

Testimony to the Committee on Health and Human Services regarding LD 85, An Act Concerning MaineCare Coverage for Donor Breast Milk February 11, 2021

Senator Claxton, Representative Meyer, and Members of the Committee on Health and Human Services:

Thank you for the opportunity to share my thoughts about LD 85, An Act Concerning MaineCare Coverage for Donor Breast Milk. My name is Naomi Bar-Yam, I am the Founding Director of Mothers' Milk Bank Northeast. I am submitting this testimony in support of this proposed legislation because MaineCare coverage of donor milk will save lives and improve health outcomes of Maine babies and save the state money. We strongly encourage Maine to join the eleven other states and Washington, DC currently mandating Medicaid coverage for donor milk.

Mothers' Milk Bank Northeast is a nonprofit community milk bank certified by and operating under the clinical standards of the Human Milk Banking Association of North America (HMBANA) in compliance with FDA food safety regulations. Similar to a blood bank in operation and protocols, a nonprofit milk bank provides safe, donated, pasteurized human milk to babies in fragile health. Mothers' Milk Bank Northeast is the primary nonprofit milk bank serving Maine. Among the 90+ hospitals we serve in the Northeast region are Maine Medical Center, Central Maine Medical Center, MaineGeneral Medical Center, St. Mary's Regional Medical Center, Pen Bay Medical Center, and Waldo County General Hospital.

We and the citizens of Maine are so fortunate to have strong community partnerships with five milk depots (drop-off locations) in Portland, Damariscotta, Rockport, Belfast, and Lewiston and an outpatient milk dispensary in Lewiston providing families access to donor milk in the community. Since we opened in 2011, over 550 Maine mothers have volunteered for screening as milk donors.

LD 85 demonstrates the commitment of the Maine legislature to ensuring equitable access to lifesaving donor human milk for its smallest, youngest citizens—premature and fragile babies in the neonatal intensive care unit (NICU) and late preterm and term babies with medical need for donor milk both in hospital and at home.

According to the National Center for Health Statistics and March of Dimes Peristats, about 8.6% (about 1,090) of the 12,000 babies born in Maine in 2018 were premature, born before 37

weeks' gestation. Of those, about 100 were born very preterm, before 32 weeks of what should be a 40 week pregnancy. These tiny babies, some born at less than 2 pounds, are at highest risk to contract necrotizing enterocolitis (NEC), a serious and costly illness. About 30% of babies with NEC can be treated medically; 40% require surgery to remove parts of the intestine that have died, leading to lifelong short bowel syndrome and possible neurodevelopmental delays; and 30% do not survive. Multiple research studies over decades tell us that "the only consistent independent predictors for NEC remain prematurity and formula feeding."

LD 85 will cover donor milk for babies when they cannot take mothers' milk or mothers cannot produce it and there is medical need, as prescribed by their health care providers. Most often, outpatient mother/baby dyads at home use donor milk for one to two weeks, to support mothers and supplement their milk until their supply comes in fully.

The cost of MaineCare coverage for medically indicated donor milk use will pay for itself several times over in a number of respects:

• <u>Direct long- and short-term health improvement for premature babies</u> - There will be fewer cases and reduced severity of NEC and sepsis for Maine's premature babies.

• <u>Cost savings and improved public health for the state of Maine</u> - More mothers will be able to breastfeed their babies for longer, reducing the need for donor milk and bringing multiple short- and long-term health and cost-saving effects.

• Equitable distribution of resources - Prematurity and breastfeeding are not distributed equally across the population. Families on MaineCare are more likely to have premature babies and other newborn medical needs, less likely to be breastfeeding, and less likely to deliver in a hospital that provides donor milk. LD 85 is an important step to providing Maine's babies with equitable access to the support and donor milk they need to survive and thrive.

Mothers' Milk Bank Northeast is eager to work closely with the Health and Human Services Committee on refining the details of this bill, and with Health and Human Services Department on its implementation. Please call upon us and draw upon the expertise of the esteemed physicians and researchers on our Medical and Research Advisory Boards, in service of the citizens of Maine.

Respectfully submitted,

M. Sur-Jam

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