



IEHP UM Subcommittee Approved Authorization Guideline			
<b>Guideline</b>	Human Donor Breast Milk	<b>Guideline #</b>	UM OTH 24
		<b>Original Effective Date</b>	05/29/2025
<b>Section</b>	Other	<b>Revision Date</b>	05/29/2025
		<b>Committee Approval Date</b>	6/16/2025
		<b>Effective Date</b>	7/1/2025

## COVERAGE POLICY

Mother's milk refers to milk from the birthing parent, given either through direct breastfeeding or as expressed milk in a bottle. Mother's milk contains a range of biologic components, including immunoglobulins, cytokines, growth factors, hormones, and prebiotic oligosaccharides, that confer health benefits compared with formula feeds. Benefits of mother's milk for the infant include improvements in gastrointestinal function, digestion and absorption, cognitive and visual development, and host defense as well as enhanced maternal-infant bonding.

**IEHP Covered California** Members may be eligible to receive pasteurized human donor breast milk when it is prescribed by an authorized Provider, obtained from a licensed and approved facility, and subject to the Utilization Management limitations listed below:

1. A mother is unable to breast feed due to a medical condition.
2. The infant cannot tolerate or has medical contra-indications to using formulas including elemental formulas.
3. The infant is born at a very low birthweight (less than 1500 g) and very premature (less than 32 weeks gestation).
4. Gastrointestinal anomaly, metabolic/digestive disorder, or recovery from intestinal surgery when digestive needs require additional support.
5. Diagnosed with failure to thrive (not appropriately gaining weight/growing).
6. Formula intolerance, with documented feeding difficulty or weight loss.
7. Infant hypoglycemia (low blood sugar); congenital heart disease, pre or post organ transplant.
8. Other serious health conditions when the use of banked donor milk is medically necessary and support the treatment and recovery of the infant.
9. Mother's milk must be contraindicated, unavailable (due to medical or psychological condition), or available but lacking in quantity or quality to meet the infant's needs.

## COVERAGE LIMITATIONS AND EXCLUSIONS

**Policy Application:** IEHP Covered California Members.

**Prescription-** 3 oz/unit, 35 oz/day only good for 30 days.

**Age of Infant-** up to 12 months of age when medical necessity has been determined.

**Licensed and Approved Facilities in California:**

1. Mothers' Milk Bank located at 1887 Monterey Road, Suite 110 San Jose, CA 95112 (Phone: 408-998-4550).
2. University of California Health Milk Bank 3636 Gateway Center Ave, Suite 102 San

## ADDITIONAL INFORMATION

**Authorized Providers-** Physicians, Advance Practice Nurses (Nurse Practitioners, Clinical Nurse Specialists, Certified Nurse Midwives), and Physician Assistants.

**Billing Codes-** (1) HCPCS code T2101 (human breast milk processing, storage and distribution only) to be billed per three ounces per unit, 35 ounces per day, only good for 30 days, and (2) HCPCS code A4287 (disposable collection and storage bag for breast milk, any size, any type, each).

## CLINICAL/REGULATORY RESOURCE

The Knox-Keene Health Care Service Plan Act of 1975, California Health and Safety Code, Chapter 2.2, section 1340 et seq., and Title 28, 2025 edition.

## DEFINITION OF TERMS

**Human Donor Breast Milk-** breast milk collected from a mother who has a surplus of milk beyond their own baby's needs.

**Pasteurization-** the process by which human donor breast milk is treated to destroy bacteria and viruses that it may contain. This process preserves the milk's beneficial properties.

## REFERENCES

1. The Knox-Keene Health Care Service Plan Act of 1975, California Health and Safety Code, Chapter 2.2, section 1340 et seq., and Title 28, 2025 edition.
2. Medi-Cal Provider Manual, Part 2- Pregnancy: Postpartum and Newborn Referral Services, Pasteurized Donor Human Breast Milk. Accessed on 05/29/2025.
3. American College of Obstetricians and Gynecologists, Barriers to Breastfeeding: Supporting Initiation and Continuation of Breastfeeding, Committee Opinion, No. 821, February 2021 (reaffirmed in 2024). <https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2021/02/barriers-to-breastfeeding-supporting-initiation-and-continuation-of-breastfeeding>. Accessed on 05/29/2025.
4. American Academy of Pediatrics, Your Premature Baby's Nutrition Needs: Breast Milk, Fortifiers & Preterm Formulas, September 20, 2024. [https://www.healthychildren.org/English/ages-stages/baby/preemie/Pages/your-premature-babys-nutrition-needs-what-to-know-about-breast-milk-fortifiers-and-preterm-formulas.aspx?\\_gl=1\\*t6di0o\\*\\_ga\\*MzU4MDA2MjkyLjE3MDYyMDUwMTk.\\*\\_ga\\_FD9D3XZVQQ\\*cZ3NDc5MzU4NTUkbzEzJGcxJHQxNzQ3OTM1ODgzJGowJGwwJGgw](https://www.healthychildren.org/English/ages-stages/baby/preemie/Pages/your-premature-babys-nutrition-needs-what-to-know-about-breast-milk-fortifiers-and-preterm-formulas.aspx?_gl=1*t6di0o*_ga*MzU4MDA2MjkyLjE3MDYyMDUwMTk.*_ga_FD9D3XZVQQ*cZ3NDc5MzU4NTUkbzEzJGcxJHQxNzQ3OTM1ODgzJGowJGwwJGgw). Accessed on 05/29/2025.
5. UpToDate, Human Milk Feeding and Fortification of Human Milk for Premature Infants, Parker, Margaret G., last updated January 21, 2025.
6. American Academy of Family Physicians, Breastfeeding, Family Physicians Supporting (Position Paper), December 11, 2019.

## **DISCLAIMER**

IEHP Clinical Authorization Guidelines (CAG) are developed to assist in administering plan benefits, they do not constitute a description of plan benefits. The Clinical Authorization Guidelines (CAG) express IEHP's determination of whether certain services or supplies are medically necessary, experimental and investigational, or cosmetic. IEHP has reached these conclusions based upon a review of currently available clinical information (including clinical outcome studies in the peer-reviewed published medical literature, regulatory status of the technology, evidence-based guidelines of public health and health research agencies, evidence-based guidelines and positions of leading national health professional organizations, views of physicians practicing in relevant clinical areas, and other relevant factors). IEHP makes no representations and accepts no liability with respect to the content of any external information cited or relied upon in the Clinical Authorization Guidelines (CAG). IEHP expressly and solely reserves the right to revise the Clinical Authorization Guidelines (CAG), as clinical information changes.