(Please indicate) State Agency: Missouri for FY: 2025

Caseload management involves identifying the target population and special populations within it, implementing strategies to enroll the potential population, and utilizing caseload effectively to reach the desired populations. Describe the procedures in place to implement these strategies.

During disasters, emergencies, public health emergencies, or a supply chain disruption, including infant formula recalls, the State agency may request to implement existing and allowable regulatory flexibilities or waivers to support the continuation of Program benefits and services. Waivers granted under Access to Baby Formula Act of 2022 (codified at 7 CFR 246.4a(30)) or temporary provision(s) authorized by Congress are not permanent amendments to the State Plan; however, State agencies should consider any historical amendments as the result of waivers granted under prior waiver authority to develop policies and procedures for current and future disasters.

- A. <u>No-Show Rate</u> <u>7 CFR 246.4(a)(11)(i)</u>: describe the procedures used by the State agency to monitor potential and current participants' utilization of program services.
- B. <u>Allocation of Caseload</u> <u>7 CFR 246.4(a)(5)(i)</u> and <u>(13)</u>: describe how the State agency assigns and manages local agency caseload allocations.
- C. <u>Caseload Monitoring</u> <u>7 CFR 246.4(a)(5)(i)</u>: describe the information and procedures used by the State agency to monitor caseload.
- D. <u>Benefit Targeting</u> <u>7 CFR 246.4(a)(5)(i)</u>; (6), (7), (19), (20), (21), and (22): describe the plans and procedures for ensuring that WIC benefits reach the highest risk participants and persons in special need such as migrants, homeless, and institutionalized persons; pregnant women in their early months of pregnancy; and applicants who are employed or who reside in rural areas.
- E. <u>Outreach Policies and Procedures</u> <u>7 CFR 246.4(a)(5)(i),(ii); (6), (7), (19)</u>, and (20): describe the types of outreach materials used, where these materials are directed, special agreements with other service organizations and how special populations are addressed. Also, provide data on unserved and underserved areas.
- **F.** <u>Caseload Management Strategies</u> <u>7 CFR 246.16(c)(2)(ii)</u>, <u>7 CFR 246.4(a)(11)(i)</u>; <u>246.7(f)(1),(2)</u>; <u>246.7(h)(3)(i)</u>: describe the policies and procedures used to manage caseload during a funding shortage, lapse in appropriations, or other WIC funding circumstances.

### A. No-Show Rate

1.	Policies and Procedures for Missed Certification Appointments and Food Instrument/Cash Value Voucher Pick-Up (No-Shows)	
a. The State agency has specific policies and procedures to ensure follow-up of no-shows all that apply):		
	☐ Initial certification for any potential	
	participant	
	Subsequent certifications for high-risk participants	
	Subsequent certification for current participants	
	☑ Food instrument/cash value voucher pick-up	
	☐ Food instrument/cash value voucher/cash value benefit non-redemption	
	$\hfill \square$ State agency has no specific policies and procedures for no-show follow-up	
b.	The local agency or State agency, when the State agency has no separate local agencies, attempts to contact each pregnant woman who misses her first appointment to apply for participation in the Program to reschedule the appointment. Such procedures include (check all that apply):	
	<ul> <li>         ⊠ At the time of initial contact, the local agency obtains the pregnant woman's mailing and/or email address and telephone number     </li> <li>         ☑ If the applicant misses her first certification appointment, an attempt is made to     </li> </ul>	
	contact her by:	
	<ul> <li>☑ Telephone</li> <li>☑ Mail</li> <li>☐ Email</li> <li>☑ Text</li> <li>☑ Mobile</li> <li>App</li> <li>☑ If contact is established, she is offered one additional certification appointment.</li> <li>☑ If she cannot be reached, the local agency follows-up with a request for the applicant to contact the local agency for a second appointment by sending her a:</li> </ul>	
	<ul> <li>☑ Postcard</li> <li>☑ Letter</li> <li>☐ Email</li> <li>☑ Text</li> <li>☑ A second appointment is provided upon request from the applicant.</li> <li>☐ Other Click or tap here to enter text.</li> </ul>	

Shows: Follow Up, 8.1.110 Timelines for Applicant Processing

2.	Monitoring No-Show Rates
a.	The State agency has (check all that apply):
	☐ Standards defining acceptable no-show rates
	☑ Policies and procedures designed to assist local agencies to improve no-show rates; Please attach
	☐ Sanctions that may be applied to local agencies that have chronically unacceptable no-show rates; Please attach
	☑ Provides regular feedback to local agencies concerning no-show rates
	☑ Reports to address appropriate follow-up of no-shows
	$\square$ No specific policies or procedures concerning local agency no-show rates
b.	As a matter of standard procedure, the State agency monitors no-show rates through (check all that apply):
	☐ State agency does not monitor local agency no-show rates
	□ Local agency reviews
	□ Automated reports     □ Automated reports
	□ Local agency reports on no-show rates
	☐ Other (specify): Click or tap here to enter text.
	ws: Follow Up, 8.1.110 Timelines for Applicant Processing
	DOES NOT APPLY (EXPLAIN WHY AND PROCEED TO NEXT SECTION)  Click or tap here to enter text.
1.	The State agency considers the following factors in its initial allocation of caseload to local agencies in a program year (check all that apply):
	☐ Percent of target population served by local agency's service area
	☐ Analysis of no-show, void, non-redemption rates by local agencies
	☐ Participation by priority and category
	☐ Special population pockets
	☐ Waiting lists
	☐ Staffing/ability of local agencies to serve caseload
	☑ Prior year caseload
	☐ Food package costs per person

# ☐ Special projects ☐ Other (identify): Click or tap here to enter text. ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation): 7.1.020 Contracted Caseload Participation 2. The State agency has a written procedure for allocation of caseload to local agencies. ⊠ Yes □ No If yes, attach written procedure in the Caseload Management Appendix or specify location in the Procedure Manual below. If no, what guidelines does the State agency use for caseload allocation? (Describe in Caseload Management Appendix) ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation): 7.1.020 Contracted Caseload Participation 3. The State agency has a procedure in place to ensure that current/prior year caseload levels are maintained. $\boxtimes$ Yes $\square$ No If yes, attach procedure in the Caseload Management Appendix. 7.1.010 Outreach and Missouri WIC Logo 4. If it appears that during the course of the program year all funds will be spent, the State agency may reallocate caseload on the basis of the following factors (check all that apply): ☐ The State agency does not reallocate caseload mid year ☐ Same basis as for initial allocation of caseload ☐ Local agency participation levels ☐ Local agency high priority participation ☐ Waiting lists ☑ Other (specify): Because the SA allocates LA funding based on budgetary needs and projections and not by caseload, no action would be taken. If the LA spends their entire allocation, they would need to in-kind the remaining costs. 5. If it appears that during the course of the program year all funds will not be spent, the State agency may reallocate caseload on the basis of the following factors (check all that apply): ☐ The State agency does not reallocate caseload mid-year

# □ Same basis as for initial allocation of caseload □ Local agency participation levels ☐ Local agency high priority participation ☐ Waiting lists Successful special projects ☐ Other (specify): Click or tap here to enter text. ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation): 7.1.020 Contracted Caseload Participation 6. The State agency has written procedures for local agencies to follow in situations of overspending: □ No If a written procedure is available, provide in the Caseload Management Appendix or specify location in the Procedure Manual below. ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation): **Local Agency Scope of Work** C. Caseload Monitoring 1. The State agency's caseload monitoring process includes the review of the following data (check all that apply): ☑ Participation levels/rates ☐ High-risk participant levels/rates ☐ No-show rates ☐ Food costs by area ☐ Other (specify): Click or tap here to enter text. ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation): 7.1.020 Contracted Caseload Participation 2. The State agency uses the following methods to monitor the below task (check all that apply): ☐ Manual reports submitted by local agencies ☐ MIS-generated reports (If utilized please attach a description of each report and how they are used) ☐ On-site reviews

☑ Other (specify): FNS 798 report to monitor food costs per participant

	DITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation): rticipation Projections by Category; YTD Participation Count
3.	Local agency caseload utilization, by any method, is reviewed by the State agency at least:
	□ Quarterly
	☐ Other (specify): Click or tap here to enter text.
	☐ Not applicable
AD	DITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):
Cli	ck or tap here to enter text.
D.	Benefit Targeting
1.	Development and Monitoring of State Agency Targeting Plans
a.	The State agency has a plan to inform the following classes of individuals of the availability of Program benefits (check all that apply):
	<ul> <li>☑ Pregnant women, with special emphasis on pregnant women in the early months of pregnancy</li> <li>☑ High-risk postpartum women (e.g., teenagers)</li> <li>☑ Parents/Caregivers of Priority I &amp; II infants</li> <li>☑ Migrants</li> <li>☑ Homeless persons/families</li> <li>☐ Incarcerated pregnant women</li> <li>☐ Institutionalized persons</li> <li>☐ Other (specify): Click or tap here to enter text.</li> </ul>
ΑD	DITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):
Cl	ick or tap here to enter text.
b.	The local agency or State agency, when the State agency has no separate local agencies, contacts the following organizations to provide WIC Program information to eligible infants and children:
	<ul> <li>✓ Foster care agencies</li> <li>✓ Child welfare authorities</li> <li>✓ Other (specify): Parents as Teachers, Head</li> <li>Start, Local Physicians, Schools, Childcare, Community Faith-Based</li> <li>Organizations, Food Banks</li> </ul>
C.	The State agency ensures that benefits are targeted to those at greatest risk by limiting the use of

regression as a nutrition risk criterion to only once after a certification period.

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VII.	VII. CASELOAD MANAGEMENT				
	⊠ Yes	□No			
d.		or in lieu of, State elop their own t	e-developed plans, the State agency encourages/permits local argeting plans.		
	⊠ Yes □	No □ Not Ap	oplicable		
e.	If yes, the State	agency assures	the appropriateness/quality of local agency targeting plans by:		
	. •	-	bmit plans for State agency approval		
	•	during local ager y): Click or tap he	ere to enter text.		
f.	The State agen	cy monitors bene	efit targeting through (check all that apply):		
		-	d by State agency		
	<ul><li>☐ Manual repo</li><li>☑ Local agence</li></ul>	rts submitted by	local agencies		
	_		ere to enter text.		
ΑC	DITIONAL DETA	L: Caseload Man	agement Appendix and/or Procedure Manual (citation):		
7.2	L.010 Outreach a	nd Missouri WIC	Logo		
F C	Nutreach Policies	and Procedures			
1.	Outreach Policies and Procedures  . Outreach Policies, Procedures and Materials				
a.			es, the State agency (check all that apply):		
			ach materials for use by all local agencies		
			velop outreach plans		
		•	oped by local agencies		
			treach materials developed by local agencies		
			outreach activities outreach activities through social media, including Facebook, X and		
b.	Availability of	rogram benefits	is publicly announced at least annually via:		
	State Agency	Local Agency			
		⊠ Newsp	papers		
		□ Radio			
	$\boxtimes$		S		
	$\boxtimes$	☐ Letters	5		

 $\boxtimes$ 

	$\boxtimes$	$\boxtimes$	Television
	$\boxtimes$	$\boxtimes$	Social Media (Twitter, Facebook, etc.)
		$\boxtimes$	Other (specify): Billboards
c. C	Outreach mater	rials are ava	nilable in the following languages (check all that apply):
	Korean, N	guage(s) ecify): Arabi Iepali, Pash	c, Bosnian, Burmese, Chinese, Chuukese, Dari, Farsi, French, Hindi, Hmong, to, Romanian, Russian, Somali, Swahili, Ukrainian, Urdu
d.	Outreach mate	rials are di	stributed to (check all that apply):
	agencies  ⊠ Migrant for Indian and Signature Homeless ⊠ Faith-base ⊠ Shelters for Food Ban ⊠ Head Star	and clinics and unempl armworker d tribal orga organization ed and com or victims of ks	
ΑC	DITIONAL DET	AIL: Caselo	ad Management Appendix and/or Procedure Manual (citation):
	1.020 Outreach d Public Notific		uri WIC Logo, 11.1.020 Local Agency Responsibility: Civil Rights Compliance
W	hen an ITO Sta	te agency c	perates as both the State and local agency "All" should be checked.
2.	Accessibility t	o Special P	opulations
a.	_		es [all, some, none] local agencies to implement the following to meet the ed applicants/participants.
	All Some	None	
		$\boxtimes$	Early morning/evening clinic hours by appointment
		$\boxtimes$	Early morning/evening clinic hours, walk-in basis
		$\boxtimes$	Weekend hours, by appointment

			$\boxtimes$	Weekend hours, walk-in basis
			$\boxtimes$	Priority appointment scheduling during regular clinic operations
			$\boxtimes$	Food instrument/cash value voucher mailing procedures specifically designed for working participants
			$\boxtimes$	Expedited clinic procedures for working participants
			$\boxtimes$	Evening/weekend nutrition education
				classes
				Other (specify): Click or tap here to enter
		text.		
b.		_		horizes [all, some, none] local agencies to implement the needs of rural participants (check all that apply):
	All	Some	None	
	$\boxtimes$			Special clinic hours to accommodate travel time to clinic sites
		$\boxtimes$		Use of mobile clinics to rural areas
			$\boxtimes$	Food instrument/cash value voucher mailing procedures
				Specifically designed for rural participants
			$\boxtimes$	Special appointment/scheduling procedures for rural participants who
				do not have access to public transportation
				Special food instrument/cash value voucher issuance cycles for rural participants (check one): $\Box$ 2 months issuance, $\Box$ 3 months issuance
				Other (specify): Click or tap here to enter text.
c.	The St	ate agen	cy requires/aut	horizes [all, some, none] local agencies to implement the following
	to med	et the sp	ecial needs of r	nigrant families (check all that apply):
	All	Some	None	
				Formal coordination with rural/migrant health centers
			$\boxtimes$	Special outreach activities aimed at migrants
			$\boxtimes$	Special clinic hours/locations to service migrant populations
				Expedited appointment procedures to accommodate migrant families
			$\boxtimes$	Special food instrument/cash value voucher issuance cycles for migrant families (check one): $\Box$ 2 months issuance; $\Box$ 3 months issuance
				Other (specify): Click or tap here to enter text.

d. The State agency has in place formal agreements with one or more contiguous States to facilitate service continuity to migrants (exclusive of normal verification of certification

Click or tap here to enter text.

	proc	edures):		
			-	dentify the State agencies
е.		•	•	res [all, some, none] local agencies to implement the following proceedings homeless families/individuals (check all that apply):
	All	Some	None	
				Provide homeless applicants with a list of shelters/facilities that fulfill WIC
				Program requirements
			$\boxtimes$	Undertake regular and ongoing outreach to homeless individuals
				Routinely monitors facilities serving homeless participants to ensure WIC foods are not subsumed into communal food service
		$\boxtimes$		Implement formal agreement with other service providers to facilitate referrals of homeless families/individuals
		$\boxtimes$		Secure a written statement from the facility attesting to compliance with the requisite conditions for WIC services in a homeless facility
				Establish, to the extent practicable, plans to ensure that the three conditions in <u>7 CFR 246.7(m)(1)(i)</u> regarding homeless facilities are met
				Other (specify): Click or tap here to enter text.
ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation): Click or tap here to enter text.				
3.	Unse	rved Geo	graphica	l Areas
a.			_	ency prioritize areas defined as underserved geographic areas in descending e to enter text.
b.	Pleas	e list uns	erved ge	ographic areas or attach a list to appendix: Click or tap here to enter text.
	⊠ N	o current	unserve	d areas (check if applicable)
ΑD	ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation):			

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4.	Underserved Geographic Areas
a.	The State agency has a list on file of served and/or underserved geographic areas including the number of newly potential applicants, the priority level currently being served, and participation.
	□ Yes ⊠ No
b.	The names and addresses of all local agencies found in the last FNS-648 Report, reflect all local agencies currently in operation.
	<ul><li>✓ Yes □ No, an update list is provided in the Appendix □ N/A, State agency has no local agencies</li></ul>
	ODITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation): ck or tap here to enter text.
5.	The State agency has a plan to:
	$\hfill\square$ Inform potential local agencies of the Program and the availability of technical assistance in implementation.
	☐ Describes how State agencies will take all reasonable actions to identify potential local agencies.
	☐ Encourage potential and existing local agencies to implement or expand operations in the neediest one-third of all areas unserved or partially served.
	☐ The State agency does not have local agencies and does not plan to have local agencies. Explanation of how underserved and/or partially served areas are addressed is below.
St ur	DITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation) AND/OR ate agency/ITO explanation of how the State agency without local agencies addresses derserved or partially served areas:  urrently, all areas are served.
For pot	aseload Management Strategies. FY 2025, Section F. 1 is required. Sections F. 2-5 are optional and allow State agencies to anticipate any ential impacts due to funding shortages or lapse in funding. State agencies should review the below tegies and consider any necessary policy changes, where appropriate.
1.	Waiting List Management and Procedures
	The State agency has specific policies/procedures for the establishment and maintenance of aiting lists, which are used by all local agencies.
	⊠ Yes □ No

b.	Waiting list procedures are uniform throughout the State agency.
	☑ Yes □ No, but State agency approves all exceptions
	$\square$ No, local variation allowed without State agency approval
c.	The State agency routinely monitors waiting lists.
	$\square$ Yes $\square$ No $\boxtimes$ No, for the current Fiscal Year, the State agency does not have a waiting list
d.	The State agency requires/allows subprioritization of waiting lists by (check all that apply):
	$\square$ No subprioritization permitted $\square$ Income
	□ Nutrition risk ⊠ Age
	☐ Point system
	□ Special target populations (specify): Homeless, migrant
	☐ Other (specify): Click or tap here to enter text.
e. Iist	The State agency requires pre-screening for certification of individuals prior to placement on waiting ts.
	⊠ Yes
	☐ No, only categorical eligibility established
	$\square$ No, only categorical and income eligibility established
	☐ No, local agency variation
	☐ Other (specify): Click or tap here to enter text.
f.	Waiting lists are maintained:
	☐ Automated system linked to State agency's central system
	☐ Automated system, stand alone at some/all local agencies
g.	Telephone requests for placement on the waiting list are accepted.
	⊠ Yes □ No
h.	The State agency requires all local agencies to maintain waiting lists (telephone and/or precertification) with the following information (check all that apply):
	⊠ Name
	⊠ Address
	<ul><li>☑ Phone number(s)</li><li>☑ Date placed on waiting list</li></ul>
	a bate placed off waiting list

# VII. CASELOAD MANAGEMENT □ Category □ Priority ☐ Nutritional risk ☐ Income eligibility status ☐ Method of application □ Date applicant notified of placement on the waiting list Other (specify): Name of guardian for infant or child, date of birth; expected date of confinement (EDC) for prenatal, delivery date for postpartum. The State agency requires local agencies to provide information on other food assistance programs to applicants who are placed on a waiting list. If the State agency has no local agencies, it provides the information. ☐ Yes $\bowtie$ No ADDITIONAL DETAIL: Caseload Management Appendix and/or Procedure Manual (citation): 7.1.040 Waiting Lists 2. Allowable Cost Saving Strategies (Optional) This optional section not completed. a. Does the State agency have policies and procedures to control cost when funding is insufficient relative to projected costs? ☐ Yes П № b. Does the State agency use any of the following policies and procedures? (select all that apply): ☐ Modified approved food list ☐ Least expensive brands (LEB) ☐ Economical container size and packaging ☐ Other, please specify: Click or tap here to enter text. c. During funding shortfalls/to control costs, the State agency requires local agencies to certify participants for the minimum period specified in regulations. 7 CFR 246.7(g)(1) ☐ Yes □ No If yes, please describe or attach applicable policies and procedures. Click or tap here to enter text. d. During funding shortfalls/to control costs, the State agency requires local agencies to shorten certifications on a case-by-case basis. 7 CFR 246.7(g)(2) ☐ Yes □ No

e. The State agency uses targeted outreach to serve participants most in need to control cost. 7 CFR

Click or tap here to enter text.

If yes, please describe the case-by-case basis scenario or attach applicable policies and procedures.

3.

	<u>246.4(a)(7)</u> and <u>7 CFR 246.6(f)</u> .
	□ Yes □ No
	If yes, please describe the process used to determine which group of participants are most in need or attach applicable policies and procedures. Click or tap here to enter text.
	d-Certification Benefit Discontinuation During Funding Shortfalls (Optional) This optional section t completed.
a.	The State agency has specific policies/procedures for establishing and implementing mid- certification benefit discontinuation due to funding shortfalls, which are used by all local agencies.
	$\square$ Yes $\square$ No If yes, please describe the process used to determine how mid certification benefits will be discontinued or attach applicable policies and procedures. Click or tap here to enter text.
b.	If a State agency experiences a funding shortfall where it is unable to maintain its current level of participation for the remainder of the fiscal year and has explored all other alternative actions, the State agency will instruct local agencies to begin mid-certification benefit discontinuation by: (Select all that apply)
	☐ Mid-certification disqualification of program participants
	☐ Withholding of benefits for program participants
c.	The mid-certification benefit discontinuation action must affect the least possible number of participants and be directed first at those where their nutritional and health status is at least risk. When implementing mid-certification benefit discontinuation due to funding shortfalls, State agencies will select participants by: (Select all that apply)
	<ul> <li>□ Selecting participants in reverse order from the nutritional risk priority system.</li> <li>□ Selecting participants who were certified due to possible regression in nutritional status, especially if original eligibility was based on a lower priority condition.</li> <li>□ Selecting participants who have only one month left in their certification periods.</li> <li>□ Selecting participants at higher income ranges.</li> </ul>
	☐ Other: specify: Click or tap here to enter text.
d.	Prior to implementing mid-certification benefit discontinuation due to funding shortfalls, the State agency will notify FNS.
	□ Yes □ No

neutrality assessment?

	e.		menting mid-certification benefit discontinuation due to funding shortfalls, the will provide FNS the following information:	
		-	description of the alternative policies and procedures explored or used prior to any adverse action.	
		•	tion of how the planned action is intended to meet the criteria of affecting the least ople and also the lowest priority persons to bring caseload in line with available	
		☐ Other: spec	cify: Click or tap here to enter text.	
4.	mi	-	nortfalls, the State agency authorizes local agencies to disqualify participants in the ication period for failure to pick up food instruments. (Optional) This optional leted.	
		□ Yes □ No	□ N/A, the State agency already authorizes local agency to disqualify participants for failure to pick up food instruments/CVV during normal operations.	
		• • •	dicate the number of months before a participant is disqualified or attach applicable ocedures. Click or tap here to enter text.	
5.	Со	mpetitive Vend	dor Selection Strategies. (Optional) This optional section not completed.	
	a. During funding shortfalls/to control costs, does the State agency have procedures to adjust their vendor cost containment policies, including their competitive price selection criteria and/or maximum allowable reimbursement levels?			
		□ Yes I	□ No	
	b.	vendor autho	g shortfalls/to control costs, does the State agency have procedures to adjust their rization policies (outside of cost containment), including application periods, eria, and limiting criteria?	
		□ Yes I	□ No	
	c.	does the State	gency answered "yes" to either a or b: During funding shortfalls/To control costs, agency reassesses vendors using the updated vendor authorization policies and eria, including cost containment?	
		□ Yes I	□ No	
	d.	During fundin	g shortfalls/to control costs, does the State agency have procedures to assess the	

effectiveness of their above-50-percent vendor population to ensure continued oversight of cost

□ Yes □ No