

VIII (A). CERTIFICATION, ELIGIBILITY AND COORDINATION OF SERVICES

GOAL: Streamline the certification process and ultimately reduce appointment time by 1) accessing the WV Health Information Network (WVHIN), a health information portal which would provide necessary program health surveillance, and 2) utilizing a document sharing and electronic signature portal for eligibility documentation, medical information, and referrals prior to appointment.

METHODOLOGY: The WIC Innovation Grant awarded to Pennsylvania and West Virginia through the Council of State Governments will support Medical Liaison (ML) positions that will: 1) access the WVHIN to collect anthropometric information for participant certification; 2) manage a document and electronic signature portal for their assigned Local Agency area; and 3) establish and maintain relationships with Primary Care Physicians to educate on the WIC Program, eligibility, and the benefits of sharing information using the WVHIN.

By a data agreement and participant acknowledgement form, MLs will have access to medical records within the WVHIN. The first phase is to access height, weight and hemoglobin values collected by a health care professional. The WIC Program will utilize these for participant certification if the values were collected within the most recent 60 days.

ML will also request and collect residency, income and identity documentation via a document sharing portal. Likewise participant signatures can be collected for participant agreements, EBT cardholder agreements, and benefit issuance acknowledgement via the portal as well as documents for referrals and medical prescriptions. Ultimately, this will support continuing some portions of WIC services virtually. With eligibility documentation, medical information, and referrals being addressed prior to the appointment, it is intended to decrease the time and frequency of in person appointments for participants. With documentation required for the certification appointment being provided prior to the appointment as well as questions or barriers addressed before the participant arrives in the clinic, this streamlined certification process should reduce the appointment time for participants.

State and local agency will work together to continue to incorporate telehealth into WIC services and remain on pace with changes in healthcare technology to ensure service delivery and eliminate barriers for participation.

EVALUATION: Evaluation will be conducted with the assistance of the Gretchen Swanson Center for Nutrition (GSCN). The State and local agency will utilize Crossroads reports to collect data to assess pre/post changes for decreasing

the time for appointments and reducing redundancy of tasks required for certification. The sampling size determined by GSCN will be large enough (0.5 effect) to detect as few as a 7-minute difference in average appointment time.

Medical Liaisons will be tracking the number of records accessed in the WVHIN, the number of participants with up-to-date anthropometric measures, the number of documents received via the portal, and the number of physicians visited for outreach.

STATUS:

This is a new goal for FY2022. Six local WIC agencies are participating in the Innovation Grant. Seven FTE medical liaisons will be hired and onboarded June – August 2021. Data will be collected for the Non-Intervention stage monthly from September 1 – January 31, 2022. Data for the Intervention stage will be collected February 1, 2022 – June 20, 2022, monthly and submitted to GSCN. All data analysis and final report will be done by GSCN.