Employee’s Guide to Breastfeeding and Working

During Pregnancy
- Pregnancy is the best time to prepare for breastfeeding and returning to work.
- Attend prenatal classes available at your hospital, workplace, WIC clinic, or private physician clinic.
- Attend La Leche League meetings to learn more about how to combine breastfeeding and employment.
- Talk with your supervisor to discuss your plans to breastfeed. Find out if your company provides a lactation support program for employees and, if not, ask about private areas where you can comfortably and safely express milk.
- Ask the lactation program director, your supervisor, wellness program director, employee human resources office, or other coworkers if they know of other women at your company who have breastfed after returning to work. Find out their tips for making it work including finding an affordable electric breast pump.

During the First Weeks of Your Baby’s Life
- Get a good start in the hospital by putting your baby to the breast within the first hour after birth, and at least 8-12 times every 24 hours. This will help you establish a good milk supply for when you return to work. Your first milk (colostrum) is packed with antibodies that help protect your baby from illness.
- Your milk is perfect for your baby’s needs, even though it may seem you are not making much the first few days. Your baby’s stomach is very small at first (only the size of a large marble!) and only holds 1-2 teaspoons, so the baby doesn’t need much! Between days 2-5 your body will begin making larger volumes of milk.
- Ask the hospital for names of people you can call if you have questions about breastfeeding.
- The first few weeks after childbirth are a learning time for you and your baby. Use these important weeks to rest and take care of yourself and your baby.
- Watch for signs that your baby is getting plenty of milk. By day 5, baby should have around four to six wet diapers and three to four yellow, seedy stools every 24 hours.
- Avoid using bottles or pacifiers for the first 3-4 weeks as this may decrease milk supply. A lactation consultant can help you know you are making plenty of milk, and provide information on other ways to comfort your baby.
- If you and your baby need to be apart, you can express your milk manually or with a breast pump to keep up your milk supply, and refrigerate or freeze your milk to give to your baby later.

During Pregnancy Leave
- Take as many weeks off as you can. Ideally, at least 6 weeks helps you recover from childbirth and establish strong breastfeeding techniques. Twelve weeks is even better.
- Focus on your baby during this time and make time to rest 20-30 minutes every few hours. Housework can wait or be taken on by other family and friends.
- Practice expressing your milk by hand or with a quality breast pump, and freeze 1-2 ounces at a time to save for your baby after you return to work. This also helps you build a greater milk supply. Pick times of the day when you seem to have the most milk. For many women, this is early in the morning. Some women express milk during or after their baby nurses since the milk has already “let down” and flows easily.
- Be patient with yourself. It takes time for both you and your baby to adjust to your new lives together. Follow your baby’s cues for when and how long to breastfeed, and enjoy this special time together!
- Help your baby adjust to taking breast milk from a bottle (or cup for infants 3-4 months old) shortly before you return to work. Because babies are used to nursing with mom, they usually drink from a bottle or cup when offered by somebody else!
- Talk with your family and your childcare provider about your progress, questions, and intent to continue breastfeeding, and let them know you are counting on their support and help.
Back at Work

Return to Work Gradually
This gives you more time to adjust and helps your body make a good supply of milk. Talk with your supervisor about options that have worked for different women:

- Start back to work part-time for a brief period before working full-time.
- Work from home or combine working at home and at work.
- Go back to work on a Thursday or Friday or just before 1-2 days off, depending on your work week. This gives you and your baby a shorter period to adjust to being away from each other before you go back full-time.
- Take Wednesdays off for a few weeks for a mid-week break, and breastfeed on your baby’s schedule to rebuild your milk supply.
- Work a split shift, with a long break in the middle of the day to go home and be with your baby. This can work well for restaurant workers.
- Consider using childcare close to work so you can visit and breastfeed your baby, if feasible, based on your work schedule.
- When you arrive to pick up your baby from childcare, take time to breastfeed first. This will give you both time to reconnect before traveling home and returning to other family responsibilities.

Get a Quality Breast Pump
A good quality electric breast pump may be your best strategy for efficiently removing milk during the workday. Contact your local hospital, WIC, or Public Health Department to find where to buy or rent a good pump. Electric pumps that allow you to express milk from both breasts at the same time reduce pumping time!

Identify a Private Place to Express Milk
Work with your supervisor to determine a private place to express your milk. Many companies provide a lactation program with a dedicated private lactation room for expressing milk.

- If, during pregnancy, you find out that your company does not provide a private lactation room, identify a temporary private area you can use. Ideas: an employee office with a door for privacy, conference room, or a little-used closet or storage area. The basic essentials are that the room is private and can be secure from intruders when in use, and an electrical outlet if you are using an electric breast pump.
- Explain to your supervisor that it is best not to express milk in a restroom. Restrooms are unsanitary and there are usually no electrical outlets. It can also be difficult to manage a pump in a toilet stall.

When to Express Milk
Express milk for 10-15 minutes approximately 2-3 times during a typical 8-hour work period. Remember that in the first months of life babies need to breastfeed 8-12 times in 24 hours. So you need to express and store milk during those usual feeding times when you are away from your baby. This will maintain a sufficient amount of milk for your childcare provider to feed your baby while you are at work. The number of times you need to express milk at work should be equal to the number of feedings your baby will need while you are away. As the baby gets older, the number of feeding times may decrease. When babies are around 6 months old and begin solid foods, they often need to feed less often. Many women take their regular breaks and lunch period to pump. Others talk with their supervisor about coming in early and/or staying late to make up the time needed to express milk. It usually takes 15 minutes to express milk, plus time to get to and from the lactation room.
Sample Pumping Schedule at Work

Traditional 8-hour work period

8:00 a.m.  Begin work
9:45-10:00  Use break to express milk
12:00 noon  Take allowed lunch period to express milk
2:30-2:45  Use break to express milk
5:00 p.m.  Leave work

Secrets to Getting the Milk to Flow

Pumping is easiest when the milk “lets down” through the milk ducts. Massage your breasts, and gently rub your nipples. Relax! As you breathe out, visualize the milk flowing down. Think about your baby! Bring a photo of your baby, or a favorite blanket or article of clothing that smells like your baby. Some mothers bring a tape recording of their baby’s voice to help the milk start flowing.

Storing your Milk

Because your milk is full of antibodies that fight germs and bacteria, it can be safely stored and given to the baby later. Breast milk is food, so it is safe to keep in an employee refrigerator or a cooler with ice packs. Discuss with your supervisor the best place for you to store your milk. If you work in a medical department, do not store milk in the same refrigerators where medical specimens are kept. Be sure to label the milk container with your name and the date you expressed the milk.

<table>
<thead>
<tr>
<th>Refrigerated 32-39°F or below</th>
<th>Frozen (freezer with a door separate from the refrigerator) 0°F or below</th>
<th>Thawed (from frozen) and refrigerated 32-39°F or below</th>
</tr>
</thead>
<tbody>
<tr>
<td>Use within 2 days</td>
<td>Use within 3 months</td>
<td>Use within 24 hours</td>
</tr>
</tbody>
</table>

Figure 1 Opinions differ as to the amount of time breast milk can be safely stored. The storage times listed here are consistent with the recommendations of the American Academy of Pediatrics.

Getting Support for Breastfeeding

"I am very grateful to my employer for caring enough for their associates to make continuing to breastfeed after I return to work much easier!"

Breastfeeding Employee
Home Depot, Atlanta, GA

Approaching your Supervisor

- Most employers are happy to provide the support you need, as long as they know what your needs are and how important it is for you to have their support. If your company does not have a breastfeeding support program, it could be that nobody has asked for one!
- Breastfeeding is the healthiest choice for your baby, resulting in fewer illnesses, infections, and certain types of skin irritations (dermatitis). It also helps you recover from pregnancy, and may reduce your risk of breast cancer. Be sure to discuss these important reasons to breastfeed with your supervisor.
- Your supervisor may not know what you need to continue breastfeeding. Simply explain your basic needs for privacy and flexible breaks to express milk. Use the sample letter on page 6 of this booklet.
- Show how meeting your breastfeeding needs will benefit the company.
- Employees are less likely to miss work to take care of a sick baby because the baby is healthier. (This is true for moms and dads.)
- Health care costs are lower since both baby and mother are healthier.
- Employees who receive support for breastfeeding are happier and more productive.
Explain that you are committed to keeping the milk expression area clean when you are through, storing your milk properly, and not taking longer than necessary for milk expression breaks.

Be prepared! Consider possible concerns your supervisor might have. *(See Figure 2)*

Be a team member. Be sensitive to the issues that are important to your company, and show how supporting your efforts to breastfeed can help both of you accomplish your goals.

Be sure to show your appreciation for efforts made by your supervisor to support your breastfeeding.

<table>
<thead>
<tr>
<th>What you may hear</th>
<th>What you can do</th>
</tr>
</thead>
<tbody>
<tr>
<td>“We have no space for a pumping area.”</td>
<td>• Look around and find a space that you are willing to use</td>
</tr>
<tr>
<td></td>
<td>• Remind supervisor how small a space is needed (even a 4’x5’ space can work!)</td>
</tr>
<tr>
<td>“The other employees might complain if you take time to do this.”</td>
<td>• Encourage coworkers to learn about the benefits of breastfeeding to your and your baby’s health</td>
</tr>
<tr>
<td></td>
<td>• Remind them that this is a temporary need for you and your baby, and that you will use your approved breaks</td>
</tr>
<tr>
<td>“If we do this for one person, we might have to do this for others, too.”</td>
<td>• Remind supervisors that supporting breastfeeding benefits the company</td>
</tr>
<tr>
<td></td>
<td>• Remind supervisor of other company approved breaks, such as smoking or exercise, if offered</td>
</tr>
</tbody>
</table>

*Figure 2*

**Dealing with Coworkers**

- Seek to understand coworker concerns and work together to find solutions.
- Let coworkers know that breastfeeding is not only the healthiest choice for you and your baby, it also helps lower the company’s health care costs.
- If other workers do not understand the breaks you are taking to express milk, remind them you are using allowed breaks and making up any additional time you miss.

**Find Other Breastfeeding Mothers**

- Seek out other breastfeeding mothers at work and share experiences and tips through e-mail or even a monthly lunchtime mothers’ support meeting. If there are no other breastfeeding women at work, ask your local hospital for information about local mothers’ groups.
Continuing to breastfeed when you return to work is a great decision. Your employer and your doctor support your choice, because breastfeeding is good for the health of both mothers and babies, and can save money for both families and employers.

Combining nursing and working, however, is still a new idea for many people. You may find that people at work and elsewhere ask questions about why and how you manage to nurse your baby while working outside your home. Here are a few ways in which you can help them understand and support your decision.

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Why is it so important that you feed your baby breast milk instead of formula?</td>
<td>By breastfeeding my baby, I am doing my best for my baby, myself, and my employer. Mothers of breastfed babies often miss less work, because their babies are sick less. Breastfeeding also helps keep mothers healthier. When employees and their families are healthy, employers have lower medical costs. Buying infant formula and other things I need for my baby is expensive. Breastfeeding helps save my family money.</td>
</tr>
<tr>
<td>How much time off do you need to pump?</td>
<td>I need the same amount of time every employee takes for breaks, about 20 minutes every 3 hours.</td>
</tr>
<tr>
<td>Why can’t you use the women’s restroom to pump?</td>
<td>Because I am preparing food for my baby, I require a sanitary place in which to pump.</td>
</tr>
<tr>
<td>For how long will you need to pump your milk three times a day?</td>
<td>I plan to pump until my baby is older. She is 3 months old now; so, in a few months when she starts eating other foods, I will probably pump less.</td>
</tr>
<tr>
<td>How can we set up a schedule for employees who pump without lowering productivity?</td>
<td>Those of us using the lactation space can set up a schedule that lets each person pump when she needs to pump. If we know when the space is free, we can focus on our work until it’s our turn to use the space. Also, pumping schedules will change as our babies grow. We can communicate with each other directly when we need to adjust our schedules. Perhaps if an employee was designated as a “floater,” responsible for stepping in for 15 to 20 minutes whenever another employee needs to pump, we can ensure that pumping breaks do not reduce productivity.</td>
</tr>
<tr>
<td>What does a lactation space need?</td>
<td>The lactation area needs a small table and a chair with a straight back. Privacy is necessary—either a small room with a door that locks or a section of a room with a high divider. It should have an electrical plug or an extension cord that can reach a plug somewhere else. It should have a sink with running water or have a sink nearby. It should have some way to keep the milk cold—a refrigerator or personal freezer bag. It also is helpful to have a clock to keep track of the time and a mirror to fix one’s clothes after pumping.</td>
</tr>
</tbody>
</table>

Remember: Confidence in your decision and knowledge about the benefits of breastfeeding will change minds!

Source: Adapted from the Corporate Voices for Working Families toolkit.
When to Express Milk
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Sample Pumping Schedule at Work
Traditional 8-hour work period:

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<th>Activity</th>
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<tr>
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<td>Begin work</td>
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<td>Use break to express milk</td>
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<td>5:00 p.m.</td>
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Storing Your Milk
Because your milk is full of antibodies that fight germs and bacteria, it can be safely stored and given to the baby later. Breast milk is food, so it is safe to keep in an employee refrigerator or a cooler with ice packs. Discuss with your supervisor the best place for you to store your milk. If you work in a medical field, do not store milk in the same refrigerators as medical specimens. Be sure to label the milk container with your name and the date you expressed the milk.

Storage Duration of Fresh Human Milk for Use with Healthy Full Term Infants

<table>
<thead>
<tr>
<th>Location</th>
<th>Temperature</th>
<th>Duration</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Countertop, table</td>
<td>Room temp (up to 77°F or 25°C)</td>
<td>6-8 hours</td>
<td>Containers should be covered and kept as cool as possible; covering the container with a cool towel may keep milk cooler.</td>
</tr>
<tr>
<td>Insulated cooler bag</td>
<td>5-39°F or -15-4°C</td>
<td>24 hours</td>
<td>Keep ice packs in contact with milk containers at all times, limit opening cooler bag.</td>
</tr>
<tr>
<td>Refrigerator</td>
<td>39°F or 4°C</td>
<td>5 days</td>
<td>Store milk in the back of the main body of the refrigerator.</td>
</tr>
<tr>
<td>Freezer compartment of a refrigerator</td>
<td>5°F or -15°C</td>
<td>2 weeks</td>
<td>Store milk toward the back of the freezer, where temperature is most constant. Milk stored for longer durations in the ranges listed is safe, but some of the lipids in the milk undergo degradation resulting in lower quality.</td>
</tr>
<tr>
<td>Freezer compartment of refrigerator with separate doors</td>
<td>0°F or -18°C</td>
<td>3–6 months</td>
<td></td>
</tr>
<tr>
<td>Chest or upright deep freezer</td>
<td>-4°F or -20°C</td>
<td>6–12 months</td>
<td></td>
</tr>
</tbody>
</table>

### Community Resources
- **San Diego County Breastfeeding Coalition**
  [www.breastfeeding.org](http://www.breastfeeding.org)
- **La Leche League of San Diego County**
- **WIC Program**
  (USDA Special Supplemental Nutrition Program for Women, Infants, and Children)
- **International Lactation Consultant Association**
  [www.ilca.org](http://www.ilca.org)

### Resources for Employers - Materials

#### U.S. Government Agencies
- **U.S. Department of Health and Human Services**
  Health Resources and Services Administration (HRSA)
  Maternal and Child Health Bureau (MCHB)
- **U.S. Department of Health and Human Services/Office on Women's Health**
- **U.S. Centers for Disease Control and Prevention (CDC)**

#### National and International Organizations
- **American Association of Health Plans**
- **Healthy Mothers/Healthy Babies Coalition**
- **National Business Group on Health**
  [http://www.businessgrouphealth.org/](http://www.businessgrouphealth.org/)
- **United States Breastfeeding Committee**
  [www.usbreastfeeding.org](http://www.usbreastfeeding.org)

### Resources for Mothers - Materials

#### U.S. Department of Health and Human Services/Office on Women’s Health
- [www.womenshealth.gov/breastfeeding/](http://www.womenshealth.gov/breastfeeding/)
- **March of Dimes**

### Resources for Mothers – Materials (Web Based)
- **Breastfeeding Partners (California State WIC Program)**
  [www.cdph.ca.gov/programs/wicworks/Pages/WICBreastfeeding.aspx](http://www.cdph.ca.gov/programs/wicworks/Pages/WICBreastfeeding.aspx)
- **KellyMom.com**
- **La Leche League International**
  [www.lli.org/](http://www.lli.org/)
- **Working and Pumping**
  [www.workandpump.com/](http://www.workandpump.com/)
- **Text4Baby**
  [https://www.text4baby.org/](https://www.text4baby.org/)

### Breast Pump Manufacturers
- **Ameda**
  [www.amedacom](http://www.amedacom)
- **Medela, Incorporated**
- **Limerick** (Pump Manufacturer and Workplace professional lactation support)
  [www.limerickinc.com](http://www.limerickinc.com)
- **Hygeia**

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These lists of organizations and manufacturers are provided as examples only. Mention of trade names, commercial practices, or organizations in this publication does not imply endorsement.
FEDERAL SUPPORT FOR BREASTFEEDING

For nearly all infants, breastfeeding is the best source of infant nutrition and immunologic protection, and provides remarkable health benefits to mothers as well (2011, Surgeon General, Call to Action).

Recognizing the health benefits of breastfeeding, the Patient Protection and Affordable Care Act of 2010 (ACA) provides two major provisions to encourage mothers to achieve their breastfeeding goals: (1) reasonable break time to express milk and (2) health insurance benefits to defray the costs associated with providing breast milk to infants, including coverage of breastfeeding education and supplies in non-grandfathered health insurance plans. Prior to the ACA, the IRS agreed to include breastfeeding supplies as an eligible expense for health savings accounts (HSAs) and flexible spending accounts (FSAs) based on the successful advocacy of the American Academy of Pediatrics (AAP).

The purpose of this document is to provide information on ACA federal breastfeeding benefits and guidance on common access questions.

Patient Protection and Affordable Care Act of 2010 (ACA)

❖ Reasonable Break Time for Nursing Mothers

Section 4207 of the ACA requires employers with 50 or more employees to provide reasonable break time and a private, non-bathroom space for nursing mothers to express breast milk during the workday for up to one year after the child’s birth. The new requirements became effective when the ACA was signed into law on March 23, 2010.

The current law only applies to non-exempt employees in jobs that are covered by the overtime provisions of the Fair Labor Standards Act (FLSA).

Twenty-four states, Puerto Rico, and the District of Columbia also have policies supporting breastfeeding in the workplace. Currently, advocates are working to extend the reasonable break time allowance to exempt employees (salaried employees) and to expand Civil Rights Act of 1964 to protect breastfeeding women from being fired or discriminated against in the workplace.

For more information, you can go to the Department of Labor’s wage and hour division website at http://www.dol.gov/whd/nursingmothers/
**Women’s Preventive Services**

The ACA requires health insurance support for breastfeeding pump rental and breastfeeding educational services within Section 2713, which outlines the health insurance benefits under the Women’s Preventive Health Services provision.

Section 2713 benefits include: well-woman visits, gestational diabetes screening, human papilloma virus (HPV) testing, sexual transmitted infection (STI) counseling, human immunosuppressive virus (HIV) screening and counseling, contraception counseling, breastfeeding counseling and supplies and domestic violence screening and counseling. Coverage of women's preventive services in the ACA were based on consensus recommendations from the American Academy of Pediatrics (AAP), the American Academy of Family Physicians (AAFP) the American College of Obstetricians and Gynecologists (ACOG), and the Institute of Medicine and others based on scientific evidence of interventions that support optimal health, reduce health care costs and promote well-being across the life span. The following outlines specific federal ACA breastfeeding benefits and resources:

- **Coverage for breastfeeding education.** As announced in the Health Resources and Services Administration (HRSA) 2011 guidance, breastfeeding benefits for non-grandfathered health insurance plans include pre- and postnatal counseling by a trained provider in conjunction with each child. Women may access comprehensive lactation support and counseling from trained providers. The benefits are available at no cost share to consumers.

- **Breastfeeding supplies benefits.** The ACA requires non-grandfathered health insurance plans to cover the cost of breast pump rental and purchase at low or no cost to consumers.

- **Insurance Coverage.** The breastfeeding coverage applies to all health plans except grandfathered plans. Under the law, 23 preventive health services for women are to be covered with no copayment, co-insurance or deductible in non-grandfathered plans. Many private employers already cover these services. For more information about Women's Preventive Health Services visit [www.healthcare.gov](http://www.healthcare.gov).

- **The National Breastfeeding Helpline.** The National Breastfeeding Helpline from the U.S. Department of Health and Human Services' (HHS) Office on Women’s Health has trained breastfeeding peer counselors to provide support by phone. The counselors can help answer common breastfeeding questions. They can also help you decide if you need to see a doctor or lactation consultant. The Helpline (800-994-9662), is available for all breastfeeding mothers, partners, prospective parents, family members, and health professionals seeking to learn more about breastfeeding. The Helpline is open from Monday through Friday, from 9 a.m. to 6 p.m., EST. Help is available in English and Spanish.
FAQ: Frequently Asked Questions

How long after childbirth is a woman eligible for breastfeeding benefits?

Coverage of comprehensive lactation support and counseling and costs of renting or purchasing breastfeeding equipment extends for the duration of breastfeeding. For more information, please go to [http://www.hrsa.gov/womensguidelines/](http://www.hrsa.gov/womensguidelines/) for more information.

Does the ACA require coverage for the cost of purchasing breastfeeding supplies?

Yes. The law requires health insurance companies to cover the cost of renting breastfeeding supplies and the purchase of a pump.

My insurance company only covers the cost of a manual pump but I need an electric pump.

The ACA benefits allow for coverage of both electric pumps and manual pumps, if electrical pumps are not available. Cover includes one breast pump every three years. Also, the health care rules allow health insurers to retain flexibility over the types of breast pumps and supplies covered within their plans. However, insurers often follow the recommendations of doctors' recommendations on what is medically appropriate.

Pre-authorization from physicians may be necessary. For more information, contact your insurance company. Supplies of electrical breast pumps may be limited; therefore, prenatal women are encouraged to select and purchase breast pumps early.

What does the health care law say about lactation support?

Women's Preventive Services allows for low or no cost coverage of up to six counseling sessions by a qualified lactation expert.

Why does my health insurance plan not provide breastfeeding coverage?

All insurance companies do not currently provide benefits consistent with the ACA's requirements for Women's Preventive Services. The ACA allows plans in existence before the law's enactment (also known as "grandfathered plans") to remain largely unchanged. Employer health plans or those on the individual market in existence when the legislation was signed into law have been exempted from some, but not all, of the insurance reforms in the bill. This guarantee grew from the promise that Americans with health insurance could “keep the coverage they have.”

How do I know if my insurance plan follows the health care law?

The health reform law's breastfeeding coverage benefit applies to all health plans except for grandfathered plans. To understand your employer's health insurance plan status, speak to your human resources representative. That person should be able to tell you if your insurance plan covers breastfeeding services.

Federal authorities estimate that by 2013 about half of employer-sponsored plans will lose grandfather status because of significant changes made to the scope and cost of coverage. With the new rules in place, millions of children and families covered by these plans will receive the same protections under health reform as others newly signing up for coverage.
My insurance plan is non-grandfathered but I have been unable to access this benefit. What should I do?

If your insurance plan is a non-grandfathered plan, contact the insurance company directly. Make your insurance company aware of the benefit, follow up in writing highlighting the ACA benefits and requesting a written response.

One of the barriers for breastfeeding is the cost of purchasing or renting breast pumps and nursing related supplies. When contacting your insurance company, make sure to highlight this information.

**Online Resources:**
- AAP: [Section on Breastfeeding](#)
- AAP Breastfeeding resources: [Healthychildren.org](#)
- U.S. Surgeon General: [Call to Action on Breastfeeding/Factsheet](#)
- Healthcare.gov: [Pregnant Women and the Affordable Care Act](#)
- Affordable Care Act Rules on Expanding Access to Preventive Services for Women: [Fact Sheet](#)
Women’s Health and OB Preventive Services Covered by the Affordable Care Act

Any services below marked with an asterisk (*) may be covered at no cost to you by the Affordable Care Act for health insurance plans starting on or after August 1, 2012.

**Covered Preventive Women’s Health Services**

- Well-woman visits to obtain recommended preventive services*
- Domestic and interpersonal violence screening and counseling for all women*
- BRCA counseling about genetic testing for women at higher risk
- Breast Cancer Mammography screenings every 1 to 2 years for women over 40
- Breast Cancer Chemoprevention counseling for women at higher risk
- Cervical Cancer screening for sexually active women
- Contraception: Food and Drug Administration-approved contraceptive methods, sterilization procedures, and patient education and counseling, not including abortifacient drugs*
- Human Papillomavirus (HPV) DNA Test: high risk HPV DNA testing every three years for women with normal cytology results who are 30 or older*
- Osteoporosis screening for women over age 60 depending on risk factors
- Chlamydia Infection screening for younger women and other women at higher risk
- Sexually Transmitted Infections (STI) counseling for sexually active women*
- Gonorrhea screening for all women at higher risk
- Human Immunodeficiency Virus (HIV) screening and counseling for sexually active women*
- Tobacco Use screening and interventions for all women

**Covered Pregnancy Services**

- Anemia screening on a routine basis for pregnant women
- Bacteriuria urinary tract or other infection screening for pregnant women
- **Breastfeeding comprehensive support and counseling from trained providers, as well as access to breastfeeding supplies, for pregnant and nursing women***
- Folic Acid supplements for women who may become pregnant
- Gestational diabetes screening for women 24 to 28 weeks pregnant and those at high risk of developing gestational diabetes*
- Hepatitis B screening for pregnant women at their first prenatal visit
- Rh Incompatibility screening for all pregnant women and follow-up testing for women at higher risk
- Syphilis screening for all pregnant women or other women at increased risk
- Tobacco Use screening and interventions for all women, and expanded counseling for pregnant tobacco users
These California Laws Allow You to Take Time to Nurture your Child

**Six Key Laws for Parents**

**Pregnancy Disability Leave**

WOMEN WHO WORK FOR AN EMPLOYER WITH 5 OR MORE EMPLOYEES ARE ENTITLED TO UP TO 4 MONTHS OF PREGNANCY DISABILITY LEAVE.

**Family & Medical Leave Act (FMLA)/California Family Rights Act (CFRA)**

You may be entitled to 12 weeks of job-protected leave to bond with your new baby.

Male and female employees have the right to up to 12 weeks of leave to bond with a newborn baby, newly adopted or foster child. Bonding leave must be taken within the first 12 months of the child’s arrival in the home.

To be eligible for job-protected bonding leave, an employee must work for a company with 50 or more employees within a 75-mile radius, and the employee must have worked at least one year and 1,250 hours in the year prior to taking leave.

**Paid Family Leave Act**

Employees who pay into State Disability Insurance are entitled to up to 6 weeks of partial pay to bond with a new child or care for a child with a serious health condition.

The Paid Family Leave Act entitles eligible employees to receive partial pay while taking time off work to bond with a newborn baby, newly adopted or foster child within the first 12 months of the child’s arrival in the home. The benefits are available for up to 6 weeks each year.

Employees can also receive benefits if they must take time off work to care for a child, parent, spouse or domestic partner with a serious health condition.

**Sick Leave Use for Family Care**

If you earn paid sick leave, you are entitled to use half of the sick leave earned each year to care for sick family members.

Employers who provide paid sick leave are required to allow employees to use up to ½ of the sick leave accrued during a 12-month period to care for a sick child, parent, spouse or domestic partner.

To be eligible, an employee must be full or part-time employee with accrued sick leave.

**Family-School Partnership Act**

Parents who work for an employer with 25 or more employees at the same location are entitled to take time off work to attend a child’s school activities.

The Family-School Partnership Act allows parents to take unpaid time off work to participate in activities in their child’s elementary, middle or high school or licensed child care facility. School activities include field trips, parent-teacher conferences, and graduations. A parent may take up to 40 hours each year, but no more than 8 hours per month.

**Lactation Accommodation Laws**

Employed mothers have the right to break time and a private space to express breast milk for their babies.

Federal and California State laws protect a woman’s right to lactation accommodations. In California, all employers must provide breastfeeding mothers with break time and reasonable accommodations. The space should be private, free from intrusion, and in close proximity to the employee’s work area. The lactation room cannot be a bathroom stall. Breastfeeding mothers can use their regular paid breaks.

If an employed mother needs more time, employers must give them the additional break time, but it may be unpaid.

**For more information call:**

The Legal Aid Society – Employment Law Center: 1-800-880-8047 Work and Family Helpline • Equal Rights Advocates: 1-800-839-4372

For information on how to get involved in expanding family leave rights in California, contact the California Work and Family Coalition at 510-844-7088 or on line at www.workfamilyca.org. This publication is intended to provide accurate information regarding the legal rights of California employees. However, do not rely on this information without consulting an attorney or the appropriate government agency.

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1. EARLY CUES: “I’m hungry”
- Stirring
- Mouth opening
- Turning head
- Seeking/rooting

2. MID CUES: “I’m really hungry”
- Stretching
- Increasing movement
- Hand to mouth

3. LATE CUES: “Calm me, then feed me”
- Crying
- Lots of movement
- Color turning red

CALM CRYING BABY BEFORE FEEDING
- Cuddling, Skin-to-skin on chest
- Talking, Stroking

LOOK FOR EARLY FEEDING CUES
Many mothers have to be away from their babies because of work or school. This can make it harder to continue breastfeeding. Choosing a child care provider who is supportive of breastfeeding is an important part of making it easier to be away from your baby.

Take this checklist with you, and ask the child care center:

• Do they support your desire to continue feeding your baby your milk?
• Is there a place where you can comfortably sit and nurse your baby?
• Does the staff feed babies when they are hungry, rather than on a strict schedule?
• Are they willing to hold off feeding right before you pick up your baby?
• Does the center have a refrigerator for storing milk?
• Are you welcome to visit and breastfeed your baby at any time?

There are so many good reasons to continue to breastfeed your baby.

Take the time to find a child care provider who will help and support you.

You will be glad you did!