

RISK CODE ASSIGNMENT

- At least one risk code will be assigned at certification.
- All risk codes that apply will be assigned (may be system or CPA assigned).
- Back up documentation for certain codes is required.
- CPA assigned risk codes are not removed during a certification period.
- Risk codes will be updated at mid- certification. (i.e. resolved, working on, etc)

Reference: State Plan Chapter 5, Policy 5.2

PARTICIPANT REFERRAL AND FOLLOW UP

- A new referral is required with each certification.
- If no referral is made, the reason must be clearly documented.
- High Risk referrals will be made according to High Risk Table, denial by the participant must be documented. At least one contact attempt is required by the RD.
- Low risk referrals should be made according to state plan (i.e. Medicaid, SNAP and TANF should be a referral if the participant does not already have these services). Other low risk referrals (MD, food bank, housing, child care, dentist, etc.) will also count.
- Screening IZ for 0-24 month olds and referring if they are out of date.
- Follow up on all referrals will be documented at subsequent visits; new referrals will be made as appropriate.

Reference: State Plan Chapter 5, Policy 5.2 and Chapter 6, Policy 6.2

FOOD PACKAGE

ASSIGNMENT OF CORRECT/PROPER PACKAGE

- A CPA will assign and make changes to food packages as needed; an RD will approve any FPIII packages where supplemental foods are deferred to them.
- Prescriptions will be completed and signed by a provider with prescriptive authority.
 - Prescriptions will have provider credentials documented.

ISSUANCE OF BENEFITS

- Issuance of food packages should adhere to SP guidance; finding will relate to over/under issuance or wrong food package for category.

TAILORING FOOD PACKAGE

- Tailoring includes the following changes to the standard or default food packages:
 - Issuing less than the full nutrition benefit (less formula, deleting/reducing an item)

- Issuance of alternate milk based on CPA assessment (fat level, goat/soy milk)
- Any food items that require a prescription (non-standard/exempt formulas, other medically necessary products)
- Change in formula (reason why)
- Issuance of RTF formula (reason why)

Reference: State Plan Chapter 5, Policy 5.2 and Chapter 8, Policies 8.1-8.4

DOCUMENTATION OF BREASTFEEDING AND/OR NUTRITION EDUCATION

- Nutrition and breastfeeding education must be documented per SP guidelines.
- At least 4 contacts will be made per 1 year certification period and 2 contacts per 6 month certification period.
- Contacts will be made approximately quarterly, or with each set of benefits issued (i.e. dispersed throughout the certification period).
- Education documentation must be clear and include what information was provided to the participant (i.e. "discussed", "educated on").
- Required nutrition core education topics are covered based on state plan policy, including:
 - Rights and Responsibilities (each certification)
 - Purpose & Benefits of WIC Program (initial certification and as needed)
 - Avoiding Alcohol, Tobacco, Drugs (for caregivers if infant/child is the participant being certified) (initial certification and as needed)
 - WIC Food Package (each certification)
 - Making an Informed Decision (for pregnant women)/Breastfeeding Successfully (for breastfeeding women) (each certification)

Reference: State Plan Chapter 5, Policy 5.2 and Chapter 6, Policy 6.3

ANTHROPOMETRIC/HEMATOLOGICAL MEASURES AND FOLLOW UP

- Anthropometric and blood work data must be collected according to policy.
- Follow up as indicated per policy.

Reference: State Plan Chapter 5, Policy 5.2

GOAL ESTABLISHED AND FOLLOW UP

- A participant stated goal will be documented at each certification, denial will be documented.
- Follow up to goal will be documented at subsequent visit(s).

Reference: State Plan Chapter 5, Policy 5.2 and Chapter 6, Policy 6.3

NUTRITION ASSESSMENT QUESTIONS

- Category appropriate nutrition assessment questions will be completed at certification and mid-certification per State Plan.
- All questions will have a documented response.
- Referral to other areas of the folder or a family members folder is not acceptable.

Reference: State Plan Chapter 5, Policy 5.2 and Chapter 6, Policy 6.3

NUTRITION CARE PLAN

- The care plan will be documented under "P" in the SOAP note at certification and mid-certification.
- At a minimum the plan will include:
 - Type of follow up appointment (i.e. high risk RD, low risk aide, medical update with CPA, online, group class, etc.)
 - Timing if not the recommended 3 months,
 - Potential or relevant education topic(s) for follow up appointment.
 - Follow up needed at next appointment (i.e. ht/wt/hgb, pertinent education topics covered at last visit, etc.).

Reference: State Plan Chapter 5, Policy 5.2 and Chapter 6.2
