

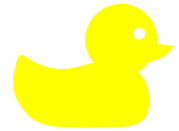
Patient Section

Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Insurance: \_\_\_\_\_ ID #: \_\_\_\_\_



Physician Section

Physician Name: \_\_\_\_\_ NPI: \_\_\_\_\_

Clinic Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip Code: \_\_\_\_\_



- E0603 Electric Breast Pump, AC/DC Any Type
- Breast Pump Parts and Accessories

Diagnosis Code

- Z39.1 Encounter for care and examination of lactating mother
- Other (Please Specify with ICD10) \_\_\_\_\_



Physician Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Patient Signature: \_\_\_\_\_ Date: \_\_\_\_\_



Brands We Carry



Rumble Tuff®



Serial Number: \_\_\_\_\_

Once everything above is filled out in its entirety, please bring this form and your insurance card to our office. We will let you choose your breast pump and leave with your it that day.



We are located at:

953 Main ST Suite 108

Nashville TN, 37206

Cutter Cares is in the same building with Star Physical Therapy, Body and Balance will be the name of the building.

If your pump or accessories malfunction, please call the manufacture to troubleshoot or replace the unit.

P:615-262-1123

F:615-262-1202



## What to Do Next

- Make sure both you and your doctor have completed the form and the doctor has signed the breast pump form OR you have a prescription from your doctor. (the patient information needs to be the mothers **UNLESS** there is something wrong with the baby and that's why the mother is needing the breast pump.)
- If you have a commercial insurance (anything other than TennCare Select, TennCare Bluecare, TennCare Amerigroup, or Tricare) Please call and make sure they will cover an Electric breast pump AND that Cutter Cares is an in-network provider for your plan.

*Please refer to our “What Should I ask my Insurance?” if you need to know what to ask when you call your insurance.*

- Bring the breast pump form or prescription and your insurance card to our office which is located at:

**953 Main ST, Suite 108  
Nashville, TN 37206**

**We are in the same building as Star Physical Therapy, Body and Balance is the name of the building. Our name is located at the bottom of the sign out front.**

- When you come into the office, we will go over your pump options(which is determined by your insurance). Let you pick what pump you want, and you **WILL** leave with your pump that day.



# Questions for Your Insurance Company.

When you call your insurance provider, below are the questions to ask in order to make sure you receive the proper pump covered by your plan.

- Does my policy cover the purchase of a breast pump for a nursing mother?
- What contracted medical supply companies can provide me with a breast pump? (Confirm Cutter Cares is in network with your plan, if we are not then they should tell you who is)
- Are there limitations on what types of pumps they cover – [manual vs. electric](#)?
- What is the value limitation – i.e., what is the maximum cost they will cover? (If they say at 100% and do not give you a specific amount, we can help you choose a pump in a price range for you)
- Do they cover other related supplies and accessories? Additional [milk bottles](#), flanges, replacement tubing, etc..?

***Cutter Cares does supply replacement parts for some of our breast pumps. Buying options are available for the accessories and related supplies***