

## Subject: Factors Affecting Eligibility

## Item: Priority Ranking System

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### **PURPOSE:**

To ensure that LAs adhere to federal regulations when prioritizing applicants for participation.

### **POLICY:**

I. LA staff must fill waiting list vacancies which occur after an agency has reached its maximum caseload allocation. In order to assure that those persons at greatest nutritional risk receive program benefits, LA CPA staff must apply the following participant Priority Ranking System.

II. Priority ranks

The following breakdown includes the Priority Ranks I-VI, the categories for which they apply, and the sub-priority/description.

A. Priority I

1. Prenatal

a. Prenatal women who meet one or more of the anthropometric, biochemical, or clinical risk criteria.

2. Breastfeeding

a. Breastfeeding women who meet one or more of the anthropometric, biochemical, or clinical risk criteria, and women who are breastfeeding an infant who qualifies for Priority I.

3. Infant

a. Infants who meet one or more of the anthropometric, biochemical, or clinical risk criteria, and infants who are being breastfed by a woman who qualifies for Priority I.

B. Priority II

1. Breastfeeding

a. Women who are breastfeeding an infant who qualifies for Priority II.

2. Infant

a. Infants under six months of age who do not qualify for Priority I ranking and who were born either to Program participants or to women who were not Program participants during pregnancy but who would have met the anthropometric, biochemical, or clinical risk criteria during pregnancy.

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## C. Priority III

## 1. Children

- a. Children who have not yet reached their third birthday and who meet one or more of the anthropometric, biochemical, or clinical risk criteria.

## 2. Non-breastfeeding

- a. High-risk non-breastfeeding women with anthropometric, biochemical, or clinical risk criteria.

## 3. Children

- a. Children who have reached their third birthday and who meet one or more of the anthropometric, biochemical, or clinical risk criteria.

## D. Priority IV

## 1. Prenatal

- a. Prenatal women who meet the dietary risk criteria and who exhibit no other risk factors.

## 2. Breastfeeding

- a. Breastfeeding women who meet the dietary risk criteria and who exhibit no other risk factors and women who are breastfeeding an infant who qualifies for Priority IV.

## 3. Infants

- a. Infants who meet the dietary risk criteria and who are being breastfed by a woman who qualifies for Priority IV.

## E. Priority V

## 1. Children.

- a. Children who meet the dietary criteria and who exhibit no other risk factors.

## F. Priority VI

## 1. Nonbreastfeeding.

- a. Low-risk nonbreastfeeding women with anthropometric, biochemical, clinical or dietary risk criteria.

## III. Breastfeeding woman and breastfed infant

- G. A breastfeeding woman at nutritional risk and her breastfed infant at nutritional risk must be placed in the highest priority for which either is qualified.

IV. Sub priorities

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- H. In the event that the LA has reached its maximum caseload allocation and is unable to enroll all applicant categories within a priority, the LA must enroll applicants based on their order of preference in the sub priorities.
- V. Health maintenance/regression
  - I. For information regarding the priority ranking of participants who were certified on the basis of regression in nutritional status at a subsequent certification.
- VI. Caseload management
  - J. LAs which are participating at or above their maximum contracted caseload allocation and are unable to serve all priorities may limit certifications within the lowest priority or sub priority. Participants may be certified selectively within the lowest priority/sub priority which the LA is able to serve, based on any one or combination of the following factors:
    - 1. Third level relative severity of indicators of nutritional need.
    - 2. Participant's age.
    - 3. Number of months following delivery if the participant is a postpartum woman.
- VII. LA policy
  - K. The LA policy regarding which participants within the priority/sub priority will be certified must be made by the LA nutritionist/registered dietitian, and the criteria used must be retained on file at the LA. A copy of the written criteria used to manage the agency's caseload allocation must be forwarded to CDPH/WIC within 15 days of implementation.
  - L. LAs may not establish criteria to certify participants selectively in any priority/sub priority other than the lowest one which the agency is able to serve. For example, LAs may not certify participants selectively within Priority III if they are currently certifying any participants in Priority IV.
  - M. Caseload management based on other factors, e.g., shortened certification periods for currently enrolled participants, is not allowed.

**AUTHORITY:**

[7 CFR §246.7\(e\)\(4\)](#)