Appendix D.
Guidance for WIC State Agencies
Providing Participant Data

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WIC PC[STUDY YEAR]

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Section 1. Overview

The *Guidance for State Agencies Providing Participant Data* (the *Guidance*) is designed to help State agencies that administer the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) prepare and submit their participant data for the WIC participant and program characteristics [STUDY YEAR] (PC[STUDY YEAR]) study. The data will inform the PC[STUDY YEAR] report and the companion report on food packages. The *Guidance* provides a timeline of the major events for the PC[STUDY YEAR] study, instructions for data file creation, submission and formatting specifications for both Minimum Data Set (MDS) and Supplemental Data Set (SDS) participant data, and a worksheet for each State agency to submit in conjunction with its participant data for April [STUDY YEAR], the reference month for PC[STUDY YEAR].

Note: Reporting categories for income period were revised between the PC[PREVIOUS STUDY YEAR] and the PC[STUDY YEAR] reporting cycles (see section 4, item 13b). There were no other changes to MDS or SDS data elements.

A. Background

Since 1984, the U.S. Department of Agriculture's Food and Nutrition Service (FNS) has prepared biennial reports on WIC participant and program characteristics. These reports provide the most comprehensive and up-to-date statistics on WIC. The information is used to estimate budgets, design research, and review current and proposed WIC policies and procedures. The biennial reports include the following information:

- ▶ The demographic characteristics and income of WIC participants
- ▶ The nutritional risks of WIC participants
- ▶ The breastfeeding initiation rates and duration estimates for WIC participants
- ▶ WIC participation for migrant families
- ▶ Other topics as deemed appropriate by the Secretary of Agriculture

State agencies submit their participant data to FNS for each PC study. The *Guidance,* designed to help State agencies provide this data, describes the format for State agencies to use when compiling participant information for PC[STUDY YEAR]. MDS and SDS data are routinely collected and used to inform the PC reports. State agencies must collect and report all MDS data items, but they may choose whether to collect and report SDS data items. FNS, in cooperation with the Information Committee of the National WIC Association, developed the MDS and the SDS.

FNS has completed 16 previous PC reports. For the first three studies—PC1984, PC1988, and PC1990—FNS and its contractors collected information on nationally representative samples of WIC participants. Since PC1992, State agencies have provided MDS and SDS data—as well as other routinely collected information used to certify eligibility for WIC, guide nutrition education, and issue food instruments to WIC participants—from their automated client and management information systems. Insight Policy Research (Insight) and its subcontractor, Abt Associates, are assisting FNS in conducting the PC[STUDY YEAR] study.

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B. In Advance of the Reference Month

To facilitate data processing, State agencies begin by submitting two documents in advance of the data. These two documents are due on March 15, [STUDY YEAR]:

▶ **Nutritional Risk Worksheet.** Each State agency must specify whether it will provide its nutritional risk data using established Federal nutritional risk codes (available at www.partnerweb.usda.gov/default.aspx) or codes specific to the State agency. Agencies using State codes must use this worksheet to crosswalk their coding schemes to the Federal codes. In January [STUDY YEAR], Insight will provide each State agency with the Nutritional Risk Worksheet to complete and return. For convenience, Insight will also provide the State agency with the information the State agency submitted on its worksheet for PC[PREVIOUS STUDY YEAR].

▶ **Food Code Documentation.** Each State agency must provide a translation of the food package codes it used to prescribe foods to WIC participants; the translation will define the food items and quantities prescribed under those codes. Although State agencies may provide these data in a food package format or an item-quantity format, *the item-quantity format is preferred.*

C. Data Submissions for the PC[STUDY YEAR] Reference Month

For PC[STUDY YEAR], State agencies are to use the same protocols and reporting formats used for PC[PREVIOUS STUDY YEAR].

For the reference month of April [STUDY YEAR], each State agency will need to submit its MDS data and available SDS data on all WIC participants. The April [STUDY YEAR] MDS and SDS data must be submitted in the specified format and medium detailed in this *Guidance.* Most State agencies maintain information systems with automated recordkeeping, which they will use to produce datasets containing the desired variables.

SDS data, although technically not required, provide additional valuable information. Therefore, Insight asks that State agencies include all SDS items collected by their information systems in their PC[STUDY YEAR] data submissions.

1. Definition of WIC Participant for Use in the MDS and SDS

For PC[STUDY YEAR], WIC participants are defined as persons on WIC master lists or persons listed in WIC operating files who were certified to receive WIC benefits as of April [STUDY YEAR].[1]

Information To Include in the Datasets

▶ All participants, some of whom will have been certified up to 1 year ago

▶ Partially breastfeeding women, even if they receive no food package

▶ Fully breastfed infants, even if they receive no food package

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[1] In contrast, for regulatory reporting participation is defined as the number of certified individuals who claim their WIC food instruments each month.

Information To Exclude From the Datasets

▶ Persons on waiting lists for WIC benefits

2. MDS and SDS Specifications and Data File Creation

MDS and SDS dataset specifications consist of concise definitions of each variable and the categories to be used for reporting each variable; database field requirements (where in the file each variable must be reported); and the procedures for reporting missing data.

State agencies may gather MDS and SDS data in the manner that is most efficient and economical for them. The *Guidance* offers generic specifications that accommodate the variety of recordkeeping systems.

State agency technical staff should review and follow the guidelines for preparing PC[STUDY YEAR] data submissions. The file layouts for the MDS and the SDS are provided in sections 4 and 5, respectively, of the *Guidance*.

3. WIC Participant Data

State agencies should submit MDS and SDS data from their information systems for all of their WIC participants. Because all 90 State agencies fulfilled this requirement during recent data collections, the *Guidance* does not include sampling or record abstraction instructions.

State agencies that are unable to provide data on all participants in PC[STUDY YEAR] should contact Insight for detailed sampling instructions.

D. Contact Information

Please direct any questions about the PC[STUDY YEAR] study to [NAME] at Insight. [NAME] may be reached at [PHONE NUMBER]. Questions may also be submitted to Insight at the following email address: PC[STUDY YEAR]@insightpolicyresearch.com

Any additional documentation may be sent to the email address provided above or to [NAME] at the following address:

[NAME]
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Section 2. Timeline

This section provides the timeline and descriptions of major tasks for PC[STUDY YEAR]. Table 2.1 presents the data collection task schedule.

Table 2.1. Schedule of Major Data Collection Tasks

Date	Task Description
December [YEAR PRIOR TO STUDY YEAR]	State agencies receive the **PC[STUDY YEAR]** *Guidance*.
January [STUDY YEAR]	Insight makes initial telephone contact with each State agency to confirm receipt of the *Guidance*, update contact information, and answer questions about PC[STUDY YEAR].
	Insight sends the Nutritional Risk Worksheet and a recent version of the WIC Local Agency Directory (LAD) to State agencies.
February–March [STUDY YEAR]	Each State agency reviews and updates the **Nutritional Risk Worksheet** (described in section 1.B of this *Guidance*) and returns it to Insight by **March 15, [STUDY YEAR]**.
	Each State agency provides its **Food Code Documentation** (described in section 1.B of this *Guidance*) by **March 15, [STUDY YEAR]**.
	Each State agency updates its information in the WIC LAD through its Regional Office as necessary.
April [STUDY YEAR]	April is the reference month for PC[STUDY YEAR]. April data submissions from State agencies should contain information for all participants on WIC master lists or participants listed in WIC operating files who were certified to receive WIC benefits as of April [STUDY YEAR].[a]
May [STUDY YEAR]	Each State agency must deliver its initial MDS/SDS data file[b] to Insight as soon as possible after April once it has entered all its data. The **Data Transmittal Worksheet** (provided in section 6 of this *Guidance*) should be sent with the data. State agencies must submit their initial data files by no later than **July 13, [STUDY YEAR].**
July [STUDY YEAR]	**DEADLINE July 13, [STUDY YEAR]:** As required by FNS, State agencies must submit their initial MDS/SDS data files for PC[STUDY YEAR] to Insight by this date.
September [STUDY YEAR]	**DEADLINE September 14, [STUDY YEAR]:** As required by FNS, State agencies must submit their final, acceptable MDS/SDS data files for PC[STUDY YEAR] to Insight by this date. State agencies failing to achieve adequate data completeness and quality will be referred to FNS for appropriate action. To meet demand by reporting State agencies for prompt data analysis, those agencies lacking sufficient data completeness and quality may be removed from PC[STUDY YEAR] reporting.

[a] Any State agency that chooses to sample participants in PC[STUDY YEAR] should contact Insight for detailed sampling instructions.
[b] Each State agency should submit one file containing both MDS and SDS data.

Each State agency's timely completion and transmittal of its PC[STUDY YEAR] data submission will be very much appreciated.

A. PC[STUDY YEAR] Coordination

Insight will coordinate the collection of participant data from State agencies and ensure the data meet all FNS quality standards. Insight will establish and maintain the databases for PC[STUDY YEAR], run the data tabulations, and prepare the final report. An Insight staff member will be available to answer questions about MDS and SDS specifications and data abstraction. Insight requests that each State agency appoint a PC[STUDY YEAR] coordinator.

B. April Data Submissions

As explained earlier in this *Guidance*, data collection for PC[STUDY YEAR] will focus on individuals enrolled in WIC as of April [STUDY YEAR].

Each State agency should submit a data file containing both MDS data and available SDS data for every individual on WIC master lists or listed in WIC operating files who is certified to receive WIC benefits in April [STUDY YEAR].

State agencies should prepare and submit PC[STUDY YEAR] data submissions as soon after April as possible. Only complete data files should be submitted. Therefore, a State agency that expects to obtain updated data after April [STUDY YEAR] for income, breastfeeding, participation, or other data fields should submit its data file only *after* entering this additional information.

Important: The initial MDS/SDS data file for PC[STUDY YEAR] must be submitted to Insight by **July 13, [STUDY YEAR].** The final, clean MDS/SDS data file that meets FNS quality standards must be submitted by **September 14, [STUDY YEAR].** Any State agencies not achieving sufficient data quality by September 15 will be referred to FNS for action. Such State agencies may be dropped from PC[STUDY YEAR], causing data loss to the WIC program. State agencies should maintain all April [STUDY YEAR] data and materials for at least 3 years.

Section 3. Data Transmittal and Cleaning Specifications

C. General Instructions

▶ State agencies are responsible for providing accurate data for PC[STUDY YEAR]. State agencies should review all MDS/SDS data for accuracy and consistency but should not delete outliers to conform to the cleaning specifications in this *Guidance*. FNS will accept all data State agencies consider legitimate. Insight staff will check PC[STUDY YEAR] data submissions for accuracy and will bring any questions or concerns to the attention of State agency contacts. It is the responsibility of each State agency to correct its PC[STUDY YEAR] data submission if needed.

▶ Each State agency should save and keep **a backup copy of its entire April [STUDY YEAR] system file** (not just the PC[STUDY YEAR] submission) in case problems with its April PC[STUDY YEAR] data submission require a second submission. Saving a backup of the entire April [STUDY YEAR] system file will ensure the required data can be recreated.

▶ For PC[STUDY YEAR], WIC participants are defined as persons on WIC master lists or persons listed in WIC operating files who were certified to receive WIC benefits in April [STUDY YEAR]. *State agencies should not include persons on eligibility waiting lists in PC[STUDY YEAR].*

▶ Zero should never be used to indicate missing data. Zero should be used to indicate only an actual value of zero. This instruction is particularly important for income values because there is a critical difference between an income value of zero and a missing income value. *If data are missing, the corresponding field(s) should be left blank.*

▶ It is essential to report income information for all WIC participants—including those who are adjunctively income-eligible for WIC—to describe income among the overall WIC population. Therefore, FNS requires all State agencies to collect and submit income information on participants who are adjunctively eligible. These data are for descriptive purposes only and do not affect a participant's eligibility for WIC.

▶ A State agency is required to use either U.S. standard units of measurement or metric measurements when reporting height and weight. U.S. standard measurements of pounds, ounces, feet, and inches do not have to be converted to metric data and vice versa. It is important that State agencies place these measures in the correct positions in the MDS file to allow for accurate data interpretation.

▶ State agencies must ensure all dates appear in MMDDYYYY format. Dates should be complete for month, day, and year and be within logical ranges. *For any part of the date that is missing or unavailable—such as the day—the field should be left blank*. For PC[STUDY YEAR], there should be no dates after April 30, [STUDY YEAR], except for expected dates of delivery for pregnant women, blood measurement dates, and breastfeeding data collection dates.

▶ State agencies must report certification categories and risk priority codes in every participant record. (See items 6a—Certification Category, and 9—Risk Priority.)

▶

- In previous years, it appeared that between certification appointments, some State agency systems automatically updated certification category information based on date of birth. For example, on an infant participant's first birthday, the system might change the participant's certification category from that of an infant to that of a child even though the participant had not yet been recertified as a child. *For PC[STUDY YEAR], State agencies should report the same certification category into which the participant was classified at the most recent certification.* For example, even if a State agency's system automatically updates an infant's certification on or around the participant's first birthday, the participant should be reported in PC[STUDY YEAR] as an infant if the official recertification has not yet occurred. (See item 6a—Certification Category.)

- State agencies need to submit breastfeeding data for infants and children who, in April [STUDY YEAR], are aged 6 through 13 months. To provide the most accurate estimates of breastfeeding duration, it is important, particularly for currently breastfed infants, that State agencies collect data as close to April [STUDY YEAR] as is feasible. All four breastfeeding variables must be provided to calculate breastfeeding initiation and duration rates. (See items 19a—Currently Breastfed; 19b—Ever Breastfed; 19c—Length of Time Breastfed; and 19d—Date Breastfeeding Data Collected.)

- Field lengths are based on the number of bytes (characters). To ensure all data submissions are consistent in format, binary data may not be submitted.

- All fields are right justified except for race/ethnicity (item 5), the 10 nutritional risk codes (items 14a–14j), and the 14 food codes (items 20a–20n), which are alphanumeric fields and should be left justified and blank filled.

- Reserve codes have been found to be unnecessary and unwieldy in processing PC data. *If data are missing,* the corresponding field(s) should be left blank.

D. Data Submission

Submit files in ASCII text format with one record per line. State agencies should submit data files using the dedicated SFTP site for PC[STUDY YEAR]. State agencies will be provided SFTP specifications at a later date, including all the information needed to transmit their files successfully. State agencies that are unable to submit data files via the FTP site should contact Nicole Kline at 703-504-9494 or at the following email address: PC[STUDY YEAR]@insightpolicyresearch.com

E. Documentation

Each data submission should be accompanied by a completed **Data Transmittal Worksheet** (provided in section 6 of this *Guidance*) that contains the following information:

- The number of records, or observations, in the data file

- A list of the SDS elements delivered, including an explanation for why any were not used

- The name of the State agency, the contact person, and the contact phone number

- Any other information needed to interpret the data

As discussed earlier in this *Guidance*, State agencies should submit the following documentation to Insight by March 15, [STUDY YEAR]:

- ► **Nutritional Risk Worksheet** (to crosswalk State agency nutritional risk codes with Federal nutritional risk codes), current as of April [STUDY YEAR], or an indication that Federal codes are used in the April [STUDY YEAR] file

- ► **Food Code Documentation**, current as of April [STUDY YEAR], that defines the food items and quantities prescribed under the food package codes used by the State agency in the PC[STUDY YEAR] file

F. Cleaning Specifications

Cleaning specifications are included in the MDS and SDS specifications in sections 4 and 5 of this *Guidance* under the table headings *Allowable values* and *Notes*. These cleaning specifications include the ranges of allowable values, intervariable consistency checks, procedures for handling missing values, and categories of participants for which each item should be reported. State agencies should not delete outliers to conform to the cleaning specifications if they consider the data to be legitimate.

These specifications are provided to help State agencies write cleaning routines for their own systems and to provide quality control for PC[STUDY YEAR] and future data submissions. Many State agencies will have additional cleaning specifications of their own. State agencies should continue to use their own quality-control procedures in maintaining their WIC participant information databases.

G. Minimum Dataset File

Table 3.1 provides the file layout for each element in the MDS.

Table 3.1. MDS File Layout

Data Item Number	Description of Data Item	Beginning Column	Ending Column	Field Width by Bytes (No Binary Data)
1.	State Agency ID	1	7	7
2a.	Local Agency ID	8	10	3
2b.	Service Site ID	11	13	3
3.	Case ID	14	24	11
4.	Date of Birth (MMDDYYYY)	25	32	8
5.	Race/Ethnicity **(Left Justified)**	33	38	6
6a.	Certification Category	39	39	1
6b.	Expected Date of Delivery (MMDDYYYY) ⎫ OR	40	47	8
6c.	Weeks Gestation ⎬	48	49	2
7.	Date of Certification (MMDDYYYY)	50	57	8
8.	Sex	58	58	1
9.	Risk Priority Code	59	59	1
10a.	Participation in TANF	60	60	1
10b.	Participation in SNAP	61	61	1
10c.	Participation in Medicaid	62	62	1
11.	Migrant Status	63	63	1
12.	Number in Family/Economic Unit	64	65	2
13a.	Family/Economic Unit Income	66	70	5
13b.	Income Period	71	71	1
13c.	Income Ranges	72	73	2
14a.	Nutritional Risk 1 **(Left Justified)**	74	79	6
14b.	Nutritional Risk 2 **(Left Justified)**	80	85	6
14c.	Nutritional Risk 3 **(Left Justified)**	86	91	6
14d.	Nutritional Risk 4 **(Left Justified)**	92	97	6
14e.	Nutritional Risk 5 **(Left Justified)**	98	103	6
14f.	Nutritional Risk 6 **(Left Justified)**	104	109	6
14g.	Nutritional Risk 7 **(Left Justified)**	110	115	6
14h.	Nutritional Risk 8 **(Left Justified)**	116	121	6
14i.	Nutritional Risk 9 **(Left Justified)**	122	127	6
14j.	Nutritional Risk 10 **(Left Justified)**	128	133	6
15a.	Hemoglobin	134	136	3
15b.	Hematocrit	137	139	3
15c.	Date of Blood Test (MMDDYYYY)	140	147	8
16a(i).	Participant's Weight in Pounds ⎫ **Report pounds**	148	150	3
16a(ii).	Nearest Quarter Pound of ⎬ **or grams**	151	151	1

Data Item Number	Description of Data Item		Beginning Column	Ending Column	Field Width by Bytes (No Binary Data)
	Participant's Weight				
16b.	Participant's Weight in Grams		152	157	6
17a(i).	Participant's Height in Inches	Report inches or centimeters	158	159	2
17a(ii).	Nearest Eighth of an Inch of Participant's Height		160	160	1
17b.	Participant's Height in Centimeters		161	164	4
18.	Date of Height and Weight Measure (MMDDYYYY)		165	172	8
19a.	Currently Breastfed		173	173	1
19b.	Ever Breastfed		174	174	1
19c.	Length of Time Breastfed		175	176	2
19d.	Date Breastfeeding Data Collected (MMDDYYYY)		177	184	8
20a.	Food Code 1 (Left Justified)		185	194	10
20b.	Food Code 2 (Left Justified)		195	204	10
20c.	Food Code 3 (Left Justified)		205	214	10
20d.	Food Code 4 (Left Justified)		215	224	10
20e.	Food Code 5 (Left Justified)		225	234	10
20f.	Food Code 6 (Left Justified)		235	244	10
20g.	Food Code 7 (Left Justified)		245	254	10
20h.	Food Code 8 (Left Justified)		255	264	10
20i.	Food Code 9 (Left Justified)		265	274	10
20j.	Food Code 10 (Left Justified)		275	284	10
20k.	Food Code 11 (Left Justified)		285	294	10
20l.	Food Code 12 (Left Justified)		295	304	10
20m.	Food Code 13 (Left Justified)		305	314	10
20n.	Food Code 14 (Left Justified)		315	324	10
20o.	Food Package Type		325	326	2

State agencies should ensure all MDS/SDS data items are right justified except for race/ethnicity (item 5), the 10 nutritional risk codes (items 14a–14j), and the 14 food codes (items 20a–20n).

State agencies that cannot fully report their data using these specifications should contact Insight for guidance on developing an alternative file layout.

H. Supplemental Dataset File

Table 3.2 provides the file layout for each element in the SDS.

Table 3.2. SDS File Layout

Data Item Number	Description of Data Item	Beginning Column	Ending Column	Field Width by Bytes (No Binary Data)
21.	Date of First WIC Certification (MMDDYYYY)	327	334	8
22.	Education Level	335	336	2
23.	Number in Household in WIC	337	338	2
24.	Date Previous Pregnancy Ended (MMDDYYYY)	339	346	8
25.	Total Number of Pregnancies	347	348	2
26.	Total Number of Live Births	349	350	2
27a(i).	Prepregnancy Weight in Pounds — Report pounds or grams	351	353	3
27a(ii).	Nearest Quarter Pound of Participant's Prepregnancy Weight	354	354	1
27b.	Participant's Prepregnancy Weight in Grams	355	360	6
28a(i).	Weight Gain During Pregnancy in Pounds — Report pounds or grams	361	363	3
28a(ii).	Nearest Quarter Pound of Participant's Weight Gain During Pregnancy	364	364	1
28b.	Participant's Weight Gain During Pregnancy in Grams	365	370	6
29a(i).	Birth Weight in Pounds — Report pounds/ounces or grams	371	372	2
29a(ii).	Ounces of Birth Weight	373	374	2
29b.	Birth Weight in Grams	375	378	4
30a(i).	Length at Birth in Inches — Report inches or centimeters	379	380	2
30a(ii).	Nearest Eighth of an Inch of Length at Birth	381	381	1
30b.	Length at Birth in Centimeters	382	384	3
31.	Participation in the Food Distribution Program on Indian Reservations	385	385	1

Section 4. Minimum Dataset Definitions and Specifications

The MDS data items are listed in this chapter. The data items should reflect the participant's status for each item at the time of the most recent WIC certification as of April [STUDY YEAR]. However, as a convenience to State agencies that do not maintain historical files and that update the information in their automated systems during certification periods, the information that is on file for each participant in April [STUDY YEAR] will be accepted. As stated previously in this *Guidance,* for biennial PC reports, the term participant means a person on WIC master lists or a person listed in WIC operating files who is certified to receive WIC benefits in April [STUDY YEAR].

The MDS data items are as follows:

1. **State Agency ID.** A unique number that permits linkage to the State agency where the participant was certified; it is the first 7 digits of the 10-digit Local Agency Code maintained by FNS in the WIC Local Agency Directory (WIC LAD)

2a. **Local Agency ID.** A unique number that permits linkage to the local agency where the participant was certified as eligible for WIC benefits; it is the last 3 digits of the 10-digit Local Agency Code maintained by FNS in the WIC LAD

2b. **Service Site ID.** A unique number that permits linkage to the service site where the participant was certified; for State agencies that submitted service site- or clinic-level data for the WIC LAD, service site IDs appear in the WIC LAD as the 3-digit codes under Administering Agency

    Note: For PC[STUDY YEAR], State agencies are asked not to substitute Service Site ID for Local Agency ID (item 2a)

3. **Case ID.** A unique record number assigned to each participant to maintain individual privacy at the national level

    Note: For each participant, State agencies are asked to construct a Case ID for their PC[STUDY YEAR] data submissions; they are asked not to use the case number of the participant as listed in State agency-held files

4. **Date of Birth.** Month, day, and year of the participant's birth reported in MMDDYYYY format

5. **Race/Ethnicity.** Requires classification of participants based on one ethnicity category (Hispanic/Latino or Non-Hispanic/Latino) and five racial categories, which consist of (1) American Indian or Alaska Native; (2) Asian; (3) Black or African American; (4) Native Hawaiian or Other Pacific Islander; and (5) White. These categories are required by the Office of Management and Budget; one or more racial categories may be selected

    State agencies may report race/ethnicity using one of two formats:

    ► Yes/No for each of the categories, generating a six-digit code (1 = Yes; 2 = No)

    ► Three digits to represent key combinations of racial selections, with the first digit representing ethnicity and the last two representing race combinations

6a.   **Certification Category.** One of five possible categories under which a person is certified as eligible for WIC benefits: (1) pregnant woman; (2) breastfeeding woman; (3) postpartum woman (not breastfeeding); (4) infant (younger than 12 months); and (5) child (12–59 months)

6b–c.   **Expected Date of Delivery or Number of Weeks Gestation.** For pregnant women, the projected date of delivery (MMDDYYYY format) or the number of weeks since the last menstrual period as determined at WIC certification

7.   **Date of Certification.** The date the person was declared eligible for the most recent WIC certification as of April [STUDY YEAR]; month, day, and year should be reported in MMDDYYYY format

8.   **Sex.** For infants and children, male or female

9.   **Risk Priority Code.** The participant priority level for WIC certification at the time of the most recent WIC certification as of April [STUDY YEAR]

10a–c. **Participation in TANF, SNAP, Medicaid.** The participant's reported participation in each of these programs at the time of the most recent WIC certification as of April [STUDY YEAR]

11.   **Migrant Status.** The participant's migrant status according to the definition of a migrant farmworker in Federal WIC regulations[2]

12.   **Number in Family or Economic Unit.** The number of persons in the family or economic unit upon which WIC income eligibility was based

        States may report a self-declared number in the family or economic unit for a participant whose income was not required to be determined as part of the WIC certification process. These participants consist of—

        ▶ Adjunctively income-eligible participants (eligible because of TANF, SNAP, or Medicaid participation)

        ▶ Participants deemed income-eligible under optional procedures available to the State agency in section 246.7(d)(2)(vi–viii) of Federal WIC regulations. These optional procedures are means-tested programs identified by the State to determine automatic WIC income eligibility, income eligibility of pregnant women, and income eligibility of American Indian and instream migrant farmworker applicants

13a–c. **Family or Economic Unit Income.**

        ▶ For persons for whom income is determined during the certification process, the income amount that was determined to qualify the participant for WIC at the time of the most recent WIC certification as of April [STUDY YEAR]

        FNS will convert income expressed in nonannual measures (weekly, monthly, etc.) to annual amounts

        ▶

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[2] For this and other references to WIC regulations in the descriptions of the MDS data items, see Special Supplemental Nutrition Program for Women, Infants and Children (2014a).

▶ For descriptive purposes only, for participants whose income was not required to be determined as part of the WIC certification process, the self-reported income at the time of certification; these participants include adjunctively income-eligible participants and those persons deemed eligible under optional procedures available to the State agency in section 246.7(d)(2)(vi–viii) of Federal WIC regulations

State agencies should not use zero to indicate income values that are missing or not available; zero should indicate only an actual value of zero

Note: Because a large proportion of WIC participants are adjunctively income-eligible, their income information is essential to describe income among the overall WIC population. State agencies are required to provide income information on those adjunctively eligible for WIC according to section 246.7 of Federal WIC regulations

14a–j. **Nutritional Risks Present at Certification.** Highest priority nutritional risks assigned for the most recent WIC certification as of April [STUDY YEAR], up to a maximum of 10; uniform coding is required in submissions from all State agencies according to WIC Policy Memorandum 98-9

15a–b. **Hemoglobin or Hematocrit.** Value for the measure of iron status that applies for the most current WIC certification period as of April [STUDY YEAR]

15c. **Date of Blood Test.** Month, day, and year (in MMDDYYYY format) that blood measure was collected and reported; State agencies must submit this for all participants reporting a blood measure

16a–b. **Weight.** Participant's weight measured according to CDC nutrition surveillance program standards (nearest one-quarter pound); State agencies may report weight in grams if weight is not measured in pounds and quarter pounds

17a–b. **Height.** Participant's height (or length) measured according to CDC nutrition surveillance program standards (nearest one-eighth inch); State agencies may report height in centimeters if height is not measured in inches and eighth inches

18. **Date of Height and Weight Measure.** Date (in MMDDYYYY format) of the height and weight measures that were used during the most recent WIC certification period as of April [STUDY YEAR]

19a. **Currently Breastfed.** For infants and children aged 6 through 13 months in April [STUDY YEAR], whether the participant was being breastfed at that time

19b. **Ever Breastfed.** For infants and children aged 6 through 13 months in April [STUDY YEAR], whether the participant ever received breastmilk

19c. **Length of Time Breastfed.** For infants and children aged 6 through 13 months in April [STUDY YEAR], the number of weeks the participant received breastmilk

19d. **Date Breastfeeding Data Collected.** For infants and children aged 6 through 13 months in April [STUDY YEAR], the date (in MMDDYYYY format) on which breastfeeding status was reported

20a–n. **Food Codes.** State agencies have the option of providing food data in an item-quantity format or a food package format; the agencies are asked to provide the food package codes or item codes and quantities for all foods prescribed for the participant during the month of April [STUDY YEAR]

20o. **Food Package Type.** A code representing the Federal WIC regulations food package descriptor; this descriptor uniquely represents the FNS food package number (I through VII), participant type, breastfeeding status, and (for infants and children only) age associated with the reported food code(s) for that participant

1. State Agency ID

Description	
This is the State agency where the participant is enrolled.	
Column position	1–7
Field length	7
Data type	Numeric
Special instructions	Using the 10-digit identification code used in the WIC LAD maintained by FNS, enter the first 7 digits.

2a.   Local Agency Number

Description	
This is the unique number for the local agency where the participant is certified.	
Column position	8–10
Field length	3
Data type	Numeric
Special instructions	Using the 10-digit identification code used in the WIC LAD maintained by FNS, enter the last 3 digits.

2b. Service Site ID

Description	
This is the unique number for the service site or clinic where the participant is certified.	
⚠️ *Service Site ID is not a substitute for Local Agency ID.*	
Column position	11–13
Field length	3
Data type	Numeric
Special instructions	State agencies that submitted service site-level or clinic-level data for the WIC LAD are asked to include the corresponding service site IDs in their PC[STUDY YEAR] submissions. Service Site IDs appear in the WIC LAD as the three-digit codes under Administering Agency.

3.   Case ID

Description
This is a unique record number assigned to each participant to maintain individual privacy at the national level. This ID will be a State agency-generated ID that will link the MDS file record with the data in the State agency-held record. The State agency or office should maintain a separate file that connects the publicly released data to be submitted to FNS with the information that will not be released but is maintained in the separate file.

⚠️ *The Case ID cannot be the regular participant ID; instead, it will be a State agency-generated identifier separately assigned by the State agency.*

Column position	14–24
Field length	11
Data type	Alphanumeric

4.   Date of Participant's Birth

Description	
This is the participant's birth date. Date must be reported in MMDDYYYY format.	
Column position	25–32
Field length	8
Data type	Numeric
Notes	Year should be reported as four digits (for example, [STUDY YEAR]). ⊘ There should be no birth dates after April 30, [STUDY YEAR]. ⊘ For infants, there should be no birth dates before 2017. ⊘ For children, there should be no birth dates before 2011 or after 2017. All dates should fall within valid month, day, and year ranges. ⚠ *Any part of the date that is missing or unavailable should be left blank.*

Example	For January 3, [STUDY YEAR], the entry would be
	
	    0103 [STUDY YEAR]
	
	If day is unknown, the entry would be
	
	    01 [STUDY YEAR] (The missing part of the date—the day—should be left blank.)

5.   Participant's Race/Ethnicity

Description

Since PC2006, State agencies have had to submit their data using the revised WIC racial and ethnic categories required by OMB. Under the new standards, participants are classified according to their ethnicity as well as their race. There are five racial classifications and one ethnic classification.

a. ***Participants are classified as either Hispanic/Latino or Not Hispanic/Latino according to the following criteria:***

Hispanic/Latino ethnicity. A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race. The term "Spanish origin" can be used in addition to "Hispanic or Latino."

b. ***The five racial classifications are as follows; one or more racial categories may be selected by each participant:***

American Indian or Alaska Native. A person having origins in any of the original peoples of North and South America (including Central America) who maintains tribal affiliation or community attachment.

Asian. A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent, including Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American. A person having origins in any of the black racial groups of Africa. Terms such as "Haitian" or "Negro" can be used in addition to "Black or African American."

Native Hawaiian or Other Pacific Islander. A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White. A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.

State agencies may report race/ethnicity using one of two methods:

1. *Yes/No Format:* Responses of either 1 (for Yes) or 2 (for No) for each of the racial/ethnic categories in the order listed above to form a six-digit string; the first digit of the string represents whether the participant is Hispanic, and the remaining five digits represent whether the participant belongs to each of the racial categories as listed in the order above

Example: Non-Hispanic Asian and Black 221122

2. *Standard Codes:* Three-digit codes representing key combinations of one or more racial selections, with the first digit representing ethnicity and the last two digits representing race; these codes are defined as follows:

101 = American Indian or Alaska Native, Hispanic/Latino

201 = American Indian or Alaska Native, Not Hispanic/Latino

102 = Asian, Hispanic/Latino

202 = Asian, Not Hispanic/Latino

5.   Participant's Race/Ethnicity, continued

Description, continued

103 = Black or African American, Hispanic/Latino

203 = Black or African American, Not Hispanic/Latino

104 = Native Hawaiian or Other Pacific Islander, Hispanic/Latino
204 = Native Hawaiian, Not Hispanic/Latino

105 = White, Hispanic/Latino
205 = White, Not Hispanic/Latino

106 = American Indian or Alaska Native; White; Hispanic/Latino
206 = American Indian or Alaska Native; White; Not Hispanic/Latino

107 = Asian; White; Hispanic/Latino
207 = Asian; White; Not Hispanic/Latino

108 = Black or African American; White; Hispanic/Latino
208 = Black or African American; White; Not Hispanic/Latino

109 = American Indian or Alaska Native; Black or African American; Hispanic/Latino
209 = American Indian or Alaska Native; Black or African American; Not Hispanic/Latino

110 = American Indian or Alaska Native; Asian; Hispanic/Latino
210 = American Indian or Alaska Native; Asian; Not Hispanic/Latino

111 = American Indian or Alaska Native; Native Hawaiian or Other Pacific Islander; Hispanic/Latino

211 = American Indian or Alaska Native; Native Hawaiian or Other Pacific Islander; Not Hispanic/Latino

112 = Asian; Black; Hispanic/Latino
212 = Asian; Black; Not Hispanic/Latino

113 = Asian; Native Hawaiian or Other Pacific Islander; Hispanic/Latino
213 = Asian; Native Hawaiian or Other Pacific Islander; Not Hispanic/Latino

114 = Black; Native Hawaiian or Other Pacific Islander; Hispanic/Latino
214 = Black; Native Hawaiian or Other Pacific Islander; Not Hispanic/Latino

115 = Native Hawaiian or Other Pacific Islander; White; Hispanic/Latino
215 = Native Hawaiian or Other Pacific Islander; White; Not Hispanic/Latino

116 = American Indian or Alaska Native; Asian; Black; Hispanic/Latino
216 = American Indian or Alaska Native; Asian; Black; Not Hispanic/Latino

117 = American Indian or Alaska Native; Asian; Native Hawaiian or Other Pacific Islander; Hispanic/Latino
217 = American Indian or Alaska Native; Asian; Native Hawaiian or Other Pacific Islander; Not Hispanic/Latino

118 = American Indian or Alaska Native; Asian; White; Hispanic/Latino
218 = American Indian or Alaska Native; Asian; White; Not Hispanic/Latino

5. Participant's Race/Ethnicity, continued

Description, continued

119 = American Indian or Alaska Native; Black; Native Hawaiian or Other Pacific Islander; Hispanic/Latino

219 = American Indian or Alaska Native; Black; Native Hawaiian or Other Pacific Islander; Not Hispanic/Latino

120 = American Indian or Alaska Native; Black; White; Hispanic/Latino
220 = American Indian or Alaska Native; Black; White; Not Hispanic/Latino

121 = American Indian or Alaska Native; Native Hawaiian or Other Pacific Islander; White; Hispanic/Latino
221 = American Indian or Alaska Native; Native Hawaiian or Other Pacific Islander; White; Not Hispanic/Latino

122 = Asian; Black; Native Hawaiian or Other Pacific Islander; Hispanic/Latino
222 = Asian; Black; Native Hawaiian or Other Pacific Islander; Not Hispanic/Latino

123 = Asian; Black; White; Hispanic/Latino
223 = Asian; Black; White; Not Hispanic/Latino

124 = Asian; Native Hawaiian or Other Pacific Islander; White; Hispanic/Latino
224 = Asian; Native Hawaiian or Other Pacific Islander; White; Not Hispanic/Latino

125 = Black; Native Hawaiian or Other Pacific Islander; White; Hispanic/Latino
225 = Black; Native Hawaiian or Other Pacific Islander; White; Not Hispanic/Latino

126 = American Indian or Alaska Native; Asian; Black; Native Hawaiian or Other Pacific Islander; Hispanic/Latino
226 = American Indian or Alaska Native; Asian; Black; Native Hawaiian or Other Pacific Islander; Not Hispanic/Latino

127 = American Indian or Alaska Native; Asian; Black; White; Hispanic/Latino
227 = American Indian or Alaska Native; Asian; Black; White; Not Hispanic/Latino

128 = American Indian or Alaska Native; Asian; Native Hawaiian or Other Pacific Islander; White; Hispanic/Latino
228 = American Indian or Alaska Native; Asian; Native Hawaiian or Other Pacific Islander; White; Not Hispanic/Latino

129 = American Indian or Alaska Native; Black; Native Hawaiian or Other Pacific Islander; White; Hispanic/Latino
229 = American Indian or Alaska Native; Black; Native Hawaiian or Other Pacific Islander; White; Not Hispanic/Latino

130 = Asian; Black; Native Hawaiian or Other Pacific Islander; White; Hispanic/Latino
230 = Asian; Black; Native Hawaiian or Other Pacific Islander; White; Not Hispanic/Latino

131 = American Indian or Alaska Native; Asian; Black; Native Hawaiian or Other Pacific Islander; White; Hispanic/Latino

231 = American Indian or Alaska Native; Asian; Black; Native Hawaiian or Other Pacific Islander; White; Not Hispanic/Latino

5.   Participant's Race/Ethnicity, continued

Description, continued
199 = Hispanic/Latino; Missing race
299 = Not Hispanic/Latino; Missing race
9xx = Missing ethnicity 999 = Missing ethnicity and race

Column position	33–38
Field length	6
Data type	Numeric
Allowable values	*In Yes/No Format:* Six-digit code with each digit representing 1 = Yes or 2 = No *In Standard Codes:* 101–131, 199, 201-231, 299, 9xx, 999. Left justified followed by three blank columns

6a.   Certification Category

Description
This is one of five possible categories the participant was assigned at certification.

    1 = Pregnant Woman
    2 = Breastfeeding Woman
    3 = Postpartum Woman, not breastfeeding
    4 = Infant (younger than 12 months)
    5 = Child (12–59 months)

⚠ **Certification Category must be reported for all participants. This item may not be blank.**

Column position	39
Field length	1
Data type	Numeric
Notes	Carefully check the assignment of certification category codes. Errors in these assignments affect every reported number in PC[STUDY YEAR].
	Participants certified as children may not be younger than 11 months or older than 5 years.
	A breastfeeding woman may not be certified past her child's first birthday.
	A postpartum woman who is not breastfeeding may not be certified for more than 6 months after her child is born or the pregnancy has otherwise ended.

6b. Expected Date of Delivery

Description	
This is the expected date of delivery for the pregnant woman participant. Date must be reported in MMDDYYYY format.	
This item may be supplied instead of Number of Weeks Gestation (item 6c).	
Column position	40–47
Field length	8
Data type	Numeric
Notes	Year should be reported as four digits (for example, [STUDY YEAR]). ⊙ Expected Date of Delivery should be reported only for pregnant women. All dates should fall within valid month, day, and year ranges. Unlike most other PC[STUDY YEAR] dates, expected dates of delivery may fall after April [STUDY YEAR]. ⚠ *Any part of the date that is missing or unavailable should be left blank.*

Example	For May 3, [STUDY YEAR], the entry would be
	
	    0503 [STUDY YEAR]
	
	If day is unknown, the entry would be
	
	    05 [STUDY YEAR] (The missing part of the date—the day—should be left blank.)

6c.   Number of Weeks Gestation

Description	
This is the number of weeks since the pregnant woman participant's last menstrual period as of the date of the most recent certification in April [STUDY YEAR]. This item may be supplied **instead of Expected Date of Delivery** (item 6b).	
Column position	48–49
Field length	2
Data type	Numeric
Allowable values	1–43
Notes	⚠ Number of Weeks Gestation should be reported only for pregnant women.

7.   Date of Certification

Description	
This is the date (month, day, and year) on which the participant was most recently certified for WIC as of April [STUDY YEAR]. Date must be reported in MMDDYYYY format.	
Column position	50–57
Field length	8
Data type	Numeric
Allowable values	1–43
Notes	Year should be reported as four digits (for example, [STUDY YEAR]). ⊘ There should be no certification dates after April 30, [STUDY YEAR]. ⊘ There should be no certification dates before March 1, 2017. All dates should fall within valid month, day, and year ranges. ⚠ *Any part of the date that is missing or unavailable should be left blank.*

Example	For January 3, [STUDY YEAR], the entry would be
	
	    0103 [STUDY YEAR]
	
	If day is unknown, the entry would be
	
	    01 [STUDY YEAR] (The missing part of the date—the day—should be left blank.)

8.   Participant's Sex

Description
This is the indication of whether the infant or child is male or female.

   1 = Male

   2 = Female

Column position	58
Field length	1
Data type	Numeric
Allowable values	1–2
Notes	⊘ This item is required only for infants and children.

9.   Risk Priority Codes

Description

This is the participant's risk priority level on the date of the most recent certification as of April [STUDY YEAR].

1 = Priority I: Pregnant and breastfeeding women and infants at nutritional risk as demonstrated by anthropometric or hematological assessment or by other documented nutritionally related medical condition

2 = Priority II: Infants up to 6 months of age of mothers who participated in WIC during pregnancy or who would have been eligible to participate under Priority I documented medical condition. This priority may also be assigned to a breastfeeding mother of an infant who is classified as Priority II

3 = Priority III: Children at nutritional risk as demonstrated by anthropometric or hematological assessment or other documented medical condition. Can also include high-risk postpartum women

4 = Priority IV: Pregnant and breastfeeding women and infants at nutritional risk as demonstrated by inadequate dietary pattern. Can also include high-risk postpartum women and homeless and migrant pregnant and breastfeeding women and infants

5 = Priority V: Children at nutritional risk due to inadequate dietary pattern. Can also include high-risk postpartum women and homeless and migrant children

6 = Priority VI: Postpartum women, not breastfeeding, at nutritional risk on either medical or dietary criteria unless assigned to higher priorities at State agency discretion. At State agency option, this priority can also include homeless and migrant postpartum women

7 = Priority VII: Previously certified participants likely to regress in nutritional status without continuation of supplemental food. At State agency option, this priority can also include homeless and migrant participants

Column position	59
Field length	1
Data type	Numeric
Allowable values	1–7
Notes	If the Risk Priority Code equals 1, the Certification Category should equal 1 or 2 or 4.
	If the Risk Priority Code equals 2, the Certification Category should equal 2 or 4.
	If the Risk Priority Code equals 3, the Certification Category should equal 3 or 5.
	If the Risk Priority Code equals 4, the Certification Category should equal 1 or 2 or 3 or 4.
	If the Risk Priority Code equals 5, the Certification Category should equal 3 or 5.
	If the Risk Priority Code equals 6, the Certification Category should equal 3.
	If the Risk Priority Code equals 7, the Certification Category should equal 1 or 2 or 3 or 4 or 5.

10a. Participation in Other Programs: Temporary Assistance to Needy Families (TANF)

Description

This indicates whether the participant or family member of the participant receives TANF benefits.

    1 = Yes

    2 = No

Column position	60
Field length	1
Data type	Numeric
Allowable values	1–2
Notes	This item indicates reported participation at the time of the most recent certification. If this information has been updated since certification, indicate the participant's current participation status for this program. If column 60 = 1, then income entries should be present in the column positions of either 66–70 or 72–73.

10b. Participation in Other Programs: Supplemental Nutrition Assistance Program (SNAP)

Description	
This indicates whether the participant receives SNAP benefits.	

1 = Yes

2 = No

Column position	61
Field length	1
Data type	Numeric
Allowable values	1–2
Notes	This item indicates reported participation at the time of the most recent certification. If this information has been updated since certification, indicate the participant's current participation status for this program.
	If column 61 = 1, then income entries should be present in the column positions of either 66–70 or 72–73.

10c. Participation in Other Programs: Medicaid

Description	
This indicates whether the participant receives Medicaid benefits or is a member of a family in which a pregnant woman or an infant is certified eligible to receive assistance under Medicaid.	

    1 = Yes

    2 = No

Column position	62
Field length	1
Data type	Numeric
Allowable values	1–2
Notes	This item indicates reported participation at the time of the most recent certification. If this information has been updated since certification, indicate the participant's current participation status for this program. If column 62 = 1, then income entries should be present in the column positions of either 66–70 or 72–73.

11.   Migrant Status

Description
This indicates whether any member of the family is a migrant worker. According to Federal WIC regulations, a migrant farmworker is an individual whose principal employment is in agriculture on a seasonal basis, who has been so employed within the last 24 months, and who has established a temporary abode for the purposes of such employment.

    1 = Yes
    2 = No

Column position	63
Field length	1
Data type	Numeric
Allowable values	1–2

12.   Number in Economic Unit

Description

This is the number of persons in the economic unit upon which income eligibility is based. This is a self-declared number in the economic unit for those eligible for WIC as a result of participation in other means-tested programs or those persons deemed eligible under optional procedures available to the State agency according to section 246.7(d)(2)(vi-viii) of Federal WIC regulations.

⚠ Number in Economic Unit must be reported for all participants.

Column position	64–65
Field length	2
Data type	Numeric
Allowable values	1–20
Notes	⚠ Zero is not a valid value for this item.

13a. Family Income

Description

For a person whose income was determined during the certification process, enter the income amount that was used to qualify the individual for WIC benefits. Amounts may be reported for various periods of time (weekly, monthly, bimonthly, annually, or twice monthly) as specified in item 13b. For a participant whose income was not required to be determined for WIC certification, enter a self-declared income for descriptive purposes only. Self-declared incomes for these participants may be entered in dollar amounts in items 13a and 13b or by income categories in item 13c.

For a participant whose income was not required to be determined for WIC certification, entry of a self-declared amount should not be used by State agency data systems to alter WIC eligibility decisions. From a regulatory point of view, such eligibility is based on the means test provided by other programs such as TANF, SNAP, Medicaid, or other programs selected by the State agency. As long as the participant is a bona fide participant in such other programs, apparent discrepancies in income amounts need not be edited from WIC files nor examined for potential effects on WIC eligibility.

For State agencies that are also Indian Tribal Organizations and that have opted to implement alternative income eligibility procedures as set forth in section 246.7(d)(2)(viii) of Federal WIC regulations, self-declared incomes may be stated in dollars or selected from income codes in item 13c.

Column position	66–70
Field length	5
Data type	Numeric State agencies may enter income for adjunctively income-eligible participants in either item 13a or item 13c.
Notes	If a record does not contain a dollar amount income in column positions 66–70, it should contain an income value in column positions 72–73. ⚠ Zero should be used only to indicate an income of zero. (Zero may not indicate missing values or values not reported. If income data is missing or not reported, this field should be left blank.)

13b.   Income Period

Description

This is the period covered by the amount described in Family Income (item 13a).

 1 = Weekly
 2 = Monthly
 3 = Biweekly
 4 = Annually
 5 = Twice Monthly (Bimonthly)

⚠️ *Income Period should be present for every record containing a dollar value for income.*

Column position	71
Field length	1
Data type	Numeric
Allowable values	1–5
Notes	FNS will convert income expressed in different measures (i.e., weekly, monthly, yearly) to annual amounts.

13c. Income Ranges for Participants With Adjunct Eligibility

Description
This is the self-declared income for the family/economic unit expressed in a dollar range for any participant whose income was not required to be determined as part of the WIC certification process.

Participants whose incomes are not required to be determined during WIC certification include adjunctively income-eligible participants and those persons deemed income-eligible under optional procedures available to the State agency according to section 246.7(d)(2)(vi-vii) of Federal WIC regulations.

Code	Monthly	Annually	Code	Monthly	Annually
1	$0 –$99	$0 –$1,199	33	$3,200–$3,299	$38,400–$39,599
2	$100–$199	$1,200–$2,399	34	$3,300–$3,399	$39,600–$40,799
3	$200–$299	$2,400–$3,599	35	$3,400–$3,499	$40,800–$41,999
4	$300–$399	$3,600–$4,799	36	$3,500–$3,599	$42,000–$43,199
5	$400–$499	$4,800–$5,999	37	$3,600–$3,699	$43,200–$44,399
6	$500–$599	$6,000–$7,199	38	$3,700–$3,799	$44,400–$45,599
7	$600–$699	$7,200–$8,399	39	$3,800–$3,899	$45,600–$46,799
8	$700–$799	$8,400–$9,599	40	$3,900–$3,999	$46,800–$47,999
9	$800–$899	$9,600–$10,799	41	$4,000–$4,099	$48,000–$49,199
10	$900–$999	$10,800–$11,999	42	$4,100–$4,199	$49,200–$50,399
11	$1,000–$1,099	$12,000–$13,199	43	$4,200–$4,299	$50,400–$51,599
12	$1,100–$1,199	$13,200–$14,399	44	$4,300–$4,399	$51,600–$52,799
13	$1,200–$1,299	$14,400–$15,599	45	$4,400–$4,499	$52,800–$53,999
14	$1,300–$1,399	$15,600–$16,799	46	$4,500–$4,599	$54,000–$55,199
15	$1,400–$1,499	$16,800–$17,999	47	$4,600–$4,699	$55,200–$56,399
16	$1,500–$1,599	$18,000–$19,199	48	$4,700–$4,799	$56,400–$57,599
17	$1,600–$1,699	$19,200–$20,399	49	$4,800–$4,899	$57,600–$58,799
18	$1,700–$1,799	$20,400–$21,599	50	$4,900–$4,999	$58,800–$59,999
19	$1,800–$1,899	$21,600–$22,799	51	$5,000–$5,099	$60,000–$61,199
20	$1,900–$1,999	$22,800–$23,999	52	$5,100–$5,199	$61,200–$62,399
21	$2,000–$2,099	$24,000–$25,199	53	$5,200–$5,299	$62,400–$63,599
22	$2,100–$2,199	$25,200–$26,399	54	$5,300–$5,399	$63,600–$64,799
23	$2,200–$2,299	$26,400–$27,599	55	$5,400–$5,499	$64,800–$65,999
24	$2,300–$2,399	$27,600–$28,799	56	$5,500–$5,599	$66,000–$67,199
25	$2,400–$2,499	$28,800–$29,999	57	$5,600–$5,699	$67,200–$68,399
26	$2,500–$2,599	$30,000–$31,199	58	$5,700–$5,799	$68,400–$69,599

27	$2,600–$2,699	$31,200–$32,399		59	$5,800–$5,899	$69,600–$70,799
28	$2,700–$2,799	$32,400–$33,599		60	$5,900–$5,999	$70,800–$71,999
29	$2,800–$2,899	$33,600–$34,799		61	$6,000–$6,099	$72,000–$73,199
30	$2,900–$2,999	$34,800–$35,999		62	$6,100–$6,199	$73,200–$74,399
31	$3,000–$3,099	$36,000–$37,199		63	$6,200 +	$74,400 +
32	$3,100–$3,199	$37,200–$38,399				

13c. Income Ranges for Participants With Adjunct Eligibility, continued

Column position	72–73
Field length	2
Data type	Numeric
Allowable values	1–63
Notes	State agencies may enter income for adjunctively income-eligible participants in either item 13a or item 13c.
	If a record does not contain a dollar amount for income in column positions 66–70, an entry should be present for adjunctive income range in column positions 72–73.
	If column positions 60, 61, or 62 equal 1, then an entry for adjunctive income should be present in the column positions of either 66–70 or 72–73.
	⊘ Zero is not a valid entry for this item.

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14a–14j. Nutritional Risks

Description	
These items indicate the participant's nutritional risks present at certification as recorded in State agency files.	

Column position	*Nutritional Risk (any order)* *Position*	
	a. Nutritional Risk 1	
	b. Nutritional Risk 2	
	c. Nutritional Risk 3	
	d. Nutritional Risk 4	
	e. Nutritional Risk 5	
	f. Nutritional Risk 6	
	g. Nutritional Risk 7	
	h. Nutritional Risk 8	
	i. Nutritional Risk 9	
	j. Nutritional Risk 10	
Field length	6 for each code; 60 total	
Data type	Alphanumeric	
Notes	Using this format, State agencies can report up to 10 nutritional risks per participant. Nutritional risks can be listed in any order. State agency nutritional risk codes will be translated into Federal nutritional risk codes.	
	⚠️ *Each Nutritional Risk should be left justified and blank filled.*	

15a. Hemoglobin

Description

This is the value for the measure of iron status that applies to the participant's current certification. This item must be reported in grams/dl (XX.Y) with a single implied decimal place. For example, 14.9 should be coded as 149.

This item may be supplied instead of Hematocrit (item 15b).

Column position	134–136
Field length	3
Data type	Numeric
Notes	This item is not required for infant participants younger than 9 months of age.
	For children, if there is no blood measurement recorded for the current certification, provide the value for the most recent available certification.
	ⓘ Zero should not be used to indicate missing values. If hemoglobin data is missing or not reported, this field should be left blank.

15b. Hematocrit

Description	
This is the value for the measure of iron status that applies to the participant's current certification. This item must be reported to the nearest tenth of a percent (XX.Y) with a single implied decimal place. For example, 37.6 should be coded as 376.	
This item may be supplied instead of Hemoglobin (item 15a).	

Column position	137–139
Field length	3
Data type	Numeric
Notes	This item is not required for infant participants younger than 9 months of age.
	For children, if there is no blood measurement recorded for the current certification, provide the value for the most recent available certification.
	ⓘ Zero should not be used to indicate missing values. If hemoglobin data is missing or not reported, this field should be left blank.

15c. Date of Blood Test

Description	
This is the date (month, day, and year) on which the participant's blood measure was most recently taken as of April [STUDY YEAR]. Date must be reported in MMDDYYYY format. This is required for all participants for whom a blood measure is reported.	

Column position	140–147
Field length	8
Data type	Numeric
Notes	Year should be reported as four digits (for example, 2017). All dates must fall within legitimate month, day, and year ranges. ⚠️ *Any part of the date that is missing or unavailable should be left blank.*
Example	For January 3, [STUDY YEAR], the entry would be 0103 [STUDY YEAR] If day is unknown, the entry would be 01 [STUDY YEAR] (The missing part of the date—the day—should be left blank.)

16a(i). Participant's Weight in Pounds

Description	
This is the participant's weight in whole pounds.	
This item may be supplied instead of Participant's Weight in Grams (item 16b).	
Column position	148–150
Field length	3
Data type	Numeric
Notes	Participant weight may be reported in either pounds and quarter pounds or grams.
Example	For a weight of 9 pounds 12 ounces, the entry would be ___9 *(If the length of the field is fewer than three characters, the leftmost column(s) should be left blank; there should be no underscore in place of the values.)* The number of ounces is reported as quarter pounds in item 16a(ii).

16a(ii). Nearest Quarter Pound of Participant's Weight

Description	
This is the nearest quarter pound of the participant's weight.	
Column position	151
Field length	1
Data type	Numeric
Allowable Values	0–3
Notes	Quarter pounds should be reported only when weight in pounds is reported. ⚠ This measure is typically only reported for infants. Participant weight may be reported in either pounds and quarter pounds or grams.
Example	For a weight of 9 pounds 12 ounces, the entry would be 3 because 12 ounces is equal to 3 quarter pounds. The number of whole pounds is reported in item 16a(i).

16b. Participant's Weight in Grams

Description	
This is the participant's weight in grams.	
This item may be supplied instead of Participant's Weight in Pounds (item 16a).	

Column position	152–157
Field length	6
Data type	Numeric
Notes	Participant weight may be reported in either pounds and quarter pounds or grams.
Example	For a weight of 90,718 grams (approximately 200 pounds), the entry would be __ 90718 *(If the length of the field is fewer than six characters, the leftmost column(s) should be left blank; there should be no underscore in place of the values.)*

17a(i). Participant's Height in Inches

Description	
This is the participant's height (length) in whole inches.	
This item may be supplied instead of Participant's Height in Centimeters (item 17b).	
Column position	158–159
Field length	2
Data type	Numeric
Notes	Participant height may be reported in either inches and one-eighth inches or centimeters.
Example	For a height of 33.5 inches, the entry would be 33 The fractional number of inches is reported as one-eighth inches in item 17a(ii).

17a(ii). Nearest Eighth of an Inch of Participant's Height

Description	
This is the nearest eighth of an inch of the participant's height (length).	
Column position	160
Field length	1
Data type	Numeric
Allowable values	0–7
Notes	Eighth inches should be reported only when height in inches is reported. This measure is typically only reported for infants. Participant height may be reported in either inches and one-eighth inches or centimeters.
Example	For a height of 33.5 inches, the entry would be 4 because half an inch is equal to 4 one-eighth inches.

17b. Participant's Height in Centimeters

Description	
This is the participant's height (length) measured to the nearest tenth of a centimeter with a single implied decimal place. This item may be supplied instead of Participant's Height in Inches (item 17a).	
Column position	161–164
Field length	4
Data type	Numeric
Notes	Participant height may be reported in either inches and one-eighth inches or centimeters.
Example	For 30.5 centimeters, the entry would be _305 For 28 centimeters, the entry would be _280 to allow for the single implied decimal place.

18. Date of Height and Weight Measure

Description	

Column position	165–172
Field length	8
Data type	Numeric
Notes	Year should be reported as four digits (for example, [STUDY YEAR]). 🛑 There should be no dates after October 31, [STUDY YEAR]. All dates should fall within valid month, day, and year ranges. ⚠️ *Any part of the date that is missing or unavailable should be left blank.*

Example	For January 3, [STUDY YEAR], the entry would be
	
	    0103 [STUDY YEAR]
	
	If day is unknown, the entry would be
	
	    01 [STUDY YEAR] (The missing part of the date—the day—should be left blank.)

19a. Currently Breastfed

Description	
For infants and children aged 6 through 13 months in April [STUDY YEAR], this indicates whether the participant was currently receiving breastmilk. 1 = Yes 2 = No	

For infants and children aged 6 through 13 months in April [STUDY YEAR], this indicates whether the participant was currently receiving breastmilk.

    1 = Yes
    2 = No

Column position	173
Field length	1
Data type	Numeric
Allowable values	1–2
Notes	ⓘ This item is required only for infants and children aged 6 through 13 months (infants and children born between February 1, 2017, and October 31, 2017). A State agency may report breastfeeding data for additional infant and children participants if this approach is better suited to the configuration of the State agency's automated processing system. A State agency that chooses this option should indicate this choice on the Data Transmittal Worksheet (see section 6). For this item, data only for infants and children aged 6 through 13 months in April [STUDY YEAR] will be analyzed and reported for PC[STUDY YEAR]. ⚠ *If this information is missing or not available, leave the column position blank.* See figure 4.1 for a flowchart of breastfeeding items in this dataset.

19b. Ever Breastfed

Description	
For infants and children aged 6 through 13 months in April [STUDY YEAR] and who were not currently receiving breastmilk, this indicates whether the participant ever received breastmilk.	

1 = Yes
2 = No

Column position	174
Field length	1
Data type	Numeric
Allowable values	1–2
Notes	(!) This item is required only for infants and children aged 6 through 13 months (infants and children born between February 1, 2017, and October 31, 2017) and for whom a value of 2 is entered for item 19a.
	A State agency may report breastfeeding data for additional infant and children participants if this approach is better suited to the configuration of the State agency's automated processing system. A State agency that chooses this option should indicate this choice on the Data Transmittal Worksheet (see section 6). For this item, data only for infants and children aged 6 through 13 months in April [STUDY YEAR] will be analyzed and reported for PC[STUDY YEAR].
	⚠ *If this information is missing or not available, leave the column position blank.*

19c. Length of Time Breastfed

Description

For infants and children aged 6 through 13 months in April [STUDY YEAR] who were not currently receiving breastmilk but who had ever received breastmilk, this is the number of weeks the participant received breastmilk.

The conversions listed below are consistent with conversions applied by the CDC Surveillance System.

To convert months to weeks: *To convert days to weeks:*

⚠️ *If this information is missing or not available, leave the column positions blank.*

Column position	175–176
Field length	2
Data type	Numeric
Allowable values	0–72

19c. Length of Time Breastfed, continued

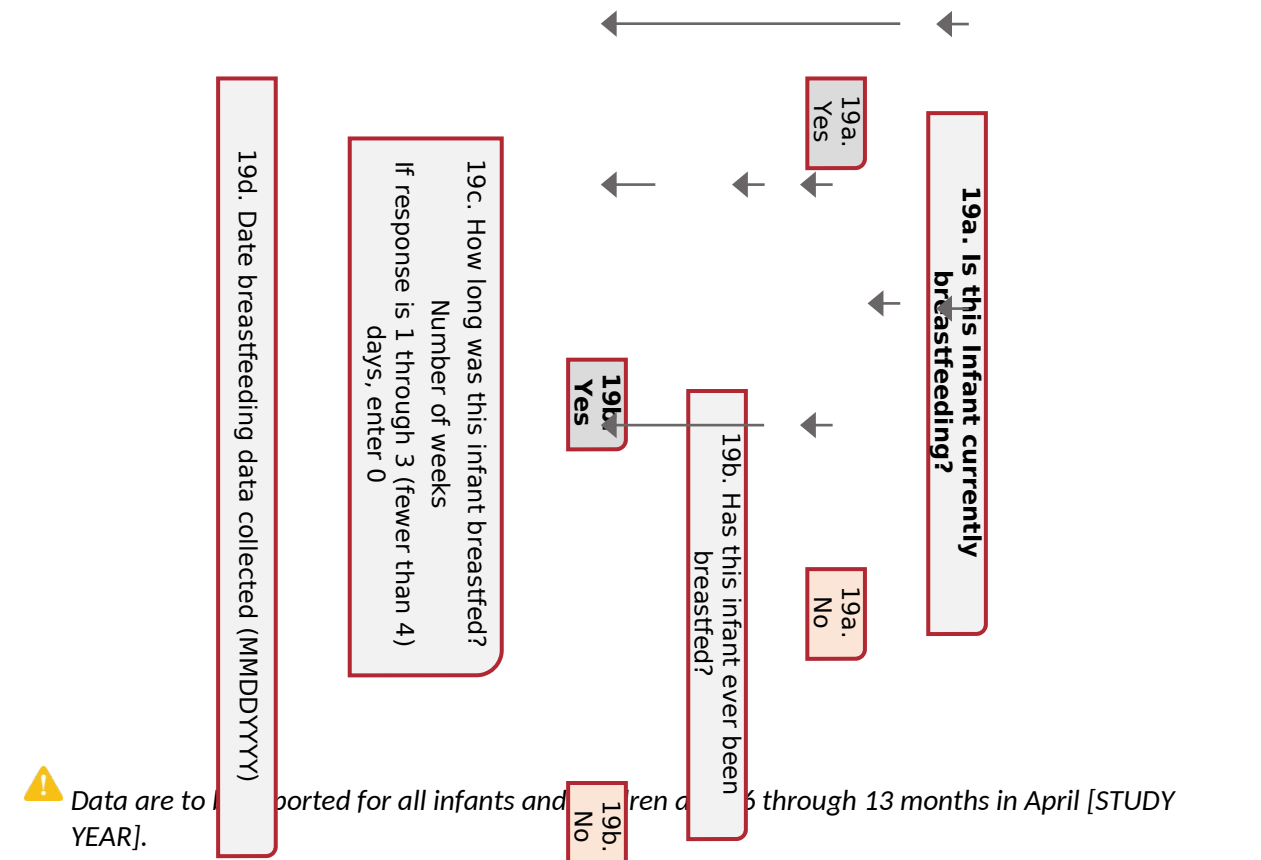|	
Notes	⚠ This item is required only for infants and children aged 6 through 13 months (infants and children born between February 1, 2017, and October 31, 2017) who had ever breastfed but were not currently breastfeeding, and for whom a value of 2 (not currently breastfeeding) is entered for item 19a and a value of 1 (yes response to ever breastfed) is entered for item 19b. A State agency may report breastfeeding data for additional infant and child WIC participants if this approach is better suited to the configuration of the State agency's automated processing system. A State agency that chooses this option should indicate this choice on the Data Transmittal Worksheet (see section 6). Zero is a valid entry for this item. If the infant or child was breastfed for fewer than 4 days, enter zero. If the data is missing, leave columns 175 and 176 blank.
Example	If the infant or child was breastfed for 5 months, the entry would be 22

19d. Date Breastfeeding Data Collected

Description	
For infants or children aged 6 through 13 months in April [STUDY YEAR], this is the date (month, day, and year) on which breastfeeding status was reported by the mother. Date must be reported in MMDDYYYY format.	

Column position	177–184
Field length	8
Data type	Numeric
Notes	Year should be reported as four digits (for example, [STUDY YEAR]). 🛇 This item is required only for infants aged 6 through 13 months (infants and children born between February 1, 2017 and October 31, 2017). A State agency may report breastfeeding data for additional infant and child WIC participants if this approach is better suited to the configuration of the State agency's automated processing system. A State agency that chooses this option should indicate this choice on the Data Transmittal Worksheet (see section 6). Some State agencies may not update this field every time breastfeeding status is confirmed. In these cases, the date of the most recent food issuance or office visit may be used as a proxy for the most recent date breastfeeding data were collected if breastfeeding status was confirmed during the visit. All dates should fall within valid month, day, and year ranges. ⚠ *Any part of the date that is missing or unavailable should be left blank.* For infants and children reported as no longer breastfeeding in the State agency's system, there is no need to repeat the breastfeeding questions for infants and children aged 6 through 13 months. However, the State agency must ensure the data accurately reflect the full breastfeeding duration for each infant and child participant. State or local agency staff can verify this information when the infant or child is aged 6 through 13 months. The date of this administrative validation should be entered as the date of breastfeeding data collected. The agency should consult its WIC administrator to determine which process to use. Furthermore, the State agency should be sure to document derivation of dates when submitting its data file. Entries in column positions 177–184 are essential for analysis of all breastfeeding data entries. Ensure these data are provided along with the data on other breastfeeding items.

	For March 3, [STUDY YEAR], the entry would be
	0303 [STUDY YEAR]
Example	If day is unknown, the entry would be
	03 [STUDY YEAR] (The missing part of the date—the day—should be left blank.)

Figure 4.1. Flowchart of Breastfeeding Questions for WIC Minimum Dataset PC[STUDY YEAR]

19a. Is this Infant currently breastfeeding?

19a. Yes

19a. No

19b. Has this infant ever been breastfed?

19b. Yes

19b. No

19c. How long was this infant breastfed? Number of weeks
If response is 1 through 3 (fewer than 4) days, enter 0

19d. Date breastfeeding data collected (MMDDYYYY)

⚠️ *Data are to be reported for all infants and children ages 6 through 13 months in April [STUDY YEAR].*

20a–20n. Food Codes

Note: State agencies have the option of providing food data in a food package format or in an item-quantity format. *The item-quantity format is preferred.*

1. For State Agencies Submitting Food Items and Quantities

Description
These are item codes and quantities for all food items prescribed for the participant during the month of April [STUDY YEAR].

Column position	a. Item Code 1	185–191	a. Quantity 1	192–194
	b. Item Code 2	195–201	b. Quantity 2	202–204
	c. Item Code 3	205–211	c. Quantity 3	212–214
	d. Item Code 4	215–221	d. Quantity 4	222–224
	e. Item Code 5	225–231	e. Quantity 5	232–234
	f. Item Code 6	235–241	f. Quantity 6	242–244
	g. Item Code 7	245–251	g. Quantity 7	252–254
	h. Item Code 8	255–261	h. Quantity 8	262–264
	i. Item Code 9	265–271	i. Quantity 9	272–274
	j. Item Code 10	275–281	j. Quantity 10	282–284
	k. Item Code 11	285–291	k. Quantity 11	292–294
	l. Item Code 12	295–301	l. Quantity 12	302–304
	m. Item Code 13	305–311	m. Quantity 13	312–314
	n. Item Code 14	315–321	n. Quantity 14	322–324

Field length	10 for each item/quantity combination; 140 total
Data type	Alphanumeric
Notes	Using this format, State agencies can report up to 14 food items and quantities. Each item code can include up to seven characters, and each quantity can include up to three characters. State agencies that cannot fully report their food codes using these specifications should contact Insight for guidance on developing an alternative file layout. ⚠️ *Each food item code and food quantity should be left justified and blank filled.*

20a–20n. Food Codes, continued

2. For State Agencies Submitting Food Package Codes

Description		
These are food package code(s) for the WIC food package or for all food instruments prescribed for the participant during the month of April [STUDY YEAR].		

Column position	*Item Code*	*Position*
	a. Food Package Code 1	185–194
	b. Food Package Code 2	195–204
	c. Food Package Code 3	205–214
	d. Food Package Code 4	215–224
	e. Food Package Code 5	225–234
	f. Food Package Code 6	235–244
	g. Food Package Code 7	245–254
	h. Food Package Code 8	255–264
	i. Food Package Code 9	265–274
	j. Food Package Code 10	275–284
	k. Food Package Code 11	285–294
	l. Food Package Code 12	295–304
	m. Food Package Code 13	305–314
	n. Food Package Code 14	315–324

Field length	10 for each code; 140 total
Data type	Alphanumeric
Notes	Using this format, State agencies can report up to 14 food package codes—each 10 characters. State agencies that cannot fully report their food codes using these specifications should contact Insight for guidance on developing an alternative file layout. ⚠️ *Each food package code should be left justified and blank filled.*

20o. Food Package Type

Description
This is the participant's final rule food package descriptor. This descriptor uniquely represents the participant's FNS food package number (I through VII), participant type, breastfeeding status, and (for infants and children only) age. This is to be reported as a number from 1 to 28 as defined in the table that follows:

Food Package Type	Participant Type	Food Package Number	Final Rule Food Package Descriptor	Age	Category
1	Infants	Food Package I	I-FF-A	0–3.9 months	Fully formula-fed
2			I-FF-B	4–5.9 months	Fully formula-fed
3			I-BF/FF-A	0–0.9 months	Partially breastfed
4			I-BF/FF-B	1–3.9 months	Partially breastfed
5			I-BF/FF-C	4–5.9 months	Partially breastfed
6			I-BF-A	0–3.9 months	Fully breastfed
7			I-BF-B	4–5.9 months	Fully breastfed
8		Food Package II	II-FF	6–11.9 months	Fully formula-fed
9			II-BF/FF	6–11.9 months	Partially breastfed
10			II BF	6–11.9 months	Fully breastfed
11	Medical	Food Package III	III I-FF-A	0–3.9 months	Fully formula-fed
12			III I-FF-B	4–5.9 months	Fully formula-fed
13			III I-BF/FF-A	0–0.9 months	Partially breastfed
14			III I-BF/FF-B	1–3.9 months	Partially breastfed
15			III I-BF/FF-C	4–5.9 months	Partially breastfed
16			III II-FF	6–11.9 months	Fully formula-fed
17			III II-BF/FF	6–11.9 months	Partially breastfed
18			III IV-A	1–1.9 years	Children
19			III IV-B	2–4.9 years	Children
20			III V	Women	Pregnant and partially breastfeeding (up to 1 year postpartum)
21			III VI	Women	Nonbreastfeeding postpartum and partially (minimally) breast feeding (up to 6 months postpartum)
22			III VII	Women	Fully breastfeeding (up to 1 year postpartum)
23	Children	Food Package IV	IV-A	1–1.9 years	Children
24			IV-B	2–4.9 years	Children
25	Women	Food Package V	V	Women	Pregnant and partially (mostly) breastfeeding (up to 1 year postpartum)

26		Food Package VI	VI	Women	Nonbreastfeeding postpartum and partially (minimally) breastfeeding (up to 6 months postpartum)
27		Food Package VII	VII	Women	Fully breastfeeding; partially (mostly) breastfeeding multiples; pregnant with multiples
28		No Food Package	N/A	Women	Partially (minimally) breastfeeding (more than 6 months postpartum)

20o. Food Package Type, continued

Column position	325–326
Field length	2
Data type	Numeric
Notes	Food Package Type should correspond to the participant's Food Code(s).

Section 5. Supplemental Dataset Definitions and Specifications

The SDS data items are listed in this chapter. State agencies that currently collect these items should include them in their April [STUDY YEAR] data submissions. The data items should reflect the participant's status for each item at the time of the most recent WIC certification as of April [STUDY YEAR]. However, as a convenience to State agencies that do not maintain historical files and that update the information in their automated systems during certification periods, the information that is on file for each participant in April [STUDY YEAR] will be accepted. As stated previously in this *Guidance*, for biennial PC reports, the term participant means a person on WIC master lists or a person listed in WIC operating files who is certified to receive WIC benefits in April [STUDY YEAR].

The SDS data items are as follows:

21. **Date of First WIC Certification.** Date the participant was first certified for WIC in MMDDYYYY format; for pregnant, breastfeeding, and postpartum women, this applies to the current/most recent pregnancy and not to prior pregnancies

22. **Education Level.** For pregnant, breastfeeding, and postpartum women, the highest grade or year of school completed; for infants and children, the highest grade or year of school completed by the mother or primary caretaker

23. **Number in Household in WIC.** The number of people in the participant's household receiving WIC benefits

24. **Date Previous Pregnancy Ended.** For pregnant women, the date that the previous pregnancy ended in MMDDYYYY format

25. **Total Number of Pregnancies.** For pregnant women, the total number of times the woman has been pregnant, including this pregnancy; all live births; and any pregnancies resulting in miscarriage, abortion, or stillbirth

26. **Total Number of Live Births.** For pregnant women, the total number of babies born alive to this woman, including babies who may have died shortly after birth

27a–b. **Prepregnancy Weight.** For pregnant women only, the participant's weight immediately prior to pregnancy; weight may be reported either in pounds and ounces or in grams

28a–b. **Weight Gain During Pregnancy.** For breastfeeding and postpartum women, the participant's weight gain during pregnancy as taken immediately at or prior to delivery; weight gain during pregnancy may be reported in either pounds and quarter pounds or in grams

29a–b. **Birth Weight.** For infants and children, the participant's weight at birth measured according to CDC nutrition surveillance program standards (pounds/ounces); birth weight may be reported either in pounds and ounces or in grams

30a–b. **Birth Length.** For infants and children, the participant's length measured according to CDC nutrition surveillance program standards (nearest one-eighth inch); birth length may be reported either in inches and eighth inches or in centimeters

31. **Participation in the Food Distribution Program on Indian Reservations.** The participant's reported participation in this program at the time of the most recent WIC certification as of April [STUDY YEAR]

21.   Date of First WIC Certification

Description	
This is the date (month, day, and year) on which the participant was first certified for WIC. Date must be reported in MMDDYYYY format. For pregnant women, this item applies to the current pregnancy and not to prior pregnancies. For breastfeeding and postpartum women, this item applies to the most recent pregnancy. For infants and children, this item refers to the first WIC certification ever recorded.	

Column position	327–334
Field length	8
Data type	Numeric
Notes	Year should be reported as four digits (for example, [STUDY YEAR]). ⓘ The date of first WIC certification should not fall after April 30, [STUDY YEAR]. All dates must fall within legitimate month, day, and year ranges. ⚠ Any part of the date that is missing or not available should be left blank.
Example	For January 3, [STUDY YEAR], the entry would be 0103 [STUDY YEAR] If day is unknown, the entry would be 01 [STUDY YEAR] (The missing part of the date—the day—should be left blank.)

22.   Education Level

Description
For women, this is the highest grade of school (0–12) or year of college (13, 14, 15, 16 . . .) completed by the participant; for infants and children, this is the highest grade of school or year of college completed by the mother or primary caretaker.

Column position	335–336
Field length	2
Data type	Numeric
Allowable values	0–18
Notes	Zero is a valid entry for this item and should be used for any WIC participant who has completed less than 1 year of school. ⚠ If these data are missing, leave columns 335 and 336 blank.

23.   Number in Household in WIC

Description
This is the number of people in the participant's household (the economic unit used for WIC certification) enrolled in WIC in April [STUDY YEAR]; for example, all those individuals who have the same family identifier.

Column position	337–338
Field length	2
Data type	Numeric
Allowable values	1–20
Notes	This number should be no greater than the number in the economic unit entered in item 12.

24. Date Previous Pregnancy Ended

Description	
This is the date (month, day, and year) on which the pregnant woman participant's previous pregnancy ended. Date must be reported in MMDDYYYY format.	
Column position	339–346
Field length	8
Data type	Numeric
Notes	Year should be reported as four digits (for example, [STUDY YEAR]). All dates must fall within legitimate month, day, and year ranges. ⚠ Any part of the date that is missing or not available should be left blank.
Example	For January 3, 2017 the entry would be 01032017 If day is unknown, the entry would be 01 2017 (The missing part of the date—the day—should be left blank.)

25.   Total Number of Pregnancies

Description	
This is the total number of times the pregnant woman participant has been pregnant, including this pregnancy and any pregnancies resulting in birth, miscarriage, abortion, or stillbirth.	
Column position	347–348
Field length	2
Data type	Numeric
Allowable values	1–20
Notes	⚠ This item should be reported for pregnant women only. The count should include the current pregnancy. ⚠ Zero is not a valid entry for this item.

26. Total Number of Live Births

Description	
	This is the total number of babies born alive to the pregnant woman participant, including those infants who may have died shortly after birth.
Column position	349–350
Field length	2
Data type	Numeric
Allowable values	0–20
Notes	ⓘ This item should be reported for pregnant women only.
	Zero is a valid entry for this item and should be used for reporting information on women who have experienced no previous live births.
	⚠ If these data are missing, leave columns 349 and 350 blank.

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27a(i). Prepregnancy Weight in Pounds

Description	
This is the pregnant woman participant's weight immediately prior to pregnancy in whole pounds. This item may be supplied instead of Participant's Prepregnancy Weight in Grams (item 27b).	
Column position	351–353
Field length	3
Data type	Numeric
Notes	⊖ This item should be reported only for pregnant women. Prepregnancy weight may be reported in either pounds and quarter pounds or grams.
Example	For a weight of 120 pounds 8 ounces, the entry would be 120 The number of ounces is reported as quarter pounds in item 27a(ii).

27a(ii). Nearest Quarter Pound of Participant's Prepregnancy Weight

Description	
This is the nearest quarter pound of the pregnant woman participant's weight immediately prior to pregnancy.	
Column position	354
Field length	1
Data type	Numeric
Allowable values	0–3
Notes	This item should be reported only if prepregnancy weight in pounds [item 27a(i)] is reported. ⓘ This item should be reported only for pregnant women. Prepregnancy weight may be reported in either pounds and quarter pounds or grams.
Example	For a weight of 120 pounds 8 ounces, the entry would be 2 (8 ounces = 2 quarter pounds) The number of whole pounds is reported in item 27a(i).

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27b. Participant's Prepregnancy Weight in Grams

Description	
This is the pregnant woman participant's weight immediately prior to pregnancy in grams.	
This item may be supplied instead of Prepregnancy Weight in Pounds (item 27a).	
Column position	355–360
Field length	6
Data type	Numeric
Notes	⊘ This item should be reported only for pregnant women. Prepregnancy weight may be reported in either pounds and quarter pounds or grams.

28a(i). Weight Gain During Pregnancy in Pounds

	Description
This is the breastfeeding or postpartum woman participant's weight gain in pounds during pregnancy as measured at or immediately prior to delivery. This item may be supplied instead of Participant's Weight Gain in Grams (item 28b).	
Column position	361–363
Field length	3
Data type	Numeric
Allowable values	-20–50
Notes	ⓘ This item should be reported only for breastfeeding and postpartum women. Weight gain during pregnancy may be reported in either pounds and quarter pounds or grams. If negative weight gain is reported, insert a negative sign (-) before the value.
Example	For a weight of 20 pounds 4 ounces, the entry would be 20 The number of ounces is reported as quarter pounds in item 28a(ii).

28a(ii). Nearest Quarter Pound of Participant's Weight Gain During Pregnancy

Description	
This is the nearest quarter pound of the breastfeeding or postpartum woman participant's weight gain as measured during pregnancy.	
Column position	364
Field length	1
Data type	Numeric
Allowable values	0–3
Notes	This item should be reported only if weight gain during pregnancy in pounds [item 28a(i)] is reported. ⚠ This item should be reported only for breastfeeding and postpartum women. Weight gain during pregnancy may be reported in either pounds and quarter pounds or grams.
Example	For a weight of 20 pounds 4 ounces, the entry would be 1 (4 ounces = 1 quarter pound) The number of whole pounds is reported in item 28a(i).

28b. Participant's Weight Gain During Pregnancy in Grams

	Description
	This is the breastfeeding or postpartum woman participant's weight gain in grams during pregnancy as measured at or immediately prior to delivery.
	This item may be supplied instead of Weight Gain During Pregnancy in Pounds (item 28a).

Column position	365–370
Field length	6
Data type	Numeric
Allowable values	-10000–25000
Notes	⊙ This item should be reported only for breastfeeding and postpartum women.
	Weight gain during pregnancy may be reported in either pounds and quarter pounds or grams.
	If negative weight gain is reported, insert a negative sign (-) preceding the value.

29a(i). Birth Weight in Pounds

Description	
This is the infant or child participant's birth weight in whole pounds.	
This item may be supplied instead of Birth Weight in Grams (item 29b).	
Column position	371–372
Field length	2
Data type	Numeric
Notes	ⓘ This item should be reported only for infants and children. Birth weight may be reported in either pounds and ounces or grams.
Example	For a birth weight of 7 pounds 12 ounces, the entry would be __7 The number of ounces is reported in item 29a(ii). ⚠️ *If the length of the field is fewer than two characters, the leftmost column(s) should be left blank; there should be no underscore in place of the values.*

29a(ii). Nearest Number of Ounces of Birth Weight

Description	
This is the nearest number of ounces of the infant or child participant's weight at birth.	
Column position	373–374
Field length	2
Data type	Numeric
Allowable values	0–15
Notes	This item should be reported only if weight in pounds [item 29a(i)] is reported. ⊘ This item should be reported only for infants and children. Birth weight may be reported in either pounds and ounces or grams.
Example	For a birth weight of 7 pounds 12 ounces, the entry would be 12 The number of whole pounds is reported in item 29a(i).

29b. Birth Weight in Grams

Description	
This is the infant or child participant's birth weight in grams.	
This item may be supplied instead of Birth Weight in Pounds [(item 29a(i)].	

Column position	375–378
Field length	4
Data type	Numeric
Notes	ⓘ This item should be reported only for infants and children.
	Birth weight may be reported in either pounds and ounces or grams.

30a(i). Length at Birth in Inches

Description	
This is the infant or child participant's length at birth in whole inches.	
This item may be supplied instead of Length at Birth in Centimeters [(item 30a(ii)].	
Column position	379–380
Field length	2
Data type	Numeric
Notes	ⓘ This item should be reported only for infants and children. Birth length may be reported in either inches and one-eighth inches or centimeters.
Example	For a birth length of 20.5 inches, the entry would be 20 The fractional number of inches is reported in item 30a(ii).

30a(ii). Nearest Eighth of an Inch of Length at Birth

Description	
This is the nearest eighth of an inch of the infant or child participant's length at birth.	
Column position	381
Field length	1
Data type	Numeric
Allowable values	0–7
Notes	This item should be reported only if birth length in inches [item 30a(i)] is reported. ⊘ This item should be reported only for infants and children. Birth length may be reported in either inches and one-eighth inches or centimeters.
Example	For a birth length of 20.5 inches, the entry would be 4 (one-half inch = 4 one-eighth inches) The number of whole inches is reported in item 30a(i).

30b. Length at Birth in Centimeters

Description	
This is the infant or child participant's length at birth to the nearest tenth of a centimeter (XX.Y), with a single implied decimal place—for example, 30.5 should be coded as 305.	
This item may be supplied instead of Length at Birth in Inches (item 30a).	

Column position	382–384
Field length	3
Data type	Numeric
Notes	⊙ This item should be reported only for infants and children.
	Birth length may be reported in either inches and one-eighth inches or centimeters.

31. Participation in the Food Distribution Program on Indian Reservations

Description	

This indicates whether the participant receives Food Distribution Program on Indian Reservations benefits.
 	
    1 = Yes
    2 = No	

Column position	385
Field length	1
Data type	Numeric
Allowable values	1–2

Section 6. Data Worksheet for Transmitting April [STUDY YEAR] Data Files

WIC Participant and Program Characteristics [STUDY YEAR]

April [STUDY YEAR] data submissions should be sent to Insight as soon as possible after April [STUDY YEAR] and no later than July 15, [STUDY YEAR]. Only complete data files should be submitted. Therefore, a State agency that expects to receive updated data after April [STUDY YEAR] for income, breastfeeding, participation, or other data fields should submit its data file only *after* entering this additional information. Include this completed worksheet with the April data submission.

1. State agency: _____

2. Name, title, phone number, and email address of the person able to answer questions regarding the State agency's data submission:

   Name: _____

   Title: _____

   Telephone: _____

   Email: _____

3. April data file specifications:

   a. Number of participant records: _____

   b. Maximum record length: _____

4. Was racial/ethnic data reported using the three-digit code, the series of six yes/no questions, or another format? *Check only one answer.*

   ☐ Three-digit code provided in guidance

   ☐ Series of six yes/no questions

   ☐ Other format (describe): _____

5. Breastfeeding data collection procedures:

   a. When was breastfeeding data collected? *Check all that apply.*

      ☐ At issuance

      ☐ At certification/recertification

      ☐ During healthcare appointments

      ☐ At nutrition education sessions

      ☐ Separate telephone or mail inquiry

☐ Other (describe): _____
_____

    b. Was breastfeeding data collected? *Check only one answer.*

☐ Only on infants aged 6 to 13 months in April [STUDY YEAR]

☐ On infants aged 6 to 13 months when data are collected

☐ All infants

☐ Other (describe): _____
_____

    c. Is breastfeeding data collected routinely or only for the biennial PC reporting? *Check only one answer.*

☐ Routinely   ☐ Only for PC reporting

    d. Does the State agency's automated data system maintain the most recent breastfeeding information? *Check only one answer.*

☐ Yes   ☐ No

    e. Were food package code translations submitted for the types and amounts of WIC foods prescribed? *Check only one answer.*

Food package translations . . .

☐ Are enclosed

☐ Were already sent

☐ Will be sent under separate cover

6. Were food code data submitted using food package codes, an item/quantity format, or another format?

☐ Food package codes (up to 14 codes with no more than 10 digits per code)

☐ Item-quantity format

☐ Other format (describe): _____

7. Was food package type reported using the specified codes 1 through 28 or another format?

☐ Used specified codes 1 through 28

☐ Other format (describe): _____

Supplemental Dataset items submitted for PC[STUDY YEAR]:

☐ Date of first WIC certification

☐ Education level

☐ Number in household on WIC

☐ Date previous pregnancy ended

☐ Total number of pregnancies

☐ Total number of live births

☐ Prepregnancy weight

☐ Weight gain during pregnancy

☐ Birth weight

☐ Birth length

☐ Participation in Food Distribution Program on Indian Reservations

8. Were Service Site IDs reported in the data?

☐ Yes ☐ No

9. Management Information System (MIS) details:

    a. Please provide the name of the MIS and the name of the MIS vendor/contractor used to collect and submit the PC[STUDY YEAR] data.

    _____

    b. Has the State agency changed its MIS since the PC[PREVIOUS STUDY YEAR] data collection? If yes, please provide the name of the previous and current MIS.

    _____

10. Other information:

    _____

Please send files and documentation to Insight's Secure File Transfer Protocol (FTP). Instructions are provided below and will be provided separately to the State agency along with username and password:

    1. Insight recommends sending files through SFTP software. If the State agency does not have SFTP software, it can be downloaded (for example, **FileZilla** from https://filezilla-project.org/).

    2. Open **FileZilla** (or other SFTP software).

    3. Enter the address of the server in the field **Host**, located in the **Quickconnect** bar (wic.insightpolicyresearch.com).*

    4. Enter your username (will be provided separately).

    5. Enter your password (will be provided separately).

    6. Enter the port number (port **22** for SFTP).

    7. Click on **Quickconnect** or press **Enter** to connect to the server.

    8. Upload file.

Email questions to PC[STUDY YEAR]@insightpolicyresearch.com * If the State agency is not using SFTP software, go directly to wic.insightpolicyresearch.com and enter the username and password provided by Insight.

By submitting your WIC PC data, you certify that these data are complete and accurate.