



Louisiana Department of Health
Health Plan Advisory 21-01
January 4, 2021

Donor Human Milk

Effective for dates of service on and after August 20, 2020, donor human milk is covered and reimbursed separately from the hospital payment for inpatient services. This coverage shall be provided without the requirement of prior authorization.

Donor human milk is considered medically necessary when all of the following criteria are met:

- The hospitalized infant is less than 12 months of age with one or more of the following conditions:
 - Prematurity;
 - Malabsorption syndrome;
 - Feeding intolerance;
 - Immunologic deficiency;
 - Congenital heart disease or other congenital anomalies;
 - Other congenital or acquired condition that places the infant at high risk of developing necrotizing enterocolitis (NEC) and/or infection; and
- The infant's caregiver is medically or physically unable to produce breast milk at all or in sufficient quantities, is unable to participate in breastfeeding despite optimal lactation support, or has a contraindication to breastfeeding; and
- The infant's caregiver has received education on donor human milk, including the risks and benefits, and agrees to the provision of donor human milk to their infant; and
- The donor human milk is obtained from a milk bank accredited by, and in good standing with, the Human Milk Banking Association of North America.

For services provided on and after August 20, 2020, the reimbursement of donor human milk will be the Medicaid fee on file for the service on the Durable Medical Equipment fee schedule. Claims for donor human milk are to be submitted using HCPCS code T2101. The hospital must submit a separate claim using the CMS 1500 claim form with place of service 21 (inpatient hospital) and procedure code T2101 for the donor human milk (1 unit per ounce of donor

human milk). Reimbursement for donor human milk is made separately from the hospital payment for inpatient services.

The Louisiana Department of Health expects that the Healthy Louisiana plans will update their systems to accommodate the new HCPCS code and rate for the donor human milk. Any previously denied claims or claims paid at incorrect rates for dates of service on or after August 20, 2020 are eligible for a reimbursement adjustment. No action shall be required by the provider. All plans shall have completed their system updates to accommodate the new HCPCS code and rate changes along with publishing of written instructions to the providers on how to submit claims for adjustment no later than 60 days from the date of this advisory.