

Women's Preventive Care Services: Breast-feeding Support and Supplies

As a company dedicated to helping people to live healthier lives, UnitedHealthcare encourages our members to receive preventive care services. Under the health reform law, non-grandfathered health plans are required to cover women's preventive care services such as breast-feeding counseling and supplies, well-woman visits and Food and Drug Administration (FDA)-approved contraception without cost-sharing (copayment, coinsurance or a deductible) as long as they are received in the health plan's network.

Under the health reform law, pregnant and postpartum women will have access to comprehensive lactation support and counseling as well as breast-feeding equipment, in conjunction with each birth, without cost-sharing (copayment, coinsurance or deductible).

Breast-feeding services and equipment are covered without cost-sharing when received by a network provider, during pregnancy and/or in the postpartum period, starting on the plan's first renewal date on or after Aug. 1, 2012.

UnitedHealthcare's Approach

UnitedHealthcare believes most members prefer to purchase a more portable and convenient electric breast pump rather than rent hospital-grade equipment (heavy-duty breast pumps designed for multiple users). Effective Jan. 1, 2014, UnitedHealthcare covers the purchase of personal, double-electric breast pumps. Here's why:

- In February 2013, the Health Resources and Services Administration (HRSA) guidelines related to breast-feeding support were clarified to indicate that plans may cover the costs of purchasing, instead of renting, breast-feeding equipment without cost-share.
- Studies show that due to the variability in breast pumps, high-quality, personal use double-electric breast pumps are as effective as, or potentially even more effective than, hospital-grade pumps in outpatient settings.¹
- Because a double-electric breast pump is portable and more convenient to use, we believe it provides a better experience for the mother and helps encourage breast-feeding. Breast-feeding may have many benefits for the baby and may help reduce a child's risk of respiratory diseases and food intolerances.

How Members Obtain a Breast Pump

Members may purchase breast pumps without cost-share by contacting a network doctor or approved breast pump supplier up to 30 days before their delivery date or 365 days after their delivery date.

- For a list of breast pump suppliers, members call the number on their health plan ID card.

To obtain a breast pump, members contact a network doctor or approved breast pump supplier up to 30 days before their delivery date or 365 days after their delivery date.

- If contacting the breast pump supplier directly, members may be asked for their doctor's contact information, the baby's due date or the date the baby was delivered. The breast pump supplier may verify this and other information with the member's doctor before the breast pump is issued.
- National breast pump suppliers issue the breast pump directly to the mother.
- The doctor or breast pump supplier will bill UnitedHealthcare directly for reimbursement.
- Members do not need to obtain a prescription when contacting an approved breast pump supplier.
- Members will not be reimbursed for breast pumps purchased at retail stores.

Lactation Support and Counseling

Under the health reform law, lactation support and counseling are covered without cost-share when performed by a network provider. UnitedHealthcare covers lactation support and counseling without cost-share when performed by a network physician or health care professionals and billed according to our **Preventive Care Services Coverage Determination Guideline** (CDG). Various network clinics and other providers, including many OB/GYNs and pediatricians, may provide lactation support and counseling. The health reform law does not require services outside of our network to be covered without cost-share.

Out-of-Network Services May Have Cost-Sharing

As with other preventive care services, if a member's plan covers out-of-network preventive care services, then a breast pump received from an out-of-network doctor or supplier would also be covered and cost-sharing may apply. An out-of-network supplier is a DME supplier, not a retail store. Under the health reform law, only breast pumps received from a network provider or supplier are covered at 100 percent.

If a plan does not cover out-of-network preventive services, then out-of-network preventive services (including breast pumps rented or purchased out of network) will not be covered.

For More Information

Consult your UnitedHealthcare representative if you have questions about breast-feeding supplies and counseling or other preventive care services. Visit the United for Reform Resource Center at uhc.com/reform and click the preventive services provision for the latest health reform news. Information about what preventive services must be covered under the health reform law is found at HealthCare.gov.

¹*Methods of milk expression for lactating women* review by The Cochrane Collaboration, published in *The Cochrane Library*, 2011, Issue 12.

The content provided is for informational purposes only and does not constitute medical advice. Decisions about medical care should be made by the doctor and patient. Always refer to the plan documents for specific benefit coverage and limitations or call the toll-free member phone number on the back of the ID card.

Insurance coverage provided by or through UnitedHealthcare Insurance Company or its affiliates. Administrative services provided by United HealthCare Services, Inc., or its affiliates.

This communication is not intended, nor should it be construed, as legal or tax advice. Please contact a competent legal or tax professional for legal advice, tax treatment and restrictions. Federal and state laws and regulations are subject to change.

