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*Testimony of Rep. Michelle Boyer introducing*  
**LD 865, An Act to Require MaineCare to Reimburse for Lactation Services**  
*before the Joint Standing Committee on Health and Human Services*

Good afternoon, Senator Ingwersen, Representative Meyer and members of the Health and Human Services Committee, my name is Michelle Boyer and I represent District 123, part of Cape Elizabeth. It is an honor to come before you today to introduce LD 865, An Act to Require MaineCare to Reimburse for Lactation Services.

As many of us in this room are well aware, our country is facing a maternal healthcare crisis. Fortunately, in Maine, our Department of Health and Human Services has made it a priority for the last several years to support Maine families in getting the help they need in order to combat this trend. In their priority setting document, the Department outlined a clear set of goals to enhance maternal-fetal health, one of which is to increase the initiation and duration of breastfeeding<sup>1</sup> .

This bill is straightforward; it aims to make lactation services more accessible to those enrolled in MaineCare by providing a reimbursement to eligible persons for lactation services offered in a hospital, clinic, office, community or home setting. The reimbursement would only be available for services provided by an International Board Certified Lactation Consultant (IBCLC). Those with this credential assist families with any concern relating to breastfeeding.

Making lactation support services more accessible for birthing individuals is an investment in the long-term health of our state. Research shows that infants who are breastfed experience lower rates of infections, including ear and respiratory illnesses. As a result, babies who are able to breastfeed tend to have fewer healthcare visits, which leads to reduced medical costs overall. Additionally, breastfeeding is shown to have significant health benefits for the mother as well. Research<sup>2</sup> shows that individuals who are able to breastfeed their babies have a lower risk of breast and ovarian cancer, type 2 diabetes and high blood pressure. These health advantages will ultimately lead to cost savings for the state.

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<sup>1</sup>[https://www.maine.gov/dhhs/mecdc/population-health/mch/documents/Maine%20Maternal%20and%20Child%20Health%20Priorities%20and%20Measures\\_10.5.20.pdf](https://www.maine.gov/dhhs/mecdc/population-health/mch/documents/Maine%20Maternal%20and%20Child%20Health%20Priorities%20and%20Measures_10.5.20.pdf)

<sup>2</sup> <https://www.cdc.gov/breastfeeding/features/breastfeeding-benefits.html>

Not only would this bill bring about outstanding benefits for mothers, it would also align Maine with other states that are offering lactation services as a benefit under their state medicaid plans. States that have already implemented similar policies include Colorado and New York (2022), New Jersey (2023), and Illinois (2024). By following their lead, Maine would ensure equitable healthcare access and improve health outcomes for families across the state.

Thank you for allowing me to stand before you and present this bill. I am happy to answer any questions the committee may have.