

## QUESTIONS TO ASK YOUR PRIVATE INSURANCE COMPANY



Does my insurance plan cover Women's Preventive Services under the Affordable Care Act (ACA)?

**If YES:**

Do I have benefits under my **MEDICAL DME (durable medical equipment)** coverage for a breast pump? YES      NO

- Is MilkWorks (Tax ID #470835579) **IN NETWORK** for breast pumps? YES      NO
- If **OUT OF NETWORK**, is there any DME (Durable Medical Equipment) or **PREVENTIVE** coverage for a pump obtained at MilkWorks? \_\_\_\_\_
- Is there a time frame for when I may obtain a pump? \_\_\_\_\_
- Do I have coverage for a Personal Use Pump (CPT code E0603, Diagnosis Code Z39.1)? YES      NO
- Is this coverage subject to any deductibles, copays, or coinsurance? YES      NO
- Are there other details I need to know about my coverage? \_\_\_\_\_
- Where may I obtain a breast pump if I am unable to use MilkWorks? \_\_\_\_\_

Does my plan cover breastfeeding consultations by an **IBCLC (International Board Certified Lactation Consultant)**? \_\_\_\_\_

*Procedure Codes for consultations include 99404 or 99245 using Diagnosis Code Z39.1*

*All our providers are in network with the same plans.*

- If yes, are there any restrictions (i.e. # of visits allowed)? \_\_\_\_\_
- If my provider is out of network, does my plan cover lactation services for out of network providers differently? YES      NO

Does my plan cover charges by **Kathryn Leeper, MD; Michelle Lingenfelter, APRN; or Karnyta White, APRN**? \_\_\_\_\_

*CPT Code most used = 99205-33 for mother*

- **Will there be a copay, deductible, or coinsurance?** \_\_\_\_\_

Are there any other benefits or restrictions related to breastfeeding support under my plan?  
\_\_\_\_\_