



## Wisconsin Chapter

### Position Statement – Payment Rates for Electric Breast Pumps

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**Background:** The American Academy of Pediatrics states that “Breastfeeding and human milk are the normative standards for infant feeding and nutrition. Given the documented short- and long-term medical and neurodevelopmental advantages of breastfeeding, infant nutrition should be considered a public health issue and not only a lifestyle choice.”<sup>(1)</sup> The latest CDC Breastfeeding Report Card showed that over 80% of Wisconsin women initiate breastfeeding, already meeting Healthy People 2020 goals.

To assist in meeting these and other national breastfeeding benchmarks, the 2009 Affordable Care Act mandated that insurance companies must provide a breast pump at no cost sharing to the new mother. The language of this provision is vague, giving little guidance as to what kind of pump should be covered, however the type of pump the mother uses during this time matters. A 2013 study from the CDC indicated that the return to work and the difficulties surrounding pumping were among the top reasons that mothers stopped breastfeeding and did not meet their breastfeeding goals.<sup>(2)</sup>

While breastfeeding initiation rates are improving, duration rates are not. A mother’s separation from her baby, for whatever reason it needs to occur, is an important contributor to the decline in breastfeeding duration rates. Women rely on breast pumps to maintain their breastmilk supply. The best pumps are those that which have parts that can be interchanged to personalize that pump for the mother, that have replacement parts which are easily accessible, which have motors that will last for the duration of their breastfeeding experience and are brands easily recognizable enough so that those trained in lactation recognize it and can help the mother learn to use it.

Wisconsin mothers and babies are impacted by inadequate coverage for quality breast pumps that ultimately encourage prolonged breastfeeding because they are more effective and easier to use. Cuts in coverage for quality breast pumps not only threaten the short-term successful initiation of breastfeeding, but also result in higher medical costs. Many studies have shown that the low, short-term cost of investing in breastfeeding reaps significant rewards later through better health outcomes and lower medical bills for those moms and their babies both now and in the future. Health economists document the cost savings associated with higher breastfeeding rates. Actuarial analysis show that breastfeeding support, supplies, and services have a negligible impact on health insurance premiums.

**Position:** The Wisconsin Chapter of the American Academy of Pediatrics (WIAAP) promotes, protects and supports breastfeeding. As such, we oppose any case where funding is inadequate for providing quality breast pumps that promote successful breastfeeding. All parties benefit from the positive health benefits for individuals who are breastfed as infants, the reduced long-term healthcare costs and ongoing positive health outcomes.

### **Sources**

1. Breastfeeding and the use of human milk. Pediatrics. 2012 Mar;129(3):e827–41.
2. Odom EC, Li R, Scanlon KS, Perrine CG, Grummer-Strawn L. Reasons for earlier than desired cessation of breastfeeding. Pediatrics. 2013 Mar;131(3):e726–32.