



Medicaid Transmittal Letter No. 3336-21-13

DATE: December 22, 2021

TO: Eligible Non-Institutional Medicaid Providers
Eligible Providers of Federally Qualified Health Center (FQHC), Rural Health Clinic (RHC), and Outpatient Health Facility (OHF) Services
Chief Executive Officers, Managed Care Plans
Directors, County Departments of Job and Family Services

FROM: Maureen M. Corcoran, Medicaid Director

SUBJECT: Coverage and Payment of Lactation Consulting Services and Lactation Pumps and Supplies

Coverage of Lactation Consulting Services and Lactation Pumps and Supplies

Ohio Administrative Code (OAC) rule 5160-8-42, “Lactation consulting services,” and rule 5160-10-25 “DMEPOS: lactation pumps.” set forth coverage and payment provisions for lactation consulting services and breast pumps and supplies. New rule 5160-8-42 establishes Medicaid payment for lactation consulting services when provided by physicians, physician assistants, advanced practice registered nurses, and registered nurses for breastfeeding education, support, and assistance with complex breastfeeding problems. Rule 5160-10-25 has been amended to loosen restrictions regarding the medical necessity for breast pumps and to add the coverage and payment criteria for breast pump supplies. Breastfeeding has been shown to be one of the most effective preventive measures mothers can take to protect their children’s health. Evidence shows that breastfeeding is a low-cost, preventive health strategy that can prevent or address many acute and chronic health issues for mother and baby. These services are intended to narrow Ohio’s racial disparity in infant and maternal deaths and lower Ohio’s overall infant mortality rate.

Payment of Lactation Consulting Services and Lactation Pumps and Supplies

OAC rule 5160-8-42 “Lactation consulting services,” outlines provisions governing coverage and payment for lactation consulting services. Lactation consulting services provide evidence-based breastfeeding education and support to nursing mothers, including but not limited to providing feeding assessments, implementing feeding plans, and providing encouragement and support to assist with successful breastfeeding. Lactation consulting services can be performed in an office/outpatient setting or in a patient’s home. Physicians, physician assistants and advanced practice registered nurses can render and bill lactation consulting services. Registered nurses who possess a current certification as an International Board-Certified Lactation Consultant (IBCLC) may render lactation services when billed by a supervising practitioner. Individuals may receive medically necessary lactation consulting services as needed within the twelve-

month post-partum period. Professional claims submitted for lactation consulting services are paid in accordance with Appendix DD of rule 5160-1-60.

For lactation consulting services provided in an outpatient hospital setting, the cost of providing these services is included in the calculation of the relative weights for other services provided on the same day. However, when lactation consulting is the only service performed S9443 will group to EAPG 428.

Lactation consulting services furnished by a federally qualified health center (FQHC) or rural health clinic (RHC) are paid under the Prospective Payment System (PPS). FQHCs and RHCs should submit claims for lactation consulting services under the PPS using T1015 with a U1 modifier along with the appropriate procedure codes. Payment is made at the FQHC's or RHC's pre-established per visit payment amount in accordance with Chapter 5160-28.

Claim Submission for Lactation Consulting Services		
Billing provider type	Providers of Professional Services	Providers of Outpatient Hospital Services
Claim type	» Professional (Submitted via MITS portal or EDI)	» Institutional (Submitted via MITS portal or EDI)
Procedure code	» 99211 » 99212 » 99213 » 99214 » 99215	» S9443 ○ Groups to EAPG 428 when billed alone
Modifier	» TH modifier as appropriate » TD modifier to indicate that a IBCLC certified registered nurse rendered the service	» No modifier is required
Diagnosis	Lactation related ICD-10 diagnosis code (see attached diagnosis list)	Lactation related ICD-10 diagnosis code (see attached diagnosis list)
Rendering Provider (MITS Provider Type)*	» Physician (MD/DO) (20) » Physician Assistant (24) » Advanced Practice Registered Nurses: » Clinical Nurse Specialist(65) » Certified Nurse Midwife(71) » Certified Nurse Practitioner(72)	» Physician (MD/DO) (20) » Physician Assistant (24) » Advanced Practice Registered Nurses: » Clinical Nurse Specialist (65) » Certified Nurse Midwife (71) » Certified Nurse Practitioner (72)

***Other Qualified practitioners may render this service when billed by an appropriate supervising practitioner.**

Appropriate billing codes and reimbursement rates for lactation pumps and covered supplies are available in the [CPT and HCPCS Level II procedure codes](#) fee schedule on the Medicaid website. Claims for lactation pumps and supplies should be submitted in accordance with OAC 5160-10-25.

The rule revisions to rule 5160-10-25 and the provisions of new rule 5160-8-42 take effect January 1, 2022.

Additional Information

Below is a list of the current diagnoses used for submission of claims for lactation consulting services.

Information about the services and programs of the Ohio Department of Medicaid may be accessed through the main webpage at <http://www.medicaid.ohio.gov>.

ODM's coordination of benefits regulations in OAC rule 5160-1-8 apply to MISIP services.

The Medicaid managed care organizations (MCOs) may have specific claim submission requirements that differ from the requirements for Medicaid fee-for-service claim submission through the MITS provider portal. Questions about MCO claim submission requirements should be directed to the MCOs.

Questions

Questions pertaining to this MAL may be directed to the Ohio Department of Medicaid.

Provider call center: (800) [686-1516](tel:686-1516)

E-mail address: noninstitutional_policy@medicaid.ohio.gov

Postal mail address: Bureau of Health Plan Policy

Non-Institutional Services

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Lactation Consulting - Lactation-Related Diagnoses

Diagnosis Code	Description
O91.111	Abscess of breast associated with pregnancy, first trimester
O91.112	Abscess of breast associated with pregnancy, second trimester
O91.113	Abscess of breast associated with pregnancy, third trimester
O91.119	Abscess of breast associated with pregnancy, unspecified trimester
O91.12	Abscess of breast associated with the puerperium
O91.13	Abscess of breast associated with lactation
O91.211	Nonpurulent mastitis associated with pregnancy, first trimester
O91.212	Nonpurulent mastitis associated with pregnancy, second trimester
O91.213	Nonpurulent mastitis associated with pregnancy, third trimester
O91.219	Nonpurulent mastitis associated with pregnancy, unspecified trimester
O91.22	Nonpurulent mastitis associated with the puerperium
O91.23	Nonpurulent mastitis associated with lactation
O92.011	Retracted nipple associated with pregnancy, first trimester
O92.012	Retracted nipple associated with pregnancy, second trimester
O92.013	Retracted nipple associated with pregnancy, third trimester
O92.019	Retracted nipple associated with pregnancy, unspecified trimester
O92.02	Retracted nipple associated with the puerperium
O92.03	Retracted nipple associated with lactation
O92.111	Cracked nipple associated with pregnancy, first trimester
O92.112	Cracked nipple associated with pregnancy, second trimester
O92.113	Cracked nipple associated with pregnancy, third trimester
O92.119	Cracked nipple associated with pregnancy, unspecified trimester
O92.12	Cracked nipple associated with the puerperium
O92.13	Cracked nipple associated with lactation
O92.20	Unspecified disorder of breast associated with pregnancy and the puerperium
O92.29	Other disorders of breast associated with pregnancy and the puerperium
O92.3	Agalactia
O92.4	Hypogalactia
O92.5	Suppressed lactation
O92.6	Galactorrhea
O92.70	Unspecified disorders of lactation
O92.79	Other disorders of lactation
Z39.0	Encounter for care and examination of mother immediately after delivery
Z39.1	Encounter for care and examination of lactating mother
Z39.2	Encounter for routine postpartum follow-up

Note: This list of diagnoses codes represents ODM's best efforts to provide the most accurate and current information. Because coding information may change annually, please refer to the current version of CPT®, ICD-10-CM, and HCPCS manuals.