

Testimony in Support of SB 115

February 18, 2019

Dear Chairwoman Ratti and Senate Health and Human Services Committee Members:

On behalf of our seven hospitals in Nevada, Dignity Health-St. Rose Dominican would like to formally support SB 115, which would require Medicaid to reimburse for donor human breastmilk for certain infants. St. Rose is the only hospital system in southern Nevada whose hospitals have been designated Baby-Friendly by the World Health Organization and UNICEF, and we believe there is nothing healthier a mother can do for their baby than provide breastmilk.

According to Baby-Friendly, USA, breastfeeding offers an unmatched beginning for children. Providing infants with human milk gives them the most complete nutrition possible. Human milk provides the optimal mix of nutrients and antibodies necessary for each baby to thrive.

Scientific studies have shown us that breastfed children have far fewer and less serious illnesses than those who never receive breast milk, including a reduced risk of SIDS, childhood cancers and diabetes.

This is even more important for infants in our neonatal intensive care units (NICUs). Because not all of these patients have a mother that is able to breastfeed, St. Rose is one of only a handful of hospital systems in Nevada that offers banked donor human milk to these patients from the Mothers' Milk Bank in San Jose, CA, along with Prolacta, a human milk-based nutritional product that is used to fortify human milk with additional protein, calories and other things to make the milk more appropriate for a premature baby.

Necrotising enterocolitis (NEC), a medical condition where a portion or all of the baby's bowel dies, is a devastating medical condition our most vulnerable premature infants are prone to. An exclusive human milk diet is a simple and natural way to significantly decrease risk for NEC and save these fragile babies from intense treatments, surgeries and a more than 60 percent possibility of death. A 2012 policy by the American Academy of Pediatrics recommended feeding preterm infants human milk, finding "significant short- and long-term beneficial effects," including reducing the rate of NEC by a factor of two or more.¹

And as you can imagine, having a baby in a NICU with NEC increases the cost of care for these patients significantly. Two studies have estimated that the average charge in the United States associated with a case of surgical NEC is \$400,000 to \$500,000.²³ One prospective study, which considered hospital cost, found that the costs of surgical NEC were between

¹ Pediatrics, March 2012: <http://pediatrics.aappublications.org/content/129/3/e827.full>

² Journal of Pediatric Surgery, August 2011: <https://www.ncbi.nlm.nih.gov/pubmed/21843711>

³ Pediatrics, March 2002: <http://pediatrics.aappublications.org/content/109/3/423>

\$300,000 and \$660,000.⁴ The choice of surgical treatment for NEC may significantly affect hospital costs.⁵ Some have estimated a lifetime cost for each baby with NEC to be in the millions.

In fact, in general, premature infants fed with 100 percent human milk based products had a lower expected NICU stay and total expected costs of hospitalization, resulting in a net direct savings of 3.9 NICU days and close to \$12,000 per patient.⁶

St. Rose has board-certified lactation consultants at our San Martín and Siena campuses and at our WomensCare Centers of Excellence to help new moms with the process, along with education on why breastfeeding is so important, but the option of use of donor milk and a HMF help to make sure these most fragile of patients get the proper nutrition they so desperately need.

Once again, we feel very strongly that hospitals should provide donor breast milk for their NICU patients, and further reimbursement via Medicaid would incentivize them to do so. Please vote yes on SB 115.

Sincerely,

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⁴ Journal of Pediatric Surgery, June 2000: <https://www.ncbi.nlm.nih.gov/pubmed/10873026>

⁵ Pediatrics, March 2015: <http://pediatrics.aappublications.org/content/135/5/e1190>

⁶ Breastfeed Med, February 2012: <https://www.ncbi.nlm.nih.gov/pubmed/21718117>