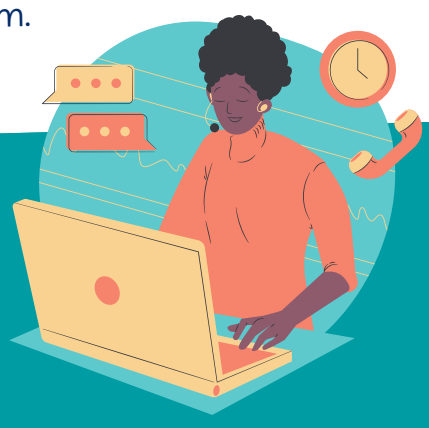
4 STEPS FOR GETTING A *Breast Pump* THROUGH INSURANCE

Thanks to the Affordable Care Act, most insurance companies are now required by law to provide a breast pump for free for all new moms. However, *which* pumps they cover all vary depending on your insurance provider and your particular plan. If your insurance does cover a breast pump, you can sometimes buy a pump yourself and submit it for reimbursement (which may be a hassle), or more easily, you can purchase it through a medical equipment company. **Here are the 4 steps you need to take:**

1 CONTACT A MEDICAL EQUIPMENT COMPANY

Find a medical equipment company and fill out their online form or call them to tell them what insurance plan you have. They'll check your benefits to find what your insurance's allowed amount is for the breast pump and give you a list of which brands and models of pumps you can choose from.



2 RESEARCH BREAST PUMPS

Once you have your list of choices, research each pump to decide which one fits your lifestyle best. Will you be transporting your pump to and from work? If so, you may want one with a rechargeable battery. Or, maybe the number of parts you'll have to clean is a factor for you.

3 GET A PRESCRIPTION

Ask your doctor to write a prescription for a breast pump that includes the doctor's name and signature, your name, the date, the request for a breast pump and diagnosis code. Prescriptions can be written up to one year after you've given birth. Email or fax it to your medical supply company.

4 GET YOUR BREAST PUMP

Once you give your insurance information and prescription to the medical equipment company, they will send out your pump right to your door. They will typically send your pump about 30 days before your due date.

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