Whom Should I Refer to WIC?

Families are income-eligible for WIC if they are earning a moderate-to-low income (living at or below 185 percent of the federal poverty guidelines). Families are automatically income-eligible if they participate in Medicaid or the Supplemental Nutrition Assistance Program (SNAP). WIC serves individuals who are

- pregnant;
- breastfeeding up to one year after delivery;
- postpartum up to six months after delivery (including recent pregnancy loss); or
- an infant or child from birth to 5 years old.

The WIC nutritionist will confirm eligibility, including assessing nutritional risk.

Did You Know?

- Individuals are eligible for WIC regardless of their immigration status.
- Parents, grandparents, foster parents, or guardians who care for eligible children can apply for WIC for their family.
- Families receiving Medicaid or SNAP are automatically income-eligible for WIC.
- Many working and military families may be eligible for WIC and not know it.

Your Referral Matters

About half of all babies born in the U.S. are eligible for WIC. Of those, almost 98 percent participate. Children between the ages of 1 and 5 are still eligible for WIC, but the participation rate of eligible children declines after infancy. Only about one-quarter of eligible 4-year-old children participate in the program. As a health care provider, you are a trusted messenger; so your referral and education regarding WIC can help eligible families, especially those with children between 1 and 5 years old, receive the program’s critical nutritional resources.
Research Shows WIC Produces Results

Participation in WIC

- improves birth outcomes, including lower risk of preterm birth, low birth weight, being small for gestational age, and infant death;
- develops healthier eating habits and enhances dietary quality;
- fuels children’s health and learning;
- supports healthy growth and development; and
- reduces health care costs.

How WIC Operates

WIC is federally funded through the U.S. Department of Agriculture (USDA) and is operated through local clinics by state WIC agencies and Indian Tribal Nations. WIC food packages are prescribed to WIC participants based on their specific nutritional needs and include a variety of foods intended to supplement their diets.

WIC-authorized foods include fruits, vegetables, milk, soy milk, yogurt, cheese, tofu, eggs, 100 percent fruit juice, iron-fortified cereal, tuna, peanut butter, beans, whole-grain bread, tortillas, and rice, as well as infant formula, specialty formula, baby food, and infant cereal.

Local WIC agencies distribute monthly WIC food package benefits to participants by providing a WIC electronic benefits transfer (EBT) card. Participants use their EBT card to shop for WIC foods at authorized grocery stores and other WIC-approved vendors. WIC guarantees a specific amount of each WIC food apart from the fruit and vegetable benefit, which has a cash value. For example, participants receive a voucher for one dozen eggs, but the fruit and vegetable voucher will allow the participant to purchase a specific dollar amount of fruits and vegetables each month.

Help Connect Families to WIC

Display WIC brochures in your health care setting and include them in new-patient information.
You can find state-specific information and handouts on WIC from your state’s WIC agency website.

Make referrals to your local WIC program.
Visit your state’s WIC agency website for online referral forms and options.

Tell your patients about WIC’s services and benefits, and encourage them to apply.
Families can contact their local WIC agency or state-specific toll-free number to schedule an appointment.

Coordinate with your local WIC agency to determine the best way to share information.
Effective coordination includes a range of activities depending on need and resources: creating cross-referrals systems, sharing health and medical data, maximizing the value of primary care nutrition services, and co-locating services. Sharing nutritional assessment data reduces the number of times participants must go through height and weight measurements, and blood tests for anemia.

Additional Resources

For more information on WIC and making WIC referrals, access the following resources:

1. The American Academy of Pediatrics and the Food Research & Action Center’s publication, Screen and Intervene: A Toolkit for Pediatricians to Address Food Insecurity;
2. Your state WIC agency website;
3. The American Academy of Pediatrics Food Insecurity webpage, which includes a webinar regarding pediatricians’ role in maximizing WIC’s support of health and food security;
4. The Food Research & Action Center’s WIC webpage; and
5. USDA’s WIC webpage.

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2. Georgia, New Jersey, Puerto Rico, and the District of Columbia are in the process of switching benefit delivery from paper vouchers to an electronic benefit transfer system.
3. For more information on ways to coordinate with your local WIC clinic, view the Food Research & Action Center’s report Making WIC Work Better: Strategies to Reach More Women and Children and Strengthen Benefits Use.