
SENATE COMMITTEE ON APPROPRIATIONS

Senator Sabrina Cervantes, Chair
2025 - 2026 Regular Session

AB 2160 (Celeste Rodriguez) - Medi-Cal: lactation services

Version: June 16, 2026

Urgency: No

Hearing Date: August 3, 2026

Policy Vote: HEALTH 11 - 0

Mandate: No

Consultant: Agnes Lee

Bill Summary: AB 2160 would require the Department of Health Care Services (DHCS) to issue updated guidance that clarifies Medi-Cal coverage for lactation services.

Fiscal Impact: The DHCS estimates the following:

- No fiscal impact to Medi-Cal benefits since the bill does not add any new, or expand any existing, Medi-Cal benefits.
- State operations costs of \$162,000 (\$81,000 General Fund and \$81,000 federal funds) in 2027-28, and \$153,000 (\$76,500 General Fund and \$76,500 federal funds) in 2028-29 and ongoing thereafter for staffing resources to ensure that Medi-Cal managed care plans track and report to DHCS the number of International Board Certified Lactation Consultants that are accessible to plan members within their network.

Background: The Medi-Cal program provides health care services to qualified low-income individuals. Current law requires DHCS to streamline and simplify existing Medi-Cal program procedures in order to improve access to lactation supports and breast pumps among Medi-Cal recipients. According to the Medi-Cal provider manual, Medi-Cal covers lactation supports when billed by a supervising licensed provider or clinic as a physician visit, or when rendered by a certified nurse midwife, nurse practitioner or a licensed midwife. Lactation consultants, such as International Board Certified Lactation Consultants and Certified Lactation Consultants, are not eligible to enroll as Medi-Cal providers.

The DHCS has provided guidance to Medi-Cal managed care plans which states that covered lactation benefits include breastfeeding services available to prenatal and postpartum recipients provided by lactation consultants or other qualified staff trained in lactation services. Medi-Cal managed care plans must ensure their network providers (including maternity providers, primary care, and pediatric providers) provide breastfeeding services and covered benefits to postpartum members by lactation consultants under the direction of a licensed provider, ideally in an integrated model in the network provider's practice, or via external referrals. The guidance specifies that Medi-Cal managed care plans are prohibited from requiring prior authorization or referrals for pregnant and postpartum participants in order to receive lactation consulting services.

Proposed Law: AB 2160 would require DHCS, by July 1, 2027, to issue updated Medi-Cal guidance that clarifies Medi-Cal coverage for lactation services and does all of the following:

- Clarifies Medi-Cal coverage policies for a continuum of lactation services, including health education related to lactation, basic lactation support, and clinical lactation consultation.
- Clarifies standard procedures for billing and reimbursement for lactation services covered by Medi-Cal, including specifying billing codes that appropriately reflect the scope of lactation services covered by Medi-Cal.
- Clarifies Medi-Cal managed care plans' responsibility to cover lactation services, including plans' responsibility to reimburse for services consistent with procedures and billing codes specified by DHCS.
- Specifies lactation services are not subject to prior authorization and do not require a prescription or referral.
- Requires a Medi-Cal managed care plan to report to DHCS the number of International Board Certified Lactation Consultants that are accessible within the plan network to plan members who require clinical lactation consultation services.

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