



SECTION: Certification 636
SUBJECT: **PARTICIPANT NOTIFICATION: Ineligibility and Termination from WIC**
DATE: August 19, 2015 (revised)

POLICY: Local programs shall notify WIC applicants and participants and inform them of ineligible status or termination from the WIC program.

PURPOSE: To ensure that WIC applicants and participants are fully informed of their program status within timeline designated by USDA regulation.

RELEVANT REGULATIONS: 7CFR §246.7 ¶(h)—Actions affecting participation in mid-certification
7CFR §246.7 ¶(i)(10)—Certification Forms
7CFR §246.7 ¶(j)—Notification of Participant Rights and Responsibilities

OREGON WIC PPM REFERENCES: ♦458—Appeals Process for Participants
♦475—Waiting List
♦590—Program Integrity: Participant Violations
♦610—Required Proofs- Identity, Residency, Income
♦635—Participant Notification: Eligibility and Rights & Responsibilities

DEFINITIONS: *Applicant* An individual who comes into the WIC clinic requesting WIC services.

Change in Your WIC Benefits The “participant friendly” word for termination. Termination notices are called Change in Your WIC Benefits.

Participant An individual who receives supplemental food benefits, an infant who does not receive supplemental foods but whose breastfeeding mother receives supplemental food benefits, or breastfeeding women who do not receive supplemental food benefits but whose infants receive supplemental food benefits.

EBA *eWIC Electronic Benefit Account*

APPENDICES: 636.5 Notice of WIC Ineligibility, form 57-607-ENGL
636.6 Change in Your WIC Benefits, form 57-608-ENGL

PROCEDURE:

Participant notice within 15 days of end of certification 1.0 Notify the participant or caretaker no less than 15 days before the end of their certification period that their certification for the program is about to expire.

1.1 Participant’s first notification is on the “Rights and Responsibilities” handout explaining that failure to keep recertification appointments may delay or stop WIC services.

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- 1.2 Written appointment reminder notices serve as the notification of the approaching expiration of certification and must be received by the participant at least 15 days before their certification period ends.
- Documentation of ineligibility*** 2.0 When local program staff determine that an applicant is not eligible for WIC during the certification, give the applicant written notification. Notification must include the reasons for ineligibility and the applicant’s rights to a fair hearing. Giving the applicant a copy of “Notice of WIC Ineligibility,” form 57-607-English or -Spanish meets this requirement.
- 2.1 Document the reasons for ineligibility and that notification was given to the applicant in the participant’s record in TWIST. See TWIST Training Manual Ch 3, 805—Terminations/Ineligible.
- 2.1.1 If notification is manually issued, the date of notification must be documented in the participant’s TWIST record.
- 2.2 For applicants who cannot be served because the local program is operating at capacity, provide information about other potential sources of food assistance or put them on the waiting list. See Policy ♦475-Waiting List.
- 2.3 Applicants with incomplete certification records in TWIST will be considered ineligible and TWIST will produce an ineligibility letter at the end of the month if one was not printed initially. These must be mailed to the participant within 30 days.
- No ineligibility notice*** 3.0 Local programs need not give a written notice of ineligibility to individuals who call to request services and preliminary screening shows they do not meet income, residence or categorical eligibility requirements.
- Termination from the WIC program*** 4.0 Participants terminated from the program must be given written notice of their termination. To accomplish this, give the individual in person or by mail the:
- “Change in Your WIC Benefits”, 57-608-English or –Spanish.
- 4.1 Participants may be terminated from the WIC program for the following reasons:
- No longer eligible in their certification category.

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(Termination from the WIC program:)

EXAMPLE: A child turns 5 years old; a mother is six months postpartum and not breastfeeding; a breast-feeding mother is one year postpartum.

- No longer meets eligibility criteria: i.e., income above WIC standard or no longer lives in the state of Oregon.

EXAMPLE: Three-year-old Joe Smith is brought in for a recertification visit, where it is determined he is no longer income eligible. His caregiver will be given a termination letter. Joe is eligible to receive vouchers in the month his certification ends.

- Incomplete documentation (did not bring in proof of residence, income, or identity; infant not returned postpartum; certification not complete);
- Insufficient funds to serve participants at that priority level and local program is not serving that priority;
- Did not keep scheduled recertification appointments;
- Participant violation (refer to ♦590—Participant Violations, for examples of participant abuse and further guidelines on when this may occur); or
- Voluntary drop—if the participant chooses not to sign the “Participant Signature Form” or decides to discontinue participation in the WIC program.

NOTE: Participants must sign this form to receive WIC benefits, since use of the data system is essential to issuance of WIC benefits and the system is integrated with other programs.

Documentation

4.2 Document the reason(s) for termination, that notification was given to the applicant, and the date of notification in the participant’s TWIST record.

4.3 If notification is manually issued, the date of notification must be documented in the participant’s TWIST record. See TWIST Training Manual Ch 3, 805—Terminations/Ineligible.

Food Benefits

4.4 When a participant is terminated from the program, in most cases any food benefits remaining in their EBA for the current month will be retained for them to redeem. Exceptions to this are terminations reasons:

- Deceased
- Dual Participation
- Abuse of the program

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- Family does not use any of their benefits for 2 consecutive months.
- 4.5 Food benefits issued in the future will be removed from the EBA for all termination reasons.
- Mid-certification eligibility assessment** 5.0 The state WIC program does not do routine mid-certification eligibility assessments. However, local program staff will review eligibility if a participant notifies the program that there has been a change in income or residence. See ♦615—Income Eligibility: Change in Income for more information.
- Mid-certification eligibility assessment** **EXAMPLE: Income change**
- Anna Norris calls her local WIC clinic to report she got a new job and is making considerably more money now. The clinic would determine if Ms. Norris is still income-eligible. If she were no longer eligible, she and other participating household members would be terminated from WIC, with appropriate notice (see ¶2.0 above).
- No termination notice** 6.0 Participants do not need to receive written notice of termination when:
- Participant does not receive benefits for two months in a row, and participant is automatically terminated;
 - WIC family has not redeemed any benefits for two months in a row;
 - participant has moved out of state; or
 - participant has no forwarding address.
- TWIST produced termination and ineligibility notices** 7.0 TWIST will review terminated participant records weekly to identify those without a notification date and will batch produce termination notices for those participants. At a minimum, these notices must be printed monthly and mailed to participants.
- 7.1 Participants who will be categorically ineligible will have ineligibility notices produced one month prior to their term date. These notices must be printed and mailed early enough to meet the 15 days prior to cert. end date notification requirement. They are identified as “Soon to Grad” notices in TWIST. (Exception to 15 day notice requirement- termination for incomplete documentation)
- 7.2 Notices in TWIST will remain until the 27th of the following month and then are removed.

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- Fair hearings*** 8.0 Inform the applicants and participants that they have the right to appeal the decision of the competent professional authority (CPA) by either contacting the local WIC program coordinator or the state WIC program. (Refer to ♦458—Appeals Process for Participants.)
- 8.1 In case of such appeal, the local WIC program coordinator will review the participant’s record to determine the appropriateness of the decision. ★

**If you need this in large print or an alternate format,
please call (971) 673-0040.
WIC is an equal opportunity program and employer.**

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Appendix A

Notice of WIC Ineligibility



Date: _____

Dear _____:

After talking with you about your/your child's health, diet and household information, we find that _____ is not eligible to participate in the WIC Program.
(Name)

The reason is checked below.

- Due to current funding we need to serve those with the highest nutritional risks. Your risks are in a lower category at this time.
- Your household income is over the Oregon WIC income standard.
- Other: _____

If you would like to reapply for WIC, please call for an appointment. You may be eligible for other health services in our clinics. Ask any WIC staff person about services you may qualify for.

If you have any questions or disagree with this decision, please call us at:

(WIC clinic phone number, address or message)

You have the right to request a fair hearing within 60 days if you feel you do meet the requirements for WIC. You may call or write to the State WIC Office at:

Oregon WIC Program
PO Box 14450
Portland, OR 97293-0450
(971) 673-0040
TTY: (503) 731-4031 FAX: (971) 673-0071



The U.S. Department of Agriculture WIC program prohibits discrimination against its customers on the bases of race, color, national origin, age, disability, and sex. See full USDA non-discrimination statement at: http://www.usda.gov/wps/portal/usda/usdahome?navtype=FT&navid=NON_DISCRIMINATION. If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. Individuals who are deaf, hard of hearing, or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer. **If you need this information in large print or an alternate format, please call 971-673-0040 or TTY 800-735-2900.** 57-607-ENGL (6/2015)

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NOTICE: Change in Your WIC Benefits



Date: _____

Dear _____:

_____ will no longer receive WIC benefits after _____.
Other family members on WIC may still get services.

The reason for this change is:

- You have breastfed for one year – great job! We cannot serve women more than one year past delivery but we encourage you to continue to breastfeed for as long as you would like.
- We serve non-breastfeeding moms only up to 6 months past delivery. We will continue to provide WIC services for your baby.
- Your child is or will be 5 years old.
- The person listed above did not keep scheduled appointment(s). Please call if you would like to reapply for WIC.
- Due to current funding we need to serve those with the highest nutritional risks. Your risks are in a lower category at this time.
- Services are ending for all family members on WIC. Your household income is over the Oregon WIC income standard.
- Other: _____

If you would like to reapply for WIC, please call for an appointment. You may also be eligible for other health services in our clinics. Ask any WIC staff person about services you may qualify for. If you have any questions or disagree with this decision, please call us at:

(WIC Clinic phone number, address or message)

You have the right to request a fair hearing within 60 days if you feel you do meet the requirements for WIC. You may call or write to the State WIC Office at:

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PO Box 14450 TTY: (503) 731-4031
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The U.S. Department of Agriculture WIC program prohibits discrimination against its customers on the bases of race, color, national origin, age, disability, and sex. See full USDA non-discrimination statement at: http://www.usda.gov/wps/portal/usda/usdahome?navtype=FT&navid=NON_DISCRIMINATION. If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at http://www.ascr.usda.gov/complaint_filing_cust.html, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at program.intake@usda.gov. Individuals who are deaf, hard of hearing, or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer. **If you need this information in large print or an alternate format, please call 971-673-0040 or TTY 800-735-2900.**

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