

Steven Sepe

From: mwfink233 (null) <mwfink233@aol.com>
Sent: Tuesday, March 12, 2024 10:20 AM
To: House Health and Human Services Committee
Subject: H7882

Dear Representatives,

I am writing to you about H7882 to be heard in your committee today.

This bill seeks to update and amend a bill from 2014 that asked the General Assembly to direct the Director of Health to write the Rules and Regulations to license Lactation Consultants. This bill then became law.. The bill defined a Lactation Consultant as a Licensed Internationally Board Certified Lactation Consultant or IBCLC which is considered the gold standard in the lactation world.

H7882 is unfortunately a problematic bill on many levels. Though the bill seeks to update and change the original bill licensing lactation consultants, ironically, no lactation consultant holding this license was ever consulted. This fact alone gives the impression of a "back door" attempt to change another profession's licensing and with a total lack of transparency. The point of the "update" seeks to also include and license another credential, the certified lactation counselor or CLC. The CLC is a well thought of credential and a very good addition to lactation support. The problem with the way the bill is written is that it blurs and equates the two credentials making it very unclear to the public and providers as to any difference between the credentials. This is a disservice to the public and providers when choosing lactation support and or referring out to lactation support. It falls under the category of consumer protection. The CLC is a one week training with no prerequisites and no clinical pathway. The IBCLC is a much more intensive training with a lengthy required clinical component and a four hour board exam. (As an example think CNA and RN, both very needed health workers and with some crossover scope but with quite different training) H7882 is written so as to confuse the Lactation Consultant (Lic. IBCLC) with the Lactation Counselor. This may seem like a trivial point at first glance but in the lactation world this would make a significant difference. And all healthcare professions are rightly being called on to diversify their workers, but confusing different levels of credentials is not safe or helpful for the public or the workforce.

By all means CLCs could be licensed if this is their desire. They should be called certified licensed lactation counselors, not lactation consultants to confuse the public and in their own bill. Please remove your support for this particular problematic bill.

Respectfully,
Michael W. Fink MS Lic.IBCLC