

## **Testimony in Support of Medicaid Reimbursement for IBCLC Clinical Care**

Dear Members of the Committee,

My name is Paula Norcott, and I am an International Board Certified Lactation Consultant (IBCLC) in private practice. I am here today to express my strong support for the bill mandating Medicaid reimbursement for IBCLC clinical care.

As an IBCLC, I have the privilege of supporting families through their feeding journeys, often stepping in when parents feel like they have run out of options. However, the lack of Medicaid coverage for our services creates a significant barrier, particularly for families who cannot afford out-of-pocket care but desperately need specialized lactation support.

Let me share the story of one such family.

A mother, Sarah, gave birth to a full-term baby who, for an undetermined reason, was unable to take appropriate volumes by breast or bottle. In the hospital, a feeding tube was placed, and Sarah was told that the next step would likely be a G-tube—surgical placement of a permanent feeding tube. She was also told by a team of well-meaning doctors, most of whom had little to no clinical lactation training, that breastfeeding was unlikely to happen. The hope she had for nursing her baby was slipping away.

But Sarah reached out for IBCLC support, and together, we built a plan. I led an interdisciplinary team that included speech therapy, occupational therapy, and Sarah's medical providers to address her baby's feeding challenges holistically. Through weeks of consistent support, responsive feeding techniques, and strategies tailored to her baby's unique needs, we slowly helped her baby transition from tube feeding to direct breastfeeding.

The day Sarah's baby latched and nursed—fully, without a tube, without supplementation—was a moment of triumph, one that she had been told was impossible. But it wasn't impossible. It simply required the right care team, with IBCLC-led expertise at the center.

Unfortunately, too many families like Sarah's never get this opportunity. Without Medicaid reimbursement, families who rely on public insurance are often left without access to the IBCLC care that could make the difference between success and early weaning, between a feeding tube and an independent feeder.

Breastfeeding is a public health issue. It reduces the risk of infections, chronic diseases, and maternal health complications, ultimately lowering healthcare costs. Studies show

that increasing breastfeeding rates could save millions in Medicaid spending on preventable illnesses like ear infections, respiratory infections, and GI disorders.

By passing this bill, you ensure that all families—regardless of income—have access to expert, clinical lactation care. You ensure that parents like Sarah aren't left to navigate feeding challenges alone. You ensure that when a family wants to breastfeed, they have the support they need to make that a reality.

I urge you to support this bill and remove the financial barriers to IBCLC care. Thank you for your time.