

SPECIAL SUPPLEMENTAL NUTRITION PROGRAM FOR WOMEN, INFANTS, AND CHILDREN

**LOUISIANA DEPARTMENT OF HEALTH —
OFFICE OF PUBLIC HEALTH**

PERFORMANCE AUDIT SERVICES

**Informational Brief
December 3, 2025**

**LOUISIANA LEGISLATIVE AUDITOR
1600 NORTH THIRD STREET
POST OFFICE BOX 94397
BATON ROUGE, LOUISIANA 70804-9397**

LEGISLATIVE AUDITOR
MICHAEL J. "MIKE" WAGUESPACK, CPA

FIRST ASSISTANT LEGISLATIVE AUDITOR
BETH Q. DAVIS, CPA

DIRECTOR OF PERFORMANCE AUDIT SERVICES
EMILY DIXON, CIA, CGAP, CRMA, MBA

PERFORMANCE AUDIT MANAGER
GINA V. BROWN, CIA, CGAP, CRMA, MPA

AUDIT TEAM
ASHLEY BRECHEEN, MA
EMILY BRAUN, CIA, MSW
WILLIAM TAYLOR POTTER, MA
THOMAS MACDOUGALL WOMACK, MBA

Under the provisions of state law, this report is a public document. A copy of this report has been submitted to the Governor, to the Attorney General, and to other public officials as required by state law. A copy of this report is available for public inspection at the Baton Rouge office of the Louisiana Legislative Auditor and online at www.la.gov. When contacting the office, you may refer to Agency ID No. 9726 or Report ID No. 40250015 for additional information.

This document is produced by the Louisiana Legislative Auditor, State of Louisiana, Post Office Box 94397, Baton Rouge, Louisiana 70804-9397 in accordance with Louisiana Revised Statute 24:513. Seven copies of this public document were produced at an approximate cost of \$2.63. This material was produced in accordance with the standards for state agencies established pursuant to R.S. 43:31.

In compliance with the Americans With Disabilities Act, if you need special assistance relative to this document, or any documents of the Legislative Auditor, please contact Jenifer Schaye, General Counsel, at 225-339-3800.

December 3, 2025

The Honorable J. Cameron Henry, Jr.,
President of the Senate
The Honorable Phillip R. Devillier,
Speaker of the House of Representatives

Dear Senator Henry and Representative Devillier:

This report provides information on the Special Supplemental Nutrition Program for Women, Infants, and Children administered by the Louisiana Department of Health's (LDH) Office of Public Health. This brief is intended to provide timely information related to an area of interest to the legislature or based on a legislative request. I hope this brief will benefit you in your legislative decision-making process.

We would like to express our appreciation to LDH for its assistance during this review.

Respectfully submitted,



Michael J. "Mike" Waguespack, CPA
Legislative Auditor

MJW/ch

WIC



Informational Brief

Special Supplemental Nutrition Program for Women, Infants, and Children

Louisiana Department of Health — Office of Public Health

Audit Control# 40250015

Performance Audit Services - December 2025

Background

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is a federally-funded program that provides healthy foods, nutrition education, and support to low-income pregnant, postpartum, and breastfeeding women, as well as to infants and children under the age of five. WIC is administered in Louisiana by the Louisiana Department of Health's (LDH) Office of Public Health. WIC began in 1974, and Tangipahoa and St. Helena parishes were the second and third regions in the nation to implement the program; it became permanent in 1975. LDH creates and implements rules and procedures for Louisiana's program, which are then approved by the United States Department of Agriculture (USDA), the federal agency that oversees WIC. There were 104,064 Louisiana residents (65,675 families) actively receiving WIC benefits as of September 1, 2025.

WIC participants receive food benefits that are loaded onto an electronic benefit transfer (EBT) card, which

Example Louisiana WIC EBT Card



they can use to purchase approved foods at authorized vendors (grocery stores). Food items generally eligible for WIC include infant formula, cheese, milk, rice, fresh fruits and vegetables, etc.¹ Other WIC benefits include nutrition education, breastfeeding support, and referrals to other health and community resources. Participation in the program has been associated with better health outcomes,

Why We Compiled This Informational Brief

Because of legislative interest in improving health outcomes for women and children, as well as lowering health care costs, we obtained and analyzed USDA and Louisiana WIC data to provide statistics on the program's services, participation, and vendors. This informational brief is part of a series of reports we have issued on women's health in Louisiana. One of these previous reports identified worsening maternal health outcomes for Louisiana women.

Informational briefs are intended to provide more timely information than standards-based performance audits. While these informational briefs do not follow *Government Auditing Standards*, we conduct quality assurance activities to ensure the information presented is accurate. We provided a draft to LDH and incorporated its feedback throughout this informational brief.

In addition to this informational brief, we are currently conducting a performance audit to evaluate LDH's WIC administration and outreach efforts, as well as a report on LDH's efforts to recruit, retain, and regulate WIC vendors.

¹ These items must be in quantities and brands that meet federal nutrition requirements and are approved by LDH.

including fewer premature births and a lower instance of low birth weights, as well as reduced healthcare spending. For example, according to the USDA,² for every dollar spent on prenatal WIC participation, between \$1.77 and \$3.13 is saved in healthcare costs during the first two months of birth.

WIC in Louisiana is a 100% federally-funded program through the USDA. However, unlike entitlement programs such as the Supplemental Nutrition Assistance Program (SNAP) and Medicaid, WIC funding is provided on a discretionary basis, meaning that full funding for all eligible individuals is not guaranteed. If funding is insufficient, some applicants and participants may be waitlisted while more vulnerable participants are prioritized. Louisiana currently does not have a waitlist. During federal fiscal year (FFY) 2024, the USDA allocated \$7.4 billion to the national WIC program, with \$120.3 million (1.6%) allocated to Louisiana. The USDA determines each state's allocation by estimating the number of WIC-eligible individuals in each state and overall program costs. Louisiana draws down funds that are used for the program. In FFY 2024, LDH was unable to draw down approximately \$10.6 million (8.8%) from the \$120.3 million allocated by the USDA because of lower participation rates than estimated, lower redemption rates of certain issued benefits, and the amount of rebates Louisiana earned to lower program costs. LDH earned \$28.1 million in WIC rebates from the contracted standard formula manufacturer and received approximately \$43,000 from interest income/credits during FFY 2024 (see *text box at right*), bringing total WIC expenditures to \$137.8 million.

WIC **rebates** are discounts LDH receives from the contracted formula manufacturer that lower program food costs.

WIC **interest income/credits** are collected by LDH from the USDA and used to offset drawdowns for WIC funds.

Of the \$137.8 million in total FY 2024 WIC expenditures, LDH spent \$98.9 million (71.8%) on food benefits and \$38.9 million (28.2%) to administer the program. Exhibit 1 summarizes LDH's expenses and means of financing for WIC during FFY 2024.

² <https://www.fns.usda.gov/wic/helps>

Exhibit 1 WIC Expenses and Means of Financing in Louisiana FFY 2024			
Category		Type	Amount
Means of Financing (Revenue)		USDA Funds Allocated	\$120,255,697
		USDA Funds not Used	-10,558,509
		Rebates	28,070,599
		Interest Income/Credits	42,555
		Grand Total	\$137,810,342
Expenditures	Food	EBT Redemptions	\$94,599,489
		Specialty Formula*	4,066,102
		Breast Pumps	263,996
		Subtotal	\$98,929,587
	Administration	Salaries	\$11,324,096
		Contracts**	13,986,979
		Other***	13,569,680
		Subtotal	\$38,880,755
		Grand Total	\$137,810,342
		*Specialty formula is provided to babies with medical conditions such as low birth weight or allergies to standard formula ingredients. WIC requires a medical prescription for specialty formula. **Examples of contracted costs include but are not limited to data system management, EBT processing, and management of contracted clinics. ***Includes expenses such as office equipment, medical supplies, nutrition education materials, telephone lines, etc. Source: Prepared by legislative auditor staff using information provided by LDH.	

What We Found

According to the USDA, the number of WIC participants compared to the number of eligible individuals in Louisiana is consistently lower than the national average.³ While participation rates could be improved, an increasing percentage of WIC infants are breastfed, which is financially more cost-effective than formula feeding and associated with better health outcomes. Louisiana has two parishes that lack a WIC clinic, which participants must visit every three months to receive benefits throughout their enrollment. In addition, as of September 2025, the number of WIC vendors has decreased by 43.8% since 2012, limiting access for participants. The questions we answered are discussed in the following sections.

Question 1: Who is eligible for WIC, and what is the process for enrolling in the program?

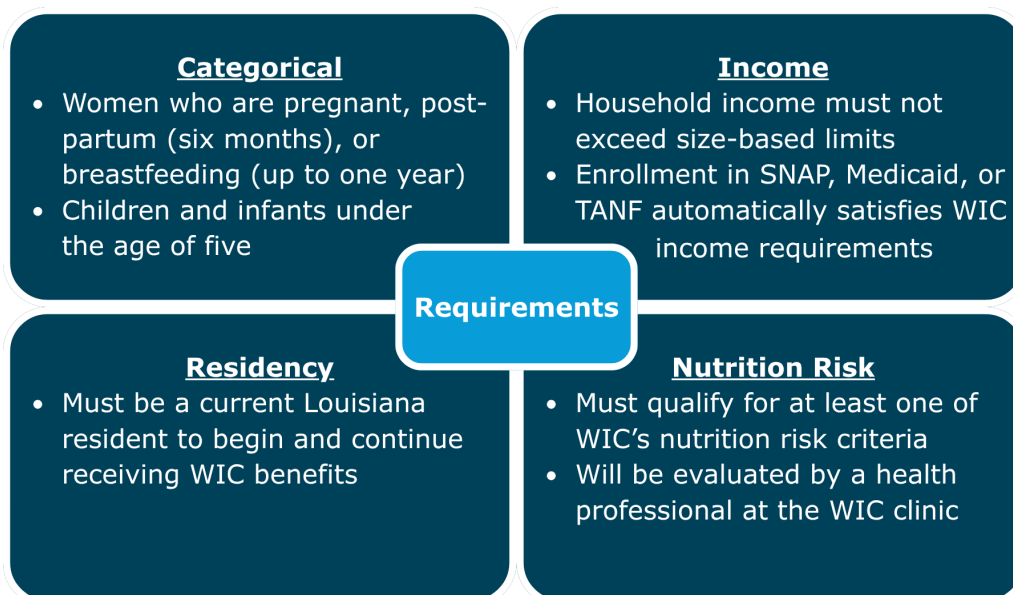
WIC is available for pregnant, postpartum, and breastfeeding women, as well as infants and children, who meet criteria related to residency, income, and nutritional risk. Participants must reside in the state of application, and their household income must not exceed USDA-established income limits, which are based on the number of household members. For example, as of FFY 2026 criteria, a family of four would be income-eligible for WIC if the annual

³ <https://www.fns.usda.gov/sites/default/files/resource-files/WICEligibles2019-Volume1-revised.pdf> and <https://www.fns.usda.gov/sites/default/files/resource-files/wic-eer-2022-report.pdf>

income for the household does not exceed \$59,478. Individuals currently participating in Medicaid, Temporary Assistance for Needy Families (TANF), and/or SNAP are automatically income-eligible. Participants must also meet at least one nutritional risk factor, as determined through a screening at a WIC clinic. Nutritional risks include anemia, being underweight, a history of poor pregnancy outcomes, and a poor diet. In Louisiana, the most common nutritional risks for WIC participants included inappropriate nutrition practices, anemia, and being under the age of six months and born to mothers who had nutritional risks during pregnancy.

Pregnant women may participate in WIC for the duration of their pregnancy and through the last day of the month six weeks after childbirth or the end of the pregnancy. To continue receiving benefits, women must enroll as a postpartum participant. Postpartum women who are not breastfeeding may participate in WIC for six months after the baby is born or the pregnancy ends. Breastfeeding women may participate up to the last day of the month in which their infant turns the age of one or until the woman ceases breastfeeding, whichever occurs first. Infants and children may participate in WIC up to the last day of the month of their fifth birthday. Exhibit 2 summarizes eligibility criteria for WIC.

Exhibit 2 WIC Eligibility Requirements



Source: Prepared by legislative auditor's staff using information from LDH and federal WIC regulations.

To enroll in the program, applicants must attend an in-person appointment at a local WIC clinic to confirm eligibility, undergo health screenings, and receive benefits that are customized to their needs. Health screenings are conducted by Competent Professional Authorities (CPA)⁴ and include the following objectives:

- Obtain physical metrics such as height and weight to identify participants who may be under or overweight.
- Perform or review blood tests to detect nutritional conditions such as anemia.
- Assess dietary habits to determine whether health concerns could be improved through dietary changes.
- Obtain medical history such as immunization status to determine whether referrals should be made.

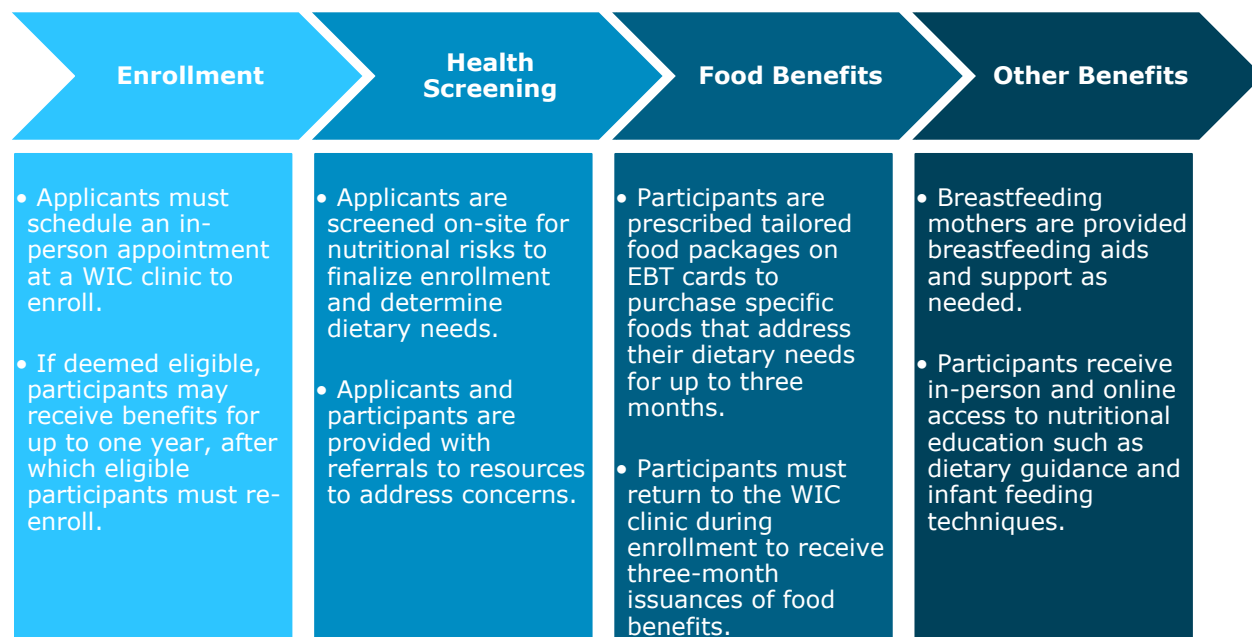
Upon the completion of the health screening and confirmation of eligibility, participants are connected with WIC benefits, which include:

- Access to healthy foods – everyday groceries such as fresh fruits and vegetables, baby food, formula, milk, eggs, beans, cheese, and more that can be purchased using EBT cards at authorized vendors.
- Breastfeeding Support – in-person education and encouragement from staff skilled in breastfeeding support, 24/7 virtual sessions through WIC’s Pacify app, and supplies such as breast pumps and attachment kits.
- Nutrition Education – personalized evidence-based education on healthy eating, meal planning, and resources from nutritionists, nurses, and other skilled staff.
- Health and Community Resources – help finding and connecting to medical, dental, and mental health care, along with other community-based services.

Participants must return, in-person, to a WIC clinic approximately every three months during enrollment to continue receiving benefits. The enrollment periods last up to one year, depending on categorical eligibility. For example, women who were enrolled during pregnancy must re-enroll as a postpartum or breastfeeding participant approximately six weeks after pregnancy. Infants and children must be re-enrolled annually until the age of five, when they are no longer eligible to participate. Exhibit 3 summarizes WIC’s enrollment process.

⁴ CPAs for WIC are qualified individuals who provide direct nutrition services and can include a range of professionals, such as registered dietitians, registered nurses, physicians, or health educators.

Exhibit 3
WIC's Enrollment and Benefits Process
As of September 1, 2025



Source: Prepared by legislative auditor's staff using information from LDH.

Question 2: How many WIC participants and clinics are in Louisiana?

As of September 1, 2025, Louisiana had 104,064 WIC participants. This included 25,914 (24.9%) pregnant, breastfeeding, or postpartum women, and 77,977 (74.9%) children under the age of five.⁵ Nationally and within Louisiana, there is a significant decrease in WIC participation after children reach their first birthday. According to LDH, this is because formula-fed infants are transferred to traditional milk or other dairy-like products at this time, which is significantly less expensive than formula.

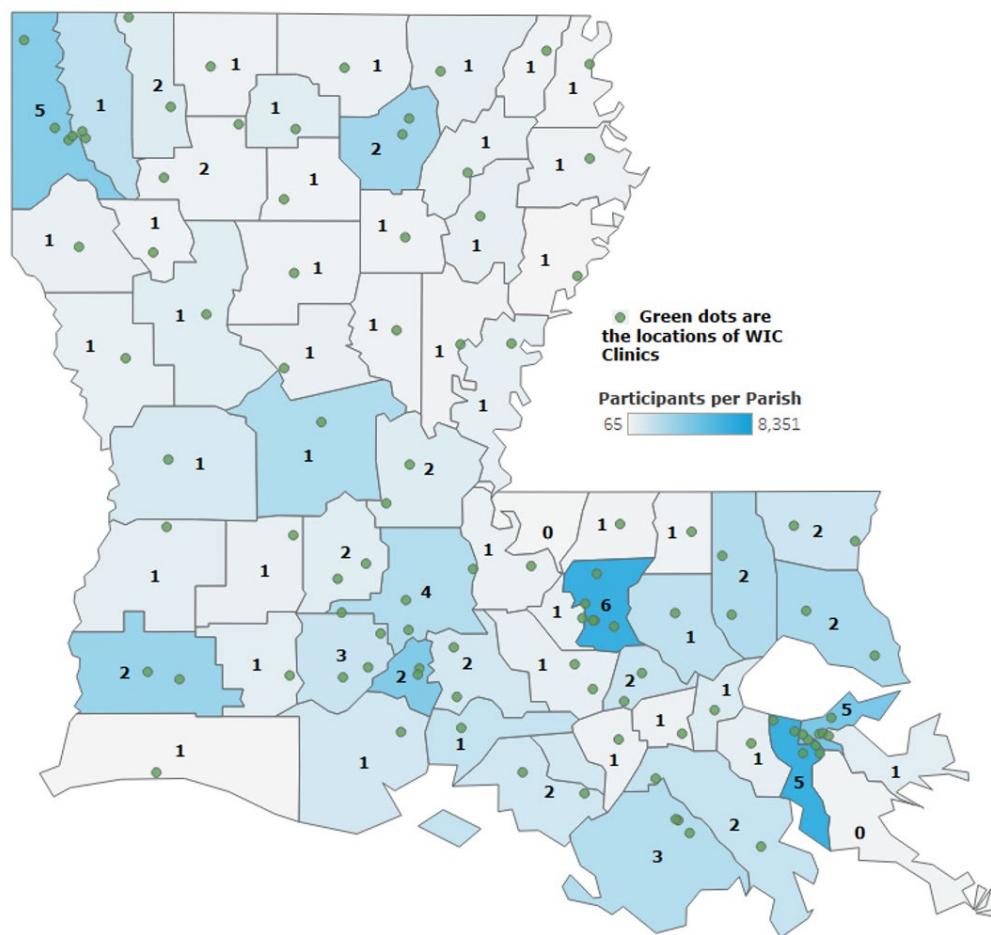
Louisiana has 100 WIC clinics to provide the 104,064 participants with services; 61 clinics are operated through parish health units (PHU), and 39 are operated by contractors. Two parishes - Plaquemines and West Feliciana - did not have a WIC clinic as of September 1, 2025. Access to WIC clinics is important because participants must visit a clinic approximately every three months throughout their enrollment to continue receiving benefits. According to LDH, it aims to promote access to WIC clinics by considering public transportation routes, analyzing parish-level potential eligibility data, and contracting with local entities. For example, one of Baton Rouge's PHU clinics was recently relocated to a site that is along the city's Capital Area Transit System route. Contracted clinics can provide even greater accommodations. For example, at least one contracted clinic is part of a daycare system and can accommodate

⁵ LDH records did not identify the category for 173 participants (0.2% of participants).

early, late, and weekend appointments that would fall outside normal operation hours of PHUs.

Louisiana’s WIC website features a “Find a Clinic” search feature where participants can enter a city or ZIP code and are given the address, contact information, and hours of the nearest clinics.⁶ WIC participants in rural areas likely have longer commutes to the nearest clinic compared to participants in urban areas. Exhibit 4 illustrates the number of WIC participants and WIC clinics in each parish as of September 2025.

Exhibit 4
Number and Location of WIC Clinics and Participants, by Parish
As of September 1, 2025



Source: Prepared by legislative auditor’s staff using data provided by LDH.

As shown in Exhibit 4, most parishes have only one WIC clinic and two parishes - Plaquemines and West Feliciana - did not have any WIC clinics as of September 1, 2025. Further, these two parishes have participant counts of 225 and

⁶ <https://louisianawic.org/locations/find-a-clinic/>

111, respectively, while other parishes with fewer participants (such as Tensas with 84 and Cameron with 65) do have WIC clinics.

Question 3: How does WIC address nutritional needs of infants and children?

WIC provides food benefits and support to help meet nutritional needs of infants and provides food benefits to supplement nutritional needs of children ages one through four. Food benefits for infants include items such as formula, baby cereal and pureed fruits and vegetables, or fresh fruits and vegetables for homemade purees. These items are provided in quantities that provide necessary nutrients during infancy. For breastfed infants, WIC provides support through education and supplies such as breast pumps. Children ages one through four receive items such as milk, eggs, cheese, yogurt, and whole grains. WIC participants also receive cash value benefits (CVBs), which are monthly allowances loaded to EBTs to purchase fresh, frozen, or canned fruits and vegetables. According to LDH, CVBs offer greater flexibility in selecting brands and quantities compared to other WIC food purchases and is popular among participants.

Although formula is still the most common form of feeding for infants in Louisiana, breastfeeding rates for WIC infants have increased since FFY 2021. As of FFY 2025, 7,106 (25.2%) of 28,154 WIC participants under the age of one are completely or partially breastfed while 21,048 (74.8%) are formula-fed, compared to a formula-fed rate of 84.5% in FFY 2021.

According to WIC staff, they have noticed an increased interest in breastfeeding. For example, when asked about breastfeeding plans in the past, many pregnant women would say they planned to formula feed. Now, most pregnant participants say they would like to at least try to breastfeed.

According to LDH, participants are encouraged during pregnancy to consider breastfeeding, as it is recommended by the American Academy of Pediatrics. The National WIC Association reports that breastfeeding can also present healthcare cost savings by reducing risks of ear infection for infants. Further, breastfeeding is generally more cost-effective. For example, the WIC food package for a breastfeeding mother of an infant three months or younger would only include foods for the mother, while the package for the mother and infant under three months who is formula-fed would include foods for the mother, as well as formula for the infant.

WIC offers breastfeeding support and resources such as breast pumps, in-person consultations with peer counselors and lactation specialists, and 24/7 virtual access to lactation consultants through the *Pacify* app. According to USDA data, the rate for fully- or partially-breastfeeding as of FFY 2025 has increased by 62.6% since FFY 2021. During these five years, the number of fully-breastfed infants in Louisiana enrolled in WIC increased by 97.1% and partially-breastfed infants by 49.9%.

Question 4: How does Louisiana's WIC participation compare to other states?

According to the USDA, Louisiana has a history of low WIC coverage rates (participation) and had the lowest state coverage rate (50th)⁷ in the nation in 2022, the latest year to have been evaluated as of November 2025. Coverage rates are the percentage of eligible individuals who actually participate in WIC. According to the USDA, Louisiana had the lowest WIC coverage rates in the nation in 2022, with only 84,438 (36.7%) of 229,856 eligible individuals participating in the program. Although COVID-era funding and a nationwide formula recall may have impacted WIC participation during 2022, Louisiana has a history of low coverage rates. For example, when reporting coverage rates for 2019, the USDA identified Louisiana as one of 10 states⁸ with coverage rates consistently lower than national rates across all categories and age groups.

As of September 1, 2025, 65,675 families and 104,064 Louisiana residents were actively receiving WIC benefits.

In addition, Louisiana is one of 45 states that was unable to draw down the full amounts allocated by the USDA for FFY 2024, which means that participation in 45 states was lower than originally estimated and funded by the USDA.⁹ Louisiana did not draw down 8.8% (approximately \$10.6 million) of its allocated WIC funding in FY 2024, which is consistent with the average of 8.4% that other states did not use in funding from the USDA.

According to LDH, participation has improved since calendar year 2022 and should be reflected in future coverage rate reports. For example, the number of participants in WIC increased by 16.7%, from 89,177¹⁰ in September 2022 to 104,064 in September 2025. However, while participation counts have increased, updated numbers for eligible individuals, as well as updated coverage data for other states, are not yet available. As a result, it is not yet clear how increased participation may have affected WIC's coverage rate in Louisiana, including its national ranking. Exhibit 5 shows the WIC coverage rates by state during calendar years 2017 through 2022.

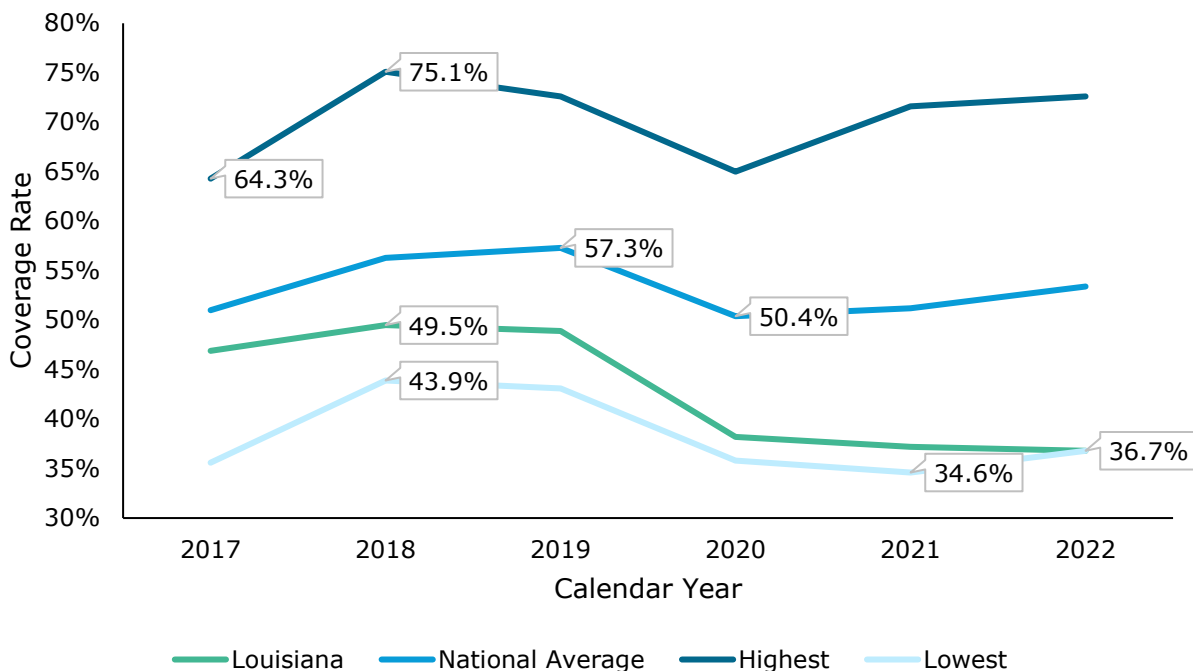
⁷ Louisiana is ranked 52nd when including Puerto Rico and the District of Columbia.

⁸ The other nine states include Georgia, Idaho, Montana, New Mexico, Pennsylvania, South Carolina, Tennessee, Utah, and Virginia.

⁹ Funding estimates are also affected by the amount of rebates earned by each state that lower WIC costs.

¹⁰ [2022 USDA WIC State Level Participation by Category and Program Costs](#)

Exhibit 5
WIC Coverage Rates in Louisiana Compared to National Rates*
Calendar Years 2017 through 2022



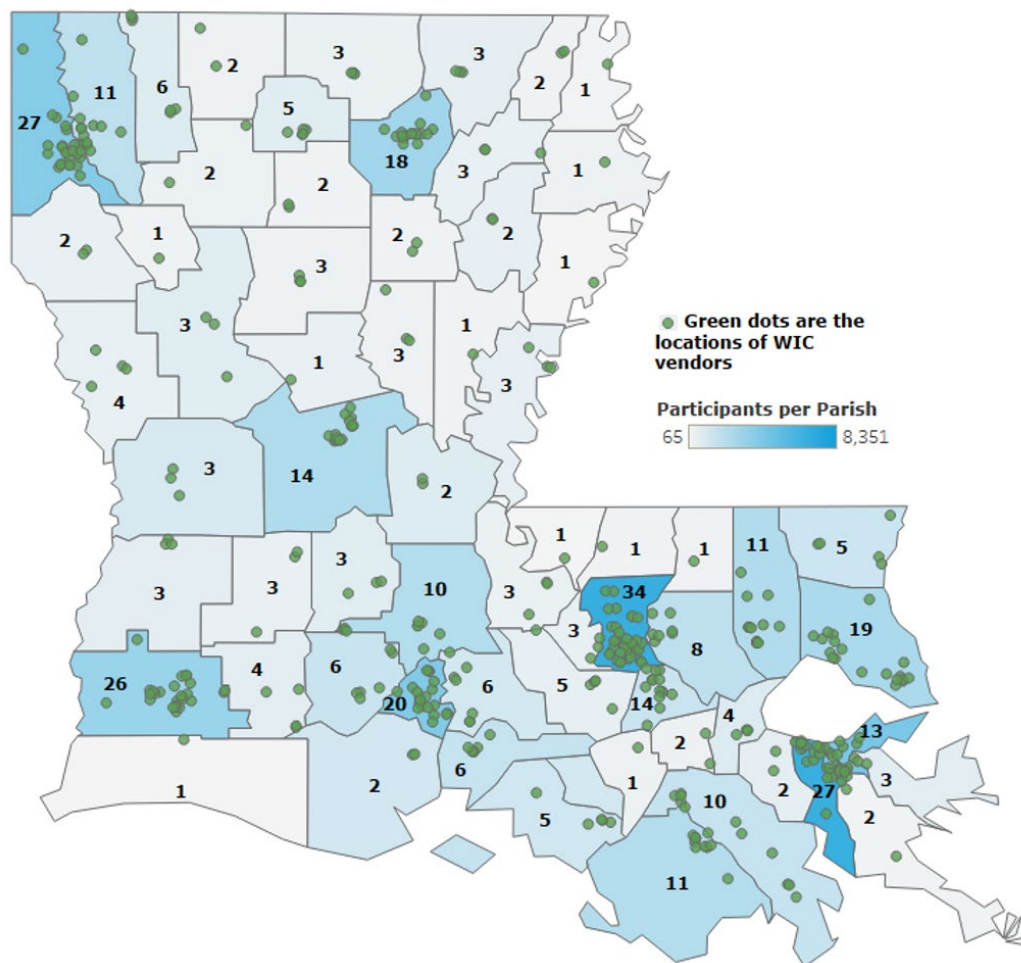
*Based on number of enrolled compared to number of eligible.

Source: Prepared by legislative auditor's staff using data provided by USDA.

Question 5: How many vendors currently accept WIC in Louisiana, and how has this changed over time?

As of September 2025, Louisiana had 406 authorized vendors where WIC participants may use their EBT cards to purchase allowable foods. This is a 43.8% decrease when compared to the 723 vendors authorized in FY 2012. Currently, every parish has at least one vendor. In May 2014, the USDA implemented a moratorium on LDH's ability to authorize new WIC vendors in Louisiana, citing a need for LDH to improve its vendor management system. The moratorium was lifted in 2017 after LDH implemented improved vendor authorization criteria, including competitive price selection criteria and filling some key vacancies. Exhibit 6 shows the number of WIC vendors, by parish, as of September 2025.

Exhibit 6 Number and Location of WIC Vendors and Participants, by Parish As of September 1, 2025



Source: Prepared by legislative auditor's staff using data provided by LDH.

According to LDH, changes to its vendor management processes and new requirements related to processing WIC EBT transactions¹¹ may have contributed to the decline in the number of vendors participating in the WIC program, particularly as WIC-approved purchases tend to make up a small percentage of vendors' total sales. For instance, the state implemented improved competitive price selection criteria to ensure vendors did not overcharge for WIC items. Other factors, such as closures or company mergers, may also have contributed to the loss of vendors. For example, ALDI Grocery Stores purchased the parent company of Winn-Dixie in 2023 with plans to convert some Winn-Dixie stores into ALDI locations. While many Winn-Dixie stores in Louisiana were authorized WIC vendors, ALDI does not participate in WIC. In October 2025, Winn-Dixie announced its remaining Louisiana stores would close, as the company plans to withdraw from the Louisiana market. Between the ALDI acquisition and the potential closure of remaining Winn-Dixie

¹¹ While the WIC program was historically a voucher-based program, Louisiana transitioned fully to an EBT system for WIC benefits in January 2020.

locations, the changes could result in approximately 20 fewer authorized WIC vendors in Louisiana.

WIC policies require the state to perform compliance investigations on at least 5% of the state's vendors each year. The compliance investigations prioritize vendors that are considered to be "high risk" as determined by the state using a risk assessment matrix. The matrix defines high-risk indicators such as a high percentage of benefits being redeemed during one transaction, valid participant complaints, and transactions occurring outside of normal business hours. LDH is also required by policy to perform routine monitoring reviews on at least 5% of the vendors not selected for compliance investigations each year. The routine monitoring reviews are on-site visits where LDH assesses whether any abuse or errors by the vendor have occurred and whether corrective action is necessary.