

March 8, 2018

To: Craig.Samitt@anthem.com

Craig Sammitt, MD
Executive Vice President and Chief Medical/Clinical Officer
Anthem, Inc.
120 Monument Circle
Indianapolis, IN 46204

Sent Electronically.

Dear Dr. Samitt,

As a collective voice of multidisciplinary practitioners, families and advocates who support the health and wellbeing of pregnant mothers and their babies, the National Perinatal Association (NPA) is reaching out to you to express grave concern about Anthem Insurance's planned reimbursement cut for double electric breast pumps. This rate cut comes on top of existing unfavorable policies that restrict access to hospital grade pumps for mothers with babies in the Neonatal Intensive Care Unit (NICU) and limit access as a whole to mothers in need of optimal breastfeeding support and services. All perinatal and pediatric organizations around the world recommend that babies receive only breast milk for the first 6 months after birth and continue to receive breast milk (along with complementary foods) throughout the first 1-2 years after birth. Until paid maternity leave becomes available to mothers in America, mothers who work outside the home will need to pump their milk using an electric breast pump. Mothers whose babies are hospitalized in the NICU must also pump their milk until their babies are mature enough and well enough to breastfeed. Because manual breast pumps are not designed to maintain a full milk supply and are inadequate to do so, electric breast pumps are necessary for both working mothers and mothers with premature or sick babies in the hospital.

Breastfeeding is one of the lowest cost, highest value interventions to promote long-term health for babies and their mothers. The costs associated with providing breastfeeding support and breast pumping supplies are minimal compared with the much higher costs of not supporting breastfeeding.

Babies who are fed formula instead of breast milk have significantly higher rates of four of the most common and costly infections in the first year of life: ear infections, gastroenteritis, respiratory infections and necrotizing enterocolitis (a severe intestinal disease that impacts premature infants in the NICU). Beyond the four most common and costly conditions a baby may experience in the first year, formula-fed babies also have higher rates of asthma, obesity, childhood leukemia, type 1 diabetes mellitus, and twice the rate of Sudden Infant Death Syndrome (SIDS). It has been calculated that "If 90% of US families could comply with medical recommendations to breastfeed exclusively for 6 months, the United States would save \$13 billion per year and prevent an excess 911 deaths, nearly all of which would be in infants." (Bartick and Reinhold. The burden of suboptimal breastfeeding in the United States: A pediatric cost analysis. *Pediatrics* 2010;125(5):e1048-56.)

Breastfeeding also has significant health benefits for mothers. Mothers who breastfeed or provide breast milk have a decreased risk of breast and ovarian cancers as well as decreased risk of obesity, Type II diabetes, hypertension and cardiovascular disease later in life. Optimizing breastfeeding rates has the proven potential to drive health care costs down while improving outcomes for babies and mothers who are covered by Anthem insurance.

We respectfully request that you rescind your scheduled rate cut for electric breast pumps and continue to support mothers' breastfeeding efforts, both to improve health outcomes of mothers and babies and to save money in the long run by reducing the significantly higher healthcare costs associated with NOT breastfeeding.

Sincerely,
National Perinatal Association
Amy Akers, President