

## **Staff In-service: Medical Documentation**

**Target Audience:** Required for all WIC CPA's and Nutritionists

### **Required training and documentation of completion**

Completion of this in-service is required. Coordinators must assure that staff complete this in-service by 4/30/2009. Follow this process to document staff have completed the in-service:

1. Plan time for staff presenting in-services to review the attached information.
2. Schedule time (approximately 1.5-2 hours) for staff to complete the in-service by 4/30/2009.
3. Identify times for staff discussions and decisions about how your agency will implement that particular item.
4. Have staff sign the attendance roster provided on Page 12 of this document.
5. Keep the signed roster on file with other training documents.
6. Submit the list of names of staff that have completed the training to Diane Arnold ([diane.arnold@state.or.us](mailto:diane.arnold@state.or.us)) by 4/30/2009. Submission can be by: FAXing the sign in sheet; sending an email containing the staff names, date of training and the in-service title; or, sending the Excel spreadsheet from the website.
7. Staff completing all the required Fresh Choices training elements by the completion date will receive a certificate of completion.

### **In-service overview**

The following in-service outline uses a facilitated discussion format. You may use the in-service discussion guide alone or along with a PowerPoint presentation. Information in the PowerPoint is also found in the discussion guide. Facilitated discussion allows staff to participate in the training, express feelings or concerns about the subject, and contribute to the development of solutions. Facilitated discussions model participant-centered education by asking open ended questions and providing for feedback from staff participating. The in-service has been divided into multiple activities to allow flexibility in scheduling.

**Goal:** Introduce staff to the medical documentation requirements of the new food packages for women, infants and children with qualifying medical conditions.

**Note:**

- Focus of this in-service will be participants with qualifying conditions requiring medical documentation.
- A separate in-service will address anticipatory guidance issues and will include issues specific to medical documentation.
- Medical documentation issues specific to TWIST will be addressed along with other Fresh Choices TWIST training.

**Additional information on medical documentation coming**

This in-service is only one way information on medical documentation changes and how to handle participants' concerns will be provided for staff.

**Support materials packet:** Additional information will be sent in April to help you provide anticipatory guidance to participants and health care providers in your community.

**Statewide meeting:** More detailed information about medical documentation will be presented at sessions at the statewide meeting in June.

**Technical Assistance conference calls:** There will be 2 conference calls where WIC coordinators, training supervisors and nutritionists can get questions answered regarding medical documentation – March 18 at 3:30-4:30 p.m. and April 14 at 3:30-4:30pm.

**Objectives:**

- Staff will be able to describe why medical documentation requirements are changing.
- Staff will be able to understand definitions and technical requirements related to medical documentation.
- Staff will be able to identify changes to food packages for participants with qualifying medical conditions.
- Staff will be able to describe how to access, complete and return the medical documentation form.
- Staff will be able to explore ways to communicate changes in a participant-centered manner that supports breastfeeding, developmentally appropriate feeding practices, and meets the unique medical conditions of the participant.
- Staff will identify strategies for implementing the medical documentation changes listed in this in-service.

- Staff will identify questions regarding medical documentation changes; support and resources needed at the local agency level to assist in successful implementation of the medical documentation requirements of Fresh Choices.

### Materials:

PowerPoint presentation – Medical documentation.ppt

Activity 1: PowerPoint presentation, Section 1 (Slides 5-9)

Activity 2: PowerPoint presentation, Section 2 (Slides 10-19)

Activity 3: PowerPoint presentation, Section 3 (Slides 20-28)

Handout, 2 sided: *Medical documentation definitions*

Handout, 2 sided: *WIC Medical documentation form*

Handout, 1 sided: *Qualifying conditions for issuance of WIC medical formulas or medical foods*

Activity 4: PowerPoint presentation, Section 4 (Slides 29-34)

Activity 5: PowerPoint presentation, Section 5 (Slides 35-41)

### Presenter Preparation:

- ◆ Read the materials provided and review the PowerPoint slides.
- ◆ Information in quotes are talking points to guide the presenter.
- ◆ ↩ Symbol indicates a key point to cover.
- ◆ Arrange meeting time and space for staff.
- ◆ If using the PowerPoint presentation arrange for the appropriate equipment.
- ◆ Make copies of the appropriate handouts.

Estimated time: 1.5 to 2 hours, depending on discussion time.

### Activity 1: Why is Medical Documentation Changing?

PowerPoint slides 5-9 cover the material below.

**Introduction:** “As we move towards implementing Fresh Choices, we want to talk about how these changes will impact the participants we serve. Today we will focus on medical documentation for participants with qualifying conditions. Some things will be changing, but our support of breastfeeding, developmentally appropriate feeding practices and providing participant-centered service remains unchanged. Many of the changes to the food packages were designed to support improved communication and coordination of care for our participants who are medically fragile

and/or have medical conditions which require changes to their food packages. How we talk about these with participants can make a difference in how they react to the changes.”

**Activity:** Review Section 1 of the PowerPoint presentation (Slides 5-9)  
Discuss key points.

Key discussion points:

- ⇒ Medical documentation is a means of communication and coordination of care between WIC participants, health care providers and WIC staff.
- ⇒ Medical documentation supports WIC staff by having the HCP provide medical oversight of the dietary management for our shared patients.
- ⇒ Medical documentation is not a medical prescription. We want the message to be that the Oregon WIC medical documentation form is the standard form for health care providers to use.
- ⇒ Medical documentation covers foods; medical prescriptions do not. Medical documentation includes requirements designed by USDA for the purpose of ensuring that the participant’s healthcare provider, licensed in the State to write prescriptions, has determined that the supplemental foods are not medically contraindicated by the participant’s qualifying condition.

**Discussion questions:**

- “How do we currently discuss medical documentation/prescriptions when we talk with families?”
- “How will we explain the changes to medical documentation to our participants?”

### **Activity 2: When do we need medical documentation?**

PowerPoint slides 10-19 cover the material below.

**Introduction:** “The way we need and use medical documentation is the same in many ways: to issue non-bid infant formula, medical infant formula and medical formula/food. What has changed is the requirement for medical documentation in order for a participant with qualifying conditions to receive their WIC foods, for providing whole milk and soy beverages. And a big change is in how we do business, that the WIC medical documentation form will be the standard form for health care providers to use in place of prescriptions.”

**Activity:** Review Section 2 of the PowerPoint presentation (Slides 10-19)  
Discuss key points.

**Key discussion points:**

- ⇨ Medical documentation is required for:
  - Non-bid infant formulas (Good Start).
  - Medical infant formulas (Nutramigen, Pregestimil)
  - Medical formula/foods (Pediasure, Nutren Junior, Peptamen Junior)
  - Whole milk for children (2 years and older) and women who are also receiving a medical formula/food as a means of increasing calories needed for their qualifying medical condition.
  - Soy beverage for children (1 year and older) who have been diagnosed with a milk allergy, severe lactose intolerance or vegan diet.
- ⇨ Specific to soy beverages:
  - USDA views vegan diets as a qualifying condition, not a personal preference.
  - According to USDA, medical documentation for soy beverages for children ensures that a child's HCP is aware that the child may be at nutritional risk when milk is replaced by other foods.
  - The Institute of Medicine position on soy beverages: while soy products may be an appropriate choice for children who cannot consume milk, soy should not be made available to satisfy participant preference in the absence of medical need.
- ⇨ The elements of the medical documentation that are remaining the same:
  - Must be signed by health care providers with prescriptive authority in Oregon. HCPs with prescriptive authority includes:
    - Physicians (MDs)
    - Physician Assistants (PA)
    - Osteopathic Physicians (DO)
    - Nurse Practitioners (NP)
    - Naturopathic Physicians (ND)
  - How the local agency receives, stores and retains the form will remain the same.
  - The types of formula Oregon WIC issues will remain the same.
- ⇨ The changes in medical documentation mainly pertain to the inclusion of WIC supplemental foods that have to be approved by HCPs.

- The elements of the medical documentation that are changing:
  - The WIC medical documentation form will be the standard form to use. If a local agency has a form they would prefer to use, and it includes the required USDA technical requirements, the local agency can submit the form to their assigned Nutrition Consultant for approval.
  - The CPA can work with the family and the HCP to customize the medical formula and food package to best meet the needs of the participant. Options include but are not limited to:
    - Full food package and full formula package.
    - Full food package and adjusted amount of formula.
    - If an older infant cannot consume solids (i.e. choking, gagging on solids, aspiration risk) they are eligible to receive a higher maximum of formula.
    - Modification of the food package to eliminate foods which are contraindicated based on the qualifying medical condition.
  - If a HCP submits a prescription for medical formula, the CPA can:
    - Contact the HCP to confirm the request and obtain information regarding supplemental foods.
    - Send the WIC medical document to the HCP (fax, mail or delivered by WIC participant) to sign and return.
    - One month issuance of food and formula will be allowed with written documentation to be received within two weeks.

### Discussion questions:

- “What will be the biggest change for our WIC participants to understand regarding medical documentation?”
- “What will we say about this change?”
- “What will be the biggest change for our HCPs to understand?”
- “How will we address the questions that might arise from HCPs?”

### Activity 3: Understanding the medical documentation form and definitions

PowerPoint slides 20-28 cover the material below.

**Introduction:** “The medical documentation process to the new food packages have changed to improve how WIC provides medical formulas/foods, soy beverages and supplemental foods to participants with medical determination of qualifying conditions. This activity will focus on the medical documentation form, definitions associated with the form, and the USDA list of

qualifying conditions. At the end of this activity, we will take an existing medical documentation form for one of our participants and complete the new medical documentation form. From this activity we will begin to identify similarities and differences in our medical documentation process.”

**Activity:** Review Section 3 of the PowerPoint presentation (Slides 20-28)  
Review handout: *Medical documentation definitions.*  
Review handout: *Medical documentation form.*  
Review handout: *Qualifying conditions for issuance of WIC medical formula or medical food.*  
Select a medical documentation for an existing participant for application to the new form.  
Discuss key points.

**Note:**

- The forms presented in this activity are still in draft form. If your program identifies areas of improvement for these forms, please submit your suggestions to your Nutrition Consultant. The forms will need to be in the final version by the end of March, 2009.
- Please forward questions that arise when completing the medical documentation form activity to the State office. These questions will be integrated into the anticipatory guidance in-service that will be released next month.

**Key discussion points:**

- ↔ Sections A and C on the medical documentation form relate to participant and HCP contact information
- ↔ The term patient and participant are used interchangeably on the form with the term ‘participant’ being a WIC-related term.
- ↔ Section B provides the majority of information regarding food package assignment. Information to be aware of when completing the form:
  - Name of medical formula/food or soy beverage:
    - ↔ Name of medical formula or food
    - ↔ Soy beverage (AKA soy milk): At this time, only one soy beverage has been approved for use in Oregon, Pacific Ultra Soy, and most likely will not be available until fall, 2009.

- Prescribed amount:
  - ⇨ Maximum allowable: provides the full amount allowable per participant category.
  - ⇨ Prescribed amount per day: allows HCP to customize the amount of medical formula, medical food, or soy beverage provided per day.
- Supplemental foods issuance: This is the biggest change of the medical documentation process. It modifies the food package by altering the types or amounts of foods to be issued with the medical formula/food.
  - ⇨ Maximum allowable in prescribed amount section plus “All” marked in supplemental foods = full food package and full formula issuance.
  - ⇨ Maximum allowable in prescribed amount section plus “None” would include:
    - Increase in formula issuance for older infants who cannot consume solids (7 through 12 months of age) from 696 reconstituted fluid ounces for powder to 960 reconstituted fluid ounces (same issuance level for infants 4-5 months of age)
    - Elimination of all foods for children (example: child who is fed by gastrostomy tube and cannot eat foods by mouth). There is no increase of formula issuance for this age group.
    - It is not likely that a woman would have “None” marked in the supplemental food section.
  - ⇨ Maximum allowable in prescribed amount section plus “Modified” would most likely mean:
    - Diagnoses such as severe food allergies, gastrointestinal disorders, malabsorption syndromes, etc. do not allow for particular food groups and it needs to be removed from the food package. Example: milk allergy.
- ⇨ Only participants who are receiving a medical formula, food would need to have their food package modified. If a WIC participant has a diagnosed food allergy but is not receiving medical formula/food, they would be counseled by the CPA or WIC nutritionist on how to use their food instruments accordingly.

**Activity:** Review the handout: *Qualifying conditions for issuance of WIC medical formula or medical food*. Discuss any questions - “What questions do we have regarding the qualifying and non-qualifying conditions?”

**Activity:** Using a ‘prescription’ or medical documentation your program currently has on file for a WIC participant, practice as a group completing the new medical documentation form. Answer the discussion questions after completing the activity.

**Discussion questions:**

- “When we compare medical prescriptions from a current WIC participant to the new documentation form, what are the biggest changes we notice?”
- “What questions do we have after completing the medical documentation form?”
- “How will we handle requests for children to receive soy beverages solely based on personal preference?”
- “How will we handle medical prescriptions from health care providers?”
- “What anticipatory guidance will we provide for existing participants with qualifying medical conditions?”

**Activity 4: What processes do we need to think about regarding medical documentation?**

PowerPoint slides 29-34 cover the material below.

**Introduction:** “Medical documentation is a WIC required form which will be accessible on the WIC website and from the State mailroom. CPA’s and nutritionists can initiate the form and send it off to the HCP for completion and signature.”

**Activity:** Review Section 4 of the PowerPoint presentation (Slides 29-34). Discuss key points.

**Key discussion points:**

- ⇒ Forms will be available on-line in a fill-able format and tear pads will be available for order from the State mailroom. HCPs will be provided samples of the form through state-level organizations. Local agencies can order tear pads from the State mailroom.
- ⇒ TWIST will help with:
  - Infant formula amounts.
  - Selection of food modules.
  - Medical documentation data entry.

- ⇒ More training and anticipatory guidance on TWIST and medical documentation will be released this spring and at the state conference.

### Discussion questions:

- “What will be our clinic process for completing the forms?”
- “How will we communicate this information to our local HCPs?”

### Activity 5: What do we need in order to make these changes in our program?

PowerPoint slides 35-41 cover the material below.

**Introduction:** “There may be things that we can change about how our clinic operates that will make the implementation of medical documentation process of Fresh Choices easier for all of us. Let’s talk about what that might be.”

**Activity:** Review Section 5 of the PowerPoint presentation (Slides 35-41)  
Discuss the following implementation questions and determine your next steps.

### Key discussion points:

- ⇒ The purpose of this in-service is to describe the fundamentals of the changes to medical documentation requirements of Fresh Choices. The in-service will likely raise questions that will need further guidance and technical assistance from the State WIC staff.
- ⇒ There will be a period of input from local agencies on the medical documentation form over the next four weeks. A final implementation version form will be available for distribution by April, 2009. There will be a process for re-evaluation after implementation has occurred.
- ⇒ The State WIC staff will help us with educating health care professionals, community partners, WIC participants, as well as provide more opportunities for WIC staff to explore, question and integrate the information presented in this in-service.
- ⇒ State WIC staff will help us explain the medical documentation changes to Fresh Choices with health care providers by:
  - Soliciting input from HCPs on the medical documentation form.
  - Adding a webpage for medical providers to the WIC website.
  - Educate HCPs through state-level organizations and mass mailings.
  - Provide materials to local agencies for educating local HCPs
  - Updating policies related to medical documentation.

- ⇒ State WIC staff will help us explain the medical documentations changes to WIC participants by:
  - Having medical documentation forms available for WIC participants by the end of April, 2009.
  - Nutrition Consultants will be available for technical assistance.
- ⇒ Opportunities for further WIC staff input and education include:
  - Technical assistance conference calls:
    - March 18, 2009 3:30-4:30 p.m.
    - April 14, 2009 3:30-4:30 p.m.
    - Additional conference calls can be added at request of local agencies.

### **Discussion questions:**

- ⇒ Questions to explore, decisions to make:
  - “What changes, if any, are needed in our clinic operations to support these changes in a participant-centered way?”
  - “What anticipatory guidance will we provide for our participants with qualifying medical conditions?”
  - “How can the State help us in educating HCP about the changes to medical documentation?”
  - “Who are our medical formula/food experts that will make food package decisions with special participants?”
- ⇒ The medical documentation change is an opportunity for us to explore our current scope of practice and how we utilize our WIC Nutritionists. What are our scope of practice considerations on:
  - “What is our policy for referring participants to our WIC Nutritionist?”
  - “What will be the role of the Nutritionist for reviewing medical documentation forms?”
  - “What will we do when the Nutritionist is not available?”

**Sign in sheet for staff receiving training**

**Staff In-service: Medical Documentation**

Agency\_\_\_\_\_

Staff presenting in-service\_\_\_\_\_

Date of in-service\_\_\_\_\_

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