HOSPITAL GRADE ELECTRIC BREAST PUMP

Corporate Medical Policy

File name: Hospital Grade Electric Breast Pump
File code: UM.DME.06
Origination: 4/2005
Last Review: 07/2012
Next Review: 06/2013
Effective Date: 08/01/2012

Document Precedence

BCBSVT Medical Policies are developed to provide guidance for members and providers regarding coverage in accordance with all terms, conditions and limitations of the subscriber contract. Benefit determinations are based in all cases on the applicable contract language. To the extent that there may be any conflict between Medical Policy and contract language, the contract language takes precedence.

Medical Policy

Description

Breast pumps are used to remove breast milk when babies are not able to nurse directly from the breast or are not efficiently removing milk. A hospital-grade rental pump is the most effective pump, especially when used with a double pump kit, which allows for pumping of both breasts at once. For a mother whose baby is not breastfeeding, this type of pump is recommended to establish milk supply.

Breast feeding has many health benefits to mother and baby and will reduce overall health care costs. It is widely accepted by pediatricians and parents that breast milk is the gold standard for infant nutrition. Breastfed babies have fewer ear and respiratory infections, allergies, gastro-intestinal diseases, SIDS, lymphoma and Type 1 Diabetes. Mothers who breastfeed have quicker return to pre-pregnancy uterine size with less bleeding, decreased risk of breast and ovarian cancer and osteoporosis.

Policy

Hospital grade electric breast pump rental is considered medically necessary when one of the following conditions is met:

- When the infant is premature at 24-34 weeks of gestation, and the mother is pumping breast milk, awaiting the baby’s ability to nurse directly from the breast, or
- When the infant is premature at 35-37 weeks of gestation and continues to experience difficulty coordinating suck and swallow, and the mother is pumping breast milk, awaiting the baby’s ability to nurse directly from the breast, or
- For infants with cleft lip and/or palate who are not able to nurse directly from the breast, or
• For infants with cardiac anomalies or any medical condition that makes them unable to sustain breast feeding due to poor coordination of suck and swallow or fatigue, or

• For multiples (including twins), until breast-feeding at the breast is established consistently, or

• When the mother has an anatomical breast problem, which may resolve with the use of breast pump, such as inverted nipples or mastitis, or

• For any infants for medical reasons who are temporarily unable to nurse directly from the breast, such as NICU babies, or during any hospitalization of the mother or baby which will interrupt nursing, or

• When the infant has poor weight gain related to milk production and pumping breast milk is an intervention in the provider’s plan of care and infant has a documented weight loss of 7% or greater despite use of conventional breast pump.

A hospital grade breast pump is not medically necessary when the above criteria are not met or when it is requested solely to allow for the mother’s return to work or mother’s or family convenience.

Administrative and Contractual Guidance

Benefit Determination Guidance

Benefits are subject to all terms, limitations and conditions of the subscriber contract.

Prior approval is required subject to all terms, limitations and conditions of the subscriber contract.
For New England Health Plan (NEHP) members an approved referral authorization is required.

Federal Employee Program (FEP) members may have different benefits that apply. For further information please contact FEP customer service or refer to the FEP Service Plan Brochure.

Eligible Providers

DME providers (participating or network only)*

* If the pump and collection kit is not available via a participating DME provider, then the member may rent the pump through their local hospital or lactation consultant.

Related Policies

Durable Medical Equipment (DME)

Policy Implementation/Update information

New policy 04/2005
Revised 4/2006 verbiage changes only
Scientific Background and Reference Resources

Research has demonstrated the significant nutritional, developmental, psychological, immunologic, social, economic and environmental benefits of breastfeeding. (American Academy of Pediatrics, 1997) Epidemiological research has provided evidence specifically related to infant health that breastfeeding may; a.) decrease the incidence or severity or both of several conditions, including diarrhea (Beaudry, Dufour, & Marcoux, 1995), respiratory infection (Wilson et al., 1998), asthma (Oddy et al., 1999) and otitis media (Sciariati, Grummer-Strawn, & Fein, 1997), b.) protect against sudden infant death syndrome (Ford et al., 1993), insulin-dependent diabetes mellitus (Gimeno & de Souza, 1997), Crohn’s disease (Koletzko, Griffith, Corey, Smith & Sherman, 1991), lymphoma (Shu et al., 1995), and leukemia (Shu et al., 1999) and c.) enhance cognitive development (Anderson, Johnstone, & Remley, 1999) and neurodevelopment (Vestergaard et al., 1999).

Similar studies have shown the maternal health benefits of breastfeeding, such as a.) decreased postpartum bleeding and more rapid uterine involution (Chua, Arulkumaran, Lim, Selamat, & Ratman, 1994), b.) an earlier return to pre-pregnant weight (Dewey, Heinig, & Nommsen, 1993), c.) delayed resumption of ovulation resulting in increased child spacing (Kennedy & Visness, 1992) and d.) a possibly reduced risk of ovarian cancer (Siskind, Green, Bain & Purdie, 1997) and breast cancer (Newcomb et al., 1994). [JOGNN, “Breastfeeding Initiation and Duration: A 1990-2000 Literature Review”, Vol 31, Number 1, p. 13]
Attachment I
Code List

<table>
<thead>
<tr>
<th>Code Type</th>
<th>Number</th>
<th>Brief Description</th>
<th>Policy Instructions</th>
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<tbody>
<tr>
<td>HCPCS</td>
<td>A4281-A4286</td>
<td>Accessories, Breast pump</td>
<td></td>
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<tr>
<td>HCPCS</td>
<td>E0604</td>
<td>Breast Pump, Hospital Grade, electric (AC and/or DC), any type.</td>
<td>PA required</td>
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</tbody>
</table>

The following codes will be considered as medically necessary when applicable criteria have been met.