



Purchase a breast pump for your comfort and convenience

You'll want a pump that is appropriate to your particular situation. Speak with your OB provider or a lactation consultant for the very best recommendations.

Using your insurance coverage

PacificSource covers breast pumps for members. Your coverage amount may vary—please check your policy, or give us a call to verify your specific benefit. Also, please note:

- Any type or brand of pump is allowed except “hospital-grade.”
- Extras such as battery packs, chargers, extra flanges, tubing, along with shipping and handling fees will not be covered.
- You may purchase a breast pump from your doctor, local hospital, a medical equipment store, retail store (such as Target), or online retailer (such as Amazon.com).
- Pumps purchased on auction websites such as Craigslist or eBay, from a resale outlet, or from another person are not covered.

For questions about the [PacificSource Prenatal Program](#), feel free to call **888-987-5805**.

Here's how to get your pump

- Doctors, hospitals, and medical equipment stores that are contracted with us (participating providers) can submit a claim directly to us on your behalf. Be sure to present your PacificSource member ID card. It contains the information needed to submit the claim.
- Or you can pay for the pump yourself and request reimbursement from us.

Some medical equipment stores require a prescription from your OB care provider. You can call your local store to ask if you will need a prescription.

To request reimbursement, simply fill out the information on the back of this flier. Then mail or email a copy to our Claims Department. Be sure to keep the original for your records.

A reimbursement check will be **printed on the explanation of benefits (EOB) statement. Please note that it will be issued to the subscriber of the policy.** Be sure to check all pages of your EOB.

Questions?

Email

CS@PacificSource.com

Phone

888-977-9299

TTY: 711

We accept all relay calls.

[PacificSource.com](https://www.pacificsource.com)



Prenatal breast pump reimbursement form

You'll need an itemized receipt or statement to receive reimbursement. Please attach a copy of your payment receipt and mail this filled-in form to: **PacificSource Health Plans, attn: Claims Department, PO Box 7068, Springfield, OR 97475.** You can also send an email to ClaimsMailSort@PacificSource.com.

Member information

Member name _____ PacificSource ID _____
Date of birth _____ Group number _____ Group ID _____
Home phone _____ Email _____
Mailing address _____

Provider information

Provider name _____
Provider address _____
Provider phone _____
Provider tax ID number _____ Provider NPI number _____

Purchase information

Date of purchase _____ Amount paid _____
Type of breast pump purchased _____
Where pump was purchased _____