On behalf of the MAPOC Women and Children’s Health Subcommittee Clinical Lactation Support Working Group we submit the following consensus recommendations.

Starting on September 15, 2023, the working group held a total of six meetings, where it was able to have several presentations and discussions to receive valuable input from many experts who work in the clinical lactation field in addition to the Department of Public Health (DPH) and Department of Social Services (DSS).

With the stated mission and goal of convening to explore the feasibility of licensing clinical lactation services to expand the availability of such services for both pregnant and postpartum individuals who require and/or desire this service by securing Medicaid coverage, we submit the following recommendations contained in this report.

It is our intent and objective that these recommendations will be helpful in developing policies that will go towards the goal creating equality for all people in Connecticut who require or desire clinical lactation services so that regardless of insurance type, ability to pay or socio-economic status the highest standard of care will be available.

We would like to take this opportunity to thank all the members of the MAPOC Women and Children’s Health Subcommittee Clinical Lactation Support Working Group for all their dedicated time, hard work, and the meaningful contributions they have made and look forward to working with you all in the coming weeks and months ahead towards these policy goals and objectives.

Sincerely,

Representative Jennifer Leeper
Co-Chair

Amy D. Gagliardi
Co-Chair
<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Working Group Members</td>
<td>3</td>
</tr>
<tr>
<td>Mission and Goals</td>
<td>4</td>
</tr>
<tr>
<td>Meetings and Presentations</td>
<td>5</td>
</tr>
<tr>
<td>Working Group Recommendations</td>
<td>6</td>
</tr>
</tbody>
</table>
Clinical Lactation Support Working Group Members

Co-Chairs

Jenn Leeper (Co-Chair)  State Representative, 132nd District, Fairfield
Amy D. Gagliardi (Co-Chair)  Community Health Center, Inc.

Members

Erin Jones  Legislative and Strategic Counsel, March of Dimes
Sandra Carbonari, MD  Pediatric Specialist, Officer, Executive Committee the Connecticut Chapter of the American Academy of Pediatrics
Veronica Pimentel, MD  President of the CT Chapter of the American College of Obstetricians and Gynecologists (ACOG)
Lori Atkins, RN, IBCLC  CEO, Oh Baby Lactation Care
Marsha Walker, RN, IBCLC  President, National Lactation Consultant Alliance
Vicki Lucas, RN, PhD  Senior Advisor, NEST Collaborative
Sharon Ostfeld Johns, MD  Pediatric Critical Care Medicine, Assistant Professor of Clinical Pediatrics, Yale School of Medicine
Iva Kosutic  Founder, Evaluation Researcher, Partners in Social Research, LLC
Raquel Espinoza  Breastfeeding Peer Counselor and Childbirth Educator CHC, Inc.
Danielle Freeman, LPN, IBCLC  Owner, Milkin’ Melanin Lactation
Fatima Williams, RN, MPH  Director of Medical Administration, DSS
Bradley Richards, MD  Medicaid Medical Director, DSS
Merrilee Gober, BSN, RN, JD  National Lactation Consultant Alliance State Advocacy Committee Chair
Marilyn Lonczak, MEd, RD, CLC  Nutrition Consultant and State Breastfeeding Coordinator Community, Family Health and Prevention Section, WIC Program, DPH
Chris Morosky, MD, MS  Associate Professor of Obstetrics and Gynecology, UConn Health
Megan Krementowski  Senior Associate, Legislative Affairs Office of Governor Ned Lamont
Shannon L. DeGroff MD  UConn Health, Assistant Professor of Obstetrics and Gynecology
Mission and Goals of the Working Group

Mission:

We are convening to explore the feasibility of licensing clinical lactation services to expand the availability of such services for both pregnant and postpartum people who require and/or desire this service by securing Medicaid coverage.

Goal:

To create equality for all people in Connecticut who require or desire clinical lactation services so that regardless of insurance type, ability to pay or socio-economic status the highest standard of care will be available.
Working Group Meetings and Presentations

Friday, September 15, 2023  Agenda  Meeting

- Speaking the Same Language: A Call for Standardized Lactation Terminology in the United States Link
- Categories of Lactation Personnel Link

Friday, September 29, 2023  Agenda  Meeting

- Presentation: Clarity of terms and personnel in the Lactation Field Link
  Marsha Walker, RN, IBCLC, President, National Lactation Consultant Alliance

- Presentation: Impact of the International Board-Certified Lactation Consultant National Lactation Consultant Alliance Link

- Presentation: How Licensure Impacts Care Link
  Merrilee Gober, BSN, RN, JD, Ex-Officio Board Member, Chair State Advocacy Committee

Friday, October 20, 2023  Agenda  Meeting

- Presentation: Clinical Lactation Care in the Hospital Setting
  Sharon Ostfeld-Johns, Assistant Professor of Clinical Pediatrics, Yale School of Medicine

- Presentation: Clinical Lactation Care Following Discharge Link
  Marsha Walker, RN, IBCLC

Friday, November 3, 2023  Agenda  Meeting

- Presentation: The Impact of Breast Feeding Link
  Merrilee Gober, BSN, RN, JD, Ex-Officio Board Member, Chair State Advocacy Committee

Friday, November 17, 2023  Agenda  Meeting

Friday, December 15, 2023  Meeting
Working Group Recommendations:

Medical Assistance Program Oversight Council Women and Children’s Health Subcommittee Clinical Lactation Support Working Group

1. Define lactation consulting:
   a. the clinical application of scientific principles and a multidisciplinary body of evidence for evaluation, problem identification, treatment, education, and consultation to families regarding the course of lactation and feeding, including, but not limited to:
      i. Taking maternal, child, and feeding histories;
      ii. Performing clinical assessments related to breastfeeding and human lactation through the systematic collection of subjective and objective information;
      iii. Analyzing data;
      iv. Developing an unbiased lactation management and child feeding plan with demonstration and instruction to parents;
      v. Providing lactation and feeding education;
      vi. Recommending and training on the use of assistive devices;
      vii. Communicating to the primary health care practitioner(s) and referring to other healthcare practitioners, as needed;
      viii. Conducting appropriate follow-up with evaluation of outcomes; and
      ix. Documenting the encounter in a patient record.

2. Requirements for Licensure of International Board Certified Lactation Consultants (IBCLCs), defined as:
   a. Each applicant for a license as a lactation consultant shall be at least 18 years of age, shall have submitted a completed application upon a form and in such manner as the board prescribes, accompanied by applicable fees, and shall comply with the following requirements:
      i. Meeting the education and clinical standards established for the IBCLC by the IBLCE, or its successor organization;
      ii. Passing the IBCLC examination administered by the International Board of Lactation Consultant Examiners (IBLCE) or the examination of any successor organization;
      iii. Having satisfactory results from a criminal background check report.

3. Exclusions:
   The licensure of IBCLCs shall not be construed to affect or prevent:
   a. Connecticut licensed healthcare professionals from practicing lactation consulting when such lactation consulting is within their legal scope of practice, except such persons shall not use the title “licensed lactation consultant” or “licensed L.C.” unless the person is also licensed under this Act;
   b. Perinatal health workers' from performing education functions, including lactation and feeding education, consistent with the accepted standards of their respective occupations, except such persons shall not use the title “licensed lactation consultant” or “licensed L.C.” unless the person is also licensed under this Act; or
   c. The practice of lactation consulting by students, interns, or persons preparing for the practice of lactation consulting under the qualified supervision of a licensed lactation consultant or any licensed professional identified above.
4. Delay of Enforcement:
   a. This Act shall become enforceable 3 years after the effective date of the passage of the law to allow interested persons to obtain the education, training and credentialing necessary to practice lactation consulting as defined above. On and after the 3-year cutoff no person without a license as a lactation consultant issued pursuant to this chapter shall: (1) use the title “licensed lactation consultant” or “licensed L.C.” or (2) practice lactation consulting, provided that this chapter shall not prohibit any practice of lactation consulting that is exempt pursuant to the provisions set forth in the stated exclusions.

i “Perinatal health worker” includes but is not limited to: a doula, community health worker, peer counselor, WIC (Women Infants and Children) peer counselor, peer supporter, breastfeeding and lactation educator or counselor, childbirth educator, social worker, home visitor and/or any other perinatal educator.