VIII. CERTIFICATION, ELIGIBILITY & COORDINATION OF SERVICES

(Please indicate) State Agency: West Virginia for FY 2021

The review of certification, eligibility and coordination of services involves the process of determining and documenting participant eligibility (income eligibility as well as nutritional risk determination, standards and criteria), and the coordination of certification activities with other health services.

- A. <u>Eligibility Determination and Documentation</u> 246.7(c)(1); 2(1); 246.7(d)(1); (2)(v)(B)): describe the policies and procedures for determining and documenting eligibility including the application process, residency requirements, identity requirements, documented physical presence or valid exception; proof of categorical eligibility, income limits, income eligibility documentation, determination of special populations and a definition of and policy toward the economic unit.
- **B.** <u>Nutrition Risk Determination, Documentation, and Priority Assignment</u> 246.4(a)(11)(i): describe the policies and procedures for determining and documenting nutritional risk and priority assignments. Include a copy of the nutritional risk criteria the State agency plans to use with the appropriate documentation.
- C. <u>Health Care Agreements, Referrals, and Coordination</u> 246.4(a)(6); (7); (8) and (19): describe the procedures for coordinating agreements and services with other health care providers at the State and local agency level including procedures to ensure that benefits are provided to persons with special needs.
- **D.** <u>Processing Standards</u> 246.4(a)(11)(i); 246.7(f)(2): describe the State agency's processing procedures to ensure that the required standards and timelines are met.
- E. <u>Certification Periods</u> 246.4(a)(11)(i); 246.7(g): describe the policies and procedures used to establish certification periods for participants and the autonomy (if applicable) granted to local agencies in determining eligibility time periods.
- **F.** <u>Transfer of Certification</u> 246.4(a)(6); (11)(i); and 246.7(k): : describe the State agency's procedures for the transfer of certification and VOC cards ensuring that vital participant and program information is included.
- G. <u>Dual Participation, Participant Rights and Responsibilities, Fair Hearing Procedures, and Sanction System</u> 246.4(a)(11)(i)); (16); (17) and (18); 246.7(h); 246.7(i)(10); 246.7(j); 246.7(l): describe the procedures used to detect and prevent dual participation at the State and local level, the procedures for ensuring participants are notified of their rights and responsibilities, and the procedures regarding participant fair hearings and sanction system.

Α.	Eligibility, Determinat	ion, and Documentation					
1.	Application Process						
a.	The State agency requires all local agencies to use a standardized application process for all persons applying for the WIC Program						
	⊠ Yes □ No						
b.		s ⊠ State wide or □ at local agency (check one), a common ertification form with (check all that apply):					
	☑ No other benefit progra☐ TANF☐ MCH☐ Other (specify):	ms ☐ Medicaid ☐ SNAP ☐ Other reduced price health care program(s)					
Pro		ertification and Eligibility Appendix and/or Procedure Manual (citation): Policy and of Participants; 2.06 – Income Eligibility Requirements					
2.	Residency, Identity and	Physical Presence Requirements					
a.	The State agency require	es documentation of residency					
	⊠ Yes						
	⊠ Signed statement that of	documentation of residency information is not available and why (e.g. homeless, theft, fire)					
	\square No (Specify why, e.g., I	TOs and Alaska natives who are exempt from this requirement):					
b.	The State agency has special residency policies and procedures for how the following special categories should be treated (check all that apply):						
	⊠ Homeless applicants	☐ Institutionalized applicants					
	⊠ Migrants	☐ Indian Tribal Organizations					
	□ None	☐ Other (specify):					
c.	The State agency requires proof of identity from each applicant at certification						
	⊠ Yes						
	\square No (If no, why not?):						
d.	The State agency has reciprocal agreements concerning residency with other States						
	☐ Yes; list states:						
	⊠ No						
	Describe any reciprocal a	greements:					
e.	The State agency require	es physical presence of the applicant or a valid exception to be documented:					
		wing condition(s):					
		/caretaker is an individual with disabilities which prevent him/her from being physically nic (e.g., medical equipment, bed-rest, or serious illness exacerbated by coming in to					

	☑ Applicant is an infant or child receiving documented ongoing health care from any health care provider, including the local agency; being physically present would pose an unreasonable barrier; and the infant or child was present at his/her initial WIC certification.							
	\boxtimes Applicant is an infant under 8 weeks of age who cannot be present at the time of certification (for a reason determined appropriate by the local agency) and for whom all necessary certification information is provided.							
	☐ Applicant is an infant or child who was present at his/her initial certification; was present at certification within the one-year period of the most recent determination; and is under the care of one or more working parent, mo primary working caretakers whose status presents a barrier to bringing the infant or child in to the WIC clinic.							
f.	The State agency uses a shortened (up to 30 days) certification for applicants that have one qualifying nutrition risk and are able to present at least two of the three required documents (identification, residency, and income) during a certification appointment.							
	□ Yes ⊠ No							
3.	The State agency requires applicants to submit proof of categorical eligibility for (check all that apply):							
	☐ All pregnant women							
	□ Postpartum women □ Children							
	☐ Infants ☐ Other (specify):							
4.	Income Limits for Eligibility							
a.	The State agency gross income limit for income eligibility is 185% of the federal income guidelines							
	\square Yes, with local agency variation							
	 □ No, with no local agency exceptions (specify State maximum percent of poverty: %) 							
	 □ No, with local agency variation (specify State maximum percent of poverty: %) 							
Pro	ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation): Policy and rocedure 2.06 – Income Eligibility Requirements, Attachment #1							
b.	The State agency implements income eligibility guidelines concurrently with Medicaid							
	⊠ Yes □ No							
	ADDITIONAL DETAIL: Please attach a copy of the income guidelines in the Appendix or the appropriate citation in the Procedure Manual. Certification and Eligibility Appendix and/or Procedure Manual (citation): Policy and Procedure 2.06 – Income Eligibility Requirements, Attachment #1							
C.	The State agency requires documentation of an applicant's, or certain family members' eligibility to receive benefits in the following means-tested programs that confer adjunctive income eligibility for WIC, as set forth in 246.7(d)(2)(vi):							
	Poverty Level							
	☑ TANF (specify State "percent of poverty") 150%							
	SNAP SNAP %							
	• • • • • • • • • • • • • • • • • • • •							

	\boxtimes	Pregnant women and infants	150%						
	×	☑ Children	150%						
	\boxtimes	Other categorically eligible women	150%						
d.		The State agency uses <u>documented eligibility for/participation in other means-tested programs</u> to establish automatic WIC income eligibility (check all that apply and the poverty levels used for each):							
			Poverty Level						
	□F	ree or Reduced-Price School	%						
		unch SSI	%						
		Other State-provided health insurance (specify State percent of poverty" maximum %)	150%						
	□F	DPIR	%						
		Other (specify):	%						
e.	Med	viduals are required to document that they or a fan licaid, or SNAP benefits or, under the State option, ninistered programs by providing:	nily member are certified as eligible to receive TANF, certified as eligible to receive benefits in State-						
	⊠P	rogram ID card (only if it includes dates of eligibility) o	r notice of current eligibility						
	□ Documentation of participation in State-administered programs (and such programs require documentation of income and have income guidelines at or below WIC's income guideline of 185% of poverty). (Program[s]:)								
	ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation): Policy and Procedure 2.06 – Income Eligibility Requirements								
	5. I	Income Eligibility Documentation							
		For WIC applicants whose income eligibility is <u>not</u> eligibility in another means-tested program, the St							
	[□ Documentation of income information							
		Signed statement that documentation of income info	•						
		Notation in the participant record if the applicant de Other (specify):	clares no income and why						
	b. Exceptions to income documentation are made for the following:								
	☐ Those applicants with no income								
		3 00 () ()							
	C.	If the applicant does not supply the necessary doc agencies are generally instructed to do the follow							
		$\ensuremath{\boxtimes}$ Certification process is terminated and no food ir rescheduled	nstruments/cash-value vouchers are provided; appointment						
		☐ Temporary certification (not to exceed 30 days)	is completed and food instruments are provided. However,						

	if applicant does not provide documentation within 30 days, certification expires and a new eligibility determination must be conducted.
	☑ Other (specify): Complete appointment (anthropometrics, hematological testing, nutrition risk) on paper (C-TAD); allow participant to come back with required forms.
d.	The State agency requires ⊠ State-wide, or at □ local agency (check one), the <u>verification</u> of applicant income information, if determined necessary
	⊠ No
	☐ Yes (check all sources required, as appropriate):
	□ Employer
	□ Public assistance offices
	☐ State employment offices (wage match, unemployment)
	 □ Social Security Administration □ School districts/offices
	☐ Collateral contacts
	☐ Other (specify):
	e. The State agency has specific policies that define actions to be taken for mid-certification changes in participant income circumstances.
	f. The State agency allows documentation of alternate income procedures for Indian or Indian Health Service (IHS) operated local agencies.
	☐ Yes ☐ No ☒ Not Applicable
	g. The State agency has specific policy that addresses income from benefits provided by a State- administered programs.
	⊠ Yes □ No
	h. The State agency has specific policy to ensure that certain types of income, such as combat pay or FSSA payments for households that include service members, are excluded from consideration in the WIC income eligibility determination, as provided by law and regulation.
	⊠ Yes □ No
	ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation): Policy and Procedure 2.06.
	In determining an applicant's income eligibility for WIC, the State agency excludes basic allowance for housing received by military services personnel residing off military installations and in privatized housing, whether on- or off-base.
	⊠ Yes, State-wide □ No
	ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation): Policy and Procedure 2.06 – Income Eligibility Requirements
	7. The State agency excludes cost-of-living allowances for military personnel on duty outside of the contiguous 48 States (OCONUS COLA) from applicant income for purposes of WIC income determination
	⊠ Yes, State-wide □ No

8.	dep	etermining an applicant's income eligibility for WIC, the State agency excludes payments given to loyed military service members. These payments are in accordance with Chapter 5 of Title 37 of U.S.C.
	⊠Y	es, State-wide □ No
		DITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation): Policy Procedure 2.06 – Income Eligibility Requirements
9.	sou	etermining an applicant's income eligibility for WIC, the State agency calculates multiple income rces received by an applicant's household at different frequencies in accordance with WIC Policy no 2011-7, and compares the sum to the established WIC IEGs.
	⊠Y	es, State-wide □ No
		DITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation): Policy Procedure 2.06 – Income Eligibility Requirements
10.	The	State agency defines the economic unit in accordance with WIC Policy Memo 2013-3.
	⊠ `	Yes ☐ No (if no, why not):
		ovide the definition of an economic unit used by the State agency in the Appendix or the propriate citation in the Procedure Manual.
11.	Pol	DITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation): icy and Procedure 2.06 – Income Eligibility Requirements, Section D. State agency has specific policies or lists examples concerning the determination of the
		nomic unit for (check all that apply):
		Foster children Divorced/legally separated parents; step parents
		Absentee spouse (military hardship tours, etc.)
		Cohabitation
		nstitutionalized applicants (including incarcerated applicants)
		Homeless applicants Minors ("emancipated" minors)
		Separate economic units under the same roof
		Striker/unemployed
		Students away at school
		Self-employed applicants
	\boxtimes C	Other (specify): See Policy and Procedure 2.06 – Income Eligibility Requirements, Section D
		DITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation): cy and Procedure 2.06 – Income Eligibility Requirements
12	. N	Mid-Certification Disqualification
a.	a o	The State agency ensures that local agencies are required to stipulate that an individual is not outomatically disqualified mid-certification due to the fact that she/he no longer participates in one or more of the Programs for which they were originally determined adjunctively/automatically ncome eligible.
	D	☑ Yes □ No

WIC regulations specify that when income eligibility is reassessed mid-certification, State/local

b.

agencies are required to reevaluate the programs for which the individual could be determined adjunctively/automatically income eligible. If the individual cannot qualify based on eligibility for one of these programs, eligibility must be determined based on WIC income guidelines and disqualification made only after all of these options are exhausted. The State ensures its policy and procedures comply with this requirement:								
⊠ Yes □ No								
Nutrition Risk Determination, Docur	mentation a	and Priority Assignn	nent					
Nutrition Risk Determination and Docur	nentation							
Professionals authorized by the State a determine nutritional risk include (chec			Authorities (CPAs) to					
·	·		certify for:					
Qualification		Priorities I-III	All Priorities					
RD or Master's Level Nutritionist		\boxtimes	\boxtimes					
Bachelor's Level Nutritionist		\boxtimes	\boxtimes					
Physician		\boxtimes	\boxtimes					
Physician Assistant		\boxtimes	\boxtimes					
Registered Nurse		\boxtimes	\boxtimes					
Licensed Practical Nurse			\boxtimes					
Home Economist		\boxtimes	\boxtimes					
Paraprofessional								
Other (Specify):								
Other (Specify):								
The State agency authorizes local agence	ies to (chec	k all that apply):						
	ometric and	⊠ Hematological me	asurements					
	ometric and		surements					
☐ Conduct measurements only when medi	cal referral da	ata are unavailable						
The State agency uses only FNS-approved #2011-5, WIC Nutrition Risk Criteria, and revised risk criteria requiring implementated document nutrition risk.	transmittal n	nemorandum (dated J	une 13, 2018) that list the					
⊠ Yes □ No								
Please append a copy of the revised nutr	ition risk crit	teria in its entirety to t	his State Plan.					
The State agency modifies nutrition risk restrictive than nationally established de		n that criteria definitio	ns are more					
☐ Yes (list criteria):								
⊠ No								

В.

1. a.

b.

C.

d.

e.	Hematological risk determination:							
	The State agency requires (check one of the following):							
	oxtimes Bloodwork data to be collected at the time of certification (Statewide).							
	☐ Bloodwork data to be collected within 90 days of certification, so long as the participant is determined to have at least one qualifying nutritional risk at the time of certification (Statewide), and the State has implemented procedures to ensure receipt of data.							
	The State agency ensures that hematological assessment data are current and reflective of participant status, to include a bloodwork periodicity schedule that conforms to the requirements as described in 246.7(e)(1)(ii)(B).							
	⊠ Yes □ No							
	The State agency allows local agencies the option of obtaining bloodwork on children ages 2-5 annually if prior certification results were normal.							
	⊠ Yes □ No							
f.	Anthropometric risk determination:							
	The State agency allows (check one):							
	oxtimes Anthropometric data for certification to be no older than 60 days (Statewide)							
	\square A shorter (less than 60 days) limit on age of anthropometric data for certification							
g.	Nutrition assessment: (i) Local agencies are required to perform a complete nutrition assessment (as described in the Value Enhanced Nutrition Assessment [VENA] Guidance) for all participants.							
	⊠ Yes □ No (explain):							
	(ii) Local agencies are required to perform a mid-certification nutrition assessment (as described in the <i>Guidance for Providing Quality Nutrition Services during Extended Certification Periods</i>) for all participants with and extended certification period.							
	☐ Yes ☐ No Applicable: (The State agency does not utilize the extended certification option for any participant category)							
	(iii) The State agency policy requires that nutrition assessment intake information be collected on a State agency mandated form or Management Information System (MIS).							
	⊠ Yes □ No							
	If yes, attach mandated forms (or MIS screen shots) or specify location in the procedure manual and reference below.							
	If no, the State agency assures quality of nutrition assessment by:							
	\square Requiring local agencies to submit forms for approval							
	☐ Annually monitoring the locally developed forms during local agency review							
	☐ Other (specify):							
	 (iv) Dietary assessment is based on professionally recognized guidelines (e.g., Dietary Guidelines for Americans, My Plate Food Guide, American Academy of Pediatrics) ☑ Yes (specify): Dietary Guidelines for Americans, MyPlate Food Guide, American Academy of 							
	Pediatrics.							
	□ No (explain):							

Policy and Procedure 2.11 – Nutrition Risk Criteria; 2.13 – Hematological Testing; 11.02 – Competent Professional Authority; Appendix X (3 forms) – cTad Child 2021, cTad Infant 2021, cTad Woman 2021 (each form reflects the screens in Crossroads needed to complete the appointment)

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Ζ.	υo	cun	nen	tation	

 a. The State agency requires documentation in the applicant's case file for all nutrition risk criteria used to establish WIC eligibility (check one) (as described in FNS Policy Memorandum #2008-4, WIC Nutrition Services Documentation): 	
\square Yes, supported by a written "exceptions" policy (e.g., policies to direct clinic staff in situations in which documentation is unavailable)	
⊠ Yes, with CPA discretion when to waive documentation requirement (no written policy)	
□ No (explain):	
b. As a matter of policy, the State agency requires the documentation of nutritional risk criteria on a participant's certification form in the following manner:	
☐ All identified risk criteria are recorded	
☑ A set number of criteria is recorded (maximum number is 10 criteria)	
☐ Local agency personnel decide how many and which criteria are recorded	
☐ Other (specify):	
3. Priority Assignments	
a. Participants certified for regression	
⊠ Remain in the same priority in which they were previously assigned	
\square Are assigned to Priority VII, regardless of their initial priority at first certification	
☐ Other (specify):	
b. The State agency requires verification for all nutrition risk criteria that require a physician's diagnos ☑ Yes ☐ No	sis
ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (cite):	
c. Participants may be certified for regression (check all that apply):	
⊠ A single six-month period	
☐ No reliev level exercised	
□ No policy, local agency discretion	
d. High risk postpartum women are assigned to the following priority:	
☑ Priority III	
☐ Priority IV	
☐ Priority V	
□ Priority VI	

	•	e. P	articipants certified sole	y due to	homele	essnes	s/migrancy a	re assigned to the following priority:
		_		IV	V	VI	VII	
			Pregnant Women	\boxtimes				
		E	Breastfeeding Women	\boxtimes				
		F	Postpartum Women			\boxtimes		
		li	nfants					
		C	Children		\boxtimes			
	f		ch a copy of any nutritio ing fiscal year. For each				be added, mo	odified or deleted during the
		-Ap _l - Wh -SA	olicable participant categor plicable priority level(s) nether a physician's diagno code number which confo llection	sis is red		es prov	rided by USDA	A for Participant Characteristics data
			NAL DETAIL: Certificatio e 2.11 – Nutrition Risk Crit		igibility	Apper	ndix and/or Pr	rocedure Manual (citation): Policy and
C.	Н	ealth Ca	are Agreements, Ref	errals,	and Co	oordi	nation	
1.	Stat	e Agenc	y Referral Agreements a	nd Coor	dination	of Se	vices	
a.	follo	owing pro		ate whet	her info	rmatio	n is shared r	g of participant information with the manually (M) or through ADP (A) by
		SNAP					Rural/migrant	health centers
		TANF					Hospitals	
	М	Medica	id		ı	М	Childhood imn	nunization
		SSI					Immunization	registries
	М	EPSDT					Well-child pro	grams
	М	МСН р	rograms		I	М	Child protectiv	e services
	М		n with special health eds program(s)				Private physic	ians
		Family	planning				HS facilities	
	М	Other ((specify): Head Start					
b.	Forr	mal agre	ements for coordination	of servic	es inclu	ıde:		
	⊠ F	Responsil	pilities of each party					
	\boxtimes A	Assurance	e that information is used o	only for p	rogram e	eligibilit	y and/or outre	ach
	\boxtimes A	Assurance	e that information will not b	e shared	d with a t	hird pa	rty	
C.		_	ency requires local agen neck all that apply):	cies to	coordina	ate ser	vices with, ar	nd/or develop referral systems for, the
	\boxtimes :	SNAP				☑ Child	ren with speci	ial health care needs
	⊠T	ANF				Scho	ols	
		SSI				☑ EFN	EP	

	⊠ Medicaid	oximes Other food assistance program (TEFAP, FDPIR, CSFP, etc.)
	□ CHIP	
	☐ IHS facilities	⊠ Child protective services
	☐ MCH (clinics/facilities)	⊠ Head Start
	⊠ EPSDT	⊠ Early Head Start
	⊠ Family planning	☐ Healthy Start
	☑ Prenatal care	☐ Substance abuse program
	☐ Postnatal care	☐ Child abuse counseling
		⊠ Foster care agencies
	☐ Dental services	
	□ Private physicians	
		⊠ Rural/migrant health centers
	Well-child programs ■ Well-chil	
	oximes Other (specify): Domestic Violence Shelters	
	ocedure 10.02 – Coordination of Program Services	endix and/or Procedure Manual (citation): Policy and
2.	Local Agency Referral Procedures	
a.	The State agency ensures that local agencies mak Program for themselves or on behalf of others the	e available to all adults applying or re-applying for the WIC following types of information:
	oxtimes State Medicaid Program, including presumptive elig	ibility determinations, where available
	⊠ Child support services	
	⊠ SNAP	
	⊠ Substance abuse counseling/treatment programs □	
		ns, where available
	☐ Other State-funded medical insurance programs (sp	pecify):
	☐ Other nutrition services (specify):	
	 ☑ Children's Health Insurance programs (s) 	
	☐ Other (specify):	
b.	The referral methods used by local agencies to other that apply and indicate the primary method of references.	er health and social service programs include (check all
		Primary
	State agency-developed referral forms I have been advantaged to form.	
	☑ Local agency-developed referral form☑ Telephone call to referring agency	
	 ☑ Verbal referral to participants 	
	 ☒ Automated client/participant information exchange 	
	 ☑ Written literature on referral programs 	
	• •	
	☐ Follow-ups by staff to monitor	

	☐ Counseling☐ Other (specify):							
	- Other (specify).						Ш	
C.		Methods used by other health and social service programs to refer clients to the WIC Program include (check all that apply and indicate the primary method of referral using the checkbox on the right)):						
						Р	rimary	
	⊠ WIC Program re	eferral form						
	⊠ Health/social pro	ogram referral form	l					
	⊠ Telephone call							
	⊠ Verbal referral							
	⊠ Automated clien	nt/participant inform	ation exchar	nge				
	⊠ Written literature	e on the WIC Progr	am					
	☐ Other (specify):							
d.	The State agency or social services			itor the ext	ent to which V	VIC participants are u	sing other health	
	⊠ Yes (check):	⊠ Medicaid	⊠ TANF	⊠ MCH	⊠ SNAP			
	\square Yes, other (spec	cify):						
	□ No							
e.	The State agency services utilization					ine the extent of healt	h or social	
	□Yes ⊠	No						
	Policy and Procedu	ure 7.05 – Coordina 10.02 – Coordinati	ation with Co	mmunity Re	sources; 10.01	edure Manual (citation 1 – Coordination with M EPSDT Program Referr	edicaid-Right from	
f.		imum income limi	ts, accordin	g to family		/ provides each local a le to pregnant women		
	⊠ Yes □	No						
g.	cooperative arran	gement with a ho	spital, advis ostpartum s	ses potentia services, or	lly eligible ind that accompa	n within a hospital, an dividuals that receive i any a child under the a	npatient or	
	□ Yes ⊠	No						
h.	The State agency who may be eligib					ovide an opportunity n WIC.	for individuals	
	⊠ Yes ⊠	No						
i.	The State agency	ensures that whe	en WIC is at	maximum o	aseload, loca	l agencies make refer	rals to:	
	⊠ Food banks							
	⊠ Food pantries							

	Soup kitchens or other emergency meal providersSNAP					
	•	ncy Food Assistance Program				
		oution Program on Indian Reservations				
	☐ Other (spec	ify):				
j.	The State agency ensures that when WIC is at maximum caseload, local agencies notify the State agency of any waiting lists established.					
	⊠ Yes	□ No				
k.	The State agency ensures that when WIC is at maximum caseload, the State agency notifies FNS of any waiting lists established.					
	⊠ Yes	□ No				
I.		The State agency ensures that when the WIC participant's family has immediate needs for food beyond what WIC might provide, local agencies make referrals to:				
	oxtimes Food banks					
	⊠ Food pantrie	s				
	⊠ Soup kitcher	ns en servicio de la companya de la				
	⊠ SNAP					
	☐ Food Distrib	ution Program on Indian Reservations				
	☐ Other (specif	€√)·				
		., .,				
m.		Screening and Referral				
m.	Immunization S The State agen					
m.	Immunization S The State agen #2001-7, Augus	Screening and Referral cy assures that each local agency is meeting the requirements of WIC Policy Memorandum				
m.	Immunization S The State agen #2001-7, Augus ⊠ Screening ch	Screening and Referral cy assures that each local agency is meeting the requirements of WIC Policy Memorandum st 30, 2001: Immunization Screening and Referral, as follows:				
m.	Immunization S The State agen #2001-7, Augus ⊠ Screening ch	Screening and Referral cy assures that each local agency is meeting the requirements of WIC Policy Memorandum st 30, 2001: Immunization Screening and Referral, as follows: ildren under the age of two using a documented immunization history:				
m.	Immunization S The State agen #2001-7, Augus ☑ Screening ch ☑ Using the ☐Using a m	cy assures that each local agency is meeting the requirements of WIC Policy Memorandum at 30, 2001: Immunization Screening and Referral, as follows: ildren under the age of two using a documented immunization history: minimum screening protocol; or				
m.	Immunization S The State agen #2001-7, Augus ☑ Screening ch ☑ Using the ☐ Using a m ☐ Using anothe (specify): ☐ Implementing	cy assures that each local agency is meeting the requirements of WIC Policy Memorandum st 30, 2001: Immunization Screening and Referral, as follows: ildren under the age of two using a documented immunization history: minimum screening protocol; or nore comprehensive means, (specify): r program or entity to screen and refer WIC children using a documented immunization history;				
m.	Immunization S The State agen #2001-7, Augus Screening ch Using the Using a m Using anothe (specify): Implementing children by 2d	Screening and Referral cy assures that each local agency is meeting the requirements of WIC Policy Memorandum at 30, 2001: Immunization Screening and Referral, as follows: ildren under the age of two using a documented immunization history: minimum screening protocol; or nore comprehensive means, (specify): r program or entity to screen and refer WIC children using a documented immunization history; ; or g the minimum screening protocol is unnecessary because immunization coverage rates of WIC				
The	Immunization S The State agen #2001-7, Augus ☑ Screening ch ☑ Using the ☐ Using anothe (specify): ☐ Implementing children by 2-4 ☐ The State ag Provide explain	coreening and Referral cy assures that each local agency is meeting the requirements of WIC Policy Memorandum at 30, 2001: Immunization Screening and Referral, as follows: ildren under the age of two using a documented immunization history: minimum screening protocol; or fore comprehensive means, (specify): r program or entity to screen and refer WIC children using a documented immunization history; ; or g the minimum screening protocol is unnecessary because immunization coverage rates of WIC 4 months are 90% or greater; or ency has been unable to formalize a coordination agreement with the State Immunization Program. anation of extenuating circumstances: policy and procedure manual has been updated to include the above immunization				
The	Immunization S The State agen #2001-7, Augus Screening ch Using the Using a m Using anothe (specify): Implementing children by 2d The State ag Provide expla	coreening and Referral cy assures that each local agency is meeting the requirements of WIC Policy Memorandum at 30, 2001: Immunization Screening and Referral, as follows: ildren under the age of two using a documented immunization history: minimum screening protocol; or fore comprehensive means, (specify): r program or entity to screen and refer WIC children using a documented immunization history; ; or g the minimum screening protocol is unnecessary because immunization coverage rates of WIC 4 months are 90% or greater; or ency has been unable to formalize a coordination agreement with the State Immunization Program. anation of extenuating circumstances: policy and procedure manual has been updated to include the above immunization				

D. Processing Standards

1.	Notification Standards						
a.	The State agency defines special nutritional risk applicants who are to be notified of their eligibility within 10 days of the date of the first request (at the local agency) for program benefits as the following (check all that apply):						
	☑ Pregnant women eligible as Priority I☑ Migrant farmworkers/family members☐ Optional; please specify:	⊠High-risk infants (optional) □Homeless (optional)					
b.	The State agency requires local agencies to follow special policies and procedures to ensure timely certification of:						
	⊠ Rural applicants	☐ Employed applicants					
	☐ No special policies/procedures						
C.	• • • •	The State agency's policy allows it to authorize an extension of the notification period up to 15 days for special nutritional risk applicants when local agencies provide a written request with justification.					
	□ Yes ⊠ No						
d.	Policies and procedures are in place to assure all other applicants are notified of eligibility within 20 days of first request (at the local agency) for program benefits.						
	⊠ Yes □ No						
		ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation): Policy and Procedure 2.05 – Timeframes for Processing Applicants					
2.	Processing Standards						
a.	Processing standards begin when the appli	Processing standards begin when the applicant (check all that apply):					
	☑ Telephones the local agencies to request benefits						
b.	The State agency requires the local agency to have a monitoring system in place to ensure processing standards are being met for all categories of applicants.						
	⊠ Yes □ No						
	ODITIONAL DETAIL: Certification and Eligibilition occurred in 2.05 – Timeframes for Processing Appl	ty Appendix and/or Procedure Manual (citation): Policy and icants; 9.02 – Local Agency Internal Review					
Ε.	Certification Periods						
1.	Certification Period Standards						
a.		es to certify infants under six months of age for a period extending up d accessibility of health care services are not diminished (known as					
	☑ Yes, at all local agencies☐ Yes, at selected local agencies☐ No						

	(ii)) The State agency authorizes local agencies to certify children for a period of up to one year provided that participant children receive required health and nutrition services:				
		 ☐ Yes, at all local agencies ☐ Yes, at selected local agencies ☒ No 				
	(iii)	The State agency authorizes local agencies to certify breastfeeding mothers for a period extending up to the infant's first birthday or until breastfeeding is discontinued (whichever comes first), provided that there will be no decrease in health and nutrition services that the participant would otherwise receive during a shorter certification period:				
		☑ Yes, at all local agencies☐ Yes, at selected local agencies☐ No				
	(iv)	The State agency ensures that health care and nutrition services are not diminished for participants certified for longer than six months:				
		☐ No ☐ Yes (describe): Participants are scheduled for anthropometric measures and nutrition education at six (6) months of age.				
b.	Exte	ended certification is an option for the following (check all that apply):				
	⊠F	Priority I infants ☐ Priority II infants ☐ Priority IV infants				
		Priority III Children ☐ Priority V Children				
	⊠ F	Priority I Breastfeeding Women Priority IV Breastfeeding Women				
C.	c. The State agency authorizes local agencies to shorten or extend the certification period up to 30 days in certain circumstances.					
	□Y	res (If yes, provide citation indicating circumstances): ⊠ No				
	ADE	DITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):				
2.		State agency authorizes local agencies to disqualify an individual in the middle of a certification period the following reasons (check all that apply):				
		⊠ Participant volunteers the information that they are over income				
		⊠ Participant abuse				
		☐ Family member found income ineligible at recertification				
		☑ Failure to pick up food instruments/cash-value vouchers for consecutive issuances☐ Other (specify):				
		DITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation): Policy and cedure 2.09 – Notification of Ineligibility				

F. Transfer of Certification

1. Procedures for Transfer of Certification and Verification of Certification (VOC) Cards

a.				used by all local agencies for transfers of certification e agencies (inter-State), and to the WIC Overseas Program
	Intra-State	Inter-State	WIC Overseas	
				Yes
				No
b.	A participant I	D card/folder is pr	ovided which also	serves as a VOC card:
	⊠ Yes	□ No		
c.	The State age	ncy requires all lo	cal agencies to use	a standardized Verification of Certification card:
	⊠ Yes	□ No		
d.	Verification of	Certification Card	s are issued to the	following (check all that apply):
	☐ All participar	nts		
	⊠ Migrants □ Homeless			
		relocating during co	ertification period	
	•		ry who are transferr	red overseas
	☐ Other (speci	fy):		
			ion and Eligibility A cation of Certification	Appendix and/or Procedure Manual (citation): on (VOC) Cards
2.	_	ncy requires all loo ard (check all that	_	ude the following information on the Verification of
	⊠ Name of pa	rticipant		
	□ Date certifice □	ation performed		
	□ Date income	e eligibility last dete	rmined	
	⊠ Nutritional r	isk condition of the	participant	
	□ Date certifice □	cation period expire	S	
	⊠ Signature/p	rinted or typed nam	e of certifying local	agency official
	⊠ Name/addre	ess/phone number	of certifying local age	ency
	□ Identificatio	n number or some	other means of acco	ountability
	☐ Migrant stat	us (non-resident)		
	☐ Other (spec	ify):		
3.				eept as valid all VOC cards from both the domestic WIC ain the following essential elements:
	⊠ Participant n	name		
	⊠ Name and a	ddress of the certify	ing agency	
	□ Date the cu	rrent certification pe	eriod expires	
4.				period for transferring participants (infants, children, and its every six months.

	⊠ Yes	□ No						
				I Eligibility Appendix of Certification (VOC)		ure Manual (cita	tion):	
G.	Dual Pa	rticipation,	Rights and	d Responsibilitie	s, Fair Hearin	gs, Sanction	S	
1.	Dual Par	ticipation						
a.		e agency has veen local age	-	edures to prevent ar	nd detect dual pa	articipation with	iin each local age	ncy
	⊠ Yes Pr	(Please attac ocedure Manua	•	tions of policy in Appe	endix or cite appro	opriate section(s)	of the	
b.	agencies	The State agency has a written agreement with the Indian State agency(ies) or other <u>geographic</u> State agencies in close proximity for the detection and prevention of dual participation (attach a copy of each applicable agreement or provide a citation of where a copy is located):				1		
	□ Yes	⊠ No	□ Not ap	plicable				
c.		The State agency has established procedures to handle participants found in violation due to dual participation:						
	⊠ Yes	,		tions of policy in Appe	endix or cite appro	opriate section(s)	of the	
	□ No	Procedure M	anual):					
Po	olicy and Pr	ocedure 1.11 -	- Prevention a	I Eligibility Appendion and Detection of Dual ities fication procedures	Participation	·	·	
a.	⊠ Yes		umom nou	ncation procedures	that are used by	y an iocal agenc	ies statewide.	
b.	 The State agency requires all local agencies to inform applicant/participant of his/her rights and responsibiliti in written form, and must be read by or to the applicant, parent, or caretaker: 					ısibilitie		
	⊠ Yes	□ No						
c.	The State	e agency has	implemented	d a policy of disquali	fying participan	ts for not pickin	ıg up food instrun	nents:
	⊠ Yes	\square N	o [☐ Not applicable				
	If yes, th	e policy is co	mmunicated	to participants in the	e participant rig	hts and respons	sibilities materials	.:
	⊠ Yes	□N	lo 🗆	Not applicable				
d.		e agency has d benefits, inc		d a policy to specific e:	cally inform part	icipants that the	y are not allowed	i to sell
	⊠ Yes	□ No; explai	n:					
e. The State agency has policies and procedures to identify attempted sales of V State Plan:			ales of WIC food	benefits in their	WIC			
		☐ No; expla	in:					

f.	The State agency has developed special notification policies and procedures for the following:			
	☐ Homeless			
	□ Migrants			
	□ Persons with disabilities			
	☐ Other (specify):			
g.	 The State agency requires all local agencies to provide notification of participant rights and responsibilitie in the following situations: 			
	□ Ineligibility at initial certification			
	Waiting list status ■ Waiting list status			
	□ Other (specify):			
	DITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation): licy and Procedure 2.10 – Notification of Participant Rights and Responsibilities			
3.	Fair Hearing and Sanction System			
a.	The State has a law or regulation governing participant appeals:			
	⊠ Yes □ No			
b.	The State agency has established statewide fair hearing procedures:			
	☑ Yes; attach fair hearing procedures for participants or specify the location in the Procedure Manual and reference in additional detail section below.			
	□ No			
c.	State or local agency actions against participants include (check all that apply):			
	⊠ Reclaiming the value of improperly received benefits			
	☑ Disqualification from the program for up to one year			
	Suspension from the program mid-certification ■			
	☐ Other (specify):			
d.	Appeal hearings are held at:			
	☐ WIC State agency parent agency			
	☑ Other State agency or hearing board (specify):			
	□ Local WIC agency			
	☐ Other (specify):			
е.	Statewide fair hearing procedures include (check all that apply):			
	⊠ Request for hearing			
	□ Denial or dismissal of request □ Continuation of benefits			

	⊠ Rules of pro olimits in the second	cedure	□ Responsibilities of hearing official		
			☐ Other (specify): Availability		
	⊠ Judicial revie	€W			
f.	State agency procedures require written notification for (check all that apply):				
			⊠ Request for hearing		
	□ Denial or disconnection	smissal of request	⊠ Notice of hearing		
	☑ Termination within certification period		⊠ Fair hearing decision		
		ew	☐ Other (specify):		
g.	The State agency has established timeframes to govern each step of the hearing process:				
	⊠ Yes	□ No			
h.	The State ager file:	ncy requires all local agencies	to document any notification/correspondence in the participant's		
	⊠ Yes	□ No			
i.	The State agency has a written sanction policy for participants:				
	□ No				
j.	The State agency has established procedures which determine the type and levels of sanctions to be applied against participants:				
	⊠ Yes	□ No			

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation): Policy and Procedure 1.06 – Participant Sanctions; 1.07 – Fair Hearing Policy for Applicants and Participants