



1751 Second Avenue, NY, NY 10128 | NPI 1346590973, TAX ID 263876331 PHONE: 855-879-8669, FAX: 855-291-5930

BREAST PUMP PRESCRIPTION REQUEST-Medical Necessity

Yummy Mummy has recently received a request to provide or has already provided one of your patients with a **E0603-Standard Double Electric Breast Pump** to assist her with breastfeeding. In order to process her insurance claim for this item, we have asked your patient to request that her OBGYN complete the information below (or the patient has authorized us to contact you for the information). **Please return this signed form with your printed name and NPI.** Thank you for your assistance.

- FAX (855-291-5930)
- or SECURE DOCUMENT UPLOAD AT YUMMYMUMMystore.com/documentupload

Breast Pump Type:

- Standard Electric Breast Pump E0603 (Purchase)
- Standard Manual Breast Pump E0602

Name of Mother: _____

Mother DOB: _____ Baby DOB/Due Date: _____

Gestational age: _____ ICD-10 code: _____

*Date of Service/Beginning Date: _____

Physician Name: _____

Signature: _____ NPI: _____

SOME SAMPLE ICD-10 CODES

Other congenital malformation of tongue (Q38.3)
Slow feeding of newborn (P92.2)
Abscess of breast associated with the puerperium (O91.22)

Failure to thrive (R62.51)
Retracted nipple(s) (O92.03)
Jaundice (P59.8)

Other ICD-10 code _____