

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

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Representative Michelle Nicole Boyer and esteemed members of the Committee on Health and Human Services,

Thank you for the opportunity to testify today. I am an IBCLC in private practice with over 25 years of experience in the lactation field. I moved to Maine at the end of last year but I spent 20 years working for the WIC program in Ohio, in roles ranging from Breastfeeding Peer Counselor to IBCLC. During that time, I worked in a rural area with only one hospital with limited outpatient lactation care. I witnessed firsthand the challenges families face when they cannot access clinical lactation care for more complex cases like oral restrictions and continued low milk supply. This meant that many families who wanted to breastfeed could not access the care they needed.

I became an IBCLC because I realized that as a Peer Counselor, I could educate and support families but couldn't provide the clinical care they required. When I left the WIC program and started my private practice, they asked me to provide contracted IBCLC services, which was not typical, but there was no other way for their WIC participants to receive clinical lactation care in that area. Medicaid reimbursement for private practice IBCLCs would have been extremely helpful in being able to provide clinical care more widely and to more Medicaid families.

In Maine, I serve two areas: Brunswick and Farmington. In Brunswick, most families have private insurance and can access lactation care, either through their insurance or by paying out-of-pocket. However, in Farmington, I see significantly fewer families, despite the high need for clinical lactation care. Many of these families rely on MaineCare. Even with discounted rates, they cannot afford the care. As a result, families on MaineCare do not receive the same level of care as those with private insurance.

We tell families that "breastfeeding is healthiest," but when issues arise, we fail to provide the clinical care necessary to help them succeed. It's like telling someone that regular exercise is essential for their health but then denying them access to a physical therapist when they develop joint pain. Without that care, they struggle and may be forced to give up, even though staying active is crucial for their health.

Expanding access to IBCLC services would improve breastfeeding rates. Research shows that breastfed children have fewer illnesses, hospitalizations, and long-term health conditions—ultimately reducing healthcare costs for MaineCare. More importantly, this bill ensures all families, regardless of income, have access to the high-quality lactation care they deserve.

LD 865  
I urge you to support [Bill Name/Number] and help remove the financial barriers preventing MaineCare families from receiving essential lactation care. Thank you for your time and consideration.