

## **REIMBURSEMENT OF IBCLCs:**

Increasing timely access to high quality, lactation specific care for women who need treatment for breastfeeding problems will address many of the causes for early cessation of breastfeeding. Breastfeeding is a behavior with a low cost burden and high impact on health outcomes directly effecting the wellbeing of children in North Carolina.

NCLCA & NCBC leadership participate as members of the [NC Child Fatality Task Force](#) (CFTF) Perinatal Health Committee. In this capacity, we served as topic experts for the North Carolina Division of Medical Assistance as they worked toward a policy to cover [medical lactation services](#).

The policy was published in August of 2017, and the diagnostic codes were updated later the same year. The policy allows for coverage of lactation services, specifically targeted toward pediatric care. The care must be provided by a primary care clinician, or an IBCLC with a referral from a licensed provider, and using [‘incident to’](#) billing.

In 2018, NCLCA is partnering with [NC Child](#) and CFTF to work with other health insurance agencies. Our goal is to use this moment to leverage a discussion about reimbursement of lactation services in the wider North Carolina community.

## **BREASTFEEDING IN THE WORKPLACE:**

Our federal government provides very basic protection for pregnant and nursing mothers in the workplace. The Pregnancy Discrimination Act, passed in 1978, “forbids discrimination based on pregnancy when it comes to any aspect of employment, including hiring, firing, pay, job assignments, promotions, layoff, training, fringe benefits, such as leave and health insurance, and any other term or condition of employment.”<sup>i</sup> Most states have considered this federal legislation to be inadequate, and have passed additional protections for mothers in the workplace. All but 4 states have acted to improve protection against pregnancy discrimination, and all but 6 have acted to provide further provisions for pregnancy accommodation. Even workplace breastfeeding rights, first enacted by the federal government in 2010, has been strengthened by state

governments in 23 states, including many southeastern states (Virginia, Tennessee, Georgia, Arkansas, Mississippi and Louisiana). When these three areas of accommodation to pregnancy and lactation in the workplace are considered as a whole, ***it is alarming to see that North Carolina is the only state that has no further legislation for the protections of its working mothers.*** <sup>ii</sup>

NCLCA & NCBC are partnering with MomsRising, NC Child, and the Carolina Global Breastfeeding Institute to sponsor a study can apprise state leaders of the risks to North Carolina children posed by inadequate accommodations for pregnant and lactating women in the workplace and the policies addressing workplace accommodations in other states. The study is being undertaken by the Duke Child and Family Policy Center.

### **COMMUNITY OUTREACH FOR BREASTFEEDING SUPPORT:**

North Carolina has a network of health departments across the state. These health departments have a variety of ways in which they support breastfeeding, including: partnership with WIC agencies, provision of lactation support by HD personnel, community advocacy, and for some, appropriate referral when resources are needed.

NCLCA & NCBC have served as advisors to the Division of Public Health as they rolled out and administered the [ICO4MCH](#) (Improving Community Outcomes for Maternal and Child Health) grants.

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<sup>i</sup> US Equal Employment Opportunity Commission. Accessed at <https://www.eeoc.gov/laws/types/pregnancy.cfm>.

<sup>ii</sup> Map of federal and state-level Employment Protections for Workers Who Are Pregnant or Breastfeeding. Accessed at <https://www.dol.gov/wb/maps/>.