

Under the health reform law, non-grandfathered health plans are required to cover women's preventive care services, without cost-sharing (copayment, coinsurance or deductible) as long as they are received in the health plan's network.

How to obtain a breast pump.

As a member of UnitedHealthcare, you may purchase a personal electric breast pump by contacting a participating doctor or approved breast pump supplier up to 30 days before your delivery date or 365 days after your delivery date.

- For a list of participating breast pump suppliers, call the toll-free phone number on your health plan ID card. TTY users can dial 711 or go to myuhc.com® for a list of network suppliers.
- A breast pump will be sent directly to you.
- The doctor or breast pump supplier will bill us directly for reimbursement.
- · No prescription is needed when contacting an approved breast pump supplier.

Limitations/requirements.

- The benefit is limited to 1 breast pump per birth.
- For a birth with multiple babies, only 1 breast pump is covered.
- Breast pumps purchased at retail stores are not eligible for reimbursement.
- Under the health reform law, only breast pumps received from a participating provider or supplier are covered at 100 percent.
- · A nonparticipating supplier is a Durable Medical Equipment (DME) supplier, not a retail store.

If a plan does not cover out-of-network preventive services, then out-of-network preventive services including breast pumps rented or purchased out-of-network will not be covered.

Lactation support and counseling.

Lactation support and counseling are covered without cost-share when performed by a participating doctor or health care professional and billed according to our Preventive Care Services Coverage Determination Guideline. Various participating clinics and other providers, including many OB/GYNs and pediatricians, may provide lactation support and counseling. The health reform law does not require services outside of our network to be covered without cost-share.



Certain preventive care services are provided as specified by the Patient Protection and Affordable Care Act (ACA), with no cost-sharing to you. These services are based on your age and other health factors. UnitedHealthcare also covers other routine services that may require a copay, coinsurance or deductible.

The content provided in this document is for informational purposes only and does not constitute medical advice. Decisions about medical care should be made by the doctor and patient. Please discuss with your doctor how the information provided is right for you. Always refer to the plan documents for specific benefit coverage and limitations or call the toll-free member phone number on your health plan ID card.

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