



# House of Representatives

## File No. 725

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January Session, 2023 **(Reprint of File No. 414)**

Substitute House Bill No. 6819  
As Amended by House Amendment  
Schedule "A"

Approved by the Legislative Commissioner  
May 5, 2023

### ***AN ACT CONCERNING LACTATION CONSULTANTS.***

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective from passage*) (a) As used in this section,  
2 "lactation consultant" means a person who holds and maintains  
3 certification in good standing as an international board certified  
4 lactation consultant with the International Board of Lactation  
5 Consultant Examiners.

6 (b) On or before January 1, 2024, and annually thereafter, the  
7 Commissioner of Public Health shall obtain from the International  
8 Board of Lactation Consultant Examiners a listing of all state residents  
9 maintained on said board's registry of international board certified  
10 lactation consultants. The commissioner shall post such listing on the  
11 Department of Public Health's Internet web site.

12 Sec. 2. (*Effective from passage*) (a) There is established a task force to  
13 study licensure of lactation consultants, as defined in section 1 of this

14 act, by the Department of Public Health. Such study shall include, but  
15 need not be limited to, licensure qualifications and whether the  
16 department should license or certify persons who provide lactation  
17 counseling services under a different title, including, but not limited to,  
18 certified lactation counselor, certified lactation educator or peer  
19 counselor, and hold and maintain certification in good standing as a  
20 lactation counselor with the Academy of Lactation Policy and Practice.

21 (b) The task force shall consist of the following members:

22 (1) Two appointed by the speaker of the House of Representatives,  
23 one of whom is a lactation consultant with expertise in clinical care in a  
24 community setting and one whom is a representative of the Connecticut  
25 chapter of a national academy of pediatric physicians;

26 (2) Two appointed by the president pro tempore of the Senate, one of  
27 whom is a representative of a medical society in the state and one of  
28 whom is a representative of the Connecticut chapter of a national college  
29 of obstetricians and gynecologists;

30 (3) Two appointed by the majority leader of the House of  
31 Representatives, one of whom is a representative of a national alliance  
32 of lactation consultants and one of whom is a representative of a  
33 federally qualified health center in the state;

34 (4) Two appointed by the majority leader of the Senate, one of whom  
35 is a representative of an association of community health centers in the  
36 state and one of whom is a representative of a nonprofit organization  
37 that supports research, leads programs and provides education and  
38 advocacy concerning the health of mothers and children in the state;

39 (5) Two appointed by the minority leader of the House of  
40 Representatives, one of whom is a representative of an entity in the state  
41 that provides lactation consultant services and one of whom is a  
42 hospital-based health care provider;

43 (6) Two appointed by the minority leader of the Senate, one of whom

44 is a representative of an entity in the state that provides lactation  
45 consultant services through telehealth and one of whom is a nurse-  
46 midwife licensed pursuant to chapter 377 of the general statutes;

47 (7) The chairpersons and ranking members of the joint standing  
48 committee of the General Assembly having cognizance of matters  
49 relating to public health, or the chairpersons' and ranking members'  
50 designees;

51 (8) The Commissioner of Public Health, or the commissioner's  
52 designee;

53 (9) The Commissioner of Social Services, or the commissioner's  
54 designee;

55 (10) The executive director of the Office of Health Strategy, or the  
56 executive director's designee; and

57 (11) The Medicaid and Health Services Director of the Department of  
58 Social Services, or the director's designee.

59 (c) Any member of the task force appointed under subdivision (1),  
60 (2), (3), (4), (5), (6) or (7) of subsection (b) of this section may be a member  
61 of the General Assembly.

62 (d) All initial appointments to the task force shall be made not later  
63 than thirty days after the effective date of this section. Any vacancy shall  
64 be filled by the appointing authority.

65 (e) The speaker of the House of Representatives and the president pro  
66 tempore of the Senate shall select the chairpersons of the task force from  
67 among the members of the task force. Such chairpersons shall schedule  
68 the first meeting of the task force, which shall be held not later than sixty  
69 days after the effective date of this section.

70 (f) The administrative staff of the joint standing committee of the  
71 General Assembly having cognizance of matters relating to public  
72 health shall serve as administrative staff of the task force.

73 (g) Not later than January 1, 2024, the task force shall submit a report  
74 on its findings and recommendations to the joint standing committee of  
75 the General Assembly having cognizance of matters relating to public  
76 health, in accordance with the provisions of section 11-4a of the general  
77 statutes. The task force shall terminate on the date that it submits such  
78 report or January 1, 2024, whichever is later.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>from passage</i>	New section
Sec. 2	<i>from passage</i>	New section

*The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.*

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### **OFA Fiscal Note**

**State Impact:** None

**Municipal Impact:** None

### **Explanation**

The bill as amended does not result in a fiscal impact to the State or municipalities.

**Section 1**, which requires the Department of Public Health to obtain a listing of all Connecticut residents on the International Board of Lactation Consultant Examiners' registry of board-certified lactation consultants, and post it on the agency's website, does not result in a fiscal impact to the State or municipalities.

**Section 2**, which creates a task force to study the licensure of lactation consultants, does not result in a fiscal impact to the State or municipalities as the task force has the expertise to meet these requirements.

House "A" makes clarifying changes to Section 1 of the bill and alters task force membership in Section 2 of the bill, which does not result in a fiscal impact to the State or municipalities.

### **The Out Years**

**State Impact:** None

**Municipal Impact:** None

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**OLR Bill Analysis****sHB 6819 (as amended by House "A")\******AN ACT CONCERNING LACTATION CONSULTANTS.*****SUMMARY**

This bill requires the Department of Public Health (DPH) to obtain from the International Board of Lactation Consultant Examiners a list of all Connecticut residents on the board's registry of certified lactation consultants. The commissioner must do this annually, starting by January 1, 2024, and post the list on the DPH website.

The bill also creates a 20-member task force to study DPH lactation consultant licensure, including (1) licensure qualifications and (2) if DPH should license or certify those who provide services under a different title (e.g., certified lactation counselors, certified lactation educators, or peer counselors) who are certified in good standing by the Academy of Lactation Policy and Practice.

The task force must report its findings and recommendations to the Public Health Committee by January 1, 2024. It terminates on this date or when it submits the report, whichever is later.

Lactation consultants are healthcare professionals who specialize in the clinical management of breastfeeding (e.g., low milk production, latching difficulties, or painful nursing). Connecticut does not currently certify or license these professionals.

\*House Amendment "A" (1) requires the task force to study the licensure of other professionals who provide services under a different title, instead of only lactation counselors, and (2) increases the task force membership from nine to 20, and specifies their required qualifications.

EFFECTIVE DATE: Upon passage

## LACTATION CONSULTANT LICENSURE TASK FORCE

### **Membership**

Under the bill, task force members include the following eight state officials or their designees: the (1) DPH and Department of Social Services (DSS) commissioners, (2) chairpersons and ranking members of the Public Health Committee, (3) Office of Health Strategy executive director, and (4) DSS Medicaid and Health Services director. It also includes the following 12 appointed members listed in the table below.

**Table: Task Force Member Appointments and Qualifications**

<b><i>Appointing Authority</i></b>	<b><i>Member Qualifications</i></b>
House speaker	<ul style="list-style-type: none"> <li>• one lactation consultant with expertise in clinical care in a community setting</li> <li>• one representative of the Connecticut chapter of a national academy of pediatric physicians</li> </ul>
Senate president pro tempore	<ul style="list-style-type: none"> <li>• one representative of a Connecticut medical society</li> <li>• one representative of the Connecticut chapter of a national college of obstetrics and gynecologists</li> </ul>
House majority leader	<ul style="list-style-type: none"> <li>• one representative of a national alliance of lactation consultants</li> <li>• one representative of a federally qualified health center in Connecticut</li> </ul>
Senate majority leader	<ul style="list-style-type: none"> <li>• one representative of a community health center association in Connecticut</li> <li>• one representative of a nonprofit that supports research, leads programs, and provides education and advocacy on maternal and children's health in Connecticut</li> </ul>
House minority leader	<ul style="list-style-type: none"> <li>• one representative of an entity in Connecticut that provides lactation consultant services</li> <li>• one hospital-based health care provider</li> </ul>
Senate minority leader	<ul style="list-style-type: none"> <li>• one representative of a Connecticut entity that provides lactation consultant services</li> </ul>

	via telehealth • one state-licensed nurse-midwife
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Under the bill, appointed members may be legislators. Appointing authorities must make their initial appointments within 30 days after the bill’s passage and fill any vacancy.

**Leadership and Meetings**

The bill requires the House speaker and the Senate president pro tempore to select the task force chairpersons from among its members. The chairpersons must schedule the task force’s first meeting, which must be held within 60 days after the bill’s passage.

Under the bill, the Public Health Committee’s administrative staff serve in that capacity for the task force.

**COMMITTEE ACTION**

Public Health Committee

Joint Favorable Substitute

Yea 37    Nay 0    (03/20/2023)