Chapter 2 Certification

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# **Overview**

# Policy

Individuals applying for participation in the Arizona WIC Program will be screened, using procedures outlined in this chapter, to determine eligibility before they can be certified to participate.

# In This Chapter

This chapter is divided into 17 sections and 2 appendices, which detail the Certification process.

# Section A Certification Guidelines

# **Eligibility Determination**

The Local Agency staff determines if the applicant meets each of the following eligibility criteria:

- Residence
- Income
- Category
- Nutrition Risk

All participants will be screened and certified using the Health and Nutrition Delivery System (HANDS) automated system.

# Service Timeframe: Within 10 days

Priority I pregnant women, infants under six months of age, homeless, and migrants will be notified of their eligibility, ineligibility, or placement on a waiting list within 10 calendar days of the date of request for WIC services (visit the <u>Program Integrity, Clinic</u> <u>Operations section on AZWIC.gov</u> for the Waiting List Form). Refer to Section P, "Waiting Lists" for additional details regarding waiting lists. A request for WIC services is defined as the initial contact date an applicant reaches out to WIC by email, phone, text or participant portal.

# Service Timeframe: Within 20 days

All other applicants requesting WIC services will be notified of their eligibility or ineligibility or placement on a waiting list within 20 calendar days from the date of request for WIC services (visit the <u>Program Integrity, Clinic Operations section on</u> <u>AZWIC.gov</u> for the Waiting List Form). Refer to Section P, "Waiting Lists" for additional details regarding waiting lists. A request for WIC services is defined as the initial contact date an applicant reaches out to WIC by email, phone, text or participant portal.

# Extension of Timetable

An extension of an additional 5 calendar days, not to exceed 15 calendar days, for notifying Priority I pregnant women, infants under six months of age, homeless, and migrants may be granted by the State to Local Agencies.

A written request justifying the extension shall be received by the State agency and written approval shall be given to the Local Agency prior to implementation.

# **Components of Certification**

The following are components of Certification:

- WIC Participant Rights and Obligations Form (visit the Program Integrity, Clinic Operations section on <u>azwic.gov</u>)
- Physical Presence/Identification
- Residency Verification
- Racial/Ethnic Data
- Income Determination
- Categorical Eligibility
- Health and Nutrition Assessment
- WIC Code Identification
- Referrals and Education
- Food Package
- WIC Rules and Regulations

# Education Requirements for Participants at Certification

At initial Certification appointments, staff shall provide the following to the participants or their primary and secondary authorized representatives:

- a) An explanation of participant eligibility criteria including income, residency, category, and nutritional risk.
- b) An explanation of the WIC Participant Rights and Obligations, including, but not limited to, reading the highlighted sections of the WIC Participant Rights and Obligations form. Please refer to Section J for more information.
- c) An opportunity to designate up to two authorized representatives.
- d) An explanation of how to use their Food Benefits, including dates of use, how to use the benefits at the store, and an overview of their assigned WIC foods.
- e) Mandatory referrals to services. Please refer to <u>Chapter 6</u> for more details.
- f) An explanation of the length of the certification per each participant, certification end date, and frequency of visits during the certification. If the length of Certification changes (i.e., change to estimated or actual delivery date) or if the category changes (i.e., breastfeeding category change), the participants shall be verbally informed of the revised length of Certification when it occurs.

At subsequent Certification appointments, participants shall be given an explanation of the WIC Participant Rights and Obligations, including, but not limited to, reading the highlighted sections of the WIC Participant Rights and Obligations Guide. Staff shall check for understanding of the WIC Participant Rights and Obligations before obtaining a signature and providing referrals to services. In addition, staff shall assess participants' understanding of WIC eligibility criteria, allowable WIC foods, and the proper use of Food Benefits. **Note**: These services are not considered nutrition education, but are considered program education.

WIC staff will follow the Nutrition Education guidelines as outlined in <u>Chapter 7</u> of the Arizona WIC Policy and Procedure Manual.

# **Required Signatures**

DocuSign shall not be used if a participant is coming into the clinic for any reason. Electronic signatures in HANDS shall be obtained.

Signatures are required for the following:

- 1. The WIC Participant Rights and Obligations form (Please refer to Section H for more information)
- 2. Consent to collect anthropometric and biochemical data, and provide breastfeeding instruction (Please refer to Section F for more information)
- 3. When No Proof exists for Identification, Residency or Income or a Statement of Documentation shall be completed (Please refer to Section B, Section C and Section E for more information)
- 4. When the applicant declares Zero Income (Please refer to Section E for more information)
- 5. eWIC Card Issuance (Please refer to <u>Chapter 5</u> for additional information)
- 6. Breast pump issuance, if applicable (Please refer to <u>Chapter 19</u> for additional information)
- 7. Breastfeeding Peer Counseling referrals, if applicable (Please refer to <u>Chapter</u> <u>19</u> for additional information)
- 8. Language service waiver, if applicable (Please refer to <u>Chapter 9</u> for additional information)

**Note:** If a participant/applicant, Authorized Representative or Proxy is unable to write their name (for example, visually impaired, the person may mark "X" on the signature pad using the appropriate signature types, DocuSign, or paper forms, if applicable.

# **Electronic Submission of Documentation**

The Arizona WIC Program has a Participant Portal, which allows applicants to register and upload documentation such as proof of identity, residency, income and the Formula and Food Request form. Local Agencies also have the option of receiving documents electronically from participants such as proof of identity, residency, and the Formula and Food Request form. Local Agencies shall have a written comprehensive plan in coordination with their local IT department for accepting documents electronically in order to offer this option to participants. The comprehensive plan is to be filed at the Local Agency for Management Evaluations and shall include the following:

- What technologies will be used to accept documents
- How participant confidentiality will be protected
- How electronic files will be securely disposed of
- Guidance for staff on proper handling and processing of confidential information
- Monitoring to ensure the outlined procedures are followed and that participant confidentiality is being maintained

If an agency uses an option other than the Arizona WIC Program's Participant Portal for submission of electronic documents or protected information, Local Agencies assume full liability for confidentiality breaches.

**Note:** Documents submitted electronically shall not be scanned into HANDS unless directed to do so by the State Agency.

# Certification Periods and Categorical Eligibility

The WIC Program Services are provided to applicants based on categorical eligibility defined below and are based on the following certification time frames:

# Pregnant Woman

A pregnant woman is defined as a person who is pregnant (proof of pregnancy is not required).

Certification will be valid up to six weeks postpartum.

All documentation that includes the date when the Certification ends shall read "up to six weeks postpartum."

All data used to determine nutritional risk will be reflective of the woman's categorical status at the time of Certification. For example, a woman certified during pregnancy as at risk for anemia cannot be certified in the postpartum period using any hemoglobin or hematocrit value that was obtained during her pregnancy.

**Note:** If there is reason to suspect that a participant has falsely claimed to be pregnant, the State WIC Agency can request that proof of current pregnancy or previous pregnancy be provided.

# Postpartum Woman

A postpartum woman is defined as a person whose pregnancy has ended up to six months after the end of the pregnancy, regardless of the outcome.

A postpartum woman is certified according to the following criteria:

- A non-breastfeeding woman is certified as a postpartum woman from the time the pregnancy ends until six months postpartum.
- If a woman ceases to breastfeed prior to six months postpartum, they shall have their category changed to a postpartum woman, staff shall update the Breastfeeding Surveillance screen, and the postpartum woman shall be reassessed to identify WIC Codes.
- A pregnant woman enrolled in WIC who has had an abortion, spontaneous (miscarriage) or therapeutic, is eligible to receive Food Benefits up to six weeks past the date the pregnancy ended and can continue up to six months from the date her pregnancy ended as a postpartum participant.
- A pregnant woman who would have been eligible for the program during her pregnancy, who has had an abortion, spontaneous (miscarriage) or therapeutic, can also apply for Food Benefits. They are eligible for a total of six months of Food Benefits from the date the pregnancy ended.

All data used to determine nutritional risk will be reflective of the woman's categorical status at the time of Certification. For example, a woman certified during pregnancy as at risk for anemia cannot be certified in the postpartum period using any hemoglobin or hematocrit value that was obtained during her pregnancy.

# **Breastfeeding Woman**

A breastfeeding woman is defined as a person who breastfeeds an infant at least one time per day, up to infant's first birthday, or until she completely stops breastfeeding before the infant turns one year old.

A breastfeeding woman's certification is valid up to the infant's first birthday, or until the woman ceases breastfeeding, whichever occurs first.

A breastfeeding woman who requests, after the sixth month postpartum, more than the maximum amount of formula allowed for a partially (mostly) breastfed infant will no longer receive a food package or supplemental foods, but will continue to count as a WIC participant receiving nutrition and breastfeeding education, support, and referrals.

**Note:** When a breastfeeding woman who is more than six months postpartum stops breastfeeding, she becomes categorically ineligible.

A breastfeeding assessment shall be done before the issuance of Food Benefits at each Certification, Mid-Cert Assessment, when a breast pump is issued, and/or whenever the amount of formula the woman is requesting changes. The results of the assessment shall be documented in Notes in TGIF format, be used to provide individualized breastfeeding support, and to determine the appropriate food packages for her and her infant.

# Infant Less Than Six Months Old

A participant is defined as an infant until their first birthday (age one).

An infant under six months of age at the time of Certification is enrolled until the first birthday. Local Agencies shall evaluate the health status (Mid-Certification Assessment) of all infants at or above 140 days (approximately 20 weeks) from the start date of their active Certification. The Mid-Certification does not affect the ending Certification date.

## Infant More Than Six Months Old

A participant is defined as an infant until their first birthday (age one).

An infant more than six months of age at the time of Certification is enrolled for six months from the day of Certification.

## Child

A participant is defined as a child from one year of age (age one) until their fifth birthday (age 5).

A child is certified for a one-year period, ending with the end of the month in which the child reaches five years of age.

**Note:** If a child is still in a valid Certification period (has not yet received 12 food packages in the current Certification period) in the month in which they turn five, a food package may be issued, even if the pick-up is after the birthday.

# **Special Conditions**

The Certification period may be adjusted from the original ending Certification date for several reasons. It can be shortened as much as needed or extended by 30 days. Some reasons for adjusting Certification end dates include:

Difficulty in appointment scheduling or getting to the clinic for Certification due to extreme hardship, e.g., illness, imminent childbirth, inclement weather conditions, distance to travel, high cost of travel, or documented physical disability that prevents travel.

If the participant is found eligible to continue receiving program services, the new Certification period begins on the date the participant is certified again and receives the first set of Food Benefits in the new Certification period.

# Infant/Child with Safety Plan

A family with an infant or child may present with a safety plan. A safety plan is a written agreement that the Department of Child Safety (DCS) caseworker developed with the family that clearly describes the safety services that will be used to manage threats to a child's safety for up to 10 days. This infant or child is not considered a foster child and shall be included in the family's eligibility determination. One month of Food Benefits shall be issued and eligibility shall be reassessed at the next appointment. The safety plan shall be scanned into the participant's HANDS file.

**Note:** After the safety plan expires, the participant may present as a foster child with a Notice to Provider or may return to a parent's custody. If they return to a parent's custody, documentation may not exist as the safety plan expires.

# Section B Physical Presence and Identification

# **Physical Presence Policy for Certifications**

Each applicant to the WIC Program is required to be physically present at the time of WIC Certification. Under the WIC American Rescue Plan Act (ARPA) of 2021 waivers, physical presence may be waived if a concerted effort to obtain anthropometric data and/or biochemical data is made by WIC staff in advance of or at the time of the Certification.

Certifications may be completed via phone, virtual two-way video conferencing or in clinic, based on participant preference. If a Certification is completed remotely via phone or via virtual two-way video conferencing, the Client Not Present checkbox and the reason shall be selected in the Cert screen in HANDS.

## **Exceptions to Physical Presence for Certification**

Exceptions may be made for persons with permanent or temporary disabilities that make it difficult to attend the WIC Certification appointment. If the applicant meets an Exception and is not physically present, staff shall select the Exception reason in the Cert screen in HANDS. These include, but are not limited to, the following exceptions:

#### Exception 1

A condition that requires medical equipment that is not easily transportable.

## Exception 2

A medical condition that requires confinement to bed (including bed rest).

#### Exception 3

A serious illness that may be worsened by coming to the clinic.

#### **Exception 4**

A serious or contagious illness.

**Note:** If an applicant is hospitalized on an in-patient basis at the time of Certification, refer to Chapter 3, Section B regarding Food Benefit issuance.

While the above exceptions apply for physical presence, anthropometric data and/or biochemical data received from a provider and/or completed by the WIC clinic is required. Please see Section F, "Health and Nutrition Assessment" for more information on anthropometric and biochemical collection.

# **Documentation of Exceptions**

Local Agencies shall receive documentation from a provider or obtain via a patient portal indicating the anthropometric data was taken within 60 days for the participant(s) not present, and if applicable, biochemical data taken within 90 days, in order for a Certification or Mid-Certification Assessment to be completed. Documentation with only anthropometric and hemoglobin data shall not be scanned into HANDS. Please see Section F, "Health and Nutrition Assessment" for more information on anthropometric/biochemical collection.

# **Documentation of Identity**

All applicants shall present proof of identification at Certification appointments. For non-Certification appointments, staff shall verify identity by either reviewing the Authorized Representative's ID or using identifiers such as having the Authorized Representative verify their date of birth, address, and/or phone number. The documents that can be used as proof of identity are found on the Family screen for Authorized Representatives, and the Client screen for participants. Documentation of proof of identification for certifications can be provided to the clinic either in-person, digitally, verified using online verification portals, shown through a secure virtual platform, uploaded through the Participant Portal, or provided electronically per your local agency's electronic submission of documentation plan. These documents include:

- AHCCCS/TANF/SNAP award letter, card (TANF/SNAP EBT cards) only if they have the name on them, proof of eligibility card, or online verification portal^
- Birth certificate
- Clinic/hospital record or ID
- Crib card\*
- Driver's license/government ID/state ID
- Immunization record\*
- Known to WIC (not used for initial Certification)
- Military records/ID cards or discharge papers (DD214)
- Immigration or naturalization record
- Passport/visa/other country ID♦
- School photo ID
- Tribal card
- Arizona Address Confidentiality Program (ACP)
- Medical marijuana card
- Notice to Provider/DCS paperwork
- Vehicle registration
- Voter registration card
- Income tax return/W-2
- Verification of Certification (VOC)
- Employment pay stubs

\* Participant name and DOB may be completed by an Authorized Representative.
^ If proof states "baby girl or baby boy" and a last name, staff shall select 'forgot documentation' in HANDS, and ask for alternate Proof of ID that has their name to be provided within 30 days. However, foster children may have their legal name "baby girl or baby boy". In this case, staff shall document the first name to match the documentation provided. Once the Authorized Representative has an updated name for the participant, updated Proof of ID is required to update the name field in HANDS.
A passport/visa/other country ID that lists the name field as First Name Unknown (FNU) or Last Name Unknown (LNU) is an acceptable form of documentation.

**Note:** The eWIC card shall not be used as proof of identity. Clinic staff shall inform participants that proof of identification will be needed at each Certification, as the eWIC card is not sufficient proof of identity. Participants will only need an eWIC card and PIN when making WIC purchases at the store.

Staff shall not make copies of a proof of identity unless requested by the State Agency to aid in an investigation.

# No Proof of Identity due to Theft, Loss, or Disaster

When an applicant **has no proof** of identification as a result of being a victim of theft, loss, or disaster, the applicant shall sign the "No Proof Exists – ID/Address/Income" signature type found on the Family and Client screens in HANDS, which will become a part of their permanent record. If the Certification is completed remotely, staff shall send the envelope titled "Statement of Documentation" via DocuSign to the applicant that the required signatures are needed. The Statement of Documentation (if applicable) shall be completed within 30 days of certification in order to provide additional Food Benefits.

# Homeless Applicants/Participants

When an applicant **has no proof** of residency as a result of homelessness, the applicant shall sign the "No Proof Exists – ID/Address/Income" signature type found on the Family screen in HANDS, which will become a part of their permanent record. Staff will choose "No Proof Exists-ID/Address/Income" as the type of income documentation. If the Certification is completed remotely, staff shall send the envelope titled "Statement of Documentation" via DocuSign to the applicant's email address on file when documentation does not exist, and notify the applicant that the required signatures are needed. The Statement of Documentation (if applicable) shall be completed within 30 days of certification in order to provide additional Food Benefits.

# No Proof of Identity at Certification (Forgot Documentation)

When an applicant **has proof** of identification but did not bring it to the Certification appointment and is found eligible to receive Food Benefits, they are to be informed that they can receive Benefits for one month and will need to provide proof of identity before more Benefits are issued. A Forgot Document signature is not required. Local agencies may choose to collect a "Forgot Documentation – ID/Address/Income" signature in HANDS. The "Forgot Documentation – ID/Address/Income" signature type is accessible through the Family, Client, or Income screens. They are to be issued one month of Food Benefits and shall provide proof of identification to the clinic or electronically within 30 days.

# **Conditional Certification**

If there was missing documentation of proof of identification at the time of Certification, a 30-day Certification may be given. This is considered a "Conditional Certification," meaning there is pending eligibility documentation that must be provided in order to validate the full Certification period.

When participants provide missing proof of identity, those documentation fields in HANDS will be updated with the type of documentation that was provided.

If program documentation is not provided within the 30-day period, applicants are no longer presumed eligible and cannot receive WIC Benefits. In order to receive Benefits, the applicant will need to be recertified when proof is available. **Under no circumstances can a second, subsequent 30-day Certification period be used if the applicant fails to provide the required documentation of income, identification or residency.** Participants may only get one 30-day Conditional Certification until proof is provided.

# Change of Name during a Certification

If a participant has a name change during a Certification, updated proof of identification is required prior to making any changes in HANDS. Staff shall request proof of the name change be provided within 30 days, however, the Certification will remain active until the update can be made. Food Benefits may continue to be issued.

# Section C Residency

# Residency

All applicants are required to provide proof of residency within the state service area. This is the location or address where a potential participant routinely lives or spends the night.

**Note:** Staff shall not make photocopies of an applicant's proof of residency.

# State Service Area

The service area is defined by services available in a distinct geographical region of underserved eligible participants within the State of Arizona and state-approved areas bordering Arizona. Tribal members who live on reservations that border or are partially located in Arizona and who receive health services in Arizona are eligible for services from the Arizona WIC Program.

In determining when to move into additional areas or expand existing operations, the location of new clinics is subject to approval by the Arizona WIC Program Director. The number of potentially eligible participants in each area, the number being served, and proximity to existing sites will be taken into consideration when making this decision.

Participants will have the right to select a clinic within Arizona based on service and convenience in relation to residence, work, and where they receive their health services. Participants are not required to live in a specific geographic area, but they shall reside in Arizona and State Agency-approved areas bordering Arizona.

# **Documentation of Residency**

Documentation of residency (physical or mailing address) is required at each Certification and when there is a change of address during a Certification period. PO boxes are not acceptable for proof of residency. Documentation of proof of residency for certifications can be provided to the clinic either in-person, digitally, verified using online verification portals, shown through a secure virtual platform, uploaded through the Participant Portal, or provided electronically per your local agency's electronic submission of documentation plan. These documents include, but are not limited to:

- Arizona Address Confidentiality Program (ACP)
- AHCCCS/TANF/SNAP award letter, proof of eligibility card, or online verification portal
- Bill (utility, cable, phone, etc.)
- Driver's license /government ID/state ID
- Letter from homeowner indicating that person resides within their home

- Mail with postmark
- Pay stub with current address
- Shelter letter on letterhead
- Bank statements
- Notice to Provider/DCS paperwork
- Vehicle registration
- Voter registration card
- Income tax return/W-2
- Government ID showing address
- Clinic/hospital record or ID
- Rent or mortgage receipts (e.g., lease agreement)

The type of documentation is recorded on the Family screen in HANDS.

# Arizona Address Confidentiality Program (ACP)

If the participant provides an Address Confidentiality Program card for proof of residency, the staff shall:

- Document the new address as listed on the ACP card in the Mailing and Street Address fields in HANDS. If no address is listed, staff shall use the WIC clinic's address.
- Select Address Confidentiality Program for Proof of Address.
- Ask the participant for their updated phone number and request permission to contact them if necessary.
- If applicable, the breast pump release forms (loan agreements) for a family will be completed using the ACP card address, or if applicable, the WIC clinic's address.

**Note:** Staff are prohibited from asking ACP participants to disclose their actual address.

## Institutional Residence

If the participant resides in an institution (e.g., homeless shelter, shelter for victims of domestic violence, penal institution), the following conditions shall be met:

- WIC foods benefit the participant, not the institution (i.e., the institution shall not accrue financial or in-kind benefit from the resident's participation in WIC)
- WIC foods are used by the WIC participant only
- The institution allows and encourages the participant to purchase and consume WIC foods, and participate in all associated WIC services made available to participants by the Local Agency (e.g., education, referrals)

**Note:** Institutional proxies may not be issued Food Benefits for all WIC participants in their institutions.

# Non-Compliant Institutions

If the institution where a participant is staying is found to be noncompliant with any of the above three conditions:

- During the initial Certification, the participant will continue to receive all WIC Benefits.
- The participant applies for continuing Benefits and still resides in the institution; the Local Agency will discontinue provision of food other than formula and the participant will continue to be eligible for WIC education and health care referrals.
- The Local Agency will refer the participant to other accommodations, where possible.
- The State Agency will inform the institution of the required conditions listed above and that eligible residents will not be able to participate on WIC unless the conditions are met.

## No Proof of Residency due to Theft, Loss, or Disaster

When an applicant **has no proof** of residency as a result of being a victim of theft, loss, or disaster, the applicant shall sign the "No Proof Exists – ID/Address/Income" signature type found on the Family screen in HANDS, which will become a part of their permanent record. Staff will choose "No Proof Exists-ID/Address/Income" as the type of residency documentation. If the Certification is completed remotely, staff shall send the envelope titled "Statement of Documentation" via DocuSign to the applicant's email address on file when documentation does not exist, and notify the applicant that the required signatures are needed. The Statement of Documentation (if applicable) shall be completed within 30 days of certification in order to provide additional Food Benefits.

**Note:** Food Benefits shall not be withheld for failure to provide updated proof of residency during a Certification.

## Homeless Applicants/Participants

For homeless applicants/participants, the address of a friend, relative, or homeless institution through which the applicant/ participant could be contacted shall be collected, if possible. If this is not possible, the word "HOMELESS" or the WIC clinic's address shall be used. When an applicant **has no proof** of residency as a result of homelessness, the applicant shall sign the "No Proof Exists – ID/Address/Income" signature type found on the Family screen in HANDS, which will become a part of their permanent record. Staff will choose "No Proof Exists-ID/Address/Income" as the type of residency documentation. If the Certification is completed remotely, staff shall send the envelope titled "Statement of Documentation" via DocuSign to the applicant that the

required signatures are needed. The Statement of Documentation (if applicable) shall be completed within 30 days of certification in order to provide additional Food Benefits.

**Note:** Food Benefits shall not be withheld for failure to provide updated proof of residency during a Certification.

# Refugees

In order to meet the WIC Program residency requirement, an applicant shall live in the state in which he or she applies at the time of application. In most instances, refugees will not have a permanent place to live and, therefore, may be considered homeless. Program regulations allow State agencies to authorize the Certification of homeless individuals without proof of residency. There may be instances in which refugees are temporarily living in a private residence with a family and may still be deemed homeless. Refer to the **No Proof of Residency** section above for guidelines on documentation.

# No Proof of Residency at Certification (Forgot Documentation)

When an applicant **has proof** of residency but did not bring it to the Certification appointment and is found eligible to receive Benefits, they are to be informed that they can receive Benefits for one month and will need to provide proof of residency before more Benefits are issued. A Forgot Document signature is not required. Local agencies may choose to collect a "Forgot Documentation – ID/Address/Income" signature in HANDS. The "Forgot Documentation – ID/Address/Income" signature type is accessible through the Family, Client, or Income screens. They are to be issued one month of Food Benefits and shall provide proof of residency to the WIC clinic physically or submitted electronically within 30 days. See "Electronic Submission of Documentation" in Section A.

# **Conditional Certification**

If there was missing documentation of proof of residency at the time of Certification, a 30-day Certification may be given. This is considered a "Conditional Certification," meaning there is pending eligibility documentation that must be provided in order to validate the full Certification period.

When participants provide missing proof of residency, those documentation fields in HANDS will be updated with the type of documentation that was provided.

If program documentation is not provided within the 30-day period, applicants are no longer presumed eligible and cannot receive WIC Benefits. In order to receive Benefits, the applicant will need to be recertified when proof is available. **Under no circumstances can a second, subsequent 30-day Certification period be used if the applicant fails to provide the required documentation of income, identification or residency.** Participants may only get one 30-day Conditional Certification until proof is provided.

# Change of Address during a Certification

If there is a change of address during a Certification period and the participant does not have proof of the new address with them, staff shall enter the new address and select "Forgot Documentation" as the proof of residency. A Forgot Document signature is not required. Local agencies may choose to collect a "Forgot Documentation – ID/Address/Income" signature in HANDS. The "Forgot Documentation – ID/Address/Income" signature type is accessible through the Family, Client, or Income screens. Staff may issue up to three months of Food Benefits and have the participant provide proof at the next appointment. When proof of the new address is provided, staff shall update the proof of residency with the type of documentation provided.

**Note:** Food Benefits shall not be withheld for failure to provide updated proof of residency during a Certification.

# Section D Ethnicity and Race Data Collection

# **Race/Ethnicity Determination**

For guidance related to the collection of Race/Ethnicity, please refer to Chapter 9.

# Section E Income Eligibility

# Policy

WIC applicants shall have their income evaluated at each Certification using procedures outlined in this section.

WIC staff shall first attempt to determine if the applicant is adjunctively income-eligible before evaluating their income eligibility.

# Adjunctive Eligibility

When an applicant or, in some cases a family member, participates in a federal or state program with eligibility guidelines that are equal to or below the WIC income guidelines, the applicant is allowed to enroll in the WIC Program without duplication of their initial income screening.

An applicant is adjunctively income eligible for WIC if documentation shows that the individual is:

- Certified as fully eligible to receive benefits from SNAP (Supplemental Nutrition Assistance Program), AHCCCS (Arizona Health Care Cost Containment System) under Title XIX of the Social Security Act, including SOBRA (Sixth Omnibus Budget Reconciliation Act) and Transitional Medical Assistance (TMA), Temporary Assistance for Needy Families (TANF) program(s), Section 8 housing, or FDPIR (Food Distribution Program on Indian Reservations)
- A member of a household containing a TANF recipient or a pregnant woman or infant enrolled in AHCCCS

# AHCCCS Plans that Do Not Qualify for Adjunctive Eligibility

In Arizona, the following AHCCCS programs do not qualify an applicant as adjunctively eligible for the Arizona WIC Program, as the income determination level varies and may exceed 185% of the current Federal Poverty Guidelines:

- Behavioral Health
- Children's Health Insurance Program (CHIP)/ KidsCare

Additional guidance regarding adjunct eligibility is located on the <u>WIC Related tab of the</u> <u>Continuing Education Training Resources section of AZWIC.gov</u>

# Documentation of Adjunctive Eligibility

- Documentation of adjunct eligibility will be noted on the Income screen in HANDS under the Adjunct Eligibility section.
- Select "Part. Proof" for each of the adjunct eligibility programs the applicant shows proof of participation in.
- If they show documentation that a member of their household is a TANF recipient or there is a pregnant woman or infant enrolled in AHCCCS in their household, select "Fam Elig Proof" for those programs.

**Note:** The Adjunct Eligibility table in HANDS can only be updated on the date of Certification.

Acceptable forms of adjunctive eligibility documentation (which must include eligibility dates) are:

- TANF approval letter, proof of eligibility card, or online verification portal
- AHCCCS decision letter with current eligibility dates or printout from AHCCCS website of their personal AHCCCS eligibility dates
- AHCCCS online portal verification
- SNAP (Supplemental Nutrition Assistance Program) most recent certification letter, proof of eligibility card, or online verification portal
- Section 8 housing award letter, or HUD-50059 form
- FDPIR Notice of Eligibility letter

**Note:** TANF/SNAP cards and AHCCCS medical cards are not proof of adjunctive program participation, unless the card shows a current period of eligibility.

Eligibility and participation in an adjunctively eligible program can be confirmed with an official verification system, such as phone or online confirmation with AHCCCS. Arizona WIC only needs to see proof of eligibility/participation for one adjunctive eligibility program in order to meet the WIC Program's income guidelines.

**Note:** Documentation showing proof of participation in adjunctive eligibility programs may be used within 30 days as documentation of income. In addition, self-declaration is not allowed for adjunctive eligibility.

# Documentation of Income

The current income of the household shall be assessed at each Certification. Current income is defined as gross income received by the household during the last 28-31 consecutive days or the last 12 months, whichever is most representative of the family's status. If the last 28-31 days or the last 12 months is not the most representative of the family's status and income is being done prospectively, "current" refers to the income that will be available to the family in the next 28-31 days.

Gross income received by each member of the household/family shall be confirmed by paper or a verification system for the period of time (30 days or 12 months) that is being used to assess income. The number of family members is noted on the Income screen in HANDS.

Documentation of proof of income for certifications can be provided to the clinic either in-person, digitally, verified using online verification portals, shown through a secure virtual platform, uploaded through the Participant Portal, or provided electronically per your local agency's electronic submission of documentation plan. These documents include, but are not limited to:

- Employment pay stubs
- Income tax return/W-2 forms
- Unemployment letter/notice
- Statement signed and dated by employer
- Tax reporting forms showing total gross income
- Alimony or child support award letter
- Foster care placement letter (Warrant Stub)
- Military pay stubs/LES
- Scholarship/financial aid award letter
- Social Security benefits letter
- Contribution letter
- Retirement pension letter/stub
- Tribal payments

Note: Staff shall not make photocopies or scan applicants' proof of income.

Staff shall document income eligibility in the Income screen in HANDS as follows:

- 1.) Enter the appropriate family size.
- 2.) Enter name or source of income provider **if desired**, or leave default as "Primary Provider."
- 3.) Enter the dollar amount of current gross income based on income documentation provided.
- 4.) Enter the interval for that amount of income (i.e., hourly, weekly, monthly, annually).
- 5.) If hourly is selected, enter the number of hours per week.
- 6.) Enter correct type of income documentation from drop-down menu.
- 7.) If income proof is brought in, select all family members to which the income applies, regardless of whether they are being certified today. If the Authorized Representative forgot to bring income proof to Certification, "Forgot Documentation" is to be selected and staff shall only apply income to the applicant(s) being certified today.

**Note:** Do not apply income to a participant who has less than 90 days left in their Certification period, unless they are being recertified.

If applicant presents multiples of the same income documentation type (e.g., employment pay stubs), staff shall utilize the "Income Averaging" feature on the Income Screen in HANDS

# Determining Family Size

Family size is defined as a group of related or non-related individuals who are living together.

**Note**: It is possible for two or more separate families to reside at the same address. In order to be considered separate, each family shall have an adequate source of income to cover living expenses, such as rent, food, and utilities, for its members.

Include in the Family Size	Do Not Include in the Family Size
All Applicants	Separate families that reside at the same address that have separate sources of income to cover living expenses, such as food, bills, etc.
All expected infants of pregnant applicants	Expected infants if the applicant has a religious or cultural objection to including the infant
All income providers (parent(s), other family member(s), and others) that provide the applicant with financial support (e.g., food, bills, etc.)	Family member(s), parents, roommates, and others that do not provide financial support, such as food, bills, etc., if living with the applicant
All additional dependents of the income providers (e.g., non-WIC applicant/participant children (including adopted children), other family members, others)	
All significant others, including opposite and same sex partners (boyfriend, girlfriend, fiancé, domestic partner, spouse, etc.), that share any living expenses	All significant others, including opposite and same sex partners (boyfriend, girlfriend, fiancé, domestic partner, spouse, etc.), that do <b>not</b> share any living expenses

# Adopted Child

When a child has been adopted by a family, the child is moved to the AHCCCS Complete Care (ACC) health plan and is considered adjunctively eligible for WIC. Children adopted out of Arizona foster care who elected to receive AHCCCS coverage are automatically eligible for WIC benefits from birth to age five, with the exception of KidsCare and nonadjunctively eligible programs.

# Foster Child

If an infant or child is in the care of foster parents, the Arizona Department of Child Safety (DCS), or other child welfare authorities, the infant or child will be considered a family of one; this income is to be documented in the Income screen in HANDS. The foster child will be the only family member selected to which the income will apply. If the foster child is the only participant in the file, the family size will be one. HANDS will automatically count the foster child as a family of one when the 'Foster Care' box is checked. The placement paper, commonly called "Notice to Provider," or an official notification of placement from a temporary adoption organization is required to make the foster parents the Authorized Representatives. The same placement paper is acceptable documentation for adjunctive eligibility if the Mercy Care Department of Child Safety Comprehensive Health Plan medical insurance number is listed. Staff may also contact CHP Member Services directly Monday-Friday from 8 a.m. to 5 p.m. at 602-212-4983 or 1-833-711-0776 (TTY/TDD 711) or email DCS@mercycareaz.org to verify Mercy Care DCS CHP participation. The payments made by the welfare agency or received from other sources for the care of that child will be considered to be the only income. This documentation can be scanned and saved in the participant's file for future reference. If a foster parent has not yet received payments from the welfare agency or from other sources for the care of the child, staff shall document \$1 as the income amount for that child and create a Staff Alert in the Notes screen to have WIC staff ask about changes in income at each recurring appointment, or until it is determined that no income will ever be received on behalf of the foster child.

**Note:** If the foster child is a member of a WIC family with other non-foster children, the family size for the non-foster children applying for WIC will be the actual size of the Authorized Representative's family minus the foster child. HANDS will automatically count the foster child as a family of one when the 'Foster Care' box on the Client screen is checked, regardless of number in the Family Size field.

**Note:** Families with multiple foster children can share a Family ID number and eWIC card in HANDS. Each foster child will have a separate income documented in the Income screen as a family size of one. If the foster parent prefers, each foster child can be divided into separate family files and have individual eWIC cards issued. See Chapter 5, Section B for additional details.

# Military Family

Military personnel serving overseas or assigned to a military base, even though they are not living with their families, shall be considered members of the family unit.

Military dependents (i.e., infant, child, or woman) placed in the temporary care of friends or relatives who are dependent on that family to provide food, utilities, etc., shall be considered a part of that family unit during Certification. If the applicant receives funds to sustain her/himself (beyond in-kind housing), s/he may be counted as a separate family unit.

When military personnel use alternative methods of depositing paychecks (waiving military income documentation) and/or receive combat/hazardous duty pay, the income over the last 12 months can be used. Visit the <u>WIC Manuals, Supplemental Materials</u> <u>section on AZWIC.gov</u> for further clarification.

**Note:** Basic Allowance for Housing (BAH) is not considered income.

## **Resident of Institutions**

The resident of an institution is assessed as a separate family unit from the institution.

The institution shall meet the conditions as outlined in the previous section on institutional residency.

## Separated Family

When a family separates, the child is counted in the family with whom the child lives.

## Custody

The parent(s) with whom the child spends a majority of their time can claim the child in reporting family size. Child support payments are considered income for the family with whom the child lives, but cannot be deducted from the income of the person making the payments.

## Teen

An applicant who is under 18 years of age will have her income eligibility assessed following the rules which apply to any other family unit (see Determining Family Size above).

## In-stream Migrant Worker

In-stream migrant farm workers with expired Verification of Certification (VOC) cards are income eligible as long as their income is determined at least once every 12 months.

# Refugees

As part of the assessment process, Local Agency WIC staff will ask clarifying questions to determine the size of the family unit for refugee applicants living in the residence of another individual. Local Agencies shall require all applicants to provide documentation of income at the time of Certification. If this requirement would present an unreasonable barrier to participation in the WIC Program, a self-declaration of income may be accepted.

## **Income Standards**

The State Agency will adopt the income standard of 185% of the current Federal Poverty Guidelines as its eligibility standard.

All data used to determine income eligibility will be reflective of the applicant's total family income and applicant's status at the time of Certification.

# Proof of Income Does Not Exist

Lack of income documentation cannot be a barrier to receiving WIC services, such as in the case of the homeless, migrant farm workers, or people who work for cash. If the applicant cannot provide documentation of income, the applicant shall sign the "No Proof Exists-ID/address/income" signature type accessible from the Income screen. This signature serves as income documentation for the entire Certification period and will allow more than one month of Food Benefits to be issued. This will be recorded in HANDS under the documentation type by selecting "No Proof Exists/Zero Income Signature Form" from the drop-down menu. If the Certification is completed remotely, staff shall send the envelope titled "Statement of Documentation" via DocuSign to the applicant's email address on file when documentation does not exist, and notify the applicant that the required signatures are needed. The Statement of Documentation (if applicable) shall be completed within 30 days of certification in order to provide additional Food Benefits.

# Zero Income

If an applicant reports zero income or declares no income exists, the applicant shall be asked to describe, in detail, their living circumstances and how they obtain basic living necessities such as food, shelter, medical care, and clothing to determine if they shall be counted as part of a larger family unit. If it is determined that the applicant is truly without resources, the applicant shall sign the "Zero Income" signature type accessible from the Income screen. This will be recorded in HANDS under the documentation type by selecting "No Proof Exists/Zero Income Signature Form" from the drop-down menu. If the Certification is completed remotely, staff shall send the envelope titled "Statement of Documentation" via DocuSign to the applicant's email address on file when there is zero income, and notify the applicant that the required signatures are needed. The Statement of Documentation (if applicable) shall be completed within 30 days of certification in order to provide additional Food Benefits.

# **Migrants**

Determination of income eligibility will be made once every 12 months for migrant field workers and their families. The migrant status will be documented in HANDS, indicating exemption from having income determination repeated within a 12-month period.

# No Proof of Income at Certification (Forgot Documentation)

When an applicant **has proof** of income but did not bring it to the Certification appointment, the applicant is to self-declare their current income amount and corresponding interval; the applicant will be certified and receive only one month of Food Benefits if they are within income guidelines. They will be instructed to provide proof of income to the WIC clinic physically or submit electronically within the next 30 days. This will be documented in the Income screen in HANDS by selecting "Forgot Documentation" from the drop-down menu as the type of income documentation. A Forgot Document signature is not required. Local agencies may choose to collect a "Forgot Documentation – ID/Address/Income" signature in HANDS. The "Forgot Documentation – ID/Address/Income" signature type is accessible through the Family, Client, or Income screens. See "Electronic Submission of Documentation" in Section B.

If the applicant provides proof of income within 30 days, the WIC staff will verify the amount and update the documentation type by editing the income line in the Income screen in HANDS and may issue multiple months of Food Benefits.

# **Conditional Certification**

If there was missing documentation of proof of income at the time of Certification, a 30day Certification may be given. This is considered a "Conditional Certification," meaning there is pending eligibility documentation that must be provided in order to validate the full Certification period.

When participants provide missing income documentation within 30 days, staff shall edit and update the current income in the Family screen income section in HANDS by verifying the amount and updating what documentation was reviewed. Staff will be unable to update Adjunct Eligibility, as this can only be claimed on the day of Certification if proof is presented. This section will be locked after the user selects "Complete Assessment" on the day of Certification. Proof of participation in adjunctive eligibility programs may be used within 30 days as documentation of income, but applicants shall only be determined adjunctively eligible if proof of current participation is shown on the day of Certification.

If program documentation is not provided within the 30-day period, applicants are no longer presumed eligible and cannot receive WIC Benefits. In order to receive Benefits, the applicant will need to be recertified when proof is available. **Under no circumstances can a second, subsequent 30-day Certification period be used if the applicant fails to provide the required documentation of income, identification or residency.** Participants may only get one 30-day Conditional Certification until proof is provided.

# Reassessment of Income

The participant's income eligibility during a current Certification shall be reassessed if:

- The program receives information indicating the individual may have misrepresented income and/or family size when applying for services (e.g., Complaint Hotline call)
- The program receives new information indicating the participant's income has changed
- The participant reports a change in income or family size, while in an active Certification
- The Local Agency receives information that the participant(s) is/are no longer adjunctively eligible
- The Local Agency receives information that there is a change in custody which results in change of income or family size

If the reassessment indicates the family is over income and has more than 90 days remaining in their Certification period, they are to be provided one month of Food Benefits, and provided a Notification of Ineligibility. Refer to Section N for additional information about the Notification of Ineligibility. Staff shall not make copies of the documents used to determine income (e.g., pay stubs). If there are 90 days or less before the Certification period expires, the WIC staff shall issue the remaining Benefits through the end of the Certification.

**Note:** When a participant is in a current Certification and there is reason to suspect that a participant has provided false information (e.g., family size, total household income), the Local Agency shall report the concern to the State Agency Program Integrity team for further investigation.

# Reassessment of Income During an Existing Certification and Adding New Family Members

When a new family member is certified while there are existing Certifications for other members within the family, the proof of income shall be applied to all participants within the family, unless the participant has 90 days or less remaining in the Certification. Refer to" Reassessment of Income" section above if the family has more than 90 days remaining in their Certification period.

# Household Income Ineligible Termination

If a Local Agency evaluates income for another member of the participant's household, and the evaluation indicates that household income is above the income guidelines, all members of the household/family shall be terminated from WIC services to include participants in a current Certification (refer to Reassessment of Income section). The participants in a current Certification are eligible for one month of Food Benefits. The applicants are not eligible for Food Benefits.

**Note:** If participants in a current Certification have 90 days or less before the Certification period expires, they shall not be terminated and may receive their remaining Benefits until their Certification expires.

All participants and applicants in the family will be provided with a Notification of Ineligibility and informed of their right to a fair hearing. Staff shall not make copies of the documents used to determine income (e.g., pay stubs). Refer to Section L, "Ineligibility" for additional information about the Notification of Ineligibility.

# No Longer Adjunctively Eligible During a Certification Period

Individuals may be disqualified during a Certification period if a reassessment identifies that they are no longer adjunctively eligible. However, such persons cannot be disqualified from WIC solely on the basis of cessation of benefits from TANF, AHCCCS, SNAP, FDPIR, or other State-administered programs. They will be reassessed under other income criteria before being disqualified.

# Gross Income

Gross cash income before deductions, such as income taxes, employee's social security taxes, insurance premiums, bonds, etc.

The exceptions are farming or self-employment, where net income is used as the criteria. The most recent IRS Income Tax form shall be used as documentation and the annual total shall be the adjusted net income.

#### Income Includes the Following:

#### Wages

Monetary compensation for services, including wages, salary, commissions, tips, or fees.

#### **Active Military Payments**

Recent Leave and Earnings Statement (LES). Visit the WIC Manuals, Supplemental Materials section on <u>azwic.gov</u> for additional information.

#### Farm/Self-Employment

Income from farm and non-farm self-employment. This is net income (total dollars made in the business minus operating expenses) as calculated by schedule C of IRS form 1040 or a ledger of business operations.

#### Social Security

Check stub/award letter as documented by current bank statements.

#### Dividends/Trusts/Rental Income

Dividends or interest on savings or bonds, income from estates or trusts, or net rental income as documented by Federal Income Tax Record for the most recent calendar year.

#### **Public Assistance**

Public assistance or welfare cash payments. The dollar value of SNAP benefits is **not** counted as income.

**Note:** Persons receiving TANF, AHCCCS, SNAP, Section 8 Housing, or FDPIR benefits are automatically income eligible for WIC. Refer to the Adjunctive Eligibility section in Section E for additional details.

#### Unemployment

Unemployment compensation as documented with approval letter or check stub(s).

## Disability

Disability payments received shall be included in income.

## **Retirement/Pensions/Annuities**

Government civilian employee or military retirement; pension or veteran's payments; private pensions or annuities. Documentation includes income tax return for the most recent calendar year.

## Alimony and Child Support

Alimony and child support payments. Child support payments are considered income for the family with whom the child lives, but cannot be deducted from the income of the person making the payments.

## Contributions

Regular monetary contributions from persons not living in the household. Appropriate documentation would include a letter from the person contributing resources to the household.

## **Royalties**

Net royalties.

## Other Cash Income

Other cash income includes, but is not limited to, cash amounts received or withdrawn from any source, including savings, investments, trust accounts, and other resources which are readily available to the family.

## Lump Sum Payments

Lump sum payments, which represent "new money" that are intended for income, are counted as income. Lump sum payments include gifts, inheritances, lottery winnings, workers compensation for lost income, severance pay, and insurance payments for "pain and suffering." Lump sum payments for winnings and proceeds from gaming, gambling, and bingo are also counted as income. The lump sum payment shall be counted as annual income.

**Note:** Lump sum payments that represent reimbursement for lost assets or injuries shall **not** be counted as income. This includes amounts received from insurance companies for loss or damage of personal property or payment for medical bills resulting from an accident or injury.

# Student Financial Assistance

Student financial assistance used by the student for room and board and for dependent care expenses is considered income.

**Note:** Financial assistance that is used for tuition, transportation to attend classes, books, and supplies is excluded. These costs may be deducted, if applicable.

## The following Benefits are excluded as income in determining WIC eligibility:

# **Military Exclusions**

Check all military guidelines by visiting the WIC Manuals, Supplemental Materials section on <u>azwic.gov.</u>

# In-Kind/Non-Cash Benefits

Any benefit of a value which is not provided in the form of monetary contributions is considered an in-kind benefit and is **not** counted as income.

# Federal Program Benefits

Benefits provided under the following federal programs or acts include, but are not limited to:

- Reimbursements from the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970, as amended in 1987.
- Any payment to volunteers under Title I (Volunteers in Service to America (VISTA) and others or Title II (Retired and Senior Volunteer Program (RSVP), Senior Companions Program (SCP), Foster Grandparents Program and others) of the Domestic Volunteer Services Act of 1973, to the extent excluded by the act.
- Payment to volunteers under Section 8 (b) (1) of the Small Business Act Service Corps of Retired Executives (SCORE) and Active Corps Executives (ACE).
- Payments received under the Job Training Partnership Act (Adult and Youth Training Programs, Summer Youth Employment and Training Programs, Dislocated Worker Programs, Programs for Migrant and Seasonal Farm Workers, Veterans, and the Job Corps).
- Payments under the Low-Income Home Energy Assistance Act, as payment under the Disaster Relief Act of 1974, as amended by the Disaster Relief and Emergency Assistance Amendments of 1989.
- Payments received under the Carl D. Perkins Vocational Education Act, as amended by the Carl D. Perkins Vocational and Applied Technology Education Act Amendments of 1990.
- The value of any child care payments made under section 402 (g)(1)(E) of the Social Security Act, as amended by the Family Support Act, including:
- Aid to Families with Dependent Children (AFDC)
- Title IV A Child Care Program
- JOBS Child Care Program
- The value of any "at risk" block grant child care payments made under section 5081 of Public Law 101 508, which amended section 402(i) of the Social Security Act.
- The value of any child care provided or paid for under the Child Care and Development Block Grant Act, as amended.
- Mandatory salary reduction amount for military personnel, which is used to fund the Veteran's Educational Assistance Act of 1984, as amended.
- Payments received under the Old Age Assistance Claims Act, except for per capita shares in excess of \$2,000.
- Payments received under the Cranston-Gonzales National Affordable Housing Act, unless the income of the family equals or exceeds 80% of the median income in the area.
- Payments received under the Housing and Community Development Act of 1987, unless the income of the family increases at any time to not less than 50% of the median income of the area.
- Benefits received through the Farmer Market Demonstration Project under Section 17 (M)(7)(A) of the Child Nutrition Act of 1966, as amended.
- Under the Social Security Act, as amended with the Prescription Drug Card, persons receiving the prescription discount and/or the \$600 subsidies shall **not** have these benefits treated as income.

## Loans

Loans, such as bank loans, are **not** counted as income.

## Lump Sum/Large Cash Payments

Lump sum payments or large cash settlements (e.g., compensation for a loss such as an insurance settlement to pay for damage to a house or car). Also includes payments that are intended for a third party to pay for a specific expense (e.g., payment for medical bills resulting from an accident or injury.)

**Note:** If the lump sum payment is put in a savings account and the household regularly draws from that account for living expenses, the amount withdrawn is counted as income.

## **Employer Contributions**

Employer benefits (i.e., benefits that the employer pays for [health care, vision, dental care, life term group insurance, disability, certain other benefits and flexible spending accounts]) are **not** counted as income.

#### Income of Payments to Native Americans

- Income derived from certain sub-marginal land of the United States that is held in trust for certain tribes.
- Income derived from the disposition of funds to the Grand River Band of Ottawa Indians.
- Payments received under the Program for Native Americans.
- Payments to the Passamaquoddy Tribe and the Penobscot Nation or any of their members, received pursuant to the Maine Indian Claims Settlement Act of 1980.
- Payments received under the Alaska Native Claims Settlement Act.
- Payments received under the Sac and Fox Indian Claims Agreement.
- Payments received under the Judgment Award Authorization Act, as amended.
- Payments to the Blackfeet, Groventre and Assiniboine tribes (Montana) and the Tohono O'odham Nation, a.k.a. Papago tribe (Arizona).
- Payments to the Red Lake Band of Chippewas, the Chippewas of Mississippi, and the Turtle Mountain Band of Chippewas (Arizona).
- Payments for relocation assistance for Navajo and Hopi Tribe members.
- Payments received under the Saginaw Chippewa Indian Tribe of Michigan Distribution of Judgment Funds Act.
- Payments to the Assiniboine tribe of the Fort Belknap Indians Community and the Assiniboine Tribe of the Fork Peck Indian Reservation (Montana).

# Section F Health and Nutrition Assessment

## Policy

The participant's health and nutrition assessment, including collection of anthropometric and biochemical data, identifies the nutritional needs and interests of the participant. The nutrition assessment provides the basis for the nutrition care plan, including nutrition education/counseling, food package assignment, referrals, and follow-up plans. During the assessment process, heights, weights, biochemical information, dietary information, medical information, and family situation are assessed and any potential WIC Codes are identified. Individuals applying for enrollment in the Arizona WIC Program shall have at least one WIC Code to be eligible for participation.

## Anthropometric and Biochemical Data Requirements

Before taking anthropometric measurements, hemoglobin screening, or assisting with breastfeeding, the participant or Authorized Representative shall sign the signature type "Consent" found in the Medical screen in HANDS to verify that permission was given to do this. Consent permission is valid for the entire Certification period. Anthropometric and/or biochemical data is required at Certification and Mid-Certification, and it's encouraged to obtain a weight for pregnant women at each appointment. If a weight is not available for a pregnant woman at each appointment, pending code CLIENT NOT PRESENT is to be used (refer to Appendix A for pending codes), and up to three months of Food Benefits can be issued.

Refer to the <u>Anthropometrics Manual at AZWIC.gov</u> for details regarding collection of anthropometric measurements and the <u>Arizona WIC Laboratory Procedure Manual at AZWIC.gov</u> to obtain a hemoglobin value to help determine WIC eligibility.

When these measurements are brought in from a non-WIC provider, anthropometric measurements shall not be older than 60 days and biochemical values shall not be older than 90 days and be consistent with the blood work periodicity for the participant's category/age. The date the anthropometric and/or hematologic measurements were collected shall be the date entered in the Medical screen in HANDS. A statement documenting that the outside documentation was provided from a provider and any additional important information (e.g., dirty diaper, weighed with shoes on, etc.) listed on the documentation shall be included in the "I" portion of the TGIF note. Anthropometric and/or hematologic measurements that have been done by a non-WIC provider can be used for the assessment if they are provided in writing by a non-WIC provider, obtained via a patient portal, or a verbal medical data is received.

**Note:** A non-WIC provider may be a program, such as Head Start, or a medical provider. When obtaining written or verbal medical data (e.g., anthropometric and/or biochemical data) from a non-WIC provider, the Local Agency staff member shall document the name of the provider's organization in which the anthropometric and/or biochemical data was obtained in the "I" portion of the TGIF note. For example: Medical Data obtained from Head Start. The date on which the anthropometric and/or biochemical data was taken shall be entered in the Medical Data Date field instead of the date of Certification or Mid-Certification.

Acceptable forms of documentation include:

- Arizona WIC Referral and Physical Presence Exemption Form (available at <u>AZWIC.gov Physicians</u> webpage)
- Arizona WIC Health Data Form (available at <u>AZWIC.gov Physicians</u> webpage)
- Doctor's prescription form
- Doctor's letterhead with anthropometric/biochemical data
- Formula and Food Request Form (available at <u>AZWIC.gov Physicians</u> webpage)
- Head Start & WIC Referral Form (available at <u>AZWIC.gov Information & Forms</u> webpage)
- Patient Portal
- Printed medical records from a medical provider that includes the date of measurements and the medical provider's name
- Verbal medical data provided to WIC staff from a medical provider

Self-reporting of height and weight is not acceptable, except in the case of infant birth data. Infant birth data can be self-reported by a caregiver or obtained from hospital records/crib cards and can be used for the Certification of an infant if they were taken less than 60 days prior to Certification. The date on which they were taken shall be entered in the Medical Data Date field instead of the date of Certification. If birth data is used, weighing and measuring the infant again on the date of Certification will help establish a growth pattern for the infant.

**Note:** If the pregnant woman is put on bed rest **during** her Certification, and current anthropometric and, if applicable, biochemical data is not available, pending code CLIENT NOT PRESENT is to be used (refer to Appendix A for pending codes), and up to three months of Food Benefits can be issued.

## **Biochemical Data Collection Chart**

Category	Age Blood Work Required	Certification Blood Work Required	Exceptions to Certification Blood Work Required
Pregnant women	N/A	1 blood test taken during pregnancy	Prenatal women can be certified without blood work if: • at least one qualifying nutritional risk is present at Certification and • blood test is obtained within 90 days of Certification
Postpartum women	N/A	1 blood test taken 4-6 weeks after end of pregnancy up to 90 days postpartum	Use CLIENT NOT PRESENT code at Certification to allow 3 months of benefit issuance
Breastfeeding women	N/A	For women 6-12 months postpartum, no blood test is required if 1 test was taken after end of pregnancy	For women 6-12 months postpartum, no blood test is required if 1 test was taken after end of pregnancy
Infants certified at < 9 months old	Not Required	Not Required	Not Required
Infants certified from 9 to < 12 months (before 1st birthday)	Blood work required once between 9-12 months	Blood work required for infants certifying between 9-12 months	Blood work taken between 12-13 months can be used when no other blood work is available for infant category

Category	Age Blood Work Required	Certification Blood Work Required	Exceptions to Certification Blood Work Required
Children 12-24 months	Blood work required 6 months after an infant test. For the first time blood work is taken between 12-18 months, follow up blood test required 6 months after initial test.	Blood work required at initial Certification All children are required to have blood work on an annual basis unless previous blood work result demonstrated nutritional risk eligibility for low Hgb. In this case,	None
		blood work is needed every 6 months.	
Children 24-60 months	N/A	Blood work required at initial Certification All children are required to have blood work on an annual basis unless previous blood work result demonstrated nutritional risk eligibility for low Hgb. In this case, blood work is needed every 6 months.	None

**Note:** The only time blood testing may be waived is if there is a religious objection (e.g., Christian Scientist) or a medical reason (e.g., hemophilia, thalassemia, sickle cell anemia, sensory processing disorders) or if performing the test will cause physical harm to the participant and/or staff member.

For low hemoglobin levels and hemoglobin levels within the "Nutritionist" range, refer to the <u>Arizona WIC Laboratory Procedure Manual</u>, Appendix A.

## For hemoglobin results below the "Anemia" cutoff value:

The Nutrition Education Specialist (NES) will educate the participant or caregiver that WIC screens for (not diagnoses) anemia and counsels the participant on appropriate strategies to increase their iron levels.

## For hemoglobin results in the "Nutritionist" range:

If a participant's hemoglobin value is in the "Nutritionist" range for the **first time**, perform the procedure again. If possible, have a different person run the test on a different puncture site, such as an alternate finger or the infant's other heel. Record the higher of the two values in the HANDS system.

Educate the participant or caregiver that WIC screens for (not diagnoses) anemia and since their value is outside of WIC's normal range, they will be referred to the Nutritionist for further evaluation.

If the hemoglobin value remains within the "Nutritionist" range at their **subsequent Certification**, the NES will automatically refer them to their healthcare provider. This is documented in the Referral section of the Care Plan screen in the HANDS system. An optional referral form is available on the <u>WIC Manuals, Supplement Materials section of</u> <u>AZWIC.gov</u>.

#### For hemoglobin results that are very low:

A very low hemoglobin level is a serious medical concern and is life threatening. Local Agencies shall establish a referral plan and train staff to ensure that all participants with confirmed very low hemoglobin values are referred for an immediate medical evaluation, either with their primary care provider or, if unavailable, at an emergency medical center. Local Agencies will work with county/agency health program officers to determine clinic referral procedures. All referrals shall be documented in HANDS. An optional referral form is available on the WIC Manuals, Supplemental Materials section of <u>azwic.gov</u>.

## Certifiers

The Competent Professional Authority (CPA) on staff at the Local Agency is responsible for determining nutrition risk, providing nutrition education, and prescribing supplemental foods.

Persons authorized to serve as CPAs are individuals who have documentation on file verifying that they have been trained in certifying participants and prescribing supplemental foods:

- Physicians
- WIC Nutritionists/ Nutrition and Dietetic Technician, Registered (NDTR)s
- Registered Dietitians (RDs)/ Registered Dietitian Nutritionists (RDNs)
- Registered Nurses
- Physician's Assistants (certified by the National Committee on Certification of Physician's Assistant or certified by the State medical certifying authority)
- Staff who have been trained according to the State Training Plan discussed in <u>Chapter 7</u> of the Arizona WIC Policy and Procedures Manual

# Certification

A complete assessment is required at participants' Certification. All participants requiring a Certification are to be present or provide current anthropometric and, if applicable, biochemical data in order for an assessment to be conducted. Under the WIC American Rescue Plan Act (ARPA) of 2021 waivers, anthropometric data may be deferred up to 60 days and biochemical data may be deferred up to 90 days from the date of Certification.

To the extent possible, WIC staff shall make a concerted effort to collect anthropometric data within 60 days of Certification and biochemical data within 90 days of Certification in advance of or at the time of Certification. The staff shall select the pending code ANTHROPOMETRICS FOR CERTIFICATION DELAYED in the Medical screen in HANDS if anthropometric data is not available for the Certification. The staff shall select the pending code for biochemical data that is applicable in the Medical screen in HANDS if biochemical data is not available for the Certification (See Appendix A). Food Benefits shall not be withheld if data is not received.

The following criteria describe the components of a participant-centered health and nutrition assessment:

- Conveys a good overall picture of dietary intake and the participant's strengths, challenges, motivations, and/or concerns by covering the **ABCDE** categories of participant information:
  - A: Anthropometric information (growth, weight gain)
  - B: Biochemical (hemoglobin status, lead screening)
  - **C**: Clinical/Health (medical conditions, health care, pregnancy history, prenatal care)
  - D: Dietary (food intake, feeding relationship, diet and nutrition behaviors)
  - E: Environment (environmental smoking, smoking status, abuse, drug and alcohol use, and/or caregiver situation)
- Identifies potential areas for education as well as concerns raised by participant

## **Mid-Certification**

Mid-Certifications are required on or after 140 days from the date of Certification. All participants requiring a Mid-Certification Assessment are to be present or provide current anthropometric and, if applicable, biochemical data in order for an assessment to be conducted. However, if they are not present and current anthropometric and, if applicable, biochemical data is not available, pending code CLIENT NOT PRESENT is to be used (refer to Appendix A for pending codes), which will enable the Authorized Representative to receive up to three months of Food Benefits until the Mid-Certification, anthropometric data, and if applicable, biochemical data are entered into HANDS. An assessment shall still be completed while anthropometric data and biochemical data are pending.

An abbreviated assessment is necessary at a Mid-Certification to identify major changes in health status (e.g. diagnosis of medical condition) and/or dietary and physical activity behaviors since the previous certification. An abbreviated assessment shall include the following:

- 1. Review of last nutrition/health summary
- 2. New concerns raised by the participant
- 3. New medical diagnoses
- 4. Changes in diet and nutrition behaviors
- 5. Changes in environment

#### Additional Assessments

In addition, there are times when additional assessments need to be performed. Those include the following:

#### Infant

A dietary assessment needs to be completed if an infant with a breastfeeding category (IEN/IPN/IPN+) changes to a non-breastfeeding category (IFF) and Code 603 (Breastfeeding Complications) was the participant's **only** risk at Certification.

A breastfeeding assessment is also required any time the amount of formula the infant is receiving changes.

## Woman

A dietary assessment needs to be completed if a woman with a breastfeeding category (EN/PN/PN+) changes to a non-breastfeeding category (P) within 6 months postpartum and Code 601 (Woman Breastfeeding an Infant at Nutritional Risk) and/or Code 602 (Breastfeeding Complications) was the participant's **only** risk(s) at Certification.

## Out of State Transfers

An assessment is not required for participants at the time they are transferring into the Arizona WIC Program. Mid-certification assessments may be required depending on the remaining time left in the participants Certification, and can be scheduled for a later date.

#### Documenting a Health and Nutrition Assessment for Certifications and Mid-Certifications

Completing a health and nutrition assessment using the participant-centered approach will consist of the following steps:

- 1.) Assess anthropometric measurements and biochemical information using accurate, appropriate methods as described in the AZ WIC Laboratory Procedure Manual and Anthropometric Manual and document in the Medical screen.
- 2.) Complete the health and nutrition assessment. The probing questions in HANDS highlight initial open-ended questions which can be used in conjunction with the conversational assessment tools as a way to open up the conversation in each of the topic areas.
- 3.) Staff shall manually assign WIC codes based upon their assessment using the list of WIC Codes that appear below the ABCDE section of the assessment for each assessment area.
- 4.) Select "Complete assessment" only when all WIC Codes have been assigned, nutrition education type documented, and the referral screen is completed.
- 5.) At Certification, if no WIC Codes are manually assigned by the CPA and no Codes are assigned by HANDS, HANDS will then prompt the user to assign 401 or 428, as appropriate. Assignment of WIC Codes 401 or 428 shall only be used after no other nutrition risk or dietary risk is identified for eligibility.
- 6.) Document the nutrition assessment process and findings.
  - Staff shall only use approved abbreviations in the note. Approved abbreviations are posted on the <u>WIC Manuals, Supplemental Materials</u> <u>section of AZWIC.gov</u>.
  - Complete a TGIF note type in the Notes screen for all participants on the same day that the Certification and Mid-Certification was completed. A Certification and Mid-Certification is considered incomplete and invalid if staff fail to complete the required documentation. A TGIF note includes the following:

## T: Thoughts

• Caregivers thoughts, strengths, challenges, motivations, and/or concerns.

 $\circ$   $\,$  Getting to the Heart of the Matter Tool used, if applicable.

#### G: Goals

• Personal goals or areas **identified by participant or caregiver** that they plan to work on.

## I: Information

- Identify who the caregiver is, such as a foster parent, biological parent, grandparent, etc., if applicable.
- For Breastfeeding and Pregnant Categories: Knowledge, feelings, and beliefs of breastfeeding.
- For Infant Categories: Caregiver knowledge, feelings, and beliefs of infant feeding.
- Relevant information that would be useful for the next person seeing this participant to know.
- Any information that is pertinent to the interaction during the visit.
- WIC Codes that were identified and added as well as the information used to determine applicability.
- Further detail on nutrition education provided as needed to clarify.
- Reasons for food package assignment:
  - For any participant with tailored food package
  - For any participant getting Food Package III
  - For any infant receiving formula, show how the amount of formula on food package was determined
  - Infant feeding amounts

# F: Follow-up

• Any information that the staff person has identified as areas to follow up with at subsequent visits, including, but not limited to, information relevant to the participant's goals, referrals made to the BFPC, RD/RDN, WIC Nutritionist or other healthcare providers, referrals made to community programs or resources, and/or additional items to discuss.

Notes shall **not** include the following information to ensure confidentiality:

- 1. Participant names
- 2. Preferred names
- 3. AHCCCS ID Numbers
- 4. Negative information about a participant
  - Contact the ADHS Program Integrity team with any information that is pertinent to the interaction during the visit that may be perceived as negative.

WIC Staff shall document the type of nutrition education contact in the Care Plan screen by clicking on the Nutrition Discussion screen and selecting the contact type from the pick list.

**Note**: The nutrition education contact documentation shall be tailored per individual. Documenting the identical note in each participant's care plan in a family is not acceptable.

**Note:** A sample TGIF note can be located in Stage 3 on the <u>New Employee Training</u> <u>Website</u>. The TGIF format shall be used to document a breastfeeding assessment. Refer to <u>Chapter 19</u>, Section A for additional documentation requirements related to breastfeeding assessments or breast pump issuance.

For WIC Nutritionists/Nutrition and Dietetics Technicians, Registered, Registered Dietitians/ Registered Dietitian Nutritionists and State-Approved Nutritionists, SOAP or ADIME may be used to document a Certification appointment. The GIF format shall be used to document nutrition education contacts. Refer to <u>Chapter 7</u> for additional documentation requirements.

# Section G WIC Code Identification

## Policy

The State of Arizona has adopted the risk criteria developed by the Risk Identification and Selections Collaborative (RISC) Committee for the National WIC Association (NWA) and the Food and Nutrition Service (FNS) divisions of the USDA. The Arizona WIC Program implements the Nutrition Risk Criteria located on the <u>WIC Manuals</u>, <u>Supplemental Materials section of AZWIC.gov</u>. Applicants will be assigned all WIC Codes that apply, according to HANDS and the Nutrition Risk Manual. At least one qualifying nutritional risk shall be present at Certification. To ensure participantcentered education, it is highly recommended for staff **not** to tell participants their risk(s) directly; instead, it is preferred for staff to offer nutrition education topics related to the risk(s).

## Self-Reporting or Self- Diagnosis

Self-reporting of a diagnosis by a medical professional shall not be confused with selfdiagnosis, where a person reports to have or have had a medical condition, without any reference to a professional diagnosis. A self-reported medical diagnosis such as, "My doctor says that I have/my son or daughter has..." shall prompt the CPA to validate the presence of the condition by asking more in-depth questions related to the diagnosis.

Self-reporting of "History of" conditions shall be handled in the same manner as selfreporting of current conditions that require a physician's diagnosis. The applicant may report to the CPA that s/he was diagnosed by a physician with a given condition in the past. Again, self-diagnosis of a past condition shall not be confused with self-reporting.

#### Exclusions

The Arizona WIC Program excludes the following risk codes: 121 Short Stature or At Risk of Short Stature (Infants and Children), 152 Low Head Circumference, and 357 Drug Nutrient Interactions.

# Section H WIC Participant Rights and Obligations

## WIC Participant Rights and Obligations

The Authorized Representative(s) shall be informed of their WIC Participant Rights and Obligations at every Certification and out-of-state transfer(s), in their preferred language. WIC staff shall read out loud, at minimum, the highlighted sections of the WIC Participant Rights and Obligations to the applicant/Authorized Representative (in a language they understand). The highlighted sections include:

- Health Information
- Fair Treatment
- Honesty
- Accurate Information
- Good Use of the Program
- Protect Your Benefits

WIC staff shall inform the Authorized Representatives about their right to file a civil rights complaint. For information on how to file a Civil Rights complaint, please refer to <u>Chapter 9</u>. WIC staff shall offer a copy (paper or electronic) to the Authorized Representative(s) each time the WIC Participant Rights and Obligations are signed. WIC staff shall inform the Authorized Representative(s) that a copy of the WIC Participant Rights and Obligations can be found on the Program Integrity, Clinic Operations section of <u>Program Integrity, Clinic Operations section of AZWIC.gov</u> and the EzWIC App.

WIC Staff shall inform the Authorized Representatives about their right to file a complaint with the Arizona WIC Complaint Hotline either via phone, email, or website.

## Documentation

Documentation of WIC Participant Rights and Obligations shall be done at every Certification and out-of-state transfer. This is documented by having the participant/Authorized Representative sign the signature type "Rights and Obligations" on the signature pad in HANDS. If the Certification is completed remotely, the DocuSign envelope containing the Participant Rights and Obligation form and the Offer of Voter Registration form shall be sent to the applicant. The DocuSign envelope may be sent up to 30 days prior. DocuSign will send the applicant a signed copy of the Participant Rights and Obligation form, once signed.

Signatures for Participant Rights and Obligation form and the Offer of Voter Registration shall be completed prior to benefit issuance.

## Paper WIC Participant Rights and Obligations Form

If, for some reason, HANDS or DocuSign is not available to capture signatures on the "Rights and Obligations" signature type and/or the "Consent" signature type, a paper copy of the WIC Participant Rights and Obligations Form shall be used. This form can be found on the <u>Program Integrity, Clinic Operations section of AZWIC.gov</u>. The form can be used for all members of the WIC family if desired.

- 1. The form shall be signed and dated at each Certification by the Authorized Representative and the certifier or income verifier. The Local Agency is required to have systems in place to obtain a signature if an Authorized Representative forgets to sign.
- 2. The Authorized Representative's initials are necessary and serve as permission that staff can weigh/measure and check hemoglobin status for each participant listed on the form. In addition, the Authorized Representative can agree to receive assistance with breastfeeding, if applicable.
- 3. Fill in the Family ID # in the table.
- 4. Fill in only the names of those participants who are being certified on that particular day.
- 5. The height/weight/hemoglobin fields are not mandatory; Local Agencies may choose to create a Local Agency policy to make those fields mandatory.
- 6. The vertical bubbles for Family ID # and Authorized Representative Name are not mandatory; Local Agencies may choose to create a Local Agency policy to make those fields mandatory. The fields will prefill if the form is printed from HANDS.

**Note:** Separate forms may be used for foster children or children on AHCCCS who don't qualify the rest of the family for WIC.

# Food Delivery System

In a language that the Authorized Representative(s) understands, the certifier shall discuss the food delivery system, including:

- 1. Which foods are authorized for purchase with WIC Food Benefits.
- 2. Encourage the participant to look for the 'We accept Arizona eWIC' decal when going to a vendor to utilize the eWIC card. If the participant would like to see the list of current WIC authorized vendors, they may view it on the "Find a Vendor" section of <u>azwic.gov</u> or the "Vendor Search" section of the EzWIC App. If the participant requests a printed version of the vendor list, staff shall print on demand the list directly from the "Find a Vendor" section of <u>azwic.gov</u> and provide the full list to the participant before leaving the clinic. Clinics shall not maintain physical copies of vendor lists in the clinic.

- 3. How to use the Food Benefits:
  - Food Benefits will only be used at Arizona WIC authorized vendors.
  - Participants will be offered the Family Balance Summary for the entire family that will detail the quantity of Food Benefits by food subcategory and the first date to use (FDTU) and the last date to use (LDTU).
  - Participants are able to obtain a current balance of WIC Benefits at the vendor point of sale (POS), at customer service, or by checking the EzWIC App.
  - Food Benefits will be used to purchase only those foods in the quantity (and/or brands) specified on the Family Balance Summary, EzWIC App, or recent balance inquiry.
  - The eWIC card cannot be used by individuals not listed as Authorized Representatives or Proxies in the WIC HANDS file.
  - Food Benefits cannot be exchanged for cash, non-authorized food items, or credit.
  - Food Benefits will be used on or after the first date to use (FDTU) and on or before the last date to use (LDTU).
  - Participants shall inform the cashier that they will be using an eWIC card.
  - WIC-eligible foods shall be separated from other foods or other items being purchased, if applicable.
  - Participants will swipe their card through the point of sale (POS) card terminal and enter their four-digit PIN. If the participant forgets their four-digit PIN, they shall call the eWIC Processor Help Desk to have their PIN reset.
  - The cashier will scan each item to verify that the item is on the Approved Product List (APL) and the participant's electronic benefit account (EBA) has sufficient benefits for the transaction.
  - Once the transaction is complete, the cashier will give the participant the receipt, which will show the previous balance, benefits used, remaining benefits, and the LDTU.

The staff shall assess participants' understanding of allowable WIC foods, and the proper use of Food Benefits. For additional details regarding frequency of discussing the Food Delivery System requirements, refer to <u>Chapter 5</u>.

# Section I Voter Registration

## WIC Voter Registration

Local Agency staff shall provide each applicant, participant, or in the case of infants and children, his/her Authorized Representative(s), the opportunity to register to vote:

- With each application for Certification or Recertification;
- With each transfer, including a change of address.
- When the participant or Authorized Representative reports a change of address, the Local Agency staff shall enter the change of address into HANDS.

The Local Agency staff providing voter registration assistance shall **not**:

- Seek to influence an applicant's or participant's or Authorized Representative's political preference or party registration.
- Wear or display any material that:
  - o Identifies past, present, or future seekers of partisan elective office
  - Contains logos or other graphics that may be identified with a political party or preference
  - Would reasonably be associated with a political party or preference
  - o Identifies a political issue or ballot measure
- Make any statement to an applicant, participant, or Authorized Representative or take any action, the purpose or effect of which is to discourage the applicant from registering to vote.

Local Agency staff shall advise applicants, participants, or Authorized Representatives that:

- The voter registration process is separate from the WIC Program eligibility process;
- An interview is not necessary to register to vote.

Local Agency staff shall complete training developed by the Arizona Department of Health Services upon hire and annually thereafter.

## Arizona Voter Registration Form

If the applicant, participant, or Authorized Representative wants to register to vote, staff shall provide the individual with an Arizona Voter Registration Form to complete. If the Certification is completed remotely, staff shall send the Authorized Representative the link to <u>Service Arizona</u> to register to vote. Staff shall also inform the applicant, participant, or Authorized Representative of the availability of the Federal Voter Registration Form.

- Local Agency staff shall assist the applicant, participant, or Authorized Representative when requested. The assistance provided shall be to the degree that assistance is provided for completing a WIC form.
- If the applicant, participant, or Authorized Representative does not want assistance in completing the Arizona Voter Registration Form at the clinic, the individual may take the form and complete it at his or her discretion.

## WIC Program Offer of Voter Registration Form

The WIC Program Offer of Voter Registration Form, located on the <u>Program Integrity</u>, <u>Clinic Operations section of AZWIC.gov</u>, shall be completed

- With each application for Certification and Recertification
- With each transfer (both in- and out-of-state including a change of address
- When the participant or Authorized Representative reports a change of address, the Local Agency staff shall enter the change of address in HANDS

## Completing the Offer of Voter Registration Form:

The applicant, participant, or Authorized Representative shall be encouraged to mark on the form whether he/she is currently registered, and/or whether he/she requests or declines the opportunity to register to vote.

The applicant, participant, or Authorized Representative shall sign and date the form indicating they were offered the opportunity to register to vote.

The applicant, participant, or Authorized Representative shall answer all questions on the form.

If the applicant, participant, or Authorized Representative refuses to complete or sign the Offer of Voter Registration Form, the staff person shall:

- Check "Refused, gave form"
- Initial the form
- Write the Family Identification number on the form
- Provide the applicant, participant, or Authorized Representative with an Arizona Voter Registration Form

**Note:** Voter Registration Forms shall be provided unless an applicant declines in writing; if the Offer of Voter Registration Form is blank or unanswered, this is not to be considered a declination by the applicant.

If the Certification is completed remotely, the DocuSign envelope containing the Offer of Voter Registration form and the WIC Participant Rights and Obligation form shall be sent to the applicant. The DocuSign envelope may be sent up to 30 days prior. DocuSign will send the applicant a signed copy of the WIC Participant Rights and Obligation form, once signed.

Signatures for the Offer of Voter Registration form and WIC Participant Rights and Obligation form shall be completed prior to benefit issuance.

## HANDS Documentation

Local Agency staff shall indicate in the Voter Registration field in HANDS the response given by the applicant, participant, or Authorized Representative as either:

- CR Currently Registered NO – Not Interested
- YG Yes. Gave Form
- NA Not yet 18 years of age
- RG—Refused, gave form

## Voter Registration Documentation

The Local Agency shall designate staff to:

- Accept and mail the Arizona Voter Registration Form and the federal Voter Registration Form, if applicable, regardless of completeness, to the appropriate County Recorder's Office within five calendar days of the receipt of the form
- Collect all completed Offer of Voter Registration Forms at the end of each week
- Ensure that the completed Offer of Voter Registration Forms are kept **separately** from WIC Program documents
- Provide the completed Offer of Voter Registration Forms to the State WIC Office Program Integrity Manager on a quarterly basis or more frequently if necessary
- Ensure the confidentiality of the Voter Registration process

# Section J WIC Rules and Regulations

#### WIC Rules and Regulations

At each Certification, participants will be informed of the WIC Rules and Regulations, which include:

- The duration of the Certification period
- The participant is qualified due to income, category, and nutrition risk
- An explanation of the food package and how these foods can improve their health status
- Option to report problems with an Arizona WIC authorized vendor, WIC participant, WIC employee, or WIC fraud by calling: 1-866-229-6561, emailing <u>azwiccomplaints@azdhs.gov</u>, or completing the online form at <u>https://complainttracking.azbnp.gov/</u>
- Option to register to vote
- Food Benefits, VOC, and eWIC card security
- Participants/Authorized Representatives will keep scheduled appointments or notify Local Agency staff if unable to do so
- Use of a Proxy, if applicable
- Verification of marks if the applicant cannot write his or her name

We do not require participants to bring their receipts to their appointments; however, we can encourage them to review them from WIC purchases to ensure that appropriate items were charged and no sales tax is included in total purchase price.

# Section K Referrals

## Documentation

Documentation of referrals shall be done at every Certification. This documentation shall be recorded by selecting the "referred" status for mandatory referrals (generated by the mandatory referral list) in the Referral section of the Care Plan screen in HANDS for each participant by documenting "referred," staff are confirming that they have discussed the referral program(s) with the Authorized Representative. Refer to <u>Chapter</u> <u>6</u> for additional details regarding required referrals.

Refer to <u>Chapter 7</u> for details regarding medium-risk and high-risk referrals.

## **Release of Information**

An applicant or participant requesting for information to be sent to a third party or organization (e.g., a doctor or a health maintenance organization) shall sign a release form (see sample form in <u>Chapter 14</u>).

The release form shall not be signed until the Certification process is completed and the applicant has been informed of the eligibility determination.

Please refer to <u>Chapter 14</u> for additional details.

# Section L Ineligibility

## Notification of Ineligibility

The Notification of Ineligibility form notifies applicants and participants of their right to a fair hearing, of the reason they were determined ineligible for the program and/or the reason for a program disqualification. This form is available in HANDS or on the <u>Program Integrity, Clinic Operations section of AZWIC.gov</u>. A signature is not required.

Persons found ineligible at the time of Certification shall be issued the Arizona WIC Program's "Notification of Ineligibility" form. Staff shall ensure the name of the participant is on the form. It is not necessary or required to issue this form when category changes are made, as category changes do not lead to appeal rights. Those who change categories after a Certification shall be notified verbally of their new Certification dates.

A person who will be disqualified from the program (by the State Agency) shall be issued the Arizona WIC Program's "Notification of Ineligibility" form no less than 15 days before the disqualification.

**Note:** Staff shall not make photocopies of applicants' proof of income.

The termination codes listed in Appendix S shall be used by Local Agencies when terminating Certifications.

## Information About Reapplication

Applicants will be informed on how to reapply if conditions change or if they obtain the necessary documentation.

## Referrals

Applicants shall be given written information regarding other food assistance programs for which they may be eligible.

# Section M Authorized Representative

## Policy

At Certification, WIC staff will inform the applicant that they may name up to two Authorized Representatives (ARs). WIC staff may also inform the applicant that they may name up to two Proxies during a Certification period. Refer to Sections O and P for more information. They will also ask for the applicant's home address and phone number at the initial Certification and verify at each subsequent Certification. Local Agencies may collect email addresses to contact participants via email. The applicant shall be asked whether or not they want to be contacted by text message, email, mail, or phone. If the applicant does not want to be contacted by mail, staff shall check the "Do not send mailings" box on the Family screen. If the applicant does not want to be contacted by email, staff shall check the "Do not email" box on the Family screen. If the applicant does not want to be contacted by phone and/or text message, staff shall check the "Do not call" and/or "Do not text" boxes on the Family Phone(s) section of the Family screen. Local Agencies shall attempt to contact all pregnant women who miss their initial Certification appointment to reschedule. Local Agencies are encouraged to contact all other applicants who miss appointments. Contact attempts shall be made only if they have agreed to receive communication from the WIC Program. If mailing correspondence, the Agency shall use a sealed envelope or a postcard that does not mention a WIC appointment or a reason. Do not use "The WIC Program" in the return address; instead, staff shall use "Health Department" or "Health Center."

An Authorized Representative can be one of the following:

- Parent
- Caretaker
- Legal guardian
- Relative with whom the participant lives
- Spouse or significant other
- Individual who has significant knowledge of family history of the participant

The primary Authorized Representative has the right to identify a second Authorized Representative during any point while in a valid Certification, but is not required to designate one. The primary and secondary Authorized Representatives shall have access to the family's WIC records. In order to have rights and access to the family's WIC records, an individual shall be recorded as an Authorized Representative.

Authorized Representative(s) who will redeem Food Benefits shall be instructed on the Rules and Regulations of the WIC Program, including how to use WIC Food Benefits. Refer to Section J for additional details.

One Authorized Representative is required to sign the "WIC Rights and Obligations" signature type in HANDS or via DocuSign.

## Procedures for Naming Authorized Representatives

#### A. If two Authorized Representatives are present at a Certification appointment:

- Request identification (ID) from both Representatives and enter their names into HANDS on the Family screen, including what proof of ID was seen.
- "Rights & Obligations" signature type in HANDS shall be signed by one or both Authorized Representatives. If the Certification is completed remotely, the DocuSign envelope containing the Offer of Voter Registration form and the WIC Participant Rights and Obligation form shall be sent to the applicant. DocuSign will send the applicant a signed copy of the WIC Participant Rights and Obligation form, once signed.
- Explain the WIC Rules and Regulations to the Authorized Representative(s), including WIC-eligible foods and how to use the eWIC card to redeem Food Benefits. Staff shall ask questions to verify the Authorized Representatives' understanding of how to use the eWIC card.

**Note:** If an Authorized Representative(s) has forgotten documents for them self (e.g. such as Identification), but all documents are available for the applicant, the applicant is eligible for WIC for the entire certification period. Staff shall request the Authorized Representative provide proof of the forgotten documents at the next visit. Staff shall document this in a Staff Alert.

- B. If the Authorized Representative names a secondary Representative who is not present:
  - Staff will add the first and last names of second Authorized Representatives in the appropriate fields on the Family screen, and will select the "Need ID 2nd AR/Proxy Only" from the Proof of Identity drop-down list.
  - Staff may enter a Staff Alert stating a second Authorized Representative needs to show ID. However, **no names** shall be entered into the note. Names are not to be added to notes to ensure confidentiality.
- C. If one Authorized Representative is present and the other Authorized Representative is not present at a subsequent Certification:
  - Request identification (ID) from the present Authorized Representative and update in HANDS what proof of ID was seen. For the Authorized Representative who is not present, select "Not Present (subsequent certs only)" from the Proof of Identity drop-down list.
  - "Rights & Obligations" signature type in HANDS shall be signed by the present Authorized Representative. If the Certification is completed remotely, the DocuSign envelope containing the Offer of Voter Registration form and the

Participant Rights and Obligation form shall be sent to the applicant. DocuSign will send the applicant a signed copy of the Participant Rights and Obligation form, once signed.

• When the Authorized Representative who was not present at Certification returns to the clinic at a subsequent visit, ID will be verified and the staff shall update the ID provided in the appropriate field on the Family screen in HANDS.

**Note:** If the 2nd Authorized Representative is present and the first Authorized Representative is not present, the 2nd Authorized Representative can continue to sign the "Second AR Rights & Obligations" signature type in HANDS or if the Certification is completed remotely, the DocuSign envelope containing the Offer of Voter Registration form and the WIC Participant Rights and Obligation form shall be sent to the second Authorized Representative's email address to complete. DocuSign will send the applicant a signed copy of the WIC Participant Rights and Obligation form, once signed.

If an Authorized Representative(s) has forgotten documents for them self (e.g. such as Identification), but all documents are available for the applicant, the applicant is eligible for WIC for the entire certification period. Staff shall request the Authorized Representative provide proof of the forgotten documents at the next visit. Staff shall document this in a Staff Alert.

- D. If the Authorized Representative is contacting WIC remotely for non-Certification appointments and names a second Authorized Representative:
  - For non-Certification appointments, staff shall verify identity by either reviewing the Authorized Representative's ID or using identifiers such as having the Authorized Representative verify their date of birth, address, and/or phone number.
  - Staff will add the first and last name of a second Authorized Representative in the appropriate fields on the Family screen and will select the "Need ID 2nd AR/Proxy Only" from the Proof of Identity drop-down list.
  - Staff may enter a Staff Alert stating that the second Authorized Representative needs to show ID. However, no names shall be entered into the note. Names are not to be added to notes to ensure confidentiality.

# Change of Authorized Representative during a Certification period (i.e., Change of Guardianship and/or Custody)

When an Authorized Representative of a WIC participant changes **during** a Certification period (i.e., change in guardianship and/or custody) stating that the infant/child is currently under their care, the clinic may issue up to three months of Food Benefits to the infant/child if ALL of the five following conditions are met:

- 1.) The new Authorized Representative shall bring the infant/child participant to the WIC appointment. If they do not bring the infant/child to the clinic, they are to be rescheduled.
- 2.) The new Authorized Representative shall show proof of the infant/child's ID. If ID is not available, the staff can issue one-month Food Benefits and have the Authorized Representative return the following month with the appropriate documents.
- 3.) The new Authorized Representative shall sign the Change of Authorized Representative Form declaring that they are caring for the infant/child and an explanation of the circumstances that led them to becoming the caretaker (visit the <u>Program Integrity, Clinic Operations section of AZWIC.gov</u> for Change of Authorized Representative Form).
  - i. The Change of Authorized Representative Form is not required if this information is specified on a Notice to Provider (NTP) form.
- 4.) The WIC staff will assist the new Authorized Representative with the written statement if they are unable to write, and he or she shall sign the statement or make their identifying mark.
- 5.) The income of the new Authorized Representative shall be verified by WIC staff to ensure it meets the WIC eligibility criteria.
- 6.) As applicable, for following certifications, legal documentation shall be provided to verify the custody of the infant/child.

# PROCEDURE:

A new Family ID number will be created in HANDS to accommodate the new Authorized Representative's demographic information. (This procedure needs to occur even when the former and new Authorized Representatives are from the same household. This is not the same as a Proxy situation.) The infant/child will be transferred into this new family. The procedure is as follows:

- 1.) In HANDS, identify the **correct participant to be moved** into the new family. Go to the Client screen.
- 2.) If the new Authorized Representative **already has a HANDS record**, select "transfer client" from the Client screen of the person to be transferred and select "existing family." Search for the family you wish to transfer them into. Click the correct family and select "transfer client." The participant is now in the new family.
- 3.) In HANDS, identify the **correct participant to be moved** into the new family. Go to the Client screen.
- 4.) If the new Authorized Representative **does not have an existing record in HANDS**, select "transfer client" from the Client screen of the person to be transferred, and select "new family." You will then be taken to a blank Family screen. Enter all information for the new Authorized Representative. Click Save. The participant is now in the new family.
- 5.) Proceed with the transaction.

# Note: The new Authorized Representative's income shall be verified and documented.

- 6.) The new Authorized Representative shall sign the "WIC Rights and Obligations" signature type in HANDS. If the Certification is completed remotely, the DocuSign envelope containing the Offer of Voter Registration form and the WIC Participant Rights and Obligation form shall be sent to the applicant. DocuSign will send the new Authorized Representative a signed copy of the WIC Participant Rights and Obligation form, once signed.
- 7.) If the new Authorized Representative does not currently have an eWIC Card, an eWIC card will be issued to the family. The new Authorized Representative shall sign the "eWIC Card Received" signature type in HANDS, if applicable.
- 8.) The WIC staff member shall scan the completed Change of Authorized Representative form into the participant's HANDS file.
- 9.) As applicable, for following certifications, legal documentation shall be provided to verify the custody of the infant/child.

# Section N Proxies

## Policy

If applicable, Proxies may attend WIC appointments only when an Authorized Representative cannot. A Proxy can be used only once in a Certification period and can be issued only one month of Food Benefits per Certification on behalf of the participant/Authorized Representative; the Proxy can be issued Food Benefits for more than one WIC participant. The Proxy does not have access to the WIC family record and cannot make/change appointments. Whenever the Proxy(ies) are named, whether at Certification or during a Certification period, the Proxy name(s) shall be entered into the Proxy section on the Family screen in HANDS, and the proof of identity documented.

## A Proxy:

- Shall be given information on how to use the eWIC card, the Family Balance Summary, how to report the card as lost/stolen, how to report any issues with the card, and the Complaint Hotline phone number
- May do the shopping for the WIC participant

## Procedure

## Proxy identified at Certification

- Local Agency staff will ask the participant/Authorized Representative if they would like to identify up to two persons to serve as a Proxy at any time during their Certification period.
- Staff will explain the role of a Proxy to the participant/Authorized Representative. The Authorized Representative shall be informed that **one** Proxy can attend only **one** WIC appointment during the Certification and shall bring an acceptable form of ID.
- Staff will add the first and last names of Proxies identified by the participant/Authorized Representative at Certification in the appropriate fields on the Family screen, and will select the "Need ID – 2nd AR/Proxy Only" from the Proof of Identity drop-down list.
- Staff may enter a Staff Alert stating that the Proxy needs to show ID. However, **no names** shall be entered into the note. Names are not to be added to notes to ensure participant confidentiality.
- Proxies **will not need** to bring a note to the clinic at the time of their visit if they have already been named. They will, however, need to show proof of ID by providing one of the documentation types found on the Family screen in HANDS and the staff will document the proof of ID that was shown. They can pick up Food Benefits for the entire family.

#### Proxy added when Authorized Representative not present:

- The Proxy shall bring a signed note from the participant/Authorized Representative to the clinic. The note will state that the Proxy has permission to obtain the Food Benefits and for which family members, with the participant's/Authorized Representative's signature and date.
- Local Agency staff will verify that the signature on the note matches the participant's signature that is in HANDS that was provided at the time of Certification.
- The Proxy will need to show proof of ID by providing one of the documentation types found on the Family screen in HANDS and the staff will then add their name to the Proxy section of the Family screen and document the proof of ID that was shown.

## Proxy added when Authorized Representative contacts WIC remotely:

- For non-Certification appointments, staff shall verify identity by either reviewing the Authorized Representative's ID or using identifiers such as having the Authorized Representative verify their date of birth, address, and/or phone number.
- Staff will add the first and last names of the Proxy in the appropriate fields on the Family screen, and will select the "Need ID 2nd AR/Proxy Only" from the Proof of Identity drop-down list.
- Staff may enter a Staff Alert stating that the Proxy needs to show ID. However, **no names** shall be entered into the note. Names are not to be added to notes to ensure confidentiality.

The Local Agency staff shall:

- Add the person's or persons' name(s) in the Proxy section. If the family already has two Proxies named, delete one of the names in order to add this new Proxy name and document what was shown as proof of ID by the Proxy.
- Document any comments relevant to the Proxy assignment and/or issuance in the Notes screen (do not include any names).

Whenever Food Benefits are issued to a Proxy (regardless of whether they will shop for the WIC foods or not), the Local Agency staff shall:

- Document in each individual participant's HANDS record on the Notes screen by adding a general Note, noting which month Food Benefits were issued to the Proxy and the date of Food Benefit issuance.
- Provide the Proxy with information on how to use the eWIC card, the Family Balance Summary, how to report the card as lost/stolen, how to report any issues with the card, and the Complaint Hotline phone number.
- Review the Proxy Certification Form with the Proxy and have the Proxy sign the "Proxy Form" signature type found on the Family screen in HANDS. This allows for permanent record of their understanding of the WIC rules regarding Proxies (shop only at Arizona WIC authorized vendors, buy only WIC-approved foods, give

all the foods to the participant, immediately report the card as lost or stolen to the WIC office, and report any issues with the card to the WIC office).

• The Authorized Representative(s) will provide the Proxy with the eWIC card, along with the PIN, for them to take to a WIC authorized vendor to use the WIC Food Benefits.

# Section 0 Arizona WIC Program eWIC Card and Food Benefit Issuance

## Arizona WIC Program eWIC Card

Participants will be issued one eWIC card per family. Participants will select a four-digit personal identification number (PIN). The eWIC card and PIN can be used at all Arizona WIC authorized vendors to access assigned Food Benefits.

**Note:** If the family includes a foster child, please refer to Section E for additional details regarding issuance of eWIC cards to families with foster children.

## Food Benefit Issuance

Local Agency staff shall tailor the food package based on risks, nutritional needs, and participant preference.

Participants shall be issued appropriate Food Benefits at the time of Certification and subsequent visits, which they can use at Arizona WIC authorized vendors. Food Benefits may be issued remotely.

# Section P Waiting Lists

## Policy

When the number of participants receiving Food Benefits each month exceeds the Local Agencies' assigned caseload, a waiting list may need to be initiated, following approval from the Arizona WIC Director. The lowest priority is closed first, the second lowest priority is closed next, and so on. Applicants are put on a waiting list until the priority is reopened (visit the <u>Program Integrity, Clinic Operations section of AZWIC.gov</u> for the Waiting List Form). When opening priorities, the highest priority will be opened first (e.g., Priority V would be opened before Priority VI). When a closed priority is reopened, applicants are notified in chronological order based on the date they were placed on the waiting list.

The Local Agencies shall work with the State Agency to implement these procedures.

## Priorities

The priority which indicates the greatest level of risk will be used to certify the applicant. A detailed list of Arizona WIC Codes and their priorities are located on the WIC Manuals, Supplemental Materials section of AZWIC.gov for reference.

#### Priority Categories for WIC Services are the Following:

#### Priority I

Pregnant women, breastfeeding women and infants at risk based upon hematological or anthropometric measurements or other documented nutritionallyrelated medical conditions. Women who are breastfeeding Priority I infants with risk other than 702 or infants breastfed by Priority I women with risk other than 601.

## Priority II

Infants up to six months of age born to women who participated in WIC during pregnancy. Infants up to six months of age born to women who would have been WIC-eligible based upon hematological or anthropometric measurements or other documented nutritionally-related medical conditions. Women who are breastfeeding Priority II infants with risk other than 702.

## Priority III

Children and some postpartum women at risk based upon hematological or anthropometric measurements or other documented nutritionally-related medical conditions.

## Priority IV

Pregnant, breastfeeding women and infants at risk due to inadequate dietary patterns, are experiencing homelessness, are migrants, or are recipients of abuse.

Women who are categorically eligible for the WIC Program due to breastfeeding who quit breastfeeding can no longer be considered a participant in a breastfeeding priority and shall not continue to receive Benefits.

- If her baby is under six months of age, the woman shall be screened to determine if she is eligible for an open priority as a postpartum woman, if a postpartum risk had not been previously identified for her. If she qualifies for an open priority, she may be enrolled in that priority. If priorities serving postpartum women are closed, the woman may be placed on the waiting list upon request.
- If the baby is older than six months of age, the woman is no longer categorically eligible for the WIC Program and shall be terminated.
- If an infant is on the program with Code 702 (Infant being breastfed by a woman at nutritional risk) as the only identified risk, the infant will need to be reassessed for WIC eligibility, and issued a new food package, if appropriate.

# Priority V

Children at risk because of inadequate dietary patterns, are experiencing homelessness, are migrants, or are recipients of abuse.

# Priority VI

Postpartum women who are at nutritional risk, are experiencing homelessness, are migrants, or are recipients of abuse.

# Priority VII

Participants who might regress in nutritional status without continued provision of supplemental foods. Breastfeeding and postpartum women in foster care.

**Note:** Regression may not be used for initial Certification, may not be used for infants, and may not be used consecutively as a reason for subsequent Certification. Regression can only be used twice in a five-year period.

## Out-of-State Transfers

For participants transferring from another State WIC Program, clinic staff will select priority 0.

# Use of Waiting Lists

The State Agency will notify Local Agencies of the need to remove a certain number of participants from the program and initiate a waiting list when a funding shortage occurs.

If funding shortages become so acute as to necessitate removing participants from the program in the middle of their Certification periods, participants will be given written notice that they are being taken off the program. This written notice will also include the categories of participants whose Benefits are being suspended or terminated due to such funding shortages.

**Note:** Local Agencies may not remove participants from the program in the middle of their Certification periods without written approval from the Arizona WIC Director.

## **Determination of Priority Closing**

# Managing Caseload

When the **actual** caseload numbers begin to exceed the **assigned** caseload numbers, specific priorities shall be closed. The State Agency will determine which priorities in each participant category shall be closed and shall notify Local Agencies of the closure(s).

# **Predicting Caseload**

In order to determine the priorities that shall be closed, the State Agency shall use Participation, Status and Termination reports in HANDS. These reports will also assist in monitoring the caseload as the actual caseload numbers begin to adjust. Monitoring needs to occur at least monthly in the event that a waiting list is initiated.

## Waiting List

Information shall be collected in HANDS for each applicant on the waiting list, according to WIC Federal Regulations, including:

- Name
- Address
- Telephone number (if applicable)
- Category (e.g., pregnant, breastfeeding)
- Date placed on waiting list

The Local Agency shall follow normal Certification procedures, collecting information required in order to enroll a participant onto the WIC Program. WIC Codes identified during the assessment shall determine the participant's priority.

- WIC clinic staff shall complete the Certification flow through the complete assessment in HANDS to determine if the participant(s) is/are eligible for services or will be placed on the waiting list.
- If it is determined that the participant is to be placed on the waiting list, HANDS will not allow the clinic staff to issue Food Benefits for that participant(s).
- The waiting list flag indicator will be automatically checked in HANDS if the participant falls into a priority that is closed.
- The WIC clinic staff shall notify the Authorized Representative that the participant(s) have been placed on the waiting list
- The WIC clinic staff shall print the Waiting List Notification Form and provide a copy to the Authorized Representative.
- The Cert Start Date is the day the participant is placed on the waiting list.
- The active record will display information to show that the participant is on the waiting list.

## Files

Information regarding participants who have been placed on the waiting list shall be maintained and monitored within HANDS.

## Notification/Recall from Waiting List

Notification shall be completed by telephone, mail, and/or email with documentation, including the date notified and the form of contact (e.g., letter, email, or phone).

If notification is mailed, the postcard or letter will state either:

- An actual appointment date to be served with a notice to contact the office if they do not want to or are unable to keep the appointment or
- A date by which the person shall contact the office to make an appointment

The notification form will contain a statement that the person will be moved to the bottom of the waiting list if they do not respond to the notification.

## False Expectation

The WIC staff person shall explain why placement on the waiting list is necessary, and what it means in terms of realistic possibilities of receiving Benefits.

The Local Agency director will provide State-developed training and scripts for staff to perform this task accurately and efficiently.

## Referrals to Other Programs

Applicants who are placed on a waiting list shall be referred to other appropriate programs (e.g., food assistance programs, Head Start, etc.)

## Notification to Referral Programs

Programs that refer applicants to the WIC Program shall be kept informed of any actions taken by the State Agency to adjust caseload. This may include identifying categories of applicants still being served and would include encouragement to those programs to keep making referrals to the WIC Program. Programs referring to WIC are to be made aware that even when some people are not being served, others may be eligible to receive Benefits immediately.

## Transfers (After Certification) with a Waiting List

If a waiting list is in place, the person transferring shall be reassessed at the end of their current Certification period and one or more of the following appropriate actions would be taken:

- Placed on the program if they qualify for an open priority
- Placed on the waiting list if they qualify for a closed priority, if the person requests placement
- Graduated from WIC
- Terminated if found ineligible
- Referred to other appropriate programs
# Section Q Transfer of Certification

#### Policy

Transfers that are currently in a valid Certification period shall be placed on the program when present at the receiving clinic or a virtual two-way live video-conferencing method is utilized.

#### Out-of-State Transfers

For out-of-state transfers within a valid Certification period:

The Local Agency to which the participant is transferring shall:

- Confirm that at least one Authorized Representative is present in the clinic at the time of transfer or is present utilizing virtual two-way live video- conferencing method.
- The transfer shall be completed when the staff and at least one Authorized Representative begin the appointment.
- Ensure that the participant was never participating in Arizona WIC by using HANDS to do a statewide search.
  - o If the participant was once an Arizona WIC participant, staff shall transfer the participant(s) into their clinic first.
  - o If the participant was certified in Arizona, transferred out of state, and then returned to Arizona WIC within the timeframe in which the Certification is still current, the previous Certification shall be reinstated.
- Verify approved forms of ID and proof of residency for all transferring WIC participants.
  - o If neither proof of ID nor residency are brought in at time of transfer, staff shall input "Forgot Documentation" and issue one month of Benefits.
  - o Additional benefits shall **not** be issued until the proof of ID and residency has been received.
- Complete the Out-of-State Transfer screen in HANDS.
  - o For participants transferring from another State WIC Program, clinic staff will select priority 0.
- For the unique VOC number in the Transfer screen, use the 2-letter state abbreviation followed by the unique identifier on the actual VOC. If there is no unique identifier on the VOC, use the state abbreviation followed by the Participant or Family ID that is provided on the VOC.
- Have Authorized Representative(s) sign the "Rights and Obligations" signature type in HANDS and scan the VOC into the participant's file in HANDS. If the transfer is completed remotely, the DocuSign envelope containing the Offer of Voter Registration form and the WIC Participant Rights and Obligation form shall be sent to the applicant. DocuSign will send the participant a signed copy of the

WIC Participant Rights and Obligation form, once signed. Refer to the Electronic Submission of Documentation section for details of how to obtain a VOC remotely.

• The Local Agency shall obtain the food benefits or eWIC card issued by the sending agency if still in the participant's possession, if applicable. The receiving Local Agency shall destroy the unused food benefits or eWIC card from the transferring participant.

#### Verification of Certification (VOC)

Local Agencies receiving transfers shall accept the Verification of Certification (VOC) documents from other states.

A document containing the following information is to be considered a valid VOC:

- Name of participant
- Beginning date of Certification
- Ending date of Certification
- Date of income determination
- Participant's nutrition risk
- Normal signature and full printed/typed name of the certifying Local Agency official
- Name and address of the certifying Local Agency
- An identification number or other means of accountability
- Identification of migrant status

#### Partially Complete Verification of Certification (VOC)

A partially complete VOC will be considered proof of WIC eligibility if it contains the following information:

- Name of participant
- Beginning date of Certification
- Ending date of Certification period
- Name and address of the certifying Local Agency

**Note:** Participants who arrive in a new service delivery area showing a partially complete VOC will be treated as if the VOC contained all the information.

## Retention of VOC/Rights and Obligation

Local Agencies will retain the VOC from the transferring agency by scanning it into the participant's file in HANDS and having the Authorized Representative sign the "Rights and Obligations" signature type in HANDS. If the transfer is completed remotely, the DocuSign envelope containing the Offer of Voter Registration form and the WIC Participant Rights and Obligation form shall be sent to the applicant. DocuSign will send the client a signed copy of the WIC Participant Rights and Obligation form, once signed. Refer to the Electronic Submission of Documentation section for details of how to obtain a VOC remotely.

## Transferring out of Arizona WIC

Local Agencies will ensure the continuation of Benefits to migrants and their families and a VOC shall be issued to all members of a household in which a migrant lives. A VOC shall also be issued to any WIC participant who is likely to relocate.

If a participant is transferring **to** a WIC Program in another state, staff shall provide the participant/Authorized Representative with the Verification of Certification (VOC). If the participant/Authorized Representative does not obtain a VOC ahead of time, the other state may request information about the incoming participant. The requested information will be faxed to the requesting program upon receipt of the request from the other state's WIC Program.

The procedures shall be used to transfer their Certification expeditiously.

**Note:** If the participant is in a "Conditional Certification" status and has pending eligibility documentation, staff shall write "30 Day Conditional Certification-Missing Eligibility Documentation" on the VOC before providing it to the participant or agency to which the participant is transferring. Staff shall specify which eligibility documentation was missing by writing it on the VOC.

#### **Special Conditions**

Participants that transfer to the Arizona WIC Program and present a VOC which indicates they are transferring from a State Agency with a shorter Certification period than Arizona, but they are still in a current Certification, shall have their Certification period extended. Infants who have a Certification start date on the VOC that was prior to the infant turning six months old shall have their Certification extended to their first birthday. Children with six-month Certification periods on the VOC will have their Certification extended to one year from the Certification start date that appears on the VOC. Breastfeeding women with six-month Certification periods on the VOC will have their Certification extended to the infant's first birthday.

### In-State Transfers

For transfers within the Arizona WIC Program, the Local Agency to which the participant is transferring shall do the following:

- Confirm that at least one Authorized Representative is present in the clinic at the time of transfer or is present utilizing virtual two-way live video- conferencing method.
- The transfer shall be completed when the staff and at least one Authorized Representative begin the appointment.
- Verify the identity by either reviewing the Authorized Representative's ID or using identifiers such as having the Authorized Representative verify their date of birth, address, and/or phone number.
- Perform a statewide search using HANDS to locate the participant/family.
- Assess the type of service(s) the participant/family needs by asking questions of the Authorized Representative and evaluating the Certification information on the search screen in HANDS. If additional information is needed, contact the clinic in which the participant is transferring from for more details.
- Inform the participant that transferring will automatically cancel any appointments they may have at the other clinic and request permission to transfer the participant/family.
- Complete the In-State Transfer process in HANDS.

**Note:** Transfers over the phone are **not** permitted for the sole purpose of making an appointment in HANDS.

Once the transfer in HANDS is completed:

- If the participant/family is not in a current Certification, a Certification shall be completed.
- If the participant/family is in a current Certification, the following will be completed in addition to providing the rest of the required services for that appointment:
  - Update Address and Voter Registration status on the Family screen in HANDS
  - Provide an updated Local Agency referral list

**Note:** A transfer from Navajo Nation WIC or Inter Tribal Council of Arizona, Inc. (ITCA) WIC programs are considered an out-of-state transfer.

#### WIC Overseas

When participants are transferring **from** WIC Overseas, Arizona WIC will utilize their signed Verification of Certification (VOC, also called a Participant Profile Report) and transfer them into our program. The Out-of-State Transfer screen in HANDS shall be completed, the WIC Participant Rights and Obligation Form signed, and the Local Agency will retain the VOC Form in the participant's HANDS record. If the participant does not have a VOC, contact WIC Overseas at 1 (877) 267-3728. If the applicant is not in a valid Certification period, they will begin a new Certification period if still eligible.

When participants are transferring **to** WIC Overseas, participants will use their Arizona WIC Program VOC printed from HANDS.

# Appendix A: HANDS Pending Codes for Anthropometry and Bloodwork

Pending Code	Description
CLIENT NOT PRESENT (3 MO FB)	CLIENT NOT PRESENT is to be used when a client is not present, which will enable the Authorized Representative to be issued up to three (3) months of Food Benefits.
ANTHROPOMETRICS FOR CERTIFICATION DELAYED (3 MO FB)	If anthropometric data has not been received for Certification, the pending code ANTHROPOMETRICS FOR CERTIFICATION DELAYED shall be used, which enables the Authorized Representative to be issued up to three (3) months of Food Benefits.
EXTEND MID - CERT (1 MO FB)	EXTEND MID-CERT is to be used when the participant is not available for the Mid-Cert assessment, which will enable the Authorized Representative to be issued one (1) month of Food Benefits.
HGB/HCT NOT REQUIRED (3 MO FB)	HGB/HCT NOT REQUIRED is to be used when blood work is not required at that appointment. This code will prompt for a value every 6 months.
HGB/HCT PENDING (3 MO FB)	HGB/HCT PENDING is to be used when blood work is pending. This indicates that the applicant is bringing the data from an outside source or WIC clinic. The applicant has ninety (90) days from the date of Certification to bring in the data.
HT/WT PENDING (1 MO FB)	HT/WT PENDING is to be used when anthropometric data is pending. This indicates that the applicant is bringing the data from an outside source or WIC clinic. This pending code can be used up to 3 times consecutively.
LESS THAN 4 WEEKS POSTPARTUM (HGB ONLY, 3 MO FB)	When certifying postpartum women that are less than 4 weeks postpartum, LESS THAN 4 WEEKS POSTPARTUM shall be used and up three (3) months of Food Benefits shall be issued.

Pending Code	Description
MEDICAL CONDITION (3 MO FB)	MEDICAL CONDITION is used when hemophilia (a bleeding disorder found mostly in males), thalassemia, sickle cell anemia or a documented medical reason is given for waiving hemoglobin screening and up to three (3) months of Food Benefits shall be issued. This code will prompt for a value every 6 months.
RELIGIOUS BELIEFS (3 MO FB)	RELIGIOUS BELIEFS is used when religious reasons (i.e.: Christian Scientist) are present that prevent blood from being collected and up to three (3) months of Food Benefits shall be issued. This code will prompt for a value every 12 months.
SAFETY CONCERN (3 MO FB)	SAFETY CONCERN is used in situations where drawing blood will create a safety hazard to the participants or the WIC staff member. This is not used in the case of HIV/AIDS or COVID-19, since staff shall always use Universal Precautions (UP; please refer to the <u>Arizona WIC Laboratory</u> <u>Procedure Manual</u> for more information) to protect themselves. Up to three (3) months of Food Benefits shall be issued.

Appendix B: HANDS Termination Codes Termination codes available in HANDS are listed below. Local Agencies may use the codes listed in the Local Agency Use section and shall follow the guidance of HANDS generated codes. Local Agencies shall not use codes deemed for state use.

#### Local Agency Use Termination Codes

Termination Code	Use/description
Breastfeeding woman no longer breastfeeding	Can be used for a breastfeeding woman who has stopped breastfeeding. She may or may not be categorically eligible.
Category change	Used for women and infant categories (i.e. a category change from EN to PN)
Certification period ended	Can use for any category. Can be used to terminate Certifications as a way to match a family's Certification dates together. Based on participant's preference.
Child in foster care no longer with family	Used when a child in foster care who was participating in WIC is no longer a part of the WIC family and has not been transferred to another family file.
Duplicate Record	To be used if a duplicate record is located and active.
Death	Used when a participant is deceased. Participant's name will appear in red after termed. Call the WIC Service Desk to mark death on an inactive file.
Lost to follow-up	Can be used when a participant hasn't been receiving benefits and staff are unable to contact.
Moved out of state	HANDS generated when a VOC is printed and termination is selected. May also be used if a participant informs WIC staff they have moved out of state.
Voluntary withdrawal	Can be used when a participant states they no longer want to participate in the program.

## HANDS Generated Termination Codes

Termination Code	Use/description
Breastfeeding woman at one year past actual delivery date	HANDS Generated (EODADM). Do not use.
Categorically Ineligible	HANDS Generated when a participant does not meet category guidelines and is ineligible for services.
Child five years old	HANDS generated (EODADM). Do not use.
Non-breastfeeding woman at 6 months past actual delivery date	HANDS generated (EODADM). Do not use.
Not income eligible	HANDS generated (EODADM) when income is over eligibility guidelines.
Not recertified. Auto term for infant, child, or woman	HANDS generated (EODADM). Do not use.
Not seen for Recertification	HANDS generated (EODADM). Do not use.
Not returned within 30 days for missing documentation	HANDS generated (EODADM). Do not use.
Pregnant woman at 3 months past expected delivery date	HANDS generated (EODADM). Do not use.
Woman at 6 weeks postpartum	HANDS generated (EODADM). Do not use.

### State Office Use Termination Codes

Termination Code	Use/description
Abuse or threat to anyone connected to WIC/CSF Program	To be used only by State staff for disqualification purposes.
Attempted sale of WIC food, Food Benefits, or breast pump	To be used by State staff for disqualification purposes.
Dual Participation	To be used only by State staff for disqualification purposes.
Intentional misrepresentation or withhold facts to obtain benefits	To be used only by State staff for disqualification purposes.
Receipt of cash or credit to purchase unauthorized food	To be used only by State staff for disqualification purposes.
Sale of WIC food, food instruments, or breast pump	To be used only by State staff for disqualification purposes.
Under investigation	To be used only by State staff only.

#### State Approved Local Agency Use Termination Codes Local Agencies Need Permission Prior to Use

Termination Code	Use/description
Hospital enrolled needs complete Certification	Used by Local Agencies with permission from the State Agency prior to use only.
Woman 503 expired	Used by Local Agencies with permission from the State Agency prior to use only.

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