

NYS Bureau of Supplemental Food Programs

WIC RFA Question and Answer Document

Commodity Supplemental Food Program

Commodity Supplemental Food Program

1) The RFA states that in order to apply to be a CSFP agency, the agency must be located in the Metropolitan New York City Area. What counties are considered to be a part of the Metropolitan New York City area?

Page 6 of the RFA states: Agencies may apply to serve participants in one or more of the following areas: Bronx, Kings, Nassau, New York, Queens, Richmond, and Suffolk Counties. Therefore, a CSFP agency may be located in any one or more of the above counties, or close enough to effectively supervise sites operating in one or more of these counties. The service sites themselves must be located in one or more of these counties.

2) What is the typical job descriptions of the clerical and support staff providing CSFP services?

3) For CSFP, are there defined staff positions, such as, nutrition education, drivers and clerical staff to do eligibility certification, or does local agency define these job titles?

The general definitions of CSFP staff positions are listed below, however each agency may use alternate titles as defined by the Sponsoring Agency. The responsibilities of these positions can be combined, overlapped, or rearranged according to the agency's specific circumstances and the skill sets of the individual employees as long as all responsibilities outlined in the Workplan (included in the RFA) are met. (For example in a small agency, the nutritionist could also do outreach activities as time allows, or the CSFP Director may complete some tasks that are typically performed by the Operations Supervisor).

CSFP Director: This is the CSFP agency's highest management and position. Major functions of this position include the following: liaison with the WIC agency; day to day management of the CSFP agency; personnel management; caseload management; policy and procedure development; quality assurance; management of the program budget; report preparation; and program evaluation.

Nutritionist-Registered Dietitian: This position provides nutrition education/counseling to participants, and coordinates CSFP nutrition services for participants with other health and human service providers. It is strongly recommended that the program Nutritionist be a Registered Dietician. However, as an alternative, the nutritionist should have a Bachelor's degree from an accredited university with an emphasis in any of the following: food and nutrition, community nutrition, public health nutrition, human nutrition, nutrition education, nutritional sciences, or their equivalents, or eligible for registration with the American Dietetic Association.

Operations Supervisor: This position is responsible for supervising food ordering processes and the food distribution staff. Duties include commodity and food order management; supervision and training of Distribution Clerks; coordinating operations with State representatives; functioning as back up for Distribution Clerk and Certifier as needed; and inspecting site(s) to insure that all operational guidelines are being followed.

Outreach Coordinator: This position is responsible for coordinating the local agency's outreach and promotion activities, including plans to improve no-show rates and manage caseload. This position must possess good oral and written communication skills.

Certification Clerk: This position performs specific components of the certification process and prepares list of participant commodity choices each month in accordance with eligibility guidelines.

Commodity Distribution Clerk: This position performs stocking functions, compiles the food packages for distribution to participants, and participates in the monthly physical inventory

Truck Driver: This position transports CSFP commodities to mobile sites. Responsibilities may include loading and unloading trucks; distributing commodity food packages to participants or mobile site volunteers; and collecting participant signatures as receipt of commodities. This position must possess a valid NYS Class D or CDL driver's license

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4) Can an agency not located in the Metropolitan New York City Area partner with an agency that is located in the Metropolitan New York City Area in order to apply to be a CSFP agency?

Yes. Such a partnership is not prohibited in the RFA, however, page 7 of the RFA states that co-location of the WIC agency and the CSFP agency is preferred to allow optimal coordination of services.

5) I live in Rockland County and am writing to inquire about the availability of CSFP in my county?

Agencies must establish CSFP sites to serve participants in one or more of the following areas: Bronx, Kings, Nassau, New York, Queens, Richmond, and Suffolk Counties. Participants residing in nearby counties may travel to CSFP sites located in the above counties and enroll in CSFP.

6) During the initial year of the grant for CSFP, is the maximum caseload 1,000 as it is for a new WIC Program?

No. CSFP food delivery systems are considerably less complex than those of the WIC Program, and the target participant base (seniors) is very different. Therefore, the expectation is that a CSFP site can reach their assigned caseload within the first six months of operation.

7) The CSFP requires sponsor agencies to have the capacity to warehouse a 2-4 week supply of over 50 food commodities. Is there an estimate on the required square footage needed to accommodate this storage requirement?

A minimum amount of warehouse space needed for a site serving approximately 1,000 seniors would be approximately 3,000 square feet. The following represents how this estimate was determined: CSFP sites are required to have all 45-50 varieties of commodities available at all times during the month. In addition, the site will distribute approximately 20 pallets of commodities for every 1,000 senior participants they serve each month. A site that is serving 1,000 seniors each month (20 pallets of commodities) and warehouses all varieties of commodities (50 pallets) should have enough warehouse space for 70 pallets. On average a pallet takes up 16 sq. feet of floor space. So the site described above would need 1,120 square feet of floor space for the commodities alone. If pallets are stacked on top of each other, then less space would be needed. Additional space is needed to drive a fork lift in the warehouse area to pick up and move pallets as needed. Space is also needed for staff to open cases and assemble food packages.

8) How many pallets of items need to be stored per 1,000 CSFP participants? You can also answer in square footage if more appropriate.

On average, a site will distribute approximately 20 pallets of commodities for every 1,000 senior participants they serve each month. The site is also required to have all varieties of commodities available at all times during the month, which is about 45-50 varieties. A site that is serving 1,000 seniors each month (20 pallets of commodities) and warehouses all varieties of commodities (50 pallets) should have enough warehouse space for 70 pallets. On average a pallet takes up 16 sq. feet of floor space. So the site described above would need 1,120 square feet of floor space for the commodities alone. If pallets are stacked on top of each other, then less space would be needed.

9) Is there any refrigeration needed for CSFP commodities?

Yes. The CSFP distributes cheese, which must be refrigerated.

10) Does each CSFP participant get the same food package?

No. CSFP food packages vary according to the category of the participant.

11) Does each permanent site in each county have to have a 2-4 week supply of commodity food?

Yes. Each site must be able to continue to serve participants for a 2-4 week period in the event that it cannot receive commodity deliveries.

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12) What and how much is in a senior's CSFP food package?

Please refer to the following chart which shows the composition of the food package for seniors:

Quantity	Item	Package Size
2	Boxes of Cereal (rice, oats, corn flakes, or wheat flakes)	12 – 17 oz.
OR	OR	
1	Bag of rolled oats	3 lbs
3	Cans of Juice (apple, orange, or grape)	46 oz.
2	Cans of Chicken, Tuna, Salmon	12 - 14 oz.
OR	OR	OR
1	Can of Beef, Stew, or Chili	24 oz.
1	Package of Cheese	2 lbs.
3	Cans of evaporated milk	12 oz.
1	Box of Nonfat Dry Milk	24 oz. (distributed every other month)
1	Package of Dry Beans (pinto, kidney or northern)	2 lbs
OR	OR	OR
1	Jar of Peanut Butter	18 oz.
2	Bags of Macaroni	1 lb.
OR	OR	OR
1	Bag or Spaghetti or Rice	2 lb.
2	Cans of Fruit (peaches, pears, mixed fruit, applesauce)	15 oz
4	Cans of Vegetables (corn, peas, sliced potatoes, green beans, mixed vegetables, tomatoes)	15 oz.

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13) Do CSFP applications need letters of support?

No; the CSFP application does not require separate letters of support. The Sponsor Agency must include letters of support as part of the required documentation for the WIC local agency application. As a reminder, a Sponsor Agency that desires to operate a CSFP must submit a WIC Program Application together with the CSFP Agency Application in order to be considered. The Sponsor Agency must qualify and be selected as a WIC Program service provider in order to be selected as a CSFP Agency.

14) Can you provide the following information for a few commodity items (cereal, pasta, rice, canned vegetables, canned fruit, canned meat) size of a pallet and number of boxes/cans per pallet?

Please refer to the following chart:

Commodity	Number in a Case	Number of Cases per Pallet
Dry Cereals	12 - 14 boxes	36 or 48
Juice	12 cans	56
Canned meats/fish	24 cans	40 (chili) 48 (chicken) 56 (stew) 60 (beef) 80 (salmon) 100 (tuna)
Cheese	12 boxes	75
Evaporated Milk	24 cans	108
Non Fat Dry Milk	12 boxes	54
Dry Beans	12 bags	84
Peanut Butter	12 jars	128
Macaroni	24 bags	60
Spaghetti	12 bags	80
Rice	30 bags	42
Canned Fruit	24 cans	85 or 102
Canned Vegetables	24 cans	85 or 102

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15) Could you explain the two ways an agency can apply for the CSFP program?

Two ways an agency can apply to be a CSFP Program are:

1. The applicant must be a Sponsor Agency that is applying to operate a WIC Program as well as CSFP Program.
 2. An agency interested only in providing CSFP services may not apply directly. Such an agency would need to identify, and develop a subcontracting relationship with a Sponsor Agency who is applying for both WIC and CSFP. The details of the subcontract do not need to be fully worked out prior to the Sponsor Agency's submitting their application, however the Sponsor Agency should ensure that the subcontract is properly accounted for in its budget proposal. For example, if the proposed subcontract is for staffing, the cost of the subcontractor employees' salaries should be counted as contractual services.
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16) Does the state anticipate any increase in services by WIC or CSFP? Will CSFP serve more women and children in the future than it does now?

Future funding levels for both of these programs is not expected to increase substantially.

CSFP:

At the present time, we do not anticipate any increase in services or caseload for the CSFP. All WIC-eligible women and children are referred to the WIC Program. As a result, the CSFP is only serving non-breastfeeding women from 6-12 months postpartum and children aged 5-6. Therefore, the majority of the CSFP program participants are, and will continue to be, the elderly.

17) Does the state provide the equipment to be taken to the mobile site?

No; CSFP mobile sites conduct all business (certification and food issuance) on paper. This information is later entered into the CSFP automated system.

18) Is the state responsible for renovations of space for CSFP if a site is selected?

For these costs to be considered for the state's approval, the applicant would have to include such renovations of space in their one-time cost estimates that would be included in the budget proposal.

19) How many mobile sites are adequate?

Each agency must determine how many mobile sites are needed to reach out to perspective participants who cannot travel to the permanent site, and to reach their state-assigned caseload.

20) What is the least amount of space needed to operate the CSFP program?

For reference, the smallest CSFP site presently operating serves approximately 4,300 participants and has a total site footage of approximately 5,000 square feet.

21) If you are applying as WIC Local Sponsor Agency and CSFP are you required to identify your subcontractor CSFP provider at time of application or can that come upon reward of the contract?

You do not have to identify the specific agency for which you intend to subcontract services if it is not known at the time that the application is prepared. You should identify in your application that you intend to subcontract out specific services. Please note that all subcontract agreements are subject to prior DOH approval.

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22) If a Senior Administrator oversees both WIC and CSFP will this Table of Organization meet the coordination of services requirements?

Will an application be scored unfavorably if the applicant proposes to serve only 1 county rather than the preferred “more than one” planning area – pg 6 of the RFA?

A table of organization that indicates the WIC director oversees the CSFP director is required. The Sponsor Agency must also describe other plans to coordinate services between WIC and CSFP, such as a co-located site that serves both WIC and CSFP participants, shared staff, and/or participant referrals.

The CSFP application will not be scored unfavorably if the applicant proposes to serve only one county. The preferred qualifications for the CSFP are on page 7 of the RFA; they address capacity to operate mobile sites as well as permanent sites, and co-location of the WIC and CSFP Programs.

One of the preferred qualifications for a WIC Local Agency is providing service in multiple planning areas.

23) Must the food commodities and CSFP staff be co-located?

CSFP requires that participants be able to receive program services (certification, nutrition education, etc.) and their commodity food package at one time and at one location, and that participants be given the choice of all varieties of commodities. A Sponsor Agency may propose an alternative to having all CSFP staff and commodities located at one site as long as the proposal fulfills this above requirement.

24) How many mobile vans are available for the CSFP program?

This depends on the agency’s estimate on the number of mobile sites that it will need to operate to achieve maximum participation (based on its state-assigned caseload). Once this number is determined, the agency will be able to determine the number of vans/trucks needed to serve those participants that will require services at a mobile site. The sponsor agency may purchase or lease vans using CSFP funds (with the State and USDA approval).

25) Do you have a listing of all CSFP sites and their current mobile sites?

The current CSFP sites are:

Catholic Charities Diocese of Rockville Centre
66 North 19th Street
Wyandanch, NY 11798

Catholic Charities Diocese of Rockville Centre
38 St. John’s Place
Freeport, NY 11520

Kings County Hospital Center
840 Alabama Avenue
Brooklyn, NY 11207

Catholic Charities Neighborhood Services
89-56 162nd Street
Jamaica, NY 11432

Please refer to Attachment C of this document for a list of the mobile sites that are operated by Catholic Charities, Diocese of Rockville Centre, and Kings County Hospital Center.

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26) Can you provide guidance on square footage for warehouse space for CSFP? Is this based on an expected number of participants?

A minimum amount of warehouse space needed for a site serving approximately 1,000 seniors would be approximately 3,000 square feet. The following represents how this estimate was determined:

CSFP sites are required to have all 45-50 varieties of commodities available at all times during the month. In addition, the site will distribute approximately 20 pallets of commodities for every 1,000 senior participants they serve each month. A site that is serving 1,000 seniors each month (20 pallets of commodities) and warehouses all varieties of commodities (50 pallets) should have enough warehouse space for 70 pallets. On average a pallet takes up 16 sq. feet of floor space. So the site described above would need 1,120 square feet of floor space for the commodities alone. If pallets are stacked on top of each other, then less space would be needed. Additional space is needed to drive a fork lift in the warehouse area to pick up and move pallets as needed. Space is also needed for staff to open cases and assemble food packages. Please note that this scenario uses 1,000 participants as an example only. Agency proposals are expected to be for more than 1,000 participants.

27) The RFA asks for copies of formal agreements when there is a formal referral arrangement, and a Letter of Support from the sponsoring agency's governing body. Please explain both.

These forms are a required part of the WIC Local Agency Application. If your agency has formal agreements with providers who you make referrals to, you need to provide copies of those agreements.

Letters of Support from the sponsoring agency's governing body are intended to ensure that the governing body is aware of the grant being applied for, and is in support. The RFA requests that one letter of support from the sponsoring agency's governing body be submitted with the application. A letter of support from a community provider that would have a direct relationship with the WIC Program is also required.

28) What are the steps to certify a CSFP participant? Are the procedures computerized?

CSFP certification is computerized at the permanent site; data is directly entered into the CSFP automated system during the certification process. At a mobile site, certification is completed on paper; data is entered into the CSFP automated system later at the permanent site.

To be certified, a person must be categorically eligible (senior aged 60 and over, non breastfeeding postpartum woman from 6-12 months postpartum, child aged 5-6 years old). In addition, the applicant must provide proof of New York State residency and income (which must meet USDA requirements). The following information is also collected as part of the certification process: address, phone number, other family members, proxies, race, and ethnicity.

29) What is the average staff to participant caseload for CSFP?

Present CSFP agencies have a staff to participant ratio ranging from 1:378 to 1:612.

30) Does the passage of the stimulus package increase program funding for the CSFP program?

No; CSFP was not included in the stimulus package.

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31) What is the estimated eligible number of participants for CSFP in each county?

This specific information is not available.

However, for reference, we are providing information from the American Community Survey which provides the estimated number of seniors aged 65 and over that are at 125% of the poverty level for 2006 and 2007. (This information is pertinent to CSFP eligibility because a senior must be aged 60 and over and at or below 130% of the poverty level).

County	2006	2007
Bronx	39,207	38,562
Kings	94,021	96,260
Nassau	13,826	15,118
New York	53,231	49,318
Queens	54,952	54,976
Richmond	7,886	9,860
Suffolk	16,051	16,099

32) Are there guidelines on estimating caseload and/or caseload to staff ratio?

The RFA and the information included in this Question and Answer document provide all of the parameters on this topic that are known at this time.

33) Are there education requirements for CSFP nutrition staff?

It is strongly recommended that the program Nutritionist be a Registered Dietician. However, as an alternative, the nutritionist should have a Bachelor's degree from an accredited university with an emphasis in any of the following: food and nutrition, community nutrition, public health nutrition, human nutrition, nutrition education, nutritional sciences, or their equivalents, or eligible for registration with the American Dietetic Association.

34) One time costs – should we submit a separate budget with our application or after the award is made?

If a proposal is submitted to cover multiple service areas, will it be separately scored within each proposed county? Or will it be scored as a whole?

One time costs should be submitted with the application in the budget section.

The application will be reviewed and awarded points in accordance with the evaluation methodology; it will then be ranked according to point total for each county.

35) What is the difference between Charities Registration (Pg 11, Attachment 3) and the NY Dept. of State Registration (Attachment 2 Check list)?

Both terms mean the same. All non-profit organizations are required to register with the NYS Department of State as a charitable organization and to obtain a charity registration number. However, some religious organizations are exempted from these requirements. The Department of State will acknowledge this exemption with a letter. This letter is required as proof of exemption. Department of State registration does not apply to Government agencies (municipalities).

36) Please list examples of one-time costs.

Some examples of one time costs are: equipment such a copier or fax machine, renovations of program space, etc.

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37) Checklists of required documentation

Under relevant managerial policies and procedures

Internal Controls – please explain

The documented process that describes procedures set up to protect assets, ensure reliable accounting reports, promote efficiency, and encourage adherence to company policies.

38) Does the WIC Director oversee the CSFP Director and Program?

The CSFP Director must report to the WIC Director. However, day to day management and oversight of the CSFP is performed by the CSFP Director, not the WIC Director.

39) If you are planning a CSFP in 2 contiguous counties, do the permanent sites in each county both need to have warehouse space with a loading dock or can you have one centrally located warehouse serving both permanent sites?

CSFP requires that participants be able to receive program services (certification, nutrition education, etc.) and their commodity food package at one time and at one location, and that participants be given the choice of all varieties of commodities. A Sponsor Agency may propose an alternative to having CSFP commodities warehoused at each permanent site, as long as the proposal fulfills this above requirement.

40) With a WIC Director overseeing a CSFP program, how is the WIC Director's salary allocated in the WIC and CSFP budgets?

The allocation of salaries should reflect actual time spent in each program based on a time and effort reporting system. If this amount of time is unknown at the time the budget is created, please use an estimate. Amounts actually charged to contract budget lines should be supported by the time and effort reporting system. If the amount originally budgeted is incorrect, a budget modification can be submitting to revise the percentage of time for personal service costs.

WIC Program - Caseload

1) How are caseloads determined for a WIC provider?

Refer to pages 27 and 28 of the RFA document.

2) Is there a public database where I can get non-identifying participant data (how many were served each year, demographics, etc.) at planning area level (in our case, county level)? I have access to data for participants in adjunct programs such as Head Start and for programs that serve a similar target group such as Healthy Families but data specific to participants of the existing WIC program would be even more helpful while planning our application.

3) Can the State DOH list the current agencies in the Metropolitan Regional Area that are operating a WIC program?

4) Who are the current WIC providers serving Nassau and Suffolk County?

5) Is there a list of current WIC providers in the Metropolitan New York City Area that I can access?

6) I am writing to you to request a list of all the WIC sites in the Bronx. Can you provide this information for me?

7) • Where can we find a listing of all current WIC sites?

- How can we find out the caseload @ these sites?

WIC Program - Caseload

8) How do we find out how much caseload is currently being served at each permanent and/or temporary site? If we have this information, we would be able to better determine where is the unmet need in the planning(s) we would like to serve?

9) How can I get information on other WIC agencies and their respective caseloads in a specific planning area?

10) WIC Local Agency, Section V, Subsection C. Review and Award Process, Caseload (for new WIC local Agencies), Caseload Distribution, Page 27, "...the number of WIC clinics to be operated, the number of participants to be served (based upon the last three month's participants trends for current WIC agencies)..."

Our application is for becoming a new WIC local agency and we do not know the participant trends for the past three months. Is it possible to have access or request the participant trends for our county?

There is no public database that contains this information. Please find the most current site locations and caseload figures as Attachment A of this document. For the three month period associated with figures in Attachment A, our best information indicates that there has been minimal fluctuation in these amounts.

11) **At the bidders conference, I think one of the presenters mentioned that we could get maps of county-level data of distribution of the WIC eligible population (for the planning areas that are full counties). Did I hear that correctly? If so, how do I access those maps?**

12) WIC Local Agency, Section III, Project Narrative, Role of Agency, Page 7, 3rd paragraph, "The State has statewide data by zip-code identifying areas where eligible participants are not receiving WIC services."

Is this specific data available to individual counties? If yes, where can we find or request this information?

13) **Can we get access to updated GIS maps? For counties with less than 10,000 estimated eligibles, Attachment 10 only lists one number. If maps are not available, can you provide guidance on how to identify greatest need in the county not broken down by zip code? (i.e. beyond 2000 census data)**

14) **If you are applying for a planning area with less than 10,000 eligibles, can up to date eligibles by zip code be available to coincide with the updated (Jan 09) estimated eligibles upon request from NYSDOH?**

15) **Can we obtain zip code reports for planning areas of less than 10,000?**

16) **Do you have a map for WIC eligible for 2009 for Cayuga County including the WIC eligibles broken down according to categories. i.e. number of women, number of infants, children and total number?**

17) **Last year, I received some maps from the NYS WIC that were specific to my county. The maps showed the towns and villages in the county and were color coded showing areas of highest unmet needs and eligibles. I am aware that Attachment #10 included number of eligibles but the maps by zip code were only for the NYC area. How do I go about obtaining these maps that are more current than 2006?**

Please see the tables included as Attachment 10 of the RFA document for zip code information for those counties that have more than 10,000 estimated eligibles. For those counties with less than 10,000 eligibles, please see Attachment B of this document. Please note that the information in these Attachments is in table form, not in GIS form. Currently, GIS maps are only available for the five boroughs of New York City. These GIS maps are the most recent and descriptive we have available.

WIC Program - Caseload

18) With regard to data found in Attachment 10: Please explain the increase in estimated eligibles in the Upstate planning areas.

19) • How is the number of eligibles per 185% county determined?

- Is it based on FPL and county population?
If so, what FPL percentage?
- What census year – 2000? or a recent population estimate?
- Can you provide the formula for determining # of WIC eligibles?

20) With regard to a current WIC agency which thought it was serving close to 50% of WIC eligibles, and which now is determined to be serving 30-35% WIC eligibles, according to the new RFA figures: Please explain the discrepancy between the previous figures, and the new RFA figures (which seem to be significantly higher)?

Data provided in Attachment 10 are updated as of January 2009. These updates were developed using data from the 2003 - 2007 NYS vital records, 2000 Census Summary File 3, March Supplement of the Current Population Survey and recommendations outlined in the Final Report of the Panel to Evaluate the USDA's Methodology for Estimating Eligibility and Participation for the WIC Program.

21) Do the number of WIC eligibles in each planning area account for the newly unemployed?

Figures provided in Attachment 10 are based on the most current available data.

22) Can you explain in more detail what you mean by 50% of estimated eligibles? How will this be determined?

The tables and maps in Attachment 10 contain the number of estimated eligibles. In addition, counties with more than 10,000 estimated eligibles have this information broken out by zip code. The total number of eligibles in each planning area can be determined by using this information. The DOH intends to make awards in each planning area until there is sufficient coverage to serve 50% of the estimated eligibles as identified in the information presented in Attachment 10.

23) Define Caseload and Enrollment.

24) How does the State calculate No-Show rates?

25) What is the difference between caseload and enrollment, and how is the no-show rate calculated?

Enrollment is the number of participants that have been certified (determined eligible) to receive program benefits. Caseload or participation is the number of certified participants who received program benefits during the month.
The no-show rate is a percentage caseload served compared to the total enrollment.

26) Currently there are several WIC clinics operated by a different sponsoring agency in my planning area – will that be consolidated to the closest local Agency?

Applications from this procurement will be evaluated and scored as outlined in the RFA. Within each planning area, applications will be ranked by score from highest to lowest. DOH intends to make awards until 50% of the estimated eligibles in each planning area can be served, subject to available funding.

WIC Program - Caseload

27) WIC Local Agency, Section V, Subsection C. Review and Award Process, Caseload Distribution (for new WIC local Agencies), Page 28, "New contractor will be limited to caseload of approximately 1000 to 1500 participants per planning area for the first year."

Is the transitional preference that the new WIC local agency absorb the current WIC participants or focus on initial development and outreach for recruiting new participants?

Applicants should focus their application towards serving 50% of the estimated eligibles in one or more planning areas. Preference will be given to those agencies that demonstrate an ability to serve a greater number of participants and improve access to the Program.

28) WIC Local Agency, Section V, Subsection C. Review and Award Process, Caseload Distribution (for new WIC local Agencies), Page 27, "NYSDOH will adopt a conservative approach for new WIC local agencies...."

Our application is for becoming a new WIC local agency. As we plan and describe the proposed Program Activities for the application, do we plan and describe the comprehensive 5 year plan or simply the 1st year plan? Or would you like to see the 1st year plan easily distinguishable from the comprehensive 5 year plan? Please indicate how we should proceed with the description of the Program Activities for the application?

Awards resultant from the RFA will be for a five year period. As such, please write your application for the full caseload amount for which you are applying. It is reasonable for the State to expect that new agencies will only be able to serve between 1,000 and 1,500 participants in the first year. In subsequent years as agency capacity and infrastructure is developed, the ability to serve the awarded caseload will be expected.

29) Regarding WIC Local Agency Application, Section V, Program Activities, A. WIC Local Agency Sites, Caseload Capacity and Access, p. 17, if an applicant intends to serve two planning areas in a metropolitan area out of one strategically located WIC Program site located near the border of the two planning areas. The table on page 17 is not set up to allow for one WIC site to serve two planning areas. Can an applicant serve two planning areas from one site? If the answer is "yes", please advise as to how to complete the table on page 17 and related questions under section A. WIC Local Agency Sites, Caseload Capacity and Access.

For the Table in Section A, identify each planning area, enter the site information (more than once) and specify the monthly caseload capacity for each planning area. The form will create separate sheets in Section B, Section C, and Section H for the duplicate site listings; please ensure that Sections B, C, and H are completed for each planning area (this duplicate data should be consistent for the site). For the Budget forms, only enter the site once.

30) During the first year, when new agencies are serving 1,000-1,500, how will the other WIC eligibles be served?

The WIC Program has several options for providing coverage to those eligibles not being served at the new agency.

31) Since the eligible 50% WIC population in Queens (for example) is at 90,000. How many providers does DOH anticipate funding in Queens?

Awards will be made in rank order based on scores until 50% of estimated eligibles can be served or until funding runs out. The number of awards in a planning area depends on the caseload awarded to successful applicants in rank order.

32) Are you aware of multiple or new applicants in a planning area?

No.

33) Will the Department of Health sponsor more than one WIC local agency per county?

It is DOH's intent to serve 50% of the eligibles in each planning area. The DOH may make multiple awards in each planning area in order to serve this target based on available funding.

WIC Program - Caseload

34) Clarify what is meant by proposed vs. verified case load per site/temp site? How is it documented?

Applicants responding to this RFA should propose a caseload level they intend to serve in each planning they are applying for. The application should support that proposed caseload. During the evaluation process, DOH will evaluate the application as outlined in the RFA. The evaluation process will verify that the application supports the proposed caseload. Factors considered include; number of sites, staffing ratios, proposed space/locations, proposed budget, and hours of operation.

35) If you cover two counties does the caseload have to be broken down, being county specific or is it one caseload per agency?

The caseload capacity should be broken out by site.

36) The RFA states: Ensure there are sufficient providers to serve approx 50% of (pg24) estimated eligibles in your planning area vs. targeted caseload; when caseload is less than 50% of eligibles? Refer to Check Application Program Activities page 17.

It is DOH's intent to serve 50% of the eligibles in each planning area. The DOH may make multiple awards in each planning area in order to serve this target based on available funding.

37) We currently serve around 4,600 and the total eligibles for our planning area is 42,830. If you have a large planning can you apply to serve a percentage of the "eligibles" in the planning area?

Applicants should specify a caseload number to be served. A percentage may not adequately describe the number of clients to be served in the planning area.

38) I understand that as a new agency proposing to provide WIC services, we are limited to providing services to 1,000-1,500 participants in each planning area in our first year of the program to allow for infrastructure development and seamless services to participants. However, to meet the 50% goal, we'd need to serve just under 2,500.

- **Do we present one single plan for serving at least 2,500 participants and then let the State scale it back for the first year as the transition occurs or do we submit plans for each year as we grow to the 50% goal?**
- **If we submit individual plans for each year, which forms in the application need to be completed for each year?**

Responses to the RFA should identify the caseload your agency is proposing to serve over the next 5 years. Keeping in mind the State's goal of serving 50% of the WIC eligibles in each applicable planning area. Successful applicants that have no prior WIC experience, would be expected to serve between 1,000 and 1,500 participants in the first year.

39) When an agency desires to add additional zip codes, and another applicant also requests the same zip codes how do you decide who to award the contract to? How do we determine staffing levels based on historically effective ratios?

Where do I find this info?

Contracts are awarded based on ranked score per planning area. Multiple contracts may be awarded in each planning area to ensure 50% of eligibles are served (based on available funding).

You should propose a staffing package that you feel sufficiently supports your application.

40) If we are a current agency and our caseload is not 1/2 of the estimated eligibles, what should we propose as a caseload number? (ex.- Attachment 10 says we have 4,870 WIC eligibles but current case load is 1,789)

Applicants should propose a caseload based on their ability to serve that caseload. Multiple contracts may be awarded to reach the target of serving 50% of the eligibles in a planning area.

WIC Program - Caseload

41) What areas in NYC are in great need of having the WIC program/agencies to facilitate their needs?

Refer to maps in Attachment 10 for the areas on NYC with the greatest number of WIC eligibles. The legend on the map provides detail of estimated need.

42) Please provide guidance on how to calculate appropriate caseload per site/temp site? How do we demonstrate the ability to serve? How do we calculate staff to participant ratio ?

You should propose a caseload and staffing package that you feel sufficiently addresses your application. Staff to participant ratio is the number of staff divided into the proposed caseload.

43) Could you please clarify minimum number of alternative hours? For example if the proposed caseload is 3,501-7,000, will you need to have 16 alternative hours a month? Does this include appointments during lunch hours?

Refer to page 4 of Attachment 7 where an example is provided. Alternative hours are exclusive of lunch hour appointments. Lunch time appointments must be offered. Alternative hours are hours before and/or after the normal agency hours.

44) What is the plan if no one applies to cover a specific planning area?

The state has several options available to provide services in all planning areas.

45) If outside the 5 boroughs – If a county has greater than 10,000 WIC eligible participants can you estimate your caseload by calculating 50% of eligibles by zip code rather than the entire county?

The response to the RFA should include the caseload your agency is proposing to serve over the next 5 years. Keeping in mind the State's goal of serving 50% of the estimated eligibles in each applicable planning area.

46) If you want to request a caseload in a planning area higher than 1,000-1,500 for example 5,000 participants monthly, will this be considered?

The response to the RFA should include the caseload your agency is proposing to serve over the next 5 years. Keeping in mind the State's goal of serving 50% of the estimated eligibles in each applicable planning area. Successful applicants that have no prior WIC experience, would be expected to serve between 1,000 and 1,500 participants in the first year.

47) What is the current amount of participants each nutritionist must serve each day?

What is the minimum caseload for a local agency to sponsor a WIC program?

There is no minimum caseload specified in the RFA, applicants should consider that preference is given to applications that demonstrate an ability to serve a greater number of participants and improve access to the Program.

48) What is the minimum amount of eligibles to be served in the proposed planning areas?

The DOH intends to make awards by rank order in each planning area until at least 50% of the estimated eligibles can be served as determined by caseload award(s), subject to available funding.

WIC Program - Fiscal

1) What are indirect and non-direct costs? Give examples, please.

WIC Program - Fiscal

2) Explain the difference between indirect and non direct costs

3) Define "indirect" and "non- direct" program costs?

Indirect costs are costs associated and paid for by the agency but can not be easily broken out by program. An example might be snow removal from the parking lot or agency payroll services. Non-direct costs are for staff who do not work 100% for WIC/VMA/CSFP but are necessary to the overall success of the agency's program. An example might be a portion of a bookkeeper's salary attributed to the WIC/VMA/CSFP program. Indirect cost rates must be approved by the federal government or the NYS WIC Program. Please refer to WIC Program Manual Section 1412.

4) WIC Local Agency Section V. Page 28, Budget Development: The RFP states that "the WIC Program will limit indirect and non-direct program related costs to 10 percent of the total budget." As a current WIC grantee, our indirect program costs have been limited to 5% of the total budget. Please clarify the indirect cost requirement.

Indirect and non-direct costs can be requested in the budget, but cannot exceed 10%.

5) What was the allowable indirect rate prior to this application process? Will 10% apply for full 5 year contract period?

Previously, indirect cost rates were negotiated specific to each agency. Under the terms of this RFA, all indirect and non-direct costs are limited to a maximum of 10% of the approved budget. We do not expect this to change during the course of this procurement.

6) Can an indirect cost rate be applied to items such as retiree costs?

No.

7) Must the justification for indirect rate be submitted at the time of the RFA ?

Yes. Refer to Section 1412 of the WIC Program Manual.

8) Under WIC preferred qualifications, it is stated "provide in-kind support to the program via available sponsor agency fiscal resources". What is the expected in-kind (%) rate?

9) How much in-kind service must an agency provide (%)?

10) How much in-kind support is required?

11) WIC Local Agency Section V. page 28 Budget Development: The RFP says that the WIC Program relies on in-kind support from sponsor agencies. Is this a requirement, and can you give some examples of the kinds of budget items that would be acceptable in-kind support?

In-kind support is not a requirement and there is no established level of in-kind service required for an agency to provide, however, the WIC Program is not an entitlement program. Funding provided to NYS is limited. Some examples of in-kind support are providing program space at no cost to the program, limiting indirect costs to less than 10%, etc..

12) What is the reimbursement rate provided to the agency administering the WIC program?

13) What are the reimbursement rates provided for administrating the WIC services to the eligible population?

WIC Program - Fiscal

14) What is the reimbursement/if any provided to the WIC local agency administering the WIC services?

What is the minimum amount of eligibles to be served in the proposed planning areas?

Sponsor agencies are reimbursed for program expenditures. Reimbursement is based on actual costs to the sponsoring agency. All requested costs should be identified and justified in the budget request.

It is the intention of the DOH to make awards until 50% of the estimated eligibles in each planning area can be served, subject to available funding.

15) Will Healthy Lifestyle funding be a separate line after the state determines % of children?

16) Enhanced Peer Counseling (EPC) - Do we budget for EPC and Healthy Lifestyle?

17) Can Breastfeeding Peer Counselor budget include 10% indirect?

18) What is the formula, or where can it be found, for determining the percent of peer counselors required for your Program?

19) Can Healthy lifestyle funds be used to support a staff coordinator similar to Breastfeeding?

Enhanced peer counseling funds and Healthy lifestyle funds will be added to successful applicant contracts into the final grant award . Guidance for utilizing these funds will be provided at that time. Please refer to pages 28- 29 of the RFA for more detail.

20) What are the wages for program Directors, CPA's and CPA's 3?

21) Please post average wages, based on locations for all mandatory WIC positions. For example, WIC Director, WIC Clerk, WIC CPA I, WIC CPA II.

You may use the following data as a guide when developing your budget request

WIC Program Director

Capital region - \$51,476

Central region - \$56,999

MARO region - \$97,164

Western region - \$59,425

CPA

Capital region - \$42,494

Central region - \$44,293

MARO region - \$57,232

Western region - \$50,133

Program Support Staff

Capital region - \$29,891

Central region - \$34,437

MARO region - \$43,246

Western region - \$35,529

22) Would one-time costs for site renovations equipment and moving expenses be detailed in the RFA or the budget proposal?

All costs should be budgeted in the budget section and should be adequately justified.

WIC Program - Fiscal

23) Will you consider funding Enhanced Peer Counseling programs at a higher cost than your formula?

No

24) Will proposals still be viewed competitively if unallowable costs are removed?

Applications are scored first, then unallowable costs are removed.

25) Approximately how many awards will be awarded to the prospective WIC local agencies?

It is the intention of the DOH to make awards until 50% of the estimated eligibles in each planning area can be served, subject to available funding.

26) Attachment 7 WIC Local Agency Workplan page 4 under Documentation:

Paragraph starting with Substantiate and document... Sentence

"Employees who work solely for one Federal program are required to complete a certification a least every six months stating that they worked only on the one Federal program." What is meant by certification ? Is it a form?

This is an error and will be corrected in the workplan that will be included in the WIC Local Agency contract. It is not a requirement. A semi-annual certification is an alternative to completing a time and effort distribution record. It is usually a one page form. In almost all cases, the WIC Program uses time and effort distribution records to comply with the federal requirement to substantiate and document personal service costs charged against contract budgets.

27) What are the acceptable software programs for financial management systems?

The DOH does not recommend specific software programs for Financial Management Systems. Applicants should demonstrate that current agency Financial Management Systems are sound.

28) What are the fiscal requirements, if any, needed in order to run a WIC Sponsored agency?

Attachments 8, 13, 14 and 15 contain documents that will be incorporated into awarded contracts. Applicants should review these attachments to determine specific fiscal requirements.

29) What is the standard budget or budget range for current WIC provider(s) on Long Island?

Budgets should be developed for necessary costs for an agency to carry out its requirements for the caseload assigned.

30) How will the State fund "start up" operations -when the budget form does not accommodate this request?

Budgets should be developed considering all anticipated costs for the contract period. Start up costs would be included under the appropriate budget line.

31) Can the lead agency subcontract a portion of the administrative budget? Can they subcontract more than 50% or is there a limit?

Yes. All subcontracts are subject to prior DOH approval.

32) Will the budget format/forms be similar to past annual budgets? When will the budget forms be sent ?

The budget forms can be found in Attachment 3 of the RFA. They should be completed and sent with the application.

WIC Program - Fiscal

33) The contract period is now for one year; isn't that different from the past?

The contract period is for one year with the option for 4 annual renewal years. This is consistent with years past.

34) How long will contract extensions be, if a current FFY 2009 contractor is not awarded a contract for FFY 2010?

The length of any contract extension period would be based on the transition plan that is developed specific to the agency.

35) Will existing programs be extended if awards and contracts are not completed by September 30, 2009?

It is our intent to extend existing programs so that there are no gaps in service, subject to the approval of DOH and the Office of the State Comptroller.

36) Can the contract be cancelled after 1 year? Who could cancel it, the State or sponsor agency or both?

This procurement is for a five year period, applicants should apply with the intention of providing services for the procurement period. Please refer to Attachment 13 - Standard Grant Contract, New York State Agreement Section III. Terminations for information regarding ending an established contract.

37) Is the hiring of an outreach worker a WIC allowable expense and will it be considered in the grant budget?

If an outreach worker can be justified in the budget, it will be considered. All costs should be justified.

38) How does the proposed State budget impact on WIC funding? Are additional cuts proposed, and will these be reflected in the awards? If awards are reduced, will expected caseloads be reduced proportionally?

Cuts to overall program funding will be reflected in award amounts. Caseload figures may not be reduced as they are not specifically tied to the budget.

39) Is the funding for the RFA going to be at a reduced level than previous years?

Funding is not anticipated to be reduced.

40) Can we be given anymore clarity about the maximum amount of money an applicant can request?

We are very challenged with the ability to offer comparable wages for our staff. It's hard to recruit and retain professional staff in our rural planning area with the wages we are currently able to pay.

Applicant's should propose a budget that they can reasonably justify to provide all proposed services.

41) With a new training center will training costs be covered by the training center or should they be budgeted in for training expenses?

How will we know what training will be provided regionally and how to determine costs?

Training costs including travel should be budgeted for in the budget development of the RFA.

42) Please elaborate on cost containment policy; can the county's policy of obtaining bids for purchases be included in the cost containment requirement?

Cost containment policies should include all agency procedures for ensuring that goods and services procured are obtained at the best value and are necessary to perform services.

43) Will contracts be amended for future budget cuts, if they occur?

Yes.

WIC Program - Fiscal

44) If the intent is to consider caseload planning for 50% (of WIC eligibles) will there be funding to support this type of planning?

We anticipate that there will be, but this is subject to available Federal and State funding.

45) Should the application and budget be prepared to reflect serving 50% of estimated eligibles? If Yes, can target be reached by year 5 through incremental increases?

The application and budget should be prepared to reflect what is necessary to provide services to the application's proposed caseload.

46) Does page 8 of Budget form only apply to permanent sites? (i.e. space costs) We also have space/rent costs at some of our temp or any sites; can you tell me how to add temp or any sites to this page so I can list space costs, if appropriate? Or would I list the additional space costs for temp or any sites in "Additional Space Notes?"

The Space section of the WIC Budget form refers to both permanent and temporary sites. The site summary table has a checkbox in the column labeled "Permanent". All permanent sites should have this box checked, and all temporary sites should not have this box checked. Costs related to each site can be entered the same way for permanent or temporary sites.

The site summary table should list all sites you are proposing to use regardless of whether there is a cost associated. Also, this list of sites should match up with the site list you provide in *RFA Attachment 3 - WIC Local Agency Application - Section V. Program Activities Part A. WIC Local Agency Sites, Caseload Capacity, and Access*. There should only be a difference in the tables if the applicant is proposing a site that plans on serving participants in multiple planning areas. On the budget form, sites that plan on serving participants in multiple planning areas should only be listed once. In Section V. A., these sites should be listed twice with their proposed caseload split appropriately into the different planning areas.

Please see pages 15-18 of [How to Use the BSFP Request for Applications \(RFA\) PDF Package](#) for further guidance about entering site information on the WIC Budget forms.

47) What is a fair wage for a peer counselor in the NYC Metro area?

Currently the statewide average hourly pay for a peer counselor is approximately \$10 per hour. This is an average rate may be higher in other locations with higher costs of living.

48) If grant awards are less than requested amounts, will the workplan be amended to coincide with the reduction in funding?

Workplans are standard for all WIC Local Agency contracts and will not be amended. Successful applicants are responsible for all deliverables outlined in the workplan. Proposed caseload and site(s) may be adjusted to reflect awards.

49) Should cable drops be included in budget?

Yes.

50) Can costs for administrative computers, auto dialing equipment and hospital hook up for lab values, etc. Be covered?

Sponsor agencies should include these costs when developing their budget proposal.

51) Do you recommend an accountant or fiscal person on the budget? Would this be an indirect cost?

Because there is limited funding available, the State places a priority on funding direct service staff such as WIC Director, CPA and program support positions. Applicants may propose funding non-direct staff such as an accountant. It should be noted that an accountant or fiscal person may already be accounted for in the agency's indirect cost rate. If this is not the case, this would be considered a non-direct cost and subject to the 10% maximum that has been stated for all indirect and non-direct costs.

WIC Program - Fiscal

52) RFA awards will be announced Summer 2009, when will Federal Year 2010 budgets be required to be submitted? After positive notification of the RFA?

Budgets submitted in response to this RFA will serve as the basis for the FY 2010 funding level. Refer to page 28 of the RFA.

53) Which attachments deal with the fiscal part of the program?

Attachments 3 and 18 are the most fiscal in nature, however most attachments may have fiscal implications.

54) Is the 10% rule applicable to the new contract?

Yes, if you are referring to Appendix A-1 of the WIC local agency contract that requires OSC prior approval to modify any budget line by more than 10%.

WIC Program - Miscellaneous

1) Is the disaster plan required for submission specifically for the WIC Program and clinic, in the event of a disaster? We have several disaster plans here at the county. Do you mean the "Continuity of Business Plan"?

WIC policy requires a Disaster Plan. The disaster plan must detail how WIC services will be provided and how WIC participants will be notified of a change in service delivery during several different disaster situations. The WIC disaster plan may be part of a sponsor organization's plan; however, providing WIC services and ensuring the safety of staff and participants in a disaster must be specifically addressed in this plan.

2) What is the state's expected or goal ratio of CPA to participant?

3) With regard to "historically effective staff ratios", what is the state recommended CPA-to-participant ratio?

4) With regard to "historically effective staff ratios", what is the state recommended staff-to-participant ratio?

- 5)**
- What is the staff ratio for the WIC program?
 - Historical data?
 - What staffing pattern recommended?

6) Is there a FTE to client ratio for all of the positions outlined in the RFA?

7) Can you offer direction on "historically effective staffing ratios" based on enrollment for CPA, CPA3, support staff, etc...?

8) Is there a document or website that has best practices including things like effective staffing patterns?

The Applicant's Library may contain some materials that could be helpful - please see pages 13 - 14 of the RFA for more details.

The current CPA to participant ratio is approximately 1:771. The current staff to participant ratio is 1:380. These are statewide numbers. Specific local agency ratios may be different based on such factors as number of permanent/temporary sites, etc.

WIC Program - Miscellaneous

- 9) We would like to know what the major changes in WIC program Federal regulations are to sufficiently answer how we will meet these regulations and identify budgetary needs.**

The current Federal WIC program regulations can be viewed at <http://www.fns.usda.gov/fns/regulations.htm> .

- 10) Is there a website or document that discusses best practices for WIC programs - particularly those serving rural communities?**

The WIC Program Manual contains policies and procedures that govern the WIC Program. This is available for review in the Applicant's Library. Please see pages 13 and 14 of the RFA for more details.

- 11) If you visit the library, are you able to make copies of documents at the Library?**

Regarding the Applicant's Library, can you give us some details on what to expect from the Applicant's Library?

State staff can provide up to 10 single sided copies per applicant. Applicants cannot remove materials from the Library.

- 12) Is there any public information, other than RFA, available to review prior to beginning the application process?**

The applicant library is available at the Regional Offices. See pages 13-14 of the RFA document for address/phone number to make an appointment to view the documents. In addition, Federal WIC program regulations can be viewed at <http://www.fns.usda.gov/fns/regulations.htm>

- 13) What is an Applicant's Library and how is it helpful to the preparation of the proposal?**

The applicant's library is a collection of information pertinent to the WIC, VMA and CSFP programs. It may provide additional information to potential applicant's unfamiliar with the programs.

- 14) Where is the bidders library and what type of information is located there ?**

The Applicant's library is located in each of the regional offices (refer to page 13-14 for addresses and phone numbers). The information contained in the applicant's library is listed on page 14 of the RFA.

- 15) Regarding page15, Sponsor Agency Quality Assurance, who's internal review system - the Sponsoring Agency, or the WIC program (we are a WIC program now)?**

- 16) Regarding E. Managerial Capacity and Agency Governance #6 - e. Internal Controls _ Is it the Sponsoring Agency's or the WIC program's internal control?**

- 17) Regarding 3 Section K. under Program Activity. Does this refer to the sponsoring agency or is it WIC specific?**

- 18) Table of Contents of Policy and Procedure manual, is it the Sponsoring Agency or Local WIC Program (proposed or existing)?**

These are sponsor agency policies and procedures, you may also attach WIC specific if available.

- 19) When attempting to print out the NYS WIC RFA from http://www.health.state.ny.us/funding/rfa/0711070817/rfa_package.pdf Attachment 3, Section VI, WIC Budget Form.pdf, it will only print the first two pages? (i.e. the only valid print range is 1-2). Please advise.**

WIC Program - Miscellaneous

20) I am having trouble printing RFA form Attachment 3, Section VI, WIC Budget form; it only gives me the two summary pages. Is there any way I can print the rest of the budget form?

The RFA Budget Forms are designed to be filled out electronically. Individual page figures automatically carry forward to the Summary Page. The document is programmed to hide pages that do not contain entries. If you intend to print a complete hard copy, we suggest entering modest fictional information (including a cost) on pages that you want to print out. Please remember to remove these "placeholder entries" prior to your application submission

21) Is there a special function for Attachment 3, Budget form to allow me to print the 17 PDF pages that I can view? I'm only able to print two pages.

22) Please provide guidance on how to print a complete set of Budget forms.

23) Is there any way you could post a complete printable "work" copy that will print online, or give us a complete hard copy at the conference to work with as worksheets?

24) We have experienced many glitches in the online version. Can an updated form be sent?

An updated application has been posted to the website that should alleviate previous glitches.

25) Please provide guidance on using the PDF format save/edit/etc.

The forms are designed as .pdf fill-in forms. Information can be typed into the appropriate section on each page and saved and edited if need be. Please ensure that you have installed the most recent version of adobe acrobat to utilize all features programmed into the forms. This software is available for free download at <http://get.adobe.com/reader/>.

26) What do you advise if there are difficulties in using the fillable .pdf application forms?

Is there a resource for Adobe questions? How do you insert a footer? Your name is supposed to be at the bottom of each page.

Questions that are limited to technical assistance on completing the provided forms can be submitted through the application due date. Please ensure that you have the most current version of Adobe Acrobat (available for free at <http://get.adobe.com/reader/>).

27) Our agency's policies and procedures manual is over 800 pages long, does the entire manual need to be submitted, or is just the Table of Contents sufficient?

The application requests a copy of the table of contents of the policy and procedure manual. This includes dates each policy was last updated. In addition, entire copies of several other sections are requested. Please see Attachment 2 for a list of those sections.

28) The checklist of required documents requires a number of agency policies and procedures, many of these documents contain massive amounts of papers. Is it sufficient to submit a Table of Contents for fiscal policies, managerial policies, etc. or do copies of all policies have to be submit?

29) As a unit of local government we have massive documents reflecting managerial policies and procedures. If the materials are available on-line can we simply in the application refer reviewers to the on-line site (i.e., Employee Handbook, Recent audited financial statements)? And do we actually have to provide 7 copies of such massive documents – audited financial statements 170-page document? (Section E. Managerial Capacity, 6)

WIC Program - Miscellaneous

30) The RFA requests we submit polices and procedures with our application. The County's Health Department's Emergency Preparedness Plan is very detailed and several hundred pages in length. With this plan there presents also a security concern on the sensitivity of some of the information being copied. The County personnel Polices for hiring and termination of staff as well as evaluations are also lengthy as part of the County's Personnel SOP. The County also has a Department of Records for records management and storage. These instructive manuals provided to department are also detailed and several hundred pages. Would it be acceptable to send in with the RFA a copy of the table of contents for each of these instances?

31) Please clarify the attachments – should we include all the policies and procedures listed or try to summarize some of them. We have Policy and Procedure sections that are very lengthy because they are part of an overall section.

The application requests a copy of the table of contents of the policy and procedure manual. This includes dates each policy was last updated. In addition, entire copies of several other sections are requested. Please see Attachment 2 for a list of those sections. Hard copies of all requested documents must be provided in each of the seven copies of your submitted application.

32) At the Bidder's Conference, we were told that copies of 9 policies needed to accompany the application. On pages 11and 12 of the RFA application, it indicates for a total of 14 policies to be submitted. Which is accurate?

A total of 14 policies is required. Refer to Attachment 2: Required Documentation Checklists for a summary.

33) What specifically is meant by administrative policies and procedures referring to records management (Section E. 6. c.) and internal controls (Section E. 6. e.)?

For Records Management, the documented process that describes the efficient and systematic control of the creation, receipt, maintenance, use and disposition of records, including the processes for capturing and maintaining evidence of and information about business activities and transactions in the form of records.

For Internal Controls, the documented process that describes procedures set up to protect assets, ensure reliable accounting reports, promote efficiency, and encourage adherence to company policies.

34) Do you anticipate any changes in income level eligibility (above 185% of FPL) in the near future?

We do not expect any changes to the income eligibility requirements for the WIC program.

35) What constitutes an award, Newspaper articles?

If you are referring to the Grants Management Section G. Of the WIC Local Agency Application, we are requesting information on up to 5 government issued grants. Newspaper articles do not qualify.

36) Government agencies do not have Charities Registration; how does a government agency respond to the RFA in this regard?

Indicate they are a government agency and are exempt from having a Charities Registration.

37) Can we apply to provide medical and optical services to your members?

This Request for Applications (RFA) will qualify sponsors agencies to provide WIC, Vendor Management and Commodity Supplemental Food Program services. Medical and optical services are not provided by the WIC program.

WIC Program - Miscellaneous

38) How can there be an expectation that the WIC Director be on-site when clearly the expectation is multiple sites located in high need areas?

The WIC Director should be permanently located at the main or permanent site. If there are multiple WIC clinic sites, the program may employ site managers to provide day to day oversight of the other clinics. However, the WIC Director is responsible for all clinic sites and program operations.

39) Kivu Village Health Project is the local development agency in DR Congo. KVHP's work in Africa includes programs with partner organizations in the central Africa & Great Lakes region to combat poverty and to build a strong and dynamic civil society. We would like to know if it's possible for us to apply for the grants from the New York State Department of Health and how can we apply.

Nonprofit health and human service agencies that can provide WIC services in New York State may apply. Refer the RFA for details on how to apply and deadlines for submission.

40) Where can I find the qualifications of the Program Administrator at the Agency level?

If you are referring to qualifications for a WIC Site Director, there are no specific qualifications for this position. The agency should consider individuals for this position that are capable of managing all aspects of the operation of the WIC local agency. Please see below for a description of duties for a typical WIC Program Director. Sections 1460 – 1461 of the NYS WIC Program Manual detail qualifications needed for nutrition support staff, CPAs, Breastfeeding Coordinators, and Peer Counselor Coordinators. The WIC Program Manual is available for viewing at the Applicant's Library.

WIC Program Director: This is the local agency's highest management and policy making position. Major functions of this position include:

- **Policy Making:** Advises and collaborates with the sponsoring agency and New York State Department of Health Division of Nutrition staff, who have a significant impact on the mission, projects and policies of the local agencies; ensures the development of local agency's policies and procedures manual; participates in developing, implementing, and monitoring WIC standards of care and the quality assurance system used within the local agency.
- **Planning/Evaluation:** Facilitates the local agency's strategic and operational planning, identifying priority population groups, and services; assesses WIC-related issues, including caseload targets, and available resources to determine present and forecast future local agency needs.
- **Fiscal Control:** Prepares, justifies, and manages the local agency budget.
- **Management:** Serves as a member of the sponsoring agency's management team; advises needs; utilizes data to document, monitor, and evaluate local agency services, costs, and outcomes to justify budget requests; submits reports; validates that a minimum of 16.7% of the local agency's Nutrition Services and Administration (NSA) funds are expended for breastfeeding promotion and support; ensures that a local agency Nutrition Services Plan is submitted annually.
- **Supervision:** Establishes and defines local agency personnel policies; determines lines of authority and areas of responsibility, and has line authority over professional and select support personnel for the local agency.

It is recommended that this position be able to function as a Competent Professional Authority. Management experience in health or human service delivery is also recommended.

WIC Program - Miscellaneous

41) Do you currently know if any local agencies are planning to discontinue operating WIC ? If so can that information be shared ?

That information is not known. If an agency would like to apply for a planning area, they should do so.

42) Does Section IV, H #5, pg 14 of 28, Integrity of data in IT systems refer to WICSIS or sponsoring agency only?

In Section IV- H of Attachment 3 regarding Information Technology, agency is referring to the sponsoring agency.

43) In the case of a County Health Department that holds the contract for WIC and subcontracts to a WIC agency; should the RFA be prepared with answers to "sponsor agency" questions from the perspective of the County Health Department, or the subcontractor (WIC agency), or a combination of both entities?

All answers provided should be specific to the Sponsoring Agency. However applicants should consider any WIC experience when developing the response to this RFA. All subcontracts are subject to prior DOH approval.

44) It is my understanding that WIC applicants that look to combine resources within other WIC programs are looked upon favorably when it comes to the RFA. Would it be beneficial to combine coordinators with a neighboring, rural county?

It is preferred that agencies apply to serve more than one planning area to provide economies of scale through shared administrative costs and greater customer service through flexible staffing thus increasing access for WIC applicants.

45) After reviewing the last RFA that was submitted as Monroe County for the applicant agency , is this correct or should it read Monroe County Health Department?

Monroe County Health Department

46) Who is the issuing agency for vendor checks?

The NYS Department of Health is the issuing agency for WIC checks which are redeemed at NYS WIC-authorized vendors (food stores and pharmacies). Each WIC Local Agency prints Food Instruments (checks) for certified participants by means of a centralized database application managed by the NYS Department of Health. WIC vendors receive payment for WIC checks redeemed by participants at their stores through the WIC banking contractor (currently KeyBank, N.A).

47) What is Deborah McIntosh's contact info if possible, phone #, etc. beyond WICRFA email ?

All RFA related contact should be submitted to the wicrfa@health.state.ny.us address or in writing to the address noted below:

Deborah McIntosh
Public Health Nutritionist 2
Bureau of Supplemental Food Programs
Division of Nutrition
Riverview Center
150 Broadway-6th Floor West
Albany, NY 12204-2719

For non-RFA contact, the Bureau of Supplemental Food Programs phone number (518-402-7093) may be used.

48) If a contract is awarded how much time will be given to the WIC agency to firm up everything(i.e. hiring staff, setting up space, etc)?

Applicants should assume that all contracts awarded as a result of this RFA will have an October 1, 2009 effective date.

WIC Program - Miscellaneous

49) RFA estimate summer timeline – will we learn early enough to let staff know their future?

What is the difference between Community Planning Boards and Planning Areas?

It is DOH's intention to make award announcements as soon as they are available. If necessary, site specific transition plans will be developed for those current contractors not receiving new awards.

WIC Program Planning Areas in Upstate NY are determined by county. WIC Program Planning Areas in metropolitan New York typically include several neighborhoods and are displayed on the maps contained in Attachment 10.

Community Planning Boards are not related to this RFA.

50) If we plan to discontinue WIC Services in a given planning area should we identify another agency in the event they want to bid?

Current contractors choosing not to reapply should let other potential providers in their communities know so that other interested eligible can consider applying.

51) Our agency is considering a possible collaborative or consortium proposal (a group of current grantees)

a) would the state permit a consortium model?

b) Are there any constraints as to how a consortium might be structured (e.g. could there be subcontracts from the primary contract, and could partners maintain separate personnel and purchasing systems?)

c) If a consortium or collaborative proposal is allowed, in the proposal format, would the applicants complete separate components with data specific to each collaborating partner (e.g. mission and vision statements, policies, board information, salary/fringe overhead information, funding history, etc) or would the state want only a single partner's information?

(Note: it would not be in our interest for a single organization to directly hire all the staff required to serve all the clients of the entire consortium/collaborative – we are considering a consortium not a takeover).

d) In a consortium, must a program Director be at every site? or may there be single Director? Alternative WIC staff might be at other sites.

In respective order:

- a) Yes.
 - b) There are no constraints, only one application should be submitted by the organization who will act as the sponsor agency.
 - c) Information provided in the application should pertain to the sponsoring agency and describe how WIC functions will be provided.
 - d) Under the current program model there is one WIC Program Director per contract. Site Managers may be established for multiple sites depending on caseload and size. All subcontracts are subject to prior DOH approval.
-

52) Could we subcontract for certain personnel services (e.g. Breastfeeding peer counseling) rather than providing directly?

Yes. All subcontracts are subject to prior DOH approval.

53) Should the response to questions fit within the space that is provided?

Yes. When completed electronically the space will expand to accommodate all text entered.

54) Re: transition requirements – What are the timeframes for the transitions?

Transition plans are developed by the DOH in concert with local agencies to provide continuous service to participants. Timeframes vary depending on location and caseload and can take up to 9 months.

WIC Program - Miscellaneous

55) Can Special Formula Food Instruments be used for concentrated formula - there is no way we can print manual checks at this time?

The purpose of the Question and Answer process is to provide applicants with information necessary to prepare proposals in accordance with the RFA requirements. This question is not pertinent to this RFA. Instead, it reflects a question about program policy which needs to be addressed through an alternate mechanism to give a complete response.

It is suggested that the potential applicant (a current WIC local agency representative) that posed this question during the bidders' conference contact their state regional office representative for guidance on the issuance of SFFI and manual checks.

56) What criteria are you looking at when you mention "improve access" (re: WIC Preferred Qualifications)?

Items such as alternative hours of operation, appropriate site locations, staff that speak multiple languages, etc..

57) Related to preferences, are there already a predetermined number of preferences 1, 2, 3 etc...?

The RFA states that there is a priority system for the selection of agencies. There are no predetermined number of awards designated for each of the categories of priority.

58) Is having a policy and procedure for data integrity mandatory?

No.

59) Please define data integrity, accuracy, security?

Quality assurance activities that ensure data is entered correctly and is safeguarded against unauthorized use.

60) Our agency shares a NYC zip code/service area with another agency with which we collaborate and work together on local coalitions. We are completely independent but have preliminarily discussed collaborating on this RFA to potentially increase the probability of both agencies continuing to serve our shared, high need community. Is subcontracting allowed? Any other insights are also appreciated!

Yes, subcontracting is allowed. All subcontract agreements are subject to prior DOH approval. A lead sponsoring agency should be designated to act as the potential WIC contractor.

61) Our agency does not have IT staff - we use a contracted IT agency. Is this acceptable?

Does staff training have to be internal or can it be done through other sources?

Does a consulting contract suffice for IT staff?

Can training be external?

As a general rule, the WIC Program does not support IT personnel on the contract. This is because all WICSIS computer equipment is supplied and administered by the State. Only authorized DOH personnel may install/upgrade/troubleshoot WICSIS equipment. Specific WIC training is provided by the State's contracted WIC training center. Any training conducted by the sponsor may be provided by other sources.

62) Who reads the RFA responses? - Do they know about the program?

Applications will be evaluated by Division of Nutrition staff. All evaluators are familiar with the WIC Program.

63) Please define automated?

If this is a question related to the automatic generation of WIC Food Instruments, it would mean that Food Instruments are generated on site upon certification using WICSIS supplied equipment.

WIC Program - Miscellaneous

64) Is a contract with a Medicaid Managed HMO acceptable?

As long as the agency is a non-profit health agency, including local health departments, or a human service organization it may apply to become a WIC Local Agency.

65) The RFA states that responses must be prepared electronically (not handwritten). If an application is submitted on a CD with two original signature pages attached, will it be rejected or will it be accepted?

Applications submitted must be printed copies, CDs will not be accepted.

66) Regarding the Applicant conferences, when and where will they be held?

Multiple Applicant conferences were held to provide clarification on the functions of the WIC Program, the WIC VMAs, the CSFP, and the Application process. Attendance is not mandatory, but is recommended. In order to guarantee a seat at a conference, submit a letter of interest by the date listed on the cover page of this document, specify the location preferred. Conferences will be held in: Saratoga Springs Syracuse Cheektowaga New York City Upon receipt of the letter of interest, notification will be sent advising of the location of the conference. A maximum number of two representatives from each prospective applicant organization will be permitted to attend one applicant conference. Information on the dates and times of the Applicant conferences will also be posted on the NYS DOH website <http://www.nyhealth.gov/funding> . Failure to attend the applicant conference will not preclude the submission of an Application.

67) Is there information regarding the Feb. 11 Applicant Conference in Syracuse, location, start and end time, etc.?

Please refer to Pages 14 and 15 of the RFA

68) How can I register for the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) and Commodity Supplemental Food Program (CSFP) Applicant conferences?

- the one slated for February 19 & 20, 2009, New York City

Refer to pages 14 and 15 of the RFA

69) Can we e-mail or FAX our Letter of Interest?

We can accept a letter of interest via email to this address: wicrfa@health.state.ny.us.

70) I would like to be informed of any future updates regarding the RFA; can you tell me how to sign up for this?

Refer to page 13, of the RFA for information on how to be informed of any future updates regarding the RFA.

71) I am having difficulty completing Attachment 3, p. 19 of 28. I can't change information on that page or add zip codes. Is there a copy of the Attachment 3 just for data entry?

The form is designed to automatically create a "WIC Site Scheduling & Space" page for each row completed in the Table in Section V. Program Activities A. "WIC Local Agency Sites, Caseload Capacity and Access" page. This table is originally found on page 17 of Attachment 3, but depending on how long your answers were, the page numbers might be different. Information entered in this table is automatically populated to "WIC Site Scheduling & Space" forms that are created by this information entry. For instance adding five rows of information to the Table in Section V. Program Activities A. "WIC Local Agency Sites, Caseload Capacity and Access" page will create five copies of the "WIC Site Scheduling & Space" form. When you fill out a row on the Table in Section V. A It will: Add a separate text box for each unique planning area in Section V A Questions 1 and 3 Add a separate text box for each site (with Site Name heading) for Section V. A Question 2 Add an additional Site Schedule page in Section V. B for each Site listed in the table Add a table for each site in Sections V. C and Section V. H

WIC Program - Miscellaneous

72) Can RFA Technical question be handled by the Help Desk?

Submit all questions via email to wicrfa@health.state.ny.us, or in writing to the address below: Deborah McIntosh, Public Health Nutritionist 2 Bureau of Supplemental Food Programs Division of Nutrition New York State Department of Health Riverview Center 150 Broadway, 6th Floor West Albany, NY 12204-2719

73) What is the RFA? Is it for a WIC office or something special for us as a social services agency?

Refer to pages 3 through 6 of the RFA document.

74) What are the basic qualifications needed to run a WIC program/agency?

Refer to page 4 of the RFA document.

75) We are currently a WIC Site, is this just an application for new sites or is it also a re-application for existing programs?

Refer to page 3 of the RFA document.

76) Would you please advise if you must be a licensed WIC agency in order to qualify for this RFA? Or is this RFA for prospective agencies as well?

Refer to page 3 of the RFA document.

77) I have received a notice for participation in the Supplemental Nutritional Program for WIC. I would like to get more information on this and have a better understanding of what this Program is, where do I find this information?

Refer to pages 3 through 5 of the RFA document.

78) What is involved in participation?

Refer to pages 7 through 9 of the RFA document.

79) I am a prospective agency looking to operate a facility in the county of Queens, New York. Is there any experience the agency must have in terms of being eligible to operate a WIC Facility?

The sponsor agency must be a nonprofit health agency, including local health departments, or a human service organization. Refer to page 20 of the RFA for executive summary guidelines.

80) Could you send us information on how to apply for and be approved to be a WIC local agency contractor?

The Request for Applications for the Special Supplemental Nutrition Program for Women, Infants and Children and Commodity Supplemental Food Program is now available on the New York State Department of Health website: <http://www.nyhealth.gov/funding> . You may request a compact disc (CD) of the RFA by writing to wicrfa@health.state.ny.us . Submit any questions to the email address.

81) Regarding the Priority consideration list, the priorities say agency has the ability to ... not the agency will; please explain.

The priority system stated on page 5 of the RFA is correct.

The definitions provided in Attachment 3: WIC Local Agency Application page 7 of 28 are worded incorrectly. For second through fifth priorities, the wording should state "A health or human service agency that will ..."

Please use the definitions provided on page 5 of the RFA as the official definitions for the priority system.

WIC Program - Miscellaneous

82) Can the Attachments required for the RFA Application be submitted on a compact disc or do hard copies need to be sent?

Applications submitted must be printed copies, CDs will not be accepted.

83) Please give guidance on the page order for attachments; do we put attachments directly following the page that requests them or all in one appendix at the end? E.g. pg 12 of 28 of WIC LA Attachment 3 asks for copies of financial statements, etc.

The completed application should have attachments following at the end. Attachments should be referenced in the application.

84) Where can we find the answers to questions we are submitting?

Pages 12 and 13 of the RFA document outline the question and answer phase of the procurement.

85) The RFA requires two signed copies, which documents need to have an original signature? I assume the cover page does, but what about other forms, letters, etc ?

The 2 original signed versions of the application must include an original signature on the cover page. All additional copies can be photocopied.

86) For the Statement of Need, is it okay to answer the Who, What, Where, When and How questions in a bulleted format? (Application, page 6)

The statement of need should identify the points listed in the RFA, if an organization feels they can adequately identify those points in a bulleted format, they may do so.

87) Please explain the format to use for the Statement of Need; the who, what, where, when, and how (Application #3, page 6).

The format used to answer the statement of need should be the best to communicate an applicant's response. All aspects of the questions should be addressed.

88) What are the 4 sections of the RFA as referred to on pg 5 of 28

The four categories are outlined on page 20 of the RFA. Statement of Need, Applicant Organization, Program Activities and Budget Requirements.

89) Is it realistic to expect monitoring and evaluation measures with organizations that we have informal relationships with as described in Section C. Sponsor Agency Referral Services: "an unwritten understanding or arrangement between the Sponsor Agency and a service provider to share information pertaining to available service(s) with individuals who could benefit from receiving the service(s)."

To the extent possible with informal relationships monitoring and evaluation should be measured.

90) Is the County Executive appropriate to satisfy the letter of support from the Sponsoring Agency's governing body? (Section D. Sponsoring Agency)

Yes

91) How many Letters of support are required for applicants proposing to serve multiple counties?

The RFA is requesting a letter of support from the Sponsoring Agency's Governing Body and a letter of support from a community provider that would have a direct relationship with the WIC program (and CSFP if applicable).

92) Is the requirement *one* letter of support from a community provider? (Attachment 3, page 10 of the 2009 WIC RFA) The 2002 WIC RFA required *three* letters of support from a community provider.

Yes. Please refer to page 10 of the 2009 RFA.

WIC Program - Miscellaneous

93) The RFA Application asks for a "letter of support from a community provider" (i.e. local pediatric provider group, PCAP) that would have a direct relationship with the WIC program..." (page 10 of 28). Will we be penalized if we submit more than one letter of support? Likewise if we list more than 5 community resources in section J (p. 27)?

The RFA requests one letter of support. If an applicant chooses to submit more than one, only one will be evaluated.

94) How many Letters of Support need to be submitted with the RFA application?

Attachment 3: WIC Local Agency Application Sections I-V

Applicants need to provide the following:

- A letter of support from the Sponsoring Agency's governing body (i.e., Board of Directors, local Legislature, etc.). The letter should affirm the Sponsor's commitment to ensure:
 - compliance with all program requirements;
 - fiscal integrity and accountability of WIC Program funds (WIC VMA and CSFP funds, if applicable); and
 - in-kind support of the WIC Program (WIC VMA and CSFP, if applicable).
- A letter of support from a community provider (i.e., local pediatric provider group, PCAP, etc.) that would have a direct relationship with WIC Program (and CSFP, if applicable) This letter should reflect the endorser's opinion of the Applicant agency's experience and commitment to the target population, and ability to operate a quality WIC Program (and CSFP, if applicable).

Note: Please include these letters in your Application directly following this page.

95) Are you penalized if less than one letter of support is submitted? Should Support letters be limited to two required by the application? Do you want one letter of support from a community provider?

The RFA asks for a letter of support from the sponsoring agency's governing body and a letter of support from a community provider that would have a direct relationship with WIC (and CSFP, if applicable). Additional letters of support will not be evaluated.

96) For the Sponsor agency and community endorsement requirement, is it really one letter or will more enhance application? If in multiservice areas are letters for each county appropriate?

The RFA asks for a letter of support from the sponsoring agency's governing body and a letter of support from a community provider. Additional letters of support will not be evaluated.

97) Do Letters of support need to have original signatures ?

No.

98) Must we complete a Vendor Responsibility Questionnaire as detailed in the RFA, Section F, Fiscal Accountability # 5, pg 12 of 28 even if we are not applying to be a WIC Vendor Mgmt Agency?

Yes, the Vendor Responsibility Attestation (Attachment 6) must be completed for all applications (WIC, VMA, CSFP). The Vendor Responsibility Questionnaire must be completed by appropriate agencies.

99) As a unit of local government, are we responsible for completing "Vendor Responsibility Questionnaire?" We have not had to do so in the past. (Section F. Fiscal Accountability, 5)

County Governments do not need to complete the Vendor Responsibility Questionnaire, however, they must still complete Attachment 6 "Vendor Responsibility Attestation" by checking the appropriate box and signing the form.

WIC Program - Miscellaneous

100) If a sponsoring agency is a "government entity" (i.e.: County Health Dept) per the Attestation, is it true that a Questionnaire is not required? (box #3)

Yes.

101) If Vendor Responsibility (pg 12) is on file for another grant such as (EWPH), does it need to be filed again for WIC?

If the Vendor Responsibility Questionnaire (VRQ) was completed online at OSC's website within 6 months of the application due date then it is considered current and can be used. Please check the appropriate box in Attachment 6 (Vendor Responsibility Attestation). A hard copy of a current, manually-completed VRQ (completed within 6 months of application due date) can be submitted with the application so long as no changes have occurred since the date the form was completed. If changes have occurred, a new VRQ is required.

102) Please clarify the difference between the Vendor Responsibility Questionnaire, and the "Vendor Responsibility Attestation."

The Vendor Responsibility Questionnaire is a series of questions and required documentation related to an organization.

The Vendor Responsibility Attestation certifies the method in which the Vendor Responsibility Questionnaire has been completed (or exempt status is noted).

103) For a government sponsored agency, what is expected for a "Certificate of Incorporation"?

Government Agencies are not required to have a Certificate of Incorporation.

104) Please define New York State Department of State Registration.

All non-profit organizations are required to register with the NYS Department of State as a charitable organization and to obtain a charity registration number. However, some religious organizations are exempted from these requirements. The Department of State will acknowledge this exemption with a letter. This letter is required as proof of exemption. Department of State registration does not apply to Government agencies (municipalities).

105) If an agency is currently registered as a corporation must they change their status to a not for profit organization/corporation?

Refer to pages 4 and 5 of the RFA document.

106) In the area of Grants Management there is request to list up to 5 grants: "which are targeted to provide services to pregnant, breastfeeding, and postpartum women, infants and children under 5, excluding WIC grants." Is the list to include only grants that target all those groups in one comprehensive grant or can one grant target just one group such as pregnant women or infants and children? (Section G. Grants Management)

The Grant can target just one group such as pregnant women or infants and children, or a combination of the groups.

107) For Section G, Grants Management, pg 13. - Head Start grant is largest, is received yearly in different amounts. List once or 5 times (for different years)?

The same grant should only be listed once.

108) For Section G, Grants Management do we include or exclude HLG (Healthy Lifestyle Grant)? List all grants for our agency or limit it ?

No, Healthy Lifestyles can not be included in the grants management section. Grants listed should be unrelated to the WIC contract. The application requests up to five grants that serve the targeted population specified on page 13 of 28 of attachment 3 (WIC Local Agency Application Sections I-V)

WIC Program - Miscellaneous

109) Section G, Grants Management, pg 13 asks for information about five grants that are targeted to provide services to pregnant, breastfeeding, and postpartum women, infants, and children under 5. We have two programs that specifically target that population. We have other programs (such as transitional housing, homeless intervention, emergency food pantries, weatherization, Wheels to Work, TASA, etc.) that serve a broader population as well as the target population above. Some of the more broad-based programs have breastfeeding, and postpartum women, infants, and children under 5 as a high priority population but do not exclusively serve this population. Should we include information about the grant programs that have the target population as a priority but are not limited to that population (i.e., also serving elderly, low-income families with other challenges, etc.) or include only those grants that exclusively target breastfeeding, and postpartum women, infants, and children under 5?

Only include those grants that target services to pregnant, breastfeeding and postpartum women, infants, and children under 5.

110) Is there a website, or other means of obtaining a list of changes to agreement terms of the current contract and the new RFA terms?

Refer to Attachment 13 - Standard Grant Contract of the RFA document for information on the terms of the contract for the RFA.

111) For WIC and WIC VMA applications, can applications be hand delivered or must they be received via mail?

Yes. Applications can be hand delivered. It is the responsibility of the applicant to ensure that applications are received in the mailroom by the date and time specified in the RFA.

112) Where is the Mail Room?

Division of Nutrition
Riverview Center
150 Broadway - 6th Floor West
Albany, NY 12204-2719

113) When, specifically, will awards be announced?

Awards will be announced after the evaluation period and approval from DOH. At this time we anticipate announcements to come in the Summer 2009. We can not be more specific than that.

114) Can you please provide the website where the application information may be obtained

<http://www.nyhealth.gov/funding>

115) If we are submitting a proposal for a merged entity – should there be multiple tables of contents of multiple sponsoring agencies included?

One lead agency should be designated and all responses should be addressed to the lead agency as the responsible entity.

116) As a Health and Hospital Corporation (HHC) facility, should we submit our RFA, as a network or a global HHC RFA?

This is the decision of the applicant to create the strongest application for consideration.

WIC Program - Miscellaneous

117) Although not in our handouts, I think I saw something about preparing the RFA electronically, even though we cannot submit it as such does this mean we cannot type it on a typewriter and make copies?

The RFA can not be hand written. Some pages of the application are designed not to print if there is no information is entered on the page therefore, we strongly recommend completing the application on a computer.

118) Can an applicant submit the online vendor responsibility questionnaire prior to submitting the WIC and VMA application?

The online Vendor Responsibility Questionnaire is valid for 6 months from the application due date. The applicant will need to check the appropriate box in Attachment 6 (Vendor Responsibility Attestation).

119) WIC Local Agency, Section IV, Administrative Requirements, Page 17, Subsection J. Vendor Responsibility Questionnaire:

The local Health Department would like to partner with the local Cornell Cooperative Extension (CCE) for the WIC Local Agency. Is a county Cornell Cooperative Extension considered a governmental organization? If not, does the CCE have to complete the questionnaire since the lead agency is a governmental agency (County Health Department)?

A lead sponsoring agency needs to be identified in the application. Municipalities and Cornell Cooperative Extensions are both exempt from Vendor Responsibility. The appropriate box still must be checked on the Vendor Responsibility Attestation (Attachment 6).

120) WIC Local Agency, Section IV, Administrative Requirements, Page 18, Subsection J. Vendor Responsibility Questionnaire

If the lead agency (Health Department) is planning to partner with the CCE does the lead agency and/or CCE have to submit the following:

- **Proof of financial stability in the form of audited financial statements**
- **Evidence of NYS Department of State Registration**
- **Proof of NYS Charities Registration**
- **Copy of certificate of Article of Incorporation, along with any and all amendments thereto; Partnership Agreement; or other relevant business organizational documents, as applicable.**

A lead sponsoring agency needs to be identified in the application. All requested documents to be submitted in the application should be from the lead sponsoring agency. In this arrangement, Cornell Cooperative Extension would be considered a subcontractor and subject to the approval of DOH.

121) WIC Local Agency, Attachment 7: WIC Local Agency Workplan.

May we submit the workplan in a "Logic Model" format, such as a table similar to tobacco and cancer services grants?

No. One standard workplan is incorporated into all WIC Local Agency contracts as Appendix D. This workplan is Attachment 7 of the RFA. WIC sponsor agencies must comply with all deliverables in the workplan.

122) February 20th is listed as last day questions due. Will applicants still be able to ask questions concerning data entry issues/problems ?

Yes

123) WIC Program – From Attachment 2 required Documentation checklists: Are copies of all items on the checklist to be included with the RFA Application?

Yes.

WIC Program - Miscellaneous

124) Are 2 copies of the letters of support required to be originals to go with the 2 RFA originals or could one be a copy?

Copies of Letters of Support are sufficient. Letters of support that are attached to you original copies of your application do not have to have original signatures.

125) WIC Program – how many letter of support do we need?

The RFA asks for a letter of support from the sponsoring agency's governing body and a letter of support from a community provider that would have a direct relationship with WIC (and CSFP, if applicable). Additional letters of support will not be evaluated.

126) Is the transition workplan required as part of the RFA?

No. Transition activities are identified as a deliverable in the standard workplan appendix of the contract. In the event that it is necessary to transition services from a WIC Local Agency contract, DOH will work with the agency to develop a transition plan specific for the agency.

127) Can graphs and tables be submitted in the RFA as attachments?

Yes.

128) How is question 3 (under section III. Statement of Need in Attachment 3: WIC Local Agency Application)(page 6), different from question 1 (under letter K. Outreach Activities in Attachment 3: WIC Local Agency Application)(page 28)?

Question 3 (under Section III. Statement of Need in Attachment 3: WIC Local Agency Application)(page 6) requests strategies to meet the unmet need.

Question 1 (under letter K. Outreach Activities in Attachment 3: WIC Local Agency Application)(page 28) requests plans to identify and implement outreach activities to promote the WIC Program which should address more than unmet need.

WIC Program - Nutrition Services

1) The 2002 WIC RFA , Section re: Referral Network, required the completion of a "Services Coordination Form" for those agencies in which an informal referral system existed. For the 2009 WIC RFA (attachment 3, page 9 & 25) I see copies of "Formal" agreements are requested, but I do not see a requirement for "Informal" agreements. I am correct?

Yes, this procurement requires that copies of formal referral agreements be included in the application.

2) What is EPC?

The Enhanced Peer Counselor (EPC) Program is a USDA recognized intervention and evidence-based strategy that represents cost effective, individually tailored, and culturally competent ways to promote and support breastfeeding for women of varying socioeconomic backgrounds. Local agencies are funded to manage this program, and hire and train peer counselors. Peer counselors are mothers in the community with personal breastfeeding experience who provide information and support to other mothers and are paid for their service. Peer counselors act as mentors or friends, giving new mothers confidence and support throughout the pregnancy and while breastfeeding utilizing counseling skills acquired during training.

3) Is a member of International Board of Certified Lactation Consultant (IBCLC) required at each agency?

No, a Breastfeeding Coordinator must attend a 40-hour lactation counselor course within the first year of appointment or hold the IBCLC credential.

WIC Program - Nutrition Services

4) I was reviewing the Special Supplemental Nutrition Program for Women, Infants and Children (WIC) and Commodity Supplemental Food Program (CSFP). Does this include specialty formulas as well?

Yes, depending on participant need. Please see WIC Program Manual Section 1253-C.

5) If sponsoring agency provides services but not onsite at the WIC clinic can we note that services are provided at adjacent sites (Attachment 3, pg 25 of 28)

The application should identify only those services that would be offered at WIC clinic locations.

6) Should all formal referral agreements have an MOU?

Formal referral agreements do not have to be Memorandums of Understanding (MOU).

7) For Referral Services (pg 9 of 28), do we need to document informal referrals if so, how? (i.e. in the past "service coordinator forms")

As noted in Attachment 3 page 9, the bidder is required to provide only copies of formal agreements.

8) For Section J, Utilizing Community Resources (pg 27 of 28), is my written description enough or do I need to document/verify collaborations via letter etc? Also can we list 75 resources?

This section asks for a description of how the agency will utilize informal relationships with other community organizations to promote the benefits of the WIC Program in the community. Documentation has not been requested.

9) For Hematology requirements, can you accept blood work done by referral within 60 days ?

Yes. Please see WIC Program Manual Section 1183-B for specific requirements.

10) Is lead testing required with hematology?

No, lead testing is not required with hematology.

11) What is MOU ?

A MOU is an abbreviation for Memorandum of Understanding. A MOU is an agreement between organizations defining the basic terms under which they agree to work together on a particular project. It defines the roles and responsibilities of each organization in relation to the other and provides a framework to enable the process/project to begin.

12) Will DOH provide hematology training for WIC staff?

Yes, training on hematology policy and procedures will be provided.

13) Does an agency have to perform Hematology testing on site?

Current blood work is required for program certification. If a participant does not come with documentation of current blood work the LA should be able to provide/obtain these services during the appointment in order to meet certification requirements. This should not be a barrier to participation in the WIC program and must be at no cost to the participant.

WIC Program - Nutrition Services

14) On page 17, Hematology testing, is it optional or mandatory at permanent or temporary sites or both?

Is this a new requirement that blood work must be performed on site?

This is mandatory at both permanent and temporary sites. Current blood work is required for program certification. If a participant does not come with documentation of current blood work the LA should be able to provide/obtain these services during the appointment in order to meet certification requirements. This should not be a barrier to participation in the WIC program and must be at no cost to the participant.

WIC Program - Sites/Schedules

1) Does a site/location need to meet ALL the criteria outlined on page 6 in order to be designated a permanent site?

The list of required WIC services is provided in Attachment 7, Section V-A

2) Knowing that WIC eligibles are certified at official clinic sites, can WIC eligibles certify at ad hoc locations such as kindergarten registration at a local school or at an immunization clinic at a Public Health Department?

3) While looking at different ways to meet the needs in our rural communities, we learned about a WIC program in Florida that uses a bus to provide a "site" in places that do not have good permanent site locations. Is purchase and upkeep of a bus/mobile WIC site an allowable expense? I found information about mobile CSFP units, but could not find anything about mobile WIC sites.

You may propose alternative service provisions in your application. All approved methods providing WIC services must meet all program guidelines as specified in the WIC Policies and Procedures manual.

4) Is the square footage of the site based upon enrollment?

5) Regarding space – Is there a ratio to determine adequate space for # of caseload? e.g. (# of sq' per # caseload)

6) What type of facility/space is required in order to run a WIC agency?

7) What is considered adequate space based on past history?

8) What is the recommended square footage per enrollment?

9) What are the specific space requirements? i.e. What is the minimum/maximum square footage required to operate a WIC local agency?

As a general rule, a WIC clinic should meet the same standards as for an outpatient clinic in a hospital or health center setting (i.e. square footage for waiting areas of approximately 1/2-1 square foot per client with established capacity size in consideration with the number of expected visits/month). A WIC agency must have space that provides for confidentiality in the following areas: nutrition counseling of WIC participants, review of a participant's income, and obtaining anthropometric and hematology data. The site must have a secure area to accommodate a computer server, equipment rack and associated computer network equipment. A private area for breastfeeding is also preferred. . It should be noted that space for the computer server and storage space for terminated records may not have a direct correlation to staffing ratio/caseload.

WIC Program - Sites/Schedules

10) For Attachment 3, Section B, WIC Site Scheduling and Space, pg 19, how do you enter information when a site operates different hours, on the same day, different weeks? Example: Wednesday site hours on 1st & 3rd weeks are 11:30-7:30 or 8:45-4:45 2nd, 4th & 5th weeks.

When a site operates different hours, on a specific day, based on the week of the month, please leave the start time, end time, weeks and months fields blank. Attach a chart immediately after Attachment 3, Section B, WIC Site Scheduling and Space, pg 19 that details the hours of operation for the specific site.

11) With regard to WIC permanent site operation time, can the 3 days per week be averaged on a monthly basis, such as 12 days per month?

Permanent WIC sites must provide clinical WIC services at least 3 days each week.

12) Has there always been a minimum number of participants at the temporary sites ?

The recommended minimum caseload for a temporary site is 150 participants. This recommendation considers the resources, including staff travel time, necessary for the operation of a temporary clinic.

13) We currently have temporary sites that serve less than 150 participants, is the intention for those sites to be eliminated or merged with other temp sites? What if the temporary site is in a rural area far from another site?

The State will work with successful applicants to evaluate current/proposed clinic locations. Several factors including cost, staffing, and need to provide services in areas where there are a high number of WIC eligibles will determine where clinics will be located.

14) If a temporary or permanent site case load falls below the minimum 150-400 respectively, what actions does the local agency have to follow, close site or combine sites?

Caseload at all temporary and permanent sites will be evaluated throughout the contract period. Regional representatives will review declining caseload with the local WIC agency to determine appropriate remedial actions.

15) If you are currently a WIC provider and were actively seeking an additional WIC site in an under served area should that info be included in the RFA?

We had made contact and were considering opening up a new site before we received word that no new sites would be approved.

All existing and /or new clinic sites the bidder intends to operate should be included in the RFA response.

16) If sponsoring agency has a site move planned, can I still put expenses in the proposed budget even though there is a moratorium on site moves right now?

The current moratorium on site moves does not affect proposed clinic sites in the RFA response. All existing and /or new sites the bidder intends to operate must be included. The bidder must be aware that all site costs are proposed, and approval of funding by the New York State WIC Program is not guaranteed nor implied.

17) Would renovation costs only be covered for new sites?

The RFA response should identify all proposed sites, existing and/or new, where WIC services will be provided, and the cost of providing services at those sites. The sponsoring agency should assume that any renovation costs will be their responsibility.

18) Is a portable phone ok in the server room?

A portable or cell phone is allowed in the server room for contacting the WIC Program Help Desk. However, a POTS (Plain Old Telephone) line must be installed near the network server to be used for remote computer diagnostic purposes.

WIC Program - Sites/Schedules

- 19) This year, our request for additional funds to meet the space requirement for one of my programs has been denied. We will include the funds in our application. However, if additional funds become available before the RFA is released, it will be helpful to move to a larger space.**

No additional funding for site changes in the current contract year are anticipated.

- 20) If an agency's temporary site has much less than 150 clients – is it preferable to not operate at that temp site each month or not at all and to serve more clients at the perm site?**

The State will work with successful applicants to evaluate current/proposed clinic locations. Several factors including cost, staffing, and need to provide services in areas where there is a high number of WIC eligibles will determine where clinics will be located.

- 21) Do we have to identify a specific clinic site within a planning area for this RFA submission?**

Yes.

- 22) How is it cost effective to go into another planning area?**

Are you expecting programs from one planning area to cross over into another area?

Would it not be more cost effective for some programs to expand within their own areas to meet the unmet need?

Please refer to our preferred qualifications on Page 6 of the Request for Applications.

- 23) How closely can WIC agencies be located to each other? Can they be one block apart if they are targeted to serve different cultural populations?**

Applicants should propose clinics in areas where there are high numbers of WIC eligibles.

- 24) Can there be more than one WIC provider in the same town?**

Yes.

- 25) If a site was in the process of changing from a temp site to a permanent site, should the costs associated with this be included in the RFA?**

The RFA response should identify all proposed sites, existing and/or new, where WIC services will be provided, and the cost of providing services at those sites. The sponsoring agency should assume that any renovation costs will be their responsibility.

- 26) As an existing LA ,operating three existing sites would like to expand with a new (fourth) site, does the 1,500 participant cap to a new agency apply?**

No, this does not apply to current WIC Sponsor Agencies.

- 27) The last question is not from the RFA but rather from the Bidder's library document, Site Development Guide, Page 7, WIC Clinic Development (New Sites), General, "...requires at least 8 months from DOH approval to clinic operation..."**

Does " DOH approval" mean from time of award notice or does it mean from time of grant start date of 10/01/09?

DOH will begin working on site development with agencies from the time of award notice. The actual timeframe for the development of a new site varies. The timeframe listed in the Site Development Guide is a guideline intended to allow for the review and analysis of a range of issues including, but not limited to, the time and resources needed for renovations, staffing, and equipment, and also outreach/publicity to potential participants. In the context of this procurement, DOH will work with agencies to get new sites up and running in a reasonable and practical timeframe.

WIC Program - Sites/Schedules

28) We have temporary sites that operate at different times on the same day of the week. How do I show this on the application (Section B WIC Site Scheduling and Space)? The form only allows one start time and one end time for each day of the week. For example, we have clinic in Geneva on the 1st, 2nd, 3rd and 4th Thursday of every month. On the 1st, 2nd and 3rd Thursdays we run clinic from 9:30-3:30, but on the 4th Thursday clinic runs from 1:00pm-7:30pm. Is there a way to show that on the form?

When a site operates different hours, on a specific day, based on the week of the month, hand write notes on the Section B Site Schedule page for the site.

29) If we are currently running clinics, and plan to continue with the same schedule, what should we document as the Start Date of Operations on that form? October 1, 2009?

Yes

30) Can you have a temporary site without having a permanent site?

No. At this time, all WIC agencies must have a permanent site in order to operate a temporary site. The participant data used at a temporary site must be downloaded from the computer server at a permanent site.

31) Section V-A – asks applicants to identify each of the proposed sites – it states that the application minimally specify the zip code if the address is not yet known. If the negotiations are still on-going, how will you determine whether this proposed site is feasible and how would you reflect the space cost in the budget section, if it's not yet known.

In this scenario, please enter as much detail as available and provide your best estimate for those details not yet finalized.

32) Can you please provide the Alternate Hours schedule for WIC clinics?

Please refer to RFA Attachment 7, WIC Local Agency Workplan, pages 4 and 5.

33) Can our agency apply for both a new permanent site and established sites within the same RFA? Since we have received notice regarding applications for new WIC sites are currently not being accepted, please guide us on the procedure necessary in order to apply for a new site. If we can not include the application for new site within the same RFA, what steps and timeframe are needed in order to apply?

The new site moratorium is restricted to the current contract period. An RFA is a new "starting point" for the program. You should propose a number of sites that is necessary to provide the services that are described in the application.

WIC Vendor Management Agency

Questions that relate to running a VMA

1) Since the VMA Director should not report directly to the WIC LA Director, who would you recommend they report to? Another WIC staff or SA staff?

The VMA Director should report to an individual in the sponsoring agency's organization that is familiar with WIC program activities but not directly involved in the day-to-day operations of the WIC local agency. In no instance would the VMA Director report directly to state agency staff.

WIC Vendor Management Agency

2) Does the VMA RFA require letters of support also?

No; the VMA application does not require separate letters of support. The Sponsor Agency must include letters of support as part of the required documentation for the WIC local agency application.

As a reminder, a Sponsor Agency that desires to operate a VMA must submit a WIC Program Application together with the WIC Vendor Management Agency Application in order to be considered. The Sponsor Agency must qualify and be selected as a WIC Program service provider in order to be selected as a WIC Vendor Management Agency.

3) If an organization applies for both WIC and VMA, how many original WIC Program applications should be submitted? Clarify instructions Pg 15 of the RFA.

Both applications require 2 original signed applications and 5 copies.

4) Since addressee is the same, is it OK to submit both WIC and VMA in the same package?

Yes applications can be submitted together. However, all copies should be easily distinguishable within the package(s) and clearly labeled.

5) You cannot save data on the VMA Budget Forms. Can this be corrected ASAP?

This glitch in the VMA Budget form has been corrected and the new forms can be found on at: <http://www.nyhealth.gov/funding>

6) If an existing vendor management is awarded a new contract and the existing organization chart has the VMA Director report to the WIC Director will the application be considered?

Yes; the application will be considered and this item in the application will be scored accordingly. However, if the VMA contract is awarded to an existing VMA that has such a reporting structure, NYS DOH staff will work with the sponsoring agency on establishing an alternative reporting structure based on the requirements of the RFA.

7) How does one access monthly Vendor List for updates?

The Vendor Lists are updated monthly; local agencies may access the list by selecting the Vendor subdirectory on the Common Drive. The subdirectory contains a statewide vendor list, as well as a separate vendor list for each vendor management agency.

8) Will you make available the training curriculum for the vendor program to applicants?

The training curriculum is currently being updated and is therefore not available to applicants at this time. However, applicants may review the Vendor Handbook which includes the required training topics included in the training curriculum. The Vendor Handbook is available in the Applicant's Library.

9) As a Bronx VMA applicant, are we responsible to provide services to ALL 1153 vendors or only a specific portion of that geographic location?

The applicant may not select a portion of any of the seven service areas identified in the RFA. The Sponsor Agency would be responsible for providing all required vendor management activities for all vendors in the service area.

10) WIC VMA, attachment 4: WIC Vendor Management Agency application, page 8 to 11:

For WIC Vendor Management Agency work plan items, can examples of various "computer spreadsheets/tracking logs" be submitted as attachments to the WIC VMA application?

Yes; examples may be submitted as attachments to the WIC VMA application.

WIC Vendor Management Agency

11) WIC VMA, attachment 4: WIC Vendor Management Agency application, pages 5 of 11:

For WIC VMA "executive summary" what type of summary is RFA asking for re: "Geographic Service area(s)? Just a listing of counties the VMA region would handle?

Yes; the Executive Summary relative to the geographic service areas only needs to state (or list) the Area(s) for which the applicant is applying.

12) WIC VMA, attachment 4: WIC Vendor Management Agency application, pages 5 of 11:

For WIC VMA "executive summary" clarify the meaning of "quantify"? Are you looking for statistical data?

The word "quantify" is a typographical error. The correct word should be "qualify". Therefore, no statistical information is being requested for the Executive Summary.

13) WIC VMA request for applications, pg. 26, section B, WIC Vendor Management Agency:

If the "executive summary" is not scored during the RFA review process, what is the importance of the "executive summary"?

The Executive Summary is a required component of the WIC Vendor Management Agency application. It is required because it provides the reviewer a general overview of the applicant's ability to operate a quality WIC VMA Program.

14) WIC VMA attachment 4: WIC Vendor Management Agency application, pg. 7 of 11:

Can the bidder include "statistical data" in answering the "experience" questions listed under "sponsor agency's ability to operate a WIC VMA program"?

It is required that the applicant provide a response in narrative format. Statistics should be included whenever applicable (including the number of years of experience).

15) WIC VMA, request for application, pg. 30, WIC Vendor Management Agency selection:

What is the "evaluation methodology" used in the selection process?

The evaluation methodology includes specific criteria that are included in an RFA Evaluation Plan. This plan and the specific criteria used by reviewers are not shared with applicants during the procurement process. Please see pages 6 and 7 of the RFA for preferred applicant qualifications, and pages 25 and 26 of the RFA for the value assigned to each section of the application.

WIC Vendor Management Agency

16) WIC VMA, attachment 4: WIC Vendor Management Agency application, pg. 10 of 11, D. Specific deliverables, vendor application processing 1:

Does NYSDOH have any data available for each VMA geographic region re: "Unique participant demographics, such as ethnic and religious factors"? Any data available by zip code and/or county?

Please see Attachment D of this document for the most recent data detailing ethnicity and race of participants served by WIC Local Agencies.

17) WIC VMA, WIC RFA attachment 8, WIC Vendor Management Agency work plan, pg. 10, personnel:

Can WIC VMA designate "two" full time WIC VMA staff persons to be trained and serve as assistant to the WIC VMA Director to handle program issues and serve as back up to the Director with authority to make decisions?

The WIC VMA may choose to designate more than one full-time vendor liaison to serve as backup to the WIC VMA Director. However, the recommended staffing levels as included in the WIC VMA Workplan (Attachment 8; pages 9-10) may not be increased to accommodate this option.

18) WIC VMA, attachment agency application, sections B,C, & D, pgs. 8,9,10 & 11:

Is there a limit on the "number of words/pages" for the answers to the questions of the WIC VMA application?

There is no limit on the number of words or pages for the applicant's responses to these sections of the application.

Attachment A - WIC Participation by County for January FFY 2009

Site	Address	City	Participation
Albany County			4,963
<i>Whitney M. Young, Jr. Health Center, Inc.</i>			
1	920 Lark Drive	Albany	2,045
2	22 Remsen Street	Cohoes	217
3	819 23rd Street	Watervliet	99
<i>Women's Health Center of Albany Medical College</i>			
1	220 Green Street	Albany	2,384
2	16 Hillcrest Drive	Ravena	49
3	1560 Central Avenue	Colonie	126
4	1728 Heldeburg Trail	Berne	43
Allegany County			1,288
<i>Allegany County Department of Health</i>			
1	3453-B Route 417 East	Wellsville	318
2	25 Park Circle	Angelica	21
4	460 Main Street	Bolivar	100
5	17 South St.	Cuba	124
6	3453-B Route 417 East	Wellsville	402
7	20 East Main Street	Fillmore	136
8	Route 244	Alfred Station	27
9	20 Pratt St.	Canaseraga	22
10	22 W. Main St.	Friendship	86
11	4 Chapel Street	Belfast	52

Site	Address	City	Participation
Bronx County			66,169
<i>Bronx Lebanon Hospital Center</i>			
1	21 East Mount Eden Avenue	Bronx	3,403
<i>Hunts Point Multi-Service Center</i>			
1	754 East 151st Street	Bronx	1,107
<i>Lincoln Medical and Mental Health Center (NYCHHC)</i>			
1	234 East 149th Street, 4th Fl.	Bronx	6,360
<i>Montefiore Medical Center</i>			
1	22 Westchester Square	Bronx	4,719
2	4782 Third Avenue	Bronx	3,094
3	305 East 161 Street	Bronx	2,144
<i>Morris Heights Health Center</i>			
1	85 W. Burnside Avenue	Bronx	3,892
2	25 East 183 Street	Bronx	2,651
<i>Morrisania Diagnostic and Treatment Center (NYCHHC)</i>			
1	1125 Grand Concourse	Bronx	365
2	1015 Ogden Avenue	Bronx	796
3	911 Longwood Avenue	Bronx	1,398
4	1225 Gerard Avenue	Bronx	4,506
<i>North Central Bronx Hospital (NYCHHC)</i>			
1	3424 Kossuth Avenue Room 3G-06	Bronx	3,981
2	1400 Pelham Parkway South	Bronx	3,574
<i>Public Health Solutions</i>			
3	517-519 East Tremont Avenue	Bronx	2,737
21	1826 Arthur Ave.	Bronx	154
<i>Segundo Ruiz Belvis Diagnostic and Treatment Center (NYCHHC)</i>			
1	545 East 142nd St	Bronx	2,619
<i>Sound Shore Medical Center</i>			
2	1600 E. 233rd Street	Bronx	2,638
3	3401-3405 White Plains Road	Bronx	3,187
<i>St. Barnabas Hospital</i>			
1	2021 Grand Concourse	Bronx	2,129
2	4487 Third Avenue	Bronx	2,833
3	260 East 188th Street & Valentine A	Bronx	2,875
<i>Urban Health Plan, Inc.</i>			
1	1070 Southern Boulevard	Bronx	5,007

Site	Address	City	Participation
Broome County			4,904
<i>Broome County Health Department</i>			
2	225 Front Street	Binghamton	3,681
3	731 Hooper Road	Endwell	157
4	Keibel Road	Whitney Point	186
5	44 Park Street	Port Crane	60
7	56 Chapel Street	Windsor	99
8	17 Naticoke Ave. & Union Street	Endicott	339
9	33-57 Harrison St.	Johnson City	305
<i>Delaware Opportunities Inc.</i>			
6	4th Street	Deposit	77
Cattaraugus County			2,078
<i>Cattaraugus County Health Department</i>			
1	1 Leo Moss Drive	Olean	1,194
2	82 Main Street	Delevan	271
3	111 South Street	Cattaraugus	79
4	41 South Main Street (Rte. 16)	Franklinville	116
5	303 Court St.	Little Valley	78
6	149 West Main Street	Gowanda	110
7	72 Main Street	Randolph	90
8	Iroquois Drive	Salamanca	140
Cayuga County			1,833
<i>Cayuga County Health Department</i>			
1	157 Genesee Street	Auburn	1,609
2	2604 E. Mechanic Street	Cato	119
3	18 Church Street	Moravia	105
Chautauqua County			3,631
<i>Chautauqua Opportunities, Inc.</i>			
1	10825 Bennett Road, Rt 60	Dunkirk	1,282
2	608 West Third Street	Jamestown	1,949
3	Elm & Marvin Streets	Mayville	33
4	10825 Bennett Road, Rte. 60	Dunkirk	17
5	58 South Portage Street	Westfield	95
6	Route 380	Stockton	19
7	Magnolia Road	Ashville	24
9	Park Place	Silver Creek	76
10		Ripley	42
11	107 Church Street	Sherman	46
12	North Center Street	Clymer	33
14	Main Street - Route 83	Cherry Creek	15

Site	Address	City	Participation
Chemung County			2,785
<i>Chemung County Health Department</i>			
1	103 Washington Street	Elmira	2,661
2	1034 West Broad St.	Horseheads	89
6	5369 Main St.	Chemung	35
Chenango County			1,668
<i>Opportunities for Chenango, Inc.</i>			
1	44 West Main Street	Norwich	1,265
2	28 N. Chenango Street	Greene	77
3	15 North Main Street	Bainbridge	40
4	13 Spring Street	Afton	92
5	133 County Road 13	So. Otselic	34
6	30 N. Main St.	New Berlin	63
7	5 Classic St.	Sherburne	97
Clinton County			1,923
<i>Clinton County Department of Public Health</i>			
1	133 Margaret Street	Plattsburgh	1,500
2	Rt. 22	Peru	51
4	3614 Miner Farm Rd., Route 191	Altona	121
5	571 Spellman Road	West Chazy	47
6	Elm Street	Champlain	105
8	Pleasant Street	Keeseville	44
10	38 Church Rd.	Cadyville	30
<i>Essex County Public Health</i>			
11	1699 Front Street	Keeseville	25
Columbia County			1,113
<i>Catholic Charities of Columbia & Greene Counties</i>			
1	431 East Allen Street	Hudson	902
2	Rte. 9	Valatie	83
3	8074 State Route 22	Copake Falls	53
4	RTE. 66	Chatham	75
Cortland County			1,394
<i>Cortland County Community Action Program, Inc.</i>			
1	32 N. Main Street	Cortland	1,292
2	2701 Lower Cincinnatus Road	Cincinnatus	48
4	1 East Main Street	Marathon	54

Site	Address	City	Participation
Delaware County			1,058
<i>Delaware Opportunities Inc.</i>			
1	35430 State Highway 10	Hamden	448
2	Page Avenue	Delhi	78
3	115 Main Street	Franklin	17
4	116 West Main St.	Hancock	56
5	11 Cornell Avenue	Hobart	86
7	Liberty Street	Sidney	117
8	45 Stockton Ave.	Walton	111
9	Church Street	Margaretville	108
10	281 Main Street	Davenport	37
Dutchess County			3,593
<i>Hudson River Healthcare, Inc.</i>			
1	29 N. Hamilton Street	Poughkeepsie	2,677
3	6 Henry Street	Beacon	714
8	3174 Route 220	Doverplanes	202
Erie County			18,135
<i>Catholic Charities of Buffalo</i>			
2	3200 Elmwood Avenue	Kenmore	1,245
<i>Erie County Department of Health</i>			
1	95 Franklin Street 2nd Floor	Buffalo	1,548
3	1500 Broadway	Buffalo	2,085
4	2121 Main Street	Buffalo	2,945
6	200 Cazenovia St.	Buffalo	2,259
7	155 Lawn Avenue	Buffalo	2,218
8	17 Long Avenue	Hamburg	38
10	609 Ridge Road	Lackawanna	370
11	606 Girard Avenue	East Aurora	263
12	85 Manitou	Depew	572
14	86 Franklin Street	Springville	217
15	286 Lafayette Ave.	Buffalo	649
16	3527 Harlem Road Suite 8	Buffalo	1,387
17	462 Grider Street	Buffalo	37
18	54 Madison Street	Blasdell	1,067
<i>Kaleida Health</i>			
1	1001 Humboldt Pkwy-Deaconess Ct	Buffalo	742
2	300 Niagara Street	Buffalo	455
6	461 Williams Street	Buffalo	11
<i>Oak Orchard Community Health Center</i>			
4	372 Bloomingdale Rd.	Akron	27

Site	Address	City	Participation
Essex County			772
<i>Essex County Public Health</i>			
1	132 Water Street	Elizabethtown	293
3	77 South Main Street	Port Henry	52
5	8 Cummins Road	Lake Placid	98
6	15 Leland Ave	Schroon Lake	80
7	Tarbell Hill Road	Moriah	42
8	1045 Wicker Street	Ticonderoga	162
10	Main Street	Crown Point	33
14	7 Community Circle	Wilmington	12
Franklin County			1,382
<i>Essex County Public Health</i>			
13	132 River Street	Saranac Lake	52
<i>North Country Children's Clinic</i>			
28	Main Street	St. Regis Falls	18
29	44 Catherine Street	Malone	825
30	Ivy Terrace. Boyer Ave.	Tupper Lake	96
31	14 Kiwassa Rd.	Saranac Lake	144
32	Sayles Road	Moira	44
<i>St. Regis Mohawk Services</i>			
1	412 State Route 37	Akwesasne	203
Fulton County			1,112
<i>Fulmont Community Action Agency, Inc.</i>			
4	39 Church St. 1st Floor	Gloversville	1,112
Genesee County			1,215
<i>Oak Orchard Community Health Center</i>			
1	304 East Main Street	Batavia	1,102
6	53 West Main Street	LeRoy	75
7	63 Allegheny Road	Corfu	38
Greene County			701
<i>Catholic Charities of Columbia & Greene Counties</i>			
6	Church Street	Cairo	73
7	82 Woodland Avenue	Catskill	540
8	Main Street	Prattsville	18
9	Mansion Street	Coxsackie	49
10	Route 81	Greenville	21

Site	Address	City	Participation
Hamilton County			78
<i>Hamilton County Public Health Nursing Service</i>			
1	White Birch Lane	Indian Lake	39
2	RTE 30	Wells	15
4	Route 8	Speculator	12
5	Rte. 28	Inlet	12
Herkimer County			1,404
<i>Planned Parenthood Mohawk Hudson</i>			
2	401 East German Street, Suite 101	Herkimer	1,076
4	21 North Helmer Avenue	Dolgeville	52
7	RTE. 29A	Salisbury Center	25
9	452 East Main Street	West Winfield	60
10	565 Albany Street	Little Falls	123
20	90 Morgan Street	Ilion	68
Jefferson County			4,392
<i>North Country Children's Clinic</i>			
1	238 Arsenal St.	Watertown	2,926
2	668 West End Avenue	Carthage	68
3	Mary Street	Clayton	198
4	County Route 46	Evans Mills	229
5	6 N. Main Street	Adams	192
6	Bldg. #P-10785 Po Valley Road	Fort Drum	584
13	61 High Street	West Carthage	77
35	600 South Washington Street	Carthage	53
36	30743 Rt. 3	Felts Mills	65

Site	Address	City	Participation
Kings County			111,772
<i>Bedford Stuyvesant Family Health Center</i>			
1	20 New York Ave	Brooklyn	3,629
<i>Brookdale Hospital and Medical Center</i>			
1	465 New Lots Avenue	Brooklyn	3,865
2	2554 Linden Blvd.	Brooklyn	193
<i>Brooklyn Hospital Center</i>			
1	485 Coney Island Avenue	Brooklyn	3,256
2	121 DeKalb Avenue	Brooklyn	4,567
3	1606 Fulton Street	Brooklyn	2,266
4	495 Empire Blvd.	Brooklyn	2,647
<i>Brownsville Community Development Corporation</i>			
1	408 Rockaway Avenue	Brooklyn	3,601
2	921 Hegeman	Brooklyn	323
<i>Caribbean Women's Health Association</i>			
1	3512 Church Avenue	Brooklyn	2,539
<i>Coney Island Hospital (NYCHHC)</i>			
1	2201 Neptune Avenue	Brooklyn	1,478
2	2601 Ocean Parkway	Brooklyn	2,883
<i>Cumberland Diagnostic and Treatment Center (NYCHHC)</i>			
1	100 North Portland Avenue	Brooklyn	1,957
2	650 Fulton Street	Brooklyn	443
<i>East New York Diagnostic and Treatment Center (NYCHHC)</i>			
1	2094 Pitkin Avenue	Brooklyn	2,984
<i>Jamaica Hospital</i>			
2	3080 Atlantic Avenue	Brooklyn	2,185
<i>Kings County Hospital Center (NYCHHC)</i>			
1	451 Clarkson Avenue	Brooklyn	7,077
2	2266 Nostrand Avenue	Brooklyn	3,127
<i>Maimonides Medical Center</i>			
1	5613 Fort Hamilton Parkway	Brooklyn	10,761
<i>Opportunity Development Association of Williamsburg</i>			
1	12 Heyward Street	Brooklyn	7,602
<i>Public Health Solutions</i>			
1	335 Central Avenue	Brooklyn	2,151
2	2555 Ocean Ave	Brooklyn	5,568
17	259 Bristol Street	Brooklyn	632
18	1110 Pennsylvania Avenue	Brooklyn	1,612
19	387 Graham Avenue	Brooklyn	1,616
22	699 92nd Street	Brooklyn	1,468
<i>Sunset Park Family Health Center</i>			
1	6025 6th Avenue	Brooklyn	7,342
2	514 49th Street	Brooklyn	2,676
4	220 13th Street (Park Slope)	Brooklyn	915

Site	Address	City	Participation
Woodhull Medical and Mental Health Center (NYCHHC)			
1	760 Broadway	Brooklyn	3,496
2	1420 Bushwick Ave	Brooklyn	553
3	875 Manhattan Avenue	Brooklyn	707
4	279 Graham Ave	Brooklyn	571
Wyckoff Heights Medical Center			
2	247 Prospect Avenue	Brooklyn	1,561
3	391 Stanhope Street	Brooklyn	4,786
4	179 Jamaica Avenue	Brooklyn	92
6	168 Division Ave.	Brooklyn	1,827
7	110 Wyckoff Avenue	Brooklyn	199
Yeled V'Yalda Early Childhood Center			
1	1312 38th Street	Brooklyn	6,617
Lewis County			819
North Country Children's Clinic			
8	7785 North State Street	Lowville	695
10	High Street	Lyons Falls	55
11	Main Street	Croghan	39
12	Corner of Maiden Lane and State Rt	Copenhagen	30
Livingston County			970
Livingston County Department of Health			
1	2 Murray Hill Drive	Mt. Morris	22
4	6 Main Street	Dansville	169
7	133 Genesee Street	Avon	160
8	2 Murray Hill Drive	Mt. Morris	619
Madison County			1,842
Cortland County Community Action Program, Inc.			
3	Rte. 13 & Seminary Street	DeRuyter	40
Planned Parenthood Mohawk Hudson			
1	603 Seneca Street	Oneida	1,131
3	North & Arch Streets	Chittenango	200
6	100 Albany St	Cazenovia	67
11	13 Broad Street	Hamilton	138
15	2068 Route 8	Leonardsville	16
16	112 Center Street	Canastota	155
17	3824 Swamp Rd.	Morrisville	44
23	Route 20 PO Box 186	Madison	51

Site	Address	City	Participation
Monroe County			14,389
<i>Anthony L. Jordan Health Center</i>			
1	273 Upper Falls Blvd.	Rochester	4,559
<i>Monroe County Health Department</i>			
1	89 Genesee Street	Rochester	3,252
2	250 Waring Road	Rochester	3,173
3	249 Highland Ave.	Rochester	577
4	287 Flower City Part	Rochester	544
6	4301 Mt. Read Blvd.	Rochester	724
7	4322 Buffalo Road	North Chili	230
<i>Oak Orchard Community Health Center</i>			
3	280 West Avenue	Brockport	800
<i>Society for the Protection and Care of Children</i>			
10	20 East Avenue	Fairport	329
11	550 Webster Road (Route 250)	Webster	201
Montgomery County			1,594
<i>Fulmont Community Action Agency, Inc.</i>			
1	County Annex Bldg, 20 Park Street	Fonda	375
2	51 Main Street	Fort Plain	372
3	Amsterdam Riverfront Center	Amsterdam	847
Nassau County			15,263
<i>Long Island Jewish Medical Center</i>			
1	400 Lakeville Rd.	New Hyde Park	2,065
<i>Nassau County Department of Health</i>			
2	460 North Main Street	Freeport	3,533
3	161 Hempstead Turnpike	Elmont	861
4	26 Main Street	Hempstead	5,295
5	682 Union Avenue	Westbury	2,805
9	110 School St.	Glen Cove	704

Site	Address	City	Participation
New York County			48,469
<i>Bellevue Hospital Center (NYCHHC)</i>			
1	462 First Ave.	New York	4,400
2	Main St. Roosevelt Island	New York	35
<i>Betances Health Care</i>			
1	280 Henry St.	New York	1,078
<i>East Harlem Council for Human Services, Inc.</i>			
1	2253 3rd Avenue	New York	925
<i>Gouverneur Hospital (NYCHHC)</i>			
1	227 Madison Street	New York	3,724
2	125 Walker Street	New York	1,788
<i>Harlem Hospital (NYCHHC)</i>			
1	215 West 125th Street	New York	3,225
2	1727 Amsterdam Avenue.	New York	1,607
5	2749 8th Avenue, Room B1	New York	216
7	115 W. 116th Street	New York	116
8	3170 Broadway at 124th Street	New York	125
<i>Metropolitan Hospital (NYCHHC)</i>			
1	1901 1st Ave at 97th St.	New York	6,144
<i>New York Downtown Hospital</i>			
1	69 Gold Street, Lobby Level	New York	2,017
2	150 Essex Street	New York	81
<i>New York Presbyterian Medical Center</i>			
1	68 Nagle Avenue	New York	3,584
2	608 West 165th Street, # 3	New York	2,141
4	630 West 170th Street	New York	2,874
5	622 West 168th Street, VC4	New York	2,503
<i>North General Hospital Center</i>			
1	1879 Madison Avenue	New York	324
2	1665 Lexington Avenue	New York	1,428
3	309 East 104th Street	New York	1,261
<i>Public Health Solutions</i>			
8	158 East 115th Street	New York	1,060
<i>St. Luke's-Roosevelt Hospital Center</i>			
1	1111 Amsterdam Avenue	New York	1,342
2	428 W 59th St, Room GG07	New York	887
<i>St. Vincent's Hospital</i>			
1	36 7th Ave O'Toole Building	New York	747
2	221-227 Canal Street	New York	1,657
<i>William F. Ryan Community Health Center</i>			
1	160 West 100th Street	New York	1,498
3	279 East Third Street	New York	1,682

Site	Address	City	Participation
Niagara County			4,288
<i>Catholic Charities of Buffalo</i>			
1	237 4th Street	Niagara Falls	2,321
4	200 Bewley Building; Market Street	Lockport	1,463
5	1208 Oliver Street	N. Tonawanda	459
7	2015 Walmore Road & Mt. Hope	Lewiston	21
10	1112 South Avenue	Niagara Falls	24
Oneida County			5,273
<i>Oneida County Health Department</i>			
1	Mall	Rome	2,841
3	ROUTE 69	CAMDEN	229
4	4343 Peterboro Road	Vernon	40
5	Oneida St. & Pinnacle Rd.	Sauquoit	121
6	105 Ann Street	Boonville	131
7	122 Barton Avenue	Waterville	111
8	1101 Sherman Dr.	Utica	128
9	Main Street	Holland Patent	128
10	309 Genesee Street	Utica	609
11	205 N. Madison Avenue	Rome	166
12	1006 West Embargo St.	Rome	306
13	215 West Court Street	Rome	335
14	1414 Herkimer Road	Utica	75
<i>Planned Parenthood Mohawk Hudson</i>			
13	8784 Main Street	Poland	53
Onondaga County			10,488
<i>Onondaga County Health Department</i>			
1	375 W. Onondaga Street	Syracuse	5,922
2	7608 Oswego Rd. Bayberry Plaza	Liverpool	3,194
3	716 Hawley Ave.	Syracuse	776
4	Route 11 A (no number)	Nedrow	24
5	135 W. Manlius Street	East Syracuse	236
6	Rt. 20	Lafayette	85
7	5108 W. Genesee St.	Camillus	251
Ontario County			2,036
<i>Society for the Protection and Care of Children</i>			
1	79 South Main Street	Canandaigua	1,253
6	24 Park Place	Geneva	625
15	Proposed Site	Naples	158

Site	Address	City	Participation
Orange County			9,223
<i>Hudson River Healthcare, Inc.</i>			
4	75 Orange Avenue, P.O. Box 706	Walden	39
<i>Orange County Health Department</i>			
1	33 Route 17 M	Harriman	3,447
2	33 Fulton Plaza	Middletown	2,023
3	130 Broadway	Newburgh	1,780
5	Minisink Avenue	Port Jervis	258
7	888 Pulaski Hwy Alamo Community	Goshen	59
9	15 Walnut Street	Walden	55
<i>The Greater Hudson Valley Family Health Center, Inc.</i>			
1	136 Lake Street #3	Newburgh	1,425
2	341 Main Street	Highland Falls	137
Orleans County			920
<i>Oak Orchard Community Health Center</i>			
2	301 West Avenue	Albion	737
5	1357 West Avenue	Medina	183
Oswego County			3,673
<i>Oswego County Opportunities, Inc.</i>			
1	101 West Utica Street	Oswego	1,177
2	2 Hubble Street	Pulaski	163
3	33 South Third St.	Fulton	1,005
4	701 North Main Street	Central Square	357
5	11 South Jefferson St.	Mexico	211
6	Church & West Streets	Hannibal	91
7	15 Bridge Street	Altmar	60
10	2031 Harwood Drive	Sandy Creek	159
11	748 State Route 49	Bernhard's Bay	59
12	815 Main Street	Phoenix	132
13	1994 U.S. Rt. 11	Hastings	130
14	227 Co. Route 54	Pennellville	57
16	210 County Route 17	Williamstown	72

Site	Address	City	Participation
Otsego County			1,135
<i>Opportunities for Otsego, Inc.</i>			
1	3 West Broadway	Oneonta	812
2	66 Church St.	Cooperstown	64
3	240 Main St.	Unadilla	54
4	101-104 Arnold Rd., State Highway.	Burlington Flats	37
5	Kaitary Hall, 13 Church Street	Cherry Valley	31
6	98 Main Street	Richfield Springs	68
7	62 Main Street	Worcester	33
9	17 Church Street	Morris	36
Putnam County			960
<i>Putnam County Health Department</i>			
1	1 Geneva Road	Brewster	419
3	121 Main Street	Brewster	503
4	235 Lake Street	Mahopac	38
Queens County			58,786
<i>Bellevue Hospital Center (NYCHHC)</i>			
4	10-29 41st Ave	Long Island City	453
<i>Caritas Health Care, Inc.</i>			
2	152-11 89th Avenue	Jamaica	1,011
7	95-25 Queens Boulevard	Rego Park	1,448
<i>Elmhurst Hospital Center (NYCHHC)</i>			
1	78-05 41st Avenue	Elmhurst	9,736
<i>Jamaica Hospital</i>			
1	134-20 Jamaica Avenue	Jamaica	6,229
3	90-16 Sutphin Blvd	Jamaica	485
5	188-03 Jamaica Avenue	Hollis	302
<i>Joseph P. Addabbo Family Health Center</i>			
1	6200 Joseph P May Drive	Arverne	1,670
2	1288 Central Avenue	Far Rockaway	2,265
3	130-20 Farmers Blvd.	Springfield Gardens	569
<i>Public Health Solutions</i>			
5	103-24 Roosevelt Ave., 3rd Fl.	Corona	7,560
10	90-40 160th Street	Jamaica	3,092
11	21-34 Broadway, 23rd St. Entrance	Astoria	1,680
12	12-26 31st Avenue	Astoria	2,788
13	853 Onderdonk Avenue	Ridgewood	2,055
15	133-30 37th Avenue	Flushing	9,611
<i>Queens Hospital Center (NYCHHC)</i>			
1	114-02 Guy R. Brewer Blvd.	Jamaica	3,087
2	90-37 Parsons Blvd.	Jamaica	1,396
3	164th Street & Grand Central Parkw	Queens	3,349

Site	Address	City	Participation
Rensselaer County			3,359
<i>Commission on Economic Opportunity for the Greater Capital Region</i>			
1	2328 5th Avenue	Troy	2,943
2	1641 3rd Ave.	Rensselaer	120
3	75 River Road	Hoosick Falls	102
4	1777 Columbia Tpke.	Castleton	79
5	North Line Drive	Schaghticoke	38
8	Main Street	Berlin	55
9	38 Davis Dr.	Poestenkill	22
Richmond County			7,478
<i>Richmond University Medical Center</i>			
1	355 Bard Avenue	Staten Island	3,956
<i>Staten Island University Hospital</i>			
1	242 Mason Ave (MAP Bldg)	Staten Island	3,522
Rockland County			9,578
<i>Rockland County Health Department</i>			
1	23 Robert Pitt Drive #103	Monsey	4,262
2	26 New Main Street	Haverstraw	1,161
3	9 North Main St.	Spring Valley	2,102
6	58 Depew Ave	Nyack	379
9	9 Jackson Avenue	Spring Valley	1,674
Saint Lawrence County			2,952
<i>North Country Children's Clinic</i>			
9	Maple Street	Harrisville	36
15	3 Remington Avenue	Canton	886
16	33 Grant Street	Potsdam	322
18	70 East Hatfield St	Massena	406
19	423 Ford Street	Ogdensburg	520
20	34 Grove Street	Gouverneur	400
22	Rt. 11	Brasher Falls	125
23	State Street	Heuvelton	22
24	Oswegathie Trail	Star Lake	49
25	1 Hepburn Street	Norfolk	139
26	Gouverneur St.	Morristown	47

Site	Address	City	Participation
Saratoga County			2,037
<i>Saratoga County EOC, Inc.</i>			
1	40 New Street	Saratoga Springs	1,262
2	600 Palmer Avenue	Corinth	138
3	50 West High Street	Ballston Spa	97
4	114 Main Street	South Glens Falls	86
5	South Main Street	Mechanicville	154
6	5 Division Street	Waterford	54
7	1 Bayberry Dr.	Malta	21
8	30 Ferry Street	Schuylerville	58
9	1593 Crescent Road	Clifton Park	167
Schenectady County			3,472
<i>Schenectady County Public Health Services</i>			
3	1044 State St. 2nd Floor	Schenectady	3,472
Schoharie County			652
<i>Schoharie County Community Action Program</i>			
1	795 East Main Street, Ste 5	Cobleskill	652
Schuyler County			428
<i>Chemung County Health Department</i>			
4	208 Broadway	Montour Falls	428
Seneca County			447
<i>Society for the Protection and Care of Children</i>			
8	7121 Main Street	Ovid	102
9	17 Thurber Drive	Waterloo	200
12	48 State Street	Seneca Falls	145
Steuben County			2,326
<i>ProAction of Steuben & Yates, Inc.</i>			
1	117 East Steuben Street	Bath	125
2	N. Lackawanna & East Avenue	Wayland	160
3	Main & Center Streets	Hornell	483
4	1585 Washington Street	Woodhull	77
5	191 Bridge Street	Corning	541
6	3 W. Washington St.	Bath	489
7	37 Greenwood Street	Canisteo	138
8	8516 Main Street	Campbell	211
9	6 Front Street	Addison	102

Site	Address	City	Participation
Suffolk County			20,427
<i>Research Foundation of SUNY Stony Brook</i>			
1	181 Belle Meade Rd. Suite 2	East Setauket	984
2	1444 5th Avenue	Bayshore	1,522
<i>Suffolk County Department of Health Services</i>			
1	1080 Sunrise Highway	Amityville	2,131
3	82 Middle County Rd.	Coram	1,466
4	1556 Straight Path	Wyandanch	1,686
5	284 Pulaski Road	Greenlawn	1,512
6	45 West Suffolk Avenue	Central Islip	2,050
7	1869 Brentwood Road	Brentwood	3,908
8	550 Montauk Highway	Shirley	1,253
9	365 East Main Street	Patchogue	1,767
10	300 Center Drive South	Riverhead	1,349
12	240 Meeting House Lane	Southampton	799
Sullivan County			1,952
<i>Sullivan County Public Health Nursing Service</i>			
1	50 Community Lane	Liberty	926
2	2 Jefferson Street	Monticello	711
3	1 Green Avenue	Woodridge	138
4	Sullivan & 4th Streets	Wurtsboro	117
5	Legion Avenue	Jeffersonville	60
Tioga County			1,387
<i>Tioga Opportunities Program, Inc.</i>			
1	110 Central Avenue	Owego	915
2	310 Chemung Street	Waverly	293
3	216 Owego Street	Candor	20
4	34 Main Street	Newark Valley	51
5	41 N. Main Street	Spencer	73
6	203 Pennsylvania Avenue	Appalachian	35
Tompkins County			1,465
<i>Tompkins County Health Department</i>			
1	401 Harris B. Dates Drive	Ithaca	742
2	701 S Main Street	Groton	114
3	375 George Rd.	Dryden	117
5	227 Main St.	Newfield	52
7	302 St. Catherine's Circle	Ithaca	149
8	100 W. Seneca Street	Ithaca	291

Site	Address	City	Participation
Ulster County			1,972
<i>Ulster County Health Department</i>			
1	Rte 299, 576 Heritage Plaza	New Paltz	396
2	759 Broadway	Kingston	1,127
3	50 Center Street	Ellenville	245
4	123 Partition Street	Saugerties	158
6	RTE. 212	Woodstock	46
Warren County			1,479
<i>Warren County Health Services</i>			
1	54 Bay Street	Glens Falls	221
2	Municipal Ctr. Gurney Lane	Lake George	233
3	134 Main Street	North Creek	72
4	6604 State Rte. 8	Brant Lake	74
5	3797 Main Street	Warrensburg	191
6	14 School Street	Lake Luzerne	87
7	32 Luzerne Road	Queensbury	248
8	15 Burke Drive	Queensbury	121
9	13 South St.	Glens Falls	232
Washington County			1,671
<i>Washington County Public Health Services</i>			
1	411 Lower Main Street	Hudson Falls	1,138
2	Quaker Street	Granville	179
3	Park Place	Cambridge	83
4	161 Main Street	Whitehall	124
5	2 Academy Street	Greenwich	102
6	West Broadway	Salem	45
Wayne County			1,549
<i>Society for the Protection and Care of Children</i>			
2	Vienna St Building 58	Newark	585
3	18 Maple Ave.	Sodus	280
4	12223 Oswego St.	Wolcott	321
5	72 Sodus Street	Clyde	152
13	11 Queen Street	Lyons	110
14	4057 W. Main St.	Williamson	101

Site	Address	City	Participation
Westchester County			21,045
<i>Hudson River Healthcare, Inc.</i>			
2	1037 Main Street	Peekskill	1,326
<i>Mt. Vernon Neighborhood Health Center, Inc.</i>			
1	107 West 4th Street	Mount Vernon	2,650
2	30 South Broadway	Yonkers	1,800
3	330 Tarrytown Road	White Plains	1,175
<i>Open Door Family Medical Center</i>			
1	165 Main Street	Ossining	2,127
2	80 Beekman Avenue	Sleepy Hollow	219
<i>Sound Shore Medical Center</i>			
1	16 Guion Place - Goldstein Ambulat	New Rochelle	2,829
<i>Westchester County Department of Health</i>			
1	20 South Broadway	Yonkers	5,466
2	112 East Post Road	White Plains	1,622
3	One Gateway Plaza - South Main St.	Port Chester	1,831
Wyoming County			523
<i>Livingston County Department of Health</i>			
2	Main & Prospect Streets	Attica	52
3	Fireman's Bldg - Village Park	Perry	76
5	210 Main Street	Arcade	97
6	22 S. Main St.	Warsaw	298
Yates County			347
<i>Society for the Protection and Care of Children</i>			
7	179 Main St.	Penn Yan	347

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****ALLEGANY COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
14708	0	0	3	3
14709	37	22	82	141
14711	50	30	90	171
14714	35	21	57	114
14715	102	61	177	341
14717	20	12	18	51
14721	0	0	1	1
14727	108	65	197	369
14735	82	49	154	286
14739	96	57	208	362
14744	35	21	92	148
14754	13	8	38	59
14777	0	0	32	31
14803	45	27	64	137
14804	29	17	59	105
14806	49	29	107	185
14813	39	23	94	156
14822	30	18	52	101
14880	44	26	72	142
14884	0	0	3	3
14895	205	123	489	817
14897	15	9	27	51
Total	1035	621	2117	3773

CATTARAUGUS COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
14042	104	63	219	387
14060	15	9	8	31
14065	43	26	90	159
14070	80	48	196	324
14101	51	31	84	166
14129	38	23	63	123
14138	93	56	138	285
14171	27	16	65	108
14706	73	44	112	228
14719	101	61	166	327
14726	129	78	313	520
14729	10	6	24	40
14731	10	6	24	40
14737	111	67	200	378
14741	38	23	58	118
14743	46	28	79	153
14748	0	0	61	62
14753	17	10	35	61
14755	60	36	123	219
14760	492	295	1019	1807
14770	73	44	137	253
14772	98	59	155	311
14779	250	150	545	946
14783	0	0	10	10
Total	1959	1175	3923	7057

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****CAYUGA COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
13021	775	465	1549	2790
13026	12	7	18	37
13033	67	40	105	212
13034	28	17	57	102
13045	17	10	11	38
13071	13	8	37	58
13080	15	9	12	36
13081	12	7	28	47
13092	60	36	113	209
13111	23	14	63	100
13118	99	59	170	328
13140	82	49	213	343
13143	13	8	13	35
13147	22	13	43	77
13156	15	9	42	66
13160	27	16	55	98
13166	70	42	181	293
Total	1350	810	2710	4870

CHEMUNG COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
14812	11	7	10	28
14814	6	4	3	13
14816	0	0	2	2
14825	0	0	27	26
14838	36	21	66	123
14845	227	136	386	749
14861	34	20	74	129
14864	37	22	68	128
14871	36	21	74	131
14872	13	8	16	37
14889	19	12	43	75
14894	32	19	60	112
14901	574	344	1123	2040
14903	113	68	174	356
14904	616	369	1144	2129
14905	162	97	289	548
Total	1917	1150	3559	6626

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****CHENANGO COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
13124	0	0	2	2
13136	0	0	10	10
13155	24	14	30	68
13332	0	0	12	12
13411	55	33	160	248
13460	104	63	182	349
13464	32	19	53	105
13730	34	21	83	138
13733	85	51	138	275
13746	5	3	4	12
13778	123	74	211	408
13780	12	7	26	45
13787	12	7	5	24
13801	24	14	52	91
13809	19	11	52	82
13815	371	223	730	1323
13830	111	67	203	380
13832	26	15	39	80
13841	0	0	10	10
13843	21	12	63	96
13844	14	8	27	49
Total	1072	643	2093	3808

CLINTON COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12901	656	393	1126	2174
12903	3	2	1	6
12910	23	14	67	104
12912	19	11	57	88
12918	31	19	52	102
12919	66	40	88	193
12921	33	20	55	108
12923	0	0	12	12
12929	7	4	3	14
12934	31	19	43	93
12935	17	10	51	79
12944	40	24	165	230
12952	0	0	16	16
12955	0	0	2	2
12958	43	26	71	141
12959	17	10	19	47
12962	75	45	116	235
12972	99	59	168	326
12979	54	32	87	173
12981	26	16	41	83
12985	24	15	54	93
12992	102	61	181	345
Total	1367	820	2478	4665

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****COLUMBIA COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12029	0	0	9	9
12037	58	35	101	193
12050	4	2	1	7
12060	9	5	19	33
12075	32	19	66	118
12106	16	10	26	52
12125	9	5	20	35
12130	18	11	21	50
12136	0	0	22	22
12165	0	0	1	1
12172	7	4	2	14
12173	25	15	34	74
12174	0	0	1	1
12184	97	58	144	301
12502	5	3	13	22
12503	0	0	21	21
12513	5	3	3	12
12516	25	15	50	91
12517	0	0	1	1
12521	5	3	19	28
12523	22	13	36	70
12526	41	25	111	177
12529	36	22	72	129
12534	422	253	867	1542
12541	4	2	1	7
12565	41	25	74	140
Total	884	530	1736	3150

CORTLAND COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
13040	59	35	105	199
13045	567	340	1141	2048
13077	116	70	238	425
13101	75	45	130	250
13141	0	0	3	3
13158	26	16	47	89
13159	8	5	9	22
13803	97	58	171	326
13863	13	8	23	44
Total	962	577	1867	3406

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****DELAWARE COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12167	55	33	110	197
12406	63	38	81	183
12421	0	0	1	1
12430	20	12	40	73
12434	20	12	37	70
12455	31	18	69	118
12474	29	17	71	117
13731	22	13	19	55
13739	32	19	59	111
13750	43	26	125	192
13751	3	2	1	7
13752	20	12	48	81
13753	43	26	126	194
13754	34	20	32	87
13755	29	17	65	112
13756	0	0	13	13
13757	19	11	28	59
13775	20	12	44	76
13782	17	10	13	41
13783	61	37	193	289
13786	0	0	9	8
13788	22	13	27	63
13804	24	14	42	81
13838	172	103	314	591
13839	20	12	60	92
13842	0	0	14	14
13849	17	10	20	47
13856	109	66	187	363
Total	929	557	1848	3334

ESSEX COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12851	0	0	4	3
12852	0	0	8	8
12855	0	0	1	1
12857	0	0	8	8
12870	51	31	95	177
12883	99	59	189	348
12912	19	11	19	50
12913	17	10	40	67
12928	38	23	91	150
12932	10	6	27	43
12936	0	0	9	9
12941	26	15	47	88
12942	9	5	9	24
12943	0	0	1	1
12944	32	19	33	87
12946	75	45	179	297
12950	26	15	41	83
12956	39	24	69	133
12960	15	9	46	69
12961	0	0	1	1
12974	43	26	108	175
12983	29	17	29	78
12993	10	6	19	35
12996	38	23	64	124
12997	7	4	2	14
12998	3	2	1	7
Total	585	351	1142	2078

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****FRANKLIN COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12914	26	15	57	98
12916	63	38	91	192
12917	38	23	81	142
12920	43	26	87	156
12926	44	27	93	164
12930	0	0	11	11
12937	34	20	90	145
12945	3	2	0	5
12953	251	150	444	845
12957	63	38	129	231
12966	113	68	167	347
12969	9	5	6	19
12970	0	0	2	2
12980	27	16	65	109
12983	116	70	249	435
12986	130	78	207	413
12989	12	7	9	28
13655	119	72	197	387
Total	1090	654	1984	3728

FULTON COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12010	35	21	21	77
12025	57	34	98	188
12032	0	0	9	9
12078	605	363	1224	2191
12095	174	105	345	623
12117	44	26	77	147
12134	42	25	103	170
13329	31	19	21	72
13452	19	11	16	47
13470	17	10	28	56
Total	1024	614	1942	3580

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****GENESEE COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
14005	13	8	19	40
14013	60	36	86	182
14020	473	284	835	1591
14036	62	37	101	199
14040	7	4	3	14
14054	20	12	42	74
14056	3	2	1	6
14058	37	22	54	112
14125	73	44	116	233
14143	13	8	17	38
14416	58	35	86	179
14422	35	21	69	125
14482	156	94	285	536
14525	17	10	60	87
Total	1027	616	1773	3416

GREENE COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12015	39	24	72	135
12042	0	0	1	1
12051	84	50	151	285
12058	31	19	51	101
12083	49	30	92	171
12087	44	27	84	155
12192	20	12	30	61
12405	15	9	30	53
12407	0	0	2	2
12413	35	21	58	113
12414	242	145	460	847
12418	0	0	3	3
12422	0	0	1	1
12423	13	8	19	40
12427	13	8	15	36
12431	35	21	63	118
12439	0	0	16	16
12442	5	3	3	11
12444	0	0	2	2
12450	0	0	3	3
12451	30	18	48	96
12454	0	0	2	2
12460	0	0	5	5
12463	20	12	33	65
12468	12	7	24	42
12470	43	26	40	109
12473	0	0	33	33
12482	0	0	26	26
12485	20	12	32	63
12496	26	16	53	95
Total	775	465	1449	2689

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****HAMILTON COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12108	0	0	1	1
12164	26	16	28	73
12190	0	0	46	42
12842	36	21	47	107
12847	0	0	7	6
13360	0	0	6	5
Total	62	37	135	234

HERKIMER COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
13324	44	26	82	152
13329	103	61	187	351
13331	0	0	2	2
13340	158	95	292	545
13350	181	109	318	608
13357	282	169	532	984
13361	20	12	35	67
13365	202	121	399	721
13406	22	13	28	63
13407	79	47	148	275
13416	37	22	72	131
13420	12	7	22	41
13431	32	19	49	100
13439	0	0	7	7
13454	8	5	21	35
13491	50	30	144	225
13502	22	13	21	56
Total	1252	751	2360	4363

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****LEWIS COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
13305	0	0	1	1
13309	22	13	14	49
13312	0	0	1	1
13325	15	9	23	48
13327	51	30	92	174
13343	32	19	82	133
13367	186	112	413	711
13368	19	11	55	84
13433	54	33	125	212
13473	14	8	21	43
13489	7	4	22	33
13620	59	36	119	214
13626	49	29	127	205
13648	24	14	51	89
Total	532	319	1146	1997

LIVINGSTON COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
14414	94	56	151	301
14423	59	35	127	221
14435	20	12	69	101
14437	206	123	384	713
14454	120	72	189	382
14462	7	4	9	20
14466	17	10	29	55
14480	22	13	64	99
14481	20	12	45	78
14485	38	23	55	117
14487	57	34	104	195
14510	105	63	273	442
14517	74	44	109	227
14533	17	10	34	60
14560	23	14	53	91
14836	10	6	14	30
14846	13	8	19	40
Total	902	541	1728	3171

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****MADISON COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
13030	22	13	21	56
13032	345	207	542	1094
13035	35	21	43	99
13037	111	66	168	345
13052	32	19	68	119
13061	5	3	2	10
13072	18	11	43	72
13082	23	14	64	101
13122	20	12	41	73
13163	2	1	0	3
13310	15	9	30	54
13314	15	9	16	40
13332	59	35	120	214
13334	25	15	57	97
13346	59	35	113	207
13355	17	10	26	53
13364	2	1	0	3
13402	45	27	71	143
13408	50	30	104	185
13409	34	20	86	139
13418	0	0	3	3
13421	233	140	451	824
13485	0	0	8	8
Total	1167	700	2075	3942

MONTGOMERY COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12010	612	367	1194	2173
12068	74	44	102	220
12070	11	6	23	39
12072	42	25	59	127
12086	14	8	15	38
12166	25	15	42	81
12177	2	1	1	4
13317	100	60	212	373
13339	190	114	335	639
13410	4	2	1	7
13428	35	21	92	149
13452	81	49	192	323
Total	1190	714	2268	4172

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****ONTARIO COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
14424	255	153	434	842
14425	137	82	230	449
14432	108	65	185	358
14456	429	257	896	1581
14466	8	5	5	18
14469	48	29	95	172
14471	50	30	81	161
14475	3	2	1	6
14504	11	7	35	53
14512	69	42	132	243
14522	8	5	6	19
14532	66	40	99	205
14544	13	8	8	29
14548	53	32	89	174
14561	45	27	93	165
14564	66	40	70	176
Total	1370	822	2459	4651

ORLEANS COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
14098	68	41	146	255
14103	260	156	556	972
14411	291	175	538	1005
14470	94	57	166	318
14476	46	28	88	162
14477	12	7	28	47
14571	12	7	39	58
Total	783	470	1563	2816

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****OSWEGO COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
13028	22	13	49	84
13036	143	86	281	509
13042	40	24	89	153
13044	27	16	69	112
13069	727	436	1358	2520
13074	122	73	233	429
13076	47	28	104	179
13083	52	31	84	167
13103	2	1	0	3
13114	101	60	240	401
13126	688	413	1305	2406
13131	76	45	152	273
13132	55	33	114	202
13135	122	73	264	460
13142	148	89	270	506
13144	34	20	93	147
13145	45	27	84	156
13167	47	28	100	175
13302	35	21	65	121
13437	0	0	1	1
13493	57	34	134	225
Total	2589	1553	5087	9229

OTSEGO COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12064	0	0	10	10
12116	52	31	99	181
12155	23	14	46	83
12197	50	30	82	162
13315	20	12	15	48
13320	30	18	52	100
13326	30	18	83	131
13335	37	22	58	117
13337	0	0	7	7
13342	0	0	1	1
13348	38	23	92	153
13411	0	0	12	12
13439	85	51	173	309
13450	0	0	17	17
13468	22	13	24	58
13485	0	0	25	24
13488	2	1	1	4
13491	18	11	19	49
13796	23	14	50	87
13807	12	7	26	44
13808	32	19	62	112
13810	25	15	21	61
13820	311	187	568	1067
13825	98	59	184	341
13834	0	0	3	3
13849	72	43	152	266
13861	0	0	1	1
Total	979	587	1885	3451

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****PUTNAM COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
10509	177	106	246	529
10512	214	128	344	686
10516	28	17	33	79
10524	10	6	10	26
10537	15	9	5	29
10541	140	84	157	382
10579	63	38	96	197
12531	0	0	2	2
12563	40	24	45	110
Total	688	413	939	2040

RENSSELAER COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12018	79	47	126	252
12022	16	10	30	56
12028	20	12	53	84
12033	70	42	134	246
12052	11	7	18	36
12057	0	0	3	3
12061	72	43	110	226
12062	13	8	40	61
12063	0	0	26	26
12090	124	75	184	383
12094	49	29	90	168
12121	18	11	38	67
12123	95	57	153	305
12138	36	22	83	141
12140	15	9	15	38
12144	391	235	726	1352
12153	0	0	1	1
12154	33	20	44	96
12156	0	0	20	20
12168	31	19	82	132
12180	1364	818	2488	4671
12182	318	191	573	1082
12185	26	16	62	103
12196	25	15	36	75
12198	67	40	84	191
Total	2874	1724	5218	9816

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****SARATOGA COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12010	15	9	6	30
12019	71	42	112	225
12020	399	239	657	1295
12027	13	8	26	47
12065	319	191	474	985
12074	26	16	42	84
12118	169	101	234	505
12134	16	10	12	39
12148	18	11	9	38
12151	3	2	1	6
12170	53	32	105	189
12188	120	72	180	372
12803	149	90	251	490
12822	146	88	250	484
12831	112	67	178	357
12833	69	41	153	263
12835	33	20	65	118
12850	54	33	87	173
12859	18	11	18	47
12863	5	3	1	9
12866	371	223	808	1399
12871	143	86	241	469
Total	2322	1393	3909	7624

SCHENECTADY COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12008	10	6	21	37
12010	12	7	4	22
12053	20	12	30	62
12056	18	11	35	64
12137	3	2	10	15
12150	15	9	10	33
12302	245	147	391	783
12303	420	252	778	1449
12304	563	338	1100	2001
12305	63	38	179	280
12306	329	198	614	1141
12307	540	324	1036	1900
12308	438	263	885	1586
12309	166	100	286	552
Total	2842	1705	5379	9926

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****SCHOHARIE COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12031	0	0	14	14
12035	23	14	25	62
12036	0	0	4	4
12043	162	97	260	521
12066	23	14	51	88
12071	0	0	1	1
12076	0	0	27	26
12092	3	2	2	7
12093	36	22	75	132
12122	115	69	184	368
12149	25	15	62	101
12157	49	30	97	176
12160	0	0	14	14
12175	0	0	21	20
12187	26	16	27	69
12194	0	0	2	2
13459	31	19	72	121
Total	493	296	937	1726

SCHUYLER COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
14805	30	18	67	115
14812	65	39	129	232
14815	0	0	17	18
14818	28	17	47	92
14824	0	0	14	14
14837	30	18	18	65
14841	0	0	33	33
14865	61	37	138	236
14869	23	14	57	94
14878	12	7	10	30
14886	28	17	20	65
14891	99	60	193	352
Total	375	225	744	1344

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****SENECA COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
13148	211	127	401	739
13165	223	134	450	806
14433	0	0	3	3
14521	65	39	143	248
14541	79	47	154	280
14847	95	57	138	291
14860	22	13	38	73
Total	695	417	1327	2439

ST. LAWRENCE COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12965	18	11	43	72
12967	22	13	48	83
13613	53	32	145	230
13614	13	8	44	65
13617	161	96	313	570
13621	15	9	21	45
13625	25	15	73	113
13630	70	42	135	246
13633	15	9	16	40
13635	22	13	41	76
13639	0	0	5	5
13642	287	172	591	1049
13646	66	40	109	215
13648	0	0	4	4
13652	53	32	109	194
13654	88	53	240	381
13658	95	57	138	289
13660	53	32	107	192
13662	398	239	749	1386
13664	17	10	26	53
13667	99	60	204	363
13668	75	45	167	286
13669	429	258	789	1476
13670	0	0	9	9
13672	0	0	13	13
13676	237	142	470	849
13680	17	10	67	94
13681	43	26	69	138
13684	30	18	62	110
13687	0	0	10	10
13690	30	18	50	98
13694	27	16	51	94
13697	41	25	109	175
Total	2497	1498	5029	9024

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****STEUBEN COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
14437	13	8	5	26
14572	85	51	197	332
14801	154	92	336	583
14807	45	27	76	148
14808	23	14	40	77
14809	55	33	119	206
14810	267	160	507	934
14815	0	0	6	6
14819	31	19	62	113
14820	20	12	54	85
14821	85	51	149	284
14823	93	56	152	300
14826	41	25	88	154
14830	356	214	667	1237
14839	43	26	61	130
14840	31	19	56	106
14843	353	212	725	1290
14855	40	24	82	146
14858	25	15	89	129
14870	215	129	346	690
14873	81	49	125	255
14877	0	0	10	10
14879	76	46	124	246
14885	33	20	59	112
14898	46	28	104	178
Total	2212	1327	4240	7779

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****SULLIVAN COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12701	430	258	851	1538
12719	24	14	31	69
12721	68	41	117	227
12723	0	0	32	32
12724	0	0	3	3
12725	0	0	2	2
12726	13	8	21	41
12732	16	10	24	49
12733	136	82	212	430
12734	30	18	53	101
12737	22	13	42	78
12738	0	0	2	2
12740	13	8	13	34
12741	0	0	1	1
12742	0	0	6	6
12743	0	0	5	5
12747	29	17	49	95
12748	32	19	53	104
12749	0	0	10	10
12751	54	32	90	176
12752	0	0	1	1
12754	277	166	461	905

SULLIVAN COUNTY (continued)

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12758	81	48	200	329
12759	54	32	98	184
12760	0	0	5	5
12762	3	2	1	6
12763	0	0	1	1
12764	11	7	15	33
12765	0	0	36	35
12766	0	0	8	8
12768	3	2	1	6
12775	44	27	73	144
12776	36	22	59	117
12777	0	0	5	5
12778	0	0	15	15
12779	92	55	150	297
12783	41	25	90	155
12785	27	16	72	115
12786	0	0	3	3
12787	17	10	20	48
12788	67	40	127	234
12789	49	29	108	186
12790	101	61	194	356
12791	3	2	1	6
Total	1774	1064	3360	6198

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****TIOGA COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
13732	104	62	166	332
13734	75	45	126	245
13736	54	33	156	243
13743	58	35	135	227
13760	37	22	29	89
13811	66	40	134	240
13812	39	23	67	130
13827	182	109	327	618
13835	27	16	40	83
13864	10	6	18	35
14859	22	13	35	70
14883	65	39	167	270
14892	150	90	298	538
Total	890	534	1697	3121

TOMPKINS COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
13053	76	46	146	268
13068	81	49	146	276
13073	105	63	224	391
14817	70	42	93	204
14850	843	506	1492	2841
14867	95	57	185	336
14882	33	20	48	101
14883	18	11	7	36
14886	98	59	221	377
Total	1419	851	2561	4831

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****ULSTER COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12401	868	521	1566	2956
12404	43	26	123	192
12409	0	0	7	7
12410	0	0	2	2
12412	0	0	9	9
12417	0	0	1	1
12419	5	3	1	9
12420	0	0	1	1
12428	189	114	447	749
12432	3	2	1	7
12433	0	0	2	2
12435	0	0	5	5
12440	28	17	76	120
12443	26	16	42	84
12446	108	65	184	357
12449	59	35	96	190
12456	0	0	1	1
12457	10	6	19	36
12458	38	23	100	161
12461	16	9	21	46
12464	14	8	31	53
12466	43	26	110	179
12471	3	2	2	8

ULSTER COUNTY (continued)

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12472	35	21	60	116
12477	307	184	544	1035
12480	0	0	15	15
12481	23	14	29	66
12484	16	9	33	58
12486	31	19	47	97
12487	31	19	51	101
12489	9	5	12	26
12491	12	7	18	37
12493	0	0	2	2
12494	0	0	8	8
12498	43	26	68	138
12515	31	19	45	95
12525	43	26	125	195
12528	177	106	270	553
12542	99	59	157	315
12547	26	16	34	75
12548	10	6	18	35
12561	170	102	299	572
12566	59	35	41	136
12568	3	2	2	8
12589	120	72	302	494
Total	2702	1621	5029	9352

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****WARREN COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12801	381	229	736	1346
12804	222	133	380	735
12810	0	0	14	14
12814	0	0	17	17
12815	24	14	20	59
12817	51	31	71	154
12824	8	5	5	18
12843	0	0	22	22
12845	35	21	50	107
12846	56	34	121	211
12853	39	23	69	131
12860	18	11	36	64
12878	0	0	17	17
12885	72	43	152	268
Total	907	544	1712	3163

WASHINGTON COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
12057	17	10	27	54
12809	45	27	85	157
12816	53	32	78	163
12819	0	0	11	11
12821	0	0	4	4
12827	52	31	87	170
12828	174	104	305	583
12832	100	60	215	376
12834	80	48	146	274
12837	0	0	1	1
12838	10	6	32	48
12839	286	171	525	982
12849	0	0	4	4
12861	0	0	3	3
12865	38	23	60	121
12873	8	5	8	21
12887	130	78	281	490
Total	994	596	1871	3461

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****WAYNE COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
13143	45	27	144	216
13146	69	41	118	227
14433	100	60	153	313
14489	135	81	249	465
14502	211	126	414	751
14505	82	49	157	289
14513	306	184	610	1100
14516	38	23	59	121
14519	184	110	317	611
14522	94	56	187	337
14551	122	73	256	452
14555	12	7	26	44
14568	27	16	19	61
14589	72	43	142	257
14590	144	86	330	560
Total	1640	984	3180	5804

WYOMING COUNTY

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
14009	82	49	129	261
14011	57	34	112	204
14024	39	23	74	136
14037	5	3	9	17
14039	0	0	1	1
14066	12	7	34	53
14082	0	0	9	9
14113	15	9	23	47
14145	30	18	66	114
14167	25	15	41	82
14427	37	22	75	134
14525	12	7	4	23
14530	136	82	237	454
14536	0	0	34	34
14550	35	21	63	119
14569	149	90	275	514
14591	25	15	41	82
Total	660	396	1228	2284

Figures may appear not to add due to rounding errors.

ATTACHMENT B:***NYS Estimated WIC Eligibles by Zipcode for Counties with less than 10,000 Estimated Eligibles*****YATES COUNTY**

ZIP	Women Eligible	Infants Eligible	Children Eligible	Total Eligible
14418	19	11	37	66
14441	0	0	1	1
14478	2	1	1	4
14507	30	18	61	109
14512	17	10	12	39
14527	345	207	626	1178
14544	17	10	55	82
14837	177	106	325	607
14842	42	25	88	156
Total	648	389	1205	2242

Figures may appear not to add due to rounding errors.

**OUTREACH SITES
KINGS COUNTY HOSPITAL CENTER
CSFP**

830 AMSTERDAM AVE	830 Amsterdam Ave New York City
ABYSSINIAN TOWER SENIOR	50 W 131 ST NEW YORK CITY 10037
ALBANY SENIORS	196 Albany Ave Bklyn, NY 11213
ATLANTIC SENIOR CENTER	70 Pennsylvania Ave. Bklyn, NY 11207
BLAND SENIOR CENTER	40-15 College Piont Flushing, NY 11354
BONIFACIO CARA TEXIDOR	7 E. 116th Street NY, NY 10029
BORINQUEN PLAZA SENIORS	80 Siegel St Bklyn, NY 11206
BREUKLEIN SENIOR HOUSING	543 E, 108th ST. Bklyn, NY 11207
BREVOORT SENIOR CENTER	280 Ralph Ave Bklyn, NY 11233

Attachment C: CSFP Mobile Sites

BROOKDALE SR. CENTER	560 Rockaway Pkwy Brooklyn, NY 11212
BROOKLYN CHINESE-AMERICAN	5000 8th Ave Bklyn, NY 11220
BROOKLYN UNITED	1485 Dumont Ave Bklyn, NY 11207
CASSIDY COLES	125 Cassidy Pl Staten Island, 10301
COOPER PARK SENIORS	288 Frost St Bklyn, NY 11222
CONEY ISLAND SENIORS	3601 Surf Ave Bklyn, NY 11224
CYPRESS SENIOR CENTER	475 Fountain Ave Bklyn, NY 11208
FORT GREENE SENIORS (former Decatur)	1588 Schenectady Bklyn, NY 11234
DIANA JONES SENIORS	741 Flushing Ave Bklyn, NY 11206
DUDAMIS 7TH DAY (SDA)	461 Montauk Ave Bklyn, NY 11208

Attachment C: CSFP Mobile Sites

DUNCAN GENNS	725 Evergreen Ave Blkyn, NY 11207
EASTCHESTER GARDENS (Rain)	1246 Burke Ave. Bronx, NY 10469
EAST HARLEM	150 E 121 St New York City 10035
EDENWALDS SENIORS	1151 E 229 St. Apt. 7D Bronx, NY 10461
ELEANOR ROOSEVELT	109 Lewis Ave Bklyn, NY 11221
ELLIOTT/CHELSEA SENIORS	415 W 25th St New York, NY 10001
ENNIS FRANCIS	2070 Adam Clayton P. New York City 10027
FARRAGUT SENIOR CENTER	228 York St Bklyn, NY
GOMPER- LES INFILL 1	175 Eldrige St #82 Bklyn NY, 10002
HARBOR HILL	5613 2nd Ave Bklyn NY, 11220

Attachment C: CSFP Mobile Sites

HAZELBROOK SENIORS	1461 Flatbush Ave Bklyn, NY 11210
HOPE GARDENS	195 Linden St Bklyn NY, 11221
HOUSE CALL	2026 Ocean Ave. Bklyn, NY 11230 (Suite #3)
INDEPENDENCE SENIORS	114 Taylor St Bklyn, NY. 11211
INTEGRATED	7901 Bay Parkway 1B Bklyn, NY 11214
JACKIE ROBINSON SENIORS	1301 Amsterdam Ave NYC 10027
JEHOVAH'S HOUSE OF PRAYER	577 Ramsen Ave Bklyn, NY
KORNEGAY SR. CENTER	2101 LEXINGTON AVE NY, NY 10035
LA GUARDIA SENIORS	280 Cherry St New York NY, 10002
LILLIAN WALDS SENIORS	58 Ave D New York NY, 10009- Bet E 5th St &E 6 th St.

Attachment C: CSFP Mobile Sites

LINCOLN SQUARE	250 W 65TH ST New York NY, 10023
LOS SURES SENIORS 1	201 S 4h St Blkyn NY, 11211
LOS SURES SENIORS 2	197-201 Roebling St Bklyn NY, 11211
LOS SURES SENIORS 3	160 SO. 2nd St Bklyn NY, 11211
MARCUS GARVEY SENIOR	1440 East New York Av. Bklyn NY, 11212
MARJORIE RICHARDSON	359 Hendrix St Bklyn NY, 11207
MARY MCLEOD	1970 Amsterdam Ave New York NY, 10032
MSGR JARKA HALL	270 Bedford Ave Bklyn NY, 11211
NEW YORK ASS. OF HOLOCAUST	2900 W. 8TH Ave 1E Bklyn, NY 11224
OCEAN AVE. MEDICAL	2700 Ocean Ave. Bklyn, NY 11229

Attachment C: CSFP Mobile Sites

OCEAN BAY APTS-OCEANSIDE	339 Beach 54 St Arverne, NY 11692
PALMETTO SENIOR CENTER	85 Palmetto St Bklyn NY, 11221
PARKSLOPE SENIOR CENTER	463A 7th St Bklyn, NY 11215
PARKWAY SENIOR CENTER	77 NY Ave Bklyn NY, 11216
RAICES TIMES PLAZA SENIORS	460 Atlantic Ave Bklyn NY, 11217
RAININWOOD SENIORS	84 Vermilyea Ave NYC 10034
REDHOOK	6 Walcott St. Bklyn NY, 11231
RICHMOND TERRACE	476 Richmond Terrace Staten Island, 10301
RISLEY SENIORS	1595 Fulton St Bklyn NY 11213
ROSETTA GASTON SENIORS	460 Dumont Ave Bklyn NY, 11212

Attachment C: CSFP Mobile Sites

SARATOGA SQUARE	930 Halsey St Bklyn, NY 11233
SETH LOW SENIOR CENTER	137 Belmont Ave Bklyn, NY 11212
SOUTHBEACH	126 Lamport Blvd Staten Island
SOUTHBRIDGE	90 Beekman St New York NY 10038
SMITH HOUSE	15 St James Pl New York, N.Y 10038
ST GABRIEL SENIORS	331 Hawthorne St Bklyn, NY 11225
ST LOUIS SENIORS (Entrance on Bedford)	715 St. John Place Bklyn, NYy 11213
STUYVESANT SENIORS	150 Malcolm X Blvd Bklyn, NY 11221
SWINGING SIXTIES SENIOR	211 Ainslie St Bklyn NY, 11211
TILDEN SENIORS	630 Mother Gaston Bklyn, NY 11212
TOMPKINS PARK SENIOR	550 Green Ave Bklyn, NY 11216

Attachment C: CSFP Mobile Sites

UBA/BEATRICE LEWIS	2322 3rd Ave New York City 10035
UBA/MANHATTANVILLE	3333 Broadway Tower E New York NYC, 10031 Bsmt
UBA/PHILLIP RANDOLPH	108 W 146 St New York City 10039
UNITED HINDU	118-09 Sutter Ave South Ozone Park 11420
UPACA HOUSES SR. CENTER	1940 LEXINGTON AVE NY, NY 10035
VANDALIA SENIOR CENTER	47 Vandalia Ave Bklyn NY, 11239
Boston Secor Community Center (Victory Family)	3540 Boivona St. Bronx NY. 10475
VICTORY ONE	1468 5th Ave New York City
WARTBURG ADULT DAY CARE	59-25 67 Ave Ridgewood, NY 11385
WARTBURG LUTHERAN ADULT	172-61 Baisley Blvd Jamaica Ny, 11434

Attachment C: CSFP Mobile Sites

WARTBURG SENIORS	50 Sheffield Ave Bklyn Ny, 11207
WAYSIDE BAPTIST SENIORS 1	1720 Broadway Bklyn, NY 11207
WINDSOR SENIOR CENTER	245 Prospect Park Bklyn, NY 11215
WYCKOFF SENIORS	280 Wyckoff St Bklyn, NY 11217

Attachment C: CSFP Mobile Sites

Brookwood Senior Housing

Ronkonkoma

Siena Village Sr. Housing

Smithtown

St. Ignatius Parish Outreach

Hicksville

Levittown Sr. Center

Levittown

Brookwood Village Sr. Housing

Far Rockaway

Greenwich Sr. Housing

Hempstead

At. Anthony Parish

Rocky Point

Resurrection Parish

Farmingville

St. Mary's Sr. Housing

Inwood

Gateway Youth Outreach

Elmont

Salvation Army

East Northport

Bishop Ryan Sr. Housing

Hampton Bays

John Wesley Sr. Housing

Riverhead

Southold Rec. Center

Peconic

St. Gertrude

Far Rockaway

Msg Reel Sr. Housing

Medford

Paumanack Village Sr. Housing I&2

Greenlawn & Melville

Faith Baptist Church

Coram

Martin L. King Sr. Center

Rockville Centre

Peternana Sr. Housing

Freeport

Hempstead Sr. Center

Hempstead

Bishop Kellenberg Sr. Housing

Oceanside

Magnolia Gardens Sr. Housing

Westbury

Avery Sr. Housing

Patchogue

Conifer Sr. Housing

East Patchogue

Seaford Sr. Center

Seaford

Oakley Sr. Housing

Massapequa

St. Mary's Parish

East Islip

Bellport Alliance

Bellport

St. Paul's Sr. Housing

Brentwood

Bishop McGann

Central Islip

Southampton Sr. Center

Flanders

Good Shepherd Parish

Holbrook

St. Francis Cabrini Parish

Coram

Hope Lutheran Church

Selden

St. John's Parish

Bohemia

United Methodist Church

Riverhead

New Haven Sr. Housing

Far Rockaway

Hardscrabble Sr. Housing

Farmingdale

St. Ann's Sr. Housing

Brentwood

St. Agnes Sr. Housing

Uniondale

Halandia Sr. Housing

Rockville Centre

Long Beach Sr. Housing

Long Beach

Holy Name of Mary Parish

Valley Stream

St. Anthony's Parish

Oceanside

St. Patrick Parish

Glen Cove

Plainview Sr. Housing

Plainview

Our Lady of Assumption

Copiague

Vill. Great Neck Sr. Housing

Great Neck

Franklyn Square Sr. Center

Franklyn Square

Faith Alive Ministeries

Central Islip

Bay Town Sr. Housing

Bay Shore

St. Francis DeSales Parish

Patchogue

Thea Bowman Housing

Amity.

St. Hugh Parish

Huntington

George Link Sr. Housing

Coram

St. Joseph Sr. Housing

Selden

St. Lawrence Parish

Sayville

St. Jude's Parish

Mastic

St. Sylvester's Parish

Medford

St. Martin's Parish

Amityville

St. Elizabeth's Parish

Lk. Ronkonkoma

Bishop Daly Sr. Housing

Uniondale

Freeport Housing Auth.

Freeport

Hempstead Sr.

Hempstead

Halandia Sr. Housing

Baldwin

St. Brigid's Parish

Westbury

Ethnicity and RaceRegional Report for **April 2008 - September 2008**

Capital Region

LA#/LA Name	Total		American Indian or		Asian		Black or African		Native Hawaiian or		White		Two or More	
	Participants		Alaskan Native				American		Pacific Islander				Races	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
200 Albany Women's Health Center-AMCH WIC														
Hispanic	670	18.2%	35	5.2%	4	0.6%	190	28.4%	3	0.4%	318	47.5%	120	17.9%
Not Hispanic	3,015	81.8%	3	0.1%	163	5.4%	1,192	39.5%	8	0.3%	1,387	46.0%	262	8.7%
Total	3,685	100.0%	38	1.0%	167	4.5%	1,382	37.5%	11	0.3%	1,705	46.3%	382	10.4%
201 Warren County Health Services														
Hispanic	70	3.4%	1	1.4%	0	0.0%	5	7.1%	0	0.0%	59	84.3%	5	7.1%
Not Hispanic	1,991	96.6%	3	0.2%	12	0.6%	31	1.6%	1	0.1%	1,892	95.0%	52	2.6%
Total	2,061	100.0%	4	0.2%	12	0.6%	36	1.7%	1	0.0%	1,951	94.7%	57	2.8%
202 Whitney M. Young Jr. Health Center														
Hispanic	458	13.8%	15	3.3%	2	0.4%	81	17.7%	5	1.1%	141	30.8%	214	46.7%
Not Hispanic	2,863	86.2%	8	0.3%	149	5.2%	1,518	53.0%	22	0.8%	979	34.2%	187	6.5%
Total	3,321	100.0%	23	0.7%	151	4.5%	1,599	48.1%	27	0.8%	1,120	33.7%	401	12.1%
203 CEO for The Greater Capital Region Inc.														
Hispanic	488	10.1%	9	1.8%	1	0.2%	185	37.9%	48	9.8%	211	43.2%	34	7.0%
Not Hispanic	4,347	89.9%	15	0.3%	75	1.7%	857	19.7%	36	0.8%	3,249	74.7%	115	2.6%
Total	4,835	100.0%	24	0.5%	76	1.6%	1,042	21.6%	84	1.7%	3,460	71.6%	149	3.1%
204 Cornell Cooperative Ext.-Schenectady County														
Hispanic	680	14.0%	12	1.8%	13	1.9%	76	11.2%	3	0.4%	547	80.4%	29	4.3%
Not Hispanic	4,188	86.0%	18	0.4%	416	9.9%	1,083	25.9%	47	1.1%	2,432	58.1%	192	4.6%
Total	4,868	100.0%	30	0.6%	429	8.8%	1,159	23.8%	50	1.0%	2,979	61.2%	221	4.5%
205 Herkimer - Madison WIC Program														
Hispanic	153	3.2%	4	2.6%	2	1.3%	3	2.0%	0	0.0%	129	84.3%	15	9.8%
Not Hispanic	4,556	96.8%	46	1.0%	11	0.2%	57	1.3%	4	0.1%	4,317	94.8%	121	2.7%
Total	4,709	100.0%	50	1.1%	13	0.3%	60	1.3%	4	0.1%	4,446	94.4%	136	2.9%
206 Fulmont Community Action Program														
Hispanic	625	16.2%	4	0.6%	2	0.3%	9	1.4%	0	0.0%	600	96.0%	10	1.6%
Not Hispanic	3,225	83.8%	3	0.1%	10	0.3%	79	2.4%	2	0.1%	3,103	96.2%	28	0.9%
Total	3,850	100.0%	7	0.2%	12	0.3%	88	2.3%	2	0.1%	3,703	96.2%	38	1.0%

Ethnicity and RaceRegional Report for **April 2008 - September 2008**

Capital Region

LA#/LA Name	Total Participants		American Indian or Alaskan Native		Asian		Black or African American		Native Hawaiian or Pacific Islander		White		Two or More Races	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
207 Delaware Opportunities, Inc. - WIC														
Hispanic	95	6.5%	0	0.0%	1	1.1%	3	3.2%	1	1.1%	90	94.7%	0	0.0%
Not Hispanic	1,368	93.5%	3	0.2%	2	0.1%	15	1.1%	2	0.1%	1,330	97.2%	16	1.2%
Total	1,463	100.0%	3	0.2%	3	0.2%	18	1.2%	3	0.2%	1,420	97.1%	16	1.1%
208 Schoharie County CAP														
Hispanic	32	3.2%	0	0.0%	0	0.0%	4	12.5%	2	6.3%	25	78.1%	1	3.1%
Not Hispanic	960	96.8%	0	0.0%	6	0.6%	7	0.7%	4	0.4%	938	97.7%	5	0.5%
Total	992	100.0%	0	0.0%	6	0.6%	11	1.1%	6	0.6%	963	97.1%	6	0.6%
209 Opportunities for Chenango, Inc.														
Hispanic	45	2.2%	2	4.4%	0	0.0%	3	6.7%	0	0.0%	34	75.6%	6	13.3%
Not Hispanic	2,036	97.8%	4	0.2%	9	0.4%	16	0.8%	0	0.0%	1,973	96.9%	34	1.7%
Total	2,081	100.0%	6	0.3%	9	0.4%	19	0.9%	0	0.0%	2,007	96.4%	40	1.9%
210 Opportunities for Otsego														
Hispanic	58	3.7%	3	5.2%	0	0.0%	4	6.9%	0	0.0%	50	86.2%	1	1.7%
Not Hispanic	1,497	96.3%	1	0.1%	6	0.4%	52	3.5%	0	0.0%	1,429	95.5%	9	0.6%
Total	1,555	100.0%	4	0.3%	6	0.4%	56	3.6%	0	0.0%	1,479	95.1%	10	0.6%
211 Catholic Charities of Columbia & Greene County														
Hispanic	314	11.7%	63	20.1%	21	6.7%	13	4.1%	27	8.6%	178	56.7%	12	3.8%
Not Hispanic	2,364	88.3%	8	0.3%	52	2.2%	279	11.8%	10	0.4%	1,955	82.7%	60	2.5%
Total	2,678	100.0%	71	2.7%	73	2.7%	292	10.9%	37	1.4%	2,133	79.6%	72	2.7%
212 Washington County Public Health Service														
Hispanic	59	2.6%	1	1.7%	0	0.0%	1	1.7%	0	0.0%	57	96.6%	0	0.0%
Not Hispanic	2,173	97.4%	1	0.0%	2	0.1%	14	0.6%	2	0.1%	2,116	97.4%	38	1.7%
Total	2,232	100.0%	2	0.1%	2	0.1%	15	0.7%	2	0.1%	2,173	97.4%	38	1.7%
213 Cayuga County Health Department														
Hispanic	80	3.3%	0	0.0%	0	0.0%	12	15.0%	1	1.3%	64	80.0%	3	3.8%
Not Hispanic	2,333	96.7%	4	0.2%	2	0.1%	148	6.3%	2	0.1%	2,129	91.3%	48	2.1%
Total	2,413	100.0%	4	0.2%	2	0.1%	160	6.6%	3	0.1%	2,193	90.9%	51	2.1%

Ethnicity and RaceRegional Report for **April 2008 - September 2008**

Capital Region

LA#/LA Name	Total Participants		American Indian or Alaskan Native		Asian		Black or African American		Native Hawaiian or Pacific Islander		White		Two or More Races	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
214 Oswego County Opportunities, Inc.														
Hispanic	215	4.4%	2	0.9%	0	0.0%	7	3.3%	13	6.0%	181	84.2%	12	5.6%
Not Hispanic	4,656	95.6%	7	0.2%	6	0.1%	50	1.1%	5	0.1%	4,499	96.6%	89	1.9%
Total	4,871	100.0%	9	0.2%	6	0.1%	57	1.2%	18	0.4%	4,680	96.1%	101	2.1%
217 Cortland County Community Action Program														
Hispanic	67	3.5%	0	0.0%	0	0.0%	1	1.5%	0	0.0%	60	89.6%	6	9.0%
Not Hispanic	1,869	96.5%	1	0.1%	6	0.3%	23	1.2%	1	0.1%	1,765	94.4%	73	3.9%
Total	1,936	100.0%	1	0.1%	6	0.3%	24	1.2%	1	0.1%	1,825	94.3%	79	4.1%
218 Tioga Opportunities Program, Inc.														
Hispanic	10	0.5%	0	0.0%	0	0.0%	1	10.0%	0	0.0%	9	90.0%	0	0.0%
Not Hispanic	1,851	99.5%	0	0.0%	2	0.1%	9	0.5%	0	0.0%	1,819	98.3%	21	1.1%
Total	1,861	100.0%	0	0.0%	2	0.1%	10	0.5%	0	0.0%	1,828	98.2%	21	1.1%
219 Oneida County WIC Program														
Hispanic	798	10.3%	2	0.3%	7	0.9%	45	5.6%	4	0.5%	732	91.7%	8	1.0%
Not Hispanic	6,928	89.7%	3	0.0%	360	5.2%	1,102	15.9%	31	0.4%	5,391	77.8%	41	0.6%
Total	7,726	100.0%	5	0.1%	367	4.8%	1,147	14.8%	35	0.5%	6,123	79.3%	49	0.6%
220 Onondaga County Health Department														
Hispanic	1,550	10.6%	23	1.5%	5	0.3%	342	22.1%	143	9.2%	776	50.1%	261	16.8%
Not Hispanic	13,137	89.4%	115	0.9%	314	2.4%	4,265	32.5%	51	0.4%	6,876	52.3%	1,516	11.5%
Total	14,687	100.0%	138	0.9%	319	2.2%	4,607	31.4%	194	1.3%	7,652	52.1%	1,777	12.1%
221 Broome County Health Department														
Hispanic	428	6.5%	8	1.9%	0	0.0%	58	13.6%	2	0.5%	318	74.3%	42	9.8%
Not Hispanic	6,126	93.5%	5	0.1%	109	1.8%	720	11.8%	17	0.3%	5,084	83.0%	191	3.1%
Total	6,554	100.0%	13	0.2%	109	1.7%	778	11.9%	19	0.3%	5,402	82.4%	233	3.6%
222 North Country Children's Clinic														
Hispanic	690	5.3%	12	1.7%	3	0.4%	40	5.8%	13	1.9%	576	83.5%	46	6.7%
Not Hispanic	12,248	94.7%	27	0.2%	68	0.6%	493	4.0%	41	0.3%	11,360	92.7%	259	2.1%
Total	12,938	100.0%	39	0.3%	71	0.5%	533	4.1%	54	0.4%	11,936	92.3%	305	2.4%

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Capital Region

LA#/LA Name	Total Participants		American Indian or Alaskan Native		Asian		Black or African American		Native Hawaiian or Pacific Islander		White		Two or More Races	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
223 Essex County Health Department														
Hispanic	16	1.4%	0	0.0%	0	0.0%	1	6.3%	0	0.0%	15	93.8%	0	0.0%
Not Hispanic	1,116	98.6%	3	0.3%	4	0.4%	6	0.5%	1	0.1%	1,100	98.6%	2	0.2%
Total	1,132	100.0%	3	0.3%	4	0.4%	7	0.6%	1	0.1%	1,115	98.5%	2	0.2%
224 Clinton County Health Department														
Hispanic	72	2.8%	2	2.8%	0	0.0%	1	1.4%	4	5.6%	64	88.9%	1	1.4%
Not Hispanic	2,515	97.2%	6	0.2%	3	0.1%	54	2.1%	4	0.2%	2,415	96.0%	33	1.3%
Total	2,587	100.0%	8	0.3%	3	0.1%	55	2.1%	8	0.3%	2,479	95.8%	34	1.3%
225 Tompkins County Health Department														
Hispanic	147	6.9%	3	2.0%	5	3.4%	12	8.2%	4	2.7%	109	74.1%	14	9.5%
Not Hispanic	1,987	93.1%	0	0.0%	134	6.7%	149	7.5%	6	0.3%	1,539	77.5%	159	8.0%
Total	2,134	100.0%	3	0.1%	139	6.5%	161	7.5%	10	0.5%	1,648	77.2%	173	8.1%
226 St. Regis Health Services														
Hispanic	8	3.0%	7	87.5%	0	0.0%	0	0.0%	0	0.0%	1	12.5%	0	0.0%
Not Hispanic	260	97.0%	234	90.0%	0	0.0%	0	0.0%	1	0.4%	20	7.7%	5	1.9%
Total	268	100.0%	241	89.9%	0	0.0%	0	0.0%	1	0.4%	21	7.8%	5	1.9%
227 Hamilton County Nursing Service														
Hispanic	6	5.6%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	6	100.0%	0	0.0%
Not Hispanic	102	94.4%	0	0.0%	0	0.0%	0	0.0%	1	1.0%	101	99.0%	0	0.0%
Total	108	100.0%	0	0.0%	0	0.0%	0	0.0%	1	0.9%	107	99.1%	0	0.0%

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Capital Region

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	N	%	N	%	N	%	N	%	N	%	N	%	N	%
239 Saratoga County EOC														
Hispanic	148	5.2%	4	2.7%	0	0.0%	3	2.0%	1	0.7%	132	89.2%	8	5.4%
Not Hispanic	2,703	94.8%	3	0.1%	29	1.1%	66	2.4%	8	0.3%	2,493	92.2%	104	3.8%
Total	2,851	100.0%	7	0.2%	29	1.0%	69	2.4%	9	0.3%	2,625	92.1%	112	3.9%
Region Total														
Hispanic	7,982	8.0%	212	2.7%	66	0.8%	1,100	13.8%	274	3.4%	5,482	68.7%	848	10.6%
Not Hispanic	92,414	92.0%	521	0.6%	1,950	2.1%	12,285	13.3%	307	0.3%	73,691	79.7%	3,660	4.0%
Total	100,396	100.0%	733	0.7%	2,016	2.0%	13,385	13.3%	581	0.6%	79,173	78.9%	4,508	4.5%
State Total														
Hispanic	261,547	37.5%	85,428	32.7%	1,592	0.6%	29,133	11.1%	10,569	4.0%	122,082	46.7%	12,743	4.9%
Not Hispanic	436,476	62.5%	6,003	1.4%	51,461	11.8%	167,282	38.3%	6,617	1.5%	194,576	44.6%	10,537	2.4%
Total	698,023	100.0%	91,431	13.1%	53,053	7.6%	196,415	28.1%	17,186	2.5%	316,658	45.4%	23,280	3.3%

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Western Region

LA#/LA Name	Total Participants		American Indian or Alaskan Native		Asian		Black or African American		Native Hawaiian or Pacific Islander		White		Two or More Races	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
215 Anthony L. Jordan Health Link														
Hispanic	2,516	40.7%	5	0.2%	6	0.2%	662	26.3%	8	0.3%	1,779	70.7%	56	2.2%
Not Hispanic	3,665	59.3%	4	0.1%	78	2.1%	2,765	75.4%	74	2.0%	622	17.0%	122	3.3%
Total	6,181	100.0%	9	0.1%	84	1.4%	3,427	55.4%	82	1.3%	2,401	38.8%	178	2.9%
216 Finger Lakes WIC														
Hispanic	797	11.6%	115	14.4%	7	0.9%	42	5.3%	24	3.0%	546	68.5%	63	7.9%
Not Hispanic	6,082	88.4%	16	0.3%	52	0.9%	374	6.1%	11	0.2%	5,331	87.7%	298	4.9%
Total	6,879	100.0%	131	1.9%	59	0.9%	416	6.0%	35	0.5%	5,877	85.4%	361	5.2%
228 Erie County Health Department														
Hispanic	2,631	11.9%	23	0.9%	7	0.3%	364	13.8%	48	1.8%	2,093	79.6%	96	3.6%
Not Hispanic	19,493	88.1%	75	0.4%	395	2.0%	7,881	40.4%	59	0.3%	10,658	54.7%	425	2.2%
Total	22,124	100.0%	98	0.4%	402	1.8%	8,245	37.3%	107	0.5%	12,751	57.6%	521	2.4%
229 Cattaraugus County Health Department (WIC)														
Hispanic	67	2.3%	2	3.0%	0	0.0%	0	0.0%	3	4.5%	60	89.6%	2	3.0%
Not Hispanic	2,816	97.7%	44	1.6%	2	0.1%	56	2.0%	4	0.1%	2,619	93.0%	91	3.2%
Total	2,883	100.0%	46	1.6%	2	0.1%	56	1.9%	7	0.2%	2,679	92.9%	93	3.2%
230 Chautauqua Opportunities Inc.														
Hispanic	722	14.1%	12	1.7%	0	0.0%	12	1.7%	142	19.7%	538	74.5%	18	2.5%
Not Hispanic	4,389	85.9%	9	0.2%	11	0.3%	182	4.1%	17	0.4%	4,151	94.6%	19	0.4%
Total	5,111	100.0%	21	0.4%	11	0.2%	194	3.8%	159	3.1%	4,689	91.7%	37	0.7%
231 Catholic Charities WIC														
Hispanic	313	4.1%	17	5.4%	4	1.3%	37	11.8%	2	0.6%	231	73.8%	22	7.0%
Not Hispanic	7,353	95.9%	67	0.9%	70	1.0%	1,141	15.5%	11	0.1%	5,885	80.0%	179	2.4%
Total	7,666	100.0%	84	1.1%	74	1.0%	1,178	15.4%	13	0.2%	6,116	79.8%	201	2.6%
232 Kaleida Health Center														
Hispanic	522	29.1%	3	0.6%	0	0.0%	131	25.1%	36	6.9%	182	34.9%	170	32.6%
Not Hispanic	1,273	70.9%	4	0.3%	44	3.5%	946	74.3%	7	0.5%	166	13.0%	106	8.3%
Total	1,795	100.0%	7	0.4%	44	2.5%	1,077	60.0%	43	2.4%	348	19.4%	276	15.4%

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Western Region

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	N	%	N	%	N	%	N	%	N	%	N	%	N	%
233 Livingston County Health Department (WIC)														
Hispanic	158	7.1%	3	1.9%	1	0.6%	12	7.6%	13	8.2%	127	80.4%	2	1.3%
Not Hispanic	2,082	92.9%	1	0.0%	9	0.4%	40	1.9%	3	0.1%	1,985	95.3%	44	2.1%
Total	2,240	100.0%	4	0.2%	10	0.4%	52	2.3%	16	0.7%	2,112	94.3%	46	2.1%
234 Oak Orchard WIC Program														
Hispanic	387	9.6%	2	0.5%	0	0.0%	7	1.8%	5	1.3%	371	95.9%	2	0.5%
Not Hispanic	3,624	90.4%	40	1.1%	6	0.2%	172	4.7%	6	0.2%	3,339	92.1%	61	1.7%
Total	4,011	100.0%	42	1.0%	6	0.1%	179	4.5%	11	0.3%	3,710	92.5%	63	1.6%
235 Chemung County WIC Program														
Hispanic	235	5.7%	1	0.4%	1	0.4%	43	18.3%	2	0.9%	152	64.7%	36	15.3%
Not Hispanic	3,913	94.3%	5	0.1%	12	0.3%	442	11.3%	3	0.1%	3,132	80.0%	319	8.2%
Total	4,148	100.0%	6	0.1%	13	0.3%	485	11.7%	5	0.1%	3,284	79.2%	355	8.6%
236 Monroe County Health Department														
Hispanic	1,548	12.4%	14	0.9%	6	0.4%	428	27.6%	32	2.1%	989	63.9%	79	5.1%
Not Hispanic	10,972	87.6%	26	0.2%	219	2.0%	5,679	51.8%	80	0.7%	4,750	43.3%	218	2.0%
Total	12,520	100.0%	40	0.3%	225	1.8%	6,107	48.8%	112	0.9%	5,739	45.8%	297	2.4%
238 Pro Action of Steuben County WIC Program														
Hispanic	86	2.7%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	77	89.5%	9	10.5%
Not Hispanic	3,080	97.3%	7	0.2%	12	0.4%	45	1.5%	1	0.0%	2,932	95.2%	83	2.7%
Total	3,166	100.0%	7	0.2%	12	0.4%	45	1.4%	1	0.0%	3,009	95.0%	92	2.9%

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Western Region

LA#/LA Name	Total		American Indian or		Asian		Black or African		Native Hawaiian or		White		Two or More	
	Participants		Alaskan Native				American		Pacific Islander				Races	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
301 Allegany County Health Department														
Hispanic	36	2.2%	2	5.6%	0	0.0%	1	2.8%	0	0.0%	32	88.9%	1	2.8%
Not Hispanic	1,622	97.8%	0	0.0%	7	0.4%	14	0.9%	1	0.1%	1,580	97.4%	20	1.2%
Total	1,658	100.0%	2	0.1%	7	0.4%	15	0.9%	1	0.1%	1,612	97.2%	21	1.3%
Region Total														
Hispanic	10,018	12.5%	199	2.0%	32	0.3%	1,739	17.4%	315	3.1%	7,177	71.6%	556	5.6%
Not Hispanic	70,364	87.5%	298	0.4%	917	1.3%	19,737	28.0%	277	0.4%	47,150	67.0%	1,985	2.8%
Total	80,382	100.0%	497	0.6%	949	1.2%	21,476	26.7%	592	0.7%	54,327	67.6%	2,541	3.2%
State Total														
Hispanic	261,547	37.5%	85,428	32.7%	1,592	0.6%	29,133	11.1%	10,569	4.0%	122,082	46.7%	12,743	4.9%
Not Hispanic	436,476	62.5%	6,003	1.4%	51,461	11.8%	167,282	38.3%	6,617	1.5%	194,576	44.6%	10,537	2.4%
Total	698,023	100.0%	91,431	13.1%	53,053	7.6%	196,415	28.1%	17,186	2.5%	316,658	45.4%	23,280	3.3%

Ethnicity and RaceRegional Report for **April 2008 - September 2008**

Metro Region

LA#/LA Name	Total		American Indian or		Asian		Black or African		Native Hawaiian or		White		Two or More	
	Participants		Alaskan Native				American		Pacific Islander				Races	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
240 Ulster County Department of Health														
Hispanic	649	22.2%	8	1.2%	2	0.3%	31	4.8%	3	0.5%	603	92.9%	2	0.3%
Not Hispanic	2,277	77.8%	2	0.1%	43	1.9%	301	13.2%	4	0.2%	1,900	83.4%	27	1.2%
Total	2,926	100.0%	10	0.3%	45	1.5%	332	11.3%	7	0.2%	2,503	85.5%	29	1.0%
241 Sullivan County Public Health - WIC														
Hispanic	749	25.2%	425	56.7%	2	0.3%	44	5.9%	37	4.9%	174	23.2%	67	8.9%
Not Hispanic	2,221	74.8%	53	2.4%	15	0.7%	354	15.9%	7	0.3%	1,722	77.5%	70	3.2%
Total	2,970	100.0%	478	16.1%	17	0.6%	398	13.4%	44	1.5%	1,896	63.8%	137	4.6%
242 Putnam County Health Department														
Hispanic	765	58.8%	21	2.7%	1	0.1%	6	0.8%	1	0.1%	732	95.7%	4	0.5%
Not Hispanic	535	41.2%	1	0.2%	24	4.5%	30	5.6%	1	0.2%	473	88.4%	6	1.1%
Total	1,300	100.0%	22	1.7%	25	1.9%	36	2.8%	2	0.2%	1,205	92.7%	10	0.8%
243 Orange County Health Department														
Hispanic	3,203	32.4%	226	7.1%	5	0.2%	182	5.7%	15	0.5%	2,730	85.2%	45	1.4%
Not Hispanic	6,690	67.6%	29	0.4%	37	0.6%	1,122	16.8%	11	0.2%	5,446	81.4%	45	0.7%
Total	9,893	100.0%	255	2.6%	42	0.4%	1,304	13.2%	26	0.3%	8,176	82.6%	90	0.9%
244 Rockland County Health Department														
Hispanic	4,090	33.7%	1,305	31.9%	3	0.1%	56	1.4%	90	2.2%	2,573	62.9%	63	1.5%
Not Hispanic	8,064	66.3%	36	0.4%	98	1.2%	1,280	15.9%	26	0.3%	6,554	81.3%	70	0.9%
Total	12,154	100.0%	1,341	11.0%	101	0.8%	1,336	11.0%	116	1.0%	9,127	75.1%	133	1.1%
245 Hudson River Health Care														
Hispanic	3,216	44.8%	2,127	66.1%	12	0.4%	95	3.0%	90	2.8%	790	24.6%	102	3.2%
Not Hispanic	3,968	55.2%	137	3.5%	160	4.0%	1,498	37.8%	37	0.9%	2,026	51.1%	110	2.8%
Total	7,184	100.0%	2,264	31.5%	172	2.4%	1,593	22.2%	127	1.8%	2,816	39.2%	212	3.0%
246 Open Door WIC														
Hispanic	2,611	86.3%	275	10.5%	2	0.1%	62	2.4%	9	0.3%	2,234	85.6%	29	1.1%
Not Hispanic	413	13.7%	7	1.7%	36	8.7%	200	48.4%	4	1.0%	160	38.7%	6	1.5%
Total	3,024	100.0%	282	9.3%	38	1.3%	262	8.7%	13	0.4%	2,394	79.2%	35	1.2%

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Metro Region

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	Participants		Alaskan Native				American		Pacific Islander				Races	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
247 Mount Vernon Neighborhood Health Center														
Hispanic	3,347	42.4%	2,346	70.1%	2	0.1%	134	4.0%	47	1.4%	773	23.1%	45	1.3%
Not Hispanic	4,542	57.6%	181	4.0%	140	3.1%	3,778	83.2%	84	1.8%	335	7.4%	24	0.5%
Total	7,889	100.0%	2,527	32.0%	142	1.8%	3,912	49.6%	131	1.7%	1,108	14.0%	69	0.9%
248 Sound Shore Medical Center														
Hispanic	5,552	46.5%	299	5.4%	7	0.1%	411	7.4%	41	0.7%	4,671	84.1%	123	2.2%
Not Hispanic	6,386	53.5%	82	1.3%	99	1.6%	5,495	86.0%	64	1.0%	597	9.3%	49	0.8%
Total	11,938	100.0%	381	3.2%	106	0.9%	5,906	49.5%	105	0.9%	5,268	44.1%	172	1.4%
249 Westchester County Department of Health														
Hispanic	8,052	69.6%	1,214	15.1%	10	0.1%	303	3.8%	48	0.6%	6,307	78.3%	170	2.1%
Not Hispanic	3,525	30.4%	74	2.1%	136	3.9%	2,110	59.9%	33	0.9%	1,118	31.7%	54	1.5%
Total	11,577	100.0%	1,288	11.1%	146	1.3%	2,413	20.8%	81	0.7%	7,425	64.1%	224	1.9%
250 NENA Comprehensive Health Center														
Hispanic	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Not Hispanic	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Total	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
251 East Harlem Council For Human Services. Inc.														
Hispanic	934	72.6%	826	88.4%	0	0.0%	19	2.0%	3	0.3%	23	2.5%	63	6.7%
Not Hispanic	353	27.4%	20	5.7%	2	0.6%	310	87.8%	0	0.0%	8	2.3%	13	3.7%
Total	1,287	100.0%	846	65.7%	2	0.2%	329	25.6%	3	0.2%	31	2.4%	76	5.9%
252 W. F. Ryan Community Health Center														
Hispanic	2,965	68.8%	673	22.7%	7	0.2%	400	13.5%	30	1.0%	1,731	58.4%	124	4.2%
Not Hispanic	1,342	31.2%	11	0.8%	108	8.0%	1,044	77.8%	8	0.6%	144	10.7%	27	2.0%
Total	4,307	100.0%	684	15.9%	115	2.7%	1,444	33.5%	38	0.9%	1,875	43.5%	151	3.5%
253 Gouverneur Hospital														
Hispanic	2,192	27.4%	17	0.8%	33	1.5%	548	25.0%	23	1.0%	1,525	69.6%	46	2.1%
Not Hispanic	5,802	72.6%	1	0.0%	5,145	88.7%	307	5.3%	4	0.1%	139	2.4%	206	3.6%
Total	7,994	100.0%	18	0.2%	5,178	64.8%	855	10.7%	27	0.3%	1,664	20.8%	252	3.2%

Ethnicity and RaceRegional Report for **April 2008 - September 2008**

Metro Region

LA#/LA Name	Total		American Indian or		Asian		Black or African		Native Hawaiian or		White		Two or More	
	Participants		Alaskan Native				American		Pacific Islander				Races	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
254 Bellevue Hospital Center														
Hispanic	4,260	66.2%	3,866	90.8%	13	0.3%	74	1.7%	77	1.8%	129	3.0%	101	2.4%
Not Hispanic	2,174	33.8%	92	4.2%	619	28.5%	968	44.5%	60	2.8%	360	16.6%	75	3.4%
Total	6,434	100.0%	3,958	61.5%	632	9.8%	1,042	16.2%	137	2.1%	489	7.6%	176	2.7%
255 New York Downtown Hospital WIC Program														
Hispanic	280	8.9%	14	5.0%	34	12.1%	46	16.4%	2	0.7%	179	63.9%	5	1.8%
Not Hispanic	2,857	91.1%	1	0.0%	2,670	93.5%	121	4.2%	9	0.3%	39	1.4%	17	0.6%
Total	3,137	100.0%	15	0.5%	2,704	86.2%	167	5.3%	11	0.4%	218	6.9%	22	0.7%
256 Luke's Roosevelt Hospital Center														
Hispanic	1,834	58.9%	568	31.0%	16	0.9%	523	28.5%	100	5.5%	605	33.0%	22	1.2%
Not Hispanic	1,278	41.1%	23	1.8%	94	7.4%	993	77.7%	13	1.0%	149	11.7%	6	0.5%
Total	3,112	100.0%	591	19.0%	110	3.5%	1,516	48.7%	113	3.6%	754	24.2%	28	0.9%
257 Northern Manhattan Network														
Hispanic	2,792	34.1%	1,863	66.7%	3	0.1%	425	15.2%	45	1.6%	369	13.2%	87	3.1%
Not Hispanic	5,384	65.9%	102	1.9%	27	0.5%	5,120	95.1%	24	0.4%	71	1.3%	40	0.7%
Total	8,176	100.0%	1,965	24.0%	30	0.4%	5,545	67.8%	69	0.8%	440	5.4%	127	1.6%
258 Lincoln Medical Center WIC														
Hispanic	5,915	68.2%	3,021	51.1%	6	0.1%	544	9.2%	16	0.3%	1,308	22.1%	1,020	17.2%
Not Hispanic	2,758	31.8%	55	2.0%	74	2.7%	2,484	90.1%	34	1.2%	45	1.6%	66	2.4%
Total	8,673	100.0%	3,076	35.5%	80	0.9%	3,028	34.9%	50	0.6%	1,353	15.6%	1,086	12.5%
259 Hunts Point Multi-Service Center														
Hispanic	1,217	73.3%	491	40.3%	0	0.0%	439	36.1%	8	0.7%	227	18.7%	52	4.3%
Not Hispanic	444	26.7%	10	2.3%	2	0.5%	410	92.3%	2	0.5%	12	2.7%	8	1.8%
Total	1,661	100.0%	501	30.2%	2	0.1%	849	51.1%	10	0.6%	239	14.4%	60	3.6%
260 XX - Dr. Martin Luther King Jr. Health Center														
Hispanic	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Not Hispanic	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Total	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%

Ethnicity and RaceRegional Report for **April 2008 - September 2008**

Metro Region

LA#/LA Name	Total		American Indian or		Asian		Black or African		Native Hawaiian or		White		Two or More	
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	N	%	N	%	N	%	N	%	N	%	N	%	N	%
261 North Central Bronx-Jacobi Medical Center WIC														
Hispanic	5,394	49.5%	4,628	85.8%	17	0.3%	171	3.2%	293	5.4%	208	3.9%	77	1.4%
Not Hispanic	5,498	50.5%	312	5.7%	837	15.2%	3,326	60.5%	268	4.9%	693	12.6%	62	1.1%
Total	10,892	100.0%	4,940	45.4%	854	7.8%	3,497	32.1%	561	5.2%	901	8.3%	139	1.3%
262 Columbia Presbyterian Hospital WIC Program														
Hispanic	14,385	92.1%	4,228	29.4%	6	0.0%	1,464	10.2%	1,407	9.8%	5,081	35.3%	2,199	15.3%
Not Hispanic	1,235	7.9%	77	6.2%	58	4.7%	711	57.6%	49	4.0%	272	22.0%	68	5.5%
Total	15,620	100.0%	4,305	27.6%	64	0.4%	2,175	13.9%	1,456	9.3%	5,353	34.3%	2,267	14.5%
263 St. Vincent CMC - Manhattan														
Hispanic	531	16.0%	27	5.1%	26	4.9%	71	13.4%	2	0.4%	336	63.3%	69	13.0%
Not Hispanic	2,794	84.0%	1	0.0%	2,327	83.3%	293	10.5%	17	0.6%	136	4.9%	20	0.7%
Total	3,325	100.0%	28	0.8%	2,353	70.8%	364	10.9%	19	0.6%	472	14.2%	89	2.7%
264 Morrisania D& T Center														
Hispanic	7,209	71.4%	2,954	41.0%	13	0.2%	3,375	46.8%	225	3.1%	393	5.5%	249	3.5%
Not Hispanic	2,892	28.6%	41	1.4%	132	4.6%	2,589	89.5%	52	1.8%	43	1.5%	35	1.2%
Total	10,101	100.0%	2,995	29.7%	145	1.4%	5,964	59.0%	277	2.7%	436	4.3%	284	2.8%
265 Union Hospital of the Bronx - WIC														
Hispanic	8,120	75.8%	2,026	25.0%	10	0.1%	399	4.9%	159	2.0%	5,368	66.1%	158	1.9%
Not Hispanic	2,591	24.2%	49	1.9%	82	3.2%	2,193	84.6%	19	0.7%	217	8.4%	31	1.2%
Total	10,711	100.0%	2,075	19.4%	92	0.9%	2,592	24.2%	178	1.7%	5,585	52.1%	189	1.8%
266 XX - Soundview Health Center WIC														
Hispanic	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Not Hispanic	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Total	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
267 Bronx Lebanon Hospital Center														
Hispanic	2,632	54.8%	2,119	80.5%	1	0.0%	156	5.9%	11	0.4%	323	12.3%	22	0.8%
Not Hispanic	2,174	45.2%	67	3.1%	54	2.5%	1,956	90.0%	53	2.4%	27	1.2%	17	0.8%
Total	4,806	100.0%	2,186	45.5%	55	1.1%	2,112	43.9%	64	1.3%	350	7.3%	39	0.8%

Division of Nutrition

Ethnicity and Race

Regional Report for April 2008 - September 2008

Metro Region

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	Participants		Alaskan Native				American		Pacific Islander				Races	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
268 North General Hospital WIC Program														
Hispanic	2,637	63.5%	1,431	54.3%	4	0.2%	198	7.5%	18	0.7%	859	32.6%	127	4.8%
Not Hispanic	1,515	36.5%	25	1.7%	27	1.8%	1,354	89.4%	9	0.6%	76	5.0%	24	1.6%
Total	4,152	100.0%	1,456	35.1%	31	0.7%	1,552	37.4%	27	0.7%	935	22.5%	151	3.6%
269 Morris Heights Health Center														
Hispanic	6,149	66.9%	5,456	88.7%	2	0.0%	288	4.7%	52	0.8%	189	3.1%	162	2.6%
Not Hispanic	3,038	33.1%	300	9.9%	54	1.8%	2,460	81.0%	80	2.6%	41	1.3%	103	3.4%
Total	9,187	100.0%	5,756	62.7%	56	0.6%	2,748	29.9%	132	1.4%	230	2.5%	265	2.9%
270 Montefiore Medical Center														
Hispanic	7,803	58.2%	1,038	13.3%	91	1.2%	2,254	28.9%	817	10.5%	3,475	44.5%	128	1.6%
Not Hispanic	5,597	41.8%	196	3.5%	386	6.9%	3,631	64.9%	810	14.5%	488	8.7%	86	1.5%
Total	13,400	100.0%	1,234	9.2%	477	3.6%	5,885	43.9%	1,627	12.1%	3,963	29.6%	214	1.6%
273 Urban Health Plan, Inc.														
Hispanic	5,144	74.6%	4,404	85.6%	1	0.0%	268	5.2%	67	1.3%	261	5.1%	143	2.8%
Not Hispanic	1,749	25.4%	102	5.8%	66	3.8%	1,462	83.6%	19	1.1%	50	2.9%	50	2.9%
Total	6,893	100.0%	4,506	65.4%	67	1.0%	1,730	25.1%	86	1.2%	311	4.5%	193	2.8%
274 Maimonides Medical Center														
Hispanic	2,662	18.9%	1,277	48.0%	204	7.7%	168	6.3%	72	2.7%	902	33.9%	39	1.5%
Not Hispanic	11,418	81.1%	153	1.3%	4,291	37.6%	172	1.5%	76	0.7%	6,589	57.7%	137	1.2%
Total	14,080	100.0%	1,430	10.2%	4,495	31.9%	340	2.4%	148	1.1%	7,491	53.2%	176	1.3%
275 Jamaica Hospital														
Hispanic	6,211	48.4%	2,470	39.8%	59	0.9%	1,762	28.4%	416	6.7%	627	10.1%	877	14.1%
Not Hispanic	6,624	51.6%	243	3.7%	1,934	29.2%	2,594	39.2%	801	12.1%	446	6.7%	606	9.1%
Total	12,835	100.0%	2,713	21.1%	1,993	15.5%	4,356	33.9%	1,217	9.5%	1,073	8.4%	1,483	11.6%
276 Queens Hospital WIC														
Hispanic	1,212	11.1%	67	5.5%	321	26.5%	190	15.7%	181	14.9%	431	35.6%	22	1.8%
Not Hispanic	9,706	88.9%	26	0.3%	3,181	32.8%	5,773	59.5%	330	3.4%	298	3.1%	98	1.0%
Total	10,918	100.0%	93	0.9%	3,502	32.1%	5,963	54.6%	511	4.7%	729	6.7%	120	1.1%

Ethnicity and RaceRegional Report for **April 2008 - September 2008**

Metro Region

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	N	%	N	%	N	%	N	%	N	%	N	%	N	%
277 Caritas Health Care														
Hispanic	1,292	38.1%	38	2.9%	9	0.7%	642	49.7%	14	1.1%	572	44.3%	17	1.3%
Not Hispanic	2,097	61.9%	11	0.5%	379	18.1%	766	36.5%	187	8.9%	716	34.1%	38	1.8%
Total	3,389	100.0%	49	1.4%	388	11.4%	1,408	41.5%	201	5.9%	1,288	38.0%	55	1.6%
278 Bedford Stuyvesant Family Health Center, Inc.														
Hispanic	363	7.0%	47	12.9%	1	0.3%	213	58.7%	6	1.7%	91	25.1%	5	1.4%
Not Hispanic	4,846	93.0%	14	0.3%	83	1.7%	4,641	95.8%	41	0.8%	43	0.9%	24	0.5%
Total	5,209	100.0%	61	1.2%	84	1.6%	4,854	93.2%	47	0.9%	134	2.6%	29	0.6%
279 Brownsville Multi-Service WIC														
Hispanic	807	15.1%	25	3.1%	1	0.1%	329	40.8%	11	1.4%	422	52.3%	19	2.4%
Not Hispanic	4,539	84.9%	5	0.1%	4	0.1%	4,420	97.4%	6	0.1%	82	1.8%	22	0.5%
Total	5,346	100.0%	30	0.6%	5	0.1%	4,749	88.8%	17	0.3%	504	9.4%	41	0.8%
280 Brookdale Hospital and Medical Center														
Hispanic	624	11.0%	31	5.0%	1	0.2%	449	72.0%	14	2.2%	124	19.9%	5	0.8%
Not Hispanic	5,032	89.0%	10	0.2%	27	0.5%	4,884	97.1%	40	0.8%	29	0.6%	42	0.8%
Total	5,656	100.0%	41	0.7%	28	0.5%	5,333	94.3%	54	1.0%	153	2.7%	47	0.8%
281 Public Health Solutions														
Hispanic	28,239	46.6%	5,613	19.9%	181	0.6%	2,382	8.4%	2,423	8.6%	17,049	60.4%	591	2.1%
Not Hispanic	32,354	53.4%	735	2.3%	10,988	34.0%	10,044	31.0%	917	2.8%	9,298	28.7%	372	1.1%
Total	60,593	100.0%	6,348	10.5%	11,169	18.4%	12,426	20.5%	3,340	5.5%	26,347	43.5%	963	1.6%
282 XX - Lyndon B. Johnson Health Complex														
Hispanic	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Not Hispanic	2	100.0%	0	0.0%	0	0.0%	2	100.0%	0	0.0%	0	0.0%	0	0.0%
Total	2	100.0%	0	0.0%	0	0.0%	2	100.0%	0	0.0%	0	0.0%	0	0.0%
283 Sunset Park Family Health Center														
Hispanic	7,744	50.2%	2,485	32.1%	83	1.1%	186	2.4%	124	1.6%	4,768	61.6%	98	1.3%
Not Hispanic	7,691	49.8%	55	0.7%	6,291	81.8%	122	1.6%	65	0.8%	1,119	14.5%	39	0.5%
Total	15,435	100.0%	2,540	16.5%	6,374	41.3%	308	2.0%	189	1.2%	5,887	38.1%	137	0.9%

Ethnicity and RaceRegional Report for **April 2008 - September 2008**

Metro Region

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	N	%	N	%	N	%	N	%	N	%	N	%	N	%
284 Interfaith Medical Center														
Hispanic	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Not Hispanic	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
Total	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%	0	0.0%
285 Wyckoff Heights Medical Center														
Hispanic	7,759	68.5%	3,193	41.2%	27	0.3%	1,169	15.1%	23	0.3%	2,187	28.2%	1,160	15.0%
Not Hispanic	3,562	31.5%	180	5.1%	184	5.2%	1,087	30.5%	38	1.1%	1,557	43.7%	516	14.5%
Total	11,321	100.0%	3,373	29.8%	211	1.9%	2,256	19.9%	61	0.5%	3,744	33.1%	1,676	14.8%
286 Brooklyn Hospital Center														
Hispanic	3,458	21.5%	983	28.4%	14	0.4%	1,186	34.3%	412	11.9%	813	23.5%	50	1.4%
Not Hispanic	12,622	78.5%	104	0.8%	597	4.7%	9,942	78.8%	199	1.6%	1,666	13.2%	114	0.9%
Total	16,080	100.0%	1,087	6.8%	611	3.8%	11,128	69.2%	611	3.8%	2,479	15.4%	164	1.0%
287 Coney Island Hospital														
Hispanic	2,328	40.2%	51	2.2%	16	0.7%	98	4.2%	21	0.9%	2,132	91.6%	10	0.4%
Not Hispanic	3,456	59.8%	7	0.2%	1,195	34.6%	1,142	33.0%	20	0.6%	1,076	31.1%	16	0.5%
Total	5,784	100.0%	58	1.0%	1,211	20.9%	1,240	21.4%	41	0.7%	3,208	55.5%	26	0.4%
288 East New York Diagnostic & Treatment Center														
Hispanic	1,141	27.5%	40	3.5%	1	0.1%	779	68.3%	33	2.9%	268	23.5%	20	1.8%
Not Hispanic	3,010	72.5%	46	1.5%	73	2.4%	2,755	91.5%	80	2.7%	33	1.1%	23	0.8%
Total	4,151	100.0%	86	2.1%	74	1.8%	3,534	85.1%	113	2.7%	301	7.3%	43	1.0%
289 Caribbean Women's Health Association														
Hispanic	179	4.8%	14	7.8%	2	1.1%	138	77.1%	5	2.8%	17	9.5%	3	1.7%
Not Hispanic	3,576	95.2%	1	0.0%	20	0.6%	3,525	98.6%	6	0.2%	5	0.1%	19	0.5%
Total	3,755	100.0%	15	0.4%	22	0.6%	3,663	97.5%	11	0.3%	22	0.6%	22	0.6%
290 Cumberland Diagnostic & Treatment														
Hispanic	724	21.5%	28	3.9%	2	0.3%	416	57.5%	50	6.9%	219	30.2%	9	1.2%
Not Hispanic	2,647	78.5%	20	0.8%	30	1.1%	2,422	91.5%	63	2.4%	103	3.9%	9	0.3%
Total	3,371	100.0%	48	1.4%	32	0.9%	2,838	84.2%	113	3.4%	322	9.6%	18	0.5%

Ethnicity and Race

Regional Report for April 2008 - September 2008

Metro Region

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291 Kings County Hospital														
Hispanic	892	6.2%	27	3.0%	5	0.6%	546	61.2%	33	3.7%	249	27.9%	32	3.6%
Not Hispanic	13,465	93.8%	33	0.2%	45	0.3%	12,822	95.2%	115	0.9%	366	2.7%	84	0.6%
Total	14,357	100.0%	60	0.4%	50	0.3%	13,368	93.1%	148	1.0%	615	4.3%	116	0.8%
292 Woodhull Medical Center WIC														
Hispanic	4,473	57.4%	278	6.2%	7	0.2%	849	19.0%	36	0.8%	3,097	69.2%	206	4.6%
Not Hispanic	3,314	42.6%	82	2.5%	132	4.0%	2,073	62.6%	36	1.1%	948	28.6%	43	1.3%
Total	7,787	100.0%	360	4.6%	139	1.8%	2,922	37.5%	72	0.9%	4,045	51.9%	249	3.2%
293 Joseph P. Addabbo Family Health Center														
Hispanic	1,945	30.0%	875	45.0%	1	0.1%	355	18.3%	204	10.5%	455	23.4%	55	2.8%
Not Hispanic	4,542	70.0%	131	2.9%	24	0.5%	3,737	82.3%	73	1.6%	499	11.0%	78	1.7%
Total	6,487	100.0%	1,006	15.5%	25	0.4%	4,092	63.1%	277	4.3%	954	14.7%	133	2.1%
294 O.D.A. of Williamsburg														
Hispanic	737	8.0%	16	2.2%	0	0.0%	86	11.7%	5	0.7%	619	84.0%	11	1.5%
Not Hispanic	8,455	92.0%	3	0.0%	5	0.1%	38	0.4%	2	0.0%	8,371	99.0%	36	0.4%
Total	9,192	100.0%	19	0.2%	5	0.1%	124	1.3%	7	0.1%	8,990	97.8%	47	0.5%
295 Richmond University Medical Center WIC Program														
Hispanic	2,900	50.0%	2,245	77.4%	3	0.1%	72	2.5%	23	0.8%	457	15.8%	100	3.4%
Not Hispanic	2,900	50.0%	65	2.2%	110	3.8%	1,686	58.1%	159	5.5%	731	25.2%	149	5.1%
Total	5,800	100.0%	2,310	39.8%	113	1.9%	1,758	30.3%	182	3.1%	1,188	20.5%	249	4.3%
296 Staten Island Hospital WIC														
Hispanic	2,049	41.0%	117	5.7%	4	0.2%	51	2.5%	1	0.0%	1,825	89.1%	51	2.5%
Not Hispanic	2,947	59.0%	7	0.2%	184	6.2%	937	31.8%	16	0.5%	1,753	59.5%	50	1.7%
Total	4,996	100.0%	124	2.5%	188	3.8%	988	19.8%	17	0.3%	3,578	71.6%	101	2.0%
297 Elmhurst Hospital Center														
Hispanic	8,700	69.2%	1,077	12.4%	130	1.5%	39	0.4%	368	4.2%	6,980	80.2%	106	1.2%
Not Hispanic	3,871	30.8%	77	2.0%	2,888	74.6%	252	6.5%	119	3.1%	490	12.7%	45	1.2%
Total	12,571	100.0%	1,154	9.2%	3,018	24.0%	291	2.3%	487	3.9%	7,470	59.4%	151	1.2%

Ethnicity and Race

Regional Report for April 2008 - September 2008

Metro Region

LA#/LA Name	Total		American Indian or		Asian	Black or African		Native Hawaiian or		White		Two or More		
	Participants		Alaskan Native			American		Pacific Islander				Races		
	N	%	N	%		N	%	N	%	N	%	N	%	
298 Suffolk County Health Department														
Hispanic	16,431	65.3%	3,363	20.5%	22	0.1%	357	2.2%	1,230	7.5%	10,789	65.7%	670	4.1%
Not Hispanic	8,739	34.7%	288	3.3%	465	5.3%	3,775	43.2%	161	1.8%	3,851	44.1%	199	2.3%
Total	25,170	100.0%	3,651	14.5%	487	1.9%	4,132	16.4%	1,391	5.5%	14,640	58.2%	869	3.5%
299 Nassau County Health Department														
Hispanic	12,175	68.0%	9,252	76.0%	13	0.1%	144	1.2%	421	3.5%	1,694	13.9%	651	5.3%
Not Hispanic	5,738	32.0%	525	9.1%	261	4.5%	3,772	65.7%	131	2.3%	903	15.7%	146	2.5%
Total	17,913	100.0%	9,777	54.6%	274	1.5%	3,916	21.9%	552	3.1%	2,597	14.5%	797	4.4%
300 Segundo Ruiz D & T Center														
Hispanic	3,084	85.0%	1,008	32.7%	2	0.1%	281	9.1%	2	0.1%	1,119	36.3%	672	21.8%
Not Hispanic	545	15.0%	27	5.0%	1	0.2%	429	78.7%	2	0.4%	13	2.4%	73	13.4%
Total	3,629	100.0%	1,035	28.5%	3	0.1%	710	19.6%	4	0.1%	1,132	31.2%	745	20.5%
302 Metropolitan Hospital Center - WIC														
Hispanic	6,033	76.8%	1,591	26.4%	2	0.0%	110	1.8%	13	0.2%	4,206	69.7%	111	1.8%
Not Hispanic	1,821	23.2%	77	4.2%	88	4.8%	1,387	76.2%	29	1.6%	212	11.6%	28	1.5%
Total	7,854	100.0%	1,668	21.2%	90	1.1%	1,497	19.1%	42	0.5%	4,418	56.3%	139	1.8%
303 The Greater Hudson Valley Health Center, Inc.														
Hispanic	1,463	67.8%	10	0.7%	3	0.2%	63	4.3%	1	0.1%	1,355	92.6%	31	2.1%
Not Hispanic	696	32.2%	3	0.4%	28	4.0%	301	43.2%	1	0.1%	292	42.0%	71	10.2%
Total	2,159	100.0%	13	0.6%	31	1.4%	364	16.9%	2	0.1%	1,647	76.3%	102	4.7%
304 Betances Health Center WIC														
Hispanic	479	31.3%	15	3.1%	8	1.7%	124	25.9%	3	0.6%	326	68.1%	3	0.6%
Not Hispanic	1,052	68.7%	0	0.0%	889	84.5%	127	12.1%	4	0.4%	27	2.6%	5	0.5%
Total	1,531	100.0%	15	1.0%	897	58.6%	251	16.4%	7	0.5%	353	23.1%	8	0.5%
305 LIJ Medical Center WIC														
Hispanic	726	24.2%	27	3.7%	1	0.1%	18	2.5%	9	1.2%	656	90.4%	15	2.1%
Not Hispanic	2,279	75.8%	96	4.2%	162	7.1%	823	36.1%	397	17.4%	744	32.6%	57	2.5%
Total	3,005	100.0%	123	4.1%	163	5.4%	841	28.0%	406	13.5%	1,400	46.6%	72	2.4%

Ethnicity and RaceRegional Report for **April 2008 - September 2008**

Metro Region

LA#/LA Name	Total Participants		American Indian or Alaskan Native		Asian		Black or African American		Native Hawaiian or Pacific Islander		White		Two or More Races	
	N	%	N	%	N	%	N	%	N	%	N	%	N	%
306 Yeled V'Yalda WIC														
Hispanic	210	2.8%	25	11.9%	32	15.2%	7	3.3%	19	9.0%	119	56.7%	8	3.8%
Not Hispanic	7,421	97.2%	12	0.2%	311	4.2%	29	0.4%	97	1.3%	6,906	93.1%	66	0.9%
Total	7,631	100.0%	37	0.5%	343	4.5%	36	0.5%	116	1.5%	7,025	92.1%	74	1.0%
307 Stony Brook Family Medicine WIC														
Hispanic	1,416	45.2%	696	49.2%	3	0.2%	27	1.9%	55	3.9%	461	32.6%	174	12.3%
Not Hispanic	1,719	54.8%	51	3.0%	83	4.8%	439	25.5%	16	0.9%	890	51.8%	240	14.0%
Total	3,135	100.0%	747	23.8%	86	2.7%	466	14.9%	71	2.3%	1,351	43.1%	414	13.2%
Region Total														
Hispanic	243,083	47.1%	84,880	34.9%	1,487	0.6%	26,222	10.8%	9,964	4.1%	109,205	44.9%	11,325	4.7%
Not Hispanic	272,782	52.9%	5,174	1.9%	48,505	17.8%	134,818	49.4%	6,028	2.2%	73,397	26.9%	4,860	1.8%
Total	515,865	100.0%	90,054	17.5%	49,992	9.7%	161,040	31.2%	15,992	3.1%	182,602	35.4%	16,185	3.1%
State Total														
Hispanic	261,547	37.5%	85,428	32.7%	1,592	0.6%	29,133	11.1%	10,569	4.0%	122,082	46.7%	12,743	4.9%
Not Hispanic	436,476	62.5%	6,003	1.4%	51,461	11.8%	167,282	38.3%	6,617	1.5%	194,576	44.6%	10,537	2.4%
Total	698,023	100.0%	91,431	13.1%	53,053	7.6%	196,415	28.1%	17,186	2.5%	316,658	45.4%	23,280	3.3%