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**CHAPTER 18: DURABLE MEDICAL EQUIPMENT**

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**APPENDIX I: ELECTRIC BREAST PUMP REQUEST FORM PAGE(S) 1**

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**ELECTRIC BREAST PUMP REQUEST FORM**

A copy of the “State of Louisiana – Louisiana Department of Health (LDH) – Electric Breast Pump Request” form must be completed prior to dispensing a double-electric breast pump. The form must be submitted with required documentation for retrospective review to DXC Technologies. A copy of the form can be downloaded from the following website:

[www.lamedicaid.com/provweb1/Forms/Electric\\_Breast\\_Pump\\_Request\\_Form\\_and\\_Instructions.pdf](http://www.lamedicaid.com/provweb1/Forms/Electric_Breast_Pump_Request_Form_and_Instructions.pdf)