

## Breastfeeding Benefits

Please read this completely so you know what to expect and what is covered.

- **Breast feeding/lactation support and counseling** is covered after the birth of the child while at the hospital or as part of the office visits that occur after the child's birth. Additional lactation consultation can be claimed under your flexible spending plan. Lactation consultants can help you make the best use of your pump or recommend what type might work best for you. Resources for that are here: <http://benefits.mt.gov/Live-Life-Well/Wellness-Programs/Breast-Feeding>.
- **Purchase or rental of 1 breast pump** is covered one time per birth event up to the \$450 limit.
- **Breastfeeding supplies** are covered as listed below:

### Covered Breastfeeding Supplies

- Tubing for breast pump, replacement
- Cap for breast pump bottle, replacement
- Breast shield and splash protector for use with breast pump, replacement
- Polycarbonate bottle for use with breast pump, replacement
- Locking ring for breast pump, replacement
- Breast pump, manual, any type
- Breast pump, electric (AC and/or DC), any type
- Breast pump, hospital grade, electric (AC and/or DC), any type
- Storage bags
- Carrying Case
- Cleaning wipes, cleaning bags, sterilization kit only
- Creams, ointments, and other products that relieve breasts or nipples
- Storage bottles, advise 10-12 bottles
- Breast pads

### Not-covered Breastfeeding Supplies\*

- Scales
- Batteries, battery-powered adaptors, and battery packs\*
- Adapter for breast pump, Electrical power adapters for travel, power adapters, replacement\*
- Bottles which are not specific to breast pump operation including the associated bottle nipples, caps and lids\*
- Ice-packs, labels, labeling lids, and other similar products\*
- Garments for convenience and or travel bags, and other similar travel or carrying accessories
- Nursing bras
- Breast pump cleaning supplies (except those outlined in what's covered)

\*Some items are covered if they come bundled by the manufacturer with the breast pump and are under the \$450 maximum coverage for a breast pump per birth event. They cannot be reimbursed if purchased as separate items.

### To Get a Breast Pump:

1. You must be under the supervision of a doctor for pregnancy in order to submit a claim.
2. **Consult with your provider or a lactation consultant about what type of pump to order.** Be sure to research your product and investigate any warranty from the manufacturer. **The State of Montana Health Plan will not reimburse more than one pump per birth event, even if it turns out to be defective or faulty.**
3. Submit a receipt from the store/doctor's office/etc. The receipt must clearly state what was purchased and how much you paid for it.

4. Submit your receipt to Allegiance via postal mail at PO Box 3018 Missoula, MT 59806, or using the claims submission tool on allegiance's web site:  
<https://www.askallegiance.com/OnlineServices/Claim/Health>.
5. Specify it is a claim for a breast pump/supplies, include your full name and contact information, member number from your Allegiance card, and attach the receipt.
6. Allow 30 days for the claim to be processed and the reimbursement to be issued.
7. This same process applies if you'd like to claim reimbursement for other covered breastfeeding supplies. Covered breastfeeding supplies are covered as needed and in addition to the amount reimbursed for the breast pump.

**For any additional questions, please contact Allegiance at (855) 999-1057 or the Health Care and Benefits Division at (800) 287-8266 or [benefitsquestions@mt.gov](mailto:benefitsquestions@mt.gov).**

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