

Processing Standards and Notice of Eligibility

Policy

USDA Federal Regulations: Processing standards. The local agencies shall process applicants within the following timeframes:

(1) Waiting lists. When the local agency is serving its maximum caseload, the local agency shall maintain a waiting list of individuals who visit the local agency to express interest in receiving Program benefits and who are likely to be served. However, in no case shall an applicant who requests placement on the waiting list be denied inclusion. State agencies may establish a policy which permits or requires local agencies to accept telephone requests for placement on the waiting list. The waiting list shall include the person's name, address or phone number, status (e.g., pregnant, breastfeeding, age of applicant), and the date he or she was placed on the waiting list. Individuals shall be notified of their placement on a waiting list within 20 days after they visit the local agency during clinic office hours to request Program benefits. For those State agencies establishing procedures to accept telephone requests for placement on a waiting list, individuals shall be notified of their placement on a waiting list within 20 days after contacting the local agency by phone. The competent professional authority shall apply the participant priority system as specified in paragraph (e)(4) of this section to the waiting list to ensure that the highest priority persons become Program participants first when caseload slots become available.

(2) Timeframes for processing applicants. (i) When the local agency is not serving its maximum caseload, the local agency shall accept applications, make eligibility determinations, notify the applicants of the decisions made and, if the applicants are to be enrolled, issue food, cash-value vouchers or food instruments. All of these actions shall be accomplished within the timeframes set forth below.

(ii) The processing timeframes shall begin when the individual visits the local agency during clinic office hours to make an oral or written request for Program benefits. To ensure that accurate records are kept of the date of such requests, the local agency shall, at the time of each request, record the applicant's name, address and the date. The remainder of the information necessary to determine eligibility shall be obtained by the time of certification. Medical data taken prior to certification may be used as provided in paragraph (g)(4) of this section.

(iii) The local agency shall act on applications within the following timeframes:

(A) Special nutritional risk applicants shall be notified of their eligibility or ineligibility within 10 days of the date of the first request for Program benefits. The State agency shall establish criteria for identifying categories of persons at special nutritional risk who require expedited services. At a minimum, however, these categories shall include pregnant women eligible as Priority I participants, and migrant farmworkers and their family members who soon plan to leave the jurisdiction of the local agency.

(B) All other applicants shall be notified of their eligibility or ineligibility within 20 days of the date of the first request for Program benefits.

(iv) Each local agency using a retail purchase system shall issue a food instrument(s) and if applicable cash-value voucher(s) to the participant at the same time as notification of certification. Such food instrument(s) and cash-value vouchers shall provide benefits for the current month or the remaining portion thereof and shall be redeemable immediately upon receipt by the participant. Local agencies may mail the initial food instrument(s) and if applicable cash-value vouchers with the notification of certification to those participants who meet the criteria for the receipt of food instruments through the mail, as provided in §246.12(r)(4).

Authority

7 CFR Part 246.7(f)(1)
7 CFR Part 246.7(f)(2)(i-ii)
7 CFR Part 246.7(f)(2)(iii)(A) *excerpt*
7 CFR Part 246.7(f)(2)(iii)(B)
7 CFR Part 246.7(f)(2)(iv)

Procedures

The date of the initial visit is referred to as the application date. It is recorded in the data system via the Scheduler (for appointments) or Clinic Services (for new families served as walk-in clients).

An initial visit is an in-person visit by an applicant to a local agency to request program benefits or a request made by telephone or other electronic means to schedule an appointment. This includes contacts with non-WIC agency staff, such as a receptionist or outreach worker.

Schedule applicants in the following categories for certification at the first available appointment and within 10 calendar days of the initial visit:

- Pregnant women,
- Breastfeeding women,
- Infants less than six months old, and
- Migrant farm workers.

Schedule applicants in all other categories for certification at the first available appointment and within 20 calendar days of the initial visit.

Exceptions: An applicant may prefer to or may need to schedule an appointment at a later date than the 10 or 20 days allowed due to transportation difficulties, child care issues, employment, or other conflicts. If the applicant (or parent/guardian) declines appointments offered within the required timeframe, the WIC staff member must document the processing standards exceeded

reason in the WIC data system. (This exception must be voluntary on the part of the applicant or parent/guardian.)

Applicants may be determined ineligible for services because:

- Household income exceeds the guidelines,
- They failed to bring proof of identity,
- They do not have a nutrition risk, or
- The Iowa WIC Program is serving only higher priority classes due to funding constraints.

An applicant would be considered ineligible if they are attempting to be certified and do not have an active WIC status. This includes applicants who have or have never been on the WIC Program before. (If a participant with a current active WIC status is no longer eligible for the program, they should be terminated and a termination notice shall be used. Information on this can be found in the Terminations policy.)

If a participant is found ineligible, no certification, the system will make the pending application ineligible. This will only happen if a potential participant has a pending application. The ineligible date will be effective the date the action was completed.

When the applicant is found ineligible at certification, follow these steps.

- Obtain the signature of the applicant or parent/guardian.
- Print the Notice of Ineligibility, an example of which can be found in the Certification, Eligibility and Coordination of Services Forms folder, and give it to the applicant.
- Place a comment/alert in the data system that the notice was printed and provided to the parent/guardian/participant.

When the applicant is found eligible at certification, follow these steps.

- Review Your Rights and Responsibilities as a WIC Participant with the participant or parent/caretaker, and obtain a signature. If obtaining an electronic signature for the Rights and Responsibilities is not possible, (i.e., equipment malfunction) clinic staff must obtain a signature on a hard copy Rights and Responsibilities form and then scan it into the participants record.
- Issue the eWIC card and obtain the authorizing signature for the participant or participant/caretaker after issuing food benefits.

When the local agency is serving its maximum caseload:

- the local agency shall maintain a waiting list of individuals who visit or call the local agency to express interest in receiving program benefits and who are likely to be served.
- The waiting list shall include the person's name, address or phone number, status (e.g., pregnant, breastfeeding, age of applicant), and the date he or she was placed on the waiting list.
- Individuals shall be notified of their placement on a waiting list within 20 days after they visit or contact the local agency during clinic office hours to request Program benefits.

Best Practices

Local agency personnel are strongly encouraged to collect information about language and physical challenges when scheduling appointments. This information will help staff communicate with the applicant and arrange for any accommodations such as:

- Interpretation services,
- Non-English language print materials,
- Signing services, or
- Taking certification services to a location that the applicant can access.

The following topics should be discussed when an applicant makes a certification appointment. The WIC Appointment Reminder should be printed and given or mailed to the applicant as a reminder of what they need to bring. An example of the WIC Appointment Reminder can be found in the Certification, Eligibility and Coordination of Services Forms folder.

- How to cancel or reschedule - give the applicant a telephone number to call to cancel or reschedule the certification appointment.
- Length of appointment - tell the applicant approximately, how long the appointment will last, so they can make plans for child care, school or work absences, other appointments, etc.
- Other services available - if the WIC clinic is co-located with other services, tell the applicant about their availability and provide a brief description.
- Who must come to the clinic - review the physical presence requirements that apply to the applicant and explain the options.
- Documents all applicants must bring - review the documents participants should bring to the appointment:
 - Proof of income OR proof of participation in Food Assistance, FIP, Medicaid, the Medicaid Home and Community Based Ill and Handicapped Services, or the Head Start/Early Head Start Income Adjunctive Eligibility Verification Form,
 - Proof of address for the household,
 - Proof of identity for each applicant and
 - Height, weight, hematocrit or hemoglobin data if the applicant has seen their primary care provider recently.
- Documents infants and children need to bring - review the documents parents/caretakers must bring to appointments for infants and children:
 - Prescriptions for contract non-exempt and non-contract formula,
 - Immunization records (for infants and children), and
 - Documentation of ongoing health care (for children exempt from the physical presence requirement).
- What happens at the clinic - Tell the applicant what will happen at the certification appointment.
 - Answer questions to determine income eligibility.
 - Have a health screening (not a complete physical exam).
 - Answer questions about diet.

- If found eligible, receive an eWIC card and instruction on how to obtain food benefits.

Nutrition assessment and nutrition education may be provided to applicants who are found ineligible. Local WIC personnel are encouraged to offer these services along with appropriate referrals for health and other social services.