

**Memorandum of Understanding  
Between**

**Milwaukee Health Services Inc.  
Aurora Health Care  
Southwest Suburban Health Department  
16<sup>th</sup> Street Community Health Center  
Seeds of Health Inc.  
City of Milwaukee Health Department**

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

**and  
Children's Wisconsin  
Healthy Families Milwaukee County Program**

**Title: Information Sharing between the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) and Healthy Families America (HFA) Program.**

**I. Purpose**

This document represents an inter-agency agreement for the purpose of sharing WIC applicant and participant information, between the WIC Program within the following agencies:

- Milwaukee Health Services Inc.
- Aurora Health Care
- Southwest Suburban Health Department
- 16<sup>th</sup> Street Community Health Center
- Seeds of Health Inc.
- City of Milwaukee Health Department

and Children's Wisconsin, representing the Healthy Families Milwaukee County program.

**II. Definitions**

**“Confidential Information”** means any information about a WIC applicant or participant, whether it is obtained from the applicant or participant, another source, or generated as a result of WIC application, certification, or participation, that individually identifies an applicant or participant and/or family member(s). The following Information will not be shared: treatment for mental illness, developmental disabilities, alcoholism or drug abuse, or HIV infection test results or HIV status.

**“Program”** means the Healthy Families Milwaukee County program, which is the Health Families America (HFA) program. Healthy Families America is an evidence-based home visiting program for families prenatal up to age 5. The program's goals include positive parenting practices, healthy child development, and enhanced family well-being.

### III. Access to Confidential Information

- A. WIC program staff may share Confidential Information with the Program for any of the following purposes.
- To establish the eligibility of WIC applicants or participants for the Program;
  - To conduct outreach to WIC applicants and participants for the Program;
  - To enhance the health, education, or well-being of WIC applicants or participants who are currently enrolled in the Program;
  - To streamline administrative procedures in order to minimize burdens on staff, applicants, or participants in either the Program or the WIC program.
- B. The Program may use the Confidential Information only for the purpose(s) for which the WIC program shared the Confidential Information and for no other purpose. The Program may not disclose the Confidential Information to a third party without the prior written consent of the WIC participant or his/her legally authorized representative.
- C. Only the confidential information listed below may be shared as relevant to the participant's referral to and participation in the Program:
- pregnant person's name and date of birth
  - estimated date of delivery
  - child's name and date of birth
  - address
  - telephone numbers
  - language
  - family ID number
  - race & ethnicity
  - benefit and redemption information
  - immediate socio-economic needs / social determinants of health

After enrollment in the Program, the following information may be shared for continuity of care:

- breastfeeding/lactation plans, concerns, education, and support that is planned or provided
  - date of delivery
- D. Written consent by a person legally authorized is required for disclosure of treatment for mental illness, developmental disabilities, and alcoholism or drug abuse; and regarding HIV infection test results, as required by Wis. Statutes.
- E. The Program will take all reasonable security measures to prevent any unauthorized disclosure of the Confidential Information.
- F. WIC applicants and participants will be informed prior to disclosure.
- G. The Program will respect the WIC applicant's and participant's right to privacy and will deliver services that are sensitive to cultural and family values.

H. Restrictions on the use or disclosure of Confidential Information shall survive the termination or expiration of this agreement.

**IV. Term; Termination**

- A. This agreement shall become effective upon the latest date of signing.
- B. This agreement may be amended in writing at any time by mutual consent of the parties. Amendments will be written and signed by the proper representatives of each party and shall identify the exact nature of the amendment(s). Any amendments will be attached as amendments or as clarifications to this agreement.
- C. This agreement shall continue in effect until either party terminates this agreement by providing a thirty-day advance written notice to the other party or until such time as state or federal law changes to invalidate the agreement. The agreement shall be annually reviewed by the WIC Directors and a representative of the HFA program and revised upon the mutual concurrence of the parties.

**Signatures**

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Beth Nelton, WIC Director  
Milwaukee Health Services, Inc. WIC  
Program  
Date \_\_\_\_\_

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Dr. Tito Izard, President & CEO  
Milwaukee Health Services, Inc.  
Date \_\_\_\_\_

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Jen Agnello, WIC Director  
Aurora Health Care WIC  
Date \_\_\_\_\_

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Robert Marrs, Director of Operations  
Aurora Family Service  
Date \_\_\_\_\_

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Becky Litwaitis, WIC Director  
Southwest Suburban WIC Program  
Date \_\_\_\_\_

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Robert Leischow, Health Commissioner  
Southwest Suburban Health Department  
Date \_\_\_\_\_

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Katy Murphy, WIC Director  
16<sup>th</sup> Street Community Health Center WIC  
Program  
Date \_\_\_\_\_

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Julie Schuller, President & CEO  
16<sup>th</sup> Street Community Health Center  
Date \_\_\_\_\_

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Ann White, WIC Director  
Seeds of Health WIC Program  
Date \_\_\_\_\_

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Jodi Weber, Executive Director  
Seeds of Health, Inc.  
Date \_\_\_\_\_

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Sarah DeSmidt, WIC Director  
City of Milwaukee WIC Program  
Date \_\_\_\_\_

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Name \_\_\_\_\_  
Title \_\_\_\_\_  
City of Milwaukee Health Department  
Date \_\_\_\_\_

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Kara Singleton, Program Manager  
Children's Wisconsin Healthy Families  
Milwaukee County  
Healthy Families America Program  
Date \_\_\_\_\_