



## Alaska WIC Policy & Procedure Manual

### Search Capabilities

Use key word search to find specific Policies in this manual. Press **Ctrl+F** if you're using a Windows computer device or press **Command+F** if you're using a Mac computer. Then, you can enter the word or text you want to locate in the Find dialog box, which will allow you to select Next or Previous to move through the search results.

### Table of Contents

Section:	Policy #	Policy Name:
<b>100 Introduction and Overview</b>		
	101	Use of Policy and Procedures Manual
	102	Overview of WIC Alaska
	103	Alaska WIC State Agency Organization
	104	WIC Definitions & Abbreviations
<b>200 Vendor and Farmer Management</b>		
	201	Overview of Vendor Management
	202	Overview of WIC Farmers Market Program
<b>300 Nutrition and Breastfeeding Services</b>		
<b>300A: Nutrition Education</b>		
	301	Providing Nutrition and Breastfeeding Education at Certification and Recertification
	302	Nutrition Education Guidance
	303	Nutrition Education Delivery Mediums
	304	Nutrition Education Plan
	305	Nutrition Services Standards: All Categories
	306	Nutritional Education Standards: Infants
	307	Nutritional Education Standards: Children
	308	Nutritional Education Standards: Pregnant Person
	309	Nutritional Education Standards: Breastfeeding Person
	310	Breastfeeding: Use of Supplemental Formula



## Alaska WIC Policy & Procedure Manual



Section:	Policy #	Policy Name:
	311	Nutritional Education Standards: Postpartum Non-Breastfeeding Person
	312	Alcohol and Substance Use
	313	Nutrition and Breastfeeding Annual Survey
<b>300B: Breastfeeding Promotion and Support</b>		
	325	Breastfeeding: Definition, Promotion and Support Standards
	326	Breastfeeding: Breast Pump Ordering, Distribution and Tracking Guidelines
	327	Lost or Stolen Electric Breast Pumps
	328	Breastfeeding Peer Counseling
<b>300C: Food Package Design</b>		
	350	Supplemental Food Prescriptions
	351	Food Authorization Standards
	352	Food Package Types
	353	Food Package I –Infants 0 through 5 months
	354	Food Package II: Infants 6-11 months
	355	Cash Value Vouchers for Infants 9 -11 months
	356	Food Package III-Medically Fragile Participants
	357	Food Package IV Children 1 through 4 years of age
	358	Food Packages V Pregnant and Partially Breastfeeding
	359	Food Package VI: Postpartum Women
	360	Food Package VII: Fully Breastfeeding Women
	361	Food Packages: Homeless
	362	Food Package: Incarcerated Women
	363	Food Package Tailoring - Food Items
	364	Loss of Community Water Supply
	365	Milk and Milk Substitutions
	366	Authorized Food: WIC Food List Criteria
	367	Authorized Contract Formula
	368	Authorized Non-Contract Formula
	369	Issuance of Ready-To-Feed Infant Formulas
	370	Unauthorized WIC Formula Costs
	371	Supplemental Food Requiring Medical Documentation





## Alaska WIC Policy & Procedure Manual



Section:	Policy #	Policy Name:
	372	Returning and Reissuance of Formula
	373	Religious Considerations: Formula
	374	Follow-Up and Weaning Formulas
<b>400 Management Information Systems</b>		
	401	Personal Use of Computers
	402	SPIRIT & IT Security
<b>500 Organization and Management</b>		
	500	Local Agency Staffing Requirements
	501	Local Agency Clinic Hours and Staffing Availability
	502	Local Agency Report and Form Requirements
	503	Clinic Operations
	504	Program Integrity: Fraud Prevention
	505	Program Integrity: Conflict of Interest
	506	Program Integrity: Separation of Duties
	507	Program Integrity: Dual Participation
	508	Program Integrity: Noncompliance and Abuse
	509	LA Developed Documents Approval Requirement
	510	Disaster Planning
<b>600 Nutrition Services and Administration (NSA Expenditures)</b>		
	602	Mid-Year WIC Funding Reallocation
	603	Local Agency Budget Management
	604	Cumulative Fiscal Reports (CFR), General Ledger (GL) and Line-Item Budget Revision (LIBR) Information
	605	Equipment Inventory Reporting and Disposal
	606	Time Studies
	607	Nutrition Education and Breastfeeding Promotion Costs
	608	Reimbursement to Local Agencies
	609	WIC and Social Security Numbers
	610	Local Agency Hiring Freezes and Fund Management
	611	Participant, Vendor, and Local Agency Collections
	612	Local Agency Audits
	613	Provisions of Local Agency Agreements



## Alaska WIC Policy & Procedure Manual



Section:	Policy #	Policy Name:
<b>700 Food Funds Management</b>	701	Standard for WIC Approvable Food
<b>800 Caseload Management</b>		
	801	Caseload Management and Performance Standards
	802	Allocation of Funds
	803	Local Agency Outreach
	804	No Show Rate
	805	Wait Lists
<b>900 Certification, Eligibility, &amp; Coordination of Services</b>		
<b>900A: Eligibility Determination and Documentation</b>		
	901	Eligibility Criteria
	902A	Physical Presence
	902B	Physical Presence Waiver
	903	Proof of Identity
	904	Proof of Residency
	905	Proof of Income
	906	Categorical Eligibility
	907	Nutritional Risk
	908	Income Eligibility Guidelines
	909	Change in Custody
	910	Termination of Benefits
	911	Public Charge
	912	Determining Family Size
	913	Certification Periods
	914	Mid-Certification Assessment
	915	Transfer of Certification
<b>900B: Nutritional Risk Determination, Documentation and Priority Assignment</b>		
	940	Complete Nutrition Assessment
	941	Anthropometrics
	942A	Hemoglobin & Hematocrit Screening
	942B	Guidelines for anthropometric and hematology data collection without physical presence
	943	Lead Testing



## Alaska WIC Policy & Procedure Manual



Section:	Policy #	Policy Name:
	944	Overview of Priority Levels
	946	High Priority Participants
	947	High Risk Criteria and Risk Codes
	948	High Risk Nutritional Care Plans
	949	Non-High Risk Nutritional Care Plans
<b>900C: Health Care Agreements, Referrals and Coordination</b>		
	960	Coordination of Services
	961	Referrals
	962	Immunization Screening and Referral Protocol
<b>900D: Processing Standards</b>		
	970	Processing Standards
	971	Record Retention
<b>1000 Food Delivery and Food Instrument (FI) Accountability and Control</b>		
	1001	Food Delivery Process
	1002	eWIC Card Security and Inventory Control
	1003	eWIC Proxy Appointment
	1004	Issuing eWIC Cards
	1005	Replacement of eWIC Cards
	1006	Balto
	1007	Late Food Benefit Issuance
	1008	Remote Issuance of Benefits
	1009	eWIC Benefit Redemption Education
<b>1100 Monitoring, Audits and Evaluations</b>		
	1101	Local Agency Management Evaluation
	1102	Local Agency Sanctions and Disqualifications
	1103	Local Agency Quality Improvement
	1104	Child Abuse and Neglect Reporting
	1105	Subpoenas and Search Warrants
<b>1200 Civil Rights</b>		
	1201	Participant Confidentiality



## Alaska WIC Policy & Procedure Manual



Section:	Policy #	Policy Name:
	1202	Minimum WIC Program Information including WIC Rights and Responsibility
	1203	Collection of Racial and Ethnic Data
	1204	Voter Registration
	1205	Nondiscrimination
	1206	Public Notification of Non-Discrimination Standards
	1207	Complying with the Americans with Disabilities Act (ADA)
	1208	Civil Rights Training
	1209	Civil Rights Complaints
	1210	Fair Hearing Procedures



# Alaska WIC Policy & Procedure Manual

## Section: 100 Introduction and Overview

Policy: 101 Use of Policy and Procedure Manual

Effective Date: 09/01/2024

### PURPOSE:

This manual provides policies and guidance for WIC Local Agencies (LAs) managing the Alaska Special Supplemental Nutrition Program for Women, Infants, and Children (Alaska WIC). It is designed to be a clear, concise, and practical tool for WIC staff at both local and state levels.

Its purposes are:

1. To help staff and Local Agencies easily understand and carry out their responsibilities as defined by the WIC program, with input from various stakeholders.
2. To ensure consistent and continuous information flow between state and local programs.
3. To ensure compliance with federal regulations for both state and local programs.

### REFERENCE:

7 CFR §246.4—State plan

### OVERALL ORGANIZATION:

The policies in the manual are organized according to an overall numerical system. The first number provides chapter designations. This policy is 101, meaning section 100 and policy 01, 101 Use of Policy and Procedure Manual.

The WIC Policy Manual is divided into sections, each with an assigned number range:

Introduction and Overview	100
Vendor and Farm Management	200
Nutrition and Breastfeeding Services	300
Management Information Systems	400
Organization Management	500
Nutrition Services and Administration	600
Foods Funds Management	700
Caseload Management	800
Certification, Eligibility & Coordination of Services	900
Food Delivery & Food Instrument Accountability and Control	1000
Monitoring and Audits	1100
Civil Rights	1200



## Alaska WIC Policy & Procedure Manual



### How to find a Policy:

Each policy is identified by a name and a number. The number corresponds to the section where the policy resides.

### Sections of each Policy:

The body of each policy includes the following information, as applicable. Each section is clearly identified by a **bold**, blue margin heading.

(NOTE: Not all policies will have each section listed below. These sections will be included as deemed necessary by the Subject Matter Expert of each policy.)

**PURPOSE** – The intent of the policy. Included to help state and local staff make decisions on areas not directly addressed in the policy.

**BACKGROUND** – Historical or operational context for the policy or procedure.

**POLICY** – States the policy's directive for action.

**PROCEDURE** – Steps to be followed in implementing the policy. Delineates state and local responsibilities and indicates whether an action is required or recommended.

**REGULATORY REFERENCE** – Federal regulations and state laws governing the policy.

**CROSS REFERENCES** – Cross-references to other policies

**DEFINITIONS** – Key terms used in the policy, as defined by federal regulations or Alaska WIC program guidelines.

**APPENDICES** – Lists any attachments that could be used in relationship to this policy.

**POLICY HISTORY** – Each policy will have a policy history so changes or modifications can be reviewed.

### WIC Policy Manual Updates:

The WIC Policy Manual is an official document that governs WIC operations throughout Alaska. As such, it carries legal and operational responsibilities and must be kept as current as possible to remain a relevant, usable document.

The most current WIC policies can be found on the Alaska WIC Policy Web page at:

<https://health.alaska.gov/dpa/Pages/nutri/wic/administration/adminpandp-manuals.aspx>

### WIC Policy Update Process:

Local Agencies are notified by the State WIC Office when there is a WIC Policy Update. Training will be organized to review new policies as necessary.

### Local Program Responsibilities:

Local Agencies are responsible for complying with all WIC policies and procedures, including revisions. The state WIC program recommends that each local office establish a system to ensure their operations reflect updates to the WIC Policy Manual.



## Alaska WIC Policy & Procedure Manual



### POLICY HISTORY:

Each policy will have a policy history as outlined below. As this document is not a policy, but an overview of how to use the policy and procedures manual this section shall remain blank and is included here for reference.

Date	Draft, released, training, revised, reviewed
08/06/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual Section: 100 Introduction and Overview



Policy: 102 Overview of WIC  
Effective Date: 09/01/2024

### PURPOSE:

To describe the history, agency goals and anticipated outcomes for the Alaska Special Supplemental Nutrition Program for Women, Infants and Children (WIC).

### BACKGROUND:

The Special Supplemental Nutrition Program for Women, Infants and Children (WIC) is a federal assistance program of the Food and Nutrition Services (FNS) under the United States Department of Agriculture (USDA), which provides nutrition assessment services, nutrition education, breastfeeding support, free nutrient-rich foods and community referrals to low-income pregnant women, infants and their parents, and children up to their fifth (5th) birthday who are found to be at nutritional risk. WIC participants' household incomes are below 185% of the federal poverty guidelines for Alaska or are enrolled in Medicaid/Denali KidCare, Supplemental Nutrition Assistance Program (SNAP), Food Distribution Program on Indian Reservations (FDPIR) or Temporary Assistance for Needy Families (TANF).

Pregnancy and early childhood are critical periods of growth and development. By providing access to healthy foods, nutrition education and breastfeeding support, the WIC program improves the health of nutritionally at risk, low-income women, infants, and children. Research has shown that participation in the WIC program results in longer pregnancies, fewer premature births, fewer infant deaths, and savings in health care costs. Every dollar spent on WIC reduces financial losses in medical, education and productivity costs.

Mother-to-mother support has been shown to be one of the most successful approaches to promoting breastfeeding. The WIC Breastfeeding Peer Counseling Program (BFPC) is a targeted approach to provide mentorship on breastfeeding and encourage WIC participants to breastfeed. Agencies may apply for BFPC funds and WIC funds through this competitive Request for Proposals (RFP), but BFPC grant funds are only available to WIC grantees. In order to receive BFPC funds, the applicant must receive a WIC award and meet the federal BFPC program requirements.

### Alaska WIC Program Goals

**Goal 1:** WIC services are available and utilized by eligible participants throughout the state.

**Anticipated outcome:** WIC services will be provided to a minimum quarterly average of 75% of Total Eligible WIC Participants for the proposed WIC service area.





## Alaska WIC Policy & Procedure Manual



Goal 2: Deliver quality nutrition services in compliance with state and federal requirements.

**Anticipated outcome:** Increased percentage of children ages 2-4 at a healthy weight.

Goal 3: Households receiving WIC food benefits purchase WIC foods.

**Anticipated outcome:** WIC foods will be purchased monthly by greater than 75% of households.

Goal 4: All pregnant and post-partum WIC participants receive information and support to meet their breastfeeding goals.

**Anticipated outcome:** Increased percentage of infants who are breastfed at one year.

Goal 5: Pregnant or breastfeeding participants will have access to a breastfeeding peer counselor.

**Anticipated outcome:** At least 75% of pregnant participants will be offered breastfeeding peer counseling services.

### REFERENCES:

The State of Alaska's Request for Proposals Special Supplemental Nutrition Program for Women, Infants and Children (WIC) For FY2023 Through FY2025, Contract Requests



## **Alaska WIC Policy & Procedure Manual**

### **Section: 100 Introduction and Overview**

**Policy: 103 Alaska WIC State Agency Organization**

**Effective Date: 09/01/2024**

#### **PURPOSE:**

The sections in this chapter describe the organization's structure and responsibilities of all WIC program staff.

#### **IN THIS SECTION:**

- Overview of the State of Alaska Family Nutrition Programs
- State Agency Contact and Mailing Information
- State of Alaska WIC Organizational Chart
- State Agency Primary Functional Responsibilities
- WIC Local Agency Directory

#### **OVERVIEW:**

The Alaska WIC Program is organizationally located within the State of Alaska's Department of Health (DOH), Division of Public Assistance (DPA), Family Nutrition Programs (FNP).

The Family Nutrition Program's mission is to support Alaskan families in making nutrition decisions for life-long health and well-being through:

- Science-based nutrition education
- Breastfeeding support
- Delivery of supplemental foods

FNP manages six federal nutrition programs:

1. The Special Supplemental Nutrition Program for Women, Infants & Children (WIC): WIC is a public health program providing nutrition and breastfeeding education, counseling, support, nutritious foods and referrals to needed services.
2. Breastfeeding Peer Counselor Program (BFPC) – Breastfeeding Peer Counselor (BFPC) Program is a federally funded and evidence-based program to help improve breastfeeding success among WIC participants. Peer counselors serve as role models for breastfeeding, providing mother-to-mother encouragement and support during pregnancy and at critical times during the postpartum period. This support is distinct from health professional-to-mother in that the source of support is a peer, someone who is similar in fundamental ways to the recipient of the support.
3. Farmers' Market Nutrition Program (FMNP) – The Farmers Market Nutrition Program is funded mainly by U.S. Department of Agriculture with a certain percentage of required state General Fund match. The vast majority of FMNP funds are spent by WIC



## Alaska WIC Policy & Procedure Manual



participants at the local farmers markets and farm stands.

4. Senior Farmers Market Nutrition Program (SFMNP): The Alaska Senior Farmers' Market Nutrition Program (SFMNP) provides low-income seniors with benefits for the purchase of fresh Alaska-grown fruits, vegetables, fresh-cut herbs and honey at participating farmers' markets, authorized farms, and roadside stands within Alaska.
5. Commodity Supplemental Food Program (CSFP): The Commodity Supplemental Food Program (CSFP) works to improve the health of seniors at least 60 years of age by supplementing their diets with nutritious USDA commodity foods.
6. Supplemental Nutrition Assistance Program Education (SNAP-Ed): Alaska's Supplemental Nutrition Assistance Nutrition Education and Obesity Prevention Program (SNAP-Ed) program provides nutrition education for low-income Alaskans. The goal of SNAP-Ed is to improve the likelihood that persons eligible for SNAP will make healthy food choices within a limited budget and choose physically active lifestyles consistent with the current Dietary Guidelines for Americans and MyPlate.

### STATE AGENCY CONTACT AND MAILING INFORMATION

#### Family Nutrition Programs' WIC Department

Mailing address: PO Box 110612, Juneau, AK 99811

Physical address: 130 Seward Street, Suite 508, Juneau, AK 99801

Phone: (907) 465-3100

Fax: (907) 465-3416

Email: [hss.dpa.jnu.wic@alaska.gov](mailto:hss.dpa.jnu.wic@alaska.gov)

#### WIC Vendor Management Unit

Phone: (907) 465-3100

Fax (907) 465-3416

[doh.dpa.wic.vendor@alaska.gov](mailto:doh.dpa.wic.vendor@alaska.gov)

#### WIC Help Desk

The WIC Help Desk is available during regular state business hours (Monday – Friday, 8 am to 3 pm, excluding most state and federal holidays) to assist users and grantee technical support with any related technical issues.

[wicSPIRIThelpdesk@alaska.gov](mailto:wicSPIRIThelpdesk@alaska.gov)

#### Midnight Sun WIC Program

Phone: 907-500-8451

[doh.wic.services@alaska.gov](mailto:doh.wic.services@alaska.gov)

### STATE OF ALASKA WIC ORGANIZATION CHART:

This document the 105 Job Aid Section: 001 - State of Alaska WIC Organization Chart

### STATE AGENCY PRIMARY FUNCTIONAL RESPONSIBILITIES:



## Alaska WIC Policy & Procedure Manual



STAFF MEMBER	PRIMARY RESPONSIBILITIES
Elizabeth Imbo Walsh, MS, RD, IBCLC Family Nutrition Programs Manager/ Alaska WIC Director Location: Anchorage (907) 500-8477 phone <a href="mailto:Liz.Walsh@alaska.gov">Liz.Walsh@alaska.gov</a>	<p>This position serves as the professional and administrative leader for Family Nutrition Programs (FNP), which includes six federal nutrition assistance programs for low-income populations statewide.</p> <p>This position sets strategic direction, assures compliance in administration and fiscal functions including WIC banking, infant formula contracts, and technology systems.</p>
Taryn Bliss, RD, IBCLC Family Nutrition Programs' Assistant Manager Location: Juneau (907) 419-4162 <a href="mailto:Taryn.Bliss@alaska.gov">Taryn.Bliss@alaska.gov</a>	<p>The position serves as the Assistant Manager for Family Nutrition Programs (FNP).</p> <p>This position oversees the Management Evaluations of WIC Local Agencies; coordinates the submittal of the annual WIC State Plan to FNS; is the WIC administrator for the Midnight Sun WIC Program; supervises the FNP Administrative Assistance and temporary staff; and coordinates WIC Civil Rights activities.</p>
Ella Stults WIC Clerical & Administrative Support Location: Juneau (907) 465-3100 <a href="mailto:Ella.Stults@alaska.gov">Ella.Stults@alaska.gov</a>	<p>This position provides administrative support for Family Nutrition Programs in the areas of: WIC Local Agency support and technical assistance; financial tracking; coding and reporting; and client outreach.</p>
Jennifer Johnson, MPH, RD WIC Nutrition Services Coordinator Location: Juneau (907) 500-8736 <a href="mailto:Jennifer.Johnson@alaska.gov">Jennifer.Johnson@alaska.gov</a>	<p>This position is responsible for planning, directing and coordinating WIC nutrition services. Position ensures federal and state regulations for WIC nutrition services are implemented statewide. Lead position regarding pediatric and maternal nutrition, nutrition research, staff training, grant management, computer changes, and development of policy and procedures regarding WIC Nutrition Services.</p>
Amber Christis, MPH, RD, IBCLC WIC Clinic Operations & Breastfeeding Coordinator	<p>This position is responsible for WIC program planning, initiation and evaluation of statewide clinics to ensure culturally</p>



## Alaska WIC Policy & Procedure Manual



<p>Location: Juneau (907) 500-8184 <a href="mailto:Amber.Christis@alaska.gov">Amber.Christis@alaska.gov</a></p>	<p>appropriate and effective operations. Oversees WIC Local Agency clinic operations, grants management, and policies and procedures development regarding grantee operations. Lead position for State of Alaska breastfeeding promotion and support and oversight of the statewide Breastfeeding Peer Counseling program.</p>
<p>Sarah Slater, BS Vendor Unit Manager Location: Juneau (907) 500-2721 <a href="mailto:Sarah.Slater@alaska.gov">Sarah.Slater@alaska.gov</a></p>	<p>This position is responsible for policy development and program management for the WIC Vendor Unit which includes WIC and Seniors' Farmers Market Nutrition Programs to ensure compliance with federal rules and regulations. Supervises the vendor section; responsible for training, monitoring compliance and cost control for WIC-approved foods, fraud prevention/detection of high-risk vendors; providing technical assistance; and, offering recommendations and support with mandatory reporting.</p>
<p>Beth Seitz Vendor Unit Project Assistant Location: Juneau (907) 500-8634 <a href="mailto:Beth.Seitz@alaska.gov">Beth.Seitz@alaska.gov</a></p>	<p>This position provides substantive support for the Vendor Management component of the WIC program on an ongoing basis, requiring interpretation and application of federal and state regulations and policies. Duties include policy development, research, and analysis.</p>
<p>VACANT Farmers Market Nutrition Program Coordinator Location: TBD</p>	<p>Provides direct oversight for the administration of both the Senior and WIC Farmers Market Nutrition Programs. Acts as support for the Vendor Unit Project Assistant.</p>
<p>Julieann Parker, BS WIC Technology Coordinator Location: Anchorage (907) 419-4165 <a href="mailto:Julieann.Parker@alaska.gov">Julieann.Parker@alaska.gov</a></p>	<p>This position serves as the liaison between the Family Nutrition Programs and the State of Alaska IT services. This position provides precise, detailed, and direct support to IT services programmers and WIC staff for increased system understanding and enhancements. This position ensures policies, financial, and system operations</p>



## Alaska WIC Policy & Procedure Manual



	follow federal and state fiscal and reporting requirements.
Jacqueline Yeo WIC Technology Project Assistant Location: Anchorage (907) 419-4327 <a href="mailto:Jacqueline.Yeo@alaska.gov">Jacqueline.Yeo@alaska.gov</a>	Assists SOA WIC to: (1) manage inquiries to the WIC SPIRIT Help Desk regarding issues (both functional and policy related) encountered by system users, (2) conduct system testing for WIC technologies that are being implemented, modified, or improved, (3) development and distribute training materials to users for project implementation and improvement, and (4) recommends program enhancements, improvements, and solutions to current help desk and testing business processes.
Lisa Cruz Midnight Sun WIC Coordinator Location: Anchorage; travel to Fairbanks (907) 419-4083 <a href="mailto:Lisa.Cruz@alaska.gov">Lisa.Cruz@alaska.gov</a>	This position is the WIC Coordinator for Midnight Sun WIC, the State-run WIC Local Agency providing WIC services for Fairbanks/North Star Borough. Also processes WIC applications, issues WIC benefits, conducts both low risk and high-risk nutrition counseling quarterly, initiates outreach in the region to increase participation rates, conducts regulatory and compliance monitoring, and develops vital networking strategies to improve service delivery.
VACANT Midnight Sun WIC Nutrition Specialist Location: Anchorage or Fairbanks (TBD)	This position is the Nutrition Specialist (CPA) for Midnight Sun WIC, the State-run WIC Local Agency providing WIC services for Fairbanks/North Star Borough. This position will process WIC applications, issue WIC benefits, conduct both low risk and high-risk nutrition counseling quarterly, initiate outreach in the region to increase participation rates, conduct regulatory and compliance monitoring, and develop vital networking strategies to improve service delivery.
Madison Reilly Midnight Sun Administrative Assistant/ WIC	This position provides clerical support for the Midnight Sun WIC Program. Assists in the



## Alaska WIC Policy & Procedure Manual



Clerk Location: Anchorage (907) 519-9654 <a href="mailto:Madison.Reilly@alaska.gov">Madison.Reilly@alaska.gov</a>	areas of WIC administrative support and technical assistance; accounting and financial management; procurement/purchasing; personnel management; and, special projects that improve program administration including client outreach.
VACANT Midnight Sun Administrative Assistant/ WIC Clerk Location: Anchorage or Fairbanks (TBD)	This position provides clerical support for the Midnight Sun WIC Program. Assists in the areas of WIC administrative support and technical assistance; accounting and financial management; procurement/purchasing; personnel management; and, special projects that improve program administration including client outreach.
Krista Jordan, RD SNAP-ED & CSFP Coordinator Location: Anchorage (907) 500-8357 <a href="mailto:Krista.Jordan@alaska.gov">Krista.Jordan@alaska.gov</a>	Oversight of the federal nutrition programs, Supplemental Nutrition Assistance Program Education (SNAP-Ed) and the Commodity Supplemental Food Program (CSFP). Provides RD support for the Midnight Sun WIC Program.

### WIC LOCAL AGENCY DIRECTORY:

This document is in the 105 Job Aid Section: 002 - WIC Local Agency Directory.

### CROSS REFERENCE:

Job Aid 001: State of Alaska WIC Organization Chart

Job Aid 002: WIC Local Agency Directory

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in



## Alaska WIC Policy & Procedure Manual



draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A "draft" watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## Alaska WIC Policy Manual Definitions and Abbreviations

The purpose of this dictionary is to serve as a quick reference for terms, topics, or abbreviations and acronyms found within the Alaska WIC Program Manual. *If vocabulary word is italicized, the definition comes directly from the Code of Federal Regulation National Archives.* Non-Italics definitions come from State of Alaska WIC Program.

[A](#) [B](#) [C](#) [D](#) [E](#) [F](#) [G](#) [H](#) [I](#) [J](#) [L](#) [M](#) [N](#) [O](#) [P](#) [Q](#) [R](#) [S](#)  
[T](#) [U](#) [V](#) [W](#)

### ABBREVIATIONS

#### A

***Above-50-percent vendors means*** vendors that derive more than 50 percent of their annual food sales revenue from WIC food instruments, and new vendor applicants expected to meet this criterion under guidelines approved by FNS.

**Acceptable proof:** Reasonable documentation of personal identity, income and current residency as approved by the state WIC program.

**Audit:** A complete review of accounting operations and procedures performed by a certified public accountant.

**Adjusted age:** For the preterm or early term infant, adjusting calculation of weight for age and/or length for age based on gestational rather than chronological age.

**Adjunctive eligibility:** Meets WIC standard for income eligibility through verification that WIC applicants are participating in Supplemental Nutrition Assistance Food Program (SNAP), Alaska's Temporary Assistance for Needy Families (TANF), Alaska's Medicaid, including Denali KidCare, or the Food Distribution Program on Indian Reservations (FDPIR).

**Adverse Action:** any negative action taken by the local or state agency due to participant violations that negatively impacts the participant or their participation in the program.

**Adverse Action (taken against local agency):** Any action taken by the state WIC office against the local agency that would affect their participation in the WIC program.

**Affirmative Action Plan** means that portion of the State Plan which describes how the Program will be initiated and expanded within the State's jurisdiction in accordance with § 246.4(a).

**Aggregate files:** Any filing system where documents are sorted and filed by a method other than individual participant paper charts.

**Agriculture:** Farming, harvesting, nursery work or other activities related to the production of crops. This may include tree farming or timber harvesting, where the crop is not intended for human consumption. It may also include dairy or fishery work, where the crop is animal rather than produce.

**Anticipatory Guidance:** counseling or educational services provided to individuals or families before they undergo a significant change in their lives. Examples include parental guidance before a child enters school and counseling prior to retirement.

**Anthropometric:** Measuring the size and proportions of the human body. Anthropometric data associated with WIC includes weight, height/length.

**Annual income guidelines:** USDA updates the federal poverty income levels annually. Local programs will implement the new guidelines according to State instructions (usually July 1). The statewide WIC income eligibility standard is 185% of the federal poverty income guidelines.

**Appeal:** Review of an agency decision by a neutral third party through a fair hearing.

**Applicants:** means pregnant/breastfeeding/postpartum people, infants, and children who are applying to receive benefits. Applicants include individuals who are currently participating in the program but are re-applying before their certification expires.

**Approved Product List (APL):** The WIC Approved Product List outlines the types, sizes, and packaging of foods WIC participants may receive with their WIC food benefits.

**APO** stands for Army Post Office and is associated with Army or Air Force installations.

**Attendance costs:** For individuals receiving student loans, attendance cost includes regular tuition and fees for students carrying at least a half-time workload as determined by the institution, and an allowance for books, supplies, and transportation required by the course of study.

**Audit:** A complete review of accounting operations and procedures performed by a certified public accountant.

**Authorized Representative:** An Authorized Representative for the household is usually added during prescreen and is most often the Primary Card Holder. It's typically the mother if she is on WIC and part of the household. Otherwise, it should be the primary caregiver.

**Authorized supplemental foods** means those supplemental foods authorized by the State or local agency for issuance to a particular participant.

---

[Back to Top](#)

## B

**Balto:** Alaska's name for the online ordering program that allows WIC benefits to be mailed to eligible participants. The program is named after the famous sled dog, Balto, who played a crucial role in the 1925 relay that delivered the diphtheria antitoxin to Nome, Alaska, during a deadly epidemic. WIC's Balto program primarily serves WIC participants in isolated or remote rural locations.

**Basic eligibility information:** The least amount of information needed to determine program eligibility. Eligibility criteria include applicant category (pregnant/breastfeeding people, infants and children under age five), residency, income, medical data, medical/nutritional risks, and certification date.

**Biochemical:** Pertaining to blood chemistry.

**Breastfeeding** means the practice of feeding human milk/breastmilk to an infant on average of at least once a day.

**Breastfeeding DYAD:** A dyad is a group of two persons involved in an ongoing relationship or interaction. For breastfeeding to start and continue, the newborn must be able to suck, swallow, and breathe; the mother must be able and willing to let her infant breastfeed; and surroundings must support the biological unit: the mother–baby dyad.

**Breastfeeding Coordinator:** A designated staff member who provides leadership to the local WIC agency regarding breastfeeding promotion, education, and support.

**Breastfeeding Peer Counselor (BFPC):** A paraprofessional support person who provides basic breastfeeding information and encouragement to WIC pregnant and breastfeeding mothers. She is a mother who is breastfeeding or has breastfed, and she reflects the population served in age, ethnicity, education, and language.

**Breastfeeding Peer Counselor Coordinator:** This person mentors and coaches the breastfeeding peer counselors and coordinates the breastfeeding peer counseling program on a

local program level. Typically, this person is also the Breastfeeding Coordinator, a DBE (Designated Breastfeeding Expert) and IBCLC (International Board-Certified Lactation Consultant).

**Breastfeeding Peer Counseling Funds:** A WIC program receiving breastfeeding peer counseling funds. These funds are spent at the state and local level to enhance and expand breastfeeding and peer counseling efforts. Use of these funds is highly regulated and may only be used for activities included in an agency's approved breastfeeding peer counseling implementation plan.

**Breastfeeding Peer Counselor (BFPC) Program:** is a federally funded and evidence-based program to help improve breastfeeding success among WIC participants. Peer counselors serve as role models for breastfeeding, providing mother-to-mother encouragement and support during pregnancy and at critical times during the postpartum period. This support is distinct from health professional-to-mother in that the source of support is a peer, someone who is similar in fundamental ways to the recipient of the support.

**Breast pump:** A device to help remove milk from the breasts.

**Breastfeeding Promotion and Support funds:** Costs expended for activities and expenditures for the promotion and support of breastfeeding.

**Breastfeeding women:** means a woman up to one year postpartum who is providing breastmilk to her infant/s.

---

[Back to Top](#)

## C

**Card Distribution Site:** Any local WIC clinic that orders and receives card shipments directly from the eWIC Contractor, issues eWIC cards, and maintains card inventory.

**Caregiver:** A person who has significant responsibility for providing food to the infant or child. The caregiver is usually part of the family unit, for example the parent or legal guardian of the infant or child.

**Caseload:** The number of participants issued food benefits versus those enrolled but not receiving food benefits.

**Capital outlay:** Capital expenditures over \$2,500, such as the cost of facilities, equipment, including medical equipment, other capital assets and any repairs that materially increase the value of useful life of capital assets.

**Cash Value Benefit** means a fixed-dollar amount electronic benefit transfer (EBT) card or other document which is used by a participant to obtain authorized fruits and vegetables. Cash Value Benefit is also known as cash-value voucher (CVV) when it pertains to checks or vouchers. Previously known as FVV - Fruit and vegetable voucher.

**Categorical eligibility** means persons who meet the definitions of pregnant women, breastfeeding women, postpartum women, infants or children.

**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.

**Certificate of Medical Necessity (CMN):** In the US this is a document required by Centers for Medicare and Medicaid Services to substantiate in detail the medical necessity of an item of durable medical equipment (DME) or a service to a Medicare beneficiary.

**CFRs:** Code of Federal Regulations.

**Civil rights:** Personal rights guaranteed and protected by the U.S. Constitution and federal laws enacted by Congress, such as the Civil Rights Act of 1964 and the Americans with Disabilities Act of 1990. Civil rights include protection from unlawful discrimination.

**CLIA:** Clinical Laboratory Improvement Amendments. Congress passed the Clinical Laboratory Improvement Amendments (CLIA) in 1988 establishing quality standards for all laboratory testing to ensure the accuracy, reliability, and timeliness of patient test results regardless of where the test was performed.

**CLIA-waived:** Some laboratory tests may be CLIA waived because they are simple laboratory procedures or pose no reasonable risk of harm to the patient if the test is performed incorrectly.

**Children** means persons who have had their first birthday but have not yet attained their fifth birthday.

**Client services:** Tasks or costs that pertain to certifying participants, processing applicants, delivery of food benefits, or other participant services.

**Clinic** means a facility where applicants are certified.

**Commodity Supplemental Food Program (CSFP):** USDA purchased food available to CSFP state agencies that store the food and distribute it to public and non-profit private local agencies. The population served by CSFP is similar to that served by WIC, but CSFP also serves elderly people,

and provides food rather than the food vouchers. Eligible people cannot participate in both programs at the same time.

**Competent Professional Authority (CPA):** An individual of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and counseling, and prescribe supplemental foods.

**Competencies:** Skills, actions, or behaviors related to a specific knowledge requirement that a person can be determined to possess based on a specified set of criteria.

**Competitive bidding** means a procurement process under which FNS or the State agency selects a single source (such as a single infant formula manufacturer offering the lowest price), as determined by the submission of sealed bids, for a product for which bids are sought for use in the Program.

**Complainant:** Any person or group of persons who allege discrimination in the delivery of WIC program benefits and services and who request a fair hearing.

**Complaint source:** Any individual or group of individuals who alleges inappropriate behavior or actions in the delivery of WIC program benefits and services. Also referred to as the complainant.

**Compliance buy** means a covert, on-site investigation in which a representative of the Program poses as a participant, parent or caretaker of an infant or child participant, or proxy, transacts one or more food instruments or cash-value vouchers, and does not reveal during the visit that he or she is a program representative.

**Confidentiality:** The preservation, in confidence, of all information concerning a participant and/or applicant.

**Conflict of interest:** Any relationship, real or apparent, which jeopardizes the fair and objective administration of the program, as identified between the WIC program employee and an applicant, participant, staff member, farmer or vendor.

**Contingency Plan:** a course of action designed to help an organization respond effectively to a significant future incident, event or situation that may or may not happen.

**Contract brand infant formula** means all infant formulas (except exempt infant formulas) produced by the manufacturer awarded the infant formula cost containment contract. If under a single solicitation the manufacturer subcontracts for soy-based infant formula, then all soy-based infant formulas covered by the subcontract are also considered contract brand infant formulas (see § 246.16a(c)(1)(i)). If a State agency elects to solicit separate bids for milk-based and soy-based infant formulas, all infant formulas issued under each contract are considered the contract brand infant formula (see § 246.16a(c)(1)(ii)). For example, all of the milk-based

infant formulas issued by a State agency that are produced by the manufacturer that was awarded the milk-based contract are considered contract brand infant formulas. Similarly, all of the soy-based infant formulas issued by a State agency that are produced by the manufacturer that was awarded the soy-based contract are also considered to be contract brand infant formulas. Contract brand infant formulas also include all infant formulas (except exempt infant formulas) introduced after the contract is awarded.

**Corrective Action Plan (CAP):** is a part of the Management Evaluation process.

**Cost containment** measure means a competitive bidding, rebate, direct distribution, or home delivery system implemented by a State agency as described in its approved State Plan of operation and administration.

**CPA Competencies:** Broad, program-related statements describing tasks or skills to be mastered by a CPA; derived from performance roles and stated in behavioral terms so they can be observed and mastery can be determined.

**CSFP:** See Commodity Supplemental Food Program definition.

---

[Back to Top](#)

## D

**Days** means calendar days.

**Department** means the U.S. Department of Agriculture.

**Denali KidCare (DKC)** is Medicaid coverage for children from birth through age 18 and Pregnant Women who meet income eligibility standards

**Denial (of local WIC agency application):** The act of denying a local agency application for WIC program participation as an authorized WIC local agency.

**Desk Audit:** means an inventory audit conducted remotely by a WIC analyst at their office.

**Disability:** The Americans with Disabilities Act Amendments Act of 2008, defines disability with respect to an individual: a physical or mental impairment that substantially limits one or more of the major life activities of such individual; a record of such an impairment; or being regarded as having such an impairment as described by subsequent sections. See CFR 36.105 and CFR 35.108.

**Discrimination:** The act of distinguishing one person or group of persons from others, either intentionally, by neglect, or by the effect of actions or lack of actions based on a protected class.

**Disqualification** means the act of ending the Program participation of a participant, authorized food vendor, or authorized State or local agency, whether as a punitive sanction or for administrative reasons.

**Disqualification (of local WIC agency):** The act of ending the WIC program participation of an authorized local agency, whether as a sanction or for administrative reasons.

**Disqualified:** Termination of a participant from WIC and cessation of WIC benefits for a specific amount of time, due to a participant violation. The participant may reapply for benefits at any time after the sanction period is over.

**Documentation** means the presentation of written documents which substantiate statements made by an applicant or participant or a person applying on behalf of an applicant.

**Drug** means:

- (a) A beverage containing alcohol;
- (b) A controlled substance (having the meaning given it in section 102(6) of the Controlled Substance Act (21 U.S.C. 802(6)); or
- (c) A controlled substance analogue (having the meaning given it in section 102(32) of the Controlled Substance Act (21 U.S.C. 802(32))).

**Dual Participation:** Simultaneous participation in more than one WIC program (more than one state or more than one local clinic).

**Durable Medical Equipment (DME):** is any medical equipment used in the home to aid in a better quality of living. It is a benefit included in many insurance policies and in some cases covered by Medicare benefits.

---

[Back to Top](#)

## E

**EBT Capable** means the WIC vendor demonstrates their cash register system or payment device can accurately and securely obtain WIC food balances associated with an EBT card, maintain the necessary files such as the authorized product list, hot card file and claim file and successfully complete WIC EBT purchases.



**Electronic Benefit Account (EBA):** An account established for each WIC family (including foster families) administered by Alaska's banking contractor. Accounts are identified by the WIC Household ID number assigned to that family. Food benefits for all participants in the family are aggregated into a single account.

**Electronic Benefit Transfer (EBT)** means a method that permits electronic access to WIC food benefits using a card or other access device approved by the Secretary.

**Electronic signature** means an electronic sound, symbol, or process, attached to or associated with an application or other record and executed and or adopted by a person with the intent to sign the record.

**Eligibility Criteria:** Conditions an applicant must meet in order to be enrolled in the WIC program.

**Equipment** means tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the non-Federal entity for financial statement purposes, or \$5,000.

**Ethnicity:**

1. Hispanic/Latino - a person of, Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term, "Spanish origin," can be used in addition to "Hispanic or Latino." (A person could be Black but still be identified as Hispanic, because of Hispanic culture or origin.)
2. Not Hispanic or Latino

**eWIC:** Electronic WIC benefits

**eWIC Card:** Magnetic stripe card used to purchase WIC authorized foods or formulas from a WIC family's Electronic Benefit Account (EBA). Each card has a 16-digit Primary Account Number (PAN).

**eWIC Contractor:** Banking organization which provides eWIC services.

**Employee fraud and abuse** means the intentional conduct of a State, local agency or clinic employee which violates program regulations, policies, or procedures, including, but not limited to, misappropriating or altering food instruments or cash-value vouchers, entering false or misleading information in case records, or creating case records for fictitious participants.

**Enteral Nutrition Prescription Request Form (ENPR):** Physician referral for a specific individually prescribed food.

**Exempt infant formula** means an infant formula that meets the requirements for an exempt infant formula under section 412(h) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 350a(h)) and the regulations at 21 CFR parts 106 and 107.

---

[Back to Top](#)

## F

**Fair Hearing:** A process applicants and participants are entitled to under federal regulation and state statute. A fair hearing is provided as part of the appeal process and is scheduled once an appeal request is made. The fair hearing is conducted by a neutral third party.

**Family** means a group of related or nonrelated individuals who are living together as one economic unit, except that residents of a homeless facility or an institution shall not all be considered as members of a single family.

**Farmer** means an individual authorized by the State agency to sell eligible fruits and vegetables to participants at a farmers' market or roadside stands. Individuals who exclusively sell produce grown by someone else, such as wholesale distributors, cannot be authorized.

**Farmer/Farmstands:** Farmer/Farmstands sell both onsite at their farm and at a Farmstand off-site. Farmstands only sell at their off-site farmstand. Farmers only sell on-site.

**Farmers' market** means an association of local farmers who assemble at a defined location for the purpose of selling their produce directly to consumers.

**Farmers Market Nutrition Program (FMNP):** The Farmers Market Nutrition Program is funded mainly by U.S. Department of Agriculture with a certain percentage of required state General Fund match. The vast majority of FMNP funds are spent by WIC participants at the local farmers markets and farm stands. A very small percentage of FMNP funding goes to administrative expenses at the state and local agency level.

**Federal Funding Formula:** The formula established by the USDA national office to distribute WIC money within federal guidelines.

**Federal Fiscal Year (FFY):** October 1 – September 30, Means the period of 12 calendar months beginning October 1 of any calendar year and ending September 30 of the following calendar year.

**Fiscal Review:** A review of fiscal operations performed by a Department of Public Assistance Financial Services staff member, or finance staff from USDA Western Regional Office, focusing on compliance with major federal requirements for management of funds.

**FNS** means the Food and Nutrition Service of the U.S. Department of Agriculture.

**Food Benefits:** The foods a participant receives through WIC for a selected month. Depending on the participant category, food benefits provide specific amounts of WIC authorized foods, formulas, and/or a fixed-dollar amount for participants to obtain WIC authorized fruits and vegetables (referred to as a “Cash Value Benefit” or “CVB”).

**Food benefit balance:** Unspent food benefits which are available for purchase by a cardholder during authorized benefit timeframe.

**Food costs** means the costs of supplemental foods, determined in accordance with § 246.14(b).

**Food delivery system** means the method used by State and local agencies to provide supplemental foods to participants.

**Food Distribution Program on Indian Reservations:** The Food Distribution Program on Indian Reservations (FDPIR) provides USDA Foods to income-eligible households living on Indian reservations and to Native American households residing in designated areas near reservations or in Oklahoma. USDA distributes both food and administrative funds to participating Indian Tribal Organizations and state agencies to operate FDPIR.

**Food Funds:** Food funds or dollars are reimbursed for WIC participant purchases at grocery stores or pharmacies. Food funds come from the federal WIC grant and rebates received on contract infant formula bought by WIC participants.

**Food instrument** means a voucher, check, electronic benefits transfer card (EBT), coupon or other document which is used by a participant to obtain supplemental foods.

**Food package:** is the maximum amount and type of food which can be prescribed for a single participant per 28-to-31-day period.

**Food sales means** sales of all approved WIC eligible foods intended for home preparation and consumption.

**Formula exchange:** The return of unopened cans of formula purchased with Alaska WIC benefits for issuance of new benefits with a different formula. Opened cans of formula cannot be exchanged. Previous month’s benefits cannot be replaced.

**Foster care:** Temporary living arrangement for children in need of a safe place to live. In Alaska, the Office of Children’s Services (OCS) under the Alaska Department of Family and Community

Services who authorizes custody under Foster Care. Tribes may also assume custody and place a minor under someone's care.

**Full nutrition benefit** means the minimum amount of reconstituted fluid ounces of liquid concentrate infant formula as specified in Table 1 of § 246.10(e)(9) for each food package category and infant feeding variation (e.g., Food Package IA fully formula fed, IA–FF).

**FVV (Fruit and vegetable voucher):** See CVB - Cash Value Benefit definition.

---

## [Back to Top](#)

## G

**GEMS** is the Grants Electronic Management System for both departments' operating and capital grants. In GEMS, users will be able to view solicitations, apply for DOH and DFCS grants, manage agency information, and manage grant awards issued by both departments.

**General Administration** – Defined as the overhead or management costs related to general administration activities

**Grant Agreement:** An agreement that binds the State of Alaska and an agency, detailing the terms under which the local agency will provide WIC services.

## H

**Health services** means ongoing, routine pediatric and obstetric care (such as infant and child care and prenatal and postpartum examinations) or referral for treatment.

**High-risk Nutritional Care Plan:** A nutritional care plan must be developed and documented specifically addressing the high risk condition(s) identified, and must include: Assessment of the individual's overall situation including nutrition status, needs, and any problems.

**High-risk participant:** Those participants who are assigned a high-risk level based on identified health risks that meet the state's high-risk criteria.

**High-risk vendor** means a vendor identified as having a high probability of committing a vendor violation through application of the criteria established in § 246.12(j)(3) and any additional criteria established by the State agency.

**HIPAA:** Health Insurance Portability and Accountability Act, a law which sets national standards for privacy, security and the exchange of participant and/or applicant information.

**Home food delivery contractor** means a sole proprietorship, partnership, cooperative association, corporation, or other business entity that contracts with a State agency to deliver authorized supplemental foods to the residences of participants under a home food delivery system.

**Homeless facility** means the following types of facilities which provide meal service. A supervised publicly or privately operated shelter (including a welfare hotel or congregate shelter) designed to provide temporary living accommodations; a facility that provides a temporary residence for individuals intended to be institutionalized; or a public or private place not designed for, or normally used as, a regular sleeping accommodation for human beings.

**Homeless individual** means a woman, infant or child:

(a) Who lacks a fixed and regular nighttime residence; or

(b) Whose primary nighttime residence is:

(1) A supervised publicly or privately-operated shelter (including a welfare hotel, a congregate shelter, or a shelter for victims of domestic violence) designated to provide temporary living accommodation;

(2) An institution that provides a temporary residence for individuals intended to be institutionalized;

(3) A temporary accommodation of not more than 365 days in the residence of another individual; or

(4) A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

**Home visit:** Delivery of services to an individual in the residence of that individual.

**Household:** means a group of related or nonrelated individuals who are living together as one economic unit, except that residents of a homeless facility or an institution shall not all be considered as members of a single family.

**Household size:** A person or group of people, related or not, who usually (though not necessarily) live together, and whose income and consumption of goods or services are related and who are not residents of an institution. The key consideration in determining when individuals or groups are a household (or economic unit) is whether they generate the income which sustains them, i.e., room, board and medical care. When determining a household size, count all pregnant women as two or more, for expected multiple births, unless a woman specifically waives the increase in number.

**ICD-10:** International Classification of Diseases, Tenth Revision (ICD-10) is a system used by physicians to classify and code all diagnoses, symptoms and procedures for claims processing. It was chiefly designed by the World Health Organization, with the U.S. version being created by the Centers for Medicare & Medicaid Services (CMS) and the National Center for Health Statistics (NCHS) to better align with the country's health care infrastructure. The American Medical Association provides the latest medical diagnosis code resources and training materials to help physicians and their teams understand what is an ICD-10 code.

**Identity:** means the unique set of characteristics that can be used to identify a person as themselves and no one else.

**Income:** Monetary compensation for services. Gross income, including overtime, before deductions for income taxes, employees' social security taxes, insurance premiums, bonds, etc. The determination of the amount of a household's gross income shall not be considered reduced for any reason (e.g.; financial hardships, medical bills, child support). Farmers and self-employed use net income. Net income is determined by subtracting the operating expenses from the gross income.

**Income eligible:** Meets WIC standard for income for household size. WIC program eligibility standard is 185 percent of the non-farm poverty guidelines prescribed by the U.S. Office of Management and Budget (OMB), adjusted annually.

**Income verification:** A process whereby the information provided by a participant, or their authorized representative is validated through another source.

**Individual care plan:** A written plan that outlines actions that will assist the participant for improving identified nutrition and health-related problems.

**Initial certification:** The first certification for an individual who has never participated in WIC or has not participated in WIC for 12 months or more.

**Immunization schedule:** Current schedule of immunization consistent with that recommended by Centers for Disease Control and Prevention (CDC).

**Individual:** An applicant or a participant.

**Individual with disabilities** means a handicapped person as defined in 7 CFR 15b.3.

**Ineligible:** Does not meet the eligibility requirements necessary to participate in the WIC program, and therefore, is not certified as a WIC participant.

**Infant formula** means a food that meets the definition of an infant formula in section 201(z) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 321(z)) and that meets the requirements for an infant formula under section 412 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 350a) and the regulations at 21 CFR parts 106 and 107.

**Infant length board:** Measures recumbent length of all children up to 2 years of age and many to 3 years. Measures from 35-107 cm and 14-42 inches.

**Institution** means any residential accommodation which provides meal service, except private residences and homeless facilities.

**Infant:** A person who is 12 months old or younger. Once they turn 1-year-old, they are considered a child.

**Inventory audit** means the examination of food invoices or other proofs of purchase to determine whether a vendor has purchased sufficient quantities of supplemental foods to provide participants the quantities specified on food instruments redeemed by the vendor during a given period of time.

**INS** means Immigration and Naturalization Service

**Issued food benefits:** The benefits that have been sent to the eWIC contractor which are/will be available for purchase by a cardholder.

---

[Back to Top](#)

## J

**Joint guardianship:** When the custody of a child is split 50% of the time with each parent or caretaker.

---

[Back to Top](#)

## L

**Last service:** Date of last WIC service provided to the participant.

**Limited English Proficiency (LEP) persons:** Individuals who do not speak English as their primary language and who have a limited ability to read, speak, write, or understand English.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with § 246.5;
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Local Agency Self-Assessment (LASA):** The process in which a local agency reviews their management practices, the certification process, nutrition education, civil rights compliance, procedures to ensure accountability, financial management systems, and food delivery systems.

**Low risk participant:** Those participants with no assigned as high-level risks.

**Limited English Proficient (LEP):** Individuals who do not speak English as their primary language and who have a limited ability to read, speak, write, or understand English can be limited English proficient, or "LEP." These individuals may be entitled language assistance with respect to a particular type or service, benefit, or encounter

---

[Back to Top](#)

## M

**Management Evaluation:** A bi-annual review conducted by State of Alaska WIC Staff of Local Agencies of clinic operations.

**Maximum Allowable Reimbursement:** Maximum price allowed for vendor reimbursement of WIC product.

**Medical documentation** means that a health care professional licensed to write medical prescriptions under State law has made a medical determination that the participant has a qualifying condition and has provided the written documentation on the Enteral Nutrition Prescription Request form (ENPR).

**Medical Grade Equipment:** Equipment suitable for use in a physician's office, hospital, or other health care setting.



**Medicaid:** provides health coverage to millions of Americans, including eligible low-income adults, children, pregnant women, elderly adults and people with disabilities. Medicaid is administered by states, according to federal requirements. The program is funded jointly by states and the federal government.

***Members of populations*** means persons with a common special need who do not necessarily reside in a specific geographic area, such as off-reservation Indians or migrant farmworkers and their families.

**Mid-Certification Health Assessment (MCA):** A complete health assessment with appropriate nutrition education, anticipatory guidance, breastfeeding support and referrals that occurs approximately in the middle of a one-year certification. This is an expanded nutrition education appointment, not a certification. The MCA must be completed by a Competent Professional Authority.

**Migrant:** A migrant worker is an individual whose principal employment is on a seasonal basis, who has been so employed within the last 24 months, and who establishes, for the purposes of such employment, a temporary residence. Loggers, farm workers, seasonal fisherman and cannery workers are considered migrant workers if they meet these criteria.

**Minimum screening protocol:** The required procedures used to identify infants or children who might be at risk for under-immunization.

**Minimum Stock Requirement (MSR):** The minimum required stock allowable that a vendor can have in order to comply with state and federal regulations.

**Minorities:** Individuals or groups of individuals belonging to the protected classes and all under-served populations covered by Title VI of the Civil Rights Act of 1964.

**Motivational interviewing:** is a counseling method that helps people resolve ambivalent feelings and insecurities to find the internal motivation they need to change their behavior. It is a practical, empathetic, and short-term process that takes into consideration how difficult it is to make life changes.

**Multi-function equipment** means Point-of-Sale equipment obtained by a WIC vendor through commercial suppliers, which is capable of supporting WIC EBT and other payment tender types.

---

[Back to Top](#)

## N

**National Voter Rights Act:** Act was signed into law on August 6, 1965, by President Lyndon Johnson. It outlawed the discriminatory voting practices adopted in many southern states after the Civil War, including literacy tests as a prerequisite to voting. Sometimes referred to as “motor voter” act.

**Net price** means the difference between an infant formula manufacturer's lowest national wholesale price per unit for a full truckload of infant formula and the rebate level or the discount offered or provided by the manufacturer under an infant formula cost containment contract.

**No Longer Eligible:** Past participants who are no longer eligible to participate for various reasons such as turning 5-years old, meeting the post-partum eligibility period, change in income, not fulfilling recertification requirements, etc.

**No-Show Rate:** No-show rate is the percentage of applicants and participants that failed to attend their scheduled WIC appointment.

**Non-birth Breastfeeding Participant:** A participant who is breastfeeding an infant they did not give birth to and has legal responsibility for. Examples include foster parents, adoptive parents, and parent partners who are both breastfeeding and living in the same household. A non-birth breastfeeding parent may receive WIC services if they meet eligibility criteria and the infant receiving their human milk is a WIC participant.

**Non-contract brand infant formula** means all infant formula, including exempt infant formula, that is not covered by an infant formula cost containment contract awarded by that State agency.

**Nonprofit agency** means a private agency which is exempt from income tax under the Internal Revenue Code of 1954, as amended.

**Not To Exceed (NTE):** This is the price limit not to exceed the Maximum Allowable Reimbursement for WIC sales.

**Nutrition Care Plan: (NCP):** is a detailed plan or road map created by a dietitian that includes information about the intended plan of care for the patient. A dietitian will gather information about a patient from their medical chart, face-to-face meetings, lab work, anthropometrics, and other methods to create an NCP. Common components of a care plan include: 1.) Identify nutrition risk(s), strengths, needs and/or concerns, 2.) Design appropriate nutrition education

and breastfeeding promotion and support that address needs and concerns 3.) Tailor the food package to address nutrition needs 4.) Make appropriate referrals.

**Nutrition education** means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.

**Nutrition Education (as related to expenditure):** Activities related to general nutrition education and the required expenditure of 1/6 or 17% of a grantee's grant annually.

**Nutrition Education Plan (NEP):** The plan that local agencies intend to follow to offer nutrition education to participants. Nutrition education is the program benefit that sets WIC apart from the other Food and Nutrition Service (FNS) nutrition assistance programs.

**Nutrition-Focused Counseling:** An interactive helping process focused on eating behaviors, physical activity, and lifestyle, designed to improve health status and help participants to achieve their personal goals.

**Nutrition Risk Criteria Manual:** A manual that reviews the scientific basis for nutrition risk criteria used to establish eligibility for participation in the U.S. Department of Agriculture's Special Supplemental Nutrition Program for Women, Infants, and Children (WIC).

**Nutrition Services Standards (NSS):** outlines quality nutrition services for State and local agencies to follow, developed jointly by FNS and the National WIC Association. NSS assist State and local agencies in their continual efforts to improve the services they provide by focusing on core elements that are essential to providing high quality nutrition services. They also assist State and local agencies in setting expectations for WIC Program performance that are reasonable, achievable and measurable.

**Nutrition Services and Administration (NSA) Costs** means those direct and indirect costs, exclusive of food costs, as defined in § 246.14(c), which State and local agencies determine to be necessary to support Program operations. Costs include, but are not limited to, the costs of Program administration, start-up, monitoring, auditing, the development of and accountability for food delivery systems, nutrition education and breastfeeding promotion and support, outreach, certification, and developing and printing food instruments and cash-value vouchers.

**Nutrition Services and Administration (NSA) Funds:** NSA is used to fund WIC operations at state and local levels. Operations include WIC staffing cost, the WIC data system, educational materials, equipment, overhead, and all other costs involved in delivering WIC services to participants. A specific percentage of the NSA received by local WIC agencies must go towards

breastfeeding promotion and nutrition education services. The amount of NSA funding an agency receives is based on assigned caseload.

**Nutrition Services & Administration (NSA) Funding Formula:** A formula that determines allocation of WIC funds to county, non-profit organization or Native American programs for WIC operation, breastfeeding promotion and nutrition education services.

**Nutrition Services Plan (NSP):** The term nutritional services plan is interchangeable with nutrition education plan.

**Nutrition tailoring:** is a process of modifying food packages to better meet the supplemental nutrition needs of individual participants.

***Nutritional risk*** means:

- (a) Detrimental or abnormal nutritional conditions detectable by biochemical or anthropometric measurements;
- (b) Other documented nutritionally related medical conditions;
- (c) Dietary deficiencies that impair or endanger health;
- (d) Conditions that directly affect the nutritional health of a person, including alcoholism or drug abuse; or
- (e) Conditions that predispose persons to inadequate nutritional patterns or nutritionally related medical conditions, including, but not limited to, homelessness and migrancy.

---

[Back to Top](#)



**Offsite visits:** A certification that occurs outside of the WIC clinic setting without access to the data system.

**OIG** means the Department's Office of the Inspector General.

***Other harmful substances*** means other substances such as tobacco, prescription drugs and over-the-counter medications that can be harmful to the health of the WIC population, especially the pregnant woman and her fetus.

**Outreach:** Activities performed primarily by local agency to communicate the availability of WIC program benefits, eligibility criteria, and program locations to potential participants in the community.

## P

**Paraprofessional CPA:** A person employed to assist or expand the efforts of professional CPAs. A health professional will supervise the paraprofessional's direct contact with WIC participants and their conducting of education programs.

**Participant-Centered Services (PCS):** A systems approach designed to focus on topics and issues that are relevant to the participant. This approach puts the participants needs and the goal of healthy behaviors at the core of WIC service delivery, and focuses on a person's capacities, strengths, and developmental needs, not solely on the problems, risks or negative behaviors. In contrast to the traditional didactic WIC assessment and education model, participant-centered services encourage staff to engage the participant/caretaker in dialogue, information exchange, listening and feedback, in order to translate the assessment into action and customize the nutrition services provided.

**Participant violation** means any deliberate action of a participant, parent or caretaker of an infant or child participant, or proxy that violates Federal or State statutes, regulations, policies, or procedures governing the Program. Participant violations include, but are not limited to, deliberately making false or misleading statements or deliberately misrepresenting, concealing, or withholding facts, to obtain benefits; selling or offering to sell WIC benefits, including cash-value vouchers, food instruments, EBT cards, or supplemental foods in person, in print, or online; exchanging or attempting to exchange WIC benefits, including cash-value vouchers, food instruments, EBT cards, or supplemental foods for cash, credit, services, non-food items, or unauthorized food items, including supplemental foods in excess of those listed on the participant's food instrument; threatening to harm or physically harming clinic, farmer, or vendor staff; and dual participation.

**Participant records:** Documents, regardless of medium or physical form, containing information relating to case histories, health records, treatment charts, progress reports, or accounts of the participants of any provider that are maintained in the regular course of business.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving benefits for supplemental foods under the Program, and the breastfed infants of participant breastfeeding women.

**Participation** means the sum of:

- (1) The number of persons who received supplemental foods or food instruments during the reporting period;
- (2) The number of infants who did not receive supplemental foods or food instruments but whose breastfeeding mother received supplemental foods or food instruments during the report period; and

(3) The number of breastfeeding women who did not receive supplemental foods or food instruments but whose infant received supplemental foods or food instruments during the report period.

**Peer Group:** The State agency's methodology for establishing a vendor peer group system that includes: 1) Two criteria for establishing peer groups by measure of geography. 2) Routine collection of vendor shelf prices every 6 months following authorization to monitor compliance. 3) Assessment of effectiveness of peer groupings and competitive price criteria at least every 3 years.

**Performance Standard:** The performance standard is the number of participants that each Local Agency is expected to serve. A measurement established through the RFP process.

**Personal Identification Number (PIN):** A 4-digit number set by the cardholder via the banking contractor website or customer service phone number to keep access to their food benefits secure.

**Policy Release Note:** Notification sent to WIC Coordinators to inform them of specific policy changes. This goes out to Coordinators for every policy release.

**Proration (of WIC Food Packages):** While nutrition tailoring is based on individual nutrition needs and preferences, proration is apportioning the amount of supplemental food a participant is entitled to receive based on the remaining days/weeks in the month or issuance cycle.

**Post-partum woman:** means individual up to six months after termination of pregnancy (live birth, stillbirth, miscarriage at any state of pregnancy, or abortion).

**Post-partum non-breastfeeding woman:** A woman after termination of pregnancy (live birth, stillbirth, miscarriage at any state of pregnancy, or abortion) who is not breastfeeding her infant.

**Poverty income guidelines** means the poverty income guidelines prescribed by the Department of Health and Human Services. These guidelines are adjusted annually by the Department of Health and Human Services, with each annual adjustment effective July 1 of each year. The poverty income guidelines prescribed by the Department of Health and Human Services shall be used for all States, as defined in this section, except for Alaska and Hawaii. Separate poverty income guidelines are prescribed for Alaska and Hawaii.

**Pregnant women** means women determined to have one or more embryos or fetuses in utero.

**Presumptive eligibility** is an expedited process of enrolling eligible pregnant Alaska residents into the WIC program. The prenatal applicant has applied for Medicaid but has not yet been approved for Medicaid. The prenatal applicant is still enrolled in WIC because WIC "presumes"

on the basis of probability or likelihood that her prenatal Medicaid application will be accepted as eligible.

**Price adjustment** means an adjustment made by the State agency, in accordance with the vendor agreement, to the purchase price on a food instrument after it has been submitted by a vendor for redemption to ensure that the payment to the vendor for the food instrument complies with the State agency's price limitations.

**Primary contract infant formula** means the specific infant formula for which manufacturers submit a bid to a State agency in response to a rebate solicitation and for which a contract is awarded by the State agency as a result of that bid.

**Principal employment:** Over half of the person's job, as measured by time worked or income generated.

**Priority Assignment:** A ranking system used to indicate severity of need when comparing one participant with another and used for caseload management. Priority 1 is highest priority, Priority 7 is lowest priority.

**Priority:** The ranking assigned to a participant based on the individual's WIC category and identified risk factors in accordance with the federal nutrition risk priority system.

**Professional CPA:** A person with a bachelor's or master's degree in a health profession, such as nutrition, nursing or health education. Includes physicians, physician assistants, registered nurses, dietitians, or public health educators.

**Proof of guardianship:** Court documents identifying the legal guardian(s).

**Program** means the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) authorized by section 17 of the Child Nutrition Act of 1966, as amended.

**Protected classes:** The prohibited bases and nondiscrimination categories under the civil rights law(s). For WIC, the protected classes are race, color, sex, age, national origin, and disability.

**Proxy** means any person designated by a woman participant, or by a parent or caretaker of an infant or child participant, to obtain and transact food instruments or cash-value vouchers or to obtain supplemental foods on behalf of a participant. The proxy must be designated consistent with the State agency's procedures established pursuant to § 246.12(r)(1). Parents or caretakers applying on behalf of child and infant participants are not proxies. In SPIRIT this is called the "alternate authorized representative".

**Proxy in lieu of disqualification:** Person temporarily authorized to bring an infant/child to appointments and shop with WIC benefits on behalf of the participant. Instead of disqualifying

infants and children for violations committed by a cardholder, a proxy can be assigned so an infant/child can continue to receive WIC benefits.

**Public Charge:** is a term used by the Immigration and Naturalization Service (INS) as anyone who would become dependent on the U.S. government after gaining immigrant status.

---

[Back to Top](#)

## Q

**Quality Improvement (QI) :** A continuous and ongoing effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes, and other indicators of quality in services or processes which achieve equity and improve the delivery of WIC to the community.

---

[Back to Top](#)

## R

**Race:** The racial categories described by the USDA are:

***American Indian or Alaskan Native:*** A person having origins in any of the original peoples of North America and South America (including Central America), and who maintains tribal affiliation or community attachment.

***Asian:*** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

***Black or African American:*** A person having origins in any of the black racial groups of Africa. Terms such as “Haitian” or “Negro” can be used in addition to “Black or African American.”

***Native Hawaiian or Other Pacific Islander:*** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

***White:*** A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

***Real property*** means land, including land improvements, structures and appurtenances thereto, but excludes moveable machinery and equipment.



**Reasonable accommodation:** The removal of barriers in order to allow all individuals to participate in the WIC program.

**Rebate** means the amount of money refunded under cost containment procedures to any State agency from the manufacturer of the particular food product as the result of the purchase of the supplemental food with a voucher or other purchase instrument by a participant in each State agency's program. Such rebates shall be payments made subsequent to the exchange of a food instrument for food.

**Recommended Dietary Allowances (RDAs)** are the levels of intake of essential nutrients that, on the basis of scientific knowledge, are judged by the Food and Nutrition Board to be adequate to meet the known nutrient needs of practically all healthy persons.

**Redeemed food benefits:** Benefits used by the cardholder(s) to purchase foods issued to a participant.

**Refusal of nutrition education:** Participant states unwillingness or inability to attend any nutrition education offered.

**Remote certification:** Remote certification refers to the process of certifying participants who are not physically present in the WIC agency office. Remote certifications may be conducted by local agency staff via phone, HIPAA-compliant telemedicine, and/or video chats.

**Remote Indian or Native village** means an Indian or Native village that is located in a rural area, has a population of less than 5,000 inhabitants, and is not accessible year-round by means of a public road (as defined in 23 U.S.C. 101).

**Request for proposal (RFP):** Also referred to as the grant. Process by which the State of Alaska solicits agencies to provide WIC services. The RFP and grant are binding documents between the State of Alaska and a local agency.

**Requesting a Fair Hearing:** Any clear expression by the individual or the individual's parent, caregiver, or other representative, that he/she/they desire an opportunity to present his/her/their case to a higher authority.

**Required information:** Information that must be collected for WIC applicants to be enrolled on the WIC program.

**Residency:** means the county jurisdiction to which a person mentally intends his or her permanent residency to be and that can be factually supported. Factual evidence that would be supportive of that intent includes but is not limited to, a Driver license, tax receipts, bills of residency (electricity, water, garbage service), receipt of mail, homestead property, declaration of domicile, and other activities indicative or normally associated with home life.

**Restitution:** Reimbursement to the state WIC program for the cash value of program benefits received by a participant as a result of a violation.

**Retail food delivery system:** The primary food delivery system used in Alaska whereby participants take eWIC cards to authorized grocery stores and pharmacies to obtain the prescribed foods and formula.

**Retention Period:** The minimum length of time a record must be retained as authorized by an applicable retention schedule published in the Code of Federal Regulations (CFR), or recommended by the State WIC Program.

**Retroactive Benefits:** means benefits to which an individual becomes entitled for a month prior to the month in which application for such benefits is filed.

**Risk Criteria:** Health or dietary conditions that indicate a nutrition related problem and is required for program eligibility.

**Routine monitoring** means overt, on-site monitoring during which program representatives identify themselves to vendor personnel.

---

[Back to Top](#)

## S

**Sanction:** Civil money penalty imposed by the state WIC program because of a violation.

**Second Cardholder:** The optional second cardholder who has been issued their own eWIC card with the permission of the first cardholder.

**Secondary Nutrition Education:** Participant-centered nutrition education that is provided between a certification contact and a mid-certification contact. It is expected to occur twice in a year long certification period.

**Secretary** means the Secretary of Agriculture.

**Separation of Duties:** A standard accountability/security practice to separate income eligibility from risk assessment.

**Service area:** The geographical area serviced by a local WIC Program.

**SFMNP:** Senior Farmers' Market Nutrition Program provides food and educational benefits to qualified seniors from local authorized Farm, Farmstand, Farmer' Market.

**SFPD** means the Supplemental Food Programs Division of the Food and Nutrition Service of the U.S. Department of Agriculture.

**Shared guardianship:** When the custody of a child is split between parents or caregivers and the child spends more than 50% of the time with one of those caregivers.

**Sign or signature** means a handwritten signature on paper or an electronic signature. If the State agency chooses to use electronic signatures, the State agency must ensure the reliability and integrity of the technology used and the security and confidentiality of electronic signatures collected in accordance with sound management practices, and applicable Federal law and policy, and the confidentiality requirements in § 246.26.

**Single-function equipment** means Point-of-Sale equipment, such as barcode scanners, card readers, PIN pads and printers, provided to an authorized WIC vendor solely for use with the WIC Program.

**Single issuance:** When a participant is issued Food Benefits for one month (also referred to as "one-month issuance").

**SOAP:** Type of note used for documenting subjective and objective information collected, assessment and plan for the participant.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

**Special situation:** When a participant is unable to provide one of the required proofs because something in their life makes it unlikely that they will be able to obtain proof without it causing a barrier to receiving WIC services. Examples of special situations include being a disaster victim, being homeless, working for cash, having no source of income, or being a migrant.

**Stadiometer:** A stadiometer is a piece of medical equipment used for measuring human height. It is usually constructed out of a ruler and a sliding horizontal headpiece which is adjusted to rest on the top of the head.

**Stages of Change Model:** One of the best-known approaches to change is the stages of change (aka, transtheoretical) model, introduced in the late 1970s by researchers James Prochaska and Carlo DiClemente. The stages of change model has been found to be an effective aid in understanding how people go through a change in behavior.

**State** means any of the fifty States, the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, Guam, American Samoa, or the Commonwealth of the Northern Mariana Islands.

**State agency** means the health department or comparable agency of each State; an Indian tribe, band or group recognized by the Department of the Interior; an intertribal council or group which is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior and which has an ongoing relationship with such tribes, bands or groups for other purposes and has contracted with them to administer the Program; or the appropriate area office of the Alaska Department of Health.

**State alliance** means two or more State agencies that join together for the purpose of procuring infant formula under the Program by soliciting competitive bids for infant formula.

**State Fiscal Year (SFY):** The period of 12 calendar months beginning July 1 of any calendar year and ending June 30 of the following calendar year.

**State Plan** means a plan of Program operation and administration that describes the manner in which the State agency intends to implement and operate all aspects of Program administration within its jurisdiction in accordance with § 246.4.

**State point of contact:** Phone number that State and local agencies can use to obtain VOC information for transfer purposes. All State points of contact can be found here- <http://www.fns.usda.gov/wic/wic-contacts>.

**State Requirement:** An action required by the state WIC program due to state and federal requirements, USDA mandates that allow the state office to set local requirements, state grant assurances, and/or requirements from all state memorandums.

**Statewide EBT** means the State agency has converted all WIC clinics to an EBT delivery method and all authorized vendors are capable of transacting EBT purchases.

Subsequent certification (recertification): Any certification after the initial certification.

**Subpoena:** An order that requires the named party to appear before a court at a hearing or a trial, to attend out of court at a deposition or to submit copies of requested documents.

**Supplemental foods** means those foods containing nutrients determined by nutritional research to be lacking in the diets of pregnant, breastfeeding and postpartum women, infants, and children, and foods that promote the health of the population served by the WIC Program as indicated by relevant nutrition science, public health concerns, and cultural eating patterns, as prescribed by the Secretary in § 246.10.

**Supplemental Nutrition Assistance Program (SNAP)**, formerly known as the Food Stamp Program, is the program authorized by the Food and Nutrition Act of 2008 (7 U.S.C. 2011, et. seq.), in which eligible households receive benefits that can be used to purchase food items from authorized retail stores and farmers' markets.

**SWAN (SPIRIT Web for Alaska Nutrition)** is the Web-based redesigned WIC MIS based on the previous Alaska WIC MIS, now referred to as SPIRIT Legacy.

---

[Back to Top](#)

## T

**TANF:** Temporary Assistance for Needy Families: A program administered by the Alaska Department of Human (DOH) that provides financial assistance to needy children and/or their families.

**Temporary abode:** Temporary abode is established when an individual's circumstance requires them to temporarily move from his or her place of residence. It can also be considered temporary housing established to allow work in short-term, seasonal labor.

**Termination:** A participant is terminated from the program when a participant's record is closed and benefits cease for any reason, including not meeting eligibility requirements, transferring out of state, etc. If the participant has been terminated from the program due to a participant violation, it is considered a disqualification.

**The WIC Data System:** The Alaska WIC management information system (MIS).

**Time Study:** A method used to calculate personnel costs for WIC funded staff. Time study data is required of all WIC program staff to assure accurate federal reporting of WIC funds.

**Training Supervisor:** A person designated by the local program to ensure training of local staff is completed in accordance with state policy.

---

[Back to Top](#)

## U

**USDA implementing regulations** include the following: 2 CFR part 400, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards; 2 CFR part 415, General Program Administrative Regulations; 2 CFR part 416, General Program Administrative Regulations for Grants and Cooperative Agreements to State and Local Governments; and 2 CFR part 418, New Restrictions on Lobbying.

**USDA Requirement:** An action required by USDA. The requirement is found in the published code of federal regulations (CFR) and/or USDA policy letters and/or all state memorandums (ASM).

---

[Back to Top](#)

## V

**Value Enhanced Nutrition Assessment (VENA):** A process developed jointly by the Food and Nutrition Services (FNS) and the National WIC Association (NWA) to improve nutrition services in the WIC Program. VENA sets participant-centered standards for the nutrition assessment that determines eligibility, enabling local agency nutritionists to personalize WIC nutrition education, provide more relevant referrals, and tailor food packages to the individual participant's needs.

**Vendor** means a sole proprietorship, partnership, cooperative association, corporation, or other business entity operating one or more stores authorized by the State agency to provide authorized supplemental foods to participants under a retail food delivery system. Each store operated by a business entity constitutes a separate vendor and must be authorized separately from other stores operated by the business entity. Each store must have a single, fixed location, except when the authorization of mobile stores is necessary to meet the special needs described in the State agency's State Plan in accordance with § 246.4(a)(14)(xiv).

**Vendor authorization** means the process by which the State agency assesses, selects, and enters into agreements with stores that apply or subsequently reapply to be authorized as vendors.

**Vendor limiting criteria** means criteria established by the State agency to determine the maximum number and distribution of vendors it authorizes pursuant to § 246.12(g)(2).

**Vendor management:** The coordination of activities involving vendor activities, including authorizing, training, and monitoring for continued a with the WIC vendor agreement and ensuring that the food delivery system complies with USDA requirements.

**Vendor overcharge** means intentionally or unintentionally charging the State agency more for authorized supplemental foods than is permitted under the vendor agreement. It is not a vendor overcharge when a vendor submits a food instrument for redemption and the State agency makes a price adjustment to the food instrument.

**Vendor peer group system** means a classification of authorized vendors into groups based on common characteristics or criteria that affect food prices, for the purpose of applying appropriate competitive price criteria to vendors at authorization and limiting payments for food to competitive levels.

**Vendor selection criteria** means the criteria established by the State agency to select individual vendors for authorization consistent with the requirements in § 246.12(g)(3) and (g)(4).

**Vendor violation** means any intentional or unintentional action of a vendor's current owners, officers, managers, agents, or employees (with or without the knowledge of management) that violates the vendor agreement or Federal or State statutes, regulations, policies, or procedures governing the Program.

**Verification of Certification (VOC)** - the primary intent of the transfer/VOC provisions is to ensure seamless and continued participation of certified WIC participants through the entirety of their certification period. The provisions also aim to reduce the administrative burden on a certified participant and Local Agencies.

**Voter or potential voter:** Program applicants, participants, parents or caregivers who are offered the opportunity to register to vote or update their voter registration address.

---

[Back to Top](#)

## W

**Wait list:** A list of individuals who express interest in receiving benefits and are likely to be served when caseload slots become available.

**WIC** means the Special Supplemental Nutrition Program for Women, Infants and Children authorized by section 17 of the Child Nutrition Act of 1966, 42 U.S.C. 1786.

**WIC Authorized Food List:** The list of foods that are eligible to be prescribed for WIC participants in Alaska.

**WIC Designated Breastfeeding Expert (DBE):** An individual who is an expert with special experience or training in helping breastfeeding mothers and who provides breastfeeding expertise and care for more complex breastfeeding problems when WIC staff face situations outside their scope of practice. Individuals with this designation can be WIC staff including Breastfeeding Coordinators, Peer Counselor Coordinators, International Board Certified Lactation Consultants (IBCLCs), Certified Lactation Counselors or Certified Lactation Educators, nutritionists, and nurses or community health care providers such as physicians or nurses. The IBCLC is the preferred WIC DBE (2013 WIC NSS).

***WIC-eligible nutritionals for participants with qualifying conditions (hereafter referred to as “WIC-eligible nutritionals”)*** means certain enteral products that are specifically formulated to provide nutritional support for individuals with a qualifying condition, when the use of conventional foods is precluded, restricted, or inadequate. Such WIC-eligible nutritionals must serve the purpose of a food, meal or diet (may be nutritionally complete or incomplete) and provide a source of calories and one or more nutrients; be designed for enteral digestion via an oral or tube feeding; and may not be a conventional food, drug, flavoring, or enzyme. WIC-eligible nutritionals include many, but not all, products that meet the definition of medical food in Section 5(b)(3) of the Orphan Drug Act (21 U.S.C. 360ee(b)(3)).

**WIC Nutritionist:** A nutrition professional working in WIC who meets one or more of the following qualifications: a Master’s Degree in nutrition; a Registered Dietitian (RD) with the Academy of Nutrition and Dietetics, or eligible for RD registration; an Alaska Licensed Dietitian.

**WIC Overseas Program:** An overseas program like WIC implemented by the Department of Defense using DoD funds for members and dependents of active-duty military personnel, civilian employees and contractors of the DoD living overseas, who are eligible for WIC.

**WIC program employee:** Any person(s) associated directly or indirectly with a local WIC agency to provide services related to the WIC program, regardless of any funding used to support their position. Persons acting under contract, as an intern, or as a volunteer in a local agency are included under this definition.

**WIC program employee conflict of interest statement:** A form provided by the State WIC office for all WIC employees to sign annually to document the employee has been advised and understands WIC policies and regulations about confidentiality, conflict of interest and employee fraud and abuse.

**WIC records:** Documents containing information relating to WIC services provided to WIC participants; WIC program operations; and local program staff training, regardless of medium or physical form.



---

[Back to Top](#)

## Abbreviations:

AAP	American Academy of Pediatrics
APL	Approved Product List
BFPC	Breastfeeding Peer Counseling
CACFP	Child and Adult Care Food Program
CPA	Competent Professional Authority
CVB	Cash Value Benefits
DBE WIC	Designated Breastfeeding Expert
DHHS	United States Department of Health and Human Services
DPA	Department of Public Assistance
EBT	Electronic Benefit Transfer
ENPR	Enteral Nutrition Prescription Request Form
FMNP	Farmer's Market Nutrition Program
FNS	Food and Nutrition Service: US Department of Agriculture
GAO	General Accounting Office
HIPAA	Health Insurance Portability and Accountability Act
IBCLC	International Board-Certified Lactation Consultant
LA	Local Agency
LEP	Limited English Proficiency
MIS	Management Information Systems
MMA	Maximum Monthly Allowance
MSR	Minimum Stock Requirement
NTE	Not to Exceed
NSA	Nutrition Services and Administration
NVRA	National Voter Registration Act (of 1993)
OIG	Office of the Inspector General (of the USDA)
PC	Peer Counselor
SFPD	Supplemental Food Programs Division (of FNS of the USDA)
SOA	State of Alaska
SPIRIT	Successful Partners in Reaching Innovative Technology
SFMNP	Senior Farmers' Market Nutrition Program
SNAP	Supplemental Nutrition Assistance Program
SWAN	Spirit Web for Alaska Nutrition
UPC	Universal Product Code
USDA	United States Department of Agriculture
VENA	Value Enhanced Nutrition Assessment
VOC	Verification of Certification
VMU	Vendor Management Unit
WHO	World Health Organization

WIC

Special Supplemental Nutrition Program for Women, Infants, and  
Children

---

[Back to Top](#)



## Alaska WIC Policy & Procedure Manual

### Section: 200 Vendor and Farmer Management

#### **Policy: 201 Overview of Vendor Management**

Effective Date: 00/00/0000

##### **PURPOSE:**

The state Vendor Management Unit (VMU) has primary responsibility for the oversight and management of vendor operations as it pertains to WIC authorization.

##### **POLICY: 201 Overview of Vendor Management**

To describe the Alaska food delivery and vendor management systems.

##### **State responsibilities in vendor management:**

The state Vendor Management Unit performs the following vendor management tasks:

- Authorizes WIC and Farmer/Market- vendors, home food delivery contractors, and direct distribution sites to accept food instruments
- Design all food delivery systems to be used by its local agencies
- Informs Local Agency staff of the authorization status of stores in their clinic area
- Designs and conducts vendor training.
- Performs on-site reviews prior to a vendor's authorization and as needed to monitor compliance
- Defines selection criteria and competitive price for allowable reimbursement levels for each peer group
- Implement effective peer groups
- Communicates with vendors
- Keeps state-produced vendor materials current
- Maintains vendor data
- Management of complaints and reports of fraud
- Coordinates transaction adjustments for authorized vendors
- Represents WIC in administrative and court hearings
- Monitors store closures and transfer of ownership
- Collects and analyzes vendor data, e.g., store redemption data
- Clarifies WIC policies and procedures on vendor-related issues to state and local staff
- Communicates with USDA on vendor-related issues



### Local Agency responsibilities in vendor management

Local WIC program staff perform the following vendor management tasks:

- Communicate with state Vendor Management Unit staff
- Refer inquiries for store authorization
- Report any WIC authorized store changes
- Request clarification of policies and procedures when necessary
- Provide information to state WIC staff regarding whether the termination of a specific vendor would result in inadequate participant access
- Provide information to state WIC staff regarding whether a stock exception request from a specific vendor would result in inadequate availability of a specific food or infant formula
- Report complaints from participants about vendors
- Follow-up on reports from vendors of participant non-compliance
- Conduct on-site reviews at the request of the state Vendor Management Unit

### Retail food delivery system

- The Alaska WIC program uses a retail food delivery system. Only vendors authorized by the Alaska WIC program may conduct eWIC transactions.
- Balto: The Alaska WIC Program, through a competitive bid process, contracts with a vendor to provide a food delivery service. Balto boxes are primarily used to deliver WIC foods to rural areas of the state or when infant foods are not required to be stocked by WIC authorized grocery store vendors. The local clinic designates a household as Non-Balto, All Balto or Formula-Only Balto. When authorized, participants can register on-line with the vendor, choose, and order their WIC foods on-line and have them delivered to their home address or nearest Post Office. Additionally, for participants unable to order on-line there is a phone order option to place Balto Box orders. The vendor(s) processes the orders and ships food boxes directly to each WIC participant.

### REFERENCE:

7 CFR §246.3(e)(2)—Administration, State staffing standards

7 CFR §246.12(a)(2)(4)—Food delivery systems

7 CFR §246.12(r)(4)— Issuance of food instruments

Additional information about the Vendor Management program can be found here:

<https://health.alaska.gov/dpa/Pages/nutri/WIC/default.aspx>

### DEFINITIONS:

**Retail food delivery system:** The primary food delivery system used in Alaska whereby participants take eWIC cards to authorized grocery stores and pharmacies to obtain the prescribed foods and formula.



**Vendor management:** The coordination of activities involving vendor activities, including authorizing, training, and monitoring for continued compliance with the WIC vendor agreement and ensuring that the food delivery system complies with USDA requirements.

**eWIC card:** Magnetic stripe card used to purchase WIC authorized foods or formulas from a WIC family's Electronic Benefit Account (EBA). Each card has a 16-digit Primary Account Number (PAN).

**Peer Group:** The State agency's methodology for establishing a vendor peer group system that includes: 1) Two criteria for establishing peer groups by measure of geography. 2) Routine collection of vendor shelf prices every 6 months following authorization to monitor compliance. 3) Assessment of effectiveness of peer groupings and competitive price criteria at least every 3 years.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
04/01/2024	Draft
04/09/2024	Revised

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a "draft" watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A "draft" watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual Section: 200 Vendor and Farmer Management

### Policy: 202 Overview of WIC Farmers Market Program

Effective Date: 00/00/0000

#### PURPOSE:

The state Vendor Management Unit (VMU) has primary responsibility for the WIC Farmers Market Nutrition Program.

#### POLICY: 202 Overview of WIC Farmers Market Nutrition Program

To outline the tasks associated with the Alaska Farmers' Market Nutrition Program, the responsibilities of the State of Alaska vs. those of the Local Agency.

#### PROCEDURE:

##### State responsibilities in vendor management:

- The state Vendor Management Unit performs the following tasks:
- Responsible for effective and efficient administration of the FMNP, administration of grants
- Provide guidance to cooperating WIC State and local agencies on all aspects of FMNP operations.
- Designs and submits annual FMNP State Plan by November 15th each year
- Ensure State and Local Agencies comply with Civil Rights Requirements
- Investigate claims/complaints against participants or farmer/market vendors
- Design and print nutrition education for FMNP program participants
- Designs and implements annual training for Local Agencies and Farmer and Market-Vendors
- Conducts monitoring and Management Evaluations of, at minimum, 10% of farmer, 10% market vendors, and 10% of farmstands.
- Coordinates bi-annual review of all local agencies for FMNP practices.
- Ensure control of FMNP benefit issuance by, providing accountability for receipt and issuance of benefits, providing secure transportation and storage of unissued FMNP benefits, and designing and implementing a system of review of FMNP benefits to detect errors.
- Reconciliation of season redemption, lost or stolen benefits, expired, or non-match of issuance records
- Communicates with contractors on procuring, printing, and shipping of WIC FMNP benefits
- Review monthly invoices from contractors, send to finance upon approval
- Solicit farmers to participate in the WIC FMNP and Senior FMNP Program
- Solicit Farmers' Markets to participate in the WIC FMNP and Senior FMNP Program



- Authorize renewing farmers and markets
- Review all applications for Farmer and Market Venders during open enrollment
- Annual contract renewal and monitor deliverables
- Prepare and finalize state financial closeout
- Complete end of year reporting for USDA

**Local Agency responsibilities in vendor management:**

Local WIC program staff perform the following tasks:

- A WIC Coordinator from each participating Local Agency must attend an annual Local Agency FMNP training and relay all pertinent information to their respective staff.
- Ensure all eligible participants have access to FMNP benefits, either in person and/or by mail.

Eligibility requirements are as follows:

- Participants must be WIC Certified
- Participants must be Pregnant, Breastfeeding, Non-Breastfeeding up to 6 months postpartum, a child 5 and under, or an Infant.
- Infants must be at least 6 months of age by September 30 of the benefit year or born before April 1st of the benefit year.
- It is recommended that the WIC clinic provide 2 reasonable attempts at notifying eligible participants of their eligibility to receive FMNP benefits.
- Monitor dual participation with the Excel spreadsheet provided to the LA by the SOA VMU. If the participant lands in multiple clinics, document, and report to SOA.
- Monitor program complaints and report to SOA.
- Document lost/ stolen FMNP benefits and report to SOA
- Upon SOA approval, reissue lost/stolen benefits. Monitor and document program misuse. Remind the household that redeeming benefits from multiple issuances is against program rules and may result in disciplinary action including collections or termination from the WIC program.

**REFERENCE:**

7 CFR §248.1 — 7 CFR § 248.23

**DEFINITIONS:**

**DOB:** Date of Birth

**SOA:** State of Alaska

**VMU:** Vendor Management Unit

**POLICY HISTORY:**

Date	Draft, released, training, revised, reviewed
------	--



## Alaska WIC Policy & Procedure Manual



04/01/2024	Draft
04/09/2024	Revised
04/17/2024	Revised

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services



### Policy: 301 – Providing Nutrition and Breastfeeding Education at Certification and Recertification

Effective Date: 06/2023

#### PURPOSE:

To describe how staff develop the appropriate and individualized nutrition and breastfeeding education at certification and recertification, based on participant's nutrition and breastfeeding assessment.

#### POLICY: 301 – Providing Nutrition and Breastfeeding Education at Certification and Recertification

#### BACKGROUND:

Following a complete nutrition and breastfeeding assessment by a CPA at certification and recertification, and identification of the participant's risk factor(s), CPAs provide relevant nutrition education. The education provided is determined by the CPA based on the nutrition risks and concerns identified at the assessment. Education involves having a participant centered conversation about the participant's nutrition, breastfeeding, physical activity and health related needs, interests, and goals.

Every pregnant participant is assessed for her thoughts about breastfeeding and offered information based on her needs.

Nutrition education is provided to all categories at each certification and at mid-certification for infants, children, and breastfeeding women. The nutrition assessment serves as a basis from which subsequent nutrition services are provided.

A SOAP note is documented in the participant's SPIRIT chart. Participant (or caregiver's) thoughts and feelings, information shared, and topics discussed are documented. The participant's goal can also be recorded here or on the nutrition education tab.

An important part of providing nutrition and breastfeeding education is actively engaging the participant (or caregiver) in a conversation involving dialogue, information exchange, active listening, and feedback.

#### PROCEDURE:

1. CPA reviews information gathered in the assessment.



## Alaska WIC Policy & Procedure Manual



- a. Assess a participant's nutrition, breastfeeding, physical activity, and health related needs and interests.
  - b. Clarify and prioritize information collected and probe for any additional information as needed.
  - c. Identify the pertinent risk factor(s) and issues and make participant-centered decisions about:
    - Appropriate nutrition education and counseling
    - Tailoring the food package to address nutrition needs
    - Appropriate referrals
2. CPA facilitates a participant centered conversation with the participant (or caregiver).
- a. Explore topics related to the participant's nutrition risks, and other topics related to the participant's age or the interests of the participant (or caregiver)
    - Nutrition risks and needs identified in the assessment are the basis of the topics to discuss.
    - Not all topics identified during the assessment can be covered. A better plan for success for the participant is to cover one message clearly, including any reinforcement materials.
    - Assess every pregnant participant's thoughts on breastfeeding and offer information and referrals based on participant's needs and interests.
3. Have a goal setting conversation.
  4. Summarize next steps for participant and affirm their goal.
  5. Document conversation topics and next steps in the plan section of the SOAP note.
  6. The goal can be documented with the plan, or on the nutrition education tab in SPIRIT.

Mid-certification nutrition assessment occurs at or near the midpoint of the certification for infants, children and breastfeeding women.

1. Similar to nutrition education at certification, relevant risk factors, issues and goals are reviewed by CPA, and nutrition education can stem from these. For example, if a participant set a goal to eat dinner as a family more often, CPA can ask if participant was successful, and provide participant with other relevant information, resources, and reinforcement materials.
2. CPAs can also base mid-certification education on the age or stage of the participant.
  - a. An example for an infant mid-certification education would be talking about introduction of solid foods and drinking from a cup.



## Alaska WIC Policy & Procedure Manual



- b. Examples for children include learning to like new foods by seeing them over and over, healthy snacks using WIC foods, and ideas for active play.

### REFERENCE:

WRO Policy Memo 805-F Nutrition Education Guidance, January 2006

WRO Policy Memo 8/29/2011: Guidance for Providing Quality WIC Nutrition Services During Extended Certification Periods

Value Enhanced Nutrition Assessment (VENA)

<https://wicworks.fns.usda.gov/resources/value-enhanced-nutrition-assessment-vena-guidance>

WIC Nutrition Services Standards: Standards 7, 8, 9 and 10

<https://health.alaska.gov/dpa/Documents/dpa/programs/Nutrition/WIC/Staff/Manuals/Policy-Procedure/Nutrition-Service-Standards.pdf>

### CROSS REFERENCE:

Job Aid 041: Index of Allowed Nutrition Risk Criteria

### DEFINITIONS:

**CPA:** Competent Professional Authority

**Nutrition education** means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.

**Participant-Centered Services (PCS):** A systems approach designed to focus on topics and issues that are relevant to the participant. This approach puts the participant's needs and the goal of healthy behaviors at the core of WIC service delivery, and focuses on a person's capacities, strengths, and developmental needs, not solely on the problems, risks or negative behaviors. In contrast to the traditional didactic WIC assessment and education model, participant-centered services encourage staff to engage the participant/caretaker in dialogue, information exchange, listening and feedback, in order to translate the assessment into action and customize the nutrition services provided.

**SOAP Note:** used in SPIRIT to document certifications and recertifications. "S" stands for subjective, what the participant tells you and reports on the application. "O" stands for objective, including for example weight, height, and bloodwork. SPIRIT auto-populates this field and includes nutrition topics selected on the nutrition education tab. "A" stands for



## Alaska WIC Policy & Procedure Manual



assessment. It's the place to write your summary of what you've learned from the information gathering. "P" stands for plan. This is where the plan for the behavior change can be documented, along with any reinforcement materials.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
06/2023	FNS Approved
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a "draft" watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A "draft" watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## **Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services**

### **Policy: 302 – Nutrition Education Guidance**

Effective Date: 11/01/2016

#### **PURPOSE:**

To outline the elements that make nutrition education effective and to inform Local WIC Agencies of their responsibilities in providing and documenting nutrition education. It also describes the requirements for sharing nutrition education materials with the Child and Adult Care Food Program (CACFP) and the conditions under which a proxy may serve as a participant's representative for various WIC-related activities.

#### **POLICY: 302 – Nutrition Education Guidance test**

##### **Nutrition Education Guidance**

Effective nutrition education improves WIC participants' health status, achieves positive change in dietary and physical activity habits emphasizing the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual. The promotion of the health benefits of regular physical activity as a component of nutrition education supports the development of lifelong habits for good health.

##### **Nutrition Education Materials – Part 1**

Local Agencies are responsible for purchasing their nutrition education materials. All nutrition education materials must be sent to the State WIC Office for review before printing and distribution.

In SPIRIT, clinic staff will record the materials provided to the participant from the Nutrition Education tab. Staff can select more than one material provided to the participant. State Office staff maintains, via the Reference Utility, a general list of education materials in SPIRIT; not a specific detailed list of every handout used statewide for client education.

##### **Nutrition Education Materials – Part 2**

Local WIC Agencies are permitted to share nutrition education materials with the Child and Adult Care Food Program (CACFP) institutions at no cost, if a written materials sharing agreement exists, such as an MOA, between WIC local agencies and CACFP institutions.

##### **Nutrition Education Contacts**

General nutrition education can be provided by nutritionists, registered dietitians, home economists, nurses, dietetic technicians, or WIC certified CPA staff. Counseling for high-risk participants is preferred to be provided by a registered dietitian or nutritionist. A WIC certified CPA in Alaska may provide high risk counseling, following a high-risk care plan developed by an



## Alaska WIC Policy & Procedure Manual



RD or a person holding a BS, MS or PhD in the field of nutrition (Nutrition Services Standard 1. E.1.a and 1.c), if a Local Agency does not have access to either a Registered Dietitian or Nutritionist. Refer to Policy Section 900B for information on High Risk Care Plans.

Initial nutrition education must take place during the certification appointment. The legal guardian of a child or infant, or the pregnant, postpartum, or breastfeeding woman applying for WIC benefits must be present for initial certification.

Nutrition education at the initial certification or recertification may also include video-teleconferencing or phone calls to offsite clients. Nutrition education contacts are provided quarterly for clients enrolled in WIC.

Subsequent nutrition education is provided through individual or group sessions or through online nutrition education delivery medium appropriate to the individual participant's nutritional needs. This includes [wichealth.org](http://wichealth.org) and other creative methods of providing nutritional education.

### Frequency of Nutrition Education Contacts

During each twelve-month certification period, at least four nutrition contacts must be made available to all adult participants and the parents or caretakers of infant and child participants.

Nutrition contacts are made available at a quarterly rate, but not necessarily taking place within each quarter, to parents or caretakers of infant participants certified for a period more than six months. For example, an infant is certified at the age of three months. She can be certified up to her first birthday, provided her length, weight, hemoglobin and diet are assessed 6 months after her initial certification. The parent(s) should receive three nutrition education contacts during her nine-month certification period, but the contacts do not need to be at exactly three-month intervals.

### Nutrition Education by Proxy

Proxy means any person designated by a woman participant, or by a parent or caretaker of an infant or child participant, to obtain and transact food instruments or cash-value vouchers or to obtain supplemental foods on behalf of a participant. Parents or caretakers applying on behalf of child and infant participants are not proxies.

The proxy is permitted to attend subsequent nutrition education classes in the participant's place, but not the initial certification or recertification appointment. Documentation of proxy attendance is required in the participant's SPIRIT file.

### Documentation of Nutrition Education Contacts

Documentation of WIC services is the primary way WIC staff communicate with each other about individual participants. Its purpose is to ensure that the quality of nutrition services provided by identifying risks and concerns, facilitating follow-up, and continuity of care; and the



integrity of the WIC program through documentation of nutrition service data used for eligibility determination reporting.

Quality Nutrition Services documentation must be concise, clear, organized, complete, and consistent. The key outcome of nutrition services documentation is the capture of a complete picture of the participant's visit in a manner that is easy to retrieve and review.

The primary individual nutrition education contact and goal setting information are recorded at certification:

- As part of the Certification Guided Script (CGS) process, SPIRIT automatically creates a SOAP note and populates the "O" (Objective) and "A" (Assessment) sections of the note. A completed SOAP note is required for each certification.
- Through nutrition education, the CPA facilitates the client in setting goals. The client should select a goal related to the nutrition risk and/ or client interest to work toward. This should be documented in the "Plan" section of the SOAP note.
  - Using the "Goal" tab, select a goal from the drop-down list, or choose "other" and document their goal in the "Plan" section of the SOAP note. If the participant would like to work on more than one goal, document the additional goal in their "Plan" and prioritize their goals if necessary.
  - For every certification, recertification and nutrition ed contact, the CPA must open the "Nutrition Education" tab and select a topic.
  - For High Risk (HR) contacts, when the HR contact is completed, the RD must open the Nutrition Education tab and choose a risk labeled high risk. Choosing a HR risk code on the nutrition education tab is what the SPIRIT Reports High Risk List uses to mark a HR contact as complete.
- Once created, the contact cannot be deleted. It can only be modified until midnight of the day it was created. If the note cannot be completed during the certification, all required information pertaining to the certification must be added within 24 hours. Information added after midnight of the day of certification will need to be added by clicking the icon "Manage Notes" and choosing "Create SOAP Note". This will create a new SOAP note, which can then be completed.

### *Quarterly Nutrition Education Contacts*

When a participant completes a quarterly nutrition education contact, staff will:

- Add new nutrition education contact via the Nutrition Education tab on the participant's SPIRIT record and save the information.



## Alaska WIC Policy & Procedure Manual



- For High-Risk nutrition education contacts, the RD must open the Nutrition education tab and choose an HR risk code. This process is used by the SPIRIT Reports HR report to mark the HR contact as complete.
- Add a note in the “Manage Notes” section in SPIRIT to clarify the secondary nutrition education contact.
  - A summary of the contact details progress toward goal(s), understanding of the nutrition education and continued continuity of care for the participant.

If a participant misses a nutrition education appointment, the Local Agency must document this fact in the participant’s SPIRIT record. Documentation of two missed opportunities for nutrition education must occur before benefits are issued and nutrition education provided to a participant.

For quarterly nutrition education contacts, two attempts to contact the rural client must be made and documented prior to issuing benefits.

For agencies that have automated phone/text/email messaging, they can count the automated message as one attempt. When doing the second outreach attempt to the client, document in SPIRIT that the message has been sent out along with whatever method of outreach the staff provide at that time.

Encourage clients to use [wichealth.org](http://wichealth.org) for interactive nutrition education whenever possible. If nutrition education materials are sent through the mail, they need to address the participant’s established goal, risk factors or interests.

### REFERENCE:

All State Memorandum, ASM 06-24

All State Memorandum, ASM #2011-2 Implementation of the Nondiscretionary Non-Electronic Benefits Transfer-Related Provisions of P.L. 111-296

Nutrition Education Guidance USDA website  
<https://www.fns.usda.gov/nutrition-education>

WIC Final Policy Memorandum 2008-4

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)

- Subpart A- General- Definitions
  - 246.2(e)
- Subpart C- Participant Eligibility- Certification of Participants





## Alaska WIC Policy & Procedure Manual



- 246.7(o)(1)
- 246.7(o)(2)(iii)
- Subpart D- Participant Benefits-Nutrition Education
  - 246.11(e)(1-3)
  - 246.11(e)(4)

### CROSS REFERENCE:

Job Aid 041: Index of Allowed Nutrition Risk Criteria

### DEFINITIONS:

**Nutrition education** means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.

**Nutrition-Focused Counseling:** An interactive helping process focused on eating behaviors, physical activity, and lifestyle, designed to improve health status and help participants to achieve their personal goals.

**Proxy** means any person designated by a woman participant, or by a parent or caretaker of an infant or child participant, to obtain and transact food instruments or cash-value vouchers or to obtain supplemental foods on behalf of a participant. The proxy must be designated consistent with the State agency's procedures established pursuant to [§ 246.12\(r\)\(1\)](#). Parents or caretakers applying on behalf of child and infant participants are not proxies. In SPIRIT this is called the “alternate authorized representative”.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is



## Alaska WIC Policy & Procedure Manual



the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services

### Policy: 303 – Nutrition Education Delivery Mediums

Effective Date: 11/01/2016

#### PURPOSE:

To outline various delivery mediums for effective nutrition education within the WIC program, ensuring participant interaction and feedback. It provides guidance for Local Agencies on developing and using different education mediums such as face-to-face, telephone, and online resources, including specific procedures for internet-based nutrition education.

#### POLICY: 303 – Nutrition Education Delivery Mediums

##### Nutrition Education Delivery Mediums

There are several delivery mediums available to provide effective nutrition education. The nutrition education guidance states, an effective delivery medium creates opportunities for participant interaction and feedback. The list of delivery medium examples offered include:

- Face-to-Face
  - Individual
  - Group
- Telephone
- Electronic
  - Kiosk
  - Internet

##### Nutrition Education Information/Environmental Reinforcements Delivery Mediums

ASM 06-24 offers various examples to continue to support and reinforce participants' nutrition education. They include:

- Pamphlets
- Bulletin Boards
- Newsletters
- Videotapes
- Take Home Activities

Use of the above listed mediums as a stand-alone source of information without any interaction between the participant and CPA are not considered a complete nutrition education contact.



### Nutrition Education Newsletters

Newsletters developed by Local Agencies should supplement information provided in nutrition education materials in an attractive, easy-to-read format. Recipes in newsletters should meet the “Choose My Plate” guidance to promote the theme that nutritious foods are also tasty.

### Internet Nutrition Education Participant Criteria

All participants with the following criteria and as deemed appropriate by the WIC staff at the time of (re)certification onsite or offsite may benefit from the [www.wichealth.org](http://www.wichealth.org) online nutrition education option:

- All Infants WIC participants except High Risk
- All Children WIC participants except High Risk.
- All Pregnant, Breastfeeding or Postpartum Women WIC participants except High Risk
- Referrals to [wichealth.org](http://wichealth.org) should be relevant to nutrition risks assigned, participant category, and should accommodate client interest.
- All WIC participants on a follow-up appointment do not need to recheck weight, hemoglobin, or to provide high risk counseling.

### Internet Nutrition Education Procedures

1. Inform participants of the Internet Nutrition Education option, using the [wichealth.org](http://wichealth.org) participant’s materials. Participants can access WIChealth.org on their computer, or on their phone through the icon on the WICshopper app. Participants register on WIChealth.org for verification that the course was completed with a Certificate of Completion.
2. If participants do not have Internet access at home or on their phones, give them a copy of a library brochure listing locations and hours of operation, or locations for public internet access.
3. Participants can log onto WIChealth.org and select one or more of the lessons that are listed.
4. Once the participant has completed the lesson, they select the Local Agency or WIC clinic that they would like their Certificate of Completion sent. Participants may also print the Certificate of Completion to bring or mail to their WIC clinic.
5. All clinics will check their emails daily to collect the list of participants that have completed their online nutrition education.
6. Use the information printed on the participants’ [wichealth.org](http://wichealth.org) Certificates of Completion to document completion in the participants’ SPIRIT file.
7. Use the information about the participants’ nutrition education goal printed in the Certificates of Completion for follow-up.
8. After confirmation of completion of online nutrition education has been received, participants’ benefits can be issued.
9. Schedule the participant for an appointment in three months.



## Alaska WIC Policy & Procedure Manual



### Nutrition Education Contact Methods

Nutrition education should be at the participant's convenience but must occur quarterly. Nutrition education contacts are provided in either of the following ways:

- Participants can receive on-site nutrition education offered individually or in group sessions.
- WIC participants, both onsite and rural, should be encouraged to use interactive nutrition education opportunities such as [wichealth.org](http://wichealth.org) to obtain their quarterly nutrition education. When participants are referred to [wichealth.org](http://wichealth.org) or other online education, they must be referred to specific module(s) relevant to the category and risk factor of the participant.
  - In addition, offsite participants can access nutrition education via [wichealth.org](http://wichealth.org) for quarterly nutrition education. These participants must be referred to specific modules relevant to their category and risk factor(s).
  - Nutrition education contacts for rural clients can be by phone and accompanied by mailed nutrition education materials.
    - If a rural client has been contacted twice without success; document this in their SPIRIT chart and issue food benefits; and provide nutrition education that relates to the participant's risk factors.
    - For Local Agencies that have automated phone/text/email messaging, they can count the automated message as one attempt. Staff should make every effort to make the second call on another day and at another time of day and document the call in the participant's SPIRIT chart.

### Telephone Nutrition Counseling and Education

Nutrition counseling is an ongoing process in which a health professional, usually a Registered Dietitian (RD), works with an individual to assess his or her usual dietary intake and identify areas where change is needed. The nutrition counselor provides information, educational materials, support, and follow-up to help the individual make and maintain the needed dietary changes.

Telephone communication and counseling are used by Alaska WIC Off-Site (rural) Local Agencies for nutrition assessment, nutrition education, counseling and follow-up. Local Agencies are responsible to review training materials, train, observe and coach staff in the implementation of telephone nutrition counseling and education principles and guidelines.

Telephone nutrition counseling should be used for the certification of rural clients, if face to



## Alaska WIC Policy & Procedure Manual



face counseling or video teleconferencing isn't possible. When counseling is done via telephone, this should be noted in the SOAP note. Follow up counseling for quarterly education, or to follow up interactive on-line education, can also be done via telephone. It should also be noted in the electronic SPIRIT chart that this contact was made via telephone.

### REFERENCE:

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)

- Subpart D- Participant Benefits-Nutrition Education
  - 246.11(d)(1)

### CROSS REFERENCE:

Job Aid 041: Index of Allowed Nutrition Risk Criteria

### DEFINITIONS:

**Nutrition education** means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.

**Nutrition-Focused Counseling:** An interactive helping process focused on eating behaviors, physical activity, and lifestyle, designed to improve health status and help participants to achieve their personal goals.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a "draft" watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A "draft" watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.



## Alaska WIC Policy & Procedure Manual



**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services

### Policy: 304 – Nutrition Education Plan

Effective Date: 01/2023

#### PURPOSE:

To ensure that local programs plan and evaluate nutrition services provided to program participants.

#### BACKGROUND:

Federal regulations require local WIC agencies to complete a Nutrition Services Plan annually. In Alaska, the goals and objectives of the WIC program are included in Request for Proposals (RFP). WIC local agencies (LA) respond to the RFP, and the entirety of the response is considered the initial Nutrition Education Plan (NEP). Annual updates to the NEP are provided to the state at the beginning of each state fiscal year on the NEP LA Annual Update Form.

#### POLICY: 304 – Nutrition Education Plan

Local programs must complete an annual Nutrition Services Plan consistent with the State's goals and objectives. The State's goals are outlined in the current Request for Proposals (RFP). In state fiscal year (SFY) 2023 the State of Alaska (SOA) outlined the following goals:

**Goal 1:** WIC services are available and utilized by eligible participants throughout the state.

**Goal 2:** Deliver quality nutrition services in compliance with state and federal requirements.

**Goal 3:** Households receiving WIC food benefits purchase WIC foods.

**Goal 4:** All pregnant and post-partum WIC participants receive information and support to meet their breastfeeding goals.

When an agency is proposing to provide Breastfeeding Peer Counseling (BFPC) Services, Goal 5 additionally applies.

**Goal 5:** Pregnant or breastfeeding participants will have access to a breastfeeding peer counselor.

The LA proposal and subsequent NEP update must address the following:

- Relationship of nutrition services to the WIC service area's needs assessment.
- Individual nutrition consultations at certification and mid-certification.
- LA's plan for offering and providing quarterly nutrition education.
- Nutrition services for participants who may not come into the LA office.
- Relationship of nutrition services to individual participant needs and interests.
  - Nutrition education activities, including but not limited to:





## Alaska WIC Policy & Procedure Manual



- sample lesson plan
- tailoring to individual participant needs
- Breastfeeding promotion and support:
  - provision of information to pregnant participants
  - follow-up after delivery of infant to provide support for breastfeeding women
  - continued encouragement
  - referrals and links with breastfeeding support groups

All LA's are expected to align their individual nutrition education goals and activities with the identified SOA goals.

### PROCEDURE:

#### 1.0 Overview

1.0 LAs complete RFP responding to statewide nutrition education goals and objectives. Each LA proposal includes an evaluation component.

2.2 Annually LAs complete NEP LA Annual Updates Form to update the NEP.

#### 2.0 Components of the NEP

The Nutrition Services Plan must contain the following components:

- 2.1. Evaluation of the previous year's plan.
- 2.2. Goals as determined by the State agency or based on identified needs at the local level.
- 2.3. Measurable objectives designed to meet each goal.
- 2.4. Specific methods or activities to achieve each objective.
- 2.5. Evaluation plan.
- 2.6. Local program plans for quarterly in-service trainings.
- 2.7. Name and qualifications of the training supervisor(s).

#### 3.0 Timeline

Each continuation year of the grant cycle, guidance for completing the NEP LA Annual Update Form will follow:

- 3.1. The Nutrition Services Plan document and supporting guidance will be provided to LAs at the May LA Coordinator webinar (first Thursday in the month of May).
- 3.2. The NEP LA Annual Update Form must be completed by each LA and returned to the SOA. The NEP LA Annual Update Form will be deliverable in quarter 1 (October 30) of each fiscal year.
- 3.3. Once received, the State program staff will review the Nutrition Services Plans and will notify Local Agency staff that their NSP is approved, or that it will need modification.
- 3.3. NSPs that require modification are to be revised and re-submitted by September 30



each year.

#### REFERENCE:

7 CFR §246.11 ¶(d)(2)—Nutrition Education: Local Agency responsibilities

<https://wicworks.fns.usda.gov/sites/default/files/media/document/ntredguidance.pdf>

Nutrition Services Standards Revision Workgroup, Food and Nutrition Service/U.S. Department of Agriculture, WIC Nutrition Services Standards, August, 2013

#### CROSS REFERENCE:

Job Aid 057: NEP LA Annual Update Form

#### DEFINITIONS:

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with § 246.5;
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Nutrition Education Plan (NEP):** The plan that local agencies intend to follow to offer nutrition education to participants. Nutrition education is the program benefit that sets WIC apart from the other Food and Nutrition Service (FNS) nutrition assistance programs.

**Nutrition Services Plan (NSP):** The term nutrition service plan is used interchangeable with nutrition education plan.

**Request for proposal (RFP):** Also referred to as the grant. Process by which the State of Alaska solicits agencies to provide WIC services. The RFP and grant are binding documents between the State of Alaska and a local agency.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
01/2023	Approved FNS
08/2024	Reviewed



## Alaska WIC Policy & Procedure Manual



**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## **Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services**

### **Policy: 305 – Nutrition Services Standards: All Categories**

Effective Date: 11/01/2016

#### **PURPOSE:**

To describe the basis for providing nutrition services in the Alaska WIC Program, using “Value Enhanced Nutrition Assessment (VENA)” competencies. To provide the Local Agency Nutrition Services Standards to ensure that WIC Program services at the Local Agency level are provided in accordance with federal USDA regulations, policies and guidelines.

#### **POLICY: 305 – Nutrition Services Standards: All Categories**

##### **Alaska WIC Nutrition Services Standards**

Nutrition services in WIC begin with an initial screening and a Value Enhanced Nutrition Assessment (VENA) of participants’ nutritional status and determination of all applicable nutritional risk. Based on VENA, a food package is prescribed, and appropriate nutrition education is provided. Value Enhanced Nutrition Assessment (VENA) shifts the focus from the WIC Competent Professional Authority (CPA) finding nutrition risk to a positive client participatory Health Outcome Based approach. Certified Participants, via participant centered communication methods, can decide the nutrition related areas of concern, and their readiness to change to improve their conditions identified by the nutrition assessment. WIC participants will not only be informed as to the specific nutritional risk condition(s) qualifying them for the WIC Program, but also will be invited to participate in the decision about what nutrition education is pertinent and appropriate.

WIC staff’s VENA competencies needed to reach a participant centered assessment, counseling and education approach are:

- Knowledge of principles of life-cycle nutrition
- Nutrition assessment process
- Anthropometric and Hematological data collection techniques
- Communication
- Multicultural awareness
- Critical thinking

Nutrition services are provided based on an understanding of the varied food-related beliefs, customs and behaviors of the diverse ethnic and cultural populations served by the Alaska WIC program.

Nutrition information is provided to these diverse populations in a sensitive, respectful and helpful manner.



## Local Agency Nutrition Services Standards

Nutrition services are provided by the Alaska WIC Program in accordance with federal USDA regulations, policies and guidelines. The standards for Local Agencies are:

- USDA nutrition risk criteria are used by all Local Agencies to determine eligibility.
- A nutrition assessment is completed to determine nutrition risk for all participants, using VENA and based on WIC Nutrition Risk Criteria Manual.
- Uniform anthropometric and biochemical assessments based on current practice are used by all Local Agencies.
- Food packages are tailored in accordance with current authoritative medical and health information.
- Standard policies for all nutrition education contacts are used statewide.
- Participant Centered Services (PCS) principles and practices are followed throughout participants' certifications, particularly nutrition assessment, counseling and education.
- Standard evaluation procedures are used for evaluating nutrition education.
- Appropriate, high quality, accurate nutrition education materials are used by all Local Agencies.
- Each Local Agency develops an annual WIC nutrition education plan consistent with the State WIC Office's nutrition education component of program operations as specified in the State's goals and objectives and desired outcomes.
- Only a Registered Dietitian or Nutritionist with a Master's degree in a nutrition field must perform the following:
  - Oversee direct nutrition services to participants and provide technical assistance and consultation regarding nutrition services to Local Agency staff and other health professionals.
  - Provide nutrition education and counseling for all high-risk participants and prepare High Risk Nutrition Care Plans for these participants.
  - Provide nutrition in-service training to Local Agency staff.Develop each Local Agency's annual WIC nutrition services plan.

### REFERENCE:

WIC Nutrition Services Standards <https://www.fns.usda.gov/wic/nutrition-services-standards>

Value Enhanced Nutrition Assessment Guidance (USDA Website):

<https://wicworks.fns.usda.gov/resources/value-enhanced-nutrition-assessment-vena-guidance#:~:text=A%20WIC%20nutrition%20assessment%20using,and%20goals%20of%20health%20behavior.>

### CROSS REFERENCE:

Job Aid 041: Index of Allowed Nutrition Risk Criteria



### DEFINITIONS:

**Anthropometric:** Measuring the size and proportions of the human body. Anthropometric data associated with WIC includes weight, height, length, and head circumference.

**Biochemical:** Pertaining to blood chemistry.

**High-risk Nutritional Care Plan:** A nutritional care plan must be developed and documented specifically addressing the high-risk condition(s) identified and must include: Assessment of the individual's overall situation including nutrition status, needs, and any problems.

**Nutrition education** means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.

**Nutrition Education Plan (NEP):** The plan that local agencies intend to follow to offer nutrition education to participants. Nutrition education is the program benefit that sets WIC apart from the other Food and Nutrition Service (FNS) nutrition assistance programs.

**Nutrition-Focused Counseling:** An interactive helping process focused on eating behaviors, physical activity, and lifestyle, designed to improve health status and help participants to achieve their personal goals.

**Nutrition Risk Criteria Manual:** A manual that reviews the scientific basis for nutrition risk criteria used to establish eligibility for participation in the U.S. Department of Agriculture's Special Supplemental Nutrition Program for Women, Infants, and Children (WIC).

**Participant-Centered Services (PCS):** A systems approach designed to focus on topics and issues that are relevant to the participant. This approach puts the participants needs and the goal of healthy behaviors at the core of WIC service delivery, and focuses on a person's capacities, strengths, and developmental needs, not solely on the problems, risks or negative behaviors. In contrast to the traditional didactic WIC assessment and education model, participant-centered services encourage staff to engage the participant/caretaker in dialogue, information exchange, listening and feedback, in order to translate the assessment into action and customize the nutrition services provided.

**Risk Criteria:** Health or dietary conditions that indicate a nutrition related problem and is required for program eligibility.

**Value Enhanced Nutrition Assessment (VENA):** A process developed jointly by the Food and Nutrition Services (FNS) and the National WIC Association (NWA) to improve nutrition services in the WIC Program. VENA sets participant-centered standards for the nutrition assessment that determines eligibility, enabling Local Agency nutritionists to personalize WIC nutrition



education, provide more relevant referrals, and tailor food packages to the individual participant’s needs.

POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services



### Policy: 306 – Nutritional Education Standards: Infants

Effective Date: 12/01/2017

#### PURPOSE:

To provide nutritional education standards and guidelines for infant feeding practices, ensuring balanced intake and supporting growth and development during the first year of life. It includes recommended supplementation for fluoride, iron, and vitamin D, and offers guidance on introducing solid foods, promoting safe feeding practices, and addressing specific nutrition and health education topics for caregivers.

#### POLICY: 306 – Nutritional Education Standards: Infants

##### Infant Intake Assessment Standards

Appendix A (Infant Intake Assessment Standards Table) at the end of this policy shows food amounts by food type and infant age appropriate for infants, to support sound feeding practices, solid progression and balanced intake to support an infant's growth and development during their first year of life.

##### Infant Nutrition Education Standard Topics

Nutrition education Local Agencies provide to guardians of infant participants should promote the development of sound eating habits and optimal nutrition for the infant. Topics to be addressed may include but are not limited to:

##### *Infant 0-5 Months*

- Importance of iron fortified formula if formula fed
- Vitamin D supplementation for the breastfed infant
- Iron supplements (1 mg/kg/day) after age 4 months for fully breastfed infants until iron containing supplemental foods are included in their diet (such as infant cereal and infant meat)
- Fluoride supplementation for breastfed and formula fed infants over 6 months whose local drinking water is not fluoridated
- Importance of immunizations and well child check-ups
- Normal growth and development
- Inappropriate feeding practices (i.e., propping a bottle, early introduction of solids, etc.)

##### *Infants 6-11 months*

- Introduction of solid foods
- Weaning to cup
- Importance of iron fortified formula until 1 year of age





- Baby bottle tooth decay
- Normal growth and development
- Anemia and iron rich foods
- Prevention of choking
- Promoting the development of self-feeding skills
- Important of immunizations and well childcare

### Recommended Supplementation for Infants

#### *Fluoride*

Starting at about 6 months a breastfed infant should receive fluoride supplementation if he or she is only fed breastmilk or breastmilk with solid foods. The American Academy of Pediatrics (AAP) recommends that, because breastfed infants drink little or no water, they should receive fluoride supplements whether or not they live in communities with optimally fluoridated water. The AAP Committee on Nutrition recommends initiating fluoride supplementation shortly after birth in breastfed infants and according to the fluoride content of the drinking water in formula-fed infants. Satisfactory reduction in the prevalence of dental caries can be accomplished by initiating fluoride supplementation as late as six months of age.

Fluoride given on an empty stomach is 100% bioavailable, but if administered with milk or a calcium-rich meal will be incompletely absorbed. For infants, supplements should be given between feedings.

#### *Iron*

Infants should receive an iron supplement starting at 4 – 6 months of age if they are not receiving iron-fortified formula or iron-fortified infant cereal. The amount of supplementary iron depends on the size and maturity of the infant.

#### *Vitamin D*

Exclusively or partially breastfed infants should receive 400 IU of vitamin D beginning the first few days of life unless the infant is weaned to at least 1 L/day or 1 qt/day of vitamin D-fortified formula. All WIC infants who are partially or exclusively breastfed are eligible for Vitamin D supplements, funded by the Alaska Department of Health. WIC federal funds cannot be used to pay for supplements.

Exclusively breastfed infant means that they receive only breastmilk or breastmilk plus solid foods. WIC nutritionists, registered dietitians, and Alaska certified CPAs can issue vitamin drops. A notation should be made in the infant or child's SPIRIT record that the vitamins were issued.

Liquid Tri-Vi-Sol Vitamin A, C and D drops in 50 ml bottles should be distributed. A daily dose of one ml contains 1500 IU vitamin A, 35 mg vitamin C, and 400 IU vitamin D. A one ml dropper is included in each bottle. These vitamins are also available as "off the shelf" products.

Vitamin drops can be ordered from the State WIC Office. WIC Local Agencies within Native



Health Corporations should explore obtaining vitamin supplements from the corporation.

WIC Vitamin D supplements are not WIC benefits.

### *Vitamin D Education for Parents*

Parents need to know:

- Breastmilk remains the best source of nutrition for an infant and child
- Vitamin D is important for healthy bone growth and development
- Vitamin D supplements are recommended in Alaska for certain infants
- Vitamin D supplements are not a part of the WIC food package and are paid for by outside funding sources
- How to give the vitamins
- How to get more vitamins
- Stopping the vitamins if the infant goes on formula and is drinking at least 32 oz of formula per day
- When an infant turns 1, they may be able to stop the vitamins and get vitamin D through their diet (including milk, salmon, sardines, mackerel, and tuna). However, some children don't get enough vitamin D from their diet and supplements can still be beneficial in getting the recommended level (600 IU per day). WIC only provides Vitamin D to breastfed infants.
- To store the vitamins safely out of the reach of children

A parent education brochure is available from the State WIC Office.

### *Inventory and Storage of Vitamin D*

An inventory should be kept of the supply of vitamins on hand and kept at the clinic. The vitamin drops should be stored in a secure place that is dry and cool (59F to 89F). The vitamins should be protected from direct sunlight and from freezing. Returned bottles of vitamins cannot be reissued so dispose of them immediately. Vitamin D supplements can be ordered from the State WIC Office.

### Solid Foods for Infants

Solid foods can be added one at a time when the infant can sit with support and has good neuromuscular control of head and neck. The infant should be able to indicate desire for food by opening the mouth and leaning forward, and to indicate disinterest by leaning back and turning away. Iron fortified cereal is recommended as the first solid food, then vegetables, fruit and meat. Exclusively breastfed infants should be fed meat at 6 months to ensure an adequate intake of protein, iron and zinc. Solid foods should be introduced one at a time, with an interval of several days between new foods to check for signs of intolerance.

Finger foods and foods of different textures should be offered when developmentally appropriate.



Solid foods are recommended to meet nutritional needs and to encourage and support developmental changes.

Consuming fewer solid foods than recommended will not necessarily result in an inadequate diet. The baby is the best judge of how much to eat.

### *Juice*

The American Academy of Pediatrics recommends fruit juice not be given to infants under 12 months of age.

### *Honey*

Honey, including that used in cooking or baking or found in prepared foods (e.g. yogurt with honey, peanut butter with honey) should not be offered to infants. When consumed by an infant, honey, which is sometimes contaminated with clostridium botulinum spores, may cause infant botulism, a type of serious foodborne illness.

### *Water*

Healthy infants fed adequate amounts of breastmilk or infant formula in the first 6 months of life generally do not require additional plain water added to their diet. When an infant begins to eat solid foods, drinking water can aid digestion and assist with learning to use a cup.

### *Caffeine*

Beverages containing caffeine and bromine are not recommended for infants. Coffee, tea and some carbonated beverages such as colas and hot chocolate contain these substances.

### *Sweetened Drinks*

Sodas, fruit drinks, punches, sweetened gelatin water, sweetened iced tea and other beverages with added sugar are not recommended for infants because of their high sugar content.

### *Herbal Teas*

Certain herbal teas contain powerful substances similar to drugs and are not appropriate for infant consumption.

### *Baby Foods*

Baby foods prepared for an infant at home can be equally nutritious and more economical than commercially prepared baby food.

When commercial baby foods are used, single ingredient foods are preferred over combination foods or dinners. Combination foods or dinners are more expensive ounce for ounce and usually have less nutritional value by weight than single ingredient foods.

Infants should not be fed baby food desserts such as puddings, custards and cobblers which



## Alaska WIC Policy & Procedure Manual



contain added sugar.

### *Foods to Avoid*

Due to the risk of choking, it is best to avoid feeding infants these foods:

- Raw vegetables (including green peas, string beans, celery, carrots, etc.)
- Cooked or raw whole corn kernels
- Hard pieces of raw fruit or whole pieces of canned fruit
- Nuts, seeds, or popcorn
- Whole grapes, berries, or cherries with pits
- Hot dogs or stringy, tough meat
- Peanut butter
- Hard cheese
- Uncooked dried fruit (including raisins)
- Hard candy

### REFERENCE:

American Academy of Pediatrics

### CROSS REFERENCE:

Job Aid 041: Index of Allowed Nutrition Risk Criteria

### DEFINITIONS:

**Infant:** A person who is 12 months old or younger. Once they turn 12 months, they are considered a child.

**Nutrition education** means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.



APPENDICES:

Appendix A - Infant Intake Assessment Standards Table

Food	Age of Infant				
	0-4 months	4-6 months	6-8 months Strained /Pureed	8-10 months Mashed Table Foods	10-12 months Cut Table Foods
Breastmilk	On Demand Approx 812+ feedings	On Demand Approx 68+ feedings	On Demand Approx 4-8 feedings	On Demand Approx 4-6 feedings	On Demand Approx 4-6 feedings
Formula w Fe+	16-32 oz	24-32 oz	24-32 oz	24-32 oz	24-32 oz
Infant Cereal	-	-	1-6 T	4-8 T	4-8 T
Vegetables	-	-	1-4 T	4-6 T	4-6 T
Fruit	-	-	1-4 T	4-6- T	4-6 T
Fruit Juice (cup)	-	-	2 oz	2-3 oz	3-4 oz
Meat, Fish, Poultry, Cooked Dried Beans or Egg Yolk	-	-	1-2 T	2-4 T	4 T
Teething Biscuit/Infant Crackers	-	-	1	1	1
Starch, Potato, Rice	-	-	-	2 T	2 T

POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
06/12/2024	Reformatted; feeding and supplementation guidelines updated to correspond with AAP infant feeding recommendations
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.



## Alaska WIC Policy & Procedure Manual



**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A "draft" watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services

### Policy: 307 – Nutrition Education Standards: Children

Effective Date: 12/01/2017

#### PURPOSE:

To provide, at minimum, nutrition and health education topics when counseling and providing nutrition education for children.

#### POLICY: 307 – Nutrition Education Standards: Children

##### Nutrition Education Standards for Children

Nutrition education provided by Local Agencies to parents and guardians of child participants and child participants themselves should promote the development of sound eating habits and optional nutritional status for the child. Nutrition education will also emphasize the relationship between nutrition, physical activity and health.

Topics to be addressed include but are not limited to:

##### *Children 12-24 Months:*

- Fluoride supplementation
- Baby bottle tooth decay
- Anemia and iron rich foods
- Dental nutrition
- Healthy growth and developmental milestones
- Nutritious snacks
- Meeting nutritional needs of the toddler, including appropriate serving sizes
  - [My Plate Kid's Place](#)
- Toddler eating habits
- Importance of whole milk until 24 months of age
- Weaning from the bottle

##### *Children 2 years - 5 years:*

- Nutritious snacks
- Dental nutrition
- Healthy growth and developmental milestones
- Anemia and iron rich food
- Meeting the nutritional needs of the preschooler including appropriate portion sizes
  - [My Plate Kid's Place](#)
- Promotion of physical activity



REFERENCE:

American Association of Pediatrics (AAP)

CROSS REFERENCE:

Job Aid 041: Index of Allowed Nutrition Risk Criteria

DEFINITIONS:

**Children** means persons who have had their first birthday but have not yet attained their fifth birthday.

**Nutrition education** means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.

POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services

### Policy: 308 – Nutrition Education Standards: Pregnant Women

Effective Date: 12/01/2017

#### PURPOSE:

To provide, at minimum, nutrition and health education topics that should be addressed when counseling and providing nutrition education to pregnant women.

#### POLICY: 308 – Nutrition Education Standards: Pregnant Women

##### Nutrition Education Standards for Pregnant Women

Nutrition education provided to the pregnant participant should promote the development of sound eating habits and optimal nutritional status. Topics to be addressed include but are not limited to:

- Relationship of diet to pregnancy outcome
- Diet during pregnancy
- Vitamin and mineral supplements
- Weight gain during pregnancy
- Dealing with discomforts of pregnancy (i.e., morning sickness, constipation, etc.)
- Substance abuse (tobacco, alcohol, drugs)
- Fetal development
- Breastfeeding promotion, support and guidance

When a pregnant woman is certified, Local Agency staff should emphasize that:

- Breastfeeding women may receive WIC benefits for up to one year postpartum while non-breastfeeding women are eligible for only six months postpartum.
- Breastfeeding women are at a higher level in the WIC priority system than non-breastfeeding postpartum women, and are more likely to be served than postpartum women when Local Agencies do not have the resources to serve all individuals who apply for the WIC Program.

Postpartum participants should fully understand the full range of program benefits available to them regardless of their choice of infant feeding method.

#### *Providing Breastfeeding Promotion, Education & Support*

Suggested below are some “Best Practices” when providing prenatal breastfeeding education. Whenever possible provide breastfeeding support and encouragement according to the guidelines below.



### Certification Visit

- Find out mother's breastfeeding intentions as part of the prenatal certification. Use Participant Centered Services (PCS) techniques based on motivational interviewing and the participant's stage of change, to extend, clarify and reflect during the conversation. Questions to help begin the conversation:
  - What have you heard about breastfeeding?
  - What were your breastfeeding experiences like with your previous baby? What was the best thing about breastfeeding?
  - What was most challenging?
- Address any concerns that the mother voices.
- Inform the mother of ways WIC support breastfeeding:
  - Breastfeeding education classes
  - Mother & baby certified through first year. Non-breastfeeding women are eligible for only six months postpartum.
  - Breastfeeding women are at a higher level in the WIC priority system than non-breastfeeding postpartum women and are more likely to be served than postpartum women when local agencies do not have the resources to serve all individuals who apply for the WIC Program.
  - Breast pumps available for certain needs
  - Breastfeeding peer counselors (if applicable)
  - Extra foods
- These benefits can be presented as additional incentives to breastfeed.

### 2nd Prenatal Visit

- Follow up on the previous discussion. Questions you may want to ask:
  - Have you thought any more about breastfeeding?
  - Tell me about your thoughts. How do you plan to feed your baby?
  - What questions or concerns do you have about breastfeeding?
- Address any concerns that the mother voices.
- Use anticipatory guidance by discussing how to establish a good milk supply. Explain supply and demand principles, and that exclusive breastfeeding during the first month is crucial to establishing a good milk supply. For this reason, WIC does not give supplemental formula in the first month.
- Ask if the mother has support for breastfeeding (e.g., baby's father, friends, family, co-workers). Mom may not have supportive friends or family. Encourage mom to invite a friend or family member to join her at her WIC appointments or breastfeeding class to learn more about breastfeeding.
- Offer information about breastfeeding classes or support groups.
- Refer to Breastfeeding Peer Counselor Program, if applicable.



### 3rd Prenatal Visit

- This is the time to cover topics related to getting breastfeeding off to a good start, and letting moms know where they can get breastfeeding support during the first weeks.

Offer to discuss such topics as:

- Explain hospital practices that help build a milk supply.
- Discuss how new moms can get help for breastfeeding once they leave the hospital
- Supplementation interferes with a mother's milk supply.
- Discuss how to know if the baby is getting enough milk.
- Discuss availability of breast pumps for certain circumstances.

### CROSS REFERENCE:

Job Aid 041: Index of Allowed Nutrition Risk Criteria

### DEFINITIONS:

**Anticipatory Guidance:** counseling or educational services provided to individuals or families before they undergo a significant change in their lives. Examples include parental guidance before a child enters school and counseling prior to retirement.

**Breastfeeding** means the practice of feeding human milk/breastmilk to an infant on average of at least once a day.

**Breastfeeding Peer Counselor (BFPC) Program:** is a federally funded and evidence-based program to help improve breastfeeding success among WIC participants. Peer counselors serve as role models for breastfeeding, providing mother-to-mother encouragement and support during pregnancy and at critical times during the postpartum period. This support is distinct from health professional-to-mother in that the source of support is a peer, someone who is similar in fundamental ways to the recipient of the support.

**Breastfeeding women:** means a woman up to one year postpartum who is providing breastmilk to her infant/s.

**Motivational interviewing:** is a counseling method that helps people resolve ambivalent feelings and insecurities to find the internal motivation they need to change their behavior. It is a practical, empathetic, and short-term process that considers how difficult it is to make life changes.

**Nutrition education** means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.



**Participant-Centered Services (PCS):** A systems approach designed to focus on topics and issues that are relevant to the participant. This approach puts the participants needs and the goal of healthy behaviors at the core of WIC service delivery, and focuses on a person’s capacities, strengths, and developmental needs, not solely on the problems, risks or negative behaviors. In contract to the traditional didactic WIC assessment and education model, participant-centered services encourage staff to engage the participant/caretaker in dialogue, information exchange, listening and feedback, in order to translate the assessment into action and customize the nutrition services provided.

**Stages of Change Model:** One of the best-known approaches to change is the stages of change (aka, transtheoretical) model, introduced in the late 1970s by researchers James Prochaska and Carlo DiClemente. The stages of change model has been found to be an effective aid in understanding how people go through a change in behavior.

## POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services

### Policy: 309 – Nutrition Education Standards: Breastfeeding Women

Effective Date: 12/01/2017

#### PURPOSE:

To provide, at minimum, nutrition and health education topics that should be addressed when counseling and providing nutrition education to postpartum breastfeeding women.

#### POLICY: 309 – Nutrition Education Standards: Breastfeeding Women

##### Nutrition Education Standards for Breastfeeding Women

Nutrition education provided to the postpartum breastfeeding participant should promote the development of sound eating habits and optimal nutrition status; emphasize the relationship between nutrition, physical activity and health; and, support breastfeeding if appropriate.

Topics to be addressed include but are not limited to:

- Breastfeeding resources, support, techniques, and problem solving
- Offer congratulations and praise
- Contact the participant within 1 week of the expected delivery date to see how mom is doing
- Schedule mom to return to the clinic soon after delivery.
- Find out if mom has any breastfeeding concerns or questions by asking open ended questions.
  - Questions you may want to ask:
    - How is breastfeeding going?
    - Do you have any questions or concerns?
- Provide referrals and other resources as appropriate.
- Assess the infant and breastfeeding relationship for appropriate number of feedings, bowel movements, wet diapers, etc.
- Assess the infant and breastfeeding mother's needs prior to changing food packages to change the amount of formula if prescribed or requested.
- Offer to discuss infant hunger and satiety cues, and growth spurts.
- Offer to discuss exclusive breastfeeding in the first month
- Diet during breastfeeding, such as My Plate for Pregnant and Breastfeeding Women, at <https://www.myplate.gov/life-stages/pregnancy-and-breastfeeding>
- Substances to avoid when breastfeeding (tobacco, alcohol, drugs including marijuana)
- Folic acid and birth defects
- Exercise and weight management



#### CROSS REFERENCE:

Job Aid 041: Index of Allowed Nutrition Risk Criteria

#### DEFINITIONS:

**Breastfeeding women:** means a woman up to one year postpartum who is providing breastmilk to her infant/s.

**Food package:** is the maximum amount and type of food which can be prescribed for a single participant per 28-to-31-day period.

**Infant:** A person who is 12 months old or younger. Once they turn 12 months, they are considered a child.

**Nutrition education** means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services

Policy: 310 – Breastfeeding: Use of Supplemental Infant Formula  
Effective Date: 12/01/2017

### PURPOSE:

To provide guidelines to support breastfeeding and the use of supplemental infant formula. For additional information on assessing supplemental formula amounts for the partially breastfed infant, see Appendix A (Supplemental Formula Assessment Table) at the end of this policy.

### POLICY: 310 – Breastfeeding: Use of Supplemental Formula

#### Breastfeeding and Use of Supplemental Formula

WIC encourages all women to fully breastfeed for at least six months, to continue to breastfeed along with appropriate complementary foods at least until the infant is one year of age, and to continue breastfeeding thereafter for as long as mutually desired. When a breastfeeding mother requests infant formula from WIC, she may not be fully aware of the impact of formula supplementation on breastfeeding, or of the increased health risks of feeding formula in place of breastfeeding. In particular, giving infant formula to a breastfeeding infant in the first month after birth interferes with the establishment of breastfeeding and often leads to a decrease in a mother's breastmilk supply.

Nutrition counseling must be provided to a breastfeeding woman who requests supplemental formula for her infant. An assessment and counseling must occur before issuing benefits for formula:

- The priority is to help the woman successfully achieve her breastfeeding goals.
- Assess the mother's understanding of the impact of supplemental formula on her breastmilk supply and potentially on her and her baby's optimal health and nutrition.
- Inform the breastfeeding mother that her food package will change and will be based upon how much she is breastfeeding.
- Provide the minimum amount of formula that meets but does not exceed the infant's nutritional needs.
- The formulas available to these infants are the current WIC primary contract milk-based and soy-based formulas.
- Determining how much supplemental formula to issue is difficult, since providing too much may decrease breastfeeding. Assessing the mother and infant and giving guidance is critical.
  - If the infant is receiving no formula and the mother is unsure of how much formula she will be using, assess and counsel the mother on the impact of formula. If formula issuance is deemed appropriate, issue the lowest amount of



## Alaska WIC Policy & Procedure Manual



formula indicated.

- If the mother is already giving the infant some formula, issue the lowest amount the infant is currently using.
- Supplemental infant formula can be increased up to the maximum allowed based on infant's age and category.
- Provide additional follow-up visits with the mother and baby to continue to support breastfeeding success.
- A breastfeeding infant who receives any formula from WIC is no longer in the fully breastfeeding category. The infant's status and mother's status will need to change to the appropriate breastfeeding category. Document this in SPIRIT on the mother's Health Information tab through the "Infant's Born from This Pregnancy" radio button, updating breastfeeding amount, date breastfeeding verified, and other pertinent fields required.
- SPIRIT's "Breastfeeding Amount" field drives the client status.
  - **Fully Breastfeeding** - Mother receives an exclusive breastfeeding package until the baby turns one year old. The baby receives no formula from WIC.
  - **Mostly Breastfeeding** - Mother receives a breastfeeding package until the baby turns one-year-old. Babies can be prescribed up to 4 cans of powdered formula per month to be considered mostly breastfeeding.
  - **Some Breastfeeding** - Mother receives a food package until the baby is six-months-old. After the baby is six-months-old, the mother is counted as a breastfeeding woman but receives no food package. The baby can be prescribed the maximum amount of formula allowed for age. The expectation is that after a thorough assessment, babies will receive the minimal amount of formula needed to support breastfeeding.
  - **Non-Breastfeeding** - Mother receives a post-partum food package for the first six months. Once the baby turns six months, the mother no longer receives a food package and is no longer counted as a WIC participant. The baby is fully formula fed and can be prescribed the maximum amount of formula for the age and category.
- Document the assessment and counseling in both the mother's and infant's Manage Notes field in SPIRIT.
- When the participant's category changes, the appropriate food package for the new category can be issued.

For additional information on assessing supplemental infant formula amounts for the partially breastfed infant, see Appendix A (Supplemental Formula Assessment Table) at the end of this policy.

### REFERENCE:

Federal Regulations: 7CFR Ch. II





- Revisions in the WIC Food Package

Federal Publication: Providing Quality Nutrition Services in Implementing the Breastfeeding Promotion and Support Requirements of the New WIC Food Packages”, “Protocols”, “Counseling Points” and “Staff Roles”.

DEFINITIONS:

**Breastfeeding women:** means a woman up to one year postpartum who is providing breastmilk to her infant/s.

APPENDICES:

Appendix A - Supplemental Formula Assessment Table

Has a supplement been started?

↓  
YES

How much supplement is the infant getting each day?

Infant Formula		
0-3 oz. per day	→	1 can powder per month
4-6 oz. per day	→	2 cans powder per month
7-9 oz. per day	→	3 cans powder per month
10-12 oz. per day	→	4 cans powder per month
13-15 oz. per day	→	5 cans powder per month
16-18 oz. per day	→	*6 cans powder per month
19-21 oz. per day	→	*7 cans powder per month
22-24 oz. per day	→	*8 cans powder per month



25-27 oz. per day	→	*9 cans powder per month
-------------------	---	--------------------------

\*This quantity may exceed the maximum allowed as determined by infant age and category.

POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services

### Policy: 311 – Nutritional Education Standards: Postpartum Non-Breastfeeding Women

Effective Date: 12/01/2017

#### PURPOSE:

To provide, at minimum, nutrition and health education topics when counseling and providing nutrition education to postpartum non-breastfeeding women.

#### POLICY: 311 – Nutritional Education Standards: Postpartum Non-Breastfeeding Women

Nutrition education provided to the postpartum participant should promote the development of sound eating habits and optimal nutrition status, and emphasize the relationship between nutrition, physical activity and health and support breastfeeding if appropriate. Topics to be addressed include but are not limited to:

- My Plate
- Exercise and weight management
- Folic acid and birth defects
- Substance use and impact on health

#### REFERENCE:

#### DEFINITIONS:

**Post-partum woman:** means a woman up to six months after termination of pregnancy (live birth, stillbirth, miscarriage at any state of pregnancy, or abortion).

**Post-partum non-breastfeeding woman:** A woman after termination of pregnancy (live birth, stillbirth, miscarriage at any state of pregnancy, or abortion) who is not breastfeeding her infant.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed



## Alaska WIC Policy & Procedure Manual



**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## **Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services**

### **Policy: 312 – Alcohol and Substance Use**

Effective Date: 05/2023

#### **PURPOSE:**

1. To review how the use of substances during pregnancy and postpartum have negative effects on mother and infant
2. To identify risk factors associated with alcohol and substance use, including risk factor 371 Nicotine and Tobacco Use, risk factor 372 Alcohol and Substance Use, and risk factor 904 Environmental Tobacco Exposure.
3. To review WIC's role in providing information on the harms of substance use to all participants including pregnant, postpartum, and breastfeeding women, and parents or caretakers of infants or children at every certification and recertification, and identifying and providing referrals when appropriate.

#### **POLICY: 312 – Alcohol and Substance Use**

##### **BACKGROUND:**

There is no safe level of consumption of alcohol or drugs during pregnancy. Tobacco use during pregnancy can have negative effects on the mother and the infant.

WIC's role in preventing substance use is to provide WIC participants with education, referrals, and coordination of services. The intended effects of WIC's substance abuse prevention and referral activities are to increase participant's access to information about the dangers of substance use during pregnancy and breastfeeding and to facilitate referrals for further assessment, as appropriate.

WIC staff are not expected to diagnose substance use problems, or to provide counseling. WIC is tasked to assign the risk factor as appropriate, and to provide substance use related information and materials during certification and recertification. Through a Local Agency's established linkages and coordination with local resources, participants can be referred for help.



Substance use may lead to vitamin and mineral deficiency that threaten physical health, damage organs and the nervous system, and decrease immunity. Malnutrition can occur when substances replace other dietary nutrients.

For more detailed information on the effects of substances on pregnant and breastfeeding women and infants, see Risk Factors 371, 372 and 904 in the Job Aid 041: Index of Allowed Nutrition Risk Criteria, which is also located on the Alaska WIC website:

<https://health.alaska.gov/dpa/Pages/nutri/wic/administration/risk-codes.aspx>

#### Implications for WIC Nutrition Services:

WIC staff are required to refer participants who report substance use to local resources and existing assessment agencies for professional evaluation and treatment, as appropriate.

In addition to providing referrals to substance abuse counseling/treatment and tobacco use cessation and coordinating/facilitating services, WIC's role in preventing substance abuse is to educate participants, parents, and caretakers of participating infants and children about substance use-related problems. The intended effect is to increase participant's access to information about the dangers of substance use and abuse during pregnancy as well as postpartum. This is accomplished by providing information to all women participants, parents, and caretakers at certification and recertification appointments.

WIC also provides supplemental foods that are rich in the nutrients lost from alcohol and substance use.

- Provide referral for professional assessment and treatment. Do not advise a person using narcotics to stop on their own. This step should be taken only under the supervision of a physician or treatment specialist.
- Encourage women to improve their lifestyle and health habits during pregnancy and postpartum, since the concern for an infant's health can be a powerful motivator. Many women are not using substances during pregnancy and benefit from reinforcement to continue this healthy practice
- Emphasizing the importance of substance use treatment during the postpartum period to safeguard the health of the mother and reduce risk in potential pregnancies.
- Recommend a healthy diet.
- Provide breastfeeding promotion and support as appropriate.
- Recommend the ingestion of alcohol be minimized. Provide instructions to wait at least 4 hours to breastfeed after consuming one alcoholic drink.
- Refer to community resources for alcohol and substance use support groups.
- Recommend smoking cessation and refer to local resources.
- Recommend household members smoke outside.

#### PROCEDURE:



1. CPAs review certification questions related to drug, alcohol or other harmful substance use, tobacco use, and exposure to tobacco smoke.

CPAs assign risk factors 371, 372 and 904 as appropriate. See Job Aid 041: Index of Allowed Nutrition Risk Criteria for steps on assigning risks by category.

2. If the participant reports use of harmful substances or requests additional information, the participant should be referred to local substance cessation help.

Steps for making an informal referral:

- a. Discuss the potential substance problem with the participant and suggest further assessment be obtained
- b. Offer participant the Local Agency's resource list
- c. Conclude the conversation by encouraging the participant to contact the appropriate agency for help, if needed
- d. Note the referral in the participant's SPIRIT record.

Staff should also share and discuss the harmful substance handout with the participant. Often, pregnancy is a time when people are motivated to seek help for substance or alcohol use.

3. Pregnant, post-partum and breastfeeding participants who answer “**no**” to the screening questions also need to receive harmful substance use information. The information needs to be communicated verbally, and the written information shared at each certification and recertification.
4. Parents and caregivers of infants and children being certified or recertified must be provided with the harmful substance verbal communication and written information at each certification and recertification.
5. Document providing the harmful substance written information in the SOAP note.

#### REFERENCE:

Substance Use Prevention: Screening, Education and Referral Resource Guide for Local WIC Agencies ; WIC Works Resource System

#### CROSS REFERENCE:

Job Aid 041: Index of Allowed Nutrition Risk Criteria for:

Risk Factor 372 Alcohol and Substance Use, (06/2018)

Risk Factor 371 Nicotine and Tobacco Use (12/2020)

Risk Factor 904 Environmental Tobacco Smoke Exposure (12/2020)

#### DEFINITIONS:

Substance Abuse and Mental Health Services Administration (SAMHSA)

American Academy of Pediatrics (AAP)



**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

**WIC** means the Special Supplemental Nutrition Program for Women, Infants and Children authorized by section 17 of the Child Nutrition Act of 1966, [42 U.S.C. 1786](#).

**POLICY HISTORY:**

Date	Draft, released, training, revised, reviewed
5/17/2023	FNS Approved
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes





may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services

### Policy: 313 – Nutrition & Breastfeeding Annual Survey

Effective Date: 11/01/2016

#### PURPOSE:

To describe the requirement that Local Agency's must perform an Annual Survey of Participant Views on Nutrition Education and Breastfeeding Promotion.

#### POLICY: 313 – Nutrition & Breastfeeding Annual Survey

##### Annual Survey of Participant Views on Nutrition Education and Breastfeeding Promotion

Local Agencies are required to assess participant views on nutrition education and breastfeeding promotion at least once a year. Questionnaires can be developed by Local Agencies. The results are used in the development of the Local Agency Nutrition Education Plan. Results must be reported to the State WIC Office as part of the annual nutrition education plan.

Annual Surveys are due with the third Quarterly Report submitted in GEMS. Surveys must contain the five required state questions that are available during January of the year the survey is due. Five percent (5%) of your current caseload or 25 surveys; whichever is greater must be surveyed. Survey results need to include:

- A copy of all the questions used
- The raw data (for example the number of surveys sent, the number of responses received, and the percentages when reporting responses.)
- Narrative on LA reaction/lessons learned/plans of action based on survey results.

#### REFERENCE:

Nutrition Services Standards: Standard 20(C), Customer Service

#### DEFINITIONS:

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health



## Alaska WIC Policy & Procedure Manual



clinic or is provided health services by an IHS service unit.

**Nutrition education** means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.

**Nutrition Education Plan (NEP):** The plan that local agencies intend to follow to offer nutrition education to participants. Nutrition education is the program benefit that sets WIC apart from the other Food and Nutrition Service (FNS) nutrition assistance programs.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services



Policy: 325 Breastfeeding: Definition, Promotion and Support Standards  
Effective Date: 06/30/2012

### PURPOSE:

To provide guidelines for implementing breastfeeding promotion activities and creating a clinic environment that endorses breastfeeding.

### POLICY: 325 Breastfeeding: Definition, Promotion and Support Standards

#### Breastfeeding Promotion and Support Standards

The State WIC Office coordinates with Local Agencies to implement breastfeeding promotion activities that encourage the development of breastfeeding coalitions, task forces and forums; develop breastfeeding promotion materials; provide breastfeeding aids to WIC participants, as appropriate; provide training for State and Local Agency staff; and, to the extent possible under present funding, employ certified lactation consultants and peer counselors.

Local WIC agencies should create a positive clinic environment which endorses breastfeeding as the preferred method of infant feeding by:

- Designating a staff person to coordinate breastfeeding promotion and support activities.
- Incorporating task-appropriate breastfeeding promotion and support training into orientation programs for new staff involved in direct contact with WIC participants.
- Ensuring women have access to breastfeeding education and support activities during the prenatal and postpartum periods.

Local Agency WIC programs should establish policies that support a breastfeeding friendly environment for WIC clients and employees. The agency environment should promote and support both clients and employees' breastfeeding goals. The clinic must:

- Display posters, pictures, and/or photographs of women breastfeeding in areas visible to WIC participants. Images must portray breastfeeding in a positive manner and have images that reflect the ethnicity of the WIC participants served.
- Formula, formula materials, formula logos, bottles and pacifiers are not in view except during use as teaching aids.
- Magazines, books and educational materials, and incentive items that are displayed or provided to WIC participants do not promote or market formula.
- Make reasonable efforts to provide a private area at the WIC clinic for participants to receive help with breastfeeding or who request a private space to breastfeed.
- Provide pump kits purchased with WIC funds only to WIC clients.
- Work with your agency that hosts the WIC program to support and approve the



breastfeeding friendly environment policy and the best practices for clinics.

### Local Agency Accommodations for WIC Breastfeeding Employees:

- Make reasonable efforts to provide breastfeeding WIC employees a private, clean and comfortable area in close proximity to the employee's work area for nursing or expressing milk.
- Provide a reasonable amount of break time for WIC employees to express breast milk or breastfeed.
- Inform all new WIC employees at orientation of breastfeeding support available for employees.
- Inform pregnant WIC employees of policies, facilities, information, and resources to support breastfeeding.
- Offer breastfeeding support to WIC employees in the early postpartum period.

### BEST PRACTICES:

Best practices for supporting breastfeeding friendly clinics are as follow:

- Provide alternative work schedules such as part-time employment, job sharing, flex schedules, and / or a gradual return to work
- Allow infants to be brought into the workplace during break times to be breastfed or allow infants in the workplace under the care of their mother as job duties allow for a period of time to be determined between the WIC employee and their supervisor.
- Create on-site support groups for breastfeeding WIC clients and employees.

### REFERENCE:

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)

- Subpart A- General: Definitions
  - 246.2

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)

- Subpart D- Participant Benefits-Nutrition Education
  - 246.11(c)(6-7)

### DEFINITIONS:

**Breastfeeding** means the practice of feeding human milk/breastmilk to an infant on average of at least once a day.

**Breastfeeding Coordinator:** A designated staff member who provides leadership to the Local Agency regarding breastfeeding promotion, education, and support.

**Breastfeeding women:** means a woman up to one year postpartum who is providing breastmilk to her infant/s.



## Alaska WIC Policy & Procedure Manual



**Breast pump:** A device to help remove milk from the breasts.

**Infant:** A person who is 12 months old or younger. Once they turn 12 months, they are considered a child.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services

### Policy: 326 Breastfeeding: Breast Pump Ordering, Distribution and Tracking Guidelines

Effective Date: 06/30/2012

#### PURPOSE:

To provide guidelines for the Alaska WIC Program on ordering, distributing, and tracking breast pumps and other breastfeeding aids for breastfeeding women.

#### POLICY: 326 Breastfeeding: Breast Pump Ordering, Distribution and Tracking Guidelines

##### Policy for Providing Breastfeeding Aids

The intent of breastfeeding promotion in the Alaska WIC Program is to promote optimal infant health by increasing the incidence and prevalence of breastfeeding. This is accomplished through providing WIC participants with breastfeeding information, encouragement and support. Providing breastfeeding aids is one way to support a subset of breastfeeding mothers and babies in special circumstances and is thus, an allowable expenditure for promoting and supporting breastfeeding.

##### Allowed Breastfeeding Aids include:

- Hospital-grade double electric breast pump
- Single use personal electric breast pump
- Pedal breast pumps
- Manual breast pump
- Double pumping accessory kit
- Other State provided breastfeeding aids

Breastfeeding aids purchased with WIC funds must be provided free of charge to breastfeeding women participating in the Alaska WIC Program. Breast pumps may be provided to participants after an assessment of the breastfeeding relationship to ensure that a breast pump is the preferred intervention.

Breastfeeding aids must not be provided to any pregnant or breastfeeding women solely as an inducement to consider or to continue breastfeeding. Some research suggests that providing pumps and other breastfeeding aids to all breastfeeding women, regardless of need, may have the unintended effect of discouraging breastfeeding. The practice may give breastfeeding women the impression that special supplies and/or equipment are needed to successfully breastfeed, and thus reinforce a lack of confidence.

Breastfeeding aids which come in contact with mother's milk are provided to a lactating



participant for her use only and must not be used by anyone else. To avoid the possibility of contamination, these devices must not be received back by the WIC agency and redistributed for use by another individual.

### Reasons for Providing Breast Pumps

Hospital-grade double electric breast pumps must be loaned, not given, to lactating participants. Reasons for providing breast pumps to a participant include:

- Mothers who are having difficulty in establishing or maintaining an adequate milk supply due to maternal and infant illness.
  - Temporary mother/infant separation (such as hospitalization or a return to work or school).
  - Mothers who have temporary breastfeeding problems, such as engorgement.
  - Mothers of premature infants who are unable to suck adequately.
  - Mothers of multiple births.
  - For any other reason that the nutrition counselor feels a pump will enhance the breastfeeding experience or will help the mother continue successful breastfeeding.
- Prior approval by the Local Agency WIC Coordinator is required.

### Breast Pump and Device Distribution

WIC staff must not issue a single-user electric breast pump and a hospital-grade electric breast pump to a participant at the same time. The hospital-grade electric breast pump must be returned to the clinic before a single-user electric breast pump will be issued. A hospital-grade electric breast pump may be issued to a participant who has previously received a single-user electric breast pump.

Clinic staff need to document the distribution of single-user electric breast pumps given to participants on Breast Pump tab in SPIRIT, educate the client on use, assembly, cleaning of the pump; and, inform client that the pump is for their use only and is not to be loaned, sold or given away. Clients are to be encouraged to save the single user electric pump for possible future pregnancies since they will only be issued one single user electric pump while on the Alaska WIC Program.

### Nipple Shield

Nipple Shields may be provided to participants who need them. Appropriate uses may include:

- Mother/baby unable to achieve or maintain latch, even with hands-on help from trained professionals.
- Preterm infant (to enhance milk transfer).
- Sore nipples (along with assistance to solve the root cause).

There are two job aids available for nipple shield issuance: Job Aid 014: Guidance for WIC Staff on Issuing Nipple Shields and Job Aid 015: Nipple Shields Guidance for WIC Participants





### Supplemental Nursing System (SNS)

Thorough education and follow-up are necessary for any participant who receives a supplemental nursing system (SNS). The infant's physician must be notified that the device has been prescribed.

Reasons for the use of a Supplemental Nursing System include:

- infant with sucking problems
- infants who have latch-on-problems
- mothers with low milk supply
- infants who are reluctant to nurse
- premature infants
- infants with low weight gain
- infants with cleft palate
- adopted infants
- other problems (prior approval by the Local Agency WIC Coordinator is required)

### Breast Pump Education

Before a participant is loaned or given a breast pump or breastfeeding aid, instruction on the appropriate assembly, proper use and, and care must be provided by trained staff.

Reference the Job Aid 011: "Checklist for using breast pumps" to make sure thorough education has been provided to the participant.

### Required Breast Pump Forms

Prior to issuing a breast pump to a participant, the Breast Pump Loan Agreement form and signed by the participant and the WIC representative. The original must be saved in SPIRIT and a copy provided to the participant. Electric breast pumps are loaned free of charge, without a monetary deposit. The Breast Pump Loan Agreement form is Job Aid 010 for this policy.

In addition, the Checklist for Using Breast Pumps form must be completed, signed by the WIC representative, and saved in the participant's SPIRIT file or in a separate breast pump log.

### Record Keeping and Security for Breastfeeding Aids

Documentation of the prescription of any breastfeeding aid must be included in the WIC participant's SPIRIT notes. The documentation must include the type of breastfeeding aid provided, the reason the breastfeeding aid was provided, a brief summary of the content of the instruction provided, and the name of the qualified staff person who provided the instruction.

Documentation for giving a personal electric breast pump should occur in the "Breast Pump" tab in SPIRIT. This tab can also be used to document loaning of other breast pumps and breastfeeding equipment.

Local Agencies must keep a log to record issuance of all breast pumps. The log for electric



## Alaska WIC Policy & Procedure Manual



breast pumps must include contact information, with name, address and telephone number of the borrower.

Hospital-grade electric breast pumps are WIC equipment. The State WIC office will issue property tags for these pumps. The Local Agency is required to track these pumps on their Inventory List.

Careful attention must be given to the security of all breastfeeding aids by storing them in a locked cabinet or locked room at the clinic.

### Follow-up Breastfeeding Aids

At least one follow-up contact by a trained person is recommended within 24-48 hours for WIC participants who receive breastfeeding aids. This contact is to assure that the breastfeeding aid is operating correctly and that the participant is using it properly. Documentation of this contact should be made in the WIC participant's SPIRIT file.

### Staff Training

Any WIC Staff giving out a Breastfeeding Aid needs to have been appropriately trained by a WIC Designated Breastfeeding Expert (DBE) prior to issuing a device and educating a participant. Breast pumps can be issued by peer counselors who have been trained by their DBE to do so. Other devices, such as the nipple shield and SNS, are outside the scope of a peer counselor.

### Policy Breastfeeding Aids for Off-Site Participants

Off-site participants should be notified that breastfeeding aids are available to assist them in successfully breastfeeding. When issuing a breast pump to an off-site participant, contact with the participant should be made by telephone (if possible). Appropriate instructional materials must accompany the breastfeeding aid. Local Agency staff should work with any available on-site health care providers or other health care personnel to provide necessary education and follow-up.

### Loan and Retrieval of Electronic Breast Pumps with Pregnant Women

Women currently enrolled in WIC, who have recently delivered an infant(s) and have a need for an electric pump prior to their recertification appointment as a breastfeeding woman should be issued an electric breast pump. These women or a designee may come to the WIC office to fill out the Alaska WIC Breastfeeding Promotion Program Breast Pump Loan and Release Agreement form, receive instruction on proper use, care and return of the electric breast pump. All contact information should be updated on the loan form for purposes of tracking the electric breast pump. A recertification appointment or reminder should be given to the WIC participant at that time.

Women or designees are encouraged to return the pump to the office it was issued. In instances where electric breast pumps have been issued by one clinic and returned to another clinic, it is the receiving clinic's responsibility to send the electric pump back to the originating



office.

When possible, insure electric breast pumps sent out for delivery to WIC participants. The State WIC Office can provide you with the value of the pump.

### REFERENCE:

7CFR Ch. II (1-1-12 Edition)

- Subpart E- State Agency Provisions- Program Costs
  - 246.14(d)(1)(ii)

7CFR Ch. II (1-1-12 Edition)

- Subpart D- Participant Benefits- Nutrition Education
  - 246.11(a)(1)

### CROSS REFERENCE:

609 WIC & Social Security Numbers

Job Aid 010 Breast Pump Loan Agreement

Job Aid 011 Checklist for Using Breast Pumps

Job Aid 015: Nipple Shields Guidance for WIC Participants

Job Aid 014: Guidance for WIC Staff on Issuing Nipple Shields

### DEFINITIONS:

**Breastfeeding** means the practice of feeding human milk/breastmilk to an infant on average of at least once a day.

**Breastfeeding Coordinator:** A designated staff member who provides leadership to the local WIC agency regarding breastfeeding promotion, education, and support.

**Breastfeeding Peer Counselor:** A paraprofessional support person who provides basic breastfeeding information and encouragement to WIC pregnant and breastfeeding mothers.

**Breastfeeding women:** means a woman up to one year postpartum who is providing breastmilk to her infant/s.

**Breast Pump:** A device to help remove milk from the breasts.

**WIC Designated Breastfeeding Expert (DBE):** An individual who is an expert with special experience or training in helping breastfeeding mothers and who provides breastfeeding expertise and care for more complex breastfeeding problems when WIC staff face situations outside their scope of practice. Individuals with this designation can be WIC staff including Breastfeeding Coordinators, Peer Counselor Coordinators, International Board Certified Lactation Consultants (IBCLCs), Certified Lactation Counselors or Certified Lactation Educators,



## Alaska WIC Policy & Procedure Manual



nutritionists, and nurses or community health care providers such as physicians or nurses. The IBCLC is the preferred WIC DBE (2013 WIC NSS).

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services



### Policy: 327 Lost or Stolen Electric Breast Pumps

Effective Date: 06/30/2012

#### PURPOSE:

To describe the procedures to be used when an electric breast pump is reported lost or stolen.  
To ensure proper accountability of State of Alaska purchased multi-user electric breast pumps.

#### POLICY: 327 Lost or Stolen Electric Breast Pumps

##### Lost or Stolen Electric Breast Pumps

WIC benefits cannot be denied to a participant for failing to return a pump or returning a dirty or damaged pump. If an electric breast pump is lost or not returned, the WIC office is not obligated to provide an electric pump to that mother in the future. Make a notation that the electric breast pump was not returned, in an “Alert” and copy to the “Breastfeeding Notes” section in SPIRIT. In the future, a mother can receive a manual pump if the need for a breast pump arises.

If an electric breast pump is reported stolen and an official police report is brought into the WIC office, scan or file a copy in the chart and make a notation in the “Breastfeeding Notes” section in SPIRIT so that this mother can be issued an electric breast pump in the future.

If an electric breast pump is returned to the WIC office damaged, take the pump out of the Local Agency Inventory and send it to the State WIC Office for repair.

Make reasonable effort to retrieve multi-use electric breast pumps that are not returned to the local WIC agency after the date specified in the Breast Pump Loan and Release Agreement Form.

At minimum Local Agencies should:

- Attempt to contact all parties by phone or email listed on the Breast Pump Loan and Release Agreement Form and on the Family Information Form, within seven days of the breast pump return due date.
- Leave messages if appropriate.
- Document all call attempts.
- If unsuccessful after 14 days:
  - Mail a letter to the participant and the “additional contact” person listed on the Breast Pump Loan and Release Agreement Form, requesting return of the pump to the Local Agency.
  - Document that a letter(s) was sent in the “Breastfeeding Notes” section in SPIRIT. Keep a copy of the letter for your records or scan it into SPIRIT.



## Alaska WIC Policy & Procedure Manual



- If these efforts are not successful and the WIC client fails to return the breast pump within 30 days after the letter was mailed, notify the State WIC office Administrative Assistant and provide backup documentation along with the participant ID number for further collection efforts. The State WIC Office will pursue further collection options.
  - Backup documentation includes:
    - Alaska WIC Breast Pump Loan & Release Agreement form
    - Rights and Responsibilities form
    - Notes from SPIRIT
    - Letter(s) sent to client
- Remove the electric breast pump from the Local Agency inventory after contacting the State WIC Office.
- Document that the electric breast pump was not returned, in an “Alert” and copy to the “Breastfeeding Notes” section in SPIRIT.
- Notify the State WIC Office if the participant returns the pump to the Local Agency after collection efforts have begun.

A sample breast pump retrieval letter is available in the job aids section associated with this policy.

### Lost Multi-User Electric Breast Pumps

The SPIRIT computer system helps track multiple-user electric breast pumps through its breast pump inventory system. Agencies should utilize the reporting features of the SPIRIT system to manage the breast pumps assigned to the Local Agency. Minimally breast pump reports are monitored monthly to detect any discrepancies in inventory.

Following the state policies on lost and stolen breast pumps, Local Agencies will make a reasonable effort to retrieve multi-user electric breast pumps that are not returned when requested and refer to the state WIC office for collection efforts if unsuccessful.

### REFERENCE:

7 CFR 246.7 (I) (I)

### CROSS REFERENCE:

609 WIC & Social Security Numbers  
Job Aid 013: Breast Pump Retrieval Letter

### DEFINITIONS:

**Breast pump:** A device to help remove milk from the breasts.

**Multi-user electric breast pump:** This definition is inferred from the context of the policy,



## Alaska WIC Policy & Procedure Manual



referring to electric breast pumps used by multiple participants, managed and tracked by the WIC program.

**SPIRIT:** The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services



Policy: 328 Breastfeeding Peer Counseling  
Effective Date: 06/30/2012

### PURPOSE:

To promote strong breastfeeding support by using FNS designed Breastfeeding Curriculum to implement breastfeeding best practices throughout Alaska WIC.

### POLICY: 328 Breastfeeding Peer Counseling

#### Breastfeeding Peer Counseling Curriculum

The Alaska WIC Program promotes and supports breastfeeding in collaboration with a strong statewide support network strengthening existing projects and enhancing the continuity of WIC's current breastfeeding management and counseling efforts. In using the USDA's Breastfeeding Curriculum to implement best practices in peer counseling, support plans are identified and developed for WIC communities statewide.

### REFERENCE:

USDA Breastfeeding Curriculum

### DEFINITIONS:

**Breastfeeding:** The practice of feeding human milk/breastmilk to an infant on average of at least once a day.

**Breastfeeding Peer Counselor:** A paraprofessional support person who provides basic breastfeeding information and encouragement to WIC pregnant and breastfeeding mothers. She is a mother who is breastfeeding or has breastfed, and she reflects the population served in age, ethnicity, education, and language.

**Breastfeeding women:** means a woman up to one year postpartum who is providing breastmilk to her infant/s.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed





## Alaska WIC Policy & Procedure Manual



**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services



### Policy: 350 Supplemental Food Prescriptions

Effective Date: 06/01/2018

#### PURPOSE:

- To provide the considerations a WIC CPA makes when prescribing and documenting issuance of WIC supplemental foods to a WIC participant.
- To assure the participant's dietary needs are met according to federal regulations regarding allowed food types, maximum quantities, participant instruction and documentation.

#### POLICY: 350 Supplemental Food Prescriptions

- Local Agency CPAs prescribe authorized supplemental foods in appropriate quantities, considering a participant's age and dietary needs.
- Explain the use of WIC electronic food benefits including the Cash Value Benefit (CVB) for food purchases, and tailor food packages for individual participants' needs and cultural accommodation, as desired.
- Local Agencies are responsible for verifying and documenting food packages for participants with special needs and obtaining medical documentation for the issuance of any supplemental foods which require medical documentation.

Supplemental foods mean those foods authorized by the State or Local Agency for issuance to a particular participant which contain nutrients determined by nutrition research to be lacking in the diets of pregnant, breastfeeding and postpartum women, infants, and children. These supplemental foods promote the health of the WIC participant as indicated by relevant nutrition science, public health concerns, and cultural eating patterns.

The amounts of supplemental food prescribed must not exceed the maximum quantities specified in the food package regulations.

- Participants will be instructed, when appropriate, that the supplemental foods issued are *only for their personal use*.
- However, supplemental foods are not authorized for participant use while hospitalized on an in-patient basis.
- In addition, supplemental foods are not authorized for use in the preparation of meals served in a communal food service. This restriction does not preclude the provision or use of supplemental foods for individual participants in a nonresidential setting (e.g., childcare facility, family day care home, school, or other educational program); a homeless facility or, at the State WIC Office discretion, a residential institution (e.g.,



## Alaska WIC Policy & Procedure Manual



home for pregnant teens, prison, or residential drug treatment center).

### REFERENCE:

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)

- Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

### DEFINITIONS:

**Cash Value Benefit** means a fixed-dollar amount electronic benefit transfer (EBT) card or other document which is used by a participant to obtain authorized fruits and vegetables. Cash Value Benefit is also known as cash-value voucher (CVV) when it pertains to checks or vouchers. Previously known as FVV - Fruit and vegetable voucher.

**Competent Professional Authority (CPA):** An individual of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and counseling, and prescribe supplemental foods.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Supplemental foods** means those foods containing nutrients determined by nutritional research to be lacking in the diets of pregnant, breastfeeding and postpartum women, infants, and children, and foods that promote the health of the population served by the WIC Program as indicated by relevant nutrition science, public health concerns, and cultural eating patterns, as prescribed by the Secretary in [§ 246.10](#).

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.



## Alaska WIC Policy & Procedure Manual



**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services

### Policy: 351 Food Authorization Standards

Effective Date: 06/01/2018

#### PURPOSE:

To describe the standards used to determine if a food meets the requirements to be a WIC allowed food.

#### POLICY: 351 Food Authorization Standards

Many different foods are authorized for use in participant food package prescriptions.

The authorized product list may change from time to time, so it is best to check the current list for possible changes, particularly for items such as cereals.

- Some foods, such as baked beans, are authorized only when specifically prescribed and issued on the eWIC card.
- Organic fruits and vegetables are allowed on the Cash Value Benefit (CVB)
- Organic infant foods and cereal are allowed

Federal regulations specify minimum requirements for foods to be authorized for WIC Food Packages. Minimum requirements are specified in Part II, Department of Agriculture, Food and Nutrition Services, Federal Regulations: Final Food Rule, 7 CFR 246.10(e), Dated March 4, 2014, effective May 5, 2015.

The standards are intended to provide guidance in authorizing additional foods, maintaining or decreasing food costs, and assuring that WIC authorized foods promote health as supported by current scientific literature.

The product must be commercially made and widely available in Alaska.

#### REFERENCE:

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)

- Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

#### DEFINITIONS:

**Cash Value Benefit** means a fixed-dollar amount electronic benefit transfer (EBT) card or other document which is used by a participant to obtain authorized fruits and vegetables. Cash Value Benefit is also known as cash-value voucher (CVV) when it pertains to checks or vouchers. Previously known as FVV - Fruit and vegetable voucher.



## Alaska WIC Policy & Procedure Manual



**Food package:** is the maximum amount and type of food which can be prescribed for a single participant per 28-to-31-day period.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Supplemental foods** means those foods containing nutrients determined by nutritional research to be lacking in the diets of pregnant, breastfeeding and postpartum women, infants, and children, and foods that promote the health of the population served by the WIC Program as indicated by relevant nutrition science, public health concerns, and cultural eating patterns, as prescribed by the Secretary in [§ 246.10](#).

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services



Policy: 352 Food Package Types

Effective Date: 06/01/2018

### PURPOSE:

To describe the seven types of food packages available for issuance to the different WIC client types.

### POLICY: 352 Food Package Types

There are seven “food packages” available under the WIC Program which may be provided to participants:

- Food Package I – Infants 0 through 5 months
- Food Package II – Infants 6 through 12 months
- Food Package III – Medically Fragile Participants
- Food Package IV – Children 1 through 4 years of Age
- Food Package V – Pregnant and Partially Breastfeeding Women
- Food Package VI – Postpartum Women
- Food Package VII – Fully breastfeeding women (up to 1 year postpartum), pregnant women fully or partially (mostly) breastfeeding, and women pregnant with multiple fetuses

A food package is the maximum amount and type of food which can be prescribed for a single participant per 28-to-31-day period.

The authorized supplemental foods must be prescribed in these food packages according to the category and nutritional need of each participant.

Only state staff can access the Vendor module to generate Compliance Buy electronic food benefits for all client types.

Both state and Local Agency staff are permitted to conduct compliance buys.

### REFERENCE:

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)

- Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

### DEFINITIONS:

**Food Benefits:** The foods a participant receives through WIC for a selected month. Depending



## Alaska WIC Policy & Procedure Manual



on the participant category, food benefits provide specific amounts of WIC authorized foods, formulas, and/or a fixed-dollar amount for participants to obtain WIC authorized fruits and vegetables (referred to as a “Cash Value Benefit” or “CVB”).

**Food package:** is the maximum amount and type of food which can be prescribed for a single participant per 28-to-31-day period.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Supplemental foods** means those foods containing nutrients determined by nutritional research to be lacking in the diets of pregnant, breastfeeding and postpartum women, infants, and children, and foods that promote the health of the population served by the WIC Program as indicated by relevant nutrition science, public health concerns, and cultural eating patterns, as prescribed by the Secretary in [§ 246.10](#).

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services



Policy: 353 Food Package I – Infants 0 through 5 months

Effective Date: 06/01/2018

### PURPOSE:

To describe the options for supporting breastfeeding to partially breastfed infant in the first month of an infant. Additionally, to review the specifics of Food Package I, the food package type that may be prescribed to a WIC infant, 0-5 months of age.

### POLICY: 353 Food Package I – Infants 0 through 5 months

#### Food Package 1 – 0 through 1 Month

Food packages for infants and women are designed to strengthen WIC's breastfeeding promotion and support efforts and provide additional incentives to assist mothers in making decisions to initiate or continue breastfeeding. The provisions disallow routine issuance of formula to partially breastfeeding infants in the first month after birth to help mothers establish milk production and the help strengthen the breastfeeding relationship. Breastfeeding women who do not exclusively breastfeed are to be supported in continuing to breastfeed to the maximum extent possible through minimum supplementation with infant formula. Appropriate counseling and support to mothers is critical to the success of the new food packages for breastfeeding mothers and their infants.

There are three categories in the first month: exclusive breastfeeding, partially (mostly) breastfeeding, and fully formula feeding.

1. Exclusive breastfeeding: This rule is designed to support the intent of the WIC Program that all women be supported in exclusively breastfeeding their infants. Mothers who choose to breastfeed deserve support and education to feel confident and be successful. The infant in this dyad does not receive formula from the WIC program, and the mother receives a package with the largest amount of food and most variety.
2. Partially (mostly) breastfeeding: Breastfeeding assessment and the mother's plans for breastfeeding serve as the basis for determining food package issuance. For breastfeeding women who do not receive the fully breastfeeding package, WIC staff are expected to individually tailor the amount of formula based on the assessed needs of the breastfeeding infant. The food packages for the partially (mostly) breastfeeding dyad are designed to provide for the supplemental nutritional needs, provide minimal formula supplementation to help mothers maintain milk production, and provide incentives for continued breastfeeding by way of a larger variety and quantity of food than the full formula/postpartum package. One can of formula is the maximum that can be issued, after assessment, to a partially breastfeeding mother in the first month on a



case-by-case basis. Breastfed infants should not receive more than one can of formula to maintain the mother's milk supply.

3. Fully Formula Fed: Full nutritional benefit for infants who are not breastfed. Appropriate counseling and support should be provided to minimize the number of infants getting the full formula package.

#### **Food Package I: Infants 0-5 months**

This food package is designed for issuance to infant participants from birth to 5 months who do not have a condition qualifying them to receive Food Package III. Infant formula I is the only category of supplemental foods authorized in this food package.

##### **a) Birth to one month:**

Three infant feeding options are available during the first month after birth--fully breastfeeding, i.e., the infant receives no infant formula from the WIC Program; partially (mostly) breastfeeding; or fully formula-feeding.

##### **b) One through 5 months:**

Three infant feeding options are available from one to five months of age: fully breastfeeding, fully formula-feeding, or partially breastfeeding, i.e., the infant is breastfed but also receives infant formula from the WIC Program in an amount not to exceed approximately half the amount of infant formula allowed for a fully formula fed infant. This food package provides authorized iron-fortified infant formula that is not an exempt formula.

#### **Summary of Food Package 1**

	<b>Fully Formula Fed</b>	<b>Partially Breastfed</b>	<b>Fully Breastfed</b>
Ages	A: 0-3 months B: 4-5 months	A: 0-1 month B: 1-3 months <sup>1</sup> C: 4-5 months	0-5 months



# Alaska WIC Policy & Procedure Manual



WIC Formula <sup>3,5,7</sup>	<p>A: FNB=806 fl. oz. MMA=823fl oz reconstituted liquid concentrate or 832 fl oz. RTF or 870 fl. oz. reconstituted powder</p> <p>B: FNB= 884 fl oz, MMA=896 fl oz reconstituted liquid concentrate or 913 fl oz. RTF or 960 fl oz. reconstituted powder.</p>	<p>A: Breastmilk, maximum one can formula after assessment 104 fl oz reconstituted powder</p> <p>B: FNB= 364 fl oz. MMA= 388 fl oz reconstituted liquid Concentrate, or 384 fl oz. RTF, or 435 fl oz. reconstituted powder</p> <p>C: FNB=442 fl oz. MMA=460 fl oz reconstituted liquid concentrate or 474 fl oz. RTF or 522 fl oz. reconstituted powder</p>	Breastmilk provided by mother
	<b>Fully Formula Fed</b>	<b>Partially Breastfed</b>	<b>Fully Breastfed</b>
Ages	<p>A: 0-3 months B: 4-5 months</p>	<p>A: 0-1 month B: 1-3 months <sup>1</sup> C: 4-5 months</p>	0-5 months
WIC Formula <sup>3,5,7</sup>	<p>A: FNB= 806 fl. oz. MMA= 823 fl oz reconstituted liquid concentrate or 832 fl oz. RTF or 870 fl. oz. reconstituted powder.</p> <p>B: FNB= 884 fl oz MMA=896 fl oz. reconstituted liquid concentrate or 913 fl oz. RTF or 960 fl oz. Reconstituted powder.</p>	<p>A: Breastmilk, no formula</p> <p>B: FNB= 364 fl oz MMA= 388 fl oz. reconstituted liquid Concentrate, or 384 fl oz. RTF, or 435 fl oz. reconstituted powder. <sup>1</sup></p> <p>C: FNB= 442 fl oz, MMA= 460 fl oz. reconstituted liquid concentrate or 474 fl oz. RTF or 522 fl. oz. reconstituted powder</p>	Breastmilk provided by mother

## Table Notes

(Abbreviations in order of appearance on table): FF= fully formula fed, BF/FF= partially(mostly) breastfed; BF= Fully breastfed; RTF = ready to feed; FNB= full nutritional benefit; MMA= maximum monthly allowance)

1. Powdered form of formula is recommended for partially breastfeeding infants 1-3



months  
old.

2. Only infant formula may be issued for infants in Food Package I.
3. The maximum monthly allowance is specified in reconstituted fluid ounces for liquid concentrate, RTF liquid, and powder forms of infant formula
4. Reconstituted fluid ounce is the form prepared for consumption as directed on the container.
5. If powder infant formula is provided, Local Agencies must provide at least the number of reconstituted fluid ounces as the maximum allowance for the liquid concentrate form of the same product in the same Food Package up to the maximum monthly allowance for powder.
6. Local Agencies must issue whole containers that are all the same size.

#### REFERENCE:

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)

- Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

#### DEFINITIONS:

**Breastfeeding** means the practice of feeding human milk/breastmilk to an infant on average of at least once a day.

**Breastfeeding woman:** means a woman up to one year postpartum who is providing breastmilk to her infant/s.

**Breastfeeding DYAD:** A dyad is a group of two persons involved in an ongoing relationship or interaction. For breastfeeding to start and continue, the newborn must be able to suck, swallow, and breathe; the mother must be able and willing to let her infant breastfeed; and surroundings must support the biological unit: the mother–baby dyad.

**Infant:** A person who is 12 months old or younger. Once they turn 1-year-old, they are considered a child.

**Infant formula** means a food that meets the definition of an infant formula in section 201(z) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 321(z)) and that meets the requirements for an infant formula under section 412 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 350a) and the regulations at 21 CFR parts 106 and 107.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed



## Alaska WIC Policy & Procedure Manual



--	--

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services



Policy: 354 Food Package II – Infants 6 through 12 months

Effective Date: 06/01/2018

### PURPOSE:

To describe, Food Package II, the food package type that may be prescribed to a WIC infant, from 6-12 months of age.

### POLICY: 354 Food Package II – Infants 6 through 12 months

This food package is designed for issuance to infant participants from 6 through 11 months of age who do not have a condition qualifying them to receive Food Package III.

Infant feeding options: Three infant feeding options are available--fully breastfeeding, fully formula-feeding, or partially breastfeeding.

Infant formula requirements: The requirements for issuance of infant formula in Food Package I also apply to the issuance of infant formula in Food Package II.

Infant formula, infant fruits and vegetables, infant meat, and infant cereal are the categories of supplemental foods authorized in this food package.

The table below provides a summary of Food Package II.

### Summary of Food Package II

	Fully formula fed	Partially Breastfed	Fully Breastfed
<b>WIC formula</b> 1,2,3,4	FNB= 624 fl oz MMA= 630 fl oz reconstituted liquid concentrate or 643 fl oz RTF or 696 fl oz reconstituted Powder	FNB= 312 fl oz MMA= 315 fl oz reconstituted liquid concentrate or 338 fl oz RTF or 384 fl oz reconstituted Powder	Breastmilk
Infant cereal 6	24 oz.	24 oz.	24 oz.
Infant fruits and vegetables 6	128 oz. Fresh banana may replace up to 16 ounces of infant food fruit at a rate of one banana per four ounces of infant food fruit.	128 oz. Fresh banana may replace up to 16 ounces of infant food fruit at a rate of one banana per four ounces of infant food fruit.	256 oz. Fresh banana may replace up to 16 ounces of infant food fruit at a rate of one banana per four ounces of infant food fruit.



## Alaska WIC Policy & Procedure Manual



Fully formula fed	Partially Breastfed	Fully Breastfed
Infant meat <sup>6</sup>	77.5 oz.	

### Table Notes

1. The maximum monthly allowance is specified in reconstituted fluid ounces for liquid concentrate, RTF liquid, and powder forms of infant formula.
2. Reconstituted fluid ounce is the form prepared for consumption as directed on the container.
3. If powder infant formula is provided, Local Agencies must provide at least the number of reconstituted fluid ounces as the maximum allowance for the liquid concentrate form of the same product in the same Food Package up to the maximum monthly allowance for powder.
4. Local Agencies must issue whole formula containers that are all the same size.
5. Local Agencies may round up and disperse whole containers of infant formula over the food package timeframe to allow participants to receive the full authorized nutritional benefit (FNB).
6. Local Agencies may round up and disperse whole containers of infant foods (infant cereal, fruits and vegetables, and meat) over the Food Package timeframe.

### DEFINITIONS:

**Breastfeeding woman:** means a woman up to one year postpartum who is providing breastmilk to her infant/s.

**Children** means persons who have had their first birthday but have not yet attained their fifth birthday.

**Infant:** A person who is 12 months old or younger. Once they turn 1-year-old, they are considered a child.

**Infant formula** means a food that meets the definition of an infant formula in section 201(z) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 321(z)) and that meets the requirements for an infant formula under section 412 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 350a) and the regulations at 21 CFR parts 106 and 107.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not



## Alaska WIC Policy & Procedure Manual



been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services



Policy: 355 Cash Value Benefit for Infants 9 -11 months

Effective Date: 06/01/2018

### PURPOSE:

To describe the steps in prescribing a cash value benefit to infants age 9-11 months in lieu of infant jarred commercial fruits and vegetables.

### POLICY: 355 Cash Value Benefits for Infants 9 -11 months

Jarred infant foods (fruits, vegetables, and meats) are provided to infants age 6-11 months in Food Packages II and III. These foods are provided to ensure infants receive and consume fruits and vegetables in developmentally appropriate textures and in various flavors. Food safety and nutritional content were also considerations in providing jarred foods- and in ensuring that the infant is the family member eating the food.

This provision allows prescription of a portion of the fruit and vegetable benefit as foods for older infants which are developmentally appropriate as these infants transition into toddler foods. This provision also allows a decrease in the amount of jarred foods for older infants, as the amount was excessive for some older infants who are progressing in their feeding skills and progressing from infant foods to table foods consumed during family meals.

The USDA Food and Nutrition Services (FNS) Feeding Guide indicates that around 9 months of age most infants are ready to consume foods of increased texture and consistency. Such consistency should progress from pureed to ground to fork mashed and eventually to diced.

For partially breastfed infants and fully formula fed infants receiving Food Package II or III,, participants may opt to receive a \$4 cash-value voucher plus 64 oz of infant jarred fruits and vegetables. Fully breastfeeding infants may receive an \$8 cash-value voucher and 128 oz of infant fruits and vegetables.

A cash value voucher may only be provided to the participant only after an assessment by the CPA or RD. The CPA or RD must ensure that appropriate nutrition education is provided to the caregiver, addressing safe food preparation, storage techniques and feeding practices to make certain participants are meeting the infant's nutritional needs in a safe and effective manner.

Receiving a cash value voucher is optional and the caregiver of the participant must have the option to receive either jarred foods or a combination of jarred foods and fruit and vegetable voucher.

### REFERENCE:



## Alaska WIC Policy & Procedure Manual



Federal Regulations: Final Food Rule, 7 CFR 246.10(e)

- Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

### DEFINITIONS:

**Breastfeeding woman:** means a woman up to one year postpartum who is providing breastmilk to her infant/s.

**Cash Value Benefit** means a fixed-dollar amount electronic benefit transfer (EBT) card or other document which is used by a participant to obtain authorized fruits and vegetables. Cash Value Benefit is also known as cash-value voucher (CVV) when it pertains to checks or vouchers. Previously known as FVV - Fruit and vegetable voucher.

**Children** means persons who have had their first birthday but have not yet attained their fifth birthday.

**Infant:** A person who is 12 months old or younger. Once they turn 1-year-old, they are considered a child.

**Infant formula** means a food that meets the definition of an infant formula in section 201(z) of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 321(z)) and that meets the requirements for an infant formula under section 412 of the Federal Food, Drug, and Cosmetic Act (21 U.S.C. 350a) and the regulations at 21 CFR parts 106 and 107.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
07/17/2024	Reviewed; CVB dollar amounts updated
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for



## Alaska WIC Policy & Procedure Manual



release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## **Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services**

**Policy: 356 Food Package III-Medically Fragile Participants**

**Effective Date: 06/01/2018**

### **PURPOSE:**

To describe, Food Package III, the food package type that may be prescribed to WIC infants, children and women with special dietary needs. Additionally, to describe the process of assessing and prescribing jarred infant foods to children and women

### **POLICY: 356 Food Package III-Medically Fragile Participants**

Women, infants, and children with special dietary needs may receive Food Package III if a health care provider determines that the participant has a medical condition which precludes or restricts the use of conventional foods and necessitates the use of a formula.

- These conditions include but are not limited to, metabolic disorders, inborn errors of amino acid metabolism, gastrointestinal disorders, malabsorption syndrome and allergies.
- These supplemental foods cannot be authorized solely for the purpose of enhancing nutrient intake or managing body weight of children and women participants.
- Documentation of the health care provider's determination of the need for a formula and the specific formula prescribed must be included in the participant's file.

This food package is not authorized for infants whose only condition is a diagnosed formula intolerance or food allergy to lactose, sucrose, milk protein or soy protein that does not require the use of a non-contract infant formula, a non-specific formula or food intolerance, or women and children who have a food intolerance to lactose or milk protein that can be successfully managed with the use of one of the other WIC food packages (i.e., Food Packages IV–VII.) This food package should not be used for participants solely to enhance nutrient intake or manage body weight without an underlying qualifying condition.

Summary of Food Package III is on the following 2 pages.



# Alaska WIC Policy & Procedure Manual



	P B F A: 0-1 month B: 1 through 3 months C: 4 through 5 months	PBF 6 months through 11 months <sup>1 2</sup>	FF A: 0-3 months B: 4 through 5 months	FF 6 months through 11 months <sup>1 2</sup>	Children 1 through 4 years	Pregnant & PBF (Up to 1 yr. PP) <sup>3</sup>	Postpartum (up to 6 months PP) <sup>4</sup>
<b>Foods</b>							
Formula Exemption only or WIC eligible nutritional	A: 104 fl oz with CPA assessment B: FNB= 364 fl oz MMA= 388 fl oz reconstituted liquid concentrate <b>or</b> 384 fl oz RTF <b>or</b> 435 fl oz reconstituted powder C: FNB= 442 fl oz MMA= 460 fl oz reconstituted liquid <b>or</b> 474 fl oz RTF <b>or</b> 522 fl oz reconstituted powder	<i>FNB= 312 fl oz MMA= 315 fl oz reconstituted liquid concentrate <b>or</b> 338 fl oz RTF <b>or</b> 384 fl oz reconstituted powder</i>	A: <i>FNB= 806 fl oz MMA= 823 fl. oz. reconstituted liquid concentrate <b>or</b> 832 fl. oz. RTF <b>or</b> 870 fl. oz. reconstituted powder</i> B: <i>FNB= 884 fl oz MMA= 896 fl. oz. reconstituted liquid concentrate <b>or</b> 913 fl. oz. RFT <b>or</b> 960 fl. oz. reconstituted powder</i>	<i>FNB= 624 fl oz MM A= 630 fl. oz. reconstituted liquid concentrate <b>or</b> 643 fl. oz. RTF <b>or</b> 696 fl. oz. reconstituted powder</i>	<i>910 fl oz reconstituted liquid concentrate or equivalent</i>	<i>910 fl oz reconstituted liquid concentrate or equivalent</i>	<i>910 fl oz reconstituted liquid concentrate or equivalent</i>
Milk					<i>16 qt 8, 9, 10, 11, 12</i>	<i>22 quart 9, 10, 11, 12, 14</i>	<i>16 qt 10,</i>
Juice					<i>128 fl oz</i>	<i>144 fl oz</i>	<i>96 fl oz</i>
Cereal <sup>9</sup>		<i>Infant, 24</i>		<i>Infant, 24</i>	<i>36 oz</i>	<i>36 oz</i>	<i>36 oz</i>



## Alaska WIC Policy & Procedure Manual



	P B F A: 0-1 month B: 1 through 3 months C: 4 through 5 months	PBF 6 months through 11 months <sup>1 2</sup>	FF A: 0-3 months B: 4 through 5 months	FF 6 months through 11 months <sup>1 2</sup>	Children 1 through 4 years	Pregnant & PBF (Up to 1 yr. PP) <sup>3</sup>	Postpartum (up to 6 months PP) <sup>4</sup>
		<i>oz</i>		<i>oz</i>			
Cheese							
Eggs					<i>1 dozen</i>	<i>1 dozen</i>	<i>1 dozen</i>
Fruits & Veggies <sup>7,8</sup>		<i>Infant, 128 oz<sup>1</sup></i>		<i>Infant, 128 oz<sup>1</sup></i>	<i>FNS approved CVB**</i>	<i>FNS approved CVB**</i>	<i>FNS approved CVB**</i>
Whole wheat bread					<i>2 lb</i>	<i>1 lb</i>	
Fish (canned)							
Legumes / Peanut butter					<i>1 lb or 18 oz</i>	<i>1 lb and 18 oz</i>	<i>1 lb or 18 oz</i>

\*Text in italics are food items for homeless participants

\*\* Cash value benefit is adjusted annually by FNS.

### Table Abbreviations:

BF = Breastfeeding

FF = Fully Formula Fed

PBF = Partially Breastfed

PP = Postpartum

CVB = Cash Value Benefit

oz = ounce

fl = fluid

qt = quart

lb - pound



**Table Notes:**

- 1 Fresh banana may replace up to 16 ounces of infant food fruit at a rate of one banana per four ounces of infant food fruit.
- 2 In lieu of infant foods (cereal, fruit, and vegetables, and meat), infants greater than 6 months of age in Food Package III may receive exempt infant formula, exempt infant formula, or WIC-eligible nutritionals at the same maximum monthly allowance as infants ages 4 through 5 months of age of the same feeding option.
- 3 This package when issued to breastfeeding women whose infant(s) receive formula cannot exceed the maximum amounts for Food Packages I, A, B, C and Food Package III.
- 4 This package is issued to breastfeeding postpartum women whose infant(s) receive more than the maximum amounts of formula allowed for Food Packages 1, A, B, C, and Food Package III.
- 5 Fully breastfeeding amounts are issued to four categories of WIC participants: fully breastfeeding women whose infants receive no formula, pregnant women with  $\geq 2$  fetuses, women partially or fully breastfeeding multiple infants, and pregnant women fully or mostly breastfeeding an infant.
- 6 "Women fully breastfeeding multiple infants are prescribed 1.5 times the maximum allowances
- 7 Infants 9-11 months may receive a cash value voucher to purchases fresh fruits and vegetables in lieu of a portion of the infant foods fruits and vegetables. Partially (mostly) breastfed infants and fully formula fed infants may receive \$4 cash value voucher plus 64 ounces of infant fruits and vegetables;; fully breastfeeding infants may receive \$8 cash value vouchers plus 128 ounces in infant food fruits and vegetables.
- 8 Whole milk is the standard milk for issuance to 1year old children (12-23 months) receiving Food Package III. Fat reduced milks may be issued to 1 year old as determined appropriate by the health care provider per medical documentation. Low-fat and non-fat milks are the standard milks for issuance to children  $\geq 24$  months of age and women. Whole or reduced fat (2%) milk may be substituted as determined by the health care provider per medical documentation.
- 9 For children 24 months of age and women, yogurt may be substituted for fluid milk at the rate of 32 oz yogurt per 1 quart of milk; a maximum of 1 quart of milk can be substituted. Additional amounts of yogurt are not authorized. Low fat and non-fat yogurt are the standard for issuance to children  $\geq 24$  months of age and women. No more than a total of 4 quarts can be substituted for cheese, yogurt and tofu for children and women in the pregnant, partially breastfeeding and postpartum food packages. No more than a total of 6 quarts of milk may be substituted for a combination of cheese, yogurt or tofu for women in the fully breastfeeding package.
- 10 For women and children, cheese may be substituted for milk. No more than 1 lb. of cheese may be substituted for 3 quarts of milk. For fully breastfeeding women, no more than 2 lb of cheese may be substituted for milk. State agencies do not have the option to issue additional amounts of cheese beyond these maximums, even with medical documentation. No more than a total of 4 quarts of milk may be substituted for a combination of cheese, yogurt or tofu for children or pregnant, partially breastfeeding or postpartum women with Food Packages III. No more than a total of 6 quarts of milk may be substituted for a combination of cheese, yogurt or tofu for fully breastfeeding women.
- 11 For children, soy based beverage and tofu may be substituted for milk based on individual nutritional assessment. Such determinations can be made for situations that include, but are not limited to, milk allergy, lactose intolerance, and vegan diets. Soy based beverage may be



## Alaska WIC Policy & Procedure Manual



substituted for milk on a quart for quart basis up to the total allowance for milk. Tofu may be substituted for milk for children up to the total allowance of milk at the rate of 1 lb of tofu per 1 quart of milk. Additional amounts of tofu may be substituted, up to the maximum allowances for fluid milk, for lactose intolerance or other reasons determined by nutritional assessment.

- 12 For women, soy based beverage may be substituted for milk on a quart by quart basis up to the total maximum allowance for milk. Tofu may be substituted for at the rate of 1 pound of tofu per one quart of milk. (No more than a total of 4 quarts of milk may be substituted for a combination of cheese, yogurt or tofu. No more than a total of 6 quarts of milk may be substituted for a combination of cheese yogurt or tofu for fully breastfeeding women. Additional amounts of tofu may be substituted, up to the maximum allowance for fluid milk, for lactose intolerance or other reasons, with CPA Nutritional assessment documented in SOAP note.
- 13 Processed canned or frozen fruits and vegetables may be substituted for fresh fruits and vegetables. Dried fruit and dried vegetables are not authorized.
- 14 Children and women whose special dietary needs require the use of pureed foods may receive commercial jarred infant food fruits and vegetables in lieu of the cash value voucher. Children may receive 128 oz of commercial jarred infant foods and women may receive 160 oz of commercial jarred infant fruits and vegetables. Infant food fruits and vegetables may be substituted for the cash value voucher as determined appropriate by health care provider per medical documentation.
- 15 32 oz dry ounces of infant cereal may be substituted for 36 ounces of breakfast cereal as determined appropriate by health care provider per medical documentation.
- 16 At least one-half of the total number of breakfast cereals on the State agency's authorized food list will have whole grain as the primary ingredient and meet labeling requirements for making a health claim as a "whole grain food with moderate fat content"
- 17 The monthly value of the fruit/vegetable cash-value vouchers will be adjusted annually for inflation as notified by USDA.
- 18 Whole wheat and or whole grain bread must be authorized. In addition, brown rice, bulgur, oatmeal, whole grain barely, soft corn tortillas, whole wheat pasta, or whole wheat tortillas may be authorized on an equal weight basis.
- 19 Canned legumes may be substituted for dried legumes at the rate of 64 oz. of canned beans (e.g. 4-16 oz cans) for 1 lb. dried beans. Under Food Packages V and VII, two additional combinations of dry or canned beans/peas are authorized: 1 lb. Dry and 64 oz. canned beans. In Food Packages V and VII, beans and peanut butter must be provided. However, when individually tailoring Food Packages V and VII for nutritional reasons, (e.g. food allergy, underweight, participant preference), state agencies have the option to authorize the following substitutions: 1 lb. dry and 64 oz canned beans/peas (and no peanut butter; or 2 lbs. dry or 128 oz canned beans/peas (and no peanut butter); or 36 oz peanut butter (and no beans).

Combination of single-strength and concentrated juices may be issued provided that the total volume does not exceed the maximum monthly allowance for single-strength juice.

For children, cheese may be substituted for milk at the rate of 1 pound of cheese per 3 quarts of milk. No more than 1 pound of cheese may be substituted for milk.





## Alaska WIC Policy & Procedure Manual



Soy-based beverage may be substituted for milk, with CPA assessment, for children in Food Package IV on a quart for quart basis up to the total maximum allowance for milk. Tofu may be substituted for milk, with CPA assessment, for children in Food Package IV at the rate of 1 pound of tofu per 1 quart of milk up to the total maximum allowance for milk.

For women, cheese or calcium-set tofu may be substituted for milk at the rate of 1 pound of cheese per 3 quarts of milk or 1 pound of tofu per 1 quart of milk. A maximum of 4 quarts of milk can be substituted in this manner; however, no more than 1 pound of cheese may be substituted for milk.

For women, with CPA assessment, soy-based beverage may be substituted for milk at the rate of 1 quart of soy-based beverage for 1 quart of milk up to the total maximum monthly allowance of milk. Conditions that might warrant soy substitution include but are not limited to, milk allergy or severe lactose maldigestion, and lactose intolerance.

For women receiving a fully breastfeeding food package; no more than 2 lbs. of cheese may be substituted for milk. With CPA assessment, based on conditions that include, but are not limited to, milk allergy or severe lactose maldigestion, additional amounts of tofu may be substituted, up to the maximum allowances for fluid milk, in cases of lactose intolerance or other qualifying conditions. No more than 6 quarts of milk can be substituted for a combination of cheese, yogurt or tofu for women receiving the fully breastfeeding package.

New medical prescription (ENPR) is required for all formula, WIC-eligible nutritionals, and supplemental foods requiring medical documentation every 12 months.

Processed (canned or frozen) fruits and vegetables may be substituted for fresh fruits and vegetables.

Dried fruit and dried vegetables are not authorized.

Whole wheat and or whole grain bread must be authorized. In addition, brown rice, bulgur, oatmeal, whole grain barely, soft corn tortillas, whole wheat pasta, or whole wheat tortillas are authorized on an equal weight basis.

Canned legumes may be substituted for dried legumes at the rate of 64 oz. of canned beans for 1 lb. dried beans. Under Food Packages V and VII, two additional combinations of dry or canned beans/peas are authorized: 1 lb. Dry and 64 oz. canned beans.

Hard boiled eggs may be substituted for fresh eggs for homeless packages.

### JARRED INFANT FRUITS AND VEGETABLES FOR CHILDREN AND WOMEN

Children and women with qualifying conditions who require the use of a WIC formula (infant formula, exempt infant formula or WIC-eligible nutritional) receive Food Package III. Among the supplemental foods provided to participants in this food package is the cash value voucher to purchase fruits and vegetables.



This provision allows jarred infant fruits and vegetables in lieu of the cash value voucher for children over 1 year and women who have a qualifying medical condition, such as prematurity, developmental delays, and dysphagia (swallowing disorders). These individuals can benefit from the use of a ready-to-feed form of pureed fruits and vegetables.

Food Package III is reserved for medically fragile participants who have specific dietary needs that are dictated by their medical condition. The need for commercial jarred infant fruits and vegetables to meet the participant's nutritional needs must be specified by the health care provider on the ENPR.

The quantity of commercial jarred infant fruits and vegetables is based on the ratio of 128 oz infant fruits and vegetables for children's CVB, and 160 ounces of infant jarred fruits and vegetables in place of the women's CVB.

Children who do not have the qualifying conditions to receive Food Package III cannot be prescribed infant fruits and vegetables. If a child receiving Food Package IV needs modifications in food consistency, their caregiver needs to receive nutrition education on choosing and preparing foods that meet the child's needs, e.g. pureeing fruits and vegetables, and or choosing those with softer consistency.

### REFERENCE:

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)  
Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

### DEFINITIONS:

**Breastfeeding** means the practice of feeding human milk/breastmilk to an infant on average of at least once a day.

**Breastfeeding woman:** means a woman up to one year postpartum who is providing breastmilk to her infants.

**Cash Value Benefit** means a fixed-dollar amount electronic benefit transfer (EBT) card or other document which is used by a participant to obtain authorized fruits and vegetables. Cash Value Benefit is also known as cash-value voucher (CVV) when it pertains to checks or vouchers. Previously known as FVV - Fruit and vegetable voucher.

**Children** means persons who have had their first birthday but have not yet attained their fifth birthday.

**Infant:** A person who is 12 months old or younger. Once they turn 1-year-old, they are considered a child.



**Infant formula** means a food that meets the definition of an infant formula in section 201(z) of the Federal Food, Drug, and Cosmetic Act ([21 U.S.C. 321\(z\)](#)) and that meets the requirements for an infant formula under section 412 of the Federal Food, Drug, and Cosmetic Act ([21 U.S.C. 350a](#)) and the regulations at [21 CFR parts 106](#) and [107](#).

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Supplemental foods** means those foods containing nutrients determined by nutritional research to be lacking in the diets of pregnant, breastfeeding and postpartum women, infants, and children, and foods that promote the health of the population served by the WIC Program as indicated by relevant nutrition science, public health concerns, and cultural eating patterns, as prescribed by the Secretary in [§ 246.10](#).

POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services



Policy: 357 Food Package IV: Children 1 through 4 years of age  
Effective Date: 06/01/2018

### PURPOSE:

- To summarize, Food Package IV, the food package type that may be prescribed to WIC children up to their fifth birthday.
- To describe Food Package IV
- To describe the appropriate circumstances to prescribe different types of milk should be prescribed for children 12-23 months in Food Package III and IV.

### POLICY: 357 Food Package IV Children 1 through 4 years of Age

The table below provides a Summary of Food Package IV.

#### Food Package IV: Children 1 through 4 years

This food package is issued to children 1 to 4 years old who do not have a condition qualifying them to receive Food Package III. Children 1 year of age, the standard milk is whole milk. For children 2 through 4 years of age the standard milks are 1% or skim milk.

Food Items	Amount
Milk	4 gallons
Eggs	1 dozen
Cereal	36 oz
Whole grains	2 lbs
Dry beans and/or Peanut butter	1 lb (64 oz canned) or 18 oz
Juice, single-strength	128 oz
Cash Value Benefit	\$26

1. Combinations of single-strength and concentrated juices may be issued if the total volume does not exceed the maximum monthly allowance for single-strength juice.
2. Whole milk is the standard for issuance to 1-year-old children (12 through 23 months). Low fat (1%) or non-fat milk are the standard milk for issuance to children  $\geq$  24 months of age and women. Reduced fat milk (2%) is authorized only for participants with certain health conditions, including but not limited to underweight and maternal weight loss during pregnancy. The need for reduced fat milk (2%) for children  $\geq$  24 months must be based on individual nutrition assessment.



3. Evaporated milk may be substituted at the rate of 16 fluid ounces of evaporated milk per 32 fluid ounces of fluid milk or a 1:2 fluid ounce substitution ratio.
4. For children receiving Food Packages IV, no more than 1 lb. of cheese may be substituted for 3 quarts of milk. No more than a total of 4 quarts of milk may be substituted for a combination of yogurt, cheese or tofu for children or women with Food Packages IV.
5. For children  $\geq$  24 months, yogurt may be substituted for fluid milk at the rate of 1 quart of yogurt per 1 quart of milk; a maximum of 1 quart of milk may be substituted. Additional amounts of yogurt are not authorized. Low fat and non-fat yogurts are the only types of yogurt authorized for children  $\geq$ 24 months of age. No more than a total of 4 quarts of milk may be substituted in combination with cheese, yogurt and tofu for children receiving Food Packages IV.
6. Soy-based beverages may be substituted for milk for children on a quart by quart basis up to the total maximum allowance of milk. Tofu may be substituted for milk for children at the rate of 1 pound of tofu per 1 quart of milk. No more than 4 quarts of milk may be substituted for cheese and tofu for children in Food Package IV. Additional amounts of tofu may be substituted, up to the maximum allowance for fluid milk.
7. At least one-half of the total number of breakfast cereals on the State agency's authorized food list will have whole grain as the primary ingredient and meet labeling requirements for making a health claim as a "whole grain food with moderate fat content".
8. Canned and frozen fruits and vegetables may be substituted for fresh fruits and vegetables. Dried fruit and dried vegetables are not authorized.
9. The monthly value of the fruit/vegetable cash Value Benefit will be adjusted annually for inflation as notified by USDA.
10. Whole wheat and or whole grain bread must be authorized. In addition, brown rice, bulgur, oatmeal, whole grain barely, soft corn tortillas, whole wheat pasta, or whole wheat tortillas may be authorized on an equal weight basis.
11. Canned legumes may be substituted for dried legumes at the rate of 64 oz. of canned beans (e.g. 4-16 oz cans) for 1 lb. dried beans.
12. Hard boiled eggs may be substituted for fresh eggs for homeless packages.

### Prescribing Milk For Children Aged 12 – 23 Months

Whole milk is the standard issuance for children ages 12-23 months.

Children ages 12-23 months are undergoing rapid growth and development including growth and development of their central nervous system. Fat is an essential component. However, there is evidence that prudent dietary intervention at a young age can decrease risk of obesity and heart disease.

Children age 12-23 months receiving Food Package IV may be issued lower fat milk tailored to their nutritional needs based on assessment of the CPA.



Under food package IV, the CPA may determine the need for lower fat milks based on an individual nutrition assessment including weight, height, BMI and growth pattern; family history, and current dietary practices. Risk factor 114 (Overweight or at risk of Overweight) may indicate that lower fat milk could be prescribed. Children aged 12-23 months may be prescribed 2%, or 1% or skim milk, depending on CPA assessment. Assessment must be documented in the SOAP note.

Prescription of lower fat milks is not appropriate for children age 12-23 months who are underweight or at risk of becoming underweight.

Prescription of lower fat milks should occur only after a careful, documented assessment, and should be accompanied by appropriate education to the parents or care givers. Prescription of 1% or skim milk a 12 to 23-month-old child should occur only after careful assessment and consultation with the child's health care provider.

**Due to the medically fragile qualifying conditions of children age 12-23 months requiring Food Package III, medical documentation will be required for issuance of WIC-eligible formula and foods, including fat reduced milks. An RD will need to review and approve the ENPR and prescribe the package.**

### Implications for WIC Nutrition Services:

The WIC Program plays an important role in public health efforts to reduce the prevalence of obesity by actively identifying and enrolling infants and children who may be overweight or at risk of overweight in childhood and adolescence. When identifying this risk, it is important to communicate it in a way that is supportive, nonjudgmental, and with a careful choice of words to convey an empathetic attitude and to minimize embarrassment or harm to the child's self-esteem. In recognition of the importance of language, the 2007 American Medical Association expert committee report recommends the use of overweight and obese for risk assessment and documentation only and the use of more neutral terms (such as weight disproportionate to height, excess weight, BMI) when discussing with a child's caregiver.

BMI is calculated and plotted on a growth chart at each WIC certification. Growth is meant to be used as a screening tool, and comprises only one aspect of the overall growth assessment. A clinical assessment to determine if a child is at a healthy weight is more complex. Weight classification (derived from growth chart) should be integrated with the growth pattern, familial obesity, medical risks and dietary and physical activity habits to determine child's obesity risk.

A goal of childhood nutrition education is to help the child achieve recommended rates of growth and development. WIC staff can frame the discussion to make achieving normal growth a shared goal of the WIC Program and parent/caregiver. Studies have shown that the early childhood eating environment provides a great opportunity for preventative intervention. Parents and caregivers of toddlers may need education on recognition of satiety cues and other needs that lead to crying, other than feeding. Young children look upon their role models for



eating behaviors. Through client centered counseling, WIC staff can emphasize the importance of prevention and can assist families in making changes that improve parenting skills that promote healthy eating, and physical activity and healthy weight in children. Also, the foods provided by the WIC program are intended to address the supplemental needs of the

Program's target population and can be tailored to meet the needs of individual participants.

Beliefs about what is an attractive or healthy weight, the importance of physical activity, what foods are desirable or appropriate for parents to provide children, family mealtime routines, and many other lifestyle habits are influenced by different cultures, and should be considered during the nutrition assessment and counseling.

In addition, WIC staff can greatly assist families by providing referrals to medical providers and other services in the community.

### REFERENCE:

Federal Regulations: Part II, Department of Agriculture, Food and Nutrition Services, 7CFR Part 246- Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages

Final Rule 7 CFR 246.

Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions to the WIC Food Packages, Food and Nutrition Service, USDA. Final Rule. Vol 79, No. 42  
Published March 4, 2014. In effect May 5, 2014. Implemented October 1, 2014

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)  
Subpart D- Participant Benefits- Supplemental Foods  
246.10(e)(4)(i) to 246.10(e)(7)(i)

Subpart e- Participant Benefits- Supplemental Foods  
246.10(b)(10))

American Academy of Pediatrics. Policy Statement: Lipid Screening and Cardiovascular Health in Childhood. Pediatrics Vol. 122 No. 1 July 2008, pp189-208

WIC Policy Memorandum #2024-1: Fiscal Year 2024 Cash-Value Voucher/Benefit Amounts;  
October 3, 2023

### DEFINITIONS:

**Cash Value Benefit** means a fixed-dollar amount electronic benefit transfer (EBT) card or other document which is used by a participant to obtain authorized fruits and vegetables. Cash Value Benefit is also known as cash-value voucher (CVV) when it pertains to checks or vouchers. Previously known as FVV - Fruit and vegetable voucher.





**Children** means persons who have had their first birthday but have not yet attained their fifth birthday.

**Infant:** A person who is 12 months old or younger. Once they turn 12 months, they are considered a child.

**Infant formula** means a food that meets the definition of an infant formula in section 201(z) of the Federal Food, Drug, and Cosmetic Act ([21 U.S.C. 321\(z\)](#)) and that meets the requirements for an infant formula under section 412 of the Federal Food, Drug, and Cosmetic Act ([21 U.S.C. 350a](#)) and the regulations at [21 CFR parts 106](#) and [107](#).

**Nutrition education** means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Supplemental foods** means those foods containing nutrients determined by nutritional research to be lacking in the diets of pregnant, breastfeeding and postpartum women, infants, and children, and foods that promote the health of the population served by the WIC Program as indicated by relevant nutrition science, public health concerns, and cultural eating patterns, as prescribed by the Secretary in [§ 246.10](#).

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
06/06/2024	Reviewed; <b>updated Cash Value Benefit value</b>

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is





## Alaska WIC Policy & Procedure Manual



the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 300 Nutrition and Breastfeeding Services

#### Policy: 358 Food Package V: Pregnant and Partially Breastfeeding

Effective Date: 06/01/2018

##### PURPOSE:

To describe Food Package V, the food package type that may be prescribed to WIC pregnant women, and partially breastfeeding women up to one year postpartum.

##### POLICY: 358 Food Package V: Pregnant and Partially Breastfeeding

This food package is designed for issuance to women participants with singleton pregnancies who do not have a condition qualifying them to receive Food Package III. This food package is also designed for issuance to breastfeeding women participants, up to 1 year postpartum, who do not have a condition qualifying them to receive Food Package III and whose partially (mostly) breastfed infant receive formula from WIC in amounts that do not exceed the maximum allowances.

Food Item	Amount
Milk	5.5 gallons
Eggs	1 dozen
Cereal	36 oz
Whole grains	1 lb
Dry beans and/or peanut butter	1 lb (64 oz canned) and 18 oz
Juice, single strength	144 oz
Cash Value Benefit	\$27

Cheese, low-fat or non-fat yogurt, or calcium-set tofu may be substituted for milk at the rate of 1 pound of cheese per 3 quarts of milk; 1 pound of tofu per 1 quart of milk; or 32 oz of low-fat or non-fat yogurt per one quart of milk. A maximum of 4 quarts of milk may be substituted in this manner in Food Package V; however, no more than 1 pound of cheese may be substituted for milk. No more than 32 oz of yogurt may be substituted for milk.

For women, soy-based beverage may be substituted for milk at the rate of 1 quart of soy-based beverage for 1 quart of milk, up to the maximum monthly allowance of milk.

Processed (canned, frozen, dried) fruits and vegetables may be substituted for fresh fruits and vegetables. Dried fruit and dried vegetables are not authorized.



Whole wheat and or whole grain bread must be authorized. In addition, brown rice, bulgur, oatmeal, whole grain barely, soft corn tortillas, whole wheat pasta, or whole wheat tortillas may be authorized on an equal weight basis.

Canned legumes may be substituted for dried legumes at the rate of 64 oz canned for 1 lb of dried beans. Under food Packages V and VII, two additional combinations of dry canned beans/peas are authorized: 1 lb dry and 64 oz canned beans/peas and (no peanut butter); or 2 lb. Dry or 128 oz. canned beans/peas (and no peanut butter) or 36 oz peanut butter (and no beans).

### REFERENCE:

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)  
Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

Federal Regulations: 7CFR Ch. II  
Subpart D- Participant Benefits- Supplemental Foods  
○ 246.10(b) (10)

WIC Policy Memorandum #2024-1: Fiscal Year 2024 Cash-Value Voucher/Benefit Amounts; October 3, 2023

### DEFINITIONS:

**Cash Value Benefit** means a fixed-dollar amount electronic benefit transfer (EBT) card or other document which is used by a participant to obtain authorized fruits and vegetables. Cash Value Benefit is also known as cash-value voucher (CVV) when it pertains to checks or vouchers. Previously known as FVV - Fruit and vegetable voucher.

**Breastfeeding:** means the practice of feeding human milk/breastmilk to an infant on average of at least once a day.

**Children:** means persons who have had their first birthday but have not yet attained their fifth birthday.

**Infant:** A person who is 12 months old or younger. Once they turn 12 months, they are considered a child.

**Infant formula:** means a food that meets the definition of an infant formula in section 201(z) of the Federal Food, Drug, and Cosmetic Act ([21 U.S.C. 321\(z\)](#)) and that meets the requirements for an infant formula under section 412 of the Federal Food, Drug, and Cosmetic Act ([21 U.S.C. 350a](#)) and the regulations at [21 CFR parts 106](#) and [107](#).

**Nutrition education:** means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits,



and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Post-partum woman:** means individual up to six months after termination of pregnancy.

**Post-partum non-breastfeeding woman:** A woman after termination of pregnancy (live birth, stillbirth, miscarriage at any state of pregnancy, or abortion) who is not breastfeeding their infant.

**Pregnant women** means women determined to have one or more embryos or fetuses in utero.

**Supplemental foods** means those foods containing nutrients determined by nutritional research to be lacking in the diets of pregnant, breastfeeding and postpartum women, infants, and children, and foods that promote the health of the population served by the WIC Program as indicated by relevant nutrition science, public health concerns, and cultural eating patterns, as prescribed by the Secretary in [§ 246.10](#).

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
06/06/2024	Reviewed; updated Cash Value Benefit value

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 300 Nutrition and Breastfeeding Services**



**Policy: 359 Food Package VI: Postpartum Women**

Effective Date: 06/01/2018

**PURPOSE:**

To describe Food Package VI, the food package type that may be prescribed to WIC postpartum women (up to 6 months postpartum).

**POLICY: 359 Food Package VI: Postpartum Women**

This food package is designed for issuance to women up to 6 months postpartum who are not breastfeeding their infants, and to breastfeeding women ('some breastfeeding') up to 6 months postpartum whose participating infant receives more than the maximum amount of formula allowed for partially breastfed infants.

Food Item	Amount
Milk	4 gallons
Eggs	1 dozen
Cereal	36 oz
Dry beans and/or peanut butter	1 lb (64 oz canned) or 18 oz
Juice, single strength	96 oz
Cash Value Benefit	\$47

Cheese, low-fat or non-fat yogurt, or calcium-set tofu may be substituted for milk at the rate of 1 pound of cheese per 3 quarts of milk; 32 oz of yogurt for one quart of milk; or 1 pound of tofu per 1 quart of milk. A maximum of 4 quarts of milk can be substituted in this manner in Food Packages VI; however no more than 1 pound of cheese may be substituted for milk. No more than 32 oz of yogurt may be substituted for milk.

Additional amounts of tofu may be substituted up to the maximum allowances for fluid milk.

Soy-based beverage may be substituted for milk at the rate of 1 quart of soy-based beverage for 1 quart of milk up to the total monthly allowance for milk.

Whole wheat and or whole grain bread must be authorized. In addition, brown rice, bulgur, oatmeal, whole grain barely, soft corn tortillas, whole wheat pasta, or whole wheat tortillas



may be authorized on an equal weight basis.

canned and frozen fruits and vegetables may be substituted for fresh fruits and vegetables.  
Dried fruit and dried vegetables are not authorized.

Canned legumes may be substituted for dried legumes at the rate of 64 oz. canned for 1 lb. of dried beans.

#### REFERENCE:

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)

- Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

WIC Policy Memorandum #2024-1: Fiscal Year 2024 Cash-Value Voucher/Benefit Amounts;  
October 3, 2023

#### DEFINITIONS:

**Cash Value Benefit** means a fixed-dollar amount electronic benefit transfer (EBT) card or other document which is used by a participant to obtain authorized fruits and vegetables. Cash Value Benefit is also known as cash-value voucher (CVV) when it pertains to checks or vouchers. Previously known as FVV - Fruit and vegetable voucher.

**Breastfeeding** means the practice of feeding human milk/breastmilk to an infant on average of at least once a day.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Post-partum woman:** means individual up to six months after termination of pregnancy.

**Post-partum non-breastfeeding woman:** A woman after termination of pregnancy (live birth, stillbirth, miscarriage at any state of pregnancy, or abortion) who is not breastfeeding their infant.

**Pregnant women** means women determined to have one or more embryos or fetuses in utero.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
02/06/2024	Reviewed <b>updated Cash Value Benefit value</b>



## Alaska WIC Policy & Procedure Manual



**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 300 Nutrition and Breastfeeding Services**

**Policy: 360 Food Package VII: Fully Breastfeeding Women**

Effective Date: 06/01/2018

**PURPOSE:**

To describe, Food Package VII, the food package type that may be prescribed to WIC fully breastfeeding women up to 1 year postpartum, pregnant women fully or partially (mostly) breastfeeding, and women pregnant with multiple fetuses

**POLICY: 360 Food Package VII: Fully breastfeeding women (up to 1 year postpartum), pregnant women fully or partially (mostly) breastfeeding, and women pregnant with multiple fetuses.**

This food package is designed for issuance to:

- breastfeeding women up to 1 year postpartum whose infants do not receive infant formula from WIC (these women are assumed to be fully breastfeeding their infants)
- women participants pregnant with two or more fetuses,
- women participants fully or partially (mostly) breastfeeding multiple infants
- pregnant women who are fully or partially (mostly) breastfeeding an infant

Women participants fully breastfeeding multiple infants receive 1.5 times the supplemental foods in this package.

Food Item	Amount
Milk	6 gallons
Eggs	2 dozen
Cereal	36 oz
Cheese	1 lb
Whole grains	1 lb
Dry beans and/or peanut butter	1 lb (64 oz canned) and 18 oz
Fish	30 oz
Juice, single strength	144 oz
Fruit and vegetable voucher	\$52

Cheese, low-fat or non-fat yogurt, or calcium-set tofu may be substituted for milk at the rate of 1 pound of cheese per 3 quarts of milk; 32 oz of yogurt per 1 quart of milk; or 1 pof milk. A maximum of 6 quarts of milk can be substituted in this manner in Food Package VII; therefore, no more than 2 pounds of cheese may be substituted for milk. With CPA assessment and





## Alaska WIC Policy & Procedure Manual



documentation, additional amounts of tofu may be substituted, up to the maximum allowances for fluid milk, in cases of lactose intolerance or other qualifying conditions.

Soy-based beverage may be substituted for milk at the rate of 1 quart of soy-based beverage for 1 quart of milk up to the total maximum monthly allowance of milk.

Whole wheat and or whole grain bread must be authorized. In addition, brown rice, bulgur, oatmeal, whole grain barely, soft corn tortillas, whole wheat pasta, or whole wheat tortillas may be authorized on an equal weight basis.

Processed (canned, frozen, dried) fruits and vegetables may be substituted for fresh fruits and vegetables.

Canned legumes may be substituted for dried legumes at the rate of 64 oz canned for 1 lb of dried beans. Under food Packages V and VII, two additional combinations of dry canned beans/peas are authorized: 1 lb dry and 64 oz. canned beans/peas and (no peanut butter); or 2 lb. Dry or 128 oz. canned beans/peas (and no peanut butter) or 36 oz peanut butter (and no beans).

A woman who has been receiving Food Package VII may wish to temporarily provide WIC infant formula for her infant (e.g., if she experiences temporary difficulties in breastfeeding or if she or her infant has a temporary medical condition for which breastfeeding is contraindicated). Under these circumstances, the woman could temporarily receive Food Package V, so that her infant could receive WIC infant formula. The Local Agency should provide participant counseling and support so that the woman can resume breastfeeding successfully. She should be counseled on the effects formula supplementation may have on her breastmilk production. The amount of formula should be tailored to the infant's nutritional needs.

Food Package VII may be prescribed after delivery and prior to the six-week postpartum assessment in order to begin providing the breastfeeding mother with the additional items contained in Food Package VII in a timely manner.

### REFERENCE:

Federal Regulations: Part II, Department of Agriculture, Food and Nutrition Services, 7CFR Part 246- Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages

- Final Food Rule 7 CFR 246
  - Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2014

WIC Policy Memorandum #2024-1: Fiscal Year 2024 Cash-Value Voucher/Benefit Amounts; October 3, 2023

### DEFINITIONS:



**Breastfeeding** means the practice of feeding human milk/breastmilk to an infant on average of at least once a day.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Post-partum women** means women up to six months after termination of pregnancy.

**Post-partum non-breastfeeding woman:** A woman after termination of pregnancy (live birth, stillbirth, miscarriage at any state of pregnancy, or abortion) who is not breastfeeding her infant.

**Pregnant women** means women determined to have one or more embryos or fetuses in utero.

**Supplemental foods** means those foods containing nutrients determined by nutritional research to be lacking in the diets of pregnant, breastfeeding and postpartum women, infants, and children, and foods that promote the health of the population served by the WIC Program as indicated by relevant nutrition science, public health concerns, and cultural eating patterns, as prescribed by the Secretary in [§ 246.10](#).

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
06/06/2024	Reviewed; <b>updated Cash Value Benefit value</b>

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services



Policy: 361 Food Packages: Homeless

Effective Date: 06/01/2018

### PURPOSE:

This policy outlines the specific food substitutions for specialized food packages provided to homeless WIC participants. This includes those without refrigeration or food preparation facilities, infants (0-12 months), children (1-4 years), and women with special dietary needs.

### POLICY: 361 Food Packages: Homeless

#### Homeless Food Packages

The Local Agency will provide food benefits for the purchase of supplemental foods that include options of individual servings-package sizes or other forms appropriate for individuals without refrigeration or access to food preparation facility.

#### Participants Residing in Temporary Shelters

Supplemental foods are not authorized for use in the preparation of meals served in a communal food service or while the participant is hospitalized on an in-patient basis. For WIC participants residing in some temporary shelters, nonresidential settings (e.g., child care facilities, day care homes, schools or other educational programs) and homeless facilities that meet the requirements of regulation 246.7(m)(l).

There are only four different foods possible in homeless participants.

- Hard-boiled eggs.
- Smaller sizes of ready-to-drink juice
- Baked beans
- Ready to feed formula

Substituting other protein foods for eggs (such as legumes or peanut butter) is not possible in the SPIRIT system.

WIC participants who have lost their normal place of residence due to disaster or eviction, or who are escaping from domestic violence, may be temporarily relocated to an emergency shelter or other temporary residence. Due to the nature of these shelters, cooking facilities, refrigeration, and acceptable storage areas may not be available. Special consideration must be given to the issuance of supplemental food packages. The types of supplemental foods prescribed must take into account the cooking and storage facilities available to the participant while residing in the temporary shelter. Although the aim of any food package prescription is to provide the supplemental foods required by the participant to best meet individual nutritional needs, some modifications in both the types and amounts of foods may be required in order to



## Alaska WIC Policy & Procedure Manual



assure that the supplemental foods can be safely stored and used.

In order to authorize a homeless food package, there must be documentation in the client's file of the following conditions:

- Participant is homeless (by self-report)
- The WIC food benefits will benefit the participant, not the homeless facility or institution
- WIC foods will not be used for communal feeding

In order to issue a Homeless Food Package, the CPA will need to document that the participant is homeless in the SPIRIT system.

On the demographics screen, check the "Homeless" box, select date verified and nighttime location.



## Alaska WIC Policy & Procedure Manual



See screenshot below:

PF - BIG LAKE BETTY RAVEN - 35 Years - WIC ID: 00096242 - HH ID: 00058385

File Participant Activities Certification Benefit Management Document Imaging Help

Certification History

Health Information Nutrition Education Referrals Income History Benefits History Appointments

Demographics Immunization HT/WT/Blood Food Prescription Risk Factors Nutrition Assessment

Last: RAVEN First: BIG LAKE BETTY MI Birth Date: 03/28/1981 Gender: Female

Address: 5932 TROUTMAN STREET WIC Category: Breastfeeding

City: ANCHORAGE State: AK ZIP: 99508-0000

County: ANCHORAGE BOROUGH PMI #

E-mail: NOPERSON@NOVALIDDOMAIN.GOV Initial Contact Address History Copy Demographics Race/Ethnicity

Mail

Same as Residence Address: 9930 JAY STREET City: ANCHORAGE State: AK ZIP: 99508-0000

Homeless Date Verified: 06/13/2016 Fixed Nighttime Location: FRIEND OR FAMILY HOMELESS SHELTER OTHER ID Proof: Driver's License

Residency Proof Reason Not Present

Telephone 1: 406-895-1136 Comment: REDACTED Present: Yes No

Telephone 2: 406-946-1368 Comment: Batch Issuance

Maiden Name Last: HALIBUT First: SOPHIE MI: N Migrant Living with Foster Parent(s)

Clinic Assigned: L STREET

6/13/2016 1:21 PM

- Hard boiled eggs are only allowed if Issued in the food package prescription.

Review with participant (or caregiver) any prescribed foods that vary from the regular food list (juice, eggs, beans), and let them know they can have smaller containers of juice, hard boiled eggs, and baked beans. Participants should scan foods with the WIC shopper app to make sure they are on the approved foods list.

### Homeless Food Package I: Infants 0 - 5 Months

If at all possible, breastfeeding should be encouraged as the easiest and safest way to feed the infant, given the possible lack of refrigeration and facilities for the proper sterilization of bottles that may exist at the temporary shelters. For those infants to be formula fed, powdered formula should be prescribed. The parent or guardian must be instructed to prepare only one



bottle of formula at a time due to the lack of refrigeration.

In the event that both refrigeration and a means by which bottles and water can be properly sterilized are lacking, ready-to-feed (RTF) formula may be prescribed. Special education must be provided to the parent and/or caretaker to discard all formula remaining in the bottle at the end of each feeding due to the potential for the rapid growth of harmful pathogens. Also discuss how the remaining formula in the RTF container can be safely stored.

Discuss food safety as it applies to the circumstances.

#### Homeless Food Package II: Infants 6-12 Months

In addition to formula recommendations listed above in (Homeless Food Packages Infants 0 - 5 Months - Food Package I), clients should be counseled to discard unfinished open jars of infant food.

Discuss food safety as it applies to the circumstances.

#### Homeless Food Packages III: Children/Women with Special Dietary Needs

Powdered formula should be issued whenever possible, if the type of formula prescribed by the health care provider is available in a powdered form. Refer to the ENPR form for formulas that can be prescribed by a health care provider with prescriptive authority. Only certain formulas are available by prescription as ready to feed. Please contact the State Nutrition Coordinator for more information.

#### Homeless Food Packages IV: Children 1 to 4 Years

Powdered, evaporated, or UHT milk are available; evaporated milk must be specifically prescribed in SPIRIT. If proper refrigeration is lacking, fresh eggs and fluid and evaporated milk should be excluded from the food package. The Authorized Representative should be instructed on how to use powdered milk and the importance of preparing one glass at a time.

Hard boiled eggs can be substituted for fresh eggs.

If facilities are not available for cooking, or if dry beans or peas would not be well accepted by the participant with cooking facilities, the purchase of canned beans should be recommended in place of dry beans or peas. Baked beans are authorized without added fats, oils or meat as purchased.

Cereal and juice are still part of this package. Smaller sizes of juice needing no dilution are allowed for participants receiving homeless checks.

Canned fruits and vegetables may be substituted for fresh fruits and vegetables.



### Homeless Food Packages for Women

Powdered, evaporated, or UHT milk are available; evaporated milk must be specifically prescribed in SPIRIT. If proper refrigeration is lacking, fresh eggs and fluid and evaporated milk should be excluded from the food package. The Authorized Representative should be instructed on how to use powdered milk and the importance of preparing one glass at a time.

Homeless packages include small packages of hard-boiled eggs in place of fresh eggs, and baked beans as a legume option.

If a hot plate is not available for cooking, or if dry beans or peas would not be well accepted by the participant with cooking facilities, the purchase of peanut butter should be recommended in place of dry beans or peas. Canned beans or baked beans can be purchased.

Cereal and juice are still part of this package. Smaller sizes of juice needing no dilution are allowed for participants receiving homeless food benefits.

Canned fruits and vegetables may be substituted for fresh fruits and vegetables.

### Juice:

Non-refrigerated 100% juice:

Please check the approved product list or use the WICShopper app to scan smaller sizes of 100% juice to determine if it is authorized for purchase.

### REFERENCE:

Federal Regulations: Part II, Department of Agriculture, Food and Nutrition Services, 7CFR Part 246- Special Supplemental Nutrition Program for Women, Infants and Children

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)

Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

Revisions in the WIC Food Packages; Final Rule. Table 4, pp. 12298-99, Dated March 4, 2014

### DEFINITIONS:

**Breastfeeding** means the practice of feeding human milk/breastmilk to an infant on average of at least once a day.

**Children** means persons who have had their first birthday but have not yet attained their fifth birthday.

**Homeless facility** means the following types of facilities which provide meal service. A supervised publicly or privately operated shelter (including a welfare hotel or congregate shelter) designed to provide temporary living accommodations; a facility that provides a



temporary residence for individuals intended to be institutionalized; or a public or private place not designed for, or normally used as, a regular sleeping accommodation for human beings.

**Homeless individual** means a woman, infant or child:

- (a) Who lacks a fixed and regular nighttime residence; or
- (b) Whose primary nighttime residence is:
  - (1) A supervised publicly or privately-operated shelter (including a welfare hotel, a congregate shelter, or a shelter for victims of domestic violence) designated to provide temporary living accommodation;
  - (2) An institution that provides a temporary residence for individuals intended to be institutionalized;
  - (3) A temporary accommodation of not more than 365 days in the residence of another individual; or
  - (4) A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

**Infant:** A person who is 12 months old or younger. Once they turn 12 months, they are considered a child.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Special situation:** When a participant is unable to provide one of the required proofs because something in their life makes it unlikely that they will be able to obtain proof without it causing a barrier to receiving WIC services. Examples of special situations include being a disaster victim, being homeless, working for cash, having no source of income, or being a migrant.

**Supplemental foods** means those foods containing nutrients determined by nutritional research to be lacking in the diets of pregnant, breastfeeding and postpartum women, infants, and children, and foods that promote the health of the population served by the WIC Program as indicated by relevant nutrition science, public health concerns, and cultural eating patterns, as prescribed by the Secretary in § 246.10.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in





## Alaska WIC Policy & Procedure Manual



draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A "draft" watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services



Policy: 362 Food Package: Incarcerated Women

Effective Date: 06/01/2018

### PURPOSE:

To describe food substitutions used in creation of specialized food packages for issuance to incarcerated WIC participants.

### POLICY: 362 Food Package: Incarcerated Women

It is the policy of the Alaska State WIC Program to provide WIC outreach materials to incarcerated women. These will be provided to each institution's nursing office for distribution to inmates. Outreach materials will include WIC Local Agency addresses and phone numbers to facilitate WIC certification after women are released.

Eligible infants and children of incarcerated women brought to WIC by their current legal guardian or foster parent will receive standard WIC food packages.

Incarcerated pregnant or postpartum women will not receive WIC food benefits because inmates are provided institutional meals and would not routinely have individual kitchen privileges.

### REFERENCE:

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)

- Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

### DEFINITIONS:

**Children** means persons who have had their first birthday but have not yet attained their fifth birthday.

**Infant:** A person who is 12 months old or younger. Once they turn 12 months, they are considered a child.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

### POLICY HISTORY:



## Alaska WIC Policy & Procedure Manual



Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services



### Policy: 363 Food Package Tailoring - Food Items

Effective Date: 06/01/2018

#### PURPOSE:

- To describe the process of tailoring WIC food packages to better meet the needs of a WIC participant.
- To describe when tailoring a WIC food package is appropriate and provide examples of tailoring.

#### POLICY: 363 Food Package Tailoring - Food Items

- Food package tailoring is for nutrition reasons and preferences to better meet participants' needs.
- Food package tailoring can also be made to accommodate participant cultural preferences.
- Before tailoring a food package, a thorough assessment of the participant's supplemental nutrition needs must be made. This also entails making changes to food types (cow's milk vs soy milk), to food forms (fresh vs evaporated milk), and to quantities of WIC foods (partially breastfed vs fully formula fed infants).
- The State/Local Agency must make available the maximum monthly allowances of authorized supplemental foods from each WIC food category prescribed in the applicable food package unless one or more reasons for food package tailoring apply.
- Exceptions to regular food packages should be accommodated based on nutrition risk assessment.
- The CPA will document in the participant's SPIRIT record all special conditions that require tailoring of the food package and issuance of special products.

#### Reasons for Food Package Tailoring

Tailoring may be done for the following reasons:

- To reduce quantities of foods for individual participants, based on their nutritional needs.
- To accommodate participant preferences (e.g., a participant is given peanut butter instead of beans, or quantities of foods are reduced due to participant choice).
- To accommodate household conditions (e.g., for the participant who does not have a refrigerator, powdered or UHT milk may be prescribed).
- Homelessness
- To accommodate participant food intolerances or restrictions (e.g., provide soy beverage, and/or tofu and less or instead of milk for symptomatic lactose intolerance/milk allergies).



### Tailoring Examples

- Determine the types and amounts of foods a participant with special dietary needs should receive.
- Determine for breastfed infants if supplemental feeds of formula are needed. Formula for supplementation may also be prescribed at the mother's request. **Formula supplementation should not be routinely offered.**

With any food prescription tailoring, documentation in the SOAP Notes section of the SPIRIT system must include why the tailoring was made.

### REFERENCE:

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)  
Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

Federal Regulations: 7CFR

- 246 IV (B) (1)

### DEFINITIONS:

**Competent Professional Authority (CPA):** An individual of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and counseling, and prescribe supplemental foods.

**Nutritional risk** means:

- (a) Detrimental or abnormal nutritional conditions detectable by biochemical or anthropometric measurements;
- (b) Other documented nutritionally related medical conditions;
- (c) Dietary deficiencies that impair or endanger health;
- (d) Conditions that directly affect the nutritional health of a person, including alcoholism or drug abuse; or
- (e) Conditions that predispose persons to inadequate nutritional patterns or nutritionally related medical conditions, including, but not limited to, homelessness and migrancy.

**Nutrition tailoring:** is a process of modifying food packages to better meet the supplemental nutrition needs of individual participants.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

**Supplemental foods** means those foods containing nutrients determined by nutritional research to be lacking in the diets of pregnant, breastfeeding and postpartum women, infants, and children, and foods that promote the health of the population served by the WIC Program as indicated by relevant nutrition science, public health concerns, and cultural eating patterns,



## Alaska WIC Policy & Procedure Manual



as prescribed by the Secretary in § 246.10.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services



### Policy: 364 – Loss of Community Water Supply

Effective Date: 05/01/2016

#### PURPOSE:

To describe when alternate food packages will be used in cases of unsafe water in a community.

#### POLICY: 364 – Loss of Community Water Supply

Drinking water sources in Alaska are varied, depending on the community. Water can contain either contaminants or microorganisms that make it unsafe to drink.

The State of Alaska Department of Environmental Health Drinking Water Program monitors water quality throughout the state.

The safety of available water is a concern for the Alaska WIC Program, since several WIC foods require a safe source of drinking water for preparation.

The Alaska WIC Program has food packages that require no or very limited water in preparation for communities that have unsafe water. WIC cannot prescribe water as a food benefit; however, the CPA is permitted to issue foods like juice and milk in forms that require no dilution. For Food packages I, II and III, WIC ready-to-feed formulas may be authorized when the competent professional authority determines and documents in the participant's SPIRIT record. Refer to Policy 369: Issuance of Ready-To-Feed formula.

Local agency staff concerned about water in a community need to contact either the State of Alaska Clinic Coordinator or the State of Alaska Nutrition Coordinator and confirm that packages requiring little or no water would be appropriate for a community before prescribing.

Breastfeeding should be encouraged for infants in these communities. Please contact the state Breastfeeding Coordinator before prescribing formula to an infant in a community with unsafe drinking water.

The World Health Organization (WHO) and the Centers For Disease Control and Prevention (CDC) recommends boiling all water that is used to prepare infant formula.

#### REFERENCE:

Alaska State Department of Environmental Health, Drinking Water Program



## Alaska WIC Policy & Procedure Manual



### CROSS REFERENCE:

369: Issuance of Ready-To-Feed formula

### DEFINITIONS:

**Breastfeeding** means the practice of feeding human milk/breastmilk to an infant on average of at least once a day.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services



### Policy: 365 Milk and Milk Substitutions

Effective Date: 06/01/2018

#### PURPOSE:

To summarize allowed substitutions of dry and evaporated milk, for fluid milk in WIC food packages.

#### POLICY: 365 Milk and Milk Substitutions

##### Milk Substitutions

Federal regulations permit the substitution of dry and evaporated forms of milk for fresh fluid milks in WIC food packages. When a participant is prescribed fresh milk, they can purchase their choice of fresh, UHT or dry milk.

Evaporated milk needs to be specifically prescribed because the size does not divide evenly into a gallon.

##### Dry Milk Reconstitution Table

Dry milk box sizes	Reconstitutes to quarts of fluid milk
9.6 ounce dry milk	3 quarts of fluid milk
25.6 ounce dry milk	8 quarts of fluid milk
32 ounce dry milk	10 quarts fluid milk

##### Reconstituted Evaporated Milk Amounts

(4) 12-ounce cans evaporated milk	3 quarts of milk
(8) 12-ounce can evaporated milk	6 quarts of milk
(12) 12-ounce can evaporated milk	9 quarts of milk
(16) 12-ounce can evaporated milk	12 quarts of milk

Evaporated milks are substituted at the rate of 12 fluid ounces of evaporated milk, which, when water is added, equals 24 oz of milk. Use the milk calculator in SPIRIT to prescribe the maximum



amount of milk allowed.

### Cheese, Soy Beverage and Tofu as Milk Substitution

*For children:* cheese may be substituted for milk at the rate of 1 pound of cheese per 3 quarts of milk. No more than 1 pound of cheese may be substituted for milk.

*For women:* cheese or calcium-set tofu may be substituted for milk at the rate of 1 pound of cheese per 3 quarts of milk or 1 pound of tofu per 1 quart of milk. A maximum of 4 quarts of milk can be substituted in this manner. For Food Package VII, no more than 2 pounds of cheese may be substituted for milk.

For women, soy-based beverages may be substituted for milk at the rate of 1 quart of soy-based beverage for 1 quart of milk up to the total maximum allowance of milk.

Additional amounts of tofu may be substituted, up to the maximum allowances for fluid milk. Such determinations may be made for situations including milk allergy, lactose intolerance, and vegan diets. CPA assessment must be documented in the SOAP note.

*For children:* soy-based beverage and calcium-set tofu may be substituted for milk only with assessment by WIC recognized medical authority, including a WICCPA or RD, and a documented determination of need for tofu and soy-based beverage as substitutes for milk. Such determination must be based on individual nutritional assessment, in consultation with the participant's health care provider, if appropriate, and included in the SOAP note.

For children receiving Food Package IV, soy beverage may be substituted on a quart for quart basis up to the total maximum allowance of milk. Tofu may be substituted for milk, with CPA or RD assessment, for children in Food Package IV at the rate of 1 pound of tofu per 1 quart of milk up to the total maximum allowance of milk.

### REFERENCE:

Federal Regulations Final Food Rule, 7 CFR 246.10(e)

Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

### DEFINITIONS:

**Competent Professional Authority (CPA):** An individual of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and counseling, and prescribe supplemental foods.

**Food package:** is the maximum amount and type of food which can be prescribed for a single participant per 28-to-31-day period.



**Nutritional risk** means:

- (a) Detrimental or abnormal nutritional conditions detectable by biochemical or anthropometric measurements;
- (b) Other documented nutritionally related medical conditions;
- (c) Dietary deficiencies that impair or endanger health;
- (d) Conditions that directly affect the nutritional health of a person, including alcoholism or drug abuse; or
- (e) Conditions that predispose persons to inadequate nutritional patterns or nutritionally related medical conditions, including, but not limited to, homelessness and migrancy.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

**Supplemental foods** means those foods containing nutrients determined by nutritional research to be lacking in the diets of pregnant, breastfeeding and postpartum women, infants, and children, and foods that promote the health of the population served by the WIC Program as indicated by relevant nutrition science, public health concerns, and cultural eating patterns, as prescribed by the Secretary in § 246.10.

**POLICY HISTORY:**

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 300 Nutrition and Breastfeeding Services**



**Policy: 366 Authorized Food: WIC Food List Criteria**

Effective Date: 06/01/2018

**PURPOSE:**

To provide a list of WIC approved foods including food types, sizes and brands that may be purchased with WIC food benefits at an approved WIC vendor.

**Policy: 366 Authorized Food: WIC Food List Criteria**

**WIC Food List**

The Alaska WIC Food List can be found at: <https://health.alaska.gov/dpa/Pages/nutri/wic/approved-foods.aspx> . Specifications are detailed below.

*Comments in italics apply to foods and food packages for homeless WIC participants.*

❖ *Canned Fish-*

For exclusively breastfeeding women and pregnant or partially breastfeeding women with multiple fetuses or infants. Tuna must meet light tuna standard of identity (SOI) 21 CFR 160.190)); salmon must meet SOI 21 CFR 161.170)).

Participants to choose type of fish at store
30 oz. total
Combinations to add up to 30 oz.=
e.g. 6- 5 oz. cans, 5-6 oz. cans, 8 3.75 oz. cans, 4-7.5 oz. cans, etc.
May include bones and skin
May be regular or low in sodium
Any eligible brand. Flavorings are not allowed for fish other than sardines.

◆ **Tuna**

<b>Authorized</b>	<b>Not allowed</b>
Plain only	No pouches
Minimum 5 oz	No Albacore, King Mackerel or white tuna
Canned only	No Organic



## Alaska WIC Policy & Procedure Manual



Authorized	Not allowed
	No added flavoring

### ◆ Pink Salmon

14.75 oz, 7.5 oz, and 5-6 oz cans	
Canned Only	

### ◆ Sardines

Authorized
Water or oil packed
15 oz can
Added flavors allowed
Canned only

### ◆ Mackerel

Jack, Atlantic, or Pacific Chub are allowed.	
<b>King Mackerel is not allowed.</b>	

### ❖ Breakfast Cereals-

Breakfast cereals as defined by FDA in 21 CFR 170.3(n)(4) for ready-to-eat and instant and regular hot cereals. Must contain a minimum of 28 mg iron per 100 g dry cereal. Must contain  $\leq 21.2$  g added sugars per 100 g dry cereal ( $\leq 6$  g per dry oz). At least 75% of the cereals authorized on a State WIC Office food list must have whole grain as the primary ingredient by weight AND meet labeling requirements for making a health claim as a “whole grain food with moderate fat content”:

1. Contain a minimum of 75% whole grains (using dietary fiber as the indicator);
2. Meet the regulatory definitions for “low saturated fat” at 21 CFR 101.62 ( $\leq 1$  g saturated fat per RACC) and “low cholesterol” ( $\leq 20$  mg cholesterol per RACC);
3. Bear quantitative trans fat labeling; and
4. Contain  $\leq 6.5$  g total fat per RACC and  $\leq 0.5$  g trans fat per RACC.

Cold cereals and hot cereals are authorized for food packages.

Fortification: Fortification is permissible, but not required, of any number of added nutrients up to and including, but not exceeding 100 percent of the RDA for that nutrient.



## Alaska WIC Policy & Procedure Manual



Preservatives: Only those recognized as safe in the Food and Drug Administration's GRAS (Generally Recognized As Safe) list will be authorized.

Sodium: Less than 350 mg. of sodium per ounce serving. (This level equals 17.5 percent of a 2,000 mg. sodium diet.)

Fiber: The National Cancer Institute Guidelines for fiber will be followed. A minimum of approximately 50 percent of the authorized cereals will be rich or moderately rich sources of food fiber according to the National Cancer Institute Guidelines.

Packaging: Cereal must be prepackaged; no bulk cereals are authorized. No single serving containers are authorized except for hot cereals: Quaker Instant Oatmeal and Cream of Wheat.

Selections will be made based on the specific standards listed above. If more than the maximum number of cereals meets the standards, selection will be made from those with the lowest cost.

Authorized	Not allowed
Boxes and bags allowed	No single serving boxes or packets except Quaker Instant Oatmeal & Cream of Wheat
Minimum package size is 12 oz for cold cereal	No artificial colors and flavors
Minimum package size is 11.8 oz for hot cereal	

### ❖ Cheese -

Domestic cheese made from 100 percent pasteurized milk. Must conform to FDA standard of identity (21 CFR Part 133); Monterey Jack, Colby, natural Cheddar, Swiss, Brick, Muenster, Provolone, part-skim or whole Mozzarella, pasteurized processed American, or blends of any of these cheeses are authorized.

Cheeses must be domestic cheese only. Brick cheese is authorized. No variety pack cheeses. No combination packages are authorized. For example, a single combination package of one pound cheddar cheese and one pound Monterey Jack is not authorized.

Authorized	Not allowed
8 or 16 oz packages	No Tillamook varieties due to additives: medium, sharp, special reserve, extra sharp, vintage white medium, and vintage white sharp cheddars and swiss.



## Alaska WIC Policy & Procedure Manual



Authorized	Not allowed
Pasteurized processed american, brick, natural cheddar, colby, monterey jack, mozzarella: part skim or whole, muenster, provolone, swiss	Unpasteurized cheeses
Blends of approved cheeses must conform to FDA standard of identity at 21 CFR Par 133	Cheese food, product, or spread; shredded, grated, string, sharp or extra sharp, imported, deli cut, organic, soy, goat, or raw
Low, free, reduced, less or light in sodium, fat or cholesterol	Cheese with flavorings or added ingredients
Domestic cheese only	No Variety pack cheeses, no combination packages

### ❖ *Dried and Canned Beans, Peas and other Legumes-*

Any type of mature dry beans, peas, or lentils in dry-packaged or canned forms. Examples include but are not limited to black beans (“turtle beans”), black-eyed peas (cowpeas of the black-eyed variety, “cow beans”), garbanzo beans (chickpeas), great northern beans, kidney beans, lima beans (“butter beans”), navy beans, pinto beans, soybeans, split peas, and lentils. All categories exclude soups. May not contain added sugars, fats, oils or meat as purchased. Minimal sugar added for processing such as kidney beans allowed. Canned legumes may be regular or lower in sodium content.

Packaging: Only one pound pre-packaged units of dried beans, peas or lentils are authorized. No bulk dry beans may be purchased.

Canned legumes can be substituted for dry legumes. 64 oz. canned legumes can be substituted for 1 # dry. The following canned mature legumes are not authorized: soups; immature varieties of legumes, such as those used in canned green peas, green beans, snap beans, orange beans, and wax beans; baked beans with meat; e.g., beans and franks; and beans containing added sugars (*with the exception of baked beans which may include sugar*), fats, meat, or oils. *Baked beans may be provided for participants with limited cooking facilities or homeless.*

### ❖ *Eggs*

*\*Hard boiled eggs, where readily available for purchase in small quantities, may be provided for homeless participants.*

Authorized	Not allowed
Fresh shell domestic hens' eggs or dried eggs mix	



## Alaska WIC Policy & Procedure Manual



Authorized	Not allowed
(must conform to FDA standard of identity in 21 CFR 160.105).	
Organic eggs are allowable if they meet other criteria.	

### ❖ *Fruits & Vegetables: Fresh, Canned, or Frozen*

Each WIC-approved vendor must stock at least two varieties of fruits and two varieties of vegetables.

Participants can pay additional amount above the value of the Cash Value Benefit.

No change can be given for lesser purchases.

Any container is allowed for canned or frozen fruits/vegetables.

### ◆ *Fresh Fruit and Vegetables:*

Authorized	Not allowed
Any variety or combination without added sugars; whole or cut, bagged salads and vegetables, sweet potatoes and yams, squash such as acorn, butternut, Hubbard, kabocha, etc.	Nothing sold in soil, i.e transplants
Any type of dried fruits without added sugars, fats, oils, or salt (i.e., sodium). Fresh herbs, cut at the root or with the root intact	
Organic fresh fruits and vegetables are WIC-approved for purchase.	

### ◆ *Canned Fruits:*

**Allowed:** Any variety of canned fruits (must conform to FDA standard of identity (21 CFR part 145); including applesauce, juice pack or water pack without added sugars, fats, oils, or salt (i.e. sodium). Natural or unsweetened applesauce. Any plain fruit or fruit mixture without added sugar. Any type of dried vegetable without added sugars, fats, oils, or salt (i.e., sodium). Organic canned fruits are WIC-approved for purchase.

### ◆ *Canned Vegetables:*

**Allowed:** Any variety/brand and container size. Sweet potatoes and yams without added sugar or syrup. Regular or low sodium. Fruit and vegetable mixture (any variety). No added fats or oils; or artificial sweetener or flavors enhanced with herbs. Organic canned vegetables are WIC-approved for purchase.





## Alaska WIC Policy & Procedure Manual



### ◆ Frozen Fruits:

Allowed: Any variety/brand without added sugar, any size container, fruit mixture.  
Organic frozen fruits are WIC-approved for purchase.

### ◆ Frozen Vegetables:

**Allowed:** Any variety/brand, any size container, or mixture of vegetables (any variety); any kind of beans such as green beans, wax beans, black-eyed peas, lentils, black beans or pinto beans; sweet potatoes or yams without added sugar or syrup. Organic frozen vegetables are WIC-approved for purchase.

### **Not allowed:**

- Spices and dried herbs.
- Edible blossoms and flowers, e.g., squash blossoms (broccoli, cauliflower and artichokes **are** allowed).
- Seeds.
- Potted plants with vegetables, fruits, or herbs.
- Fresh fruits and/or vegetables packaged with dips, sauces, or glazes.
- Creamed vegetables or vegetables with added sauces.
- Mixed vegetables containing noodles, nuts or sauce packets.
- Vegetable-grain (pasta or rice) mixtures.
- Fruit-nut mixtures.
- Breaded vegetables.
- Fruits and vegetables for purchase on salad bars.
- Peanuts or other nuts.
- Ornamental and decorative fruits and vegetables such as chili peppers on a string; garlic on a string.
- Gourds; painted pumpkins; fruit baskets.
- Decorative blossoms and flowers.
- Foods containing fruits such as blueberry muffins and other baked goods.
- Home-canned and home-preserved fruits and vegetables.
- Creamed or sauced vegetables.
- Vegetable-grain (pasta or rice) mixtures.
- Fruit-nut mixtures.
- Breaded vegetables.
- Fruits and vegetables for purchase on salad bars.
- Peanuts.
- Ornamental and decorative fruits -such as chili peppers on a string; garlic on a string; gourds; painted pumpkins; fruit baskets and party vegetable trays; and items such as blueberry muffins and other baked goods, catsup or other condiments; pickled vegetables, olives; soups; juices; and fruit leathers and fruit roll-ups.
- Mature legumes (dry beans and peas) and juices are provided as separate food WIC categories and are not authorized under the fruit and vegetable category.



❖ *Infant Cereal*

Infant cereals must contain a minimum of 45 mg of iron per 100 g of dry cereal.

Infant cereals containing rice, added fruit or single serving boxes or jars, additives such as DHA/ARA, infant formula, milk, fruit, or other non-cereal ingredients are not allowed.

❖ *Infant Supplemental Foods*

Authorized	Not allowed
Any variety of single ingredient commercial infant food fruits or vegetables without added sugars, starches, or salt (i.e., sodium)	No mixtures with cereal or infant food desserts (e.g., peach cobbler) are not authorized
Texture may range from strained through diced.	No infant food combinations (e.g., meat and vegetables) or dinners (e.g., spaghetti and meatballs) are allowed.
Combinations of single ingredients (e.g. apple-banana, peas and carrots) are allowed.	

❖ *Juice*

Must be pasteurized 100% unsweetened fruit or vegetable juice. Fruit juice must conform to FDA standard of identity as appropriate (21 CFR part 146) and vegetable juice must conform as appropriate FDA standard of identity (21 CFR part 156). Must contain at least 30 mg of vitamin C per 100 mL of juice. Juice may be from concentrate, frozen, canned, or shelf-stable. Fruit punches, nectar, cocktails, juice mixes, fresh-squeezed juice, juices in cartons or unpasteurized bottles are not authorized. Combinations of single strength shelf stable and frozen concentrated juice may be purchased if the total volume does not exceed the amount prescribed. Sweeteners: No natural or artificial sweeteners added. No glass containers are authorized. Vegetable juice may be regular or lower in sodium.

◆ *Frozen Juice:*

Authorized	Not Allowed
11.5 to 12 oz. for women only	No natural or artificial sweeteners added
16 oz. for children only	No glass containers



## Alaska WIC Policy & Procedure Manual



### ◆ Shelf Stable Juices:

46 oz. cans for women only
64 oz. plastic bottles for children only

### ◆ Pourable Concentrate:

Authorized	Not allowed
Must be pasteurized, 100% unsweetened fruit or vegetable juice	Allowed for children under Food Package III.
11.5oz	

### ❖ Milk-

Cow's Milk must conform to FDA standard of identity for whole, reduced fat, low-fat, or non-fat milks (21 CFR 131.110). Must be pasteurized and contain at least 400 IU of vitamin D per quart (100 IU per cup) and 2000 IU of vitamin A per quart (500 IU per cup). May be flavored or unflavored. May be fluid, shelf-stable, evaporated (21 CFR 131.130), or dried (i.e., powder) (21 CFR 131.147).

Goat Milk is no longer an authorized Alaska WIC Program milk.

All authorized milks must confirm to FDA standards of identity for milk as defined by 21 CFR part 131 and meet WIC's requirements for vitamin fortification as stated above. Additional authorized milks include, but are not limited to: calcium-fortified, lactose-reduced and lactose free, acidified, and UHT pasteurized milks.

Not allowed:

organic, flavored such as chocolate or fruit-flavored milks, no other non-dairy milks.

Authorized	Not allowed
Refrigerated unflavored cow's fluid milk	No organic



## Alaska WIC Policy & Procedure Manual



<b>1-2 year old whole milk</b> <b>2-5 year old and women-fat free and</b> <b>1%Exceptions for 2-5 year old and women</b> <b>receiving Food Package III may be made via</b> <b>the ENPR process</b>	No flavored milk such as chocolate or fruit flavored No other non-dairy milks. No Acidophilus buttermilk and goat milks
<b>Lactose free, lactaid, or acidophilus</b>	
<b>Calcium or protein fortified</b>	
<b>Soy milk specified separately</b>	

### ❖ *Peanut Butter*

Peanut butter and reduced fat peanut butter (must conform to FDA Standard of Identity (21 CFR 164.150)); Creamy or chunky, regular or reduced fat, salted or unsalted peanut butter are allowed.

Not allowed: added marshmallow, jelly, or honey, chocolate, or similar ingredients. No organic peanut butter. No Honey Nut Roasted, no low fat or reduced fat, no bulk or grind your own.

<b>Authorized</b>	<b>Not Allowed</b>
Any least expensive eligible brand	No Honey Nut roasted.
All textures, smooth to extra crunchy	No organic.
16 oz. To 18 oz	No low fat or reduced fat.
Any type: cream, chunky, extra chunky, smooth	No bulk or grind your own.
Low sodium, low sugar, natural allowed	No marshmallow, jelly, honey, chocolate or similar ingredients added.
	No Individual serving containers
	No peanut butter spreads
	No peanut butter slices or tube.
	No organic



❖ *Soy Products*

Soy Beverage- Must be fortified to meet the following nutrient levels: 276 mg calcium per cup, 8 g protein per cup, 500 IU vitamin A per cup, 100 IU vitamin D per cup, 24 mg magnesium per cup, 222 mg phosphorus per cup, 349 mg potassium per cup, 0.44 mg riboflavin per cup, and 1.1 mcg vitamin B12 per cup, in accordance with fortification guidelines issued by FDA.

Tofu- Calcium-set tofu prepared with only calcium salts (e.g., calcium sulfate). May not contain added fats, sugars, oils, or sodium.

◆ *Soy Beverages:*

For list of allowed soy beverages, see the AK WIC Allowed Food List.

<https://health.alaska.gov/dpa/Pages/nutri/wic/approved-foods.aspx>

❖ *Whole Grains*

◆ *Bread:*

Whole *wheat* bread (includes whole wheat buns and rolls) must conform to FDA standard of identity (21 CFR 136.180). ***“Whole wheat flour” and/or “bromated whole wheat flour” must be the only flours in the ingredients.***

◆ *Corn or Whole Wheat Tortillas*

For allowed corn tortillas, see the AK WIC Allowed Food List

***“Soft corn or whole wheat tortillas. Soft corn tortillas made from ground masa flour (corn flour) using traditional processing methods are allowed, e.g., whole corn, corn (masa), whole ground corn, corn masa flour, masa harina, and white corn flour. For whole wheat tortillas, “whole wheat flour” must be the only flour listed in the ingredient list.”***

Up to 16 oz. package

Soft only

REFERENCE:

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)

- Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

USDA’s list of Generally Recognized As Safe (GRAS): <https://www.fda.gov/food/food-ingredients-packaging/generally-recognized-safe-gras>

DEFINITIONS:

**Cash Value Benefit** means a fixed-dollar amount electronic benefit transfer (EBT) card or other document which is used by a participant to obtain authorized fruits and vegetables. Cash Value



## Alaska WIC Policy & Procedure Manual



Benefit is also known as cash-value voucher (CVV) when it pertains to checks or vouchers. Previously known as FVV - Fruit and vegetable voucher.

**Competent Professional Authority (CPA):** An individual of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and counseling, and prescribe supplemental foods.

**Food Benefits:** The foods a participant receives through WIC for a selected month. Depending on the participant category, food benefits provide specific amounts of WIC authorized foods, formulas, and/or a fixed-dollar amount for participants to obtain WIC authorized fruits and vegetables (referred to as a “Cash Value Benefit” or “CVB”).

**Food package:** is the maximum amount and type of food which can be prescribed for a single participant per 28-to-31-day period.

**Vendor** means a sole proprietorship, partnership, cooperative association, corporation, or other business entity operating one or more stores authorized by the State agency to provide authorized supplemental foods to participants under a retail food delivery system. Each store operated by a business entity constitutes a separate vendor and must be authorized separately from other stores operated by the business entity. Each store must have a single, fixed location, except when the authorization of mobile stores is necessary to meet the special needs described in the State agency's State Plan in accordance with § 246.4(a)(14)(xiv).

**WIC Authorized Food List:** The list of foods that are eligible to be prescribed for WIC participants in Alaska.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
02/06/2024	Revised; and updated approved WIC foods.
8/7/2024	Reviewed for formatting; updated for 2023 food requirements

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.



## Alaska WIC Policy & Procedure Manual



**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 300 Nutrition and Breastfeeding Services

#### Policy: 367 Authorized Contract Formula

Effective Date: 06/01/2018

##### PURPOSE:

- To provide a list of WIC approved contract formulas that may be purchased with WIC benefits at an approved vendor.

#### Policy: 367 Authorized Contract Formula

##### Contract Formulas

The State of Alaska WIC Program provides contract brand milk and soy-based formulas that meet the minimum nutrient requirements of Table 4 of 7 C.F.R. 246.10(e)(12).

The contract formulas are available in concentrated, powdered, or ready-to-feed. Formula must contain at least 10 mg iron per liter and 20 kcal/oz. No low iron formulas are allowed. Use of the contract formula saves millions of dollars each year and allows WIC to serve more WIC participants in Alaska. The primary contract infant formula is the specific infant formula for which a manufacturer submits a bid to a State WIC Office in response to a rebate solicitation and is ultimately awarded a contract by the State WIC Office. The current formula contract is awarded to Abbott Laboratories.

The contract formulas, manufactured by Abbott Laboratories, are:

- Similac Advance
- Similac Sensitive
- Similac Total Comfort
- Similac Soy Isomil
- Similac Advance is the primary contract infant formula for Alaska WIC. Similac Advance is appropriate for most infants.
- WIC benefits are not permitted for the purchase of Similac Pro Advance or Similac Pro Sensitive.
- The use of powdered formula is to be encouraged. Balto may also offer concentrate or ready-to-feed formulas.





#### REFERENCE:

7 C.F.R. 246.10(e)(12)

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)

- Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

#### CROSS REFERENCE:

356 Food Package III-Medically Fragile Participants

#### DEFINITIONS:

**Balto:** Alaska's name for the online ordering program that allows WIC benefits to be mailed to eligible participants. The program is named after the famous sled dog, Balto, who played a crucial role in the 1925 relay that delivered the diphtheria antitoxin to Nome, Alaska, during a deadly epidemic. WIC's Balto program primarily serves WIC participants in isolated or remote rural locations.

**Contract brand infant formula** means all infant formulas (except exempt infant formulas) produced by the manufacturer awarded the infant formula cost containment contract. If under a single solicitation the manufacturer subcontracts for soy-based infant formula, then all soy-based infant formulas covered by the subcontract are also considered contract brand infant formulas (see [§ 246.16a\(c\)\(1\)\(i\)](#)). If a State agency elects to solicit separate bids for milk-based and soy-based infant formulas, all infant formulas issued under each contract are considered the contract brand infant formula (see [§ 246.16a\(c\)\(1\)\(ii\)](#)). For example, all of the milk-based infant formulas issued by a State agency that are produced by the manufacturer that was awarded the milk-based contract are considered contract brand infant formulas. Similarly, all of the soy-based infant formulas issued by a State agency that are produced by the manufacturer that was awarded the soy-based contract are also considered to be contract brand infant formulas. Contract brand infant formulas also include all infant formulas (except exempt infant formulas) introduced after the contract is awarded.

**Infant:** A person who is 12 months old or younger. Once they turn 12 months, they are considered a child.

**Infant formula** means a food that meets the definition of an infant formula in section 201(z) of the Federal Food, Drug, and Cosmetic Act ([21 U.S.C. 321\(z\)](#)) and that meets the requirements for an infant formula under section 412 of the Federal Food, Drug, and Cosmetic Act ([21 U.S.C. 350a](#)) and the regulations at [21 CFR parts 106](#) and [107](#).

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
------	--



## Alaska WIC Policy & Procedure Manual



08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 300 Nutrition and Breastfeeding Services

#### Policy: 368 Authorized Non-Contract Formula

Effective Date: 06/01/2018

##### PURPOSE:

- To provide a list of WIC approved non-contract infant formulas.
- To describe the requirements for an Alaska WIC Nutrition Program Enteral Nutrition Prescription Request Form for Therapeutic Formulas and Medical Foods (ENPR) for the prescription of non-contract formulas.
- To describe the process for a Certificate of Medical Necessity (CMN) for women and children prescribed non-contract formulas.
- Temporary use of the Alaska WIC mailed food delivery system, Balto.

#### Policy: 368 Authorized Non-Contract Formula

##### Approved Non-Contract Formulas

Non-contract formulas are not included in the infant formula rebate contract. Alaska WIC does not receive rebates for non-contract formulas. Non-contract formulas are allowed only for medically fragile participants with medical documentation through an Alaska WIC Nutrition Program Enteral Nutrition Prescription Request Form for Therapeutic Formulas and Medical Foods (ENPR) completed by a health care provider.

The WIC Program is not required to issue a non-contract formula merely because a health care provider prescribes it. The prescription must be accompanied by a medical diagnosis and ICD-10 code for it to be approved by the State WIC Office.

The WIC Program does not authorize issuance of non-contract formulas for:

1. Nonspecific symptoms such as intolerance, fussiness, gas, spitting up, constipation or colic OR
2. Enhancing nutrient intake or managing body weight without an underlying medical condition.

##### Non-Contract Infant Formulas

- Elecare
- Enfamil Enficare
- Enfamil Nutramigen with Enflora
- Nutricia Neocate Infant Formula
- Similac Neosure



## Alaska WIC Policy & Procedure Manual



- Similac Alimentum (powder and ready to feed)
- Enfamil Gentlease
- Enfamil AR
- Gerber Extensive HA
- Parent's Choice Hypoallergenic

### Non-Contract Formulas for Women and Children:

- Pediasure
- Neocate Junior
- Ensure

### PROCEDURE:

#### Alaska WIC Nutrition Program Enteral Nutrition Prescription Request Form for Therapeutic Formulas and Medical Foods (ENPR)

Only health care professionals licensed to write prescriptions in Alaska are permitted to complete an ENPR. The prescribing health care provider must include their Medicaid provider number or State of Alaska license number on the signed ENPR.

Providers may give the completed ENPR form to the WIC participant or submit it directly to their Local Agency. The request must be reviewed by a Local Agency RD or Nutritionist (NSS 1.e.1) who must sign the approved ENPR. Local Agencies must have an established written protocol in their clinics for reviewing and evaluating submitted ENPR forms. The procedure should include who can review, approve/deny requests at the Local Agency and the criteria the approval/denial is based upon.

Local Agencies approve ENPRs for the length of time the health care provider determines a participant needs the non-contract formula prescription, not to exceed 12 months. Incomplete requests and requests not meeting the criteria listed on the ENPR cannot be approved. The local agency will consult the health care provider if there is a need to recommend a change to a non-contract formula.

1. When an ENPR is received, an RD or licensed nutritionist conducts the nutrition assessment and verifies that a non-contract formula is indicated. The RD or licensed nutritionist writes a nutrition plan in the participant's SPIRIT chart notes, which can be followed by a CPA. The WIC RD or Nutritionist must document in the SOAP note her/his evaluation of the health status of any child for whom a non-contract formula is prescribed, in reference to appropriate height and weight for age and whether the child is making progress towards developmental milestones of growth and development.
  - a. Questions about formulas can be directed to the State Nutrition Coordinator.
2. If the Local Agency RD or LN determines that the formula is not appropriate, the justification for the denial must then be verified by the Local Agency Coordinator. If



it seems appropriate to deny the non-contract formula requested on the ENPR then the RD, LN or LA Coordinator will discuss the request with the prescribing Provider to explore alternative treatment options. If the RD or licensed nutritionist determines the formula request is appropriate, complete these steps to verify that the ENPR is complete:

- a. Verify the non-contract formula requested is on the approved Alaska WIC non-contract formula list.
  - b. Verify that the supplemental food approval section is filled out if needed.
  - c. Verify that the health care provider has selected a length of time the formula is required (duration).
  - d. Verify the health care provider has indicated an amount of formula or has approved the maximum amount available.
  - e. Verify the health care provider has included their Medicaid provider number or State of Alaska License number.
  - f. Verify the health care provider has selected a diagnosis with an ICD-10 code or has written a diagnosis with an ICD-10 code.
3. Using the Recommended Dietary Allowances (RDA) on the second page of the ENPR, the RD or LN estimates and writes both current daily caloric needs, amount of formula needed per day and calorie needs in six months.
  4. WIC will provide the amounts of supplemental foods prescribed, based on foods for Children and Women in USDA WIC Food Package III.

In order to prescribe a non-contract formula in SPIRIT, the “Food Package III” box must be checked on the Health Information tab in the participant’s record. Save the change. Go to the “Food Prescription” tab. If the infant is over 6 months, you will be asked if you’d like to include infant foods or not; answer as appropriate. The “Formula” screen will appear, and “Special Formulas” is active. Choose the formula specified on the ENPR. The “Special Formula Prescription Item” screen will appear, requesting the start and end date, and the health care provider’s information.

Participants currently enrolled in – or eligible for –Denali Kid Care or Medicaid should be encouraged to have Medicaid pay for their noncontract formula because Medicaid provides up to 100% of monthly formula needs, whereas WIC is a supplemental nutrition program so can only provide a portion of their formula needs.

If the participant agrees to pursue Medicaid for payment of their non-contract formula, then verify the Medicaid number and begin the application process to the Durable Medical Equipment provider, which will bill Medicaid for the cost of the approved non-contract formula. However, if a WIC participant chooses not to pursue Medicaid for payment of their non-contract formula, WIC cannot deny food benefits. To maintain clear medical documentation, include the circumstances as to why Medicaid was not the payer of first resort in the general notes section of the participant’s SPIRIT record.



## Alaska WIC Policy & Procedure Manual



A WIC participant enrolled in Medicaid may be issued one month or more of WIC benefits while Medicaid processes the ENPR and starts providing the non-contract formula. Non-contract formulas that are unavailable at the participant's local WIC vendor can be temporarily issued through Balto. The WIC clinic staff must first receive approval from the State WIC Vendor Management Unit (VMU), which will work with the Balto vendor to secure the requested non-contract formula. Refer to Policy 1006: Balto.

Food Package issuance of the prescribed non-contract formula may be continued past one month on a case-by-case basis. Document problems or delays in getting Medicaid approved in SPIRIT. WIC staff should continue to check the Durable Medical Equipment Provider until it is confirmed that the participant receives the formula.

Update the participant's food package in SPIRIT when the formula is being provided by Medicaid, by removing the formula from the food package, and adding "Formula provided by Medicaid" as part of the food package. This designation counts the participant as actively enrolled in SPIRIT.

The CPA must inform the participant of their responsibility:

1. The participant will contact the DME to set up a monthly delivery schedule.
2. The participant will need to contact the DME monthly to obtain the formula.

The completed ENPR must be saved in the participant's SPIRIT record.

A copy of the ENPR is in Job Aids.

### Certificate of Medical Necessity

Women and children prescribed non-contract formulas require two forms for Medicaid payment approval: the ENPR plus the Certificate of Medical Necessity.

The Certificate of Medical Necessity (CMN) must also be completed and signed by a physician or other provider with prescribing authority. Both the ENPR and CMN are sent to the Durable Medical Equipment Provider to obtain Medicaid approval for the non-contract formula.

A copy of the CMN is in Job Aids.

To track usage of non-contract formula, Local Agencies can use the report in SPIRIT Reports titled, "Percent of Rx Formula Fed Infants (average monthly)". This report will also assist local agencies to track participants' specific prescribed formulas.

### REFERENCE:



## Alaska WIC Policy & Procedure Manual



7 C.F.R. 246.10(e)(12)

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)

- Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

Alaska WIC Nutrition Program Enteral Nutrition Prescription Request Form  
for Therapeutic Formulas and Medical Foods

Alaska Certificate of Medical Necessity

### CROSS REFERENCE:

Job Aid 016: Non-Contract Formula ENPR

Job Aid 017: Certificate of Medical Necessity

Policy 1006: Balto

### DEFINITIONS:

**Contract brand infant formula** means all infant formulas (except exempt infant formulas) produced by the manufacturer awarded the infant formula cost containment contract. If under a single solicitation the manufacturer subcontracts for soy-based infant formula, then all soy-based infant formulas covered by the subcontract are also considered contract brand infant formulas (see [§ 246.16a\(c\)\(1\)\(i\)](#)). If a State agency elects to solicit separate bids for milk-based and soy-based infant formulas, all infant formulas issued under each contract are considered the contract brand infant formula (see [§ 246.16a\(c\)\(1\)\(ii\)](#)). For example, all of the milk-based infant formulas issued by a State agency that are produced by the manufacturer that was awarded the milk-based contract are considered contract brand infant formulas. Similarly, all of the soy-based infant formulas issued by a State agency that are produced by the manufacturer that was awarded the soy-based contract are also considered to be contract brand infant formulas. Contract brand infant formulas also include all infant formulas (except exempt infant formulas) introduced after the contract is awarded.

**Durable Medical Equipment:** is any medical equipment used in the home to aid in a better quality of living. It is a benefit included in many insurance policies and in some cases covered by Medicare benefits.

**Enteral Nutrition Physician Referral (ENPR):** Physician referral for a specific individually prescribed food.

**ICD-10:** International Classification of Diseases, Tenth Revision (ICD-10) is a system used by physicians to classify and code all diagnoses, symptoms and procedures for claims processing. It was chiefly designed by the World Health Organization, with the U.S. version being created by the Centers for Medicare & Medicaid Services (CMS) and the National Center for Health Statistics (NCHS) to better align with the country's health care infrastructure. The American Medical Association provides the latest medical diagnosis code resources and training materials



## Alaska WIC Policy & Procedure Manual



to help physicians and their teams understand what is an ICD-10 code.

**Infant:** A person who is 12 months old or younger. Once they turn 12 months, they are considered a child.

**Infant formula** means a food that meets the definition of an infant formula in section 201(z) of the Federal Food, Drug, and Cosmetic Act ([21 U.S.C. 321\(z\)](#)) and that meets the requirements for an infant formula under section 412 of the Federal Food, Drug, and Cosmetic Act ([21 U.S.C. 350a](#)) and the regulations at [21 CFR parts 106](#) and [107](#).

**Non-contract brand infant formula** means all infant formula, including exempt infant formula, that is not covered by an infant formula cost containment contract awarded by that State agency.

**Recommended Dietary Allowances (RDAs)** are the levels of intake of essential nutrients that, on the basis of scientific knowledge, are judged by the Food and Nutrition Board to be adequate to meet the known nutrient needs of practically all healthy persons.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
06/06/2024	Reviewed; and ENPR formula list updated; and updated versions of the ENPR and CMN added to the Job Aids.

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for





## Alaska WIC Policy & Procedure Manual



release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 300 Nutrition and Breastfeeding Services

#### Policy: 369 Issuance of Ready to Feed Infant Formula

Effective Date: 06/01/2018

#### PURPOSE:

To describe the situations for which a WIC CPA may prescribe ready-to-feed infant formula to a WIC infant.

#### POLICY: 369 Issuance of Ready to Feed Infant Formula

The use of powdered formula is to be encouraged. WIC ready-to-feed formulas may be authorized when the competent professional authority determines and documents in the participant's SPIRIT record that:

##### For Food Package I and II

- The participant's household has an unsanitary or restricted water supply or poor refrigeration.
- The person caring for the participant may have difficulty diluting concentrated or powder forms correctly; or
- The WIC infant formula is only available in ready-to-feed.

##### For Food package III

- If a ready-to-feed form better accommodates the participant's condition; or if it improves the participant's compliance in consuming the prescribed WIC formula.

If Ready-To-Fed formula is not readily available at the participant's local WIC-approved vendor then Balto may also offer concentrate or ready-to-feed formulas.

#### REFERENCE:

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)

- Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

#### DEFINITIONS:

**Balto:** Alaska's name for the online ordering program that allows WIC benefits to be mailed to eligible participants. The program is named after the famous sled dog, Balto, who played a crucial role in the 1925 relay that delivered the diphtheria antitoxin to Nome, Alaska, during a deadly epidemic. WIC's Balto program primarily serves WIC participants in isolated or remote rural locations.



## Alaska WIC Policy & Procedure Manual



**Competent Professional Authority (CPA):** An individual of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and counseling, and prescribe supplemental foods.

**Infant:** A person who is 12 months old or younger. Once they turn 12 months, they are considered a child.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Vendor** means a sole proprietorship, partnership, cooperative association, corporation, or other business entity operating one or more stores authorized by the State agency to provide authorized supplemental foods to participants under a retail food delivery system. Each store operated by a business entity constitutes a separate vendor and must be authorized separately from other stores operated by the business entity. Each store must have a single, fixed location, except when the authorization of mobile stores is necessary to meet the special needs described in the State agency's State Plan in accordance with § 246.4(a)(14)(xiv).

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services

### Policy: 370 Unauthorized WIC Formula Costs

Effective Date: 10/01/2014

#### PURPOSE:

To state the rule that apparatus or devices designed to administer WIC formulas are not allowable WIC costs.

#### POLICY: 370 Unauthorized WIC Formula Costs

To state the rule that apparatus or devices (e.g., enteral feeding tubes, bags and pumps) designed to administer WIC formulas are not allowable WIC costs.

- Formulas used solely for the enhancing nutrient intake, managing body weight, addressing picky eaters or used for a condition other than a qualifying condition (vitamin pills, weight control products.)
- Medicines or drugs
- Hyperalimentation feedings (nourishment administered through a vein)
- Enzymes, herbs and botanicals
- Orally rehydration fluids or electrolyte solutions
- Flavoring or thickening agents
- All apparatus or devices (e.g., enteral feeding tubes, bags and pumps) designed to administer WIC formulas are not allowable WIC costs.
- Sports or breakfast drinks
- Water

#### REFERENCE:

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)

- Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

Federal Regulations: 7CFR 246.10(e)(12)

- Table 4

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)

- Subpart D- Participant Benefits- Supplemental Foods
  - 246.10(d)(3)

#### DEFINITIONS:

**WIC-eligible nutritionals for participants with qualifying conditions (hereafter referred to as**



“WIC-eligible nutritionals”) means certain enteral products that are specifically formulated to provide nutritional support for individuals with a qualifying condition, when the use of conventional foods is precluded, restricted, or inadequate. Such WIC-eligible nutritionals must serve the purpose of a food, meal or diet (may be nutritionally complete or incomplete) and provide a source of calories and one or more nutrients; be designed for enteral digestion via an oral or tube feeding; and may not be a conventional food, drug, flavoring, or enzyme. WIC-eligible nutritionals include many, but not all, products that meet the definition of medical food in Section 5(b)(3) of the Orphan Drug Act ([21 U.S.C. 360ee\(b\)\(3\)](#)).

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services

### Policy: 371 Supplemental Food Requiring Medical Documentation

Effective Date: 10/01/2014

#### PURPOSE:

To list instances where supplemental foods require medical documentation.

#### POLICY: 371 Supplemental Food Requiring Medical Documentation

##### Medical Documentation: Supplemental Foods Requiring Medical Documentation

To list instances where supplemental foods require medical documentation.

Required for the issuance of the following supplemental foods:

- Any non-contract brand infant formula
- Any infant formula prescribed to a child or adult who receives Food Package III
- Any exempt infant formula
- Any WIC-eligible nutritional
- Any authorized supplemental food issued to participants who receive Food Package III

All foods and formulas needing medical documentation will follow the procedures listed in Policy 368 for non-contract formulas requiring an Alaska WIC Nutrition Program Enteral Nutrition Prescription Request Form for Therapeutic Formulas and Medical Foods (ENPR).

Supplemental foods needing a doctor's prescription on the ENPR will be issued as electronic WIC benefits through SPIRIT so do not require Medicaid authorization.

#### REFERENCE:

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)

- Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

Federal Regulations: 7CFR 246.10(e)(12)

- Table 4

Federal Regulations: 7CFR Ch. II

- Subpart D- Participant Benefits- Supplemental Foods
  - 246.10(d)(3)

#### CROSS REFERENCE:

368 Authorized-Non-Contract-Formula



## DEFINITIONS:

**Enteral Nutrition Prescription Request Form (ENPR):** Physician referral for a specific individually prescribed food.

**Medical documentation** means that a health care professional licensed to write medical prescriptions under State law has made a medical determination that the participant has a qualifying condition and has provided the written documentation on the Enteral Nutrition Prescription Request form (ENPR).

**SPiRiT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

**WIC-eligible nutritionals for participants with qualifying conditions (hereafter referred to as “WIC-eligible nutritionals”)** means certain enteral products that are specifically formulated to provide nutritional support for individuals with a qualifying condition, when the use of conventional foods is precluded, restricted, or inadequate. Such WIC-eligible nutritionals must serve the purpose of a food, meal or diet (may be nutritionally complete or incomplete) and provide a source of calories and one or more nutrients; be designed for enteral digestion via an oral or tube feeding; and may not be a conventional food, drug, flavoring, or enzyme. WIC-eligible nutritionals include many, but not all, products that meet the definition of medical food in Section 5(b)(3) of the Orphan Drug Act ([21 U.S.C. 360ee\(b\)\(3\)](#)).

## POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting



## Alaska WIC Policy & Procedure Manual



changes may have occurred.





## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services

### Policy: 372 – Returning & Reissuance of Formula

Effective Date: 06/30/2012

#### PURPOSE:

To describe the procedures used when formula that was previously issued is returned by the WIC participant.

#### POLICY: 372 – Returning & Reissuance of Formula

##### Returning and Reissuance of Formula

In a limited number of cases, an Authorized Representative may redeem formula benefits only to have the health care provider subsequently change the infant to a different formula. Since WIC vendors are not allowed to either accept the return of supplemental foods or permit the exchange of supplemental foods, the participant must return the unopened cans of formula to the local health clinic or healthcare provider, donate it to a food bank with written confirmation of the donation from the authorizing representative of the food bank, or return it to the Local Agency. The Local Agency must document the return of the original formula and the reason for the issuance of different formula in the participant's SPIRIT record. This documentation, as well as documentation of the health care provider's determination for special formula or soy formula and the specific formula prescribed, must be included in the participant's SPIRIT record. Accountability of the returned formula must be maintained by the Local Agency.

Local agencies that receive the returned cans of formula are required to destroy the formula. It cannot be reissued to other participants nor donated by the Local Agency to a food bank.

An inventory log is required to track returned formula and its disposal.

#### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart E- State Agency Provisions- Food Delivery Systems
  - 246.12(h)(3)(ii)

#### DEFINITIONS:

**Contract brand infant formula** means all infant formulas (except exempt infant formulas) produced by the manufacturer awarded the infant formula cost containment contract. If under a single solicitation the manufacturer subcontracts for soy-based infant formula, then all soy-based infant formulas covered by the subcontract are also considered contract brand infant formulas (see [§ 246.16a\(c\)\(1\)\(i\)](#)). If a State agency elects to solicit separate bids for milk-based and soy-based infant formulas, all infant formulas issued under each contract are considered



## Alaska WIC Policy & Procedure Manual



the contract brand infant formula (see [§ 246.16a\(c\)\(1\)\(ii\)](#)). For example, all of the milk-based infant formulas issued by a State agency that are produced by the manufacturer that was awarded the milk-based contract are considered contract brand infant formulas. Similarly, all of the soy-based infant formulas issued by a State agency that are produced by the manufacturer that was awarded the soy-based contract are also considered to be contract brand infant formulas. Contract brand infant formulas also include all infant formulas (except exempt infant formulas) introduced after the contract is awarded.

**Local agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Non-contract brand infant formula** means all infant formula, including exempt infant formula, that is not covered by an infant formula cost containment contract awarded by that State agency.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**WIC-eligible nutritionals for participants with qualifying conditions (hereafter referred to as “WIC-eligible nutritionals”)** means certain enteral products that are specifically formulated to provide nutritional support for individuals with a qualifying condition, when the use of conventional foods is precluded, restricted, or inadequate. Such WIC-eligible nutritionals must serve the purpose of a food, meal or diet (may be nutritionally complete or incomplete) and provide a source of calories and one or more nutrients; be designed for enteral digestion via an oral or tube feeding; and may not be a conventional food, drug, flavoring, or enzyme. WIC-eligible nutritionals include many, but not all, products that meet the definition of medical food in Section 5(b)(3) of the Orphan Drug Act ([21 U.S.C. 360ee\(b\)\(3\)](#)).

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed



## Alaska WIC Policy & Procedure Manual



**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services

### Policy: 373 – Religious Considerations: Formula

Effective Date: 06/30/2012

#### PURPOSE:

To provide direction for choosing an appropriate formula that meets a WIC infant's religious beliefs, when their guardian feels the contract formula does not work with their religious practices.

#### POLICY: 373– Religious Considerations: Formula

##### Meeting Religious Eating Pattern Infant Formula Requests

Alaska's contract formulas will work with most religious eating patterns. If an additional formula is requested, approval must be obtained from State WIC Office staff. Medical documentation will not be required.

#### REFERENCE:

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)

- Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

#### DEFINITIONS:

**Contract brand infant formula** means all infant formulas (except exempt infant formulas) produced by the manufacturer awarded the infant formula cost containment contract. If under a single solicitation the manufacturer subcontracts for soy-based infant formula, then all soy-based infant formulas covered by the subcontract are also considered contract brand infant formulas (see [§ 246.16a\(c\)\(1\)\(i\)](#)). If a State agency elects to solicit separate bids for milk-based and soy-based infant formulas, all infant formulas issued under each contract are considered the contract brand infant formula (see [§ 246.16a\(c\)\(1\)\(ii\)](#)). For example, all of the milk-based infant formulas issued by a State agency that are produced by the manufacturer that was awarded the milk-based contract are considered contract brand infant formulas. Similarly, all of the soy-based infant formulas issued by a State agency that are produced by the manufacturer that was awarded the soy-based contract are also considered to be contract brand infant formulas. Contract brand infant formulas also include all infant formulas (except exempt infant formulas) introduced after the contract is awarded.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed



## Alaska WIC Policy & Procedure Manual




**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual 300 Nutrition and Breastfeeding Services



### Policy: 374 – Follow Up & Weaning Formulas

Effective Date: 06/30/2012

#### PURPOSE:

To inform Local Agencies that follow-up and weaning formulas do not offer any nutritional advantage over standard infant formulas; and describe the process for formula prescriptions for children

#### POLICY: 374 – Follow Up & Weaning Formulas

##### Follow-up and Weaning Formulas

Standard infant formulas meet the nutritional requirements of the older infant (ages 6-11 months). Follow-up or weaning formulas do not offer any nutritional advantage over standard infant formulas, and none are authorized by the Alaska WIC Program. Formula fed infants should continue on infant formula through 11 months.

When a formula would be appropriate for a child 12 months or older, they can receive one of the formulas on the Enteral Nutrition Prescription Request (ENPR) with a completed ENPR from a health care provider and a nutrition assessment from an agency's dietitian. A child medically fragile enough to require formula past 12 months requires the care of a health care provider.

#### REFERENCE:

#### CROSS REFERENCE:

368 Authorized Non-Contract Formula

#### DEFINITIONS:

**Infant formula** means a food that meets the definition of an infant formula in section 201(z) of the Federal Food, Drug, and Cosmetic Act ([21 U.S.C. 321\(z\)](#)) and that meets the requirements for an infant formula under section 412 of the Federal Food, Drug, and Cosmetic Act ([21 U.S.C. 350a](#)) and the regulations at [21 CFR parts 106](#) and [107](#).

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed



## Alaska WIC Policy & Procedure Manual



--	--

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 400 Management Information Systems (MIS) & Other Systems**



**Policy: 401 Personal Use of Computers**

Effective Date: 06/01/2018

**PURPOSE:**

To provide Local Agencies guidance regarding use of WIC computers for business versus personal use.

**POLICY: 401 Personal Use of Computers**

WIC staff are prohibited from directly or indirectly using, or allowing the use of, WIC computer equipment and software for other than officially approved activities.

Some examples of unofficial use are:

- Computer games
- Personal Internet use
- Personal correspondence
- Personal diaries
- Book publication
- Hacking
- Personal record keeping

Grantees must ensure that WIC equipment such as computers, laptops, cell phones, smart devices or tablets, peripheral devices, or other electronic equipment, etc., must not be used or removed from the clinic for personal purposes to safeguard unauthorized access to participants' personal and private information.

**REFERENCE:**

**DEFINITIONS:**

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.





POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 400 Management Information Systems (MIS) & Other Systems

#### Policy: 402 SPIRIT & IT Security

Effective Date: 06/01/2024

#### PURPOSE:

To ensure consistency of the SPIRIT and SPIRIT Web (SWAN) WIC MIS, maximize operational efficiencies and maintain data integrity, safety & security. To prevent fraud, avoid theft, and ensure data privacy.

For consistency, 'SWAN' will be used in this document as reference to SPIRIT & SPIRIT Legacy, encompassing both WIC MIS.

#### POLICY: 402 SWAN SECURITY & ELECTRONIC INFRASTRUCTURE

##### Use of the SWAN for Supporting WIC Program Operations

Local agencies (LA) are required to use the Alaska WIC "SPIRIT Web for Alaska Nutrition" (SWAN) MIS, the successor of the "Successful Partners in Reaching Innovative Technologies" (SPIRIT) MIS, to provide WIC Program services (including official eligibility determinations & benefit issuance) in their designated service area.

Local Agencies are required to provide and maintain hardware and software in all their WIC clinics in accordance with specifications provided by the State of Alaska Request for Proposals (RFP) and annual grant agreements. LAs must provide and support a secure and reliable local area network in each clinic location.

SWAN Security & Privacy: Local Agencies must ensure the security of networks used to access and operate SWAN, and the security of data and computer equipment through an appropriate mix of technical, administrative, and managerial controls.

Information obtained from individuals applying for or participating in the WIC Program is considered private and may not be disclosed to any unauthorized person(s).

WIC Clinics are restricted from using client information for purposes other than providing WIC services and as outlined in the signed client Rights and Responsibilities form.

#### PROCEDURE:

##### Use of SWAN for Supporting WIC Program Operations:

##### A. Software/Hardware

1. LAs are responsible for installing and maintaining in each WIC clinic location an internet connection minimally adequate to use SWAN and conduct WIC Program business, based



- on technical specifications provided by the State of Alaska.
2. LAs will provide all software and hardware needed to use SWAN. This includes computers, routers, printers, scanners and signature pads. An adequate inventory of hardware must be maintained to provide for new staff and replacement of failed equipment.
  3. LAs will provide computers with the State-specified version of the Windows operating system, Microsoft Word and Excel in a version compatible with SWAN as specified by the State of Alaska, hard disk encryption, and anti-virus software (real time/on-access).
  4. LAs will install applicable SWAN software only on computers designated for WIC business. Grantees will only access SWAN on computers designated for WIC business.
  5. LAs will keep all computers used to access SWAN updated within one week of the vendor's release of the update. This includes hardware operating systems, security software, Microsoft Office Suite, SWAN, or other applicable applications.
  6. LAs may not use anti-virus software, hard disk encryption, or any other product that encrypts possible locations of WIC data.
  7. Computers designated for WIC business may be configured as needed to connect to the local network.
  8. The State of Alaska will provide a list of hardware and peripheral devices which have been determined to be compatible with SWAN. LAs are not allowed to install incompatible software onto computers used to access SWAN, or to purchase incompatible software or peripheral devices with WIC funds.
  9. LAs must maintain an inventory list of all computers and associated hardware LAs are required to report IP subnet ranges used for WIC Program services. This information will be placed within the State's firewall system to prevent unauthorized access to SWAN.

### *B. Support*

1. SWAN is a web-based application which grantees connect to from their own network environment via a standard broadband internet connection. The State supports the application which is hosted in the State's environment. The database is centralized.
2. SWAN user accounts and credentials are created by the WIC Help Desk.
3. LAs must provide technical support for initial set-up, maintenance and support of any local area network necessary to provide WIC Program services, including any ongoing connectivity issues. The support can be from local IT staff, contractors or Internet Service Providers. IT support must be available, responsive, and effective.
4. The State will not provide any desktop or network support to LAs. State IT staff are not able to "remote into" the LA's environment. For example, if a LAs has trouble with their internet connection, a computer becomes non-functional, or a computer will not print as expected, the Local Agency will need to seek help with such issues from their organization's IT support staff.
5. The cost of WIC IT support from the grantee organization must be covered from the Local Agency WIC grant; if IT support is directly charged to the program, the LA's business office must provide sufficient detail about the organization's federally approved indirect rate methodology to demonstrate that direct-charged costs are not included in the indirect rate.



6. The State will not purchase any computers, hardware, printers, peripheral devices, or associated equipment for LAs. LAs will buy all WIC computer equipment out of their funds in accordance with specifications provided by the State for desktop operating systems, hard disk encryption standards, minimum computer memory, and compatible printers, peripheral devices or other applicable hardware.
7. SPIRIT & SWAN software include an online Help feature for most data fields. The WIC Program State Office will provide technical assistance on WIC policy issues related to use of SWAN. The State will provide technical training to SWAN users.
8. The WIC Help Desk is available during regular state business hours (Monday – Friday, 8 am to 3 pm, excluding most state and federal holidays) to assist SWAN users and grantee technical support with any SWAN related technical issues. They can be reached at [wicSPIRIThelpdesk@alaska.gov](mailto:wicSPIRIThelpdesk@alaska.gov).

### SWAN Security:

#### *A. User Authentication*

1. Each SWAN user must use their own username and password when accessing the system. The database tracks all system activity by username. SWAN passwords will expire every 90 days. LAs must enforce the following strong password requirements when their employees set SWAN passwords:
  - a. Passwords must have a minimum length of 8 characters
  - b. The password must contain a combination of the following character sets: lower-case alphabet letters, upper-case alphabet letters, numbers, and special characters (such as \$, (, %, @).
  - c. The password cannot be a word that would appear in a dictionary and must not be based on personal information (e.g., a pet name) or other identifiers (e.g., a social security number). A user must immediately change the password if there is any reason to think that it could have been compromised.
  - d. The user must select a new password each time a change is made; a password should never be reused for SWAN.
  - e. SWAN users must not share their password with anyone else, including supervisors. This includes sharing passwords and usernames for instructional or training purposes. For example, a supervisor must not allow a subordinate employee to navigate SWAN with the supervisor's username & password, even if the supervisor is present and directly overseeing this activity.
  - f. SWAN users must contact the SWAN Help Desk immediately in the event of compromised, lost or stolen passwords.
2. SWAN will lock out a user after seven invalid attempts to login. Any user experiencing lockout due to invalid ID or password must immediately contact the SWAN Help Desk to reestablish access to the system.
3. Grantees are required to immediately notify the WIC Help Desk to delete access of any employee terminated from the WIC Program, and to notify the WIC Help Desk in advance of the expected last day of work/access to SWAN when an employee leaves the WIC Program. The WIC Technology Security Agreement will be used for this notification.



## Alaska WIC Policy & Procedure Manual



This form must be completed, signed and submitted to [wicSPIRIThelpdesk@alaska.gov](mailto:wicSPIRIThelpdesk@alaska.gov) within one business day of the SWAN user's termination from employment.

4. Misuse of SWAN user credentials, including knowingly sharing passwords, accessing inappropriate data, or failing to adhere to the security & privacy policies outlined in this section, may result in immediate user termination. This termination is at the discretions of the State of Alaska WIC Program Staff and the Department of Health Security Office.
5. An updated WIC Program Service Provider Computer Security Agreement is required for any change in role or staffing requirement that would facilitate a change in SWAN credentials.
6. An updated WIC Program Service Provider Computer Security Agreement is required at the beginning of each state fiscal year for all SWAN and WIC technology users. This acts as an annual renewal & reconciliation for SWAN credentials.

### *B. Security Breach*

1. If there is a breach of security, such as infection of grantee equipment with a computer virus, network compromise, or stolen computer equipment or media with participant data, LAs must immediately contact the WIC Help Desk at [wicSPIRIThelpdesk@alaska.gov](mailto:wicSPIRIThelpdesk@alaska.gov) and provide the following information:

- a. List of missing or compromised equipment
- b. Agency name and number
- c. Location where infection, loss or theft occurred
- d. Date and time infection/loss/theft occurred (actual if known, or estimated)
- e. Circumstances involved
- f. Provide a copy of the police report information if applicable

### *C. Physical Security*

1. Local Agencies must secure WIC computer equipment, hardware, printers, peripheral devices and software at all times, including during transport and storage; storage facilities must be adequately secured.
  - a. When transporting equipment: computers, portable printers, scanners signature pads and should not be left in automobiles overnight. Bring equipment indoors to protect it from theft and extreme temperature changes.
2. LAs must maintain an inventory of their organization's WIC Program computer equipment and verify its accuracy.
3. LAs must protect the security of electronic and hard copy WIC data maintained on the grantee's premises and on grantee computer equipment:
  - a. LAs must maintain written procedures to ensure that unauthorized individuals cannot read, copy, alter, or steal printed or electronic WIC information.
  - b. LAs must maintain written procedures for ensuring that only authorized SWAN users receive or deliver input and output information.
  - c. LAs must maintain written procedures for shredding or otherwise destroying hard copy WIC data when it is no longer needed for WIC Program purposes.
  - d. LAs must maintain written procedures and controls for transporting or mailing



- media or printed output.
- e. LAs must maintain written procedures for sanitizing grantee-owned computer equipment and electronic media used for WIC Program service delivery for reuse or disposal.
  - f. LAs must enable an operating system screen saver with passwords on all computers used to deliver WIC Program services. Desktop timeout must occur after no longer than 15 minutes. This protects the confidentiality of participant data and protects the logged-in user from other staff entering data, making modifications, or Issuing benefits.
4. A workstation must also be locked when not in use or when left unattended. Press Ctrl + Alt + Del and click the Lock Workstation button. LAs must protect the physical security of eWIC cards provided to the LAs for issuance of WIC Program benefits as specified in Policy 1002: eWIC Card Security and Inventory Control and must report lost or stolen eWIC cards immediately to the WIC Program State Office.

### *D. Removable Storage:*

1. Storage of data on removable media or devices is meant for short-term use only and must be removed immediately after its use.
2. All removable storage that contains ANY participant information must be encrypted at the same level as other WIC Program computer equipment.
3. When not in use, store the removable storage media and devices in a locked location, such as a locked desk or locked file cabinet.
4. All removable storage media and devices must be treated as if they contain private information even after they have been erased.
5. WIC associated CD or DVD material, which contains participant data, should be securely erased, broken, or shredded before disposal.

### *E. Training:*

1. LAs must provide training on security policies and security awareness to each WIC employee prior to first use of SWAN, and document such training in the employee's personnel file.
2. LAs must provide update/refresher training on security policies annually to each WIC employee and document such training in the employee's personnel file.

### *F. Compliance:*

1. LAs compliance with SWAN security policy terms and conditions will be included in Management Evaluations conducted by WIC State Office personnel.
2. LAs will be subject to on-site technical audits by State of Alaska personnel at any time during normal business hours.
3. SWAN users *must sign the WIC Technology Security Agreement* prior to receiving login credentials to the SPIRIT system. Signed copies of the document must be maintained in the users' personnel file for the retention period specified in the grantee's personnel policies for personnel documents.



## Alaska WIC Policy & Procedure Manual



4. The State reserves the right to implement additional access/authentication/enforcement tools such as Network Access Controls to enforce SWAN & WIC technology security policies.

### REFERENCE:

7 CFR Part 246

### CROSS REFERENCE:

Job Aid 018: WIC Technology Security Agreement

### DEFINITIONS:

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

**SWAN (SPIRIT Web for Alaska Nutrition)** is the Web-based redesigned WIC MIS based on the previous Alaska WIC MIS, now referred to as SPIRIT Legacy.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
12/22/2014	Released
06/28/2024	Revised
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## Alaska WIC Policy & Procedure Manual

### Section: 500 Organization and Management

#### Policy: 500 Local Agency Staffing Requirements

Effective Date: 06/01/2018

##### **PURPOSE:**

- To ensure the provision of quality professional and authority-based services to WIC participants by outlining the qualifications and responsibilities required for key WIC staff positions.
- This policy specifies the necessary credentials for Local Agency Coordinators and Competent Professional Authorities (CPAs) and provides guidelines for managing staffing vacancies to maintain continuous service delivery.
- Additionally, it mandates that Local Agencies must employ a Registered Dietitian as a permanent staff member to uphold the program's standards and participant access to services.

##### **POLICY: 500 Local Agency Staffing Requirements**

###### Local Agency Staffing Requirements:

The Local Agency Staffing Requirements policy outlines the qualifications needed for staff who coordinate WIC program services, perform participant certifications, and provide nutrition education. This ensures that WIC participants receive high-quality, professional services.

###### *Key Staff Roles*

**WIC Coordinators, Assistant Coordinators, CPAs, and Office Assistants:** These key staff members must be physically present at the Local Agency or satellite clinic. Their presence ensures smooth clinic operations, proper staff supervision, and face-to-face interaction with participants. On-site staff can also fill in during vacations or unexpected absences. Any deviations from this policy need prior approval from the State WIC office.

###### *Staffing Requirements*

**Assistant WIC Coordinator:** If the program size warrants this role, the Assistant Coordinator must meet the same qualifications as the WIC Coordinator.

**Registered Dietitian (RD) or Licensed Nutritionist:** Each Local Agency must have an RD or licensed nutritionist on staff, proportional to the program's caseload. This person can be either a dedicated staff member or the WIC Coordinator. Agencies will be out of compliance if this position is filled by a contract RD or an RD exam-eligible candidate.

###### *Temporary Staffing Solutions*

- If there is a vacancy for the RD/Nutritionist position, agencies can temporarily hire a contract RD. Recruitment for a permanent replacement must start as soon as a





resignation letter is received.

- Contracting with an RD is a short-term solution and must be approved by the State. The contract should specify the weekly hours, scope of work, and budget.
- Temporary RD contracts are allowed for up to one quarter of the fiscal year. If an extension is needed, a written request must be submitted to the State WIC office 15 days before the end of the quarter.

### *Recruitment and Compliance*

- Local Agencies must regularly update the State on their recruitment efforts, including the media and agencies used for recruitment.
- Contact the State WIC office immediately if an agency's RD resigns for further guidance.

### *Required Positions*

- Local Agencies must staff the following positions, adhering to State agency standards:
- Local Agency Coordinator
- Competent Professional Authority (CPA)

By following these guidelines, Local Agencies will ensure they meet staffing requirements and provide excellent service to WIC participants.

### Local Agency Coordinator Staffing Requirement:

Each Local Agency must designate a person responsible for coordinating, managing, and operating the WIC Program. This role, known as the Local Agency Coordinator, requires specific qualifications and experience to ensure effective program oversight.

### *Qualifications for Local Agency WIC Coordinator*

The WIC Coordinator must meet the following qualifications:

- **Education:**
  - A bachelor's degree from an accredited college in public health, health administration, nursing, nutrition, epidemiology, health sciences, health education, family and consumer science with an emphasis in nutrition, community health, biological sciences, or a closely related field.
- **Experience:**
  - Two years of professional experience in administering or providing specialized health care or public health services. Relevant roles include Registered Nurse, Public Health Nurse, Nurse Consultant, Health Program Specialist or Manager, Health and Social Services Planner, Nutritionist, Health Practitioner, Advanced Nurse Practitioner, or Physician's Assistant.

### *Alternative Qualification Path*

- **Substitution:**
  - A bachelor's degree from an accredited college plus five years of current WIC



## Alaska WIC Policy & Procedure Manual



administrative or managerial experience can substitute for the above qualifications, with prior approval from the State of Alaska WIC Program staff.

### *Additional Requirements:*

- **Professional Degree:** The WIC Coordinator position must align with the State of Alaska definitions for professional degree requirements similar to those for a Public Health Specialist I. A Registered Dietitian is also acceptable.
- **Master's Degree:** A master's degree in one of the required fields can substitute for two years of the required work experience.

### Required Training for New WIC Coordinators:

- New WIC Coordinators must complete the required SPIRIT online training within 15 calendar days of hire.
- If the new Coordinator has prior experience with the SPIRIT MIS, they should review the SPIRIT training materials to understand Alaska's specific business practices within 15 calendar days of hire.

### Approval Process for Non-Standard Candidates:

If a candidate does not meet the minimum requirements but is considered viable by the Local Agency:

1. Send the job description and candidate's resume to the State WIC office.
2. Schedule a meeting with the State WIC office to discuss the candidate's qualifications.
3. Obtain State WIC office approval before hiring the candidate.
4. Upon hire, the candidate must pass the Alaska WIC CPA Tests. If the test is not passed, the candidate must complete CPA modules and pass the test before the end of the probationary period.
5. The probationary period for such hires will be at least three months.

### *Waiver Process:*

- A waiver for the qualifications can be considered by the Local Agency in collaboration with the State WIC office. Final approval rests with the State WIC office.
- By adhering to these guidelines, Local Agencies ensure that their WIC Coordinators are well-qualified to manage and operate the WIC Program effectively.

### Local Agency Coordinator Vacancy:

#### Short-Term Vacancy ( $\leq 1$ month)

Once notification of a Coordinator vacancy occurs, the Local Agency contingency plan should be implemented to cover the position. For short-term vacancies of  $\leq$  a month acceptable coverage can be through existing staff or qualified contractors.

#### Long-Term Vacancy ( $\geq 1$ month)

Any Local Agency with a WIC Coordinator vacancy must have weekly meetings with state



## Alaska WIC Policy & Procedure Manual



Program staff to review the recruitment progress and guidance on program operations until a qualified WIC Coordinator is hired. Call the State office as soon as a vacancy is identified to discuss implementation of the Local Agency contingency plan and recruitment process.

### Competent Professional Authority (CPA):

Local Agencies must employ only qualified individuals as Competent Professional Authorities (CPAs) to deliver WIC Nutrition Services. A CPA is authorized to determine nutritional risk, provide nutrition education based on assessment, and prescribe supplemental foods.

### *Eligible CPAs:*

The State WIC Office can authorize the following individuals to serve as CPAs:

- Physicians
- Nutritionists with a bachelor's or master's degree in nutritional sciences, community nutrition, clinical nutrition, dietetics, public health nutrition, or home economics with an emphasis in nutrition
- Registered dietitians
- Registered nurses
- Physician's assistants certified by the National Committee on Certification of Physician's Assistants or the State medical certifying authority
- Alaska WIC certified CPAs who have passed the Alaska WIC Competent Professional Authority certification examination

### *Required CPA Competencies and Knowledge*

CPAs must have expertise in the following areas:

- Principles of life-cycle nutrition
- Nutrition assessment processes
- Techniques for collecting anthropometric and hematological data
- Effective communication skills
- Multicultural awareness
- Critical thinking abilities

### Local Agency Registered Dietitian Staffing Requirement:

Every WIC grantee must have a Registered Dietitian (RD) or Nutritionist as part of their permanent staff. This position does not need to be full-time but must have managerial and supervisory authority over WIC nutrition services.

### *Responsibilities of the RD/Nutritionist*

The RD/Nutritionist is responsible for:

- Training WIC staff
- Developing and implementing the nutrition education plan
- Selecting nutrition education materials
- Implementing new and revised nutrition risk criteria



## Alaska WIC Policy & Procedure Manual



- Applying WIC policy changes at the state and federal levels
- Promoting and supporting breastfeeding
- Approving ENPR (Alaska WIC Nutrition Program Enteral Nutrition Prescription Request Form for Therapeutic Formulas and Medical Foods)
- Developing high-risk nutrition care plans and overseeing their implementation by the CPA (Competent Professional Authority)

### Staffing Requirements

- Local WIC agencies must have an RD or licensed nutritionist on staff, proportional to the program's caseload. This person may be a staff member or the WIC Coordinator.
- Agencies will be out of compliance if this position is filled by a contract RD or an RD exam-eligible candidate

### Handling Staff Vacancies

- If there is a vacancy, agencies may temporarily hire a contract RD until a permanent replacement is found.
- Recruitment should start as soon as a resignation letter is received.
- Using a contract RD should be a short-term solution. The contract must be approved by the State and include the number of weekly hours, scope of work, and budget.
- Agencies must provide periodic updates to the State on recruitment efforts, including media used and agencies contacted.

### Temporary Contracts

- A contract RD can be hired for up to one quarter of the fiscal year. If an extension is needed beyond this period, a written request must be submitted to the State WIC office 15 days before the end of the quarter.
- Notify the State WIC office immediately when the current RD gives resignation notice for further guidance.

### REFERENCE:

Federal Regulations: 7CFR Ch. II

Subpart B- State and Local Agency Eligibility- Agreements with Local Agencies  
246.6(b)(2)

Federal Regulations: 7CFR Ch. II

Subpart C- Participant Eligibility-Certification of Participants- Certification of Participants  
246.7(e)

### CROSS REFERENCE:

501 Local Agency Clinic Hours and Staffing Availability



## DEFINITIONS:

**Competent Professional Authority (CPA):** An individual of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and counseling, and prescribe supplemental foods.

**Paraprofessional CPA:** A person employed to assist or expand the efforts of professional CPAs. A health professional will supervise the paraprofessional’s direct contact with WIC participants and their conducting of education programs.

**Professional CPA:** A person with a bachelor’s or master’s degree in a health profession, such as nutrition, nursing or health education. Includes physicians, physician assistants, registered nurses, dietitians, or public health educators.

**WIC Nutritionist:** A nutrition professional working in WIC who meets one or more of the following qualifications: a Master’s Degree in nutrition; a Registered Dietitian (RD) with the Academy of Nutrition and Dietetics, or eligible for RD registration; an Alaska Licensed Dietitian.

## POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## **Alaska WIC Policy & Procedure Manual**

### **Section: 500 Organization and Management**

#### **Policy: 501 Local Agency Clinic Hours and Staffing Availability**

Effective Date: 06/01/2018

##### **PURPOSE:**

- To outline requirements for Local Agency clinic hours and staffing availability.
- To describe the State WIC Office requirement for Local Agencies to plan for future unforeseen circumstances affecting Local Agency staff.

##### **POLICY: 501 Local Agency Clinic Hours and Staffing Availability**

###### **Clinic Hours and Staffing Availability:**

Permanent and satellite clinics make up the composition of Local Agency WIC service sites for WIC participants. Permanent WIC clinics constitute a static clinic site, serving applicants/participants during standard times and days of the week. Satellite clinics are clinic sites that support the operation of the WIC Local Agency but are not considered primary clinics in the agency. The satellite clinics can be rotating in location, days and times available for WIC business. Satellite clinics are sites visited during village travel, service provision to special populations such as the Infant Learning Program or a church serving mainly migrant populations.

To ensure potential applicants and WIC participants have access to services, WIC local agencies serving greater than 500 participants/month are required to be open five days per week, eight hours/day. Satellite clinics can have reduced hours depending on caseload. Local Agencies' permanent and satellite clinics are encouraged to offer extended or weekend hours, if feasible, to accommodate the needs of working families or through appointments outside standard working hours, as needed.

Local Agency/clinics are encouraged to be available (i.e. through staggered schedules) during lunch hours to accommodate employed applicants/participants.

Key staff; WIC Coordinators, WIC Assistant Coordinators, CPAs and office assistant staff are expected to be on site at their designated office to facilitate WIC processes and clinic flow. On-site staffing is necessary to cover staff gaps during scheduled vacations and unexpected employee illnesses in addition to the day-to-day WIC duties. Any exception to this policy requires State WIC office approval before implementation.

Any Local Agency with more than one clinic site is responsible for updating those staff with policy changes, management findings and other information pertinent to the management and operation of the WIC program.



### Local Agency Staff Contingency Plans

Contingency plans must include back-up plans on how an agency will be managed and operated in the event that staff are out of the office for greater than five business days.

The plan must include contact information, who will answer the phones, receive/distribute applications, schedule appointments, complete certifications, issue benefits, provide nutrition education and or high-risk referrals and counseling, complete and submit financial and quarterly reports, etc.

The plan must also address days and hours of operation; and, alternate contact (with name and telephone number) if days and hours of operation are reduced due to staff absences.

The State WIC Office must be notified prior to a known absence of 10 business days or more.

Updates to contingency plans must be forwarded to the state for review and approval.

### REFERENCE:

State Staffing Requirements:

Federal Regulations: 7CFR Ch. II

- Subpart A- General- Definitions
  - 246.2
- Federal Regulations: 7CFR Ch. IISubpart A- General- Administration
  - 246.3(e) to (f)

Local Agency Staffing Requirements:

Federal Regulations: 7CFR Ch. II

- Subpart B- State and Local Agency Eligibility- Agreements with Local Agencies
  - 246.6(b)(2)

Federal Regulations: 7CFR Ch. II

- Subpart C- Participant Eligibility-Certification of Participants- Certification of Participants
  - 246.7(e)

### CROSS REFERENCE:

500 Local Agency Staffing Requirements

608 Reimbursement to Local Agencies

### DEFINITIONS:

**Clinic** means a facility where applicants are certified.



## Alaska WIC Policy & Procedure Manual



**Contingency Plan:** a course of action designed to help an organization respond effectively to a significant future incident, event or situation that may or may not happen.

**Local Agency means:**

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**State Agency (SA):** The health department or comparable agency of each State; an Indian tribe, band, or group recognized by the Department of the Interior; an intertribal council or group which is an authorized representative of Indian tribes, bands, or groups recognized by the Department of the Interior and which has an ongoing relationship with such tribes, bands, or groups for other purposes and has contracted with them to administer the Program; or the appropriate area office of the Alaska Department of Health.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## Alaska WIC Policy & Procedure Manual Section: 500 Organization and Management

### Policy: 502 Local Agency Report and Form Requirements

Effective Date: 06/01/2018

#### PURPOSE:

To specify the reports Local Agencies must complete and submit to the State WIC Office. To clarify the use of required WIC clinic forms for operational efficiency and consistency across clinics.

#### POLICY: 502 Local Agency Report and Form Requirements

##### Local Agency Reports:

The following reports must be completed by the Local WIC Agency:

- Cumulative Fiscal Report
- General Ledger
- Time Study
- Narrative Program
- Local Agency Equipment Inventory
- Logic Model (if requested)

A Job Aid 019 exists for this policy – named 20XX Reporting Schedule, which will be updated annually by the State of Alaska. Required reports and due dates are listed in this Job Aid. Please note reports must be submitted via GEMS by their due date. Annually templates are updated within GEMS.

The LA may be asked to complete:

- Results Based Budgeting
- Vendor Reports

##### WIC Clinic Forms:

The State WIC Office has developed standard forms for clinic use for operational efficiencies and to provide consistency in clinics across the state. Some forms are used daily (Applications), monthly (Time Studies), and quarterly (Narrative Program Report). Others are used as needed such as Improper Action Form. If a LA alters a standard WIC form or develops one at the LA, the form must be submitted to the State agency and approved prior to its use and dissemination.

#### REFERENCE:

Federal Regulations: 7CFR Ch. II

Subpart E- State Agency Provisions- Program Costs

246.14(a)(1) and (c)(1) through (d)



## Alaska WIC Policy & Procedure Manual



Federal Regulations: 7CFR Ch. II  
Subpart B- Participant Eligibility- State Plan  
246.4 (a)(11)(iv)

Federal Regulations: 7CFR Ch. II  
Subpart C- Participant Eligibility- Certification of Participants  
246.7 (i)(1-10)

Federal Regulations: 7CFR Ch. II  
Subpart E- State Agency Provisions- Food Delivery Systems  
246.12 (q)

Federal Regulations: 7CFR Ch. II  
Subpart G- Miscellaneous Provisions- Records and Reports  
246.25 (a)(1-3)

### CROSS REFERENCE:

Job Aid 019: 20XX Reporting Schedule  
(This job aid will be updated every year with updated information).

### DEFINITIONS:

**Clinic** means a facility where applicants are certified.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with § 246.5;
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**WIC** means the Special Supplemental Nutrition Program for Women, Infants and Children authorized by section 17 of the Child Nutrition Act of 1966, 42 U.S.C. 1786.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed



## Alaska WIC Policy & Procedure Manual



--	--

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual Section: 500 Organization and Management



### Policy: 503 Clinic Operations

Effective Date: 03/01/2017

#### PURPOSE:

To ensure WIC participants have access to services by addressing barriers to enrollment and service provision and to guide the planned closure of WIC Local Agencies or clinics. It aims to facilitate continuous service delivery and minimize disruption for participants by mandating adequate notification and transfer procedures during clinic closures.

#### POLICY: 503 Clinic Operations

##### Access to Services:

Local Agency WIC service sites consist of permanent and satellite clinics to ensure WIC participants have access to services.

##### *Clinic Types and Operational Requirements*

- **Permanent Clinics:** These are fixed locations that serve the general public during regular business hours and days of the week. Local Agencies serving more than 500 participants per month must be open five days a week, eight hours a day. Refer to Policy 501: Local Agency Clinic Hours and Staffing Availability.
- **Satellite Clinics:** These are additional service sites that support the Local Agency but are not primary clinics. They may operate on rotating locations, days, and times. Examples include village travel sites, services for special populations like the Infant Learning Program, or churches serving primarily migrant populations. Migrant populations include individuals and their families employed seasonally in agriculture, logging, or fishing who have temporary residence for employment. These clinics may have reduced hours depending on the caseload but should strive to offer extended or weekend hours to accommodate working families and provide appointments outside standard hours when needed.

##### *Availability During Lunch Hours*

- Agencies should arrange staggered schedules to remain available during lunch hours to accommodate working applicants and participants.

##### *Coordination of Hours*

- Satellite clinic hours should complement those of the permanent clinic to ensure continuous service.
- Agencies with multiple clinic sites must ensure all staff are updated on policy changes, management findings, and other essential updates in the WIC program.



### *Replacing Permanent Clinics with Satellite Clinics*

- If considering replacing a permanent clinic with a satellite clinic, ensure the new clinic's hours align with the original WIC service plan as outlined in the grant application.
- Evaluate factors such as the number of potential eligible Participants, anticipated staffing, the location of other nearby WIC clinics, and internet connectivity when opening a satellite clinic.

### *Communication and Updates*

- **Multi-Site Agencies:** Agencies with more than one clinic site must keep all staff updated on policy changes, management findings, and other relevant information for the effective management and operation of the WIC program.

### WIC Appointments versus Walk-In Services:

Clinic staff must accommodate all requests for WIC services, whether by appointment or walk-in, to ensure participants receive the support they need.

### *Appointments and Walk-In Services*

- **Service Flexibility:** Clinics must offer both scheduled appointments and walk-in options. If a clinic primarily operates on a walk-in basis, they must still provide appointments for those who prefer or need them.
- **Participant Choice:** Front desk staff should inform participants of both options without promoting one over the other. The choice between an appointment and walk-in should be based on the participant's preference and needs, not the clinic's convenience.

### *Key Staff Requirements*

- **Presence:** WIC Coordinators, Assistant Coordinators, CPAs, and office assistants must be present at the clinic to manage processes, ensure smooth clinic flow, and supervise staff.
- **Coverage:** On-site staff should be available to cover for colleagues during vacations or unexpected absences, and to perform daily duties, including face-to-face interactions with participants.
- **Exceptions:** Any deviation from this staffing policy requires prior approval from the State WIC office.

### Notification of Clinic Changes

Occasional changes to standard office hours due to travel, meetings, or illness require prompt notification to ensure participants and staff are aware of the changes and have alternative contact options.

### *Procedures for Notification of Clinic Changes*

1. **Update Notifications:**



## Alaska WIC Policy & Procedure Manual



**Phone Messages:** Update outgoing phone messages to reflect temporary changes in clinic hours or staff availability. Always include alternative contacts for emergencies.

**Email Accounts:** Set up out-of-office replies with the dates of absence and contact information for immediate assistance.

**Door Signs:** Post signs on the clinic door detailing the closure or temporary absence, including alternate contacts.

### 2. **Contact Information:**

**WIC Coordinator's Phone Message:** Should always specify available days and times and provide a contact name and number for assistance when unavailable.

**Out-of-Office Emails:** Should include the days of absence and a contact number for immediate help.

### 3. **Clinic Accessibility:**

- Ensure that WIC agency clinics remain open and accessible every week of the fiscal year.

### Clinic Closure:

Planning for a Local Agency or clinic closure requires thorough preparation and timely communication to ensure that WIC participants continue to receive services without interruption. This policy outlines the necessary steps to follow when closing a WIC clinic. Contact the State WIC Office for further guidance if needed.

### *Planning and Notification*

- **Grant Agreements:** WIC services must be provided through the end of the fiscal year for which the grant is approved. If a Local Agency plans to discontinue WIC services, it will take effect on July 1st after the current grant year ends.
- **State Approval:** Local Agencies must obtain approval from the State WIC Office before closing a clinic. Notify the State office at least 90 days in advance and get approval before beginning any closure steps.

### *Participant Notification*

- **Timing:** Notify participants at least three months before the closure to allow time for adjustment.
- **Written Notice:** Inform Participants in writing, including the closure date, new clinic options with names, addresses (physical and mailing), and phone numbers.
- **Coordination:** Work with the receiving WIC agency to ensure a smooth transition for Participants.

### *Service Continuation*

- **Service Provision:** Continue providing services up until the closure. Offer anticipatory services as far out as federal regulations allow.
- **Record Retention:** Keep participant paperwork that is not uploaded in the SPIRIT MIS, for one year after termination, then archive for an additional two years. Ensure records



## Alaska WIC Policy & Procedure Manual



are accessible for auditing. Refer to Policy--??

### *Record Handling*

- **Organization:** Store records clearly marked by state fiscal year and organized alphabetically by guardian name within the storage box.
- **Secure Transfer:** Use postal tracking for shipping boxes to another location. Secure boxes at all times if moving to another clinic.
- **Record Review:** Dispose of records outside the retention schedule securely to protect confidential information.

### *Inventory Management*

- **Accountability:** Inventory and account for all items purchased with WIC funding before transfer. Resolve any lost or unaccounted items before closure.
- **Transfer Coordination:** Discuss equipment and supply transfer with the new WIC office and State WIC office. Update inventory records at the new agency and forward them to the State office.
- **Disposal of Nonfunctioning Equipment:** Use the State of Alaska's Property Salvage/Destruction Request form to dispose of nonfunctional equipment.

### REFERENCE:

Federal Regulations: 7CFR Ch 246.7

### CROSS REFERENCE:

501 Local Agency Clinic Hours and Staffing Availability.

### DEFINITIONS:

**Applicants:** means pregnant/breastfeeding/postpartum people, infants, and children who are applying to receive benefits. Applicants include individuals who are currently participating in the program but are re-applying before their certification expires.

**Clinic** means a facility where applicants are certified.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with § 246.5;
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or



## Alaska WIC Policy & Procedure Manual



(d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Participant records:** Documents, regardless of medium or physical form, containing information relating to case histories, health records, treatment charts, progress reports, or accounts of the participants of any provider that are maintained in the regular course of business.

**Participant services:** Tasks or costs pertaining to certifying participants, processing applicants, delivery of food benefits, or other participant services.

**WIC** means the Special Supplemental Nutrition Program for Women, Infants and Children authorized by section 17 of the Child Nutrition Act of 1966, 42 U.S.C. 1786

**WIC records:** Documents containing information relating to WIC services provided to WIC participants; WIC program operations; and local program staff training, regardless of medium or physical form.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## Alaska WIC Policy & Procedure Manual Section: 500 Organization and Management

### Policy: 504 Program Integrity: Fraud Prevention

Effective Date: 05/01/2017

#### PURPOSE:

To prevent participant and clinic fraud in the distribution of WIC benefits by implementing monitoring and evaluation procedures. This policy aims to identify and mitigate potential fraud risks through regular reporting and tracking measures.

#### POLICY: 504 Program Integrity: Fraud Prevention

##### State Monitoring of Mailed Off-Site Benefits:

The State WIC office will focus on fraud prevention by monitoring, evaluating and identifying fraud through ad hoc reports. The State Office will identify risk factors associated with potential participant and WIC employee fraud and design ad hoc reports to monitor for fraud.

Risk factors the State may look at:

- Redemption data
- Staff activity to see if there are trends that certifiers are certifying more clients than expected
- Trends of how Food Instruments (FI) are being issued (mailed/box/on-site pickup)
- # Clients with the same address
- # Households with the same address
- Clients with frequently changing addresses
- Adding infants on when an address changes
- Population of regions compared to caseload
- Larger number of infants than expected for an area's population
- Exclusively breastfed infants during the first month that switch to fully formula feeding infants during the second or third month of life
- # Infants under six months of age without corresponding mothers

##### Receiving eWIC Cards at Clinic

Participants or alternates who pick up an eWIC card issued at a clinic must sign an electronic receipt, available in SPIRIT, verifying that they received the card. No follow-up is required.

##### Receiving eWIC Cards by Mail

Clinics have the option to mail eWIC cards to participants. The eWIC cards must be securely attached to the State form, "Here Is Your Alaska eWIC Card". The form must be accompanied by a signature form and stamped envelope addressed to the WIC clinic. When received, the signed form must be retained as proof of the participant's receipt of the eWIC card.



### Notification of State Agency for Suspected Fraud

The State WIC Office must be notified in instances of suspected participant or employee fraud and abuse. The State WIC Office staff will collect and maintain a log of information regarding cases of suspected participant and employee fraud and abuse. Information that should be relayed to the State WIC Office is the type of fraud or abuse (employee/participant), Local Agency name, Name of Offender, nature of the detected fraud/abuse and the associated dollar loss.

### REFERENCE:

- Federal Regulations: 7CFR Ch. II Subpart E- State Agency Provisions- Food Delivery Systems
  - 246.12(r)(2)

### CROSS REFERENCE:

Job Aid 024: Here is your Alaska eWIC Card Form

Job Aid 023: Preventing Fraud and Abuse Phone Survey Questions

### DEFINITIONS:

**Applicants:** means pregnant/breastfeeding/postpartum people, infants, and children who are applying to receive benefits. Applicants include individuals who are currently participating in the program but are re-applying before their certification expires.

**Client services:** Tasks or costs pertaining to certifying participants, processing applicants, delivery of food benefits, or other participant services.

**Clinic** means a facility where applicants are certified.

**Employee fraud and abuse** means the intentional conduct of a State, Local Agency or clinic employee which violates program regulations, policies, or procedures, including, but not limited to, misappropriating or altering food instruments or cash-value vouchers, entering false or misleading information in case records, or creating case records for fictitious participants.

**eWIC** is Electronic WIC benefits

**eWIC Card** is a magnetic stripe card used to purchase WIC authorized foods or formulas from a WIC family's Electronic Benefit Account (EBA). Each card has a 16-digit Primary Account Number (PAN). Also referred to as a "food instrument."

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);



- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Participant violation** means any deliberate action of a participant, parent or caretaker of an infant or child participant, or proxy that violates Federal or State statutes, regulations, policies, or procedures governing the Program. Participant violations include, but are not limited to, deliberately making false or misleading statements or deliberately misrepresenting, concealing, or withholding facts, to obtain benefits; selling or offering to sell WIC benefits, including cash-value vouchers, food instruments, EBT cards, or supplemental foods in person, in print, or online; exchanging or attempting to exchange WIC benefits, including cash-value vouchers, food instruments, EBT cards, or supplemental foods for cash, credit, services, non-food items, or unauthorized food items, including supplemental foods in excess of those listed on the participant's food instrument; threatening to harm or physically harming clinic, farmer, or vendor staff; and dual participation.

**Participation** means the sum of:

- (1) The number of persons who received supplemental foods or food instruments during the reporting period;
- (2) The number of infants who did not receive supplemental foods or food instruments but whose breastfeeding mother received supplemental foods or food instruments during the report period; and
- (3) The number of breastfeeding women who did not receive supplemental foods or food instruments but whose infant received supplemental foods or food instruments during the report period.

**State agency** means the health department or comparable agency of each State; an Indian tribe, band or group recognized by the Department of the Interior; an intertribal council or group which is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior and which has an ongoing relationship with such tribes, bands or groups for other purposes and has contracted with them to administer the Program; or the appropriate area office of the Alaska Department of Health.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

**WIC** means the Special Supplemental Nutrition Program for Women, Infants and Children



## Alaska WIC Policy & Procedure Manual



authorized by section 17 of the Child Nutrition Act of 1966, [42 U.S.C. 1786](#)

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual Section: 500 Organization and Management



### Policy: 505 Program Integrity: Conflict of Interest

Effective Date: 06/30/2014

#### PURPOSE:

To prevent conflicts of interest between local WIC agencies and authorized WIC vendors by establishing clear guidelines and requiring staff to sign a conflict-of-interest statement.

#### POLICY: 505 Program Integrity: Conflict of Interest

##### Conflict of Interest: Local Agencies and Vendors:

Each Local Agency must establish a written conflict of interest policy and, through education and supervision of its staff, ensure that no conflict of interest exists between the Local Agency and any authorized WIC vendor. The Local Agency must make available to the State agency staff its written conflict of interest policy.

To ensure the integrity of the program, all Local Agency staff members must sign a conflict-of-interest statement upon employment and annually, or anytime there is a change in the employee's status, to coincide with the Local Agency's contract cycle. The Local Agency may use the Job Aid 020: Alaska WIC Program Employee Conflict of Interest Statement or develop its own statement providing it contains, at a minimum, the same criteria reflected in the State agency developed statement. The employee's supervisor must also sign and date the statement. The Local Agency must make available to the State agency staff upon request the completed conflict of interest statement for each WIC employee.

At a minimum, the written conflict of interest policy must:

- require staff be trained to refrain from directing or recommending a WIC participant choose or stay away from a specific vendor to redeem food benefits;
- require staff be educated against knowingly making a decision intended to benefit or to disadvantage a specific authorized WIC vendor;
- prohibit staff from engaging in any promotion with or receiving gifts, financial benefits, gratuities or incentives from an authorized WIC vendor; and
- prohibit the owner or spouse of an owner of a WIC authorized vendor from being employed concurrently by WIC.

#### REFERENCE:

Federal Regulations:

- 7 CFR 246.12(h)(xix)



## Alaska WIC Policy & Procedure Manual



- 7CFR 246.12(r)
- 7 CFR 246.12(t)
  - Subpart C- Participant Eligibility

### CROSS REFERENCE:

Job Aid 020: Alaska WIC Program: Employee Conflict of Interest Statement

### DEFINITIONS:

**Conflict of interest:** Any relationship, real or apparent, which jeopardizes the fair and objective administration of the program, as identified between the WIC program employee and an applicant, participant, staff member, farmer or vendor.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**State agency** means the health department or comparable agency of each State; an Indian tribe, band or group recognized by the Department of the Interior; an intertribal council or group which is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior and which has an ongoing relationship with such tribes, bands or groups for other purposes and has contracted with them to administer the Program; or the appropriate area office of the Alaska Department of Health.

**Vendor** means a sole proprietorship, partnership, cooperative association, corporation, or other business entity operating one or more stores authorized by the State agency to provide authorized supplemental foods to participants under a retail food delivery system. Each store operated by a business entity constitutes a separate vendor and must be authorized separately from other stores operated by the business entity. Each store must have a single, fixed location, except when the authorization of mobile stores is necessary to meet the special needs described in the State agency's State Plan in accordance with [§ 246.4\(a\)\(14\)\(xiv\)](#).

**WIC** means the Special Supplemental Nutrition Program for Women, Infants and Children authorized by section 17 of the Child Nutrition Act of 1966, [42 U.S.C. 1786](#)

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed



## Alaska WIC Policy & Procedure Manual




**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual Section: 500 Organization and Management



### Policy: 506 Program Integrity: Separation of Duties

Effective Date: 03/01/2021

#### PURPOSE:

- To ensure the proper division of responsibilities in the issuance of electronic food benefits to prevent fraud and abuse within the WIC program.
- To outline the procedures for maintaining “separation of duties” and provides guidance for situations where staffing limitations might pose a challenge.

#### POLICY: 506 Program Integrity: Separation of Duties

Food benefits are issued by Local Agency CPAs, RD's, coordinators, nutritionists, and authorized clerical staff.

- Separation of duties is a standard accountability and security practice used when food benefits change hands.
- It is important to target efforts in areas that may be susceptible to fraud or abuse.
- All Local Agencies with multiple staff must divide income eligibility and nutritional risk determination duties between staff so that there is separation in these duties. Either person may issue food benefits. Having one staff person check identification or residency and another staff person conduct the remainder of the certification does not meet the regulatory intent of separation of duties requirements.

The State WIC Office provides ad hoc reports located in SPIRIT Solutions to help manage the required monitoring when an agency:

1. has only one staff member,
2. for clinics with only one staff member or
3. for occasions when staffing does not allow for separation of duties to occur. Occasions such as this includes inadequate staffing due to annual leave, illness, vacancies, and travel.

#### Reports for Verifying Compliance with Separation of Duties:

- Identifying participants whose records show that the same person created an income contact as created the Risk Factor contact. The SPIRIT report is Separation of Duties – Same Contact.
- Identifying SPIRIT users as participants or authorized representatives. The SPIRIT report is Separation of Duties – Users Connected to participants.
- Identifying records of infants with no corresponding mother participants. The SPIRIT report is Separation of Duties – Infants Without Participating Mother.





### *Situations:*

1. Only one staff person present at the clinic and determining eligibility for all certification criteria and issuing food benefits for all participants in a clinic. It is recommended, when possible, to rotate different staff at the clinic so the same staff person is not the only person known at the small clinic. The Local Agency WIC Coordinator must conduct a post review of:
  - All non-breastfeeding certification records. Non-breastfeeding infants include infants receiving any amount of formula at certification.
  - 20% of a random sample of remaining certification records.

The review must be done within two weeks of the certification. Run reports weekly to identify participants selected for the post review.

2. When there is only one staff person at the Local WIC Agency determining eligibility for all certification criteria and issuing food benefits for all participants in a clinic, the State WIC office will do the monitoring for this situation.
3. Clinics with multiple WIC staff that allow one staff person to perform all eligibility and certification functions including issuing food benefits. The Local WIC Coordinator must conduct a post review of:
  - All non-breastfeeding infant certification records. Non-breastfeeding infants include infants receiving any amount of formula at certification.
  - 20% of a random sample of remaining certification records.

The review must be done within two weeks of the certification. Run reports weekly to identify participants selected for the post review. Additionally:

- 10% of the clinic's certification files must be reviewed every six months.
4. Grantees providing services in a clinic staffed by only one person will be monitored by the Local WIC Coordinator.

All reviews are for certification records only. This does not include Mid Certification Assessment, secondary nutrition education, or food package changes made to records, including breastfed infants changing food packages to include formula.

Review documents should be kept on-site and available for monitoring during state management evaluations, federal management evaluations and for legislative audits. Records are kept one year after termination of the participant from the program. In addition, the file must be archived for an additional two years. In total the documents must be maintained for three years.

5. When a WIC staff member is also a WIC participant or a guardian of a WIC client: The certification process must be completed by another WIC employee following the



separation of duties policy. If the WIC staff member as the WIC client or guardian is the only staff member qualified to certify in the clinic or Local Agency, the certification process must be done by another Local Agency. The certifying agency staff will issue the food benefits directly to the participant.

6. When a WIC staff member is certifying close relatives and friends:  
Clinic staff who is neither related to nor a friend of the certifying authorized representative must certify and issue food benefits. In the case where an agency is so small that this practice is not practical to accommodate, additional oversight by the Local Agency WIC Coordinator is necessary. The Local WIC Coordinator must conduct a post-review of all such records within two weeks of the certification.
7. Any Local Agency (LA) may be asked to accept, transfer, certify, and issue food benefits to participants from another agency where a conflict of interest arises related to the certification of relatives in an agency with only one competent professional authority (CPA). These participants count towards the caseload numbers of the certifying LA.

### *Post Review Tools*

Local Agencies must use the State WIC office developed tools to conduct the post review. Refer to the Job Aids 022: Separation of Duties Post Review Form. Post reviews must occur within two weeks of the certification. Run the Separation of Duties SPIRIT reports weekly to identify participants selected for the review. WIC agencies have the option to either do a phone survey or a file review.

The phone survey may be done by calling, emailing, texting or through an automated survey tool. If the survey tool is selected by the local WIC agency to do post reviews, and there is no response from the client, a file review can be completed in place of the survey.

It is critical for Local WIC agencies to recognize that in order to maintain the integrity of the WIC Program, adequate safeguards must be in place to prevent fraud and abuse. Make every effort in your program to separate duties according to the guidance, so that post review of records is kept to a minimum. Examine each clinic's work flow to determine if a change in clinic flow can help to support separation of duties. Situations such as travel or multiple clinics leaving one staff determining eligibility for all certification criteria and issuing food benefits for all participants could potentially have a separation of duty by:

- Having another staff member at a separate Local Agency clinic do the income verification on behalf of the one person staffed office. SPIRIT is flexible such that staff at separate offices could access the income screen and determine income eligibility with scanned copies of income and a Family Information form (documenting household size) in SPIRIT.
- While on travel status, have the local WIC office support the process by having the staff back at the office do the income verification. SPIRIT is flexible such that staff at different locations can access the income screen and determine income eligibility based on scanned copies of income and a Family Information form (documenting household size)



## Alaska WIC Policy & Procedure Manual



in SPIRIT.

- While on travel status, gather the income documents and the Family Information form. Do all other certification duties with the exception of verifying and entering income into the SPIRIT system. Have someone at the local WIC office verify income eligibility and enter into SPIRIT after the traveler returns to the main WIC office.
- Consider having two staff members travel together so separation of duties can be maintained while on travel status.
- Train all office staff to do income verification to cover for vacancies and unexpected absences.
- Have one CPA verify income and another CPA assign risk factors if clerical staff is unavailable to determine income eligibility separately.

### REFERENCE:

State WIC Office based on:

WIC Federal Regulations Section 246.4(a)(26)

WIC Policy Memorandum #2016-5 Separation of Duties at WIC Local Agencies

### CROSS REFERENCES:

Job Aid 022 : Separation of Duties Post Review Form

Job Aid 023: Preventing Fraud and Abuse Phone Survey Questions

### DEFINITIONS:

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Separation of Duties:** A standard accountability/security practice to separate income eligibility from risk assessment.

**State agency** means the health department or comparable agency of each State; an Indian tribe, band or group recognized by the Department of the Interior; an intertribal council or group which is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior and which has an ongoing relationship with such tribes, bands or groups for other purposes and has contracted with them to administer the Program; or the appropriate area office of the Alaska Department of Health.



**Vendor** means a sole proprietorship, partnership, cooperative association, corporation, or other business entity operating one or more stores authorized by the State agency to provide authorized supplemental foods to participants under a retail food delivery system. Each store operated by a business entity constitutes a separate vendor and must be authorized separately from other stores operated by the business entity. Each store must have a single, fixed location, except when the authorization of mobile stores is necessary to meet the special needs described in the State agency's State Plan in accordance with [§ 246.4\(a\)\(14\)\(xiv\)](#).

**WIC** means the Special Supplemental Nutrition Program for Women, Infants and Children authorized by section 17 of the Child Nutrition Act of 1966, [42 U.S.C. 1786](#)

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual Section: 500 Organization and Management



### Policy: 507 Program Integrity: Dual Participation

Effective Date: 01/30/2013

#### PURPOSE:

To define “dual participation” within the WIC Program, provide guidance for handling instances of dual participation, and establish procedures for investigation and penalties when a participant is suspected of receiving benefits from more than one Local Agency simultaneously.

#### POLICY: 507 Program Integrity: Dual Participation

##### Dual Participation:

Dual participation means simultaneous participation in the program in one or more than one WIC clinic during the same period. Each program participant and Authorized Representative must be informed of the illegality of dual participation.

Federal regulations make both the Local Agencies and the State WIC Office responsible for the prevention and detection of dual participation within each Local Agency and between Local Agencies. The local WIC agency must work with the state and other clinic or agency involved, to investigate and follow-up suspected dual participation within 120 days.

##### Action to Take for Dual Participation

Participants intentionally participating in multiple sites must receive a mandatory one-year disqualification. Repayment of benefits will be required. The mandatory disqualification may not be imposed if, (1) full restitution is made or a repayment schedule is agreed upon, or, (2) in the case of a participant who is an infant, child, or under age 18, the Local Agency approves the designation of a proxy. A participant may reapply before the end of a mandatory disqualification period if full restitution has been made or a repayment schedule agreed upon or, in the case of a participant who is an infant, child, or under age 18, the Local Agency approves the designation of a proxy.

##### Dual Participation Penalties

A participant found in violation due to dual participation will be immediately removed from one of the agencies or clinics. Where deliberate misrepresentation is involved, and it has been verified and documented, the State WIC Office must be notified. The participant will be terminated from both programs for one year, may be prosecuted under law, and must pay back benefits received if it is verified that the participant has intentionally lied or withheld the truth.

Mandatory one year disqualification from the program will not be applied if the participant pays back benefits in full or a repayment schedule is agreed on, or in the case of a participant



who is an infant, child, or a woman under age 18 with an approved designated proxy.

### REFERENCE:

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)

- Subpart A- General- Definitions
  - 246.2
- Subpart C- Participant Eligibility- Certification of Participants
  - 246.7 (j)(1)
  - 246.7 (l)(l)

### DEFINITIONS:

**Clinic** means a facility where applicants are certified.

**Disqualification** means the act of ending the Program participation of a participant, authorized food vendor, or authorized State or Local Agency, whether as a punitive sanction or for administrative reasons.

**Disqualified:** Termination of a participant from WIC and cessation of WIC benefits for a specific amount of time, due to a participant violation. The participant may reapply for benefits at any time after the sanction period is over.

**Dual Participation:** Simultaneous participation in more than one WIC program (more than one state or more than one local clinic).

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with § 246.5;
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Participation** means the sum of:

- (1) The number of persons who received supplemental foods or food instruments during the reporting period;



## Alaska WIC Policy & Procedure Manual



- (2) The number of infants who did not receive supplemental foods or food instruments but whose breastfeeding mother received supplemental foods or food instruments during the report period; and
- (3) The number of breastfeeding women who did not receive supplemental foods or food instruments but whose infant received supplemental foods or food instruments during the report period.

**Restitution:** Reimbursement to the state WIC program for the cash value of program benefits received by a participant as a result of a violation.

**State agency** means the health department or comparable agency of each State; an Indian tribe, band or group recognized by the Department of the Interior; an intertribal council or group which is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior and which has an ongoing relationship with such tribes, bands or groups for other purposes and has contracted with them to administer the Program; or the appropriate area office of the Alaska Department of Health.

**WIC** means the Special Supplemental Nutrition Program for Women, Infants and Children authorized by section 17 of the Child Nutrition Act of 1966, [42 U.S.C. 1786](#)

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## Alaska WIC Policy & Procedure Manual Section: 500 Organization and Management

### Policy: 508 Program Integrity: Noncompliance and Abuse

Effective Date: 02/01/2016

#### PURPOSE:

To define and prevent noncompliance and abuse within the WIC Program, ensuring the proper use of benefits. It provides guidelines for state and local WIC staff to address and document incidents of participant violations, outlining the sanctions for various violations to maintain the program's integrity.

#### POLICY: 508 Program Integrity: Noncompliance and Abuse

##### Participant Noncompliance and Abuse

This policy discusses:

- What is considered noncompliance and abuse
- Methods to prevent noncompliance and abuse
- Actions to be taken when noncompliance and abuse have occurred
- Defines dual participation and types of abuse
- Provides direction on repayment of benefits
- Provides direction on sanctions and state and police notifications of noncompliance and abuse

##### Noncompliance Definition

Noncompliance is defined as failure on the part of the participant or parent/guardian to follow program rules. Intent and knowledge on the part of the participant may or may not be present. Examples of noncompliance are as follows:

- Participant gives inaccurate income information on application. Participant does not understand all types of income to report. After corrections, participant still qualifies for benefits.
- Participant tries to buy unauthorized foods, or excess amounts of foods, due to lack of information or understanding, such as having trouble adding up ounces and total amount exceeds amount allowed.
- Participant gives WIC foods to a neighbor so they “will not go to waste”. Participant is not aware they do not have to buy every item in the amounts available on their eWIC card.

##### Program Abuse

7CFR 246.2 defines participant violation as any deliberate action of a participant, parent or caretaker of an infant or child participant, or proxy that violates Federal or State statutes, regulations, policies, or procedures governing the Program. Participant violations include, but





are not limited to, deliberately making false or misleading statements or deliberately misrepresenting, concealing, or withholding facts, to obtain benefits; selling or offering to sell WIC benefits, including cash-value vouchers, food instruments, EBT cards, or supplemental foods in person, in print, or online; exchanging or attempting to exchange WIC benefits, including cash value vouchers, food instruments, EBT cards, or supplemental foods for cash, credit, services, non-food items, or unauthorized food items, including supplemental foods in excess of those listed on the participant's food instrument; threatening to harm or physically harming clinic, farmer, or vendor staff; and dual participation.

The sale of or the intent to sell WIC foods and benefits verbally, in print, or online through platforms including Craigslist, Facebook, Twitter, eBay, etc., is a program violation.

Other examples of participant program violations include:

- Using a lost or stolen eWIC card.
- Giving foods that were purchased with an eWIC card or mailed WIC foods to a person other than a WIC participant for whom the WIC benefit was issued.
- Cooperating with another person in doing an act described as a violation in this section.

### Preventing Noncompliance and Abuse

At the time of certification, Local Agency staff must inform WIC participants or parents/guardians of the following:

- Rights and responsibilities;
- Appropriate use of WIC foods;
- WIC transaction;
- Approved WIC vendors;
- Approved WIC food list;
- Actions which constitute noncompliance/abuse;
- Consequences of noncompliance and abuse.

Participants should be encouraged to ask questions. Reasonable steps should be taken to provide the information in a language other than English when applicable. Local Agency staff are encouraged to convey the message that quality WIC services depend on a partnership between the participant, vendor, and WIC staff.

### Procedures in Cases of Participant Noncompliance or Abuse

The Local Agency coordinator or designated staff must assess information and circumstances relating to participant noncompliance or abuse on a case-by-case basis. The Vendor Management Unit will contact the Local WIC agency for needed information in relation to any participant compliance issues that relate to fraud and have a potential monetary action.

If the participant issue has to do more with behavioral aspects of actions in the WIC office or at the store or farmer's market then the role of Local Agency staff is to meet with the participant or parent/guardian and find out what took place. Staff should provide the agency's view as to



## Alaska WIC Policy & Procedure Manual



whether the report of violation has merit, and the reasons the report was made.

The participant's viewpoint must be documented in writing in the participant's file, using the "Job Aid 021: Improper Action Report" which can be found in the job aid section of this policy section. A copy must be provided to the participant.

### State Responsibilities

When the Vendor Management Unit (VMU) receives a report of possible participant violation or discovers an improper use of food benefits the VMU will research and determine if the report is a valid violation of the participant's rights and responsibilities. If the violation is valid:

- The VMU will request a copy of the participant's signed Rights and Responsibilities from the Local Agency.
- Calculate the violation value.
- If the value of the participant violation is \$100.00 or more, the VMU will start the restitution process.
- The VMU will notify the participant's local WIC agency of any value.
- The VMU will inform the participant of the right to appeal a claim or a program disqualification; provide an informal dispute resolution meeting or a Fair Hearing.
- VMU may collect repayments prior to the Local Agency providing benefits.
- The VMU will notify participants in writing if there are any sanction actions involving the participant. The Local Agency will receive a copy.

### Local Agency Responsibilities

The Local Agency will document all allegations of program abuse or fraud on the "Alaska WIC Program Improper Action Report" form. In cases where program abuse or fraud is alleged against a participant, the Local Agency must submit:

- The Alaska WIC Program Improper Action Report form and any accompanying documentation to the state agency.
- The signed Rights and Responsibilities form.
- Digital pictures of formula being sold on social media sites (highly encouraged, but not required).
- Other pertinent documentation.

If there is a sanction action, the Local Agency will advise the participant of the program requirement(s) they violated. The Local Agency will provide program benefits to participants who appeal disqualification within 15 calendar days of the written notification of the disqualification until the appeal is decided, the participant becomes categorically ineligible, or the certification period expires, whichever occurs first. If the violation is one that warrants a written warning for a behavior issue at the store or in the WIC office, the Local Agency Coordinator will use the "Alaska WIC Program Improper Action Report" form. The participant needs to read and sign the written warning at the next WIC appointment.



### Foster Children's Benefits

Collections will not be pursued in the case of benefit redemption by a foster parent who could not foresee a change in guardianship and or custody change.

### Actions to be Taken in Cases of Noncompliance

Provide thorough education about rules and procedures, review rights and responsibilities, and document the incident in the participant's file on the Alaska WIC Program Improper Action Report. Have it signed by the participant, or the parent/guardian, and give them a copy. Verify that there is a signed rights and responsibilities statement in the participant's file.

While issuing the written warning, if it is determined that the participant acted with intent and knowledge, that actions were persistent and/or coercive, and/or that actions involved improper receipt or misuse of benefits, the Local Agency may impose an appropriate sanction. See sanction table in the Appendices in this policy.

### Violations

Three (3) documented violations, beyond the warning letter(s), of two or more violation types listed below will result in a one (1) year disqualification period. The three (3) documented violations must be committed in a 12-month period.

If there are less than three (3) combinations of violations with different sanctions, the participant must receive the maximum sanction.

Mandatory one-year disqualifications are imposed for the following participant violations when they first occur.

- Dual participation that results in a claim of any amount.
- A violation that results in a claim of \$100 or more.
- A violation that results in a second or subsequent claim of any amount.

For incidents that require verbal or written warning provide thorough education about rules and procedures, review rights and responsibilities, and document the incident in the participant's file on the Alaska WIC Program Improper Action Report. Have it signed by the participant, or the parent/guardian, and give them a copy. Verify that there is a signed rights and responsibilities statement in the participant's file.

### Determination of Appropriate Sanctions

Participants are sanctioned a mandatory one year disqualification for violations resulting in claim of > \$100 and for any second or subsequent violations unless a repayment is made or a proxy is allowed for participants under the age of 18.

### Participant Disqualification for Program Fraud

Participants must receive written warning or be disqualified when documentation verifies that



participant fraud has occurred. Serious violations of program integrity, such as selling WIC foods or eWIC cards will result in disqualification without any warning.

### Infant/Child Disqualification

When the participant being disqualified is an infant or a child, the Parent/Guardian is the one to be disqualified. The infant or child can continue to receive benefits and participate during disqualification if another adult is designated. If the adult represents multiple infants/children, all infants/children can remain on the program under the same condition.

### Participant Rights and Responsibilities When Disqualified

Participants have the right to appeal any denial, claim or disqualification at a fair hearing. Participants must be provided, within 15 calendar days, written notice prior to disqualification.

### Appeal of Sanctions

A participant may appeal the imposition of sanctions against the participant or against a person that was acting on the participant's behalf through the fair hearing procedure.

Sanctions must not be applied if the Local Agency knows of the violation only through an anonymous complaint, unless the information is verifiable. For example, a Local Agency could verify a second source of income if the name of the employer is known; sanctions could then be applied if the second income was not reported on the participant's written application form.

The Vendor Management Unit should be involved and is responsible for collecting documentation with the Local Agency's help, sending correspondence to the participant and requesting repayments as needed.

### Exception for Disqualification

The State WIC Agency may decide not to impose a mandatory disqualification if, within thirty (30) days of receipt of the notice of repayment, full restitution is made or a repayment schedule is agreed upon or in the case of a participant who is an infant, child, or under age 18, the state or Local Agency approves the designation of a responsible adult.

### Reapplication

A participant that has been disqualified may reapply for the WIC Program at the end of a disqualification period or the full repayment of a claim. However, they must meet all current eligibility criteria before certification.

## REFERENCE:

### **Federal Regulations:**

7CFR Ch. II (1-1-12 Edition)

- Subpart E- State agency Provisions-Food Delivery Systems
  - 246.12 (u)(i)



## Alaska WIC Policy & Procedure Manual



7CFR Ch. II (1-1-12 Edition)

- Subpart G- Miscellaneous Provisions- Claims and Penalties
  - 246.23 (d)

7CFR Ch. II (1-1-12 Edition)

- Subpart C- Participant Eligibility- Fair Hearing Procedures
  - 246.9 (a)

7CFR Ch. II (1-1-12 Edition)

- Subpart A- General- Definitions
  - 246.2

7CFR Ch. II (1-1-12 Edition)

- Subpart C- Participant Eligibility- Certification of Participants
  - 246.7 (h)(2)
  - 246.7 (j)(2)

### CROSS REFERENCE:

Job Aid 021: Improper Action Report Form

### DEFINITIONS:

**Abuse:** To cause harm or threaten harm with words.

**Fraud:** An intentional misrepresentation of the truth to deceive others for the purpose of acquiring something of value, such as money or WIC benefits. Anything calculated to deceive, whether by a single act or combination, or by the suppression of the truth, or by suggestion of what is false, whether it is by a direct lie, silence, look, or gesture. An example of fraud is selling WIC food , which deceives the WIC program to acquire money.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Participant violation** means any deliberate action of a participant, parent or caretaker of an infant or child participant, or proxy that violates Federal or State statutes, regulations, policies,



## Alaska WIC Policy & Procedure Manual



or procedures governing the Program. 7CFR 246.2 defines participant violation as any “deliberate actions of the participants, or caretaker of an infant or child participant, or proxy that violates federal or state statutes, regulations, policies, or procedures governing the Program. Participant violations include, but are not limited to, deliberately making false or misleading statements or deliberately misrepresenting, concealing, or withholding facts, to obtain benefits; selling or offering to sell WIC benefits, including cash-value vouchers, food instruments, EBT cards, or supplemental foods in person, in print, or online; exchanging or attempting to exchange WIC benefits, including cash-value vouchers, food instruments, EBT cards, or supplemental foods for cash, credit, services, non-food items, or unauthorized food items, including supplemental foods in excess of those listed on the participant's food instrument; threatening to harm or physically harming clinic, farmer, or vendor staff; and dual participation.

**Sanction:** Civil money penalty imposed by the state WIC program because of a violation.

**State agency** means the health department or comparable agency of each State; an Indian tribe, band or group recognized by the Department of the Interior; an intertribal council or group which is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior and which has an ongoing relationship with such tribes, bands or groups for other purposes and has contracted with them to administer the Program; or the appropriate area office of the Alaska Department of Health.

**WIC** means the Special Supplemental Nutrition Program for Women, Infants and Children authorized by section 17 of the Child Nutrition Act of 1966, [42 U.S.C. 1786](#)

### APPENDICES:

#### 1. Sanction Table

Violations	Number of Offenses	Sanctions
Using WIC Food checks/CVVS before the “First Day to Use” or after “Last Day to Use”.	1 2	Verbal Warning Written Warning
Failing to sign WIC food checks/CVVs at time of purchase.	1 2	Verbal warning Written Warning
Knowingly reporting falsely that checks were lost or stolen, obtaining replacement checks, and cashing both sets of checks.	1 2	90-day disqualification One-year disqualification and repayment
Creating a public nuisance, threatening harm, or disrupting normal activities at the local agency, the vendor (store), farm stand or with the farmer.	1 2 3	Written Warning 30-day disqualification One-year disqualification



## Alaska WIC Policy & Procedure Manual



Violations	Number of Offenses	Sanctions
Altering WIC checks/CVV's date, quantity, or type of food.	1	90-day disqualification and repayment
	2	One-year disqualification and repayment
False or misleading statements or omission of facts to obtain program benefits.	1	90-day disqualification and repayment
	2	One-year disqualification and repayment *If unintentional, warning letter
Exchanging WIC food checks/CVV's for credit or non-food items.	1	One-year disqualification and repayment
Attempting to sell WIC checks or CVV's.	1	One-year disqualification
Sale of WIC checks, or CVV's.	1	One-year disqualification and repayment
Attempting to sell or give away supplemental food that was purchased with WIC food checks/CVV's.	1	90-day disqualification
	2	One-year disqualification If unintentional, warning letter
Selling or giving away supplemental food that was purchased with WIC checks/CVV's.	1	90-day disqualification and repayment
	2	One-year disqualification and repayment
Using WIC foods to make "home brew".	1	Written Warning
	2	90-day disqualification and repayment
	3	One-year disqualification
Theft of WIC food checks/CVV's.	1	One-year disqualification, repayment, and reported to law enforcement
Physically abusing WIC, vendor staff, farm staff/farmers market or property.	1	One-year disqualification and reported to law enforcement
Dual participation.	1	One-year disqualification and repayment of dual benefits.
Assessed claim for \$100 or more	1	One-year disqualification and repayment
Assessed second or subsequent claim for any amount.	1	One-year disqualification and repayment
Purchase of unauthorized items, costing \$99.99 or less.	1	Written warning
	2	30-day disqualification and repayment
	3	One-year disqualification and repayment





## Alaska WIC Policy & Procedure Manual



Violations	Number of Offenses	Sanctions
The violation was a part of a scheme to defraud the State WIC office or a Local Agency, and involved collusion with a WIC vendor.	1	One-year disqualification and repayment

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## Alaska WIC Policy & Procedure Manual Section: 500 Organization and Management

### Policy: 509 Local Agency Developed Documents Approval Requirement

Effective Date: 02/01/2016

#### PURPOSE:

To ensure all materials created by Local WIC Agencies are accurate and approved by the State WIC office before being used in clinics. This includes independently translated materials, which must also be reviewed and approved by the State WIC office prior to dissemination.

#### POLICY: 509 Local Agency Developed Documents Approval Requirement

##### WIC Materials Developed by the LA:

Materials developed by the Local WIC Agency must be forwarded to the State WIC office for review for accuracy, approval and dissemination to other local agencies through the Friday Update or placed on the WIC website. This includes translated materials independently translated by Local Agencies.

#### REFERENCE:

Federal Regulations: 7CFR Ch. II (1-1-15 Edition)

- Subpart D- Participant Benefits
  - 246.11 (c)(3)

FNS Instruction 113-(VII)

- Page 9-12

#### DEFINITIONS:

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with § 246.5;
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed



## Alaska WIC Policy & Procedure Manual




**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 500 Organization and Management

#### Policy: 510 Disaster Planning

Effective Date: 04/2020

##### PURPOSE:

To ensure continued delivery of WIC services during emergencies by waiving certain requirements and implementing alternative methods for service delivery.

##### POLICY: 510 Disaster Planning

When local, regional, state and/or national public health mandates dictate, Local Agencies are authorized to make the accommodations in service delivery ensure continuity of services.

Specifically, Local Agencies (LA) are authorized to accept photographed, scanned, faxed and/or e-mail documentation, including Family Information Forms, applications, proof identity, residency, income and anthropometric data collected by health care providers. LA's may accept digital/typed signatures, photographs of visit summaries, and screenshots of electronic health record or similar documents. Local Agencies are authorized to accept verbal anthropometric data directly from health care providers. Additionally, fax may be explored as a mechanism to collect data from providers while minimizing impact on healthcare providers.

##### Documentation and Verification

While Local Agencies are expected to make every effort to obtain Family Information Forms and WIC applications, if providing them becomes an unsurmountable barrier to service then their completion by a participant may also be waived. In these instances, LA staff are required to:

- Complete a thorough interview and assessment of participant needs
- Physically complete forms and scan them into SPIRIT, or save the hardcopies in files.
- Read the Rights and Responsibilities to participant
  - To certify a participant, the participant must verbally agree to abide by the Rights and Responsibilities. This agreement should be documented by the LA staff in SPIRIT.
- Notate on forms whom they were completed by
- Create an alert indicating what program requirements were waived

Local Agencies are not authorized to complete forms on behalf of participants without an interview and assessment of the participant.

In instances when obtaining verification of identity, residence, and/or proof of income become an obstacle, Local Agencies may utilize the No Proof and IOU Form to verbally collect information.



## Alaska WIC Policy & Procedure Manual



### Income Verification

Occasionally, participants may not be able to provide verification representing present income situation, or adjunctive eligibility status. Some examples of when this may occur when:

- Participants are unable to obtain paystubs due to business closure, individual quarantine
- Individual has been accepted for unemployment or other benefits/assistance but have not received benefit letter.
- Federal income tax extensions have been executed
- Adjunctive eligibility programs are experiencing delays in processing and/or unable to mail correspondences.

During an emergency, if income verification becomes a barrier to participation then Local Agencies are authorized to utilize the “Zero Income Form” to collect verbal self-declaration of income. This form can be completed by a participant or by a WIC staff member. When a WIC staff member is completing the form, it must be read verbatim to the participant and the participant must verbally and directly agree.

- When utilizing “Zero Income Form” an alert should be placed in a participant’s chart and income reassessed. Reassessment should be noted in the participant's file.
- This mechanism should only be utilized when other mechanisms for obtaining income verification have been exhausted.

### Remote Issuance of Benefits

Remote issuance of benefits can be done through the WIC MIS, SPIRIT. This ability does not supersede program requirements to provide quarterly nutrition education or mid-certification assessments to participants regardless of their location.

In an emergency, the quarterly nutrition education contact is not required prior to issuing benefits. Local Agencies and clinics are encouraged to reschedule the nutrition education when circumstances permit or to conduct such appointments remotely as soon as participants can be reached.

When new or reissued eWIC cards are mailed out to participants, use the signature page form to capture the participant’s signature. The form acknowledges the card has been received, a signature is captured on the form and mailed back to the local WIC agency in a self-addressed, stamped envelope. The form is kept in a hard copy file or scanned into the MIS within the participant folder.

### Teleworking:

If local, regional, state and/or national public health mandates or conditions dictate WIC operations can no longer continue at a WIC clinic site, Local Agencies are expected to:

- Provide written notification of service plan change to the state program office, including



## Alaska WIC Policy & Procedure Manual



where staff will be primarily completing WIC business

- Investigate temporary alternative satellite sites to maintain participant services.
- Provide on-going widespread notification to WIC participants and public at large on how to access WIC services and WIC staff through multiple methods. This may include automated text/email/voice messaging platforms, e-mail, social media posts, public service announcements, WIC Shopper App, etc.
- Arrange for the ongoing secure acceptance of WIC applications and acceptable proof. This may include but not be limited to secure electronic methods, or locked boxes at alternative locations regularly monitored by WIC staff.
- Consider the ongoing the need to secure and issue eWIC card and distribute eWIC cards
- Establish workflows that maintain Separation of Duties consistent with standard operations
- Continue to maintain WIC confidentiality standards regardless of location where work is conducted. WIC documents must be securely accepted and stored at all times; and staff must have the ability for WIC assessment, nutrition education, counseling and referrals to be conducted privately.

Local Agencies are required to notify the State of Alaska program office if WIC services are being performed in personal homes. LA should develop written procedures to ensure WIC policies, procedures and standards are met.

### Data Collection and Reporting

If participants are being seen remotely who do not complete their Family Information Form or application(s) with racial and ethnic categories, the following guidance is to be followed:

1. If they are not in front of staff to make that determination:
  - a) It is acceptable to ask about the participant(s) racial/ethnic data.
  - b) Convey to them this information is being collected for statistical purposes only, we collect race, and ethnicity information on all of our participants, this information does not affect your participation in WIC in any way.”
  - c) Request verbally racial and ethnicity information from the participant.
  - d) Document this on the Family information or application(s) and initial by the data entry.
  - e) Enter this data into MIS.

### REFERENCE:

[42 U.S. Code 1786](#) Special Supplemental Nutrition Program for Women, Infants and children (3)  
(c) Physical Presence

Waitlist Federal Regulations: 7CFR Ch. II

Subpart C- Participant Eligibility- Certification of Participants 246.7(f)(1)

7 CFR 246.7(i)(10) Rights and Responsibilities



## Alaska WIC Policy & Procedure Manual



7 CFR 246.7(d)(2)(v)(C) Self-Declaration Statement (income)

7 CFR 246.7(i)(4)

7 CFR 246.7(i)(5)(ii) c Self-Declaration Statement (residency & identity)  
Section 12(l)(2)(A)(iii) and 12(l)(2)(A)(iv)

USDA regulations Subpart C Participant Eligibility –  
Certification of Participants 246.7 (o) (2) (C) (ii)

Federal Regulations: 7CFR Ch. II  
Subpart C- Participant Eligibility- Nondiscrimination  
246.8 (a)(3)

### CROSS REFERENCE:

901: Eligibility Criteria

903: Proof of identity

904: Proof of residency

905: Proof of income

1008: Remote issuance of benefits

506: Program Integrity and Separation of Duties

Job Aid 030: No Proof Income Form and WIC IOU Form

Job Aid 025: Zero Income Form

### DEFINITIONS:

**Applicants** means pregnant/breastfeeding/postpartum people, infants, and children who are applying to receive benefits. Applicants include individuals currently participating in the program but are re-applying before their certification expires.

**Acceptable proof:** Reasonable documentation of personal identity, income and current residency as approved by the state WIC program.

**Client services:** Tasks or costs pertaining to certifying participants, processing applicants, delivery of food benefits, or other participant services.

**Clinic** means a facility where applicants are certified.

**eWIC:** Electronic WIC benefits

**eWIC Card:** Magnetic stripe card used to purchase WIC authorized foods or formulas from a WIC family's Electronic Benefit Account (EBA). Each card has a 16-digit Primary Account Number (PAN).



## Alaska WIC Policy & Procedure Manual



### Ethnicity:

- a) Hispanic/Latino - a person of, Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term, "Spanish origin," can be used in addition to "Hispanic or Latino." (A person could be Black but still be identified as Hispanic, because of Hispanic culture or origin.)
- b) Not Hispanic or Latino

### Local Agency means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Separation of Duties:** A standard accountability/security practice to separate income eligibility from risk assessment.

**Special situation:** When a participant is unable to provide one of the required proofs because something in their life makes it unlikely that they will be able to obtain proof without it causing a barrier to receiving WIC services. Examples of special situations include being a disaster victim, being homeless, working for cash, having no source of income, or being a migrant.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a "draft" watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A "draft" watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will



## Alaska WIC Policy & Procedure Manual



become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## Alaska WIC Policy & Procedure Manual

### Section: 600 Nutrition Services and Administration

Policy: 602 Mid-Year WIC Funding Reallocation

Effective Date: 03/27/2015

#### PURPOSE:

Guidance on the expectations for SFY caseload Performance Standard (PS).

#### POLICY: 602 Mid-Year WIC Funding Reallocation

Each Local WIC Agency is expected to meet or exceed the assigned caseload for the current State Fiscal Year (SFY). Caseload levels directly relate to not only the Local Agency grant but to the state's overall funding allocation from the USDA FNS.

Performance standard (PS) (target/assigned caseload according to the funding formula) will drive funding of Local Agencies and updated funding determined mid-year to reallocate funds accordingly. Grants will be adjusted dependent upon a six-month average compared to the PS.

The State WIC Staff will provide technical assistance to local agencies to help achieve their PS expectations.

#### REFERENCE:

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)

- Subpart A- General- Definitions
  - 246.2
- Subpart E- State Agency Provisions- Program Costs
  - 246.14(a)(1) and (c)(1) through (d)

#### DEFINITIONS:

**Caseload** - The number of participants issued food benefits versus those enrolled but not receiving food benefits.

**Federal Fiscal Year** - The period of 12 calendar months beginning October 1 of any calendar year and ending September 30 of the following calendar year.

**FNS** means the Food and Nutrition Service of the U.S. Department of Agriculture.

**Nutrition Services and Administration (NSA) Costs** - Those direct and indirect costs exclusive of food costs as defined in § 246.14(c) which State and local agencies determine to be necessary to support Program operations.



**Nutrition Services and Administration (NSA) Funds** - NSA is used to fund WIC operations at state and local levels. Operations include WIC staffing cost, the WIC data system, educational materials, equipment, overhead, and all other costs involved in delivering WIC services to participants.

**Nutrition Services & Administration (NSA) Funding Formula** - A formula that determines the allocation of WIC funds to county non-profit organizations or Native American programs for WIC operation, breastfeeding promotion, and nutrition education services.

**Performance Standard (PS)** - A measurement established through the RFP process.

**State Fiscal Year (SFY)**: The period of 12 calendar months beginning July 1 of any calendar year and ending June 30 of the following calendar year.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## **Alaska WIC Policy & Procedure Manual**

### **Section: 600 Nutrition Services and Administration**

#### **Policy: 603 Local Agency Budget Management**

**Effective Date: 06/2018**

##### **PURPOSE:**

- To describe the required steps that a Local Agency must take when preparing, submitting and maintaining their WIC budget and financial reports.
- To list the specific costs allowed and considered necessary for fulfilling WIC Program objectives.
- To provide Local Agency guidance on what costs are not allowed.

##### **POLICY: 603 Local Agency Budget Management**

###### **Local Agency Budget Management**

Local Agencies must prepare and submit an annual budget as part of their application for a Grant Agreement with the Alaska Department of Health. In the area of budget management, Local Agencies are responsible for all financial, audit, records management, and retention requirements identified in 7 AAC 78, as well as the provisions of the Grant Agreement, which include, but are not limited to:

- Maintenance of records which adequately identify the source and use of funds for program activities.
- Implementation of procedures which ensure prompt and accurate billing for allowable costs.
- Implementation of procedures which accurately identify obligated program funds at the time obligations are made.
- Implementation of procedures which ensure timely and appropriate resolution of claims and other matters resulting from audit findings.

The Alaska State WIC Program receives federal funding each year on October 1. However, the state fiscal year starts July 1; therefore, WIC Grants are paid from two federal funding sources. To ensure that all federal funds are spent according to the appropriate federal fiscal year, we have the following funding procedures:

- a) WIC grantees should make every effort to obligate 25% of the FY grant award between July 1 and September 30th.
- b) Annual grant Special Conditions will outline how grantee under or over expenditures during the first quarter will be handled.

The State will accept amended Cumulative Fiscal Reports (CFR) for July, August, and September until October 30. Grantees must ensure that expenses are reported against the month's CFR in which they were incurred.



Funds may be moved into the travel line item for direct client services and upon state approval, for staff to attend WIC-related training opportunities to support State WIC goals and objectives.

The State WIC Office will notify grantees if additional funding is available or if funding reductions must occur as an outcome of caseload distribution and/or funding restrictions.

Absences during state agency-sponsored meetings or required teleconferences may be cited as program non-compliance. Additionally, LAs may be asked to reimburse the State agency for a prorated portion of the cost of a mandatory training meeting that an LA Coordinator or representative fails to attend. It is the LA's responsibility to inform the State agency in a timely manner of irregularities or unforeseen circumstances that may impact required attendance of State agency-sponsored meetings.

WIC grantees may be allowed to purchase supplies and distribute them to other WIC grantees for that program's use, as long as:

- a) The expenditure is approved in the grantee's budget.
- b) There is written documentation of the approval from the State WIC office for the grantee's files.
- c) If a LIBR is needed to move funds to the "Supplies line" item, there is sufficient budget narrative to clearly explain the purpose for which the funds will be used.

Local Agencies may use WIC funds to send staff to pertinent, applicable college-nutrition courses with pre-approval from the State WIC office. The course must have a direct relationship to the staff's current WIC duties. WIC funds cannot be used to pay for employee salary to take the course or to study for the course during WIC time. Staff may be asked to submit documentation of course completion.

WIC Coordinator must have regular access to the WIC budget and be assigned permissions from the grantee Agency's Power User for regular access at a minimum to "read" capacity in the GEMS, the State of Alaska online grants and contracts system.

### Allowable Local Agency Costs

Costs necessary for the fulfillment of program objectives are considered allowable costs. They are operational or administrative costs, direct and indirect, as defined by OMB Circular A-133 and may be further restricted by the provisions of 7 AAC 78 as well as other specific conditions of the grant award.

Specific allowable costs include:

- The cost of nutrition education. During each fiscal year 1/6 or approximately 17 percent of the funds expended for NSA costs must be used for nutrition education. Costs which can be applied to the one-sixth minimum amount are:
  - Salary and other costs for time spent on nutrition education consultations,



## Alaska WIC Policy & Procedure Manual



- whether with an individual or group.
- Procuring and producing nutrition education materials including handouts, DVDs/CDs, thumb drives, food models or other teaching aids, and mailing nutrition education materials to participants. This also includes equipment such as kiosks, video teleconferencing tools, TV/DVD players, etc.
- Training nutrition educators, including costs related to conducting training sessions and purchasing and producing training materials.
- Conducting evaluations of nutrition education, including contractor involvement and time spent in the design of data collection forms and compilation and analysis of data.
- Salary and other costs incurred in developing and evaluating Local Agency Nutrition Education Plans.
- Monitoring nutrition education, including related travel costs.
- Interpreter and translator services to conduct nutrition education.
- The cost of certification procedures including:
  - Laboratory fees incurred for tests conducted to determine the eligibility of persons to participate in the program.
  - Expendable medical supplies necessary to determine the eligibility of the persons to participate in the program.
  - Measuring boards, skin fold calipers, equipment for testing for anemia, and scales used for determining the eligibility of persons.
  - Salary and other costs for time spent on certifications.
  - Hemocue cuvettes, gloves, lancets, and other medical supplies previously provided by the State WIC office. Grantees who do not comply with this requirement can be determined non-compliant and can have program funds with-held until corrective actions have been instituted and will incur all costs associated with not using the correct cuvettes.
- The cost of outreach services.
- The cost of vendor training and monitoring.
- Cost of relocating clinics.
- The cost of translators for program materials and interpreters.
- The cost of fair hearings, including the cost of an independent medical assessment of the applicant, if necessary.
- The cost of transportation of rural participants to clinics with prior approval from the State WIC office to use WIC funds to provide such transportation and documentation that such service is considered essential to assure program access. Direct reimbursement to participants for transportation cost will be considered on a case-by-case basis and may not always be considered an allowable cost.
- The cost of monitoring and reviewing program operations.
- Local Agency federally negotiated indirect costs: See State Regulations 7 AAC 78.160 (p) and (q). (Alaska Administrative Code)
- Purchase computer equipment, hardware, and software using the State WIC Office specifications and requirements to ensure standardization in all clinics to adequately



## Alaska WIC Policy & Procedure Manual



support and maintain WIC services.

- Providing IT support, maintenance, software security, and internet service costs to support SPIRIT.
- Funds may be moved into the travel line item for direct client services and upon state approval.

Other costs that are allowable but require prior approval by the USDA through the State WIC Office, are costs for capital expenditures over \$5,000.00 and management studies performed by agencies or departments other than the State WIC Office or Local Agency.

### Local Agency Costs Not Allowed

The following costs are not allowed:

- Employee housing subsidies
- Employee severance pay
- Out-of-state travel unless authorized by State WIC Director
- Professional membership and licensing fees such as membership in the American Dietetic Association, Alaska RD licensing fees or International Board Certified Lactation Consultant.
- Employee accrued leave if not already covered in the employee's compensation such as fringe benefits
- Hiring incentives
- Allowable under certain conditions. For example, if AKWICA meeting is in the hotel where everyone has lodging there, a car would not be necessary as there would not be driving back and forth to the meeting venue. If a WIC staff is traveling to Galena, Chitina, and other villages along the way to provide WIC services, use of a rental car or reimbursement for gas and mileage would be considered allowable expenditures.
- Paper plates, cups, bowls, plastic utensils, and coffee or creamer used for staff purposes.

### REFERENCE:

- State of Alaska GEMS system  
Federal Regulations: 7CFR Ch. II
  - Subpart B- State and Local Agency Eligibility- Agreements with Local Agencies
    - 246.6(b)(8)
  - Subpart E- State Agency Provisions- Financial Management Systems
    - 246.13(b)
  - Subpart E- State Agency Provisions- Financial Management Systems
    - 246.13(j)
- Alaska Administrative Code: 7 AAC 78



## Alaska WIC Policy & Procedure Manual



### DEFINITIONS:

**Caseload:** The number of participants issued food benefits versus those enrolled but not receiving food benefits.

**Federal Fiscal Year (FFY):** October 1 – September 30, the period of 12 calendar months beginning October 1 of any calendar year and ending September 30 of the following calendar year.

**GEMS** is the Grants Electronic Management System for both departments' operating and capital grants. In GEMS, users will be able to view solicitations, apply for DOH and DFCS grants, manage agency information, and manage grant awards issued by both departments.

**Nutrition Services and Administration (NSA) Costs:** Those direct and indirect costs exclusive of food costs as defined in § 246.14(c) which State and Local Agencies determine to be necessary to support Program operations.

**Nutrition Services and Administration (NSA) Funds:** NSA is used to fund WIC operations at state and local levels. Operations include WIC staffing cost, the WIC data system, educational materials, equipment, overhead, and all other costs involved in delivering WIC services to participants.

**Nutrition Education Plan (NEP):** The plan that local agencies intend to follow to offer nutrition education to participants. Nutrition education is the program benefit that sets WIC apart from the other Food and Nutrition Service (FNS) nutrition assistance programs.

**State Fiscal Year (SFY):** The period of 12 calendar months beginning July 1 of any calendar year and ending June 30 of the following calendar year

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is



## Alaska WIC Policy & Procedure Manual



the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## **Alaska WIC Policy & Procedure Manual**

### **Section: 600 Nutrition Services and Administration**

**Policy: 604 Cumulative Fiscal Reports (CFR), General Ledger (GL) and Line-Item Budget Revision (LIBR) Information**  
**Effective Date: 06/2018**

#### **PURPOSE:**

To describe the process the State WIC Office uses to review Cumulative Fiscal Reports (CFR) and General Ledger (GL) documentation; and Local Agency process to submit a Line-Item Budget Revisions (LIBR).

#### **POLICY: 604 Cumulative Fiscal Reports (CFR), General Ledger (GL) and Line-Item Budget Revision (LIBR) Information**

##### **Reporting and Reviewing Expenditures**

In accordance with the Request for Proposals (RFP) and Grant Agreement, Local Agencies must submit Cumulative Fiscal Reports (CFR) and General Ledger (GL) through GEMS, the State of Alaska online grants and contracts system. Local Agencies are reimbursed based directly on this report. Report must be transmitted through GEMS, no later than the 30th day following the end of the reporting period.

Reimbursements may be withheld for late submission of a report.

Expenditures will be reviewed in accordance with the approved LA budget. Requests for Line-Item Budget Revisions (LIBR) may be required.

State WIC Office staff conducts on-site management evaluation (ME) reviews of Local Agency administrative expenditures every two years in addition to the review of expenditure reports or other claims submitted for reimbursement.

##### **General Ledger**

The General Ledger (GL) ensures control and accountability of program funds. A review of actual items purchased is made to confirm that items were included in the LA budget. Details on the GL must reflect approved WIC budget items, that are categorized correctly. The GL must provide enough detail of how funding was utilized for the reviewer to determine if the charge is included in the approved budget. Each budget category total within the GL should match the total for the line-item budget category listed on the CFR.

Grantees must submit the GL through the state Grants and Contracts system, GEMS.



### Budget Revisions

A Line-Item Budget Revision (LIBR) must be submitted through GEMS. When the grantee anticipates changes to the budget for any line item they should refer to: The Alaska Administrative Code; 7 AAC 78.260 (f) for more information. Further information can also be obtained from the State of Alaska Grants and Contracts contact person for WIC.

### REFERENCE:

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)

- Subpart G- Miscellaneous Provisions- Records and Reports
  - 246.25(a) through (b)(1)(E)
- Subpart E- State Agency Provisions- Financial Management Systems
  - 246.13(b)
- Subpart F- Monitoring and Review- Management Evaluation and Monitoring Reviews
  - 246.19(b)(1-3)

Alaska Administrative Code: 7 AAC 78.260 (f)

### DEFINITIONS:

**Fiscal Review:** A review of fiscal operations performed by a Department of Public Assistance Financial Services staff member, or finance staff from USDA Western Regional Office, focusing on compliance with major federal requirements for management of funds.

**GEMS** is the Grants Electronic Management System for both departments' operating and capital grants. In GEMS, users will be able to view solicitations, apply for DOH and DFCS grants, manage agency information, and manage grant awards issued by both departments.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Management Evaluation (ME)** A bi-annual review conducted by State of Alaska WIC Staff of Local Agencies of clinic operations.

**Nutrition Services and Administration (NSA) Funds** NSA funds are used to fund WIC operations at state and local levels, including staffing costs, educational materials, and overhead.



## Alaska WIC Policy & Procedure Manual



### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## **Alaska WIC Policy & Procedure Manual**

### **Section: 600 Nutrition Services and Administration**

#### **Policy: 605 Equipment Inventory Reporting and Disposal**

**Effective Date: 11/19/2015**

#### **PURPOSE:**

To define items considered to be equipment and describe the process for inventorying and disposing of that equipment.

#### **POLICY: 605 Equipment Inventory Reporting and Disposal**

##### **Local Agency Equipment Report**

All equipment purchased with WIC funds by Local Agencies is State of Alaska property. A Local Agency inventory of this equipment must be completed once annually. All equipment must be tracked on the Local Agency Controlled Property Inventory form and submitted annually submitted in GEMS. Refer to the Local Agency Controlled Property Inventory form in the GEMS System.

“Equipment” means tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the non-Federal entity for financial statement purposes, or \$5,000. This includes non-expendable items such as hemocue and Pronto machines, multi-use electric breast pumps, computer equipment, television sets, audio-visual equipment, projectors, printers, signature pads, video conferencing equipment, iPads, vehicles, copy machines, and kiosks.

All Local Agency equipment with a purchase price of \$5,000 or more which was purchased with WIC funds must be shown on the Local Agency Controlled Property Inventory. Serial numbers and State of Alaska property tag numbers, if the items have State tags, must be documented on the inventory report. State of Alaska property tags are affixed in all equipment with a purchase price of \$5,000 or more, such as copy machines or kiosks, purchased by the State of Alaska for Local Agency use.

##### **Disposition of Equipment**

Any equipment with state tags must be returned to the state or disposed of according to state regulations, with prior approval from the State WIC Office. Local Agencies must consult with the State WIC Office prior to the disposition of any other equipment originally received from the State WIC Office or purchased with WIC funds by the Local Agency.

##### **Reporting on Real Property**

The Federal awarding agency or pass-through entity must require a non-Federal entity to



submit reports at least annually on the status of real property in which the Federal Government retains an interest, unless the Federal interest in the real property extends 15 years or longer. In those instances where the Federal interest attached is for a period of 15 years or more, the Federal awarding agency or pass-through entity, at its option, may require the non-Federal entity to report at various multi-year frequencies (e.g., every two years or every three years, not to exceed a five-year reporting period; or a Federal awarding agency or pass-through entity may require annual reporting for the first three years of a Federal award and thereafter require reporting every five years).

### REFERENCE:

- Federal Regulations: 7CFR Ch. II
  - Subpart G- Miscellaneous Provisions- Procurement and Property Management
    - 246.24(d) and 246.25(a)(3)
    - 246.25(a)(1)
  - Subpart E- State Agency Provisions- Financial Management Systems
    - 246.13(a)

### CROSS REFERENCE:

In GEMS: Local Agency Controlled Property Inventory form

### DEFINITIONS:

**Equipment** means tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the non-Federal entity for financial statement purposes, or \$5,000.

**GEMS** is the Grants Electronic Management System for both departments' operating and capital grants. In GEMS, users will be able to view solicitations, apply for DOH and DFCS grants, manage agency information, and manage grant awards issued by both departments.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Real property** means land, including land improvements, structures and appurtenances thereto, but excludes moveable machinery and equipment.



POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## **Alaska WIC Policy & Procedure Manual**

### **Section: 600 Nutrition Services and Administration**

Policy: 606 Time Studies

Effective Date: 06/2018

#### **PURPOSE:**

To describe the process Local Agencies must use when completing and submitting required time studies to document WIC personnel cost categories to the State WIC Office.

#### **POLICY: 606 Time Studies**

##### **Time Study**

Time studies are used to calculate personnel costs for all WIC funded personnel time, including contractors. Local Agencies must conduct time studies during the first week of every month, summarize the information, and report totals to the State WIC Office.

Time studies must also collect information on supplies and commodities purchased for breastfeeding promotion, nutrition education expenditures and client services, which includes:

- supplies to educate participants in understanding the importance of nutrition to health,
- supplies to help participants to achieve positive change in dietary habits,
- printing costs associated with nutrition and breastfeeding materials,
- travel costs to conferences associated with nutrition education and breastfeeding promotion and support,
- breastfeeding aides,
- hematological equipment and supplies, and
- anthropometric equipment

Time studies must be documented by Local Agencies on the Time Study Daily Log and Time Study Summary. Annual Time Study templates can be located in GEMS. LAs are required to use the current template when submitting Time Studies. The completed Time Study Summary forms for each staff person must be received by the state Grants and Contracts Department through GEMS. Time study logs and summaries must be kept on file at the Local Agency for three years after the end of the federal fiscal year (October 1 through September 30) during which they were made.

##### **Time Study Daily Log**

Local Agency staff, whether full-time or partially funded as a part of Nutrition Services and Administration (NSA) Costs must keep daily Time Study Daily Logs for each work day the first week of every month. If an employee is on annual leave during the first week period, the Log should be kept for a similar number of days normally worked, prior to the due date of the 30th of each month. If an employee takes less than 5 hours of unexpected leave during the time



study week, they may use that time study for their monthly time study.

A Time Study Daily Log covering a consecutive 5-day period must be completed by each WIC staff person and other Local Agency staff being paid part-time with WIC funds. Each Daily Log covers a one-day period worked excluding vacation or leave time taken. Days with typically normal work functions should be selected. Time Study Daily Log forms are kept on file at the Local Agency. Time studies that include days with personal or sick leave should reflect only the time worked. Annual and sick leave are not counted towards the four cost categories.

### Time Study Summary

At the end of the one-week period, using the completed Time Study Daily Logs, a Time Study Summary for each staff person is completed by the Local Agency. The hours are totaled, and the percentages calculated (column hours are divided by the total hours in order to calculate the percentage). The Salary and Benefits Calculation by Cost Category total must be completed by the Local Agency.

### Cost Categories for Time Studies

Time studies require staff to categorize work time in each of four areas: general administration, nutrition education, breastfeeding promotion, and client services. Examples of tasks related to each of the four areas are included on the Time Study Cost Category information sheet with the time study forms found in GEMS. Each staff person filling out time study logs should be given a copy of this information sheet.

The examples listed on this information sheet are not all inclusive. These examples are merely intended to illustrate typical functions for each area.

### Time Study Cost Category Information Sheet

A time study must be completed every first week of the month excluding vacation or scheduled leave time taken. This is to provide the U.S. Department of Agriculture a thorough breakdown of utilization of funds by program area. Weeks that are typical of the way the clinic normally functions should be selected.

To do this, each Local Agency staff person should carefully record using the Time Study form, exactly how time is spent in a one-week period in the following areas of operation:

1. GENERAL ADMINISTRATION – All costs (direct or indirect) generally considered as overhead or management costs. General management costs include those costs associated with program monitoring, prevention of fraud, general oversight and food instrument accountability. Examples include WIC administrative salaries/benefits and other costs necessary to conduct outreach, food instrument reconciliation, monitoring and payment, vendor monitoring, to keep administrative records and to prepare and maintain fiscal and program management reports.

Other examples include general management clerical support, the cost of payroll and





## Alaska WIC Policy & Procedure Manual



personnel systems, accounting and bookkeeping, audits and other financial services and legal services. Additional examples include cost of staff training, general oversight and supervision, preparation of time cards, and travels costs related to the above activities.

2. **NUTRITION EDUCATION** – All costs directly related to general nutrition education activities. Annually, 1/6 or 17% of a grantee's grant must be spent in this category. Examples include salaries/benefits, travel and training costs for WIC staff who plan or conduct nutrition education, costs to develop/procure, print and distribute nutrition education materials, cost of equipment required to conduct nutrition education training, interpreter and translator services to facilitate training, and costs associated with evaluating and monitoring nutrition education. Providing individual or group education sessions, including planning and preparation time, and space costs.
3. **BREASTFEEDING** – All costs expended for promotion and support of breastfeeding. Annually, FNS determines the target amount that each State must spend in this area. Examples include salary/benefits of WIC staff who plan or conduct educational and other services to promote or support breastfeeding, and other actions to encourage continuation of breastfeeding, costs to develop/procure, print and distribute educational materials related to breastfeeding promotion and support, clinic space devoted to breastfeeding educational and training activities including space aside for nursing. Costs to train staff in breastfeeding activities. Costs for monitoring and evaluating breastfeeding activities, purchasing breastfeeding aids, including breast pumps. Travel costs including authorized per diem, related to the above activities.
4. **CLIENT SERVICES** – All costs expended to deliver food and other client services and benefits. Examples include WIC staff salaries/benefits and medical supplies and equipment necessary to conduct diet and health assessments required in the certification process, salary/benefits of WIC staff who issue food instruments and explain their use, WIC staff salary/benefits and other costs necessary to refer client to other health care and social services, to coordinate services with other programs, to participate in activities which promote a broader range of health and social services for participants, and to conduct and participate in surveys/studies which evaluate the impact of WIC on its participants. Additional costs include cost of staff training, identity, residency, income eligibility determination, clinic preparation, participant phone calls, evaluating effectiveness of client services, immunization activities, voter registration activities, and travel costs, including authorized per diem, related to the above activities.

**Note:** The examples listed for each functional cost category are not all inclusive. These examples are merely intended to illustrate that when cost are reported by functional category, salaries/benefits, data processing, supplies and equipment, communications, postage and freight, travel, rent and utilities, etc. must be provided to the applicable functional category.



### Financial Forms

The Time Study Master, Daily Log, Time Study – Summary are available as templates within GEMS.

### REFERENCE:

§ 246.14(c)

### DEFINITIONS:

**Anthropometric:** Measuring the size and proportions of the human body. Anthropometric data associated with WIC includes weight, height/length.

**Breastfeeding Promotion and Support:** Costs expended for activities and expenditures for the promotion and support of breastfeeding. Client services: Tasks or costs that pertain to certifying participants, processing applicants, delivery of food benefits, or other participant services.

**GEMS** is the Grants Electronic Management System for both departments' operating and capital grants. In GEMS, users will be able to view solicitations, apply for DOH and DFCS grants, manage agency information, and manage grant awards issued by both departments.

**General Administration:** Defined as the overhead or management costs related to general administration activities.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with § 246.5;
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Nutrition Services and Administration (NSA)** Costs means those direct and indirect costs, exclusive of food costs, as defined in § 246.14(c), which State and local agencies determine to be necessary to support Program operations. Costs include, but are not limited to, the costs of Program administration, start-up, monitoring, auditing, the development of and accountability for food delivery systems, nutrition education and breastfeeding promotion and support, outreach, certification, and developing and printing food instruments and cash-value vouchers.

**Nutrition education** means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.



**Nutrition Education (as related to expenditure):** Activities related to general nutrition education and the required expenditure of 1/6 or 17% of a grantee’s grant annually.

**Time Study:** A method used to calculate personnel costs for WIC funded staff. Time study data is required of all WIC program staff to assure accurate federal reporting of WIC funds.

**POLICY HISTORY:**

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 600 Nutrition Services and Administration**

**Policy: 607 Nutrition Education and Breastfeeding Promotion Costs**

**Effective Date: 06/30/2012**

**PURPOSE:**

To describe the proportion of funds that must be spent in the area of nutrition education activities and breastfeeding promotion.

**POLICY: 607 Nutrition Education and Breastfeeding Promotion Costs**

**Nutrition Education and Breastfeeding Promotion Costs**

During each fiscal year, approximately 17 percent of NSA expenditures must be for nutrition education activities and breastfeeding promotion and support activities. In addition, an amount will be set each year by the USDA targeted specifically for breastfeeding promotion and support activities. Expenses for these activities must be reported through the Time Study.

Refer to Policy 606: Time Studies for additional information.

**REFERENCE:**

- Federal Regulations: 7CFR Ch. II
  - Subpart E- State Agency Provisions- Program Costs
    - 246.14(c)(1)

**CROSS REFERENCE:**

Policy 606: Time Studies

**DEFINITIONS:**

**Breastfeeding Promotion and Support funds:** Costs expended for activities and expenditures for the promotion and support of breastfeeding.

**Nutrition education:** Individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits and that emphasize the relationship between nutrition, physical activity, and health all in keeping with the personal and cultural preferences of the individual.

**Nutrition Education (as related to expenditure):** Activities related to general nutrition education and the required expenditure of 1/6 or 17% of a grantee's grant annually.

**Nutrition Services and Administration (NSA) Costs:** Those direct and indirect costs exclusive of



## Alaska WIC Policy & Procedure Manual



food costs as defined in § 246.14(c) which State and local agencies determine to be necessary to support Program operations. Costs include but are not limited to the costs of Program administration, start-up, monitoring, auditing, the development of and accountability for food delivery systems, nutrition education and breastfeeding promotion and support, outreach, certification, and developing and printing food instruments and cash-value vouchers.

**Nutrition Services and Administration (NSA) Funds:** NSA is used to fund WIC operations at state and local levels. Operations include WIC staffing costs, the WIC data system, educational materials, equipment, overhead, and all other costs involved in delivering WIC services to participants. A specific percentage of the NSA received by local WIC agencies must go towards breastfeeding promotion and nutrition education services. The amount of NSA funding an agency receives is based on assigned caseload.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
8/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 600 Nutrition Services and Administration**

Policy: 608 Reimbursement to Local Agencies

Effective Date: 06/30/2012

**PURPOSE:**

To describe the process used by the State WIC Office to reimburse Local Agencies for approved WIC expenditures.

**POLICY: 608 Reimbursement to Local Agencies**

**Access to Funds**

The State WIC Office reimburses Local Agencies for approved expenditures. Local Agencies are provided with funds in advance only under extraordinary circumstances, which must be pre-approved by the State WIC Office subject to the submission of required supporting documentation.

Local Agencies receive reimbursement through the Electronic Deposit Interchange (EDI). The State of Alaska Electronic Payments Program uses the Financial EDI process to enable the electronic transfer of payments directly to a bank account. Grantees who wish to enroll for electronic deposit should refer to the instructions posted by the Alaska Department of Administration, Division of Finance.

Grant payments may be withheld pending receipt of required documents including but not limited to: signed assurances, disaster plan, inventory, nutrition services plan, quarterly reports, annual surveys, corrective action plan (CAP) approval, and contingency plan.

**REFERENCE:**

7 CFR Part 246

**CROSS REFERENCE:**

615 Local Agency Staff Contingency Plans  
1101 Local Agency Management Evaluation

**DEFINITIONS:**

**Corrective Action Plan (CAP):** A plan that is part of the Management Evaluation process.

**Local Agency means:**

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);



## Alaska WIC Policy & Procedure Manual



- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Management Evaluation:** A bi-annual review conducted by State of Alaska WIC Staff of Local Agencies of clinic operations.

**State Agency (SA):** The health department or comparable agency of each State; an Indian tribe, band, or group recognized by the Department of the Interior; an intertribal council or group which is an authorized representative of Indian tribes, bands, or groups recognized by the Department of the Interior and which has an ongoing relationship with such tribes, bands, or groups for other purposes and has contracted with them to administer the Program; or the appropriate area office of the Alaska Department of Health.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 600 Nutrition Services and Administration

Policy: 609 WIC & Social Security Numbers

Effective Date: 07/2013

#### PURPOSE:

To define procedures to be used for obtaining social security numbers for WIC applicants and participants.

#### POLICY: 609 WIC & Social Security Numbers

##### Social Security Numbers

Alaska WIC does not require Social Security Numbers to apply for WIC.

When electric breast pumps are loaned to women, a social security number is collected at that time on the “Alaska WIC Breast Pump Loan & Release Agreement” for the purpose of fraud prevention and abuse.

#### REFERENCE:

7 CFR Part 246

#### CROSS REFERENCE:

326: Breastfeeding: Breast Pump Ordering, Distribution and Tracking Guidelines

327: Lost or Stolen Electric Breast Pumps

Section 300 Job Aid 010: Breast Pump Loan Agreement

#### DEFINITIONS:

**Applicants:** means pregnant/breastfeeding/postpartum people, infants, and children who are applying to receive benefits. Applicants include individuals who are currently participating in the program but are re-applying before their certification expires.

**Breast pump:** A device to help remove milk from the breasts.

**WIC Records:** Documents containing information relating to WIC services provided to WIC participants; WIC program operations; and local program staff training regardless of medium or physical form.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
------	--





## Alaska WIC Policy & Procedure Manual



08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 600 Nutrition Services and Administration**

**Policy: 610 Local Agency Hiring Freezes and Fund Management**

**Effective Date: 10/01/2010**

**PURPOSE:**

To address FNS-mandated staffing requirements during Local Agency hiring freezes.

**POLICY: 610 Local Agency Hiring Freezes and Fund Management**

**Local Agency Hiring Freezes**

If your agency has a total agency-wide mandate for hiring freezes, work furloughs, and travel restrictions, WIC funds are not subject to these provisions.

**REFERENCE:**

- Federal Regulations 7CFR
  - Part 246 Final Rule Summary
    - Section 361 effective 10/1/2010 in accordance with Section 445 of the HHFK Act. (6-26-11 Edition)

**DEFINITIONS:**

**FNS** means the Food and Nutrition Service of the U.S. Department of Agriculture.

**Local Agency means:**

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**POLICY HISTORY:**

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed



## Alaska WIC Policy & Procedure Manual



**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 600 Nutrition Services and Administration**

Policy: 611 Participant, Vendor, and Local Agency Collections

Effective Date: 06/30/2012

**PURPOSE:**

To describe the process for which the State WIC Office may use funds collected from participants and vendors.

**POLICY: 611 Participant, Vendor and Local Agency Collections**

**Participant, Vendor, and Local Agency Collections**

The State WIC Office may use funds collected from participants and vendors in the fiscal year in which the initial obligation was made, in which the funds are collected, or after the funds are collected, provided certain conditions are met.

Before the State WIC Office may credit such recoveries, it must provide vendors and participants with a means to appeal the claim action. For vendor claims, the State WIC Office must provide vendors with an opportunity to justify or correct the claim. For participant claims, the State WIC Office must provide participants with an administrative hearing. Because regulations do not require the State WIC Office to provide the Local Agency with a full administrative review for Local Agency claims, unless a claim affects the Local Agency's participation, the State WIC Office has the discretion to determine the level of review provided for Local Agency claims.

**REFERENCE:**

Federal Regulations: 7CFR Ch. II

- Subpart E- State Agency Provisions- Program Costs
  - 246.14(e)(1-5)

**DEFINITIONS:**

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.



**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving benefits for supplemental foods under the Program, and the breastfed infants of participant breastfeeding women.

**Vendor:** A sole proprietorship, partnership, cooperative association, corporation, or other business entity operating one or more stores authorized by the State agency to provide authorized supplemental foods to participants under a retail food delivery system. Each store operated by a business entity constitutes a separate vendor and must be authorized separately from other stores operated by the business entity. Each store must have a single fixed location except when the authorization of mobile stores is necessary to meet the special needs described in the State agency's State Plan in accordance with § 246.4(a)(14)(xiv).

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 600 Nutrition Services and Administration

Policy: 612 Local Agency Audits

Effective Date: 06/30/2012

#### PURPOSE:

To describe the process the State WIC Office uses for auditing Local Agency financial statements.

#### POLICY: 612 Local Agency Audits

##### Audits

The Division of Finance is the State of Alaska (SOA) coordinating agency for Federal and State Single Audits for the State of Alaska. The Single Audit Coordinator is responsible for ensuring grantees submit their single audits, reviewing the single audits, and distributing them to the appropriate State agencies.

Under 7 AAC 78.230, at least once every two years, the State of Alaska Division of Finance requires that all grantees have a fiscal audit of the program performed by an independent certified public accountant. In lieu of that audit, SOA will accept either a State or Federal Single Audit. For more clarification contact Grants and Contracts or see 7 AAC 78.230 for further details.

Local Agencies must forward copies of their audited financial statement and any federal single audit compliance report to the SOA Single Audit Coordinator.

Local Agency corrective action plans that address audit findings must also be sent to the SOA Chief Auditor with a copy to the State WIC Director. The Division of Finance and the State WIC Office will track audits to determine if the same problems recur from year-to-year. The State WIC Office will act to ensure all owed claims amounts are recovered. Recovered claims amounts from a prior fiscal year are returned. Recovered claims amounts are reallocated if collected within the same fiscal year.

#### REFERENCE:

- Federal Regulations: 7CFR Ch. II
  - Subpart F- Monitoring and Review- Audits
    - 246.20
- Alaska Administrative Code: 7 AAC 78.230

#### DEFINITIONS:



**Audit:** A complete review of accounting operations and procedures performed by a certified public accountant.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with § 246.5;
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## **Alaska WIC Policy & Procedure Manual**

### **Section: 600 Nutrition Services and Administration**

#### **Policy: 613 Provisions of Local Agency Agreements**

**Effective Date: 06/30/2012**

#### **PURPOSE:**

To list the conditions that Local Agencies must follow when receiving federal WIC funds, including compliance with debarment and suspension regulations, maintaining a drug-free workplace, adhering to lobbying restrictions, and enforcing a no-smoking policy.

#### **POLICY: 613 Provisions of Local Agency Agreements**

##### **Federal Requirements**

The following are conditions required of agencies expending federal WIC funds:

- Debarment and Suspension
- Drug Free Workplace
- Lobbying Restrictions
- No Smoking Policy

##### **Debarment and Suspension**

The State WIC Office as well as Local Agencies comply with the requirements of 7 CFR part 3017 regarding non-procurement of goods and services from entities which have been debarred or suspended from entering into contracts or agreements with grantees and sub-grantees of Federal funds. The State WIC Office requires grantees or contractors to submit a signed Federal Certifications and Assurances form as part of the annual WIC grant application. Contractor compliance must be ascertained prior to award of any contract expending state or federal funds. The State WIC Office checks for grantee compliance during on-site monitoring reviews.

The State WIC Office may suspend a person or agency from consideration for a contract if there is probable cause for debarment and compelling reasons require suspension to protect state and federal interests. The suspension may not exceed three years.

##### **Drug-Free Workplace**

The State WIC Office and Local Agency comply with the requirements of 7 CFR part 3018 regarding maintenance of a drug-free workplace. A signed certification regarding a drug-free workplace is included in the Federal Certifications and Assurances that must be attached to the Local Agency's grant annual application.

The State of Alaska provides a drug-free workplace. All employees, at orientation, are issued drug-free workplace statements informing them of the 1) dangers of drug abuse in the workplace; 2) the state's policy of maintaining a drug-free workplace; 3) any drug counseling,





## Alaska WIC Policy & Procedure Manual



rehabilitation, and employee assistance programs that are available; and 4) the penalties that may be imposed upon employees for drug abuse violations occurring in the workplace. A Drug-Free Workplace Certification must be posted in work areas.

### Restrictions on Lobbying

The State WIC Office and Local Agencies comply with the requirements of 7 CFR part 3018 regarding anti-lobbying restrictions. The State WIC Office requires grantees/contractors to submit a signed Department of Health Assurances form and the Federal Certifications and Assurances form, stating that state or federal funds may not be used to influence legislative action. "Influencing legislative action" means promoting, advocating, supporting, modifying, opposing or delaying or seeking to do the same with respect to any legislative action, but does not include the provision or use of information, statistics, studies, or analyses in written or oral form or format.

Grantee/contractor compliance is determined during on-site monitoring reviews. Expenditures and related records are reviewed for indications of lobbying activities, publications, or other materials intended for influencing legislation or similar type costs. Personnel and payroll records are reviewed to identify persons whose responsibilities or activities involve political activity.

### No Smoking Policy

The State WIC Office and Local Agencies comply with the legislative mandate prohibiting the allocation of funds to any clinic providing WIC services if the clinic allows smoking within the space used to perform WIC program functions.

Each local WIC agency and/or clinic must have an announced public policy against smoking in any area where WIC program functions are performed. At a minimum, this requirement is satisfied by having "No Smoking" signs prominently displayed in the clinic(s).

The prohibition against smoking applies only when the WIC Program operates at a clinic site. For example, a satellite clinic site such as church basement or community health center where WIC services may only be offered once or twice a week, is not required to implement the no smoking policy for those times when the WIC Program is not operating.

### **REFERENCE:**

Federal Regulations: 7CFR Ch. II

- Subpart A- General- Administration
  - 246.3(b) and (c)(2)
- Subpart B- State and Local Agency Eligibility- Agreements with Local Agencies
  - 246.6(b)(1-4)
- Subpart B- State and Local Agency Eligibility- State Plan
  - 246.4(a)(23)



## DEFINITIONS:

**Drug:** A beverage containing alcohol; a controlled substance (having the meaning given it in section 102(6) of the Controlled Substance Act (21 U.S.C. 802(6)); or a controlled substance analogue (having the meaning given it in section 102(32) of the Controlled Substance Act (21 U.S.C. 802(32)))

**Local Agency (LA):** A public or private nonprofit health or human service agency which provides health services either directly or through contract in accordance with § 246.5; an IHS service unit; an Indian tribe band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or an intertribal council or group that is an authorized representative of Indian tribes bands or groups recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit.

**Other Harmful Substances:** Other substances such as tobacco, prescription drugs, and over-the-counter medications that can be harmful to the health of the WIC population, especially the pregnant woman and her fetus.

### WIC Program Employee:

Definition: Any person(s) associated directly or indirectly with a local WIC agency to provide services related to the WIC program regardless of any funding used to support their position. Persons acting under contract as an intern or as a volunteer in a Local Agency are included under this definition.

## POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required



## Alaska WIC Policy & Procedure Manual



training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual Section: 700 Food Funds Management



### Policy: 701 Standard for WIC Approvable Foods

Effective Date: 00/00/0000

#### PURPOSE:

To summarize the Alaska WIC standard for approvable foods. This policy is used to approve or deny foods for approved product list (APL), and the “WIC Food List”.

#### POLICY: 701 Standard for WIC Approvable Food

##### Standard Summary:

To be an Alaska WIC approvable food, a product item needs to meet the USDA Requirements for WIC-Eligible Foods, be verified as available to buy within the State of Alaska AND be issuable to participants through management information system (MIS)/SPIRIT.

As a cost containment measure, Alaska WIC does not approve many organic products including milk, yogurt, cheese, cereal, legumes, peanut butter, juice.

Organic eggs, organic fruit and vegetables (CVB), organic infant fruits and vegetables, organic infant cereal and organic infant meats ARE allowable if they meet other criteria.

The foods listed below are all approved by Alaska WIC for the Approved product List. The subsequent information from the USDA is information and used to determine the Alaska WIC-approved products.

##### Milk

- Fresh, UHT, dry, evaporated; Soy (must be prescribed in food package), lactose free milk
- Only the fat-type listed on a Participant Shopping List, which include: Whole, 2%, Lowfat, skim
- Evaporated milk/canned ONLY if it is listed on household benefit.
- Soy milk ONLY if it is listed on household benefit.
- Container size must be: Fresh = Quart (32 ounces, 4 quarts in a gallon), half gallon (64 ounces, 2 half gallons in a gallon), gallon (128 ounces); Dry box size = Must divide into a quart; Evaporated can size = 12 oz ; Soy sizes = 1 qt, ½ gallon, 1 gallon
- Not allowed in Alaska = Organic milk. Chocolate, fruit-flavored, or other “non-dairy”. Acidophilus, buttermilk and goat milks

SPIRIT supports: Prescribing milk by type and divisibility by quart



*USDA Milk Requirements:*

- Must be unflavored.
- Must conform to FDA Standards of Identity at 21 CFR Part 131.110, 21 CFR Part 131.111, 21 CFR Part 131.112, 21 CFR Part 131.127, 21 CFR Part 131.130 or 21 CFR Part 131.147.
- Must be pasteurized.
- Must contain 400 International Units of vitamin D per quart (100 IU per cup).
- Must contain 2000 International Units of vitamin A per quart (500 IU per cup).

*Plant-based milk alternatives requirements:*

- Must be fortified to meet the following nutrient levels per cup: 276 mg calcium, 8 g protein, 500 IU vitamin A, 100 IU vitamin D per, 24 mg magnesium, 222 mg phosphorus, 349 mg potassium, 0.44 mg riboflavin, and 1.1 mcg vitamin B12, in accordance with FDA fortification guidelines.
- Must contain no more than 10 grams of added sugar per cup.
- May be flavored or unflavored.

**Tofu**

- Container size: Must be 16 ounces

SPIRIT supports: Prescribing milk and milk products by quart; Divisibility by quart; 1 pound of tofu = 1 quart of milk

*USDA Requirements:*

- Must contain a minimum of 100 milligrams of calcium per 100 grams of tofu.

*Not Allowed*

- Added fats, sugars, oils or sodium.

**Yogurt**

- Only the fat-type listed on your Shopping List, which could include: Whole or low-fat
- Package size: 16 ounces or larger
- Not allowed in Alaska = Greek, organic

SPIRIT supports: Prescribing milk and milk products by quart; Divisibility by quart; 1 quart of yogurt = 1 quart of milk

*USDA Requirements:*

- Must be pasteurized and conform to FDA Standard of Identity at 21 CFR 131.200.
- Must contain no more than 16 g of added sugars and a minimum of 106 IU (2.67



## Alaska WIC Policy & Procedure Manual



micrograms) of vitamin D per 1 cup yogurt.

- May be plain or flavored.
- Yogurts fortified with vitamin A and other nutrients are allowed at the state agency's option.

### *Not Allowed*

- Yogurts sold with accompanying mix-in ingredients such as granola, candy pieces, honey, nuts, and similar ingredients.
- Drinkable yogurts.

### Cheese

- Monterey Jack, Colby, Cheddar (mild and medium only), Swiss, Provolone, Mozzarella, pasteurized process American; Low fat and low sodium
- Container size: 8 or 16 oz
- Not allowed = Some Tillamook varieties due to additives: Medium, Sharp, Special Reserve, Extra Sharp, Vintage White Medium and Vintage White Extra Sharp Cheddars and Swiss. Unpasteurized cheeses. Cheese food, product or spread; shredded, grated, string, sharp or extra sharp, imported, deli cut, organic, soy, goat, or raw; Cheese with flavorings or added ingredients

SPIRIT supports: Prescribing milk and milk products by quart; Divisibility by quart; 1 pound of cheese = 3 quarts of milk

### *USDA Requirements:*

- Pasteurized Processed American, Brick, Natural Cheddar, Colby, Monterey Jack, Mozzarella: part skim or whole, Muenster, Provolone, Swiss \* Note: Blends of approved cheeses.
- Must conform to FDA Standard of Identity at 21 CFR Part 133.
- Must be domestic cheese made from 100 percent pasteurized milk.
- Cheeses that are labeled low, free, reduced, less or light in sodium, fat or cholesterol are allowed.

### Cereal

- NEED: list of what cereals are allowed and/or general specifications
- Container size: Any container size

SPIRIT supports: Issuing cereal by ounce

### Hot Cereal

- Oatmeal, instant grits, and instant Cream of Wheat in individual packets are allowed.



SPIRIT supports: Issuing/Unit of Measure by ounce

*USDA Requirements:*

- Ready-to-eat (e.g., corn flakes, bran flakes)
- Instant and regular hot cereals (e.g., oatmeal, grits, cream of wheat)
- Requirements
- Must contain a minimum of 28 milligrams of Iron per 100 grams of dry cereal.
- Must contain no more than 21.2 grams of added sugars per 100 grams of dry cereal (i.e., not more than 6 grams of added sugars per dry ounce).
- At least one (75 percent) of the total number of breakfast cereals on a state agency's authorized food list must have whole grain as the primary ingredient.

Whole Grains

- Bread, tortillas, pasta, rice
- Any combination of approved bread, buns, brown rice, pasta and/or tortillas up to the amount of whole grain listed on your household Shopping List.
  - **Bread** must be 100% whole wheat. Must be 10 – 26 oz.
  - **Corn tortillas** must be white or yellow corn, soft ONLY. 100% whole grain
  - **Whole wheat tortilla** must be "whole wheat" or "100% whole wheat" on label
  - **Pasta** must be 100% whole wheat. Any shape. 16 oz. size ONLY.
  - **Brown rice** - Instant, quick, or regular cooking; large or short grain. Any brand

SPIRIT supports: Issuing/UOM by ounce

*USDA Requirements:*

- Whole wheat bread, buns, and rolls must conform to FDA Standards of Identity at 21 CFR Part 136.180. "Whole wheat flour" and/or "bromated whole wheat flour" must be the only flours listed in the ingredients list.
- Whole grain breads, buns, and rolls must conform to FDA Standards of Identity at 21 CFR Part 136.110 AND must contain at least 50% whole grains with the remaining grains being either enriched or whole grains.
- Whole wheat macaroni (pasta) products must conform to the applicable FDA Standards of Identity at 21 CFR 139.138 and have no added sugars, fats, oils, or salt (i.e., sodium). "Whole wheat flour" and/or "whole durum wheat flour" must be the only flours listed in the ingredient list. Other shapes and sizes that otherwise meet the FDA Standards of Identity for whole wheat pasta products, and have no added sugars, fats, oils, or salt (i.e., sodium) are also authorized (e.g., whole wheat rotini and whole wheat penne).
- Corn tortillas made from ground masa flour (corn flour) using traditional processing methods are allowed. Examples of primary ingredients meeting the WIC-eligibility criteria include whole corn, corn (masa), whole ground corn, corn masa flour, masa



harina, and white corn flour.

### Legumes

- Dry: Any type and brand of mature beans, peas, lentils or mixed; Canned: Regular or low sodium. Minimum sugar added for processing allowed. Refried beans without added sugars, fats, oils, vegetables or meats;
- Baked beans allowed ONLY if listed on your Shopping List
- Container size: Can be no smaller than 15 oz. and no larger than 16 oz.
- Not allowed in Alaska = Green beans, immature beans, green peas, snap peas, orange beans, wax beans, pork & beans; Beans containing added sugars, fats, meats, vegetables or oils; Bulk beans, peas, lentils or mixed; Bean soup mixes; Organic

SPIRIT supports: Issuing by 1; 1 pound of beans = 0.25 can

### *USDA Requirements:*

- Any type of mature dry and canned\* beans, peas, or lentils. Examples include but are not limited to black beans, black-eyed peas, garbanzo beans (chickpeas), great northern beans, white beans (navy and pea beans), kidney beans, mature lima beans ("butter beans"), fava and mung beans, pinto beans, soybeans/edamame, split peas, lentils, and refried beans. Baked beans are only authorized for participants with limited cooking facilities.
- \*Note: "Canned" refers to processed food items in cans or other shelf-stable containers, (e.g., jars, pouches).

### *Not Allowed*

- Added sugars\*\*, fats, oils or meat, fruit, or vegetables as purchased.
- Canned legumes may be regular or lower in sodium.
- Soups
- Immature varieties of legumes, such as those used in canned green peas, green beans, snap beans, yellow beans, and wax beans.
- Baked beans with meat (e.g., beans and franks).

\*\*Note: Small amounts of sugar are added to some canned foods that are naturally sugar-containing during the canning process to prevent stress resulting in membrane rupture (e.g., kidney beans). This small amount of added sugar is minimal and helps to maintain the quality and structure of the food. To encourage greater variety in food choices in the WIC food packages, canned legumes that contain a small amount of sugar for processing purposes, such as plain canned kidney beans, are allowed. Baked beans may have added sugar.

### REFRIED BEANS

Container size: 16oz only





### Peanut Butter

- Any type: creamy, chunky, extra chunky, smooth, low sodium, low sugar, or natural.
- Container size: 16-18 oz. containers
- Not allowed in Alaska = Organic; Individual serving containers; Peanut butter spreads; Honey Roasted; Bulk or grind-your-own; Marshmallows, jelly, honey, chocolate, or similar ingredients

SPIRIT supports: Issuing by 1; 1 = 1, 16 – 18 jar of PB

#### *USDA Requirements:*

- Creamy or chunky; regular or reduced fat; salted or unsalted.
- Must conform to FDA Standard of Identity at 21 CFR Part 164.150.

#### *Not Allowed*

- Peanut spreads.
- Peanut butter with added jelly, honey, chocolate, marshmallow, or similar ingredients.

### Juice

- Must be 100% unsweetened juice. Regular and low sodium vegetable and tomato juice are allowed. Blends (fruit and vegetable juice) allowed
- Container size:
  - For women: 11.5-12 oz. frozen or shelf-stable concentrate juices; 46- 48 oz containers
  - For children: 16 oz. frozen juices or 64 oz. containers
- Not allowed in Alaska: Individual containers

SPIRIT supports: Issuing by 1; 1 = 1 container

#### *USDA Requirements:*

- Any fruit and/or vegetable juice or juice blends (e.g., orange, grapefruit, apple, grape, pineapple, tomato, cran-apple)
- Fresh
- Single strength
- From concentrate
- Frozen
- Canned
- Shelf-stable



## Alaska WIC Policy & Procedure Manual



### *Requirements\**

- 100% unsweetened pasteurized fruit and/or vegetable juice.
- Fruit juice must conform to FDA Standard Identity at [21 CFR Part 146](#).
- Vegetable juice must conform to FDA Standard of Identity at [21 CFR Part 156](#).
- Must contain at least 30 milligrams of Vitamin C per 100 milliliters of juice, or 72 milligrams of vitamin C per 8-fluid ounces.
- Vegetable juice may be regular or lower in sodium.

\* Note: At the state agency's option, juice fortified with other nutrients may be allowed.

### *Not Allowed*

- Fruit drinks
- Fruit-flavored aides
- Sodas
- Other beverages that are not 100% juice

### Fish

- Any brand. Canned ONLY; Pink Salmon, Tuna packed in water, no added flavors. Sardines water or oil packed, added flavors; Mackerel. Atlantic, Chub Pacific, or Jack Mackerel
- Not allowed in Alaska: Albacore or white tuna, King mackerel; Organic

SPIRIT supports: Issuing by ounces/Unit of Measure

### *USDA Requirements:*

- May be packed in water or oil.
- Pack may include bones or skin.
- May be regular or lower in sodium content.
- Note: Canned refers to processed food items in cans or other shelf-stable containers, (e.g., jars, pouches).
- Note: State agencies may allow flavorings such as lemon or herbs, or issue only boneless varieties to children

### Fruit and Vegetable (Cash-value benefit, cash value voucher)

- Fresh: Any eligible variety and container size or type. Bagged salads and vegetables. Any variety of potatoes. Fruits, vegetables precut, cleaned and packaged in the store for individual use. Fruit or vegetable mixtures, whole or cut. Organic is allowed.



- Canned or frozen: Any variety of canned and shelf-stable container, or frozen, with no added sugars, syrups, fats, or oils; Beans such as green or wax beans; May be regular or lower sodium; Fruit and vegetable mixtures allowed; Unsweetened or no sugar added applesauce; Organic
- Not allowed in Alaska: = Fruit and vegetable pouches. Plastic fruit cups in multi-packs. Edible blossoms or flowers. Herbs and spices (for example: ginger and garlic). Dried fruits or vegetables, fruit-nut mixtures, fruit leathers or roll-ups. Vegetable pasta or rice mixtures. Hash browns, French fries, tater tots, or potatoes O'Brien. Ornamental or non-edible vegetables and fruits, fruit baskets, or baked goods with fruit. Added sugars, fats, oils, syrups, salt, cream or sauces 2 Ketchup or other condiments, pickled vegetables, or olives 2 Soup, pizza sauce, and salsa

SPIRIT supports: Issuing by each/UOM. Each = \$0.01, one penny

*USDA Requirements:*

Note: States must offer WIC-eligible fresh and at least one other form (canned, frozen, and/or dried) of fruits and vegetables AND must allow organic in any form; state agencies may offer additional forms

### Fruits

- Any variety of fresh (as defined by [21 CFR 101.95](#)) whole or cut fruit without added sugars.
- Any variety of canned fruits (must conform to FDA standard of identity as appropriate ([21 CFR part 145](#))); including applesauce, juice pack or water pack without added sugars, fats, oils, or salt (i.e., sodium). The fruit must be listed as the first ingredient.
- Any variety of frozen fruits without added sugars, fats, oils, or salt (i.e., sodium).
- Any type of dried fruits without added sugars, fats, oils, or salt (i.e., sodium).

### Vegetables

- Any variety of fresh (as defined by [21 CFR 101.95](#)) whole or cut vegetable without added sugars, fats, or oils.
- Any variety of canned or frozen vegetables without added sugars, fats, or oils. Vegetable must be listed as the first ingredient. May be regular or lower in sodium. Must conform to FDA Standard of Identity as appropriate ([21 CFR part 155](#)).
- Any type of dried vegetable without added sugars, fats, oils, or salt (i.e., sodium).
- Any type of immature beans, peas, or lentils, fresh or in canned forms.
- Any type of frozen beans (immature or mature). Beans purchased with the cash-value benefit may contain added vegetables and fruits, but may not contain added sugars, fats, oils, or meat as purchased. Canned beans, peas, or lentils may be regular or lower in sodium content.



## Alaska WIC Policy & Procedure Manual



- Fresh herbs, cut at the root or with the root intact.

### *Notes:*

- “Processed” refers to frozen, canned, or dried.
- “Canned” refers to processed food items in cans or other shelf-stable containers (e.g., jars, pouches).
- Small amounts of sugar are added to some foods that are naturally sugar-containing during the canning process to prevent stress resulting in membrane rupture (e.g., sweet peas). This small amount of added sugar is minimal and helps to maintain the quality and structure of the food. To encourage greater variety in food choices in the WIC food packages, canned vegetables that contain a small amount of sugar for processing purposes, such as plain canned sweet peas and corn, are allowed.

### *Not Allowed*

- Spices and dried herbs.
- Seeds.
- Potted plants with vegetables, fruits, or herbs.
- Fresh fruits and/or vegetables packaged with dips, sauces, or glazes.
- Creamed vegetables or vegetables with added sauces.
- Mixed vegetables containing noodles, nuts or sauce packets.
- Vegetable-grain (pasta or rice) mixtures.
- Fruit-nut mixtures.
- Breaded vegetables.
- Fruits and vegetables for purchase on salad bars.
- Peanuts or other nuts.
- Ornamental and decorative fruits and vegetables such as chili peppers on a string; garlic on a string.
- Gourds; painted pumpkins; fruit baskets.
- Decorative blossoms and flowers.
- Foods containing fruits such as blueberry muffins and other baked goods.
- Home-canned and home-preserved fruits and vegetables.

### Infant Formula

- Only the type listed on Participant Shopping List.
- Formula is typically issued to participants until their first birthday. The amount of formula issued typically changes when an infant turns two months, four months and six months old. At 6-months old most infants can be issued infant food. At 9-months, by request most infants can be issued fresh fruits and vegetable instead of some of their infant fruits and vegetables.



*USDA Requirements:*

**Forms of Infant Formula**

- Concentrated liquid
- Powdered
- Ready-to-feed (RTF)
- Complies with the definition in section 201(z) of the Federal Food, Drug and Cosmetic Act ([FFDCA](#)) (21 USC 321(z)) and meets the requirements for an infant formula under section 412 of the FFDCA (21 USC 350a) and regulations at [21 CFR Parts 106](#) and [107](#).
- Nutritionally complete infant formula not requiring the addition of any ingredients other than water prior to being served in a liquid state.
- Be designed for enteral digestion via oral or tube feeding.
- Provide at least 10 mg iron per liter (at least 1.5 mg iron/100 kilocalories) at standard dilution.
- Provide at least 67 kilocalories per 100 milliliters (approximately 20 kilocalories per fluid ounce) at standard dilution.

**Infant Cereal**

- Any combination of allowed cereal: Barley, oatmeal, multi-grain or mixed grains.
- Container size: 8 oz. or 16 oz
- Not allowed = Rice cereal. Added fruit or single-serving boxes or jars. Additives such as DHA/ARA

SPIRIT supports: Issuing by ounce/Unit of Measure

*USDA Requirements:*

- Minimum of 45 milligrams of Iron per 100 grams of dry cereal.

*Not Allowed*

- Infant cereal with added infant formula, milk, fruit, or other non-cereal ingredients.

**Infant Fruits and Vegetables**

- Any stage of baby food. Single ingredient or combinations of fruit and/or vegetable ingredients (for example, pears, strawberry, banana, squash and apples). Organic.
- Container size: 4 oz. (jars) or 8 oz. (4 oz. two-packs)
- Not allowed in Alaska = Added proteins or grains. Squeezable pouches. Added sugars or salt. Additives such as DHA/ARA

SPIRIT supports: Issuing by jar/Unit of Measure. 1 jar = 4 oz



### *USDA Requirements:*

- Any variety of single ingredient commercial infant food fruit without added sugars, starches, or salt (e.g., sodium). Texture may range from strained through diced. The fruit must be listed as the first ingredient.
- Any variety of single ingredient commercial infant food vegetables without added sugars, starches, or salt (e.g., sodium). Texture may range from strained through diced. The vegetable must be listed as the first ingredient.
- Combinations of single ingredients (e.g., peas-carrots and apple-banana) are allowed.

### *Not Allowed*

- Mixtures with cereal or infant food desserts (e.g., peach cobbler).

### Infant Meats

- Meat must be single major ingredient. Added broth or gravy. Organic.
- Not allowed in Alaska = Added sugars or salt. Infant food combinations or dinners (for example, meat and vegetable combinations or spaghetti and meatballs)

SPIRIT supports: Issuing by jar. 1 jar = 2.5 oz

### *USDA Requirements:*

- Any variety of commercial infant food meat or poultry, as a single major ingredient, with added broth or gravy. Texture may range from pureed through diced.

### *Not Allowed*

- Added sugars or salt (e.g., sodium).
- Infant food combinations (e.g., meat and vegetables) or dinners (e.g., spaghetti and meatballs).

### REFERENCE:

Federal Regulations: Final Food Rule, 7 CFR 246.10(e)

- Dated March 4, 2014, effective May 5, 2014 and implemented October 1, 2015

### CROSS REFERENCE:

201: Overview of Vendor Management

WIC Food List:

[health.alaska.gov/dpa/Documents/dpa/programs/Nutrition/WIC/Retailers/2020-WIC-Food-List.pdf](http://health.alaska.gov/dpa/Documents/dpa/programs/Nutrition/WIC/Retailers/2020-WIC-Food-List.pdf)



WIC Shopping Guide:

<https://health.alaska.gov/dpa/Documents/dpa/programs/Nutrition/WIC/Participants/On-Site-Participant-Booklet.pdf>

#### DEFINITIONS:

**Approved Product List (APL):** The WIC Approved Product List outlines the types, sizes, and packaging of foods WIC participants may receive with their WIC food benefits.

**Cash Value Benefit** means a fixed-dollar amount electronic benefit transfer (EBT) card or other document which is used by a participant to obtain authorized fruits and vegetables. Cash Value Benefit is also known as cash-value voucher (CVV) when it pertains to checks or vouchers. Previously known as FVV - Fruit and vegetable voucher.

**FNS** means the Food and Nutrition Service of the U.S. Department of Agriculture.

**Food Benefits:** The foods a participant receives through WIC for a selected month. Depending on the participant category, food benefits provide specific amounts of WIC authorized foods, formulas, and/or a fixed-dollar amount for participants to obtain WIC authorized fruits and vegetables (referred to as a “Cash Value Benefit” or “CVB”).

**UOM:** Unit of Measure

**USDA:** United States Department of Agriculture

**WIC** means the Special Supplemental Nutrition Program for Women, Infants and Children authorized by section 17 of the Child Nutrition Act of 1966, [42 U.S.C. 1786](#).

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
07/19/2024	Draft

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is



## Alaska WIC Policy & Procedure Manual



the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.

FNS Review





## Alaska WIC Policy & Procedure Manual Section: 800 Caseload Management



### Policy: 801 Caseload Management and Performance Standards

Effective Date: 00/00/0000

#### PURPOSE:

- To define the term “performance standard” and identify caseload management as a WIC Program goal.
- To inform Local Agencies of the requirement that they maintain caseload at the level assigned by the State WIC Office through the RFP process.
- To explain caseload in terms of “active” versus “enrolled” participation and identify the SPIRIT reports that provide Local Agencies with their actual monthly caseload values.

#### POLICY: 801 Caseload Monitoring

##### Goal of Caseload Management

One of the most challenging aspects of the WIC Program is finding the right blend of strategies to successfully manage caseloads and meet funding obligations. The goal of good caseload management is to deliver, within available resources, quality nutrition services and appropriately prescribed food packages to the maximum number of people most in need.

##### Allocation and Monitoring Caseload

Local WIC programs must maintain caseload levels that meet their assigned caseload set by the State WIC Office through the RFP process. Ultimately, funding can be impacted if Local Agencies are **either below or above** their caseload assignments.

The purpose is to provide WIC services to as many eligible participants as possible by fully utilizing available resources in accordance with the federal regulations. This is supported by the USDA federal regulation: 7 CFR §246.16 (e) 2 Performance Standards.

##### Caseload Performance Standard

Caseload is determined in part by available funding and may be redistributed if Local Agency Performance Standards are either below or above the assigned caseload. Performance Standards are updated as part of the RFP process along with the Local Agency’s grant approval.

##### Participation Monitoring and Reports

“No-Show” rates in SPIRIT are calculated based upon kept versus missed appointment for each appointment type. The “Kept vs Missed Appointments” report found in the Clinic Module lists appointment types, the number of kept and missed appointments, along with the percentage of kept appointments. Agencies are encouraged to monitor this report and to keep their percentage “kept appointments” as high as possible.



### Participation Monitoring and Reports: Enrolled Participation

The number of participants listed as enrolled in the SPIRIT system who are eligible for food benefits but did not receive them.

### Participation Monitoring and Reports: Active Participation

The number of participants listed as active in the SPIRIT system for which food benefits are issued each month by the Local Agency WIC office. The SPIRIT Report “Reported Participation WIC – Monthly Unduplicated” details active participation in the SPIRIT MIS.

The State WIC Office and Local Agencies will monitor the number of active participants (participants issued food benefits) monthly. This will be compared to each Local Agency’s caseload Performance Standard, as assigned in the WIC Grant Agreement. The SPIRIT participation reports are available after the 18<sup>th</sup> of the month or after the “end-of-month” processes are run; whichever is earliest.

### Participation Monitoring and Reports: No- Show Rate

If your agency uses the appointment scheduler, review the appointment no-show rate for the month. SPIRIT calculates this number by using data from the calendar functionality and clinic staff data input. Access report “Kept vs. Missed Appointments” for statistics.

If a Local Agency does not use the appointment scheduler then the LA must monitor their no-show level by monitoring the Participation vs. Enrollment Monthly report. Compare the Local Agency Participation vs. Enrollment report against the statewide Participation v. Enrollment report. The Local Agency should strive to meet or exceed the statewide average.

Technical assistance is offered by the State WIC Office to Local Agencies that have difficulty in meeting their caseload Performance Standard. If your agency's caseload is  $\leq 97\%$  of your Performance Standard, consider managing caseload through the following suggestions.

Local Agencies should consider the following factors in monitoring month-by-month caseload:

- The number of participants whose certification periods are expiring, by month, who will not be eligible for recertification.
- The number of participants whose certification periods are expiring, by month, who will be categorically eligible to be screened for recertification.
- Prior caseload, by month.
- The average number of appointments, by month, for applicants for certification and recertification. This average should be calculated for at least the past six months. Outreach activities which have the potential of increasing the number of applications.
- Seasonal fluctuations in average area incomes which, based on prior history, usually increase or decrease active caseload.
- Seasonal migration patterns, such as moves to summer fish camps, which, based on



## Alaska WIC Policy & Procedure Manual



prior history, usually increase or decrease caseload.

- Begin efforts to increase caseload early in the fiscal year, then build throughout the year.
- Use State staff as a resource for technical assistance in interpreting reports and developing strategies.
- Talk with experienced coordinators to learn how they have handled caseload changes and to learn more about the act of managing caseload.
- Analyze trends and patterns from past reports. Maintain and evaluate records that identify caseload fluctuations. For example, in evaluating records from past years there is a repeat pattern of a decrease in active participants during the second quarter of the state fiscal year; due to the release of the Alaskan Permanent Fund Dividend.
- Keep staff and agency managers informed about caseload performance, the implications of current trends and possible impact of changes in caseload. Involve them in making decisions.
- Develop strategies to achieve caseload goals. Take action and implement selected strategies. Maintain ongoing evaluations and reassess plans and goals as needed.
- Increase outreach activities.
  - Distribute WIC information to local stores, clinics, and agencies.
    - Pursue populations in need of increased services, such as Medicaid or DKC recipients, teen parents, Head Start families and isolated communities.
  - Consider promotions via local newspapers and radio stations.
  - Encourage word-of-mouth referrals.

Increase the number of available appointments.

- Review staffing patterns and activities.
  - Use volunteers or non-professional staff for support services, routine clerical tasks, and participant weighing and measuring, to increase availability of staff for certification appointments.
- Streamline service to reduce the length of time spent per participant so additional appointments can be scheduled. Analyze participant movement through the clinic.
- Consider group certifications.
  - Share staff from other health department programs, local WIC programs, doctors' offices, or other agencies, to assist with certification.

Increase accessibility to program services. Conduct participant surveys to identify barriers to services.

- Extend clinic hours to include weekend, evening, early mornings, or lunch times.
  - Check availability of public transportation and free parking near clinic sites.
- Provide adequate waiting room and clinic space to serve the number of participants being seen at each clinic site.



Improve show rates.

- Call participants the day before scheduled appointments.
  - Send reminder postcards.
  - Allow participants to select appointment dates and times that best serve their needs.
  - Contact participants to reschedule missed appointments.
  - Adjust appointment schedules to compensate for show rates by over-booking appointments.
- Create an on-call list of participants who are willing and able to come in on short notice to fill appointment slots that become available when participants cancel.
- Serve walk-in clients as a good business practice.
- Your agency can utilize the service “One Call Now” which automatically calls, texts and emails client's reminders that upcoming appointments or benefits are about to expire. This is a time-saving measure to reduce the administrative burden of each Local Agency having to make reminder calls to clients. Contact the State office if you need assistance to sign up for this program.

### REFERENCE:

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)

- Subpart A- General- Definitions
  - 246.2
- Subpart B- State and Local Agency Eligibility- State Plan
  - 246.4(a)(13)
- Subpart E- State Agency Provisions- Distribution of Funds
  - 246.16(c)(2)(i)
  - 246.16(e)(2)(i)

### DEFINITIONS:

**Caseload:** The number of participants issued food benefits versus those enrolled but not receiving food benefits.

**Denali KidCare (DKC)** is Medicaid coverage for children from birth through age 18 and Pregnant Women who meet income eligibility standards

**Grant Agreement:** An agreement that binds the State of Alaska and an agency, detailing the terms under which the local agency will provide WIC services.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);



## Alaska WIC Policy & Procedure Manual



- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**No-Show Rate:** No-show rate is the percentage of applicants and participants that failed to attend their scheduled WIC appointment.

**Performance Standard:** The performance standard is the number of participants that each Local Agency is expected to serve. A measurement established through the RFP process.

**Request for proposal (RFP):** Also referred to as the grant. Process by which the State of Alaska solicits agencies to provide WIC services. The RFP and grant are binding documents between the State of Alaska and a Local Agency.

**SPiRiT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
06/18/2024	Revised
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting



## Alaska WIC Policy & Procedure Manual



changes may have occurred.

FNS Review



## Alaska WIC Policy & Procedure Manual Section: 800 Caseload Management



### Policy: 802 Allocation of Funds

Effective Date: 00/00/0000

#### PURPOSE:

- To describe how federal funding is provided to the State WIC Office, and in turn awarded to Local Agencies who then provide benefits to WIC Participants.
- To describe how the State WIC Office's funds are allocated between the individual Local WIC Agencies.
- To describe the method used to allocate additional funds after the Local Agency WIC grants have been awarded to Local WIC Agencies, when additional NSA funds become available for distribution.

#### POLICY: 802 Allocation of Funds

##### Allocation of Funds

Funding for the Alaska WIC program is provided by the United States Department of Agriculture (USDA) Food and Nutrition Services (FNS) to the State of Alaska as at least two grants: A Nutrition Services and Administration (NSA) grant and a Food Funds grant. Local Agencies are awarded NSA funding through annual grants. The Department of Health awards WIC funds through a Grant Agreement (GA) upon approval of an agency's grant application. Local Agencies may apply for grant funding via a Request for Proposal or through a Request for Application in continuing years of a multi-year procurement process. The State WIC Office administers food funds.

By entering into a grant agreement, the grantee agrees to comply with terms of the Grant Agreement including the WIC Assurances, the WIC Policy and Procedure manual, and other relevant documents.

Grantees must meet the Performance Standard within the RFP. If the Performance Standard is not met and maintained, grant funding may be reduced according to the RFP.

##### Local Agency Budgets: Allocation Process

The Local Agency budget will be determined by a funding formula.

##### Reallocation Process

If additional NSA funds for Local Agency use become available during the state fiscal year, Local Agencies will be notified of the availability of additional funds by the State WIC Office. The Local Agency will be directed to submit an amended budget through GEMS, the DOH online grant system. An amended Grant Award (GA) will be issued by the State of Alaska Department





of Health (DOH) which must be signed by the Local Agency and returned to DOH to be fully executed before expenditures may be claimed. Reallocation of existing or additional funds will be started in January of the current fiscal year and may be based upon the set Performance Standard for each local WIC agency.

### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart E- State Agency Provisions- Distribution of Funds
  - 246.16(a)(1-6) and 246.16(b) through (c)(4)
  - 246.16(d-e)
  - 246.16(e)(1)

State of Alaska GEMS system

### DEFINITIONS:

**Grant Agreement:** An agreement that binds the State of Alaska and an agency, detailing the terms under which the Local Agency will provide WIC services.

**GEMS** is the Grants Electronic Management System for both departments' operating and capital grants. In GEMS, users will be able to view solicitations, apply for DOH and DFCS grants, manage agency information, and manage grant awards issued by both departments.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Nutrition Services and Administration (NSA) Costs** means those direct and indirect costs, exclusive of food costs, as defined in [§ 246.14\(c\)](#), which State and Local Agencies determine to be necessary to support Program operations. Costs include, but are not limited to, the costs of Program administration, start-up, monitoring, auditing, the development of and accountability for food delivery systems, nutrition education and breastfeeding promotion and support, outreach, certification, and developing and printing food instruments and cash-value vouchers.

**Nutrition Services and Administration (NSA) Funds:** NSA is used to fund WIC operations at state and local levels. Operations include WIC staffing cost, the WIC data system, educational





## Alaska WIC Policy & Procedure Manual



materials, equipment, overhead, and all other costs involved in delivering WIC services to participants. A specific percentage of the NSA received by local WIC agencies must go towards breastfeeding promotion and nutrition education services. The amount of NSA funding an agency receives is based on assigned caseload.

**Performance Standard:** The performance standard is the number of participants that each Local Agency is expected to serve. A measurement established through the RFP process.

**Request for proposal (RFP):** Also referred to as the grant. Process by which the State of Alaska solicits agencies to provide WIC services. The RFP and grant are binding documents between the State of Alaska and a Local Agency.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
09/01/2024	Revised

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 800 Caseload Management

#### Policy: 803 Local Agency Outreach

Effective Date: 00/00/0000

##### PURPOSE:

To require that Local Agencies develop and implement an outreach plan to increase public awareness and participation in the WIC Program, especially among minorities, women in early pregnancy, and other underserved groups in Alaska. To improve caseload management by using data from the Division of Public Assistance (DPA) and outlines specific outreach efforts for Alaska Natives, migrants, and other minority populations to ensure they are informed about WIC services and eligibility.

##### POLICY: 803 Local Agency Outreach

###### Local Agency Benefit Targeting Plan

Local Agencies are required to develop an outreach plan to implement a public awareness program which encourages participation and informs all potentially eligible persons, particularly minorities and women in the early months of pregnancy, of the program. The public awareness system must advise participants of the protection against discrimination and describe the procedure for filing a complaint.

In targeting outreach efforts to pregnant women in their first trimester, clinics should include outreach to medical practices that serve pregnant women in Alaska. Places such as Obstetrics and Gynecology (OB-GYN) staff orientations, village health clinics, birthing centers, pregnant teens' facilities or schools, Family and OB practices should receive brochures and posters about accessing WIC services. Outreach to these practices should occur at least once annually.

Local Agencies should use forms of communication such as letters, leaflets, brochures, bulletins, newspapers, emails, texts, social media, and radio and television announcements to disseminate program information to the general public with emphasis on people in the early months of pregnancy, and minorities, and minority organizations.

Information distributed to the public must advise potential participants, particularly minorities, women, the homeless, foster care givers, and grassroots organizations, of program availability and eligibility standards throughout the year. It must also inform potential participants of any significant program changes in the areas affected, such as revisions in income eligibility standards, the location of new clinics, and hours of service.

This information must be publicly announced by Local Agencies at least annually and must also be distributed to offices and organizations that deal with significant numbers of potentially eligible persons, including health and medical organizations, physicians, hospitals, and clinics,



## Alaska WIC Policy & Procedure Manual



welfare and unemployment offices, social service agencies, farmworker organizations, foster care facilities, Indian tribal organizations, religious and community organizations in low income area, and WIC vendors.

### Public Awareness

The public awareness program materials should use photographs or other graphics to display participants of different races, colors, ages, sexes, disabilities, and national origins on program related information which conveys the message of equal opportunity.

It should also provide information and other materials such as applications, eligibility criteria and procedures for delivery of benefits in languages other than English, as needed.

All outreach information concerning program activities must contain the WIC non-discrimination statement.

Local Agencies are required to report on outreach efforts in their quarterly reports. Outreach plans and activities are reviewed by State WIC Office staff in Local Agency Management Evaluations.

### Increase caseload through outreach to Division of Public Assistance's Data:

WIC grantees have an opportunity to receive Medicaid, Denali KidCare, and SNAP client data from the State of Alaska Division of Public Assistance (DPA) to increase caseload by identifying adjunctively eligible individuals and families that would benefit from receiving WIC services.

In order to receive this confidential information, WIC Local Agencies agree to abide by the signed WIC Data Exchange Agreement (in GEMS) as part of the annual grant award process.

WIC clinics are restricted from using client information for purposes other than providing WIC services as outlined in the signed client Rights and Responsibilities form.

### Outreach to Migrants

Migrant workers are not identified as a special population in Alaska. However, in Alaska there are a small number of loggers who work in the timber industry and seasonal cannery workers who work in the seafood industry. Approximately two-thirds of summer food processing employees are nonresidents.

Because the Alaska Department of Labor does not identify migrant workers as a special population, there is no data available for health planning. Alaska WIC Local Agencies will preferentially enroll a migrant who has been a WIC participant elsewhere, but migrants are not considered a special population in Alaska.

Local Agencies must make efforts to conduct outreach where this population exists within their service areas to increase caseload and provide needed services.



### Alaska Native Outreach

Many Alaska Natives live in remote villages which average less than 250 in population. These villages are scattered along the major river ways and coastal areas of Alaska, and are basic units of subsistence culture. This remoteness and sparseness of population makes it expensive and difficult to administer a program such as WIC in the “bush communities”. Costs are high for salary, travel, communication, equipment and training and maintaining part-time personnel. At the same time, Alaska Natives are at an elevated health risk compared to non-Natives, and many have less access to health services because they live in remote areas.

In order to improve the health status of Alaska Natives, reasonable efforts must be made to serve this population. The State WIC Office currently awards funds to seven health agencies that have the health of Alaska Natives as their primary focus (Norton Sound Regional Health Corporation, Southeast Alaska Regional Health Consortium, North Slope Borough Department of Health and Social Services, Yukon-Kuskokwim Health Corporation, Tanana Chiefs Conference, Bristol Bay Area Health Corporation, and Kodiak Area Native Association). All Local Agencies are required to do outreach to minority organizations to ensure that Alaska Natives are informed of program availability.

### Outreach to Other Minorities

The population of other minorities in Alaska is growing. Significant numbers of Hispanics, African Americans and Asian/Pacific Islanders are now residents of the state. Local Agencies should make special efforts to reach these populations using outreach methods which are appropriate to such populations.

### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart A - General- Definitions
  - 246.2
- Subpart A - State Plan – Outreach
  - 246.4
- Subpart B - State and Local Agency Eligibility- State Plan
  - 246.4(a)(7-8)
- Agreements with Local Agency
  - 246.6

WIC Nutrition Services Standards: Standard 21, Program Outreach and Marketing

### CROSS REFERENCE:

WIC Data Exchange Agreement in GEMS

908 Income Eligibility Guidelines (Section about Adjunctive Eligibility)



## DEFINITIONS:

**Adjunctive eligibility:** Meets WIC standard for income eligibility through verification that WIC applicants are participating in Supplemental Nutrition Assistance Food Program (SNAP), Alaska's Temporary Assistance for Needy Families (TANF), Alaska's Medicaid, including Denali KidCare, or the Food Distribution Program on Indian Reservations (FDPIR).

**GEMS** is the Grants Electronic Management System for both departments' operating and capital grants. In GEMS, users will be able to view solicitations, apply for DOH and DFCS grants, manage agency information, and manage grant awards issued by both departments.

**Limited English Proficient (LEP):** Individuals who do not speak English as their primary language and who have a limited ability to read, speak, write, or understand English can be limited English proficient, or "LEP." These individuals may be entitled language assistance with respect to a particular type or service, benefit, or encounter

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Migrant:** A migrant worker is an individual whose principal employment is on a seasonal basis, who has been so employed within the last 24 months, and who establishes, for the purposes of such employment, a temporary residence. Loggers, farm workers, seasonal fisherman and cannery workers are considered migrant workers if they meet these criteria.

**Outreach:** Activities performed primarily by Local Agency to communicate the availability of WIC program benefits, eligibility criteria, and program locations to potential participants in the community.

**Service area:** The geographical area serviced by a local WIC Program.

**SPIRIT:** Successful Partners in Reaching Innovative Technology, the system used to track participation and generate reports.

## POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed



## Alaska WIC Policy & Procedure Manual




**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual Section: 800 Caseload Management



### Policy: 804 No-Show Rate

Effective Date: 00/00/0000

#### PURPOSE:

- To define the term “no-show” and alert Local Agencies of the requirement to track WIC participants who have missed their WIC appointments.
- To provide recommended procedures for reminding WIC participants that they have an upcoming WIC appointment scheduled.
- To inform Local Agencies of the requirement to contact any pregnant woman who misses her initial WIC certification appointment and attempt to reschedule her certification appointment.

#### POLICY: 804 No-Show Rate

##### Missed Appointments (No-Shows)

It is important that all WIC participants receive all of their WIC benefits, including nutrition education. Any currently certified participant who does not contact the WIC clinic to receive their food benefit and nutrition education is identified as a “no-show”.

If a participant or family misses an initial certification, subsequent certification or nutrition education appointment, attempts to reschedule the participant must be made to ensure the participant receives needed services. Follow-up calls, postcards, emails, texts, or letters to participants that have missed their appointments should be used to reschedule appointments. Local Agencies that do not schedule all their WIC appointments, a no-show procedure should be in place to identify participants whose services are overdue and a plan to contact the participant via one of the methods mentioned above.

##### Pregnant Women Who Miss First Appointment

Each Local Agency must attempt to contact (by phone or by mail) each pregnant woman who misses her first appointment to apply for participation in the program in order to reschedule the appointment. This requirement applies to initial certification.. To facilitate attempts to contact pregnant women if an initial certification appointment is missed, Local Agencies must request an address and telephone number of each pregnant woman at the time of the initial contact.

#### PROCEDURE:



### No-Show Prevention: Appointment Reminders

WIC appointments are usually made several months in advance. Appointment reminders are a good way to reduce no-shows. The following procedures are recommended for use by Local Agencies to reduce no-shows:

When an appointment is made for a participant, ask him or her to write his or her current address on the front of a postcard, and to fill out the back of a postcard which is printed as follows:

<p>You have a clinic appointment at:</p> <p>(Clinic address - preprinted)</p> <p>on _____ at _____</p> <p>If you cannot keep this appointment, please call (clinic phone # - preprinted) at least 24 hours in advance to schedule a new appointment.</p>
--

To preserve confidentiality, do not use "WIC" on either side of the postcard. File the postcards by appointment dates, and mail them several days before appointments.

Some participants may have moved by the time their appointment postcard is sent but may receive their postcards.

Rather than mail the postcards, Local Agencies are also permitted to convey appointment reminders through electronic means, including text, email or automated voicemail.

- Involve staff in taking action to reduce no-shows.
- The day prior to a participant's appointment, call the applicant to confirm date and time.
- Collect email addresses in SPIRIT to do mass email reminders for appointment reminders.

### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart C- Participant Eligibility- Certification of Participants
  - 246.7(b)(5)
- Subpart D- Participant Benefits- Nutrition Education
  - 246.11(e)(4)

### DEFINITIONS:





## Alaska WIC Policy & Procedure Manual



**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.

**Initial certification:** The first certification for an individual who has never participated in WIC or has not participated in WIC for 12 months or more.

**No-Show Rate:** No-show rate is the percentage of applicants and participants that failed to attend their scheduled WIC appointment.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Subsequent certification (recertification):** Any certification after the initial certification

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
06/17/2024	Revised

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 800 Caseload Management



#### Policy: 805 Wait Lists

Effective Date: 00/00/0000

#### PURPOSE:

- To provide the policy for serving WIC participants when the State WIC Office experiences a funding shortage and initiates a “wait list”.
- To provide procedures Local Agencies must follow when a wait list has been initiated.
- To provide guidance to Local Agencies when wait list restrictions have been lifted, and eligible participants may again be provided WIC services.
- To define procedures to be used when the State WIC Office implements WIC Program wait lists due to funding shortages.

#### POLICY: 805 Wait lists

##### Wait List Policy

Wait lists will be established and maintained when current active caseloads and/or Local Agency caseload projections indicate that food expenditures may exceed available funds, or when food fund reductions in the Alaska WIC grant from the USDA are anticipated.

If the State WIC Office experiences Food Fund shortages, it will notify Local Agencies that wait lists have been initiated. In no case can an applicant who requests placement on a wait list be denied inclusion.

If additional Food Funds become available, the number of applicants, by priority group, who can be added to the statewide caseload, will be projected by the State WIC Office. Local Agencies will be notified by the State WIC Office of the number of applicants who can be certified, by priority group. Applicants in each priority group that can now be certified will be certified based on the amount of time they have been on the wait list. It is recognized that it is much harder for a Local Agency to build caseload than to cut caseload, so a decision to implement the wait list policy will only be made after very careful consideration.

#### PROCEDURE:

Local Agencies must maintain a written Wait List and it must include:

- The applicant's name
- Address or phone number
- E-mail address
- Status (client type) and
- Date the client was placed on the Wait List.
- Priority



## Alaska WIC Policy & Procedure Manual



1. Clients placed on the Wait List must be notified of their placement within 20 days of when they apply for services. Explain to the client that their name will be placed on the wait list for that priority. Inform the client that we will be contacting them as soon as the State WIC Office tells Local Agencies to begin serving their priority.
2. Provide the participant with the necessary referrals and community resource list to help assist them during this unfortunate time. No Local Agency variations will be permitted without written prior State WIC Office approval. Local Agencies will place an applicant on a wait list only after categorical eligibility and nutritional risk have been established. The State WIC Office will monitor the number of applicants on wait lists for each Local Agency on a monthly basis.
3. WIC clients whose certification period has not expired will continue to receive WIC food benefits until the end of their certification period. At the end of their current certification period, they will need to be re-certified and be placed on the wait list.
4. New applicants and clients needing re-certification should be placed on the same wait list. Re-certifications do not take priority over new applicants. Both are required to be certified, to determine nutritional risk and to assign a Priority. Clients being placed on wait lists should be evaluated for priority by assessing application, height, weight, and hemoglobin value if applicable. Once an opening is available and a client comes off the wait list, food benefits can be issued to help with clinic flow and efficiencies.
5. Persons transferring from another WIC clinic who are still within a certification period must be served ahead of all other applicants on the wait list for their priority group, regardless of their priority. If the certification period has expired, they are to be treated as all other applicants for certification.

Clients will be contacted from the list in the following order:

1. Persons transferring from another WIC clinic who are still within a certification period. When an opening occurs, transferring participants must be served ahead of all other applicants on the wait list for their priority group, regardless of their priority. If the certification period has expired, they are to be treated as all other applicants for certification.
2. Infants and pregnant and breastfeeding women with known nutritional risk which would qualify them as Priority I applicants.
3. Infants, birth to 6 months, classified as Priority II because they were born to WIC mothers or women with known high-risks conditions.
4. Children with known medical risks which qualified them as Priority III. The State WIC Office may develop sub-priorities for Priority III children if necessary.
5. All infants and pregnant and breastfeeding women other than those with Priority I or II risks.
6. High risk postpartum women qualified as Priority III.
7. All children other than those with Priority III risks.
8. Postpartum women other than those with Priority III risks.



## Summary of Alaska WIC Priorities

### **Priority I: PG, BF, and I**

Anthropometric, hematological or documented nutrition related medical conditions

### **Priority II: I**

Infant of a WIC mom up to 6 months

Infant of a non-WIC mom with documented Nutritional Risks During pregnancy detectable by Anthropometric, Hematological or nutrition related medical conditions

### **Priority III: C and PP**

Anthropometric, hematological or documented medical conditions

### **Priority IV: PG, BF, and I**

Failure to Meet Dietary Guidelines; Presumptive Eligibility; Regression  
Homeless or Migrant; Recipient of Abuse, and Other Nutritional Risks

### **Priority V: C**

Failure to Meet Dietary Guidelines;  
Homeless or Migrant; Recipient of Abuse, and Other Nutritional Risks

### **Priority VI: PP**

Failure to Meet Dietary Guidelines, Other Nutritional Risk, Regression; Homeless  
or Migrant; Recipient of Abuse

### **Priority VII: C**

Regression Variable Priority: Breastfeeding Dyad  
If breastfeeding women and infant's priorities differ assign the highest priority to both

## **REFERENCE:**

Federal Regulations: 7CFR Ch. II

- Subpart C- Participant Eligibility- Certification of Participants
  - 246.7(f)(1)
  - 246.7(e)(4)(i-vii)
    - 374-375 (priority system)
  - 246.7(k)(3)

## **CROSS REFERENCE:**

Job Aid 026: Wait List Information Form

941 Anthropometrics

942A Hemoglobin & Hematocrit Screening

942B Guidelines for anthropometric and hematology data collection without physical presence



- 353 Food Package I –Infants 0 through 5 months
- 354 Food Package II: Infants 6-11 months
- 356 Food Package III-Medically Fragile Participants
- 357 Food Package IV Children 1 through 4 years of age
- 358 Food Packages V Pregnant and Partially Breastfeeding
- 359 Food Package VI: Postpartum Women
- 360 Food Package VII: Fully Breastfeeding Women
- 361 Food Packages: Homeless

#### DEFINITIONS:

**Applicants:** means pregnant/breastfeeding/postpartum people, infants, and children who are applying to receive benefits. Applicants include individuals who are currently participating in the program but are re-applying before their certification expires.

**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.

**Food Funds:** Food funds or dollars are reimbursed for WIC participant purchases at grocery stores or pharmacies. Food funds come from the federal WIC grant and rebates received on contract infant formula bought by WIC participants.

**Priority:** The ranking assigned to a participant based on the individual's WIC category and identified risk factors in accordance with the federal nutrition risk priority system.

**Wait list:** A list of individuals who express interest in receiving benefits and are likely to be served when caseload slots become available.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.



## Alaska WIC Policy & Procedure Manual



**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A "draft" watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.

FNS Review



## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services



#### Policy: 901 Eligibility Criteria

Effective Date: 06/01/2018

##### PURPOSE:

- To list the four WIC eligibility requirements an individual must meet to be qualified to be an Alaska WIC participant and receive WIC Program benefits.

##### POLICY: 901 Eligibility Criteria

###### WIC Eligibility Requirements

To be eligible to receive WIC benefits, an individual must meet all four WIC eligibility requirements. An individual can be certified for WIC if he or she meets requirements in each of these four areas:

- Categorical eligibility
- Residency
- Income
- Nutritional risk

###### Guidelines for obtaining proof of identity, residency, and income

- Each Local Agency must instruct incoming applicants, participants, parents, or caregivers to provide acceptable proof of identity, residency, and income when enrolling in the WIC program and at recertification.
- Local Agencies need to routinely and clearly communicate the kinds of information participants need to provide for their certification appointments for initial and continued service.

###### Documentation Requirements

- All WIC applicants and participants (women, infants and children) must provide the required acceptable proof to receive WIC benefits.
- LA staff must document the proofs of residency, identity and income in SPIRIT during each certification/recertification.
- Proof of identity and residency are required when participants certified in WIC transfer their WIC enrollment to Alaska.

##### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart A - General Definitions



- 246.2 (c)(1)
- Subpart C - Participant Eligibility- Certification of Participants
  - 246.7 (c)(1)(i-iii)
  - 246.7 (e)

**CROSS REFERENCES:**

902	Physical Presence
903	Proof of Identity
904	Proof of Residency
905	Proof of Income
906	Categorical Eligibility Requirement
907	Nutritional Risk Requirement
908	Income Eligibility Guidelines
909	Change in Custody
910	Termination of Benefits
911	Public Charge
912	Determining Family Size

Job Aid 027:	WIC Certification at a Glance - Flowchart
Job Aid 028:	WIC Income Eligibility Guidelines FY25
Job Aid 029:	WIC Alaska Native Income Certification FY25
Job Aid 030:	No Proof of Income Form & WIC IOU Form
Job Aid 025:	Zero Income Form
Job Aid 031:	Termination Letter: Your Benefits Have Ended Form
Job Aid 032:	Memorandum of Understanding btw SOA WIC and Homeless Shelters
Job Aid 033:	Family Information Form

**DEFINITIONS:**

**Acceptable proof:** Reasonable documentation of personal identity, income and current residency as approved by the state WIC program.

**Categorical eligibility** means persons who meet the definitions of pregnant women, breastfeeding women, postpartum women, infants or children.

**Income:** Monetary compensation for services. Gross income, including overtime, before deductions for income taxes, employees' social security taxes, insurance premiums, bonds, etc. The determination of the amount of a household's gross income shall not be considered reduced for any reason (e.g.; financial hardships, medical bills, child support). Farmers and self-employed use net income. Net income is determined by subtracting the operating expenses from the gross income.





**Income eligible:** Meets WIC standard for income for household size. WIC program eligibility standard is 185 percent of the non-farm poverty guidelines prescribed by the U.S. Office of Management and Budget (OMB), adjusted annually.

**Identity:** means the unique set of characteristics that can be used to identify a person as themselves and no one else.

**Local agency (LA)** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Nutritional risk** means:

- (a) Detrimental or abnormal nutritional conditions detectable by biochemical or anthropometric measurements;
- (b) Other documented nutritionally related medical conditions;
- (c) Dietary deficiencies that impair or endanger health;
- (d) Conditions that directly affect the nutritional health of a person, including alcoholism or drug abuse; or
- (e) Conditions that predispose persons to inadequate nutritional patterns or nutritionally related medical conditions, including, but not limited to, homelessness and migrancy.

**Nutrition Risk Criteria Manual:** A manual that reviews the scientific basis for nutrition risk criteria used to establish eligibility for participation in the U.S. Department of Agriculture's Special Supplemental Nutrition Program for Women, Infants, and Children (WIC).

**Residency:** means the county jurisdiction to which a person mentally intends his or her permanent residency to be and that can be factually supported. Factual evidence that would be supportive of that intent includes but is not limited to, a Driver license, tax receipts, bills of residency (electricity, water, garbage service), receipt of mail, homestead property, declaration of domicile, and other activities indicative or normally associated with home life.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed



## Alaska WIC Policy & Procedure Manual




**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

#### Policy: 902A Physical Presence

Effective Date: 06/01/2018

#### PURPOSE:

To provide direction on the requirement for individuals apply for the WIC Program to be physically present at certification and recertifications.

#### POLICY: 902A Physical Presence

##### Physical Presence Requirement

WIC regulations require individuals who apply for participation in the WIC Program to be physically present at the initial WIC certification and subsequent recertifications, except in certain limited circumstances. Clinic staff are required to state whether the participant is physically present with the CPA for the certification appointment. If the participant is not present a reason must be selected from the Reason Not Present drop-down menu in SPIRIT.

Participants who live in rural sites and are seen in a clinic from a rural community, the clinic staff or public health nurse is able to verify that the participant has been seen in person. In these “remote” cases, the staff or public health nurse is verifying the physical presence, and the WIC clinic staff should mark “Yes” within SPIRIT verifying physical presence.

Exceptions to this requirement may be allowed for:

- Individuals whose disabilities cause them to be unable to be physically present at the WIC clinic because of:
  1. A medical condition that necessitates the use of medical equipment that is not easily transportable;
  2. A medical condition that requires confinement to bed rest; or
  3. A serious illness that may be exacerbated by coming into the clinic.

Exceptions may also be allowed if physical presence would present an unreasonable barrier to participation for certain infants and children. Physical presence is not required in the following situations:

An infant or child:

- Who was present at his/her initial WIC certification; and
- Has a documented ongoing health care from a provider including the Local Agency; or
- Who was present at his/her initial WIC certification; and
- Was present at a WIC certification or recertification determination within the one-year



## Alaska WIC Policy & Procedure Manual



- period on the date of the most recent certification or recertification determination; and
- Is under the care of one or more working parents or one or more primary caregivers whose working status presents a barrier to bringing the child to the WIC clinic; or
- For infants under 8 weeks of age who cannot be present at the time of certification (for a reason determined appropriate by the Local Agency), whose necessary certification information is provided.

For persons submitting applications to a WIC clinic from a rural community, the public health nurse or village health worker assisting with the WIC certification is to verify that the applicant has been seen in person. In these “remote” cases, the staff or public health nurse is verifying the physical presence, and the WIC clinic staff should mark “Yes” within SPIRIT verifying physical presence.

If the certifier allows an exception for one of the reasons listed above, this will be noted by the certifier in the SPIRIT record.

### REFERENCE:

Federal Regulations: 7CFR Ch. II

Subpart C- Participant Eligibility- Certification of Participants

- 246.7 (o)(1)

### CROSS REFERENCES:

- 901 Eligibility Criteria
- 902B Physical Presence Waiver
- 903 Proof of Identity
- 904 Proof of Residency
- 905 Proof of Income
- 906 Categorical Eligibility Requirement
- 907 Nutrition Risk Requirement
- 908 Income Eligibility Guidelines
- 909 Change in Custody
- 910 Termination of Benefits
- 911 Public Charge
- 912 Determining Family Size

Job Aid 027: WIC Certification at a Glance - Flowchart

### DEFINITIONS:

**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.



## Alaska WIC Policy & Procedure Manual



**Children** means persons who have had their first birthday but have not yet attained their fifth birthday.

**Infant:** A person who is 12 months old or younger. Once they turn 12 months, they are considered a child.

**SPiRiT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services



#### Policy: 902B Physical Presence Waiver

Effective Date: 00/00/0000

#### PURPOSE:

To provide guidance to local agencies on the Physical Presence Waiver issued by USDA Food and Nutrition Service under the American Rescue Plan Act (ARPA).

Under the ARPA Physical Presence Waivers, the regulatory provisions that require WIC participants to be physically present at certifications and recertifications are temporarily waived. It allows WIC services to be provided remotely.

This waiver is in **effect until September 30, 2026**, unless otherwise specified by the Alaska WIC Program.

#### BACKGROUND:

WIC federal regulation 7 CFR 246.7(o)(1)(2) states that the State or local agency must require all applicants to be physically present at each WIC certification with a few exceptions: disability, medical condition, receiving ongoing healthcare, working caretakers, and infants under 8 weeks of age. The ARPA Physical Presence Waiver temporarily waives the physical presence requirement for all WIC applicants and participants.

Alaska WIC is choosing to implement the ARPA waiver for physical presence.

#### POLICY: 902B Physical Presence Waiver

Each WIC local agency must provide the option for participants to obtain in-person services, including the collection of anthropometric and hematological data, as well as remote certification at their service region's staffed WIC clinic(s).

1. Participants who reside in proximity to their service area's staffed WIC clinic will be offered the option to be physically present in the WIC clinic. However, these participants are permitted to certify remotely if they choose.
2. Remote certification appointments are permitted by phone, and any HIPAA-compliant tele-medicine or video chats that are either provided by the State WIC Office or have been approved by the State WIC Office for use by the local agency for remote certifications.
3. Clarifications regarding physical presence:
  - a. In order to be considered physically present, the applicant/ participant must physically present themselves, in person, to a local WIC clinic.



## Alaska WIC Policy & Procedure Manual



- b. Participants who are seen by the WIC CPA during video-enabled remote certifications are not considered physically present.
- c. Participant physical presence cannot be verified by non-WIC healthcare staff.

Participants who are not physically present will be certified by utilizing the ARPA physical presence waiver.

1. When utilizing the ARPA physical presence waiver, the WIC clinic staff will mark “No” within the WIC MIS indicating that the participant was not physically present for the certification. The reason chosen from the WIC MIS drop-down box will be “ARPA physical presence waiver.”
  - a. The ARPA physical presence waiver applies to all WIC local agencies and all WIC participants, regardless of participants’ proximity to their service region’s staffed WIC clinic(s).
  - b. Participants **will not** be terminated based solely on a lack of physical presence
  - c. Refer to Policy: Guidelines for anthropometric and hematology data collection.

The ARPA physical presence waiver also allows WIC clinics flexibility when collecting participant signatures on WIC documents, including but not limited to the WIC Rights and Responsibilities Form.

1. Electronic signatures are preferred, but not required.
2. Wet signatures are an option, but not required.
3. If providing either a wet or electronic signature poses a barrier to certification, then the WIC staff may receive an alternate form of signature verification.
  - a. Documentation must be maintained on file that the information has been transmitted to the participant and that the participant understands and has acknowledged the information.
  - b. When staff sign for participants, the staff member will sign the participant’s name on the signature line and then the staff person will initial next to the signature, using their own initials.

### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart C- Participant Eligibility- Certification of Participants o 246.7 (o)(1)(2)

The American Rescue Plan Act (ARPA) of 2021

### CROSS REFERENCE:

902A Physical Presence

### DEFINITIONS:



## Alaska WIC Policy & Procedure Manual



**Remote certification:** Remote certification refers to the process of certifying participants who are not physically present in the WIC agency office. Remote certifications may be conducted by local agency staff via phone, HIPAA-compliant telemedicine, and/or video chats.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
7/24/2023	Draft; pending FNS approval

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

#### Policy: 903 Proof of Identity

Effective Date: 06/01/2018

#### PURPOSE:

To ensure the proper verification of identity of WIC applicants or participants.

#### POLICY: 903 Proof of Identity Eligibility Requirement

The proof of identity may be any of the following forms of identification that includes the individual's name.

##### Documents for an infant or child:

- Immunization records, including VacTrak
- Birth certificate
- Birth Card or record
- Crib card
- Delivery Care/Record
- DKC/Medicaid enrollment
- SNAP enrollment
- TANF enrollment
- FDPIR enrollment
- Native Corporation Card
- Health professional's verification of identity
- Health record, including Electronic Health Record or Patient Portal records from the healthcare provider
- Social Security Card
- Documentation from Immigration and Naturalization Service (INS)
- Rural Representative Verified
- Personal Recognition (Recertification Only)

##### Documentation for women:

Optimal forms of identity are photo identification such as a current driver's license, military ID or passport. ***Note that photo identification is optimal but not required.***

Other acceptable forms of identification include but are not limited to:

- Verification of participation in Medicaid (including Denali KidCare)
- Verification of participation in SNAP
- Verification of participation in TANF



- Verification of participation in FDPIR
- Native Corporation Card
- Green Card
- Health professional's verification of identity
- Health record, including Electronic Health Record or Patient Portal records from the healthcare provider
- A work or school identification card
- Pay stubs
- Voter registration card
- Birth Card or record
- Birth certificate
- Health or hospital records
- Immunization records, including VacTrak
- Rural Representative Verified
- Social Security Card
- Documentation from Immigration and Naturalization Service (INS)
- State ID
- Personal Recognition (Recertification Only)

### Proof of Identity: Transfer (VOC) card

A valid WIC transfer card or Verification of Certification (VOC) card is ***not an acceptable proof*** of identity. It represents proof of nutritional risk and current income eligibility for a participant moving into Alaska only for the current certification period.

### Proof of Identity: Visual Personal Recognition

Visual personal recognition of participants, parents, guardians, or proxies by WIC staff is ***allowed once initial proof of identity has been made at the first certification***, and if the applicant or participant is personally known to the WIC staff, this can constitute proof of identity at subsequent appointments and for benefit issuance.

A victim of theft, loss, disaster, a homeless individual, or a migrant worker who may have no proof of identity may sign a written statement attesting to their identity, using the No Proof Form at the end of this policy. When no proof of identity exists, select "No Proof Exists" in the SPIRIT drop down for identity and issue benefits as normal for the certification.

In SPIRIT, clinic staff selects "Pending Proof" from the "ID Proof" drop-down menu if they wish to certify a participant without proof of identity at the certification appointment. The alert feature is set to remind clinic staff about the pending proof required.

A temporary 30-day issuance of benefits is allowed when identity proof is pending. Identity proof must be completed within 30 days for additional benefits to be issued.



### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart C- Participant Eligibility- Certification of Participants
  - 246.7 (c)(2)(i)

### CROSS REFERENCES:

- 901 Eligibility Criteria
- 902 Physical Presence
- 904 Proof of Residency
- 905 Proof of Income
- 906 Categorical Eligibility Requirement
- 907 Nutritional Risk Requirement
- 908 Income Eligibility Guidelines

### DEFINITIONS:

**Acceptable proof:** Reasonable documentation of personal identity, income and current residency as approved by the state WIC program.

**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.

**Children** means persons who have had their first birthday but have not yet attained their fifth birthday.

**Food Distribution Program on Indian Reservations:** The Food Distribution Program on Indian Reservations (FDPIR) provides USDA Foods to income-eligible households living on Indian reservations and to Native American households residing in designated areas near reservations or in Oklahoma. USDA distributes both food and administrative funds to participating Indian Tribal Organizations and state agencies to operate FDPIR.

**Identity:** means the unique set of characteristics that can be used to identify a person as themselves and no one else.

**Infant:** A person who is 12 months old or younger. Once they turn 12 months, they are considered a child.

**INS** means Immigration and Naturalization Service

**Supplemental Nutrition Assistance Program (SNAP), formerly known as the Food Stamp**



## Alaska WIC Policy & Procedure Manual



**Program** is the program authorized by the Food and Nutrition Act of 2008 (7 U.S.C. 2011, et. seq.), in which eligible households receive benefits that can be used to purchase food items from authorized retail stores and farmers' markets.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

**TANF:** Temporary Assistance for Needy Families: A program administered by the Alaska Department of Human (DOH) that provides financial assistance to needy children and/or their families.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

#### Policy: 904 Proof of Residency

Effective Date: 06/01/2018

##### PURPOSE:

- To define the WIC Program's residency requirement; one of the four eligibility requirements that must be met to be a WIC participant and receive WIC benefits.
- To provide direction for documenting proof that a WIC participant meets the WIC Program's residency requirement.

##### POLICY: 904 Proof of Residency Eligibility Requirement

Residency is defined as the location or address where an applicant routinely lives or spends the night.

SPIRIT contains spaces for both a physical residence address and a mailing address. Both must be recorded.

- Applicants must be living in the State of Alaska to apply for WIC benefits in Alaska.
- There are no lengths of time or fixed residence or mailing address requirements.
- Applicants do not have to be a U.S. citizen.
- Children are considered residents of the state if their parent/caretaker is a resident.
- Applicants are not required to live in a house or apartment.
- Living at a campsite or in a car satisfies the residency requirement.
- However, applicants in Alaska solely for vacation are not considered residents.

##### Proof of Residency: Documentation of Residency

All WIC applicants and participants presenting a Verification of Certification **must provide proof of residency**. Documentation listed in the sections for Proof of Identity and Proof of Income are acceptable when said document includes both the name and address of the WIC applicant or parent/caregiver of the infant or child applying for WIC enrollment.

Documents used to verify residency must include the physical residence address and not the mailing address. A document with no physical address does not meet the residency documentation criteria.

Acceptable documentation that contains the participant's physical address can include but not be limited to:

- Car registration
- Listing in the telephone book or city directory



- Voter registration
- Library card
- Any bill in the applicant's name with an address on it
- Rent or mortgage receipts
- Remote Indian/Native village address
- Any state, local or military document that can only be obtained through proof of current state or local residency or
- Native Corporation Card
- Green Card
- Health professional's verification of identity
- Health record, including Electronic Health Record or Patient Portal records from the healthcare provider
- Pay stubs
- Health or hospital records
- Immunization records, including VacTrak
- Documentation from Immigration and Naturalization Service (INS)
- State ID
- Visual Recognition (After Proof-Recertification)

A victim of theft, loss, disaster, a homeless individual, or a migrant worker who may have no proof of residency may sign a written statement attesting to their residency, using the No Proof Form. When *no proof exists*, the written self-declaration of residency may be used for a full certification and is not limited to a 30-day cert. Refer to the Job Aid 030: No Proof & WIC IOU Form.

In SPIRIT, clinic staff selects "Pending Proof" from the "Residency Proof" drop-down menu if they wish to certify a participant without proof of residency at the certification appointment. The alert feature is set to remind clinic staff about the pending proof required.

A temporary 30-day issuance of food benefits is allowed when residency proof is pending. Residency proof must be completed within 30 days for additional benefits to be issued.

### Proof of Residency: Visual Personal Recognition

Visual personal recognition by WIC staff ***does not constitute proof of residency*** and thus is not acceptable. Further, requiring proof of residency from all applicants, regardless of personal acquaintance, is necessary to preclude the perception of a discriminatory practice. However, ***visual personal recognition by WIC staff at issuance of food benefits or recertification is allowed once initial proof of residency has been established.***

### Proof of Residency: Military Families

For military families, an APO address with a local military unit location is acceptable proof of residency.



### Proof of Residency: Documenting Residency in Remote Indian or Native Villages

Individuals residing in a remote Native village; or an individual served by an Indian tribal organization and residing in a remote Native village or reservation may establish ***proof of residency by providing only a mailing address and name of the remote Indian or Native village***. No other documentation verifying residency is required.

***Remote Indian or Native village*** means an Indian or Native village that is in a rural area, has a population of less than 5,000 inhabitants, and is not accessible year-round by means of a public road (as defined in [23 U.S.C. 101](#)).

The Local Agencies currently authorized to use the remote Indian or Native village designation for verification of residency are:

- Kodiak Area Native Association (Excluding the City of Kodiak)
- Maniilaq Association
- North Slope Borough
- Norton Sound Regional Health Corporation
- Tanana Chiefs Conference (Excluding Fairbanks, Tanana, Nenana, Cantwell, and Galena)
- Yukon-Kuskokwim Health Corporation (Excluding Bethel)
- Alaska Family Services for Cordova
- Bristol Bay Area Health Corporation
- Southcentral Foundation (Excluding Anchorage)
- Southeast Alaska Regional Health Consortium (Excluding Juneau, Ketchikan, and Sitka)

### Proof of Residency: Adjunctive Documentation of Residency

Enrollment in any adjunctively eligible program in Alaska constitutes verification of documentation for residency:

- Certified as fully eligible to receive Supplemental Nutrition Assistance Food Program (SNAP) in Alaska
- Certified as fully eligible to receive assistance from Alaska's Temporary Assistance for Needy Families (TANF).
- Certified as fully eligible, or presumptively eligible pending completion of the eligibility determination process, to receive assistance under Alaska's Medicaid, including Denali KidCare.
- Certified as fully eligible to receive benefits through the Food Distribution Program on Indian Reservations (FDPIR).

### Proof of Residency: Applicants Without Housing

***Homeless applicants residing in Alaska meet the residency requirement.*** A homeless applicant is defined as a person who lacks a fixed and regular nighttime residence, or whose primary



nighttime residence is:

- A supervised publicly or privately operated shelter (including welfare hotel, congregate shelter, or shelter for victims of domestic violence).
- An institution that provides a temporary residence for individuals.
- A temporary accommodation in the residence of another individual.
- A public or private place not designed for, or ordinarily used as a regular accommodation for humans.
- A tent or other camp.
- A vehicle.

The Local Agency should evaluate the individual circumstances of applicants who are without housing to ensure appropriate prescription of food items, e.g., availability of adequate storage, cooking facilities. Special food packages for the homeless may be prescribed.

In SPIRIT a homeless check box is available to select for clients that meet the above criteria. This must be selected to have the system assign the “Homeless” risk factor 801. The “Homeless” default food package will include boiled eggs and UHT milk. If the homeless situation does not necessitate the “homeless” foods from the food package, tailoring can be done to accommodate the client’s preference.

### Proof of Residency: Applicants in a Facility for the Homeless

Homeless applicants who reside in a homeless facility or shelter that does not serve congregate meals are eligible for certification if they meet other certification requirements. If a facility does have a meal service, persons meeting WIC certification criteria, can receive WIC if the homeless facility meets the following conditions with respect to resident WIC participants:

- WIC supplemental foods are to be consumed only by the WIC participant(s).
- The homeless facility does not accrue financial or in-kind benefit from a person’s participation in the WIC Program.
- The facility places no constraints on the ability of the participant to partake of the supplemental foods and nutrition education available under the WIC Program.

Local Agencies should provide information on program availability and eligibility requirements to institutions and shelters for the homeless. Local Agencies are **required** to establish a Memorandum of Understanding between the homeless facility and the local WIC office to comply with these federal regulations **or visit annually to provide outreach materials and to ensure the facility is still in compliance with the above criteria**. A Memorandum of Understanding between the State of Alaska WIC and Homeless Shelters is included in the Job Aid Section of this policy.

### Proof of Residency: Migrant Workers

A migrant worker is an individual whose principal employment is on a seasonal basis, who has





## Alaska WIC Policy & Procedure Manual



been so employed within the last 24 months, and who establishes, for the purposes of such employment, a temporary residence. Loggers, farm workers, seasonal fisherman and cannery workers are considered migrant workers if they meet these criteria. Migrant Workers meet the proof of residency requirement and are eligible for WIC benefits if they meet the other criteria.

### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart A- General- Definitions
  - 246.2 (migrant farm worker)
- Subpart C- Participant Eligibility- Certification of Participants
  - 246.7 (c)(1)(i)
  - 246.7 (c)(2)(i)
  - 246.7 (d)(2)(vi)(A)
  - 246.7 (m)(1)
  - 246.12(u)(2)
- Subpart D- Participant Benefits- Supplemental Foods
  - 246.10 (b)(2)(ii)(D)

### CROSS REFERENCES:

- 901 Eligibility Criteria
- 902 Physical Presence
- 903 Proof of Identity
- 905 Proof of Income
- 906 Categorical Eligibility Requirement
- 907 Nutritional Risk Requirement
- 908 Income Eligibility Guidelines

Job Aid 032: Memorandum of Understanding between the SOA WIC and Homeless Shelters

Job Aid 030: No Proof of Income & WIC IOU Form

### DEFINITIONS:

**Applicants:** means pregnant/breastfeeding/postpartum people, infants, and children who are applying to receive benefits. Applicants include individuals who are currently participating in the program but are re-applying before their certification expires.

**APO** stands for Army Post Office and is associated with Army or Air Force installations.

**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.



## Alaska WIC Policy & Procedure Manual



**Denali KidCare (DKC)** is Medicaid coverage for children from birth through age 18 and Pregnant Women who meet income eligibility standards

**Food Distribution Program on Indian Reservations:** The Food Distribution Program on Indian Reservations (FDPIR) provides USDA Foods to income-eligible households living on Indian reservations and to Native American households residing in designated areas near reservations or in Oklahoma. USDA distributes both food and administrative funds to participating Indian Tribal Organizations and state agencies to operate FDPIR.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Medicaid:** provides health coverage to millions of Americans, including eligible low-income adults, children, pregnant women, elderly adults and people with disabilities. Medicaid is administered by states, according to federal requirements. The program is funded jointly by states and the federal government.

**Remote Indian or Native village** is a village located in a rural area, with a population of less than 5,000 inhabitants, and not accessible year-around by means of a public road.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

**Supplemental Nutrition Assistance Program (SNAP),** formerly known as the Food Stamp Program, is the program authorized by the Food and Nutrition Act of 2008 ([7 U.S.C. 2011](#), et. seq.), in which eligible households receive benefits that can be used to purchase food items from authorized retail stores and farmers' markets.

**TANF:** Temporary Assistance for Needy Families: A program administered by the Alaska Department of Human (DOH) that provides financial assistance to needy children and/or their families

**POLICY HISTORY:**



## Alaska WIC Policy & Procedure Manual



Date	Draft, released, training, revised, reviewed
08/2024	Revised, Updated list of WIC Local Agencies in policy using 2022 Census data

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 900 Certification, Eligibility & Coordination of Services**



**Policy: 905 Proof of Income**

Effective Date: 06/01/2018

**PURPOSE:**

- To define what is included as income when assessing income eligibility for individuals who apply for the WIC Program.
- To define the requirement that all WIC Program applicants are required to report and have verified proof of income when applying for the WIC Program.
- To list the types of proof-of-income accepted for individuals applying for the WIC Program.

**POLICY: 905 Proof of Income Eligibility Requirement**

WIC staff will appropriately include or exclude sources of income when determining whether Alaska WIC applicants or participants meet the federally defined income eligibility standard. For specific Income Eligibility Guidelines see policy 908 Income Eligibility Guidelines in this manual.

**Income Determination (Proof) Required**

All applicants must have proof of income eligibility or proof of adjunctive eligibility. All questions regarding income eligibility on the WIC Family Information Form are to be answered. If the applicant does not know the answer, this should be stated rather than leaving the question unanswered.

In SPIRIT, clinic staff are permitted to:

- Copy income records from other household members within the last 30 days as current income information to meet eligibility guidelines.
- Specifically copy the relevant income records to the currently viewed participant.
- Select “Other” adjunctive eligibility options besides Medicaid or TANF/ATAP, as applicable.

**Documentation of Income**

Applicants must submit documentation substantiating reported income for all members of the economic unit.

Acceptable forms of documentation include:

- Verification of participation in Medicaid (including Denali KidCare)
- Verification of participation in SNAP
- Verification of participation in TANF



## Alaska WIC Policy & Procedure Manual



- Verification of participation in FDPIR
- Current paycheck stubs or earnings statements
- W-2 forms with the corresponding income tax return
- Check stubs from unemployment compensation checks
- A letter from the employer
- Other appropriate documents sufficient for establishing the current family income level of the entire economic unit are acceptable forms of documentation
- Someone in the community (such as a community health representative, social service worker, minister, priest or rabbi) may provide verification of income.

A scanned copy or a photocopy of the actual documentation placed in the participant's file is optimal. Documentation of the viewed proof in SPIRIT is required. Electronically documenting proof constitutes viewing and approving the selected document(s).

This procedure should be followed for both regular and adjunctive eligibility documentation. The documentation in SPIRIT by the WIC staff person is accepted as verification that the staff person examined, and accepted as valid, the documentation provided by the applicant. Notation of the type of document viewed is recorded in SPIRIT along with the name of the WIC staff logged into SPIRIT.

### Self-Declaration of Income

Self-declaration, which means the verbal reporting of income by an applicant, is not permitted, except in the special circumstances detailed in Policy 908 Income Eligibility Guidelines.

Self-declaration exceptions include the following special circumstances:

- Applicants lack proof of income at certification appointment
- Applicants report zero income

The Job Aid 025: Zero Income Form and the Job Aid 030: No Proof & WIC IOU Form are Job Aids for this policy section.

### Income Certification for Certain Alaska Natives and American Indians

Alaska Native and American Indians who reside in the service area of Local Agencies where the majority of the Native households have incomes at or below the State WIC Office income eligibility guidelines may use an income certification system under which the Local Agency informs each Native applicant household, in writing, of the maximum family income allowed for that applicant's family size.

The Local Agency must ensure that the applicant, or the applicant's parent or caretaker, signs the "WIC Alaska Native/American Indian Income Certification" form. This is a statement that the applicant's family income does not exceed the maximum. The Local Agency is permitted to verify the income eligibility of any applicant.



The Local Agencies currently authorized to use the remote Indian or Native village designation for income certification are:

- Kodiak Area Native Association (Excluding the City of Kodiak)
- Maniilaq Association
- North Slope Borough
- Norton Sound Regional Health Corporation
- Tanana Chiefs Conference (Excluding Fairbanks, Tanana, Nenana, Cantwell, and Galena)
- Yukon-Kuskokwim Health Corporation (Excluding Bethel)
- Alaska Family Services for Cordova
- Bristol Bay Area Health Corporation
- Southcentral Foundation (Excluding Anchorage)
- Southeast Alaska Regional Health Consortium (Excluding Juneau, Ketchikan, and Sitka)

The “Alaska Native Income Certification” form can only be used for Alaska Native/American Indian WIC applicants in the regions listed above where the population located in the village is fewer than 5,000 and not accessible year-around by means of a public road. All non-Native applicants residing in these remote Native villages, as well as all Native and non-Native applicants at other Local Agencies, must follow the regular income documentation process.

Refer to the Job Aid 029: WIC Alaska Native Income Certification

### Income Documentation and Immigration Status

Providing income information is a sensitive issue for some people. Immigrants may feel threatened or unsure about sharing documents with any government agency, for fear that this could affect their immigration status. These applicants should be reassured that all information in their files is confidential and will be used for health and nutrition services purposes only. Immigration status does not affect eligibility for WIC. Refer to Policy 911: Public Charge.

### Income Documentation and Presumptive Eligibility

It is important not to confuse income documentation procedures with presumptive eligibility. A pregnant woman who is certified for Medicaid is presumptively eligible to participate in WIC. She may be certified immediately without waiting until a nutrition risk determination is determined, but her income eligibility must be determined at the time of initial certification. Only the nutritional risk assessment can be delayed 60 days after the woman is certified for participation.

### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart C- Participant Eligibility- Certification of Participants
  - 246.7 (d)(2)(ii) (A-L)
  - 246.7 (d)(2)(iv)(A)(1-35)



### CROSS REFERENCE:

- 901 Eligibility Criteria
- 902 Physical Presence
- 903 Proof of Identity
- 904 Proof of Residency
- 906 Categorical Eligibility Requirement
- 907 Nutrition Risk Requirement
- 908 Income Eligibility Guidelines
- 911 Public Charge
- Job Aid 033: Family Information Form
- Job Aid 030: No Proof & WIC IOU Form
- Job Aid 025: Zero Income Form
- Job Aid 029: WIC Alaska Native Income Certification

### DEFINITIONS:

**Acceptable proof:** Reasonable documentation of personal identity, income and current residency as approved by the state WIC program.

**Adjunctive eligibility:** Meets WIC standard for income eligibility through verification that WIC applicants are participating in Supplemental Nutrition Assistance Food Program (SNAP), Alaska's Temporary Assistance for Needy Families (TANF), Alaska's Medicaid, including Denali KidCare, or the Food Distribution Program on Indian Reservations (FDPIR).

**Applicants:** means pregnant/breastfeeding/postpartum people, infants, and children who are applying to receive benefits. Applicants include individuals who are currently participating in the program but are re-applying before their certification expires.

**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.

**Income:** Gross income, including overtime, before deductions for income taxes, employees' social security taxes, insurance premiums, bonds, etc. The determination of the amount of a household's gross income must not be considered reduced for any reason (e.g.; financial hardships, medical bills, child support). Farmers and self-employed use net income. Net income is determined by subtracting the operating expenses from the gross income.

**Income eligible:** Meets WIC standard for income for household size. WIC program eligibility standard is 185 percent of the non-farm poverty guidelines prescribed by the U.S. Office of Management and Budget (OMB), adjusted annually.

**Income verification:** A process whereby the information provided by a participant or their



## Alaska WIC Policy & Procedure Manual



authorized representative is validated through another source.

**Public Charge:** is a term used by the Immigration and Naturalization Service (INS) as anyone who would become dependent on the U.S. government after gaining immigrant status.

**Remote Indian or Native village** means an Indian or Native village that is located in a rural area, has a population of less than 5,000 inhabitants, and is not accessible year-round by means of a public road (as defined in [23 U.S.C. 101](#)).

**SPiRiT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
6/03/2024	Reviewed
8/2024	Revised, Updated list of WIC Local Agencies in policy using 2022 Census data

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

#### Policy: 906 Categorical Eligibility

Effective Date: 06/01/2018

##### PURPOSE:

- To define the term “categorical eligibility”, one of the four eligibility requirements that must be met to be a WIC Participant and receive WIC benefits.

##### POLICY: 906 Categorical Eligibility Requirement

The applicant must be in one of the following categories:

- Infant under one year of age
- Child up to his/her fifth birthday
- Pregnant woman, throughout pregnancy and up to six weeks postpartum
- Postpartum woman, up to six months postpartum
- Breastfeeding woman, up to one year postpartum (breastfed infant’s first birthday)
- Breastfeeding woman who receives no supplemental foods or food instruments, but whose breastfed infant(s) receives supplemental food or food instruments
- In SPIRIT, a woman’s minimum age allowed is 8 years and maximum age allowed is 65 years

##### Categorical Eligibility: Termination of Pregnancy

Women whose pregnancies do not end in a live birth, due to miscarriage, stillbirth or abortion, are considered postpartum and ***are categorically eligible for all postpartum benefits.***

Regardless of the reason for the termination of pregnancy or when the termination of pregnancy occurs, a pregnant participant’s certification continues for up to six weeks postpartum.

Women whose pregnancies do not end in a live birth, due to miscarriage, stillbirth or abortion, are considered postpartum and are categorically eligible for all postpartum benefits.

For a client to enroll as a postpartum woman after a miscarriage, stillbirth or abortion, no proof of pregnancy or termination of pregnancy is required other than self-reporting of the pregnancy and its termination.

##### REFERENCE:

- Subpart C - Participant Eligibility- Certification of Participants
  - 246.7 (c)(1)(i-iii)
  - 246.7 (e)

##### CROSS REFERENCES:



## Alaska WIC Policy & Procedure Manual



- 901 Eligibility Criteria
- 902 Physical Presence
- 903 Proof of Identity
- 904 Proof of Residency
- 905 Proof of Income
- 907 Nutritional Risk Requirement
- 908 Income Eligibility Guidelines

### DEFINITIONS:

**Applicants:** means pregnant/breastfeeding/postpartum people, infants, and children who are applying to receive benefits. Applicants include individuals who are currently participating in the program but are re-applying before their certification expires.

**Breastfeeding women:** means a woman up to one year postpartum who is providing breastmilk to her infant/s.

**Categorical eligibility** means persons who meet the definitions of pregnant women, breastfeeding women, postpartum women, infants or children.

**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.

**Infant:** A person who is 12 months old or younger. Once they turn 12 months, they are considered a child.

**Post-partum women:** means individual up to six months after termination of pregnancy.

**Pregnant women** means women determined to have one or more embryos or fetuses in utero.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not



## Alaska WIC Policy & Procedure Manual



been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

Policy: 907 Nutritional Risk

Effective Date: 06/01/2018

#### PURPOSE:

- To note that Nutritional risk is one of the four eligibility requirements that must be met for an individual applying for the WIC Program to be eligible to receive WIC benefits.

#### POLICY: 907 Nutritional Risk Eligibility Requirement

To be certified as eligible for the program, applicants who meet the categorical, residential and income eligibility requirements must also be determined to be at Nutritional risk. See section *900B Nutritional Risk Determination, Documentation and Priority Assignment* of this manual for information on the determination of Nutritional risk eligibility.

#### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart C - Participant Eligibility- Certification of Participants
  - 246.7 (c)(1)(i-iii)
  - 246.7 (e)

#### CROSS REFERENCES:

Section: 900B: Nutritional al Risk Determination, Documentation and Priority Assignment

940	Complete Nutritional Assessment
941	Anthropometrics
942	Hemoglobin & Hematocrit Screening
943	Lead Testing
944	Overview of Priority Levels
945	Nutritional al Risk Data Collection
946	High Priority Participants
947	High Risk Criteria Codes and Descriptions
948	High Risk Nutritional Care Plans
949	Non-High Risk Nutritional Care Plans

#### DEFINITIONS:



**Basic eligibility information:** The least amount of information needed to determine program eligibility. Eligibility criteria include applicant category (pregnant/breastfeeding people, infants and children under age five), residency, income, medical data, medical/Nutritional risks, and certification date.

**Nutritional risk** means:

- (a) Detrimental or abnormal Nutritional conditions detectable by biochemical or anthropometric measurements;
- (b) Other documented Nutritional related medical conditions;
- (c) Dietary deficiencies that impair or endanger health;
- (d) Conditions that directly affect the Nutritional health of a person, including alcoholism or drug abuse; or
- (e) Conditions that predispose persons to inadequate Nutritional patterns or nutritionally related medical conditions, including homelessness and migrancy.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## **Alaska WIC Policy & Procedure Manual**

### **Section: 900 Certification, Eligibility & Coordination of Services**

#### **Policy: 908 Income Eligibility Guidelines**

Effective Date: 06/01/2018

#### **PURPOSE:**

- To provide guidelines for determining income eligibility for individuals applying for the WIC program.
- To ensure that income eligibility assessments are consistent across the state.
- This policy outlines what is included and excluded as income, and details the procedures for manual income review when necessary.
- To clarify the process for evaluating income for specific populations, such as immigrants, migrant workers, homeless, and military families.
- Provides instructions for handling cases where applicants report zero income or lack proof of income at the time of certification.

#### **POLICY: 908 Income Eligibility Guidelines**

Income eligibility guidelines are provided annually to Local Agencies by the State Agency after publication by the USDA, Food and Nutrition Services (FNS) in the Federal Register. Income guidelines are 185% of federal poverty guidelines, and usually increase each year. Revised income guidelines are announced on or before June 1 each year by FNS. The income eligibility guidelines are in effect for the period of July 1<sup>st</sup> of the current year to June 30<sup>th</sup> of the following year.

On or before July 1 each year, the State Agency must announce and transmit to each Local Agency the family size income guidelines. Local Agencies must implement revised guidelines not later than July 1 of each year.

Local WIC staff will use the current income guidelines when determining income eligibility. Local WIC program staff must determine income eligibility for all WIC applicants and participants at certification and re-certification appointments.

Refer to Job Aid 028: WIC Income Eligibility Guidelines FYXX for more information

#### **Definition of Income**

Income is defined as monetary compensation for services. Gross income, including overtime, before deductions for income taxes, employees' social security taxes, insurance premiums, bonds, etc. The determination of the amount of a household's gross income shall not be considered reduced for any reason (e.g.; financial hardships, medical bills, child support). Farmers and self-employed use net income. Net income is determined by subtracting the operating expenses from the gross income. Both income levels and family size are critical



components of the WIC income eligibility process. Family size and income must be recorded in SPIRIT.

Income is calculated as gross cash income before deductions for income taxes, employee's social security taxes, insurance premiums, child support, bonds, dividends include the Permanent Fund Dividends and Alaska Native/Tribal Corporation Dividends; and similar payments. Income includes the following:

- Refer to Military Income section (below) for details on military income inclusions.
- Monetary compensation for services, including wages, salary, commissions, or fees.
- Net income from farm and non-farm self-employment.
- Dividend payments received from Alaskan Native/Tribal Corporations.
- Permanent Fund Dividends.
- Social Security.
- Dividends or interest on savings or bonds, income from estates or trusts or net rental income.
- Government civilian employee, military retirement, pensions or veteran's payments.
- Unemployment compensation, workman's compensation for lost income, and severance pay.
- Private pensions or annuities.
- Lump sum payments such as gifts, inheritances, and lottery winnings.
- Alimony or child support payments.
- Regular financial contributions from persons not living in the household.
- Net royalties.
- Student financial aid used for room, board, and/or dependent care expenses.
- Other cash income.
- Cash amounts received or withdrawn from any source including saving, investments, trust accounts, and other resources which are readily available to the family.

### Exclusions from Income

When determining eligibility for the WIC Program, income or benefits from the following programs are **not** considered income:

- Refer to **Military Income section** (below) for details on military income exclusions.
- Total amount of federal refund received after December 31, 2009 – regardless of whether the refund is the result of a refundable credit, over-withholding, or both – is disregarded as income and resources in the month received. The resource exclusion lasts for 12 months.
- Reimbursements from the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (Pub. L. 91-646, Sec. 216, 42 U.S.C. 4636).
- Any payment to volunteers under Title I (VISTA) and Title II (Retired Senior Volunteers Program, Senior Companions Program, and Foster Grandparents Program) of the



## Alaska WIC Policy & Procedure Manual



Domestic Volunteer Act of 1973.

- Payment to volunteers under section 8(b)(1)(B) of the Small Business Act (Services Corps of Retired Executives and Active Corps of Executives).
- Income derived from certain submarginal land of the United States which is held in trust for certain Indian tribes (Pub. L. 94-114, Sec. 6, 25 U.S.C. 459e).
- Payments received under the Job Training Partnership Act (Pub. 97-300, Sec. 142(B), 29 U.S.C. 1552 (b). Example, Adult and Youth Training Programs, Summer Youth
- Employment and Training Programs, Dislocated Worker Programs, Programs for Native Americans, Migrant and Seasonal Farmworkers Program, Veterans Employment Program, and Job Corp.
- Income derived from the disposition of funds to the Grand River Band of Ottawa Indians (Pub. L. 94-540, Sec. 6).
- Payments received under the Alaska Native Claims Settlement Act (Pub. L. 94-204, Sec. 4(A), 43 U.S.C. 1626).
- The value of assistance to children or their families under the National School Lunch Act as amended, the Child Nutrition Act of 1966, the Food Stamp Act of 1977 (National School Lunch Program, Special Milk Program, School Breakfast Program, Summer Food Service Program, Child and Adult Care Program, SNAP, and Food Distribution Program on Indian Reservations.
- Payments by the Indian Claims Commission to the Confederated Tribes and Bands of the Yakima Indian Nation or the Apache Tribe of the Mescalero Reservation (Pub. L. 95433, Sect. 6, (c), 25 U.S.C. 609c-1).
- Payments to the Passamaquoddy Tribes and Penobscot nation or any of their members received pursuant to the Maine Indian Claims Settlement Act of 1980 (Pub. L. 96-420, Sect. 6, 9(c), 25 U.S.C. 609c-1).
- Payments under the Low-income Home Energy Assistance Act, as amended (P.L. 99125).
- Student Financial assistance received from any program funded in whole or in part under Title IV of the Higher Education Act of 1965 (Pell Grant, Supplemental Education
- Opportunity Grant, State Student Incentive Grants, Perkins Loans, Plus Loans, College
- Work Study, Stafford Loans, Supplemental Loans for Students, and Byrd Honor Scholarship). The money must be used towards tuition and fees; costs for rental or purchase of any equipment, materials, or supplies required of all students in the same course of study; and miscellaneous personal expenses. A student receiving assistance from any of the above mentioned programs must be attending classes at least on a half time basis.
- Payments under the Disaster Relief Act of 1974, as amended by the Disaster Relief and Emergency Amendments of 1989.
- Payments pursuant to the Agent Orange Compensation Exclusion Act.
- Payments received for War-time Relocation of Civilians under the Civil Liberties Act of 1988 (Japanese Internment Camps).
- The value of any childcare payments made under section 402 (g)(1)(E) of the Social Security Act, as amended by the Family Support Act (AFDC Child Care Program, Title VI A Child Care Program, and JOBS Child Care Program).





## Alaska WIC Policy & Procedure Manual



- The value of any "at-risk" block grant childcare payments made under section 5081 of P.L. 101-508 (At-Risk Child Care Program).
- The value of any childcare and development block grant program payments, as amended in 1992.
- Mandatory salary reduction for military service personnel used to fund the Veteran's Educational Assistance Act of 1984 (GI Bill), as amended.
- Payments received under the Cranston-Gonzales National Affordable Housing Act, unless the income of the family equals or exceeds 80 percent of the median income of the area.
- Payments received under the Housing and Community Development Act of 1987, unless the family income increases to at least 50 percent of the median income of the area.
- Payments received under the Sac and Fox Indian claims agreement.
- Payments received under the Judgment Award Authorization Act as amended.
- Payments for the relocation assistance of members of Navajo and Hopi Tribes.
- Payments to the Turtle Mountain Band of Chippewas, Arizona.
- Payments to the Blackfeet, Grosventre, and Assiniboine tribes (Montana) and the Papago (Arizona).
- Payments to the Assiniboine Tribe of the Fort Belknap Indian community and the Assiniboine Tribe of the Fort Peck Indian Reservation (Montana).
- Payments to the Red Lake Band of Chippewas.
- Payments received under the Saginaw Chippewa Indian Tribe of Michigan Distribution of Judgment Funds Act.
- Payments to the Chippewas of Mississippi.
- Lump sum payments such as reimbursements received from insurance companies for loss or damage of real or personal property (such as a home or a car) and payments that are intended for a third party to pay for a specific expense (such as payment of medical bills resulting from an accident or injury).
- Payments received under the Old Age Assistance Claims Settlement Act, except for per capita shares in excess of \$2,000, as income exclusion.
- Payments received under the Carl D. Perkins Vocational and Applied Technology Education Act Amendments of 1990 (Pub L. 101-392, sec. 501, 20 U. S. C. sec. 2466d).
- The Family Subsistence Supplemental Allowance (FSSA) payment provided by the Department of Defense (DoD) to low-income members of the Armed Forces.
- Payments received under the National Flood Insurance Program (NFIP) for flood mitigation activities.
- Short-term, non-secured loans. Loans to which the applicant does not have constant or unlimited access. Funds from loans are not to be counted as income because they are only temporarily available and must be repaid.

### Annual Versus Current Income:

Local Agencies should consider the income of the family during the past twelve months and the family's current rate of income to determine which indicator more accurately reflects family income status. For example, if adult members of a family are employed in fishing during the



summer months, but are unemployed for the rest of the year, the income earned during the summer months should be averaged over the entire 12-month period to determine income eligibility.

Current income is the most recent income data available to the applicant that accurately reflects the household's financial circumstances. The "current income" is the income received by the household during the month (30 days) prior to the date the application for WIC benefits is made.

If the income assessment is being done prospectively (i.e., the sole support of that family has just been laid off but has been authorized to receive unemployment benefits for the next six months), "current" refers to income that will be available to the family in the next 30 days.

### Calculating Income Manually

Currently SPIRIT converts all frequencies of income received to an annual amount, which could result in incorrect income determinations (i.e., when incomes that should be compared to the interval in which they are received are compared to the annual value, there is the possibility of an improper determination of over-income).

In cases where WIC income eligibility screenings fall into the categories below, a manual income screening must take place if SPIRIT calculates the income of the Household to be over the Income Eligibility Guidelines (IGE).

1. Households with one income source or multiple income sources with the same frequency: If a household has only one income source, or if all sources have the same frequency, do not use conversion factors. Compare the income, or the sum of the separate incomes to the published Income Eligibility Guidelines (IEG) for the appropriate frequency and household size.
2. Households with multiple income sources received at more than one frequency: If a household reports income sources at more than one frequency, annualize all income by multiplying weekly income by 52, bi-weekly income by 26, semi-monthly income by 24, monthly income by 12, and adding together all the unrounded, converted values.

For households with more than one frequency the following calculations should be used to annualize all the incomes. Multiply each frequency:

Weekly X 52

Bi-weekly X 26

Semi-monthly X 24

Monthly X 12

If the manual calculation meets the income guidelines but the SPIRIT calculation, does not, Local Agencies are to select Adjunctive Eligibility "Other" (General Note/Proofs), enter the



## Alaska WIC Policy & Procedure Manual



correct income calculated manually and complete a note explaining the situation and calculation. Scan copies of document “proofs” into SPIRIT for this situation.

As an example, a family of 5 has two incomes; one income is received weekly and the second income is received bi-weekly. The family received 5 Permanent Fund Dividends (PFD) during the year.

Weekly Income = \$500/week

Bi-weekly Income = \$300 /bi-weekly

5 PFD = \$1884

Calculation:

Frequency	Income Amount	Multiplication Factor	Total
Weekly	\$500	52	26,000
Bi-Weekly	\$300	26	\$7,800
Semi-monthly	\$0.0	24	0.0
Monthly	\$0.0	12	0.0
Annual	\$1884	(for this family: 5)	\$9,420
Totals			\$43,220

Add all the unrounded, convert values together.

This family meets the income guidelines by being under the IEG of \$65,712 for a family of 5.

### Adjunctive Eligibility

Local Agencies must accept as adjunctively income-eligible for the WIC Program any applicant who documents that he/she is:

- Certified as fully eligible to receive Supplemental Nutrition Assistance Program (SNAP) (formerly known as Food Stamps)
- Certified as fully eligible, or presumptively eligible pending completion of the eligibility determination process, to receive assistance from Alaska’s Temporary Assistance for Needy Families (TANF), or a member of a family that is certified eligible to receive assistance from TANF
- Certified as fully eligible, or presumptively eligible pending completion of the eligibility determination process, to receive assistance under Medicaid (including Denali Kid Care), or a member of a family in which a pregnant woman or an infant is certified eligible to receive assistance under Medicaid
- Infants born to women who are on Medicaid/DKC during the month of delivery are adjunctively income eligible for WIC up to the infant’s first birthday
- Low-income American Indian and non-Indian households that reside on a reservation



and households living in approved areas near a reservation that contain at least one person who is a member of a Federally recognized tribe, are eligible to participate in Food Distribution Program on Indian Reservations (FDPIR). Households are certified based on income and resource standards set by the Federal government and must be recertified at least every 12 months.

### Documentation of Adjunctive Eligibility

In these situations, a separate income determination does not need to be made by WIC staff to determine WIC income eligibility. Individuals are required to document that they, or a family member, are certified as eligible for one or more of these programs by providing the following documentation:

- SNAP- SNAP a program ID card (only if it includes dates of eligibility) or notice of current eligibility from the Division of Public Assistance indicating they are currently receiving SNAP benefits, or contacting the Division of Public Assistance
- ATAP- letter of verification and printout of benefits, with name and date
- FDPIR written proof of eligibility for the family.
- Medicaid- Medicaid/DKC card with name and month of participation. It is critical to report income information for all WIC participants—including those who are adjunctively income eligible for WIC—to describe income among the overall WIC population.

Local Agencies must report income information on those adjunctively eligible. These data are for descriptive purposes only and do not affect eligibility for WIC. Income reported by the participant on the Family Information Form does not need to be verified if proof of Adjunctive Eligibility has already been provided.

- In SPIRIT, document reported income along with the Adjunctive Eligibility during the CGS in the Income Calculator.
- Document the Adjunctive eligibility program and select a “proof” in the drop-down box.
- Under the “Income Information” screen, select “Add Item”.
- Enter “Payment Frequency” and the amount as normally done in this screen, then select “Adjunctive Eligibility” in the drop-down box as “proof of income”.

### Presumptive Eligibility

#### Presumptive Eligibility for Pregnant Women

A pregnant woman who is certified for Medicaid is presumptively eligible to participate in WIC. She may be certified immediately without waiting until a nutrition risk determination is made but her income eligibility must be determined at the time of initial certification. A nutritional risk assessment must be completed not later than 60 days after the woman is certified for participation.



## Military Income

### Military Income:

Military income is reported on the service personnel's Leave Earning Statement (LES). When determining income eligibility for WIC, use the most recent month-end LES. Each military family member's LES is required for the household's income eligibility determination.

In determining income eligibility of any applicant whose family contains one or more military members:

### *Included as Gross Income*

Included for WIC income determination for military families includes:

- Basic Pay
- Basic Allotment for Sustenance (BAS)
- Special Duty Pay
- Deployment Pay such as: Family Separation Allowance or Foreign Duty Pay. (These payments can be counted over a 12-month period.)
- Bonuses as documented on the LES

### *Excluded Income for Military Families*

Excluded from WIC income determination for military families includes:

- Basic Allowance for Housing (BAH)
- Family Separation Housing (FSH)
- Overseas Housing Allowance (OHA)
- Basic Allowance for Quarters (BAQ)
- Variable Housing Allowance Housing (VHA)
- Overseas Housing Allowance (OSA)
- Cost of Living Allowance (COLA). COLA is not considered income for WIC income eligibility in Alaska.
- Mandatory salary reductions for the GI Bill
- Family Subsistence Supplemental Allowance (FSSA)
- Hazardous Duty Pay
- Hardship Duty Pay
- Hardship Duty Subject to Hostile Fire or Imminent Danger Pay
- Combat Pay
- Pay and Allowance Continuation for Wounded, Ill, and Injured (PAC) should not be counted when determining WIC income eligibility. Continuation of pay during hospitalization and rehabilitation resulting from wounds, injury, or illness incurred while



on duty in a hostile fire area or exposed to an event of hostile fire or other hostile action.

- Military off-base housing is not considered income.
- Other in-kind benefits.

### Military Reservist

Applicants from families in which one or more family member are military reservists who have been placed on active duty may experience dramatic changes in their income sources and total gross income such that they may become eligible for the WIC Program. In this circumstance, the family's income eligibility is determined based on the family's current rate of income (while the reservist is on active duty), as opposed to income received over the past 12 months.

### Migrant Workers Income

#### Migrant Workers

Migrant workers and their family members with expired Verification of Certification documentation from another state are income eligible for the Alaska WIC Program if the expiration date on the documentation is no more than twelve months ago. Their income does not have to be checked again until their next certification. This applies to income eligibility only. These applicants must still meet other eligibility criteria before they can be certified for the Alaska WIC Program.

### No Proof & Zero Income

#### Applicants Reporting Zero Income

All applicants declaring zero income must be thoroughly screened and prompted to describe in detail their living circumstances and how they obtain basic living necessities such as food, shelter, medical care and clothing. WIC staff can assist applicants at truly zero income not only with WIC services but also through referrals to local sources of aid and assistance.

Zero family income is a legitimate situation. However, given WIC's definition of family size and income, which is a group of related or unrelated persons sharing financial and other resources, applicants declaring zero income should be asked questions including:

- Where is your family getting food?
- Where is your family living?
- How long has the family been without income?
- Have you enrolled in public assistance, such as SNAP, Medicaid and TANF?
- Has any member of your family received any Permanent Fund Dividends or tribal/Native Corporation Dividends?

WIC's income eligibility process requires income and family size determination based on



economic unit sharing resources. For example, an unemployed pregnant woman with no personal income living with a friend who provides shelter, water, electricity, and food to her in return for her care of the friend's two children may unintentionally and honestly report zero income as a family of two (herself and her unborn child). In this example, the applicant should be counted as a part of the larger economic unit, that is, a family of five with an income that is the friend's income. However, this pregnant applicant should be encouraged to apply for Medicaid. Once she applies for Medicaid, she qualifies as presumptively eligible for WIC.

Applicants truly reporting zero income must be asked to sign a statement attesting that they have no income. The statement must include a description of how the applicant meets basic expenses.

In most cases, an applicant's financial circumstances change, and they will not remain at zero income indefinitely. Therefore, these participants should be asked to bring in documentation of income as soon as they begin to receive any income.

### PROCEDURE:

- Categorically eligible persons are income eligible if their gross household income is at or below 185% of poverty guidelines.
- Verify the number of household members supported by this income. Refer to Policy 000 Determining Family Size for more information.
- WIC staff will use the current income guidelines provided by the state WIC program when determining income eligibility. Refer to the Job Aid 028: Income Eligibility Guidelines FYXX.
- SPIRIT automatically calculates income using the current income guidelines.

### Applicants Lacking Proof of Income at Certification Appointment

WIC staff should clearly communicate to applicants the kinds of information they need for their first certification appointment. For applicants who fail to bring proof of income to the certification appointment, the following procedures are acceptable:

- If the applicant is adjunctively eligible then the Local Agency may contact the appropriate social services office to verify that the applicant is adjunctively eligible.
- The Local Agency may inform the applicant of what constitutes acceptable proof of income, make a new certification appointment within the timeframes for meeting certification processing standards, and certify only with income documentation.
- The Local Agency may screen for income eligibility based on self-declaration using the No Proof Form and, if eligible, provide 30 days of food benefits. The Local Agency must require that the appropriate documentation be provided within 30 days for benefits to continue. Local Agency staff must inform the participant that repeated failure to comply





with the income documentation requirement is cause for disqualification, suspension, or discontinuation of benefits. If the applicant fails to provide the documentation within the 30-day time limit, or is determined to be over income, the individual must be determined ineligible, and benefits must cease. The applicant is not required to pay back the benefits received for that one month. If the applicant returns within the 30-day time period with the documentation and found eligible, the applicant should be certified for the full certification period beginning with the month benefits were initially provided. The option to receive 30 days of food benefits must not be used if an applicant repeatedly comes to certification appointments or provides application forms without any income documentation.

### No Proof Form

If the applicant is in a situation unlikely to yield written documentation of income, such as for a homeless woman or child, or a migrant worker or person who works for cash, requiring income documentation may pose an unreasonable barrier to participation. Such applicants may self-declare their income. The Job Aid 030: No Proof of Income Form & WIC IOU Form must be used for documentation. The documentation must include a statement of why the applicant cannot provide documentation of income and must be signed and dated by the applicant.

Clinic staff use the alert functions within SPIRIT as a reminder when a participant is missing a required proof. The alert avoids interruption in benefits for a participant who could be certified for longer.

### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart A- General- Definitions
  - 246.2 (poverty guidelines)
- Subpart C- Participant Eligibility- Certification of Participants
  - 246.7 (d)(1)
  - 246.7 (d)(2)(vi)(A)(1-2)
  - 246.7 (d)(2)(iv)(A) (1, 2, 20, 33, 35)

### CROSS REFERENCE:

905 Proof of Income

912 Determining Family Size

Job Aid 027: WIC Certification at a Glance - Flowchart

Job Aid 028: WIC Income Eligibility Guidelines FYXX

Job Aid 029: WIC Alaska Native Income Certification FYXX

Job Aid 030: No Proof of Income Form & WIC IOU Form





## Alaska WIC Policy & Procedure Manual



Job Aid 025:	Zero Income Form
Job Aid 031:	Termination Letter: Your Benefits Have Ended Form
Job Aid 032:	Memorandum of Understanding btw SOA WIC and Homeless Shelters
Job Aid 033:	Family Information Form

### DEFINITIONS:

**Acceptable proof:** Reasonable documentation of personal identity, income and current residency as approved by the state WIC program.

**Adjunctive eligibility:** Meets WIC standard for income eligibility through verification that WIC applicants are participating in Supplemental Nutrition Assistance Food Program (SNAP), Alaska's Temporary Assistance for Needy Families (TANF), Alaska's Medicaid, including Denali KidCare, or the Food Distribution Program on Indian Reservations (FDPIR).

**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.

**Income:** Monetary compensation for services. Gross income, including overtime, before deductions for income taxes, employees' social security taxes, insurance premiums, bonds, etc. The determination of the amount of a household's gross income must not be considered reduced for any reason (e.g.; financial hardships, medical bills, child support). Farmers and self-employed use net income. Net income is determined by subtracting the operating expenses from the gross income. Both income levels and family size are critical components of the WIC income eligibility process. Family size and income must be recorded in SPIRIT.

**Income eligible:** Meets WIC standard for income for household size. WIC program eligibility standard is 185 percent of the non-farm poverty guidelines prescribed by the U.S. Office of Management and Budget (OMB), adjusted annually.

**Income verification:** A process whereby the information provided by a participant or their authorized representative is validated through another source.

**Migrant:** A migrant worker is an individual whose principal employment is on a seasonal basis, who has been so employed within the last 24 months, and who establishes, for the purposes of such employment, a temporary residence. Loggers, farm workers, seasonal fisherman and cannery workers are considered migrant workers if they meet these criteria.

**Poverty income guidelines** means the poverty income guidelines prescribed by the Department of Health and Human Services. These guidelines are adjusted annually by the Department of Health and Human Services, with each annual adjustment effective July 1 of each year. The poverty income guidelines prescribed by the Department of Health and Human Services shall be



## Alaska WIC Policy & Procedure Manual



used for all States, as defined in this section, except for Alaska and Hawaii. Separate poverty income guidelines are prescribed for Alaska and Hawaii.

**Presumptive eligibility** is an expedited process of enrolling eligible pregnant Alaska residents into the WIC program. The prenatal applicant has applied for Medicaid but has not yet been approved for Medicaid. The prenatal applicant is still enrolled in WIC because WIC “presumes” on the basis of probability or likelihood that her prenatal Medicaid application will be accepted as eligible.

**Special situation:** When a participant is unable to provide one of the required proofs because something in their life makes it unlikely that they will be able to obtain proof without it causing a barrier to receiving WIC services. Examples of special situations include being a disaster victim, being homeless, working for cash, having no source of income, or being a migrant.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

#### Policy: 909 Change in Custody

Effective Date: 06/01/2018

#### PURPOSE:

To describe who will be considered the WIC “guardian” and may apply for the child’s WIC benefits.

#### POLICY: 909 Change in Custody

##### Change in Custody

WIC benefits must be issued to the Responsible Adult (Authorized Representative) of the child and/or infant assigned at the initial certification.

The Authorized Representative may assign an Alternate Representative/Proxy under applicable circumstances during a certification period. The Authorized Representative should not change mid-certification unless there are extenuating circumstances; which includes the transfer of the participant into foster care through the Office Of Children’s Services.

Proof of custody must be provided in order to assign active participants to another Authorized Representative mid-certification.

Acceptable documentation:

- A copy of court or other legal document(s)
- An official foster care document such as a copy from the Office of Children’s Services (OCS) showing the new guardian’s name

When legal documentation is not available:

- Staff may obtain a written note from the previous Authorized Representative regarding the change. **EXAMPLE:** Parent leaves the child with a relative for a specified period. Local Agency staff may accept a signed note from the parent stating the change of custody.
- Staff may contact the previous Authorized Representative using the contact information provided to WIC to obtain a verbal authorization to change custody. The verbal authorization must be documented in the WIC participant’s SPIRIT record.
- Local Agency staff may need to contact the social worker, case manager, public health nurse, or other appropriate individual to confirm custody.

If staff are unable to obtain court documents or verify custody within three (3) days, the person with physical custody of the child at the WIC appointment is determined to be the guardian for issuing WIC benefits.



If there is a custody dispute, issue benefits to the Authorized Representative on file for the current certification period. Joint custody must be handled between the caretakers, generally whoever the initial Authorized Representative is will be issued benefits and should divide the resources appropriately. The person(s) disputing the custody must supply records to the Local Agency that prove that they have custody. In this situation, it is recommended to only issue one month of benefits at a time until the custody dispute is resolved. However, benefits cannot be withheld because of staff suspicions related to a custody dispute.

In the event it is appropriate to change custody to a new Authorized Representative mid-certification staff must:

- Verify proof of identity.
- Determine if household income and number of household members has changed. If a change has occurred and is greater than 90 days before the end of a certification, reassess income eligibility.
- If the Authorized Representative is new to WIC, create a new household and transfer participant(s).
- Ensure contact information is up to date, have new Authorized Representative complete the Family Information Form.
- Review and sign the Rights, and Responsibilities form.
- Educate on use of benefits (how to use benefits, identify a WIC vendor, food list, etc.).
- If benefits have been issued for multiple months to the previous Authorized Representative, void the subsequent months in the participant's SPIRIT record before transferring the participant to the new Authorized Representative's household.

If a scenario occurs not covered above, the Local Agency Coordinator may consult the State WIC Office case-by-case to review circumstances.

### REFERENCE:

### CROSS REFERENCE:

912 Determining Family Size  
Job Aid 033: Family Information Form

### DEFINITIONS:

**Authorized Representative:** An Authorized Representative for the household is usually added during prescreen and is most often the Primary Card Holder. It's typically the mother if she is on WIC and part of the household. Otherwise, it should be the primary caregiver.

**Children** means persons who have had their first birthday but have not yet attained their fifth birthday.



## Alaska WIC Policy & Procedure Manual



**Identity:** means the unique set of characteristics that can be used to identify a person as themselves and no one else.

**Infant:** A person who is 12 months old or younger. Once they turn 12 months, they are considered a child.

**Joint guardianship:** When the custody of a child is split 50% of the time with each parent or caretaker.

**Proxy** means any person designated by a woman participant, or by a parent or caretaker of an infant or child participant, to obtain and transact food instruments or cash-value vouchers or to obtain supplemental foods on behalf of a participant. The proxy must be designated consistent with the State agency's procedures established pursuant to [§ 246.12\(r\)\(1\)](#). Parents or caretakers applying on behalf of child and infant participants are not proxies. In SPIRIT this is called the “alternate authorized representative”.

**Public Charge:** is a term used by the Immigration and Naturalization Service (INS) as anyone who would become dependent on the U.S. government after gaining immigrant status.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.



## Alaska WIC Policy & Procedure Manual



**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

#### Policy: 910 Termination of Benefits

Effective Date: 06/01/2018

##### PURPOSE:

- To outline the procedures for terminating WIC benefits when a participant is not recertified, becomes ineligible mid-certification, or when funding shortages occur.
- To provide guidelines on how to notify participants of their termination, including the reasons for ineligibility and their right to a fair hearing.
- To describe the necessary steps for handling over-income cases and ensuring proper documentation and communication throughout the termination process.

##### POLICY: 910 Termination of Benefits

If an applicant or participant is not (re)certified, Local Agencies must follow these steps:

- Explain to the applicant or participant the reason(s) for the denial or termination of benefits.
- Make appropriate referrals where the applicant may receive other assistance.
- Complete a "YOUR WIC BENEFITS HAVE ENDED" form or provide the system generated form from SPIRIT in place of "Your WIC Benefits Have Ended".
- Provide a copy to the applicant.

File the forms for ineligible applicants in an Ineligible file. File the forms for participants who are not recertified in their individual files.

##### Mid-Certification Termination

A WIC participant may be terminated during a certification period when the participant no longer meets eligibility requirements. Program benefits may be continued until the end of the 30-day period in which categorical ineligibility begins. A participant no longer meets eligibility requirements when:

- A child reaches his/her fifth birthday.
- A woman is over six months postpartum and not breastfeeding.
- A breastfeeding woman is over six months postpartum and has discontinued breastfeeding.
- A woman has breastfed an infant to one year of age.
- A participant has a change in income status and is over the income criteria.
- A participant commits verified and documented program abuse. Participant abuse includes, but is not limited to, intentionally making false or misleading statements or



intentionally misrepresenting, concealing or withholding facts to obtain benefits; sale or exchange of supplemental foods or food benefits with other individuals or entities; receipt from food vendors of cash or credit toward the purchase of unauthorized food or other items of value in lieu of authorized supplemental foods; and physical abuse, or threat of physical abuse, of clinic or vendor staff.

- The State WIC Office experiences food funding shortages, and there are no alternatives. If possible, benefits will be withheld with the expectation of providing benefits again when funds are available. If more drastic action is warranted, then participants whose health and nutritional status would be least impaired will be disqualified first.

### Notification of Termination/Ineligibility

A participant found ineligible for the program at any time during or at the end of a certification period must be advised in writing no less than 15 days before termination of eligibility, of the reasons for ineligibility, and of the right to a fair hearing.

Notify the participant or caretaker no less than 15 days before the end of their certification period that their certification for the program is about to expire by using either the Job Aid 031: Your Benefits Have Ended form or the SPIRIT generated form(s). A copy of the “Your Benefits Have Ended” notification is found in the Job Aids for this functional area.

SPIRIT’s official notifications can be generated through five different processes:

1. On demand when client receives last benefits
2. On demand on the participant folder screen
3. In batch for all clients who will be terminated during the selected date range on the Generate Official Notifications screen
4. In batch for all clients selected on the Work with On-site Group screen who will be terminated by automatic means within the number of days set
5. A partially breastfeeding mother past 6 months with a linked infant receiving more than maximum formula continues on WIC as a breastfeeding mother for support and education. Her Termination Notice is 15 days before the infant’s first birthday.

The “Work with On-site Group” list from the Participant List Business Rule dialog displays all members of the household who are on-site. From here clinic staff can generate official notices, of which pending terminations are included if participants’ certification end date is within 15 days of today’s date.

SPIRIT allows official Certification Due Letter to be printed for participants whose certification end date is within 30 days of today’s date, from the “Generate Certification Due Reports/Letters” dialog from the Generate Reports screen.

Official notices generated out of SPIRIT are automatically documented in the “Manage Notes” screen. If notification is manually issues with the “Your Benefits Have Ended” for the date of notification must be documented in the participant’s SPIRIT record, in the “Manage Notes” screen.





## Alaska WIC Policy & Procedure Manual



Written appointment reminder notices serve as the notification of the approaching expiration of certification and must be received at least 15 days before their certification period ends.

Participants terminated from the program must be given written notice of their termination at least 15 days before their certification period ends. To accomplish this, provide the:

- “Your Benefits Have Ended” form or
- SPIRIT generated forms

Participants may be terminated from the WIC program for the following reasons:

- No longer eligible in their certification category
  - Examples: Children turning 5 years old, No longer pregnant
- Not breastfeeding and greater than 6 months post-partum
- No longer meets eligibility criteria
  - Examples: Over income limits, No longer lives in Alaska
- Incomplete documentation
  - Examples: Did not bring in proof of residence, income, or identity
  - Certification not complete
- Insufficient funds to serve participants
- Did not keep scheduled recertification appointment
- Participant violations
- Participant voluntarily drops WIC by refusing to sign the Rights and Responsibilities form or decides to discontinue participation in the WIC program

### Use of WIC Shopping List as Notice of Ineligibility

Each participant, parent or caretaker must be notified not less than 15 days before the expiration of each certification period that certification for the Program is about to expire. The notice must be provided within a reasonable period of time prior to the termination date.

Notice can be provided by various methods, such as telephone voicemails, emails, or text messaging. The eWIC Shopping List generated from the participant’s SPIRIT record is another written option, along with SPIRIT notification and the State Approved “Your Benefits Have Ended”, to convey the notice of ineligibility via a written format.

If the Shopping List is used as the Notice of Ineligibility, it must be documented in the participant’s SPIRIT notes section..

### Termination Due to Funding Shortages

When benefits are discontinued due to funding shortages, new participants will not be enrolled during that period. Advance notice of the affected categories of participants will be provided by the State WIC Office if benefits are to be discontinued mid-certification due to fund shortages. Local Agencies must notify these individuals about this action as well as about their right to a fair hearing. The notification must be in writing and received by the participant not less than 15



days before the termination of certification.

### Over-Income & Ineligibility Notification

#### Over Income Applicants

If an applicant is found to be over income, he/she should be given the “Your Benefits Have Ended” notification and referred to the Medicaid/Denali Kid Care Program or other programs that may benefit the family. Notify the family that if they are found to be income eligible for one of the income-adjunctive programs, they should reapply for WIC. A copy of the “Your Benefits Have Ended” form is given to the client, and one kept in the client’s chart. For new applicants that have no established file; keep the copy of the form and any paperwork associated with the applicant.

#### Mid-Certification Income Disqualification

Local Agencies are required to reassess a participant’s income eligibility during the certification period if new information indicates that the participant’s household income may have changed. Reassessment of income eligibility is not required when 90 days or less before the expiration of the certification period.

A participant is not automatically disqualified mid-certification due to the fact that he or she no longer participates in one or more of the programs for which they were originally determined adjunctively income eligible. Income eligibility must be re-determined when a participant no longer participates in a program which originally entitled him or her to adjunctive eligibility. Eligibility is redetermined based on WIC income guidelines and disqualification made only after all other options are reviewed.

### REFERENCE:

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)

- Subpart C- Participant Eligibility- Certification of Participants
  - 246.7 (j)(5)
  - 246.7 (h)(1)(i) through 246.7 (h)(3)(ii)

### CROSS REFERENCE:

Job Aid 031: Termination Letter: Your Benefits Have Ended Form

### DEFINITIONS:

**Applicants:** means pregnant/breastfeeding/postpartum people, infants, and children who are applying to receive benefits. Applicants include individuals who are currently participating in the program but are re-applying before their certification expires.

**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using



specific procedures and standards.

**Disqualification** means the act of ending the Program participation of a participant, authorized food vendor, or authorized State or Local Agency, whether as a punitive sanction or for administrative reasons.

**Disqualified:** Termination of a participant from WIC and cessation of WIC benefits for a specific amount of time, due to a participant violation. The participant may reapply for benefits at any time after the sanction period is over.

**Fair Hearing:** A process applicants and participants are entitled to under federal regulation and state statute. A fair hearing is provided as part of the appeal process and is scheduled once an appeal request is made. The fair hearing is conducted by a neutral third party.

**Mid-Certification Health Assessment (MCA):** A complete health assessment with appropriate nutrition education, anticipatory guidance, breastfeeding support and referrals that occurs approximately in the middle of a one-year certification. This is an expanded nutrition education appointment, not a certification. The MCHA must be completed by a Competent Professional Authority.

**No Longer Eligible:** Past participants who are no longer eligible to participate for various reasons such as turning 5-years old, meeting the post-partum eligibility period, change in income, not fulfilling recertification requirements, etc.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

**Termination:** A participant is terminated from the program when a participant's record is closed and benefits cease for any reason, including not meeting eligibility requirements, transferring out of state, etc. If the participant has been terminated from the program due to a participant violation, it is considered a disqualification.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed



## Alaska WIC Policy & Procedure Manual



**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

#### Policy: 911 Public Charge

Effective Date: 06/01/2018

#### PURPOSE:

To define the term “public charge”, and detail procedures used for individuals who depend on public benefits and are applying for the WIC Program.

#### POLICY: 911 Public Charge

“Public Charge” is a term used by the Immigration and Naturalization Service (INS) as anyone who would become dependent on the U.S. government after gaining immigrant status. Depending on a person’s immigration status, the INS can refuse to let that person re-enter the US, or become a permanent resident or citizen, because they are considered a public charge who cannot support themselves.

Applicants should be told that participating in WIC does NOT make a non-citizen a public charge. WIC benefits cannot be denied to any non-citizens who are certified with WIC, and the INS cannot require that non-citizens repay any WIC benefits they have received. It is the INS and State Department’s position that receipt of WIC benefits will not have any effect on an individual’s application for immigration or citizenship status.

WIC is available to foreign citizens, including foreign students residing in the United States, provided they meet program eligibility requirements. Non-citizen status cannot be a factor in eligibility determination.

#### REFERENCE:

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)  
Subpart C- Participant Eligibility- Certification of Participants  
    o 246.7 (p)

#### DEFINITIONS:

**Applicants:** means pregnant/breastfeeding/postpartum people, infants, and children who are applying to receive benefits. Applicants include individuals who are currently participating in the program but are re-applying before their certification expires.

**Public Charge:** is a term used by the Immigration and Naturalization Service (INS) as anyone who would become dependent on the U.S. government after gaining immigrant status.

#### POLICY HISTORY:



## Alaska WIC Policy & Procedure Manual



Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

#### Policy: 912 Determining Family Size

Effective Date: 06/01/2018

##### PURPOSE:

To define what constitutes a family member when determining family size for assessing income for individuals applying for the WIC Program.

##### POLICY: 912 Determining Family Size

###### Determining Family Size

A family is a group of related or nonrelated individuals who are living together as one economic unit (except that residents of a homeless facility or institution are not considered members of a single family). Family members share income and consumption of goods and/or services.

###### Definition of Family

It is reasonable to assume that persons (other than the homeless and those living in institutional settings and homeless facilities) living in the residences of others, are receiving some degree of support and some commingling of resources which makes them members of the economic unit in which they live. However, with appropriate documentation, such as proof or fair proration of rent and all living and economic unit expenses, and proof of ability to finance personal expenses such as transportation, child care, and health and medical costs, it is possible to establish that more than one economic unit lives under one roof.

##### PROCEDURE:

###### Active Military Family Size

Local Agencies may be confronted with dramatic household composition changes for military family members in which military service personnel are deployed overseas or assigned to a military base and temporarily absent from home.

There are three options in determining family composition and income:

- Military personnel serving overseas or assigned to a military base, even though they are not living with their families, are considered members of the household or economic unit. The income received by military individuals and all other income received by members of the economic unit is counted as household income.
- Count the children as a separate economic unit. To be counted as a separate economic unit the unit must have its own source of income, or child allotment(s). If the child allotment(s) is not considered adequate, the next option below is to be used.
- Consider the children to be part of the economic unit of the person(s) they are residing



with; therefore, family composition and income would be determined on this basis.

### Adopted Child Family Size

When a family has adopted a child, or accepted legal responsibility for a child, the child is counted in determining family size. The size and income of that family is used to determine the child's income eligibility for WIC.

WIC regulations require individuals who apply for participation in the WIC Program to be physically present at the initial WIC certification and subsequent recertification, except in certain limited circumstances. See Policy on Physical Presence Requirement for further detail.

For verification of adoption, scan paperwork into the child's computer folder. Requiring proof of adoption is at the discretion of the local WIC agency.

### Child Away From Home

A child residing in a school or institution, whose support is being paid by the parent or guardian, should be counted in determining the family size of the parent or guardian. Even though this child is living apart from his/her parent or guardian for the majority of the time, the child is counted as part of the family, since the family continues to provide economic support for the child.

### Children in Temporary Care of Friends or Relative

Local Agencies may elect any of the following options, depending on individual family circumstances:

- Count the absent parents and their children as the economic unit as would have been the case prior to the parents' departure. Use of this option would be dependent on whether the Local Agency can reasonably determine, based on available data, the total gross income of that economic unit.
- Count the child(ren) as a separate economic unit. To be considered a separate economic unit, the unit must have its own source of income, e.g., child allotment(s).
- If option one or two is not feasible, consider the child(ren) to be part of the economic unit of the caretaker and determine family size and income on that basis.

### Cohabitation

Individuals who cohabitate (live together) as domestic partners are considered part of the same household or economic unit and are therefore counted in making a determination of household size. This includes same gender domestic partners. Income of the domestic partner is included in the total household income.





### Emancipated Minor

For purposes of determining eligibility for WIC services, the determinant of whether a minor is emancipated- and thus a separate economic unit- is whether or not the minor is supporting herself, without economic support from other persons.

If she is living at home but supporting herself by providing for her own room, board and medical care, she is considered a separate “family” or economic unit for purposes of income eligibility determination. If the minor is:

- Certified as fully eligible to receive Food Stamps
- Certified as fully eligible, or presumptively eligible pending completion of the eligibility determination process, to receive assistance from the Alaska Temporary Assistance Program (ATAP - formerly known as AFDC), or a member of a family that is certified eligible to receive assistance from ATAP
- Certified as fully eligible, or presumptively eligible pending completion of the eligibility determination process, to receive assistance under Medicaid (including Denali Kid Care), or a member of a family in which a pregnant woman or an infant is certified eligible to receive assistance under Medicaid

In these situations, a separate income determination does not need to be made by WIC staff to determine WIC income eligibility.

### Foster Child

A foster child living with a family, but remaining the legal responsibility of welfare or other agency, is considered a family of one. The payments made by the welfare agency or from any other source for the care of that child are considered to be the income of that foster child. If the annual income for the foster child is at or below the income criterion, the foster child is income eligible for WIC benefits.

Children from the same biological family are each considered a separate foster family of one if the Office of Children’s Services (OCS) places them into a foster home. For example if a family with three children under the age of five become the legal responsibility of welfare each of the children are considered a household of one and there would be three separate households in SPIRIT, one for each child. Even if the children placements are with the same foster parents.

A foster child who remains the legal responsibility of welfare or other agency cannot confer adjunctive income eligibility to family members, since a foster child is considered a one-person household for WIC purposes.

Documentation of foster care status can be requested by the local WIC agency. If paperwork is requested by the Local Agency it should be scanned into the child’s computer folder.



### Family Size of Pregnant Woman

A pregnant woman is counted as two (or more, depending on the number of embryos or fetuses) persons for the purpose of determining family size, and thus income eligibility, for her and for her other children. If the pregnant woman is carrying multiple fetuses, the family size is increased by the number of embryos or fetuses she is carrying.

Local Agencies are not required to implement this policy in individual cases where counting her fetus as a separate individual conflicts with her cultural, personal, or religious beliefs. However, the information must be recorded in the participant's file.

### Eligibility of Other Family Members in Pregnant Woman's Family

In situations where the family size has been increased for a pregnant woman, the same increased family size may also be used for any of her categorically eligible family members.

### Proof of Pregnancy

If an applicant says she is pregnant and the Local Agency has reason to suspect a false claim, the Local Agency can at any time require the needed documentation. If proof is not provided in 60 days and the pregnancy is still not apparent, benefits should not continue to be issued until proof is provided.

### Proof of Multiple Births

Proof of multiple births is asked of the applicant as part of the eligibility determination process. However, this must not be a barrier to participation. An applicant may self-declare that she is pregnant with multiple fetuses.

### Separate Households

A child is counted in determining the family size for the parent or guardian with whom the child lives at least 50 percent of the time.

For example: a mother and father are divorced. The mother and child live together at least 50 percent of the time and receive child support payments from the father. The father has remarried and lives with his new wife who is expecting a baby. The new wife and the ex-wife apply for WIC benefits. The ex-wife and her child are a family of two, and the child support payments are counted as income. The husband, new wife and unborn child have a family size of three (or four, if the child from the first marriage is living with the father 50 percent of the time). The child support payments cannot be deducted from the father's income and the child living with the ex-wife cannot be counted in the father's family.

### Separate Households with Joint Custody

When parents have joint custody and maintain separate households, either parent may apply for their child providing they have custody of the child at least 50 percent of the time. The other parent may not also apply for benefits for that same child. The benefits for the child will be



provided by the Local Agency only through the parent who made the application. It is the responsibility of the two parents to mutually agree on sharing of the child's supplemental foods. The parent who did not make the initial application for the child may make applications for herself and for other child(ren) residing with her, and can count the child receiving WIC benefits through the other parent as part of her household size.

For example: Child A's parents have joint custody, each for 50 percent of the time. Child A's mother has been approved for WIC benefits for Child A, and Child A is counted in determining the size of her household. The two parents decide on how to share the child's WIC foods between the two households. Child A's father has remarried, and applies for WIC benefits for other children in his new household. He can also count Child A as part of his household size in applying for benefits for the other children. He cannot deduct child support he pays for Child A in determining income for his new household.

### REFERENCE:

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)

- Subpart A- General- Definitions
  - 246.2 (family)

### CROSS REFERENCE:

901 Eligibility Criteria  
906 Categorical Eligibility Requirement  
Job Aid 033 Family Information Form

### DEFINITIONS:

**Children** means persons who have had their first birthday but have not yet attained their fifth birthday.

**Family** means a group of related or nonrelated individuals who are living together as one economic unit, except that residents of a homeless facility or an institution shall not all be considered as members of a single family.

**Foster care:** Temporary living arrangement for children in need of a safe place to live. In Alaska, the Office of Children's Services (OCS) under the Alaska Department of Family and Community Services who authorizes custody under Foster Care. Tribes may also assume custody and place a minor under someone's care.

**Household:** means a group of related or nonrelated individuals who are living together as one economic unit, except that residents of a homeless facility or an institution shall not all be considered as members of a single family.



## Alaska WIC Policy & Procedure Manual



**Household size:** A person or group of people, related or not, who usually (though not necessarily) live together, and whose income and consumption of goods or services are related and who are not residents of an institution. The key consideration in determining when individuals or groups are a household (or economic unit) is whether they generate the income which sustains them, i.e., room, board and medical care. When determining a household size, count all pregnant women as two or more, for expected multiple births, unless a woman specifically waives the increase in number.

**Joint guardianship:** When the custody of a child is split 50% of the time with each parent or caretaker.

**Pregnant women** means women determined to have one or more embryos or fetuses in utero.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 900 Certification, Eligibility & Coordination of Services**

**Policy: 913 – Certification Periods**

**Effective Date: 07/2014**

**PURPOSE:**

To define certification periods by client type; the length of time an individual may be certified for the WIC Program.

**POLICY: 913 – Certification Periods**

**Certification Periods**

Local Agencies are authorized to certify participants for the following periods:

- Pregnant women: for the duration of their pregnancy and for up to six weeks postpartum.
- Postpartum women: for up to six months postpartum.
- Breastfeeding women: for a period of up to one year postpartum, or until she stops breastfeeding, ending with the breastfed infant's first birthday. Women who receive no supplemental foods or food instruments but whose breastfed infants receive formula instruments in excess of a partial breastfed infant package will also be included as participants.
- Infants: for intervals of 6 months. Infants under 6 months of age may be certified for a period extending up to the first birthday. Clinic staff no longer set a certification start date. When an infant is < 6 months old at the time of certification, the certification end date will automatically display a date 1 day prior to the infant's first birth date. Staff provides the infant participants' Date of Birth when creating a record. Along with the infant category, SPIRIT automatically calculates the certification end date.
- Children: certification periods for up to one year ending with the last day of the month in which a child reaches their fifth birthday.

A pregnant woman whose pregnancy did not end in a live birth is eligible to be certified for up to six weeks postpartum and can be reassessed for postpartum WIC benefits at the end of that period. If she is still income-eligible, meets residency requirements and meets nutritional risk criteria, she is eligible to be recertified for up to six months postpartum. Refer to Policy 906: Categorical Eligibility – Termination of Pregnancy.

To ensure that health and nutrition services are not diminished when participants are certified for longer than six months, the following must occur.

- At least one time during the certification period (in addition to the nutrition assessment performed at certification), a nutrition assessment must be made available to



## Alaska WIC Policy & Procedure Manual



participants with certification periods of longer than 6 months, referred to as Mid-certification Assessments (MCA).

Refer to policy 914 Mid-certification Health Assessment.

The extension does not change the requirements concerning the following:

- Physical presence at certification
- Documentation in the computer system
- Benefits will not be denied for failure to attend the scheduled nutrition assessment and or nutrition education appointments.

It is important to emphasize that at the time of certification, the Local Agency must stress the positive long-term benefits of the nutrition services provided by WIC and encourage that participant to attend and participate in scheduled nutrition assessments and nutrition education opportunities.

### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart C- Participant Eligibility- Certification of Participants
  - 246.7 (g)(1)

### CROSS REFERENCE:

Policy 906: Categorical Eligibility

Policy 914: Mid-certification Health Assessment

### DEFINITIONS:

**Applicants:** means pregnant/breastfeeding/postpartum people, infants, and children who are applying to receive benefits. Applicants include individuals who are currently participating in the program but are re-applying before their certification expires.

**Breastfeeding** means the practice of feeding human milk/breastmilk to an infant on average of at least once a day.

**Breastfeeding Woman:** means a person up to one year postpartum who is providing breastmilk to their infant/s.

**Children** means persons who have had their first birthday but have not yet attained their fifth birthday.

**Immunization schedule:** Current schedule of immunization consistent with that recommended by Centers for Disease Control and Prevention (CDC).



## Alaska WIC Policy & Procedure Manual



**Infant:** A person who is 12 months old or younger. Once they turn 12 months, they are considered a child.

**Initial certification:** The first certification for an individual who has never participated in WIC or has not participated in WIC for 12 months or more.

**Nutrition Education** means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Pregnant Women** means women determined to have one or more embryos or fetuses in utero

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 900 Certification, Eligibility & Coordination of Services**

Policy: 914 Mid-Certification Assessment

Effective Date: 01/29/2014

**PURPOSE:**

- To define the process of “mid-certification assessment” (MCA), which occurs at the midpoint of a year-long certification.
- To outline when recertifications are due, by client type; the length of time after initial certification that an individual must be recertified to continue to receive WIC Program benefits.

**POLICY: 914 Mid-Certification Assessment**

**Mid Certification Assessment (MCA)**

Infants (below the age of six months), children, and breastfeeding women are certified for twelve months, which is considered an extended certification period. Regulatory requirements such as anemia screening, anthropometric measurements, immunization screening, and referral services, remain unchanged with extended certification periods.

WIC Local Agencies must provide the nutrition services the participants would receive during a shorter certification period. The intent is to ensure that there will be no decrease in health and nutrition education.

MCAs are very similar to certification appointments. Participants receive the same nutrition assessment and education. The main changes are:

1. Income does not need to be checked unless new information indicates that the participant’s household income may have changed. Refer to Policy 910: termination of Benefits – Mid-certification Income Disqualification.
2. The WIC certification application does not need to be completed.
3. Local Agencies can have their own form for MCAs to collect the most recent height and weight (and hemoglobin, if applicable).

Mid-certification assessments require collecting relevant information, including:

- Anthropometric data
- Biochemical data (when appropriate<sup>1</sup>) including follow-up blood work
- Update health and dietary assessment
- Immunization screening for infants and children less than two years of age
- Environmental and family information
- Reviewing previous nutrition education plans to establish continuity of care.





## Alaska WIC Policy & Procedure Manual



- Documenting the nutrition assessment and education
- Clarifying and prioritizing the relevant information that has been collected and probing for additional information as needed
- Identifying the pertinent risks and issues and making participant-centered decisions about:
  - Appropriate nutrition education and counseling to include breastfeeding promotion, support and referrals
  - Tailoring the food package to address nutrition needs
  - Appropriate referrals
- Following up as needed to monitor progress, reinforce the nutrition education message, elicit feedback from the participant and promote continuity of care.

### Mid-Certification Assessment Schedule

Infants (below the age of six months), children, and breastfeeding women receive a 12-month certification. For infants, mid-certification nutrition assessment should occur routinely between five and seven months of age, however, if there is a difficulty in scheduling the appointment, mid-certification nutrition assessment may be given after seven months of age. For children from 1 to 4 years of age who transfer in from a state with a one-year certification period, or who are certified in SPIRIT, mid-certification nutrition assessment should occur between the fourth and eighth month of the certification period. For breastfeeding women, mid-certification nutrition assessment shall occur at or near the midpoint of the certification period.

### Nutrition Assessment

#### *Anthropometric data*

Participant height (or length) and weight measurements should be collected and an assessment of growth and weight (e.g. BMI calculations, growth chart plotting) performed.



*Bloodwork (If Necessary)*

Category	Anemia Screening Schedule
Women: <ul style="list-style-type: none"><li>• Pregnant</li><li>• Postpartum</li><li>• Breastfeeding</li></ul>	<ul style="list-style-type: none"><li>• During their current pregnancy</li><li>• After the termination of their pregnancy</li><li>• After the termination of their pregnancy<sup>1</sup></li></ul>
Infants & Children	<ul style="list-style-type: none"><li>• Once between the ages of 9-12 months<sup>2</sup></li><li>• Once between the ages of 12-24 months<sup>3</sup> (one blood test at or before 12 months <u>cannot</u> fulfill the requirements for the infant and the 12-24-month child screening)</li><li>• Annually between the ages of 24-60 months<sup>4</sup></li></ul>

(1) A blood test taken between 6-9 months of age can be used to meet this screening requirement.

(2) A blood test is recommended 6 months after the infant test, at around 15 to 18 months of age.

(3) Children ages 24-60 months with a positive anemia screening result require a follow-up blood test at 6-month intervals.

*For infants and children 12-23 months:*

The Centers for Disease Control (CDC) recommends that the infant anemia screen be conducted between 9-12 months. For children over 1 year, the CDC recommends that children have a blood check 6 months after the infant test (i.e. at 15-18 months). Local agencies are expected to make every effort to collect bloodwork within the 15-18 month of age because this is the most vulnerable time for children to manifest iron deficiency anemia. If this cannot be accomplished, at least one blood test must be collected for children between 12 and 24 months (at mid-point, i.e. 18 months). A blood test taken at or before 12 months of age cannot fulfill the requirement for both the infant and 12-24 month screening.

*Follow-up Blood Test:*

For children aged 2-5 years, or a breastfeeding woman with a low hemoglobin (Hgb) at their last certification, a blood test is required at 6-month intervals until a normal range is documented.



### Brief Update of Health and Dietary Assessment

As promoted through Value-Enhanced Nutrition Education (VENA) and Participant-Centered Services (PCS), this brief assessment would be the ideal time to provide follow-up on the nutrition risks identified at the previous certification. An abbreviated assessment should consist of a request that the parent/caregiver reports only major changes in health status and/or dietary and physical activity behaviors since the previous certification and follow up on the goal set at certification.

### Immunization Screening

For infants and children less than two years of age, WIC staff must screen the infant/child's immunization status by counting the number of DTaP (diphtheria and tetanus toxoids and a cellular pertussis) vaccine they have received relative to their age, according to the following table:

- By three months of age, the infant should have at least one dose of DTaP
- By five months of age, the infant should have at least two doses of DTaP
- By seven months of age, the infant should have at least three doses of DTaP
- By 19 months of age, the child should have at least four doses of DTaP

### *Nutrition Education, Breastfeeding Promotion and Support, and Referrals*

Consistent with federal WIC regulations, WIC must ensure that its role in providing nutrition education and breastfeeding promotion and support, and serving as an adjunct to good health care, are fulfilled. The most effective nutrition education contacts incorporate regular follow-up. Nutrition education contacts must be made available at least quarterly for certified participants who have certification periods longer than six months. Including referrals to other health and social services at the time of nutrition education and/or assessment maximizes WIC's nutrition services benefit to the participant.

In the participant's SPIRIT Mid-certification Guided Script (MCGS), document the nutrition assessment and education, including adding or removing risk factors as the current assessment warrants. Follow up on goal set at certification. Document any needed referrals as the current assessment warrants.

### Mid-Certification Documentation in SPIRIT

In SPIRIT, the "Medical Update" label on the appointment scheduler dialog window will say "MIDCERT UPDATE." Clinic staff selects an appointment type from the dropdown menu within the appointment scheduler. For mid-certification appointments, staff will select Mid-Certification and these appointments will be color-coded orange in the scheduler.

SPIRIT generates group education class reminder email notices as part of the End of Day (EOD) process. It automatically generates and sends emails with appointments on the specified future date to participants who have provided email addresses. Clinic staff will need to collect the



participants' email address and enter it into the participant record within SPIRIT.

### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart C- Participant Eligibility - Certification of Participants
  - 246.7 (j)(3)

Federal Regulations: 7CFR Ch. II

- Subpart C- Participant Eligibility- Certification of Participants
  - 246.7 (j)(5)

Federal Regulations: 7CFR Ch. II

- Subpart C- Participant Eligibility- Certification of Participants
  - 246.7 (h) (3)(ii)

### CROSS REFERENCE:

941 Anthropometrics

942 Hemoglobin & Hematocrit Screening

942B Guidelines for anthropometric and hematology data collection without physical presence

### DEFINITIONS:

**Breastfeeding** means the practice of feeding human milk/breastmilk to an infant on average of at least once a day.

**Breastfeeding Women:** means a woman up to one year postpartum who is providing breastmilk to their infants.

**Children** means persons who have had their first birthday but have not yet attained their fifth birthday.

**Professional CPA:** A person with a bachelor's or master's degree in a health profession, such as nutrition, nursing or health education. Includes physicians, physician assistants, registered nurses, dietitians, or public health educators.

**Immunization schedule:** Current schedule of immunization consistent with that recommended by Centers for Disease Control and Prevention (CDC).

**Infant:** A person who is 12 months old or younger. Once they turn 12 months, they are considered a child.

**Mid-Certification Health Assessment (MCA):** A complete health assessment with appropriate



nutrition education, anticipatory guidance, breastfeeding support and referrals that occurs approximately in the middle of a one-year certification. This is an expanded nutrition education appointment, not a certification. The MCHA must be completed by a Competent Professional Authority.

**Nutrition Education** means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.

**Nutritional risk means:**

- (a) Detrimental or abnormal nutritional conditions detectable by biochemical or anthropometric measurements;
- (b) Other documented nutritionally related medical conditions;
- (c) Dietary deficiencies that impair or endanger health;
- (d) Conditions that directly affect the nutritional health of a person, including alcoholism or drug abuse; or
- (e) Conditions that predispose persons to inadequate nutritional patterns or nutritionally related medical conditions, including, but not limited to, homelessness and migrancy.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Participant-Centered Services (PCS):** A systems approach designed to focus on topics and issues that are relevant to the participant. This approach puts the participants needs and the goal of healthy behaviors at the core of WIC service delivery, and focuses on a person's capacities, strengths, and developmental needs, not solely on the problems, risks or negative behaviors. In contrast to the traditional didactic WIC assessment and education model, participant-centered services encourage staff to engage the participant/caretaker in dialogue, information exchange, listening and feedback, in order to translate the assessment into action and customize the nutrition services provided.

**Pregnant Women** means women determined to have one or more embryos or fetuses in utero

**Subsequent certification (recertification):** Any certification after the initial certification.

**Value Enhanced Nutrition Assessment (VENA):** A process developed jointly by the Food and Nutrition Services (FNS) and the National WIC Association (NWA) to improve nutrition services in the WIC Program. VENA sets participant-centered standards for the nutrition assessment that determines eligibility, enabling local agency nutritionists to personalize WIC nutrition education, provide more relevant referrals, and tailor food packages to the individual participant's needs.



POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 900 Certification, Eligibility & Coordination of Services**



Policy: 915 Transfer of Certification

Effective Date: 00/00/0000

**PURPOSE:**

To define procedures to be used when a participant is transferring in or out of Alaska's WIC Program; and use of the WIC Program's Verification of Certification (VOC) process.

**POLICY: 915 Transfer of Certification**

**Transfer of Certification (VOC's) Issuance**

Alaska WIC Local Agencies will issue a Transfer of Certification Letter - Verification of Certification (VOC) document from the SPIRIT system to any WIC participant who will relocate outside of Alaska during a certification period.

For certified WIC participants who will relocate outside of Alaska, a VOC document can be generated in SPIRIT through the "Participant Activities" menu on the Participant folder screen by selecting the "Produce VOC Document." In order to generate the VOC, enter the termination date and choose the termination reason "Moved Out of Area".

Produce VOC Document

Terminate Participant ☒

Termination Date 07/19/2024

Termination Reason Moved Out of Area

OK Cancel

**Accepting VOC's from Out-of-State WIC participants**

Local Agencies must accept valid VOC documentation from individuals participating in the WIC Program outside of Alaska, regardless of whether the person meets Alaska's eligibility criteria.

If the applicant has valid VOC documents, create the new Household in SPIRIT. On the



## Alaska WIC Policy & Procedure Manual



Applicant Prescreening tab, check the box “Applicant has VOC Document” and enter the certification end date listed on the VOC:

The screenshot shows a form with a checkbox labeled "Applicant Has VOC Document" which is checked. Below it is a label "Certification End Date" followed by a dropdown menu with a downward arrow.

For Pregnant women, SPIRIT requires Expected Date of Delivery (EDD) and Last Menstrual Period (LMP) dates. For Breastfeeding women, it requires the Actual Date of Delivery (ADD) and amount of breastfeeding. SPIRIT does not require additional VOC information for non-breastfeeding women, children and infant participants.

The VOC is valid until the certification period on the document expires. The VOC must be accepted as proof of nutrition risk and income eligibility for WIC Program benefits. However, identity and residency must still be verified and documented by the Alaska WIC Local Agency. A current Family Information Form and signed Rights and Responsibilities is also required by the Local Agency accepting the out-of-state VOC. Refer to the Job Aid 033: Family Information Form.

Even incomplete VOCs must be accepted, as long as they have the three pieces of information specified in WIC federal policy- the participant's name, the date that the participant was certified, and the date that the current certification expires. Federal regulations require that VOC documents contain the date of the income determination. Even if the date of income determination is not present on the VOC, the receiving Alaska WIC Local Agency must accept the VOC as proof of program eligibility as long as the participant's name and dates of certification are present, and the certification period has not expired. If the VOC lacks a date for income eligibility determination, the receiving Alaska WIC Local Agency is not obligated to perform an income determination until the VOC expires and the transferee recertifies.

If the VOC is valid, benefit issuance should not be delayed. Participants holding VOC documents have already been certified for WIC and have a right to complete their certification periods.

### When Alaska WIC participants transfer between Local Agencies

A VOC is not required when transferring from one Alaska Local Agency to another Alaska Local Agency because participants' records are electronically transferred through the SPIRIT MIS.

1. When WIC participants move between WIC Local Agencies, the transferring Local Agency will notify the receiving Local Agency.
2. The transferring Local Agency must not terminate the household in SPIRIT.
3. The transferring agency must issue all available household benefits.
4. The receiving Local Agency will transfer the household in SPIRIT to the appropriate





SPIRIT clinic.

5. The Authorized representative must complete a new Family Information Form and sign the rights and responsibilities.

#### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart C- Participant Eligibility- Certification of Participants
  - 246.7 (k)(1-4)

#### CROSS REFERENCE:

Job Aid 033: Family Information Form

#### DEFINITIONS:

**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.

**Homeless individual means a woman, infant or child:**

- (a) Who lacks a fixed and regular nighttime residence; or
- (b) Whose primary nighttime residence is:
  - (1) A supervised publicly or privately-operated shelter (including a welfare hotel, a congregate shelter, or a shelter for victims of domestic violence) designated to provide temporary living accommodation;
  - (2) An institution that provides a temporary residence for individuals intended to be institutionalized;
  - (3) A temporary accommodation of not more than 365 days in the residence of another individual; or
  - (4) A public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.

**Local agency means:**

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Migrant:** A migrant farmworker, fisher person or family member who comes into a clinic service area with the harvest stream and leaves the clinic service area, often mid-certification,



for employment in the harvest of other crops or to return to her/his home base.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Participant-Centered Services (PCS):** A systems approach designed to focus on topics and issues that are relevant to the participant. This approach puts the participants needs and the goal of healthy behaviors at the core of WIC service delivery, and focuses on a person's capacities, strengths, and developmental needs, not solely on the problems, risks or negative behaviors. In contrast to the traditional didactic WIC assessment and education model, participant-centered services encourage staff to engage the participant/caretaker in dialogue, information exchange, listening and feedback, in order to translate the assessment into action and customize the nutrition services provided.

**Pregnant women** means women determined to have one or more embryos or fetuses in utero.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

**State point of contact:** Phone number that State and local agencies can use to obtain VOC information for transfer purposes. All State points of contact can be found here- <http://www.fns.usda.gov/wic/wic-contacts>.

**Verification of Certification (VOC):** the primary intent of the transfer/VOC provisions is to ensure seamless and continued participation of certified WIC participants through the entirety of their certification period. The provisions also aim to reduce the administrative burden on a certified participant and Local Agencies.

**WIC Overseas Program:** An overseas program like WIC implemented by the Department of Defense using DoD funds for members and dependents of active-duty military personnel, civilian employees and contractors of the DoD living overseas, who are eligible for WIC.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
02/2016	Released
07/2024	Draft



## Alaska WIC Policy & Procedure Manual



**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.

FNS Review



## **Alaska WIC Policy & Procedure Manual**

### **Section: 900 Certification, Eligibility & Coordination of Services**

#### **Policy: 940 Complete Nutrition Assessment**

Effective Date: 05/17/2023

##### **PURPOSE:**

To ensure that all applicants receive accurate and uniform assessment of their nutrition related health needs.

Nutrition Assessment is necessary to link health and diet information to risk assessment, and the delivery of appropriate nutrition interventions that lead to improved health outcomes. The nutrition assessment collects and puts together relevant and accurate information in order to:

- Assess an applicant's nutrition status, risks, capacities, strengths, needs and concerns
- Design appropriate nutrition education and breastfeeding promotion and support that address a participant's needs and concerns
- Tailor food packages to address nutrition needs
- Make appropriate referrals

An important part of the complete nutrition assessment includes actively engaging the participant (or caretaker). The assessment process depends on an exchange which involves the participant through dialogue, information exchange, active listening, and feedback.

A combination of the WIC supplemental foods and nutrition services is critical to achieving the mission of the WIC Program- preventing health related problems and improving the health status of participants.

The WIC Program provides nutrition support (i.e., education and strategies for a healthy diet, supplemental foods, referrals and breastfeeding promotion and support), during critical times in growth and development, to improve health and achieve positive health outcomes.

The relationship between the WIC staff and the participant is a partnership- with open dialogue and two-way communication- working to achieve positive health outcomes.

The Alaska WIC Nutrition Assessment policy depends on participant centered services and promotes the active involvement of the participants and caregivers.

##### **POLICY: 940 Risk Assessment/Complete Nutrition Assessment**

WIC Local Agencies must assess nutrition risk during the certification process to determine eligibility for WIC participation.

##### **PROCEDURE:**

Applicants who meet the WIC program's category and income eligibility criteria must be



## Alaska WIC Policy & Procedure Manual



determined to be at nutritional risk prior to receiving program food and education benefits. Collection of information and evaluation occurs either prior to or during the certification process to assess nutritional risk.

The nutrition assessment process includes setting the agenda, collecting relevant information, clarifying and synthesizing guiding nutrition services, and documenting the assessment.

A full assessment includes:

- Evaluation of weight and height or length measurements
- Evaluation of hemoglobin or hematocrit results
- Review of health history and current health status
- Review of feeding behaviors and typical intake
- Consideration of infant or child development
- Discussion of environmental, safety and social factors that affect nutrition status

A key part of the success of assessment involves explaining to the participant the purpose of the assessment, describing the working partnership between the CPA and the participant, collecting the relevant information correctly, documenting in SPIRIT; and, using critical thinking to identify risks, participant strengths, capacities, needs and interests. An additional element that leads to an accurate assessment involves engaging the participant (or caregiver), actively exchanging information verbally, and active listening. These elements are also important in increasing the participant's interest and benefit from the process. The nutrition assessment information is used by the CPA to determine the appropriate nutrition education, working with the participant, their needs, strengths and interests.

The CPA also follows up on previous assessments, plans and participant goals, and makes referrals as appropriate based on what they've learned.

A full nutrition assessment is conducted at certification and recertification.

A more concise nutrition assessment is conducted at the mid-certification point, usually near the midpoint of the certification. Refer to Policy 914 Mid-certification Health Assessment.

### Data Collection and Evaluation

- The application provides the first information to review. If there is no application or the application is not complete, the CPA can review and complete the application with the participant.
- Accurate and complete anthropometric, biochemical, dietary, and health information are then gathered by staff for evaluation by the CPA during the certification process. All data is compared to established standards for nutrition risk assignment.
- Information is recorded in the Alaska WIC Program information management system, SPIRIT.



### Anthropometric Assessment

- Obtain accurate height/length and weight measurements for each participant at certification and recertification. This includes taking weight and height measurements for women at prenatal and postpartum certifications.
- See the AK WIC Policies in 900B Nutritional Risk Determination, Documentation and Priority Assignment under Section 900 Certification, Eligibility, & Coordination of Services of the AK WIC Policy Manual
- **or** CPA Skills Refresher Training for description of correct use of equipment, and accurate technique: Anthropometrics Assessment Skill Refresher Module
- Local Agencies must be able to take anthropometric measurements and blood work.

### Biochemical Assessment

- Obtain hemoglobin (Hgb) or hematocrit (Hct) data at certification, recertification, and follow-up appointments for the appropriate category based on the anemia screening schedule below
- See the AK WIC Policies in 900B Nutritional Risk Determination, Documentation and Priority Assignment under Section 900 Certification, Eligibility, & Coordination of Services of the AK WIC Policy Manual
- **or** the CPA Skills Refresher Training for description of correct use of the equipment and accurate technique for taking measurements: Hematology Skills Refresher Module.

Blood work is only required at certain intervals

Category	Anemia Screening Schedule
<u>Women:</u>	
Pregnant	During their current pregnancy
Postpartum	After the end of their pregnancy
Breastfeeding	After the end of their pregnancy
<u>Infants</u>	Once between the ages of 9-12 months
<u>Children</u>	Once between the ages of 12-24 months (one blood test at or before 12 months <u>cannot</u> fulfill the requirements for the infant and the 12-24 month child screening)
	Annually between the ages of 24-60 months



## Alaska WIC Policy & Procedure Manual



- Exceptions to the Blood Test Requirement
  1. Infants under 6 months of age
  2. Children who's Hgb or Hct was normal at the last certification. However, blood tests must be performed on these children at least once every 12 months.
  3. Applicants whose religious beliefs do not allow them to have blood tested. A statement noting this must be included in the SOAP note.
  4. Applicants with medical conditions such as hemophilia, or a serious skin disease. A health care provider's documentation must be included in the participant's chart.
- Local Agencies must be able to take anthropometric measurements and blood work.
- For pregnant, breastfeeding, and postpartum women and child applicants, bloodwork must be performed or obtained from referral sources at the time of certification or may be deferred up to 90 days if the applicant has at least one other qualifying nutrition risk factor.

### Using data from other sources

- Participants can bring data or have data sent from other sources, including their health care provider, to avoid duplication of the procedure for the participant.
  - Federal regulations allow length, height or weight measurements collected up to 60 days before the certification date to be used as data for certification.
- Documented Hgb or Hct from a medical provider.
  - Federal regulations allow blood work to be collected within 90 days of the certification date if the applicant has at least one nutrition risk factor at the time of certification. Collecting the Hgb or Hct can be delayed for 90 days, as long as an effort is made to collect it.
- Data for pregnant women is collected during pregnancy. Data for postpartum and breastfeeding women is collected after pregnancy. Data for infants is collected during infancy. Data for children is collected while the applicant is a child. Anthropometric data collected at 11 months of age can be used to certify a 12- or 13-month-old child.
- Participants may also share other types of referral data during the assessment process. An example of other referral data includes completed Enteral Nutrition Prescription Requests (ENPRs) from doctor's or provider's offices. ENPRs need to be processed by an RD.
- Other examples are measurements or bloodwork taken by Head Start, or home visiting programs, if they are taken within the allowed time frames (above).



## Alaska WIC Policy & Procedure Manual



- Measurements and bloodwork from electronic hospital records are acceptable, if the data was collected within the allowed time frames.
- If other sources for measurements or bloodwork are available to your agency, please discuss them with the State WIC Office.

Effort must be made to collect anthropometric and blood test information during the certification, either performed in the clinic or from another source. Although participants cannot be terminated if this information is missing, using this information helps a CPA give a complete nutrition assessment to a participant.

### Health Assessment

- Use the application and ask further questions to fill in the appropriate sections of the guided script for certification and recertification in SPIRIT for each applicant being certified.
- At mid-certification, a more concise health assessment is conducted to follow up on goals set at certification and to assess any major changes in the participant's health status. Refer to Policy 914 Mid-certification Health Assessments.
- Use probing questions tailored to the individual participant to gather adequate information about the applicant's health history and current health status to complete the nutrition risk assessment and assign risks.
- SPIRIT automatically assigns some risk factors based on measurements and health information entered. These are system assigned risk factors,
- Manually add any applicable CPA assigned risk factors.

### Diet Assessment

- The application contains some information on diet, including breastfeeding.
- Use both open ended and probing questions tailored to the individual participant to gather additional information about feeding behaviors, diet, and breastfeeding to complete the nutrition assessment and assign risks at certification and recertification. At mid-certification, a more concise diet assessment is used to follow up on goals set at certification and to assess any major changes in the participant's health status.
- Or review the CPA Refresher Training: Critical Thinking Refresher Module
- Or review DPA WIC Breastfeeding Training Levels, 1, 2, and/or 3.

Environmental, safety, and social factors are also considered as part of a complete nutrition assessment. Some questions pertaining to these areas can be found on the application, and further probing questions can be used to clarify as appropriate.

Examples of questions on the application on environment, safety, and social factors include questions on household smoking, shelter and housing conditions, and concerns about harm.





### Nutrition Related Medical Conditions

Each applicant must be screened for medical conditions and diseases impacted by nutritional status, based on an assessment of current and historical health provided on the WIC application form. A self-reported medical diagnosis should prompt the CPA to validate the presence of the condition by asking probing questions related to that diagnosis. CPAs can assign the nutrition risk for medical conditions or diseases once presence of the condition is confirmed through discussion with the participant.

A best practice, which is helpful but not required, is to verify the diagnosis with the health care provider either by phone or through written confirmation.

### Documentation

- Select all risk criteria that apply to an applicant. Complete the SOAP note, and include supporting information for CPA assigned risks.

This process allows all relevant information to be collected prior to identifying nutrition risk and developing an intervention plan.

### REFERENCE:

7 CFR §246.7 ¶(e)—Nutritional Risk

7 CFR 246 (e) (1) (i) A

USDA Policy Memo #2006-5 Value Enhanced Nutrition Assessment (VENA) - WIC Nutrition Assessment Policy

### CROSS REFERENCE:

900A Job Aid 033: Family Information Form

900A Job Aid 034: WIC Application Child

900A Job Aid 035: WIC Application Infant

900A Job Aid 037: WIC Application Pregnant Woman

900A Job Aid 037: WIC Application Breastfeeding Postpartum Women

900B Job Aid 041: Index of Allowed Nutrition Risk Criteria

900B Job Aid 040: Cert Form Cheat Sheet for Risk Codes

Policy 914: Mid-certification Health Assessment.

Policy 941: Anthropometrics

Policy 942: Hemoglobin and hematocrit Screening

Policy 942B: Guidelines for Anthropometric and Hematology data Collection Without Physical Presence

Policy 943: Lead testing

Policy 944: Overview of Priority Levels

Policy 945: Nutritional Risk Data Collection



Policy 946: High Risk Participants  
Policy 947: High Risk Criteria and Risk Codes  
Policy 948: High Risk Nutrition Care Plans  
Policy 949: Non-High Risk Nutrition Care Plans

### DEFINITIONS:

**Anthropometric:** Measuring the size and proportions of the human body. Anthropometric data associated with WIC includes weight, height, length, and head circumference.

**Applicants:** means pregnant/breastfeeding/postpartum people, infants, and children who are applying to receive benefits. Applicants include individuals who are currently participating in the program but are re-applying before their certification expires.

**Biochemical:** Pertaining to blood chemistry.

**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.

**Competent Professional Authority (CPA):** An individual of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and counseling, and prescribe supplemental foods.

**Eligibility Criteria:** Conditions an applicant must meet to be enrolled in the WIC program

**Mid-Certification Health Assessment (MCA):** A complete health assessment with appropriate nutrition education, anticipatory guidance, breastfeeding support and referrals that occurs approximately in the middle of a one-year certification. This is an expanded nutrition education appointment, not a certification. The MCA must be completed by a Competent Professional Authority.

**Nutritional risk** means:

- (a) Detrimental or abnormal nutritional conditions detectable by biochemical or anthropometric measurements;
- (b) Other documented nutritionally related medical conditions;
- (c) Dietary deficiencies that impair or endanger health;
- (d) Conditions that directly affect the nutritional health of a person, including alcoholism or drug abuse; or
- (e) Conditions that predispose persons to inadequate nutritional patterns or nutritionally related medical conditions, including, but not limited to, homelessness and migrancy.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information



## Alaska WIC Policy & Procedure Manual



system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

**SOAP:** Type of note used for documenting subjective and objective information collected, assessment and plan for the participant

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
05/2023	FNS Approved
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 900 Certification, Eligibility & Coordination of Services**



**Policy: 941 Anthropometrics**

Effective Date: 06/01/2018

**PURPOSE:**

To ensure consistent and accurate measurements are utilized to determine nutritional risk.

**POLICY: 941 Anthropometrics**

Appropriate procedures and equipment will be used to obtain participant weight, and length or height in WIC clinics.

**Anthropometric Assessments**

- Each infant and child must have their height and weight plotted on the growth grid in SPIRIT.
- Women must have their pre-pregnancy weight for current height to calculate the pre-pregnancy BMI in order to monitor pregnancy weight gain plotted on the appropriate weight gain grid in SPIRIT.
- Repeated measurements will be plotted on the same growth grid in SPIRIT to assess growth trends.

**Correct Techniques for Taking Anthropometric Measurements**

Accuracy and consistency when obtaining anthropometric measurement are vital for assuring growth and/or weight gain is plotted and assessed correctly. When anthropometric measurements are inaccurate, participants are given misinformation about their growth, and nutritional risks may be assigned inappropriately.

Any WIC staff performing anthropometric measurements must sign up and successfully complete the Alaska WIC Program CPA training anthropometric module prior to performing this task in the WIC clinic. The CPA proctor must sign off that the module competencies have been met. Keep a copy of the Skills Check List in the employee training file.

**PROCEDURES:**

**Allowable equipment**

Using appropriate medical grade equipment to obtain anthropometric measurements is essential for accuracy. Accurate weight and height or length measurements are required for determining risk assignment associated with eligibility screening during each certification and for counseling that occurs during individual follow up appointments and mid-certification health assessments.



## Alaska WIC Policy & Procedure Manual



1. Weigh infants and children under the age of two years on pediatric balance beam or electronic scales.
2. Weigh children over the age of two years and adults on adult balance beam or electronic scales that are placed on a hard surface.
3. Measure infants and children under the age of two years lying on a recumbent measure board placed on a flat surface.
4. Measure children over the age of two years and adults in a standing position with a stadiometer attached to a smooth flat surface perpendicular to the floor.

### Equipment maintenance – Calibration of Scales

Scales should be calibrated at least once a year using standard weights. Clinics with high volume should calibrate scales three to four times a year. Scales found to be out of calibration, damaged or defective must be repaired or replaced by the Local Agency in a timely manner.

### Appropriate measuring techniques – Weighting Infants

Refer to the “Anthropometric Assessment in the Nutrition Assessment Course” for appropriate weighing and measurement techniques. Staff must complete this module prior to weighing and measuring participants. Clarifications regarding the weighing and measuring process:

- Set the scale to zero and make sure it balances. The scale should balance when set to zero and nothing is on it. If it does not, it should be adjusted.
- Ask parent to take off child’s clothes, including diaper. If the clinic staff prefer to weigh in infant with a diaper on, the weight of the diaper should be subtracted from the infant’s weight.
- If measured on a non-digital scale, place the child on the scale and balance by moving the weights. Move the larger weight before moving the smaller weight.
- Record weight to nearest quarter of an ounce. Reset the scale to zero.
- Confirm measurement value (weigh a second time) to be sure that the first measurement was accurate).
- If the measurement is performed on a digital scale, only one measurement is required.

### Weighting Children and Adults

- Set the scale to zero and make sure it balances. If it does not balance, the scale should be adjusted.
- Have the client remove shoes and heavy clothing. The participant should stand still over the center of the scale with body weight distributed evenly between both feet.
- Balance by moving the weight. Move the larger weight before moving the smaller weight.
- Record weight to nearest quarter of a pound, reset scale to zero.
- Confirm measurement value (weigh a second time to confirm the first measurement was accurate).
- If measurement is done on digital equipment, no second measurement is required.



### Self-reported measurements

- Pre-pregnancy weights may be self-reported. All other measurements must be obtained in the WIC clinic or from health care providers where the measurement was collected within 60 days before the current appointment. The source of the data must be documented in SPIRIT.
- Obtain a second measurement when staff feel that the first measurement was inaccurate for any reason, such as an equipment malfunction or uncooperative child. Any concerns about the accuracy of measurements entered into SPIRIT should be documented in notes on the Medical Data Screen.

### Procedures for Measuring Heights:

#### *Measuring Length of Children Under Age Two*

This procedure requires two persons:

- Remove shoes.
- One person positions the head against the headboard with child looking straight up.
- The other person then straightens the infant's legs with the toes pointing upwards and moves the heel board until it is flat against the bottom of the feet. Make sure it is against the heel. Holding the infant's legs together just above the knees and gently pushing both down against the board can help to fully extend the legs.
- Record length indicated by the foot board to nearest 1/8 inch.
- Confirm measurement value (measure a second time to confirm the first measurement was accurate).

#### *Measuring Height of Children Over Age Two and Adults*

- Have participant remove shoes.
- Have participant stand with heels, buttocks, shoulders and head against the measuring board or wall with weight distributed evenly on both feet. Arms should hang freely by the sides with the palms facing the thighs. Line of vision should be straight ahead.
- Move triangle down until it touches top of head with sufficient pressure to compress the hair. (Be sure children do not hunch down).
- Ask client to take a deep breath and maintain a fully erect posture.
- Record measurements to the nearest 1/8 inch.
- Confirm measurement value (measure a second time to confirm the first measurement was accurate).

### Guidelines for World Health Organization (WHO) Growth Standards for Infants & Children Birth to 24 months; and the CDC Growth Charts

The World Health Organization (WHO) released international growth standards for children age



0-5 years. The American Academy of Pediatrics (AAP), National Institutes of Health (NIH) and Centers for Disease Control (CDC) recommend the National use of World Health Organization (WHO) growth charts from birth to 2 years and continue the use of the CDC growth charts from 2 years to 20 years. New cutoffs are at the 2nd and 98th percentiles on WHO growth charts. The 5th and 95th percentiles on CDC growth charts for older children continue.

The SPIRIT system was modified and added three WHO growth grids for infants and children from birth to 24-months. They are:

- 0-24 WHO Len/Age
- 0-24 WHO WT/Age
- 0-24 WHO WT/Len

When a new height/weight measurement is recorded either in the Participant Folder or during a Certification Guided Script (CGS) for an infant or child less than 24-months of age, the system calculates a weight-for-length percentile. If the calculated weight-for-length percentile is less than or equal to the 5th percentile based on the WHO growth grids, SPIRIT automatically assigns Risk Factor 103 (Underweight or At Risk of Underweight for Infants & Children).

### Guidelines for Growth Charts and Gestational Age Adjustment for Low Birth Weight and Very Low Birth Weight Infants

1. All low birth weight (LBW) and very low birth weight (VLBW) infants and children (up to 2 years of age) who have reached the equivalent age of 40 weeks gestation, must be assessed for growth using the 2000 CDC Birth to 36 Months Growth Charts, adjusting for gestational age.
2. No age adjustment is required for premature infants or children because the calculation is based on the weight for length percentile.
3. SPIRIT system assigns Risk Factor 121 (Short Stature or at Risk for Short Stature for Infants and Children) based on the World Health Organization International Growth Standards

### Documentation

All measurements will be documented on the participant's Medical Data Screen in SPIRIT. The data system will utilize anthropometric data to generate growth charts, prenatal weight gain charts, and assign medical risks.

Refer to the Alaska training module "Anthropometric Assessment" in the Nutrition Assessment Course for more information on interpreting graphs and measurements.

### REFERENCE:

§246.7 1(e)(1)(i)(A) and (B)—Required nutritional risk data

§246.7 1(e)(1)(ii)(A)—Weight and height or length

§246.7 1(e)(2)(i)(A)—Nutritional risk criteria



## Alaska WIC Policy & Procedure Manual



### Alaska WIC Nutritional Risk Criteria Manual

#### CROSS REFERENCE:

Policy 942B: Guidelines for Anthropometric and Hematology Data Collection Without Physical Presence

Job Aid 041: Index of Allowed Nutritional Risk Criteria

#### DEFINITIONS:

**Anthropometrics:** Measuring the size and proportions of the human body. Anthropometric data associated with WIC includes weight, height, length.

**Medical grade equipment:** Equipment suitable for use in a physician's office, hospital, or other health care setting.

**Stadiometer:** A stadiometer is a piece of medical equipment used for measuring human height. It is usually constructed out of a ruler and a sliding horizontal headpiece which is adjusted to rest on the top of the head.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a "draft" watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A "draft" watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





Alaska WIC Policy & Procedure Manual  
**Section: 900 Certification, Eligibility & Coordination of Services**

**Policy: 942A Hemoglobin and Hematocrit Screening**

Effective Date: 06/01/2018

**PURPOSE:**

- To ensure that a blood test (hemoglobin or hematocrit) is included in the assessment, in order to determine appropriate nutrition risk.
- To provide nutrition education and appropriate referrals.
- To protect the safety of applicants and personnel performing the tests
- To ensure accurate test results.

**POLICY: 942A Hemoglobin and Hematocrit Screening**

A hematological test to screen for anemia will be performed or obtained following the screening guidelines for the participant's category.

Each applicant must have hemoglobin or hematocrit test to screen for anemia. These tests do not directly measure iron levels or distinguish among types of anemia. Other causes of anemia are possible, but iron deficiency anemia is by far the most common cause of anemia in children and women of childbearing age.

This test can either be performed in the WIC clinic, or blood test data from another agency or health care provider can be accepted. Such data may be accepted by telephone if written data are not available at the time of certification or recertification.

Appropriate procedures and equipment will be used when performing hemoglobin or hematocrit tests in WIC clinics.

**Blood Test Dates**

Local Agencies may accept blood test data that are no older than 90 days prior to WIC certification. In rural Alaska, where health care services may be intermittent, the blood test requirement can be a barrier to access to WIC services.

**Deferring Blood Tests for 90 Days**

Local Agencies may defer the collection of blood test data for up to 90 days after the date of certification, but the applicant must have at least one other qualifying nutritional risk factor at the time of certification. If the collection of blood test data is deferred, Local Agencies must ensure that the data is obtained within the 90-day period. This can be done by sending reminders and/or placing these participants on adf monthly benefit issuance schedule.

The State WIC Office may disallow the option to defer the collection of blood work data for



those Local Agencies that exhibit poor performance in obtaining the required data. (Poor performance would include, for example, a management evaluation indicating that blood test data for participants are not collected within 90 days after certification.)

**PROCEDURE:**

**Screening Guidelines for Biochemical Assessment**

Obtain hemoglobin or hematocrit blood test data at certification or follow-up appointments according to the guidelines appropriate for the participant's category.

Category	Anemia Screening Schedule
Women: Pregnant Postpartum Breastfeeding	During their current pregnancy After the termination of their pregnancy After the termination of their pregnancy <sup>1</sup>
Infants Children	Once between the ages of 9-12 months <sup>2</sup> Once between the ages of 12-24 months <sup>3</sup> (one blood test at or before 12 months <u>cannot</u> fulfill the requirements for the infant and the 12-24 month child screening) Annually between the ages of 24-60 months <sup>4</sup>

<sup>1</sup> For breastfeeding women 6-12 months postpartum, no additional blood test is necessary if a blood test was obtained after the termination of pregnancy.

<sup>2</sup> A blood test taken between 6-9 months of age can be used to meet this screening requirement.

<sup>3</sup> A blood test is recommended 6 months after the infant test, at around 15 to 18 months of age.

- **Infants:** Test at age 9 to 12 months. Blood test data taken at 6 to 8 months of age may be used in special circumstances on a case-by-case basis when it may be very difficult to obtain a blood test at 9 to 12 months of age. This is not to be routine practice.
- **Children age 1 to 2 years:** Test at age 15 to 18 months, ideally 6 months after the infant screen. At least one blood test must be performed between 12 and 24 months of age
- **Children age 2 to 5 years:** Test once every 12 months if previous results are within normal range. If result is below approved hematological standards, retest in 3 months. If result continues to be below standards and if not already seeing health care provider for low hemoglobin/hematocrit, refer for follow-up and further testing in that certification period. A child screened at 18 months whose results were within the normal range would not be required to be retested until 30 months of age. A child whose blood test at 18 months was below the normal range would be required to be retested at 21 months.



- **Pregnant Women:** Test at the time of the initial certification appointment for current pregnancy, or at a minimum within 90 days of enrollment.
- **Postpartum Women:** After delivery, test at the first certification appointment or earlier in the postpartum period. If result is below approved hematological standards, retest in 3 months. If result continues to be below standards and if not already seeing health care provider for low hemoglobin/hematocrit, refer to health care provider for follow-up and further testing in that certification period. No additional blood test is required by WIC.
- **Breastfeeding women 6-12 months postpartum:** No additional blood test is required at the mid-certification appointment for a breastfeeding woman between 6-12 months postpartum if a test was performed after the termination of their pregnancy.

### Exceptions to the Blood Test Requirement

Exceptions to the blood test requirement rule are:

- Infants under six months of age.
- Children whose hemoglobin or hematocrit tested normal within their last certification period. However, the blood test must be performed on such children at least once every 12 months.
- Applicants whose religious beliefs do not allow them to have blood drawn. A statement noting the applicant's refusal to have the blood test must be included in the applicant's file.
- Applicants with a medical condition such as hemophilia or a serious skin disease for whom the blood test could be harmful to the applicant. A health care provider's documentation of the medical condition must be included in the applicant's file.

If a medical condition precludes hematological testing, Local Agencies should attempt to obtain information on possible anemia from the applicant's health care provider. These attempts should be documented in the applicant's file. If attempts to obtain this information are unsuccessful, the applicant may be certified based on other nutritional risk criteria. If the noted condition is considered treatable, such as a serious skin disease, a new statement from the health care provider is required for each subsequent certification. If the condition is considered "lifelong", such as hemophilia, a new statement for each certification is not necessary.

### Interpreting results

The chart below shows the types of screening tests and standards for test values used to determine WIC eligibility. Standards are in g/100 ml.

Hgb levels in the top row (non-smokers) show the cut off for the risk factor. For instance, a child age two with a Hgb result below 11.1 will be assigned the 201 risk by SPIRIT and considered to have a low iron level.



## Alaska WIC Policy & Procedure Manual



Table 201 – B

		Category									
		1 <sup>st</sup> Trimester	2 <sup>nd</sup> Trimester	3 <sup>rd</sup> Trimester	Nonpreg 12 - < 15 yrs	Nonpreg 15 - < 18 yrs	Nonpreg ≥ 18 yrs	Infants 0 - < 6 mo	Infants 6 - < 12 mo	Child 1 - < 2 yrs	Child 2 - < 5 yrs
Altitude	Smoking	Hgb <	Hgb <	Hgb <	Hgb <	Hgb <	Hgb <	Hgb <	Hgb <	Hgb <	Hgb <
No altitude adjustment	Nonsmokers	11.0	10.5	11.0	11.8	12.0	12.0		11.0	11.0	11.1
	Up to < 1 pack/day	11.3	10.8	11.3	12.1	12.3	12.3				
	1- 2 packs/day	11.5	11.0	11.5	12.3	12.5	12.5				
	> 2 packs/day	11.7	11.2	11.7	12.5	12.7	12.7				

SPIRIT will automatically calculate a woman's risk, considering her smoking amount. Please see Nutrition Risk Factor 201 in the WIC Nutrition Risk Criteria Manual at <http://dhss.alaska.gov/dpa/Pages/nutri/wic/administration/risk-codes-manual.aspx>

A hemoglobin result of < 9.0g or a hematocrit of < 30% for all participants and age categories is considered high risk and should be referred to the nutritionist.

1. Each Local Agency performing hemoglobin testing should have a written policy establishing the critical range of hemoglobin results at that Local Agency. A critical range is defined as a hemoglobin level that presents an immediate potential health threat and must be referred to a physician or other qualified health care provider.
2. Each site is advised to have a written policy for physician referral of client conditions which fall outside normal limits. This policy should include steps which must be taken to refer client to their primary care provider when results fall below the critical value for hemoglobin.

When a participant has a critically low Hgb result requiring retesting.

1. To verify that the first result is accurate, perform a repeat hemoglobin test immediately on a different site, preferably a different finger. "Milking" a participant's finger to "squeeze" out more blood to fill the cuvette is not advised as this dilutes the blood by increasing the flow of blood plasma.
2. Be sure that cuvette is full, that it was filled from one drop, and that there is no air bubble in the cuvette. Low Hgb results are often the result of a cuvette that is not full, or that has been partially filled and then had additional blood added to it. Both of these practices result in a potentially false low Hgb value.
3. If the repeat test is also low, document in the client's chart.
4. Critically low readings that persist after the second test should be referred to the client's provider for needed follow up. Referrals need to be documented in the participant file.
5. Participants with a Hgb below 9g are required to be retested in 6 months.

### Actions based on test results

- Actions taken depend upon the hemoglobin values:  
If hemoglobin values are in the high-risk range, provide nutrition counseling on food sources of iron and ways to increase iron absorption, refer participant to the primary care provider, and schedule a follow-up with the Registered Dietitian Nutritionist (RDN)/WIC nutritionist for a recheck, assessment and nutrition counseling within 1-2 months.



## Alaska WIC Policy & Procedure Manual



- If hemoglobin values fall within the medium risk range, provide nutrition counseling to the participant or parent/caregiver on food sources of iron and ways to increase iron absorption.
- If value is low due to another type of anemia, for example sickle cell anemia, document details in progress notes and refer to RDN/WIC nutritionist for appropriate nutrition counseling. Schedule for follow-up recheck in 3 months.
- If hemoglobin values are within the normal range, follow the schedule above for next required testing based on the participant's age/category.

### Blood Tests by Other Providers

Local Agencies are encouraged to work with pediatricians, family practice physicians and other health care providers concerning collection of blood test data. Not only will this eliminate the need to subject participants to unnecessary finger pricks to obtain hemoglobin measurements but it will also mean that Local Agency staff will not have to duplicate this effort.

Blood test data are necessary and important in fully assessing nutritional risk, providing nutrition education, tailoring WIC food packages, and targeting WIC benefits to those at greatest risk. Skillful management of referral blood test data for WIC eligibility determination can result in effective coordination of services, minimize potentially repetitive and invasive blood test procedures, and reduce cost and participant inconvenience.

Local Agencies should use good professional judgment as to whether to use data from earlier tests without a recheck of abnormal blood test results, for more critical situations, on a case-by-case basis to provide adequate follow-up services.

### Iron Deficiency Anemia

The most common nutrition-related anemia is iron deficiency anemia, which may be caused by:

- A diet low in iron
- Insufficient assimilation of iron from the diet
- Increased requirements due to growth or pregnancy
- Blood loss

The rate of iron deficiency anemia among children in Alaska, particularly among Alaska Native children, has been found to be about double the national average. Iron deficiency anemia in children has been linked with growth retardation, and deficits in development and cognitive function.

### Universal Precautions

All Local Agency workers should use universal precautions and prevent injuries caused by needles when doing collection of blood for hemoglobin or hematocrit tests.

Gloves should be worn:



## Alaska WIC Policy & Procedure Manual



- Use gloves for performing finger and/or heel sticks.
- Use gloves for performing hemoglobin test or when the health care worker has cuts, scratches, or other breaks in his/her skin.
- Use gloves in situations where the health care worker judges that hand contamination with feces, urine, or blood may occur, e.g., when performing hemoglobin test on an uncooperative participant.
- Use gloves when persons are receiving training in performing finger and/or heel sticks.
- Use gloves for handling items or surfaces soiled with blood or body fluids to which universal precautions apply.

Gloves should be changed after contact with each participant. Hands and other skin surfaces should be washed immediately or as soon as participant safety permits if contaminated with blood or body fluids requiring universal precautions. Hands should be washed immediately after gloves are removed. If hand washing is not convenient, use of antibacterial hand gel may be substituted until hand washing is done.

Use of gloves should reduce the incidence of the spread of blood pathogens, but they cannot prevent penetrating injuries caused by sharp instruments.

All health care workers should take precautions to prevent injuries caused by lancets. To prevent injuries, lancets should not be recapped by hand, purposely bent or broken by hand, or otherwise manipulated by hand. After they are used, lancets must be placed in puncture-resistant containers. The puncture-resistant containers should be as close as practical to the area where the procedure is performed. Containers should be disposed of properly once full.

Universal precautions do not apply to human breast milk.

### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart C- Participant Eligibility-Certification of Participants
  - 246.7(e)(1)(i)(A)
  - 246.7(e)(1)(ii)(B)(1)

### CROSS REFERENCE:

Policy 940: Complete Nutrition Assessment

Policy 941: Anthropometrics

Policy 942B: Guidelines for Anthropometric and Hematology Data Collection Without Physical Presence

Policy 945: Nutritional Risk Data Collection

Job Aid 041: Index of Allowed Nutrition Risk Criteria

### DEFINITIONS:



**Remote certification:** Remote certification refers to the process of certifying participants who are not physically present in the WIC agency office. Remote certifications may be conducted by local agency staff via phone, HIPAA-compliant telemedicine, and/or video chats.

**Biochemical:** Pertaining to blood chemistry.

**Competent Professional Authority (CPA):** An individual of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and counseling, and prescribe supplemental foods.

**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.

**Food Benefits:** The foods a participant receives through WIC for a selected month. Depending on the participant category, food benefits provide specific amounts of WIC authorized foods, formulas, and/or a fixed-dollar amount for participants to obtain WIC authorized fruits and vegetables (referred to as a "Cash Value Benefit" or "CVB").

**High-risk participant:** Those participants who are assigned a high-risk level based on identified health risks that meet the state's high-risk criteria.

**Local agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with § 246.5;
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Nutrition education:** Individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits and that emphasize the relationship between nutrition, physical activity, and health all in keeping with the personal and cultural preferences of the individual.

**Nutritional risk** means:

- (a) Detrimental or abnormal nutritional conditions detectable by biochemical or anthropometric measurements;
- (b) Other documented nutritionally related medical conditions;
- (c) Dietary deficiencies that impair or endanger health;
- (d) Conditions that directly affect the nutritional health of a person, including alcoholism or drug abuse; or





## Alaska WIC Policy & Procedure Manual



(e) Conditions that predispose persons to inadequate nutritional patterns or nutritionally related medical conditions, including homelessness and migrancy.

**Secondary Nutrition Education:** Participant-centered nutrition education that is provided at any WIC follow-up visit between certifications including mid-certification and mid-Assessment.

**SPiRiT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

#### Policy: 942B Guidelines for Anthropometric and Hematology Data Collection Without Physical Presence

Effective Date: 07/08/2024

##### PURPOSE:

To provide direction on the waived requirement for individuals who apply for the WIC Program to be physically present at certification and recertifications as stated in the USDA policy memo, “Additional WIC Flexibilities to Support Outreach, Innovation, and Modernization Efforts through ARPA Nationwide Waivers – Supporting Remote WIC Operations,” released 2/1/2023.

##### BACKGROUND:

As part of the USDA policy memo, “Additional WIC Flexibilities to Support Outreach, Innovation, and Modernization Efforts through ARPA Nationwide Waivers – Supporting Remote WIC Operations,” released 2/1/2023, approval to waive the physical presence requirement includes the deferral of anthropometric and bloodwork measurements (as required in 7 CFR 246.7 (e)(1)) no later than 60 days. However, a nutrition risk assessment, which may be based on information available through online communication and/or referral data, must be completed at certification by the Competent Professional Authority (CPA).

To the extent possible, State and/or local agencies must make concerted efforts to obtain referral data for anthropometric and blood iron level measurements in advance of or at the time of the appointment.

The USDA Food and Nutrition Services does not expect State agencies to terminate certifications for participants who fail to provide anthropometric data in the 60-day time frame, provided that the CPA has identified a nutritional risk for eligibility.

#### POLICY: 942B Guidelines for Anthropometric and Hematology Data Collection Without Physical Presence

1. WIC local agencies must attempt to obtain blood iron level and anthropometric data from referral sources for individuals who are seeking remote services *in advance of or at the time of the certification appointment*, which includes:
  - a. Local agencies are encouraged to engage in data sharing with the appropriate agreements and consent(s) between various programs and entities to collect the height/weight/hemoglobin from healthcare providers and rural clinics; and the use of relevant technologies such as Electronic Health Records.
  - b. WIC applicants/participants are permitted to provide the height/weight/hemoglobin results to the WIC local agency as long as the

documentation clearly indicates that the data was collected by a healthcare provider.

- i. Anthropometric data that was measured up to 60 days prior to the date of certification as described in regulation at 7 CFR 246.7 (e)(1)(ii)(A).
  - c. Measurements taken by the applicant themselves or by the parent/caregiver, or self-reported from memory are not allowable. Verbal reports of measurements or hemoglobin (Hgb) are not allowable.
  - d. Staff must make and document two attempts to collect measurements and hemoglobin. The first attempt should be made during the certification process. The second attempt must be made within 60 days of certification if the first attempt was unsuccessful.
2. If measurements or bloodwork are not collected at certification, the instructions below will be followed.
  - a. All attempts will be documented in SPIRIT in the “Height/Weight” tab and Blood tab.
  - b. Height and Weight tab:
    - i. Enter date of attempt to collect measurements
    - ii. Click “Possible Incorrect Measurement Reason” and select “First attempt made” or “Second attempt made”.
    - iii. Click “Measurement Source” and select “ARPA Physical Presence Waiver”

Height/Weight

Measurement Date	Age at Measurement	Inches	Eighths	Measurement Position	Pounds	Ounces	Body Mass Index
10/25/2021	0 Years 0 Months 5 Days	19	0	Recumbent	6	7	N/A

☒ Add Height/Weight Measurement

Measurements

Measurement Date: 02/28/2024

Age at Measurement: 2 Year(s) and 4 Months

Height: Inches  Eighths

Weight: Pounds  Ounces

Measurement Position: ☐ Recumbent ☒ Standing

Possible Incorrect Measurement Reason:

Measurement Source:

OK Cancel

- c. Blood tab:
  - i. Enter date of attempt to collect measurements
  - ii. Click “Reason Blood Work Was Not Collected” and select “First attempt made” or “Second attempt made”.



## Alaska WIC Policy & Procedure Manual



☑ Height/Weight and Blood Work

Measurement Date	Age at Measurement	Hemoglobin (gm/dl)	Hematocrit (%)	Lead (ug/dl)	E.P.(ug/dl)	Delayed Blo
02/15/2023	1 Year 3 Months 26 Days	0	0	0	0	

☑ Add Blood Measurement

Measurement Date: 02/28/2024

Age at Measurement

Hemoglobin (gm/dl)

Hematocrit (%)

Lead (ug/dl)

E.P. (ug/dl)

☐ Delayed Blood Work

Reason Blood Work Was Not Collected

OK Cancel

Add Edit Close

- d. Every WIC agency will run the SPIRIT Reports' Anthro/bloodwork report at least monthly to determine which participants need to be contacted for a second attempt.
3. The WIC local agencies can issue up to three months of food benefits to participants when using the option to defer collection of anthropometric and hemoglobin data.
  - a. Limiting benefit issuance is not a requirement or condition of the ARPA Physical Presence waiver.
  - b. The WIC local agencies will not terminate certifications for participants who fail to provide anthropometric or hematological data in the 60-day timeframe, provided that the CPA has identified a nutritional risk for eligibility at the time of certification. If pending data is received within the 60-day timeframe then the CPA will review the results with the participant, as:
    - i. The CPA will update risk codes as applicable.
    - ii. The CPA will tailor food package as applicable.
    - iii. If the participant's status changes to High Risk, the CPA will follow the policy 946 for High Risk participants, which includes follow up with a Registered Dietitian during the certification period.
    - iv. The data review with the participant will be documented in SPIRIT as a secondary nutrition education (SNE) contact if verbal nutrition education is provided.
    - v. If the CPA makes two unsuccessful attempts to contact the participant then the SNE will be documented in SPIRIT as No Show.
    - vi. No Show participants will not be terminated.
    - vii. All benefits available in the WIC MIS will be issued.
4. Compliance with this policy must be checked as part of the twice-yearly chart review conducted by WIC Coordinators and submitted to State of Alaska WIC.



### REFERENCE:

USDA policy memo, “Additional WIC Flexibilities to Support Outreach, Innovation, and Modernization Efforts through ARPA Nationwide Waivers – Supporting Remote WIC Operations,” released 2/1/2023

7 CFR 246.7 (e)

7 CFR 246.7 (e)(1)(ii)(A)

### CROSS REFERENCE:

Policy 940: Complete Nutrition Assessment

Policy 941: Anthropometrics

Policy 942A: Hemoglobin and Hematocrit Screening

Policy 945: Nutritional Risk Data Collection

Policy 946: High Risk Participants

Job Aid 041: Index of Allowed Nutrition Risk Criteria

### DEFINITIONS:

**Biochemical** - Pertaining to blood chemistry.

**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.

**Competent Professional Authority (CPA):** An individual of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and counseling, and prescribe supplemental foods.

**Food Benefits:** The foods a participant receives through WIC for a selected month. Depending on the participant category, food benefits provide specific amounts of WIC authorized foods, formulas, and/or a fixed-dollar amount for participants to obtain WIC authorized fruits and vegetables (referred to as a “Cash Value Benefit” or “CVB”).

**High-risk participant:** Those participants who are assigned a high-risk level based on identified health risks that meet the state’s high-risk criteria.

**Local agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;



## Alaska WIC Policy & Procedure Manual



- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Nutritional education** - Individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits and that emphasize the relationship between nutrition, physical activity, and health all in keeping with the personal and cultural preferences of the individual.

**Nutritional risk** means:

- (a) Detrimental or abnormal nutritional conditions detectable by biochemical or anthropometric measurements;
- (b) Other documented nutritionally related medical conditions;
- (c) Dietary deficiencies that impair or endanger health;
- (d) Conditions that directly affect the nutritional health of a person, including alcoholism or drug abuse; or
- (e) Conditions that predispose persons to inadequate nutritional patterns or nutritionally related medical conditions, including homelessness and migrancy.

**Remote certification:** Remote certification refers to the process of certifying participants who are not physically present in the WIC agency office. Remote certifications may be conducted by local agency staff via phone, HIPAA-compliant telemedicine, and/or video chats.

**Secondary Nutrition Education:** Participant-centered nutrition education that is provided between a certification contact and a mid-certification contact. It is expected to occur twice in a year long certification period.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
7/17/2023	New policy, pending FNS approval
7/8/2024	Approved by FNS
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.



## Alaska WIC Policy & Procedure Manual



**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A "draft" watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

#### Policy: 943 Lead Testing

Effective Date: 05/17/2023

#### PURPOSE:

To describe

- the dangers of lead
- sources of lead exposure
- the WIC categories which are required to be asked and referred for lead level testing or education at each certification

#### POLICY: 943 Lead Testing

The appropriate role for WIC in preventing lead poisoning is one where Local Agency staff provide information and referrals while assisting in an appropriate plan of nutrition intervention through nutrition education.

- WIC staff provide nutrition counselling and education to participants at risk of high-dose exposure to lead.
- WIC staff provide referrals for children at high risk of lead poisoning.

The important role that WIC plays in lead screening cannot be understated because the program serves those populations at highest risk for lead poisoning. By providing referrals for lead screening and appropriate nutrition education, WIC continues to ensure and protect the health of its participants through effective nutrition services.

#### BACKGROUND:

Elevated Blood Lead Levels (BLLs) in childhood are one of the most common pediatric health problems in the US. Children are at heightened risk for elevated BLL because they absorb lead more readily than adults and their developing nervous system is particularly vulnerable to the effects of lead. Elevated BLLs in children have been associated with decreased IQ, academic failure, and behavioral problems. Although lead can be fatal at high levels, **no amount of lead is safe**. Low levels in children can cause damage to the brain and nervous system, slowed growth and development, learning and behavior problems, and hearing and speech problems.

Lead testing is done in doctor's offices, or through other local programs. Lead testing is not done in the WIC office.

#### Lead Exposure in Pregnancy and Lactation

Lead exposure during pregnancy and postpartum can adversely impact the mother and the developing fetus and breastfeeding infant during critical development stages. Lead readily



crosses the placenta. Lead exposure during pregnancy is associated with increased risk of miscarriage, preterm birth and decreased birth size, fetal brain, kidney and nervous system damage, and lifelong learning and behavior problems.

### Lead Exposure in Children

Lead exposure is most common in young children because they have greater contact with lead sources and higher absorption of ingested lead. Children's developing nervous systems are more vulnerable to the effects of lead exposure. Elevated BLL in children has been associated with neurological and behavioral outcomes including cognitive deficits (learning and memory), altered behavior and mood, and altered neuromotor and sensory function.

### Sources of Lead Exposure

The most common lead exposure sources for children  $\leq 5$  years old with an elevated BLL in Alaska are: parental occupation or hobby, game meat hunted with lead ammunition, pre-1978 housing or renovation, pica, fishing weights, lead ammunition or firearms, or household objects with lead paint such as toys and ceramics. Alaska has some unique lead exposures, including plane fuel and lead shot.

Exposure routes include inhalation (aviation exhaust, dust, industrial emissions), and ingestion (food grown in contaminated soil or hunted with lead ammunition, soil, water, and swallowing non-food items).

### Prevention

Avoiding lead exposure is the primary preventive strategy for reducing negative health effects.

Because lead is present in Alaska's environment, secondary prevention is necessary to identify and follow children who are exposed to lead.

Venous blood draw samples are the preferred method of blood lead testing in a health care provider's office.

### **PROCEDURE:**

1.0) WIC applications provide a screening question to determine if a child has had a lead test.

2.0) If at certification (and recertification), a caretaker reports that a child **has not been screened** for lead by a health care provider

- WIC staff must refer the participant verbally to their health care provider for a blood lead level test
- This referral must be recorded in the participant's chart, either in the SOAP note, or on the Referral tab.





3.0) If a parent or caregiver indicates the child has had a lead test, staff will ask probing questions including:

- What did your doctor say about the results of the lead test?
- What concerns do you have about the results of the lead test?

4.0) If a child has been exposed to lead, the WIC Program can help by:

- Referring the participant to their health care provider
- Emphasizing the importance of diet in treating lead exposure
- Helping determine the sources of lead exposure and counseling participants to avoid lead exposure.

### Implications for WIC Nutrition Services

WIC nutrition services may benefit participants with an elevated BLL:

Making recommendations for prevention of lead exposure

- Avoiding relevant lead sources including: parental occupation or hobby, game meat hunted with lead ammunition, pre-1978 housing or renovation, pica, fishing weights, lead ammunition or firearms, or household objects with lead paint such as toys and ceramics
- Washing children's hands after playing outside, regularly washing toys and pacifiers, and removing shoes when entering the house

Children absorb about 50% of ingested lead after a meal and up to 100% on an empty stomach. A diet rich in iron, calcium and vitamin C can reduce the amount of lead absorbed.

Encourage consumption of foods available from WIC with nutrients that help minimize absorption of lead and assist in preventing adverse consequences

- Calcium: Low-fat dairy, canned fish, and fortified fruit and vegetable juice
- Iron: Lentils and beans, fortified cereals, and fish. Red meat and poultry are also good sources.

### Additional resources:

Blood Lead Surveillance and Exposure Sources Among Alaska Children

[https://journals.lww.com/jphmp/Fulltext/2019/01001/Blood\\_Lead\\_Surveillance\\_and\\_Exposure\\_Sources\\_Among.12.aspx](https://journals.lww.com/jphmp/Fulltext/2019/01001/Blood_Lead_Surveillance_and_Exposure_Sources_Among.12.aspx)

Centers for Disease Control and Prevention: Recommended Actions Based on blood lead level

<https://www.cdc.gov/nceh/lead/advisory/acclpp/actions-blls.htm>

### REMINDERS:

- WIC's core function is to provide nutrition education and improve the health outcomes



## Alaska WIC Policy & Procedure Manual



of its participants.

- Referrals are important to help participants find assistance in areas outside the scope of WIC
- It is helpful to ask permission to offer referrals- for example “Would it be ok if I give you our resource handout with contact information for other services that may be helpful to your family?”
- If a participant declines to take information, that is okay. Participants are not required to take information, but we are required to offer it.

### REFERENCE:

WIC Final Policy Memorandum 2001-1  
WIC Allowable Costs- Clarification of WIC’s FY 2001  
Appropriations Act Provision Regarding Blood Lead Screening  
211 Elevated Blood Lead Levels, 11/2022

### DEFINITIONS:

**BLL-** Blood Lead Level

**CDC-** Centers for Disease Control and Prevention

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
05/17/2023	Approved
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting



## Alaska WIC Policy & Procedure Manual



changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

#### **Policy: 944 Overview of Priority Levels**

Effective Date: 06/01/2018

#### **PURPOSE:**

To ensure consistent use of federally defined risk criteria and priorities among WIC Local Agencies.

#### **POLICY: 944 Overview of Priority Levels**

All participants must be assigned one or more of the nutrition risk factors used by Alaska's WIC program to determine eligibility for WIC participation. Risk factors are assessed by CPA's and SPIRIT. Priority levels are assigned by SPIRIT based on the participant's category and the risk factors selected.

#### **PROCEDURE:**

##### Minimum risk requirements

The following must be done at each certification:

Document all risk criteria applicable to the participant in the participant's SPIRIT record. Refer to Policy 940: Complete Nutrition Assessment.

##### New risk during a certification period

Document all new risks that develop during a certification period in the data system. This ensures that the participant's record accurately reflects their risk and priority status throughout their certification.

##### Priority Group Assignments with Nutritional Risk

Each category of participant (pregnant women, breastfeeding women, infants, children, and postpartum women) is assigned to a priority group by the AK computer system after the risk(s) have been entered into the system for the participant.

The ranking of the priority system is based on the severity of nutritional and/or medical risks. Priority I is the group of highest risk; Priority VII is the group of lowest risk. The nutritional and medical risks, with the computer system risk code numbers, are listed below for each participation category and priority group. Each category of participant does not necessarily contain all priority groups.

The risk codes which are in bold print font are designated as High Risk. There is a table summarizing Alaska WIC high risk codes in Policy 947: High Risk Criteria Codes and Descriptions.



### *Priority levels:*

A participant's priority level is automatically assigned by SPIRIT based on the highest priority level that the participant's risk factor(s) allows.

**Priority I:** Pregnant women, breastfeeding women, and infants at risk for reasons other than dietary risks or presumed eligibility as demonstrated by hematological or anthropometric measurements or the presence of nutrition related medical conditions.

**Priority II:** Infants up to six months of age who do not qualify for Priority I and were born to women who were WIC participants during their pregnancy with that infant or infants up to six months of age who were born to women who were not WIC participants during their pregnancy but would have been eligible for the program.

**Priority III:** Children at risk for reasons other than dietary risks or presumed eligibility as demonstrated by hematological or anthropometric measurements or the presence of nutrition related medical conditions.

**Priority IV:** Pregnant women, breastfeeding women, and infants with a dietary risk or presumed eligibility as the only risk factor. Postpartum, non-breastfeeding women at risk for reasons other than dietary risk or presumed eligibility.

**Priority V:** Children with dietary risks or presumed eligibility only.

**Priority VI:** Postpartum, non-breastfeeding women with dietary risks or presumed eligibility only.

**Priority VII:** Participants certified for WIC solely due to homelessness or migrant status or previously certified participants who might regress in nutritional status without WIC supplemental foods.

### Breastfeeding Dyad

A breastfeeding mother and her breastfeeding infant are required to have the same priority level. The highest priority level between the two is used, based on the risk criteria assigned to either the mother or the infant. To ensure matching priorities, select all risk criteria for the breastfeeding mother and her breastfeeding infant. If their priority levels differ, (e.g., mom is Priority I and her infant is Priority IV), then select Risk Code as appropriate so that the participant with the lower priority level is raised to the priority level of the other.

### REFERENCE:

Federal Regulations: 7CFR Ch. II

Subpart C- Participant Eligibility-Certification of Participants

- 246.7(e)(4)



#### CROSS-REFERENCE:

- Policy 940 Complete Nutritional Assessment
- Policy 947 High Risk Criteria Codes and Descriptions
- Job Aid 041: Index of Allowed Nutrition Risk Criteria

#### DEFINITIONS:

**Breastfeeding DYAD:** A dyad is a group of two persons involved in an ongoing relationship or interaction. For breastfeeding to start and continue, the newborn must be able to suck, swallow, and breathe; the mother must be able and willing to let her infant breastfeed; and surroundings must support the biological unit: the mother–baby dyad.

**Nutritional risk** means:

- (a) Detrimental or abnormal nutritional conditions detectable by biochemical or anthropometric measurements;
- (b) Other documented nutritionally related medical conditions;
- (c) Dietary deficiencies that impair or endanger health;
- (d) Conditions that directly affect the nutritional health of a person, including alcoholism or drug abuse; or
- (e) Conditions that predispose persons to inadequate nutritional patterns or nutritionally related medical conditions, including homelessness and migrancy.

**Priority:** A ranking system used to indicate severity of need when comparing one participant with another and used for caseload management. Priority 1 is the highest priority; Priority 7 is the lowest priority.

**Risk Criteria:** Health or dietary conditions that indicate a nutrition related problem and is required for program eligibility.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to



## Alaska WIC Policy & Procedure Manual



LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A "draft" watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

#### Policy: 946 High Risk Participant

Effective Date: 06/01/2018

#### PURPOSE:

- To provide quality nutrition services to participants identified as High Priority due to having a high-risk nutrition or health condition.
- To define the term “high risk” and provide direction on what high risk means in relation to how to assess, certify and provide nutrition education to high-risk WIC participants.

#### POLICY: 946 High Priority Participant

Individuals identified during the certification as High Priority (HP) shall be offered nutrition counseling and education by a CPA or nutritionist and encouraged to seek appropriate health care.

#### BACKGROUND:

In WIC, participants assigned certain health risk codes are considered “high-risk” participants, and they are provided the opportunity to meet one-on-one with a qualified RDN/WIC nutritionist. This individualized care is a program benefit which enables participants to modify their lifestyles and eating habits to improve and/or maintain their nutritional status and general health.

#### PROCEDURE:

Each local agency must:

1. Identify participants who are considered high priority according to the High Priority (HP) indicators that follow or use the Risk Criteria list.
2. Ensure participants receive counseling during the certification appointment from a CPA/nutritionist
3. Make appropriate referrals for HP participants to a health care provider when appropriate. (Participant consent is needed to share information with a health care provider.)
4. A high priority follow-up nutrition contact must be provided by a dietitian (RDN) or a CPA with a nutrition degree.
5. Documentation of the HP contact will be recorded in the participant’s SPIRIT record.

#### Certification as High Risk

Participants must be certified as high risk if the assessment indicates that they are at special risk of adverse health outcomes. Participants certified as high risk must be referred for high risk nutrition education/consultation.





A high-risk nutritional care plan must be completed by a Registered Dietitian, or a person holding a BS, MS or PhD in the field of nutrition (Nutrition Services Standard 1. E.1.a and 1.c) occurring at or before the next nutrition contact during the certification period. Best practice is to refer to the dietitian to be seen within 2 months, especially if the risk would be expected to benefit from nutrition intervention. Exceptions to this are risk factors 602 and 603 (BF complications or potential complications). Participants with HR due to these risk factors can be referred to the IBCLC, if available, and the IBCLC can write the HR care plan.

The care plan may be developed by telephone contact with the participant. Local public health nurses or health aides may be helpful in establishing contacts. Each HR participant must receive at least one high risk consultation per certification period. Participants who do not live rurally should be seen in person if possible. Circumstances that would preclude someone from being seen for a HR follow-up in person should be noted in the chart. High risk care plans can be implemented by a CPA.

Care plans must be entered as a SOAP note and indicate the credentials of the staff member who completed it. In order for the HR contact to be complete, the SPIRIT Nutrition Education tab must be opened, and a HR risk code must be chosen. This step is used by the Spirit HR Report, to count the HR contact as completed. If the participant has more than one HR risk code, both high risks must be selected in the Nutrition Education tab.

An exception is participants who transfer into an agency as high risk. These participants can be given the same next appointment a non-high-risk transfer would receive and can be referred to the dietitian at that contact.

### What Is High Risk?

#### Pregnant Women

Pregnant women are determined high risk if their assessment indicates that they are at special risk of adverse health outcome. Pregnancy problems stem from two types of conditions: complications induced by the pregnancy itself and pre-existing chronic disease in the mother. Pregnancy induced conditions include low hematocrit/hemoglobin, pregnancy-induced hypertension (PIH) and gestational diabetes. In some cases, the normal physiologic stress of pregnancy imposes demands on a relatively poor maternal nutritional status or on reserves that are inadequate to meet the new needs.

Pre-existing disease in the mother, such as phenylketonuria (PKU) or chronic hypertension, brings risk to the pregnancy. Other pre-existing maternal conditions include drug addiction, hypertension, and celiac disease.

Other high-risk factors include teenage pregnancy (<15 years of age) and multifetal gestation.



### Infants

The determination of high-risk infants is related to birth weight, gestational age, and weight for gestational age. The highest risk is among those weighing less than 1000 grams at birth and those born at less than 30 weeks' gestation. Other risk factors include hematologic problems, pyloric stenosis, inborn errors of metabolism, and fetal alcohol syndrome (FAS).

### REFERENCE:

CFR 246.7(e)(3)

WIC Nutrition Risk Criteria Manual

Nutrition Services Standards: Standard 1(C)(2)(g) and 1(E)(2)(a), Staff Qualifications, Roles, and Responsibilities and Standard 10(B)(8), Nutrition Education Contacts Evaluation

### CROSS REFERENCE:

Job Aid 041: Index of Allowed Nutrition Risk Criteria

### DEFINITIONS:

**Competent Professional Authority (CPA):** An individual of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and counseling, and prescribe supplemental foods.

**High-risk participant:** Those participants who are assigned a high-risk level based on identified health risks that meet the state's high-risk criteria.

**HP:** High-Priority

**Individual care plan:** A written plan that outlines actions that will assist the participant for improving identified nutrition and health-related problems.

**Nutritional risk** means:

- (a) Detrimental or abnormal nutritional conditions detectable by biochemical or anthropometric measurements;
- (b) Other documented nutritionally related medical conditions;
- (c) Dietary deficiencies that impair or endanger health;
- (d) Conditions that directly affect the nutritional health of a person, including alcoholism or drug abuse; or
- (e) Conditions that predispose persons to inadequate nutritional patterns or nutritionally related medical conditions, including, but not limited to, homelessness and migrancy.

**Risk Criteria:** Health or dietary conditions that indicate a nutrition related problem and is required for program eligibility.



POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

Policy: 947 High Risk Criteria and Risk Codes

Effective Date: 06/01/2018

#### PURPOSE:

To provide the list of risk codes that are considered as high risk for the State WIC Office.

#### POLICY 947 High Risk Criteria and Risk Codes

The chart at the end of this policy shows high risk factors by participant category and SPIRIT computer codes. These conditions require referral for high-risk nutrition education/consultation.

- The consultation must take place within the certification period. If the high-risk condition would benefit from talking to a dietitian, it is best practice to refer at the next contact.
- Referrals to other health care providers, i.e., physicians, Public Health Nurses, dentists, or health educators may be necessary as well.

High risk criteria are a state option and not a federal mandate. The WIC regulation (FR 246.7(b) stipulates staff must: Refer high-risk participants to other health-related and social services.

WIC Nutrition Services Standards (NSS 1.E) recommends that Local Agencies have **access** to a qualified nutritionist (RD, RD-eligible, or a person holding a BS, MS or PhD in the field of nutrition) to provide nutrition services to high-risk participants.

It also recommends that this qualified nutritionist “develop care plans for high-risk participants” (NSS 1.E.2c).

#### PROCEDURE:

High Risk Code Table: Alaska WIC (Revised April 2019)

USDA	I	C	PG	BF	NBF	Risk Factor
134	☆	☆				Failure To Thrive
141	☆					Low Birthweight ((Birth weight <5 lbs.)
142	☆					Prematurity (< 37 weeks gestation) (1 <sup>st</sup> year of life)
151	☆					Small for gestational age
201	☆	☆	☆	☆	☆	Low Hematocrit/Low Hemoglobin (Hgb <9 gms/dl or Hct, <30%)
302			☆			Gestational Diabetes
331			☆	☆		Pregnancy at a Young Age Conception (≤ 15 years, PG/BF)



## Alaska WIC Policy & Procedure Manual



335			☆	☆		Multifetal Gestation
345	☆	☆	☆	☆	☆	Hypertension (Includes Chronic and Preg Induced)
347	☆	☆	☆	☆	☆	Cancer
351	☆	☆	☆	☆	☆	Inborn Errors of Metabolism
354	☆	☆	☆	☆	☆	Celiac Disease
360	☆	☆	☆	☆	☆	Other Medical Conditions
382	☆	☆				Fetal Alcohol Syndrome (FAS) (HR up to 1 year of certification)
602				☆		BF Complications or Potential Comp's (Women)
603	☆					BF Complications or Potential Comp's (Infants)

### REFERENCE:

WIC Nutrition Risk Criteria Manual

### CROSS REFERENCE:

Job Aid 040: Cert Form Cheat Sheet for Risk Codes

Job Aid 041: Index of Allowed Nutrition Risk Criteria

### DEFINITIONS:

**High-risk participant:** Those participants who are assigned a high-risk level based on identified health risks that meet the state's high-risk criteria.

**HP:** High-Priority

**Risk Criteria:** Health or dietary conditions that indicate a nutrition related problem and is required for program eligibility.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a "draft" watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally,



## Alaska WIC Policy & Procedure Manual



they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A "draft" watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## **Alaska WIC Policy & Procedure Manual**

### **Section: 900 Certification, Eligibility & Coordination of Services**

#### **Policy: 948 High Risk Nutritional Care Plan**

Effective Date: 06/01/2018

#### **PURPOSE:**

To explain how the Alaska WIC Nutrition Care Plans must be used for high-risk WIC participants.

#### **POLICY: 948 High Risk Nutritional Care Plan**

##### **Nutrition Care Plans for High Risk Participants**

- An individual care plan must be developed if a participant is found to be high risk; when a CPA determines it is needed; or when a participant requests an individual care plan.
- The high-risk care plan is developed by either a Registered Dietitian, or a person holding a BS, MS or PhD in the field of nutrition, (Nutrition Services Standard 1. E.1.a and 1.c), if a Local Agency does not have access to either a Registered Dietitian or Nutritionist
- The care plan is kept in the participant's SPIRIT file.
- Using the Job Aid 039: High-Risk Nutrition Care Plan Examples included as a Job Aid for this policy is optional if an assessment and the guardian's desired outcomes are included in the plan developed by the client and provider. Charting objective or medical information in the computer note is not required if the information is already captured in the computer.
- The high-risk plan can be implemented by the CPA but it is preferred for an RD to counsel the high-risk client whenever possible.
- High risk pregnant and breastfeeding women and guardians of high-risk infants and children will receive at least one individual high risk counseling session per certification period. Counseling may be done by telephone.
- High Risk breastfeeding women with HR risk factors 602 and 603 can be referred to the RD or an IBCLC, and the IBCLC can write the care plan.
- If it is determined that a high-risk pregnant woman, infant or child could benefit from additional individual care beyond the high-risk contact, the participant may be referred to Medicaid. If the participant is referred for specialty nutrition care, the Local Agency will remain responsible for documenting that participants receive at least four nutrition education contacts within a certification period.



## Alaska WIC Policy & Procedure Manual



- A proxy may not attend a high-risk consultation in place of a high-risk participant, or in place of the parent or guardian of a high-risk infant or child.

In “Attachment: Job Aids” for this section you will find two examples of high-risk care plan formats. The RD or IBCLC may choose to use the SOAP note in SPIRIT to write the care plan.

### REFERENCE:

Nutrition Services Standard: Standard 1(E)(1)(a & c), Staff Qualifications, Rolls and Responsibilities

### CROSS REFERENCE:

Job Aid 039: High Risk Nutritional Care Plan Examples

Job Aid 041: Index of Allowed Nutrition Risk Criteria

### DEFINITIONS:

**Competent Professional Authority (CPA):** An individual of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and counseling, and prescribe supplemental foods.

**High-risk participant:** Those participants who are assigned a high-risk level based on identified health risks that meet the state’s high-risk criteria.

**HP:** High-Priority

**Individual care plan:** A written plan that outlines actions that will assist the participant for improving identified nutrition and health-related problems.

**Risk Criteria:** Health or dietary conditions that indicate a nutrition related problem and is required for program eligibility.

**SOAP:** Type of note used for documenting subjective and objective information collected, assessment and plan for the participant.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed





## Alaska WIC Policy & Procedure Manual




**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 900 Certification, Eligibility & Coordination of Services**



Policy: 949 Non-High Risk Nutritional Care Plans

Effective Date: 06/01/2018

**PURPOSE:**

To explain what Alaska WIC Nutrition Care Plans are, what they are used for, and the WIC CPA's use of Nutrition Care Plans.

**POLICY: 949 Non-High Risk Nutritional Care Plans**

**Nutrition Care Plans for Non-High Risk Participants**

The Nutrition Care Plans are nutrition education tools. They cover all possible identifiable USDA WIC nutritional risks; however, they are not intended to completely cover all possible participant scenarios.

Before using the Nutrition Care Plans, Paraprofessional CPA's are trained to identify nutritional risk conditions and criteria that are allowable risk factors for WIC eligibility; to understand the number system used to identify the USDA risk factors; to identify risk factors on the WIC certification form; to identify nutritional risk factors for WIC participants according to the USDA Nutrition Risk Manual; to understand how to use the Nutrition Care Plan Manual to provide nutrition counseling to WIC Participants. Finally, CPAs are trained to identify which risk factors are "high risk" and should be referred to a dietitian.

**CPA's Use of Nutrition Care Plans**

CPA's are trained by the University of Alaska Anchorage (UAA) CPA training program. For more information on this training program please contact state WIC staff.

CPA's who are Physicians, Nutritionists, Registered Dietitians, Registered Nurses, or Physician's Assistants may utilize the Nutrition Care Plans as a guide in developing or adapting individual care plans for non-high risk and high-risk participants.

CPAs using the Nutrition Care Plans need to assess the participant's area of concern as well as their readiness to learn. It is suggested that the Nutrition Care Plans are used in conjunction with appropriate basic counseling strategies.

**REFERENCE:**

- Federal Regulations: 7CFR Ch. II  
Subpart D- Participant Benefits-Nutrition Education
- 246.11(e)(5)



### CROSS REFERENCE:

948 High Risk Nutritional Care Plan  
Job Aid 041: Index of Allowed Nutrition Risk Criteria

Alaska WIC Nutrition Care Plans Manual:

<https://health.alaska.gov/dpa/Documents/dpa/programs/Nutrition/WIC/Staff/Manuals/Alaska-WIC-Nutriton-Care-Plan-Manual.pdf>

### DEFINITIONS:

**Competent Professional Authority (CPA):** An individual of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and counseling, and prescribe supplemental foods.

**High-risk participant:** Those participants who are assigned a high-risk level based on identified health risks that meet the state's high-risk criteria.

**Individual care plan:** A written plan that outlines actions that will assist the participant for improving identified nutrition and health-related problems.

**Nutrition Care Plan (NCP):** is a detailed plan or road map created by a dietitian that includes information about the intended plan of care for the patient. A dietitian will gather information about a patient from their medical chart, face-to-face meetings, lab work, anthropometrics, and other methods to create an NCP. Common components of a care plan include: 1.) Identify nutrition risk(s), strengths, needs and/or concerns, 2.) Design appropriate nutrition education and breastfeeding promotion and support that address needs and concerns 3.) Tailor the food package to address nutrition needs 4.) Make appropriate referrals.

**Paraprofessional CPA:** A person employed to assist or expand the efforts of professional CPAs. A health professional will supervise the paraprofessional's direct contact with WIC participants and their conducting of education programs.

**Professional CPA:** A person with a bachelor's or master's degree in a health profession, such as nutrition, nursing or health education. Includes physicians, physician assistants, registered nurses, dietitians, or public health educators.

**Risk Criteria:** Health or dietary conditions that indicate a nutrition related problem and is required for program eligibility.

**SOAP:** Type of note used for documenting subjective and objective information collected, assessment and plan for the participant.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information



system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual Section: 900 Certification, Eligibility & Coordination of Services



### Policy: 960 – Coordination of Services

Effective Date: 01/30/2013

#### PURPOSE:

- To ensure that WIC services include appropriate referrals to and coordination with other health and social service entities that WIC applicants and participants may find beneficial.
- To encourage Local Agencies to form partnerships with hospitals, healthcare providers, Head Start, and Child Care Food Programs to facilitate comprehensive service delivery.

#### POLICY: 960 – Coordination of Services

##### Coordination Certification Activities with Other Services

Local Agencies should provide appropriate referrals for WIC applicants and participants. This includes coordinating services with health and social services and maintaining appropriate documentation of coordination with those services.

Local Agencies are encouraged to refer all eligible individuals to the services of:

- Medicaid
- Child Support Enforcement
- Hospitals
- Health care providers
- Head Start and Child Care Food Programs

##### Hospital Agreements (Partnerships)

Local Agencies are encouraged to develop written cooperative agreements with local hospitals. The agreement should ensure that potentially eligible individuals that receive inpatient or outpatient prenatal, maternity, or postpartum services, or that accompany a child under the age of five who receives well-child services, are informed of the availability of WIC services.

Local Agencies are encouraged to provide opportunities for individuals who may be eligible for WIC services to be certified within the hospital.

##### Health Care Provider Partnerships

Local Agencies are encouraged to provide local health care providers with outreach information such as brochures and posters and to develop written cooperative agreements with them. The agreement should ensure that potentially eligible individuals that receive outpatient prenatal, maternity, or postpartum services, or that accompany a child under the age of five who



## Alaska WIC Policy & Procedure Manual



receives well-child services, are informed of the availability of WIC services available in their community.

### Head Start - Child Care Food Program Partnerships

Local Agencies are encouraged to develop written cooperative agreements with their local Head Start agency and through it with the Child and Adult Care Food Program. The purpose of these agreements is to facilitate the delivery of nutrition services by:

- Removing barriers to application for services
- Reducing duplication and thereby increasing effectiveness and efficient use of resources
- Improving service delivery methods

### REFERENCE:

State WIC Office based on:

Federal Regulations: 7CFR Ch. II

- Subpart B - State and Local Agency Eligibility- State Plan
  - 246.4 (a)(8)(7)
  - 246.6 (b)(3)
- Subpart C - Participant Eligibility- Certification of Participants
  - 246.7 (a)
  - 246.7 (b)(1)

WIC Nutrition Services Standards: Standard 10, Program Coordination, Participant Referrals

WIC Nutrition Services Standards: Standard 11, Program Coordination, Participant Referrals

### DEFINITIONS:

**Local agency:** A public or private nonprofit health or human service agency which provides health services either directly or through contract in accordance with § 246.5; an IHS service unit; an Indian tribe band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or an intertribal council or group that is an authorized representative of Indian tribes bands or groups recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit.

**Participant:** Participants means pregnant women breastfeeding women postpartum women infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program and the breastfed infants of participant breastfeeding women.

**Participant-Centered Services (PCS):** A systems approach designed to focus on topics and



## Alaska WIC Policy & Procedure Manual



issues that are relevant to the participant. This approach puts the participants needs and the goal of healthy behaviors at the core of WIC service delivery, and focuses on a person's capacities, strengths, and developmental needs, not solely on the problems, risks or negative behaviors. In contrast to the traditional didactic WIC assessment and education model, participant-centered services encourage staff to engage the participant/caretaker in dialogue, information exchange, listening and feedback, in order to translate the assessment into action and customize the nutrition services provided.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

#### Policy: 961 Referral

Effective Date: 07/01/2014

#### PURPOSE:

To specify the agencies for which a WIC applicant or participant must receive a referral, ensuring coordination of services with other health and social service entities, and to encourage Local Agencies to provide relevant information about the WIC Program to other health and social service agencies in their local area.

#### POLICY: 961 Referral

##### Required Referral Information

Local Agencies are required to make information on the following available to all adults applying or re-applying for themselves or on behalf of others if they are not currently participating in the following programs:

- Medicaid/Denali Kid Care (DKC)
- Supplemental Nutrition Assistance Program (SNAP) Formerly known as Food Stamp Program
- Early Periodic Screening, Diagnosis and Treatment (EPSDT)
- Temporary Assistance for Needy Families (TANF (formerly known as Alaska Temporary Assistance Program)
- Immunizations
- Dangers of Using Alcohol, Drugs and other Harmful Substances

Federal welfare reform initiatives eliminate required referrals to SNAP and TANF from federal regulations, but Alaska WIC continues to require these referrals.

##### Medicaid/Denali Kid Care (DKC) Referral Requirement

Local Agencies are required to provide written material on Medicaid/DKC services and income guidelines to adults applying or reapplying to WIC for themselves and/or their children who are not currently participating in Medicaid/DKC and appear to have a family income within the Medicaid guidelines. It is not the responsibility of WIC staff to be experts on Medicaid/DKC eligibility or to provide extensive screening procedures for these programs.

Application for Medicaid/DKC is made on-line or through local offices of the State of Alaska, Department of Health, Division of Public Assistance. For those who qualify, Medicaid provides access to a broad range of medical care. It can help assure adequate prenatal care for expectant mothers, as well as provide for complete screening and provision of any necessary medical





## Alaska WIC Policy & Procedure Manual



treatment for children under the age of twenty-one through the Early Periodic Screening, Diagnosis, and Treatment Program (EPSDT). EPSDT services are provided through the Division of Public Health at local Public Health Centers.

Eligibility standards for Medicaid are complex. With some exceptions, eligibility for Medicaid is linked to eligibility for public assistance programs (Adult Public Assistance, Supplemental Security Income, Temporary Assistance for Needy Families, and so on). Applicants do not need to be recipients of these programs, but they do need to meet the eligibility requirements. Eligibility for Medicaid may be retroactive for up to three months if the applicant met the eligibility requirements during those months. Income limits for Medicaid eligibility vary depending on the status of the applicant. It is indexed to the federal poverty standard (for Alaska) which is adjusted annually. The dollar maximum for income is a percentage of the federal poverty standard, however, programs may have different rules defining income.

Medicaid eligibility is complex, and a child may qualify even if their parent or caretaker does not. When in doubt, refer.

### EPSDT Referral Requirement

Only Medicaid/DKC enrolled participants are eligible for EPSDT screenings. EPSDT screenings are available to all Medicaid children. Medicaid is required to cover travel for children out of villages to access this service if it is not available for them in their home area.

### SNAP Referral Requirement

Alaska SNAP provides food benefits to low-income households. SNAP benefits are issued through the Alaska Quest card. The amount a household receives each month depends on the household's countable income and size of the household. Referrals for SNAP must be made to each WIC participant not currently enrolled in SNAP.

### Temporary Assistance for Needy Families (TANF) or Tribal Temporary Assistance for Needy Families (TTANF) Referral Requirement

Temporary Assistance for Needy Families (TANF) or Tribal Temporary Assistance for Needy Families (TTANF) provide cash assistance and work services to low-income families with children and pregnant women to help them with basic needs while they work toward becoming self-sufficient. Any family applying for WIC that is not on the ATAP program should be referred and directed to the State of Alaska Division of Public Assistance.

### Immunizations

The minimum screening and referral protocol is for children under age two at risk for under-immunization. It is not meant to fully assess a child's immunization status but allows WIC to effectively fulfill its role as an adjunct to health care by ensuring that children who are at risk for under-immunization are referred for appropriate care. See Policy 962 Immunization Screening and Referral Protocol for more information.



### Referral for Alcohol, Drugs and Other Harmful Substances

Local agencies must increase WIC participants' access to information about the dangers of using alcohol, drugs, and other harmful substances during pregnancy, while breastfeeding and for parents or caretakers of children enrolled in WIC. Local WIC programs must assess and refer WIC participants to services as needed.

Provide information about the dangers of using alcohol, tobacco, or other drugs all WIC applicants and participants: pregnant, postpartum, and breastfeeding women and parents and caretakers of infants and children applying for participation in WIC.

### Child Support Enforcement Referrals

Alaska's Child Support Enforcement Agency (CSEA) is in the State Department of Revenue. This agency aids in locating absent parents; establishing paternity; establishing a child support order; establishing and enforcing medical support; enforcing, collecting and maintaining child support payments; and reviewing and adjusting child support orders. These services are available to any individual who is responsible for a child's welfare. Services are automatically provided for anyone receiving public assistance, Medicaid or in Foster Care; others must apply for services. CSEA works cooperatively with other states in enforcing child support orders throughout the nation. Refer participants to CSEA for details on any possible fees incurred for these services.

CSEA does not provide assistance with visitation, custody or property settlement matters. If an applicant/participant needs assistance with these matters they should be referred to an attorney, Alaska Legal Services or the court.

### Referral Methods

The primary referral methods used by Local Agencies for referral to other health care and social service programs include but are not limited to:

- Verbal referrals to participants
- Telephone calls to referral agencies
- Written literature on referral agencies: circle or underline pertinent information on referral materials for easy reference
- For participants needing multiple services refer them to the statewide toll free 211 information and referral service. Access this service by simply dialing 2-1-1 to talk to a referral specialist.

### Referral Systems

Local Agencies are required to coordinate services, and develop referral systems with the following local health care providers, if the programs exist in their geographical service area:

- Prenatal and postnatal care programs
- Immunization programs



## Alaska WIC Policy & Procedure Manual



- Family planning programs
- Healthy Families
- EPSDT
- Expanded Food and Nutrition Education Program (EFNEP)
- School clinics
- Well-child programs
- Community health centers
- Breastfeeding promotion entities
- Breastfeeding Peer Counseling Program, where applicable
- Substance abuse prevention and treatment programs
- Child protective services
- Dental services
- Domestic violence prevention and intervention programs
- Food Banks and other food assistance programs
- Alaska Physical Activity and Nutrition Program
- Homeless facilities
- Infant Learning Programs (ILP)
- Foster care agencies
- The State of Alaska Division of Public Assistance

### Evaluation

Evaluate referral outcomes when possible, by conducting follow-up with participants at subsequent visits:

- Ask participants if services were obtained
- Reinforce follow-through if services were accessed
- Identify barriers and options for overcoming barriers if services were not obtained

### Referrals from Other Agencies

Local Agencies are encouraged to provide other health and social service programs in their geographical area with WIC eligibility information; the location, telephone number(s), and hours of local WIC clinics; and WIC application forms including rights and responsibilities, nondiscrimination policy, and civil rights complaints procedures. Local Agencies are encouraged to have staff of these referring agencies help WIC applicants to fill out the application forms. Local Agencies are also encouraged to provide the referring agency with subsequent follow-up information on the applicant's WIC application and certification.

### **PROCEDURE:**

#### Documentation of Referrals

All referrals made must be documented on the Referral tab in SPIRIT or on an optional form used to track referrals outside of SPIRIT. If a form is used to document referrals, in SPIRIT, select "For Referrals- See physical chart" as the required referral selection from the referral list in



SPIRIT.

For additional information on referrals see Appendices (Referral Summary Table) at the end of this policy.

### Use of “LA Specific”

The selection of “LA Specific 1” and “LA Specific 2” from the referral list in SPIRIT requires that a Local Agency have a written policy describing what the referral means and circumstances when staff are to assign the referral. These two referrals were designed to be unique to a Local Agency where no other referral in the list covers the referral needed.

### Resources

Local Agency staff must keep informed about available health and social services in the community whenever possible.

- Invite staff from other programs to give presentations at staff meetings. Share information about new community resources at staff meetings.
- Update community resource materials regularly. Keep pamphlets and brochures in locations available for participants.
- Develop or obtain a comprehensive listing of available resources, services provided, program locations, telephone numbers, websites and eligibility criteria.

### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart B- State and Local Agency Eligibility- State Plan
  - 246.4 (a)(7-8)
- Subpart C- Participant Eligibility- Certification of Participants
  - 246.7 (a)(b)
- Subpart G- Miscellaneous Provisions- Other Provisions
  - 246.26 (d)(3)

### CROSS REFERENCES:

962 Immunization Screening and Referral Protocol

### APPENDICES:

Referral Summary Table



## Alaska WIC Policy & Procedure Manual



State Required Referrals	Who the Referral is For	When to Make the Referral
Medicaid/DKC  <i>Written material and income guidelines required for referral</i>	Adults applying for or on WIC Children applying for or on WIC	Any WIC applicant or participant that is not currently receiving Medicaid or DKC and indicates an interest in the program
SNAP	Adults applying for or on WIC Children applying for or on WIC	Any WIC applicant or participant that is not currently receiving SNAP and indicates interest in the program
EPSDT	All infants and children	Infants / children not currently receiving EPSDT services with interest in the program. For those not on Medicaid/DKC a referral and enrollment in Medicaid/DKC must take place prior to EPSDT services occurring.
TAN or Tribal TANF	Any family or pregnant woman applying for WIC	Any family or pregnant woman applying for WIC that doesn't receive ATAP and indicates interest in the program
Immunizations	Children under age 2	Any child without proof of immunizations for DTaP or any under immunized child identified through review of the immunization record



Alcohol, Drugs, and Other Harmful Substances	Local WIC programs must assess and refer WIC participants to services as needed.	<p>Provide information about the dangers of using alcohol, tobacco, or other drugs to all WIC applicants and participants.</p> <p>Referrals should be made to any pregnant, post-partum participants or parents/caretakers of children enrolled in WIC; that indicate through the application process or in conversation alcohol, drug or other harmful substance use.</p>
--	--	--

#### DEFINITIONS:

**Breastfeeding** means the practice of feeding human milk/breastmilk to an infant on average of at least once a day.

**Civil rights:** Personal rights guaranteed and protected by the U.S. Constitution and federal laws enacted by Congress, such as the Civil Rights Act of 1964 and the Americans with Disabilities Act of 1990. Civil rights include protection from unlawful discrimination.

**Homeless facility** means the following types of facilities which provide meal service. A supervised publicly or privately operated shelter (including a welfare hotel or congregate shelter) designed to provide temporary living accommodations; a facility that provides a temporary residence for individuals intended to be institutionalized; or a public or private place not designed for, or normally used as, a regular sleeping accommodation for human beings.

**Immunization schedule:** Current schedule of immunization consistent with that recommended by Centers for Disease Control and Prevention (CDC).

**Local Agency means:**

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.



**Other harmful substances** means other substances such as tobacco, prescription drugs and over-the-counter medications that can be harmful to the health of the WIC population, especially the pregnant woman and her fetus.

**Participant-Centered Services (PCS):** A systems approach designed to focus on topics and issues that are relevant to the participant. This approach puts the participants needs and the goal of healthy behaviors at the core of WIC service delivery, and focuses on a person’s capacities, strengths, and developmental needs, not solely on the problems, risks or negative behaviors. In contract to the traditional didactic WIC assessment and education model, participant-centered services encourage staff to engage the participant/caretaker in dialogue, information exchange, listening and feedback, in order to translate the assessment into action and customize the nutrition services provided.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Protected classes:** The prohibited bases and nondiscrimination categories under the civil rights law(s). For WIC, the protected classes are race, color, sex, age, national origin, and disability.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

#### Policy: 962 – Immunization Screening & Referral Protocol

Effective Date: 01/21/2013

##### PURPOSE:

To provide guidance for Local Agencies on the requirement to screen children under the age of two for immunizations to identify those who may be under-immunized, and to establish the minimum immunization screening and referral protocols for evaluating a child's immunization records.

##### POLICY: 962 – Immunization Screening & Referral Protocol

###### WIC Immunization Screening and Referral Requirements

WIC's role in immunization screening and referral is to support existing funded immunization activities. Each State's Immunization Program is the lead agency in immunization planning and screening and is responsible for designing immunization systems. WIC State and Local Agencies must develop plans to coordinate with providers of immunization screenings so that children participating in WIC are screened and referred for immunizations using a documented immunization history.

The minimum screening and referral protocol is for children under age two at risk for under-immunization. It is not meant to fully assess a child's immunization status but allows WIC to effectively fulfill its role as an adjunct to health care by ensuring that children who are at risk for under-immunization are referred for appropriate care.

###### Minimum Immunization Screening and Referral Protocol

###### *Minimum Screening and Referral Protocol*

When scheduling WIC certification appointments for children under the age of two, advise parents and caretakers of infant and child WIC applicants that immunization records are requested as part of the WIC certification and health screening process. Explain to the parent/caretaker the importance that WIC places on making sure that children are up to date on immunizations and assure applicants that immunization records are not required to obtain WIC benefits.

At initial certification and all subsequent certification visits for children under the age of two, screen the infant/child's immunization status using a documented record, including VacTrAK, the Alaska Immunization Information System. The VacTrAK system is accessible for reviewing immunization status and immunization records and is available for client referrals to health care providers. A documented record is a record (computerized or paper) in which actual





## Alaska WIC Policy & Procedure Manual



vaccination dates are recorded. This includes a parent's hand-held immunization record (from the provider), an immunization registry, an automated data system, or a client chart (paper copy).

At a minimum, screen the infant/child's immunization status by counting the number of doses of DTaP vaccine they have received in relation to their age, according to the following table:

- By 2 months of age, the infant/child should have at least 1 dose of DTaP.
- By 4 months of age, the infant/child should have at least 2 doses of DTaP.
- By 6 months of age, the infant/child should have at least 3 doses of DTaP.
- By 18 months of age, the infant/child should have at least 4 doses of DTaP.
- By 4-6 years of age, the child should have at least 5 doses of DTaP.

If the infant/child is not fully immunized: (1) offer information on the recommended immunization schedule appropriate to the current age of the infant/child, and (2) provide referral for immunization services, ideally to the child's usual source of medical care. Best practice is to have immunization materials and schedules readily available to parents and/or displayed in the office.

If a documented immunization record is unavailable: (1) offer written information on the recommended immunization schedule appropriate to the current age of the infant/child, (2) provide referral for immunization services, ideally to the child's usual source of medical care, and (3) encourage the parent/caretaker to bring the immunization record to the next certification visit.

Reminder: A verbal confirmation from a parent is not a valid record of immunization status.

### PROCEDURE: Immunization Documentation

Immunizations are documented in SPIRIT's Certification Guided Script ("CGS") and inside the "Health Information" screen. Select the "Immunization Screen". Documentation of Dtap immunization for children under age two is required. Select from the drop-down box:

- Up to Date
- Not Up to Date-Referral Given
- Unknown- Referral Given
- Child Over 2 Years of Age
- Parent Chooses Not to Immunize

### REFERENCE:

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)



## Alaska WIC Policy & Procedure Manual



- Subpart B State and Local Agency Eligibility- State Plan
  - 246.4 (a)(7)

### DEFINITIONS:

**Caregiver:** A person who has significant responsibility for providing food to the infant or child. The caregiver is usually part of the family unit, for example the parent or legal guardian of the infant or child.

**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.

**Children** means persons who have had their first birthday but have not yet attained their fifth birthday.

**Immunization schedule:** Current schedule of immunization consistent with that recommended by Centers for Disease Control and Prevention (CDC).

**Infant:** A person who is 12 months old or younger. Once they turn 12 months, they are considered a child.

**Initial certification:** The first certification for an individual who has never participated in WIC or has not participated in WIC for 12 months or more.

### Local Agency means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Participant-Centered Services (PCS):** A systems approach designed to focus on topics and issues that are relevant to the participant. This approach puts the participants needs and the goal of healthy behaviors at the core of WIC service delivery, and focuses on a person's capacities, strengths, and developmental needs, not solely on the problems, risks or negative behaviors. In contrast to the traditional didactic WIC assessment and education model, participant-centered services encourage staff to engage the participant/caretaker in dialogue, information exchange, listening and feedback, in order to translate the assessment into action and customize the nutrition services provided.



## Alaska WIC Policy & Procedure Manual



**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

Policy: 970 – Processing Standards

Effective Date: 01/21/2013

#### PURPOSE:

To inform Local Agencies of the timelines and standards for processing WIC applications, performing certifications and recertifications, and to provide guidelines for recording the receipt of an applicant's completed WIC application and notifying them of their eligibility status within specified timeframes.

#### POLICY: 970 – Processing Standards

##### Application Processing Standards & Certification Periods

When processing WIC applications and performing certifications and recertifications, Local Agencies must follow standards to ensure that:

- WIC applications are processed in a timely manner
- Procedures are in place to ensure benefits are issued appropriately
- Certification periods are correct
- Applicants and participants are informed of their future certification due dates
- Denial or termination of benefits are communicated to the applicant or participant
- Applicants and participants are aware of their rights, obligations and fair hearing procedures

##### Applicant Notification Standards for Processing Applications

The date of application is the date that the applicant contacts or visits the Local Agency to make an oral or written request for program benefits; or when an application from a client without access to a WIC clinic is received by the Local Agency. In SPIRIT this is called the “Date” on the “Initial Contact” screen. The date of application is also called the “Initial Contact Date” on the “Initial Contacts Report” which tracks processing standards in SPIRIT.



## Alaska WIC Policy & Procedure Manual



Initial Contact

Participant

Name ZOE B. WOODPECKER

State WIC ID 00090979

Date 02/10/2016 Type Paper Application First Appointment Offered Date

WIC Category Child ☐ Migrant at Initial Contact

Comments Application on hold pending required items.

New Contact OK Cancel

To ensure that accurate records are kept of the date of application for benefits, the Local Agency must record the applicant's name, address, phone, and the date. Applications received by mail, fax or email must be date-stamped on the day they are received. The Local Agency must act on applications within the timeframes described below.

### *Screen Shot - Initial Contact Dialog Box 1*

In SPIRIT the “First Appointment Offered Date” must reflect the date the applicant’s appointment is scheduled. This includes mailed in applications. Every participant must have a “First Appointment Offered Date” entered in SPIRIT as they are starting the certification or recertification process.

For applications received by mail, fax or email, the “Initial Date” corresponds with the date the application arrives at the Local Agency. If these applications are incomplete but provide enough data to certify the participant and provide the participant 30 days’ worth of benefits then the “First Appointment Offered Date” must be the date the application arrived at the WIC office and was date stamped.

If the application arrives at the Local Agency and is date stamped but does not provide sufficient documentation to complete the certification or recertification process, put the application in a pending file, mark the application “pending”, enter a note into the SPIRIT “Initial Contact” screen that the application is on hold pending required items. Once those items are available, use the date they arrive at the WIC office as the “First Appointment Offered Date”. Documentation in the “Manage Notes” section in SPIRIT under “General Notes” should document the on-going communications to the client to retrieve the needed information.

### High Nutritional Risk Applicant Notification

Pregnant women eligible as Priority I participants, infants under six months of age eligible as



## Alaska WIC Policy & Procedure Manual



Priority I participants, homeless applicants, and migrant workers and their family members who plan to leave the jurisdiction of the Local Agency, must be notified of their eligibility or ineligibility within 10 calendar days of the date of the first application for program benefits. Ten calendar days include weekends and holidays.

If a Local Agency is unable to meet the 10 calendar day processing standard for these applicants, the Local Agency must make a written request to the State WIC Office for an extension to 15 calendar days. As soon as a Local Agency recognizes that the certification timeframes cannot be met, they must immediately contact the State WIC office to request the extension. The written request to the State WIC Office must include a justification of the need for an extension.

SPIRIT will require one individual nutrition education contact to issue benefits to a High-Risk participant.

### Non-High Risk Applicant Notification

All non-high-risk applicants must be notified of their eligibility or ineligibility within 20 calendar days of the date of the first application for program benefits.

### Issuance Standards

Local Agencies must issue WIC benefits to the participant at the same time as the notification of certification. Benefits must be issued for at least 30 days.

### Written Procedures: Appointments, Issuance and Nutrition Education

Local Agencies must have written procedures on late and missed certification appointments, benefit issuance, and nutrition education. For late or missed certification appointments, the written procedures should specify how late is too late to be processed, how soon rescheduling will occur, and how a no-show will be followed up (i.e. telephone call, email, text or letter).

In SPIRIT, staff can view a “Confirm Appointment” when the “Confirm” button is selected on the “View Appointments for Date” window. SPIRIT displays the participant contact information.

### Missed Appointments

For missed nutrition education sessions, the written procedures should specify how benefit issuance will be handled if the appointment is missed, how soon rescheduling should occur, and how a no-show will be followed up.

### REFERENCE:

State WIC Office based on:

Federal Regulations: 7CFR Ch. II

- Subpart C- Participant Eligibility- Certification of Participants
  - 246.7 (f)(2)(i)



- 246.7 (f)(2)(ii)
- 246.7 (f)(2)(iii)(A)
- 246.7 (f)(2)(iii)(B)
- 246.7 (f)(2)(iv)
- Subpart D- Participant Benefits- Nutrition Education
  - 246.11 (e)(4)

### DEFINITIONS:

**Certification** : means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.

**Civil rights**: Personal rights guaranteed and protected by the U.S. Constitution and federal laws enacted by Congress, such as the Civil Rights Act of 1964 and the Americans with Disabilities Act of 1990. Civil rights include protection from unlawful discrimination.

**Competent Professional Authority (CPA)**: An individual of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and counseling, and prescribe supplemental foods.

**Denial (of local WIC agency application)**: The act of denying a Local Agency application for WIC program participation as an authorized WIC Local Agency.

**Food Benefits**: The foods a participant receives through WIC for a selected month. Depending on the participant category, food benefits provide specific amounts of WIC authorized foods, formulas, and/or a fixed-dollar amount for participants to obtain WIC authorized fruits and vegetables (referred to as a "Cash Value Benefit" or "CVB").

**High-risk participant**: Those participants who are assigned a high-risk level based on identified health risks that meet the state's high-risk criteria.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Nutritional risk** means:



## Alaska WIC Policy & Procedure Manual



- (a) Detrimental or abnormal nutritional conditions detectable by biochemical or anthropometric measurements;
- (b) Other documented nutritionally related medical conditions;
- (c) Dietary deficiencies that impair or endanger health;
- (d) Conditions that directly affect the nutritional health of a person, including alcoholism or drug abuse; or
- (e) Conditions that predispose persons to inadequate nutritional patterns or nutritionally related medical conditions, including homelessness and migrancy.

**Nutrition Education** means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving benefits for supplemental foods under the Program, and the breastfed infants of participant breastfeeding women.

**Single issuance:** When a participant is issued Food Benefits for one month (also referred to as “one-month issuance”).

**SPiRiT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

**Subsequent certification (recertification):** Any certification after the initial certification.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required





## Alaska WIC Policy & Procedure Manual



training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 900 Certification, Eligibility & Coordination of Services

Policy: 971 – Record Retention

Effective Date: 01/30/2013

#### PURPOSE:

- To describe the required documentation and minimum content that must be maintained for all WIC participant files (computerized and paper records).
- To describe the required retention time for all WIC participant information and files (computerized and paper records).

#### POLICY: 971 – Record Retention

##### Documentation in Participant Files

###### *Definition of Participant File*

Participant files or records are defined as papers, files, accounts, writings, including notes of counseling and conversations, and other items, regardless of format or physical characteristics, that are developed or received by the WIC Program, or by a health care provider or referral source for the WIC Program that contain information pertaining to a participant and that is preserved for its informational value or as evidence of the operation of the WIC Program. These files must be kept in a secure location. This includes SPIRIT computer files. Paperless systems must include reliable and secure protocols. WIC regulations require that only individuals involved in the program's administration and enforcement are authorized to access confidential WIC information. Electronic systems must protect against unauthorized access to confidential program information.

##### Minimum Requirements for Contents of Participant Files

The following, at a minimum, must be kept in each participant's file:

- Application Form(s).
  - The WIC Family Information application form with the parent or guardian's signature on the WIC Rights and Responsibilities section must be kept in the file of the parent or guardian if more than one member of a family is participating in WIC. This form must be kept in the paper file or electronically scanned into SPIRIT. The digital signature can also be captured in SPIRIT after the Authorized Representative has read the "Rights and Responsibilities" statement.
  - Applications are required to be used by WIC agencies, unless a request to make the applications optional has been submitted by the Local Agency to the State WIC Office and approved. Applications can be kept in the hard record or scanned into the client's electronic SPIRIT record.
  - If a WIC Local Agency wants to go "paperless" they need the approval of the



## Alaska WIC Policy & Procedure Manual



State WIC office prior to doing so. A written proposal along with the policies and procedures to implement a “paperless” system must be submitted for review prior to implementation.

- Documentation in SPIRIT of identity, residency and income will be done through a selection from a drop-down box verifying the proofs for identity, residency and income. By selecting a “Proof” that person verifies they saw and accepted the specified “Proof” for the eligibility selection. The local WIC agency can choose to photocopy proofs if desired.
  - Income documentation, if scanned, should be scanned for each member of the household via the “Save to All” radio button in SPIRIT.
- Notification of termination (Your WIC Benefits Have Ended form or the SPIRIT form). The form is kept in the paper file or scanned into SPIRIT. The SPIRIT form is automatically documented in SPIRIT. Refer to Policy 910: Termination of Benefits, and Job Aid 031: Termination Letter “Your WIC Benefits Have Ended”.

The following documents must be scanned into the client’s electronic SPIRIT file, if applicable:

- No Proof of Income Form.
- Enteral Nutrition Prescription Request (ENPR) forms for non-contract formulas, special medical formulas or Food Package III.
- Alaska WIC Program Complaint Form.
- Civil Rights Complaint Report.
- Custody paperwork.
- Verification of Certification (VOC).

The following documents must also be either scanned into the client’s electronic SPIRIT file or placed in the participant’s file, if applicable:

- Referral forms.

### Retention of Participant Records

#### *Paper Files*

At a minimum, the documents listed above must be kept in the paper file of a participant, must be retained at the appropriate Local Agency clinic site for one year after termination of the participant from the program. In addition, the file must be archived for an additional two years. In total the documents must be kept for three years.

#### *Retention of Participant Records: Computer Files*

The retention of computer files is a State WIC Office responsibility. All data will be retained for at least three years. Management of this data is also a State WIC Office responsibility.



## REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart B - Participant Eligibility- State Plan
  - 246.4 (a)(11)(iv)
- Subpart C- Participant Eligibility - Certification of Participants
  - 246.7 (i)(1-10)
- Subpart E - State Agency Provisions- Food Delivery Systems
  - 246.12 (q)
- Subpart G - Miscellaneous Provisions
  - 246.12(d)(1)(i-ii)
- Subpart G- Miscellaneous Provisions- Records and Reports
  - 246.25 (a)(1-3)

Federal Regulations: Part II, Department of Agriculture, Food and Nutrition Services, 7CFR

- Part 246- Special Supplemental Nutrition Program for Women, Infants and Children (WIC): Revisions in the WIC Food Packages
  - Final Rule 246.7 Bol. 79, No. 42, March 2014
- WIC Final Policy Memorandum 2008-4 WIC Nutrition Services Documentation July 2008

## CROSS REFERENCE:

903 Proof of Identity

904 Proof of Residency

905 Proof of Income

910 Termination of Benefits

Job Aid 031: Termination Letter: Your Benefits Have Ended Form

## DEFINITIONS:

**Acceptable proof:** Reasonable documentation of personal identity, income and current residency as approved by the state WIC program.

**Aggregate files:** Any filing system where documents are sorted and filed by a method other than individual participant paper charts.

**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.

**Documentation** means the presentation of written documents which substantiate statements made by an applicant or participant or a person applying on behalf of an applicant.

**High-risk participant:** Those participants who are assigned a high-risk level based on identified health risks that meet the state's high-risk criteria.



**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Participant-Centered Services (PCS):** A systems approach designed to focus on topics and issues that are relevant to the participant. This approach puts the participants needs and the goal of healthy behaviors at the core of WIC service delivery, and focuses on a person’s capacities, strengths, and developmental needs, not solely on the problems, risks or negative behaviors. In contract to the traditional didactic WIC assessment and education model, participant-centered services encourage staff to engage the participant/caretaker in dialogue, information exchange, listening and feedback, in order to translate the assessment into action and customize the nutrition services provided.

**Participant records:** Documents, regardless of medium or physical form, containing information relating to case histories, health records, treatment charts, progress reports, or accounts of the participants of any provider that are maintained in the regular course of business.

**Retention Period:** The minimum length of time a record must be retained as authorized by an applicable retention schedule published in the Code of Federal Regulations (CFR), or recommended by the State WIC Program.

**SOAP:** Type of note used for documenting subjective and objective information collected, assessment and plan for the participant.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

**Termination:** A participant is terminated from the program when a participant’s record is closed and benefits cease for any reason, including not meeting eligibility requirements, transferring out of state, etc. If the participant has been terminated from the program due to a participant violation, it is considered a disqualification.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in



## Alaska WIC Policy & Procedure Manual



draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A "draft" watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 1000 Food Delivery and Food Instrument Accountability and Control**

Policy: 1001 Food Delivery Process

Effective Date: 03/01/2021

**PURPOSE:**

To outline the delivery methods used by the WIC Program to provide supplemental foods to its participants. To explain how the WIC Program's retail purchase system uses authorized WIC vendors to provide WIC supplemental foods to participants. To inform Local Agencies that retroactive WIC benefits should not be provided to a WIC participant.

**POLICY: 1001 Food Delivery Process**

**Food Delivery System**

The food delivery system used by the WIC Program provides supplemental foods free of charge to participants. These foods are provided by retail WIC-authorized vendors and mailed food delivery vendors.

The following related policies further describe delivery through:

- WIC authorized vendors
- Mail out food vendors
- eWIC cards

**Retail Purchase System**

Most participants in the Alaska WIC Program receive WIC foods through a uniform retail purchase system.

Under this system, participants obtain supplemental foods by presenting an active eWIC card to an authorized vendor.

Local Agencies issue electronic food benefits at the point of certification, recertification and periodically throughout certification. All food benefits must be issued by the Management Information System (MIS)/SPIRIT.

Participants receive their food benefits in one of two ways:

- The participant, Authorized Representative or Alternate Representative/Proxy 1 and 2 picks up and signs for eWIC card at a Local Agency clinic.
- The participant receives eWIC card in the mail from a Local Agency, signs a confirmation of receipt of the eWIC card and returns it to the Local Agency address. Pre-paid return



## Alaska WIC Policy & Procedure Manual



envelopes are provided by the Local Agency along with the eWIC card. eWIC cards may be mailed to clients when they live off-site in remote areas of the state, with a population of less than 5,000 inhabitants, and not accessible year-around by means of a public road. Clients such as these may also receive other state benefits such as Medicaid, Denali Kid Care and Quest cards through the mail.

Participants receive the supplemental foods issued to their eWIC card by shopping for WIC-approved foods on the Alaska WIC Approved Product List (APL) at an authorized retail vendor that has a current agreement with the Alaska WIC Program. eWIC cards are presented to the vendor as payment for the WIC foods selected by the participant and authorized by the eWIC card.

### No Retroactive

WIC benefits are intended to improve health status based on existing nutrition risk conditions at the time of application. Providing retroactive benefits to clients is not allowed nor is it consistent with the nutritional goals of the WIC Program. The quantity of reissued foods within the current benefit cycle must be based on that portion of foods for which the participant would still be eligible, beginning with the new issue date of the food benefit(s).

Proration to food packages will occur automatically in SPIRIT. The proration should be followed as defined in SPIRIT. However, when the CPA uses professional discretion to override the automated proration then justification must be documented in the participant's notes section of SPIRIT.

### REFERENCE:

Federal Regulations: 7CFR Ch. II

Subpart E- State Agency Provisions- Food Delivery Systems 246.12(c)(e)(r)

Subpart C- Participant Eligibility- Certification of Participants 246.7(f)(2)(iv)

### DEFINITIONS:

**Authorized Representative:** An Authorized Representative for the household is usually added during prescreen and is most often the Primary Card Holder. It's typically the mother if she is on WIC and part of the household. Otherwise, it should be the primary caregiver.

**Approved Product List (APL):** The WIC Approved Product List outlines the types, sizes, and packaging of foods WIC participants may receive with their WIC food benefits.

**Competent Professional Authority (CPA):** An individual of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and counseling, and prescribe supplemental foods.

**eWIC:** Electronic WIC benefits





**eWIC Card:** Magnetic stripe card used to purchase WIC authorized foods or formulas from a WIC family's Electronic Benefit Account (EBA). Each card has a 16-digit Primary Account Number (PAN).

**eWIC Contractor:** Banking organization which provides eWIC services.

**Food instrument** means a voucher, check, electronic benefits transfer card (EBT), coupon or other document which is used by a participant to obtain supplemental foods.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Proxy** means any person designated by a woman participant, or by a parent or caretaker of an infant or child participant, to obtain and transact food instruments or cash-value vouchers or to obtain supplemental foods on behalf of a participant. The proxy must be designated consistent with the State agency's procedures established pursuant to [§ 246.12\(r\)\(1\)](#). Parents or caretakers applying on behalf of child and infant participants are not proxies. In SPIRIT this is called the "alternate authorized representative".

**Proration (of WIC Food Packages):** While nutrition tailoring is based on individual nutrition needs and preferences, proration is apportioning the amount of supplemental food a participant is entitled to receive based on the remaining days/weeks in the month or issuance cycle.

**Retail food delivery system:** The primary food delivery system used in Alaska whereby participants take eWIC cards to authorized grocery stores and pharmacies to obtain the prescribed foods and formula.

**Retroactive Benefits:** means benefits to which an individual becomes entitled for a month prior to the month in which application for such benefits is filed.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

**Supplemental foods** means those foods containing nutrients determined by nutritional research to be lacking in the diets of pregnant, breastfeeding and postpartum women, infants, and children, and foods that promote the health of the population served by the WIC Program



as indicated by relevant nutrition science, public health concerns, and cultural eating patterns, as prescribed by the Secretary in [§ 246.10](#).

**Vendor** means a sole proprietorship, partnership, cooperative association, corporation, or other business entity operating one or more stores authorized by the State agency to provide authorized supplemental foods to participants under a retail food delivery system. Each store operated by a business entity constitutes a separate vendor and must be authorized separately from other stores operated by the business entity. Each store must have a single, fixed location, except when the authorization of mobile stores is necessary to meet the special needs described in the State agency's State Plan in accordance with [§ 246.4\(a\)\(14\)\(xiv\)](#).

**Vendor authorization** means the process by which the State agency assesses, selects, and enters into agreements with stores that apply or subsequently reapply to be authorized as vendors.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 1000 Food Delivery and Food Instrument Accountability and Control**

**Policy: 1002 EWIC Card Security and Inventory Control**

**Effective Date: 03/01/2021**

**PURPOSE:**

- To ensure security of blank eWIC cards in the WIC Local Agency.
- To explain how the WIC Program's retail purchase system uses authorized WIC vendors to provide WIC supplemental foods to its participants.
- To describe the system the State WIC Office uses to monitor eWIC cards to assure all cards are accounted for.

**POLICY: 1002 EWIC Card Security and Inventory Control**

**Card Stock Security and Inventory Control**

eWIC cards are ordered by the Local Agency by submitting a request to the State WIC office. The cards are sent to the Local Agency by the banking contractor FIS along with a manifest order list. The cards must be verified against the manifest order sheet packed with the eWIC cards. The manifest order sheet must be signed and returned to the administrative assistant at the State WIC office, verifying receipt of the cards and quantities of stock received.

the eWIC cards will be stored in the clinic in a secure place which is always locked. Cards missing from the clinic stock must be immediately reported to the State WIC Office. An inventory log of eWIC cards is maintained for cards that are received and destroyed

Deliberate misuse of cards constitute a federal offense and the offender may be subject to civil or criminal prosecution under applicable tribal and federal statutes.

**eWIC Card Monthly Reconciliation Log**

The WIC EBT (eWIC) cards are blank cards that are non-negotiable. Local Agency staff issuing eWIC cards to clients are responsible for the security of the cards. Each card issued will be reconciled to the number of cards assigned to clients for the month through the WIC MIS. A monthly reconciliation log must be completed and submitted through GEMS as instructed in the Local Agency's grant agreement. Refer to the Job Aids for the EBT Card Issuance Monthly Reconciliation Log.

**Card Monitoring**

An eWIC Card Inventory Log must be maintained daily at the Local Agency. The Inventory Log



## Alaska WIC Policy & Procedure Manual



must be available for review at the State's request, during Management Evaluation Reviews and audits.

Card stock received from the eWIC banking contractor must be logged.

If a card is damaged and discarded prior to issuance, this must be logged to include the card number(s).

Cards issued by the EBT Edge (eWIC Processor) do not need to be logged on the inventory form. Cards issued by the eWIC processor are recorded directly into SPIRIT.

A daily log of cards must be maintained in order to monitor that cards are accounted for daily. Cards must be checked back in at the end of the workday. Two staff must maintain the log with one staff receiving and returning cards and another staff verifying the issuance and return. In cases where only one staff member is at a clinic, tracking of cards that are issued or damaged, discarded, or destroyed must be done by that single individual.

Card sequencing in the shipment appears to be out of order when the carton is first opened. The cards are in sequential order when the last digit of the card is dropped. For example:

<u>Cards in Box</u>		<u>Sequential Numbering</u>
6104 0800 0002 0051	=	6104 0800 0002 005
6104 0800 0002 0069	=	6104 0800 0002 006
6104 0800 0002 0077	=	6104 0800 0002 007

Cards may be logged on the form with the last digit dropped so the sequencing is apparent at a glance.

### REFERENCE:

Federal Regulations 7CFR Ch. II

- Subpart E- State Agency Provisions- Food Delivery Systems
  - o 246.12(p)

Federal Regulations: 7CFR Ch. II

- Subpart E- State Agency Provisions- Food Delivery Systems
  - o 246.12(q)

### CROSS REFERENCE:

Job Aid 044: Daily Clinic EBT Card Control Log

Job Aid 043: EBT Card Issuance Monthly Reconciliation Log

### DEFINITIONS:



## Alaska WIC Policy & Procedure Manual



**eWIC:** Electronic WIC benefits

**eWIC Card:** Magnetic stripe card used to purchase WIC authorized foods or formulas from a WIC family's Electronic Benefit Account (EBA). Each card has a 16-digit Primary Account Number (PAN).

**eWIC Contractor:** Banking organization which provides eWIC services.

**GEMS** is the Grants Electronic Management System for both departments' operating and capital grants. In GEMS, users will be able to view solicitations, apply for DOH and DFCS grants, manage agency information, and manage grant awards issued by both departments.

**Grant Agreement:** An agreement that binds the State of Alaska and an agency, detailing the terms under which the local agency will provide WIC services.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required



## Alaska WIC Policy & Procedure Manual



training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 1000 Food Delivery and Food Instrument Accountability and Control**



**Policy: 1003 eWIC Proxy Appointment**

**Effective Date: 03/01/2021**

**PURPOSE:**

- To define who may be listed as “Authorized Representative in SPIRIT account and delineate their responsibilities
- To define who may be considered an Alternate Representative/Proxy and delineate their responsibilities
- To provide the Local Agency direction when allowing a Proxy to pick up or redeem WIC food benefits for a WIC participant.

**POLICY: 1003 eWIC Proxy Appointment**

The authorized representative is either the certified participant or the parent or caregiver from the same household where the infant or child participant resides. The authorized representative is typically the individual who completed the initial certification and has signed the “Rights and Responsibilities”.

It is the responsibility of the authorized representative to ensure:

- • the certification process is completed,
- • nutrition education requirements of the program are met,
- • eWIC card and food benefits are kept secure and
- • instruction to any Alternate Representative/Proxy who may act on their behalf have been given, including instruction on redeeming WIC benefits.

The authorized representative may designate either in writing at time of application or verbally identify an additional Alternate Representative/Proxy. SPIRIT does not differentiate between Alternate Representative or proxy. The authorized representatives should be encouraged to keep their WIC benefits secure, only sharing a PIN or account information when they intend an individual to act as their Alternate Representative/Proxy.

The “Change in Custody” policy describes procedures for changing the designated Authorized Representative due to changes in physical custody of infant or child. Refer to policy 909: Change in Custody in section 900A Eligibility, Determination and Documentation.

At CPA/WIC staff discretion an Alternate Representative/Proxy may complete any responsibilities of the Authorized Representative when it can be determined that the alternate representative/proxy is sufficiently involved with the participant; for example, part of a multi-generational household.



## Alaska WIC Policy & Procedure Manual



An alternate representative/proxy may shop for WIC benefits if the Authorized Representative has shared the WIC account information. An alternate representative/proxy cannot change or remove the authorized representative.

It remains the responsibility of the Authorized Representative to ensure program requirements are met and Rights and Responsibilities upheld.

### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart A- General- Definitions
  - o 246.2

Federal Regulations: 7CFR Ch. II

- Subpart E- State Agency Provisions- Food Delivery Systems
  - o 246.12(r)(1)

### CROSS REFERENCE:

909 Change in Custody - 900A Eligibility, Determination and Documentation.

### DEFINITIONS:

**Authorized Representative:** An Authorized Representative for the household is usually added during prescreen and is most often the Primary Card Holder. It's typically the mother if she is on WIC and part of the household. Otherwise, it should be the primary caregiver.

**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.

**Competent Professional Authority (CPA):** An individual of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and counseling, and prescribe supplemental foods.

**eWIC Card:** Magnetic stripe card used to purchase WIC authorized foods or formulas from a WIC family's Electronic Benefit Account (EBA). Each card has a 16-digit Primary Account Number (PAN).

**Proxy** means any person designated by a woman participant, or by a parent or caretaker of an infant or child participant, to obtain and transact food instruments or cash-value vouchers or to obtain supplemental foods on behalf of a participant. The proxy must be designated consistent with the State agency's procedures established pursuant to [§ 246.12\(r\)\(1\)](#). Parents or caretakers applying on behalf of child and infant participants are not proxies. In SPIRIT this is called the "alternate authorized representative".





## Alaska WIC Policy & Procedure Manual



### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 1000 Food Delivery and Food Instrument Accountability and Control**

Policy: 1004 Issuing EWIC Cards

Effective Date: 03/01/2021

**PURPOSE:**

- To give guidance to local WIC agencies on issuance of eWIC cards.
- To inform Local Agencies of the intervals for which WIC food benefits may be issued.

**POLICY: 1004 Issuing EWIC Cards**

Issuing Cards

Multiple Local Agency staff positions are permitted to issue eWIC cards including clerical staff, professional CPAs and paraprofessional CPAs.

EWIC cards can be assigned before benefits are available.

Each household will receive one eWIC card that is used to access the entire family's benefits. When issued in person, the Authorized Representative or Alternate Representative/Proxy is required to sign for receipt of eWIC cards.

Mailing eWIC Cards

When eWIC cards are mailed to participants, clinic staff should legibly sign on the signature pad, their name in SPIRIT and indicate the card is mailed by writing "(mailed)" by their signature.

For eWIC cards being mailed for the first time to a household, the card should be sent with the appropriate materials explaining how to use eWIC in Alaska. Suggested resources to send with the card include:

- Participant brochure - "Shopping With Your eWIC Card"
- Participant food list - "WIC Food List- A Shopper's Guide"
- WIC ShopperApp GuideShopping List generated from SPIRIT that indicates all foods prescriptions available on the eWIC card

eWIC cards must be mailed First Class with the Local Agency's address printed on the envelope. This ensures that the mailed eWIC card will be returned to the Local Agency if it cannot be delivered because the participant has moved or the address is invalid. Agencies should make every effort to contact the participant to explain the process of eWIC over the phone including guiding them on how to set the PIN.

To help participants on the phone with setting their PIN, the Local Agency should direct the



## Alaska WIC Policy & Procedure Manual



participant to the eWIC customer service line at 1-844-386-3149 or by logging into ebtEDGE. The customer service line and ebtEdge are available 24/7/365.

When issuing food benefits remotely, nutrition education must be provided. If the local WIC agency has attempted to contact a client two times without success, the agency can provide electronic food benefits along with nutrition education materials. The attempts to contact the client must be documented in SPIRIT.

The agency must always have enough eWIC cards in inventory to meet the needs of the caseload.

The agency must order three months of eWIC cards quarterly. Card orders are placed with the State WIC Office Administrative Assistant.

Agencies that have satellite clinics are permitted to store cards at the site if there is a secure location for the cards. If there is no secure place to store cards then a supply of cards can be transported from the main clinic then returned to the supply and inventoried upon return.

### Issuance Intervals

WIC staff can issue a participant their food benefits at one, two or three-month intervals.

### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart E- State Agency Provisions- Food Delivery Systems
  - o 246.12(f)(2)(iii)
  - o 246.12(r)(5)

### CROSS REFERENCE:

Shopping With Your eWIC Card -

<https://health.alaska.gov/dpa/Documents/dpa/programs/Nutrition/WIC/Participants/On-Site-Participant-Booklet.pdf>

WIC Food List- A Shopper's Guide -

<https://health.alaska.gov/dpa/Documents/dpa/programs/Nutrition/WIC/Retailers/2020-WIC-Food-List.pdf>

### DEFINITIONS:

**Caseload:** The number of participants issued food benefits versus those enrolled but not receiving food benefits.

**Competent Professional Authority (CPA):** An individual of the local WIC program authorized to assess program eligibility, determine nutritional risk, provide nutrition education and



counseling, and prescribe supplemental foods.

**eWIC:** Electronic WIC benefits

**eWIC Card:** Magnetic stripe card used to purchase WIC authorized foods or formulas from a WIC family's Electronic Benefit Account (EBA). Each card has a 16-digit Primary Account Number (PAN).

**eWIC Contractor:** Banking organization which provides eWIC services.

**Household:** means a group of related or nonrelated individuals who are living together as one economic unit, except that residents of a homeless facility or an institution shall not all be considered as members of a single family.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with [§ 246.5](#);
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Paraprofessional CPA:** A person employed to assist or expand the efforts of professional CPAs. A health professional will supervise the paraprofessional's direct contact with WIC participants and their conducting of education programs.

**Professional CPA:** A person with a bachelor's or master's degree in a health profession, such as nutrition, nursing or health education. Includes physicians, physician assistants, registered nurses, dietitians, or public health educators.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not



## Alaska WIC Policy & Procedure Manual



been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 1000 Food Delivery and Food Instrument Accountability and Control**

Policy: 1005 Replacement of eWIC Cards

Effective Date: 03/01/2021

**PURPOSE:**

To provide direction on replacement and documentation of replaced eWIC cards

**POLICY: 1005 Replacement of eWIC Cards**

Participants can request that lost, stolen or damaged cards be replaced.

This request may be made by the participant to the Local Agency, directly from the eWIC customer service line at 1-844-386-3149 or by visiting ebtEDGE. The customer service line and ebtEdge are available 24/7/365. The PIN number and remaining benefits are automatically transferred from the deactivated card to the new card.

When requested by a participant, Local Agencies are required to replace eWIC cards. eWIC cards should be replaced as soon as possible and no more than seven business days upon request. Clinics should try to reduce the amount of time participants wait for benefits while a card is being replaced and mailed. When geographically appropriate, a Local Agency should offer pick-up of the replacement card at the Local Agency as desired by the participant. When mailing replacement eWIC card expedited shipping should be considered, when feasible.

Local Agencies may not limit the number of replacement cards provided directly from the agency. Cards replacements can also be requested directly from the eWIC customer service line at 1-844-386-3149 or at ebtEDGE. Cards will be mailed from Romeoville, IL and the estimated time to receive a card is between 10-12 days. Due to mailing time, Local Agencies cannot require participants to use the customer service line or ebtEdge.

**REFERENCE:**

Federal Regulations:

7 CFR 246.12(bb)

**DEFINITIONS:**

**eWIC:** Electronic WIC benefits

**eWIC Card:** Magnetic stripe card used to purchase WIC authorized foods or formulas from a WIC family's Electronic Benefit Account (EBA). Each card has a 16-digit Primary Account Number (PAN).



## Alaska WIC Policy & Procedure Manual



### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/06/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## **Alaska WIC Policy & Procedure Manual**

### **Section: 1000 Food Delivery and Food Instrument Accountability and Control**

**Policy: 1006 Balto**

Effective Date: 03/01/2021

#### **PURPOSE:**

To outline the criteria for authorizing mailed food packages, procedures to prevent fraud, and the responsibilities of local agencies in managing and communicating with participants who receive Balto deliveries.

The policy also provides guidelines on how to instruct participants on ordering and receiving their WIC foods through Alaska WIC's online ordering program, Balto.

#### **POLICY: 1006 Balto**

##### **Mailed Food Delivery System**

The Alaska WIC Program, through a competitive bid process, contracts with a vendor or vendors to provide the mailed food delivery service. The current Balto vendor is SPAN-Alaska based in Anchorage. This system is used primarily for isolated or remote rural locations. Local Agencies must only use the mail food delivery system when the Vendor Management Unit (VMU) has authorized the community to be eligible for Balto deliveries:

- The area does not have a vendor who is able to meet the requirements of the Vendor Agreement,
- The vendor(s) in the area are not required to stock infant formula because of a very low number of WIC formula-fed infants in the community
- A contract or non-contract/ENPR/medical & therapeutic formula is prescribed and unavailable in the community. In these cases, the Local Agency authorizes mailed food packages for non-contract formulas while all other participants living in the household purchase their WIC foods on-site from the local vendor. Refer to Policy 368: Authorized Non-Contract Formulas, and Job Aid 016: Non-Contract Formula ENP for the most recent list of WIC-approved formulas and process to seek payment through Medicaid.

The WIC Vendor Management Unit (VMU) may authorize additional communities to be eligible for Balto delivery when:

- Extenuating circumstances exist such as destruction of a store or other local conditions or emergencies.

#### **PROCEDURE:**

WIC Local Agency program staff perform the following tasks:





## Alaska WIC Policy & Procedure Manual



Local Agencies designate a household to receive mailed WIC foods via Balto when:

The area does not have a WIC authorized vendor

The vendor(s) in the area are not required to stock infant formula or infant foods because of a low number of WIC formula-fed infants in the community, and an exemption is in place.

A contract or non-contract/ENPR/medical & therapeutic formula is prescribed and unavailable in the community.

When authorized for Balto, participants can register online with the vendor, order their WIC foods online or by telephone and have the food delivered free-of-charge.

The vendor processes the orders and ships the food boxes directly to each WIC participant.

### Household types within SPIRIT

Within SPIRIT there are three household types in “EBT Household Demographics” to designate the type of foods the household will be able to order on-line and have delivered.

Non-Balto	All Balto	Formula only Balto
Household is not authorized to order any foods on-line	Household is authorized to order all of their food benefit on-line	Household is authorized to order only formula and infant foods on-line

### Balto Boxes

Balto participants will be mailed Balto boxes. Participants can report missing or damaged items by calling SPAN Customer Service or by reporting this information to the Local Agency.

Local Agencies are not required to track shipments unless a participant documents damaged or missing foods on a returned packing slip receipt. In this situation, the Local Agency will scan these receipts with reports into SPIRIT and then email the VMU of the report including the participant ID number and a summary of the issue. The VMU will take the report, track, maintain a log and resolve issues.

If returned packing slip receipts do not contain relevant information, including a report of damaged or missing goods, then the Local Agency may shred these receipts without tracking.

### Instructions for Participants Receiving Balto:

Participants who will receive mailed food boxes should be provided the following information and instructions from the Local Agency:

- They will receive an eWIC card, instructions for creating an account.
- Each month, the participant must log in to their Balto account or call SPAN-Alaska to place their food order. Their WIC foods will not arrive automatically.



- A food order may be shipped in multiple boxes, depending upon the contents.

### REFERENCE:

Federal Regulations: 7CFR

- Subpart E- State Agency Provisions-Home Food Delivery Systems
  - o 246.12(m)

Federal Regulations: 7CFR Ch. II

- Subpart E- State Agency Provisions- Food Delivery Systems
  - o 246.12(r)(2)

### CROSS REFERENCE:

Policy 368: Authorized Non-Contract Formulas

Job Aid 016: Non-Contract Formula ENPR

Job Aid 017: Certificate of Medical Necessity

### DEFINITIONS:

**Balto:** Alaska's name for the online ordering program that allows WIC benefits to be mailed to eligible participants. The program is named after the famous sled dog, Balto, who played a crucial role in the 1925 relay that delivered the diphtheria antitoxin to Nome, Alaska, during a deadly epidemic. WIC's Balto program primarily serves WIC participants in isolated or remote rural locations.

**eWIC:** Electronic WIC benefits

**eWIC Card:** Magnetic stripe card used to purchase WIC authorized foods or formulas from a WIC family's Electronic Benefit Account (EBA). Each card has a 16-digit Primary Account Number (PAN).

**EBT:** Electronic Benefits Transfer.

**ENPR:** Enteral Nutrition Prescription Request Form. A physician referral for a specific individually prescribed food.

**VMU:** Vendor Management Unit.

**Proxy** means any person designated by a woman participant, or by a parent or caretaker of an infant or child participant, to obtain and transact food instruments or cash-value vouchers or to obtain supplemental foods on behalf of a participant. The proxy must be designated consistent with the State agency's procedures established pursuant to § 246.12(r)(1). Parents or caretakers applying on behalf of child and infant participants are not proxies. In SPIRIT this is called the "alternate authorized representative".



**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 1000 Food Delivery and Food Instrument Accountability and Control**

**Policy: 1007 Late Food Benefit Issuance**

**Effective Date: 03/01/2021**

**PURPOSE:**

To provide the Local Agency direction on food benefit start date, end date and issuing electronic food benefits to a WIC participant who is late for their food benefit pickup.

**POLICY: 1007 Late Food Benefit Issuance**

The Food Benefit cycle for a family is automatically determined by the WIC MIS/SPIRIT. Initially, the Food Benefit cycle is based on the certification of the first household member. The initial food benefit cycle date is effective from the calendar date of issue until the same calendar day of the next month (e.g., June 15 through July 14). The exception is for food benefits issued in late January when there would be no corresponding calendar day in February. In this case SPIRIT will generate a late February end date on those food benefits.

When additional family members are certified within a household, the WIC MIS will cycle adjust their benefits to match the initial member's last day to use. This food benefit "cycle adjustment" may result in a family receiving a pro-rated package of foods to align the family's benefits to all end on the same last day. Moving forward, both the first day to use and the last day to use of all members of the household will be the same.

**Late Food Benefit Issuance**

Typically, food benefits are issued tri-monthly in conjunction with nutrition education appointments (secondary nutrition education and mid-certifications) and recertification. When a client misses subsequent appointments/contacts, this may result in late food benefit issuance and pro-ration of benefits. The issue date of the food benefits should be the date the appointment is completed, and the food benefits are issued.

**Add Set of Benefits**

During the last month of certification, the "Add benefit" functionality of SPIRIT is available for use. The "Add benefit" functionality is used to extend food benefits up to 30-days past the end of the certification. Neither the first day to use nor the last day to use of the food benefits changes as a result of "Add Set of Benefits" functionality. The feature provides an additional (13th month) of benefits to family members who are eligible for recertification e.g. children. This may result in the last date extending beyond the current certification period's end date. This is permissible, as federal regulations allow a certification period to be extended for a



period not to exceed 30 days in cases where there is difficulty in appointment scheduling.

The “Add Set of Benefits” feature is only available prior to the certification end dates in instances where an individual remains categorically eligible for WIC services.

#### REFERENCE:

Federal Regulations: 7CFR Ch. II

- Subpart C- Participant Eligibility- Certification of Participants
  - o 246.7(g)(3)

Federal Regulations: 7CFR Ch. II

- Subpart E- State Agency Provisions- Food Delivery Systems
  - o 246.12(f)(2)(iii)

#### DEFINITIONS:

**eWIC:** Electronic WIC benefits

**eWIC Card:** Magnetic stripe card used to purchase WIC authorized foods or formulas from a WIC family’s Electronic Benefit Account (EBA). Each card has a 16-digit Primary Account Number (PAN).

**Food Benefits:** The foods a participant receives through WIC for a selected month. Depending on the participant category, food benefits provide specific amounts of WIC authorized foods, formulas, and/or a fixed-dollar amount for participants to obtain WIC authorized fruits and vegetables (referred to as a “Cash Value Benefit” or “CVB”).

**Proration (of WIC Food Packages):** While nutrition tailoring is based on individual nutrition needs and preferences, proration is apportioning the amount of supplemental food a participant is entitled to receive based on the remaining days/weeks in the month or issuance cycle.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits.

#### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed



## Alaska WIC Policy & Procedure Manual



**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



**Alaska WIC Policy & Procedure Manual**  
**Section: 1000 Food Delivery and Food Instrument Accountability and Control**

Policy: 1008 Remote Issuance of Benefits

Effective Date: 03/01/2021

**PURPOSE:**

- To define when eWIC benefits can be issued remotely.

**POLICY: 1008 Remote Issuance of Benefits**

Issuing benefits

While eWIC allows remote issuance of benefits, food benefits may be issued remotely for both rural and urban participants remotely only when certain condition have been met, including:

- Benefits can be loaded when a participant is certified or recertified remotely, as for rural participants and urban participants when there is a waiver for physical presence.
- Completion of secondary nutrition education.

Benefits can be issued remotely for participants in batch, provided their nutrition education is documented.

**REFERENCE:**

Federal regulation:

- 7 CFR 246.12(r)(4)

**DEFINITIONS:**

**eWIC:** Electronic WIC benefits

**eWIC Card:** Magnetic stripe card used to purchase WIC authorized foods or formulas from a WIC family's Electronic Benefit Account (EBA). Each card has a 16-digit Primary Account Number (PAN).

**Food Benefits:** The foods a participant receives through WIC for a selected month. Depending on the participant category, food benefits provide specific amounts of WIC authorized foods, formulas, and/or a fixed-dollar amount for participants to obtain WIC authorized fruits and vegetables (referred to as a "Cash Value Benefit" or "CVB").

**Nutrition education** means individual and group sessions and the provision of materials that are designed to improve health status and achieve positive change in dietary and physical



## Alaska WIC Policy & Procedure Manual



activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
02/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





**Alaska WIC Policy & Procedure Manual**  
**Section: 1000 Food Delivery and Food Instrument Accountability and Control**



Policy: 1009 eWIC Benefit Redemption Education

Effective Date: 03/01/2021

**PURPOSE:**

To describe the training requirements that must be provided to WIC participants regarding use of their eWIC card and food benefits; and to ensure that participants redeem their food benefits correctly.

**POLICY: 1009 eWIC Benefit Redemption Education**

**Participant Training in Use of eWIC Benefits**

Local Agencies are required to provide each new WIC participant with training emphasizing the importance of redeeming WIC food benefits properly.

Training is to include but is not limited to:

- Names and locations of WIC vendors in their area
- Selecting authorized WIC foods: including the foods and Cash Value Benefit (CVB). Information should include, but would not be limited to, identifying the allowable variety/brand of new food items, size containers; and restrictions and items that are not allowed. The CVB must also be discussed with participants' appropriate denomination for participant type.
- eWIC card usage:
  - First date to use (FDTU) and Last date to use (LDTU) and why this is important
  - Referring to procedures printed on Shopping With Your eWIC Card and Food List for Shopping with WIC
  - Use of the WIC Shopper App
  - Reporting problems to their Local Agency
  - Participant's responsibility for instructing their alternate representative or proxy in procedures for shopping with eWIC
  - Zero tolerance for fraud and abuse against the WIC Program, programs staff and vendors

The Local Agency must give participants a list of WIC foods and of participating vendors in their area.

**REFERENCE:**



## Alaska WIC Policy & Procedure Manual



Federal Regulations: 7CFR Ch. II

- Subpart E- State Agency Provisions- Food Delivery Systems
  - o 246.12(r)(3)

### CROSS REFERENCE:

Policy 1003: eWIC Proxy Appointments

Policy 1004: Issuing eWIC cards

Policy 1008: remote issuance of benefits

Shopping With Your eWIC Card -

<https://health.alaska.gov/dpa/Documents/dpa/programs/Nutrition/WIC/Participants/On-Site-Participant-Booklet.pdf>

WIC Food List- A Shopper's Guide -

<https://health.alaska.gov/dpa/Documents/dpa/programs/Nutrition/WIC/Retailers/2020-WIC-Food-List.pdf>

### DEFINITIONS:

**Authorized Representative:** An Authorized Representative for the household is usually added during prescreen and is most often the Primary Card Holder. It's typically the mother if she is on WIC and part of the household. Otherwise, it should be the primary caregiver.

**eWIC:** Electronic WIC benefits

**eWIC Card:** Magnetic stripe card used to purchase WIC authorized foods or formulas from a WIC family's Electronic Benefit Account (EBA). Each card has a 16-digit Primary Account Number (PAN).

**Food Benefits:** The foods a participant receives through WIC for a selected month. Depending on the participant category, food benefits provide specific amounts of WIC authorized foods, formulas, and/or a fixed-dollar amount for participants to obtain WIC authorized fruits and vegetables (referred to as a "Cash Value Benefit" or "CVB").

**Proxy** means any person designated by a woman participant, or by a parent or caretaker of an infant or child participant, to obtain and transact food instruments or cash-value vouchers or to obtain supplemental foods on behalf of a participant. The proxy must be designated consistent with the State agency's procedures established pursuant to [§ 246.12\(r\)\(1\)](#). Parents or caretakers applying on behalf of child and infant participants are not proxies. In SPIRIT this is called the "alternate authorized representative".



POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
082024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 1100 Monitoring, Audits & Evaluations



#### Policy: 1101 Local Agency Management Evaluation

Effective Date: 10/31/2018

##### PURPOSE:

- To provide guidance to Family Nutrition Program (FNP) staff on the completion of annual WIC Local Agency (LA) management evaluations (ME).
- To provide information to LA staff about what to expect during a LA ME.

##### BACKGROUND:

Federal regulations require that State WIC Agencies complete a comprehensive biennial MEs of each Local Agency.

##### POLICY: 1101 Local Agency Management Evaluation

The State of Alaska (SOA) will complete biennial on-site ME's of local WIC agencies according to this policy. SOA staff will use the provided templates for pre-visit meeting with the Local Agency (LA), completion of chart audit prior to site review, review of the Local Agency self- assessment with LA, completion of entrance and exit conference with LA and generation of ME report. LAs are required to participate in the ME process and respond to all findings and recommendations through the corrective action plan (CAP).

##### PROCEDURES:

###### 1.0 Overview

- All LA's will be sent a Management Evaluation (ME) notification letter, current ME schedule and policies and current ME templates during first quarter of SFY. This notification will be sent to the agency contacts listed in GEMS. If the Local Agency coordinator is not listed in GEMS they will also be sent the notification and ME materials.
- ME's are typically completed within the state fiscal year (SFY) between December and May.

##### Schedule

Local Agencies will be reviewed every other year according to the following schedule:

Even SFY Example: SFY 2024/25, SFY 2026/27	Odd SFY Example: SFY 2025/26, 2027/28
Municipality of Anchorage (MOA)	Midnight Sun Clinic (MSW)



## Alaska WIC Policy & Procedure Manual



Southeast Alaska Regional Health Consortium (SEARHC) Norton Sound Health Consortium (NSHC) Tanana Chiefs Conference (TCC) Kodiak Area Native Association (KANA) Maniilaq Association	Yukon Kuskokwim Health Corporation (YKHC) Alaska Family Services (AFS) North Slope Borough (NSB) Bristol Bay Health Consortium (BBAHC) Southcentral Foundation (SCF)
--	--

### Management Evaluation Timeline

State staff will visit the primary site of a Local Agency. On-site reviews are scheduled within the SFY at a mutually agreed upon time between the SA reviewer and the LA. When a Local Agency regularly travels to a satellite location, state staff will try to visit either a satellite office, village clinic or outreach site along with the Local Agency. Site visits by the state agency are typically one to five days.

Entrance and final exit conferences with the LA should occur within 30-45 days of an on- visit by state staff. Ideally, these conferences occur face to face either on site or virtually.

The Management Evaluation report is due to the LA 60 days after the on-site visit. This report includes any findings of the State Agency in addition to comments and accolades. The report will be distributed to the Local Agency contacts listed in GEMS. If the Local Agency coordinator is not listed in GEMS they will be sent the report simultaneously. The report will also be sent to State of Alaska Grants and Contracts to become part of the agency's grant file.

The LA is expected to respond to the ME report within 60 days of issuance. If any findings are made by the SA, the LA must submit a Corrective Action Plan (CAP) plan to address the finding. The SA will accept or reject the CAP with 15 days of its receipt.

The LA CAP should address and ideally resolve the finding within 60-days of acceptance of CAP by the SOA.

Between the acceptance of the CAP and the closure of the ME the SA reviewer will act as the primary point of contact. The SA reviewer is expected to offer technical assistance to the LA to address any finding in the ME.

### Management Evaluation Process

#### **As a part of the ME,**

1. SA reviewer will complete a chart audit using a random sample of the LA's current participation.
2. SA reviewers will review the LA's most recent response to Request for Proposals/grant, current budget for the LA, a pre-determined quarter's Cumulative Fiscal Report, general ledger and Time Study, most recent inventory, and the most recently submitted quarterly reports.



## Alaska WIC Policy & Procedure Manual



3. SA reviewer will also have conversations with Vendor Management Unit (VMU), WIC LA Clinic Operations and Breastfeeding Coordinator, and Technology Coordinator about current successes and challenges faced by the LA.

### **As a part of the ME process LA Coordinators are expected to:**

1. Complete and submit to the SA reviewer the Local Agency Self-Assessment (LASA) including additional examples of LA work by the deadline. Typically, one week prior to the on-site ME review.
2. Actively participate in the ME pre-planning meeting, entrance and exit meetings, development and execution of CAP.

### Chart audits:

#### **Number of Client Charts to Review:**

##### *For the initial ME:*

Active participation at LA <299=10% of total

Active participation at 300-5000=30 charts

Active participation at >5001=50 charts

- Charts will be pulled from the first half (July – December) of the current SFY.
- A finding is typically made when a 25% error rate is found.
- The SA will share the WIC identification numbers generated by SPIRIT used for the chart review.

##### *Prior to closure of ME:*

Repeat chart review of ten charts for all agencies

Charts will be pulled for certifications completed since the CAP

### Closing the Review:

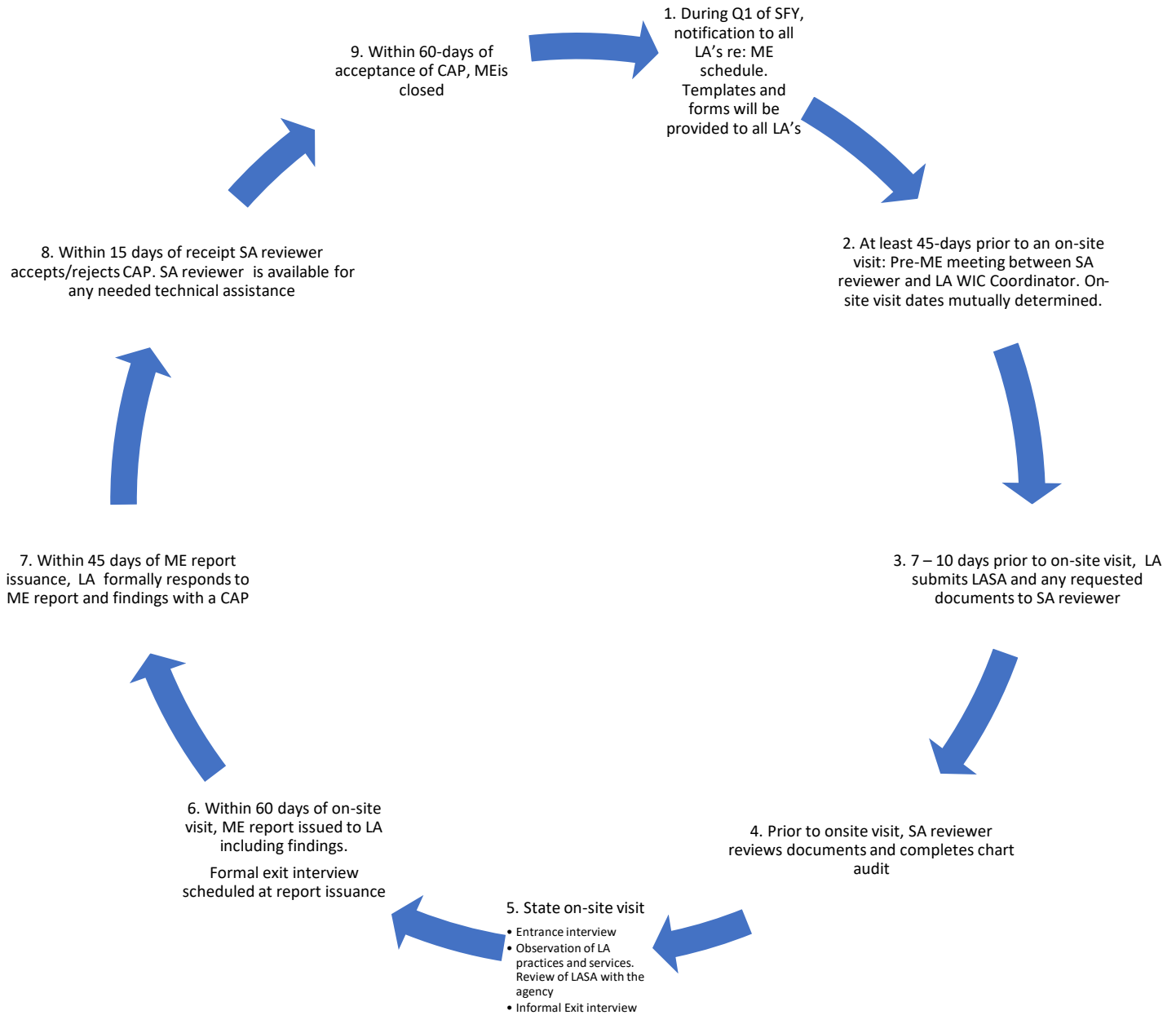
- ME's will be closed at 60-days after the acceptance of CAP. Prior to closure the SA reviewer will:
- Survey and summarize the efforts of the LA on their actions identified in the CAP.
- Complete 10 cart audits



## Alaska WIC Policy & Procedure Manual



### 2.0 Timeline





## Alaska WIC Policy & Procedure Manual



### 3.0 FNP Staff Responsibilities

It is the goal of the State of Alaska that some of the responsibility for ensuring timeliness and quality of WIC Management Evaluations shifts to the greater Division Public Assistance.

Family Nutrition Programs Manager	Assistant Family Nutrition Programs Manager	WIC LA Clinic and Breastfeeding Coordinator & WIC Nutrition Coordinator	Administrative Assistant
<p>Review ME policies and schedules</p> <ul style="list-style-type: none"><li>• Ensure federal compliance of ME policies</li><li>• Review and sign ME correspondence</li><li>• Participate in ME entrance and exit conferences</li><li>• Review Local Agency Corrective Action Plans (CAP)</li></ul>	<ul style="list-style-type: none"><li>• Update, maintain, and monitor for compliance to ME policies</li><li>• Establish annual ME schedule and coordinate review assignments between reviewers.</li><li>• Monitor ME tracking spreadsheet and ensure complete and accurate information.</li><li>• Leads LA ME standing meetings with SA ME reviewers.</li><li>• Review ME reports, CAP response, and closure letters to ensure compliance with federal and state program requirements.</li><li>• Prepare ME correspondence for WIC Program Manager's signature</li><li>• Completes ME as needed; functions as back-up Reviewer.</li><li>• Review ME trends to identify staff training needs and policy development</li></ul>	<ul style="list-style-type: none"><li>• Complete 3-4 ME's annually.</li><li>• Complete client chart reviews.</li><li>• Complete pre-review of ME paperwork.</li><li>• Complete on-site evaluation, if travel cannot be completed, a desk audit is required.</li><li>• Invite the Family Nutrition Programs Manager, and Assistant Manager, to the entrance and exit conferences.</li><li>• Complete ME notes, identify findings, and recommendations</li><li>• Submit completed ME file</li><li>• Review draft ME letter/correspondence before Assistant Manager's review</li><li>• Provide final draft ME report to the Family Nutrition Programs Manager and Assistant Manager for review and approval.</li></ul>	<ul style="list-style-type: none"><li>• Draft /send ME notification letters and ME templates, mail originals and email to LA contacts</li><li>• Identify sample of clients for client chart review and provide to SA reviewer</li><li>• Compile and maintain complete electronic ME files and / or with copies on the computer</li></ul>





### 3.0 Templates

The State of Alaska will use templates to standardize Management Evaluations for all LAs:

- Pre-ME/entrance meeting template
- Local Agency Self-Assessment
- ME General Clinic Observations form
- PCS Nutrition Services Observation Tool
- WIC ME Communications Log
- Chart Audit Form
- WIC ME schedule Tool
- Exit template
- ME Report including findings
- LA ME Report Template
- Standardized ME Findings and CAP language
- ME Closure letter

### REFERENCES:

Federal Citations: 7 CFR 246.13 (b)

(b) *State agency responsibilities.*

(1) The State agency shall establish an ongoing management evaluation system which includes at least the monitoring of local agency operations, the review of local agency financial and participation reports, the development of corrective action plans to resolve Program deficiencies, the monitoring of the implementation of corrective action plans, and on-site visits. The results of such actions shall be documented.

(2) Monitoring of local agencies must encompass evaluation of management, certification, nutrition education, participant services, civil rights compliance, accountability, financial management systems, and food delivery systems. If the State agency delegates the signing of vendor agreements, vendor training, or vendor monitoring to a local agency, it must evaluate the local agency's effectiveness in carrying out these responsibilities.

(3) The State agency shall conduct monitoring reviews of each local agency at least once every two years. Such reviews shall include on-site reviews of a minimum of 20 percent of the clinics in each local agency or one clinic, whichever is greater. The State agency may conduct such additional on-site reviews as the State agency determines to be necessary in the interest of the efficiency and effectiveness of the program.

(4) The State agency must promptly notify a local agency of any finding in a monitoring review that the local agency did not comply with program requirements. The State agency must require the local agency to submit a corrective action plan, including implementation timeframes, within 60 days of receipt of a State agency report of a monitoring review containing a finding of program noncompliance. The State agency must monitor local agency implementation of corrective action plans.



(5) As part of the regular monitoring reviews, FNS may require the State agency to conduct in-depth reviews of specified areas of local agency operations, to implement a standard form or protocol for such reviews, and to report the results to FNS. No more than two such areas will be stipulated by FNS for any fiscal year and the areas will not be added or changed more often than once every two fiscal years. These areas will be announced by FNS at least six months before the beginning of the fiscal year.

(6) The State agency shall require local agencies to establish management evaluation systems to review their operations and those of associated clinics or contractors.

### CROSS REFERENCES:

1102: Local Agency Self-Assessment (LASA)

Job Aid 046: Local Agency Self-Assessment

### DEFINITIONS:

**Applicants:** means pregnant/breastfeeding/postpartum people, infants, and children who are applying to receive benefits. Applicants include individuals who are currently participating in the program but are re-applying before their certification expires.

**Client services:** Tasks or costs pertaining to certifying participants, processing applicants, delivery of food benefits, or other participant services.

**Clinic** means a facility where applicants are certified.

**Corrective Action Plan (CAP):** is a part of the Management Evaluation process.

**Desk Audit:** means an inventory audit conducted remotely by a WIC analyst at their office.

**GEMS** is the Grants Electronic Management System for both departments' operating and capital grants. In GEMS, users will be able to view solicitations, apply for DOH and DFCS grants, manage agency information, and manage grant awards issued by both departments.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with § 246.5;
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.



## Alaska WIC Policy & Procedure Manual



**Local Agency Self-Assessment (LASA):** The process in which a local agency reviews their management practices, the certification process, nutrition education, civil rights compliance, procedures to ensure accountability, financial management systems, and food delivery systems.

**Management Evaluation:** A bi-annual review conducted by State of Alaska WIC Staff of Local Agencies of clinic operations.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**State agency** means the health department or comparable agency of each State; an Indian tribe, band or group recognized by the Department of the Interior; an intertribal council or group which is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior and which has an ongoing relationship with such tribes, bands or groups for other purposes and has contracted with them to administer the Program; or the appropriate area office of the Alaska Department of Health.

**State Fiscal Year (SFY):** The period of 12 calendar months beginning July 1 of any calendar year and ending June 30 of the following calendar year.

**SPiRiT:** Successful Partners in Reaching Innovative Technology. The management information system used by the State of Alaska WIC to certify participants and issue WIC food benefits

**Vendor** means a sole proprietorship, partnership, cooperative association, corporation, or other business entity operating one or more stores authorized by the State agency to provide authorized supplemental foods to participants under a retail food delivery system. Each store operated by a business entity constitutes a separate vendor and must be authorized separately from other stores operated by the business entity. Each store must have a single, fixed location, except when the authorization of mobile stores is necessary to meet the special needs described in the State agency's State Plan in accordance with § 246.4(a)(14)(xiv).

**WIC** means the Special Supplemental Nutrition Program for Women, Infants and Children authorized by section 17 of the Child Nutrition Act of 1966, 42 U.S.C. 1786

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed



## Alaska WIC Policy & Procedure Manual



**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## **Alaska WIC Policy & Procedure Manual**

### **Section: 1100 Monitoring, Audits & Evaluations**

#### **Policy: 1102 Local Agency Sanctions and Disqualifications**

Effective Date: 10/31/2018

##### **PURPOSE:**

To outline the criteria for Local Agency disqualification and appeal processes.

##### **POLICY: 1102 Local Agency Sanctions and Disqualifications**

###### **Local Agency Monitoring Standards**

###### *Disqualification of Local Agencies*

Disqualification will be made in accordance with Chapter 78 of the Alaska Administrative Code (7 AAC 78.290).

The State may disqualify a Local Agency when the State:

- Determines noncompliance with Program and State regulations;
- Determines Program funds are insufficient to support the continued operation of all existing Local Agencies at their current participation level; or
- Determines following a review of Local Agency outcomes that another Local Agency can operate the Program more effectively and efficiently.

The State will consider:

- The availability of other community resources to participants and the cost efficiency and cost effectiveness of the Local Agency in terms of both food and administrative and program services costs;
- The percentages of participants in each priority level served by the Local Agency and the percentage of need met in each participant category
- The special populations served by the Local Agency
- The capability of another Local Agency or agencies to accept the Local Agency's participants, and
- The Local Agency's past performance record.

When disqualifying a Local Agency under the program, the State will:

- Make every effort to transfer affected participants to another Local Agency without disruption of benefits
- Provide the affected Local Agency with written notice not less than 60 days in advance of the pending action which includes an explanation of the reasons for disqualification, the date of disqualification, and, except in cases of the expiration of a Local Agency's



## Alaska WIC Policy & Procedure Manual



- agreement, the Local Agency's right to appeal, and
- Ensure that the action does not conflict with existing written agreements between the State and Local Agency.

### *Appeal of State Agency Decisions*

Local Agencies have the right to appeal State decisions which adversely affect the Local Agency.

A Local Agency may appeal a State agency decision if the State agency:

- denies the Local Agency's application to act as a WIC Local Agency;
- disqualifies, suspends or otherwise imposes sanctions on the Local Agency during the term of the State WIC office's agreement with the Local Agency; or
- decides to require a WIC Local Agency to refund money that was granted to the WIC Local Agency under a WIC grant.

### *Notification of Sanctions*

When the State agency intends to impose sanctions on a Local Agency or denies a Local Agency's application to participate, the State agency will notify the Local Agency. If the State agency proposes to disqualify a Local Agency, the State agency will send notice to the Local Agency at least 60 days before the pending action will take place.

In the notice the State agency will set forth:

- the reason for denial of the Local Agency's application or if applicable
- the nature of the discrepancies or violations;
- the dollar value of the discrepancies or violations;
- the method of computing the dollar value;
- notice of further actions to be taken or sanctions to be imposed by the State WIC agency;
- the effective date of the action;
- notice of any actions required of the Local Agency;
- the Local Agency's right to a formal hearing; and
- the time and place at which each hearing on the action is scheduled to be held.

In the notice the State agency will indicate whether it intends to withhold payments on pending and subsequently received requests by the Local Agency for grant payments in an amount reasonably calculated.

### *Requirements and Procedures*

The State agency will provide a hearing procedure in accordance with the provision as indicated in CFR part 246.18.

### **REFERENCE:**

7 CFR 246.11, 246.19, 246.25



### DEFINITIONS:

**Appeal:** Review of an agency decision by a neutral third party through a fair hearing.

**Applicants:** means pregnant/breastfeeding/postpartum people, infants, and children who are applying to receive benefits. Applicants include individuals who are currently participating in the program but are re-applying before their certification expires.

**Client services:** Tasks or costs pertaining to certifying participants, processing applicants, delivery of food benefits, or other participant services.

**Clinic** means a facility where applicants are certified.

**Corrective Action Plan (CAP):** is a part of the Management Evaluation process.

**Disqualification (of local WIC agency):** The act of ending the WIC program participation of an authorized Local Agency, whether as a sanction or for administrative reasons.

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with § 246.5;
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Management Evaluation:** A bi-annual review conducted by State of Alaska WIC Staff of Local Agencies of clinic operations.

**Nutrition Services Standards (NSS):** outlines quality nutrition services for State and local agencies to follow, developed jointly by FNS and the National WIC Association. NSS assist State and local agencies in their continual efforts to improve the services they provide by focusing on core elements that are essential to providing high quality nutrition services. They also assist State and local agencies in setting expectations for WIC Program performance that are reasonable, achievable and measurable.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**Sanction:** Civil money penalty imposed by the State WIC program because of a violation.

**State agency** means the health department or comparable agency of each State; an Indian



## Alaska WIC Policy & Procedure Manual



tribe, band or group recognized by the Department of the Interior; an intertribal council or group which is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior and which has an ongoing relationship with such tribes, bands or groups for other purposes and has contracted with them to administer the Program; or the appropriate area office of the Alaska Department of Health.

**Vendor** means a sole proprietorship, partnership, cooperative association, corporation, or other business entity operating one or more stores authorized by the State agency to provide authorized supplemental foods to participants under a retail food delivery system. Each store operated by a business entity constitutes a separate vendor and must be authorized separately from other stores operated by the business entity. Each store must have a single, fixed location, except when the authorization of mobile stores is necessary to meet the special needs described in the State agency's State Plan in accordance with § 246.4(a)(14)(xiv).

**WIC** means the Special Supplemental Nutrition Program for Women, Infants and Children authorized by section 17 of the Child Nutrition Act of 1966, 42 U.S.C. 1786

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
05/30/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





**Alaska WIC Policy & Procedure Manual**  
**Section: 1100 Monitoring, Audits & Evaluations**

**Policy: 1103 Local Agency Quality Improvement**

Effective Date: 00/00/0000

**PURPOSE:**

To ensure that Local Agencies develop and implement routine quality improvement activities to review and evaluate their program's services, including staff performance and program management and operations. Quality Improvement (QI) is defined as a continuous and ongoing effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes, and other indicators of quality in services or processes which achieve equity and improve the delivery of WIC to the community.

**POLICY: 1103 Local Agency Quality Improvement**

The Local Agency (LA) must develop and implement routine quality improvement (QI) activities to review and evaluate their program's services.

**PROCEDURE:**

The Local Agency's quality improvement (QI) activities or plan must include a general description with identified tools for evaluating:

1. staff performance; and
2. program management and operations.

Staff performance QI activities must include observing all clinic staff using the Local Agency Self-Assessment Form, reviewing annual staff continuing education units, and other activities as determined by the Local Agency.

Program management and operations QI activities must include record reviews, review of current corrective action plans from previous Management Evaluations, assessment of Local Agency work plan, and other activities as determined by the Local Agency.

All quality improvement activities must be documented and retained for the LA's subsequent year management evaluations.

**REFERENCE:**

7 CFR 246.11, 246.19, 246.25

**DEFINITIONS:**



## Alaska WIC Policy & Procedure Manual



### Local Agency means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with § 246.5;
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Quality Improvement (QI)** : A continuous and ongoing effort to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes, and other indicators of quality in services or processes which achieve equity and improve the delivery of WIC to the community.

**WIC** means the Special Supplemental Nutrition Program for Women, Infants and Children authorized by section 17 of the Child Nutrition Act of 1966, 42 U.S.C. 1786

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
05/30/2024	Drafted new policy

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 1100 Monitoring, Audits & Evaluations



#### Policy: 1104 Child Abuse and Neglect Reporting

Effective Date: 01/30/2013

#### PURPOSE:

To describe the requirement Local Agencies must report known or suspected child neglect or abuse as required by State law.

#### POLICY: 1104 Child Abuse and Neglect Reporting

##### Child Abuse and Neglect Reporting:

State and Local Agency staff are permitted to share information to comply with required reporting of known or suspected child neglect or abuse. In these situations, WIC staff must report or release applicant/participant information to State or local officials, as required by State law.

If WIC staff suspect a child was abused or neglected, immediately contact the Office of Children's Services (OCS) hotline. The OCS hotline is open 24/7 at 1-800-478-4444. If you are unable to reach OCS immediately or within no later than 24 hours, you must contact the law enforcement agency responsible for your area.

As of September 1, 2020 all reports of sexual abuse should be made to both OCS and to law enforcement.

In an emergency where the child is facing an immediate danger, call 911 or the nearest law enforcement agency.

#### REFERENCE:

Alaska House Bill 49

Federal Regulations:  
7CFR Ch. II

- Subpart G- Miscellaneous Provisions- Other Provisions
  - 246.26 (d)(3)

#### DEFINITIONS:

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with § 246.5;
- (b) an IHS service unit;



## Alaska WIC Policy & Procedure Manual



- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

**State agency** means the health department or comparable agency of each State; an Indian tribe, band or group recognized by the Department of the Interior; an intertribal council or group which is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior and which has an ongoing relationship with such tribes, bands or groups for other purposes and has contracted with them to administer the Program; or the appropriate area office of the Alaska Department of Health.

**WIC** means the Special Supplemental Nutrition Program for Women, Infants and Children authorized by section 17 of the Child Nutrition Act of 1966, 42 U.S.C. 1786

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/06/2024	Revised to update Alaska's reporting law and process

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 1100 Monitoring, Audits & Evaluations

#### Policy: 1105 Subpoenas and Search Warrants

Effective Date: 01/30/2013

##### PURPOSE:

To provide direction on how Local Agencies should respond when a subpoena or search warrant is received.

##### POLICY: 1105 Subpoenas and Search Warrants

###### Subpoenas and Search Warrants:

###### *Subpoenas*

Upon receiving a subpoena, the Local Agency must immediately notify the State WIC Office to consult with legal counsel, determining whether the information requested is in fact confidential and prohibited from being used or disclosed.

###### *Search Warrants*

In responding to a search warrant for confidential information, the Local Agency must immediately notify the State WIC Office. Legal counsel should be notified for the State or Local Agency. Comply with the search warrant and inform the individual(s) serving the search warrant that the information sought is confidential. Seek to limit the disclosure by:

- Providing only the specific information requested
- Limiting public access to the information disclosed

##### REFERENCE:

Federal Regulations:

7CFR Ch. II

- Subpart G- Miscellaneous Provisions- Other Provisions
  - 246.26 (d)(4)

##### DEFINITIONS:

**Local Agency** means:

- (a) A public or private, nonprofit health or human service agency which provides health services, either directly or through contract, in accordance with § 246.5;
- (b) an IHS service unit;
- (c) an Indian tribe, band or group recognized by the Department of the Interior which operates a health clinic or is provided health services by an IHS service unit; or
- (d) an intertribal council or group that is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior, which operates a health clinic or is provided health services by an IHS service unit.



## Alaska WIC Policy & Procedure Manual



**State agency** means the health department or comparable agency of each State; an Indian tribe, band or group recognized by the Department of the Interior; an intertribal council or group which is an authorized representative of Indian tribes, bands or groups recognized by the Department of the Interior and which has an ongoing relationship with such tribes, bands or groups for other purposes and has contracted with them to administer the Program; or the appropriate area office of the Alaska Department of Health.

**Subpoena:** An order that requires the named party to appear before a court at a hearing or a trial, to attend out of court at a deposition or to submit copies of requested documents.

**WIC** means the Special Supplemental Nutrition Program for Women, Infants and Children authorized by section 17 of the Child Nutrition Act of 1966, 42 U.S.C. 1786

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## **Alaska WIC Policy & Procedure Manual**

### **Section: 1200 Civil Rights**

#### **Policy: 1201 Participant Confidentiality**

Effective Date: 06/01/2018

##### **PURPOSE:**

To describe the requirements that Local Agencies maintain confidentiality with all information of WIC Program applicants and participants.

##### **POLICY: 1201 Participant Confidentiality**

The treatment of confidential applicant and participant information includes all information about applicants and participants, including information obtained from other sources, as well as information generated as a result of WIC application, certification, or participation. WIC confidentiality protects applicant and participant information, regardless of the original source of that information.

Entities involved in the administration and enforcement of the WIC Program that have a need to know of information for WIC Program purposes may have applicant and participant information disclosed. Such persons may include the staff of the Alaska WIC State and Local Agency staff, State IT staff, the staff of other State agencies and their Local Agencies, persons under contract with the State Agency to conduct research concerning WIC, persons investigating and prosecuting WIC Program violations, auditors of the WIC Program, bank contact staff processing food instruments, the USDA, Department's Office of Inspector General, the Comptroller General and other Government Accountability staff.

Local Agency sharing of confidential information with its other associated programs is allowed through written agreement. Memorandums of Understanding must be in place that specifies what information is shared and for what purposes.

Local Agencies may also use signed release forms from applicants and participants. If signed release forms are used, applicants and participants must be given the right to refuse the sharing of information.

The Division of Public Assistance uses a variety of methods including Direct Secure Messaging (DSM) for sending documents containing protected health information (PHI) or confidential information (CI) such as WIC applications, participant files, vendor banking information, proof of identity documents, Social Security Number, etc. LAs must securely transmit any protected information. Contact the WIC Clinic Operations and Breastfeeding Coordinator, and/or DOH IT Help Desk for resources and procedures for setting up a DSM account.

Fax is another alternative if DSM is not available to the LA. In faxing documents (both ways),



## Alaska WIC Policy & Procedure Manual



please ensure that the person receiving the fax is aware that you are sending a document that contains protected health information or other confidential information.

Inadvertent disclosure of secure information is still a violation of regulations. We all need to be vigilant, no matter how remote the possibility may be.

### REFERENCE:

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)  
Subpart G- Miscellaneous Provisions- Other Provisions  
○ 246.26 (d)(1)(i-ii) and 246.26 (g)

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)  
Subpart G- Miscellaneous Provisions- Records and Reports  
○ 246.25 (a)(4)

### DEFINITIONS:

**Confidentiality:** The preservation, in confidence, of all information concerning a participant and/or applicant.

**Participants** means pregnant women, breastfeeding women, postpartum women, infants and children who are receiving supplemental foods or food instruments or cash-value vouchers under the Program, and the breastfed infants of participant breastfeeding women.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required





## Alaska WIC Policy & Procedure Manual



training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 1200 Civil Rights



#### Policy: 1202 Minimum WIC Program Information including WIC Rights and Responsibility

Effective Date: 06/01/2018

##### PURPOSE:

To inform Local Agencies of the requirement that all WIC applicants and participants must be informed of WIC minimum program information, including “WIC Rights and Responsibilities”.

##### POLICY: 1202 Minimum WIC Program Information including WIC Rights and Responsibility

###### Participant Rights and Responsibilities

At every certification, recertification, and for transfers from either in-state or out-of-state each program participant, parent or caretaker must read, or have read to him or her, the statements in the “My WIC Rights and Responsibilities.”

Rights and responsibilities must include program-specific information and WIC’s nondiscrimination policy and complaint process. They must sign that they have read and understood their rights and responsibilities of the WIC program. The electronic signature will be kept in the computer system, or the hard copy signature will be scanned into the electronic record or kept in the participant chart.

Notification of a participant’s right and responsibilities also needs to occur for situations such as:

- ineligibility at initial certification
- mid-certification disqualification
- expiration of a certification period
- waiting list status

Staff must verbally review the following items on the Rights and Responsibilities form with applicants, clients and caregivers at each appointment type listed above. The person must agree to these items on the Rights and Responsibilities and sign the form in order to participate in WIC.

- All the information I give WIC is true and accurate. WIC staff can check this information.
- I will immediately report any changes in my income, family size, address, phone number or eligibility for Medicaid/Denali Kid Care, or the Food Stamp Program.
- If I break the rules, make false statements, intentionally misrepresent, conceal, or withhold facts about my eligibility for the WIC Program, I understand that:
  - I or my child can be taken off WIC.



## Alaska WIC Policy & Procedure Manual



- I will have to pay money back to WIC for foods, formula or breast pumps I should not have received.
- If I do not pay back for foods, formula or returned loaned breast pumps, the State of Alaska may use other types of legal options to collect payment including small claims court, which could result in Permanent Fund Dividend garnishment.
- I can face civil or criminal prosecution under State and Federal law.

Staff must give applicants, clients, and caregivers the opportunity to discuss any concerns or ask questions about the Rights and Responsibilities form before signing.

If an applicant or participant needs the information in a language other than English, reasonable steps must be taken by the Local Agency to provide the information verbally or in writing in an appropriate language. Use the services of an interpreter or a Language Line as needed.

### PROCEDURE:

#### Participant Rights and Responsibilities Procedure- Onsite Participants

1. Ask the applicant, client or caregiver to read the Rights and Responsibilities.
  - Read the form to the person if the person asks.
  - Use an interpreter or a Language Line as needed.
2. Verbally review the items outlined above from the Rights and Responsibilities.
3. Give the person an opportunity to ask questions about the form before signing.
4. Ask the person to sign and date the form in ink.
5. Ask the person if they want a copy of the form. Provide one if requested.
6. Staff don't have to give an additional copy if the person has a current Rights and Responsibilities form from a previous appointment.
7. Keep the form either in the physical record or electronically in SPIRIT.

#### Participant Rights and Responsibilities Procedure- Remote Participants

1. When conducting the certification or recertification remotely, review the items outlined above from the Rights and Responsibilities.
  - Use an interpreter or a Language Line as needed.
2. Give the person an opportunity to ask questions about the form.
3. Ask the person if they want a copy of the form. Provide one if requested.
4. Staff don't have to give an additional copy if the person has a current Rights and Responsibilities form from a previous appointment.
5. Keep the form either in the physical client record or electronically in SPIRIT.
6. If the participant has sent back a signed Rights and Responsibilities form to the clinic but has not dated the form; the clinic shall date the Rights and Responsibilities form the day the form arrives at the office. Clinic staff are not allowed to sign on behalf of the client; only to date the signature on the form if it is missing. Staff should initial by the date they add to the form.



### Minimum Program Information-Certification

During the initial certification, provide the following minimum program information to the participant:

1. Explain the reason for the participant's visit to the program and the purpose of the program. **Example:** "The goal of the WIC program is to improve the health and nutrition of families. Today we are going to talk about your child's health and diet to see if he is eligible for WIC and how WIC can help."
2. If eligible, inform the participant of their eligibility and the length of the certification period.
3. Inform the participant that they will need to be recertified at the end of their certification period to determine if WIC benefits may continue past that period.
4. Explain the reason the participant is being enrolled on the program by stating a connection between their eligibility and the desired health outcome. This does not mean every risk must be reviewed, but rather it is intended to summarize the reasons the participant is being enrolled.
5. Review with the authorized representative and/or participant that the WIC foods are being provided for the WIC participant rather than the participant's household.
6. Explain that the food provided by the WIC Program is supplemental; it is not intended to provide all of the participant's daily food requirements.
7. Provide participants with the "Alaska WIC Allowed Food List."
8. Inform participants of which stores are WIC approved and locations of approved stores.
9. Instruct participants on the process for using the eWIC card and the Food List to select the appropriate foods.
10. Instruct participants on the process for receiving additional food benefits in the future.
11. Explain that selling or attempting to sell WIC card, foods, or formula is considered a participant violation.
12. Provide information on how to access and use local health, nutrition and other needed services, including the types of services available, where they are located, how they may be obtained, and why they may be useful.

Using the current Welcome to WIC video in a quiet location where clients are able to view and hear the video and later provided an opportunity to ask questions about WIC and using their checks is an allowable way to covering the minimal program information points about using WIC benefits (#5-#10 above) during a certification appointment.

### Minimum Program Information-Recertification

At recertification provide to the participant the following minimum program information:

1. Restate the purpose of the current visit
2. Restate the reasons for eligibility, including the connection to the desired health outcome.
3. Ask if the participant has any questions or concerns about WIC visits, WIC foods or the



use of the eWIC card.

4. If desired by the participant and/or authorized representative, give the participant a current “Alaska WIC Food List”,

## REFERENCE:

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)  
Subpart C- Participant Eligibility- Certification of Participants  
○ 246.7 (i)(10) and 246.7 (j)

## DEFINITIONS:

**Certification** means the implementation of criteria and procedures to assess and document each applicant's eligibility for the Program. The process of identifying eligibility for WIC by using specific procedures and standards.

**Mid-Certification Health Assessment (MCA):** A complete health assessment with appropriate nutrition education, anticipatory guidance, breastfeeding support and referrals that occurs approximately in the middle of a one-year certification. This is an expanded nutrition education appointment, not a certification. The MCHA must be completed by a Competent Professional Authority.

## POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting



## Alaska WIC Policy & Procedure Manual



changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section 1200 Civil Rights

#### Policy: 1203 Collection of Racial and Ethnic Data

Effective Date: 06/01/2018

##### PURPOSE:

- To provide the racial and ethnic definitions and categories used by the WIC Program for collecting and reporting participation information.
- To describe the Local Agency requirement for collecting and reporting participation information regarding race and ethnicity.

##### POLICY: 1203 Collection of Racial and Ethnic Data

###### Data Collection and Reporting

Local Agencies are required by the MIS system to collect and report participation in the WIC Program by race and ethnicity. The purpose of this requirement is to ensure that those who are eligible to receive program benefits, minorities in particular, get what they are entitled to receive.

Local Agencies must report actual participation data by racial/ethnic category for each clinic, by recording this information in the WIC computer system. Self-declaration is used to determine a participant's racial/ethnic category. Participants cannot be required to declare a racial/ethnic category as a condition of program participation. If questioned, Local Agency staff must explain to applicants and participants that the collection of racial/ethnic identity information is strictly for statistical purposes only and has no effect on the determination of their eligibility to participate in the WIC Program.

###### Self-Identification

If a participant or authorized representative declines to provide this information, FNS 113-1, Section XII states that “visual identification must be used to determine a participant’s racial/ethnic category.” It also states that participants may be asked to self-identify their racial group but only if it has been explained, and they understand, that the collection of this information is strictly for statistical reporting purposes only and has no effect on determination of eligibility. If the WIC applicant chooses not to self-identify, WIC staff must identify the participants race and ethnicity. WIC staff must include the participant in the group to which he/she seems to belong or identifies with. When a participant resides in a remote area and does not provide information on racial/ethnic category, the WIC staff must include the participant in the group to which he/she seems to belong or identifies with.

Racial/ethnic data and records must be accessible only by authorized personnel.

##### REFERENCE:



## Alaska WIC Policy & Procedure Manual



WIC Participant and Program Characteristics 2010, page IV-9, item no. 5  
<http://www.fns.usda.gov/wic/PC2010Guidance.pdf>

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)  
Subpart C- Participant Eligibility- Nondiscrimination

- 246.8 (a)(3)

FNS 113-1, Section XII

### DEFINITIONS:

#### Definitions of Racial/Ethnic Categories

##### **Ethnicity:**

- **Hispanic/Latino** - a person of, Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term, “Spanish origin,” can be used in addition to “Hispanic or Latino.” (A person could be Black but still be identified as Hispanic, because of Hispanic culture or origin.)
- **Not Hispanic or Latino**

##### **Race:**

- **American Indian or Alaskan Native.** A person having origins in any of the original peoples of North America and South America (including Central America), and who maintains tribal affiliation or community attachment.
- **Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- **Black or African American.** A person having origins in any of the black racial groups of Africa. Terms such as “Haitian” or “Negro” can be used in addition to “Black or African American.”
- **Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- **White.** A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in





## Alaska WIC Policy & Procedure Manual



draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA's upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A "draft" watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 1200 Civil Rights

#### Policy: 1204 Voter Registration

Effective Date: 06/01/2018

#### PURPOSE:

To increase the number of citizens registered to vote in federal elections.

#### POLICY: 1204 Voter Registration

##### Voter Registration Requirements

Section 7 of the NVRA is the requirement that states affirmatively offer voter registration opportunities to clients of public assistance programs. Programs covered by the NVRA include SNAP, TANF, Medicaid/DKC and WIC. Public assistance offices are in a unique position to increase voter registration rates among low-income citizens, furthering the intent of the NVRA to increase registration among populations underrepresented in our electorate. Voter registration services must be provided whether covered transactions occur in-person or remotely.

#### PROCEDURE:

1. Distribute a voter registration application. Distribution of voter registration applications means a voter registration application must be provided unless an applicant declines in writing; an applicant does not decline in writing if he or she leaves the voter preference question blank or unanswered. A client must receive a voter registration application if he or she answers "yes" or doesn't check either the "yes" or "no" box in response to the voter preference question. At a WIC office this means:
  - (a) Make voter registration applications available in common areas.
  - (b) Post signs prominently stating that voter registration services are available through the WIC office.
  - (c) If the client selects "yes" on the Family Information form to the question "Do you want to register to vote here at the WIC office?" provide an application. Indicate on the Referral tab that this information has been provided to the participant.
  - (d) If the client does not mark "yes" or "no", follow-up with the client about their voter registration intent.



## Alaska WIC Policy & Procedure Manual



2. Have available voter information forms with appropriate disclosures and rely on the WIC Family Information form which includes a voter preference question to determine voter registration preference.

If the voter preference question has not been answered, workers are required to follow-up with the client about voter registration. A failure to respond to the voter preference question does not constitute a declination in writing. Therefore, as required by Section 7(a)(6)(A), a voter registration application must be provided.

3. Provide the same degree of assistance in completing voter registration applications as is provided in completing the office's own forms. Staff must check voter registration applications for completeness and a signature when a client returns a voter registration application for submission.
4. Accept completed voter registration applications for timely transmittal to the appropriate state election officials. Staff must accept completed voter registration applications from clients and ensure that they are sent to the appropriate election officials within ten days or within five days if the application is collected within five days of the registration deadline.

Download voter registration forms from the State of Alaska Division of Elections website:

<https://www.elections.alaska.gov/doc/forms/C03-Fill-In.pdf> or from the Alaska WIC website at: <http://dhss.alaska.gov/dpa/Pages/nutri/wic/participants/wicapplicationforms.aspx>.

Download voter information forms at:

<http://dhss.alaska.gov/dpa/Pages/nutri/wic/participants/wicapplicationforms.aspx>.  
Completed voter information forms must be maintained for at least 22 months.

### SPIRIT and Voter Registration

When reviewing applications and entering data into SPIRIT, the voter registration preference should match between the physical application and what displays in the SPIRIT voter registration drop down box. The clinic should follow this policy to provide a voter registration and follow up as needed.

### REFERENCE:

Section 7 of the National Voter Registration Act (NVRA)

### DEFINITIONS:

**National Voter Rights Act (NVRA):** Act was signed into law on August 6, 1965, by President Lyndon Johnson. It outlawed the discriminatory voting practices adopted in many southern



## Alaska WIC Policy & Procedure Manual



states after the Civil War, including literacy tests as a prerequisite to voting. Sometimes referred to as “motor voter” act.

**SPIRIT:** Successful Partners in Reaching Innovative Technology. The MIS system used by the State of Alaska to track WIC Information.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 1200 Civil Rights

#### Policy: 1205 Nondiscrimination

Effective Date: 06/01/2018

#### PURPOSE:

To ensure the protection of Civil Rights for all WIC applicants and participants, preventing discrimination based on race, color, national origin, age, sex, or disability. It also outlines the steps Local Agencies must take to protect these rights, encourage program participation, and notify the public of these protections.

#### POLICY: 1205 Nondiscrimination

##### Civil Rights

The WIC Program Civil Rights Policies:

- Ensure that WIC Program applicants and participant's Civil Rights are protected.
- Ensure that WIC Program applicants and participants are not discriminated against based on race, color, national origin, age, sex or disability.
- Ensure that Local WIC Agencies follow required Civil Rights procedures, such as:
  - Use of the non-discrimination statement
  - Providing materials in multiple languages as appropriate
  - Providing WIC staff Civil Rights training
  - Accommodating for disabilities
  - Collecting required race and ethnicity data
  - Appropriately handle any discrimination complaints received

##### Protecting Participant's Civil Rights

Local Agencies are required to protect participants' Civil Rights. They must:

- Ensure that participation in the program is free from any exclusion based on race, color, national origin, age, sex or disability.
- Provide WIC services without any difference in quality, quantity, or manner in which WIC benefits are provided.
- Issue WIC food benefits in a place, time, or manner that does not result in, or does not have the effect of denying or limiting the benefits on the basis of race, color, national origin, sex, age, or disability.
- Provide WIC services without segregating persons in clinic waiting rooms or through appointment systems.
- Apply the same eligibility criteria to all potentially eligible clients applying for the program.



## Alaska WIC Policy & Procedure Manual



- Maintain a waiting list that makes no distinctions on the basis of race, color, national origin, sex, age, or disability.

### Public Notification

The State WIC Office takes positive and specific actions to assist Local Agencies to implement a public notification program which encourages participation and informs all potential participants, particularly minorities, of the availability of the program. The public notification system must include advising applicants and participants of the protection against discrimination, and provide the procedure for filing a complaint.

### Required Materials to Post

To enhance integrity and comply with the requirements of Title VI of the Civil Rights Act of 1964, and the Department of Agriculture regulations on nondiscrimination (7 CFR parts 15, 15a, and 15b) and FNS instructions, in the WIC Program, the following items are required to be posted prominently in WIC clinic areas:

- Civil Rights poster, “And Justice for All”
- Agriculture Office of Inspector General USDA Hotline poster found at:  
<https://www.usda.gov/oig/webdocs/Hotline.pdf>

### REFERENCE:

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)  
Subpart C- Participant Eligibility-Nondiscrimination

- 246.8 (a-b)

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)  
Subpart A- General- Administration

- 246.3 (f)

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)  
Subpart B- State and Local Agency Eligibility

- 246.6 (b)(10)

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)  
Subpart C- Participant Eligibility- Nondiscrimination

- 246.8 (a) through 246.8 (c))

### DEFINITIONS:

**Civil rights:** Personal rights guaranteed and protected by the U.S. Constitution and federal laws enacted by Congress, such as the Civil Rights Act of 1964 and the Americans with Disabilities Act of 1990. Civil rights include protection from unlawful discrimination.



## Alaska WIC Policy & Procedure Manual



### Ethnicity:

- **Hispanic/Latino** - a person of, Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term, “Spanish origin,” can be used in addition to “Hispanic or Latino.” (A person could be Black but still be identified as Hispanic, because of Hispanic culture or origin.)
- **Not Hispanic or Latino**

### Race: The racial categories described by the USDA are:

- **American Indian or Alaskan Native.** A person having origins in any of the original peoples of North America and South America (including Central America), and who maintains tribal affiliation or community attachment.
- **Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- **Black or African American.** A person having origins in any of the black racial groups of Africa. Terms such as “Haitian” or “Negro” can be used in addition to “Black or African American.”
- **Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- **White.** A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for



## Alaska WIC Policy & Procedure Manual



release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## Alaska WIC Policy & Procedure Manual

### Section: 1200 Civil Rights

#### Policy: 1206 Public Notification of Non-Discrimination Standards

Effective Date: 06/01/2018

##### PURPOSE:

To list the public notification steps WIC Local Agencies must take in order to notify participants and the public that the WIC Program protects against discrimination; including Civil Rights postings at the Local Agency and using the required non-discrimination statement on all written and outreach materials.

##### POLICY: 1206 Public Notification of Non-Discrimination Standards

###### Local Agency Requirements

Local Agencies are required to:

- Develop and implement outreach activities that inform minorities or those with disabilities of the WIC Program and WIC services.
- Display the nondiscrimination poster, "And Justice For All," in prominent places, such as clinic waiting rooms and other facilities frequented by participants.
- Ensure that all applicants or parents/guardians of child applicants read and sign the "WIC Rights and Responsibilities" section of the WIC Family Information application form, in order to advise potential participants that the WIC Program is operated in a nondiscriminatory manner.

The full nondiscrimination statement is required on all documents that are considered vital such as notices of eligibility/termination, applications, or other documents that rely vital information to applicants. If the material is too small to permit the full statement to be included, the material will at the minimum include the statement, in print no smaller than the text that states: "This institution is an equal opportunity provider." This short non-discrimination statement may only be used on non-vital materials.

The short form of the nondiscrimination statement may be used on materials with limited space. These materials may include:

- post cards
- flyers of less than one page
- newspaper articles, radio, and television public service announcements that are generally short in duration



## Alaska WIC Policy & Procedure Manual



Materials specific to nutrition education or breastfeeding that strictly provide a nutrition message and do not mention WIC program are not required to contain the USDA nondiscrimination statement.

### Nondiscrimination Statement:

FNS is responsible for maintaining the Nondiscrimination Statement and provides many translations of the statement. LA are required to use the most current NDS statement on all documents. The statement and translations can be found at:

<https://www.fns.usda.gov/cr/fns-nondiscrimination-statement>

In 2022 the NDS statement was updated. All documents, pamphlets, websites, etc., should be updated as follows:

- All new printing must use the 2022 NDS
- All websites must use the 2022 NDS

Documents, pamphlets, websites should be updated to reflect the most current statement.

If you wish to obtain a copy or copies of the “... And Justice for All” poster(s), go to <http://www.fns.usda.gov/cr/and-justice-all-posters> or contact the State WIC Office.

All information materials and sources, including Web sites, used by FNS, State agencies, Local Agencies, or other subrecipients to inform the public about FNS programs must contain a nondiscrimination statement. The statement is not required to be included on every page of the program Web site. At a minimum the nondiscrimination statement or a link to it must be included on the home page of the program information.

A LA may ensure compliance with this standard by doing the following things:

- Ensure disabled applicants and participants’ access to WIC services.
- Make provisions, if needed, for translators for participants who do not speak English. Provide non-English materials as appropriate.
- Inform eligible or potentially eligible persons of clinic location, hours of service, and ages served.
- Make program regulations and guidelines available to the public on request.
- Upon request, provide participants, and potential participants, access to Civil Rights materials. Materials must include the procedures for filing complaints, program specifics, and rights of participants and applicants.
- Use the Nondiscrimination Statement, in full, on any public notification information your clinic sends out for the purpose of public information, public education, or public distribution.



## Alaska WIC Policy & Procedure Manual



- Convey the message of equal opportunity by displaying photographs, posters, etc. of clients from different races and national origins.
- Provide outreach materials to organizations that provide services to minorities, migrants or those with disabilities.

### Limited English Proficiency

If a significant number or proportion of the population eligible to be served needs service or information in a language other than English in order to be effectively informed of, or to participate in, the program, then the Local Agency should take reasonable steps, considering the size and concentration of such population, to provide information in appropriate languages to such persons. The Local Agency must also ensure that all rights and responsibilities listed on the certification form are read to these applicants in the appropriate language.

### REFERENCE:

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)  
Subpart C- Participant Eligibility- Nondiscrimination  
o 246.8 (a)and (c)

WIC Program Policy dated October 14, 2015: Revised Equal Opportunity Public Notification Policy  
<http://www.fns.usda.gov/sites/default/files/cr/Nondiscrimination-Statement.pdf>

### DEFINITIONS:

**Civil rights:** Personal rights guaranteed and protected by the U.S. Constitution and federal laws enacted by Congress, such as the Civil Rights Act of 1964 and the Americans with Disabilities Act of 1990. Civil rights include protection from unlawful discrimination.

**Limited English Proficient (LEP):** Individuals who do not speak English as their primary language and who have a limited ability to read, speak, write, or understand English can be limited English proficient, or "LEP." These individuals may be entitled language assistance with respect to a particular type or service, benefit, or encounter

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not



## Alaska WIC Policy & Procedure Manual



been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 1200 Civil Rights



#### Policy: 1207 Complying with the Americans with Disabilities Act (ADA)

Effective Date: 06/01/2018

##### PURPOSE:

To require Local Agencies to provide reasonable accommodation for disabled individuals.

##### POLICY: 1207 Complying with the Americans with Disabilities Act (ADA)

###### Accommodation for Individuals with Disabilities

Local Agencies are required to provide reasonable accommodation to ensure that the WIC program is accessible to all individuals including those with disabilities. Examples of reasonable accommodation include but are not limited to the following:

- Provide wheelchair access to WIC service locations.
- Where a significant portion of WIC participants need service in a language other than English, have bi-lingual staff or translators available.
- Have bi-lingual staff or translator read the “Rights and Responsibilities” form or other program materials to individuals who are not able to read and understand the information.
- Make reasonable modifications to policies, practices, or practices as needed to address accessibility and avoid discrimination.
- When requested, make available program information in alternate formats (i.e. large format, Braille, electronic format or audio).

Reasonable accommodation is the removal of barriers to allow individuals to have equal access to WIC services. In some cases, what is considered “reasonable accommodation” may be different from what an individual requests.

##### REFERENCE:

Americans With Disabilities Act  
<http://www.ada.gov/pubs/ada.htm>

##### DEFINITIONS:

**Disability:** The Americans with Disabilities Act Amendments Act of 2008, defines disability with respect to an individual: a physical or mental impairment that substantially limits one or more of the major life activities of such individual; a record of such an impairment; or being regarded as having such an impairment as described by subsequent sections. See CFR 36.105 and CFR



35.108

POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 1200 Civil Rights



#### Policy: 1208 Civil Rights Training

Effective Date: 06/01/2018

#### PURPOSE:

To outline the requirements for providing comprehensive Civil Rights training to all Local Agency staff. This training ensures that staff are knowledgeable about Civil Rights rules, how to protect clients' rights, and the procedures for handling discrimination complaints.

#### POLICY: 1208 Civil Rights Training

##### Civil Rights Training

New State and Local Agency staff must be briefed on Civil Rights rules during orientation. The State WIC Office Civil Rights Coordinator provides civil rights training and updates to Local Agency coordinators, and provides training materials on civil rights to Local Agencies. The State WIC program must maintain a civil rights file and retain collective racial/ethnic data for three years to determine how effective the programs are at reaching minority groups.

##### Annual Civil Rights In-Service

All new WIC employees must receive Civil Rights training that includes all the components listed below. The Local Agency WIC Coordinator must provide a Civil Rights in-service class to all Local Agency WIC staff once a year. During this training session the WIC coordinator must review Civil Rights materials found in the Alaska WIC Policy and Procedure Manual, including:

- Protecting client's Civil Rights.
- Needs of non-English speaking participants/applicants
- Covered bases (race, age, sex, disability, color, and national origin)
- How /where to file a complaint of discrimination
- Public notification information.
- Discrimination complaint procedures.
- Racial-ethnic reporting.
- Use/Posting of "the Justice for All" poster
- Ensure the availability of translators or interpreters, if necessary
- Outreach training done during the past year

The Local Agency WIC Coordinator must document in a WIC Clinic in-service file:

- Date and names of staff in attendance
- Agenda item(s)/area(s) of discussion



## Alaska WIC Policy & Procedure Manual



- Training materials (e.g. PowerPoint presentations) if used

### REFERENCE:

State WIC Office

### CROSS REFERENCE:

Job Aid 053 Civil Rights Complaint Report

### DEFINITIONS:

**Civil rights:** Personal rights guaranteed and protected by the U.S. Constitution and federal laws enacted by Congress, such as the Civil Rights Act of 1964 and the Americans with Disabilities Act of 1990. Civil rights include protection from unlawful discrimination.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.





## Alaska WIC Policy & Procedure Manual

### Section: 1200 Civil Rights



#### Policy: 1209 Civil Rights Complaints

Effective Date: 06/01/2018

##### PURPOSE:

To ensure Local Agencies accept and report all discrimination complaints received. It also outlines the necessary information that must be obtained and the procedures to follow when handling such complaints.

##### POLICY: 1209 Civil Rights Complaints

###### Discrimination Complaint Procedure

Local Agency staff must accept all discrimination complaints. Staff must determine if the complaint should be classified as discrimination (i.e., based on race, color, national origin, age, sex, or disability), or a complaint which must be handled through the Fair Hearing procedure.

The State WIC Office can process complaints which alleged discrimination based on sex or handicap if grievance procedures are in place. Local Agency staff must not determine if a complaint is valid, instead they must make sure that the complaint is handled according to the following procedures.

###### Local Agency Compliance Procedures

Local Agencies must immediately notify the State WIC Office of any civil rights complaint by a participant. The State WIC Office Civil Rights Coordinator will investigate the complaint, and notify the Secretary of Agriculture of the complaint.

##### **Local Agency staff must:**

Accept all written or verbal discrimination complaints. If a participant verbalizes but does not submit their complaint in writing, the WIC staff receiving the call must write up the laments of the complaint by attempting to obtain as much of the following information:

1. Name, address, and telephone number of the complainant or other means of contacting the complainant;
2. The specific location where the alleged discrimination occurred and name of the entity delivering the service or benefit;
3. The nature of the incident or action that led the complainant to feel discrimination was a factor or an example of the method of administration that is alleged to have a discriminatory effect on the public or potential and actual participants;



## Alaska WIC Policy & Procedure Manual



4. The basis on which the complainant feels discrimination exists (race, color, national origin, age, sex, or disability);
  5. The names, titles, and business addresses of persons who may have knowledge of the discriminatory action; and
  6. The date(s) during which the alleged discriminatory actions occurred, or if continuing, the duration of such actions.
- Send the complaint to the State WIC Office on the Civil Rights Complaint form included at the end of this policy.
  - Submit an anonymous complaint if the participant requests it. Inform the complainant that it is helpful to have at least their name and telephone number so that we can apprise them of the resolution of the complaint. In the case of an anonymous complaint, staff submits sufficient information to determine the identity of the WIC Local Agency and the incident. If discrimination complaints are received with reference to other WIC agencies within or outside of Alaska, the same procedures for writing and submitting the complaint apply.

All complaints alleging discrimination based on race, color, national origin, or age, will be immediately referred to the Secretary of Agriculture, or the Director, Office of Equal

Opportunity, USDA, Washington, DC 20250 or the Office established by the State WIC Office to handle discrimination grievances or complaints.

### Compliance Reviews

Local Agency compliance with Civil Rights requirements is reviewed as part of the Local Agency management evaluation conducted bi-annually. Local Agency responsibilities in regard to nondiscrimination are included as part of the written agreement between the State and Local Agency.

Local Agencies must describe the racial/ethnic composition of their service area in their annual grant applications.

### REFERENCE:

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)  
Subpart C- Participant Eligibility- Nondiscrimination

- 246.8 (a)(4) and 246.8 (b)

### CROSS REFERENCE:

Job Aid 053 Civil Rights Complaint Report

### DEFINITIONS:



## Alaska WIC Policy & Procedure Manual



**Civil rights:** Personal rights guaranteed and protected by the U.S. Constitution and federal laws enacted by Congress, such as the Civil Rights Act of 1964 and the Americans with Disabilities Act of 1990. Civil rights include protection from unlawful discrimination.

### Ethnicity:

- **Hispanic/Latino** - a person of, Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term, “Spanish origin,” can be used in addition to “Hispanic or Latino.” (A person could be Black but still be identified as Hispanic, because of Hispanic culture or origin.)
- **Not Hispanic or Latino**

**Management Evaluation:** A bi-annual review conducted by State of Alaska WIC Staff of Local Agencies of clinic operations.

**Race:** The racial categories described by the USDA are

- **American Indian or Alaskan Native.** A person having origins in any of the original peoples of North America and South America (including Central America), and who maintains tribal affiliation or community attachment.
- **Asian.** A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.
- **Black or African American.** A person having origins in any of the black racial groups of Africa. Terms such as “Haitian” or “Negro” can be used in addition to “Black or African American.”
- **Native Hawaiian or Other Pacific Islander.** A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- **White.** A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open



## Alaska WIC Policy & Procedure Manual



for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.



## Alaska WIC Policy & Procedure Manual

### Section: 1200 Civil Rights

#### Policy: 1210 Fair Hearing Procedures

Effective Date: 06/01/2018

##### PURPOSE:

To inform Local Agencies that all WIC applicants and participants must be notified of their right to a fair hearing and to outline the specific procedures and timeframes for conducting such hearings. This policy also details the circumstances under which a fair hearing request may be dismissed and the conditions for continuing benefits while awaiting the hearing decision.

##### POLICY: 1210 Fair Hearing Procedures

###### Notification of Appeal Rights (Fair Hearing)

When an application for certification to the WIC Program is denied, or if any decision negatively affects an individual's eligibility for program services, the Local Agency must inform the applicant or participant of their right to a fair hearing. This notification must be provided in writing, using the automated form from SPIRIT or the "Your WIC Benefits Have Ended" form. Additionally, if needed, explain the notice verbally to ensure full understanding. A copy of this form must be filed in either the Local Agency's ineligible file or the participant's file.

If there is a claim against an individual for the cash value of benefits that were improperly obtained, inform the applicant in writing about the claim and also notify them in writing of their right to a fair hearing.

Ensure that recipients who do not speak English fully understand their rights by providing necessary translations or interpreter services.

###### Time Limit for Fair Hearing Request

Individuals must request a fair hearing within 60 days from the date on the "Your WIC Benefits Have Ended" form or letter. This request can be made verbally. As soon as a request is made, the Local Agency must immediately document it in writing and send it to the State WIC Office Civil Rights Coordinator.

To continue receiving benefits while awaiting the hearing, a participant must request the fair hearing within the 15-day advance notice period given for adverse actions. This rule does not apply to applicants denied benefits at initial certification, participants whose certification periods have expired, or participants who have become categorically ineligible. These individuals can still appeal within the 60-day period, but they will not receive benefits while waiting for the hearing or its results.



### Denial or Dismissal of a Hearing Request

The only circumstances in which the State WIC Office must deny or dismiss a hearing request are:

- The request is not received within 60 days from the date on the Your WIC Benefits Have Ended form, or the date of the letter informing an individual of a claim for cash value of improperly obtained benefits.
- The request is withdrawn in writing by the appellant or a representative of the appellant.
- The appellant or representative fails, without good cause, to appear at the scheduled hearing.
- The appellant has been denied participation by a previous hearing and cannot provide evidence that circumstances relevant to program eligibility have changed in such a way to justify a hearing.

### Continuation of Benefits Pending Fair Hearing

Participants who appeal the termination of their benefits within the 60-day advance notice period must continue to receive program benefits until the hearing official makes a decision or their certification period expires, whichever happens first. This rule does not apply to participants whose certification period has already expired.

Participants who are found to be ineligible or become categorically ineligible while waiting for the hearing decision should not continue to receive benefits. Similarly, applicants who are denied benefits at their initial certification or due to the expiration of their certification can appeal the decision, but they will not receive benefits while awaiting the hearing.

### Hearing Official

Hearings must be conducted by an impartial official, such as the Director of the Division of Public Assistance or his/her designee, who does not have any personal stake or involvement in the decision and who was not directly involved in the initial determination of the action being contested.

### Conduct of the Hearing

The State WIC Office must ensure that hearings are accessible to appellants and scheduled within three weeks of receiving the hearing request. Appellants must receive at least 10 days' written notice of the hearing date, time, and location, along with an explanation of the hearing procedure. Hearings can be conducted by telephone if necessary.

The appellant or their representative must have the opportunity to:

- Examine the documents and records supporting the decision under appeal before and during the hearing.
- Be assisted or represented by an attorney or other persons.



## Alaska WIC Policy & Procedure Manual



- Bring witnesses.
- Present arguments without undue interference.
- Question or refute any testimony or evidence, including cross-examining adverse witnesses.
- Submit evidence to establish all pertinent facts and circumstances.
- Request accommodations for disabilities at least 10 days prior to the hearing.

If the Hearing Official deems an independent medical assessment or professional evaluation relevant and necessary, they may order one at the program's expense from a mutually agreed-upon source.

The Hearing Official is responsible for:

- Ensuring all relevant issues are considered.
- Requesting, receiving, and including all necessary evidence in the hearing record.
- Regulating the hearing to ensure it follows due process and remains orderly.
- Making a decision that resolves the dispute within 45 days of the hearing request.

Hearings will be conducted informally, following basic rules of order but aiming to make the claimant comfortable. The Alaska WIC Program will provide fair hearing procedures for public inspection and copying upon request, ensuring efforts are made to clarify the facts of the case.

### Hearing Decision

The Hearing Official is responsible for making a decision based on the appropriate Federal laws, regulations, and policies, considering the facts presented during the hearing. The complete record for the final decision includes a verbatim transcript or recording of the testimony and exhibits, an official report summarizing the hearing, and all related documents. The State WIC Office keeps this record and will provide access to it for the appellant or their representative upon written or verbal request.

The decision must clearly state the issue being appealed, the findings of fact (including supporting evidence and relevant regulations or policies), and the final decision. This decision becomes part of the official record.

Within 45 days of receiving the hearing request, the State WIC Office must inform the appellant or their representative of the decision and the reasons for it in writing. If the decision favors the appellant and benefits were previously denied or discontinued, benefits must start immediately. If the decision favors the agency, the Local Agency must stop any continued benefits as soon as administratively possible, based on the hearing official's decision.

### Judicial Review

State and Local Agencies must ensure that all hearing records and decisions are accessible for public inspection and copying. However, they must keep the names and addresses of



participants and other members of the public confidential.

If an appellant wants to seek a higher review of the decision, the State WIC Office must inform them of their right to pursue judicial review.

### REFERENCE:

Federal Regulations: 7CFR Ch. II (1-1-12 Edition)  
Subpart C- Participant Eligibility- Fair Hearing Procedures for Participants

- 246.9

Federal Regulations: 7CFR Ch. II (1-1-12 Edition) Subpart C- Participant Eligibility- Fair Hearing Procedures for Participants

- 246.9 (j) through 246.9 (l)

### CROSS REFERENCE:

Job Aid 053 Civil Rights Complaint Report

### DEFINITIONS:

**Fair Hearing:** A process applicants and participants are entitled to under federal regulation and state statute. A fair hearing is provided as part of the appeal process and is scheduled once an appeal request is made. The fair hearing is conducted by a neutral third party.

### POLICY HISTORY:

Date	Draft, released, training, revised, reviewed
08/2024	Reviewed

**Draft:** Policy is under development or revision by SA and open for comment. Policy has not been accepted as final by USDA and appears with a “draft” watermark. Policies released in draft status may be amended and do not supersede existing policy until released. Generally, they provide guidance about expected policy change.

**Released:** Significant policy change has been finalized and implemented. SA provides training to LA’s upon release of any policy. Policy has been accepted as final by USDA and is no longer open for comment. A “draft” watermark does not appear. The date located at the top of the policy is the date of the most recent release. Policies are to be implemented on release date and will become compliance findings 6 months from the release date.

**Training:** SA provided significant (at least fifteen minutes) of training on the policy at a required





## Alaska WIC Policy & Procedure Manual



training and or meeting.

**Revised:** Minor clarifications, edits or formatting changes have occurred without need for release or training.

**Reviewed:** The writer looked at this policy to make sure it was still accurate. Formatting changes may have occurred.