

TO: Sally Zubairu-Cofield, Director of the Pennsylvania Bureau of WIC
FROM: Radha Pennotti, Policy and Strategy Senior Associate, on behalf of listed PolicyLab team members
SUBJECT: Considerations for the 2023 WIC State Plan of Program Operation and Administration in Pennsylvania
DATE: May 31, 2022

As pediatricians, child health researchers, and policy professionals, we recognize the importance of the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC), and are thrilled to welcome you as the new Director of the Pennsylvania Bureau of WIC. We thank you for your leadership of the critical program, and especially for your early efforts in planning for a transition to an online Electronic Benefits Transfer (EBT) card reloading program, reviewing and considering policy changes to improve user experiences, and in connecting directly with WIC offices.

While WIC enrollment has recently started to increase in PA, we are acutely aware that many who are eligible for WIC services are still not receiving these benefits. In this memo, we present recommendations to improve PA WIC access and enrollment, based on research conducted by investigators at [PolicyLab](#) at Children's Hospital of Philadelphia. The recommendations seek to leverage policy flexibility and partnerships to lower barriers to accessing WIC services and, ultimately, ensure adequate nutrition for all new mothers and young children across the commonwealth. We partner with Thriving PA and also point you to the [overarching recommendations](#) put forth by many members of the nutrition subgroup and submitted by the Greater Philadelphia Coalition Against Hunger.

We hope that our findings can inform Pennsylvania's 2023 WIC State Plan to the United States Department of Agriculture (USDA) and your continued work to meet the needs of WIC beneficiaries.

Background

Central to our recommendations is improving uptake of the WIC program. In the commonwealth, as you are aware, about [half](#) of eligible families access WIC benefits. By contrast, [over 95%](#) of demographically similar families are accessing Supplemental Nutrition Assistance Program (SNAP) benefits. We believe that a significant driver of the different uptake rates between these food assistance programs is the administrative burdens families experience in the WIC program. The commonwealth should continue to [lower barriers](#) to WIC enrollment and participation in order to deliver benefits to more eligible families.

One way to lower these barriers is to explore where the commonwealth can add additional flexibility to state policies to better support current and potential participants. For example, we are encouraged that Pennsylvania pursued all three of USDA's waivers to promote access to safe infant formula for WIC beneficiaries during the recent national formula shortage. The commonwealth can also look to WIC programs in other states to explore models of innovation. For example, PolicyLab at CHOP partnered with Thriving PA to co-host a [virtual conversation](#) during which we heard from South Carolina's WIC Director about their web-platforms ([website](#) and [app](#)) that enable mobile access to WIC benefit information and virtual nutrition education.

CHOP PolicyLab research on accessing food assistance

Our research focuses on the barriers and facilitators to accessing safety net programs, including WIC, with a specific focus on better understanding caregiver perspectives. We find that families are struggling with PA WIC's enrollment requirements, and that reducing the administrative burdens placed on families could increase WIC uptake. Further, our research during the pandemic highlights

that the lack of flexibility in WIC's operations significantly impacted access to benefits during the pandemic-associated closures and we must consider these scenarios in future program design.

Impact of offline benefit reloading

Our research team [studied](#) whether offline EBT reloading limited access to benefits during the pandemic when eligible families may have needed them most. To estimate this, we compared WIC participation before and during the pandemic in online and offline EBT states. Prior to the pandemic, WIC participation declined in both online and offline states. During the pandemic, however, WIC participation increased sharply in online EBT states while it continued to decline in offline EBT states. As of January 2021, we estimate that WIC participation [was 14% lower in offline states](#), relative to online states. In the same time frame, there was no significant relevant change in SNAP participation in offline states, suggesting that the requirement for in-person or mail-in benefit reloading was likely a major driver of these differing participation trends.

Challenges with WIC enrollment and re-enrollment during the Pandemic

In qualitative research conducted during the pandemic, families who participate or are eligible for WIC benefits highlighted how barriers to accessing WIC were further exacerbated by the pandemic.

We routinely hear from families that the in-person enrollment requirement is challenging, requiring resources and time for travel and child care. During the pandemic in particular, families raised how these burdens also put themselves and their children at risk. Caregivers specifically shared:

*“It’s hard trying to get on any [government benefit] program because you have to go to the office in person and fill out paperwork... **If I could do it over the phone, it would be good.** But to actually go there, I have to figure out who’s going to watch my other kids. It’s just a lot.”ⁱ*

*It’s a mess with COVID. **I’m not comfortable and it’s not safe for me to bring my son to the WIC office.** It’s not like SNAP that loads itself. They didn’t think that far ahead when they made this system.”ⁱⁱ*

Importance of flexibility to support WIC benefit utilization

WIC beneficiaries also described that the inflexibility of the WIC program limited their purchasing power and ability to access community resources during the pandemic. The current formula shortage has again highlighted the need for more inherent flexibility within the WIC program.

*“With WIC, **it’s just hard to use, cause you’ve got to kind of do a scavenger hunt in the grocery store...**You can only buy certain foods, so you have to find the [WIC] labels, and in some grocery stores they don’t even have those so then you have to ask someone, “What can I buy with WIC here?” and that’s really difficult.”ⁱ*

Families expressed similar challenges regarding produce access and use of WIC Farmer's Market Nutrition Program (FMNP) benefits. Families cite difficulty finding or accessing locations where these benefits can be used, determining appropriate items and maximizing the dollar value.

*“Well, I had gotten it [FMNP checks], but I **haven't had a chance to go to the farmer's market.** I know that it's basically fresher, I should say, foods that they have there. I just have not had a chance to go to it.”ⁱⁱⁱ*

*“I use[d] it before, but **a lot of times those checks don't fit,** to be honest. I'm just being honest because the same thing with the time, with the time and the location.”ⁱⁱⁱ*

As one strategy to increase produce access for WIC eligible families during the pandemic, our team implemented a pilot program delivering low-cost fresh produce to families with young children and studied the impact of price on participation. Interest and uptake of this program was high during the period where it was free, but dropped off precipitously during the period when participants needed to pay for it—regardless of price—unless participants were SNAP beneficiaries.^{iv} Due to restrictions on WIC benefits, participants were unable to utilize their WIC benefits to purchase the subsidized produce boxes, while families with SNAP benefits could.

Recommendations

We offer the following five recommendations for consideration in the development of the 2023 State WIC Plan to help increase uptake rates in PA's WIC program. Based on our recent research in this area, summarized above, our recommendation highlight areas where the commonwealth can leverage policy flexibility to lower service barriers.

- 1. *Transition to an online benefits reloading platform with long-term viability.*** Pennsylvania is one of only nine states that uses an offline EBT system through which families must appear in person to reload their benefit cards. We commend the PA WIC program for waiving this requirement during the pandemic and allowing families to mail in their eWIC cards. Nonetheless, PA's offline EBT system creates a barrier to accessing services for many caregivers. While a transition to an online platform should be done swiftly, the commonwealth should invest in the system that will serve vendors and beneficiaries well into the future.

In the meantime, the commonwealth should continue to take up USDA flexibilities that will reduce administrative burden on families, such as issuing up to four months of WIC benefits on EBT cards at one time for those state agencies with offline systems.
- 2. *Modernize the WIC user experience.*** Across the country, WIC programs are innovating to make the experience user-centered. Many states employ apps which can allow beneficiaries to check their balance, identify recipes, determine eligible products and locate WIC offices and vendors. Recent research suggests that apps may lead to [greater redemption rates](#). Other programs offer virtual nutrition education, allowing participants to complete the courses at convenient times and without having to travel. Finally, online shopping pilots are [promising](#) as well and could eliminate the stigma and inconvenience associated with finding and purchasing WIC-approved products in store. We see opportunities to explore remote certification and renewal too, and we encourage the commonwealth to pursue all available options as well as be at the forefront of requesting other flexibilities that will improve the WIC beneficiary user experience.
- 3. *Utilize adjunctive eligibility to simplify the enrollment process and improve WIC participation.*** Adjunctive eligibility could reduce the documentation burden placed on eligible WIC beneficiaries who participate in other social welfare programs, such as SNAP, Medicaid, Children's Health Insurance Program (CHIP) or Temporary Assistance for Needy Families (TANF). Adjunctive eligibility determination can be improved through robust data sharing across agencies, allowing WIC staff to electronically determine participants' eligibility and proactively contact and enroll WIC-eligible clients while shifting the documentation burden away from these beneficiaries. The commonwealth should consider opportunities to streamline enrollment, employ effective [proactive outreach](#) to families enrolled in these other programs and build partnerships with the relevant state agencies to enable coordinated outreach to WIC eligible families.

- 4. Reduce number of required in-person visits for WIC participants by working with health care providers and partners to obtain health data.** Federal rules strongly encourage WIC programs to integrate with health care providers, and permit WIC staff to accept documentation of nutritional risk, height/weight measurements, and blood tests done by medical professionals including doctors, nurses and certified nutritionists. As health care providers, we know how difficult it is for low-income families with young children to travel to multiple appointments. Coordination with primary care medical teams and sharing health data electronically (with a patient confidentiality waiver) can make it easier for families to participate in WIC by reducing the number of visits needed for infants and young children. Data from the National WIC Association indicate that the majority of WIC participants are supportive of this. More specifically, 60% of those surveyed liked obtaining and submitting health data from their doctor's offices, as they did during the pandemic.

The commonwealth should also look for other opportunities to coordinate health assessments. Other state WIC agencies [certify families](#) at Head Start locations, combining required health assessments for both programs in a single visit.

- 5. Enable use of the WIC Farmers Market Nutrition program in a wider range of settings.** Pennsylvania can further leverage the existing program infrastructure to help alleviate barriers to access to fresh produce through the Farmers Market Nutrition Program by 1) loading these benefits on the WIC EBT card; 2) enabling benefit use in a wider range of settings (i.e., online farmer's markets and CSAs); 3) increasing the benefit amount with [state, local or private funds](#) and; 4) considering opportunities for reciprocity with neighboring states, such as Ohio and New Jersey, when certifying farmers to allow beneficiaries to purchase products from out-of-state farmers vending at in-state farmers markets.

We are happy to share more about our research and recommendations and to discuss how we can work together towards shared objectives.

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ⁱ Vasani A, Darko O, Fortin K, Scribano PV, Kenyon CC. Community Resource Connection for Pediatric Caregivers with Unmet Social Needs: A Qualitative Study. *Academic Pediatrics*. Published online September 2021: S1876285921004538. doi:10.1016/j.acap.2021.09.010.

ⁱⁱ Lubrano, A. Low-income women have to appear in person to get WIC benefits. Advocates say that increases their COVID-19 risk. *The Philadelphia Inquirer*. Feb 26, 2021. <https://www.inquirer.com/news/wic-pennsylvania-coronavirus-risk-ebt-20210226.html> Accessed May 25, 2022.

ⁱⁱⁱ Joshi P, Van Remortel B., Cullen D. Fresh Start: Experiences with Produce Access Among WIC-Eligible Families. Pediatric Academic Societies (PAS) 2021 Virtual Meeting, May 2021.

^{iv} Joshi P, Van Remortel B, Rameswaran J, Cullen D. Randomized Controlled Trial to Evaluate Effect of Pricing Structure on Participation in a Home-Delivered Produce Box Program among WIC-eligible Families. Pediatric Academic Societies (PAS). Colorado, April 2022.