

# **PURCHASING A BREAST PUMP**

#### ACCESS YOUR INSURANCE BENEFIT FOR AFFORDABLE CHOICES

As you are prepare to begin your breastfeeding journey, it's important to have the right equipment. Ridgeview Home Medical Equipment in Waconia offers breast pumps which are commonly covered by many health insurance plans.

In most cases, using your insurance to purchase a breast pump maximizes your insurance benefit and results in the lowest out-of-pocket cost. Why pay out-of-pocket or cash for a pump your insurance will cover? Our staff will help you navigate the best solution.

Please call 952.442.2283 to discuss any insurance exclusions or to review your benefits. Breast pumps are subject to deductible and/or coinsurance depending upon the benefit plan.

#### **SELECTING YOUR PUMP**

An order form can be found on the back of this flyer. Please bring this with you to your next OB visit, as your provider will need to complete it for insurance coverage. This allows us to process your order and bill your insurance so that your breast pump can be ready for you as you approach your delivery date. The completed form can be faxed directly to our office at 952.241.1342, or scanned and emailed to hme@ridgeviewmedical.org, or simply dropped off at our Waconia showroom.

#### **DELIVERY OPTIONS**

### Ship Direct to Home or Convenient Store Pick Up in Waconia

Once you have purchased your breast pump, you can choose to have it shipped directly to your home or picked up from our Waconia showroom as you prepare for the birth of your child. Our showroom is open Monday – Friday, 8:30 a.m. to 5 p.m.

### **Birthing Center Delivery**

If you are delivering your baby at Ridgeview's Birthing Center in Waconia, you can also choose to wait and have your breast pump delivered directly to your room prior to discharge. Please discuss any questions about this option with our staff.

# **BREAST PUMP OPTIONS**

## Medela Pump In Style ® With Max Flow<sup>TM</sup>



Spectra S1 Plus



Spectra S2



Freestyle Flex<sup>TM</sup> Double Electric Breast Pump



NOTE: Make and model may require an upcharge at time of pick up that is not covered by your insurance. Please call customer service to discuss details.

# **BREAST PUMP PRESCRIPTION FORM**

To bill insurance, please ask your OB provider to complete this form and fax it to 952.241.1342, or scan and email to hme@ridgeviewmedical.org, or you can stop by our showroom.

| Patient Name:                                     |   |
|---|---|
| DOB:  |   |
| DX: Z39.1 – Lactation<br>Length Needed: 12 Months | Order: Standard Double Electric Breast Pump |
| Provider (Printed Name)                           | Provider NPI                                |
| Provider Signature                                | Date  |



501 S. Maple Street, Waconia, MN 55387 Monday – Friday, 8:30 a.m. to 5 p.m. Prescription Email: hme@ridgeviewmedical.org Customer Service: 952.442.2283

Fax: 952.241.1342