



NEW YORK STATE SENATOR

Kemp Hannon

Senate Leads Bipartisan Budget Push to Help Save the Lives of Premature Babies

SENATOR HANNON March 27, 2017

| ISSUE: **DONOR MILK**

| COMMITTEE: **HEALTH**

New York State Senate Health Committee Chairman Kemp Hannon today led a bipartisan push for a key budget measure that would help save the lives of premature infants. Senator Hannon, Assembly member Michaelle C. Solages and other legislators were joined by doctors and advocates to call for the enacted state budget to include Medicaid coverage for donor breast milk so that this screened and safe “medicine” can be provided to infants born at very low birth weights.

Senator Hannon said, “The Department of Health has long acknowledged the benefits of breastfeeding and has recently enacted regulations to further promote breastfeeding. Ensuring our most fragile infants have access to donor breast milk when in the NICU and the mother’s milk is not an option is the next step in promoting the lifelong benefits of breast milk. While a number of hospitals such as Crouse Hospital and Westchester Medical Center offer donor breast milk to premature babies, which can often be lifesaving, coverage continues to be an obstacle.”

Assembly member Michaelle C. Solages said, “Equal access to donor breast milk will positively impact the life chances of our state’s tiniest and most critically ill babies. I applaud my colleagues in the Senate and Assembly for supporting New York State’s progressive agenda to support, women, families, and new mothers.”

Last year, a bill ([S6583B](#)) authorizing Medicaid coverage for pasteurized donor human milk (PDHM) was passed unanimously in both the Senate and Assembly, but was vetoed by the Governor with language directing the issue to be brought up as part of a state budget. The

Senate included this provision in its one-house budget passed earlier this month and today the Senate is expected to pass the current version of the legislation, [S4526](#). With less than a week until the 2017-18 budget is due, it is critical that the state take action so that premature infants have access to milk that can save their lives and prevent years of future health challenges.

Using PDHM helps prevent high risk infants from dying of necrotizing enterocolitis (NEC) - a sudden-onset intestinal disease – and many other health complications that typically afflict this vulnerable population. When a mother's milk is not available, PDHM provides significantly more benefits than formula, such as anti-infective factors, intestinal growth factors and hormones, as well as promotes the growth of healthy intestinal bacteria, which is shown to improve health in preterm infants.

At a cost of two-to-three times higher than formula, PDHM is unaffordable for many families who would benefit from it. However, requiring New York to allow Medicaid to cover PDHM would still end up saving the state considerable Medicaid dollars since critically ill, very low birthweight, premature infants constitute the majority of the total Medicaid budget for neonatal care. Increased use of PDHM would save the state money by preventing these infants from contracting NEC, as well as NEC's increased risk of infections, prolonged hospital stays, feeding intolerance, dependence on intravenous nutrition, and potential lifelong intestinal problems or developmental disabilities

Dr. Boriana Parvez, MD, IBCLC, FAAP, Neonatologist at Maria Fareri Children's Hospital at Westchester Medical Center and Development Director at the New York Milk Bank, said, "Donor milk is a precious gift of life to the tiniest and most fragile newborn babies. It is the safest and the most natural way to nourish them when their mother's milk is in insufficient quantity. We often say that having a preemie in the NICU is like being on a roller coaster ride but without the thrill. Having to worry about the additional cost of donor milk only further hinders the mothers of preemies' efforts to care for their tiny babies and produce milk. As a physician caring for sick premature infants, I feel that donor milk should be covered by insurance and I stand behind our politicians who are trying to make it a reality."

Dr. Shetal Shah MD FAAP, New York Medical College, Maria Fareri Children's Hospital, said, "Offering donor breast milk to New York State's tiniest babies through Medicaid reduces a significant health disparity."

Dr. Susan Vierczhalek, MD, FAAP, Medical Director at the New York Milk Bank and Breastfeeding Coordinator with the New York State American Academy of Pediatrics, said, “Mothers’ milk is important for all infants, but it is especially critical for fragile premature babies because it acts like medicine in protecting their sensitive intestines and in stimulating development of their immune systems. Donor milk is the best alternative when sufficient quantity of mothers’ milk is not available. This measure will help to ensure that this important therapy is available to New York’s most vulnerable babies and will help reduce current disparities.”

The Senate and Assembly urge the Executive to include this important measure in the final enacted budget in order to ensure premature infants that a physician determines would benefit from donor breast milk have access to this often lifesaving treatment regardless of their income.

RELATED LEGISLATION

2017-S4526

-
- Introduced
 - - In Committee Assembly
 - In Committee Senate
 - - On Floor Calendar Assembly
 - On Floor Calendar Senate
 - - Passed Assembly
 - Passed Senate
 - Delivered to Governor

- Signed By Governor

-

Provides medical assistance coverage for the cost of donor breast milk which is medically necessary for certain infants

February 16, 2017

In Senate Committee **Health**

Sponsored by **Kemp Hannon**

Do you support this bill?