

# Certification Standards

## Illinois WIC Policy Manual

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# Certification Standards

## Section 1: General Eligibility Requirements

### 1. General Requirements (Effective August 2023)

- A. To be eligible for participation in the WIC Program, WIC applicants must be:
  - 1. Categorically eligible (infants and children under five years of age, pregnant, lactating, and non-lactating postpartum women).
  - 2. An Illinois resident.
  - 3. Income eligible.
  - 4. At nutritional risk as determined by a WIC Nutrition Assessment.
- B. Dual participation is assessed as information is entered into the WIC Management Information System (WIC MIS).
  - 1. Stopping a potential duplicate from becoming a dual enrollment in the WIC MIS can occur on the Precertification screen, if a potential duplicate record is found, WIC staff evaluates and reconciles as appropriate.
  - 2. When potential dual enrollment is not resolved during completion of the Precertification screen, the WIC MIS will trigger Dual Enrollment. The WIC Coordinator/designated staff monitors and resolves weekly any actual dual enrollment on the Resolve Dual Enrollment screen.
- C. Eligibility is documented in WIC MIS at each certification.
- D. Staff should routinely and clearly communicate the information needed for eligibility determination to potential applicants and returning participants. The certification procedure, including the nutrition assessment:
  - 1. Must be performed at no cost to the applicant.
  - 2. Must be initiated by certifying parent, caretaker, or foster parent, referred to as Head of Household (IL WIC PPM SFD 2.1).
  - 3. In a two-parent household the parent bringing the child to the appointment is the HOH. The other parent may be marked in the WIC MIS as a “second parent” on the Participant Information screen allowing that parent to bring the child to subsequent visits.
- E. Local agencies are encouraged to obtain required proofs electronically prior to the scheduled appointment to identify any missing items and streamline the visit. Document receipt of proofs in the WIC MIS notes following the PPS Secure and Confidential Communications with WIC Participants.
- F. If after certification it is determined that the participant is not categorically eligible, they must be terminated, and future benefits voided (IL WIC PPM CS 13.1).
- G. The WIC Program does not prohibit program participation by foreign citizens including foreign students residing in the United States, provided they meet the program eligibility requirements.
- H. Agencies offering a multi-service delivery model (e.g., Family Case Management, lead testing, immunizations) must make applicants/participants aware of the various services being offered. Participants must be notified that participation in other agency services is optional, and refusal will not impact their WIC application and/or benefits. Local agency must follow consent to release information policy IL WIC PPM AD 5.2.

# Certification Standards

## Section 1: General Eligibility Requirements

### 2. *Notification Requirements (Effective: February 2021)*

- A. Each applicant must be informed during the certification procedure of the right to a fair hearing, and that participation in more than one local WIC Program and/or the Commodity Supplemental Food Program (CSFP) is not allowed.
- B. Each participant must receive an explanation of how the food delivery system in the local agency operates.
- C. Each participant must be advised of other relevant health and/or human services available, where they are located, how they may be obtained and why they may be useful.
- D. "Applicant Notification of Appeal Rights" (IL WIC PPM CS 15.1), must be supplied when:
  - 1. An applicant is found ineligible;
  - 2. A participant is found ineligible at any time during the certification period;
  - 3. A participant is terminated during the certification period.

# Certification Standards

## Section 2: Residency Determination

### 1. *General Requirements (Effective: February 2021)*

- A. Residency is defined as the location or address where the applicant routinely lives or spends the night.
- B. Applicants must be residents of the State of Illinois or a member of a designated population with a common special need (e.g., migrants, Native Americans, homeless) to be eligible for the Illinois WIC Program.
- C. Local agency staff may not turn away applicants or transfer participants with documentation of State of Illinois residency when they are serving less than 90% of their assigned caseload.
- D. Special Living Circumstances- Those applicants currently living in a facility must be assessed to determine eligibility to ensure the WIC Program provides direct services to needy persons and does not function as a subsidy to the provider/organization.
- E. An institution is any residential accommodation, aside from private residences and homeless facilities, which provides meal service, therefore applicants in such facilities are not residentially eligible.
- F. Applicants staying in shelters/facilities are not eligible if the provider/organization:
  - 1. Accrues financial or in-kind benefits by reducing expenditures for food service because of a resident's participation in WIC; or
  - 2. Requires food items purchased with WIC benefits be used in communal feeding; or
  - 3. Requires the institution manager to serve as a general proxy for participants.

# Certification Standards

## Section 2: Residency Determination

### 2. Documentation (Effective: February 2021)

- A. An applicant's proof of residency must be reviewed at the time of certification. Acceptable proofs include current electronic or paper versions (less than 60 days old, if applicable) of:
  - 1. DCFS Placement Papers
  - 2. IL Driver's License
  - 3. Matricula Consula ID Card
  - 4. Military Base Orders
  - 5. Official Notices/Bills with Current Address (Pay stub, water bill, etc.)
  - 6. Rent or Mortgage Receipt
  - 7. SNAP, TANF Notice of Decision Letter
- B. Unacceptable forms include:
  - 1. Checkbooks
  - 2. Post Office boxes
  - 3. Other addresses where the participant receives mail but does not live
- C. In special circumstances where an applicant does not receive mail
  - 1. Participants living temporarily with a friend or family member who do not have any mail in their or their immediate family member's name listing their current address may:
    - a) present a letter from the person they are residing with;
    - b) this letter must attest to the living situation and list the home address for that person.
- D. No written documentation of address is necessary for homeless participants.
  - 1. The address of a shelter frequently used may be listed for homeless participants.
  - 2. If the homeless participant does not have a shelter address, the address of the WIC clinic may be listed.
  - 3. A notation of this determination must be clearly entered in the participant record.
  - 4. The local agency must ensure the shelter meets the requirements as defined in IL WIC PPM CS 2.1.
- E. In situations where an applicant does not provide an acceptable form of residency, the local agency will complete a 30-Day Certification Form (IL WIC PPM CS 3.9).

# Certification Standards

## Section 3: Income Eligibility Determination

1. ***Income Eligibility Guidelines (Effective: February 2021)***
  - A. The Illinois WIC Program uses the Federal Income Eligibility Guidelines (IEGs) for program eligibility. These guidelines reflect 185 percent of the Federal poverty income guidelines and are published annually by the U.S. Department of Agriculture in the Federal Register. Income Determination using the definitions listed below must be completed using approved documentation as described in this Section.
  - B. Income is the gross cash income earned by any and all members of a family before deductions for income taxes, employees' social security taxes, insurance premiums, bonds, etc. Income includes the following current electronic or paper versions of:
    1. Adjunctive Eligibility
    2. Alimony Payments
    3. Child Support Payments
    4. Current W2 Form
    5. Current Year 1040 Tax Return Form
    6. DCFS Custody
    7. Employment Contract/Letter from Employer
    8. Military Leave and Earnings
    9. Pay Stubs
    10. Social Security Benefits
    11. Tuition Assistance Document
    12. Unemployment Benefits
    13. Unemployment Check
    14. Verification of Certification (VOC)
    15. Zero Income

### ***Addendum- Assessing Gross Income***

# Certification Standards

## Section 3: Income Eligibility Determination

### 2. *Household, Economic Unit and Family (Effective: February 2021)*

- A. Household, Economic Unit, and Family<sup>1</sup> are all terms which can be used interchangeably. “Economic Unit” is the more definitive terminology because it correctly conveys that a familial relationship is not relevant to the determination of WIC family size and income. Members of the economic unit share income and consumption of goods and/or services.
- B. For WIC eligibility determination purposes staff must assess the income of a group of related or nonrelated individuals for the economic unit declared.
  - 1. It is possible to establish that more than one economic unit lives under one roof through appropriate questioning which helps to make a reasonable determination that there is general economic independence of the units or they are receiving support and some comingling of resources which renders them members of the economic unit in which they live.
- C. Residents of a homeless facility or an institution are not considered as members of a single family.
- D. Age is not a determinant when assessing the economic unit.
- E. Pregnant women are counted as two or more individuals (according to the number of fetuses in utero) when economic unit size is determined. This unit size may be used for any of the pregnant woman’s categorically eligible family members.
- F. Foster children are considered a one-person economic unit for WIC purposes. They remain the legal responsibility of welfare or other social service agencies and can never confer adjunctive income eligibility to family members.

### ***Addendum- Assessing for Separate Households***

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<sup>1</sup> USDA Policy Memorandum #2013-3



# Certification Standards

## Section 3: Income Eligibility Determination

3. *Timeframes for Determining Economic Unit Income (Effective: February 2021)*
  - A. Staff needs to exercise flexibility in deciding whether to use the applicant's current or annual rate of income. The decision must be based on which provides the best indicator of the economic unit's present circumstances.
  - B. Current Income is income received by the economic unit during the month (30 days) prior to the date the application for WIC benefits is made.
    1. If the income assessment is being done prospectively (i.e., the sole support of that economic unit has just been laid off but has been authorized to receive unemployment benefits for the next six months), "current" refers to income that will be available to the economic unit in the next 30 days.
    2. Unemployed persons (including laid-off workers) must have income eligibility determined by their current rate of income.
  - C. Annual Income may be a more appropriate indicator of the need for WIC benefits and should be used in cases such as:
    1. self-employed persons, including farmers or seasonally employed workers whose income fluctuates;
    2. economic units in which a member is on a temporary leave of absence from employment such as maternity leave;
    3. teachers who are paid on a 10-month basis and on leave during the summer months; and
    4. college students who work only during the summer months and school breaks.
  - D. Migrant farm workers and members of their economic units with expired Verification of Certification (VOC) forms shall be considered income eligible, provided that their income is determined once every 12 months. If the migrant's economic unit income must be determined, consider their income during the previous 12 months.
  - E. Mid-certification of reassessment of income- on occasion a participant who has been certified for a full certification period may have a change in income. When agency staff is informed of such a change a mid-certification assessment of income is required (IL WIC PPM CS 3.8).
  - F. In situations where an applicant does not provide an acceptable form of income, the local agency will complete a 30-Day Certification Form (IL WIC PPM CS 3.9).

# Certification Standards

## Section 3: Income Eligibility Determination

### 4. *Adjunctive Eligibility (Effective: February 2021)*

A. WIC extends adjunctive income eligibility to applicants who are certified as eligible to receive Temporary Aid to Needy Families (TANF), Medicaid program benefits (Federal-Title XIX)<sup>2</sup> and Supplemental Nutrition Assistance Program (SNAP).

1. Members of the same economic unit (categorically eligible for WIC) would be adjunctively income eligible under the following conditions:
  - a) Receives SNAP;
  - b) Contains a TANF recipient;
  - c) Contains a pregnant woman who is Title XIX Medicaid eligible;
  - d) Newborn infants whose mothers still have an active WIC eligible Title XIX Medicaid case from their pregnancy;
  - e) Contains an infant who is Title XIX Medicaid eligible.
2. If a postpartum woman or child is Title XIX Medicaid eligible, only that participant would be adjunctively eligible.

### B. Assessment for Adjunctive Eligibility

1. Documentation of participation in Medicaid, TANF, or SNAP, or any other program, which confers adjunctive income eligibility, is required for WIC applicants or the economic unit member. Verification of adjunctive eligibility by an approved source, is the same as written documentation.
  - a) Local agency staff must require no other written documentation to establish family income.
2. Acceptable Proof of Income Includes:
  - a) Notice of Decision letters, with current dates and information, from the Illinois Department of Healthcare and Family Services (HFS);
  - b) Department approved online resources which reflect current, active, cases for these programs.
  - c) Foster parents may provide written documentation from the Department of Children and Family Services verifying the child's status as a youth in care.
3. If documentation of adjunctive eligibility is not available, staff must complete a Traditional Income Eligibility Screening (IL WIC PPM CS 3.5).

### C. Documentation of Adjunctive Eligibility

1. Verbally declared income is used when the applicant is determined adjunctively eligible via an approved source.
  - a) Monetary value of SNAP benefits is not included as income.
  - b) Cash benefits are included as income.

### ***Addendum- Approved Adjunctive Eligibility Resources***

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<sup>2</sup> USDA Policy Memo #99-6

# Certification Standards

## Section 3: Income Eligibility Determination

2. Adjunct Income Eligibility for Presumptively Eligible Recipients of Medicaid or TANF
  1. Those individuals who are presumptively determined to be eligible to receive benefits from Medicaid or TANF can be considered income eligible for WIC based upon their presumptive participation in these programs. Income proof for pregnant applicants would be the Medicaid Presumptive Eligibility (MPE).
  2. A participant certified for WIC with the MPE as proof of income is to be afforded a full certification period at the time of certification.
    - a) MPEs take approximately 60 days to process, therefore staff should review her case at the next visit (60-90 days from certification) to determine if the application was approved for full Moms & Babies medical benefits using approved online sources.
    - b) If the participant does not become eligible for full Moms & Babies medical benefits (Title XIX Medicaid case), the local agency cannot disqualify from WIC based solely upon the failure to meet the program's eligibility criteria. The local agency must follow the policy outlined in IL WIC PPM CS 3.8, prior to terminating the certification.
    - c) In order to assure the participant is advised of termination 15 days in advance they must be told at the time of the certification with an MPE that the next visit will require review of income and if they are over income they will be terminated.

# Certification Standards

## Section 3: Income Eligibility Determination

### 5. Traditional Income Eligibility Screening (Effective: February 2021)

- A. In cases where Adjunctive Eligibility does not apply, “Traditional Income Eligibility Screening” is required. Applicants must provide documentation of family income at certification as described below.
1. Screening procedures
    - a) Determine the total economic unit size. (IL WIC PPM CS 3.2).
    - b) Obtain documentation of gross income reflective of the past 30 days.
    - c) When an applicant fails to bring proof of income to the WIC clinic, staff must complete a 30-Day Certification Form, schedule the participant to return to provide the appropriate proofs and issue one month’s benefit (IL WIC PPM CS 3.9).
      - (1) In order to assure the participant is advised of termination in 15 days in advance, they must be told at the time of the certification that the next visit will require review of income and if they are over, they will be terminated.
    - d) In cases where applicants declare zero income, staff must ask the applicant to describe in detail their living circumstances and how they are supported and pay for necessities, such as food, clothing, housing and medical care.
      - (1) Document information provided by the applicant/participant in the General Note section of the WIC MIS.
- B. Income information is calculated in the WIC MIS. The process for determining income eligibility follows the following steps.
1. Calculate total economic unit income<sup>3</sup>.
    - a) If an economic unit has only one income source, or if all sources have the same payment frequency, do not use conversion factors.
      - (1) Compare the income, or the sum of the separate incomes, to the current income guidelines for the appropriate frequency and economic unit to make the WIC income eligibility determination.

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<sup>3</sup>USDA Policy Memo 2011-7

# Certification Standards

## Section 3: Income Eligibility Determination

b) If an economic unit reports income sources at more than one frequency, perform the following calculations to annualize all income following the chart below:

(1) Do not round the values resulting from the conversion.

<b>Frequency</b>	<b>To Obtain Annual Income</b>
Weekly	Multiply by 52
Bi-Weekly (every 2 weeks)	Multiply by 26
Semi-monthly (2x a month)	Multiply by 24
Monthly	Multiply by 12

(2) Add together all the unrounded, converted values.

(3) Compare the total to the published current income guidelines for the economic unit size to make the final income eligibility determination. Do not recalculate the published income guidelines as they are already calculated and rounded up to the next whole dollar prior to publication.

### ***Addendum: WIC Income Guidelines***

# Certification Standards

## Section 3: Income Eligibility Determination

### 6. *Military Families (Effective: February 2021)*

- A. For WIC purposes, military personnel serving overseas or assigned to a military base, even though they are not living with their families, should be considered members of the economic unit. The income received by the military individual(s) and all other income received by the members of the economic unit should be counted as income to the household.
1. In determining income eligibility of any applicant whose family contains one or more military household members, all gross income must be counted except (1) the value of in-kind housing and other in-kind benefits, and (2) payments or benefits provided under certain Federal programs or acts which are excluded from consideration as income by law as described in this section and IL WIC PPM CS 3.7.
  2. The Program recognizes that local agencies may have difficulty determining a military family's gross income due to the pay options available to military personnel serving overseas or assigned to a military base and temporarily absent from the home, as discussed below. However, in accordance with law and regulations, WIC income eligibility determinations must be based on gross income. Therefore, local agencies will need to develop flexible procedures to ensure that gross income is computed as best it can be determined, based on available data, for such military families.
- B. Military Income/Paychecks
1. Military personnel have two options in terms of their paychecks if they are temporarily absent from their home and sent overseas or elsewhere in the United States.
  2. First, military personnel have the option to direct-deposit paychecks in a joint account, accessible to their families. The majority of the servicemen and servicewomen choose this option. In some cases, the pay stub or voucher is sent to the military and another copy is made available to family members, if they have power of attorney.
  3. Second, military personnel have the option to designate a spouse allotment and/or child allotment, whereby the government sends the family member(s) a check in an amount authorized. The allotment(s) designated for family members may reflect only a portion of the military person's total pay.
  4. Some military families, particularly those that include military service personnel serving overseas, may have difficulty producing a pay stub or other documentation of the gross military income. In some cases, the only documentation that the family member(s) may possess is a bank statement confirming the amount of the deposit. If the family members are sent a spouse and/or child allotment, the applicant may possess no documentation of the family's total gross income.

# Certification Standards

## Section 3: Income Eligibility Determination

### C. Computing Military Income/Leave and Earnings Statement (LES)

1. Military participants should have a current Leave and Earnings Statement (LES) to determine rank and years of service. These are issued on the 15th of the month and are one month behind.
  - a) Example: On April 15, participant will receive March's LES
  - b) Note: Military service members who joined the military within the past 30 days from the date of applying for WIC may not have an LES till after 30-60 days of employment. The website for verifying status is <https://mypay.dfas.mil/mypay.aspx>
2. The LES should be no older than 60 days. (Overseas status may require an income affidavit if LES are not available. In the event an enlisted person received a promotion during the year, calculate salary by adding old and new together. Two LES will be needed for accuracy).
3. Locate "Total Earnings" on the LES; it is usually found on the middle of the page. This is the gross earnings for one month.

### D. Include as income:

1. Separate Rations including BAS (Basic Allowance for Subsistence) and Special Duty Pay is counted as income;
2. Include any incentive pay such as aviation career, foreign duty, hazardous duty or family separation pay;
3. Continental United States (CONUS) COLA must be counted. CONUS COLA is provided to military personnel in designated high-cost areas with the continental United States. Therefore, the CONUS COLA must be counted as income in determining WIC eligibility;
4. All other income from other family members (e.g., working spouse);
5. Multiply remainder of pay by 12 for yearly income (after subtracting out BAQ, VHA and adjusting for exceptions).
  - a) Exceptions: Reenlistment bonus or clothing allowance are once a year entitlement and should be counted only once (not multiplied by 12 for yearly income). If there are any uncertainties, it is the participant's responsibility to present a second LES without exception, to show this is not a monthly entitlement.

### E. Exclude from income:

1. BAQ or VHA: Bachelor Allowance for Quarters or Variable Housing Allowance pay are Not to be counted and should be subtracted from the "Total Earnings";
2. BAH: Basic Allowance for Housing for off-base housing and privatized housing in the U.S.; Family Separation Housing (FSH) provided to military personnel for Housing Allowance (OHA), provided to military personnel living overseas. These housing allowances will be reflected as BAH, FSH and OHA on military pay statements;

# Certification Standards

## Section 3: Income Eligibility Determination

3. OCONUS COLA: Overseas continental service members in designated overseas high-cost areas including Hawaii, Alaska and Guam. This option affects all WIC State agencies since some members of a military family may remain stateside and apply and/or participate in WIC while a family member on duty overseas receives the OCONUS COLA. This allowance is reflected as OCONUS COLA on military pay statement.
  4. Military Combat Pay: Combat pay is excluded as income when it is:
    - a) Received in addition to the service member's basic pay;
    - b) Received as a result of the service member's deployment to or service in an area that has been designated as a combat zone; AND
    - c) Not received by the service member prior to his/her deployment to or service in the designated combat zone.
      1. A combat zone is any area that the President of the United States designates by Executive Order as an area in which the U.S. Armed Forces are engaging or have engaged in combat.
      2. Combat Pay can be found under the Entitlement Section of the LES.
- F. Special Situations
1. Some military families may begin reporting a higher gross income amount at the time of application or reapplication for WIC benefits than existed prior to a military deployment, If such families include one or more members stationed overseas or away from home and the military has determined that these military service personnel are on hazardous duty or combat duty or combat pay, family separation allowance, and/or foreign duty pay. This additional income is provided on a temporary basis. Therefore, State agencies may elect to consider the income of such a family during the past 12 months as a more accurate indicator of the family's income status, as opposed to calculating income on a "current" rate basis.
  2. In addition, local agency staff may encounter applicants from families in which one or more family members are military reservists who have been placed on active duty. Some of these families will experience dramatic changes in their income source(s) and total gross income such that they may become income eligible for the WIC Program. Consistent with the definitions outlined in IL WIC PPM CS 3.5 staff are encouraged to determine such a family's income eligibility determination based on their "current" rate of income (while the reservist is on active duty), as opposed to income received over the past 12 months as it may be a more accurate determination of the family's income status.
- G. Children in the Temporary Care of Friends or Relatives
1. If both parents are deployed overseas or temporarily assigned to a base and children are temporarily left in another person(s) care, there are three options to determine income.
  2. These options may also be used if one parent and children temporarily move in with friends or relatives.
    - a) Count the absent parents and their children as the economic unit. Use this option when total gross income of the family can be determined.



# Certification Standards

## **Section 3: Income Eligibility Determination**

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- b) Count the children only as the economic unit. Use this option when the parents have designated a portion of their pay as the children's allotment and this allotment amount is adequate, in the local staff person's opinion, to meet the children's needs.
- c) Count the children and the person(s) they are living with as the economic unit. Use this option when the previous two options are not applicable.

# Certification Standards

## Section 3: Income Eligibility Determination

### 7. WIC Income Exclusions (Effective: February 2021)

- A. Loans, not including amounts to which the applicant has constant or unlimited access.
- B. Payments or benefits provided under certain Federal programs or acts are excluded from consideration as income by legislative prohibition. The programs or benefits which must be excluded from consideration as income include, but are not limited to:
  - 1) Reimbursements from the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970.
  - 2) Any payment to volunteers under Title I [Volunteers in Service to America (VISTA) and others] and Title II [Retired Senior Volunteers Program (RSVP), Senior Companions Program (SCP), Foster Grandparents Program (FGP), and others] of the Domestic Volunteer Service Act of 1973.
  - 3) Payment to volunteers under section 8(b)(1)(B) of the Small Business Act (Service Corps of Retired Executives (SCORE) and Active Corps of Executives (ACE)).
  - 4) Income derived from certain sub-marginal land of the United States which is held in trust for certain Indian tribes.
  - 5) Payments received under the Job Training Partnership Act (e.g., Adult and Youth Training Programs, Summer Youth Employment and Training Programs, Dislocated Worker Programs, Programs for Native Americans, Migrant and Seasonal Farm Workers Program, Veterans Employment Programs, and Job Corps).
  - 6) Income derived from the disposition of funds to the Grand River Band of Ottawa Indians.
  - 7) Payments received under the Alaska Native Claims Settlement Act.
  - 8) The value of assistance to children or their families under the National School Lunch Act, as Amended (National School Lunch Program, Summer Food Service Program, Child and Adult Care Food Program), the Child Nutrition Act of 1966 (Special Milk Program, School Breakfast Program), and the Food Stamp Act of 1977 (Food Stamp Program, Food Distribution Program on Indian Reservations).
  - 9) Payments by the Indian Claims Commission to the Confederated Tribes and Bands of the Yakima Indian Nation or the Apache Tribe of the Mescalero Reservation.
  - 10) 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.
  - 11) Payments under the Low-income Home Energy Assistance Act, as amended-
  - 12) Student financial assistance received from any program funded in whole or part under Title IV of the Higher Education Act of 1965, including the Pell Grant, Supplemental Educational Opportunity Grant, State Student Incentive Grants, Stafford Loans, PLUS, Supplemental Loans for Students, College Work Study, and Byrd Honor Scholarship programs, which is used for costs described in section 472 (1) and (2) of that Act. The specified costs set forth in section 472 (1) and (2) of the Higher Education Act are tuition and fees normally assessed a student carrying the same academic workload as determined by the institution and including the costs for rental or purchase of any equipment, materials, or supplies required of all students in the same course of study;

# Certification Standards

## Section 3: Income Eligibility Determination

and an allowance for books, supplies, transportation, and miscellaneous personal expenses for a student attending the institution on at least a half- time basis, as determined by the institution. The specified costs set forth in section 472 (1) and (2) of the Act are those costs which are related to the costs of attendance at the educational institution and do not include room and board and dependent care expenses.

- 13) Payments under the Disaster Relief Act of 1974, as amended by the Disaster Relief and Emergency Assistance Amendments of 1989.
- 14) 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.
- 15) Payments pursuant to the Agent Orange Compensation Exclusion Act.
- 16) Payments received for Wartime Relocation of Civilians under the Civil Liberties Act of 1988 (Japanese Internment Camps).
- 17) Value of any childcare payments made under section 402(g)(1)(E) of the Social Security Act, as amended by the Family Support Act (e.g., TANF Child Care Program, Title IVA Child Care Program, JOBS Child Care Program).
- 18) Value of any At-Risk Child Care Program payments made under section 5081 of P.L. 101- 508, which amended section 402(i) of the Social Security Act.
- 19) Value of any Child Care and Development Block Grant Program payments, as amended in 1992.
- 20) Mandatory salary reduction amount for military service personnel which is used to fund the Veteran's Educational Assistance Act of 1984 (GI Bill), as amended.
- 21) Payments received under the Old Age Assistance Claims Settlement Act, except for per capita shares in excess of \$2,000.
- 22) Payments received under the Cranston-Gonzales National Affordable Housing Act, unless the income of the family equals or exceeds 80 percent of the median income of the area.
- 23) 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 percent of the median income of the area.
- 24) Payments received under the Sac and Fox Indian claims agreement.
- 25) Payments received under the Judgment Award Authorization Act, as amended.
- 26) Payments for the relocation assistance of members of Navajo and Hopi Tribes.
- 27) Payments to the Turtle Mountain Band of Chippewas, Arizona.
- 28) Payments to the Blackfeet, Grosventre, and Assiniboine tribes (Montana) and the Papago (Arizona).
- 29) Payments to the Assiniboine Tribe of the Fort Belknap Indian community and the Assiniboine Tribe of the Fort Peck Indian Reservation (Montana).
- 30) Payments to the Red Lake Band of Chippewas.

# Certification Standards

## **Section 3: Income Eligibility Determination**

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- 31) Payments received under the Saginaw Chippewa Indian Tribe of Michigan Distribution of Judgment Funds Act.
- 32) Payments to the Chippewas of Mississippi.

# Certification Standards

## Section 3: Income Eligibility Determination

### 8. *Income Reassessment during a Certification Period (Effective: February 2021)*

- A. In situations where the local agency receives information indicating that the economic unit's income has changed staff must complete a mid-certification reassessment of income during the current certification period as indicated below.
  - 1. A mid-certification reassessment of income is not required when the participant has 90 days or less before the termination of the certification period.
  - 2. A mid-certification reassessment of income is required when there are more than 90 days remaining in the current certification period for the participant and other members of the economic unit who are participants using the following steps:
- B. For participants certified originally based on a traditional income eligibility screening, local agencies must disqualify a participant, and any other economic unit members.
- C. For participants certified originally via adjunctive eligibility:
  - 1. Determine if they qualify under another program which confers adjunctive eligibility (IL WIC PPM CS 3.4).
  - 2. If adjunctive eligibility does not apply complete a traditional income screening (IL WIC PPM CS 3.5).
- D. If no longer income eligible, the participant must be terminated from the program following the required 15-day notification period. The following steps must be taken:
  - 1. Issue benefits;
  - 2. Provide a right to a fair hearing notice;
  - 3. Provide a termination/ineligibility notice;
  - 4. The staff person who completed the Mid-Certification Reassessment should enter a brief note in the General Note section of the WIC MIS for each individual participant record indicating the participant's eligibility status as result of the mid-certification reassessment.

# Certification Standards

## Section 3: Income Eligibility Determination

### 9. Shortened (30 Day) Certification (Effective: February 2021)

- A. The State agency uses a shortened (up to 30 days) certification for applicants that have one qualifying nutrition risk and can present at least two of the three required documents during a certification appointment (proof of residency, income and identify).
  1. The participant will be scheduled to return before the end of 30 days to provide the appropriate proof, or termination from the program will result and no further benefits issued.
  2. Local agency staff will review the 30-Day Certification Form with the applicant and ensure they understand and have signed it.
  3. Local agency will scan the form into the WIC MIS and provide the original, signed 30 Day Certification Form to the applicant. This document provides information on the missing proof, time frame in which the applicant must provide the proof as well as informs the applicant of their right to a fair hearing. Staff should inform participant of acceptable forms of the missing proof that is needed within the 30 days (IL WIC PPM CS 2.2, CS 3.1, CS 4.1).
  4. A full certification must be completed, including nutrition risk assessment and nutrition education, prior to benefit issuance for the current month (30 days).
  5. If a participant was terminated from the program for failure to return with an acceptable proof within the 30 days, but returns at a later date with the proof, the local agency will rescreen and begin the recertification process.
  6. A second shortened (30 day) certification is not allowed within the certification period.
  7. No additional benefits can be issued to participants returning without proof beyond the initial 30-day period.

### **Addendum: 30 Day Certification Form**

# Certification Standards

## Section 4: Identity

### 1. *Identity Documentation (Effective: February 2021)*

- A. Proof of identity must be checked by the local agency for:
  - 1. each applicant (women, infants and children) at certification appointments;
  - 2. parents, guardians, caretakers or foster parents for infants or children at time of card issuance.
- B. Acceptable forms of identity documentation include the following, current electronic or paper versions:
  - 1. Birth Certificate
  - 2. DCFS Placement Papers
  - 3. Government Issued ID (including Driver's License, Passport or Social Security Card)
  - 4. Health Plan Card issued in participant's name
  - 5. Hospital Documentation (Crib Card, ID Bracelet, Etc.)
  - 6. Immunization Record
  - 7. Matricula Consula ID Card
  - 8. Pay Stub
  - 9. Photo ID (including Work or School)
  - 10. Unemployment Benefits
  - 11. Voter Registration Card
  - 12. W-2 Form
  - 13. WIC Identification Card (once initial proof of ID has been established)
- C. It is the responsibility of each local agency staff person to question and if necessary, ask for another form of ID whenever she/he is uncomfortable with the validity of the item presented as proof of identity.
- D. If the local agency wants to use additional documents other than those listed above to establish identity, the local agency must develop a procedure and submit to the State agency for approval prior to implementation. The procedure cannot be more restrictive than the State policy and must be kept on file for review.
- E. In situations where an applicant does not provide an acceptable form of identity, the local agency will complete a 30-Day Certification Form (IL WIC PPM CS 3.9).

# Certification Standards

## Section 4: Identity

### 2. Foster Parents/Caretakers (Effective: February 2021)

#### A. Foster Parents

1. Foster parents are required to have written documentation from the Department of Children and Family Services (DCFS) verifying the child's status.
  - a) Marking the "Foster Care" checkbox in the WIC MIS indicates this documentation was reviewed.
2. The DCFS provides annual approval in writing to the Department allowing foster parents to sign consent forms for hemoglobin/hematocrit testing for participants in the WIC program.
3. Foster parents for pregnant and parenting teens will usually be a proxy or designated shopper and the teen will be her own head of household.

#### B. Caretakers

1. For WIC purposes a caretaker is an individual who does not have legal guardianship, but the child lives with them and they have financial and medical responsibility for the child.
2. The economic unit income of the caretaker must be used.
3. A babysitter who cares for the child any portion of the day is not considered a caretaker.



# Certification Standards

## Section 4: Identity

### 3. WIC ID Card (Effective: February 2021)

- A. A WIC ID Card must be completed for each household or foster child.
- B. General Information
  - 1. The Department provides WIC Client Identification (ID) Cards to all Local Agencies. These ID Cards are a uniform client reminder system. The ID card can be used for identification at the WIC office.
  - 2. The front of the card reflects:
    - a) Name, address, phone number and fax of the issuing Local Agency
    - b) First and last names of the participant(s)
    - c) Household and Participant ID numbers
    - d) Signature of the participant or parent/guardian/caretaker
    - e) Signature of the authorized proxy
  - 3. The inside of the card must be completed and reviewed at each certification and as needed including:
    - a) Using the WIC EBT Card
    - b) Participant Rights and Responsibilities (including Appeal Rights)
    - c) Service Ending Information
  - 4. The back of the card provides appointment information.
- C. Identification (ID) Card Issuance
  - 1. Families should be listed on one ID card
  - 2. A foster child is a family unit of one and will receive his/her own WIC ID card
- D. Identification (ID) Card Replacement
  - 1. Replacement card(s) can be provided when the ID card is lost, damaged, full, the proxy changes, or the card is stolen, and the Head of Household or proxy presents their picture identification.
  - 2. If no picture identification is available, verification of the requestor's signature must be viewed in the WIC MIS to compare.

### **Addendum - WIC ID Card**

# Certification Standards

## Section 5: Nutrition Assessment

### 1. *General Information (Effective: February 2021)*

- A. A WIC Nutrition Assessment is the first step in providing quality nutrition services. In order to provide an appropriate and personalized nutrition intervention (i.e., nutrition education, food package tailoring and referrals), it is necessary to first conduct a nutrition assessment. Follow-up is also an important part of the nutrition services process; it allows WIC staff to monitor progress, reinforce the nutrition education message, and elicit feedback from the participant.
1. Information necessary for a complete WIC Nutrition Assessment includes anthropometric, biochemical, clinical, dietary, environmental, and family data as well as other information that impacts nutritional status. Once all relevant information is collected it must be clarified and synthesized<sup>4</sup>.
  2. The assessment process is the final component in eligibility determination as applicants must meet specific criteria for nutrition risk as described in the Illinois WIC Risk Factor Justification Manual (RFJM).
  3. When determining eligibility, a Value Enhanced Nutrition Assessment (VENA) must be completed on participants, by qualified staff, at the time of certification to assess for all applicable risks.
  4. Data used in completing the WIC Nutrition Assessment will impact the quality of the assessment, and potentially eligibility, therefore, anthropometric and biochemical values used must be:
    - a) Collected on-site;
    - b) Via a hospital/physician statement or electronic medical record;
    - c) Local agency referral form or the Illinois WIC Medical Referral Form.
    - d) Verbal information is not acceptable.
  5. For infants and children birth data is not required for a WIC Certification and values must only be entered into the WIC MIS when provided by the allowed means listed above or the birth certificate.
    - a) If the birth data is unknown, the appropriate box must be selected in the WIC MIS
  6. Local agencies must complete all parameters of the nutrition risk assessment as described in this section and the Risk Factor Justification Manual (RFJM) and be performed at no cost to the applicant.
  7. Agencies must have a written procedure for communicating abnormal values and health concerns to health care providers and are strongly encouraged to include those providers in establishing referral values.

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<sup>4</sup> Value Enhanced Nutrition Assessment in WIC Manual; USDA FNS

# Certification Standards

## Section 5: Nutrition Assessment

### 2. *Physical Presence (Effective: August 2023)*

- A. WIC applicants must be seen in the clinic during each certification appointment and be documented in the WIC MIS. This includes participants presenting with referral data from their provider.
- B. Local agencies must grant an exception to the physical presence requirement for applicants in the following situations. These exceptions must be documented on the Cert Action screen in the WIC MIS.
  - 1. Natural Disasters (IL WIC PM AD14).
  - 2. Medical Condition
    - a) Medical condition that necessitates the use of medical equipment that is not easily transportable.
    - b) Medical condition that requires confinement or bed rest.
    - c) Serious illness that may be exacerbated or communicable to other participants by coming into the WIC clinic.
    - d) Applicants with disabilities and/or for those whose Head of Household have disabilities and are unable to be physically present at the WIC clinic.
  - 3. Working Parents or Caregivers.
    - a) Staff should follow policy for two-parent households when possible (IL WIC CS 1.1).
    - b) If two-parent household is not applicable, the following gives an exception for working parents or caregivers:
      - (1) Infant / child was present for initial certification, and
      - (2) Was present at a certification within 1-year of the most recent certification or recertification, and
      - (3) HOH whose work status presents a barrier to bringing the infant or child into the WIC Clinic.
  - 4. Infant or Child is receiving ongoing health care as follows:
    - a) *Infants under 8 weeks of age* for whom all necessary certification information is provided.
      - (1) Consecutive in-person appointments (including mid-certification) cannot be waived unless a medical condition applies as indicted above.
    - b) Currently actively enrolled in Early Head Start or Head Start. Agencies must obtain data from these programs per Department MOU agreement.
- C. When physical presence is waived, agencies must obtain anthropometric and biochemical data before the scheduled appointment otherwise the appointment must be rescheduled.

# Certification Standards

## Section 5: Nutrition Assessment

### 3. Anthropometric Assessment (Effective: August 2023)

- A. Obtain the weight and height/length for all applicants.
  - 1. Measurements must be taken per the Centers for Disease Control (CDC) guidelines. Verbal information is not acceptable.
  - 2. Two measurements are expected for validation however, if the applicant is cooperative and a good measurement is acquired a second measurement need not be taken.
  - 3. It is recommended for staff to conduct quality assurance checks periodically during the year to ensure proper techniques are followed.
- B. Referral medical data may be used for anthropometric data (e.g. height/length, weight) when obtained from a qualified medical professional, such as private physician, health clinic personnel, hospital personnel or HMO prior to the WIC certification visit.
  - 1. Referral forms must include applicant's name, date of birth, physician's name/address/telephone, date of measurements, and health professional's signature.
  - 2. Measurements must have been taken within the last 60 days. For infants less than 14 days old, hospital discharge measurements may be used.
  - 3. If the data is questionable or the physician is unknown, then the measurements should be retaken.
  - 4. When data is not collected on-site it must be documented in the WIC MIS. When entering data in the WIC MIS select "Non-WIC" and enter the date of the referral data.
- C. Assessing weight and height/length data.
  - 1. Data entered in the WIC MIS will be plotted on the appropriate growth chart, pregnancy weight gain grid or BMI Chart depending on age and participant category. Risk factors will auto-generate based on this data and criteria from the I-WIC Nutrition Risk Criteria.
- D. Quality and reliable medical-grade measurement equipment must be used.
  - 1. Equipment (adult and infant scale, stadiometer and recumbent board) must be validated or calibrated annually at a minimum.
  - 2. Validation logs must be kept on file.
  - 3. Documentation notating service by an outside provider that includes the date of calibration is acceptable.

**Addendum: Anthropometric Flow Sheet**

**Addendum: Illinois WIC Medical Referral Form**

**Addendum: Validation/Calibration Log**

# Certification Standards

## Section 5: Nutrition Assessment

### 4. *Biochemical Assessment (Effective: August 2023)*

- A. A blood test for anemia such as a hemoglobin or hematocrit, must be performed and/or obtained from referral sources for all applicants, using the following time frames per category.
- B. Time Frames
  - 1. Pregnant Women: Data must be reflective of category and collected at the earliest opportunity during pregnancy.
  - 2. Breastfeeding and Postpartum Women: Data must be reflective of category and ideally completed within 4-6 weeks after delivery. For Breastfeeding women 6-12 months postpartum, no additional blood test is required if a previous blood test, taken after delivery, was within normal limits.
  - 3. Infants:
    - (1) It should not be local agency standard operating procedure to screen for anemia before 9 months of age.
      - (1) A blood test before nine months of age may be appropriate for preterm and low birth weight infants not fed iron-fortified formula and is permissible to allow for flexibility on a case-by-case basis.
    - (2) All infants nine months of age and older (who have not already had a blood test performed or obtained, between the ages of six and nine months), must have a blood test performed between nine and twelve months of age.
      - (1) For infants under 6 months, who are certified to their first birthday, complete blood test at their one-year certification visit.
      - (2) For infants who are certified 6 months or older, hemoglobin must be obtained between nine and twelve months of age.
  - 4. Children:
    - (1) Only one blood test is required for children between 12 and 24 months of age and should be obtained at least 6 months after the infant test.
    - (2) A blood test must be performed or obtained for children at least once every 12 months (at each certification).
    - (3) If test reveals anemia, a follow-up blood test is recommended at 6-month intervals until the results are in the normal range.

# Certification Standards

## Section 5: Nutrition Assessment

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### C. Referral Biochemical Data:

1. Referral hemoglobin or hematocrit may be used for the biochemical assessment when obtained from a qualified medical professional, such as private physician, health clinic personnel, hospital personnel or HMO prior to the WIC certification visit.
2. There is no maximum allowable age of referral hematological data; however, the data must be reflective of a woman applicant's category (e.g., pregnant, postpartum or breastfeeding), or conform to the anemia screening schedule for infants and children as outlined earlier in this section.
3. When data is not collected on-site it must be documented in the WIC MIS. When entering data in the WIC MIS select "Non-WIC" and enter the date of the referral data.

# Certification Standards

## Section 5: Nutrition Assessment

### 5. *Deferral of Anthropometric and Biochemical Data (Effective: August 2023)*

- A. Anthropometric and biochemical data must be obtained as part of a thorough WIC nutrition risk assessment (either on-site or through referral data).
  - a) When physically present, anthropometric and biochemical data may only be deferred when the participant is uncooperative or disabled. The deferral reason must be documented on the Lab Screen in WIC MIS.
  - b) When physical presence is waived (IL WIC PM CS 5.2), agencies must obtain anthropometric and biochemical data before the scheduled appointment within required timeframes (WIC PM CS 5.3 and 5.4).
    - (1) Document receipt of data in the WIC MIS notes following the PPS Secure and Confidential Communications with WIC Participants.
- B. Hemoglobin or hematocrit testing may be deferred up to 90 days. If data is not obtained within 90 days, the participant must be terminated from the program as a voluntary withdrawal and documented on the Cert Action screen in WIC MIS as “No Bloodwork Provided”.
  - a) Document on the Lab screen in WIC MIS as “No Blood”, exemption reason “Deferred”. Do not enter previous or verbal values.
  - b) Refusal for Medical or Religious Reasons – in rare instances, an applicant/participant may refuse hemoglobin or hematocrit based on medical or religious reasons. The reason the hemoglobin or hematocrit test was not performed must be documented on the Lab screen in WIC MIS as “No Blood”, exemption reason “Medical Condition” or “Religion”.
  - c) Local Agencies must have a detailed procedure for ensuring follow up and collection of data when not obtained at the time of certification.

# Certification Standards

## Section 5: Nutrition Assessment

### 6. *Diet Assessment (Effective: February 2021)*

- A. The WIC Program's approach to dietary assessment will be qualitative, not quantitative. Staff must ask open-ended questions, in addition to the WIC MIS questions for data collection. Examples may include asking about: appetite, favorite foods, and cultural food preferences. Such questions will foster positive communication and can serve as a "springboard" for further discussion. The WIC Category Assessment Guides assist in this process.
- B. Food choices have short-and long-term effects on health status. These effects may be seen during the WIC assessment as other nutritional status indicators, such as altered body weight, growth pattern, or hemoglobin level. When such conditions are identified, it is logical to look for clues related to foods consumed. For example, an inappropriate infant feeding practice like putting cereal in the bottle could explain an infant's rapid weight gain.
- C. Variables such as knowledge, attitudes, beliefs, and family and community environment affect food consumption. "Lifestyle" practices, such as alcohol or tobacco use, or lack of routine physical activity, can also affect food choices and nutritional risk indicators.
- D. For all applicants, evaluate dietary pattern and feeding practices via the WIC MIS Health and Nutrition screens.
- E. If during the WIC Nutrition Assessment, no risk factors are identified for:
  - 1. Infants 0-3 months of age- they will not be eligible for the WIC Program (IL WIC PPM CS 13.1);
  - 2. Infants 4-11 months of age, children, pregnant and post-partum women- the appropriate presumptive eligibility risk factor will be generated by the WIC MIS.

### ***Addendum- WIC Assessment Guides***



# Certification Standards

## Section 5: Nutrition Assessment

### 7. *Breastfeeding Assessment (Effective: February 2021)*

- A. The breastfeeding assessment and the mother's plans for breastfeeding serve as the basis for determining food package issuance and the counseling and support provided to the mother (IL WIC PPM AD 10.1).
- B. WIC's goal is to encourage mothers to breastfeed exclusively without supplementing with formula.
- C. A mother who intends to breastfeed should be provided counseling and support to help her feed only breast milk to her baby.
- D. Efforts should be made to schedule mothers who intend to breastfeed for subsequent certification as soon after delivery as possible in order to provide timely breastfeeding support.
- E. A comprehensive breastfeeding assessment must be completed and documented in the WIC MIS:
  - 1. At the initial certification visit;
  - 2. Any time a breastfeeding woman wishes to change her breastfeeding status;
  - 3. Any time a breastfeeding food package is changed.

# Certification Standards

## Section 6: Priority System for Nutrition Risk Criteria

### 1. *Priority System (Effective: February 2021)*

- A. Based on category, each participant is assigned a Priority to assure that those persons at greatest nutrition risk receive program benefits.
  1. A priority [one (1) through six (6)] is assigned to each participant at certification.
  2. If a lactating woman who was certified with risk factors of her own ceases breastfeeding before six months postpartum, her category will need to be changed to postpartum (NP) but her priority will remain the same.
  3. A lactating woman may be determined to be at nutrition risk based upon her own health status or that of her infant. A breast-fed infant can be certified based on the mother's medical and/or nutrition assessment. All breast-fed infants and their mothers must be assigned the same, highest priority for which either qualifies.
  4. Previously certified participants do not take precedence over new applicants and must be evaluated to determine program eligibility.
  5. Priorities assigned include the following:
    - a) Priority 1
      - 1) Pregnant women, lactating women and infants at nutrition risk as demonstrated by hematological or anthropometric measurements; or medical condition(s) which demonstrate the person's need for supplemental foods.
    - b) Priority 2
      - 1) Infants up to six months of age born to women who would have been Priority 1 had they participated in WIC during their pregnancies.
      - 2) Infants up to six months of age born of high-risk women (not on WIC) whose medical records document that they were at nutrition risk during pregnancy due to hematological or anthropometric measurements, or medical condition(s) which demonstrate need for supplemental foods.
    - c) Priority 3
      - 1) Children at nutrition risk as demonstrated by hematological or anthropometric measurements or medical condition(s) which demonstrate the child's need for supplemental foods.
      - 2) Postpartum women with risk factor for adolescent pregnancy.
    - d) Priority 4
      - 1) Pregnant women, lactating women, and infants at nutrition risk because of inappropriate nutrition practices or presumed to be at nutrition risk.
    - e) Priority 5- Children at nutrition risk because of inappropriate nutrition practices or presumed to be at nutrition risk.
    - f) Priority 6- Postpartum, non-lactating women at nutrition risk.

# Certification Standards

## Section 7: Certification Periods

### 1. Certification Periods (Effective: February 2021)

- A. Based on category, each participant certified on the WIC Program is eligible to receive program benefits for an established period of time.
1. Pregnant women (P category) are certified for the duration of their pregnancy and up to six (6) weeks postpartum regardless of pregnancy outcome.
  2. Lactating women (BE/BP category) are defined as “all women exclusively or partially breastfeeding to any degree, up to one year postpartum.”
    - a. Breastfeeding women are certified for intervals of twelve months ending with the infant's first birthday.
      - (1) Women who continue to breastfeed after six (6) months but receive supplemental formula for their infants above the maximum allowed maintain breastfeeding priority.
    - b. If a woman stops breastfeeding when she is less than six (6) months postpartum she is eligible to remain on the program as a postpartum woman (NP category) until six (6) months postpartum.
    - c. Women who cease breastfeeding after six (6) months fall under the guidance for postpartum, non-breastfeeding women (NP category) and will terminate.
  3. Postpartum, non-breastfeeding women (NP category) are eligible for certification up to six (6) months following delivery or termination of pregnancy.
  4. Infants (IBE/IBP/IFF Category) under six (6) months of age are certified up to their first birthday.
    - a. The termination date is the date of their first birthday.
    - b. The quality and accessibility of health care services should not be diminished.
  5. Infants (IBE/IBP/IFF Category) six (6) months of age or older are certified for intervals of six months.
    - a. Termination date is six months from the date of certification.
  6. Children (C1/C2/C3/C4 Category) are certified for one-year intervals.
    - a. The termination date is twelve months from the date of certification.
    - b. If a child reaches his 5th birthday during his certification period, the termination date is the date of his 5th birthday.
    - c. The quality and accessibility of health care services should not be diminished, and nutrition education contacts must be made available at a quarterly rate.

# Certification Standards

## Section 8: Maintaining Quality Assurance for One Year Certifications

1. ***Maintaining Quality Assurance for One Year Certifications (Effective: August 2023)***
  - A. The intent of one-year certifications is to reduce the administrative burden on both WIC staff and participants while maintaining quality nutrition services. A Mid-Certification appointment focuses on nutrition assessment and education.
  - B. Participants certified for one-year intervals require a mid-certification nutrition assessment. One-year certifications are allowed for the following categories:
    1. Infants under six (6) months of age.
    2. Breastfeeding women until they cease breastfeeding or up to their infant's first birthday.
    3. Children up to their fifth birthday.
  - C. To assure quality and accessibility of health care services a mid-certification assessment is required approximately 6 months into the certification period and includes:
    1. Anthropometric measurements.
    2. Bloodwork- must be obtained following the schedule outlined in IL WIC PM CS 5.4.
    3. Review of previous notes (e.g., nutrition and breastfeeding) and nutrition risks.
    4. A brief update of health and dietary assessment using the Mid-Certification screen in WIC MIS. If changes to risk factors are needed follow IL WIC PM CS 5.6.
    5. Category specific nutrition education pertinent to the participant's needs.
    6. Follow-up to the immunization screening and referrals provided during certification for infants and children (IL WIC PM CS 12.3).
  - D. If the above required anthropometric and biochemical data are received before the scheduled appointment within required timeframes, the appointment may be completed remotely (IL WIC PM CS 5.3, 5.4, 5.5).
  - E. Document the mid-certification assessment in the WIC MIS per policy. In addition, the "notice of service ending" must be updated in the WIC ID Card and explained, if applicable.
  - F. Food benefits cannot be withheld for failure to attend Mid-Certification appointments. Participants should be rescheduled and issued one month of food benefits (IL WIC PM NE 5.1). Participants should not be issued more than 2 consecutive months of food benefits for missed appointments without documentation of care from their Health Care Provider.
  - G. Follow guidance in *I-WIC Appointments* for certification periods, appointment types and required WIC MIS screens, and further details on Mid-Certification appointments.

### ***Addendum: I-WIC Appointments***

# Certification Standards

## Section 9: Caseload Management

### 1. *Definitions of Caseload Management (Effective: February 2021)*

- A. Caseload management includes all activities local agencies do to achieve their assigned caseload while following the WIC priorities and timeframes set forth within this policy.
  - 1. **Assigned/Base caseload** is the number of persons the agency is expected to serve monthly as determined by the Department. The agency goal is to reach and maintain this level of participation.
  - 2. **Active/Enrolled caseload** is participants with an active WIC record who may or may not have benefits for the current month. Any participant assigned a certification period is considered an enrollee in the WIC MIS.
  - 3. **Achieved caseload** is the actual number of individuals who receive food benefits in the month. The WIC MIS refers to this group as caseload.
  - 4. **Waiting lists** are meant to facilitate services for the highest priority participants at the earliest opportunity when caseload is exceeded and require Department approval (IL WIC PPM CS 9.2).

# Certification Standards

## Section 9: Caseload Management

### 2. *Processing Standards and Time Frames (Effective: February 2021)*

- A. Agency staff must accept applicants, arrive at eligibility determinations, and notify the applicants of the decisions made and, if the applicants are eligible, issue food benefits. All these actions must be accomplished within the processing standards set forth below.
  1. Processing Standards begin when the individual contacts the agency to schedule an appointment to request Program benefits. To ensure that accurate records are kept of the date of that request for benefits, the local agency must:
    - a) document the applicant's name and address in the WIC MIS;
    - b) the remainder of the information necessary to determine eligibility will be obtained at the time of certification.
  2. Local agencies must act on applications within the following time frames:
    - a) pregnant women eligible as Priority 1 participants, infants under six months of age and members of migrant farm worker households who plan to leave the jurisdiction of the local agency must be notified of their eligibility or ineligibility within ten (10) calendar days, of the date of the first request for Program benefits;
    - b) all other applicants must be notified of their eligibility or ineligibility within twenty (20) calendar days of the date of the first request for Program benefits.
    - c) Local Agencies should review the State guidance; *Policy Practice Standards: Caseload Management Strategies* provided on achieving caseload.
    - d) Scheduling records must be available during the Management Evaluation via the WIC MIS.
      - 1) Agencies should document in the WIC MIS participant conversations, in cases where the next available/first available appointment is not *preferred* by the household.
  3. Local agencies must issue food benefits to the participant at the same time as the notification of certification. The WIC Electronic Benefit Transfer (EBT) card shall provide benefits for the current month or the remaining portion thereof and shall be redeemable immediately.
  4. Agencies at Or Above Assigned Caseload Limit
    - a) When a local agency is at or exceeds the assigned caseload, they are encouraged to serve participants and new applicants.
    - b) The Department will make every effort to adjust caseload assignments for those agencies consistently over their assigned caseload.
    - c) If a local agency is unable to provide services beyond their assigned caseload, they should contact the Department.
      - 1) If in discussion with the Department it is determined the agency cannot serve new applicants beyond the assigned caseload, approval to initiate a waiting list may be given.

# Certification Standards

## Section 9: Caseload Management

- 2) Agencies must obtain approval from the Department prior to initiating a waiting list.
- 3) If an agency with a strong system of caseload management knows that certain priority applicants will never be served, it can make a request of the Department to exclude said priority from their waiting list.
- 4) Agencies must document, as a general note in the WIC MIS when applicants contact them, for an appointment and cannot be served within the established timeframes.
- 5) Maintaining Waiting Lists
  - 1) With Department approval, a waiting list is maintained of categorically eligible individuals who visit the local agency and express interest in receiving Program benefits.
  - 2) In some cases, it may be clear the applicant is unlikely to be served, however, if an applicant insists on being placed on a waiting list, he or she must be added.
  - 3) Individuals must be notified of their placement on a waiting list within twenty (20) days after they visit the local agency during clinic office hours to request Program benefits.
  - 4) The local agency must use the WIC MIS for the waiting list. In order to contact the individuals when caseload space becomes available, the minimum data entered for the waiting list must include:
    - (i) name of the applicant;
    - (ii) address or phone number of the applicant;
    - (iii) applicant's status (e.g., pregnant, breastfeeding, age of applicant);
    - (iv) date placed on the waiting list (generated automatically).

### ***Addendum: Policy Practice Standards: Caseload Management Strategies***

# Certification Standards

## Section 9: Caseload Management

### 3. *Scheduling (Effective: February 2021)*

- A. Each local agency must have a system for screening and providing services to new applicants and recertifying participants.
  - 1. Walk-in scheduling is utilized when no previously scheduled appointment exists for the applicant/participant. They offer many benefits including reducing the amount of time spent on reminder calls, scheduling calls and preparing for next day appointments. They also allow for greater flexibility of work schedules for clinic staff and flexible appointments for participants.
  - 2. The availability of planned appointments must be offered to meet the needs of the working and student populations and minimize absence from work and/or school.
- B. Prioritizing
  - 1. In order to facilitate participation of special populations on WIC including working families, homeless, migrants, minorities and those residing in rural areas, local agencies must implement processes that allow them access to the program by:
    - a) adjustment of clinic hours (Saturday clinics, early bird morning services, evening appointments) to accommodate travel and work schedules;
    - b) maintaining clinic locations in areas of highest need.
  - 2. Anticipated "higher" priorities must be seen or given appointments before those individuals foreseen to be at lower priority. To accomplish this, staff responsible for assigning appointments should be familiar with the priority system of the program (IL WIC PPM CS 6 & CS 9.2).
    - a) High risk applicants, whether for certification or recertification, must receive priority for scheduling appointments.
    - b) High risk, new applicants must be given appointments, even when it requires delaying the recertification of lower risk certifications.



# Certification Standards

## Section 9: Caseload Management

4. ***Follow-up for Pregnant Women (Effective: February 2021)***
  - A. In an effort to enroll eligible pregnant women as early as possible, the local agency must attempt to contact each pregnant woman who misses her first appointment to apply for Program participation in order to reschedule the appointment.
    1. This policy applies to the initial certification interview only and should not include missed food benefit issuance or missed appointments for subsequent certifications.
    2. In contacting a pregnant woman, the following procedures should be followed:
      - a) at the time of initial contact (either by telephone or in person), the agency should obtain the pregnant woman's address and telephone number;
      - b) if the appointment is missed, the pregnant woman must be contacted:
        - 1) by telephone and offered a new appointment;
        - 2) by mail and request that she contact the local agency for a new appointment. The mail contact can be by letter or electronic mailing (email).
        - 3) The local agency must document that the contact was attempted. Acceptable forms of documentation include:
          - (a) written note on the computer scheduling reports;
          - (b) general notes section in the WIC MIS.
    3. Those agencies which currently have a system in place of sending reminder notices prior to the initial appointment are strongly encouraged to continue this practice. This will provide an additional means of reaching women applicants as early in the pregnancy as possible. Reminder notices do not replace the contact to be made if the appointment is not kept.
    4. Follow-up to participants who miss food benefits issuance and other appointments is encouraged as a means of reducing no-show rates and building caseload.

# Certification Standards

## Section 10: Participant Records

### 1. General Information (Effective: February 2021)

- A. Participant information and documentation required for certification is captured via the WIC MIS.
- B. Participant records include both paper documentation awaiting scanning into the WIC MIS and the electronic record.
  - 1. Forms to be scanned would include: if applicable, Release of Information, WIC Formula and Medical Nutritional Prescription Form, Explanation of WIC Benefits Letter, Verification of Certification (VOC), 30 Day Certification Form, Violations and Sanctions form, Ineligibility/Termination Notice, Electronic Records Consent.
- C. Each participant is assigned one identification number (Participant ID) through the WIC MIS. Every effort should be made to maintain this number through subsequent certifications.
  - 1. The ID number and name should be included on all forms in the participants' records and their WIC ID card (IL WIC PPM CS 4.3).
- D. Certification of a WIC participant can only be done through the WIC MIS. Data collected through the required WIC screens is stored in system and is part of the participant's record. The End-Of-Day (EOD) process will automatically occur each day.
- E. Agencies who utilize electronic record keeping systems/electronic medical records in addition to the WIC MIS for scheduling and/or filing of participant forms must comply with the following items.
  - 1. The participant must be advised it is optional to have his/her information entered into the additional system and WIC services will not be impacted by refusing to consent. Documentation of consent must be kept on file.
  - 2. The participant's WIC information must be kept confidential.
  - 3. Electronic participant records must be accessible for review to ensure compliance with WIC policy requirements.

# Certification Standards

## Section 10: Participant Records

2. **Documentation of Income Reassessment during Certification Period (Effective: February 2021)**
  - A. If the local agency is notified of a change in income of a household, a mid-certification income reassessment must be completed and documented in the WIC MIS for each participant.
    1. Income Eligibility:
      - a) document current Economic Unit Size;
      - b) document income provided at time of Mid-Certification Reassessment, and the method of determination.
    2. Ineligible – if applicable, document reason in the WIC MIS (IL WIC PPM CS 13.1).
    3. Notice of Service Ending
      - a) If upon mid-certification reassessment it is determined the participant will maintain current certification period status, Service End Date will not change, and information covered and documented at time of Certification meets this obligation.
      - b) If upon mid-certification reassessment it is determined the participant will be terminated, the following steps are to be taken:
        - (1) issue a minimum of 15 days up to 30 days of WIC benefits prior to terminating the participant's active status in the electronic record.
        - (2) advise participant when services will end (minimum of 15 days' notice required); the end date of the EBT benefits will serve as the Service Ending Date and must be documented in the WIC ID Card as well as on the WIC Ineligibility/Termination Notice.
    4. The staff person who completed the Mid-Certification Reassessment must complete and save the Income Screen in the WIC MIS for each individual participant record to indicate a mid-certification reassessment of income was completed.

# Certification Standards

## Section 10: Participant Records

### 3. Notes (Effective: August 2023)

- A. Local Agencies must document participant notes in the WIC MIS to ensure continuity of care.
- B. When WIC staff or participants are not on site together this should be clearly documented in the participant record.
  - 1. Participant is remote and staff is in clinic.
  - 2. Participant is remote and staff is remote.
  - 3. Participant is on-site at clinic x and CPA is at clinic y.
  - 4. Participant is on-site and CPA is remote.
- C. To assure accuracy, all notes should be completed on the day of the contact. Notes may be edited or removed the same day they are added, but not after.
- D. There are several note types used in the WIC MIS that create a care plan: General, Breastfeeding, and Nutrition Education notes. SAP format may be used when completing notes. Refer to *Nutrition Practice Standards Documenting in WIC MIS* for details on what must be included on each screen.
  - 1. Breastfeeding Note- used for breastfeeding dyads during certification, mid-certification, secondary education, and additional breastfeeding contacts.
  - 2. Nutrition Education Note- used for documenting individual in person (certification and secondary education) or telephone education.
  - 3. General Note- are used to document information not found in Breastfeeding Notes or Nutrition Education Notes. They are intended to be general in nature, may be added manually or auto generated by the WIC MIS and may not be necessary for every participant.
  - 4. Care Plan/SOAP Note- This type of note is optional, as information entered into the Nutrition Education and Breastfeeding Notes screens creates your participant care plan. If a CPA chooses to use this screen (e.g., high risk/priority participants) include information that is not documented in other notes or already in the WIC MIS.

### **Addendum - Nutrition Practice Standards - Documenting in WIC MIS**

# Certification Standards

## Section 11: Transfer of Certification

### 1. *General Information (Effective: February 2021)*

- A. The primary intent of transfer/Verification of Certification (VOC) provisions is to ensure seamless and continued participation of certified participants through the entirety of their certification period<sup>5</sup>
- B. There are three (3) types of transfers:
  - 1. In-State (between Local Agency clinics);
  - 2. Out-of-State (leaving Illinois);
  - 3. Out-of-State (coming into Illinois from another State).
- C. The Local Agency is required to accept valid VOC documents from another WIC Local Agency/State or the overseas WIC Program. Participants must be transferred and allowed to continue participating through the end of their current certification period as long as proof of identity and current residency in Illinois is provided.
- D. An Illinois WIC ID Card must be issued to all WIC participants. This card, completed per policy, provides the minimum information needed for VOC (IL WIC PPM CS 4.3).
- E. If a local agency is at maximum caseload, the transferring participant must be placed at the top of any waiting list and be enrolled as soon as possible.
- F. Staff must not require participants to sign a release of information to share VOC information with other State or Local WIC agencies.
  - 1. It is acceptable for agencies to request a fax or phone number to call back an agency to confirm a VOC request is legitimate.
- G. The "Verification of Certification" (VOC) Form in the WIC MIS must be issued to every participant who is a member of an economic unit in which there is a migrant farm worker or any other participant who is likely to be relocating during the certification period.
- H. For those participants receiving formula from WIC, provide a copy of the WIC Formula and Medical Nutritional Prescription Form to assist with and streamline the transfer of benefits.
- I. If a VOC is presented to a receiving agency and the certification will expire within the next 30 days, the receiving agency may offer the participant the option of a recertification appointment for her convenience.
- J. Receiving agencies are not required to do a mid-certification income reassessment.
- K. Incoming VOC documents from other States are required to be scanned into the WIC MIS.

<sup>5</sup> WIC Policy Memo 2016-4

# Certification Standards

## Section 11: Transfer of Certification

### 2. *In-State Transfer (Effective: February 2021)*

- A. Participants who re-locate within Illinois during a certification period and present at a clinic with a valid VOC or Illinois WIC ID Card may be transferred into the new local agency. They are considered “In-State Transfers.”
  - 1. Participants with no WIC ID Card/VOC must present proof of identity and current residency.
  - 2. The receiving clinic must ensure there is not a gap in program benefits.
  - 3. The transfer of participants within Illinois will be completed in the WIC MIS.
- B. Review the participant record to determine if the participant has received a secondary contact. Schedule a subsequent appointment for secondary nutrition education or recertification.
- C. A local listing of authorized WIC vendors must be provided and the Illinois Authorized Food list, if applicable.

# Certification Standards

## Section 11: Transfer of Certification

### 3. *Out-of-State Transfer (Effective: February 2021)*

- A. An Out-of-State transfer “**coming into Illinois**” is identified by a participant who presents a valid VOC form from another state, proof of identity and current residency. The receiving clinic must ensure there is not a gap in program benefits.
1. A valid VOC includes the following:
    - a) participant’s name;
    - b) WIC participant ID number;
    - c) certification date;
    - d) certification end date;
    - e) date of income determination;
    - f) benefits issued through date;
    - g) nutritional risk criteria;
    - h) certifying local agency name, address, phone number.
  2. A complete VOC is preferred for acceptance however it must contain the minimum information:
    - a) participant name;
    - b) certification date;
    - c) certification end date.
  3. If an out of state participant does not have the necessary VOC information the certification can be verified by calling the previous state or local agency for the required information.
    - a) Each state WIC agency is required to provide a single point of contact for all other WIC agencies use during regular business hours. Local agency staff can find this information at: <http://www.fns.usda.gov/wic/wic-contacts>
  4. Transferring participants must surrender any unused food instruments or their Electronic Benefit Transfer (EBT) card to the receiving WIC agency prior to issuance of Illinois food benefits.
    - a) Education on the Illinois Authorized WIC Food List and current listing of WIC vendors must be provided.
  5. The receiving clinic must destroy the unused food instruments or EBT card.
- B. An Out-of-State transfer “**leaving Illinois**” during the certification period will be issued a VOC (located in I-WIC) by the current Local Agency.

# Certification Standards

## Section 11: Transfer of Certification

### 4. *Department of Defense (DoD) WIC Overseas Program (Effective: February 2021)*

#### A. Background

1. The DoD was authorized by law to establish and operate a program like WIC, using DoD funds, for United States (U.S.) active duty military personnel and other support staff stationed overseas and their dependents. This program is called the WIC Overseas Program.
2. The WIC Overseas Program does not operate in locations that some may consider overseas such as Hawaii and Guam because the USDA WIC Program operates in these locations.
3. DoD has delegated the responsibility to administer the WIC Overseas Program to its Assistant Secretary of Defense (Health Affairs)/TRICARE Management Activity (TMA) DoD/TMA recently began to phase in implementation of the WIC Overseas Program in five locations. Including:
  - a) Lakenheath, England (Air Force);
  - b) Yokosuka, Japan (Navy);
  - c) Baumholder, Germany (Army);
  - d) Okinawa, Japan (Marines and Air Force);
  - e) Guantanamo Bay, Cuba (Navy).
4. Further implementation of the WIC Overseas Program will be phased in at other locations where WIC Overseas Program services and benefits can be provided.

#### B. Eligibility in the WIC Overseas Program is limited to:

1. members of the armed forces on duty at stations outside the U.S. and their dependents; Civilians who are employees of a military department (i.e., Army, Navy, or Air Force) who are U.S. nationals and live outside the U.S., and their dependents; and
2. employees of DoD contractors who are U.S. nationals living outside the U.S. and their dependents. (A “dependent” includes a spouse. U.S. Nationals are individuals who are U.S. citizens, or individuals who are not U.S. citizens but owe permanent allegiance to the U.S. as determined in accordance with the Immigration and Nationality Act.
3. All other eligibility requirements for the WIC Overseas Program mirror USDA’s WIC Program requirements. Further, legislation and DoD guidelines provide that WIC Program participants who are transferred overseas and meet the eligibility requirement noted above are eligible to participate in the WIC Overseas Program until the end of their certification period.
4. The WIC Overseas Program has been designed to mirror USDA’s WIC Program, and in an effort to provide continuity of services, the USDA WIC Program provides reciprocity to WIC Overseas participants who return to the U.S. Therefore, any WIC Overseas Program participant who returns to the U.S. with a valid WIC Overseas Program Verification of Certification (VOC) form must be provided continued participation in USDA’s WIC



# Certification Standards

## Section 11: Transfer of Certification

Program until the end of his/her certification period, assuming the local agency is not at its maximum caseload (IL WIC PPM CS 9.2).

5. The WIC Overseas Program VOC form is a full-page document which also serves as a Participant Profile Report.

### C. Issuance of Verification of Certification (VOC) Forms

1. Local agencies must issue VOC forms to WIC participants affiliated with the military who will be transferred overseas. WIC clinics are not responsible for screening and determining eligibility for WIC Overseas Program eligibility. WIC participants issued VOC forms when they transfer overseas must be instructed the following:
  2. there is no guarantee that the WIC Overseas Program will be operational at the overseas site where they will be transferred;
  3. by law, only certain individuals are eligible for the WIC Overseas Program;
  4. issuance of a VOC form does not guarantee continued eligibility and participation in the WIC Overseas Program;
  5. eligibility for the overseas program will be determined at the overseas WIC service site. Local agencies should emphasize the importance of WIC clinic staff completing all information on the VOC form because WIC Overseas Program personnel cannot readily contact a WIC Program to obtain further information. All VOC forms must contain the following:
    - a) the name of the participant;
    - b) the date the certification was performed;
    - c) the date income eligibility was last determined;
    - d) the nutrition risk conditions of the participant;
    - e) the date the certification period expires;
    - f) the signature and printed or typed name of the certifying local agency official;
    - g) the name and address of the certifying local agency;
    - h) an identification number or some other means of accountability.

### 6. Acceptance of WIC and Overseas Program VOC Form

- a) Local agencies must accept a valid WIC Overseas Program VOC form presented at a WIC clinic by WIC Overseas Program participants returning to the U.S. from an overseas assignment. In accepting a VOC form the following elements on the forms must be provided:
  - (1) participant name;
  - (2) date the participant was certified;
  - (3) date the current certification period expires;
  - (4) WIC Overseas program participants arriving in a WIC clinic and showing a VOC form with only these three pieces of information should be treated just as if the VOC form contains all of the required information.

- b) The following website lists current locations where the Overseas WIC Program operates: <http://www.tricare.mil/Welcome/SpecialPrograms/WICOverseas.aspx>

# Certification Standards

## Section 12: Referral to Services

### 2. *Local Referrals (Effective: February 2021)*

- A. When participants are screened for WIC, they must be referred to other health-related and public assistance programs (7 CFR 246). Each local agency must make a current, Local Referral List available to all staff via paper or from the WIC MIS.
- 1. The local agency must develop, implement and maintain a written procedure for:
  - a. providing appropriate referral information and updating, at least annually, the Local Referral List.
  - b. Obtaining consent, in compliance with confidentiality policy, to make the referral
- 2. Referrals can include but are not limited to SNAP-Ed, domestic violence programs, educational programs, food assistance programs, medical services including public and mental health services, shelters, housing and utilities resources, SNAP and TANF.
- 3. This procedure and the Local Referral List will be reviewed during the WIC Management Evaluation/Quality Assurance Review.

# Certification Standards

## Section 12: Referral to Services

### 2. *Medical Referrals (Effective: February 2021)*

#### A. Medicaid Information, Referral and Access

1. USDA/FNS regulations require states to provide the maximum income limits according to family size applicable to pregnant women, infants and children to age 5 under Medicaid. Therefore, local agencies must provide written information for referral concerning the Medicaid Program to WIC applicants and participants in a printed format.
2. At each certification, information is to be provided to adult participants and adults applying for themselves or on behalf of others. Adults applying on behalf of more than one infant/child need only be given the written information once for all children.
3. Local Agencies must provide a referral to the Medicaid program to all WIC applicants/participants, who at the time of WIC application, are not currently participating in the Medicaid program. Local agencies are encouraged to provide AllKids applications in their own clinics.
4. Applicants may also be referred to DHS local offices. Referrals to the Medicaid program include:
  - a. the referral of infant and children to the appropriate local area agency authorized to determine eligibility for the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Program; and
  - b. the referral of pregnant women to the appropriate local area agency authorized to determine Medicaid Presumptive Eligibility (MPE).

# Certification Standards

## Section 12: Referral to Services

### 3. *Immunization Screening and Referral (February 2021)*

- A. Immunization records are not required to obtain WIC benefits. WIC State and Local agencies must ensure that WIC infants and children are screened and referred using a documented immunization history<sup>6</sup>.
1. The Illinois Department of Public Health (IDPH) is the lead agency in immunization planning and screening, and is responsible for design of immunization services, etc. As an adjunct to health services, the WIC Program's role in immunization screening and referral is to support existing funded immunization activities. WIC involvement in immunization screening and referral activities should enhance rather than substitute for on-going Immunization Program initiatives.
  2. All WIC local agencies must have a process for screening and documenting the immunization status of infants and children applying for and participating in the WIC Program, and refer them, if necessary, for immunization services.
    - a. When scheduling WIC certification appointments for children under the age of two, advise parents and caretakers of infant and child WIC applicants that immunization records are requested as part of the WIC certification and health screening process. Explain to the parent/caretaker the importance that WIC places on making sure that children are up to date on immunizations but assure applicants that immunization records are not required to obtain WIC benefits.
    - b. At initial certification and all subsequent certification visits for children under the age of two, screen the infant/child's immunization status using a documented record. A documented record is a record (computerized or paper) in which actual vaccination dates are recorded. This includes a parent's hand-held immunization record (from the provider), an immunization registry, the IDPH data system I-CARE, or a participant chart (paper copy).
    - c. At a minimum, screen the infant/child's immunization status by counting the number of doses of DTaP (diphtheria and tetanus toxoids and acellular pertussis) vaccine they have received in relation to their age according to the current CDC schedule.
    - d. If the infant/child is under immunized:
      - (1) provide information on the recommended immunization schedule appropriate to the current age of the infant/child; and
      - (2) provide referral for immunization services, ideally to the child's usual source of medical care.
    - e. If a documented immunization record is not provided by the parent/caretaker:
      - (1) provide information on the recommended immunization schedule appropriate to the current age of the infant/child per federal and state guidelines;  
<https://www.cdc.gov/vaccines/schedules/easy-to-read/child-easyread.html>
      - (2) provide referral for immunization services, ideally to the child's usual source of medical care; and
      - (3) encourage the parent/caretaker to bring the immunization record to the next certification visit.

# Certification Standards

## Section 12: Referral to Services

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3. The purchase of vaccines and delivery of immunizations remain unallowable costs to WIC.

# Certification Standards

## Section 12: Referral to Services

### 4. *Blood Lead Screening (February 2021)*

- A. Childhood lead poisoning is one of the most common pediatric health problems in the U.S. today and is entirely preventable. Minority and poor children are disproportionately affected. WIC is an important partner in the efforts to combat this health risk through provision of information and referrals and assisting in an appropriate plan for nutrition intervention.<sup>4</sup>
  - 1. At the time of enrollment in WIC, staff must ask if the child has had a blood lead screening test.
    - a. If the child has not had a test, they must be referred to programs where they can obtain such a test.
    - b. If the child has been tested, staff should include the results in the WIC MIS, and provide education and counseling as appropriate.
  - 2. Per Public Law 106-387, WIC nutrition services and administration funds are not to be used to conduct blood lead screening tests. If blood is drawn or drawn and tested for WIC eligibility (hemoglobin/hematocrit) and lead screening at the same time, WIC and the lead screening program must each pay its fair share to the total cost.

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<sup>4</sup> USDA WIC Policy Memo 2001-1

# Certification Standards

## Section 12: Referral to Services

### 5. *Food Assistance Referrals (Effective: February 2021)*

#### A. Referrals to Food Assistance Programs

WIC participants and applicants applying in person should be given information about other potential sources of food assistance in the area. Information is to be given to adults who are applying or reapplying for themselves or on behalf of others.

##### 1. Food assistance programs include, but are not limited to:

- a) food banks (The Emergency Food Assistance Program (TEFAP));
- b) food pantries;
- c) soup kitchens;
- d) the Supplemental Nutrition Assistance Program (SNAP);
- e) Commodity Supplemental Food Program (CSFP), where available for those NOT participating in WIC.

# Certification Standards

## Section 12: Referral to Services

### 6. *Other Referrals (Effective: February 2021)*

#### A. Substance Abuse Counseling and Treatment Centers

Local Agencies must maintain a list of local resources for drug and other harmful substance abuse counseling and treatment and make it available for distribution to all pregnant, postpartum, and breastfeeding women and to parents or caretakers of infants and children applying for and participating in the Program.

#### B. Hospital-Based WIC Programs

1. Local agencies which operate WIC programs within a hospital or in conjunction with arrangements made with a hospital must ensure that potentially eligible WIC applicants who receive hospital services are informed of the availability of WIC program benefits.
2. To the extent possible, the local agency must also provide an opportunity for individuals who may be eligible to be certified within the hospital. Agencies should develop procedures to address current or proposed hospital-based operations and submit it to the Department for approval. This will be reviewed during the WIC Management Evaluation/Quality Assurance Review.



# Certification Standards

## Section 13: Ineligibility and Termination Process

### 1. *Ineligibility (Effective: February 2021)*

- A. During the certification appointment or at the end of the 30 day certification period, the Local agency (LA) must determine a person ineligible for the WIC Program if the applicant does not meet all of the program eligibility criteria of: category, income, residency, and risk criteria.
  
- B. At any time within an active certification period, WIC Program participants can become ineligible for the following reasons.
  - 1. Categorical ineligibility - Persons will become ineligible for the WIC program according to the following schedule:
    - a) Pregnant Women - at six weeks past the termination of pregnancy;
    - b) Lactating Women - at the infant's first birthday or upon termination of breastfeeding if past six months postpartum;
    - c) Postpartum Women - at the infant's six-month birthday or 6 months past date of miscarriage;
    - d) Children - on the date of their fifth birthday;
    - e) Infant - on the date of their first birthday.
  - 2. Income ineligibility - changes to exceed the maximum income allowable for program eligibility.
  
- C. All ineligible applicants must be provided a WIC Termination/Ineligibility Notice (including a right to a fair hearing notice) at the time of ineligibility determination.
  - 1. Notice of Ineligibility during the certification period:
    - a) participants must be notified at least fifteen (15) days before they become ineligible. The Certification End Date in the WIC MIS must be modified to meet this termination date;
    - b) notification must state the reason for ineligibility and inform the participant of the right to a fair hearing (IL WIC PPM CS 15.2);
    - c) if applicable, document the reason and print the WIC Notice of Ineligibility/Termination form, complete the necessary information including the signatures of staff making this determination and participant. Scan the form into the WIC MIS and provide the participant with the original form, and Appeal Rights.

### **Addendum: WIC Termination/Ineligibility Notice**

# Certification Standards

## Section 13: Ineligibility and Termination Process

### 2. Termination (Effective: February 2021)

- A. WIC Program Participants can be terminated for the following reasons:
  - 1. failure to establish connection with the local WIC agency for issuance of benefits for two or more consecutive months;
  - 2. deliberate misrepresentation of circumstances to obtain benefits;
  - 3. WIC Program abuse (IL WIC PPM CS 14.1).
  
- B. Notice of Termination
  - 1. A person being terminated from the program must be advised, in writing, at least fifteen (15) days before termination.
  - 2. The notification must state the reason for termination and inform the participant of the right to a fair hearing (IL WIC PPM CS 15.2).
  - 3. Notices do not need to be provided routinely to participants who are terminated for failure to obtain electronic benefits and/or due to dual participation (7 CFR 246).

# Certification Standards

## Section 14: Participant Violations and Sanctions

### **1. WIC Participant Violations and Sanctions (Effective: February 2021)**

- A. Per 7 CFR 246 a participant violation means any intentional action of a participant, parent or caretaker of an infant or child participant, or proxy that violates Federal or State statutes, regulations, policies, or procedures governing the Program.
- B. Participant violations include deliberately making false or misleading statements or intentionally misrepresenting, concealing, or withholding facts to obtain benefits; exchanging cash value benefit, electronic benefit transfer (EBT) card or supplemental foods for cash, credit, non-food items, or unauthorized food items, including supplemental foods in excess of those listed on the participant's food benefits; threatening to harm or physically harming clinic, farmer or vendor staff; and dual participation
- C. Local agencies must investigate all reported or suspected participant violations and issue sanctions as directed.
  - 1. The addendum "Violations and Sanctions" identifies various types of violations to the WIC Program, the associated sanctions and which party is responsible for an action.
- D. Local agency staff is responsible for the following activities to address violations:
  - 1. forward complaints to the Department via the WIC Program Participant Violation Reporting Form;
    - a) submit within three (3) calendar days of the occurrence
  - 2. complete the "Sanctions Due to Program Violations" letter, review it with the participant at visit and obtain signatures;
  - 3. document actions in the participant record, by scanning the completed form into the WIC MIS.
- E. It is the responsibility of the Local Agency to provide full opportunity to appeal any disqualification as set forth in 7 CFR 246. In the event that a sanction is imposed, the local agency must document the event completely, and forward that documentation to the Department for review.
- F. Proxies who initiate violations will no longer be recognized, and participant must identify a new proxy.

***Addendum – Violations and Sanctions***

***Addendum – WIC Program Participant Violation Reporting Form***

***Addendum – Sanctions Due to Program Violations***

# Certification Standards

## Section 15: Appeals

### **1. Participant Right to Appeal (Effective: February 2021)**

- A. Each potential WIC participant shall be informed of the right to a fair hearing:
  - 1. during the initial program certification;
  - 2. at any termination or graduation from the program.
- B. Those determined to be ineligible to participate in the program or suspected of program abuse shall be notified in writing of the reason of ineligibility and the right to a fair hearing.

#### ***Addendum – Applicant Notification of Appeal Rights/Right to a Fair Hearing***

- C. Prior to granting a fair hearing, the local agency may conduct a preliminary conference with the participant to resolve the issue(s), particularly when the individual may misunderstand program policy or not be aware that certain procedures are required by the Department or USDA. Persons unable to speak English must be provided an opportunity to express themselves in their own language.
- D. Each local agency must:
  - 1. identify a Fair Hearing Officer. The Hearing Officer must be an impartial individual who does not have any personal interest or involvement in the decision and who was not directly involved in the initial determination of the action being contested;
  - 2. provide a fair hearing in accordance within the designated timeframes as identified in IL WIC PPM CS 15.2 of “Fair Hearing Procedures.”
- E. Participants who appeal the termination of benefits within the period of time provided under paragraph (e) of this section must continue to receive Program benefits until the hearing official reaches a decision or the certification period expires, whichever occurs first. This does not apply to applicants denied benefits at initial certification, participants whose certification period has expired or participants who become categorically ineligible for benefits.
- F. Applicants who are denied benefits at initial certification, or participants who become categorically or income ineligible during a certification period (or whose certification period expires), may appeal the denial or termination, but must not receive benefits while awaiting the hearing.

# Certification Standards

## Section 15: Appeals

2. ***Fair Hearing Procedures (Effective: March 2020)***
  - A. Listed below are the uniform rules of procedure to be followed in processing an appeal on the denial or termination of benefits:
    1. the fair hearing must be requested no later than sixty (60) days after the applicant or participant receives written notification of program denial, monetary restitution, or termination of benefits;
    2. the hearing shall be held within twenty-one (21) days and the decision of the fair hearing officer made within forty-five (45) days from the date the request for the hearing was received;
    3. a minimum of ten (10) days advance written notice of the date, time and place of the hearing shall be given;
    4. the decision of the Hearing Officer must be in writing and shall include at a minimum: a summary of the testimony (facts); the identity of the pertinent law, regulation or federal policy; specific findings of fact (reasons for the decision); and the decision;
    5. the hearing officer shall:
      - a. administer oaths or affirmations;
      - b. ensure that all relevant issues are considered;
      - c. request, receive and make part of the hearing all evidence determined necessary to decide the issues being raised;
      - d. regulate the conduct and course of the hearing consistent with due process to ensure an orderly hearing;
      - e. order, where relevant and necessary, an independent medical assessment or professional evaluation from a source mutually satisfactory to the appellant and the local agency;
      - f. render a decision based exclusively on the hearing record; and
      - g. adhere to the pertinent sections of the "Rules of Practice and Procedure in Administrative Hearings," IL AD. Code, Part 100.
    6. the location of the hearing, usually the office of the local WIC agency, shall be accessible to the appellant;
    7. the hearing shall be tape-recorded, and the tape retained as a permanent record of the hearing;
    8. the local WIC agency will provide an appellant, or representative, the opportunity to:
      - a. examine, prior to and during the hearing, the documents and records presented to support the decision under appeal;
      - b. be assisted or represented by an attorney or other persons;
      - c. bring witnesses;
      - d. advance arguments without undue interference;

# Certification Standards

## Section 15: Appeals

- e. question or review any testimony or evidence, including an opportunity to confront and cross-examine adverse witnesses; and
  - f. submit evidence to establish all pertinent facts and circumstances in the case.
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- 9. during the hearing, the appellant shall be the moving party and have the burden of proof;
  - 10. all hearing records and decisions are available for public inspection and copying, provided the names and addresses of the participants and other members of the public are kept confidential;
  - 11. the exclusive record of the fair hearing shall consist of the verbatim transcript, recording to testimony and exhibits, or an official report containing the substance of what transpired at the hearing. This, together with all papers and requests shall be filed in the proceedings and be retained for a minimum of three years after the date the decision was rendered;
  - 12. the participant may appeal the local agency decision to the Department within 15 days of the mailing date of the hearing decision notice (7 CFR 246.9 (k)(3));
  - 13. appeals should be directed to the Department's Bureau of Hearings:  
  
IDHS-Bureau of Hearings  
69 West Washington, 4<sup>th</sup> Fl.  
Chicago, IL 60602  
800-435-0774 (V)  
800-435-0774 (TTY)  
312-793-3387 (Fax)  
[DHS.BAH@illinois.gov](mailto:DHS.BAH@illinois.gov)
  - 14. judicial review may be sought by the participant if they are not satisfied with the Department's decision (7 CFR 246.9).