan?

Yes, non-hospital grade breast pumps are covered in your Moda Health plan and no prior authorization or prescription is required. You can purchase a breast pump before or after you give birth.

Where can I purchase a breast pump?

There are three ways you can purchase a breast pump: At a retailer (e.g., Target, Amazon); directly from the supplier (e.g., Medela, Ameda, Lansinoh), or from a preferred durable medical equipment (DME) provider. To confirm that a DME provider is in network, call the customer service number on the back of your member card.

What if I need a hospital-grade breast pump?

In some cases, your doctor may recommend a hospital grade breast pump. This may be covered by your plan if it is medically necessary and your doctor has provided prior authorization. To confirm your benefits, call the customer service number on the back of your member card.

Does my plan cover the supplies?

Milk storage bags are covered in your Moda Health plan. Some plans also cover extra ice packs and coolers. To confirm your benefits, call the customer service number on the back of your member card.

Is breastfeeding support and lactation counseling covered?

Yes! Breastfeeding support and lactation counseling are covered when you are pregnant or breastfeeding. You'll get the most out of your benefits if you choose an in-network provider for breastfeeding support and counseling. If your preferred provider is out of network, call the customer service number on the back of your member card and we'll help you confirm what is covered.

How do I get reimbursed?

Download the claim [reimbursement form](#) and fill out boxes 1 through 12. (Note: If you purchased a breast pump through an out-of-network DME provider, you will need to get additional information so that we can process your reimbursement. Request the HCPC and ICD-10 diagnosis codes from the DME provider and include them with your submission.)

Submit the completed reimbursement form and your receipt/proof of purchase through your [Member Dashboard](#) or mail to:

Moda Health Plans
Po Box 40384
Portland, OR 97240

You typically have 12 months from the date of service to submit for reimbursement. Claims are typically processed within 30 days of receipt. Please note that shipping and handling costs are not reimbursable.

All benefits are subject to eligibility and specific plan limitations. This summary is provided for general informational purposes only. Members should consult their plan handbook for specific plan benefits.