Strategies for Equitable Access to Lactation Care

April 20, 2016
NACCHO Closing Grantee Meeting 2016
Checking in with Self and Others...

REFLECTION
“The Personal Is Political”

- Big Times
- Complex Topics
- Many Lives Impacted
- Equity is core
- Related to our work:
  - Access to care for breastfeeding families
  - Training & mentoring opportunities for Lactation Support Providers
Disclosures

- I have no conflicts of interest or other disclosures to report...
The Role of Personal Identity

- ...But I do have a personal history that informs my sense of identity & stance in the work
  - I walk through the world as a mother
  - I have strong personal opinions about the importance of attachment, as well as nutrition
  - I come to breastfeeding work as a community volunteer, trained as a peer counselor
  - I believe there a great capacity for lactation providers to work together to increase access to care
The Role of Organizational Identity

- The USBC is a Collective Impact “backbone organization” for the breastfeeding field
  - We are a coalition of coalitions
  - We apply an *equity mirror* to our policies and culture, and an *equity lens* to our work
  - We support collaborative action teams, “Constellations”
    - Informed & led by organizations with capacity & will
    - Or USBC leads if funded, or need for neutral convener
  - Built an open infrastructure, available to the field
Grassroots to Treetops

USBC today:

- USBC supports, convenes &/or leads collaborative efforts
- Recognize social change is bi-directional
- Intentionally building a bigger table that is inclusive & welcoming to all
- Every voice is valued
- Connections can be efficient & purposeful
Convening Stakeholders

- CDC Funding: *National Innovative Partnership for Addressing Obesity through Environmental Supports for Nutrition and Physical Activity*
- June 2014: initial facilitated meeting
- Formalized into Constellation (action-focused work team of *organizational* stakeholders)
- Overall goal: Increased access to lactation support
# LSP Constellation Members

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Lactation Support Provider (LSP) Field is Unique

- It’s relatively new field
- It’s brand new to payment sphere...
- Several provider types
- All non-licensed (except in RI)
  - No existing state structure to fit into or define against
Mindset of Emergence

- Interpretation and implementation of this new coverage is still evolving in policy
- And so are understandings & feelings
- Expect & accept non-closure
- Find & constantly reaffirm common ground & shared principles
- Go at the speed of trust
LSP Declaration of Intent

- "Whereas all mothers & babies have a right to access to trained lactation support to reach their goals;
- Whereas all lactation support providers bring value to the landscape of care;
- Therefore we agree to work collaboratively to influence opportunities for change to increase access to lactation support."
“Hands”:
LSP Priority Strategies

- **Strategy 1**: Expand training and mentoring opportunities for lactation care providers, particularly to increase the number of racial/ethnic minority care providers
- **Strategy 2**: Incorporate breastfeeding support into existing public health programs
- **Strategy 3**: Expand the network of providers allowed to provide lactation care under Medicaid
LEARNING THE LEVERS IN THE LANDSCAPE
Origins of Preventive Services: USPSTF

- U.S. Preventive Services Task Force
  - Independent, volunteer panel of national experts in prevention and evidence-based medicine
- Makes recommendations & grades based on strength of evidence and balance of benefits/harms of a service
  - “Breastfeeding Counseling: recommends interventions during pregnancy and after birth to promote and support breastfeeding” (grade B)
- Says “evidence is strong, benefit is worthwhile”, but no detail about how to provide the benefit
Origins of Preventive Services: HRSA

- In 2011 HRSA commissioned National Academy of Medicine (formerly IOM) to study/recommend women’s preventive services should be covered with no cost sharing.

- IOM report = eight additional preventive services for women, including breastfeeding support, supplies, and counseling.
  - “Pregnant and postpartum women have access to comprehensive lactation support and counseling from trained providers, as well as breastfeeding equipment.”
How is Affordable Care Act benefit defined?

- ACA says breastfeeding preventive services intended to be covered with no cost sharing
  - What does “preventive” mean in this context?
    - How are payers interpreting?
  - But are moms receiving full intended benefit?
- Under Women’s Preventive Services
  - What does it mean that service is only included/defined with reference to the woman?
  - Is benefit available to all moms through this mechanism?
Breastfeeding preventive services are unique...

- Many other preventive services are screening tests or medications (immunizations)...

- For us, preventive care provided is the counseling & equipment to support breastfeeding
  - But it’s not the provision of the counseling and equipment that is preventive of breastfeeding problems
  - It’s the breastfeeding itself – regardless of what happens on the journey -- that is protective/preventive

- There are some counseling benefits, but they are defined by what trying to prevent (obesity, STD..)
  - Our preventive care to trying to promote a behavior!!
Where does benefit “live”?

- Under Women’s Preventive Services
  - Mandate for private plans, exchange plans and Medicaid expansion plans
  - NOT mandated for Medicaid
  - (Politics, politics, politics!)
Levers to Address Who is Covered

- What would it take to get into Children’s Preventive Services?
  - These *are* mandated for Medicaid...
  - Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program
  - *Bright Futures: Guidelines for Health Supervision of Infants, Children, and Adolescents* (AAP)
Must provide a list of network providers

If no providers who can provide a particular service, then must cover when performed by an out-of-network provider w/ no cost sharing

Can’t limit to inpatient care

Must extend for duration of breastfeeding (counseling AND equipment)

What if no licensed providers? (see next)
What if no licensed counseling providers?

HHS FAQs have clarified:

- Must be covered when performed “by any provider acting within scope of license or certification under applicable State law”
  - Doesn’t have to be licensed, just trained
  - “Certification” not defined, per HHS interpreting broadly
  - Defined scope
  - Recognized in state law
Model of comprehensive, inclusive bill

- Comprehensive definition of coverage
- Pumps and breastfeeding equipment
- Lactation counseling
  - In-person (home and office)
  - Telephone
  - Peer counseling
- “Lactation provider”: individual who is certified or licensed and works within their scope (broad HHS language)
Levers to Address Interpretation Issues

- **FAQs on ACA Implementation Part XXIX**
  - HHS Office of Health Reform responsive to feedback, can add more FAQs
  - Compiling stories and billing examples
    - *Policy change is often incremental & iterative*

- **Women’s Preventive Services guidelines**
  - HRSA funding update process starting this year
  - LSP subgroup consensus to ask for broadest interpretation of “preventive” in the context of breastfeeding counseling
Innovative Models (PS3)

- There are clinics/practices that include full continuum of lactation providers on staff as a team, billing “incident to” a physician’s services:
  - Community of Hope Family Health & Birthing Center in Washington, DC
- Partner with AAP/ACOG to better articulate and promote the potential of these models
Public Health Programs (PS2)

- Expanding WIC funding (state cost analysis?)
- “Go to WIC” initiative
- Home visiting => outreach
PATHWAYS TO EQUITY FOR PROVIDERS
Industry Overview & Training Database (PS1, PS3)

- Industry overview document
  - created collaboratively by national training organizations

- Searchable lactation training database
  - all providers can populate
  - all interested parties can search
Mentoring (PS1)

- What’s important to consider?
- What’s working well now?
- What’s missing, if anything?
- Anything we can learn from each other’s initiatives?
- Opportunities for collaboration matchmaking?
Working With State Mechanisms (PS3)

- Update to Kaiser survey of states
- Identify states to pilot the Medicaid levers (seed funding?)
- Support for outreach to state insurance commissioners
- Engage in CHW policy development as entrée to expand breastfeeding care
- Train & support state breastfeeding coalitions to activate these levers
State Law Developments

- Licensure
  - Licensure laws passed in RI & GA
  - Many other states have pending bills, varied approaches

- CHW legislation/policy
  - Efforts in most states
  - CHW Common Core (C3) Project: core roles, core skills, core qualities
    - Shared life experience, personal/spiritual qualities matter, employment
Strategies for Medicaid Coverage

- State Plan Amendment (CMS Rule Change)
- Medicaid Waiver Process
- Medicaid Managed Care
WHAT DO WE DO NOW?
Engage

- Create a personal & organizational profile on USBC’s website: [www.usbreastfeeding.org](http://www.usbreastfeeding.org)
- Look at the SGCTA Action Directory & join Learning Communities of interest
- Connect with breastfeeding coalitions
  - Equity work on national level leading state coalition work
  - Get involved: ensure conversations and policy work in your state/community are inclusive
  - “Being at the table changes the conversation.” ~ Mama Bugg
Attend 6th National Coalitions Conference

Sixth National Breastfeeding Coalitions Conference

A NEW DAY: Community Engagement for Equity in the First Food Movement

AUGUST 5-7, 2016 • ARLINGTON, VA
Mobilize

Submit stories: www.usbreastfeeding.org/health-plan-stories
Submit complaints to state insurance commissioner
Convene courageous & inclusive conversations among lactation providers in your communities
Know that USBC is seeking funding for state pilot projects
  - USBC working with partners
  - Provide TA for multi-pronged, inclusive policy approaches to expand network of providers
Resources

USBC:
- Advocacy HQ: www.usbreastfeeding.org/advocacy
- Learning Communities: www.usbreastfeeding.org/learning-communities

National Women’s Law Center:
- Report: *State of Breastfeeding Coverage: Health Plan Violations of the Affordable Care Act*
- Fact Sheets, Toolkit, Sample Letters
- Hotline: coverher.org
Remember…

We are better, together!