July 31, 2019

ATTENTION: Medicaid Providers

FROM: South Dakota Medicaid

RE: Breast Pump Coverage

As of July 1, 2019, South Dakota Medicaid covers Manual (E0602) and electric (E0603) breast pumps when ordered by a physician, physician assistant, nurse practitioner, or certified nurse midwife for any lactating mother wishing to nurse her newborn. The breast pumps should be used to promote lactation and to provide lactation support when natural feeding is not possible. These items are available for purchase only and do not require prior authorization.

Breast pumps are covered under the child’s Medicaid coverage. Coverage is limited to one manual breast pump per year, per family or one electric breast pump per family every 3 years.

If a hospital grade electric breast pump is needed for more than 1 month, a prior authorization request must be submitted to South Dakota Medicaid.

Breast Pump Quick Answers

1. Are the manual pumps (E0602) and electric breast pumps (E0603) a rental or purchase?

Both the manual pumps and electric breast pumps are a purchase, as indicated on our DMEPOS fee schedule.

2. Can a breast pump be acquired prior to delivery?

No, breast pumps are required to be billed under the infant’s Medicaid ID number, so the date of service cannot precede the infant’s date of birth.

3. Does the provider need to complete a CMN along with a prescription?

Yes, all DME prescriptions require a CMN to be completed and maintained in the recipient’s records. The DME provider may use the South Dakota Medicaid CMN.
or their own CMN as long as it meets South Dakota Medicaid’s CMN requirements as stated in SD Administrative Rule

4. Can an infant in the NICU be prescribed a hospital grade breast pump (E0604)?

Yes, South Dakota Medicaid will cover a hospital grade electric breast pump for one month. If the prescribing medical provider feels it is medically necessary for additional month(s), the medical provider or DME provider must complete a prior authorization.

5. When a recipient no longer needs a hospital grade electric breast pump (E0604), can the recipient be prescribed an electric breast pump (E0603)?

Yes, the recipient is eligible for a medically necessary manual or electric breast pump.

6. If the electric breast pump comes with a battery back-up, will South Dakota Medicaid pay for the battery separately?

The battery is not separately reimbursable through SD Medicaid. Payment by South Dakota Medicaid is considered payment in full.

7. We have an order from a medical provider for an electric breast pump for a newborn. How do we bill SD Medicaid?

Infants born to mothers who are on South Dakota Medicaid during their pregnancy are eligible for automatic newborn coverage for the first year of life. The mother must contact DSS once she has given birth and the infant will be added to South Dakota Medicaid. It typically takes 7-10 business days to receive the infant’s Medicaid ID card.

8. Can the mother’s medical provider prescribe a hospital grade electric breast pump even though it is billed under the infant’s South Dakota Medicaid ID number?

Yes, the mother’s medical provider may prescribe a hospital grade electric breast pump for the infant.

9. Can I bill a recipient for noncovered breast pump accessories?

Yes, recipients can be billed for noncovered breast pump accessories that are not integral to the breast pump. Providers should inform the recipient that the accessory is not covered prior to providing the item and inform the recipient that they will be responsible for payment if they choose to receive the accessory.