Strategy 3. Access to Professional Support

Definition
Access to support from health care professionals such as doctors, nurses, or lactation consultants is important for the health of the mother during pregnancy, after giving birth, and after release from the hospital. If a mother chooses to breastfeed, this support may include counseling or behavioral interventions to improve breastfeeding outcomes. It may also include helping the mother and baby with latch and positioning, helping with a lactation crisis, counseling mothers returning to work or school, or addressing concerns of mothers and their families.

Professional support can be given in many different ways and settings—in person, online, over the telephone, in a group, or individually. Some women receive individual in-home visits from health care professionals, while others visit breastfeeding clinics at hospitals, health departments, or women's health clinics.

Rationale
Women’s early experiences with breastfeeding can affect whether and how long they continue to breastfeed. Lack of support from professionals is a barrier to breastfeeding, especially among African American women.31,32 Mothers often identify support received from health care providers as the most important intervention the health care system could have offered to help them breastfeed. However, few health care professionals are adequately trained and experienced in providing breastfeeding support.33 Short hospital stays after birth mean that the responsibility for breastfeeding support often rests with health care professionals who provide ongoing care, such as primary care doctors and lactation consultants.32,34 The role of these health care professionals is to give consistent and evidence-based advice and support to help mothers breastfeed effectively and continue breastfeeding.

Evidence of Effectiveness
A review of breastfeeding interventions in primary care by the U.S. Preventive Services Task Force did not find that individual professional support alone significantly affected breastfeeding outcomes.36 However, reviewers did find that professional support given as part of a multicomponent intervention during the prenatal and postnatal periods increased short-term exclusive breastfeeding and duration of any breastfeeding.

A randomized controlled trial in Texas was used to determine whether assigning first-generation Hispanic mothers who were feeding their infants both breast milk and formula at age 1 week to a hospital-based breastfeeding clinic would increase exclusive breastfeeding at 1 month. Mothers in the intervention group were offered breastfeeding support from paraprofessionals supervised by a registered nurse or IBCLC. Mothers in this group had significantly higher rates of exclusive breastfeeding than mothers in the control group who did not receive the intervention (16.8% versus 10.4%).37

An evaluation of the results of a randomized intervention among primarily low-income Hispanic and African American women in New York City found that women who received two prenatal and one postnatal visit or telephone call...
from a lactation consultant were more likely to be breastfeeding at week 20 than women who received standard care (53.0% versus 39.3%). Exclusive breastfeeding rates did not differ between the two groups.

**Key Considerations**

- The Patient Protection and Affordable Care Act of 2010 (as amended by the Healthcare and Education Reconciliation Act of 2010 and referred to collectively as the Affordable Care Act) expands insurance coverage, consumer protections, and primary care access in the United States. It also emphasizes prevention in addition to care and treatment. Comprehensive breastfeeding support and counseling from trained providers, as well as access to breastfeeding supplies, for pregnant and nursing women is recommended in comprehensive guidelines from the Health Resources and Services Administration (HRSA).

- Professional support can be provided during both the prenatal and postpartum periods, but it is particularly critical in the first few weeks after delivery, when lactation is being established.

- Support may be given by trained doctors, nurses, lactation consultants, or other trained health care professionals. Many third-party payers in the United States do not reimburse for services given by lactation professionals unless they are otherwise eligible for reimbursement as nurses, doctors, or other health care professionals.

- Lack of reimbursement may be a barrier to seeking professional support for many women because they would have to pay out-of-pocket for this support.

- The Affordable Care Act requires new health plans to cover prenatal and postpartum breastfeeding counseling and supplies. For example, they must cover rental fees for breast pumps at no out-of-pocket cost (e.g., for co-pays, co-insurance, or deductibles). For Medicaid, the Affordable Care Act also provides states the opportunity to earn a one percentage point increase in their federal matching rate (starting on January 1, 2013) if they cover certain recommended immunizations and preventive services for beneficiaries without cost-sharing.

- Professional support can be given through telephone hotlines or live online chats. Hotlines include those staffed 24 hours a day, 7 days a week; those staffed only during working hours; those that offer call-back support to mothers who leave a message describing their needs; and those with pager services similar to the on-call services used by health care professionals. Some online communities offer live chats with IBCLCs, pediatricians, or other health care professionals.

- IBCLCs are health care professionals who specialize in the clinical management of breastfeeding. They are certified by the International Board of Lactation
Consultant Examiners, which operates under the direction of the U.S. National Commission for Certifying Agencies. IBCLCs and other lactation professionals work in a variety of health care settings, such as hospitals, private pediatric or other medical offices, public health clinics, and their own private practices.

Program Examples

Best Start Three Step Counseling Strategy
This counseling method addresses barriers to breastfeeding through open-ended questions, affirmation, and education. It can be used by a wide range of health care professionals, and it is time efficient. This strategy has been used in WIC clinics to support breastfeeding women.

SoonerCare
The Oklahoma Health Care Authority administers this state Medicaid program, which covers lactation consultant services for SoonerCare members up to 60 days postpartum. To be reimbursed, lactation consultants must be licensed by the state as a nurse or dietician and be an IBCLC. Consultations are provided face-to-face in an individual setting, such as in an office, patient’s home, or other confidential outpatient location. The program allows six sessions per pregnancy.

SoonerCare
The Oklahoma Health Care Authority administers this state Medicaid program, which covers lactation consultant services for SoonerCare members up to 60 days postpartum. To be reimbursed, lactation consultants must be licensed by the state as a nurse or dietician and be an IBCLC. Consultations are provided face-to-face in an individual setting, such as in an office, patient’s home, or other confidential outpatient location. The program allows six sessions per pregnancy.

MilkWorks
This nonprofit, community breastfeeding center in Lincoln, Nebraska, was founded in 2001 by a small group of mothers working in the health care field who identified a lack of outpatient breastfeeding services for mothers in the area. Currently, MilkWorks has about 20 part-time employees, including a breastfeeding medicine specialist, IBCLCs, breastfeeding educators, and registered dieticians. Staff provide clinical services to about 1,000 mothers a year at the main location, in homes, and at two inner-city outreach clinics that serve Spanish-speaking and single or young mothers. Nursing, dietetic, child development, and family practice residents work in the clinics to increase breastfeeding knowledge among health care providers.

Action Steps

1. Collaborate with state Medicaid and insurance commissioners to explore ways to increase access to lactation services.

2. Consider options for developing walk-in breastfeeding clinics that are available to all new mothers in the community and that are staffed by trained breastfeeding professionals who are reimbursed for all services provided.

3. Create comprehensive, statewide networks to provide home-based or clinic-based follow-up care to newborns in the state.

4. Develop and disseminate a resource directory of local lactation support services available to new mothers.

5. Given that the WIC Program serves 53% of all new mothers and infants, ensure that WIC participants have professional services for breastfeeding support in place before they are discharged from the hospital.
La Leche League International (LLLI)
The LLLI operates a toll-free telephone helpline (1-877-452-5324) from 9 am to 9 pm CST. Callers are required to leave a message, which is answered by a trained volunteer. The LLLI also has an online help form that women can use to get answers to breastfeeding questions (http://www.llli.org/help_form).

Harris County Breastfeeding Coalition
The Harris County Breastfeeding Coalition in Texas set up a hospital-based breastfeeding clinic that is staffed by paraprofessionals supervised by a lactation specialist at Baylor College of Medicine’s Ben Taub General Hospital. This clinic provides breastfeeding support to high-risk mothers who are referred by hospital staff or mothers who request this service within 2 weeks of discharge.

Mothers receive counseling and direct assistance from breastfeeding counselors who have completed the Texas Department of Health’s lactation management training program. Complex cases are referred to the clinic manager (a registered nurse or IBCLC). Follow-up visits or telephone contact is arranged when problems are not resolved during the initial visit. Mothers are also referred to other sources of breastfeeding support in the community. Support from breastfeeding counselors is provided without charge beyond the costs for infant check-ups.

Resources
Breastfeeding and Follow-Up Clinic of Stormont-Vail Health Care
Provides professional support through a postdischarge visit by clinic staff in Kansas. http://www.stormontvail.org/birthplace/

Find a Lactation Consultant
International Lactation Consultant Association
Provides a directory to help mothers find IBCLCs working in private practice and hospitals. http://www.ilca.org

MilkWorks
An example of a community breastfeeding center. http://www.milkworks.org

SoonerCare
Oklahoma Health Care Authority
This state Medicaid program covers lactation consultant services for members up to 60 days postpartum. http://okhca.org/individuals.aspx?id=3091&menu=44

Medicaid Coverage of Lactation Services
Center for Medicaid and CHIP Services
This issue brief explores how the Centers for Medicare & Medicaid Services can encourage and help states increase access to lactation services. http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Quality-of-Care/Downloads/Lactation_Services_IssueBrief_01102012.pdf