



**SECTION:** Certification 635  
**SUBJECT:** PARTICIPANT NOTIFICATION: Eligibility and Rights and Responsibilities  
**DATE:** October 1, 2015 (*new*)

**POLICY:** Local programs shall inform WIC applicants and participants of their rights and responsibilities and their eligibility status.

**PURPOSE:** To ensure that WIC applicants and participants are fully informed of their rights and responsibilities and their eligibility status in the program.

**RELEVANT REGULATIONS:** §246.7 ¶(i)(10)—Certification Forms  
§246.7 ¶(j)(1)-(9)—Notification of Participant Rights and Responsibilities  
§246.7 ¶(j)(4)—Explanation of Food Delivery System and Health Services Available  
§246.10(b)(2)(ii)(D)- Supplemental Foods  
ASM 08-08—WIC Program Explanation for Participants  
ASM 2012-1—Offering to Sell WIC Foods, Benefits and/or EBT Cards Publicly or Online  
OAR 333-053-0030 through 333-053-0110—WIC Participant Administration  
WIC Operating Rules for EBT

**OREGON WIC PPM REFERENCES:** ◆400—Local Program Overview: Responsibilities and Communications  
◆426—Record Retention Period  
◆480—Voter Registration—National Voter Registration Act  
◆510e—eWIC Cardholder Requirements  
◆590—Program Integrity: Participant Violations  
◆636e—Participant Notification: Ineligibility and Termination from WIC  
◆640—Documentation Requirements for Certification in TWIST  
◆645—Certifications Periods

**DEFINITIONS:** *Applicant* An individual who comes to the WIC clinic requesting WIC services.  
*Participant* An individual who receives WIC benefits or services (i.e. supplemental foods, breastfeeding services, nutrition education, and/or referrals).

**APPENDICES:** Appendix A 635.4 List of Shopper Education Resources

**PROCEDURE:**  
*Participant notification*

- 1.0 At every certification and recertification visit, local program staff must inform applicants, participants or caretakers of their rights and responsibilities.
  - 1.1 Provide a copy of “*My Rights and Responsibilities*” (form 57-630) to each applicant, participant or caretaker.
  - 1.2 Read or have the individual or translator read “*My Rights and Responsibilities*” in a language the individual understands.

**PARTICIPANT NOTIFICATION: Eligibility and Rights & Responsibilities, cont.**

1.2.1 Both “*My Rights and Responsibilities*” and the “*Participant Signature Form*” are available in hard copy in English and Spanish and electronically on the WIC website in Russian, Vietnamese, Chinese (simplified), Somali, and Arabic.

*Documentation requirement*

- 1.3 Have the individual sign and date the “*Participant Signature Form*” (form 57-629) to indicate receipt and agreement. Please refer to ♦640—Documentation Requirements for Certification in TWIST.
- 1.4 File the signature form in the preferred filing method and retain for the required period of time. See ♦426—Record Retention Period for requirements.
- 1.5 Inform participants that all WIC programs in Oregon are a single program administered by individual local agencies, therefore transfers and transfer of certification information is automatic.
- 1.6 Participants must sign the “*Participant Signature Form*” to receive WIC benefits, since use of the TWIST data system is essential to issuance of WIC benefits and the system is integrated with other programs.

*Refusal to sign*

1.6.1 Participants refusing to sign the “*Participant Signature Form*” are given the “*WIC Ineligibility Letter*” (form 57-607) or the “*End of WIC Services Letter*” (form 57-608), which provides termination notification using the term code “Voluntary Drop.” See ♦636—Participant Notification: Ineligibility and Termination from WIC

*Minimum program information*

- 3.0 During the initial certification, provide the following minimum program information to the participant or participant’s parent/caregiver:
  - 3.1 Explain the reason for the participant’s visit to the program and the purpose of the program.

**EXAMPLE:** “The goal of the WIC program is to improve the health and nutrition of families. Today we are going to talk about your child’s health and diet to see if s/he is eligible for WIC and how WIC can help.”
  - 3.2 If eligible, inform the participant of their eligibility and the length of the certification period. See ♦645—Certification Periods.
  - 3.3 Inform the participant that they will need to be recertified at the end of their certification period to determine if WIC benefits may continue past that period.

**PARTICIPANT NOTIFICATION: Eligibility and Rights & Responsibilities, cont.**

**(Minimum program information)**

3.4 Explain the reason the participant is being enrolled on the program by stating a connection between their eligibility and the desired health outcome. This does not mean every risk must be reviewed, but rather is intended to summarize the reasons the participant is being enrolled.

**EXAMPLE:** “Your child is being enrolled in WIC so we can help with his good nutrition and watch his growth and weight gain over the next six months.”

3.5 Instruct participants on the correct use of the eWIC food benefits card and that the WIC foods are for use by the WIC participants in the household. See policy ♦510e—eWIC Cardholder Requirements.

3.5.1 Instructions on correct use of the eWIC card should include how to set the PIN, how to check food balance, and what to do if the card is lost or stolen.

3.6 Explain that the food provided by the WIC Program is supplemental; it is not intended to provide all of the participant’s daily food requirements.

3.7 Instruct participants on shopping for their WIC food benefits using the family Benefits List, the “WIC Food List” (form 57-1001), “How to Shop With Your eWIC Card” (form 57-1002), and Using Your Oregon eWIC Card (form 57-1008). See *Introduction to WIC* training module for more details on shopping with an eWIC card.

3.8 Instruct participants on the process for receiving additional food benefits at future appointments.

3.9 Instruct participants on the ID requirements for WIC and who may be issued food benefits, attend nutrition education, and bring a child to certification appointments. See Policy ♦510e— eWIC Cardholder Requirements.

3.10 Explain that giving away, selling or attempting to sell WIC foods, WIC-issued breast pump, formula, or eWIC card online or by any other means will be considered a participant violation. See Policy ♦590—Program Integrity: Participant Violation.

3.11 Provide information on how to access and use local health and nutrition services, including: the types of health services available, where they are located, how they may be obtained, and why they may be useful.

3.11.1 A locally developed handout describing available services may be useful in providing this information.

**PARTICIPANT NOTIFICATION: Eligibility and Rights & Responsibilities, cont.**

- (Minimum program information)*
- 3.12 If the Local Agency is not serving all priorities, explain the nature of the WIC priority system and the priority designation for the individual.
- Recertification*
- 3.13 At subsequent recertifications provide to the participant the following minimum program information:
- restate the purpose of the current visit,
  - restate the reasons for eligibility, including the connection to the desired health outcome.
  - ask if the participant has any questions or concerns about WIC appointments, WIC foods or the use of the eWIC food benefits card, and
  - offer the participant the family Benefits List and a current “WIC Food List.”
- Second cardholders*
- 4.0 Participants who choose to authorize a second cardholder are responsible for instructing them on the correct use of the eWIC card and the minimum program requirements as outlined in Section 3 above. See also ♦510e-eWIC cardholder requirements.
- Additional information*
- 5.0 The state WIC program encourages local programs to include additional information as appropriate and needed. Examples include:
- 5.1 Local policies and procedures affecting participant services, particularly those that might result in someone being terminated from the program. Such as:
- how appointments are scheduled,
  - what happens if a participant is late for an appointment, etc.
- 5.2 WIC provides nutrition education, supplemental foods, and referrals to participants.
- 5.3 Nutrition education is an integral part of the program and we expect and encourage participants to take advantage of it whenever possible. ★

**If you need this in large print or an alternate format,  
please call (971) 673-0040.**

**WIC is an equal opportunity program and employer.**

## **List of Shopper Education Resources**

### **For WIC Staff**

- *Introduction to WIC module* (form 57-6622)
- *What Successful Shoppers Need to Know (in Intro to WIC module)*

### **For WIC Participants**

- *My Rights and Responsibilities* (form 57-630, English or Spanish in hard copy; Vietnamese, Russian, Chinese Somali and Arabic available electronically at <http://public.health.oregon.gov/HealthyPeopleFamilies/wic/Pages/clinicforms.aspx>)
- *WIC Folder* (form 57-600, English or Spanish)
- Current *WIC Food List* - pictorial brochure (form 57-1001, English or Spanish in hard copy; Vietnamese, Russian, Chinese Somali and Arabic available electronically at, <http://public.health.oregon.gov/HealthyPeopleFamilies/wic/Pages/foods.aspx>)
- *How to Shop with Your eWIC Card* (form 57-1002, English or Spanish)
- *Using Your Oregon eWIC Card* (form 57-1018, English or Spanish)
- Shopper education video shorts