1.09 Waiting List Management

POLICY:

The Local Agency will maintain a waiting list of applicants when the total number of participants reaches the maximum caseload. The purpose of the waiting list is to assure the delivery of WIC benefits to persons with the greatest need as soon as caseload slots are available.

PROCEDURE:

A. When to Start a Waiting List

A waiting list in the STORC computer system will be started when the total number of participants certified reaches the maximum caseload, or the monthly participation reaches maximum caseload.

1. All applicants will be screened to determine a priority. Only eligible persons will be placed on the waiting list.

2. Information about each applicant will be entered into the STORC Wait List Screen.

3. Applicants will be placed on the waiting list according to priority and date of application. The information will remain on the waiting list for sixty (60) days.

4. After this period, the information will be moved to an outreach file for use at a later date, if necessary.

5. WIC participants wanting to reapply when their eligibility expires will be placed on waiting lists, when appropriate.

Example: The eligibility of a priority III child expires. The Local Agency has applicants who are priorities I through IV on the waiting list. The child is subsequently screened and qualifies as a priority V. He/she is placed at the bottom of the waiting list. This frees a caseload slot for a higher priority applicant, i.e. migrant, transfer, or priority I-IV.

B. Waiting List Notification

At the time an applicant is screened, the Waiting List Notification will be generated from the STORC Wait List Screen and issued to the applicant.

1. Individuals will be notified of their placement on a waiting list within twenty (20) days after they visit the WIC clinic during office hours to request WIC Program benefits.

2. When the Local Agency is maintaining a waiting list, WIC personnel will explain to applicants and participants requesting Verification of Certification (VOC) transfers why placement on a waiting list is necessary and their possibilities for enrollment.
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3. Referral to other health/social services will be made when appropriate.

C. High Priority Applicants Only Placed on the Waiting List

If caseload management eliminates low priorities or if there are not enough caseload slots to enroll low priorities, it is not necessary to place individuals within those priorities by completing a screening assessment of applicants.

1. This would enable the placement of only high priority applicants on the waiting list.

2. The nutritional assessment and diet counseling must be completed at the time of enrollment.

Example: The Local Agency maintains a waiting list and only enrolls priorities I through IV. It is determined that a 3-year old child is income and residence eligible, so they measure height, weight and hemoglobin. When the nutritionist determines that he could not qualify as a priority III, the screening is stopped prior to the examination of the dietary recall and the applicant is informed of their ineligibility. When the child qualifies as priority III, he is placed on a waiting list until a caseload slot becomes open. Upon enrollment, the dietary recall is assessed to identify all risk conditions.

D. Maintenance of the Waiting List

It is not necessary to maintain a list of all persons who inquire about the WIC Program.

1. The waiting list will consist of those persons who can most likely be served within the next sixty (60) days.

2. The Local Agency that has not been able to serve applicants below Priority III for the past six (6) months will not carry Priority IV, V or VI on its waiting list.

3. When an applicant insists on being placed on a waiting list, he/she must be placed on it.

E. Applicants with Referral Data

Applicants with referral data must not be given priority for enrollment or placement on a waiting list over applicants without referral data.

F. Verification of Certification (VOC) Transfers

1. When the Local Agency has a waiting list, but is enrolling some new participants, a person requesting a VOC transfer will be enrolled and allowed to finish their certification period, even if the Local Agency is not serving their priority level.
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2. If the Local Agency is not serving any new persons, the person requesting a VOC transfer must be placed on the list ahead of all waiting applicants, regardless of the priority level under which he/she was certified, and regardless of whether the Local Agency is currently serving that category.

3. When the participant reapplies at the end of the certification period, he/she will be treated as any other applicant, placed in the appropriate priority level and, when necessary, put on the waiting list.

G. Estimation of Available Caseload Slots

1. Available caseload slots may be estimated by determining the number of participants whose certification expires plus those who will be terminated as categorically ineligible or terminated for other reasons.

2. The Local Agency will evaluate the caseload weekly in order to determine an estimated number of caseload slots which will become available.

H. Recall of Applicants/Participants from the Waiting List

The Local Agency will recall applicants/participants from the waiting list based upon priority (see Policy 2.02, Priority System) and date of eligibility determination as caseload openings occur.

1. Certified applicants/participants will be recalled from the waiting list in the following order:
   a) Out-of-State transfers within a certification period:
      < Priority order; then
      < Chronological order - oldest date to most recent.
   b) All other applicants:
      < Priority order;
      < High risk; then
      < Chronological order - oldest date to most recent.

2. Screening information may be used when an applicant is recalled from the waiting list.
   a) Income eligibility must have been determined within the previous thirty (30) days and clinical data must have been obtained within the previous sixty (60) days of actual enrollment.
b) Only a nutritional assessment and diet counseling must be completed when the applicant is actually enrolled.

*Example:* A pregnant woman applies and is determined residence and income eligible. Her hemoglobin value shows that she would have an eligible nutrition risk code. At this point, she may be placed on the waiting list as eligible as Priority I. If she is enrolled within thirty (30) days, she would need only to complete a nutritional assessment and diet counseling.

REFERENCES:

1. WIC Regulations 246.7, Certification of Participants
2. FNS Instruction 803-6, Waiting Lists
3. SFP 91-117, Use of Verification of Certification Cards