



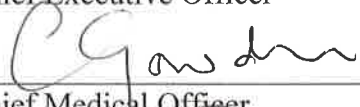
KERN HEALTH SYSTEMS

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POLICY AND PROCEDURES					
SUBJECT: Women, Infants, and Children (WIC) Supplemental Nutrition Program				POLICY #: 3.08-P	
DEPARTMENT: Health Services – Quality Management					
Effective Date: 03/2006	Review/Revised Date: 09/08/2016	DMHC		PAC	
		DHCS		QI/UM COMMITTEE	
		BOD		FINANCE COMMITTEE	



 Douglas A. Hayward
 Chief Executive Officer

Date 9/8/16



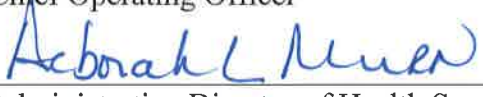
 Chief Medical Officer

Date 9/8/16



 Chief Operating Officer

Date 9/2/16



 Administrative Director of Health Services

Date 9/2/16

POLICY¹:

Kern Health Systems (KHS) shall identify and refer eligible members for Women, Infant, and Children (WIC) services.² As part of a member's initial health assessment and as part of the initial evaluation of newly pregnant members, KHS providers refer pregnant, breastfeeding, or postpartum women or a parent/guardian of a child under the age of five to the WIC Program as mandated by Title 42, CFR 431.635(c).³ KHS Health Education, upon identification of undocumented WIC referral by the KHS provider, shall initiate member education into the WIC program.

PROCEDURES:

1.0 ACCESS

WIC services are not covered by Kern Health Systems.⁴

It is the PCPs responsibility to refer pregnant, breastfeeding, or postpartum members to WIC for nutritional risk evaluation, basic nutrition education, and services including supplemental food. No prior authorization is required from KHS for WIC services.

2.0 PROVISION OF SERVICES

WIC services are not covered by Kern Health Systems.⁵

It is the PCPs responsibility to order hemoglobin or hematocrit testing as appropriate. Providers should use the *CHDP Program Form PM 160* to document the laboratory values for eligible children under 5 and refer to the WIC Program as indicated.⁶

3.0 COORDINATION OF CARE

It is the PCPs responsibility to follow-up on referrals made to WIC on the member's subsequent visits and promote compliance with program goals.

KHS and the local WIC agencies meet on a quarterly basis as stated in the Memorandum of Understanding to monitor the agreement and make changes as needed.⁷

4.0 DOCUMENTATION, TRACKING, AND MONITORING

It is the PCPs responsibility to document referrals and related lab values in the member's medical record.⁸ Providers are required to document member referrals to WIC services in the Comprehensive Perinatal Services Program Initial Combined Assessment, Individual Care Plan, and the *CHDP Program Form PM160* as appropriate. These documents must be included in the member's medical record.

The KHS Health Education Department checks all *CHDP Program Form PM160s* for all children under 5 years of age for WIC referrals by the PCP. If no referral was made, the Health Education Department forwards WIC information and a list of the local agencies to the parents.

5.0 MEMBER EDUCATION

The KHS Health Education Department provides members with WIC information during the initial OB and postpartum contacts and mails a list of the local WIC agencies with the prenatal and postnatal packet if no referral has been made by the OB care provider.

REFERENCE:

¹ **Revision 2016-09:** Review requested by Compliance Department. **Revision 2009-07:** Revised by Director of Quality Improvement, Health Education & Disease Management. **Revision 2007-10:** Policy revised by Member Health Educator. **2005-12:** Routine review. Policy reviewed against DHS Contract 03-76165 (Effective 5/1/2004).

² DHS Contract A-11 (16)

³ DHS Contract A-11 (16)(A)

⁴ DHS Contract A-11 (16)

⁵ DHS Contract A-11 (16)

⁶ DHS Contract A-11 (16)(A)

⁷ DHS Contract A-11 (16)(B)

⁸ DHS Contract A-11 (16)(A)