



Kansas
Breastfeeding
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Senator Gene Suellentrop, Chair
Senate Public Health and Welfare Committee
Proponent, SB 252

Chair Suellentrop and Committee Members:

I am writing on behalf of the Kansas Breastfeeding Coalition (KBC) in support of Senate Bill (SB) 252 which expands eligibility for KanCare. The KBC believes KanCare expansion will have a significant, positive impact on many, including the estimated 150,000 Kansans living in the "Medicaid gap".

Many of these Kansans who would benefit are mothers and babies. Under KanCare expansion, they would have access to essential breastfeeding support and supplies. Over 90% of mothers in Kansas choose to breastfeed.¹ Yet two thirds of Kansas children are not breastfed for a full year, falling far short of the medical recommendation for a full year of breastfeeding. The most recent data from the U.S. Centers for Disease Control and Prevention (2016 births)² identifies the rate of breastfeeding for one year at 34.6% in Kansas. Clearly families in Kansas want to breastfeed. KanCare expansion would support that decision by covering lactation consults and breastfeeding supplies for many families who could otherwise not afford them.

Suboptimal breastfeeding rates in Kansas result in significant excess health care costs and preventable deaths. The economic benefits to the family, health care system and workplace are widely published in the literature. If 90% of infants were breastfed according to universal medical recommendations, Kansas would save nearly \$27 million per year in health care costs and avert 8 infant and 22 maternal deaths.³ The KBC estimates KanCare would realize a *net* savings of over \$1,000,000 annually after expansion from fewer infant illnesses in just the first year of life alone. This savings is even higher when considering the averted maternal illnesses due to breastfeeding. By supporting more mothers to be able to breastfeeding for longer with access to clinical breastfeeding support and supplies, KanCare expansion would result in lower health care costs and healthier Kansans.

I respectfully urge the committee to favorably pass SB 252 out of committee for consideration by the full Senate body. It is vital that mothers and babies in Kansas receive access to essential postpartum support and supplies in line with what mothers and babies in the 36 states and Washington DC have access to under expanded Medicaid eligibility.

Sincerely,

Brenda Bandy, IBCLC
Executive Director
Kansas Breastfeeding Coalition

¹ Kansas Pregnancy Risk Assessment Monitoring System, 2018

http://www.kdheks.gov/prams/downloads/Kansas_PRAMS_2018_Surveillance_Report.pdf

² https://www.cdc.gov/breastfeeding/data/nis_data/rates-any-exclusive-bf-state-2016.htm

³ Breastfeeding Saves Lives Calculator, www.usbreastfeeding.org/saving-calc, Accessed January 19, 2020.

Stuebe, A. M. et al (in press - 2017). An online Calculator to estimate the impact of changes in breastfeeding rates on population health and costs. *Breastfeeding Medicine*

Mission To improve the health and well-being of Kansans by working collaboratively to promote, protect and support breastfeeding.

Vision Breastfeeding is normal and supported throughout Kansas.