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**#14-122**

**TO:** WIC Regional Directors  
WIC Local Agency Directors

**FROM:** Amanda Hovis, Director  
Nutrition Education/Clinic Services Unit  
Nutrition Services Section

**DATE:** **October 10, 2014**

**SUBJECT:** Urgent Breast Pump Notification

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The state agency has received several emails and phone calls from hospital staff who have been told that WIC clinics are no longer issuing breast pumps. As a reminder, **local agencies should continue issuing pumps to participants who call or present in the WIC clinic needing a pump, and have not already received one from their health plan for any reason (e.g. plan denied pump, didn't call plan, don't have health insurance, have Tricare health insurance) OR if they received a pump that is not meeting their needs.** WIC staff should use the attached *So Your Client Needs a Breast Pump* flow chart (Stock # 13-06-14424) to screen and assess the needs of postpartum participants, and issue a WIC pump according to WIC pump policies **without delay.**

Also attached is a summary of the *Changes to the WIC Breast Pump Program: What Hospital Staff Need to Know*. Please take this document to the hospitals in your area and discuss the changes with them. Point out to them the action step at the bottom of the flier, and ask the hospital staff questions to make sure that they are thinking about the process and how it will work best in their hospitals.

Questions to ask could be:

- What can hospital staff do to ensure a mom gets a pump when she needs one?
- Who will be responsible for arranging for moms who require breast pumps after delivery?
- Who will be responsible for training mom on how to use the pump?

If you have any questions, please contact Faith Njoroge at [Faith.Njoroge@dshs.state.tx.us](mailto:Faith.Njoroge@dshs.state.tx.us) or 512-341-4575.

# SO YOUR CLIENT NEEDS A BREAST PUMP?



Is she pregnant?



Is she postpartum?

Does mom have a private HCP, Medicaid, or CHIP?

YES

NO

Provide BP flier, stock #EF13-06-14212, AND refer to HCP for step-by-step process

Educate on WIC BP issuance

Has mom received a BP from her HCP?

YES

NO

Assess immediate pumping needs AND issue WIC BP as per BF policies.

Is the BP appropriate?  
Is the BP meeting needs?  
Is the BP comfortable to use?

YES

IF NO to any of these questions, troubleshoot BP with mom. If unable to resolve concerns, assess immediate pumping needs AND issue BP per BF policies.

BREAST PUMP (BP)  
HEALTH CARE PLAN (HCP)  
BREASTFEEDING (BF)

CONTINUE TO PROVIDE BREASTFEEDING SUPPORT AS NEEDED

## **Changes to the WIC Breast Pump Program: What Hospital Staff Need to Know**

Most private health plans and all Medicaid and CHIP plans now cover breast pumps. Some plans offer additional breastfeeding support services such as breastfeeding consultations. Breast pumps are a covered benefit through Medicaid and CHIP and can be issued to both mothers and babies. If the mother's eligibility has expired in Medicaid, the pump can be issued under the baby's coverage.

**Due to the availability of breast pumps through health plans, the WIC Program is now encouraging all pregnant participants to contact their health plans to ask about the process to obtain a breast pump and other breastfeeding support services through their plan.**

Exception: WIC participants who are enrolled in a Tricare health plan or participants without insurance should still receive breast pumps from WIC. Tricare, the health plan for U.S. military, is the only major health plan that does not cover breastfeeding services.

Since this process is fairly new, there is little consistency among the different health plans regarding breast pump specifications and issuance recommendations and guidelines. Therefore, the WIC Program will continue to bridge the gaps in service by providing pumps to moms:

- Who are unable to get pumps from their health plans or are uninsured,
- Who did not attempt to get a pump from their plan because they were unaware of the benefit,
- Who received a pump from their health plan but the pump is not meeting their needs.

**What can hospital staff do to ensure a mom gets a pump when she needs one?**

**If you have a patient who you know will need a breast pump after she has been discharged, encourage the patient to call her health plan to inquire about how to get a pump immediately.** For many plans, the member may require a physician prescription and/or prior authorization for a breast pump. As a result, it may take a few days for the mom to get the pump. **Help the mom who needs a pump by asking her physician for a prescription and/or prior authorization, if needed.**