

FY 2017 State Plan Proposed Changes & Comments

POLICY CHANGE/CLARIFICATION	FED RQ? Y/N	POLICY SECTION(S)	LOCAL AGENCY & PUBLIC COMMENTS	STATE AGENCY RESPONSES / ACTIONS
SECTION I- GOALS AND OBJECTIVES				
I. Vendor Management				
Reported on 2016 goals, developed 2017 goals.				
II. Nutrition Services & Breastfeeding				
Reported on 2016 goals, developed 2017 goals.				
III. Information System				
Reported on 2016 goals, developed 2017 goals.				
IV. Organization & Management				
Reported on 2016 goals, developed 2017 goals.				
V. NSA Expenditures				
No goals				
VI. Food Funds Management				
No goals				
VII. Caseload Management				
Reported on 2016 goals, developed 2017 goals.				
VIII. Certification, Eligibility and Coordination of Services				
Reported on 2016 goals, no new 2017 goals.				
IX. Food Delivery and Food Instrument Accountability and Control				
No goals				
X. Monitoring and Audits				
No goals				
XI. Civil Rights				
No goals				

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SECTION II LOCAL POLICY AND PROCEDURES (P&P)				
I. Vendor Management				
Updates to procedures for retention of vendor related documents, contact logs and complaints.	N	Complaints Against Vendors, Vendor Authorization, Vendor Files, Vendor Monitoring, Vendor Training		
Minor policy updates to vendor training procedures.	N	Vendor Training	Utah Co: Nice to have DVD optional. (Janice)	
I. Nutrition Services & Breastfeeding:				
201 – Low Hemotocrit/Low Hemoglobin	Y	Nutrition Risk Manual pg 78, 81,	Utah Co: Will Vision calculate by age for women? (Marilyn)	Yes, the VISION tables had already been incorporated. This is updating the tables in the P&P.
211 – Elevated Blood Levels	Y	Nutrition Risk Manual pg 84-87	Utah Co: Request: could you make a cheat sheet that summarizes all the NRFs that are manually assigned as HR? This would be very helpful. (KGL) Says WIC agencies must access hx of lead testing for every infant and child. How do we do this? Is there a place to document this? (Marilyn)	The risk revision training effective 10/1/2016 was sent to WIC Directors on 7/1/2016. This training explains that only 2 risks in this revision are auto-assigned (211 & 332). Lead is not an issue in Utah; it was not assigned in FY 2015. If lead is entered in VISION in the blood work, it can be accessed there and it is retained. There is a cheat sheet for all risk factors in SharePoint under staff training.
			Bear River:	This was not assigned at all in

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			How frequently will this data be available? Are MDs actually testing for lead routinely?	FY 2015. We are not aware of routine testing being done.
332 – Short Interpregnancy Interval (Closely Spaced Pregnancy)	Y	Nutrition Risk Manual pg 113-114	Utah Co: Will this be automatic in Vision if there are not 2 pregnancy records? (i.e just recorded as when last pregnancy was) (Marilyn)	The User Group will be working on this implementation which is anticipated to be completed in the summer of 2017. This will be incorporated into VISION according to the risk specifications and will be shared with everyone in 2017.
425 – Inappropriate Nutrition Practices for Children	Y	Nutrition Risk Manual pg 277-288	Bear River: Consider including assessment criteria for CPA to follow when issuing reduced fat milk/yogurt to children where overweight/obesity is a concern?	Yes, we will consider. Thank you. The assessment criteria is already in the Nutrition Risk Manual for risk factors 113, 114 and 115.
601 – Breastfeeding Mother of Infant at Nutritional Risk	Y	Nutrition Risk Manual pg 312		
602 – Breastfeeding Complications or Potential Complications	Y	Nutrition Risk Manual pg 314		
Clarified in Staff Training that RDs are exempt from Basic Nutrition and CPA2s must complete Basic Nutrition and Lifecycle Nutrition	N	II. Nutrition Services- Breastfeeding/Nutrition Education and Counseling/Staff Training, pg 4		
Clarified in Staff Training that Maternal Nutrition, Infant Nutrition and Child/Adolescent Nutrition are all part of Lifecycle Nutrition	N	II. Nutrition Services- Breastfeeding/Nutrition Education and Counseling/Staff Training, pg 1		
Lactation Education or Local Agency identified course is recommended, not required	N	II. Nutrition Services- Breastfeeding/Nutrition Education and Counseling/Staff		

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		Training, pg 3; added or Local Agency identified course		
Added Senior Peer Counselor to who can issue breastfeeding aids	N	II. Nutrition Services-Breastfeeding/Nutrition Education and Counseling/Staff Training p. 4		
Corrected Breastfeeding Coordinator's CE hours to 20 every 5 years	N	II. Nutrition Services-Breastfeeding/Nutrition Education and Counseling/Staff Training, pg 6		
Added, "if budget allows" for 45 hour lactation education course	N	II. Nutrition Services-Breastfeeding/Nutrition Education and Counseling/Staff Training, pg 6	Weber-Morgan: This sections still states that CPAs need 30 hours of BF continuing ed. It should be 18.	Corrected.
Combined and moved table for issuance of breastfeeding aids. Table in "Breastfeeding Aids" document, p. 3-4	N	II. Nutrition Services-Breastfeeding/Nutrition Education and Counseling/Staff Training p. 8		
Changed "nutrition education module" to self-paced module".	N	II. Nutrition Services-Breastfeeding/Nutrition Education and Counseling/Nutrition Education. p. 4		
Added reference to breastfeeding counseling policy.	N	II. Nutrition Services-Breastfeeding/Nutrition Education and Counseling/Nutrition Education		

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		p. 4		
Removed duplication of breastfeeding counseling policy. The same information is in the Breastfeeding Counseling section of the policy.	N	II. Nutrition Services- Breastfeeding/Nutrition Education and Counseling/Nutrition Education p. 4-6	Bear River: It is good to remove duplication and put in the reference.	We agree.
Added "Exit Counseling"	Y	Breastfeeding/Nutrition Education and Counseling/Nutrition Education, pg 8	Utah Co: Can we get more info about this new requirement? If I understand this right, it's not really a problem for PP women (because we would do it at the baby's midcert), but I'm imagining this is going to really complicate things at class appointments for preg. women because it sounds like they'll need a follow-up appointment instead. This is potentially hard to predict and we are not currently set up to have adequate follow-up appointments for all preg. participants. Is there room for flexibility? (KGL) Does PP also include those who are BF? (Marilyn) Bear River: Sample of Next Steps to Health handout? Weber-Morgan: When will we see the handout?	Yes, we will provide more information and a new educational handout. The brochure is called Next Steps and this policy requirement can be incorporated into existing appointment schedule. An additional appointment is not required. Policy has been adjusted to provide this clarification Yes, we will review the policy for flexibility. Yes. As soon as it is finalized and before this policy is effective which is dependent upon when USDA provides approval.
Added, full-time, with requirement of 12 hours of nutrition education annually	N	II. Nutrition Services- Breastfeeding/Nutrition	Utah Co: Many staff are 30-hr merit staff.	Please follow your local health department rules on what is

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(clarification)		Education and Counseling/Staff Training, pg 10	Does this count as Full Time? (KGL) Bear River: Is there a prorated amount for part-time CPA and CA staff? What is the basis? Summit Co: Does this mean annually from their full time hire date or calendar year?	considered full time. We don't require a prorated amount for part-time because there are so many levels of part-time. The amount of CE for part-time staff is based on the WIC Director's discretion. Calendar year.
Changed all wording from "artificial baby milk" to "formula" throughout	N	II. Nutrition Services- Breastfeeding/Nutrition Education and Counseling/Breastfeeding Counseling	Utah Co: Thank you-(Marilyn)	You're welcome.
Included "as appropriate" to issuing formula	N	II. Nutrition Services- Breastfeeding/Nutrition Education and Counseling/Breastfeeding Counseling pg 4		
Added positive wording to breastfeeding assessment guidance	N	II. Nutrition Services- Breastfeeding/Nutrition Education and Counseling/Breastfeeding Counseling pg 5	Utah Co: All the updating throughout the BFing sections sound great. The positive instead of the punitive messages is really great! (KGL)	We hope this helps with positive customer service.
Replaced "enhanced food package VII benefits" with "FBF package"	N	II. Nutrition Services- Breastfeeding/Nutrition Education and Counseling/Breastfeeding Counseling pg 6-7		
Inserted wording "while respecting the mother's choice"	N	II. Nutrition Services- Breastfeeding/Nutrition Education and Counseling/Breastfeeding		

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		g Counseling pg 8		
Wording removed when discussing terminating postpartum mothers over 6 months “and appropriate amounts of food issued”	N	II. Nutrition Services- Breastfeeding/Nutrition Education and Counseling/Breastfeedin g Counseling pg 9		
Added instruction about formula issuance to premature babies	N	II. Nutrition Services- Breastfeeding/Breastfee ding Promotion and Support/Positive Breastfeeding Clinic Environment pg 2.	Utah Co: Good clarification. Thank you! (KGL) Bear River: Hazards of powdered formula - Change to cronobacter	You’re welcome. This has been updated and posted in SharePoint.
Added “if applicable” to hand expression instruction	N	II. Nutrition Services- Breastfeeding/Breastfee ding Promotion and Support/Breastfeeding Aids pg 2	Utah Co: Thank you for this change! (KGL)	You’re welcome.
Clarification added that electric breast pumps can only be issued to breastfeeding women.	Y	II. Nutrition Services- Breastfeeding/Breastfee ding Promotion and Support/Breastfeeding Aids. p. 2	Bear River: This will pose a problem if a breastfeeding mother of hospitalized infant(s) is certified as postpartum.	Yes. We have already asked USDA to reconsider their mandate about this. Hopefully, they will allow us to change this. The key is to issue breast pumps after the mom has delivered the baby, per USDA.
Added Senior Peer Counselor to General Guidelines for issuing breastfeeding aids	N	II. Nutrition Services- Breastfeeding/Breastfee ding Promotion and Support/Breastfeeding Aids p. 2		
Added Senior Peer Counselor to Distribution of Breastfeeding Aids.	N	II. Nutrition Services- Breastfeeding/Breastfee ding Promotion and Support/Breastfeeding Aids		

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		p. 3		
Added “breastfeeding” before aids. “Pumps” is considered a breastfeeding aid. Added: Frequency of training shall be updated as warranted by products.	N	II. Nutrition Services- Breastfeeding/Breastfeeding Promotion and Support/Breastfeeding Aids p. 3-4		
Changed the hospital grade pump follow up to a minimum of monthly contacts/calls after the initial 24-72 hour contact	N	II. Nutrition Services- Breastfeeding/Breastfeeding Promotion and Support/Breastfeeding Aids p. 5		
Rewording “this must be documented along with an appropriate plan”	N	II. Nutrition Services- Breastfeeding/Breastfeeding Support/Breastfeeding Aids pg 10		
Added Mother must be either an active breastfeeding WIC participant or WIC staff member. Pregnant WIC participants cannot receive electric breast pumps	Y	II. Nutrition Services- Breastfeeding/Breastfeeding Promotion and Support/Breastfeeding Aids pg 11	Utah Co: Does this mean they need to be listed as BF? Sometimes mom has a premature baby and needs a pump right away but we can’t get her in to certify as BF for a few days. What do we do then? (Marilyn) Bear River: See pg 12 - This needs to be updated to match the new policy - hospital grade pumps now only 1X/month (see pg 5)	This means the mom needs to have delivered a baby. Pumps can’t be issued to pregnant women before they have delivered. Good catch. Thank you. Policy has been adjusted to reflect change.
Added that a second single-user pump may be issued, in cases of broken pumps that cannot be repaired	N	II. Nutrition Services- Breastfeeding/Breastfeeding Promotion and Support/Breastfeeding	Utah Co: Thank- you Bear River:	You’re welcome.

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			“printed” on the Food Benefits screen (actual checks will not print for this package . . .	
Revised instruction to receive Medicaid coverage for medical formulas	N	II. Nutrition Services- Breastfeeding/Food Package Prescriptions/Medicaid Reimbursement pg 1	Bear River: Formatting suggestion: Bulleted list would be easier to read: IHC Home Health CNS Coram	Thank you. Changed formatting.
Added instruction for changing BF status to ‘no longer BF’ for current month	Y	II. Nutrition Services- Breastfeeding/Food Package Prescriptions/Food Packages pg 12	Utah Co: Could you add info about what happens when nutr. support starts after the certification? (KGL) Meant for page 13	We will look at this. Phyllis will call. Added iii on page 13
Added instruction for issuing a food package when an infant is hospitalized	Y	II. Nutrition Services- Breastfeeding/Food Package Prescriptions/Food Packages pg 13	Bear River: The following food package issuance criteria applies to fully breastfeeding mothers of hospitalized twins: 1. If both twins can be certified using referral data, the mother receives the 1.5 FBF food package. If the mother chooses to not certify the twins, do not enter infant interviews and select the FBF food package for the mother. Thought this couldn’t happen if the twins’ nutr interviews weren’t completed. Concerns about: iv. If both twins of a breastfeeding mother are hospitalized and neither twin can	

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			<p>be certified due to hospital-provided nutrition support, the mother receives the postpartum package.</p> <p>1. Certify the mother as “Not Breastfeeding”.</p> <p>Doesn’t that require another cert to change mom to breastfeeding from postpartum when babies are discharged?</p> <p>How do you issue a pump to a Not Breastfeeding woman?</p> <p>Why are we making things more difficult or not providing an appropriate food package when her needs as a BF mother are higher - especially if she is pumping for twins?</p> <p>Summit Co: Infants that are receiving nutritional support from the hospital should still be allowed to be certified using referral data but not issued a food package. The policy states that a mother of twins that are receiving nutritional support from the hospital has to be certified as a non-BF mother even if she is BF. Then when the twins come home and mom is still BF, we would have to certify her again (in a short period of time) as a BF mother. Also, if she is listed as a non-BF mother, we are not</p>	<p>We have requested USDA reconsider this mandated policy.</p> <p>We have requested USDA reconsider this mandated policy.</p>
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			<p>hospital provided nutrition support must be certified as Not Breastfeeding. This would create a problem for issuing a pump to sustain milk supply while infants are in the hospital. We are currently not able to issue a pump to a mother marked as Not Breastfeeding. How will we be able to support breastfeeding following this policy?</p> <p>Salt Lake Co: When infant is hospitalized and mother comes to the clinic she usually is breastfeeding and requires a pump. With this policy we are not sure how we will issue a breast pump to a mother that is in VISION marked “Not Breastfeeding.”</p>	<p>We have requested USDA reconsider this mandated policy.</p> <p>All local comments on this policy will be submitted to USDA as evidence/justification that this mandated policy needs to be reconsidered and revised.</p>
<p>Added instruction for special-ordered premature formulas to be prescribed and issued monthly</p>	<p>Y</p>	<p>II. Nutrition Services- Breastfeeding/Food Package Prescriptions/Food Packages pg 31</p>	<p>Utah Co: More clarification on this...could present a real hardship for moms to be returning to WIC every month with a prescription.</p> <p>Bear River: Concern that MD has to prescribe monthly - we are careful in the clinic to only issue</p>	<p>We clarified. Removed prescribed monthly.</p>

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			<p>what is needed - sometimes issuing ½ of a month at a time.</p> <p>Wasatch Co: This seems like extra work for the moms and the doctors. If the doctors are annoyed by WIC policies, they are less likely to support our program. Also, moms with critical infants don't need one more hassle added.</p>	
Changed reference from page number to table	N	II. Nutrition Services- Breastfeeding/Food Package Prescriptions/Food Packages pg 14	<p>Utah Co: Love it! Question: full formula infants only get 435 oz/mo./4 cans for 0-1 month? (KGL)</p> <p>Bear River: Table is excellent. Sent suggested revision to State to simplify it a bit more. Mistake on the 0 - 1 Month fully formula fed infant - should be the same as 1 - 3 months amounts - Could delete the Appendix table since this new one includes all of that information.</p>	<p>Great! The formula amount has been corrected</p> <p>Thank you! Corrected formula amounts and revised table. Also removed redundant tables in Appendix</p>
Requirement to educate on harms of formula has been removed.	N	II. Nutrition Services- Breastfeeding/Food Package Prescriptions/Food Packages p. 15	Utah Co: Thank you! (KGL)	You're welcome.
Added table summarizing FAFAF documentation requirements	N	II. Nutrition Services- Breastfeeding/Food Package	Utah Co: Thank you for the simplification! A few questions: does an infant	<p>You're welcome.</p> <p>In this situation, a care plan is</p>

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		Prescriptions/Food Packages pg 32	need a care plan if MD prescribes Pediasure (for 10 month old who is not HR, for example)? When a new FAFAF comes in during a new cert period, is a care plan required? In other words, how is “A care plan is not required for new FAFAFs” defined? Does the care plan need to discuss the formula specifically? Is a care plan required when the HR child was getting foods and now needs Pediasure 3 months after the cert? Are these High Risk Care Plans (full SOPA) or just Care Plans (SO only)? (KGL)	required only if the 10 month old is HR. No. Care plan content is at CPA and RD professional discretion. This is at the professional discretion of CPA/RD. Care Plans must have at a minimum an A/P.
Guidelines for requesting new model food package in VISION		II. Nutrition Services-Breastfeeding/Food Package Prescriptions/Food Packages pg 26	Bear River: 90% of clinics statewide seems high - If SL or UT counties use it a lot that should be highly considered	Revised wording.
Added the word “complete” to policy on out of state prescriptions.	N	II. Nutrition Services-Breastfeeding/Food Package Prescriptions/Food Packages. p. 33		
Added clarification on needing exact ounce amount on prescription to give a 6-11 month old the 4-5 month allowance.	Y	Nutrition Services-Breastfeeding/Food Package Prescriptions/Food that are Authorized pg 4	Utah Co: Would you send out a letter to all the prescriptive authorities to let them know? I realize we’ll likely still have problems, but it would be helpful to know that they’ve been notified. (KGL)	We will consider in the next communication to doctors. We could remove Full WIC Provision and the prescribing authority would have to enter oz/day.
Added substitution of 32 oz of infant	Y	Nutrition Services-	Utah Co:	This has always been in the

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<p>cereal for 36 oz of breakfast cereal</p>		<p>Breastfeeding/Food Package Prescriptions/Food that are Authorized pg 3 &4</p>	<p>Would you send out a letter to all the prescriptive authorities to let them know? I realize we'll likely still have problems, but it would be helpful to know that they've been notified. Also, what are some examples of a dx to allow this? (KGL) Currently the food card says infant cereal can be substituted for regular cereal so is the food card being changed also? (Marilyn)</p> <p>Bear River: Why is font a different size?</p> <p>Weber-Morgan: Need clarification. Infant cereal is already allowed on the food card. How would staff produce the correct voucher?</p>	<p>regulation as a footnote. We added policy to clarify.</p> <p>The diagnosis would be determined by the doctor.</p> <p>Food Card has been updated.</p> <p>Corrected.</p> <p>Food Card has been updated. Added that a special food letter is required. The check cannot be modified, but the Special Food Letter would specify infant cereal can be purchased.</p>
<p>Added that peanut butter may be issued every month at CPA discretion (no documentation of reason is required)</p>	<p>N</p>	<p>II. Nutrition Services- Breastfeeding/Food Package Prescriptions/Foods that are Authorized p. 10</p>	<p>Utah Co: Thanks</p>	<p>You're welcome.</p>
<p>Added "Organic" to products not authorized for WIC.</p>	<p>Y</p>	<p>II. Nutrition Services- Breastfeeding/Food Package Prescriptions/Foods that are Authorized p. 15</p>		

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Removed Albertsons/Essential Everyday Brands as they are discontinued. Added Signature Kitchens, Signature Farms, Lucerne, Harmons to Store Brand/Private Label Definition	N	II. Nutrition Services- Breastfeeding/Food Package Prescriptions/Foods that are Authorized p. 14		
Added USDA requirement to follow doctor's order for either partial or full month issuance (special formula ordered from state; medical exempt and WIC-eligible nutritionals)	Y	II. Nutrition Services- Breastfeeding/Food Package Prescriptions/Ordering Formula from State pg 2		
Added state RD staff shall consult with local RD staff before making any changes to original order and before submitting in the Ordered Status	N	II. Nutrition Services- Breastfeeding/Food Package Prescriptions/Ordering Formula from State pg 2		
Local RD shall contact State RD indicated in Special Formula Form or State Nutrition Coordinator with questions about the order or the formula amount	N	II. Nutrition Services- Breastfeeding/Food Package Prescriptions/Ordering Formula from State pg 2		
The pharmacy will not accept returned formula that is expired.		II. Nutrition Services- Breastfeeding/Food Package Prescriptions/Ordering Formula from State pg 3	Bear River: Concerns about if the pharmacy delivers expired formula to us. Can't always stop to check order before they leave OR order is shipped to us.	Expired formula delivered to the clinic should not be accepted. Will review and remind CNS.
Added steps for Returning Formula in SharePoint	N	II. Nutrition Services- Breastfeeding/Food Package Prescriptions/Ordering Formula from State pg 3		
Removed that peanut butter must be alternated with beans	N	II. Nutrition Services- Breastfeeding/Food Package Prescriptions/Tailoring	Utah Co: Thanks (KGL)	You're welcome.

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		Food Packages pg 4		
Cheese may be issued every month at CPA discretion (no documentation of reason is required)	N	II. Nutrition Services- Breastfeeding/Food Package Prescriptions/Tailoring Food Packages pg 4		
Deleted “pamphlets, books, videos, and an assorted of videos” from the list of nutrition education materials provided by the state. Added “brochures, self-paced modules, and bulletin boards” to this list. Added statements about having a list of current nutrition education materials and of materials to recycle on SharePoint.	N	II. Nutrition Services- Breastfeeding/Nutrition Education and Counseling/Monitoring & Evaluation (NEP) p. 1		
Removed requirement to discuss negative impact of formula to mothers who are requesting formula for the first time. Added discussing ways to support breastfeeding, if appropriate.	N	II. Nutrition Services- Breastfeeding/Nutrition Education and Counseling/Nutrition and Food Package Counseling p. 1	Bear River: What was added?	“if appropriate for their situation.”
Removed requirement to include breastfeeding content in all infant feeding classes and in child nutrition classes up to age 2.	N	II. Nutrition Services- Breastfeeding/Nutrition Education and Counseling/Breastfeedin g Counseling/Education for WIC Participants p. 1		
Added “as applicable” to breastfeeding topics that need to be discussed for infant and child ages.	N	II. . Nutrition Services- Breastfeeding/Nutrition Education and Counseling/Breastfeedin g Counseling/Education for WIC Participants p. 3		
			Bear River:	

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			<p>Somewhere there is a reference to a \$10 CVV on State materials or in the P&P - just can't remember where I saw it.</p>	<p>This was corrected on State Plan Section III, I. Vendor Management, <i>Cash-Value Voucher Data Fields</i> and <i>Transaction Procedures</i></p> <p>This was also found on previous editions of the WIC ID packet that may still be in use. The 4-2016 update of the ID packet has an \$11 CVV example shown.</p>
		<p>Nutrition Services- Breastfeeding/Food Package Prescriptions/Food Packages</p>	<p>Salt Lake Co: Page 19 – Amount of Formula Provided by WIC, 0-1 month column, for fully formula (no breastfeeding) fluid ounces are incorrect. See page 27 of this section.</p>	<p>This has been corrected. Thank you.</p>
III. Information System				
<p>Ad Hoc Reports document added which describes the ad hoc reports that are available.</p>	N	Ad Hoc Reports		
<p>Participant Violations report to be run at least monthly. Clinic staff must review this report to ensure participant violations have been and resolved.</p>	N	Required Reports		
<p>Added policy that, "VISION should not be downloaded to personally owned computers/devices and should not be used outside of the WIC clinic environment without State Office approval."</p>	N	System Security		
IV. Organization & Management				
<p>Added, "Any remaining paper participant charts/files may be destroyed..."</p>	N	Record Retention		

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V. NSA Expenditures				
VI. Food Funds Management				
VII. Caseload Management				
VIII. Certification, Eligibility and Coordination of Services			Utah Co: This is a little difficult to find since we need to click for the next page for 30-39. Those sections on identity and income, etc are the ones our staff will be checking the most. This may be difficult for some to find. Is there a way to arrange this section earlier so staff can find it? Marilyn	I think you are referring to the order this is posted on SharePoint for the proposed State Plan? It will display differently when posted as the current P&P, and should be easier to navigate. The order of our policies is prescribed by USDA's standard format.
Additional text/phone call messages are being sent to those recently terminated, those with no food benefit pick-up, and those with expiring certifications.	N	Missed Appointments, Termination	Utah Co: Love this. Thanks	
Addition that the Rights and Responsibilities form is available in 12 languages in print and in audio recordings	N	Rights and Responsibilities	Utah Co: This is a great service.	
Policy change to increase penalty for altering checks from a warning to a repayment or one month suspension.	N	Participant Violations		
Policies added regarding wait times in clinics and customer service.	N	Processing Standards		
Clarifications added regarding entering names in VISION from proof of ID.	N	Proof of Identity	Utah Co: Good clarification	
WIC ID packet may be used as proof of identity within the same local agency.	N	Proof of Identity, Transfers	Utah Co: Love this. Thanks	

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Change made to allow flexibility for a local agency stamp to be used on packets instead of individual clinic stamps as a local agency option.			Bear River: When someone transfers between clinics within our local agencies, residency is only required if they change their address? Good that we can use their ID packet as identity within the same local agency.	That is correct, the purpose of proof of residency is to verify they live within your service area. Proof of residency is still required at each certification, just not for transfers if they switch clinics within your agency.
Policy change that “new residency/address records are not required for transfers within the same local agency if there is no change of address.”	N	Proof of Residency, Transfers		
Policy and clarifications added regarding interstate dual participation sharing of information.	Y	Dual Participation		
Update to procedures made due to the implementation of text message reminders	N	Missed Appointments		
Added, “Verify phone number for accuracy at each subsequent appointment to ensure appointment reminder messages can be received.”	N	Steps for Certification	Utah Co: Thank you for including the reason. (KGL)	
Removed requirement for collection of email addresses and changed to recommendation. Added, “If declined or not available leave blank.”	N	Steps for Certification	Utah Co: I appreciate the clarification. (KGL)	
Updates and clarifications made regarding proof of address.	N	Proof of Residency	Utah Co: Could you explain why governmental mail is not acceptable now? (KGL) Utah Co: Could you include info. about using an active out-of-state Medicaid cards? Is it acceptable	Government mail is still allowed; see X. f. It was just removed from the paragraph about exceptions since it is not considered an exception. We can only except current, non-expired forms of ID. Once they move to Utah, their out of state Medicaid card is considered

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			<p>or not for proof of ID on a x-fer? Also, staff are confused about why a Medicaid card for an infant turning 1 is fine for ID on the 31st, but not on the 1st right after it expires. (KGL)</p> <p>Bear River: Question on acceptable proofs of residency: is the “household” definition on acceptable proofs of residency the same as with income and economic units? I ask because we have families who move back in with their parents and do not have anything in their names yet at that address and we have had them bring a utility bill in their parents name and have their parents write a letter stating they are staying with them. I see on letter C that this cannot be a letter from someone at the same address but they are not in the same household. RESIDENCE vs. household terminology</p>	<p>expired and no longer a valid form of ID.</p> <p>Proof of residency cannot be a letter from the parents or roommate (acting as a landlord) living in the same home. The letter from the parents can be accepted if accompanied with a current bill in the parents name at that address.</p>
Updated “immunization card” to “immunization record”	N	Proof of Identity		
			<p>Utah Co: We need clarification about what to do when a client’s vouchers are mistakenly given to another family and cashed. As it stands now the client is not able to get</p>	<p>This is a clinic error that cannot be resolved in VISION as redeemed checks cannot be reprinted. Clinic staff and clients ought to be reviewing their checks for errors/missing/extra</p>

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			<p>those vouchers replaced and puts the participant at nutrition risk for that month. (KLG)</p> <p>Utah Co: Please add clarification about when to use last year's income tax return. There are various interpretations among staff about when it can be used or not (self-employed, paid with cash, etc.) (KGL)</p> <p>Utah Co: Please add procedure for how to do adjunct eligibility with newborns that do not have a Medicaid number at time of cert. Does the mom have to bring the # in at the next WIC appt. or can we get the number off the Medicaid lookup tool once available? (KGL)</p> <p>Utah Co: Request: for Provisional certs it says that 30 days of benefits will be issued, but this is not the case;</p>	<p>checks when they sign for them.</p> <p>Tax returns are generally used when it is more appropriate to assess annual income versus current income. It is normally best to report annual income and use a tax return for those who are self-employed. These situations can be discussed on a case by case basis as necessary.</p> <p>These specifics were not added to avoid confusion with USDA reviewers. The mom should bring the card with the number to the next appointment or staff can look it up on the Medicaid Lookup Tool.</p> <p>We are not able to find such a quote. Please let us know if we missed it. III. d. states: "When Certify-Provisional is selected,</p>
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			<p>it only issues the current month which could be the full 30 days or 2 days worth, depending on when the appt. is. Thus, we are not issuing 30 days; can this be clarified? (KGL)</p> <p>Utah Co: Income question under special circumstances, page 3 #d. “When a person makes regular withdrawals from any type of savings account to cover living expenses, these withdrawals are considered income for WIC purposes.” There is some confusion with our staff. Some assume all of the income withdrawn should be counted as income. Others think only that money used for “living expenses” should be used when the client withdraws money for other purposes also. Can you clarify this. Thanks, Marilyn</p>	<p>the system will allow the participant to be issued the current month’s checks but will require proof before additional checks are issued.”</p> <p>According to the <i>Income Types</i> document, which states: “Other cash income. Includes, and is not limited to: cash amount received or withdrawn from any source including savings, investments, trust accounts and other resources which are readily available to the family.” Which is interpreted to mean that all withdrawals would be considered income (especially if there is not another income source to report). This is a USDA policy and can be discussed on a case by case basis.</p>
IX. Food Delivery and Food Instrument Accountability and Control				
Clarifications added regarding reasons for missing signatures and documentation requirements	N	Check Handling and Issuance		
X. Monitoring and Audits				
Various questions on Self Evaluation Tool added, removed or updated.	N	Self Evaluation Tool		

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XI. Civil Rights				
Clarification added from USDA regarding Non-discrimination statement printing.	Y	Non-discrimination Statement		

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SECTION III- STATE OPERATIONS				
I. Vendor Management				
Updates made to clarify and enhance vendor authorization policies and requirements (these changes will also need to be made to the vendor agreement)	N	Vendor Authorization		
Updates made to food stocking requirements. (these changes will also need to be made to the vendor agreement)	N	Food inventory requirements		
Policy added to allow flexibility in the computation of maximum allowable reimbursement levels.	N	Food Price Reporting List		
Policy modification that the state will reassess currently authorized vendor's peer grouping as needed.	N	Evaluation of Currently Authorized Vendors		
Updated soy based contract formula provider. Clarification added that a list of authorized vendors is available on the Utah WIC website.	N	Names of Companies Participating in Food Delivery		
Removed Albertsons/Essential Everyday Brands as they are discontinued. Added Signature Kitchens, Signature Farms, Lucerne, Harmons to Store Brand/Private Label Definition	N	Definitions in Food Delivery		
II. Nutrition Services & Breastfeeding				
III. Information System				
IV. Organization & Management				
V. NSA Expenditures				
VI. Food Funds Management				

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VII. Caseload Management				
VIII. Certification, Eligibility and Coordination of Services				
IX. Food Delivery and Food Instrument Accountability and Control				
X. Monitoring and Audits				
XI. Civil Rights				
Other Comments:				