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March 10, 2025

**Committee on Health & Human Services
Maine State Legislature**

RE: Support for LD 865 – An Act to Require MaineCare to Reimburse for Lactation Services in the Homes of Eligible Persons

Dear Members of the Health & Human Services Committee

I write to you today in strong support of LD 865, which seeks to establish Medicaid reimbursement for lactation consultant services in Maine. As a Licensed Certified Professional Midwife (CPM), an International Board Certified Lactation Consultant (IBCLC), Co-Chair of the Maine Association of Certified Professional Midwives, and one of the Executive Directors of an accredited midwifery school, I have seen firsthand the critical role that IBCLCs play in supporting infant feeding and overall maternal-infant health outcomes.

Ensuring access to skilled lactation care is vital in addressing many challenges faced by newborns and their families. IBCLCs provide expert care to manage common and complex infant feeding issues, including inappropriate weight loss in the newborn, poor weight gain, and low milk supply in the parent. Additionally, IBCLCs are trained to support medically complex infants, including preterm graduates from the NICU and babies with chronic health conditions in their transition to home and beyond.

Access to lactation support is a matter of health equity, particularly for families in rural areas, communities of color, LGBTQIA2+ families, individuals with disabilities, and those experiencing birth trauma or complex postpartum recoveries. The ability to receive high-quality, specialized lactation care should not be limited by socioeconomic status or geographic location. Medicaid reimbursement for lactation services will help remove barriers to care, ensuring that all families have the support they need to successfully navigate infant feeding.

Maine is home to a dedicated and skilled community of IBCLCs working in both hospital and community settings. While hospital-based IBCLCs provide critical support in the immediate postpartum period, community-based IBCLCs offer ongoing, in-home services that address the evolving needs of families beyond the newborn stage. Community-based IBCLCs are particularly well-positioned to provide care to infants beyond 14 days of life, assist parents in preparing for a return to work, and offer guidance on all aspects of infant feeding, including breastfeeding, exclusive pumping, human donor milk, formula feeding, and bottle feeding.



It is essential to recognize that IBCLCs work within a collaborative care model, referring patients as needed to pediatricians, physical therapists, occupational therapists, speech and language pathologists, ENTs, pediatric dentists, osteopathic doctors, and other healthcare professionals to ensure comprehensive support for infant feeding challenges. Medicaid reimbursement for lactation services will enhance this collaborative care approach, allowing families to receive timely and appropriate interventions.

By passing LD 865, the Maine Legislature has an opportunity to significantly improve access to lactation care, reduce health disparities, and support the long-term health and well-being of Maine's infants and families. I urge you to vote in favor of this critical legislation to ensure that all families, regardless of income or location, have access to the gold standard of lactation support.

Thank you for your time and consideration. I appreciate your commitment to improving maternal and infant health in Maine and am happy to provide further insight or answer any questions.

Tiffany Carter Skillings, LM, CPM, IBCLC