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Assembly Sergeant at Arms
411 West, State Capitol
Madison, WI 53708

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Assembly Sergeant at Arms
411 West, State Capitol
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Assembly Sergeant at Arms 411 West, State Capitol Madison, WI 53708

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Wisconsin Catholic Conference

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Assembly Sergeant at Arms
411 West, State Capitol
Madison, WI 53708

Tax credit avail to all

\$ \$5000 to \$5000

Private location (Clean local)

sink/place to store wilk

Not returbable - 15 yr carry-forward

- During working hours

- Amend (OK -75K limit
- Amend (OK -75K limit
- Cap removed to ease admin
- AMT -7 Subtracted prior to

Amendment to limit to WI based facilities.

Devied one year -> recieve primary consideration in the next.

Where will the credit appear on forms of how will it affect that due as a result of the placement. DOR is doing a comparison on the two placements.

Assembly Committee on Ways and Means

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	Committee Member	Aye	No	Absent	Not
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2.	Rep. John Ainsworth, vice-chair	2			
3.	Rep. Suzanne Jeskewitz	3			
4.	Rep. Frank Lasee	4			
5.	Rep. Samantha Starzyk	5			
6.	Rep. Tom Sykora	6			
7.	Rep. Carol Owens	13			
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10.	Rep. Bob Ziegelbauer	9			
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Assembly Committee on Ways and Means

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10.	Rep. Bob Ziegelbauer	9			
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To: Chairman Michael Lehman & Committee Members,

I am a Registered Nurse and Board Certified Lactation Consultant. I currently work in an OB/GYN clinic setting and as one of my roles I promote, educate, and counsel pregnant women and families on the Benefits of Breastfeeding.

Breastfeeding is one of the most important factors to infant health. Breastfeeding is the most complete form of nutrition for infants. Breastfeeding should be encouraged for as long as possible, preferably through the 1st year or longer because human milk provides the best nutrition and protection against infections. Breastfeeding also improves maternal health and contributes economic benefits to the family, health care system and workplace. (See Breastfeeding Fact Sheet.)

Despite the well recognized benefits of Breastfeeding, the 1998 statistics show only 29% of all mothers were Breastfeeding their infants at 6 months of age. According to the US Department of Labor, 70% of employed mothers who have children under 3 years of age work full time. About 1/3 of these mothers return to work within 3 months and about 2/3 within 6 months after the baby is born. African American women are more likely than other women to return to work earlier (8 wks) and be engaged in jobs that do not allow mothers to be successful at Breastfeeding. Because of high occurrence of poverty among African Americans, these families would benefit substantially from Breastfeeding their infants.

Recently, the Department of Health and Human Services Office on Women's Health issued a Blueprint for Action on Breastfeeding. It included promotion of Breastfeeding in the workplace. Research shows employers benefit if their female employees Breastfeed. Breastfed infants are sick less often; therefore maternal absenteeism from work is significantly reduced in companies with established lactation programs. In addition, employer medical costs are lower and employee productivity is higher. Total medical care expenditures are about 20% lower for exclusively breastfed infants than for never breastfed infants.

I see firsthand in the OB/GYN clinic a vast number of new mothers who begin Breastfeeding their infants at birth, but stop Breastfeeding in the early months because their workplace is not supportive of Breastfeeding or they do not have a private place to pump and/or store their breast milk. I continue to hear stories from mothers who are committed to providing breast milk to their infants, pumping in less than clean bathroom areas, to give their babies the best possible start in life.

In summary, I urge you to pass State Rep. D Jeff Plale's Assembly Bill 124. In consideration of the extensive published evidence for improved outcomes in breastfed

infants and their mothers, a strong position on continued Breastfeeding and returning to work is justified.

Respectfully,

Jan Miller RN IBCCC_ Jan Miller RN IBCLC



BREASTFEEDING FACT SHEET

The number of benefits to both mother and child resulting from breastfeeding is staggering. Although most people would generally agree that breastfeeding is good for the baby, the following summary of the impact it has on mothers, babies and society will, undoubtedly, come as quite a surprise to many people:

Health Benefits to Moms Who Breastfeed

- . Reduced risk of breast & ovarian cancers
- . Reduced risk of anemia
- . Protection against osteoporosis & hip fracture later in life
- . Helps return mothers body to its pre-pregnancy state faster
- . Helps delay return of fertility and . Reduced risk of diabetes to space subsequent pregnancies
- . Develops a special emotional relationship and bonding with her child
- Breastmilk is free reducing or eliminating the cost of formula
- Breastfed babies are sick less thus reducing healthcare costs to family and requiring less time off work
- Decreased mortality of rheumatoid arthritis (RA) has been associated with total time of lactation

Health Benefits to Babies Who Breastfeed

- . Human milk provides children with the most complete & optimal mix of nutrients & antibodies
- Breastmilk has a varying composition which keeps pace with the infant's growth & changing nutritional needs
- . Protects against diarrhea, gastroenteritis and other stomach upsets
- . Protection against ear infections & respiratory illness
- . Reduced risk of SIDS (sudden infant death syndrome)
- Protects against meningitis, child-hood lymphoma, Crohn's disease and ulcerative entercolitis
- Reduced incidence and severity of allergic disease
- Babies enjoy a special warm bonding & emotional relationship with mothers
- Breastfeeding plays an important role In the emotional development of babies
- . Babies develop higher IQs, better brain & nervous system development
- . Breastfeeding lessens the risk of heart disease in later life
- . Increased bone density

Benefits to the **Environment & Society**

- . Breastfeeding reduces the cost of healthcare by promoting healthier children & mothers
- . Breastfeeding reduces global pollution by reducing the use of resources and energy required to produce, process, package, distribute, promote and dispose of material created by artificial baby milk
- Reduces tax burden on communities & government to ensure children are properly fed
- . Reduced absenteeism in the workplace due to children's illnesses

The Capital Times Tuesday, April 10, 2001

WMC gets it for once

Family-friendly workplaces are few and farbetween. But Rep. Jeff Plale, D-South Milwaukee, has authored a bill to help remedy the situation.

Under Plale's proposal, businesses would be encouraged — through tax credits — to provide a private space for lactating mothers to pump and store breast milk. The bill is scheduled for a hearing before the Assembly Ways and Means Committee tomorrow.



Plale

"There are a huge number of health benefits for mothers who are breastfeeding," notes Maureen O'Brien, a lobbyist for the State Medical Society of Wisconsin, which has endorsed the bill. According to the Food and Drug Administration, breast-feeding reduces occurrences of ear infections, allergies and

other problems in children. And women who breast-feed are less likely to develop osteoporosis and breast and cervical cancer.

About 44 percent of Dane County businesses provide a private area other than a bathroom, according to a 1998 survey. Plale's legislation would require a business to offer a private location and to have a sink, a place to sit and equipment for pumping and storing milk to qualify for the tax credit.

This is one occasion when we find ourselves in agreement with Wisconsin Manufacturers & Commerce who support Plale's proposal. Though it typically supports any measure that offers a tax break for businesses, this one makes sense — for employers, for women and for their children.

The Capital Times

Clayton Frink, Publisher Dave Zweifel, Editor

Editorial Board: The editorial positions of The Capital Times are shaped by Dave Zweifel, Phil Haslanger, John Nichols, Judie Kleinmaier, Linda Brazill, Jacob Stockinger and Samara Kalk. 1

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BREASTFEEDING FACT SHEET

Wisconsin Breastfeeding Coalition

Breastfeeding is a fundamental cornerstone of future family wellness in Wisconsin. The Healthy People 2010 goal for breastfeeding is to increase the proportion of mothers who breastfeed their babies. The objectives are that 75% of mothers will breastfeed in the early postpartum period, 50 % of mothers will breastfeed at six months, and that 25 % of mothers will breastfeed at one year. The American Academy of Pediatrics recommends that breastfeeding continue for at least 12 months and thereafter for as long as mutually desired. Figures from the Wisconsin 1998 Pediatric Nutrition Surveillance System (PedNSS) show breastfeeding rates of 49% initially, 29% at 3 months and 21% at 6 months. PedNSS includes mothers and infants who participate in the Women, Infant and Children (WIC) Program. To increase the incidence and duration breastfeeding rates in Wisconsin, mothers need the support of family and friends, the health care system, employers, state and federal legislation and society as a whole. The Wisconsin Breastfeeding Coalition advocates for greater awareness of the benefits of breastfeeding and for public and private sector initiatives to support breastfeeding families.

BREASTFEEDING IS GOOD FOR WISCONSIN	Breastmilk	Infant Formula
Naturally contains DHA, a fatty acid that positively affects cognitive development	1	
Protects infants from respiratory illnesses, ear infections, diarrhea and other bacterial and viral infections	1	
Infants fed this are less likely to develop chronic illnesses such as diabetes, cancer,	+	
cardiovascular disease, and inflammatory bowel disease	1	
Infants have fewer allergies	1	
May protect infants from Sudden Infant Death Syndrome	1	
Promotes rapid recovery after childbirth	1	
Mothers return to prepregnancy weight sooner	1	
Protects mothers from chronic diseases such as osteoporosis, heart disease, diabetes, and	+	
cancer (breast, ovarian and endometrial)	11	
Natural and renewable resource	17	
Has been recalled due to manufacturer error 22 times between 1982 and 1994. (Deficient	+•	_
vitamin content lead to seizures, anemia, growth retardation and skin lesions.)		•

Breastfeeding is Good for Employers

- Reduces staff turnover & loss of skilled workers
- Reduces absenteeism of parents as breastfed children are sick less often
- Lower health care costs with healthier children
- Increases job productivity with employee satisfaction and morale.
- Provides recruitment incentive for women
- Enhances the company's reputation as caring for their employee's family welfare.

Breastfeeding is Good for Society

- Saves \$1160 per baby per year in formula costs.
- Approximately \$79 million could be saved on the cost of formula in Wisconsin if all mothers breastfed for one year.
- Fewer days spent in Newborn Intensive Care Nursery (approximate cost of \$ 3000 per day).
- Breastmilk is a natural and renewable resource
- Ecologically sound: no packaging, plastics, waste

While the decision to breastfeed is clearly up to the mother, women need to have full and unbiased information about the benefits of breastfeeding and the hazards of commercial infant formulas and cow's milk. Mothers should not feel they must reject breastfeeding because of fear of disapproval, embarrassment or harassment. State government and Wisconsin communities (both public and private sectors) have a responsibility to protect, promote and support breastfeeding. Women are entitled to good prenatal care and mother/baby breastfeeding friendly health facilities. Women should not be discriminated against because they are breastfeeding.

HOW CAN I HELP?

You can help by promoting and supporting policies and legislation that:

- protect the rights of women to breastfeed in those settings where they and their children have a legal right to be present.
- protect the rights of women to express milk for their breastfeeding infants.
- work toward workplace polices that foster employers to provide flexible hours and workplace facilities to enable working mothers to continue to breastfeed.
- provide funding for breastfeeding training of health care providers working with mothers and children in hospitals, medical and community health settings.
- provide for breastfeeding education to be given to all students enrolled in public education systems.
- require coverage for services of an International Board Certified Lactation Consultant (IBCLC) for assessment and treatment of breastfeeding problems, as part of the health care benefits package of Wisconsin private insurance companies, HMO's, and Medical Assistance programs.
- require coverage of the rental or purchase of equipment necessary to initiate and/or maintain lactation, as
 prescribed by the mother's or infant's physician as part of the health care benefits package of Wisconsin
 private insurance companies, HMO's, and Medical Assistance programs.
- prohibit the promotion and marketing of breastmilk substitutes by adhering to the International Code for the Marketing of Breastmilk Substitutes.
- provide funding for collection of data and research on breastfeeding by research groups independent of commercial infant formula companies.

For more benefits of breastfeeding refer to the Wisconsin Breastfeeding Position Statement, "Wellness Promotion Through Breastfeeding Support". The position statement may be accessed at http://www.execpc.com/~wapc

For additional information on the Wisconsin Breastfeeding Coalition contact:

Sue Murvich, co-chair 608/785-0530, ext. 3335 simurvic@gundluth.org

Mary Pesik, co-chair 608/267-3694 pesikmj@dhfs.state.wi.us

Breastfeeding Terms You Should Know

Wisconsin Breastfeeding Coalition

International Board Certified Lactation Consultant (IBCLC)

Lactation Consultant (LC)

Certified Lactation Educator (CLE) Certified Breastfeeding Educator (CBE)

La Leche League Leader

Baby Friendly Hospital Initiative (BFHI) A title given to an allied health care provider who has successfully passed an international certification exam to validate special skills and knowledge necessary for facilitating breastfeeding. The certification exam is administered by the International Board of Lactation Consultant Examiners (IBCLE) and was established based on guidelines that were developed and accredited by the National Commission for Certifying Agencies. To be accepted to sit for the IBCLE certification exam, the applicant must apply and meet eligibility requirements including minimum hours of both 1) clinical practice as a lactation consultant and 2) continuing education on breastfeeding. Certification is for five years. Recertification is required every five years (by continuing education at 5 years and by reexamination every 10 years). IBCLC's are nurses, physicians, dietitians, educators, developmental therapists, social workers and skilled advocates. They work in hospitals, clinics, nutrition programs, the community and private practice. For more information www.iblce.org

Members of the health care team, who provide education to women on skills necessary to initiate and maintain lactation, assessment and management of feeding problems and support to overcome obstacles to breastfeeding. Lactation consultants are not required by federal or Wisconsin law to be certified. Many LC's have received credentials from the breastfeeding-training program that they attended and do not require continuing education or recertification.

The terms certified lactation educator (CLE) or certified breastfeeding educator (CBE) are used by breastfeeding training programs. The training programs include basic breastfeeding information, counseling skills, and identification and management of problems. The certification is a statement of completion of the training program. Certified lactation educators and certified breastfeeding educators can provide basic breastfeeding education and support.

La Leche League Leaders are volunteers who are health professionals or lay peer counselors (mother to mother support provider) trained in breastfeeding through La Leche League International. For more information www.lalecheleague.org

This global program is sponsored by the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF) to encourage and recognize hospitals and birthing centers that offer an optimal level of care for lactating mother and baby. The Baby Friendly Hospital Initiative (BFHI) promotes, protects and supports breastfeeding through The Ten Steps to Successful Breastfeeding for Hospital, as outlined by UNICEF/WHO. Every facility providing maternity services and care for newborn infants should:

- 1. Maintain a written breastfeeding policy that is routinely communicated to all health care staff.
- 2. Train all health care staff in skills necessary to implement this policy.
- 3. Inform all pregnant women about the benefits and management of breastfeeding.
- 4. Help mothers initiate breastfeeding within one hour of birth.
- 5. Show mothers how to breastfeed and how to maintain lactation, even if they are separated from their infants.
- 6. Give infants no food or drink other than breastmilk, unless medically necessary.
- 7. Practice "rooming in", allow mothers and infants to remain together 24 hours a day.
- 8. Encourage unrestricted breastfeeding.
- 9. Give no pacifiers or artificial nipples to breastfeeding infants.
- 10. Foster the establishment of breastfeeding support groups and refer mothers to them on discharge from the hospital or clinic.

International Code of Marketing Breastmilk Substitutes

Ten Steps to Support Parents' Choice to Breastfeed Their Baby

- American Academy of Pediatrics

This code was developed by the World Health Organization (WHO) for governments to adopt for protection of infant health through the prevention of inappropriate marketing of breastmilk substitutes. The code sets minimum standards to assist in promotion of breastfeeding as a superior form of infant nutrition. The code does not ban the sale of infant formula or prevent health care providers from receiving information about these commercial products. The code was approved by the World Health Assembly in 1981 and became a US affirmed code in 1994.

- No advertising of these products to the public
- Information to health workers should be scientific and factual
- No free samples to mothers
- All information on artificial feeding, including the labels should explain the benefits of breastfeeding, and the costs and hazard associated with artificial feeding
- No promotion of products in health-care facilities
- Unsuitable products, such as condensed milk, should not be promoted for babies
- No company sales representatives to advise mothers
- All products should be of a high quality and take into account the climatic and storage conditions of the country where they are used
- No gifts or personal samples to health workers
- No words or pictures idealized artificial feeding, including pictures of infants on the products

To help pediatricians integrate the benefits of breastfeeding into their daily work, the American Academy of Pediatrics (AAP) developed the Breastfeeding Promotion in Pediatric Office Practices (BPPOP) program. This program provides pediatricians with the latest scientific information on breastfeeding and its management, promotional materials, and strategies for increasing breastfeeding rates in their practices. The Ten Steps to Support Parents' Choice to Breastfeed Their Baby is one of the promotional materials developed and distributed through BPPOP.

The Ten Steps include:

- 1. Make a commitment to the importance of breastfeeding.
- 2. Train all physicians and office staff in skills necessary to support breastfeeding.
- 3. Inform women and families about the benefits and management of breastfeeding.
- 4. Schedule early follow-up visits for all newborns.
- 5. Show mothers how to breastfeed and how to maintain lactation during period of separation from their babies.
- 6. Encourage breastfeeding on demand.
- 7. Use appropriate anticipatory guidance that supports exclusive breastfeeding until infants are approximately 6 months old and encourage the continuation of breastfeeding as long as mutually desired by the mother and baby.
- 8. Support breastfeeding by providing accurate information about maternal issues.
- 9. Communicate support for breastfeeding in the office environment.
- 10. Expand the network of support for breastfeeding.

For more information: www.aap.org/commpeds

November 2000

For more breastfeeding information refer to the Wisconsin Breastfeeding Position Statement, "Wellness Promotion Through Breastfeeding Support". The position statement may be accessed at http://www.execpc.com/~wapc For additional information on the Wisconsin Breastfeeding Coalition contact:

Sue Murvich, co-chair 608/785-0530, ext. 3335 sjmurvic@gundluth.org

Mary Pesik, co-chair 608/267-3694 pesikmj@dhfs.state.wi.us

To:

Representative Lehman, Chair

Assembly Ways and Means Committee

From:

Karen Pletta, MD, FAAP

Breastfeeding Coordinator, WI Chapter, American Academy

Pediatrics

Wisconsin Academy of Family Physicians

State Medical Society of Wisconsin

Date:

April 11, 2001

RE:

Support of AB 124 - tax credit for businesses constructing or

equipping breastfeeding facilities

We appreciate the opportunity to comment on behalf of physicians across the state of Wisconsin on AB 124.

The American Academy of Pediatrics, the American College of Obstetrics and Gynecology, the American Academy of Family Physicians, and the State Medical Society of Wisconsin all agree this important fact: breast milk is the ideal nutrition for infants. The American Academy of Pediatrics recommends that babies be provided breast milk for the first year of life and thereafter for as long as is mutually desired by mother and baby. Babies who receive breast milk have fewer infections such as meningitis, ear infections and diarrhea. They are also less likely to have chronic diseases such as diabetes mellitus, allergies and some childhood cancers. Mothers who breastfeed have benefits including lower rates of ovarian cancer, breast cancer and osteoporosis.

When babies receive breast milk, the community benefits due to decreased health care costs. Babies that receive breast milk have significantly lower rates of infection and are one-tenth as likely to be hospitalized for any bacterial infection. Potential healthcare cost savings from breastfeeding in medical diagnosis have been analyzed. Results showed the following potential savings in healthcare costs for one year: Infant diarrhea, \$630 million; ear infection (otitis media) \$660 million; respiratory syncitial virus \$31 million per year. In addition, \$2,665,715 of federal funds is spent yearly, for WIC, to provide infant formula to non-breastfeeding mothers.

Breastfeeding is beneficial for babies, their mothers and our community. That's why it's essential for you to support Assembly bill 124 to help businesses provide working mothers with a facility to enable them to breastfeed their infants for as long as possible.



TO: Assembly Committee on Ways and Means

FROM: Sue Murvich, MS, RD, IBCLC

Chair, Wisconsin Association for Perinatal Care Nutrition Committee

Co-Chair, Wisconsin Breastfeeding Coalition

DATE: April 11, 2001

RE: Assembly Bill 124

The Wisconsin Association for Perinatal Care supports Assembly Bill 124 that creates an income tax and franchise tax credit to businesses that construct a space for employees to pump and store human milk during working hours. Most women who return to work and wish to provide human milk for their babies have no appropriate place to express breastmilk. Restrooms are <u>not</u> adequate to meet this need because infants should not receive food obtained in unsanitary areas. Lactating women will more easily meet goals for milk production when given an area that is private and quiet.

Businesses can be family friendly by setting aside a room for nursing mothers with a refrigerator for milk storage, a sink for hand washing and partitioned areas for privacy. In addition, many companies have provided electric breast pumps for their employees to use at work.

Some of the benefits that a business receives when they enable their employees to provide breast milk for their babies include:

- 1. More women return to work when they are guaranteed a time and place to provide breastmilk for their babies. This results in less employee turnover and decreases the cost of new employee hiring, orientation and training.
- 2. Human milk has anti-infective and anti-viral factors. Consequently, breastfed babies are sick less and lactating mothers miss fewer days at work to care for sick children.
- 3. Since breastfed babies are healthier, medical expenses are drastically reduced. In addition, women who have breast-fed, have a lower incidence of breast, ovarian and cervical cancer and reduced osteoporosis. This saves the self-insured company in health care costs.
- 4. Employee job satisfaction, morale, and productivity increase when a mother is given time at work to help meet her child's needs.
- 5. This benefit may provide a recruitment incentive for women of reproductive age and may enhance the company's reputation as caring about families.

Supporting lactating women in the workplace is a good business practice.

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State Medical Society of Wisconsin



Working together, advancing the health of the people of Wisconsin

To: Representative Lehman, Chair

Assembly Ways and Means Committee

From: James Leonhardt, MD

On behalf of the State Medical Society of Wisconsin

Date: April 11, 2001

Re: Support of AB 124 - tax credit for businesses constructing or

equipping breastfeeding facilities

Good morning, I'm Doctor Jim Leonhardt, an obstetrician gynecologist from Waukesha. I work at the Moreland OB GYN and Chrysalis Women's Wellness Center at the Moreland Medical Clinic. I am representing the State Medical Society of Wisconsin and its 9,000 physician members.

The State Medical Society supports this proposal, a tax credit for a business that constructs or equips a breastfeeding facility, because it promotes the health of mothers and their babies.

Human milk contains many factors that protect infants from a wide variety of acute illnesses, including ear infections, bacterial infections and diarrheal disease. Studies have shown that breast fed infants also are less likely to develop certain chronic diseases including diabetes, cancer, cardiovascular disease and inflammatory bowel diseases. Furthermore, breastmilk has been shown to improve brain development and the infant's overall health. For the mother, breastfeeding promotes rapid recovery after childbirth, which includes controlling postpartum bleeding, returning to pre-pregnancy weight sooner and shrinking the uterus more quickly to its prepregnancy state. Breastfeeding may also protect women against chronic diseases including osteoporosis, heart disease, diabetes and breast, ovarian and endometrial cancer.

By having employers support mothers who wish to provide their infants with human milk, they are enhancing the health of their employees and future generations. Human milk lowers health care costs for infants and means a reduction in sick time for both mom and baby, as breastfed children are sick less often. A healthier employee with a healthier baby is a good investment. The State Medical Society encourages the legislature to pass this bill so that all businesses can take advantage of this opportunity to support mothers and improve the health of Wisconsin citizens.



Wisconsin Nurses Association

6117 Monona Drive Madison, Wisconsin 53716-3995 (608) 221-0383 FAX (608) 221-2788

TO:

Representative Michael Lehman, Chair and Members of the Assembly Ways and

Means Committee

FROM:

Gina Dennik-Champion RN, MSN, MSHA

WNA Executive Director

DATE:

April 11, 2001

RE:

WNA Support for AB 124 - Income and Franchise Tax Credit for a Business that

Constructs or Equips a Facility for its Employees to Pump and Store Breast Milk

Good Morning Chairperson Lehman and members of the Assembly Ways and Means Committee. My name is Gina Dennik-Champion. I am a Registered Nurse and the Executive Director of the Wisconsin Nurses Association. WNA is the professional organization of all registered nurses in Wisconsin. WNA supports a health care system that provides quality health care that is accessible to and affordable for all Wisconsin residents.

Thank you for giving me the opportunity to present the reasons why we support AB 124 - Income and Franchise Tax Credit for a Business that Constructs or Equips a Facility for its Employees to Pump and Store Breast Milk.

As Registered Nurses in Wisconsin, we support strategies and incentives that promote wellness and prevention. Important among many of these is the promotion of breastfeeding of infants for at least the first six months of life. Infectious illnesses such as diarrhea, ear infections, and the common cold virus are noted to be less frequent in occurrence among breast fed infants than non-breast fed. In addition, mothers who breastfeed are found to have a lower risk for breast cancer, ovarian cancer and osteoporosis.

The fastest growing segment of todays workforce is mothers of infants and young children. Helping these women continue breastfeeding after they return to the workplace can result in the following positive outcomes:

- 1. Less employee turnover
- 2. Faster return from maternity leave
- 3. Less employee absenteeism
- 4. Reduced overtime or use temporary employees
- 5. Lower utilization of employee health care benefits

Employer support of breastfeeding and providing a comfortable area for breastfeeding, breast pumping and storage of breast milk creates a workplace that is perceived as the following:

Email: wna@execpc.com

Website: www.wisconsinnurses.com

- 1. Having good levels of employee morale and employee loyalty
- 2. Positive image as family and mom-friendly
- 3. Strong employee benefits and recruitment tool
- 4. Solid retention strategies for employees after childbirth.

WNA supports the intent of AB 124 which is providing tax credits to businesses that provide the space for breastfeeding and breast milk storage. This bill communicates a very powerful message that employers can implement and employees can take advantage of. It also communicates that the State of Wisconsin values health prevention, employee and family wellness, the importance of working women to our economy, employers who want to maintain a competitive edge and support for a healthy future workforce. AB 124 is a win-win opportunity for all concerned. WNA applauds Rep. Plale's sponsorship of AB 124 and those legislators who have signed on.

WNA strongly encourages support for passage during this legislative session.

Thank you for providing me the opportunity to present and I will gladly answer any questions.

Good morning. My name is Kathy Janisch and I am a Registered Nurse at Moreland OB-GYN and Chrysalis Women's Wellness Center. I have been an advocate for women's choice to breastfeed for many years. Breastfeeding your baby is a way of intimately communicating with another human being. Mothers have been practicing the skill of breastfeeding for thousands of years. Until the twentieth century a baby who was not breastfed was unlikely to survive. Even today in countries where babies are fed on formula, and mothers do not have access to clean water, refrigeration and money to buy substitute milk, babies often die before they are a year old.

This is Wisconsin however and although women are careful about hygiene and how formula is mixed, their artificially fed babies are more likely to have a significantly larger number of acute and chronic diseases such as diarrhea, ear infections, respiratory infections, bacteremia, bacterial meningitis, botulism and urinary tract infections. As adults they may become diabetic or develop heart disease.

Moms who nurse reduce their risks of developing ovarian and premenopausal breast cancers. They also have improved bone remineralization with a reduction in hip fractures in the postmenopausal period.

The "FAMILY MEDICINE JOURNAL" put the advantages of breastfeeding this way. "if a new vaccine became available that could prevent one million or more child deaths a year, and that was moreover cheap, safe, and administered orally, and required no refrigeration, it would become an immediate health imperative. Breastfeeding could do all this and more."

Breastfeeding is not just a matter of personal choice, like choosing between brands of breakfast cereal. It is a political issue. How women behave in our culture sets a standard to which others aspire.

Every time a woman breastfeeds and lets it be known that she is breastfeeding and is not embarrassed about it, she is defending women's rights everywhere to feed babies with milk from their own bodies. The human race has survived because women understood how to breastfeed.

Many women are emotionally torn in two when they first have to split their lives between mothering and paid work. Research shows that in any given year, 93 percent of babies fed on formula suffer illness compared with 59 percent of breastfed babies. This report stimulated some major American companies to facilitate breastfeeding in their workforce, on the premise that every dollar invested in providing breastfeeding facilities saved five dollars in absenteeism. Breastfeeding benefits business.

Do the right thing and support this proposal. This is an investment in the family and our future as residents of this great state.

Thank you for your time.

STATEWIDE PERINATAL DATABASE

BENEFITS OF A PROPOSED SYSTEM

The benefits of collecting, analyzing, and using clinical information about mothers and infants include:

- Improved health outcomes for infants and mothers in the period from three months before conception through the infant's first year of life.
- More precise, targeted planning for distribution of health care resources, including money, space, equipment, transportation, and providers' time and expertise.
- Information that allows providers to evaluate and/or modify their practice (e.g., effectiveness, cost, ease, expediency, timeliness, access).
- Information to evaluate a program's effectiveness.
- Clear and timely aggregate health information for statistical analysis and benchmarking across the state and within individual institutions.
- Data for local, state and federal reporting requirements, such as Joint Commission on Accreditation of Healthcare Organizations Health Plan Employer Data and Information Set.
- Documentation to successfully compete for foundation, state, and federal dollars.
- Reporting system that could easily generate and integrate required local, state, and federal reports.
- Increased accuracy of data submission by eliminating duplicate entry.

CONCLUSION

This position statement describes the current perinatal data system; defines the criteria for a desired, ideal system of data collection, analysis, and linkage; and names the benefits of such a system. In addition, the position statement is a vehicle for gaining support from others. To that end the WAPC Perinatal Data Committee sought official endorsement from major organizations and groups. The most current list of endorsing groups can be found on the WAPC website at www.perinatalweb.org.

The benefits of collecting, analyzing, and using clinical information about mothers and infants include: Clear and timely aggregate health information for statistical analysis and benchmarking across the state and within individual institutions.



Assembly Bill 124

Liz Nelson, Manager Community Health Education and Breastfeeding Support Services

Current Legislation

FEDERAL

- 1. H.R. 285 (Carolyn Maloney) Protects a woman's right to express breast milk at work, provides tax incentives to employers, and regulates standards for breast pumps. *Introduced*
- 2. H.R. 256 (Olympia Snow) Amends Pregnancy Discrimination Act to include breastfeeding, protecting the right to express breast milk at work. *Introduced*

STATE

- 1. **ILLNOIS**: (SB0542) Requires reasonable break time to express breast milk and requires employers to make reasonable efforts to provide a private room, other than a toilet stall for an employee to express milk. *Passed the Senate on 4/4/01, must still go to House.*
- 2. **MINNESOTA**: Laws enacted in 1997 and 1998 require employers to provide reasonable, unpaid break time each day for an employee to express breastmilk and reasonable space other than a toilet stall.
- 3. 5 states and Puerto Rico have passed workplace breastfeeding legislation. 4 states including Wisconsin, have introduced workplace legislation.

Meriter Hospital, Inc 202 S. Park Street

Madison WL 53715 Corporation/UCLA Data

- Demographics: 38,000 employees, 80% women, average age of 35
- Initiated a Working well moms program that offers lactation rooms and pumps at over 250 sites.
 Lactation professionals before support mothers and after birth and are supplied with a carrying
 case and pumping supplies. Annual program cost = \$80,000. (\$200 per each participating
 employee.)
- Cigna reveals a \$240,000 cost savings in healthcare costs for breastfeeding moms and babies
- Found breastfed babies require 62% fewer prescriptions for a substantial savings on pharmacy costs
- Save an additional \$60,000 per year through reduced absenteeism.
- 70% of mothers enrolled, were still nursing at 6 months (national average 20%) and 36% were nursing at one year (national average10%)
- CIGNA officials recognized that encouraging mothers to breastfeed has positively affected mothers, babies, and the company.

Expressing breastmilk

- The physiology of lactation requires mothers, away from their babies, express milk routinely and frequently (about every 3-4 hours) in order to maintain an adequate milk supply.
- When a mother uses a double hospital-grade breast pump, she purchases her own kit to use. The pump is a multi-user product, and there is no risk of cross contamination.
- Breastmilk can be stored in a small cooler with ice packs if a refrigerator is not available.

Review

- Research indicates that breastfeeding provides health, nutritional, immunologic, developmental, psychological, social, economic, and environmental advantages for babies. All advantages are unmatched by formula feeding.
- Legislation provides increased societal support and reduces obstacles that prevent mothers from breastfeeding when they return to work.

Resources

- Meriter Hospital Breastfeeding Support Services, <u>Inelson@meriter.com</u>, 267-6990
- www.breastfeeding.com

2001 Session FISCAL ESTIMATE FORM LRB# 01-1929/1 INTRODUCTION # **⊠** ORIGINAL ☐ UPDATED AB-124 ☐ CORRECTED ☐ SUPPLEMENTAL Admin. Rule # Income and Franchise Tax: Credit for Businesses That Equip a Facility for Employees to Pump and Store Breast Milk Fiscal Effect State: No State Fiscal Effect Check columns below only if bill makes a direct appropriation or affects a sum sufficient appropriation Within Agency's Budget ☐ Yes ☒ No ☐ Increase Existing Revenues Increase Existing Appropriation **Decrease Existing Revenues Decrease Existing Appropriation** ☐ Decrease Costs Create New Appropriation Local: No Local Government Costs ☐ Increase Revenues 5. Types of Local Governmental Units Affected: ☐ Towns ☐ Villages ☐ Cities ☐ Permissive ☐ Mandatory ☐ Permissive ☐ Mandatory ☐ Counties ☐ Others ☐ Decrease Revenues ☐ School Districts ☐ WTCS Districts ☐ Permissive ☐ Mandatory ☐ Permissive ☐ Mandatory Affected Ch. 20 Appropriations **Fund Sources Affected** ☐ GPR ☐ FED ☐ PRO ☐ PRS ☐ SEG ☐ SEG-S 20.566 (1)(a) Assumptions Used in Arriving at Fiscal Estimate: The draft would provide a nonrefundable income and franchise tax credit for a business to construct or equip a breast-milk facility. The credit would be for 50% of the employer's costs, not to exceed \$10,000 in a taxable year. Under the draft, a breast-milk facility must be a private location that has a clean water source. a sink and equipment for the pumping and storage of breast milk. The facility must be used exclusively by employees to pump and store breast milk during their working hours. Although costs of providing a facility would vary from business structure to business structure, it is assumed for the purposes of this fiscal estimate that an average cost would be \$7,500. This cost estimate includes constructing and finishing walls, floor, and ceiling, bringing in water and electricity, purchasing a high grade breast milk pump, a small refrigerator and a chair, and making it compliant with requirements in the 1990 Americans with Disability Act. Based on Department data, approximately 75% of credits claimed are used in a given year. The number of employers that would provide this facility and claim a credit is unknown. However, if 100 employers provided a breast milk facility at an average cost of \$7,500, the fiscal effect would be about \$280,000 (\$7,500 x 50% x 100 x 75%). The actual fiscal effect would vary depending upon actual costs to construct and equip a facility and the number of employers providing the facility in a fiscal year. If 100 employers received the maximum credit, the annual fiscal effect of providing breast milk facilities would be \$750,000 (\$10,000 x 100 x 75%). Department costs for administering the bill would be \$94,500 for onetime processing and computer audit programming costs and \$3,000 annually thereafter. The draft does not provide funding for these costs. Long-Range Fiscal Implications: Date Authorized Signature/Telephone No. Agency/Prepared by: (Name & Phone No.) Years & Bran 2/9/01 Yeang-Eng Braun Wisconsin Department of Revenue

(608) 266-2700

Pam Walgren (608) 266-7817

FISCAL ESTIMATE	WORKSHEET	Detailed Estimate of Annu	ual Fiscal Effect	2001 Session
☐ ORIGINAL	☐ UPDATED	LRB # 01-1929/1 Admin. Rule #		Admin. Rule #
☐ CORRECTED	SUPPLEMENTAL	INTRODUCTION #	AB-124	
Subject Income and Fra Store Breast Mi		Businesses That Equip a	Facility for Employee	es to Pump and
I. One-Time Costs or Revo	enue Impacts for State and/o	or Local Government (do not inclu	de in annualized fiscal effe	ct):
One time costs of \$94,	500.			
II. Annualized Costs:			Annualized Fiscal impac	t on State funds from:
A. State Costs by Categor State Operations - Salari			Increased Costs \$ 3,000	Decreased Costs
(FTE Position Changes)			(FTE)	(- FTE)
State Operations-Other	Costs	·		-
Local Assistance				-
Aids to Individuals or O	rganizations	·		•
TOTAL State Costs	s by Category		\$ 3,000	\$ -
B. State Costs by Source GPR	of Funds		Increased Costs	Decreased Costs
FED				-
PRO/PRS				-
SEG/SEG-S				4-
III. State Revenues - Compreve	plete this only when proposa nues (e.g., tax increase, decr	il will increase or decrease state ease in license fee, etc.)	Increased Rev.	Decreased Rev.
GPR Taxes	·		\$	\$ - see text
GPR Earned				-
FED		•		-
PRO/PRS				-
SEG/SEG-S			·	-
TOTAL State Reve	enues		\$	\$ - see text
	NE	T ANNUALIZED FISCAL IMPACT		
		STATE		LOCAL
NET CHANGE IN COSTS		\$ +3,000		
NET CHANGE IN REVENU	JES	\$ -see text		
;	- 51 N - \	Authorized Signature/Telephon	e No.	Date
Agency/Prepared by: (Na				2/9/01
Wisconsin Department of	Revenue	-	ang by Scan	+ 214/01
Pam Walgren (608) 266-78	317	(608) 266-2700		