Step 8: Develop a financial plan that guides provision of breastfeeding services in a way that maximizes sustainability in the context of overall clinic health services and resources.

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| **8A:** Develop a financial plan for breastfeeding services that establishes clinic policies and protocols that support implementation. Incorporate the financial plan into the clinic’s standard billing and financial evaluation procedures. Suggested elements to include: | 1. Review of the financial plan shows that it complies with all elements of the agency’s ongoing financial analysis and supports the activities suggested under Guideline 8A. 2. At least 80% of randomly-selected clinic invoices will show that billable services for both women of childbearing age and pediatric patients were provided by a clinician with the recommended qualifications. 3. At least 80% of randomly-selected clinic invoices will show that billing codes, payment sources, and expected reimbursement were accurate for the services provided. | Lactation staff can be added on a part-time basis, depending on the clinic’s birth rate. Clinics have found several strategies effective in building a stronger practice for lactation, contributing to the value of the lactation consultant as part of the health care team and increasing referrals for lactation. Involving the lactation consultant in providing staff lactation training on an ongoing basis builds professional rapport among staff and the value of lactation care. Health care professionals are more likely to make referrals once they view lactation consultants as valuable team members. More referrals help counterbalance no-show appointments. California’s Coordinated Perinatal Services Program (CPSP) has a team approach to care that includes strong breastfeeding support, relying on varying levels of lactation expertise, including lactation educators and consultants. | **Breastfeeding and Health Care Reform Opportunities** - CWA Policy Brief  
**Medi-Cal Breastfeeding Toolkit** - CWA  
**Pregnancy: Comprehensive Perinatal Services Program reimbursement guidelines** - Medi-Cal  
**CPSP Provider Overview/Steps to Take Training (online or in-person)** - CDPH  
**Article about pay ranges for IBCLCs** - Journal of Human Lactation |

9 Steps to Breastfeeding Friendly Clinics: TOOLKIT  
STEP 8: FINANCIAL SUSTAINABILITY
Step 8: Develop a financial plan that guides provision of breastfeeding services in a way that maximizes sustainability in the context of overall clinic health services and resources.

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| **8B**: Use clinical care and billing tools that support implementation of the financial plan by reminding providers and/or administrative staff of a patient's reimbursable benefits, supporting clinical care decisions, providing appropriate billing codes, and incorporating financial aspects of care into the medical record system. | 1. A point-of-care clinical decision support system, when available, will remind providers when a patient needs breastfeeding support, identify the patient's insurance/payer, and outline their reimbursable benefits and appropriate billing code(s) for breastfeeding support services provided. | The lactation staff should have access to the EHR for documenting lactation care that is visible to other providers, including OB, Peds and Family Practice. Lactation care involves 2 patients, mother and infant. Both patients should be billable. | **Lactation Service Charge Form** - Alameda County  
**CPSP Billing for Lactation Services**  
conf call notes - Sonoma County  
**Billing for Lactation Services in CPSP** - Sonoma County  
**Billing for Lactation Services in FQHC** - Sonoma County  
**CPSP Billing Codes** - North County Health Services  
**CPSP Lactation Manual** - Santa Barbara County  
**CPSP Billing Presentation: Slideshow and Handout** - Santa Barbara County  
**CPSP Billing Sheet: Page 1 and Page 2** - Santa Barbara County  
**CPSP-FQHC-Outpatient Billing Scenarios** - COIN-DHCS Call Notes |