

Connecticut HB 7165
An Act Concerning Medicaid Coverage for Donor Breast Milk

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Thank you for the opportunity to submit testimony in favor of Connecticut HB 7165, An Act Concerning Medicaid Coverage for Donor Breast Milk.

My name is Faren Tang and I am a resident of New Haven and a Reproductive Justice Fellow and Associate Research Scholar at Yale Law School, where I teach the Reproductive Rights and Justice Project clinical course. I specialize in legal issues affecting reproductive rights including the rights of pregnant and parenting people. I have also been a breast milk donor through Mothers' Milk Bank Northeast, a nonprofit milk bank accredited by the Human Milk Banking Association of North America.

My testimony here reflects my own views, and does not represent the institutional views of Yale Law School.

Medicaid Coverage for Donor Milk is a Reproductive Justice Issue

Access to donor breast milk is a key health issue for the sickest infants. Access to breast milk is most critical for premature and ill babies. Systemic social injustice, particularly along lines of race, is reflected in rates of prematurity and babies with low birth weight. Controlling for income and education levels, health outcomes for black infants are significantly worse for black babies than white babies in the U.S., a disparity likely attributable to the health impacts of living with the stress of anti-black racism. *See, e.g., Why Black Women, Infants, Lag in Birth Outcomes*, NPR (July 8, 2011), <https://www.npr.org/2011/07/08/137652226/-the-race-gap>; *see generally* Dorothy Roberts, *FATAL INVENTION: HOW SCIENCE, POLITICS, AND BIG BUSINESS RE-CREATE RACE IN THE TWENTY-FIRST CENTURY* (2011).

Providing Medicaid reimbursement for medically necessary donor breast milk will ensure that the most vulnerable babies are not denied access to potentially lifesaving nutrition because of their parents' inability to pay costs as high as \$3.00-\$5.00 per ounce for properly screened and pasteurized donor milk. *Why is Donor Milks so Expensive*, LACTATION Matters (Nov. 8, 2013), <https://lactationmatters.org/2013/11/08/why-is-donor-milk-so-expensive/>. The cost could easily add up to hundreds of dollars per week or thousands each month.

Medicaid reimbursement for human breast milk is an important step in ensuring that all babies, regardless of their parents' income level, have access to medically necessary nutrition. It is a step toward closing disparities in both class and race-related health outcomes for infants, which is a key aspect of robust reproductive justice.

Medicaid Coverage for Donor Breast Milk Will Encourage Donors

When work and school required me to be away from my own baby, I expressed far more milk than he could use. I had a freezer full of breast milk that I knew was critically needed by other babies, but I was also a solo parent of a new baby and a full-time law student. Deciding where to donate my milk was a daunting task during an already overwhelming time.

I wanted my milk to go to babies who needed it most, so I was torn between donating to a milk bank that would direct my milk to the most medically needy babies, and informal donation directly to parents, which would make my milk accessible to parents who could not afford to pay the high processing fees to a donor milk bank.

Ultimately, I decided to donate my milk to a nonprofit bank accredited by the Human Milk Banking Association of North America, but my decision would have been much easier had I been assured that Medicaid recipients could access my milk through a bank.

Medicaid reimbursement for human donor milk may encourage justice-minded potential donors like me to donate their milk to an accredited milk bank, since they can be assured it will go to the medically neediest babies regardless of their parents' financial means.