

**Memorandum of Understanding**  
**between**  
**Sauk County Health Department**  
**Women, Infants, and Children (WIC) Program**  
**and**  
**Healthfirst Network, Inc**

**Title: Information Sharing between the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Program and the Healthfirst Network, Inc Reproductive Program**

**I. Purpose**

This document represents an interagency agreement between the Sauk County Women, Infants and Children Program, representing the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Program and Healthfirst Network, Inc, for the purpose of sharing WIC applicant and participant information.

**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 may not be shared: treatment for mental illness, developmental disabilities, alcoholism or drug abuse, or HIV infection test results or HIV status.

**“Program”** means the Healthfirst Network, Inc reproductive program. The Healthfirst Network, Inc. reproductive program provides confidential reproductive health care and education that is affordable and accessible through direct care and strategic partnership. Designated staff include: Healthfirst Network nurse practitioners, medical assistants, clerical staff, social worker, and department manager involved with the reproductive health program.

**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

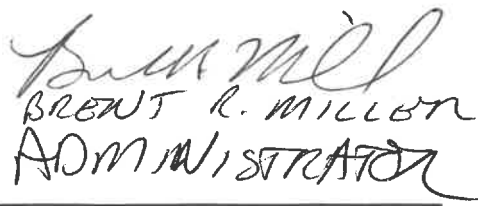
party without the prior written consent of the WIC participant or his/her legally authorized representative.

- C. Only the confidential information listed below may be shared for referral to the Program:
- Pregnant or Postpartum woman's name
  - Date of birth
  - Estimated Due Date or Delivery date
  - Address
  - Telephone numbers
  - Email address
  - Best time to reach client
  - Language spoken
- 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 applicant and participants will be informed prior to disclosure.
- G. The Program will respect the WIC 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 Director and a representative of the Program and revised upon the mutual concurrence of the parties.

#### **Signatures**

  
BRENT R. MILLER  
ADMINISTRATOR

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Joyce Smidl, WIC Director  
Sauk County WIC Program  
(Representing the WIC Program)

Date \_\_\_\_\_

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Jessica Scharfenberg, Chief Executive Officer  
Healthfirst Network, Inc  
(Representing the Healthfirst Network, Inc)

Date \_\_\_\_\_