

interChange Provider Important Message

Attention: Durable Medical Equipment (DME) Providers

Billing of Non-Hospital Grade Breast Pumps (Updated April 21, 2020)

DXC Technology would like to remind providers that, in contrast to the hospital grade breast pumps billed under procedure code E0604 and covered upon the mother's discharge from the hospital, non-hospital grade breast pumps billed under procedure codes E0602 and E0603 are covered prior to the labor and delivery and can be billed before the inpatient admission takes place, **but not prior to the member's 3rd trimester.**

As a reminder, Connecticut Medical Assistance Program (CMAP) beneficiaries are eligible for a breast pump every 24 months. Medical Equipment, Devices and Supplies (MEDS) providers must verify that no other supplier has submitted a claim for a pump for the member in the previous 24 months by logging into their secure Web portal account from the www.ctdssmap.com Web site and selecting Claims > Claim History for Specific Services > DME-Rent to Purchase.

Inquiry Type*	DME - Rent to Purchase
Procedure	E0603
Date of Service*	04/06/2020

Benefit History						
Date of Service	Procedure	Mod 1	Mod 2	Mod 3	Mod 4	Diagnosis
04/04/2020	E0603 - Electric breast p	NU				Z391 - Encounter for care and examination of lactating mother