

## Breast Pump Reimbursement FAQ – Salem Health

### What is a breast pump?

A breast pump is a mechanical device that extracts milk from the breasts. Breast pumps may be manual devices powered by hand or foot movements or electrical devices powered by electricity or batteries.

### What will the Plan cover?

The Plan will cover the purchase or rental charge (not to exceed the purchase price) for a breast pump and equipment. Charges for extra ice packs, bottles or coolers are not covered. The Plan will reimburse you 100% of the provider's contracted rate or if purchased from a retail outlet 100% of the maximum plan allowable (which is typically around \$300).

### What type of breast pump is covered?

Both manual and electric breast pumps are covered. Hospital grade pumps are covered when medically necessary.

### How often can I purchase a breast pump?

You are eligible for a breast pump once per pregnancy.

### Where can I purchase a breast pump?

You can purchase a breast pump directly from a retailer, for example, Amazon or Target. Some providers will sell them as well.

### If a purchase a breast pump from a retailer, how do I get reimbursed?

You will need to fill out a claim form and attach the receipt as documentation. The receipt will need to clearly show the type of breast pump, the date of service and the purchase price.

### Where can I locate a claim form?

You can locate the medical claim form at the following link: [Moda Health – Medical Claim Form](#)

### What fields do I need to fill out on the claim form?

In order for Moda to identify who you are and what you are submitting reimbursement for, please be sure to include the following:

1. Check 'Group Health Plan' box
  - 1a. Insured's ID Number – subscriber ID number as shown on your subscriber ID card
2. Patient's name

3. Patient's birthdate
4. Insured's name – this is the subscriber on the policy
5. Patient's address and phone number
6. Patient's relationship to insured
7. Insured's address and phone number
8. N/A
9. Other insured's name – if you have dual coverage, fill out 9a and 9d. If not, skip to 11
10. N/A
11. Insured's policy group number (10001832), then fill in 11a – 11d
12. Signature and date
13. Leave blank
- 14-33. These fields should be captured on the itemized invoice

**Please make a copy of the itemized receipt and include the copy with your claim form and keep the original documents for your records.**

### **How do I submit the claim form?**

You can submit your claim reimbursement form and copy of your itemized receipt via mail, email or fax.

Moda Health  
PO Box 40384  
Portland, Oregon 97240

Email: [medical@modahealth.com](mailto:medical@modahealth.com)

Fax: (855) 522-9810

### **How long will it take before I receive my reimbursement?**

Manual claims are typically processed within 30-45 days.

### **Questions?**

We're here to help. Please contact customer service at 855-425-4543 and a Moda customer service representative will walk you through the process over the phone.