



DEPARTMENT OF HEALTH

Larry Hogan, Governor · Boyd K. Rutherford, Lt. Governor · Dennis R. Schrader, Secretary

May 24, 2022

The Honorable Guy Guzzone
Chair, Senate Budget and Taxation Committee
3 West, Miller Senate Office Building
Annapolis, MD 21401-1991

The Honorable Delores G. Kelley
Chair, Senate Finance Committee
3 East, Miller Senate Office Building
Annapolis, MD 21401-1991

The Honorable Ben Barnes
Chair, House Appropriations Committee
Room 121, House Office Building
Annapolis, MD 21401-1991

The Honorable Joseline A. Peña-Melnyk
Chair, House Health and Government
Operations Committee
Room 241, House Office Building
Annapolis, MD 21401-1991

Re: House Bill 506 (Chapter 478), Acts of 2019 – Maryland Special Supplemental Nutrition Program for Women, Infants, and Children – 2021 Annual Report

Dear President Ferguson and Speaker Jones:

Pursuant to House Bill 506 (Chapter 478 of the Acts of 2019), the Maryland Department of Health respectfully submits this annual report detailing an overview of the Maryland Special Supplemental Nutrition Program for Women, Infants, and Children (Maryland WIC), how it is administered, and an assessment of its strengths and weaknesses moving forward.

Should you have any questions about this report or if the Department can be of any further assistance, please do not hesitate to contact me or the Director of the Office of Governmental Affairs, Heather Shek, at 410-767-5282 or Heather.Shek@maryland.gov.

Sincerely,

Dennis R. Schrader
Secretary

Cc: Heather Shek, JD, MS, Director, Office of Governmental Affairs
Jinlene Chan, MD, MPH, FAAP, Deputy Secretary, Public Health Services
Donna Gugel, MHS, Director, Prevention and Health Promotion Administration
Shelly Choo, MD, MPH, Director, Maternal and Child Health Bureau
Sarah Albert, Department of Legislative Services, MSAR # 12325

[Page Left Intentionally Blank]

**Maryland Special Supplemental
Nutrition Program for Women,
Infants, and Children**

2021 Annual Report

Chapter 478 of the Acts of 2019

[Page Left Intentionally Blank]

Contents

Executive Summary	7
Introduction	9
Background – General Information About WIC	9
Administration of WIC Benefits	9
Fiscal Year 2021 Participation Trends	10
-Program Changes in the Past Year	13
Improving the Shopping Experience	13
New Authorized Foods List	14
Streamlining Appointments	14
Enhanced Outreach on Social Media and Marketing	15
Stakeholder Meetings	16
External Stakeholder Meeting	16
Program Research	18
Focus Group	18
Economic Study	18
Program Enhancements in Progress	19
Building Partnerships	19
Enhanced Fruit and Vegetable Benefit	19
Returning to In-Person Appointments	20
Future Plans	20
Diversity, Equity, and Inclusion	20
Data Matching with Other Service Programs	21
Online Shopping	21
Hybrid Appointment Methods	21
	5

Participant Portal	22
Appendix A: Glossary of Acronyms	23
Appendix B: Maryland WIC Program Clinic Locations and Hours	24
Appendix C: SFY 2021 Eligible Population and Participation in Maryland WIC Program by County	36

Executive Summary

This report presents an overview of the Maryland Special Supplemental Nutrition Program for Women, Infants, and Children (Maryland WIC) in accordance with House Bill (HB) 506, Chapter 478 of the Acts of 2019. This report builds upon the 2019 and 2020 reports. This report encompasses how Maryland WIC is administered, changes in program operations that were implemented in State Fiscal Year (SFY) 2021 to increase program participation, and additional efforts in SFY 2022.

Participation in Maryland WIC fell in SFY 21 compared to the previous year. However, it is notable that this decrease was mostly due to declining participation by women and infants, while participation by children remained nearly the same. Stakeholders and staff have speculated that participants who have already been certified for WIC have an easier time remaining on the program, which would explain the continued participation by children.

Maryland WIC has undertaken several program changes in order to make the experience easier for participants. Participants can now use self-checkout machines to redeem their WIC benefits at several large grocery chains. They can also use the Maryland WIC app to scan and upload documents at their own convenience instead of having to remember to bring documents to their appointments. The same Maryland WIC app also now contains lessons for Online Nutrition Education.

Maryland WIC continues to promote its services on social media and in physical space. An average of three posts are made on Facebook and Instagram every week. In addition, Maryland WIC created “Quick Tips” videos showing participants how to access their benefits. These videos can be found on Maryland WIC’s YouTube channel. Boosted posts and other paid advertisements were purchased on Facebook and Instagram. In addition, transit ads and billboards featuring former WIC participants have appeared throughout the state. This marketing campaign features the tagline “I’m a WIC Baby” to remind viewers that WIC participants eventually grow into adults. Finally, Maryland WIC’s website was redesigned to be more intuitive and user-friendly for visitors seeking information about the program.

On July 20, 2021, Maryland WIC convened a meeting with external stakeholders as required by HB 506. Maryland WIC staff and attendees discussed updated data, as well as improvements that they would like to see in the program. In addition to this presentation to external stakeholders, Maryland WIC also presented during a lunch and learn session of the Maryland Chapter of the American Academy of Pediatrics on October 26, 2021. This is part of a broader strategy to enhance partnerships, particularly by informing providers that Maryland WIC is now part of the CRISP referral network.

Research of the Maryland WIC program continues to focus on the user experience and factors affecting participation. In February 2021, Maryland WIC convened a focus group of three

participants to discuss their experience with the program and the difficulties they encountered. Their answers will inform a user experience survey to be conducted on participants next year. In addition, Maryland WIC conducted a study of how economic factors affect participation. Participant data as well as economic data from the Maryland Department of Labor showed a correlation between the state's poverty rate and participation in Maryland WIC—the more Marylanders living below the poverty line, the more participants there were in WIC. This suggests that at least some portion of Maryland WIC's participation is driven by economic factors that are out of the program's control.

Currently, Maryland WIC is implementing increased fruit and vegetable benefits that were authorized by federal legislation in 2021. The American Rescue Plan and two continuing resolutions passed by Congress and signed into law by President Biden greatly increased the total amount that participants could redeem for fresh fruits and vegetables. Program data show that Maryland WIC participants have purchased 64% more fruits and vegetables since the enhanced benefit became available.

Future plans for Maryland WIC include greater emphasis on diversity, equity, and inclusion, coordination with other programs to identify and refer potential participants, as well as creating a participant portal on the website that integrates with the case management system in order to schedule appointments. There are also several program changes being discussed at the federal level which Maryland WIC is monitoring closely. Advocates and stakeholders have advocated for online shopping and continued flexibility to have remote appointments after the COVID-19 state of emergency has passed. Both are currently prohibited under federal rules and regulations. USDA is currently studying these issues.

Introduction

Background – General Information About WIC

WIC is a federally funded program that provides nutrition education, breastfeeding promotion and support, nutritious supplemental foods, and referrals to social and health services for women with young children. These benefits improve the health of low- and moderate-income women and children with, or at risk of developing, nutrition-related health problems.

WIC's goal is to educate and assist pregnant women to achieve better birth outcomes, including longer pregnancies, which result in fewer premature births, fewer low birthweight babies, and fewer fetal and infant deaths. WIC helps to ensure normal physical growth of children and has been shown to improve cognitive development, reduce levels of anemia, improve access to regular health care and social services, improve diets and household health behaviors, reduce the risk of child abuse or neglect, and improve breastfeeding rates through support and counseling.¹ WIC aims to improve children's long-term health, growth, and development.

By delegation from the USDA, State agencies are responsible for the effective and efficient administration of WIC in accordance with regulations set forth in 7 CFR 246. In Maryland, the WIC Program is administered through the Maryland Department of Health (MDH). Maryland WIC is one of the programs overseen by the Maternal and Child Health Bureau which is part of the Prevention and Health Promotion Administration at MDH.

Administration of WIC Benefits

A WIC applicant must be a pregnant woman, a woman who has recently delivered or lost a pregnancy, a breastfeeding woman, or a child under five years old. WIC-eligible persons must meet income guidelines, residency requirements, and be at nutritional risk (CFR 246.7(e)7). To apply, applicants must attend a certification appointment at the WIC Local Agency clinic (clinic) most convenient to them. In Maryland, potentially eligible persons may apply at one of 88 clinics located throughout the state. Locations and hours for these clinics are listed in Appendix B.

At each certification appointment, the applicant must provide proof of residency, identity, and income. Proof of income must reflect total gross household income and be no more than 185% of the Federal Poverty Level. Applicants are considered adjunctively income-eligible for WIC if

¹ Center on Budget and Policy Priorities. WIC Works: Addressing the Nutrition and Health Needs of Low-income Families for 40 Years. Rev March 29, 2017. By Steven Carlson and Zoë Neuberger. 27 November 2018
<https://www.cbpp.org/research/food-assistance/wic-works-addressing-the-nutrition-and-health-needs-of-low-income-families>

they receive Temporary Cash Assistance (TCA), Supplemental Nutrition Assistance Program (SNAP), or Medicaid funded under Title XIX of the Social Security Act.

Persons who are determined eligible to receive WIC benefits receive nutrition and breastfeeding education, supplemental healthy foods, and referrals to various health and social services in the community. Maryland WIC issues food benefits by use of an electronic WIC (eWIC) benefits transfer card. Maryland WIC uses a computer system known as WIC on the Web (WOW) to certify applicants for eligibility, issue benefits, reconcile benefit redemption with authorized grocers, and gather data to meet federal reporting requirements. Participant data for this report are pulled from WOW.

WIC makes a distinction between “participation” and “enrollment.” An individual is enrolled if they have gone through the screening process and were deemed eligible. A participant is an individual who has been issued benefits. Participants can redeem their monthly food benefits by shopping at any of the 550+ approved WIC vendors throughout Maryland.

When eligibility is determined, the length of the certification period depends on the WIC participant’s category. The categories are:

- Pregnant women, who are certified for the expected duration of their pregnancy and up to the last day of the month in which the infant turns six weeks old or the pregnancy ends.
- Postpartum women, who are certified up to the last day of the sixth month after the baby is born or the pregnancy ends.
- Breastfeeding women, who are certified up to the last day of the month of the infant’s first birthday.
- Infants, who are certified up until the last day of the month of the infant’s first birthday.
- Children, who are certified up to the last day of the month one year from the date of certification, up to the age of 5.

Enrollees return to their local WIC clinic two to three times during the certification period for follow-up growth assessment, continued nutrition and breastfeeding education, and additional benefit issuance. WIC staff are also available between appointments for assistance with program-related questions, breastfeeding support, and help with linkage and referral to community resources to help meet the varying needs of WIC families.

Fiscal Year 2021 Participation Trends

Every year, Maryland WIC uses Medicaid enrollment data to estimate the number of Maryland residents in each county who are eligible for WIC. By using participation data from clinics, Maryland WIC can estimate the percentage of the eligible population who are participating in WIC, commonly called the “coverage rate.”

Table 1 shows the coverage rate by jurisdiction in Maryland WIC in SFY 2021. The state coverage rate in SFY 2021 was 72.6%, a decrease compared to 73.5% in SFY 2020. The coverage rate in SFY 2021 was still higher than two years ago (70.0% in SFY 2019). However, it is difficult to make a strictly equal comparison. In June 2019, changes to adjunctive eligibility meant that the number of children in Maryland eligible for WIC fell by about 23,000. Therefore, coverage rates before SFY 2019 are not truly comparable to coverage rates after SFY 2019.

Appendix C shows the eligible population, number of participants, and coverage rate broken out by participant category: women, infants, and children. The coverage rate and the number of participants fell for women and infants. However, while the coverage rate for children fell, this was mostly due to a higher number of estimated eligible children reported by Medicaid. The actual number of children fell very little. Stakeholders and program staff have proposed several theories for this result in the Stakeholder Meeting held on July 20, 2021. Those explanations are discussed further in the section on the Stakeholder Meeting.

Table 1: SFY 2021 Eligible WIC Population and Participants by Jurisdiction

Jurisdiction	Eligibles	Participants	Coverage Rate
Allegany	3,097	2,219	71.6%
Anne Arundel	16,314	10,455	64.1%
Baltimore City	35,629	24,926	70.0%
Baltimore	35,212	25,953	73.7%
Calvert	2,085	1,177	56.4%
Caroline	1,986	1,476	74.3%
Carroll	3,373	2,063	61.2%
Cecil	4,089	2,617	64.0%
Charles	5,640	4,056	71.9%
Dorchester	1,931	1,283	66.4%
Frederick	7,250	5,382	74.2%
Garrett	1,149	905	78.8%
Harford	6,997	4,725	67.5%
Howard	7,153	4,872	68.1%
Kent	593	422	71.2%
Montgomery	33,292	27,371	82.2%
Prince George's	47,178	35,764	75.8%
Queen Anne's	1,235	775	62.7%
Somerset	1,257	827	65.8%
St. Mary's	3,563	2,562	71.9%
Talbot	1,275	897	70.3%
Washington	7,215	4,846	67.2%
Wicomico	6,214	4,418	71.1%

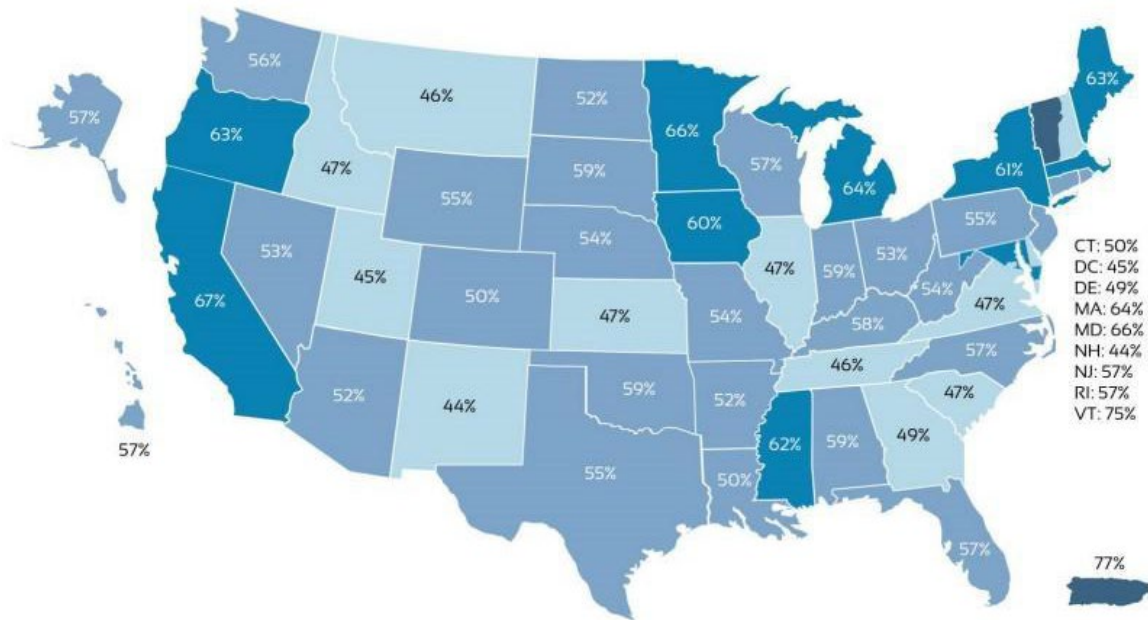
Worcester	1,677	874	52.1%
Maryland	235,405	170,865	72.6%

USDA also generates coverage estimates for WIC programs. These estimates do not contain information at the county level. In addition, because USDA’s coverage estimates are generally three calendar years behind, the latest data from USDA for WIC coverage is from Calendar Year 2018. For this latest data, USDA changed their methodology for calculating the number of individuals eligible for WIC in each state. Because of this change, USDA’s estimates for 2018 are not directly comparable to the estimates for 2017 which were presented in Maryland WIC’s 2020 report.

The new estimates show that Maryland’s WIC coverage rate has remained among the highest in the nation. Figure 1 illustrates data compiled by USDA in 2018, the latest year for which nationwide coverage estimates are available.² In 2018, Maryland achieved a coverage rate of 65.8 percent, far higher than neighboring states Delaware (49.4 percent), Pennsylvania (55.4 percent), West Virginia (54.3 percent), and Virginia (47.3 percent). In 2018, states and territories which achieved a higher coverage rate than Maryland were Puerto Rico (77.2 percent), Vermont (75.1 percent), California (67.1 percent), and Minnesota (66.3 percent).

² U.S. Department of Agriculture, Food and Nutrition Service, Office of Policy Support. *National- and State-Level Estimates of WIC Eligibility and WIC Program Reach in 2018 with Updated Estimates for 2016 and 2017*, by Kelsey Gray, Kevin Meyers Mathieu, Paul Johnson, and Linda Giannarelli. Alexandria, VA: May 2021. <https://fns-prod.azureedge.net/sites/default/files/resource-files/WICEligibles2018-VolumeI.pdf>

Figure 1: WIC Coverage Rates for Participants by State, Calendar Year 2018



Program Changes in the Past Year

Since the 2020 report, Maryland WIC has undertaken several program changes. These efforts were aimed at improving the shopping experience, expanding the Authorized Foods List, streamlining appointments, and enhancing outreach.

Improving the Shopping Experience

The largest change to shopping for WIC participants has been the addition of self-checkout at many stores. Participants are now able to use self-checkout machines to redeem their WIC benefits at the following stores:

- ShopRite
- Martin's
- Giant
- Walmart
- Safeway
- Weis
- Acme
- PriceRite

Maryland WIC is in the process of certifying additional stores to allow self-checkout transactions. This option will be useful because many participants understand the redemption process better than store employees who often experience high turnover. Maryland WIC's

Vendor team still receives reports of cashiers erroneously attempting to police transactions by participants. Allowing participants to conduct their own transactions will also reduce the stigma associated with using WIC benefits.

Maryland WIC has also conducted more outreach and training with the vendor liaisons who work for each local agency. Vendor liaisons are clinic employees who work with stores in their area. They assist with monitoring to ensure compliance with WIC requirements. For the past year, Maryland WIC staff have held regular meetings with vendor liaisons and sent out informational tips twice a month to improve understanding, collaboration, and partnership with the vendor community.

New Authorized Foods List

Every two to three years, WIC conducts a review of authorized foods to assess the current marketplace and update what brands and forms of foods can be made available to participants. This multi-month process began in early 2021 and ended with the announcement of new authorized foods in October 2021. With the new greatly expanded Authorized Foods List, participants are now able to receive many new forms of cheese, allowing organic foods in all categories but formula, and adding 48-ounce juices for women that are new to the marketplace. This process required every unit of the Maryland WIC program to work together to gather product information from stores, analyzing to see if products meet dietary guidelines, designing the new Authorized Foods List, implementing training, and updating the Maryland WIC app.

Streamlining Appointments

Perhaps the most significant change that Maryland WIC has implemented to streamline appointments is giving participants the ability to scan and upload documents required for certification. Using the Maryland WIC app, participants can now upload documents instead of having to bring them or mail them for an appointment. This feature has proven very popular. Since December 2020 when this function was implemented, participants have uploaded an average of 18,000 documents per month to the system.

Modifications were also made to our WOW system to capture different appointment methods. In addition to the standard in person appointment, phone and video appointments can now be scheduled. This critical feature allowed automated messaging to resume providing not only appointment reminders, but instructions to coincide with the method of the appointment. For example, instructions providing the clinic address for in person appointments, to wait for a phone call for phone appointments, and where to find the link for video appointments.

All Local Agencies in Maryland now have a general email address. Participants and members of the public can now directly contact the Local Agency where they live instead of having to

contact the State Office and be transferred. All of these email addresses are listed on the MDWIC.org website.

Participants are also now able to access Online Nutrition Education through their smartphones. Previously, they had to visit a separate website in order to complete their Online Nutrition Education (which is a requirement for the continued receipt of benefits). By accessing lessons through their phones, participants can now complete their required education using the same app where they also check their benefit balances, scan barcodes, and upload documents for certification.

Last year, Maryland WIC began offering telehealth appointments on the Doxy.me platform. This means that participants can have video appointments with certifying staff or breastfeeding peer counselors. Although telehealth appointments were not as widely received as initially expected, they have proven to be extremely effective in providing breastfeeding support and guidance at critical times of need for breastfeeding women.

Enhanced Outreach on Social Media and Marketing

Maryland WIC continues to promote its services on social media through Facebook and Instagram. The account name for both Facebook and Instagram is @MDH.WIC. On average, Maryland WIC makes three posts per week on social media. These posts include a mixture of original content and content shared from trusted sources such as MDH and the Centers for Disease Control and Prevention (CDC).

Maryland WIC has continued to produce videos. Two "Quick Tips" videos were published on YouTube. These videos show participants how to use their benefits and how to use the Maryland WIC app. Further instructional videos are planned. These future videos will address other features of the Maryland WIC app including how to scan barcodes and the new feature to upload documents.

As part of the expanded social media effort, Maryland WIC has begun posting Instagram Stories. These have a few advantages over traditional social media since the posts can be shared with followers. Instagram Stories can be videos or interactive media (such as a quiz or poll) which will engage the audience. Maryland WIC began posting Instagram stories during August 2021 as part of Breastfeeding Month and plans to continue regularly posting stories and other short videos throughout the year.

Paid advertisements on social media have continued in SFY 2021. Maryland WIC has experimented with social media advertisements in both English and Spanish. In general, Spanish advertisements have generated more views and clicks from the target audience. In a summer 2021 advertisement push, Facebook and Instagram advertisements promoted the increased fruit

and vegetable benefit. These ads include information about the increased benefit with tips for using fresh produce and making them last longer.

Last year, Maryland WIC launched a new multi-year marketing campaign based on the slogan, “I’m A WIC Baby.” This campaign focuses on adults who were on WIC as children and tells the stories of their lives today. The aim of the campaign is to refocus the narrative surrounding WIC away from poverty and deprivation, reminding viewers instead that WIC babies are the future of our communities. In this way, Maryland WIC hopes to reduce the stigma surrounding WIC services and encourage greater participation. In 2020, the “I’m a WIC Baby” campaign featured three participants. Since then, Maryland WIC has recruited four more participants bringing the total to seven. Their faces will be featured in an ad campaign that will appear on public transit and billboards throughout the state.

Finally, the MDWIC.org website was redesigned to be more intuitive. The new structure guides visitors to different parts of the website according to whether they are participants, vendors, health care providers, or farmers. The language on the website was also simplified to be easier to read, and large colorful buttons further aid in navigation. At the time the website was redesigned, MDH also moved to a new hosting platform. This new platform brings several new features including the ability to create a contact us form directly on the website. Visitors to MDWIC.org can now use a form to send an email to the program’s general inbox instead of having to copy and paste an email address. Participants began using the new form almost as soon as it appeared on the website, and Maryland WIC now receives 4 inquiries per day on average from participants (including weekends).

Stakeholder Meetings

Maryland WIC meets with the coordinators of all 18 Local Agencies throughout the State on a monthly basis. At the beginning of COVID-19, those meetings increased to daily, and then twice weekly, and now remain at twice monthly. These meetings are critical to program operations as they provide a forum for Maryland WIC staff to provide important updates to changes at the state and national level, as well as providing local agencies the opportunity to share staff and participant feedback received from the clinics, best practices among agencies, and suggestions to improve the delivery of services statewide.

External Stakeholder Meeting

Maryland WIC held a meeting with external stakeholders on July 20, 2021. Similar to last year, attendees at the meeting included representatives from:

- Maryland Hunger Solutions;
- Maryland Chapter of the American Academy of Pediatrics;
- Johns Hopkins Bloomberg School of Public Health;

- University of Maryland School of Medicine;
- The WIC Association of Maryland;
- Local Health Officers, represented by the Baltimore City Health Department; and
- MDH, Maternal and Child Health Bureau.

Invitations were also extended to:

- MedChi, the State Medical Society;
- Maryland Alliance for the Poor – Maryland Against Poverty;
- Schwertz, Metz and Wise, P.A.; and
- Mid-Atlantic Association of Community Health Centers.

At this stakeholder meeting, representatives of Maryland WIC presented data on participation trends and solicited feedback and suggestions. Participation decreased among women and infants but hardly fell at all among children (full data is presented in Appendix C). Attendees suggested that the decrease in participation by women over the past year may be related to increased SNAP benefits. During the COVID-19 pandemic, SNAP benefits were increased to the maximum amount for participants, and recipients did not need to reapply. It may be that a participant who receives SNAP does not feel it is necessary to also participate in WIC, particularly since WIC benefits are more restrictive. It is also notable that the American Rescue Plan Act included a Child Tax Credit which made the lowest-income families eligible for the full credit for the first time. Prior to the American Rescue Plan Act, families that claimed the Child Tax Credit, but owed the money on their taxes would be required to forfeit the entirety of the child Tax Credit regardless of the amount owed. The Center on Budget and Policy Priorities argues that this Child Tax Credit has reduced food hardship by nearly one-third nationwide.³

On the other hand, attendees noted that if a family has already gone through the process of certifying to participate in WIC, they may find it easier to continue to participate. This is especially true because Maryland WIC has implemented remote certifications, online nutrition education, document uploads, and other changes to make it easier for participants to recertify. This may partially explain why participation by women and infants fell but no similar decrease among children occurred. The vast majority of children on WIC began participating when they were infants and have continued to participate. This suggests that Maryland WIC has managed to improve retention but still needs to improve recruitment of new participants.

³ Zippel, Claire. “After Child Tax Credit Payments Begin, Many More Families Have Enough to Eat.” Center on Budget and Policy Priorities. Washington, DC. August 30, 2021. <https://www.cbpp.org/blog/after-child-tax-credit-payments-begin-many-more-families-have-enough-to-eat>

The stakeholders commended Maryland WIC for their accomplishments and agreed that continuation of the USDA waivers, which allow participants to attend virtual appointments, are critical to continue providing WIC services safely until the public health emergency is over.

Program Research

As part of its ongoing program analysis, Maryland WIC conducts both original research and literature reviews to better understand participants. This section will discuss two of those efforts: a focus group and a study of how the economy affects WIC participation.

Focus Group

In late February 2021, Maryland WIC found three current participants who were willing to be part of a focus group about their experience with the program. The participants were asked about their difficulties using benefits, their attitudes toward the program, and their opinion of how to make the benefits easier to access. Since these were only three participants from the same geographic area, their answers are not in any way representative of the WIC population as a whole. Instead, their thoughts will be used to help develop a more robust survey of WIC participants to take place at a later date.

This also served as a proof of concept for the technique of using focus groups. In the future, Maryland WIC may employ focus groups to test the effectiveness of publications or messaging materials.

Economic Study

A 2012 economic study of USDA nutrition programs (including SNAP and WIC) found that WIC enrollment has been correlated to the state of the economy.⁴ In the 1990s, national WIC enrollment was correlated with the unemployment rate. However, since the turn of the century, national WIC enrollment has not been correlated with the unemployment rate and is correlated with the poverty level instead. This suggests that poverty is the true driver of WIC enrollment and it was simply correlated with unemployment during the 1990s. Since the early 2000s, the US economy has seen an increase in people who have a job and yet remain below the poverty level.

Using administrative data as well as publicly available data from the Maryland Department of Labor, Maryland WIC reproduced these results at the state level. Time series data were collected and analyzed with Stata, and the results suggested a strong correlation between enrollment in Maryland WIC and the poverty level in the state. This suggests that at least some of the trends

⁴ Hanson, Kenneth and Victor Oliveira. "How Economic Conditions Affect Participation in USDA Nutrition Assistance Programs." EIB-100, U.S. Department of Agriculture, Economic Research Service, September 2012

seen in Maryland WIC enrollment are driven by the economy, a factor which the program has little direct control over.

Program Enhancements in Progress

Building Partnerships

In July 2021, Maryland WIC joined the Chesapeake Regional Information System for our Patients (CRISP), the designated health information exchange of Maryland. CRISP allows medical care providers to securely send referrals to other providers and share information about patients. With Maryland WIC on the CRISP network, providers will be able to refer patients to WIC and receive periodic updates about their benefits. Maryland WIC is working with a pediatric practice to pilot the referral process.

To support referrals through CRISP and boost participation, Maryland WIC is planning heavy outreach to medical care providers in the upcoming year. To this end, Maryland WIC created a “Providers’ Outreach Packet” consisting of a folder, information about benefits, and instructions for using the WIC documentation form. Local agencies will visit clinics and medical practices to educate providers about the services that WIC provides. The goal is that rather than simply leave information brochures in public areas for patients to read, medical providers will also incorporate WIC into their processes. A pilot program in North Carolina showed that when a medical practice included questions about WIC on their intake form, referrals rose dramatically. In addition to direct outreach to medical care providers, Maryland WIC is also seeking to partner with professional organizations such as the Maryland chapters of the American Academy of Pediatrics (MD AAP) and the American College of Obstetricians and Gynecologists (MD ACOG).

On October 26, 2021, Maryland WIC gave a presentation to a lunch session of the MD AAP. At this presentation, staff gave information about the benefits and services provided by the program, who is eligible, and how to make referrals (particularly through CRISP). Attendees appeared to be surprised to hear that WIC is not only for formula, but also provides counseling, health screenings, and referrals. Maryland WIC will be taking this into account for future presentations to providers. Outreach to MD ACOG and the Maryland Nurses Association are also ongoing.

Enhanced Fruit and Vegetable Benefit

As part of the American Rescue Plan Act which was signed into law on March 11, 2021, the fruit and vegetable benefit for WIC was temporarily increased. A participant who is not an infant would normally receive a fruit and vegetable benefit of either \$9 or \$11 depending on the category to which they belong. The American Rescue Plan increased that benefit to \$35 per month per participant for four months in 2021. Maryland WIC chose to implement this increase

during the months of June through September. The increase under this legislation ended September 30, 2021.

On September 30, 2021, Congress passed and President Biden signed the Extending Government Funding and Delivering Emergency Assistance Act (commonly called the “continuing resolution”) which modified and extended the fruit and vegetable benefit. Under this extension, participants on WIC who breastfeed receive \$47 per month, pregnant and postpartum participants receive \$43 per month, and children receive \$24 per month. Under the continuing resolution, these benefits would last through December 2021. These benefits have now been extended through September 30, 2022.

Analysis of redemption data showed a very large increase in fruit and vegetable redemptions among participants. In March 2021 before the benefit increase was implemented, the average family on Maryland WIC redeemed \$11.23 per month in fruits and vegetables. In June and July 2021, that amount grew to \$18.45 per month—an increase of more than 64%. It is clear that there is demand for more fruits and vegetables among participants. Maryland WIC continues to actively promote this increased benefit to participants and collect data on redemptions.

Returning to In-Person Appointments

Under a Continuing Resolution passed by Congress on October 1, 2020, WIC was given the flexibility to provide services remotely until 90 days beyond the end of the declaration of a national public health emergency declared by the U.S. Department of Health and Human Services. Maryland WIC clinics have already begun to transition back to in-person appointments. Each Local Agency is implementing their own schedule to bring workers and participants back to clinics. Maryland WIC will support local agencies as they make this transition.

This support includes training and materials so that staff can effectively perform their jobs in-person. Training is necessary because staff have not performed in-person appointments for over a year and staff hired during the national state of emergency have never performed an in-person appointment. In addition, Maryland WIC is purchasing materials to conduct in-person appointments including publications, incentive items, and kits for clinicians to perform non-invasive hemoglobin testing.

Future Plans

Diversity, Equity, and Inclusion

In the past year, Maryland WIC has dedicated itself to the cause of Diversity, Equity, and Inclusion not only in its services but also in the structure of the program itself. All WIC staff are mandated to undergo implicit bias training with ongoing education and awareness training planned for the future. The Maternal and Child Health Bureau (MCHB) is also implementing a

strategic plan which will incorporate the goals of Diversity, Equity, and Inclusion. As one of the programs within MCHB, WIC will be working to improve how equitable and anti-racist policies and practices are implemented by and within the program, in an effort to better serve clients. As a first step, MCHB is planning a series of learning sessions to facilitate this work for all programs within the bureau.

Data Matching with Other Service Programs

Maryland WIC is currently in talks with Medicaid (called Medical Assistance in Maryland) and SNAP to perform data matching and data sharing. As stated in the introduction to this report, the vast majority of individuals who participate in Medicaid and SNAP are adjunctively eligible for WIC. However, an analysis by the Center on Budget and Policy Priorities found that a large proportion of individuals nationwide participate in Medicaid and SNAP but do not participate in WIC.⁵ By performing data matching, Maryland WIC hopes to identify these individuals and perform outreach to them to encourage them to apply. There are many details to prepare for, including the process for sharing data and protecting confidentiality. These discussions are ongoing.

Online Shopping

Advocates, participants, and stakeholders have all urged the WIC program to implement online shopping in order to increase access and allow participants to shop more safely during the COVID-19 pandemic. Current program rules prohibit online purchasing of benefits and program regulations do not allow transactions via a virtual platform. Both of these restrictions would have to be lifted in order to allow online shopping. In March 2021, the USDA convened a task force to study this issue. The task force issued its recommendations in a report on September 30, 2021. The recommendations outlined an approach to implementing online ordering in a way that is equitable and convenient for participants. Further details for how to implement this approach can be found in the report which is publicly available.⁶

Hybrid Appointment Methods

The COVID-19 pandemic and the flexibilities allowed by USDA have made it clear that it is possible for the WIC program to continue doing its work without in-person appointments. Moreover, a plurality of participants prefer remote appointments. A new report jointly authored by the National WIC Association, the Nutrition Policy Institute, and Pepperdine University

⁵ Hall, Lauren and Zoe Neuberger. “Eligible Low-Income Children Missing Out on Crucial WIC Benefits During Pandemic: Recent Participation Varies Widely by State; Lags Medicaid, SNAP.” Center on Budget and Policy Priorities. Washington, DC. July 12, 2021. <https://www.cbpp.org/sites/default/files/7-12-21fa.pdf>

⁶ Task Force on Supplemental Foods Delivery in the WIC Program. “Recommendations Report.” USDA. Washington, DC. September 30, 2021. <https://www.cbpp.org/sites/default/files/7-12-21fa.pdfhttps://fns-prod.azureedge.net/sites/default/files/resource-files/Task-Force-Supp-Foods-Delivery-WIC-Recommend-Report.pdf>

found that 45 percent of participants want to continue with entirely virtual appointments compared with 18 percent who want in-person appointments every six months and 20 percent who want in-person appointments every three months.⁷ The same report found that 88 percent of participants perceived that remote services from the WIC program had either improved or remained the same compared to 5 percent who said that services had gotten worse.

Regulations require that all WIC appointments must take place in person unless a waiver has been issued by USDA. Maryland WIC is currently operating under such a waiver. The waiver is set to expire 90 days after the end of a public health emergency declared by the U.S. Department of Health and Human Services. Currently, the declaration of a public health emergency is set to continue until July 15, 2022 and it may be renewed. When the state of public health emergency ends, Maryland WIC will have 90 days to return all participants to in-person appointments again unless federal regulations change.

Participant Portal

Although Maryland WIC's website has been greatly streamlined and enhanced, WIC programs in other states have demonstrated ways to further improve the participant experience by adding a user portal. For example, Massachusetts WIC's website has an online form where visitors can enter their demographic and contact information. The submitted information is entered into the Massachusetts WIC client management system and local clinic staff are then assigned to contact the person in order to set up an appointment.⁸ Although Maryland WIC's website has a contact information form, it is not currently integrated into WOW so that the information entered is readily available to program staff. Maryland WIC plans to explore and implement this feature on the website in the future.

⁷ National WIC Association. "New Report Indicates the Need for Post-Pandemic Flexibilities in WIC Services." [Press Release]. December 14, 2021. <https://www.nwica.org/press-releases/new-report-indicates-need-for-post-pandemic-flexibilities-in-wic-services#.YcDMWPHMIqt>

⁸ Centers for Budget and Policy Priorities. "Assessing Your WIC Certification Practices." Washington, DC. <https://www.cbpp.org/research/food-assistance/assessing-your-wic-certification-practices#question-enrollment-1>

Appendix A: Glossary of Acronyms

CDC	Centers for Disease Control and Prevention
CRISP	Chesapeake Regional Information System for our Patients
eWIC	electronic WIC
MDH	Maryland Department of Health
SFY	State Fiscal Year
SNAP	Supplemental Nutrition Assistance Program
TCA	Temporary Cash Assistance
USDA	United States Department of Agriculture
WIC	Special Supplemental Nutrition Program for Women, Infants, and Children
WOW	WIC on the Web

Appendix B: Maryland WIC Program Clinic Locations and Hours

As of October, 2020

Due to the COVID-19 pandemic, WIC clinics were closed to in-person appointments for most of the 2020 and 2021 calendar years. Locations remained open during regular hours for appointments by phone. Some local agencies will re-open their clinics at their discretion, but Maryland WIC expects that the large majority of clinics will continue to operate virtually until the end of the public health emergency declaration.

<u>Local Agency</u>	<u>County</u>	<u>Clinic Address</u>	<u>Hours</u>
Allegany County WIC Program	Allegany	Allegany County Health Department 12501 Willowbrook Road, Southeast Cumberland, MD 21502	M – F 8:00 AM – 4:30 PM
		Lonaconing George’s Creek Regional Library 76 Main Street Lonaconing, MD 21539	3 rd T (each month), 1:00 PM – 3:30 PM 4 th M (each month), 10:30 AM – 3:15 PM
		Frostburg Judy Center 3 College Avenue Frostburg, MD 21532	1 st and 2 nd R (each month) 9:00 AM – 3:45 PM
		Westernport Library 66 Main Street Westernport, MD 21562	1 st and 4 th W (each month) 10:30 AM – 3:15 PM
Anne Arundel County WIC Program	Anne Arundel	Annapolis Health Center 3 Harry S. Truman Parkway Annapolis, MD 21401	M, T, R, F 8:00 AM – 4:30 PM W 10:00 AM – 6:30 PM
		North County – Glen Burnie 791 Aquahart Road Glen Burnie, MD 21061	M – R 8:00 AM – 6:30 PM F 8:00 AM – 4:30 PM
		Anne Arundel Medical Center	M, W, F

		2001 Medical Parkway Annapolis, MD 21401	8:00 AM – 4:30 PM
Baltimore City Health Department WIC Program	Baltimore City	Eden Street 621 North Eden Street Baltimore, MD 21205	M – F 8:30 AM – 4:00 PM
		Garwyn Medical Center 2300 Garrison Boulevard Suite 290 Baltimore, MD 21216	M – F 8:30 AM – 4:00 PM
Baltimore City Health Department WIC Program	Baltimore City	Department of Social Services – Harford North 2000 North Broadway 3 rd Floor Baltimore, MD 21213	T, F 8:30 AM – 12:30 PM
		Department of Social Services – Reisterstown Road 5818 Reisterstown Road Baltimore, MD 21215	T 8:30 AM – 12:30 PM W 1:00 PM – 4:00 PM
		Edmondson Village 4536 Edmondson Avenue Baltimore, MD 21229	M – F 8:30 AM – 4:00 PM
		Harford Road 5610 Harford Road Baltimore, MD 21229	M – F 8:30 AM – 4:00 PM
		Mondawmin Mall 2401 Liberty Heights Avenue Lower Level Room 1070 Baltimore, MD 21215	M – F 8:30 AM – 4:00 PM S 9:00 AM – 1:00 PM
Baltimore City – Johns Hopkins	Baltimore City	Eastern Avenue 3732 Eastern Avenue Baltimore, MD 21224	M – F (S appointments available) 8:30 AM – 5:00 PM
		JAI Medical Center 4340 Park Heights Avenue Baltimore, MD 21215	M, T, R, F 2 nd and 4 th W (each month) 8:30 AM – 5:00 PM
		Cherry Hill 634 Cherry Hill Road Baltimore, MD 21224	M, W, R, F (S appointments available)

			8:30 AM – 5:00 PM
		Park West Medical Center 3319 West Belvedere Avenue Baltimore, MD 21215	1 st and 3 rd W (each month) 8:30 AM – 5:00 PM
		Johns Hopkins Hospital 600 North Wolfe Street Baltimore, MD 21287	M – F 8:30 AM – 5:00 PM (S appointments available)
		Belair-Edison 3120 Erdman Avenue Baltimore, MD 21213	T 8:30 AM – 5:00 PM
		Adventure Dental and Vision 1253 West Pratt Street Baltimore, MD 21223	M, F 8:30 AM – 5:00 PM
		The Alameda Adventure Dental and Orthodontics 5632 The Alameda Baltimore, MD 21239	1 st and 3 rd T (each month) 8:30 AM – 5:00 PM
Baltimore City – Johns Hopkins	Baltimore City	DRUM 2100 Eutaw Place Baltimore, MD 21217	1 st and 3 rd R (each month) 9:00 AM – 5:00 PM
		Sarah’s Hope 1114 North Mount Street Baltimore, MD 21217	2 nd W (each month) 8:30 AM – 12:00 PM
		Hampden Family Center 1104 West 36 th Street Baltimore, MD 21211	2 nd R (each month) 9:00 AM – 5:00 PM
		Union Baptist 1211 Druid Hill Avenue Baltimore, MD 21217	3 rd W (each month) 8:00 AM – 3:30 PM
		Gilmor Homes 1515 Vincent Court Baltimore, MD 21217	2 nd W (each month) 1:00 PM – 4:00 PM
		Curtis Bay Elementary/Middle School 4301 West Bay Avenue Brooklyn, MD 21225	2 nd M (each month) 8:30 AM – 12:30 PM
		Benjamin Franklin Center Benjamin Franklin High School 1201 Cambria Street Brooklyn Park, MD 21225	2 nd M (each month) 1:00 PM – 4:00 PM

		Lakeland Elementary/Middle School 2921 Stranden Road Baltimore, MD 21230	W 8:30 AM – 4:00 PM
Baltimore County WIC Program	Baltimore	Woodlawn WIC Clinic 2622 Lord Baltimore Drive Windsor Mill, MD 21244	M, F 8:30 AM – 4:30 PM T, W, R 8:30 AM – 6:00 PM 1 st and 3 rd S (each month) 8:30 AM – 4:30 PM
		Towson Health Center 1046 Taylor Avenue Towson, MD 21286	M, T, F 8:30 AM – 4:30 PM R 10:30 AM – 6:30 PM 2 nd S (each month) 8:30 AM – 4:30 PM
Baltimore County WIC Program	Baltimore	Essex WIC Clinic 201 Back River Neck Road Essex, MD 21221	M, W, R, F 8:30 AM – 4:30 PM T 10:30 AM – 6:30 PM 3 rd S (each month) 8:30 AM – 4:30 PM
		Dundalk WIC 7702 Dunmanway Dundalk, MD 21222	M, T, R, F 8:30 AM – 4:30 PM W 10:30 AM – 6:30 PM

			1st S (each month) 8:30 AM – 4:30 PM
		Lansdowne Health Center 3902 Annapolis Road Halethorpe, MD 21227	M, T, W, F 8:30 AM – 4:30 PM R 10:30 AM – 6:30 PM 4 th S (each month) 8:30 AM – 4:30 PM
Baltimore County WIC Program	Baltimore	Eastern Family Resource Center 9150 Franklin Square Drive Rosedale, MD 21237	T, W, R, F 8:30 AM – 4:30 PM M 10:30 AM – 6:30 PM 4 th S (each month) 8:30 AM – 4:30 PM
		Chartley WIC Clinic 148 Chartley Drive Reisterstown, MD 21136	M, W, F 8:30 AM – 4:30 PM T, R 10:30 AM – 6:30 PM 2 nd S (each month) 8:30 AM – 4:30 PM
Carroll County WIC Program	Carroll	Carroll County Health Department 290 South Center Street Westminster, MD 21157	M, T, R, F 8:30 AM – 4:30 PM W 8:30 AM – 7:00 PM
		Carroll Hospital 200 Memorial Avenue Westminster, MD 21157	Staff communicate with hospital M – F

			to determine if WIC is needed.
Frederick County WIC Program	Frederick	Frederick County Health Department 350 Montevue Lane Frederick, MD 21702	M, T, R, F 8:00 AM – 5:00 PM W 8:00 AM – 7:00 PM One S (each month) 8:00 AM – 12:00 PM
Garrett County WIC Program	Garrett	Oakland 1025 Memorial Drive Oakland, MD 21550	M – F 8:00 AM – 5:00 PM 1 st M (each month) 8:00 AM - 6:30 PM
		Grantsville 28 Hershberger Lane Grantville, MD 21536	T 8:00 AM – 5:00 PM (W and evening appointments available by request)
Howard County WIC Program	Howard	Howard County Health Department 8930 Stanford Boulevard Columbia, MD 21045	M – F 7:30 AM – 5:00 PM 1 st and 3 rd M (each month) 7:30 AM – 6:30 PM One S (each month) 8:00 AM – 4:30 PM
		North Laurel Health Center 9411 Whiskey Bottom Road Laurel, MD 20723	M – F 7:30 AM – 5:00 PM
		Howard County General Hospital 5755 Cedar Lane Columbia, MD 21045	M – F (as needed)

		Old Cedar Lane Head Start 5451 Beaverkill Road Columbia, MD 21045	1 st and 3 rd M (each month) 11:00 AM – 5:00 PM
		Ellicott City Head Start 8510 High Ridge Road Ellicott City, MD 21043	2 nd and 4 th T (each month) 1:00 PM – 4:30 PM
		Wilde Lake High School 5640 Trumpeter Road Ellicott City, MD 21043	M – F 7:30 AM – 9:00 AM (during school year)
Community Clinic, Inc. (CCI) WIC Program	Montgomery	Gaithersburg 2000 Girard Street Suite 212B Gaithersburg, MD 20877	M, W, R, F, S 8:00 AM – 4:30 PM T 9:30 AM – 6:00 PM
Community Clinic, Inc. (CCI) WIC Program	Montgomery	Germantown 12850 Middlebrook Road Suite 108 Germantown, MD 20874	T – F 8:00 AM – 4:30 PM M 9:30 AM – 6:00 PM 1 st and 3 rd S (each month) 8:00 AM – 4:30 PM
		Langley/Takoma Park 1401 University Boulevard, East 3 rd Floor Hyattsville, MD 20783	M, T, R, F, S 8:00 AM – 4:30 PM W 7:30 AM – 5:30 PM
		Wheaton 2730 University Boulevard, West, LL10 Wheaton, MD 20902	T - S 8:00 AM – 4:30 PM M 8:00 AM – 6:00 PM

			W 7:30 AM – 4:30 PM
	Prince George's	Greenbelt 7474 Greenway Center Drive Suite 350 Greenbelt, MD 20770	M – F 8:00 AM – 4:30 PM 2 nd and 4 th S (each month) 7:00 AM – 3:30 PM
Prince George's County Health Department WIC Program	Prince George's	Prince George's County WIC Program 13900 Laurel Lakes Avenue Laurel, MD 20707	M – F 8:00 AM – 4:30 PM
		Cheverly Health Center 3003 Hospital Drive, 2 nd Floor Cheverly, MD 20785	M – F 8:00 AM – 4:30 PM
		Hyattsville Clinic 6525 Belcrest Road, #280 Hyattsville, MD 20783	M – F 8:00 AM – 4:30 PM
		Central Avenue Clinic 7836 Central Avenue Landover, MD 20785	M – F 8:00 AM – 4:30 PM
		Leonard Dyer Health Center 9314 Piscataway Road Clinton, MD 20735	M – F 8:00 AM – 4:30 PM
		Andrews Air Force Base 1191 Menoher Drive Andrews Air Force Base, MD 20762	2 nd and 4 th W (each month) 8:00 AM – 4:30 PM
Greater Baden WIC Program	Prince George's	Walker Mill 1472 Addison Road South Capitol Heights, MD 20743	M – F 8:30 AM – 5:00 PM 1 st , 2 nd , and 3 rd S (each month) 8:30 AM – 12:30 PM
Greater Baden WIC Program	Prince George's	Oxon Hill 6196 Oxon Hill Road Suite 445 Oxon Hill, MD 20745	M, R, F 8:30 AM – 5:00 PM T

			8:30 AM – 5:30 PM W 10:00 AM – 6:00 PM One S (each month) 8:30 AM – 12:30 PM
		Brandywine 7450 Albert Road, 1 st Floor Brandywine, MD 20613	M, T, R 8:30 AM – 4:30 PM W 10:00 AM – 6:00 PM F 8:00 AM – 4:00 PM 1 st S (each month) 9:00 AM – 1:00 PM
Washington County WIC Program	Washington	Hagerstown 947 North Burhans Boulevard Hagerstown, MD 21742	M – F 8:00 AM - 4:30 PM 3 rd W (each month) 10:15 AM – 6:45 PM
		Hancock Health Center 126 High Street Hancock, MD 21750	1 st R (each month) 8:00 AM – 4:00 PM
Harford/Cecil WIC Program	Cecil	Elkton 401 Bow Street Elkton, MD 21921	M – F 8:00 AM – 4:30 PM 4 th R (each month) 11:00 AM – 7:30 PM
	Harford	Edgewood 1321 Woodbridge Station Way Edgewood, MD 21040	M – F 8:00 AM – 4:30 PM 3 rd M (each month)

			11:00 AM – 7:30 PM
Harford/Cecil WIC Program	Harford	Havre de Grace 2027 Pulaski Highway Suite 107 Havre de Grace, MD 21078	M – F 8:00 AM – 4:30 PM 2 nd W (each month) 11:00 AM – 7:30 PM
		Upper Chesapeake Medical Center 500 Upper Chesapeake Drive Bel Air, MD 21014	T, R 8:00 AM – 4:30 PM
Upper Eastern Shore WIC Program	Kent	Chestertown 151 Dixon Drive Chestertown, MD 21620	M – F 7:30 AM – 4:00 PM 2 nd and 4 th W (each month) 9:00 AM – 5:30 PM
		Centreville 206 North Commerce Street Centreville, MD 21617	M – F 8:00 AM – 4:45 PM 3 rd W (each month) 9:30 AM – 6:00 PM
	Queen Anne's	Grasonville 5441 Main Street Grasonville, MD 21638	W 8:15 AM – 4:45 PM 1 st W (each month) 9:30 AM – 6:00 PM
		Sudlersville 103 North Linden Street Sudlersville, MD 21668	1 st R (each month) 7:45 AM – 3:45 PM 3 rd R (each month) 9:00 AM – 4:00 PM
Mid-Shore WIC Program	Caroline	Caroline County Health Department 403 South Seventh Street	M – F 8:00 AM – 4:30 PM

		Denton, MD 21629	
		Federalsburg First Church of God 101 Bloomingdale Avenue Federalsburg, MD 21632	2 nd and 4 th F (each month) 8:00 AM – 4:00 PM
	Dorchester	Dorchester County WIC Cedar Center 7 Cedar Street Cambridge, MD 21613	M – F 8:00 AM – 4:30 PM
	Talbot	Talbot County Family Support Center 215 Bay Street Easton, MD 21601	M – F 8:00 AM – 4:30 PM
Lower Shore WIC Program	Somerset	Seton Center 30632 Hampden Avenue Princess Anne, MD 21853	T 10:30 AM – 4:00 PM W 9:00 AM – 3:45 PM
Lower Shore WIC Program	Somerset	McCready Health 201 Hall Highway Crisfield, MD 21817	M 9:00 AM – 3:45 PM
		Somerset County Health Department 8928 Sign Post Road Somerset, MD 21871	1 st W (each month) 9:15 AM – 3:15 PM
	Wicomico	Wicomico County Health Department 801 North Salisbury Boulevard Salisbury, MD 21801	M, W, R, F 8:00 AM – 5:00 PM T 9:00 AM - 6:00 PM
	Worcester	Berlin Head Start 130 Flowers Street Berlin, MD 21811	M, F 9:15 AM – 3:30 PM
Pocomoke City Health Department 400 A Walnut Street Pocomoke City, MD 21851		R 9:15 AM – 3:30 PM	
Southern Maryland WIC Program	Charles	Charles County Health Department 4545 Crain Highway White Plains, MD 20695	M – F 8:00 AM – 5:00 PM
	St. Mary's	Leonardtwn 21580 Peabody Street	M – F

		Leonardtown, MD 20650	8:00 AM – 4:30 PM
		Lexington Park 21161 Lexwood Drive Lexington Park, MD 20653	M – F 8:00 AM – 4:30 PM
Southern Maryland WIC Program	Calvert	Calvert County Health Department 975 Solomons Island Road Prince Frederick, MD 20678	M – F 8:00 AM – 4:30 PM
		South Calvert WIC Clinic 14090 H.G. Trueman Road Suite 1400A Solomons Island, MD 20688	F 8:00 AM – 4:30 PM

Appendix C: SFY 2021 Eligible Population and Participation in Maryland WIC Program by County

County	Women			Infants			Children		
	Eligible s	Participant s	% of Eligibles	Eligible s	Participants	% of Eligibles	Eligible s	Participant s	% of Eligibles
Allegany	904	656	72.6%	445	357	80.2%	1,748	1,206	69.0%
Anne Arundel	4,611	3,351	72.7%	2,392	1,624	67.9%	9,311	5,480	58.9%
Baltimore City	9,851	7,991	81.1%	5,168	3,959	76.6%	20,610	12,976	63.0%
Baltimore	10,069	8,010	79.6%	5,054	4,042	80.0%	20,089	13,901	69.2%
Calvert	625	348	55.7%	321	193	60.1%	1,139	636	55.8%
Caroline	592	450	76.1%	292	242	82.9%	1,102	784	71.1%
Carroll	1,012	624	61.7%	507	326	64.3%	1,854	1,113	60.0%
Cecil	1,095	774	70.7%	565	394	69.7%	2,429	1,449	59.7%
Charles	1,563	1,232	78.8%	808	610	75.5%	3,269	2,214	67.7%
Dorchester	564	398	70.5%	288	193	67.0%	1,079	692	64.1%
Frederick	2,128	1,664	78.2%	1,093	802	73.4%	4,029	2,916	72.4%
Garrett	330	271	82.2%	155	119	76.8%	664	515	77.6%
Harford	1,947	1,418	72.8%	966	746	77.2%	4,084	2,561	62.7%
Howard	2,051	1,564	76.3%	1,090	824	75.6%	4,012	2,484	61.9%
Kent	163	134	82.2%	74	62	83.8%	356	226	63.5%
Montgomery	9,515	8,645	90.9%	5,003	3,854	77.0%	18,774	14,872	79.2%
Prince George's	12,780	11,361	88.9%	6,898	5,301	76.8%	27,500	19,102	69.5%
Queen Anne's	357	245	68.5%	188	125	66.5%	690	405	58.7%
Somerset	354	235	66.4%	175	135	77.1%	728	457	62.8%
St. Mary's	1,056	806	76.3%	530	425	80.2%	1,977	1,331	67.3%
Talbot	333	273	81.9%	183	426	68.9%	759	498	65.6%
Washington	2,078	1,457	70.1%	1,056	767	72.6%	4,081	2,622	64.2%
Wicomico	1,830	1,363	74.5%	922	672	72.9%	3,462	2,383	68.8%
Worcester	493	277	56.2%	249	139	55.8%	935	458	49.0%
Maryland	66,302	53,547	80.8%	34,422	26,037	75.6%	134,681	91,281	67.8%

