

## **In Support of LD 85: An Act Concerning MaineCare Coverage for Donor Breast Milk**

Via Zoom

Thursday, February 11<sup>th</sup>, 2021

9:00am

Hello Senator Claxton, Representative Meyer and members of the Committee. My name is Kara Kaikini and I live in Freeport. I am here today to speak in support of LD 85 as a Board Certified Lactation Consultant and as the Board President of the Maine State Breastfeeding Coalition. The breastfeeding coalition supports this bill because it would substantially increase the number of babies who exclusively receive human milk.

We know that babies who are fed breast milk are healthier. Babies who are not fed breastmilk are at greater risk of necrotizing enterocolitis (NEC), respiratory tract and ear infections, SIDS (Sudden Infant Death Syndrome), and are at higher risk of developing diabetes, obesity, and allergic diseases (AAP, 2012). The more exclusive and the longer in duration babies receive breast milk, the lower their risk and severity of these outcomes, so world and national health organizations all recommend infants be exclusively breastfed for 6 months after birth with continued breastfeeding for at least 12 months (AAP, 2012).

The American Academy of Pediatrics and the World Health Organization state that if mother's own milk is not available, pasteurized donor milk should be used. Action 12 of the Surgeon General's Call to Action to Support Breastfeeding calls to "identify and address obstacles to greater availability of safe banked donor milk" including examining "models of payment" like insurance coverage (USDHHS, 2011).

Making donor milk available to all infants who receive MaineCare would improve newborn health and save money in the state of Maine by reducing risks of illnesses and readmissions. One study found that if 90% of infants could exclusively receive breast milk for the recommended 6 months our economy could save \$13 billion per year in direct and indirect pediatric health costs and prevent an excess of 911 deaths (Bartick, 2010).

Formula use in the early days is associated with decreased breastfeeding duration and a negative impact on infant intestinal microbiota (O'Sullivan, 2015). We are glad we have formula. Those of us who support breastfeeding aren't *against* using formula. We simply want the best evidence-based options to be available to all babies. Formula is *not* the next best or recommended option to mother's own milk. Donor milk is. And right now, donor milk is NOT equitable or accessible to all families due to its necessary cost.

Families need all of you in this room to support the financial health of new parents and physical health of their babies. I urge you to support LD 85.

Thank you for your time and consideration.

~Kara Kaikini, MS, IBCLC

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## References

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