



Promise Health Plan

## POLICY & PROCEDURE Medical Services

<b>Policy Title: Women, Infants and Children (WIC) Food Program</b>		
<b>Policy No: 10.4.2.3</b>		<b>Original Date: 01/03</b>
<b>Effective Date: 12/18</b>	<b>Revision Date: 01/03, 03/05, 06/07, 4/18, 12/18</b>	<b>Revision No: 4</b>
<b>Department Head:</b>		<b>Medical Services/P&amp;T Committee:</b>
<b>Date:</b>		<b>Date:</b>
<b>P&amp;P Committee:</b>		<b>Scope of Coverage:</b>
<b>Date:</b>		<b>Population Health</b>

### PURPOSE:

To identify, coordinate and refer all identified candidates for the Women, Infants and Children Supplemental Food Program (WIC). WIC provides temporary nutrition education and assistance for needy women, infants and children under the age of five (5) who are at nutrition risk. Supplemental foods are selected to meet specific nutritional needs of pregnant or breast feeding women and young children. WIC is a free service for patients who meet eligibility requirements.

### POLICY:

All Blue Shield Promise members who are pregnant, breastfeeding, and postpartum women, infants and children under the age of five (5) will be assessed for nutritional risk. If they are found to require supplemental food services, they will be referred to the local WIC Program. The Blue Shield Promise Utilization Management Department Case Manager will act as a liaison to coordinate all referrals.

### Screening of Nutritional Needs and WIC Eligibility Identification and Referrals

As part of its initial health assessment of members or as part of the initial evaluation of newly pregnant women, the Primary Care Physicians (PCP's) are to identify pregnant, breastfeeding, or postpartum women, or a parent/guardian of a child under the age of five (5) to the WIC program as mandated by Title 42, CFR 431.635 (c) who are at nutritional risk. PCPs are to perform a nutritional assessment as well as hemoglobin or hematocrit laboratory tests, assess for history of frequent illnesses or a general poor state of health. In the case of pregnant women, PCPs may refer members to nutritionists for further assessment. The PCP or nutritionist is to initiate the referral to WIC, if appropriate, including a current hemoglobin or hematocrit laboratory value in the referral. Tests results, reported on CHDP form PM 160 for children, or the CPSP assessment tool are also to be provided to the WIC program with all referrals. The PCP must document the laboratory values and the referral in the member's medical record. If the PCP requires assistance with the referral or coordinating care, she/he may contact the Blue Shield Promise/IPA/PPG Case Manager. If requested by the WIC program, the PCP is to provide subsequent biochemical test results or other tests as needed.

The WIC Program will schedule an appointment with the member to determine eligibility within fifteen (15) days of the initial referral contact, unless the member is determined to be at high risk, in which case she/he will be seen immediately. At this time, the member's nutritional risk will be evaluated based on physical, biochemical and other clinical information submitted with the (PCP's)

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referral. A complete dietary assessment will be done at the time of the WIC Program enrollment and during recertification. The CPSP dietary assessment information will satisfy the WIC program dietary assessment requirements at each trimester visit for pregnant women. A copy should be given to the member with instructions to carry the nutritional assessment with her to the WIC office.)

#### **PROCEDURES:**

1. If requested by the PCP Blue Shield Promise/IPA/PPG Case Managers will assist in the WIC Program referral process.
2. The Case Manager will coordinate the referral process by ensuring that all necessary information is forwarded to the local WIC program including the nutritional assessment and any relevant/required laboratory values.
3. The Case Manager will contact the member to complete a case management assessment and inform the member of the WIC referral.
4. The Case Manager will follow-up with the local WIC program to ensure their assessment has been completed and to determine eligibility for the program. If eligible, the Case Manager will continue to track the member and provide coordination of care as needed. If ineligible, the Case Manager will inform the PCP to discuss other alternatives. The Case Manager will continue to track the member and provide coordination of care as needed including referrals to other community resources.

#### **AUTHORITIES AND REFERENCES:**

U.S Code Title 42 Section 1786

California Health and Safety Code Section 123280

AB 2322

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