

Nutrition Services

Department of State Health Services

Policy and Procedures Manual

Policy and Procedures Manual

AC - Accounting

- AC:01.0 Local Agency Financial Management System (Rev. 10/01/05)
- AC:02.0 Reimbursement of Allowable WIC Expenses (Rev. 01/01/11)
- AC:03.0 Plan to Allocate Direct Costs (Rev. 07/01/16)
- AC:04.0 Allowable Costs Personnel Compensation and Benefits (Rev. 01/01/11)
- AC:05.0 Allowable Costs In-State and Out-of-State Travel (Rev. 01/01/11)
- AC:06.0 Allowable Costs WIC Owned or Agency Vehicle (Rev. 01/01/08)
- AC:07.0 Property Management (Rev. 01/01/11)
- AC:08.0 Allowable Costs Equipment and Designated Reportable Assets (Rev. 01/01/11)
- AC:09.0 Allowable Costs Outreach and Outreach Incentive Items (Rev. 10/01/05)
- AC:10.0 Allowable Costs Communications & Utilities (Rev. 01/01/11)
- AC:11.0 Allowable Costs Reproduction and Printing (Rev. 06/01/02)
- AC:12.0 Allowable Costs Rental Space (Rev. 01/01/11)
- AC:13.0 Allowable Costs Facility Depreciation or Use Allowance (Rev. 06/01/02)
- AC:14.0 Allowable Costs Supplies, Postage and Shipping (Rev. 01/01/11)
- AC:15.0 Allowable Costs Non-Professional Contract Services (Rev. 01/01/11)
- AC:16.0 Allowable Costs Professional Contract Services (Rev. 01/01/08)
- AC:17.0 Allowable Costs Breastfeeding Peer Counselors (Rev. 01/01/11)
- AC:18.0 Allowable Costs Facility Renovation (Rev. 01/01/11)
- AC:19.0 Allowable Costs Indirect Costs (Rev. 01/01/11)

AC - Accounting

- AC:20.0 Allowable Costs Food Purchases (Rev. 01/01/11)
- AC:21.0 Allowable Costs – Insurance Expense (Rev. 01/01/11)
- AC:22.0 Allowable Costs Laboratory Coats and Employee Uniforms (Rev. 06/01/02)
- AC:23.0 Unallowable Costs (Rev. 06/01/02)
- AC:24.0 Monthly Reimbursement Maximum (Rev. 01/01/11)
- AC:25.0 Monthly Reimbursement Maximum - Start-Up Costs (Rev. 06/01/02)
- AC:26.0 Advance Cash Payments (Rev. 06/01/02)
- AC:27.0 Surplus Funds (Rev. 06/01/02)
- AC:28.0 Financial Reporting (Rev. 01/01/11)
- AC:29.0 WISE Cost Report, WIC-227A (Rev. 04/01/16)
- AC:30.0 Program Income (Rev. 06/01/02)
- AC:31.0 Participant Fees (Rev. 06/01/02)
- AC:32.0 Closeout Reports (Rev. 01/01/11)
- AC:33.0 Nutrition Education Expenditures (Rev. 10/01/05)
- AC:34.0 Breastfeeding Promotion Expenditures (Rev. 10/01/15)
- AC:35.0 Lost and Stolen Equipment (Rev. 10/01/05)
- AC:36.0 Sale or Disposition of Property (Rev. 06/01/02)
- AC:39.0 Allowable Costs - Computers (01/01/11)

AUD - Auditing

- AUD:01.0 Audit of Local Agencies (01/01/11)

AUT - Automation

- AUT:01.0 Automation Change Management (06/01/02)
- AUT:02.0 Computer Environment and Platform Modifications (06/01/02)
- AUT:03.0 Backups (06/01/02)
- AUT:04.0 Telephone with Data Communications Capabilities (Rev. 10/01/05)
- AUT:05.0 Repair of Computer Equipment (06/01/02)
- AUT:06.0 Surge Protector Equipment (06/01/02)
- AUT:07.0 Requests for New or Additional Computers and/or Peripherals (06/01/02)
- AUT:08.0 Acceptable Use Agreement Policy (01/01/17)

BF - Breastfeeding

- BF:01.0 Breastfeeding Promotion Standards (Rev. 10-01-15)
- BF:02.0 Local Agency Breastfeeding Coordinator (Rev. 10-01-15)
- BF:03.0 Breastfeeding Peer Counselor (Rev. 10-01-15)
- BF:04.0 Breastfeeding Training (Rev. 12-01-16)
- BF:05.0 Issuance and Inventory of Manual and Single-user Electric Breast Pumps (Rev. 02-01-15)
- BF:06.0 Loan of and Inventory of Multi-User Electric Breast Pumps (Rev. 02-01-15)
- BF:07.0 Issuance of Breast Pumps to a Proxy (Rev. 10-01-12)
- BF:08.0 Tracking Born-To-WIC Breastfeeding Rates (11-01-07)
- BF:09.0 Worksite Lactation Support for Employees (11/01/16)

CR - Civil Rights

- CR:01.0 Rights and Obligations of an Applicant/ Participant (Rev. 06/01/14)
- CR:02.0 Nondiscrimination (Rev. 12/01/15)
- CR:03.0 Fair Hearing Procedure for Applicants/ Participants (11/01/08)

CR - Civil Rights

- CR:04.0 Civil Rights Compliance Reviews (06/01/02)
- CR:05.0 Civil Rights Complaints (11/01/08)
- CR:06.0 Provision of Services to Individuals with Disabilities (06/01/02)
- CR:07.0 Provision of Services to Families with Special Health Care Needs (Rev. 12/01/11)
- CR:08.0 Civil Rights Training (06/01/02)
- CR:09.0 Collection of Racial/ Ethnic Data (Rev. 01/01/11)
- CR:10.0 Providing Oral and Written Program Information to Non-English or Limited English Speaking Persons (Rev.10/01/05)

CS - Certification

- CS:01.0 Eligibility Criteria for Program Participation (Rev. 08/01/03)
- CS:02.0 Time Frames for Processing Applicants (08/01/09)
- CS:03.0 Appointment System(06/01/02)
- CS:04.0 Physical Presence (Rev. 11/01/12)
- CS:05.0 Identification of a WIC Applicant/Participant and Parent or Guardian (Rev. 07/01/12)
- CS:06.0 Residency as a Certification Requirement (Rev. 07/01/12)
- CS:07.0 Income Screening as a Certification Requirement (Rev. 08/01/15)
- CS:08.0 Adjunctive Income Eligibility (Rev. 12/01/15)
- CS:09.0 Definition of Income (Rev. 08/01/15)
- CS:10.0 Economic Unit for Income (Rev. 07/01/16)
- CS:11.0 Certification of Foster Children (Rev. 02/01/11)

CS - Certification

- CS:12.0 Texas WIC Income Guidelines (Rev. 07/01/16)
- CS:13.0 Collection and Use of Social Security Numbers (03/01/16)
- CS:14.0 Completion of the WIC Income Questionnaire and the Family Certification/WIC Program Income Screening Form (Rev. 10/01/15)
- CS:15.0 Certifying Authority (Rev. 10/01/15)
- CS:16.0 WIC Certification Specialist (04/01/12)
- CS:17.0 Documentation of a Complete Nutrition Assessment (Rev. 03/01/14)
- CS:18.0 Criteria for Identifying Nutrition Risk Conditions (Rev. 10/01/16)
- CS:19.0 Midpoint Screening (03/01/12)
- CS:20.0 Certification Forms (Rev. 10-01-15)
- CS:21.0 Referral to Health Services (Rev. 10-01-15)
- CS:22.0 Completing the Supplemental Information Form (Rev. 03/01/16)
- CS:23.0 Notification of Ineligibility, Termination, or Expiration of Eligibility (Rev. 01/01/11)
- CS:24.0 Certification Periods (Rev. 03-01-12)
- CS:25.0 Issuance of WIC Lone Star Cards (08/01/09)
- CS:26.0 Issuance of Replacement WIC Lone Star Cards (Rev. 08/01/09)
- CS:27.0 Enrollment of Transferring Participants (Rev. 01/01/17)
- CS:28.0 Preventing and Detecting Dual Participation (06/01/02)
- CS:30.0 Caseload Management (06/01/02)
- CS:31.0 Waiting List for WIC (06/01/02)
- CS:32.0 Mid-Certification Assessment for Children (03/01/14)
- CS:33.0 High Risk Referrals (10/01/15)

FD - Food Delivery

- FD:01.0 Documentation of Food Benefits Issuance (Rev. 01-1-15)
- FD:02.0 Frequency of Issuance of Food Benefits (Rev. 08-01-09)
- FD:03.0 Designated Recipients of Food Benefits (Rev. 08-01-09)
- FD:04.0 Disposition of Unusable WIC Lone Star Cards (Rev. 08-01-09)
- FD:06.0 Documenting Missing/ Stolen WIC Lone Star Cards Inventory (08-01-09)
- FD:08.0 Liability of Local Agency for Food Instrument Inventory Shortages (01-01-11)
- FD:09.0 Liability of Local Agency for Food Benefit Reconciliation (Rev. 08/01/09)
- FD:10.0 Issuing Food Packages for the Mother/Infant Dyad (Rev. 01-01-11)
- FD:11.0 Transfer of Texas WIC Lone Star Card Inventory (Rev. 08-01-09)
- FD:12.0 Food Packages (Rev. 10-01-15)
- FD:13.0 Issuance of Contract Infant Formula (Rev. 10-01-16)
- FD:15.0 Issuance of Ready-to-Use Formula (10-01-09)
- FD:16.0 Approval of Non-Contract Formulas (Rev. 10-01-16)
- FD:16.1 Issuance of Formula Food Packages (10-01-16)
- FD:18.0 Drop Shipment of Formula and Medical Nutritional Products (03-01-12)
- FD:19.0 Management of Returned Formula and Medical Nutritional Products (Rev. 07-01-13)

GA - General Administration

- GA:01.0 Confidentiality of Participant Information (Rev. 10/01/08)
- GA:02.0 Claims Against Local Agencies (06/01/02)
- GA:03.0 Records Retention (07/01/09)
- GA:04.0 Contracts with Local Agencies (06/01/02)
- GA:05.0 Local Agencies Agreement for the Provision of Health Services (06/01/02)
- GA:06.0 Coordination of Program Operations (06/01/02)
- GA:07.0 Referral to Food Assistance (06/01/02)
- GA:08.0 Provision of Information on the Food Stamp, Temporary Assistance to Needy Families, Medicaid, THSteps, Children's Health Insurance, Children's Health Insurance Perinatal, Women's Health, and Child Support Enforcement Programs to WIC Applicants and Participants (Rev. 08/01/07)
- GA:09.0 Local Agency Coordination with Hospitals (06/01/02)
- GA:11.0 Verbal and Physical Abuse by Participants (06/01/02)
- GA:12.0 Participant Violations (Rev. 06/01/14)
- GA:13.0 Access to Appointments (01/01/11)
- GA:14.0 Staffing Standards (10/01/11)
- GA:16.0 Compliance with the Clinical Laboratory Improve Amendments of 1988 (06/01/02)
- GA:17.0 No Smoking Policy in Local Agency Facilities (06/01/02)
- GA:18.0 Research or Auxiliary Services Involving WIC Participants (Rev. 07/01/11)
- GA:19.0 Compliance with the National Voter Registration Act of 1993 (Rev. 07/01/15)
- GA: 20.0 Staff Fraud and Abuse (Rev. 12/01/16)
- GA:21.0 Open, Relocate, or Close a Clinic Site (Rev. 01/01/17)

GA - General Administration

GA:22.0 Full Use of Federal Funds(Rev. 08/01/11)

GA:23.0 Required Outreach to Fathers(04/01/15)

IM - Immunizations

IM:11.0 Screening of and Referral for Immunizations (Rev. 07/01/12)

NE - Nutrition Education

NE:01.0 Standards for Nutrition Education Contacts (Rev. 03/01/14)

NE:02.0 Nutrition Education Staffing Responsibilities and Duties (Rev. 03/01/14)

NE:03.0 The Nutrition Education/Breastfeeding Plan (Rev. 08/01/03)

NE:04.0 Nutrition Education Lessons and Materials (Rev. 03/01/14)

OR - Outreach

OR:01.0 Local Agency Outreach (Rev. 10/01/05)

QA - Quality Assurance

QA:01.0 Local Agency Self Audit (Rev. 08/01/16)

QA:03.0 Quality Assurance Monitoring of Local Agencies (06/01/02)

TR - Training

TR:01.0 In-Service Orientation to New Local Agencies (06/01/02)

TR:02.0 Orientation/ Training of Local Agency Directors (06/01/02)

TR:03.0 Required Local Agency Training / Summary (Rev. 10/01/15)

WV - Vendor Operations

- WV:01.0 WIC Vendor Agreement / Policy Violations (Rev. 01/01/17)
- WV:01.1 WIC Farmers' Market Agreement/Policy Violations (03/01/14)
- WV:02.0 Least Expensive Brands Declaration (Rev. 01/01/17)
- WV:03.0 Inadequate Participant Access (Rev. 04/01/15)
- WV:05.0 Disputes Related to the Late Submission of WIC EBT Transactions and/or Submission of Malformed Transactions (Rev. 12/01/16)
- WV:08.0 WIC Vendor Training (Rev. 11/01/16)
- WV:09.0 Restriction on Vendor Incentive Items (Rev. 10/01/12)
- WV:10.0 Selection of Vendors for WIC Initial Authorization of Site and Calculation and Use of Vendor Competitive Pricing Data (Rev. 06/15/15)
- WV:11.0 Selection of Vendors for Reauthorization for Participation (08/01/16)
- WV:12.0 WIC EBT Retail Vendor ECR Systems (Rev. 10/01/16)
- WV:13.0 WIC Vendor Right to Administrative Review (12/01/16)
- WV:13.1 Appeal Procedures For WIC Farmers' Markets/Farmers (12/01/11)

AC - Accounting

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2005

Policy No. AC:01.0

Local Agency Financial Management Systems

Purpose

To ensure a proper audit trail is maintained, expenditures are reasonable and necessary, and reimbursements are not duplicated.

Authority

7 CFR Part 246.13, OMB Circular A-87

Policy

Each local agency (LA) shall maintain a financial management system that provides accurate, current and complete disclosure of the financial status of the WIC Program. Costs shall be reasonable and necessary for the operation of the WIC Program and expenditure records shall identify the source and use of funds expended for program activities. Expenditures not recorded in these accounts shall not be allowable charges to the WIC Program.

Definitions

Reasonable costs – A cost is reasonable if under the circumstances a prudent person would incur the cost. Consideration should be given to the following:

- Whether the cost provides the program a benefit commensurate with the cost incurred.
- Whether the cost is of a type generally recognized as ordinary and necessary.
- Sound business practice.
- Market prices for comparable goods and services.
- The cost was incurred in accordance with the terms and conditions of the contract with DSHS.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2005

Policy No. AC:01.0

Necessary Costs – Costs incurred to carry out essential program functions and cannot be avoided without adversely impacting program operations.

Procedures

- I. Each LA shall maintain a separate, self-balancing set of accounts for the WIC Program.
- II. Costs shall be reasonable and necessary for the operation of the WIC Program.
- III. Monthly claim for reimbursement shall be prepared from this set of accounts by means of a State of Texas Purchase Voucher, Form B-13.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:02.0

Reimbursement of Allowable WIC Expenses

Purpose

To ensure that all reimbursement of expenditures are attributed to the proper fiscal year.

Authority

7 CFR Part 246.16, 246.17, Part 3016.41

Policy

On a monthly basis, each local agency (LA) shall be reimbursed for actual allowable WIC expenses. Outstanding obligations shall be submitted within 30 days following the last day of the federal fiscal year so that funds applicable to the proper period may be encumbered.

Procedures

- I. Each LA shall request reimbursement for actual allowable expenditures on a monthly basis. LA may bill either on cash basis or accrual basis provided the method is consistently used throughout the contract period. Contractors that use cash basis accounting must make adjustments to the final billing and financial reporting submitted to the SA so that expenses/costs are presented on an accrual basis.
 - a. Cash basis expenditures must be paid by the LA before reimbursement can be requested.
 - b. Accrual basis expenditures must be paid prior to requesting reimbursement when possible but no later than the 10th day after receipt of payment from the SA.

- II. For the last month of the federal fiscal year (September), the LA shall request its regular monthly reimbursement via a State of Texas

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:02.0

Purchase Voucher, Form B-13. In addition, the LA shall provide a list of all outstanding obligations 30 days following the last day of the federal fiscal year. These shall represent items of expense that have been encumbered but not yet billed to the SA as of September 30th.

- III. As the obligations above are liquidated, the LA shall submit supplemental billings requesting reimbursement.
- IV. All obligations shall be liquidated no later than 60 calendar days following the contract term to meet the deadlines for federal fiscal year close-out imposed by USDA.
- V. Requests for reimbursement submitted more than 60 calendar days following the end of the contract attachment term shall not be processed. Exceptions shall be considered on a case-by-case basis for extenuating circumstances such as a catastrophic event, natural disaster, or criminal activity that substantially interferes with normal business operations or causes damage or destruction of the place of business and/or records. A written statement describing the extenuating circumstance and the late request for reimbursement shall be submitted for review and approval to the WIC program.

Guidelines

Department of State Health Services Contractor's Financial Procedures Manual may be accessed at <http://www.dshs.state.tx.us/contracts/cfpm.shtm>

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2016

Policy No. AC:03.0

Plan to Allocate Direct Costs

Purpose

To provide a formal mechanism for the state agency (SA) to review and acknowledge cost categories, allocation methods, and supportive documentation necessary for costs to be reimbursed under the WIC contract attachment.

Authority

7 CFR Part 3016; OMB Circular A-87

Policy

A local agency (LA) shall submit a written annual Plan to Allocate Direct Costs (PADC) to the SA for all direct charges allocated to the WIC Program.

Procedures

- I. The plan shall be submitted to the SA by June 15th each year for the coming contract year. The plan shall be submitted electronically to WICPADC@dshs.state.tx.us. A sample form can be found at: <http://www.dshs.texas.gov/wichd/fin/padcsample.doc>

- II. The plan shall include but is not limited to the following:
 - A. specific cost categories that shall be allocated;
 - B. the method or base used to allocate each specific cost;
 - C. the rate or percentage developed for each specific cost; and
 - D. a description of the documentation supporting the allocation.
(See reference materials for an example)

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2016

Policy No. AC:03.0

- III. The SA shall acknowledge receipt of the plan to allocate direct costs in writing.
- IV. The LA shall submit amendments to the plan in writing as changes occur.
- V. The SA shall disallow requests for reimbursement of costs not included on the PADC.
- VI. A copy of the accepted PADC shall be available at the LA for purposes of an audit or fiscal monitoring review.
- VII. Personnel Costs: Timesheets are the only allowable support documentation for Personnel Costs including the distribution of the costs among Administration, Nutrition Education, and Breastfeeding. Each payroll classification and the number of full time equivalents (FTEs) to be allocated to WIC shall be listed separately on the plan. (Example: nurses (2), clerks (3.5), etc.)
- VIII. Personnel Benefits: Actual rates to be charged shall be specified for each specific benefit. (Example: FICA, retirement, Workers Comp, etc.)
- IX. Travel: Documentation includes travel requests, travel claims and the LA's written travel policy. If the LA has no official written policy, the current State travel rates and regulations shall be utilized.
- X. Outreach: The cost category of outreach refers only to materials and resources. Personnel compensation and travel costs associated with outreach shall be reported and identified under the appropriate categories.
- XI. Communication and Utilities: If communications and utilities are charged for different sites, each site shall be listed separately. Allocation of utilities is based on a building floor plan.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2016

Policy No. AC:03.0

- XII. Building and Facilities Space Rental: The allocation for each site shall be identified separately and supported by individual floor plans.

- XIII. Other Expenses: Since the "other expense" category covers a variety of costs, each specific cost to be billed shall be identified on the PADC. Include the allocation method and the supporting documentation for each specific expense.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:04.0

Allowable Costs – Personnel Compensation and Benefits

Purpose

To allow local agencies (LAs) to pay salaries and benefits of necessary and reasonable staff to administer all phases of the WIC Program.

Authority

7 CFR Part 3016; OMB Circular A-102; OMB Circular A-87

Policy

- I. LAs may request reimbursement for the cost of personnel compensation that is reasonable for the services rendered and may be directly allocated to the WIC Program.

- II. LAs may request reimbursement for the cost of personnel benefits as follows:
 - A. Personnel benefits in the form of the employer's contribution for FICA, life and health insurance, unemployment, workmen's compensation, retirement, etc., shall be charged to the WIC Program after contributions are paid.
 - B. In general, personnel benefits in the form of regular compensation paid to employees during periods of authorized absences from the job, such as annual, sick, jury duty, military leave, etc., shall be charged to the WIC Program as the leave is taken.

Procedures

- I. Direct personnel costs and benefits charged shall be supported by documentation including time sheets, attendance records, payroll records, cancelled checks, remittance advises, and insurance policies.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:04.0

- A. The time sheets shall clearly identify by date the number of hours worked for WIC as well as any other programs. The time sheets shall account for 100% of the individual's time.
 - B. The dates and number of hours worked in either WIC Administration, Nutrition Education or Breastfeeding shall be clearly indicated.
 - C. Generally, time shall be worked and documented in one-half hour increments.
 - D. In situations where activity reports/dailies are required, the time sheet shall agree and support the activity on such reports.
 - E. The time sheets shall specifically identify non-productive or leave/sick time.
 - F. The employee and the employee's immediate supervisor verifying time worked shall sign the time sheet.
 - G. If personnel costs are allocated to WIC as well as other programs, payment for leave time shall also be allocated to each program according to the percentage of time worked towards each activity. These percentages shall be computed based on the time worked during the month the leave is taken.
- II. If an employee works for more than one program and a portion of the salary may be directly allocated to WIC, a time and attendance record shall be available for review to support the distribution.
- III. Documentation shall support the allocation among Administration, Nutrition Education, and Breastfeeding activities.
- IV. If personnel costs are allocated to WIC and other programs, payment for leave time may also be allocated to each program according to the percentage of time worked for each program during the pay periods being billed.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:04.0

- V. Both the employee and the immediate supervisor shall sign the time sheet. The time record shall account for 100% of the employee's time.

- VI. Personnel compensation (i.e. executive director, accounting staff, etc.) not easily allocable to an individual program should be billed under indirect costs unless special approval is granted from state agency. Refer to Policy AC:19.0 for billing of indirect costs.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:05.0

Allowable Costs – In-State and Out-of-State Travel

Purpose

To allow local agency (LA) employees to be reimbursed for travel expenses incurred while on official WIC business.

Authority

7 CFR Part 3016; OMB Circular A-102; OMB Circular A-87

Policy

LAs may request reimbursement for the cost of in-state or out-of-state travel based on written LA policies. Such costs shall be charged on an actual cost basis. In lieu of actual costs, a methodology based on per diem and/or mileage may be utilized.

Procedures

- I. LAs with no official written travel policies shall adopt the current state travel rates and regulations governing in-state and out-of-state travel.
- II. Air transportation shall be limited to the next lowest available airline fare below first class unless such is not available.
- III. Travel costs shall be supported by documentation such as the LA's written travel policy, the signed travel claim submitted by the employee and approved by the employee's immediate supervisor, and cancelled checks. The travel claim shall also contain a statement detailing the purpose of the trip.
- IV. Documentation shall also support the allocation among Administration, Nutrition Education, and Breastfeeding.
- V. Travel advances may not be billed until after travel has been taken.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:05.0

- VI. It is the LA's responsibility to justify the benefit of the trip to WIC and the number of attendees as well as assuring that sufficient earned funds are available.

- VII. Flat-rate travel in the form of travel allowances is not an allowable charge to the WIC Program.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2008

Policy No. AC:06.0

Allowable Costs – WIC Owned or Agency Vehicle

Purpose

To allow local agencies (LAs) to use a WIC owned or agency owned vehicle for travel on official WIC business

Authority

7 CFR Part 3016' OMB Circular A-102; OMB Circular A-87

Policy

LAs may request reimbursement for expenses related to the use of WIC owned or agency owned vehicles. Also the costs of service organizations, which provide automobiles for local agency personnel at a mileage or fixed rate and/or provide vehicle maintenance, inspection and repair services for agency owned cars are allowable.

Procedures

- I. The LA shall document odometer readings at the beginning and ending of a WIC-related trip.
- II. The LA shall document the sites visited and the purpose of the travel. The use of a WIC vehicle to transport participants to or from appointments is not allowed.
- III. Using the source documentation from I and II, the LA may:
 - A. apply a fixed rate to the WIC mileage for determining the amount to bill; or
 - B. compute a monthly rate/amount to bill by dividing the total miles driven during the month into the total expenditures made for maintenance and operations to approximate the average cost

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2008

Policy No. AC:06.0

per mile. This cost per mile may then be applied to WIC mileage for billing purposes.

- IV. The mileage charge shall be supported by documentation such as the agency travel policy, mileage reports, and a cost analysis supporting the fixed rate or the monthly determination of average cost per mile.
- V. Documentation (trip reports/mileage reports) shall support the allocation of charges among Administration, Nutrition Education, or Breastfeeding.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:07.0

Property Management

Purpose

To ensure compliance with Subpart C of 7 CFR Part 3016 and the DSHS Performance Contract Core/Subrecipient General Provisions.

Authority

7 CFR Part 3016; DSHS Performance Contract Core/Subrecipient General Provisions

Policy

The local agency (LA) shall have a property management system that meets the standards as set out in the DSHS Performance Contract Core/Subrecipient General Provisions. The LA shall maintain complete accountability and security for all equipment, state agency designated reportable assets, and controlled assets purchased with Program funds including equipment purchased through the state agency (SA) (e.g., computers, printers, video cassette recorders, etc.) and placed in the LA's custody. The LAs shall be held financially responsible for all equipment, designated reportable assets, and controlled assets that are lost, damaged, or stolen.

Definitions

Equipment - an article of nonexpendable, tangible personal property having a useful lifetime of more than one year and an acquisition cost of \$5000 or more.

Nutrition Services Department of State Health Services

Effective January 1, 2011

Policy No. AC:07.0

Designated Reportable Assets - desktop and laptop computers, non-portable printers and copiers, emergency management equipment, communication devices and systems, medical and laboratory equipment, media equipment, and any nonexpendable tangible personal property purchased through the state agency with an acquisition cost of \$500 or more but less than \$5000.

Controlled Assets - firearms, regardless of acquisition cost

Procedures

- I. All equipment, designated reportable assets, and controlled assets purchased by the LA and SA shall be inventoried on the books and records of the LA's inventory system.
 - A. Inventory Purchased with WIC program funds
 - i. At least once a year as specified by the DSHS Contract, a physical inventory shall be conducted of equipment, designated reportable assets, and controlled assets purchased with WIC program funds.
 - ii. Equipment, designated reportable assets, and controlled assets purchased with WIC program funds will be inventoried and reported on the DSHS GC-11 inventory form.
 - iii. The GC-11 shall be submitted to the DSHS Contract Oversight Section.
 - B. Inventory placed in the custody of the LA by the SA.
 - i. At least once a year as specified by the SA a physical inventory shall be conducted of equipment, designated reportable assets, and controlled assets placed in the custody of the LA.
 - ii. Equipment, designated reportable assets and controlled assets placed in the custody of the LA by the SA will be inventoried and reported on the Nutrition Services Section Annual Inventory form.
 - iii. The Nutrition Services Section Annual Inventory form shall be submitted to the DSHS Property Management Group.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:07.0

- II. The inventory shall be reconciled with the property records to verify the existence, the current utilization, and continued need for the equipment. Any discrepancies between quantities determined by the physical inspection and those shown in the accounting records shall be investigated to determine the causes of the differences.
- III. Any loss, damage, or theft of equipment, designated reportable assets, and/or controlled assets shall be investigated by the LA and fully documented. Stolen items shall be reported to the SA as soon as possible after it is discovered as missing. The phone report to the SA shall be followed up in writing and shall include a copy of a police report. If the LA is indemnified, reimbursed, or otherwise compensated for any loss of, destruction of, or damage to, the equipment, designated reportable assets, and/or controlled assets covered by this policy, its shall use the proceeds to repair or replace the equipment.
- IV. The LA shall obtain written approval from the SA prior to using equipment, designated reportable assets, or controlled assets covered by this policy in any other program. Written approval is also required prior to selling, disposing or removing any of these items from the LA's inventory. All equipment, designated reportable assets, and controlled assets purchased centrally by the SA and placed in the custody of the LA shall be physically returned to the SA for disposition. The LA is financially liable for all such items and shall assure that it is returned to the SA and is not scrapped, sold, or used as a trade-in on similar items. Refer to policy AUT:5.0.
- V. All equipment records shall be maintained three years after the disposition, replacement, or transfer of equipment, designated reportable assets, and controlled assets purchased with Program funds.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:07.0

- VI. Tangible personal property not defined as equipment, designated reportable assets, or controlled assets are considered supplies. Refer to [Policy AC:14.0](#) for allowable costs for supplies.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:08.0

**Allowable Costs-Equipment and
Designated Reportable Assets**

Purpose

To allow local agencies (LAs) to purchase equipment and designated reportable assets necessary to administer all phases of the WIC Program

Authority

7 CFR Part 3016; DSHS Performance Contract Core/Subrecipient General Provisions

Policy

The LA may request reimbursement for the cost of equipment purchased with prior written approval from the state agency (SA).

Definitions

Controlled Assets – firearms, regardless of acquisition cost

Designated Reportable Assets – desktop and laptop computers, non-portable printers and copiers, emergency management equipment, communication devices and systems, medical and laboratory equipment, media equipment, and any nonexpendable tangible personal property purchased through the state agency with an acquisition cost of \$500 or more but less than \$5000.

Equipment – an article of nonexpendable, tangible personal property having a useful lifetime of more than one year and an acquisition cost of \$5000 or more.

Procedures

I. Purchase of designated reportable assets:

Nutrition Services Department of State Health Services

Effective January 1, 2011

Policy No. AC:08.0

-
- A. For all computers, printers, and computer accessories costing more than \$250 per item, the LA shall follow the provisions of Policy AC:39.0.
 - B. For all other designated reportable assets, the LA shall follow its own agency's purchasing policy and procedures in accordance with 7 CFR Part 3016 and the DSHS Performance Contract Core/Subrecipient General Provisions.
- II. Purchase of controlled assets is not an allowable cost.
- III. The LA shall obtain three bids for the purchase of equipment (i.e., nonexpendable tangible personal property costing \$5000 or more per item). The LA shall then submit a written request for approval to the SA with the following required information:
- A. the item(s) to be purchased including brand name and model;
 - B. the quantity;
 - C. the acquisition cost of the item(s);
 - D. an acknowledgement that the low bid is acceptable;
 - E. justification of best value if the low bid is not acceptable;
 - F. justification of the need to purchase the equipment;
 - G. documentation of the written or telephone bids; and
 - H. an assurance that the procurement process is in compliance with Uniform Grants Management Standards (UGMS) and WIC policies.
- IV. The SA will review the request for purchase of equipment for approval or submit the request to the United States Department of Agriculture (USDA) Southwest Regional Office (SWRO) for their approval/disapproval, if required.
- V. A written response from the SA indicating approval or disapproval for the purchase of equipment will be transmitted to the LA.

Nutrition Services Department of State Health Services

Effective October 1, 2005

Policy No. AC:09.0

Allowable Costs - Outreach and Outreach Incentive Items

Purpose

To allow local agencies (LA) to promote the WIC Program with the use of specific materials, resources, and incentive items.

Authority

7 CFR Part 3016; OMB Circular A-87; OASC-10, USDA Memo 95-WIC-39

Policy

LAs may request reimbursement for the cost of outreach and for the cost of program incentive items as defined in this policy.

Definitions

Outreach is defined as activities undertaken by the LA to encourage and increase participation in the WIC Program and to convey the availability of WIC and WIC services to the community. This includes but is not limited to public service announcements, distribution of WIC informational written material, registration fees for health fairs as well as the cost of booth or construction of display materials, other materials advertising WIC, etc.

Outreach incentive items are primarily intended for use by potential participants to encourage and increase participation in the WIC Program and shall not be distributed to current participants or LA staff (exception in part XI, m).

Procedures

- I. Expenditures for outreach and outreach incentive costs must be reasonable and necessary to encourage and increase participation in the WIC Program in accordance with Policy AC:01.0.

Nutrition Services Department of State Health Services

Effective October 1, 2005

Policy No. AC:09.0

- II. Outreach and outreach incentive costs shall be billed in accordance with Policy AC:28.0
- III. Outreach cost shall be supported by appropriate documentation and state agency (SA) approval as needed in accordance with Policies: AC:08.0, AC:11.0, AC:14.0, AC:15.0, or any other applicable accounting policy.
- IV. Outreach and outreach incentive expenditures shall be billed as Administration costs.
- V. Outreach items must be a reasonable and necessary cost (see definitions above).
- VI. Outreach items should normally be seen in public.
- VII. Outreach items should have value as outreach devices that equal or outweigh other uses.
- VIII. Outreach items should constitute (or show promise of) an innovative way of encouraging WIC participation.
- IX. Outreach incentive items shall contain a WIC specific outreach message that targets the potentially eligible population and which have a reasonable opportunity for public display. Outreach incentive items shall include WIC contact information such as the SA/LA name, address, or phone number.
- X. Careful consideration should be given to the public perception of program funds spent on incentive items and cost of these items should preclude charges of extravagance.
- XI. The following are the approved allowable outreach incentive items for the Texas WIC Program;
 - a. Pencils, pens
 - b. Magnets
 - c. Balloons
 - d. Stickers, buttons
 - e. Crayons, coloring books
 - f. Infant t-shirts/bibs
 - g. Infant cups/spoons
 - h. Toothbrushes
 - i. Hand-sized bean bags
 - j. Balls
 - k. Water bottles, stadium cups, plastic cups

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2005

Policy No. AC:09.0

- I. Books
 - m. T-shirts or other incentive items displaying the information listed in parts IX above, for WIC staff conducting outreach in the community or a public arena. Items whose exposure will likely be limited to the office surroundings of the staff members will generally not be allowed costs.
- XII. Outreach incentive items should include a nondiscrimination statement (CR:02.0), unless the size and configuration of the item make it impractical (e.g. cups, buttons, magnets, pens, etc.).
- XIII. The following are not approved incentive items for conducting outreach for the Texas WIC Program;
 - a. Celebratory items, or items designed primarily as staff morale boosters, generally for the personal use of the staff, with minimal public display
 - b. Item of nominal value which have no outreach message
 - c. Any program incentive item intended for persons who are not potential participants or their parents/guardians, or for persons with no connection to the WIC Program, such as staff and cooperating agency representatives
 - d. Items not of nominal value, such as
 - i. Diaper bags
 - ii. Infant slings
 - iii. Ponchos
- XIV. Outreach incentive items should not be purchased when limited funds means other more pressing needs go unmet.
- XV. Contact the State Agency Outreach coordinator for approval of any incentive item not listed in part XI above.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:10.0

Allowable Costs – Communications & Utilities

Purpose

To allow local agencies (LAs) to charge actual costs or a pro-rated share of communications and utilities costs necessary to administer all phases of the WIC Program.

Authority

7 CFR Part 3016; OMB Circular A-87

Policy

LAs may request reimbursement for the cost of communications and utilities

Procedures

- I. Communication and utility charges shall be supported by documentation such as statements from communication and utility companies, long distance logs, floor plans, extension surveys, and cancelled checks.

- II. Documentation including floor plans, shall support the allocation of utilities among Administration, Nutrition Education, and Breastfeeding. All communication expenses shall be allocated to administrative costs unless the agency has a dedicated phone line for nutrition education and/or breastfeeding.

- III. Allocation among Administration, Nutrition Education, and Breastfeeding shall be based on floor plans.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AC:11.0

Allowable Costs – Reproduction and Printing

Purpose

To allow local agencies (LAs) the purchase and use of reproduction equipment and supplies necessary to administer and support all phases of the WIC Program, and to allow LAs to be reimbursed for printing performed by a commercial vendor or by another department within their agency.

Authority

7 CFR Part 3016; OMB Circular A-87

Policy

- I. LAs may request reimbursement for the cost of reproduction equipment and materials.
- II. LAs may request reimbursement for the cost of printing from a commercial vendor or by another department within their agency.

Procedures

- I. Reproduction charges shall be supported by documentation such as a current cost per copy study, copy logs, vendor statements or invoices and cancelled checks. If cost studies are utilized, they shall be updated at least once a year.
- II. For printing services provided by another department within the host agency – documentation shall include copies of work orders or requests, statements or invoices from print shop, and accounting records detailing the transfer of funds. The agency print shop shall maintain financial records to support their charges to individual programs.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AC:11.0

- III. If charging for a copier lease, maintenance agreement (or portion thereof), or commercial vendor, refer to **Policy AC:15.0**.
- IV. Documentation shall support the allocation of charges among Administration, Nutrition Education, and Breastfeeding.
- V. These costs shall be billed in accordance with **Policies: AC:28.0, AC:08.0, AC:37.0**.

Guidelines

- I. A cost study based on the actual costs over a specified timeframe may be used to determine a cost-per-copy charge, or;
- II. An allocation of costs on a monthly basis using (WIC Copies/ Total Copies) X Documented Costs may be used.

Nutrition Services Department of State Health Services

Effective January 1, 2011

Policy No. AC:12.0

Allowable Costs – Rental Space

Purpose

To allow local agencies (LAs) to be reimbursed for rental space utilized for WIC clinics or in support of WIC activities

Authority

7 CFR Part 3016; OMB Circular A-87

Policy

LAs may request reimbursement for the cost of rental space if the state agency (SA) has granted prior written approval.

Procedures

- I. For new and relocated rental space, refer to [Policy GA:21.0](#).
- II. The following information shall be submitted in writing to the SA for approval before the expense is incurred:
 - A. Three 3 bids for comparable space;
 - B. monthly cost of the space; (shall be low bid unless adequate justification of best value is provided supporting other than low bid.)
 - C. total square footage of space;
 - D. length of lease;
 - E. agency or individual to whom rent is paid;
 - F. any known repairs needed prior to rental of the space;
 - G. facility address;
 - H. justification of need for rental space;
 - I. statement that space complies with Section 504 of the Rehabilitation Act of 1973 and the Americans with Disabilities Act of 1990. In extenuating circumstances, LA shall submit a plan

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:12.0

- for serving individuals with disabilities if the space is not compliant; and
- J. an assurance that the procurement process is in compliance with Uniform Grants Management Standards (UGMS) and WIC policies.
- III. The SA shall approve or disapprove the request in writing. If low bid is not acceptable, request shall be evaluated on the merits of the justification in support of other than low bid.
- IV. The SA shall be notified if the space utilized or rental charge changes in any way. Material increases in rental costs require the solicitation of new bids.
- V. The solicitation of bids for rental space shall be made via local newspaper advertisements or, by posting a written notice for rental space in a public place such as a courthouse. Phone bids are not acceptable. The solicitation shall be posted for a minimum of three (3) working days.
- VI. Space rental costs shall be supported by documentation such as lease agreements, floor plans, cancelled checks, allocation method, and SA letter of approval.
- VII. Documentation shall also support the allocation among Administration, Nutrition Education, and Breastfeeding.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AC:13.0

Allowable Costs – Facility Depreciation or Use Allowance

Purpose

To allow the local agencies (LAs) to recover costs for facility depreciation or a use allowance for the use of facilities occupied by the WIC Program.

Authority

7 CFR Part 3016; OMB Circular A-87

Policy

LAs may request reimbursement for facility depreciation or a use allowance in cases where the facility and improvement has been fully depreciated if the state agency (SA) has granted prior written approval.

Procedures

- I. The following information shall be submitted in writing to the SA for approval before the expense is incurred:
 - A. name of the owner of the facility;
 - B. statement as to whether the building was purchased in full or in part with Federal funds;
 - C. original acquisition cost plus cost of any improvements;
 - D. date of purchase and useful life of building;
 - E. total square footage of facility and square footage utilized by the WIC Program;
 - F. for depreciation recovery, depreciation method to be applied; and
 - G. for use allowance, statement as to whether building has been fully depreciated.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AC:13.0

- II. The acquisition cost plus any improvements shall exclude the portion of the costs donated or funded directly or indirectly by the Federal government, regardless of where the title of the property resides.
- III. The WIC Program may not be charged the cost of depreciation or a use allowance for periods of non-occupancy.
- IV. No depreciation shall be allowed on a facility that is fully depreciated.
- V. The recovery of costs utilizing the use allowance method shall be computed at an annual rate not to exceed two (2) percent of acquisition cost plus improvements.
- VI. Claimed expense shall be supported by depreciation schedules, state approval letter, floor plans, and property records. Documentation shall also support the allocation among Administration, Nutrition Education, and Breastfeeding.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:14.0

Allowable Costs – Supplies, Postage and Shipping

Purpose

To allow local agencies (LAs) to charge for expendable medical supplies, office supplies, postage and shipping expenses necessary to administer all phases of the WIC Program.

Authority

7 CFR Part 3016; OMB Circular A-87

Policy

LAs may request reimbursement for postage and shipping expenses, and the cost of supplies purchased from an outside vendor or from an agency-owned "central supply store."

Procedures

- I. For supplies costing more than \$1000, the LA shall obtain three bids. The LA shall then submit a written request for approval to the state agency with the following required information:
 - A. the item(s) to be purchased including brand name and model;
 - B. the quantity;
 - C. the acquisition cost of the item(s);
 - D. an acknowledgement that the low bid is acceptable;
 - E. justification of best value if the low bid is not acceptable;
 - F. justification of the need to purchase the equipment;
 - G. documentation of the written or telephone bids; and
 - H. an assurance that the procurement process is in compliance with Uniform Grants Management Standards (UGMS) and WIC policies.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:14.0

- II. The purchase of expendable medical supplies shall be supported by documentation such as statements from vendors and cancelled checks.
- III. Expendable medical supplies shall be charged only as an administrative expense.
- IV. Office supplies purchased from an outside vendor shall be supported by a statement or invoice from the vendor and canceled checks.
- V. Office supplies purchased from an agency owned central store shall include copies of requisitions, supply order requests, statements or invoices from the central store, and accounting records detailing the transfer of funds.
- VI. Documentation such as postage logs, statements from the Post Office for meter usage, etc., shall support postage and shipping.
- VII. Documentation shall support the allocation between Administration, Nutrition Education, and Breastfeeding.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:15.0

Allowable Costs – Non-Professional Contract Services

Purpose

To ensure compliance with the OMB Circular A-87 revised stipulation that non-professional contract services require approval from the grantor agency.

Authority

7 CFR Part 3016; OMB Circular A-87

Policy

Local agencies (LAs) may request reimbursement for the cost of non-professional contract services necessary to support WIC Program activities.

Definition

Non-Professional Contract Services are defined as services rendered by individuals or organizations not a part of the grantee agency (LA). "Non-professional contract services" include but are not limited to such services as janitorial, exterminating, security, lab work, laundry, maintenance agreements, outside printing, translators, equipment repair, leasing of equipment, plumbing, carpentry, glass repair, etc.

Procedures

- I. The LA shall obtain three written competitive bids for services in excess of \$5,000. Total contract amount shall be considered when determining dollar limits. (Note: Three bids shall be obtained if there is any possibility that the cost of the contract may exceed \$5,000.)
- II. Non-professional contract services in excess of \$5,000 require state agency (SA) approval. The written request to the state agency (SA) shall include:
 - A. type of service;

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:15.0

- B. statement that documentation of three bids is available and selection made based on best value;
 - C. total amount of low bid received;
 - D. contract period starting and ending dates;
 - E. allocation method and percentage to be charged if the costs are prorated to WIC;
 - F. brief explanation of services and justification of need; and
 - G. an assurance that the procurement process is in compliance with Uniform Grants Management Standards (UGMS) and WIC policies.
- III. Approval is required for each contract that exceeds a total cost of \$5,000. Material increases in contract rates require new bids at the renewal of the contract period.
- IV. The SA shall approve or disapprove the request in writing.
- V. Documentation shall support the allocation among Administration, Nutrition Education, and Breastfeeding.
- VI. Finance or interest charges associated with equipment leases are not allowable costs.
- VII. Non-professional contract services \$5000 or less shall be supported by documentation such as vendor invoices, canceled checks, and contracts (if applicable).

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2008

Policy No. AC:16.0

Allowable Costs – Professional Contract Services

Purpose

To ensure compliance with OMB Circular A-87 revised stipulation that professional contract services require approval from the grantor agency.

Authority

7 CFR Part 3016; OMB Circular A-87

Policy

Local agencies (LAs) may request reimbursement for the cost of professional contract services.

Definition

Professional Contract Services are services rendered by individuals or organizations not a part of the grantee agency (LA) who are licensed, certified, registered or otherwise authorized under state law to provide the specified service. Professional services include but are not limited to services provided by registered dietitians, nutrition consultants, breastfeeding consultants, nurses or doctors on contract basis, engineers, architects and certified public accountants.

Procedures

- I. The LA shall release a Request for Proposal (RFP) or advertise for services regardless of cost.
- II. The LA shall evaluate the RFP or advertisement responses to determine:
 - A. demonstrated competence and qualifications for the type of services to be performed; and

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2008

Policy No. AC:16.0

- B. if the fees to be charged are fair, reasonable, and consistent with and not higher than the usual and customary fees for the services to be performed.
- III. Low bid shall be secured. Any proposed exception to this procedure shall be documented and submitted to the state agency (SA) for approval prior to the LA procuring professional contract services.
- IV. Professional contract services require SA approval regardless of cost. The written request shall include:
 - A. type of service required;
 - B. documentation of solicitation notice (i.e., RFP, newspaper advertisement);
 - C. total amount of low bid contract, cost per hour or other reimbursement method;
 - D. contract period or service dates; and
 - E. brief explanation of services and justification of need.
- V. The SA shall approve or disapprove the request in writing.
- VI. Documentation such as vendor invoices, canceled checks, RFP's, or copies of newspaper advertisement and SA written approval shall support professional contract services.
- VII. Documentation shall support the allocation among Administration, Nutrition Education, and Breastfeeding.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2014

Policy No. CS:17.0

Documentation of a Complete Nutrition Assessment

Purpose

To ensure accurate and thorough determination of eligibility for WIC benefits, and identification of all nutrition risk conditions.

Authority

7 CFR Part 246.7

Policy

Local agency (LA) staff shall perform a complete nutrition assessment on every WIC applicant who is categorically eligible and whose income and residence meet program guidelines. Supporting documentation of the complete nutrition assessment shall be available for audit/review.

Procedures

- I. A nutrition assessment shall be performed by a certifying authority (CA) or a WIC Certification Specialist (WCS). Other trained WIC staff may obtain measurements diet/health histories and perform blood screens for low iron.
 - A. **Nutrition risk** factors shall be evaluated by a CA or WCS.
 - B. Every nutrition risk for which a person can qualify shall be identified and documented on the appropriate participant form.

- II. A nutrition assessment is considered complete when the following indicators of nutritional status have been evaluated:
 - A. **Current weight and height/length** – all applicants.

Nutrition Services Department of State Health Services

Effective March 1, 2014

Policy No. CS:17.0

1. The weight and height/length shall be measured and plotted according to the instructions in the Guidelines for Nutrition Assessment.
 2. The value "0 lbs, 1 ounce" for birth weight shall be entered in the Texas WIN system if the birth weight is unknown.
 3. The code "999 lbs, 0 ounces" for weight and "99 0/8 inches" for length/height shall be entered in the Texas WIN system to indicate that measurements cannot be obtained using standard clinical equipment or from a healthcare provider.
 4. Documentation of why measurements were not obtained shall be included in the participant's chart. Refer to Guidelines for Nutrition Assessment – Weighing and Measuring – Special Considerations and/or WCS Module 8: Anthropometric Data Collection.
- B. **Diet Assessment** – all applicants. Utilizing the health history and interview, an assessment of applicant's nutritional status, shall be conducted.
- C. **Hemoglobin or hematocrit** – all applicants six months of age or older.
1. All infants and children certified at ages 9 months to 24 months shall have a blood screen for low iron:
 - a. Infants shall have a blood screen between 9 – 12 months of age and again, as a child, between 15 –18 months of age.
 - b. Blood work may be performed on infants initially certified between 6 and 9 months of age for the reasons stated below and shall be documented in the client's chart.
 - i. The CA or WCS determines blood work is required because the infant may be at nutritional risk, or
 - ii. The requirement to return to the clinic for blood work between 9 and 12 months presents a barrier for program participation.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2014

Policy No. CS:17.0

- c. Premature infants shall not have a blood screen before 9 months corrected/adjusted age.
 - d. All children shall have a blood screen performed at least once every 12 months, excluding the mid-certification assessment.
 2. Pregnant women shall have a blood screen during their pregnancy. Postpartum and breastfeeding women shall have a blood screen after delivery.
 3. Assessment of iron status shall be performed according to the instructions in the Guidelines for Nutrition Assessment. A current hemoglobin/hematocrit value obtained from a healthcare provider (not older than 30 days for infants or 60 days for women and children from the certification date) is acceptable.
 4. Waiving the requirement for hemoglobin/hematocrit is allowed for limited situations and shall be documented in the client's chart. For exceptions listed in 4. a. b. c., enter the following values in the Texas WIN automated system: 99.9 for hemoglobin or 99 for hematocrit. The following exceptions are the only circumstances that would preclude a blood screen for low iron.
 - a. Applicants whose religious beliefs do not allow them to have blood drawn. A statement of refusal to have blood drawn shall be included in the applicant's certification file. Acceptable documentation includes a written, signed statement by the parent/caretaker or applicant, or written documentation by the WIC staff that is signed by the parent/caretaker or applicant.
 - b. Applicants with "life long" medical conditions such as hemophilia, fragile bones, or osteogenesis imperfecta. A written, signed statement by the healthcare provider, physician or someone working under a physician's orders is required.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2014

Policy No. CS:17.0

- c. Applicants with a treatable skin disease or with a serious skin condition, where the blood collection may cause harm to the applicant. A written, signed statement by the healthcare provider, physician or someone working under a physician's orders is required.
 - d. When a blood screen is not performed or waived, a true value for hemoglobin or hematocrit cannot be entered into the computer.
 - i. For infants certified at 7 or 8 months of age (exception C.1.b.i and ii), enter the following values in the Texas WIN automated system: 78.0 for hemoglobin or 78 for hematocrit.
 - a. These infants need to have their blood work postponed and a blood work (BW) appointment scheduled between 9 and 12 months of age.
 - b. This process will be repeated at the infants' child subsequent certification appointment when they are either 13 or 14 months old; the blood work will again be postponed until they are between 15 and 18 months old.
 - c. In both cases, the initial and subsequent certification appointments, the BW appointment code will be used and 78/78.0 will be entered in the Hct/Hgb field in Texas WIN, respectively.
- D. **Health History (Medical/Maternal history)** - all applicants.
- 1. Nutrition risk conditions related to medical/maternal history shall be assessed according to the instructions in the Guidelines for Nutrition Assessment. A health history shall be completed for each certification.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2014

Policy No. CS:17.0

2. For applicants certified as pregnant women, a medical/maternal history shall be completed during the pregnancy, and for applicants certified as postpartum and breastfeeding women, a medical/maternal history shall be collected after the termination of the pregnancy.
- III. **Medical/nutrition data** previously obtained in the WIC clinic or from a healthcare source or a referral may be used to evaluate the applicant's nutritional status in order to reduce the number of times WIC applicants are subjected to the same assessment procedures.
- A. Medical data for women and children (i.e., weight, height/length measurement, hemoglobin/hematocrit values and diet assessment) may be used for determining nutrition risk for a full certification period, if it is not more than 60 days when eligibility is determined. Medical data for applicants certified as pregnant women shall have been collected during their pregnancy, and data for applicants certified as postpartum and breastfeeding women shall have been collected after the termination of their pregnancies.
 - B. Medical data for infants (i.e., weight, height/length measurement, hemoglobin/hematocrit values and diet assessment) may be used for determining nutrition risk for a full certification period if it is not more than 30 days when eligibility is determined, with the exception of birth data.
 1. The birth weight and length of an infant shall not be accepted for certification purposes after the infant is two weeks of age.
 2. When an infant is older than two weeks of age, a current weight and length must be obtained. The birth weight and length shall be plotted in addition to current weight and length.
 3. To certify an infant that is not physically present, obtain and plot the birth weight and length, or more current data, whichever is appropriate based on the age of the infant. To prevent termination of WIC services, the infant shall be presented by six weeks of age to be weighed and

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2014

Policy No. CS:17.0

measured, and the current weight and length shall be plotted. For infants with special health care needs, see section IV below.

- C. Medical data submitted from a healthcare source, other than the local WIC agency:
 - 1. Shall be in writing, and include the data and date measurements were obtained; or
 - 2. If information is obtained via telephone by LA, staff shall document the data and date measurements were obtained.

- IV. When an applicant has **special health care needs**, special accommodations may be made in obtaining medical/nutrition data to evaluate the applicant's nutritional status. Refer to Policy CR:07.0 for the definition of special health care needs and procedures to follow in these circumstances. Refer to Policy CS:04.0 for appropriate waivers, if necessary.

- V. Documentation of a complete nutrition assessment shall be maintained in each income-eligible applicant's record and shall be available for audit/review.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:18.0

Allowable Costs – Facility Renovation

Purpose

To allow local agencies (LAs) to make facility renovations necessary to accommodate all phases of the WIC Program.

Authority

7 CFR Part 3016; OMB Circular A-87; FNS Instruction 813-1

Policy

LAs may request reimbursement for the cost of facility renovation, if prior written approval has been obtained from the state agency (SA).

Procedures

- I. The following information shall be submitted in writing to the SA for approval:
 - A. a detailed description of type of work to be done;
 - B. bids from at least three vendors if available;
 - C. justification of best value if the low bid is not acceptable;
 - D. justification of need for renovations;
 - E. an allocation method of how costs shall be allocated among programs (if applicable) and amount to be allocated to each program/activity;
 - F. a statement from landlord or parent agency that WIC may remain in space for ten years;
 - G. a completed Exhibit B to FNS Instruction 813-1 (A copy may be obtained at <http://www.dshs.state.tx.us/wichd/fin/FNSInstruction813.pdf> or from the SA); and
 - H. an assurance that the procurement process is in compliance with

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:18.0

Uniform Grants Management Standards (UGMS) and WIC policies.

- II. The SA shall review and submit the request to the United States Department of Agriculture (USDA) Southwest Regional Office (SWRO) for final action.
- III. The SA shall forward USDA's decision to the LA in writing.
- IV. Documentation shall support the allocation among Administration, Nutrition Education, and Breastfeeding.
- V. Renovation is an expenditure that materially increases the value or useful life of the asset. Ordinary repairs to maintain assets in operating condition (i.e. repainting, replacement or general upkeep of a facility) are not included in this policy. If the renovation is a contract service, refer to Policy AC:15.0. If the repair involves purchase of materials only, refer to Policy AC:14.0.
- VI. Renovation costs shall be supported by documentation such as approval letter from SA, copies of bids, statement or invoice from vendor, and canceled checks.
- VII. These costs shall be billed in accordance with Policy AC:28.0.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:19.0

Allowable Costs – Indirect Costs

Purpose

To allow local agencies (LAs) to recover overhead costs on an indirect allocation basis in accordance with the LA's Cost Allocation Plan.

Authority

7 CFR Part 3016; OMB Circular A-87; UGMS Attachment E; DSHS Performance Contract General Provisions (Core/Subrecipient) at <http://www.dshs.state.tx.us/grants/gen-prov.shtm>.

Policy

LAs shall submit a cost allocation plan according to the DSHS General Provisions to the State Agency (SA) for acceptance. The SA may set a cap on indirect costs.

Procedures

- I. Refer to the DSHS Contract and Oversight Section, Contractor's Financial Procedures Manual, Chapter 7, Cost Allocation found at: <http://www.dshs.state.tx.us/contracts/cfpm.shtm> .

- II. Submit the Cost Allocation Plan, appendix A of the DSHS Contract and Oversight Section, Financial Procedures Manual to:
 - By email: coscap@dshs.state.tx.us or
 - By mail: Department of State Health Services
Contract Oversight and Support Services
Mail Code 1326
1100 West 49th Street
Austin, TX 78756

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:19.0

- III. Once the plan has been accepted, indirect costs may be billed on the monthly reimbursement voucher. List the total amount of indirect costs allocated to WIC on the indirect costs line (line I) of the FSR 269a.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:20.0

Allowable Costs – Food Purchases

Purpose

To allow local agencies (LAs) to enhance the nutrition education component of their WIC programs.

Authority

7 CFR Part 3016; OMB Circular A-87

Policy

LAs may request reimbursement for the cost of food used for nutrition education demonstrations.

Procedures

- I. A description of food demonstrations and/or sampling plans shall be included in the lesson plans section of the LA Nutrition Education and Breastfeeding Plan.
- II. Purchases of food shall be supported by documentation such as vendor receipts.
- III. These costs shall be billed in accordance with Policy AC:28.0.
- IV. Food purchases by LAs shall be used only for demonstration and/or sampling purposes and shall not be used for distribution beyond training purposes to WIC participants or LA staff.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:21.0

Allowable Costs – Insurance Expense

Purpose

To allow the local agencies (LAs) the opportunity to acquire insurance coverage for equipment and facilities.

Authority

7 CFR Part 3016; OMB Circular A-87; OASC-10

Policy

Local agencies may request reimbursement for the cost of insurance if the state agency (SA) has granted prior written approval.

Procedures

- I. A written request shall be submitted to the SA for approval, pursuant to OMB Circular A-87, before the expense is incurred. The following information is required:
 - A. type of insurance coverage requested;
 - B. at a minimum three (3) competitive bids;
 - C. monthly or annual cost to the WIC Program;
 - D. method used to allocate the cost to WIC;
 - E. a justification of need; and
 - F. an assurance that the procurement process is in compliance with Uniform Grants Management Standards (UGMS) and WIC policies.
- II. The SA shall approve or disapprove the insurance expense in writing.
- III. The LA shall notify the SA if the insurance coverage or rates change.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:21.0

- IV. If approved, these costs shall be billed in accordance with Policy AC:28.0.
- V. All agency self-insurance programs require SA approval.
- VI. Insurance costs shall be supported by documentation including a copy of the insurance policy, competitive bids, an approval letter from the SA, statement or invoice from the vendor, and canceled checks.
- VII. Documentation shall support the allocation among administration, nutrition education, and breastfeeding.
- VIII. The type, extent, and cost of coverage shall be in accordance with general local government policy and sound business practices.

Nutrition Services Department of State Health Services

Effective June 1, 2002

Policy No. AC:22.0

Allowable Costs – Laboratory Coats and Employee Uniforms

Purpose

To allow local agencies (LAs) to charge for employee uniforms and laboratory coats/smocks provided to staff that perform hematological testing so as to reduce employee exposure to bloodborne pathogens.

Authority

7 CFR Part 3016; OMB Circular A-87; OSHA Regs; 29 CFR Part 1910.1030

Policy

With prior state agency (SA) approval, LAs may request reimbursement for the cost of laboratory coats/smocks provided to staff that perform hematological testing of WIC applicants/ participants. LAs may request reimbursement for laundering/cleaning costs for such items.

With prior SA approval, LAs may request reimbursement for the cost of employee uniforms when the local parent agency has an agency-wide policy that requires all employees to wear uniforms. LA's may also request reimbursement for laundering/cleaning cost for such items.

The purchase of uniforms (includes T-shirts when used as a uniform) is discouraged, but shall be considered on a case-by-case basis if the parent agency has a dress code policy that requires the employees to wear uniforms.

Procedures

- I. When a LA provides laboratory coats/smocks and uniforms to employees, these garments and the costs for laundering/cleaning shall be provided at no cost to employees.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AC:22.0

- II. Only employees who may be called upon to perform hematological testing may be provided with laboratory coats/smocks. Laboratory coats shall be wrist length in style.

- III. Regardless of the total cost involved, a written request shall be submitted to the SA containing the following:
 - A. the number of employees and number of uniforms or laboratory coats/smocks requested;
 - B. documentation of, at a minimum, three bids;
 - C. total dollar amount of low bid and the cost per uniform or laboratory coat/smock;
 - D. copy of agency wide dress code policy requiring uniforms (not required for laboratory coats/smocks); and
 - E. statement that low bid is acceptable.

- IV. The SA shall approve or disapprove the uniform request in writing.

- V. The laboratory coats/smocks and employee uniforms are the property of the WIC Program. The laboratory coats/smocks shall not be taken home by the employees in order to prevent the accidental spread of contamination.

- VI. Costs associated with laboratory coats/smocks and employee uniforms shall be listed as separate items in the LA's Plan to Allocate Direct Costs (PADC) and billed only as administration costs and in accordance with **Policy AC:28.0**.

- VII. Charges for laboratory coats/smocks and employee uniforms, and cleaning of these garments shall be supported by documentation vendor invoices/receipts, and canceled checks.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AC:22.0

Guidelines

- I. The underlying intent of OSHA regulations on occupational exposure to bloodborne pathogens is the concept of "universal precautions" that requires that all blood be treated as if known to be infectious for HIV, hepatitis B virus (HBV), and other bloodborne pathogens. OSHA regulations require personal protective equipment be provided to employees at no cost according to the type of testing being done. According to OSHA, for the typical WIC clinic in which a finger stick is performed, appropriate protective clothing would include gloves and possibly a laboratory coat.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AC:23.0

Unallowable Costs

Purpose

To ensure compliance with expenditure restrictions imposed by OMB Circular A-87.

Authority

OMB Circular A-87

Policy

Local agencies (LAs) shall not request reimbursement for the following unallowable costs:

- I. alcoholic beverages;
- II. bad debts;
- III. contingencies;
- IV. contributions and donations;
- V. entertainment, including food and beverages;
- VI. fines and penalties;
- VII. fund raising and investment management costs;
- VIII. governor or legislative expenses;
- IX. idle facilities;
- X. interest and other financial costs;

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AC:23.0

- XI. lobbying;
- XII. membership in organization engaged in lobbying;
- XIII. prosecution and defense of criminal and civil proceedings and claims;
or
- XIV. under recovery of costs under federal agreements.

Guidelines

Additional information regarding unallowable costs as well as other circulars from the Office of Management and Budget may be obtained at <http://www.whitehouse.gov/omb/circulars/>.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:24.0

Monthly Reimbursement Maximum

Purpose

To provide the state agency (SA) with budgetary controls over local agency (LA) expenditures.

Authority

7 CFR Part 3016

Policy

The LA's monthly reimbursement maximum, calculated by participation numbers uploaded from the LA to the SA via the Texas WIC Information Network (WIN) system, shall be limited to the lesser of:

- I. actual participation (not to exceed assigned caseload) times the LA's approved Funding Formula Rate (FFR) as defined by the current WIC Contract; or
- II. actual nutrition education costs times 5.26.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AC:25.0

Monthly Reimbursement Maximum – Start Up Costs

Purpose

To allow new local agencies (LAs) sufficient funds to operate and purchase equipment as actual participation levels are building.

Authority

7 CFR Part 3016; Contract with State Agency

Policy

During the first six months of operation of a new WIC LA, the LA's monthly reimbursement maximum shall be computed by multiplying their assigned caseload by the assigned per participant administrative funding rate as defined in the current WIC contract.

- I. Surplus funds (**Policy AC:27.0**) earned during the start up period may be carried forward for use only within the six months start up period.
- II. All earned but unspent surplus funds shall be forfeited at the beginning of the seventh month.

Procedures

- I. Beginning with the seventh month of operation, the LA's monthly reimbursement maximum shall be computed in accordance with **Policy AC:24.0**.
- II. The requirement to spend 19% on Nutrition Education shall be waived during the six-month startup period.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AC:26.0

Advance Cash Payments

Purpose

To allow a local agency (LA) adequate operating funds to operate and purchase equipment and services necessary to support WIC operations while awaiting reimbursements for actual WIC expenditures.

Authority

7 CFR Part 3016

Policy

To ensure a LA has continued operating funds, cash advances may be authorized on a case-by-case basis.

Procedures

- I. Each fiscal year LAs may submit a written request to the state agency (SA) for a one-time cash advance.
- II. After review of the written request/justification, the SA shall respond with approval/denial via written correspondence.
- III. SA approval for cash advance is only valid for the current contract period. A new request shall be required for each contract period.
- IV. The advance shall be requested at the beginning of the contract period or at a single time later in the contract period, if circumstances so warrant and the request is approved.
- V. Advance funds shall be liquidated during the contract period so that after the final monthly billing, the LA shall not have advance funds on hand. Advance funds shall be liquidated no later than July and August

Nutrition Services Department of State Health Services

Effective June 1, 2002

Policy No. AC:26.0

of the contract period. If at the end of the contract period any unspent advance funds remain, these funds shall be returned to the SA. Processing of new fiscal year administrative claims shall be suspended until recovery of the previous year's excess advance funds is completed.

- VI. Advance funds shall be drawn only to meet immediate cash needs for disbursement.
- VII. Cash advances made to WIC LAs shall be based upon projected contract earnings via their respective contract. Estimated projection with reasonably expected growth added, shall be utilized to calculate a projected monthly earnings amount. Such calculation shall be the basis (upper limit) for awarding a two-month cash advance.
- VIII. With the exception of the initial request for advance funds, all other billings for reimbursement shall be requested only for actual allowable cash expenditures incurred as a result of WIC activities.
- IX. Advance funds requested from the WIC Program are for WIC purposes only and are restricted from use in offsetting other program costs.
- X. Any interest earned on cash advances shall be treated as program income and shall be handled according to requirements set forth in **Policy AC:30.0**.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AC:27.0

Surplus Funds

Purpose

To provide the local agency (LA) flexibility to achieve maximum utilization of earned administrative funds.

Authority

Current Contract with the State Agency

Policy

Surplus funds are the amount by which maximum earnings exceed actual costs. Such funds shall be accumulated and carried forward on an individual LA basis. The time period during which such funds may be recovered shall be determined by the state agency (SA) based on funding restrictions imposed by the United States Department of Agriculture (USDA) and shall not exceed the term of the contract.

Procedures

- I. LAs may reclaim actual expenses not previously recovered. The LA shall bill in accordance with **Policy AC:28.0**.
- II. The SA shall automatically adjust amounts previously disallowed for exceeding earnings when sufficient funds are earned by an LA during a contract period. Specifically, a current monthly administrative claim for reimbursement shall be increased and paid by the SA for the respective amount available.

Nutrition Services Department of State Health Services

Effective January 1, 2011

Policy No. AC:28.0

Financial Reporting

Purpose

To provide the state agency (SA) with a method to reimburse the local Agencies (LAs) for allowable expenditures under the WIC Program.

Authority

7 CFR Part 3016; OMB Circular A-87; OMB Circular A-102

Policy

LAs shall request reimbursement for allowable expenses on a monthly basis by means of a State of Texas Purchase Voucher, Form B-13. On a quarterly and annual basis a Financial Status Report (FSR) Form 269A (State Agency Form GC-4a), shall be completed by the LA. The form and instructions may be accessed at

<http://www.dshs.state.tx.us/chscontracts/pdf/fsr269a.xls>

Procedures

- I. The LA shall follow the instructions attached to the state supplied form.
- II. The LA shall complete Form B-13 to request reimbursement each month. The completed Form B-13 shall be submitted electronically to WicVouchers@dshs.state.tx.us by the 30th calendar day of the month following the reporting month.
- III. The FSR Form 269A shall be submitted electronically quarterly with the corresponding Form B-13. The months of the federal quarters are as follows:

Nutrition Services Department of State Health Services

Effective January 1, 2011

Policy No. AC:28.0

Quarter	Months Included	Due Date	Form(s)
1 st	October, November, December	30 th calendar day of January	FSR Form 269A Form B-13
2 nd	January, February, March	30 th calendar day of April	FSR Form 269A Form B-13
3 rd	April, May, June	30 th calendar day of July	FSR Form 269A Form B-13
4 th	July, August, September	30 th calendar day of October	FSR Form 269A Form B-13
4 th	Final amended upon liquidation of all encumbrances	60 calendar days following the contract term	FSR Form 269A Form B-13

- IV. This report package shall be prepared directly from the LA's self - balancing set of accounts.
- V. The final FSR Form 269A is due at the SA by November 29th of each year.
- VI. Reimbursement shall be requested for actual allowable cash expenditures incurred as a result of WIC activities.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective April 1, 2016

Policy No. AC:29.0

WISE Cost Report, WIC-227A

Purpose

To provide the state agency (SA) with the necessary breakdown of all local agency (LA) costs into the four categories mandated by federal nutrition services and administrative costs (NSA) reporting requirements.

Authority

7 CFR Part 3016

Policy

LAs shall report their expenditures for the month of March of each contract year in the four functional categories mandated by the United States Department of Agriculture (USDA). Federal regulations require LA costs to be categorized as: nutrition education, breastfeeding, general administration, and client services. All expenditures shall be reported by the SA as an addendum to the year-end closeout report.

Procedures

- I. The LA shall follow the instructions attached to or on the reverse side of the SA supplied WISE cost report, WIC-227A form. This form may be located at: <http://www.dshs.state.tx.us/wichd/fin/wiserpt.shtm>.
- II. The LA shall submit the annual WISE cost report to the SA by April 30th of each year.

Guidelines

A detailed explanation of the activities and types of costs that fit into each of the four categories can be found at <http://www.dshs.state.tx.us/wichd/fin/wiserpt.shtm>.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AC:30.0

Program Income

Purpose

To ensure proper disposition and accountability for program income (PI) related to local agencies (LAs) financed in whole or in part with Federal grant funds.

Authority

7 CFR Part 3016; OMB Circular A-87

Policy

PI shall be handled in accordance with the Uniform Federal Assistance Regulations, Part 3016, Subpart A.

Definition

Program income is defined as all revenues directly generated by a WIC contract attachment supported activity or earned only as a result of the WIC project during the term of the contract attachment.

Procedures

- I. LAs shall use PI to further the program objectives in accordance with state/federal regulations.
- II. PI shall be spent only towards WIC activities/expenditures.
- III. LAs shall identify and report this income utilizing the forms and timeframes specified in **Policy AC:28.0**.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AC:30.0

- IV. LAs shall utilize one of the following methods for applying PI:
 - A. Additive method – add PI to the funds already committed to the project by both parties.
 - B. Deductive method – deduct the PI from the total allowable costs to determine the net allowable costs.

- V. LA shall expend PI during the contract attachment term in which it is earned and may not carry forward to the succeeding term.

- VI. PI not expended in the term in which it is earned shall be refunded to the state agency.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AC:31.0

Participant Fees

Purpose

To ensure that WIC services and benefits are provided at no cost to the participants.

Authority

7 CFR Part 3016

Policy

The local agency (LA) shall ensure that participants are not charged a fee for certification and/or subsequent certification or a service fee for food instrument issuance/nutrition education as criteria for Program eligibility, participation or immunizations.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:32.0

Closeout Reports

Purpose

To allow the state agency (SA) sufficient time to process and prepare a grant closeout report for the United States Department of Agriculture (USDA).

Authority

7 CFR Part 3016

Policy

Local agencies (LAs) shall submit all financial reports requesting reimbursement for a given fiscal year's expenditures no later than 60 calendar days after the close of the federal fiscal year, i.e., no later than 60 calendar days following the contract term.

Procedures

Requests for reimbursement submitted more than 60 calendar days following the end of the contract attachment term shall not be processed. Exceptions shall be considered on a case-by-case basis for extenuating circumstances such as a catastrophic event, natural disaster, or criminal activity that substantially interferes with normal business operations or causes damage or destruction of the place of business and/or records. A written statement describing the extenuating circumstance and the late request for reimbursement shall be submitted for review and approval to the WIC program.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2005

Policy No. AC:33.0

Nutrition Education Expenditures

Purpose

To ensure that the expenses reimbursed for nutrition education (NE) are in accordance with Federal Guidelines and may be supported by documentation of participant attendance/non-attendance at NE classes and/or individual counseling sessions.

Authority

7 CFR Part 3016; OMB Circular A-87

Policy

Local agency (LA) NE expenditures shall be in accordance with the procedure outlined in this policy and supported by documentation.

Procedures

- I. Nutrition education expenditures must be reasonable and necessary for the provision of nutrition education in accordance with Policy AC: 01.0.
- II. NE expenditures shall equal or exceed 19% of the amount expended by the LA for cost of Nutrition Services and Administration (NSA).
- III Allowable NE expenditures include but are not limited to the following:
 - A. salaries and other costs of NE activities including:
 1. Preparation,
 2. Evaluation,
 3. Supervision,
 4. Training, and

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2005

Policy No. AC:33.0

- 5. Monitoring of group nutrition education or individual counseling or conducting other nutrition education activities.
- B. salaries and other costs incurred in the development of the NE portion of the NE/BF Plan;
- C. costs associated with training and orientation of NE staff including, but not limited to:
 - 1. Prorated travel to local training sites,
 - 2. Professional meetings,
 - 3. Training sessions,
 - 4. Monthly meetings; and
 - 5. In-service training if applicable to NE.
- D. costs of translation of NE materials
- E. cost of printing or reproducing NE materials;
- F. coordinating local NE materials (inventory, ordering, distribution to clinics, etc.);
- G.. purchasing and/or developing NE materials such as posters, pamphlet, handouts, books, newsletters, audiovisuals etc;
- H. purchase of food, cooking utensils, and teaching aids used to conduct food demonstrations;
- I. cost of staff teaching aids;
- J. costs of NE teaching aids when used in conjunction with nutrition education. These items shall be distributed to specific audiences for which the items were designed, including but not limited to:
 - 1. magnets with nutrition messages;
 - 2. calendars with nutrition messages;
 - 3. infant cups/spoons;
 - 4. oral health aids;
 - 5. recipe books;
 - 6. reading books with nutrition information or messages.
- K. prorated expenses for space rental, utilities, janitorial supplies/services, communications, facilities repairs/renovation, and storage facilities; and
- L. indirect and allocated costs associated/identified with NE activities.
- M. costs associated with NE sessions that promote or reinforce physical activity and that contain a joint nutrition message.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2005

Policy No. AC:33.0

- N. contracting with a certified health or fitness professional to consult on the development or modification of materials and resources, provide brief exercise demonstrations to participants, provide staff training on the health benefits of physical activity on how to promote physical activity and how to facilitate behavior change in participants;
 - O. inexpensive program incentive items that promote physical activity of participants such as water bottles, hand-sized bean bags and balls.
- IV. Costs, which are not allowable, include items of nominal value that have no NE message.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. AC: 34.0

Breastfeeding Promotion Expenditures

Purpose

To ensure compliance with federal regulations and to account for monies spent on breastfeeding promotion and support.

Authority

7 CFR Part 3016; OMB Circular A-87

Policy

The local agency (LA) shall account for funds spent to promote breastfeeding. Breastfeeding promotion and support expenditures shall be allowable WIC expenses as defined in this policy.

Procedures

- I. Breastfeeding promotion and educational reinforcement items must contain a breastfeeding message and be reasonable and necessary for the promotion and support of breastfeeding in accordance with **Policy AC: 01.0**.
- II. The state agency (SA) shall allocate annually, to each LA, an amount of funds to be spent for breastfeeding promotion. The allocation shall be based on the LA's proportional share of the statewide combined total of pregnant and breastfeeding participants served during the fourth quarter of the previous fiscal year as reported to the SA.
- III. To be considered an allowable cost for breastfeeding promotion, the expenditure shall meet the following criteria:
 - A. The cost shall be clearly attributable to breastfeeding promotion.
Generalized nutrition education, which happens to mention

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. AC:34.0

breastfeeding, but does not specifically promote breastfeeding, shall not be allowable.

B. The costs shall be an allowable expense under 7 CFR 3016.

C. The cost shall be in excess of the 19% nutrition education requirement.

D. The cost shall be reasonable and necessary.

IV. The following are allowable breastfeeding costs:

A. Salaries and benefits of:

1. WIC staff who deliver educational and direct client services related to breastfeeding;
2. WIC staff who deliver/attend training on breastfeeding promotion and support;
3. WIC staff who participate in State and local planning committees dedicated to breastfeeding promotion;
4. WIC staff who organize volunteers and community groups to support breastfeeding WIC participants; and
5. Peer counselors hired to promote and assist women to continue with an initial decision to breastfeed. Peer counselors may be reimbursed for attending breastfeeding training, attending peer counselor meetings, and performing duties described in [Policy BF:03.0](#). (Also refer to [Policy AC:17.0](#).)

B. Costs to groom staff to become International Board Certified Lactation Consultants (IBCLC). Because college course credits are required, LAs should choose their most qualified health-care staff to become IBCLC, such as RDs or RNs, whenever possible.

1. Allowable costs include:
 - a) College course prerequisites
 - b) Attending educational opportunities to accrue required continuing education
 - c) Exam prep courses
 - d) Reference/study materials

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. AC: 34.0

- e) Related travel
 - f) International Board of Lactation Consultant Examiners exam fee
 - 2. Local agencies may choose to create a contract or agreement that requires staff who are being reimbursed to become IBCLCs to pay back the local agency in time (e.g. 12 months of WIC LA employment) or cost if they leave LA employment before their time-requirement has been fulfilled.
- C. Honorariums and travel expenses (within boundaries of Texas Department of State Health Services travel policies) of non-WIC professionals to deliver training on breastfeeding promotion and support;
- D. Costs to develop/procure educational materials, teaching aids, instructional curricula, etc., related to breastfeeding promotion and support;
- E. Prorated costs of clinic space devoted to educational and training activities related to breastfeeding, including space and furniture set aside for nursing during clinic hours, which would help provide an environment conducive to breastfeeding;
- F. Salary and benefits expenses and costs of materials, etc., utilized in the evaluation of breastfeeding initiatives (or contractual agreements entered into for this purpose);
- G. Travel and other expenses incurred by WIC staff related to any of the above items;
- H. With prior SA approval, costs of service agreements with other organizations, public or private, to undertake training and direct service delivery to WIC participants, concerning breastfeeding promotion and support; and

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. AC:34.0

- I. Breastfeeding aids such as large/extra-large breast pump flanges, nipple shields, breast shells, nursing supplementers, nursing bras, nursing pads, and cover-ups that directly support the initiation and continuation of breastfeeding.

- J. Breastfeeding promotion or educational reinforcement items that include a breastfeeding promotion or education message such as:
 - 1. Pencils, pens
 - 2. Magnets
 - 3. Balloons
 - 4. Stickers, buttons
 - 5. Crayons, coloring books
 - 6. Infant t-shirts/bibs
 - 7. Water bottles, stadium cups, plastic cups
 - 8. Small children's books with a breastfeeding message.
 - 9. T-shirts displaying a breastfeeding message for WIC staff to wear in the clinic or at community-based education efforts such as health fairs
 - 10. Plastic picture frames for framing BF posters for WIC clinics or health care provider/hospital outreach.

- V. The following costs are not allowable breastfeeding costs:
 - A. Breastfeeding certifications other than IBCLC, such as Certified Lactation Counselor (CLC).

 - B. Breastfeeding aids that do not directly support the initiation and continuation of breastfeeding and are not within the scope of the WIC Program such as topical creams/ointments (e.g.lanolin), hydrogel, Vitamin E, other medicinals, and breastfeeding-specific foot stools and infant pillows.

 - C. Costs of promotional campaigns/items (print, radio, television) aimed at a general audience concerning breastfeeding unless materials may also be legitimately used with WIC participants or trainees in an educational context.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. AC:34.0

- D. Items of nominal value, which have no breastfeeding message.
- E. Breastfeeding promotion and educational reinforcement items should not be purchased when limited funds means other more pressing needs go unaddressed (e.g., contact with lactation consultant for high risk counseling).
- F. Special equipment for general use in WIC clinics such as baby weight scales marketed for use with high-risk breastfed infants.
 - 1. Exceptions: The rental of the scale shall be considered an allowable program cost in the situation where a high-risk breastfed infant needs frequent weight monitoring and Medicaid will not cover the cost of the rental.
 - a. A physician's prescription for the scale shall be kept on file in the participant's medical record. The prescription shall document the need for the scale, the length of time the scale shall be needed, the assurance that the infant shall be monitored by a medical professional and assurance that the medical professional will give the mother instructions on proper use of the scale.
 - b. To avoid potential liability regarding the use of the scale, it shall not be WIC's responsibility to provide monitoring or instruction on the use of the scale.
 - 2. Exception: the cost to purchase a baby weight scale shall be considered an allowable expense if the local agency maintains a lactation center staffed by an IBCLC whose primary function is to help WIC Participants with breastfeeding.
- G. The purchase or lease of breast pumps. Breast pumps are a food expenditure and shall be ordered through the SA.
- VI. Contact the state agency Breastfeeding Coordinator for approval of any breastfeeding promotion or educational reinforcement items not listed in section I.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2005

Policy No. AC:35.0

Lost or Stolen Equipment

Purpose

To ensure proper accountability of state or locally purchased and inventoried equipment.

Authority

7 CFR Part 3016; OMB Circular A-87

Policy

Local agencies (LAs) shall report lost or stolen equipment to include electric breast pumps and collection kits to the state agency (SA) immediately upon discovery of the loss.

Procedures

- I. Notify the SA by telephone immediately upon discovery of lost, stolen, or irretrievable equipment.
- II. If it is determined that the equipment was stolen, notify the local police and obtain a copy of the police report. Forward a copy of the report to the SA along with a letter explaining the circumstances surrounding the theft.
- III. If the equipment was lost, submit a letter explaining the circumstances surrounding the loss including the name of the person responsible for the equipment at the time of the loss.
- IV. If the equipment was lost, an investigation of the circumstances surrounding the loss shall be conducted to determine if negligence was the cause.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2005

Policy No. AC:35.0

- V. The letter mentioned in II. and III. shall include a description of the procedures instituted to ensure that the loss or theft may not readily occur again.

- VI. Lost or stolen electric breast pumps or collection kits, including those that are lost or stolen out of inventory prior to issuance, must be reported to the SA.

- VII. If the LA or its employees are determined to be negligent, the LA shall reimburse an amount calculated by the SA.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AC:36.0

Sale or Distribution of Property

Purpose

To ensure proper accountability of property either provided by the federal government or purchased in whole or in part with federal funds.

Authority

7 CFR Part 3016; OMB Circular A-102 Subpart A

Policy

The local agency (LA) shall obtain prior written approval from the state agency (SA) before the sale or disposition of any equipment purchased with funds from the Special Supplemental Nutrition Program for Women, Infants and Children, or equipment purchased by the SA regardless of cost.

Procedures

- I. The LA shall submit a written request to the SA of the equipment to be sold or disposed. The request shall include a description of the property, identification or inventory number (if applicable), purchase date or approximate equipment age, purchase price and current condition of the property.
- II. The SA shall respond with instructions to account for the sale or disposition of the property in accordance with OMB Circular A-102, Subpart A §3016.36.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:39.0

Allowable Costs-Computers

Policy

The LA may request reimbursement for the cost of computers, printers and computer accessories purchased with prior written approval from the state agency (SA).

Procedures

- I. For all computers and printers and for computer accessories costing more than \$250 per item, the LA shall obtain three bids. The LA shall then submit a written request for approval to the SA with the following required information:
 - A. the item(s) to be purchased including brand name and model;
 - B. the quantity;
 - C. The item specifications including:
 - 1. type of processor and speed
 - 2. size of hard drive
 - 3. type of monitor
 - 4. type of warranty
 - D. the acquisition cost of the item(s);
 - E. justification of the need to purchase the items;
 - F. an acknowledgement that the low bid is acceptable or justification of best value if low bid id not selected;
 - G. documentation of the written or telephone bids;
 - H. justification if the low bid is not acceptable; and
 - I. an assurance that the procurement process is in compliance with Uniform Grants Management Standards (UGMS) and WIC policies.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AC:39.0

- II. The SA shall review the request for approval.

- III. A written response from the SA indicating approval or disapproval will be transmitted to the LA.

AUD - Auditing

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AUD:01.0

Audit of Local Agencies

Purpose

Audits are to determine whether:

- I. Financial operations are conducted properly.
- II. The local agency (LA) has complied with laws, regulations and policies affecting the expenditure of federal/state funds.
- III. Financial reports to the State contain accurate and reliable information.

Authority

7 CFR Part 3016; OMB Circulars A-21, A-87, A-110, A-122 and A-133; Uniform Grant Management Standards (UGMS).

Policy

LAs that expend \$500,000 or more in a year in federal funds (including but not limited to WIC funds) shall provide for an independent organizational-wide financial and compliance audit (single audit) once each year. The audit shall be conducted by an independent certified public accountant and shall be in accordance with applicable OMB Circulars, Government Auditing Standards, UGMS, and contract with the Texas Department of Health.

Procedures

- I. LAs shall:
 - A. ensure that audit costs are included as a cost category on the Plan to Allocate Direct Costs, if a prorata share of the costs shall be billed directly to the state agency (SA);

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. AUD:01.0

- B. obtain prior written approval for audit costs from the SA in accordance with WIC Policy AC:16.0;
 - C. solicit bid proposals from independent accounting firms;
 - D. maintain documentation that supports cost allocation to the SA; and
 - E. forward one copy of completed audit to the SA.
- II. LAs that are governmental units shall petition the Governor's office for appointment of a State Cognizant Audit Agency.

Guidelines

- I. The SA strongly encourages LAs that expend less than \$300,000 a year in federal funds to obtain a single audit.
- II. Additional information regarding audit requirements as well as other circulars from the Office of Management and Budget may be obtained at <http://www.whitehouse.gov/omb/circulars/>.

AUT - Automation

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AUT:01.0

Automation Change Management

Purpose

To ensure standardized methods and procedures are used to support the efficient, coordinated, and prompt handling of all changes. To improve communications with program and automation staff.

Authority

State Policy

Policy

All requests for modifications, enhancements, and corrections to the Texas WIC Information Network (WIN) system shall be in writing to the state agency Automation Division Director. Requests shall be evaluated by program and automation staff, based on feasibility, program requirements and impact on development schedules.

Procedures

- I. Complete the top portion, including a brief description of the request, of the Texas WIN Project Change Request Form and submit it to the WIC Automation Division Director.
- II. Automation management shall determine the impact and disposition of the request.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AUT:02.0

Computer Environment and Platform Modifications

Purpose

To ensure standardized platforms are not modified, thus affecting the functionality of the Texas WIC Information Network (WIN) system.

Authority

State Policy

Policy

All modifications, enhancements, and corrections to the Texas-WIN computer platforms made by the local agency (LA) shall have prior written approval by the state agency (SA) Automation Division director.

System downtime which results from any modifications to hardware or software performed by LA staff that are attempted without SA approval shall be returned to the original platform configuration by SA automation staff. Costs associated with this repair shall be paid by the LA with non-WIC funds. This cost shall include staff salary, travel expenses and parts if applicable.

Modification to systems without explicit approval from the SA Automation Division Director may result in revocation of supervisory access for LA support staff.

Procedures

- I. Requests for modifications and/or enhancements shall be submitted for prior approval in writing to the WIC Automation Division Director.
- II. Automation management shall determine the impact and disposition of the request.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AUT:02.0

- III. If approved, SA help desk staff shall dial into the modified system and review for accuracy.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AUT:03.0

Backups

Purpose

To ensure proper system maintenance and recovery in case of file problems.
To prevent possible loss of valuable data in case of file or system failure.

Authority

State Policy

Policy

Local agencies (LAs) and clinics shall assign one staff person and one backup staff person at each location to be responsible for system backups. Backup (savefile/copyfile) is the copying of data to disk or tape. It is a required daily function.

Procedures

- I. If the automatic tape backup fails, LA or clinic staff shall complete a manual backup before processing clients.
- II. All systems without a tape backup unit shall complete a manual backup daily.
- III. All tape backup units shall be cleaned monthly using a head cleaner.
- IV. All tapes/diskettes shall be labeled with the day of the week (Monday, Tuesday, Wednesday, etc.) and the appropriate tape used on that day of the week.
- V. Each agency and/or clinic shall have one tape or one box of diskettes for each day of the week that they are open. In addition, each LA and/or clinic shall have, at a minimum, two extra boxes of diskettes or tapes.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AUT:03.0

- VI. Tapes and diskettes shall be replaced with new tapes at least every 4-6 months or sooner if indicated by backup error messages.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2005

Policy No. AUT:04.0

Data Communications Capabilities, VSAT and Modem

Purpose

To ensure that WIC data (issuance, inventory, appointments, transfers, and certification, etc.) can be passed between state agency (SA), local agency (LA) and clinic. To ensure SA access to LA's and clinics for remote maintenance and support.

Authority

State Policy

Policy

All LAs and clinics shall have access to a Very Small Aperture Terminal (VSAT), which is a very small satellite transmitting and receiving station.

In addition, all sites must have a dedicated telephone line (compatible with the Bell 212A standard) hooked to a modem. This telephone line shall end in a standard RJ11C modular jack. The jack shall be located within 5 feet of workstation 01 (station with the modem attached). The modem will be used for disaster recovery and automation support in case the VSAT is not operational.

Procedures

- I. All network and stand alone PCs shall have a VSAT installed.
- II. All network and stand alone PC's must have a dedicated modem line and modem, hooked to workstation 01, for disaster recovery in the event that the VSAT is not operational.
- III. All notebook computers (portables) must connect daily, Monday through Friday (include Saturday if WIC services are provided), to

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2005

Policy No. AUT:04.0

a VSAT and transfer data to the state office. Portable computers can go to any of its Local Agency sites for data transfer.

- IV. VSAT installation for new sites or sites moving from one location to another require a minimum of 30 days notice.
- V. VSAT equipment on the roof is the responsibility of Spacenet (contractor). Agencies should not move equipment for any reason. Contact the State Agency if your clinic is moving, or for any reason, such as roof repairs, that will require that the VSAT be moved.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AUT:05.0

Repair of Computer Equipment

Purpose

To ensure that equipment is repaired or replaced quickly, without excessive downtime for the local agency (LA). The 72-hour return policy is to ensure that there is replacement equipment.

Authority

State Policy

Policy

The state agency (SA) shall be notified immediately when any computer equipment breaks. The help desk analyst will determine if equipment must come to Austin for repair. In this instance, equipment shall be returned to the SA within 72 hours.

Procedures

For equipment and/or software problems LA staff shall contact the help desk at the SA immediately.

Guidelines

Agencies that do not return equipment promptly cause equipment shortages. Equipment shortages keep other agencies and clinics down for additional time.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AUT:06.0

Surge Protector Equipment

Purpose

To protect computer equipment and data files from electrical surge damage.

Authority

State Policy

Policy

Each computer used at a local agency shall be connected to the local power utility through a surge protector or uninterruptible power supply (UPS).

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AUT:07.0

Requests for New or Additional Computers and/or Peripherals

Purpose

To ensure program integrity and maximum efficiency by mandating all clinics and local agencies (LAs) to be automated.

Authority

State Policy

Policy

All clinics shall be automated to be able to utilize the Texas WIC Information Network (WIN) automated system. A minimum threshold of 50 participants (per system, not site) shall be required in order to receive computer equipment for that system.

Procedures

- I. All requests for new or additional computers and/or peripherals (printers, bar code scanners, UPS, modems) shall be made in writing to the state agency (SA) and received by the SA at least 30 days prior to the date the equipment will be needed. Requests shall be evaluated by the appropriate SA help desk staff. Requests shall be processed in the order they are received.

- II. Agencies requesting stand alone PCs and notebook computers shall have a minimum of 50 participants. (For example, LAs may combine more than one site to reach the minimum required number of 50 participants and operate these sites using one computer.)

- III. Two station networks shall be provided for all clinics that reach 1200 participants. LAs shall request that a network be allocated to a clinic when it reaches this threshold. Requests shall be made in writing to the

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. AUT:07.0

SA and shall be evaluated and processed by the appropriate SA help desk staff.

IV. There will be times when equipment will not be available.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: January 1, 2017

Policy No. AUT:08.0

Acceptable Use Agreement Policy

Purpose:

WIC information and information resources are valuable assets that must be protected from unauthorized disclosure, modification, use, or destruction. The purpose of the revised Health and Human Services (HHS) Acceptable Use Agreement (AUA) is to assure that staff understand and adhere to all requirements concerning the use of WIC information resources.

Authority:

State Policy

Policy:

Local Agencies (LA) must ensure that information and resources maintain their integrity, confidentiality, and that their availability is not compromised. All LA Staff shall sign the Acceptable Use Agreement (as defined below) documenting their acceptance of computer usage requirements.

Definitions:

Information resources - the procedures, equipment, and software that are employed, designed, built, operated, and maintained to collect, record, process, store, retrieve, display, and transmit information by LA staff to and from State Office.

Acceptable Use Agreement (AUA) – a required form for staff to sign agreeing to adhere to state agency policies and procedures for the use of state resources. The link to the form is:

<http://hscx.hsc.texas.gov/sites/extranet/files/docs/it/forms/hhs-aua.pdf>

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: January 1, 2017

Policy No. AUT:08.0

Procedures:

- I. All persons who access WIC systems through an assigned WIC issued User ID shall sign the Acceptable Use Agreement located at the link below:

[http://hscx.hsc.texas.gov/sites/extranet/files/docs/it/forms/hhs-
aia.pdf](http://hscx.hsc.texas.gov/sites/extranet/files/docs/it/forms/hhs-
aia.pdf)

Forms shall be signed prior to staff being granted new user accounts. Required fields on page 7 of the AUA include:

- Signature on the "HHS Contractor Signature" line
- Printed name on the "HHS Employee/Contractor Name Printed" line
- Local Agency Name on the "HHS Agency and Department or Division" line
- Date Agreement signed on the "Date Agreement Signed" line

In addition, staff are asked to initial each page of the document as per the requirement to "acknowledge all pages of this agreement".

- II. The LA shall retain all signed Acceptable Use Agreement forms to be available for audit/review. Refer to Records Retention **Policy GA:03.0**.
- III. LA Directors shall apply for new user accounts by sending an email to WICClinics@dshs.texas.gov.

All LA Staff shall complete a Security Awareness & Computer Usage Security training within 30 days of hire and annually thereafter. (Refer to **Policy TR:03.0**)

BF - Breastfeeding

Nutrition Services Department of State Health Services

Effective October 1, 2015

Policy No. BF:01.0

Breastfeeding Promotion and Support Standards

Purpose

To establish breastfeeding (BF) as the natural and optimal way to feed infants. To encourage WIC participants to breastfeed their infants. To provide optimal support to breastfeeding participants to help each participant reach their personal breastfeeding goal.

Authority

7 CFR Part 246.11

Policy

The WIC staff and the clinic environment shall promote and support breastfeeding.

Definition

Breastfeeding – the practice of feeding a mother’s breastmilk to her infant(s) on the average of at least once a day.

DBE – Designated Breastfeeding Expert (See Policy GA:14.0)

TBE – DSHS Trained Breastfeeding Educator (See Policy BF:2.0)

Procedures

- I. The local agency (LA) shall provide a supportive clinic environment.
 - A. All staff shall promote breastfeeding as the normal way to feed all infants.
 1. Breastfeeding shall be visibly represented as the normal way to feed all infants through use of posters and/or other visuals in the clinic.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. BF:01.0

2. Formula, bottles and pacifiers shall be stored where applicants and participants cannot see it except while being used as a teaching aid.
 3. Breastfeeding shall be referred to positively by all WIC staff and promoted as the norm for infants up to age one year and beyond.
 4. All materials distributed or visible to participants shall:
 - a) Be free of formula product names and/or logos with the exception of the WIC Approved Foods materials. This also includes office supplies such as cups, pens, and notepads.
 - b) Be free of language that undermines the mother's confidence in her ability to breastfeed.
 - c) Show breastfeeding in a positive light.
 - d) Be at an appropriate reading level for WIC participants.
 - e) Be culturally appropriate.
 - f) Be accurate and up-to-date.
 - g) Be state agency developed or pre-approved according to **Policy NE: 03.0**.
 5. The clinic should be set up to help participants feel comfortable breastfeeding their infants anywhere in the clinic and discussing breastfeeding with any staff.—Private areas should be offered to participants who request privacy while breastfeeding.
- II. The local agency shall provide breastfeeding education to all pregnant participants
- A. Every pregnant participant shall receive breastfeeding education and be encouraged to consider breastfeeding, unless breastfeeding is contraindicated for medical reasons.
 1. If the opportunity to provide breastfeeding education does not present itself during the VENA counseling session, (e.g. if the participant chooses to talk about something other than infant-feeding) breastfeeding education should occur in addition to VENA counseling.
 2. Breastfeeding counseling shall incorporate issuance of:
 - a. Prenatal Breastfeeding Education Bag. Prenatal bags shall be issued to every participant at their first prenatal visit,

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. BF:01.0

regardless of the mother's infant-feeding intent. Counseling should focus on addressing barriers to breastfeeding, encouraging moms to learn all they can about BF, and encouraging moms to share education resources with family or friends who will be helping her when she gets home. Each item in the bag should be briefly addressed in the counseling session. Suggested talking points are included on *the Time to Feed the Baby* tip sheet provided in each prenatal bag shipping box. When preassembled bags are not available, each pregnant participant should be given a breastfeeding DVD (stock no. DV0057), a Dad/Partner brochure, and a Grandparent brochure at minimum, in the appropriate language in lieu of a preassembled bag.

- b. WIC Food Packages for Moms and Infants brochure (stock no. 13-06-13124 and 13-06-13124a), with counseling focusing on the importance of exclusive breastfeeding for establishing milk supply and for optimal health. Participants who express the desire to combine breastfeeding with formula feeding should be told that WIC can accommodate their need to combination feed after the first month postpartum.
- c. Client referral handout described in Procedure III. B., 2..
- d. Other materials as needed or requested by participant.

B. Breastfeeding education and recommendations shall be in alignment with current medical recommendations, which are

- 1. Exclusive breastfeeding for about the first six months with continued breastfeeding for at least a year.
- 2. Gradual introduction of complementary foods should begin around 6 months of age.
- 3. Breastfeeding beyond a year should be encouraged and supported for as long as the mother and baby desire.

III. The local agency shall provide breastfeeding support.

- A. Every breastfeeding WIC participant shall be offered breastfeeding support.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. BF:01.0

1. Peer Counselors (PCs) should be utilized first, when possible, for BF counseling that falls within their scope of practice (See BF:03.0).
 2. International Board Certified Lactation Consultants (IBCLCs), DBEs, TBEs, and CAs should be utilized when PC's are not available and for situations that fall outside the scope of practice of other staff.
 3. Other staff can be used as a last resort.
- B. Every WIC clinic shall maintain and have available the following breastfeeding referral documents.
1. Staff Referral Protocol -a list of contacts for staff to use when they have a breastfeeding situation or question that is beyond their own scope of practice or level of expertise. All staff shall have a copy of the document or the document shall be posted in at least one place, easily visible, and all staff shall be made aware of the location. This document can be in flow chart form or a list that may include IBCLCs, WIC lactation support centers, DBEs, PCs, LA BF Coordinator, and LA TBEs. (See **Policy BF: 02.0**)
 2. Client Referral Handout –provides a list of qualified individuals able to answer their breastfeeding questions. The handout can contain local WIC staff such as PCs, TBEs, and IBCLCs, local La Leche League leaders, local hospital lactation support program/personnel, online resources (i.e. websites, forums, local agency run social media sites), and local and national help lines and must also include the non-discrimination statement. The referral handout should be kept up to date and offered to every pregnant and breastfeeding participant. Breastfeeding participants who were enrolled during pregnancy shall be offered the referral list again at their breastfeeding certification appointment.
- C. Hands-off/hands-on breastfeeding assistance
1. Hands-off approach - WIC staff shall first try to assist a breastfeeding mother/baby dyads in a hands-off type approach

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. BF:01.0

by either showing the mother how to latch her baby through demonstration on a breast model or the WIC staff's own clothed breast or by placing their hand(s) over the mother's hand(s) to assist.

2. Hands-on approach - When there is a need to assist a mother through touch, WIC staff shall always wash their hands or use hand sanitizer prior to assisting.
 - a. WIC staff shall ask permission to touch prior to touching.
 - b. When a mother expresses a dislike of being touched, WIC staff should offer to wear gloves to put a barrier between them and the mom/baby in order to make the mom feel more comfortable. If the mother still does not want to be touched, WIC staff should return to using a hands-off approach.
 - c. Gloves shall be worn with hands-on approach when WIC staff have any lesions or wounds on their hands and when a mother has any lesions or wounds on her breasts.

- D. If a breastfeeding participant asks for formula or an increase in amount of formula, she shall receive individual counseling to identify concerns or barriers and to provide assistance with breastfeeding.
 1. Participants shall be made aware that use of formula will decrease their breastmilk supply and be provided counseling for any breastfeeding concerns.
 2. PCs, IBCLCs, DBEs, and TBEs can help determine appropriate food packages and formula quantities for breastfeeding participants; however, only a CA or a WCS can authorize the change of a food package.
 3. Food package and formula quantities shall not be changed until after the individual counseling.
 4. If formula is issued, the amount issued should reflect the minimum amount of formula needed while supporting maximum breastfeeding, or the amount that supports the mother's breastfeeding needs.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. BF:01.0

- IV. All local WIC staff shall receive BF training according to **Policy BF: 04.0**.
- V. For allowable BF expenditures, see **Policy AC: 34.0**.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. BF:02.0

Local Agency Breastfeeding Coordinator

Purpose

To ensure that a qualified, designated staff administers (plans, implements and evaluates) breastfeeding (BF) education and support activities. To assure that breastfeeding education and support is planned, scheduled and provided to address the needs of breastfeeding participants.

Authority

7 CFR Part 246.11

Policy

Each local agency (LA) shall appoint a BF Coordinator who ensures that breastfeeding lessons, materials, and other information presented to WIC participants contain accurate, current, culturally appropriate, and evidenced-based information.

Definition

Department of State Health Services (DSHS) Trained BF Educator - a person who has successfully completed both *Principles of Lactation Management* and *Lactation Counseling and Problem Solving* courses in the last five years.

Procedures

- I. Each LA shall appoint a BF Coordinator to oversee breastfeeding promotion and support activities.
- II. The LA BF coordinator shall be qualified and trained to promote and support breastfeeding. The LA BF Coordinator shall:

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. BF:02.0

- A. Be an International Board Certified Lactation Consultant (IBCLC) or a DSHS Trained BF Educator or shall successfully complete the certification or training within one year of employment.
 - B. Be trained according to **Policy BF: 4.0**. Documentation of the BF coordinator's initial and on-going training shall be maintained at the LA for review.
 - C. Complete the Peer Counselor Train the Trainer Course within one year of employment.
 - D. Attend the annual WIC Program's Nutrition and Breastfeeding conference every fiscal year. Other conferences or trainings may be attended in lieu of this conference with the approval of the SA BF coordinator.
- III. LAs shall have a designated BF coordinator at all times. If the designated BF coordinator will be out for extended leave (i.e. maternity leave, workman's comp), an interim BF coordinator shall be appointed.
- A. If this person is in the interim position for 3 months or less, they do not need to satisfy the certification or training requirements in this policy.
 - B. If this person is in the interim position for more than 3 months, certification or training requirements shall be met within a year of assuming the position of BF coordinator.
- IV. The BF Coordinator shall oversee/coordinate all aspects of breastfeeding training, education and documentation at the Local Agency. They may work in conjunction with the Training Coordinator, Nutrition Education coordinator and clinic supervisory staff. The BF Coordinator is responsible for overseeing:
- A. The BF portion of the annual NE/BF Plan (see **Policy NE:02.0**);
 - B. BF activities including but not limited to:

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. BF:02.0

1. Ensuring the clinic environment promotes and supports BF according to **Policy BF:01.0**;
 2. Providing the opportunity for all pregnant and BF WIC participants to receive individual counseling and nutrition education classes that promote and support BF;
 3. Ensuring all individual counseling and nutrition education classes that address infant feeding promote BF as the preferred way to feed an infant;
 4. Ensuring BF promotion/support activities are evaluated and necessary changes are implemented to ensure that BF rates increase at the LA;
- C. Managing the LA BF Peer Counselor (PC) Program and mentoring the PCs if there is not a LA PC coordinator;
- D. Networking with and outreach to other health professionals, community organizations and stakeholders to inform them of WIC breastfeeding resources and promote and support BF in the community.
- E. Keeping the Staff Referral Protocol and Client Referral Handout up to date(See **Policy BF:01.0**, Procedure I, A, 5.)
- F. Monitoring local agency breastfeeding rates. (See **Policy BF:07.0**)
- G. Evaluating BF Education and Support. Quality management activities related to BF shall be conducted annually (at minimum) by the LA and:
1. Shall include evaluating breastfeeding educational activities for accuracy and positive presentation of breastfeeding
 2. Shall include observation of group and individual breastfeeding education and support sessions to ensure accurate and appropriate delivery of information in a client-centered way.
 3. Results should be used to determine and plan staff training.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. BF:02.0

4. Participant feedback related to BF, to include but not limited to the WIC Infant Feeding Practices Survey, should be used to plan future breastfeeding education and support activities.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. BF:03.0

Breastfeeding Peer Counselor and Peer Dad

Purpose

To ensure that Breastfeeding Peer Counselors and Peer Dads are qualified, trained, and perform appropriate duties.

Authority

USDA Loving Support grant; State Policy

Policy

Local agencies (LAs) shall employ Breastfeeding Peer Counselors as paraprofessionals to increase breastfeeding rates by use of peer influence and to assist in breastfeeding counseling in normal breastfeeding situations. Local agencies (LAs) may also employ Breastfeeding Peer Dads as paraprofessionals to increase breastfeeding rates by use of peer influence and to assist in promoting and educating fathers about breastfeeding.

Definitions

Paraprofessional – Those without extended professional training in health, nutrition or the clinical management of breastfeeding who are selected from the group to be served and are trained and given ongoing supervision to provide a basic service or function. Paraprofessionals provide specific tasks within a defined scope of practice.

Procedures

- I. Breastfeeding (BF) Peer Counselors (PCs) and Peer Dads (PDs) shall be trained and work under the supervision of the LA Breastfeeding Coordinator. BF PCs shall be available to work outside regular clinic hours and outside the WIC clinic.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. BF:03.0

-
- II. When recruiting BF PCs LAs shall choose mothers who:
 - A. are receiving WIC or have received WIC;
 - B. have successfully breastfed or expressed breastmilk for at least one baby;
 - C. have the ability to work outside of regular clinic hours and outside of the WIC clinic.
 - III. When recruiting BF PDs LAs shall choose fathers:
 - A. Whose child or children are receiving WIC or have received WIC;
 - B. Who have supported their spouse/partners to successfully breastfeed or to receive expressed breastmilk;
 - IV. BF PCs and PDs shall be trained in accordance with SA-designated initial PC training prior to working with participants and shall complete other training requirements according to policy TR: 3.0.
 - A. Peer counselors and peer dads shall have monthly meetings and receive monthly in-services on breastfeeding topics. If it is difficult to bring your staff together, monthly in-services can be conducted by conference call.
 - B. Documentation of PC and PD training shall be kept on file at the LA for review.
 - V. Breastfeeding Peer Counselors shall perform any or all of the following duties:
 - A. Teach classes (or assist in teaching classes) on the advantages of breastfeeding and the management of normal breastfeeding experiences.
 - B. Distribute breastfeeding information and promote breastfeeding in the clinic waiting area.
 - C. Provide information and promote breastfeeding to WIC participants.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. BF:03.0

- D. Develop a rapport with moms and assist them in developing breastfeeding goals and strategies.
 - E. Address specific concerns of expectant mothers. Correct misinformation which may prevent a pregnant woman from breastfeeding.
 - F. Share motivational materials with pregnant participants.
 - G. Counsel pregnant and breastfeeding mothers on a one-to-one basis to help new mothers avoid common breastfeeding problems.
 - H. Support women during a normal breastfeeding experience. Identify breastfeeding experiences that are not the norm and make an immediate, appropriate referral.
 - I. Counsel new mothers in the hospital.
 - J. Counsel over the telephone. Follow-up if necessary.
 - K. Document counseling encounters.
 - L. Provide support and information to breastfeeding mothers who may need help transitioning into being away from their baby for work, school, or other reasons so that they can continue breastfeeding.
 - M. Prepare breastfeeding motivational or informational bulletin boards in the clinic.
 - N. Teach use, cleaning, and assembly of breast pumps and expression and storage of human milk.
- VI. Breastfeeding Peer Dads shall perform any or all of the following duties:

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. BF:03.0

- A. Teach classes (or assist in teaching classes) on the advantages of breastfeeding and the management of normal breastfeeding experiences.
 - B. Distribute breastfeeding information and promote breastfeeding in the clinic waiting area.
 - C. Provide information and promote breastfeeding to WIC participants.
 - D. Develop a rapport with dads and assist them in developing skills and strategies to support partner breastfeeding goals.
 - E. Address specific concerns of expectant fathers. Correct misinformation which may prevent the mother from breastfeeding.
 - F. Share motivational materials with dads.
 - G. Counsel fathers on a one-to-one basis to help new fathers support breastfeeding mothers and avoid common breastfeeding problems.
 - H. Counsel over the telephone. Follow-up if necessary.
 - I. Document counseling encounters.
 - J. Prepare breastfeeding motivational or informational bulletin boards in the clinic.
- VII. Breastfeeding Peer Counselors and Peer Dads shall make immediate referrals according to the LA's established referral system when they encounter:
- A. Breastfeeding problems outside of their scope of practice;
 - B. Breastfeeding problems that are not resolved within 24 hours of the Peer Counselor's intervention; or
 - C. Problems in an area other than breastfeeding.

<p style="text-align: center;">NUTRITION SERVICES Department of State Health Services</p>

Effective December 1, 2016

Policy No. BF:04.0

Breastfeeding Training

Purpose

To ensure that breastfeeding (BF) is promoted and supported on a local agency (LA) level.

Authority

7 CFR Part 246.11

Policy

All WIC staff who provide direct clinic services to WIC participants shall receive initial and ongoing training on BF promotion and support.

Definition

Department of State Health Services (DSH) Trained BF Educator - a person who has successfully completed both *Principles of Lactation Management* (POLM) and *Lactation Counseling and Problem Solving* (LCPS) courses in the last five years. LCPS must be completed within 3 years of completing POLM.

Procedures

- I. All WIC staff who provide direct clinic services to WIC participants shall receive training on LA protocol regarding whom to contact to answer participant's questions on BF if beyond the staff person's expertise. This training shall utilize the Staff Referral Protocol document referenced in policy BF:01.0 and occur within one month of employment.

- II. All WIC staff who provide direct clinic services to WIC participants shall complete the Breastfeeding Promotion and Support Module within 6 months of employment with the exception of International

<p style="text-align: center;">NUTRITION SERVICES Department of State Health Services</p>

Effective December 1, 2016

Policy No. BF:04.0

Board Certified Lactation Consultants (See policy TR: 3.0.0). The module can be accessed in the WIC catalog.

- III. All WIC staff who provide direct clinic services shall receive ongoing annual updates in BF, at least once every fiscal year. Examples include, local agency in-services, state agency BF trainings, and/or BF conferences.
- IV. The BF Coordinator and all WIC CAs shall receive training on breast pump issuance, inventory control, retrieval, basic troubleshooting, assembly, use, and cleaning within 6 months of employment and prior to issuing breast pumps to WIC participants. Any other WIC staff designated by the WIC Director or BF Coordinator to issue breast pumps shall receive the same training. WIC staff shall receive the training listed in Procedures I, II, and V prior to issuing breast pumps to WIC participants.
- V. Breast pump training shall be satisfied by successful completion of state agency-developed Texas WIC Breast Pump training. For more information on this training, contact the Texas WIC Breast Pump Coordinator.
- VI. The BF coordinator shall be an International Board Certified Lactation Consultant (IBCLC) or a DSHS Trained BF Educator (see definition).
 - A. If the BF coordinator does not meet the above training requirements prior to assuming the position, the individual has one calendar year from assuming the position to become trained.
 - B. The required training in procedure I, A must be repeated, or the certification renewed in the case of IBCLCs, every five years.
 - C. The BF Coordinator must also complete the state-developed Peer Counselor Train the Trainer Course within one year of employment.

<p style="text-align: center;">NUTRITION SERVICES Department of State Health Services</p>

Effective December 1, 2016

Policy No. BF:04.0

VII. All CAs and WCSs (with the exception of IBCLCs) shall complete one of the following DSHS BF trainings within 12 months of employment and repeat this training no less than every five years:

- A. Principles of Lactation Management (POLM)
- B. Breastfeeding Management

To find the current BF training schedule and registration instructions go to <http://www.dshs.state.tx.us/wichd/lactate/courses.shtm>.

VIII. Any staff issuing or counseling moms on nipple shields must first complete training on issuance of nipple shields. For more information on the training, contact the Texas WIC Breastfeeding Training Coordinator.

- A. International Board Certified Lactation Consultants (IBCLCs) and the LA Designated Breastfeeding Expert (DBE), defined by GA: 14.0, are the most appropriate staff and should be utilized first, and when available, to counsel and issue nipple shields to mothers who need them.
- B. Non-IBCLC and DBE staff can issue a nipple shield and provide follow up only if both actions are performed under the direction of an IBCLC. IBCLCs direction can be provided by utilizing tele consult services provided by the Houston and Dallas lactation support centers. Phone direction can be used as a last resort.
- C. When an IBCLC or the LA DBE is not available to counsel a mom who is using a nipple shield that was not issued by WIC, a PC or TBE can assist by assessing latch and milk transfer with the nipple shield then assisting the mom to breastfeed without the nipple shield, assessing latch and milk transfer.
 - 1. If the baby will latch without the nipple shield and successfully transfers milk, the mother should be followed up within 24 hours by a PC, TBE, IBCLC, Breastfeeding Coordinator or DBE.
 - 2. If the baby will not latch without the nipple shield but milk is successfully being transferred, the mom should be offered a

<p style="text-align: center;">NUTRITION SERVICES Department of State Health Services</p>

Effective December 1, 2016

Policy No. BF:04.0

consultation appointment with an IBCLC or a DBE if she would like assistance breastfeeding without the shield.

3. If the mom calls back to report trouble with latch or that she has gone back to using the nipple shield, she should be offered a consultation appointment with an IBCLC or a DBE.

- IX. PCs shall be trained in accordance with SA designated PC training materials prior to working with WIC participants and receive monthly in-services according to Policy BF:03.0.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective February 1, 2015

Policy No. BF:05.0

**Issuance and Inventory of Manual and
Single-user Electric Breast Pumps**

Purpose

To enable WIC breastfeeding mothers to initiate and maintain breastfeeding when having to return to work or school or during special circumstances.

Authority

7 CFR Part 246.14; USDA FNS Policy Memorandum, 99-WIC-73

Policy

The local agency (LA) staff shall provide manual and single-user electric breast pumps to breastfeeding WIC participants when needed to manage breastfeeding and maintain milk supply.

Local agencies shall maintain a secure and perpetual inventory of all pumps at all times.

Local agencies shall not implement policies regarding breast pump issuance that are more restrictive than the state agency breast pump policies.

Definition

Single-User Breast Pump - can be manual or electric and are classified as personal hygiene items by the Food and Drug Administration. They should never be used by more than one (1) person.

Lost or Stolen Breast Pump – a missing breast pump that is not accounted for by way of a breast pump inventory log or a release agreement.

Designated and Trained Staff – Staff who are designated by the WIC Director or Breastfeeding Coordinator to issue breast pumps and who have completed required breast pump training described in BF:04.0

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective February 1, 2015

Policy No. BF:05.0

Procedures

I. Issuance

A. A WIC participant who requests a breast pump shall not be denied a pump if she does not have another source (e.g. her health plan) for obtaining a breast pump OR if she is unable to successfully obtain a pump from another source that is adequate and timely for her needs. Each participant's pump needs are different and should be assessed individually upon issuance. It is up to the CA, WCS, Peer Counselor, Lactation Consultant, WIC Director, or other designated and trained staff (See BF:04.0) to determine which pump would best fit the participant's need.

B. Manual Breast Pump Issuance

1. A manual breast pump can be issued for any reason. The reason for pump issuance is not restricted by state policy, but should be documented appropriately on the corresponding inventory log. Some examples of when a mom might need a manual pump include but are not limited to:
 - a) to help in resolving short-term breastfeeding concerns such as engorgement, flat or inverted nipples, oversupply, sleepy baby, or plugged duct.
 - b) for very infrequent separation from their baby such as part-time work (less than six hours per week).
 - c) for mothers who would rather feed their expressed milk in a bottle while in public.
 - d) for any other reason as determined by the CA, WCS, Peer Counselor, Lactation Consultant, WIC Director, or other designated and trained staff.
2. WIC staff shall have participants print and sign their name on the appropriate inventory log upon issuance of a manual breast pump. The inventory log should then be completed and initialed by the staff member conducting the pump training and issuance.

C. Single-User Electric Pump Issuance

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective February 1, 2015

Policy No. BF:05.0

1. A single-user electric breast pump can be issued for any reason. There are no restrictions on breast pump issuance in regards to the amount of formula a participant receives. The reason for pump issuance is not restricted by state policy, but should be documented appropriately on the corresponding inventory log. Some examples of when a mom might need a single-user electric pump include but are not limited to:
 - a) for mothers who must be separated from their infant for reasons such as part-time (of approximately six hours or more per week) or full-time return to work or school, brief infant or mother hospitalization, sharing custody of infant, or for any other reason that involves a mom/infant separation of approximately six or more hours per week.
 - b) for mothers of compromised infants who need help maintaining their milk supply after establishing their milk with a multi-user electric pump. Examples include infants born pre-term or near-term with cleft lip or palate, Down Syndrome, cardiac problems, cystic fibrosis, PKU, neurological impairment, or any other reason.
 - c) for mothers who are having difficulty maintaining adequate milk supply due to infant/mother illness or need for maternal medications that are contraindicated with lactation.
 - d) for mothers who need an electric pump to establish their milk supply but who participate or will be transferring to another local agency. (Multi-user electric pumps can also be issued for this reason. Refer to the Breast Pump Procedures Manual for transfer instructions.)
 - e) for any other reason as determined by the CA, WCS, Peer Counselor, Lactation Consultant, WIC Director, or other designated and trained staff.
2. WIC staff shall have participants receiving a single-user electric pump read, initial the statements, and sign the single-user breast pump release agreement upon issuance of a single-user electric pump. If a participant cannot read, the release agreement shall be read to the participant. The release agreement shall also be signed by the staff member conducting

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective February 1, 2015

Policy No. BF:05.0

the pump issuance. The release agreement shall be distributed as follows:

- a) original in participant or central file; and
- b) copy to participant.

3. Upon issuance, WIC staff shall also complete all sections of the Single-User Electric Breast Pump Inventory Log.

D. WIC staff shall not issue a breast pump to themselves or relatives. The WIC employee who is scheduled or has a family member scheduled for an appointment shall make arrangements for another WIC employee to issue the breast pump.

E. At least two WIC staff shall be involved in certification and issuance of food benefits (Breast pumps). See policy GA 20.0 on separation of duties.

F. WIC staff shall not issue a single-user electric breast pump and multi-user electric breast pump to a participant at the same time. The multi-user electric breast pump shall be returned to the clinic before a single-user electric pump may be issued. A single-user electric breast pump may be issued the same day a multi-user electric pump is returned if it is determined the WIC participant needs it to maintain her milk supply.

II. Training

A. Before receiving a breast pump, mothers shall be trained by WIC staff on assembly, use, and cleaning of the breast pump, and storage of human milk utilizing the pump that is being issued to the participant or a demonstration pump. Showing a participant a breast pump video does not count as training.

B. WIC staff shall assess the adequacy of pumps issued to participants from other sources, and if need be, issue a WIC pump if the pump received from the non-WIC source is not meeting a participant's needs.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective February 1, 2015

Policy No. BF:05.0

- C. WIC staff conducting training shall have completed the Breastfeeding Promotion and Support Module and been previously trained on breast pump issuance, inventory control, basic troubleshooting, retrieval, assembly, use, cleaning, and LA protocol on who to contact to answer participant's questions on breastfeeding (BF). See Policy BF:04.0.

III. Inventory

- A. All full time clinics, at minimum, shall maintain an inventory of manual and electric breast pumps. If inventory is not stored at part time or satellite clinics, WIC staff shall ensure participants have access to the appropriate pump without the need for additional travel (i.e. staff will deliver from full-time clinic or to participant's clinic, home or a mutual meeting place.)
- B. WIC staff shall document shipments of manual and single-user electric pumps received, transferred, and issued on SA breast pump inventory logs which shall be maintained in a central breast pump file at the LA for audit purposes.
- C. The LA shall maintain a secure and perpetual inventory of all breast pumps and flanges at all times. Inventory shall be stored in a clean, locked space. Reconciliation of breast pump logs to actual breast pump inventory shall be done once a month, at minimum. State agency breast pump logs may be modified with prior approval by the SA BF Coordinator. See policy GA: 3.0 for breast pump log and release agreement retention rates.
- D. WIC staff shall not issue a replacement electric pump until a participant returns the broken or defective electric breast pump to the clinic.
- E. A WIC participant who reports that her single-user electric breast pump was stolen shall present a police report prior to being issued

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective February 1, 2015

Policy No. BF:05.0

another electric pump. If a police report cannot be obtained, a manual pump can be issued. Pumps and collection kits stolen out of clinic inventories shall be reported to State Agency according to Policy AC:35.0.

Nutrition Services Department of State Health Services

Effective February 1, 2015

Policy No. BF:06.0

Loan and Inventory of Multi-user Electric Breast Pumps

Purpose

To enable WIC participants to initiate breastfeeding and increase the duration of breastfeeding in special circumstances.

Authority

7 CFR Part 246.14; USDA FNS Memorandum 99-WIC-73

Policy

Local agencies shall provide multi-user electric breast pumps and collection kits to WIC participants who need to establish their milk supply.

Local agencies shall maintain a secure and perpetual inventory of collection kits and multi-user electric pumps at all times.

Local agencies shall not implement policies regarding breast pump issuance that are more restrictive than the state agency breast pump policies.

Definitions

Multi-user Electric Breast Pump – a breast pump with a powerful and reusable motor unit that is designed for mothers who need to establish their milk supply with a breast pump alone or with minimal breastfeeding by the infant.

Milk Collection Kit - a personal use milk collection kit given to WIC mothers who are temporarily loaned a multi-user electric pump, and should never be used by more than one (1) person.

Irretrievable Multi-user Electric Breast Pump – a multi-user electric breast pump originally loaned to a WIC participant, but deemed irretrievable according to the Guidelines for Retrieval of Multi-user Breast Pumps in the Breast Pump Procedures Manual.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective February 1, 2015

Policy No. BF:06.0

Lost or Stolen Breast Pump – a missing breast pump that is not accounted for by way of a breast pump inventory log or a loan contract.

Designated and Trained Staff – Staff who are designated by the WIC Director or Breastfeeding Coordinator to issue breast pumps and who have completed required breast pump training described in BF:04.0

Procedures

I. Issuance

- A. Before issuing a pump, WIC staff shall verify that a WIC participant who requests for a breast pump does not have another source (e.g. health plan) for obtaining a breast pump OR if she is unable to successfully obtain a breast pump from another source that is adequate and timely for her needs.
- B. Multi-user electric pumps can be issued for any reason if all of the following conditions are present:
 - 1. The WIC participant is currently enrolled in WIC as pregnant or breastfeeding. If from another state, participant should have proof of WIC enrollment in other state prior to being issued a pump in Texas.
 - 2. Has delivered her infant(s),
 - 3. Is determined eligible for a pump.
- C. The reason for pump issuance is not restricted by state policy, but should be documented appropriately on the corresponding inventory log. Some examples of when a mom might need a multi-user electric pump include but are not limited to:
 - 1. mothers of newborns with special needs such as prematurity, low birth weight, Down Syndrome, cardiac problems, cystic fibrosis, PKU, neurological impairment, or other special needs.
 - 2. mothers of newborns with physical or neurological impairment such as cleft lip or palate, tongue tie, uncoordinated suck/swallow pattern, weak suck, inability to suck, or inability to effectively latch-on to the breast.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective February 1, 2015

Policy No. BF:06.0

3. mothers who must be separated from their newborn due to infant or mother hospitalization.
 4. mothers at risk for delayed lactogenesis II, such as mothers who had cesarean section delivery or conditions such as diabetes, obesity, hyperthyroidism, insufficient mammary glandular tissue, postpartum hemorrhage, ovarian cyst, polycystic ovarian syndrome, and history of breast surgery.
 5. mothers who want to re-lactate.
 6. for any other reason as determined by the CA, WCS, Peer Counselor, Lactation Consultant, WIC director, or other designated and trained staff (See BF:04.0).
- D. Food benefits may be single-, double-, or triple-issued to WIC participants receiving multi-user pumps as determined by the CA, WCS, Peer Counselor, Lactation Consultant, WIC Director, or other designated and trained staff. However, because WIC participants who receive multi-user breast pumps need close follow-up, multi-user pumps can only be issued for a maximum of two months at a time.
1. loan extensions can be granted in person or by phone for up to two months at a time.
 2. mothers of infants born prior to 38 weeks shall be granted loan extensions upon request until their baby reaches their original due date, at minimum.
 3. all mothers issued multi-user pumps should be provided with close follow up in an attempt to help mom reach the desired goal of pumping 25 ounces a day, per baby, by day 14 and thereafter, for as long as the mother has the pump.
- E. LA staff shall determine the mother's need for a milk collection kit. If the mother did not receive a collection kit in the hospital or received one that is not designed to work with the LA breast pump, a collection kit shall be issued.
- F. WIC staff shall have participants read, initial each statement, and sign a breast pump loan contract when borrowing a multi-user

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective February 1, 2015

Policy No. BF:06.0

- pump. If the participant cannot read, the loan contract shall be read to the participant. The loan contract shall also be completed and signed by the staff member conducting the issuance. The loan contract shall be distributed as follows:
1. original in participant or central file; and
 2. copy to participant.
- G. Upon issuance, WIC staff shall complete all sections of the WIC Inventory Log for Collection Kits and Issuance of Multi-User Breast Pumps.
- H. WIC staff shall not issue a breast pump to themselves or relatives. The WIC employee who is scheduled or has a family member scheduled for an appointment shall make arrangements for another WIC employee to issue the breast pump.
- I. At least two WIC staff shall be involved in certification and issuance of food benefits (Breast pumps). See policy GA 20.0 on separation of duties.
- J. WIC staff may issue a multi-user breast pump to a proxy, 16 years of age or older, if certain conditions identified in Policy BF: 07.0 are present.
- II. Training
- A. Before receiving a breast pump, mothers shall be trained by WIC staff on assembly, use, and cleaning of the breast pump, and storage of human milk utilizing the pump that is being issued to the participant or a demonstration pump. Showing a participant a breast pump video does not count as training.
- B. WIC staff shall assess the adequacy of pumps issued to participants from other sources, and if need be, issue a WIC pump if the pump received from the non-WIC source is not meeting a participant's needs.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective February 1, 2015

Policy No. BF:06.0

- C. WIC staff conducting training shall have completed the Breastfeeding Promotion and Support Module and been previously trained on breast pump issuance, inventory control, basic troubleshooting, retrieval, assembly, use, and cleaning, and LA protocol on who to contact to answer participant's questions on BF. See Policy BF:04.0.

III. Inventory

- A. All full time clinics, at minimum, shall maintain an inventory of multi-user electric breast pumps and collection kits. If inventory is not stored at part time or satellite clinics, WIC staff shall ensure participants have access to the appropriate pump and appropriate flange size without the need for additional travel (i.e. staff will deliver from full-time clinic or to participant's clinic, home or a mutual meeting place.)
- B. The LA shall maintain a secure and perpetual inventory of all breast pumps and collection kits. Inventory shall be stored in a clean, locked space. Reconciliation of inventory logs to physical inventory shall be done once a month at minimum. State agency breast pump logs may be modified with prior approval by the SA BF Coordinator. See Policy GA: 3.0 for breast pump inventory log, release agreement, and loan contract retention rates.
- C. WIC staff shall document inventory of multi-user electric breast pumps on the Master Inventory Log for Multi-User Electric Breast Pumps, which shall be maintained in a central breast pump file at the LA and available for audit purposes. Information to be documented shall include breast pump serial numbers, date received and staff initials. If a multi-user electric breast pump is no longer in inventory, document the reason it was removed from inventory along with the date and staff initials.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective February 1, 2015

Policy No. BF:06.0

- D. WIC staff shall document collection kits received, multi-user electric pump loan information, and collection kit issuance on the inventory log for collection kits, which shall be maintained in a central breast pump file at the LA and available for audit purposes. The information to be documented shall include participant name, breast pump serial number, reason for issuance, documentation that release form was signed, date issued, date due, staff initials, and date returned.
 - E. Upon return to the clinic, staff shall check the pump case for all parts, plug the pump in to ensure it is in good working order, assess the pump for damage, clean the pump motor casing with Cavicide or a similar cleaner, and document the date the multi-user electric breast pump was returned on the appropriate inventory log.
 - F. WIC staff shall not issue a replacement electric pump until a participant returns the broken or defective electric breast pump to the clinic.
 - G. A WIC participant who reports that her multi-user electric breast pump was stolen shall present a police report prior to being issued another electric pump. If a police report cannot be obtained, a manual pump can be issued. Stolen pumps and collection kits shall be reported to SA according to Policy AC: 35.0.
- IV. Retrieval - To prevent financial liability, LAs shall follow the Guidelines for Retrieval of Multi-user Electric Breast Pumps in the Breast Pump Procedures Manual when retrieving pumps that are not returned in a timely manner to the clinic.

Nutrition Services Department of State Health Services

Effective October 1, 2012

Policy No. BF:07.0

Issuance of Breast Pumps to a Proxy

Purpose

To enable WIC participants to appoint a proxy to pick up a breast pump in special circumstances.

Authority

7 CFR Part 246.12; USDA FNS Memorandum 99-WIC-73

Policy

To support breastfeeding women, the LA shall allow a proxy to pick up breast pumps for WIC participants in special circumstances.

Definitions

Proxy – any person 16 years of age or older designated by a breastfeeding participant to obtain a breast pump.

Procedures

- I. A WIC participant can appoint a proxy, age 16 or older, to pick up a multi-user breast pump if all of the following conditions are present:
 - A. The WIC participant
 1. Is currently enrolled in WIC as pregnant or breastfeeding,
 2. Has delivered her infant(s),
 3. Is determined eligible for a pump.
 - B. The WIC participant's situation must warrant issuing a multi-user pump immediately. (Example: infant in the NICU and mother states she cannot pick up the pump from WIC.)

- II. The WIC participant shall designate a proxy in writing.

Nutrition Services Department of State Health Services

Effective October 1, 2012

Policy No. BF:07.0

- A. The written statement shall name the proxy and be signed and dated by the WIC participant.
 - B. The written statement shall be filed in the participant's chart and be accessible for audit/review.
 - C. Individuals unable to write may make their mark in lieu of a signature on the written statement.
 - 1. LA staff may assist clients who cannot write with preparation of the written statement; however, another staff member must witness. This option is more helpful to the family if completed at the clinic in advance of a future appointment when it is known the participant or parent/guardian/caretaker will need a proxy.
 - 2. A third party other than LA staff may also assist the participant or parent/guardian/caretaker in preparation of the written statement. Examples of a third party include but are not limited to, family members and friends.
- III. The proxy shall provide identification for himself/herself as well as the participant (refer to Policy CS: 05.0 for acceptable documents for identity).The participant's active enrollment shall be verified.
- IV. The following steps shall be taken to ensure completion of the Multi-User Electric Breast Pump Loan Contract and to ensure adequate breast pump training.
- A. WIC staff shall talk to the mom via the phone and determine that she meets the required conditions listed above.
 - B. If the mother can receive a fax, then the loan contract should be faxed to the mom. WIC staff should go over each point on the loan contract with the mom over the phone and the mom should initial each point, sign the bottom and fax it back.
 - C. If the mother cannot receive a fax then the WIC staff shall read to the mom each statement on the Multi-User Electric Breast Pump Loan Contract, with another staff as a witness, allowing time between each statement for the mom to agree. Initial each

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2012

Policy No. BF:07.0

statement on behalf of the mom once she has agreed to each statement.

- D. WIC staff shall train the proxy before issuing the pump, unless the mother can answer yes to all three of the following questions and does not need additional breast pump training:
 - 1. Have you already used an Ameda Hygienikit (collection kit) for the Elite pump in the hospital?
 - 2. Do you know how to take it apart, clean it, and put it back together?
 - 3. Have you received information about how to store and handle your pumped milk?
- E. If the mother cannot answer yes to the above questions, then WIC staff shall train the proxy before issuing the pump.
- F. If the mother cannot be reached, but the proxy has the appropriate documentation, then the WIC staff shall have the proxy read each statement on the Multi-User Electric Breast Pump Loan Contract. The proxy shall acknowledge contract obligations by initialing each statement on behalf of the participant.
- G. If special circumstances arise in which a single-user electric or manual pump is deemed more appropriate, proxy pick up is allowable using the procedure listed above with approval of the WIC Director, Breastfeeding Coordinator, or International Board Certified Lactation Consultant.

Texas WIC Program Texas Department of Health

Effective: November 1, 2007

Policy No. BF:08.0

Tracking Born-to-WIC Breastfeeding Rates

Purpose

To ensure that born-to-WIC (BTW) breastfeeding (BF) rates are tracked on a local agency (LA) level.

Authority

7 CFR §246.11

Policy

All local agencies are required to track BTW BF rates on a monthly basis to assess the positive impact the clinic has made on the decision to breastfeed by identifying an increase in breastfeeding rates among mothers encouraged through the WIC program.

Definitions

BTW BF Rate – a measure that represents the percent of certified infants whose mothers were participants in the program during pregnancy and initiated breastfeeding any time, including mothers who provided expressed breast milk to the infant on one or more occasions.

Monthly Participation BTW BF Report – a report of monthly performance available on the WIN System performance measure report, which LA's run on a monthly basis. This BF report is useful for revealing increases in BF rates after new BF initiatives have been put in place.

Total Enrollment BTW BF Report – a report on BTW BF infants based on the number of clients enrolled, rather than on monthly participation useful for showing trends in BF rates, including racial/ethnic breakdown, and includes BF rates for all LAs. Procedures

Texas WIC Program Texas Department of Health

Effective: November 1, 2007

Policy No. BF:08.0

- I. WIC Directors and Breastfeeding Coordinators shall review BTW BF rates by reviewing monthly participation and total enrollment BTW rates.
- II. Monthly participation BTW rates are available on the WIN System performance measure report. These reports shall be kept on file for audit or review.
- III. Total enrollment BTW BF rates shall be tracked by the WIC Director or Breastfeeding Coordinator by updating an electronic or hand-written chart of rates on a quarterly basis, at minimum.
 - A. Use the BTW BF Rate reports posted at <http://www.dshs.state.tx.us/wichd/gi/gi1.shtm> to track total enrollment rates. Reports are posted to the web page on a monthly basis with approximately a one-month lag time. (i.e., June will typically be posted by the end of July.) Pull the numbers for your agency off of this report and put them in your own Agency tracking chart to compare quarter-to-quarter progress.
 - B. The tracking chart shall be kept on file for audit or review.
- III. All WIC staff shall record the "date ended BF" field on the Infant Participant Form (WIC-36) as follows:
 - A. If the infant was never breastfed, enter the infant's date of birth.
 - B. If the infant was breastfed only on the first day, enter one day after the date of birth.
 - C. If the infant was breastfed for two or more days, enter the last day the infant was breastfed.

Guideline

All WIC agencies should strive to meet or exceed the Healthy People 2020 goal of at least 82% of women initiating breastfeeding.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective November 1, 2016

Policy No. BF:09.0

Worksite Lactation Support for Employees

Purpose

To implement breastfeeding best practice policies to support WIC employees.

Authority

State Agency

Policy

WIC agencies shall be DSHS Mother-Friendly Worksite designated and maintain current designation at all times through the re-designation process.

Procedures

- I. The local agency (LA) shall become designated as a DSHS Mother-Friendly Worksite (MFW) by utilizing the online application process found at www.texasmotherfriendly.org.
- II. The LA shall maintain MFW-designation by following DSHS MFW re-designation procedures found at www.texasmotherfriendly.org.
- III. New LAs will have one year to become designated from the date of their initial WIC contract.

Guidelines

Information and requirements to become a Mother Friendly worksite may be found at: www.texasmotherfriendly.org

CR - Civil Rights

Nutrition Services Department of State Health Services

Effective June 1, 2014

Policy No. CR:01.0

Rights and Obligations of an Applicant/Participant

Purpose

To ensure that the participant or parent/guardian/caretaker of the participant clearly understands the rights and obligations of a WIC participant and that an ineligible applicant or parent/guardian/caretaker of an ineligible applicant clearly understands the rights of a WIC applicant.

Authority

7 CFR Part 246.7

Policy

The local agency (LA) staff shall, at the time of each certification, have the participant or parent/guardian/caretaker of the participant read, or be read to, the rights and obligations of a participant in the WIC Program. The LA staff shall, at the time an applicant is found ineligible, have the applicant or parent/guardian/caretaker of an applicant read, or be read to, the rights of an applicant in the WIC Program.

Procedures

- I. At each certification, the participant or parent/guardian/caretaker of a participant shall be offered the opportunity to read or have read to her/him, the rights and responsibilities of a WIC participant on the *Supplemental Information Form (WIC35-1)*. The participant or parent/guardian/caretaker of a participant shall sign the form attesting to the fact that she/he has been informed of this information. The form shall be maintained in the participant's or family's record.

- II. At each certification, LA staff shall provide the participant or parent/guardian/caretaker of a participant, the *Texas WIC Program*:

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2014

Policy No. CR:01.0

Your Rights and Responsibilities (stock # 13-06-14207/13-06-14207a).

- III. Applicants found ineligible shall be advised of the ineligibility and the right to a fair hearing by reading or having read to them the WIC Notification of Ineligibility or Termination form (WIC-5). Refer to **Policy CR:03.0** for the fair hearing procedures. The reason for ineligibility shall be identified on the form. The applicant shall sign the WIC-5 attesting to the fact that she/he has been informed of this information. The form shall be retained on file and made available for audit/review.

- IV. Where there are non-English speaking applicants or participants or parents/guardians/caretakers, the statements shall be provided verbally or in writing in a language that is understood. Interpreters shall be made available as needed.

- V. In areas of the state with the Commodity Supplemental Food Program (CSFP), the participant or parent/guardian/caretaker of the participant shall sign the Preventing Dual Participation between the Commodity Supplemental Food Program and the WIC Program form stating she/he will not participate in the CSFP while participating in the WIC Program. This form is available through the state agency.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2015

Policy No. CR:02.0

Nondiscrimination

Purpose

To ensure that WIC program requirements/benefits are consistently applied to all applicants/participants regardless of race, color, national origin, age, sex, or disability and the civil rights of WIC applicants/participants are protected.

Authority

7 CFR Part 246.8; USDA FNS Instruction 113-2, Rev. 1; 25 TAC §31.29, USDA WIC Policy Memo 2012-2

Policy

Standards used for determining eligibility and participation in the WIC Program and for the delivery of services shall be the same for everyone regardless of race, color, national origin, age, sex, or disability. All materials concerned with outreach, nutrition education, program information, or participants' rights that are distributed to the public or posted for public viewing shall include a nondiscrimination statement.

Procedures

- I. At the time of each certification, the participant or parent/guardian/caretaker of the participant shall be asked to read, or be read to, the rights and obligations of a participant in the Program from every form requiring their signature.

- II. Copies of the "Fair Hearing" poster, in English and Spanish, shall be prominently displayed on the premises in the waiting area(s). For those clinics without a waiting area, display in the reception/entrance area.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2015

Policy No. CR:02.0

- III. The United States Department of Agriculture (USDA) poster, "And Justice for All," in English and Spanish, shall be prominently displayed on the premises in the waiting area(s). For those clinics without a waiting area, display in the reception/entrance area.
- IV. At the time of denial of participation or termination from the Program, each individual shall be informed in writing of the right to a fair hearing and of the method by which a hearing may be requested. Refer to Policies: **CR:03.0**, **CS:23.0**, **CS:29.0** for procedure and use of forms WIC-5 and WIC 35-1.
- V. When the LA has reached its authorized caseload and initiated a waiting list of applicants, an applicant's priority shall not be determined based on race, color, national origin, sex, or disability.
- VI. The following nondiscrimination statements are approved by USDA:
 - A. Long Version in English:

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2015

Policy No. CR:02.0

http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
- (2) fax: (202) 690-7442; or
- (3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.

B. Short Version in English: This institution is an equal opportunity provider.

C. Long Version in Spanish:

De conformidad con la Ley Federal de Derechos Civiles y los reglamentos y políticas de derechos civiles del Departamento de Agricultura de los EE. UU. (USDA, por sus siglas en inglés), se prohíbe que el USDA, sus agencias, oficinas, empleados e instituciones que participan o administran programas del USDA discriminen sobre la base de raza, color, nacionalidad, sexo, discapacidad, edad, o en represalia o venganza por actividades previas de derechos civiles en algún programa o actividad realizados o financiados por el USDA.

Las personas con discapacidades que necesiten medios alternativos para la comunicación de la información del programa (por ejemplo, sistema Braille, letras grandes, cintas de audio, lenguaje de señas americano, etc.), deben ponerse en contacto con la agencia (estatal o local) en la que solicitaron los beneficios. Las personas sordas,

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2015

Policy No. CR:02.0

con dificultades de audición o discapacidades del habla pueden comunicarse con el USDA por medio del Federal Relay Service [Servicio Federal de Retransmisión] al (800) 877-8339. Además, la información del programa se puede proporcionar en otros idiomas.

Para presentar una denuncia de discriminación, complete el [Formulario de Denuncia de Discriminación del Programa del USDA](#), (AD-3027) que está disponible en línea en: http://www.ascr.usda.gov/complaint_filing_cust.html y en cualquier oficina del USDA, o bien escriba una carta dirigida al USDA e incluya en la carta toda la información solicitada en el formulario. Para solicitar una copia del formulario de denuncia, llame al (866) 632-9992. Haga llegar su formulario lleno o carta al USDA por:

(1) correo: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;

(2) fax: (202) 690-7442; o

(3) correo electrónico: program.intake@usda.gov.

Esta institución es un proveedor que ofrece igualdad de oportunidades.

D. Short Version in Spanish: Esta institución es un proveedor que ofrece igualdad de oportunidades.

- VII. Materials, incentive items and public service announcements (PSA) developed, produced and/or purchased by LAs shall include an approved nondiscrimination statement in the appropriate language. Specific guidelines and exceptions are detailed below:
- A. A nondiscrimination statement is not required to be imprinted on Items such as cups, buttons, magnets and pens that identify the WIC program, when the size or configuration makes it impractical.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2015

Policy No. CR:02.0

- B. Radio and television PSAs are generally short in duration; therefore, the nondiscrimination statement does not have to be read in its entirety. Rather a statement such as "USDA is an equal opportunity provider and employer" is sufficient to meet the nondiscrimination requirement.
 - C. Nutrition education materials and breastfeeding promotion and support materials that strictly provide a nutrition message with no mention of the WIC Program, are not required to contain the nondiscrimination statement.
 - D. The short version of the nondiscrimination statement shall only be used when space prohibits the use of the long version.
 - E. The nondiscrimination statement shall be in print size no smaller than the text.
- VIII. The state agency's (SA) toll free number, 1-800-WIC-FOR-U (1-800-942-3678) shall be included on all materials.
- IX. If the LA develops materials with photographs or graphics of participants, to the extent possible, the photos/graphics shall depict participants of different races, colors, national origins, sexes, ages, and disabilities to convey the message of equal opportunity. A media release form shall be signed by all participants whose image is used for WIC materials.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective November 1, 2008

Policy No. CR:03.0

Fair Hearing Procedure for Applicants/Participants

Purpose

To ensure that any individual may appeal a state agency (SA) or local agency (LA) action which results in the individual's denial of participation, suspension, a claim against the individual for repayment of the cash value of improperly issued benefits, or termination from the program for any reason; and to ensure any individual has the opportunity to request and be afforded a fair hearing.

Authority

7 CFR Part 246.9; 25 TAC §31.29

Policy

The LA shall refer to the SA any individual who wishes to appeal a SA or LA action which results in the individual's denial of participation, suspension, a claim against the individual for repayment of the cash value of improperly issued benefits, or termination in the program.

Procedures

- I. The LA shall make every effort to assist an individual when that individual wishes to request a Fair Hearing. Within 60 days following the date of denial of participation, suspension, a claim against an individual for improperly issued benefits, or termination from the program, an individual may make an oral or written request for a "Fair Hearing." The request shall be addressed to:

Director, WIC Program
Department of State Health Services
P.O. Box 149347 Mail code 1933
Austin, Texas 78714-9317

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective November 1, 2008

Policy No. CR:03.0

Toll-free 1-800-942-3678 or
email: wicgeneral@dshs.state.tx.us

- II. Participants who are to be terminated during a certification period and who appeal within 15 days after notification of termination, shall continue to receive program benefits until a hearing decision is reached or the certification interval ends, whichever occurs first. An appeal after the 15 day time limit shall not result in continued benefits.
- III. Applicants who are denied benefits at the initial or subsequent certification may appeal the denial but shall not receive benefits pending the hearing decision.
- IV. If the decision is in favor of the appellant and benefits were denied or discontinued, benefits shall begin immediately.
- V. If the decision concerns disqualification from the program, and is in favor of the agency, as soon as administratively feasible, the LA shall terminate any continued benefits.
- VI. If the decision regarding repayment of benefits by the appellant is in favor of the agency, the SA or LA shall resume its efforts to collect the claim.
- VII. The procedures the SA shall follow are:
 - A. The hearing shall be scheduled within three weeks from the date the request is received. The State shall provide appellant with a minimum of ten days advance written notice of the time and place of the hearing and shall enclose an explanation of the hearing procedure with the notice.
 - B. The convenience of the applicant/participant shall be of prime consideration in the selection of the time and place of the hearing.
 - C. An impartial hearing official, who did not participate in making the decision under appeal, shall be designated.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective November 1, 2008

Policy No. CR:03.0

- D. The person appealing may be represented by an attorney or other person and shall have the opportunity to examine, prior to or during the hearing, the documents and records presented in support of the decision under appeal.
- E. During the hearing, the person shall have the opportunity to question or refute any testimony or other evidence and to confront and cross-examine any witnesses.
- F. The decision of the hearing official shall be based on the oral and documentary evidence presented at the hearing.
- G. The person appealing and any designated representative shall be notified in writing of the hearing official's decision within 45 days from date of the request for the hearing.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. CR:04.0

Civil Rights Compliance Reviews

Purpose

To ensure that nondiscrimination practices in all aspects of the delivery of program benefits to participants and potential participants exist; that nondiscrimination methods in collecting racial/ethnic data are used, and that local public notification procedures of WIC and its benefits are nondiscriminatory in nature.

Authority

7 CFR Part 15, 15A, 246.8, 246.19;
Title VI of the Civil Rights Act of 1964;
Title IX of the Education Amendments of 1972 as amended;
Section 504 of the Rehabilitation Act of 1973;
Age Discrimination Act of 1975;
Americans with Disabilities Act of 1990 (ADA);
WIC Civil Rights Policies

Policy

The state agency (SA) shall perform at least once every two years as part of a regularly scheduled monitoring review or as deemed necessary by the program, an evaluation of the local agency's (LA) compliance with federal and state nondiscrimination requirements.

Procedures

- I. The SA monitoring team shall review for compliance with the following civil rights policies:
 - A. **Policy CR:01.0**, Rights and Obligations of an Applicant/Participant;
 - B. **Policy CR:05.0**, Civil Rights Complaints;

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. CR:04.0

- C. **Policy CR:06.0**, Provision of Services to Individuals with Disabilities;
 - D. **Policy CR:08.0**, Civil Rights Training;
 - E. **Policy CR:09.0**, Collection of Racial/Ethnic Data; and
 - F. **Policy CR:10.0**, Providing Oral and Written Information to Non-English or Limited-English Speaking Persons.
- II. Any probable or identified non-compliance with the policies listed in Item I. above shall be reported to the LA for immediate corrective action.
- III. Any identified probable violation of a participant's civil rights such as, but not limited to, exclusion of persons from participation in the program, or inequitable allocation of food to eligible persons on the basis of race, age, sex, disability, color or national origin shall immediately be investigated by SA staff, and action taken in accordance with **Policy CR:05.0**.
- IV. United States Department of Agriculture (USDA) may review a LA for civil rights compliance as part of USDA's management evaluation process of the SA. LAs are selected by USDA.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective November 1, 2008

Policy No. CR:05.0

Civil Rights Complaints

Purpose

To ensure that any individual who feels there was a violation of his/her civil rights for any reason based on race, color, national origin, age, sex or disability may file a complaint. The individual alleging discrimination shall have the right to file a complaint within 180 days of the alleged discriminatory action to the local or state agency, Food and Nutrition Service (FNS) Regional office, or the Secretary of Agriculture. The state agency (SA) shall forward the complaint to the United States Department of Agriculture (USDA). The SA shall investigate employment complaints alleging discrimination, unless the complainant alleges the employment situation impacts the service to applicants/participants. In such cases, USDA may jointly investigate with the SA or conduct a separate investigation.

Authority

FNS Instructions 113-2, rev.1; 7 CFR Parts 15, 15a, and 15b; 246.8, 246.21;
Title IX of the Education Amendments of 1972

Policy

The local agency (LA) shall immediately refer by phone and follow by written correspondence to the SA any complaint from an individual who feels or believes that his/her civil rights have been violated by an action which results in the individual's denial of participation, harassment, suspension or termination from the program or any complaint in regard to any action taken by the LA which the individual believes is discriminatory and a violation of his/her civil rights. The SA shall immediately refer in writing any such complaint, received either from the LA or directly from an individual, to the Regional Civil Rights Director for USDA's Southwest Region.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective November 1, 2008

Policy No. CR:05.0

For the purpose of this policy, civil rights shall encompass those rights protected by Title VI of The Civil Rights Act of 1964; Section 504 of the Rehabilitation Act of 1973; 7 CFR Parts 15, 15a, 15b, The Age Discrimination Act of 1975; and the Americans with Disabilities Act of 1990 (ADA).

Definitions

Complainant: Any person or groups of persons that allege discrimination in the delivery of program benefits and services.

Discrimination: Any distinction of one person or a group of persons from others, either intentionally, by neglect, or by the effect of actions or lack of actions based on race, color, national origin, age, sex, or disability.

Investigation: Formal gathering of facts/information by the Office of Minority Affairs (an organizational unit under the Secretary of Agriculture) which has the authority to develop and administer a comprehensive program to assure equal opportunity for all persons in all aspects of USDA programs under civil rights laws and regulations.

Procedures

- I. When the LA or SA receives a complaint from any individual alleging discrimination, the complainant shall be notified that all such complaints shall be reported immediately to USDA for investigation. The individual shall also be provided with the following addresses and phone numbers should they choose to report the complaint on their own.

Contact: Director, WIC Program
Department of State Health Services
P.O. Box 149347 Mail code 1933
Austin, Texas 78714-9317
Toll free at 1-800-942-3678
email: wicgeneral@dshs.state.tx.us

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective November 1, 2008

Policy No. CR:05.0

and
Regional Civil Rights Director
USDA/Southwest Region
Food and Nutrition Service
1100 Commerce Street
Dallas, Texas 75242
(214) 290-9820

- II. Complaints may be presented either in written or oral form. If they are presented orally and the complainant declines to submit the allegations in written form, the person receiving the call shall write up the elements of the complaint by attempting to obtain as much of the following information as possible:
- A. name, address, and telephone number of the complainant or other means of contacting the complainant;
 - B. the specific location where the alleged discrimination occurred and name of the entity delivering the service or benefit;
 - C. the nature of the incident or action that led the complainant to feel discrimination was a factor or an example of the method of administration that is alleged to have a discriminatory effect on the public or potential and actual participants;
 - D. the basis on which the complainant feels discrimination exists (race, color, national origin, age, sex, or disability);
 - E. the names, titles, and business addresses of persons who may have knowledge of the discriminatory action; and
 - F. the date(s) during which the alleged discriminatory actions occurred, or if continuing, the duration of such actions.
- III. Complaints against a LA received by the SA shall not be reported to the LA per USDA instruction in order for USDA to determine whether or not an investigation is necessary.
- IV. The SA by their own initiative through on-site reviews shall ascertain whether any action by the LA is of a discriminatory nature which would

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective November 1, 2008

Policy No. CR:05.0

- constitute a violation of the requirements of Title VI of the Civil Rights Act of 1964 and other authorities as outlined in the policy statement above and refer such information to USDA for investigation.
- V. Anonymous complaints shall be accepted and handled as any other complaint.
 - VI. Throughout this process, every effort shall be made to maintain the confidentiality of the individual making the civil rights complaint. The identity of every complainant shall be kept confidential, except to the extent necessary to carry out the purposes of an investigation, hearing, or judicial proceeding.

Guidelines

Some examples of discrimination include:

- I. exclusion of eligible persons from participation in the program on the basis of race, color, national origin, age, sex, or disability;
- II. inequitable allocation of food to eligible persons on the basis of race, color, national origin, age, sex, or disability;
- III. issuance of food instruments or delivery of foods in a place, time, or manner that results in, or has the effect of, denying or limiting the benefits on the basis of race, color, national origin, age, sex, or disability;
- IV. selection of LAs for participation in the program which has the effect of, or results in, limiting the availability of the program benefits or services on the basis of race, color, national origin, age, sex, or disability;
- V. failure to apply the same eligibility criteria to all potential eligibles seeking participation in the program;

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective November 1, 2008

Policy No. CR:05.0

- VI. certification of potential eligibles as eligible to receive program benefits solely on the basis of race, color, national origin, age, sex, or disability; and

- VII. maintenance of a waiting list which makes distinctions on the basis of race, color, national origin, age, sex, or disability.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. CR:06.0

Provision of Services to Individuals with Disabilities

Purpose

To ensure that persons/applicants/participants with disabilities are not excluded from participating in the WIC Program and to optimize the provision of program information and nutrition education to individuals with disabilities.

Authority

7 CFR Part 15; Section 504 of the Rehabilitation Act of 1973; Americans With Disabilities Act of 1990 (ADA)

Policy

Each local agency (LA) shall make provisions to screen applicants with disabilities and provide all WIC services to all participants with disabilities. Program or nutrition education (NE) information is to be provided to persons with disabilities in the format they request in as timely a manner as possible, to include providing qualified interpreters for persons who are hearing impaired.

Definitions

Person with disabilities: any person who has a physical or mental impairment that substantially limits one or more life activities, has a record of such an impairment, or is regarded as having such an impairment.

Procedures

- I. Each LA shall conduct a self evaluation of program accessibility for each clinic utilizing the state agency's (SA) 504 Checklist. This checklist shall be maintained on file for three years. Once evaluated, there is no requirement for a reevaluation. New clinic sites, including

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. CR:06.0

those that relocated within the same building, shall have to be evaluated as they are opened. Each LA employing 15 or more WIC employees shall have at all times an employee designated as the 504 coordinator.

- II. If any clinic sites are not accessible to persons/applicants/participants with disabilities, a written local policy shall be developed that describes how services shall be provided to the disabled. These alternative service provisions may include but are not limited to: service at other clinic sites, in other accessible locations within the same clinic or by home visits. In choosing among available methods, the LA shall give priority to those methods that offer programs and activities to qualified disabled persons in the most integrated setting appropriate to obtain the full benefits of the programs.
- III. Some examples of physical or mental impairment are such conditions as: orthopedic, visual, speech and hearing impairments; cerebral palsy; epilepsy; muscular dystrophy; multiple sclerosis; cancer; heart disease; diabetes; mental retardation; emotional illness; drug addition and alcoholism. As such, the local policy shall be flexible enough to cover all types of disabilities and to allow reasonable accommodations. Examples of reasonable accommodations include: provision of interpreters for the deaf, readers or braille for individuals who are visually impaired, and other special learning equipment. These are all allowable costs and any questions shall be directed to the SA.
- IV. The intent of the Americans with Disabilities Act and Section 504 is for people with disabilities to receive information in the form they prefer. The LA shall provide nutrition education or other program information in the format preferred by the person making the request.
 - A. Examples of formats preferred by persons with disabilities include large print, audio tapes, captioned videos, Braille text, etc. This information shall be provided quickly, particularly because of the crucial need within a short timeframe for

Nutrition Services Department of State Health Services

Effective June 1, 2002

Policy No. CR:06.0

providing nutrition education to the pregnant person. There are some exceptions:

1. Same Information in Alternate Form: For example, a person who is hearing impaired may request that a nutrition education lesson on videotape be electronically captioned. If the same information content is available in another form, such as in a pamphlet, it may fulfill the request if the disabled person freely agrees to accept it.
 2. Undue Hardship: If it may be demonstrated that providing information in a particular format would impose an undue hardship, it need not be provided in that form. Undue hardship is defined as an action requiring significant difficulty or expense when considered in light of factors such as an employer's size, financial resources, and the nature and structure of its operation. Therefore, the Texas Department of Health (TDH), as a governmental entity of the State of Texas, is obliged in almost all circumstances to honor requests for accessible materials. Inconvenience or moderate difficulty or expense is not sufficient reason for failing to provide nutrition education or other information in the form desired by the disabled person requesting it.
- B. Contact the SA's Nutrition Education and Clinic Services Unit for approval to deny a request based on undue hardship.
- V. If alternative materials are requested by a disabled applicant or participant:
- A. It is preferable that such requests be fulfilled at the LA level. If this cannot be accomplished at the local level, or would unduly delay fulfillment of the request, the LA shall contact the SA for assistance.
 - B. The LA shall contact the SA for assistance within one business day of a request for a specialized accommodation of the requirements for a participant with disabilities. If the LA identifies the same need or request from several participants,

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. CR:06.0

the SA shall be notified that more than one client has such a need in order to facilitate production of specialized materials.

- VI. All LA staff shall be familiar with the use of "Relay Texas," a statewide telecommunications relay center operated out of Austin for the hearing-impaired. See Guidelines for more information.

- VII. Qualified interpreters for persons with hearing impairments shall be provided by the LA when requested by a person who is hearing impaired. Do not require the client to provide his/her own interpreter; however, a client may voluntarily choose to bring a friend or family member to interpret if the client prefers to do so.
 - A. TDH has an interagency contract with the Texas Commission for the Deaf for interpreter services for hearing impaired individuals. SA will pay for interpreter services for hearing impaired individuals who are receiving TDH services.
 - B. LAs shall need to call the local Council for the Deaf approximately 72 hours prior to the time when needed for preapproval of the service and to arrange the meeting time and location. The Council shall take care of the billing. LA staff shall be asked to sign a reporting sheet which shall verify the time used, the location, and the name of the program requesting the service.
 - C. Level III, IV, and V interpreters have the training to understand complex terminology and can reverse interpret properly, which is of major importance in interpreting for clinical/medical situations.
 - D. All interpreters shall comply with the regulations on confidentiality.

- VIII. An individual with disabilities has the right to choose to participate by use of the regular WIC methods for delivery of nutrition education and program information even when special materials are available.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. CR:06.0

Guidelines

- I. While both the SA and LA shall anticipate that such requests will arise, they shall respond to requests only as they arise. There is no need to produce nutrition education materials or other information in all possible formats in advance simply because the possibility exists that there may be requests in the future.

- II. Requests shall be handled in the simplest and most economical manner acceptable to the person making the request. For example, photocopying an existing brochure at a magnified scale to produce a large print document is a reasonable response. Recording the contents of a written lesson onto an audio cassette is also proper, if acceptable. Hiring an interpreter to sign the soundtrack of a video lesson to a hearing-impaired person is another example.

- III. Use of Relay Texas: This relay service uses a third-party operator who transmits messages back and forth between an individual who uses a TDD (a telecommunications device for the deaf) and another person who uses a regular telephone. A TDD uses typewriter-like equipment to produce and transmit typed text that may be received on another TDD machine.
 - A. To access Relay Texas call: 1-800-735-2989 (TDD)
1-800-735-2988 (voice)
 - B. There are no fees for using the relay service within your local calling area. Long distance calls made within Texas shall be billed at approximately a 50% reduction to allow for the additional time required to place a call through the relay process.
 - C. Calls are private, no record is kept of the contents of the conversation, and no information is shared with other people with the exception of any call involving suspected child abuse, elderly abuse, or disabled abuse which the Relay operator shall, by State law, report to the Department of Protective and Regulatory Services.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2011

Policy: CR: 07.0

**Provision of Services to Families with Special
Health Care Needs**

Purpose

To eliminate barriers to WIC services for families with special health care needs (FSHCN) and ensure nutrition education bears a practical relationship to the nutritional needs of the participant.

Authority

7 CRF Part 246.8, 246.117

Policy

Each local agency (LA) shall make accommodations and provide services for FSHCN.

Definitions

Individuals with special health care needs have conditions referred to as medically complex, medically fragile or severely disabled.

Medically Complex-Individuals with a serious, ongoing illness or a chronic condition that has lasted or is anticipated to last at least twelve or more months and requires daily, ongoing medical treatments and monitoring by appropriately trained personnel (which may include parents or other family members) and requires access to a complex array of services.

Medically Fragile-Individuals who have a serious, ongoing illness or a chronic condition that has lasted or is anticipated to last at least twelve or more months or has required at least one month of hospitalization, and requires daily, ongoing medical treatments and monitoring by appropriately trained personnel (which may include parents or other family members). Their care requires the routine use of a medical device or assistive technology to compensate for the loss of usefulness of a body function needed to participate in activities of daily living. These individuals live with an ongoing threat to their continued well being.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2011

Policy: CR: 07.0

Severe disabilities with special health care needs- A person with severe disabilities requires or has the potential to require the individual and/or their family/caregivers (in relationship to the individual's care) to access a complex array of services from public/private service providers in order to achieve optimal care for the individual. The access/coordination of these services may exceed the immediate capabilities of the family/caregivers. The services are anticipated to be lifelong or of extended duration and require individualized planning and coordination.

Families with special health care needs (FSHCN) have a family member who is a(n):

- A. Infant or child ranging in age from birth to age 21, who has:
 - 1. A health condition that has a biologic, psychological, and/or cognitive basis which has lasted or is virtually certain to last for at least a year; or
 - 2. A condition(s) which results in limitation of function, activities, or social roles in comparison with healthy age peers in the general areas of physical, cognitive, emotional, and social growth and development; or
 - 3. A need for medical care and related services, psychological services, or educational services over and above the usual for the child's age.
- B. Pregnant, breastfeeding or postpartum WIC participant with an acute or chronic medical condition that affects her ability to participate in WIC activities; or
- C. Primary caregiver with a special health care need: this person is not a WIC participant, but is a parent or guardian of someone enrolled in WIC. Due to their medical condition this person is unable to participate in WIC program activities; or
- D. Another family member with special health care needs. This person may be an older sibling, grandparent, etc. whose medical condition prevents the family from participating in WIC activities. For example, a family member with Alzheimer's disease who needs constant supervision and should not be left unattended while a mother takes her child to the WIC clinic.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2011

Policy: CR: 07.0

Procedures

- I. When FSHCN are identified, the family shall be considered as a unit and accommodations made accordingly. To determine the length of the physical presence waiver and documentation of physical presence, refer to Policy CS: 04.0 (see Procedure IV).

- II. When a parent/guardian/caregiver or participant is unable to be physically present, another adult may be authorized to provide the required certification documents and be the food benefit recipient. For an initial certification the authorized adult may choose a PIN for the WIC Lone Star card or for a sub-certification, the authorized adult shall come with an existing card and PIN. The authorized adult must provide the following:
 - A. A signed note from the parent/guardian/caregiver or participant informing the WIC program of the circumstances affecting their inability to be physically present in the clinic and the name of the person authorized to be the food benefit recipient (spouses do not need to bring a note);
 - B. Identification for himself/herself;
 - C. A completed WIC Income Questionnaire (WIC 35-3) and documents required for income screening signed by the parent/guardian/caregiver or participant.

- III. FSHCN shall be offered special accommodations to include:
 - A. Obtaining medical information from participant's health care provider (HCP):

Medical information including hematocrit or hemoglobin, height, weight, medical history, and/or dietary prescription can be provided by the HCP either verbally or in writing (e.g., fax, email) for certification purposes. (Refer to Policy CS: 17.0).
 - B. When Medical Information is not available at the time of certification:
 1. Waive the medical information and issue one month of benefits. The local agency shall obtain medical information from the HCP prior to next benefit issuance and file the information in the participant's record.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2011

Policy: CR: 07.0

2. When medical information is waived, the code "999 lbs/0 ounces" for weight and "99 0/8 inches" for length/height and 99.0 for hemoglobin or 99 for hematocrit shall be entered in the Texas WIN system to indicate that measurements cannot be obtained by the HCP.
- C. When Medical Information is not available and cannot be obtained due to the participant's medical condition (e.g. contractures, medically complex or fragile and/or severe disability), written verification shall be obtained from the HCP indicating that the participant is under their ongoing medical care. Medical information is waived for the certification period. Refer to III. B.2 when medical information is waived.
 - D. Offering coordination with social service agencies to provide transportation to, and shopping assistance at WIC vendors.
 - E. Offering participants who receive nutrition counseling from an outside source the opportunity to schedule benefit pick up when benefits may be issued most expeditiously and when it is most convenient for them.
 - F. Providing relevant nutrition education (NE) by the most appropriate method(s), as determined by the CA:
 1. Give the participant/guardian/caregiver the option of attending an NE class, completing an online lesson or a self-paced lesson. If the participant/guardian/caretaker refuses NE, enter NE code (SN-000-00) to exclude these participants from the performance measures count (refer to Policy NE: 01.0).
 2. Provide individual counseling by a staff registered dietitian (RD) knowledgeable in the area of special needs. Counseling may be provided in the office, by telephone, home visits or hospital visits. LAs are encouraged to be flexible in scheduling services to meet the family needs (i.e., scheduling appointments during off peak hours when feasible).
 3. Substitute nutrition education for counseling provided by a qualified outside source (i.e., Registered Dietitian (RD), Licensed Dietitian (LD), or gastroenterologist to serve as a

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2011

Policy: CR: 07.0

nutrition education contact (refer to Policy NE: 02.0).
Document this contact with NE code SN-000-50.

4. Refer the participant for individual counseling to a qualified outside source.

G. Referral shall be made to appropriate health and social service programs for which the participant may be eligible, (e.g., Medicaid, ECI, SSI, etc.)

IV. Document in the participant's record:

- A. Medical information taken verbally from the child's medical provider;
- B. The special health care needs of the family verbally provided by the participant. A statement from the physician is not required;
- C. Special accommodations/referrals that have been made and/or offered; and
- D. Name and credentials of the qualified outside source that is providing nutrition counseling, if applicable. This information may be taken verbally from the participant.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. CR:08.0

Civil Rights Training

Purpose

To ensure that local agency (LA) staff who come in contact with WIC applicants/participants are knowledgeable in the area of civil rights and that content of civil right training is in accordance with federal regulations.

Authority

USDA FNS Instruction 113-2, Revision 1 - Civil Rights Compliance and Enforcement in the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC).

Policy

LA employees shall receive civil rights training in appropriate time frames on specific content points.

Procedures

All new agency employees who come in contact with WIC applicants/participants, including those employees paid by WIC (temporary, part-time, full-time, and volunteers) and those employees not paid by WIC who work more than two hours per week for WIC, shall receive civil rights training within three months after employment start date. No further civil rights training shall be required for these employees until the next fiscal year, October 1st through September 30th. Staff such as agency administrators, janitors, etc. who do not come in contact with WIC applicants/participants are not required to receive civil rights training. All other existing staff shall receive civil rights training at least once each fiscal year, October 1st through September 30th.

Civil rights training shall contain at a minimum the following WIC specific information:

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. CR:08.0

- I. public notification and outreach procedures: See **Policies: OR:01.0, CR:02.0, CR:10.0;**
- II. rights and obligations: See **Policy CR:01.0;**
- III. racial/ethnic data collection and reporting: See **Policy CR:09.0;**
- IV. complaint handling procedures: See **Policies: CR:03.0, CR:05.0;**
- V. civil rights training requirements in this policy;
- VI. compliance review requirements: See **Policy CR:04.0;** and
- VII. provisions for applicants/participants with special needs on accommodations: See **Policies: CR:06.0, CR:07.0.**

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. CR:09.0

Collection of Race and Ethnicity Data

Purpose

To ensure that race and ethnicity data is collected to be used by Food and Nutrition Service (FNS) to determine how effectively the Program is reaching minority groups, and identify areas where additional outreach is needed. The state agency (SA) shall make use of such data for its internal civil rights monitoring.

Authority

USDA FNS Instructions 113-2, Rev. 1; 7 CFR Part 246.8

Policy

The local agency (LA) staff shall, at the time of initial certification, collect participation data by race and ethnicity category for each participant on the Program.

Procedures

- I. LAs shall ensure that actual participation data by category of women, infants and children and by race and ethnicity category is collected and entered into the Texas WIC Information Network (WIN) system.
- II. Participants shall be reported in one or more racial categories and include: 1) American Indian or Alaska Native, 2) Asian, 3) Black or African American, 4) Native Hawaiian or Other Pacific Islander and 5) White. See guidelines for definition of each category.
- III. Participants shall be reported in only one ethnic category, "Hispanic or Latino" and "Not Hispanic or Latino". See guidelines for definition of each category.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. CR:09.0

- IV. Self-identification by the participant at the time of **initial** certification is the preferred method of obtaining data. Participants shall be asked to self-identify their racial and ethnicity group only after it has been explained, and they understand, that the collection of this information is strictly for statistical reporting requirements, and has no effect on the determination of their eligibility to participate in the program.
- V. If a participant chooses not to self-identify her/his racial and/or ethnicity group, visual identification by a program staff member must be used to determine the participant's racial and ethnicity categories. Selection of one race is acceptable when local agency staff performs visual identification.
- VI. Analysis of this data will be used by the United States Department of Agriculture (USDA) and the SA to monitor compliance with Federal civil rights laws and to determine how effectively the Program is reaching minority groups and identify areas where additional outreach is needed.

Guidelines

I. **Race:**

American Indian or Alaska Native. A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachments.

Asian. A person having origins in any of the original peoples of the Far East, Southeast Asian, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.

Black or African American. A person having origins in any of the black racial groups of Africa.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. CR:09.0

Native Hawaiian or Other Pacific Islander. A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.

White. A person having origins in any of the original peoples of Europe, Middle East, or North Africa.

- II. ***Ethnicity: Hispanic or Latino.*** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2005

Policy No. CR:10.0

**Providing Oral and Written Program Information to
Non-English or Limited English Speaking Persons**

Purpose

To ensure that non-English speaking or limited-English speaking persons or parents/caretakers understand WIC Program services and are not discriminated against because they do not speak and/or read English.

Authority

7 CFR Part 246.7, 246.8

Policy

Where a significant proportion of the population of the area served by a local agency (LA) is composed of non-English or limited-English speaking persons who speak the same language, LA shall ensure that required WIC services are provided to such persons in the appropriate language orally and/or in writing.

Procedures

- I. At the time the appointment is made and there is an indication that interpreter services may be needed, LA staff shall ask if interpreter services will be needed and arrange for an interpreter.
- II. The LA shall ensure that there are bilingual staff members or interpreters available to serve non-English speaking and/or limited-English speaking persons.
 - A. In no circumstances shall the LA staff ask or require another applicant or participant to interpret for a client.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2005

Policy No. CR:10.0

- B. In no circumstances shall the LA staff allow a child, defined for purposes of this policy as a person under age 16, to interpret for a client.
 - C. Clients may choose to bring a friend or family member, age 16 or older, to interpret for them; however, under no circumstances shall a client be required to do so.
- III. The LA shall ensure that all applicable rights and responsibilities are read to non-English/non-Spanish speaking and limited-English/limited-Spanish speaking WIC participants or parents/caretakers of applicants/participants in the appropriate language.
- IV. LA-developed program materials shall be written in Spanish when LAs serve a significant proportion of the population that is Spanish speaking.

Guidelines

- I. In some cases, the LA may serve a number of persons possessing little or no ability to speak either English or Spanish. Upon request by the LA, the SA shall attempt either to assist the LA in developing program materials suitable to such a population, or refer the LA to other sources of assistance such as Language Line Services, local translator and interpreter associations, local churches and refugee resettlement organizations.
- II. Language Line Services may be accessed through the toll-free number 1-800-367-9559, enter client ID: 504020, access code: (local agency number).

CS - Certification

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2003

Policy No. CS:01.0

Eligibility Criteria For Program Participation

Purpose

To ensure Program benefits for those applicants in need.

Authority

7 CFR Part 246.7; 25 TAC Section 31.22

Policy

To be eligible for participation in WIC, applicants shall meet specific criteria defined by federal regulations, state agency (SA) policy and rules.

Procedures

- I. Individuals shall meet the following categorical criteria to be eligible for participation in WIC:
 - A. Women shall be either pregnant, or within six months postpartum if not breastfeeding, or within one year postpartum if breastfeeding. Proof of abortion, miscarriage, neonatal death or pregnancy is not a requirement for certification.
 - B. Children shall be younger than 5 years of age. Written proof is not required.
- II. Applicants shall meet the requirements for residence as defined in **Policy CS:06.0**.
- III. Applicants shall not exceed the income standards defined in **Policies: CS:07.0, CS:08.0, CS:09.0**.
- IV. Applicants shall have one or more nutritional risk conditions as defined in **Policy CS:18.0**.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2003

Policy No. CS:01.0

- V. Applicants shall be physically present at each WIC certification or qualify for an exception as defined in **Policies: CS:4.0, CR:07.0**.
- VI. If the applicant meets all the above-referenced criteria for eligibility, she/he may be certified and enrolled in the Program, regardless of citizenship status, as long as there is a caseload opening. Citizenship is not required for program eligibility.
- VII. Local agencies (LAs) shall not limit WIC participation nor deny WIC participants because a WIC applicant or participant does not wish to partake of available health services. For example, LA cannot require a child to be screened in the LA's well child clinic in order to get WIC benefits.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2009

Policy No. CS:02.0

Timeframes for Processing Applicants

Purpose

To provide program benefits expediently to individuals in nutritional need.

Authority

7 CFR Part 246.7 (f) (2) (ii)

Policy

The local agency (LA) shall process applicants within specific time frames.

Definitions

Processing means screening, determining (in)eligibility, notifying applicants of their (in)eligibility or placement on a waiting list, and/or issuing food instruments to eligible applicants.

Migrant farm worker means an individual whose principal employment is in agriculture on a seasonal basis, who has been so employed within the last 24 months, and who establishes, for the purpose of such employment, a temporary abode.

Procedures

- I. At initial certification, applicants shall be processed within the following time frames:
 - A. Pregnant women, infants under six months, and members of migrant household who state they shall be leaving the LA's service area within 30 days, shall be processed within 10 calendar days of the date they first request program benefits. (Under certain circumstances, the state agency (SA) shall

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2009

Policy No. CS:02.0

- consider extending the 10-day processing time frame to a maximum of 15 calendar days. LAs shall submit, for SA approval, a written request with sufficient justification for an extension.)
- B. All other applicants shall be processed within 20 calendar days of the date they first request program benefits.
- II. The processing time frame begins when the individual visits the LA during clinic/office hours to make an oral or written request for program benefits. This date shall be the "Date of First Visit" in person on the Quick Intake Screen of the Texas WIC Information Network (WIN) system.
- A. If client visits the clinic in person to request an appointment, check "Y" on the Quick Intake Screen.
 - B. If client phones for an appointment, check "N" on the Quick Intake Screen.
- III. Accurate records of the "Date of First Visit" in person shall be kept.
- A. If the LA is unable to make appointments in the computer at the time requested, Form WIC-37, Quick Intake/In-State Transfer Form, shall be completed. The LA shall enter into the computer the date the appointment was made.
 - B. A LA may elect to develop its own written local policy on the procedure that shall be used to document the "Date of First Visit." The policy shall be specific and be kept for audit/review.
 - C. When an appointment is offered within the appropriate timeframe but the applicant cannot make the appointment, the local agency shall document the offer in the record.
- IV. The WIN system will automatically document the date services were scheduled for subsequent certifications; however, the LA shall note exceptions to the required processing timeframes on the participant's shopping list.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2009

Policy No. CS:02.0

Appointments for subsequent certification shall be on or before the certification expiration date of the current certification period.

- A. When an appointment is made after the certification expiration date of the current certification period, the LA shall document the reason why this occurred on the Shopping List retained in the clinic.
 - B. Acceptable reasons for making an appointment for subsequent certification past the certification expiration date of the current certification period include, but are not limited to, requests by clients.
- V. Unless the participant has already received benefits for the month, the LA shall issue benefits to participants at the same time they are notified of their eligibility. If eligibility is determined while the participant is at the LA, the participant shall be notified and issued benefits at that time.

Guidelines

- I. Refer to the Texas WIN Reference Manual for instructions on using the Quick Intake Screen.
- II. Although policy addresses requirements for visits in person, the expectation is that appointments will be made within established timeframes for telephone requests as well.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. CS:03.0

Appointment System

Purpose

To ensure that full and complete appointment logs are available to answer all questions related to the date of first visit (DOFV) of each applicant; to capture applicant information in a timely manner and avoid duplication of collection of data. To increase participation in the WIC Program by pregnant women, especially those in the early stages of the pregnancy.

Authority

7 CFR Part 246.7 (e) (2)

Policy

The local agency (LA) shall utilize the Texas WIC Information Network (WIN) appointment system to record applicant appointment information. The LA shall attempt to contact each pregnant woman who misses an appointment to apply for participation in the WIC Program, in order to reschedule the appointment, unless the phone number and the address of the woman are unavailable.

Procedures

- I. Refer to the Texas WIN Reference Manual for specific instructions on utilizing the WIN appointment system to record applicant appointment information.
- II. Each LA shall attempt to contact each pregnant woman who misses an appointment to apply for participation in the WIC Program in order to reschedule the appointment, unless the phone number and the address of the woman are unavailable.
 - A. If contact cannot be made by phone, a postcard or letter shall be sent offering a new appointment.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. CS:03.0

- B. Every attempt shall be made to explain the benefits of the Program and to assist the applicant in determining an appointment time which is mutually acceptable.

Guidelines

- I. It is recommended, but not required, that LAs remind applicants of their appointments when the time interval is greater than two weeks. The time interval is the time between when the appointment is made and the actual time of the appointment.
- II. FoxFire reports may be run to show missed appointments. These reports can be accessed via the WIC website at http://www.dshs.state.tx.us/wichd/hd/fox_lookup.shtm.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective November 1, 2012

Policy No. CS:04.0

Physical Presence

Purpose

The physical presence of an individual at certification is basic to WIC Program effectiveness. The physical presence requirement not only improves program effectiveness, program accountability and integrity, it also facilitates the referral process to other needed health and social services.

Authority

7 CFR Part 246; 25 TAC §31.22

Policy

Individuals seeking participation in the WIC Program shall be physically present at the initial WIC certification and the subsequent certifications, except in certain limited circumstances.

Definitions

Applicant: A pregnant, breastfeeding or postpartum woman; infant; or child who is applying to receive WIC Program benefits and includes individuals who are subsequently applying after the expiration of a certification period.

Individuals with Disabilities: Individuals who have a physical and/or mental condition that causes substantial and ongoing functional limitations in one or more of the following areas: mobility, self care, communication/social interaction, learning, self-direction, vision, hearing, capacity for independent living, or capacity for economic self-sufficiency.

A person with severe disabilities requires or has the potential to require the individual and/or his family/caregivers (in relationship to the individual's care) to access a complex array of services from public/private service providers in order to achieve optimal care for the individual and the

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective November 1, 2012

Policy No. CS:04.0

access/coordination of these services may exceed the immediate capabilities of the family/caregivers. The services are anticipated to be lifelong or of extended duration and require individualized planning and coordination. Refer to Policy CR:07.0 Provision of Services to Families with Special Health Care Needs.

Procedures

- I. All applicants/participants shall be physically present at initial and subsequent certifications. This includes pregnant, breastfeeding, and postpartum women, infants and children less than five years of age. LA staff shall document the physical presence of an applicant/participant on the SIF by checking the "Yes" or "No" box.
- II. Newborn infants, less than one month of age may be allowed to be certified without being physically present if all required documentation is available. If the infant is not physically present, LA staff shall mark the "No" box on the SIF. The parent/caregiver shall present the infant to WIC staff by the infant's six-week birth date. The staff person witnessing the infant's physical presence shall initial and date in the "For WIC Official Use Only" section of the SIF.

For certification purposes the birth weight and length of an infant shall be accepted when the infant is less than 2 weeks old (refer to Policy CS:17.0 Procedure III. B.).

- III. Exceptions for providing reasonable accommodations of disabilities for women, infants, and children at certification and subsequent certifications;
 - A. An applicant or parent/caretaker of an applicant who is a qualified individual with disabilities and is unable to be physically present at the WIC clinic because of his/her disabilities may be certified and subsequently certified without being physically present. Conditions which meet this standard are:

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective November 1, 2012

Policy No. CS:04.0

1. a medical condition that necessitates the use of medical equipment that is not easily transportable;
 2. a medical condition that requires confinement to bed rest; or
 3. a serious illness that may be exacerbated by coming into the clinic.
 4. Individuals or Families with Special Health Care Needs (FSHCN) refer to Policy CR:07.0 Procedure I and II.
- B. The height, weight, and blood work shall be obtained from the health care provider if available. Refer to Policy CS:17.0 Procedure III. A.
- C. A verbal declaration of exception status is acceptable and shall be documented in the client's record.

IV. Physical Presence Waiver

- A. The Certifying Authority (CA)/WIC Certification Specialist (WCS) shall complete the Physical Presence Waiver section on the Supplemental Information Form (SIF) for each applicant or participant that is not physically present for his/her current certification. The appropriate condition shall be marked to indicate the reason for the physical presence waiver.
- B. Current certification period: An applicant/participant may be exempt from the physical presence requirement for the current certification period. The Certifying Authority (CA)/WIC Certification Specialist (WCS) shall assess and document the situation on the SIF. For example, the participant may have an infectious disease such as chickenpox or a medical condition that would prevent the participant from being physically present (see procedures III. of this policy).
- C. When the CA/WCS signs the "For WIC Official Use Only" section of the SIF WIC 35-1, he/she is authorizing the physical presence waiver.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2012

Policy No. CS:05.0

**Identification of a WIC Applicant/Participant and
Parent or Guardian**

Purpose

To ensure program benefits are provided to the correct individual.

Authority

7 CFR Part 246.7; 25 TAC §31.22

Policy

The local agency (LA) staff shall check the identification of each applicant/participant and parent/guardian applying on behalf of an infant and/or child at each certification and when issuing benefits other than at certification.

Procedures

- I. At each certification, LA staff shall request and check the identification of each applicant and parent/guardian. Documentation of identification shall be entered on the Family Certification Form, WIC-35, and the appropriate Participant Form. A copy of the document(s) used for proof of identity shall not be kept in the applicant's/participant's file.
 - A. The following shall be accepted as documentation of identity regardless of the age of the document. A copy of the original document or proof obtained by viewing an electronic device is acceptable.
 - 1. Birth certificate;
 - 2. Hospital records (for example, crib card, hospital band, discharge papers);
 - 3. Baptismal certificate;
 - 4. Marriage license;

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2012

Policy No. CS:05.0

-
5. Driver's license;
 6. WIC Lone Star Card or other States' WIC Identification Cards;
 7. Immunization card;
 8. School/employee Identification card with picture;
 9. Military Identification card;
 10. Official Identification with picture;
 11. Passport/immigration records; or
 12. Other - the following shall be accepted as proof of identification, checked as "Other" and the blank filled in on the WIC-35:
 - a. Medicaid, SNAP, TANF letters/forms (the applicant must be identified as the recipient of the program);
 - b. Health care identification
 - c. Employee check stub with name printed on it;
 - d. Voters registration card;
 - e. LA clinic card;
 - f. Social Security Administration letters;
 - g. Social Security card;
 - h. Housing/rental agreement;
 - i. Loan papers from Bank/Finance Company, etc;
 - j. Property tax receipt;
 - k. Self Declaration Form; or
 - l. Foster Placement Letter
 - m. Your Texas Benefits Card (YTBC)
- B. If an LA wants to use other documents to establish identity, the LA shall develop a policy and submit it to the state agency (SA) for approval prior to implementation. The policy shall be available for audit/review.
- II. Applicants or parents/guardians who may require an exemption include victims of theft, loss, or disaster.
- A. Applicants or parents/guardians applying on behalf of a child shall complete a Self Declaration Form.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2012

Policy No. CS:05.0

- B. The Self Declaration Form shall be filed in the client's record.
- III. When issuing benefits, other than at certification, request the WIC Lone Star card. If the participant or parent/guardian does not bring the WIC Lone Star Card, he/she shall be rescheduled within the month to return with his/her card. Benefits cannot be issued without the WIC Lone Star Card.
- A. Confirmation that the WIC Lone Star Card belongs to the participant will be verified by the participant's entry of the correct personal identification number (PIN) in the PIN checker or the reader/writer equipment.
 - B. If the participant has permanently lost the WIC Lone Star Card, refer to **Policy CS: 26.0**.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2012

Policy No. CS:06.0

Residency as a Certification Requirement

Purpose

To ensure that those applying for WIC benefits reside within Texas.

Authority

7 CFR Part 246.2, 246.7; 25 TAC §31.22

Policy

At certification, the applicant shall provide proof of residency within Texas.

Definitions

Residency: location or address where applicant routinely lives or spends the night.

Homeless individual means a woman, infant, or child who lacks a fixed and regular nighttime residence; or whose primary nighttime residence is:

- I. a supervised publicly or privately operated shelter (including a welfare hotel, a congregate shelter, or a shelter for victims of domestic violence) designated to provide temporary living accommodation;
- II. an institution that provides a temporary residence for individuals intended to be institutionalized;
- III. a temporary accommodation in the residence of another individual not exceeding 365 days; or
- IV. a public or private place not designated for, or ordinarily used as, a regular sleeping accommodation for human beings.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2012

Policy No. CS:06.0

Homeless facility means the following types of facilities which provide meal service:

- I. a supervised publicly or privately operated shelter (including a welfare hotel or congregate shelter) designed to provide temporary living accommodations;
- II. a facility that provides a temporary residence for individuals intended to be institutionalized; or
- III. a public or private place not designed for, nor normally used as, a regular sleeping accommodation for human beings.

Institution means any residential accommodation which provides meal service, except private residences and homeless facilities.

Family means a group of related or non-related individuals who are living together as one economic unit, except residents of a homeless facility or an institution shall not all be considered as members of a single family.

Procedures

- I. At each certification, the WIC applicant/parent/guardian shall provide proof of residency to verify the family resides within Texas before being screened for WIC services. Only one document is required for all applicants.
 - A. Residency verification shall be documented on the Family Certification Form/WIC Program Income Screening Form (WIC-35). Refer to **Policy CS:14.0** for instructions on completing the WIC-35.
 - B. A copy of the document used for proof of residency shall NOT be kept in the applicant/participant's file unless the proof is a WIC form or shelter documentation.
- II. Written proof (including the applicant/participant's name and street address/rural route number, city, state and zip code) is the preferred method of documentation. Documents addressed to the applicant's

Nutrition Services Department of State Health Services

Effective July 1, 2012

Policy No. CS:06.0

spouse are acceptable. Minors applying for themselves and reside with their parents may present documents addressed to the parent. Documents with a P.O. Box cannot be accepted including Gateway documents. The applicant may present a copy of the original document or proof obtained by viewing an electronic device or a printout for bills paid online. The following documents shall be accepted as proof of current residency:

- A. **utility bill/credit card bill;**
- B. **rent receipt/rental agreement/letter from landlord or apartment manager;**
- C. **business letter/bill**
 - 1. any business letter (not from WIC) or any part of a business letter such as an envelope or enclosures with address or foster placement letters, bills other than utility or credit card,
 - 2. adjunctive eligibility forms from Gateway Programs: Temporary Assistance to Needy Families (TANF), Medicaid, and Supplemental Nutrition Assistance Program (SNAP), formally known as Food Stamps including phone or on-line computer system inquiries by the LA to gateway programs (See Policy CS:08.0). No P.O. Boxes can be accepted.
- D. **letter or WIC-RO2** from the person with whom the applicant(s) lives with and proof of residency:
 - 1. If the WIC applicant(s) lives with someone else and has no written proof of their residence, the individual with whom the family is living may provide a signed written statement or complete Section C of the Residency Form (WIC-RO2) confirming the living arrangements.
 - 2. Proof of residency (any documents accepted in this policy) with the individual's name and address shall also be provided.
- E. **voter registration card;**
- F. **property tax receipt;**
- G. **map and WIC-RO2** if no written proof of address exists.
 - 1. If no written proof exists and the family's residence does not have a designated address, the family may show a

Nutrition Services Department of State Health Services

Effective July 1, 2012

Policy No. CS:06.0

- specific location of the applicant's physical residence on a map or hand draw a map showing the location of the residence to document residency.
2. The applicant shall complete Section B of the Residency Form (WIC-R02) and attach the map. A home visit is recommended within 60 days after certification, but is not required. This is the only circumstance where Section B of the WIC-R02 shall be used.
- H. **documentation by a third party or WIC-R02;**
If an applicant is homeless or indicates that no one in the household has proof of residency, a third party can provide a signed statement to confirm the family's living arrangements or complete Section A of the Residency Form (WIC-R02).
1. Examples of a third party include, but are not limited to: staff of a church, social service agency, legal-aid, lawyer, school staff, public health nurse, doctor, and elected public officials.
 2. The third party cannot be an employee of the WIC Program, individual related to the applicant, or a member of the applicant's household. The staff shall confirm this information verbally with the applicant.
- I. **shelter documentation;** if the family lives in a temporary shelter, the family may apply for WIC services if:
1. The family can provide documentation of residency in the shelter; and
 2. The shelter meets the following requirements:
 - a. WIC foods shall not be used in communal feedings.
 - b. The shelter shall not accrue financial or in-kind benefit from the applicant's participation in WIC.
 - c. Proxies of participants residing in a homeless facility/institution may pick up and redeem food benefits in bulk for multiple participants residing in the shelter. The LA shall ensure that adult participants are allowed to participate in the process of picking up and transacting food instruments to the greatest extent possible, within the homeless

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2012

Policy No. CS:06.0

- facility/institutional framework, so that they are aware of the foods prescribed for them as well as the intended benefits of such foods.
- d. The shelter shall not place constraints on the ability of the applicant to partake of the WIC food instruments and all associated WIC services.
3. The LA shall ensure that the shelter meets the requirements. This may be done by having a signed letter of agreement from the shelter or by calling the shelter and verifying this information. If the LA does not have a signed letter of agreement from the shelter, document in the family record how the shelter met the criteria.
- J. **homeless (WIC-19E)** A homeless family may apply for WIC services if the family's living arrangements can be documented.
 1. If the homeless family is unable to provide documentation from a third party verifier (see Procedure II. H.), a signed statement from the family attesting to their living conditions/situation may be provided using the Residency Verification Form for Homeless Family (WIC-19E).
 2. A site visit is recommended within 60 days after certification, but is not required.
- III. If the family lives in an institution, the institution shall meet the same requirements as participants living in shelters (see Procedure II.I.).
- IV. Applicants who may require an exemption include a victim of theft, loss, or disaster.
- A. Applicants or parent/guardian, applying on behalf of a child, shall complete a Self Declaration Form (no stock number - refer to WIC Policy Appendix, Required Forms, CS-Certification).
 - B. The Self Declaration Form shall be filed in the client's record.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2012

Policy No. CS:06.0

- V. Families who do not meet the residency requirements (live outside of Texas) shall receive written notification of ineligibility (refer to **CS:23.0**).

Nutrition Services Department of State Health Services

Effective August 1, 2015

Policy No. CS:07.0

Income Screening as a Certification Requirement

Purpose

To provide documentation that an applicant's income eligibility was determined accurately.

Authority

7 CFR Part 246.7; 25 TAC §31.22

Policy

When determining program eligibility, the local agency (LA) shall determine and document the applicant's total household gross income and household size at each certification.

Applicants shall provide all income received by the household during the month (30 days) prior to the date of application to the WIC Program. If true income is not reflected, then income from the previous 12 months shall be considered. If the income assessment is being done prospectively, e.g. the sole support of the family was laid off and was authorized to receive unemployment benefits for the next six months, "current" refers to income that will be available to the family in the next 30 days. If the applicant is currently a recipient of Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance to Needy Families (TANF), or Medicaid, refer to **Policy CS:08.0**.

Instream migrants with an expired Verification of Certification (VOC) shall be considered income eligible, provided their income is redetermined once every 12 months.

LAs are required to verify all information that is questionable or when verification is specifically required by this policy. In addition, an LA may

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2015

Policy No. CS:07.0

require verification of any information to ensure income eligibility is determined accurately.

Definitions

Household: all persons, related or unrelated, living together in the same dwelling, with the exception of the following special situations: pregnant woman, foster child, individuals who qualify as a separate economic unit, and residents of a homeless facility or other residential institution.

Income: Gross income earned by all members of a household, including any amount received or withdrawn from any source, including savings, unless excluded from the definition of income by federal regulations as described in **Policy CS:09.0**. Exception: for farmers and self-employed individuals, use net income - the income after the deduction of business expenses.

In-kind benefit: Benefits received by the household, which are provided in the form of goods and/or services. Example: woman resides with another family and provides childcare in exchange for food and shelter. This in-kind value is excluded from the income determination.

Instream migrants: Migrant farm workers who follow a route or agricultural work from state to state and who are currently not at their home base.

Verification of income: A process whereby the information presented by an applicant as documentation of income is validated through an external source of information other than the applicant.

True income: an accurate reflection of household income within the previous 30 days prior to the date the application for WIC benefits is made.

Current income: all household income that was available in the previous 30 days prior to the date the application for WIC benefits is made.

Prospective income: all household income that will be available in the next 30 days.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2015

Policy No. CS:07.0

New Money: Money received within the previous 30 days and not received on a regular basis.

Procedures

- I. At each certification, WIC applicants or parent/guardians applying on behalf of a child shall declare the number of persons that comprise the applicant's household size and provide acceptable documentation of the amount of ALL gross income received by each member of the household, unless the applicant is adjunctively income eligible, in which case income eligibility is determined under the provisions of **Policy CS:08.0**.
 - A. The WIC Income Questionnaire (WIC Form 35-3) shall be completed at each certification by the applicant or parent/guardian. The form shall be completed prior to income determination and filed in the applicant's record with the Family Certification Form/WIC Program Income Screening Form (WIC-35). (See **Policy CS:14.0**)
 1. If income has been documented for one family member within the last 30 calendar days, it may be used for other family members being certified within that 30 day period. Staff shall verbally verify income has not changed.
 2. The applicant or parent/guardian shall sign and date the WIC-35-3 near the original signatures and dates from the previous income determination.
 - B. Use the WIC-35 to document total household size and income. The staff person who completes this information shall sign and date the WIC-35 using their official signature. Refer to **Policy CS:14.0** for instructions on completing the WIC-35. One WIC-35 may be used to document income and household size for two or more members of a household. This form shall be easily accessible for audit/review.
 1. Income shall be documented each time a family member is certified (except for instream migrants). If income has been documented for one family member within the last 30 calendar

Nutrition Services Department of State Health Services

Effective August 1, 2015

Policy No. CS:07.0

days, it may be used for other family members being certified within that 30 day period. Staff shall verbally verify income has not changed and both staff and applicant or parent/guardian or authorized adult shall sign and date the WIC-35 near the original signatures and dates from the previous income determination.

2. The 30-day period does not apply to applicants who were adjunctively income eligible. (Refer to **Policy CS:08.0**)
- C. A copy of the income document(s) shall be kept in the applicant's file containing the WIC-35.
- II. WIC applicants shall provide acceptable **written** documentation of the amount(s) of **all** income received by **each** member of the household. Amounts should reflect all usual gross income. Documentation shall be dated within the previous 30 days from the date of the eligibility determination. The applicant or parent/guardian may present a copy or facsimile (fax) of the original document. Exceptions are identified in this policy where written documentation is not required. All documents within the previous 30 days shall be requested from each source of income (e.g. weekly pay requires the previous four paycheck stubs). Acceptable documents for proof of income include:
- A. **Paycheck stubs-** with the current amount of gross earnings
1. The paycheck stub(s) must indicate the pay period or pay date and employee's name.
 - a. Weekly pay- previous four paycheck stubs are required.
 - b. Bi-weekly/every 2 weeks- previous two paycheck stubs are required.
 - c. Twice Monthly- Previous two paycheck stubs are required.
 - d. Monthly- most recent paycheck stub.
 2. Do not accept a paycheck stub that has a different name than the applicant's or household member's name. Allow applicant to complete a WIC-32, Applicant's Statement of Farm/Self-Employment Form. (See II. E. in this policy)
 3. The employer may be contacted, with the applicant's or parent/guardian's permission, to clarify information on the

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2015

Policy No. CS:07.0

paycheck stubs. Information from the employer shall be used to determine income and documented on the WIC-35 form.

- B. **Signed statement from employer-** (business letterhead is not required). The statement shall reflect current gross income, the pay period, and/or the pay date within the previous 30 days.
- C. **WIC-19a-** Assistance Documentation Form.
1. Section I shall be completed when:
 - a. money or financial support is received from a source outside the household such as parents, relatives, or friends. If money is received occasionally, refer to Procedure II. J. of this policy.
 - b. there is more than one provider of assistance, each provider shall complete a separate WIC-19a.
 - c. the applicant receives financial support in addition to their wages from someone who does not reside with them.
 2. Section II shall be completed by a third party when no one in the household has a source of income and the household does not receive outside assistance.
 - a. Examples of a third party include but are not limited to: staff of a church or school, social service agency, legal-aid, lawyer, public health nurse, doctor, and elected public officials.
 - b. The third-party cannot be an employee of the WIC Program, an individual related to the applicant/parent/guardian, or a member of the applicant's household. The staff shall confirm this information verbally with the applicant.
- D. **WIC-19b-** Employment Verification Form is acceptable, if the applicant and/or members of the applicant's household do not have acceptable documentation of wages. LA staff should only clarify information that is provided on the form by the employer and not add information that is missing. An applicant who has physically started a new job but has not received his/her first paycheck shall have a WIC-19b completed or have a written statement from their employer. If the employer refuses to complete the WIC-19b the

Nutrition Services Department of State Health Services

Effective August 1, 2015

Policy No. CS:07.0

self-declaration form shall be used, refer to Procedure IV. C. in this policy.

E. **WIC-32-** Applicant's Statement of Farm/Self-Employment Form, shall be completed if an applicant or a member of the household is self-employed and does not have the most recent IRS tax return (See section II. G. in this policy). This form may also be used if an applicant is paid in cash and the employer will not provide documentation, or the applicant cannot provide a paycheck stub(s) in his/her name.

F. **Bank statement-** Applicant can provide checking or savings statement if they declare they are living off savings or checking account. The checking or savings account statement must be reflective of current income within the previous 30 days.
Example: An applicant is living off their savings. The amount withdrawn monthly to pay for their expenses plus a month's worth of interest shall be considered as their monthly household income. The total dollar amount in savings is not to be considered. A bank statement can be used as documentation as long as the date on the statement is from the previous 30 days.

Total amount of savings:	\$30,000
Amount withdrawn to cover monthly expenses for one month:	\$ 1,150
One month of interest	\$ 25
Total monthly income: $\$1150 + \$25 =$	\$ 1,175

G. **Tax records (IRS 1040)** - Most recent filed IRS tax form. If the applicant or household member has not filed for the most recent tax year, then the most recently filed tax form is required. Staff shall use the adjusted gross income figure indicated on the completed Federal tax return for individuals that are not self-employed. If applicant indicates that they are Self-Employed the adjusted net income figure indicated on the completed Federal tax return should be used. Staff shall ask applicant/parent/guardian to

Nutrition Services Department of State Health Services

Effective August 1, 2015

Policy No. CS:07.0

verbally confirm the tax record reflects current income and retain a copy of the section of the documents used to determine income.

- H. **Foster child placement letter**- All foster children must be screened for income eligibility, see **Policy CS: 11.0** Certification of Foster Children. A verbal declaration of the amount paid to the family for the care of the foster child shall be obtained if the amount is not indicated on the placement letter. If a foster child receives income, whether from a job or outside financial resource, it must be counted in the income determination and documented on the WIC-35. Income screening shall be done at every certification for foster children, even if they have not changed foster homes. Mark "other" on the WIC-35 and record "placement letter" in the space provided.
- I. **Child Support and/or Alimony**- Documentation shall be obtained **in the following order** (i.e., staff shall obtain the highest level of documentation, if it exists, with #1 constituting the highest level and so forth):
1. Court order, divorce decree or information from Office of Attorney General (800-252-8014);
 2. Receipts or copies of checks;
 3. Signed and dated statement from the person providing support; or
 4. Signed and dated statement from person receiving support.
- Mark "other" on the WIC-35 and record "child support or alimony" in the space provided.
- J. **Lump Sum/New Money**- New money is money received within the previous 30 days and not received on a regular basis. Examples include, but are not limited to: gifts, inheritance, bonuses, and lottery winnings. The lump sum/new money received within the previous 30 days shall be documented under the Different pay frequency/Annual column on the WIC-35. Mark

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2015

Policy No. CS:07.0

"other" on the WIC-35 and record the type of new money received in the space provided.

- K. **Other-** The following are acceptable as income and should be marked "other" on the type of Non-Gateway Income Method used on the WIC-35. Examples include, but are not limited to:
1. Workers Compensation letters, or Unemployment Insurance Benefits;
 2. Severance, pension payments, or retirement benefits;
 3. 401K or other investments; and
 4. Social security and Supplemental Security Income (SSI) award letter.
 5. Student Financial aid
- III. An applicant's current rate of income shall be utilized to calculate income eligibility. For exceptions, refer to Procedure IV.
- A. Applicants shall provide all income received by all household members within the previous 30 days from date of income screening. When income varies, (see IV.B) calculate the average gross income of all paycheck stub(s).
- B. Documentation of income that changes only once per year, e.g., Social Security and scholarship/grant award letters. These documents may be used during the entire year the letter covers if reflective of current income within the previous 30 days.
- C. Households with one frequency of income, e.g. weekly, every 2 weeks, twice monthly, monthly.
1. Add the incomes of all household members together.
 2. The calculations should be exact without any rounding.
 3. Compare the **total** of all the income to the appropriate household size and pay frequency in the WIC income guidelines.
 4. When the applicant's household meets the WIC Income Guidelines, get monthly dollar amounts to enter in TWIN with the following calculations:

Nutrition Services Department of State Health Services

Effective August 1, 2015

Policy No. CS:07.0

- a. If pay is weekly, multiply by 52, divide by 12, drop the change, and enter in TWIN.
 - b. If pay is every 2weeks, multiply by 26, divide by 12, drop the change, enter in TWIN.
 - c. If pay is twice a month, multiply by 24, divide by 12, drop the change, and enter in TWIN.
 - d. If pay is monthly, drop the change, enter in TWIN.
 - e. If pay is yearly, divide by 12, drop the change, and enter in TWIN.
5. If the applicant does not meet the WIC Income Guidelines refer to **CS:23.0**, Notification of Ineligibility, Termination or Expiration of Eligibility.
- D. Households with more than one pay frequency e.g. weekly, every 2 weeks, twice monthly, monthly
1. Convert all the income amounts to annual income using the following calculations:
 - a. when paid by the week – multiply by 52
 - b. when paid every 2 weeks – multiply by 26
 - c. when paid twice a month – multiply by 24
 - d. when paid monthly – multiply by 12
 2. Add the incomes together.
 3. The calculations should be exact without any rounding.
 4. Compare the annual total to the appropriate household size and annual amount in the WIC income guidelines.
 5. When the applicant's household meets the WIC Income Guidelines, convert the annual amount to a monthly total by dividing by 12. Drop any change and enter this amount in TWIN.
 6. If the applicant does not meet the WIC Income Guidelines refer to **CS:23.0**, Notification of Ineligibility, Termination or Expiration of Eligibility.

Nutrition Services Department of State Health Services

Effective August 1, 2015

Policy No. CS:07.0

- IV. Exceptions include the following:
- A. Overtime: If the overtime pay was a one-time occurrence, within the last 30 days, use the normal wages paid to calculate income and do not include the overtime.

 - B. Income Varies: The income average is a better reflection of the applicant's true income.
 - 1. First calculate the average of all paycheck stubs within the last 30 days.
 - 2. When there is only one pay frequency, compare the average income to the appropriate frequency in the WIC Income Guidelines.
 - 3. When there is more than one pay frequency, use income average to convert to an annual amount. Convert all other household members to an annual amount. Compare to the annual WIC Income Guidelines.
Example: Ann is paid weekly and her pay varies. Her husband is paid \$2035.18 a month. Ann's last 4 checks were \$234.03, \$152.25, \$235.25, \$150.25. Household of three.
 $\$234.03 + \$152.25 + \$235.25 + \$150.25 = \$771.78/4 = \192.95 is Ann's average weekly amount.
 $\$192.95 \times 52 = \$10,033.40$ is Ann's annual amount.

 $\$2035.18 \times 12 = \$24,422.16$ is husband's annual income.
 $\$10,033.40 + \$24,422.16 = \$34,455.56$. This annual amount is compared to the 2015 WIC Income Guidelines. If the annual guideline for this household size is \$36,612, the family is *under* the income limit and is WIC income-eligible.

 - C. Self Declaration: An applicant or a parent/guardian applying on behalf of a child, who is a victim of theft, loss, or disaster and does not have a source of income shall complete a Self-Declaration form. This form shall be used as the lowest level of documentation for prospective income see Section II.D. in this policy. This form shall be filed in the client's record.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2015

Policy No. CS:07.0

- D. Annual income may be more appropriate when income within the last 30 days does not reflect true household income:
 - 1. A family member who is on maternity leave; individuals (e.g., teachers) who are paid on a 9 -10 month basis and are temporarily on leave for the summer; college students who work only during the summer months and/or school breaks; and individuals who receive frequent and consistent overtime pay. Documentation shall be obtained in the following order (i.e., staff shall obtain the highest level of documentation, if it exists, with #1 constituting the highest level and so forth):
 - a. Tax return IRS 1040 (see Section II. G. in this policy).
 - b. Income documentation within 30 days.
 - c. Checking/Savings or WIC forms if applicable.
 - d. Self declaration form if applicable.

- E. Applicants reporting zero income- should be prompted to describe in detail their living circumstances and how they obtain basic living necessities such as food, shelter, medical care and clothing. Examples include but are not limited to: unpaid leave status, person on strike.
 - 1. Documentation shall be obtained in the following order (i.e., staff shall obtain the highest level of documentation, if it exists, with 'a' constituting the highest level and so forth):
 - a. Income within the last 30 days (i.e., bank statements and child support).
 - b. WIC forms if applicable.
 - c. Self declaration form if applicable.

- V. Income eligibility of migrants:
 - A. Certain instream migrant families with an expired Verification of Certification (VOC) shall be considered income eligible if income eligibility was determined within the previous 12 months. The date the migrant family's income was last determined shall be documented on the Family Certification Form (WIC-35).

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2015

Policy No. CS:07.0

- B. The income eligibility of migrant families who are not instream, defined as migrant farmworkers at their home base, shall be determined and documented on form WIC-35 at each certification.
- VI. To assess the income eligibility of an unemployed person (whether the person quit, was fired, or experienced a lay-off) all amounts of financial support received from any of the sources listed in this policy shall be determined and appropriate documentation obtained. If the income assessment is being done prospectively (e.g. the sole support of the family was laid off and was authorized to receive unemployment benefits for the next six month) "current" refers to income that will be available to the family in the next 30 days. If the person is living off their savings refer to II. F. of this policy.
- VII. Income eligibility of pregnant women: Refer to **Policy CS: 10.0**, Economic Unit for Income.
- VIII. The LA has no responsibility to monitor the continued income eligibility of the participant during the current WIC certification period.
- IX. Participants are not required to report income changes within certification periods nor are LAs required to inquire about such changes. However, during a certification period, if the local agency receives information from any party regarding a change in income eligibility, a reassessment of program eligibility shall be conducted during the certification period unless the information concerns possible program fraud or abuse. When fraud or abuse is suspected, refer to **Policy GA: 12** for instructions on reporting to the state agency. Reassessments are not required when there are 90 days or less before the expiration of the certification period. If the individual is determined ineligible, the LA shall disqualify the individual and any other family members participating in WIC at the time of the reassessment unless they are adjunctively eligible, refer to **Policy CS:08.0**.
- A. Some examples of situations which trigger a mandatory reassessment by the LA include:

Nutrition Services Department of State Health Services

Effective August 1, 2015

Policy No. CS:07.0

1. family member certified and income or adjunctive income eligibility has changed;
 2. an increase in income reported by a participant;
 3. a change in custody and/or household size and/or
 4. A complaint alleging ineligibility.
- B. WIC staff should contact the individual to bring documentation of their continued income or gateway eligibility to their next appointment.
1. If the individual fails to bring the proof of income or participation in the gateway program, the individual and other family members participating in WIC at the time of the reassessment shall be disqualified from the Program. Refer to **Policy CS:23.0** Notification of Ineligibility, Termination or Expiration of Eligibility.
- C. If the individual is income eligible through adjunctive eligibility, refer to **Policy CS:08.0**.
- D. Refer to **Policy GA:12.0** for instructions on handling citizen complaints about a participant's eligibility.
- E. Refer to **Policy CR:03.0** for guidance on a participant's right to appeal any decision which results in the denial, disqualification, or termination of their participation in the Program.
- F. LA staff shall provide written notification of termination to participant(s) found ineligible. Refer to **Policy CS:23.0** for instructions.
- X. Special Circumstances for income eligibility of a military family when parent(s) is deployed during times of crisis or on temporary assignment.
- A. Military personnel absent (e.g., deployed overseas) shall be counted as members of the household.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2015

Policy No. CS:07.0

- B. Whenever possible, a recent (within the past 120 days) Leave and Earnings Statement (LES) shall be obtained as documentation of the soldier's contribution to the household's gross income. If the funds are direct deposited into a bank account in lieu of having an LES statement, request a bank statement from the applicant. The applicant shall document the amount of gross income. The statement shall be signed by the applicant/parent/guardian and include a statement explaining why he/she cannot provide documentation of income.
- C. Income exclusions when parent(s) is deployed:
1. Basic Allowance for Housing (BAH), Family Separation Housing (FSH), and Overseas Housing Allowance (OHA).
 2. Cost of Living Allowance (COLA) only if the military person resides outside the contiguous continental United States.
 3. Family Subsistence Supplemental Allowance (FSSA) payments to members of the Armed Services provided by the Department of Defense under the provisions of Public Law 109-163, the National Defense Authorization Act for Fiscal Year 2006.
- D. Other types of Entitlement pay, including, but not limited to Combat Pay and Hostile Fire Pay, can be excluded from income. The pay:
1. Must have been received in addition to basic pay
 2. Must have been received as a result of deployment to or service in an area that is designated a combat zone
 3. Must not have been received prior to deployment
- E. The Local Agency needs to explore the circumstances under which military service personnel is receiving each additional allowance in order to decide if they should include or exclude the payment. The requirements above, X.D., need to be met.
1. Additional temporary compensation including, but not limited to Front Line Pay received shall be averaged. Determine the average by dividing the total pay by 12 months.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2015

Policy No. CS:07.0

Example: Front Line Pay is \$200/month, received for past 5 months. \$1000 (\$200 X 5 months) is divided by 12 = \$83.33 month. Add \$83.33 to monthly income.

2. New money that is received once per year, including but not limited to Clothing Allowance and Enlistment Bonus shall be averaged. Divide the total amount by 12 for an average.

Example: Clothing allowance is \$2000. Divide by 12 = \$166.67. Add \$166.67 to monthly income.

- F. When children are in temporary care of friends or relatives due to military parents being deployed or on temporary assignment:
 1. Financial support is being provided by the military parents:
 - a. When the LESs are available, parents and children are a separate economic unit (SEU) within the household of the temporary caretaker. Income is assessed for the SEU.
 - b. When LESs are unavailable, the source of financial support for the children determines the documentation necessary.
 - i. If financial support is being provided by the military parents, the children will be considered an SEU with income in the amount provided for their care. Written documentation from the caretaker should designate the amount received from the military parents, either in a letter or written note or in LES statements when available.
 - ii. If the caretaker holds a credit card for necessary expenses or has access to direct deposited funds, have the caretaker declare the amount being used to care for the child(ren). The child(ren) will be considered a separate economic unit with income in the amount declared.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2015

Policy No. CS:08.0

Adjunctive Income Eligibility

Purpose

To allow automatic income eligibility, for the WIC Program, for those applicants who are determined to be adjunctively income eligible.

Authority

7 CFR Part 246.7; 25 TAC §31.22

Policy

An applicant for WIC is adjunctively income eligible when the applicant is:

1. Certified as fully eligible to receive Supplemental Nutrition Assistance Program (SNAP), formerly known as Food Stamps;
2. Certified as fully eligible for Temporary Assistance to Needy Families (TANF);
3. Certified as fully eligible or presumptively eligible for Medicaid, including the Medicaid Women's Health Program;
4. A member of a household in which any eligible participant is certified as fully eligible to receive assistance under TANF; or
5. A member of a household in which any pregnant woman or infant is certified as fully eligible to receive Medicaid.

References to the Medicaid Program in this policy are inclusive of the Medicaid Women's Health Program (WHP) unless specified otherwise.

Definitions

Adjunctive income eligibility – expedited income eligibility for individuals and certain household members who participate in the SNAP, TANF, or Medicaid program.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2015

Policy No. CS:08.0

Automated Voice Response System (AVR) is operated by the Texas Health and Human Services Commission (HHSC) and is available 24 hours a day through a toll-free number. If applicants know their TANF or SNAP case number, but have brought an unacceptable HHSC form or no form at all, WIC LA staff may call 1-877-541-7905, select either TANF or SNAP and enter the applicant's case number to verify active status.

For clinic sites without a touch-tone phone, the AVR has voice recognition and the case number can be spoken and understood. This line is busiest between 11:00 AM and 3:00 PM, and particularly during the first week of each month when benefits are mailed. WIC LA staff may choose to call their local HHSC office if they are unable to reach the AVR system.

In order to determine eligibility, use the applicant's case number, not the balance/dollar amount of SNAP benefits since merely having a balance does not reflect the applicant's current status.

A Lone Star Card may be issued to a TANF or SNAP recipient for electronic benefits transfer (EBT). The Lone Star Card is not acceptable proof of participation in TANF or SNAP as there is no indication on the debit card if the card is still valid or active. In order to determine eligibility using the debit card, use the AVR system described above.

Household is defined as a group of related or non-related individuals who are living together as one economic unit, except that residents of a homeless facility or an institution shall not all be considered as members of a single household. Participation in one of the three gateway programs for an infant/child placed by the DFPS shall not be used by another member of the foster family's household for adjunctive income eligibility.

A SNAP recipient may be one individual or a group of individuals who are determined eligible for benefits. Most SNAP forms are issued in the name of the head of household. Other unnamed family members may also be recipients. When an applicant/parent guardian is applying for an unnamed family member, the LA shall verbally inquire if the unnamed family members are eligible to receive SNAP benefits. In such cases, the LA shall accept

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2015

Policy No. CS:08.0

documentation, which identifies that the head of the household and other unnamed family members are certified to receive benefits as described in Procedure I. E.

Gateway program is defined under this policy as SNAP, TANF, or Medicaid.

Presumptive eligibility is granted to some Medicaid Program applicants, excluding the WHP, to confer a temporary eligibility status before they have completed the application process and have been determined fully eligible. Limited Medicaid benefits to pregnant women may be presumptively granted based on their categorical eligibility. Such recipients are removed from these programs if they are later determined to be ineligible once the application process has been completed. Although ultimately some clients may be determined ineligible, program data shows such persons characteristically prove to be fully eligible and this is not a frequent cause of persons ceasing to receive benefits under this program. Even when persons cease to be certified under this program, the possibility remains that they may still meet WIC income guidelines; therefore, WIC regulations allow for a client who is presumptively eligible for Medicaid to be considered income eligible for WIC benefits. After WIC certification the client is not required to prove they were subsequently certified as fully eligible for Medicaid. There is no presumptive eligibility for SNAP, TANF, or the WHP.

Provider Help Desk for Your Texas Benefits Card is operated by the Texas Health and Human Services Commission (HHSC) and can be reached at 1-855-827-3747. WIC staff may call the Provider Help Desk to verify current Medicaid eligibility when an applicant presents Your Texas Benefits Card as there is no indication on the card that the recipient is currently participating in the Medicaid Program. Staff should choose Option 3 – Non Provider to enter the Medicaid number listed on the front of the Your Texas Benefits Card (YTBC) and the applicant's date of birth. The system will indicate "eligible for services" or "not eligible for services". Staff may also call the Provider Help Desk for YTBC to verify current Medicaid eligibility for applicants who know their Medicaid client identification number or whose number is on file but have brought an unacceptable HHSC form or no form at all.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2015

Policy No. CS:08.0

Your Texas Benefits Card (YTBC) is issued to each person who participates in the Medicaid program. YTBC is not acceptable proof of current participation in Medicaid because the card does not reflect eligibility periods. Therefore, staff must verify participation in the Medicaid program as described in Procedure I.B.2. of this policy.

Procedures

- I. When determining income eligibility staff shall inquire if the applicant is fully eligible to receive SNAP or TANF benefits, or fully/presumptively eligible to receive regular Medicaid benefits or fully eligible to receive Medicaid Women's Health Program benefits.

If the applicant is not eligible for benefits from one of these three gateway programs, the LA shall inquire if the applicant is a member of a household that is fully eligible to receive TANF or a member of a household in which a pregnant woman or an infant is fully or presumptively eligible to receive Medicaid.

A. Adjunctive eligibility shall be determined at each certification.

B. Current status shall be determined by:

1. Visual review of acceptable written documentation or proof obtained from an electronic device authorizing current eligibility in one of the gateway programs. A copy of the document is not required for the participant's file.

Acceptable forms include those identified on the Family Certification Form/WIC Program Income Screening Form (WIC-35) and any form, including those without a form number, authorizing gateway eligibility for a certification period which includes the date of application to WIC.

Example: Form indicates certification period 1/1/XX – 6/30/XX. Date of application to WIC 5/3/XX. The form is an acceptable

Nutrition Services Department of State Health Services

Effective December 1, 2015

Policy No. CS:08.0

- document as the application to WIC is before the expiration date listed on the form. ; or
2. Inquiry by phone or on-line computer system by the local agency for the SNAP, Medicaid Program, or TANF Program **may** be used when an applicant fails to bring proper documentation of their current eligibility status for SNAP Medicaid, or TANF benefits or presents Your Texas Benefits Card. LA staff shall obtain verbal permission from the applicant to conduct the phone inquiry.
 - a. SNAP and TANF can be verified through the HHSC Automated Voice Response System (AVR) at 1-877-541-7905. Staff should select Option 1 for English or 2 for Spanish, and then select Option 2 - Benefit Information. Select Option 1 for all Medicaid, SNAP and TANF information. Once prompted enter in clients information and select Option 1 again to hear benefit status (stay on the line to talk to a representative).
 - b. Medicaid eligibility can be verified through the Provider Help Desk for YTBC at 1-855-827-3747.
 - c. Forms obtained from an on-line computer system can be accepted if they clearly indicate the applicant is eligible for one of the gateway programs.
 - C. Documentation from only one of the three gateway programs is required per applicant. When entering client data into the WIC Information Network (WIN), answer "Y" only once to indicate the gateway program used in determining eligibility even if the applicant indicates they are receiving assistance from more than one gateway program.
 - D. Adjunctive income eligibility shall be documented on the WIC-35 as described in **Policy CS: 14.0**. Participation in the Women's Health Program is documented as Medicaid.
 - E. Applicants eligible to receive SNAP benefits shall provide one of the following:

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2015

Policy No. CS:08.0

1. proof showing the applicant himself/herself is eligible to receive such benefits. Minors applying for themselves who reside with their parents and provide proof the parent is eligible to receive SNAP benefits (LA staff shall verbally inquire if the applicant is eligible to receive SNAP) shall be considered adjunctively income eligible as they are considered in the economic unit.
 2. proof showing the parent/guardian applying on behalf of an infant or child receives such benefits for himself/herself or any household member.
 - a. A newborn infant who becomes part of a SNAP household shall be deemed adjunctively income eligible for WIC.
 - b. Other household members shall be considered adjunctively income eligible if the parent/guardian states the family/household members are certified to receive SNAP benefits. If the other household members are **not** certified to receive SNAP benefits, the LA staff shall determine if the household members are eligible under another gateway program or procedures of **Policy CS:07.0**, Income Screening as a Certification Requirement.
 3. proof showing the applicant resides with the parent/guardian named as the SNAP head of household if the WIC applicant himself/herself is not specifically named on the form.
 - a. For applicants or parent/guardians applying on behalf of a child, compare the proof of residency presented by the applicant or parent/guardian to the address on the SNAP form for the head of household. The two addresses shall match; or
 - b. if the applicant or parent/guardian applying on behalf of a child does not have proof that their address matches the address of the SNAP head of household, the adult shall provide a signed written statement or a Residency Form (WIC-RO2) with section C completed by the head of household confirming the living arrangements.
- F. Applicants eligible to receive TANF or eligible/presumptively eligible to receive Medicaid benefits as applicable shall provide proof. WHP eligibility can only be used for adjunctive income eligibility by

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2015

Policy No. CS:08.0

postpartum and breastfeeding women. Proof of Medicaid for participant shall be accepted regardless of who is listed as the parent/guardian and regardless of Department of Family and Protective Services (DFPS) Placement.

G. Applicants applying for WIC based on a household member's eligibility for TANF or Medicaid, excluding the WHP, shall provide one of the following:

1. proof showing a pregnant woman or infant household member as a Medicaid recipient or the household member's eligibility for TANF; **and**

Note: A pregnant woman can present any current acceptable Medicaid document to qualify another member in the household. The Medicaid would not have to specify that it is Pregnant Medicaid. A pregnant woman's Medicaid eligibility ends on the last day of the second month following the month the pregnancy terminates; therefore, her infant could be determined eligible based on the mother's Medicaid until two months of age. The infant's presumptive eligibility may be used to adjunctively certify other household members. A fully eligible infant can also adjunctively qualify other household members. The infant and other household members shall be certified for a full certification period.

Example: Infant is born May 5th. Mother's Medicaid ends on July 31st. Infant is adjunctively income eligible if application to WIC is on or before July 31st. Household members can be enrolled using the infant's presumptive Medicaid eligibility if the application to WIC is on or before July 31st. Document the name of the gateway recipient on the WIC-35 per **CS:14.0**.

2. proof showing the applicant resides with the TANF or Medicaid recipient:

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2015

Policy No. CS:08.0

- a. applicant's or parent/guardian's proof of address (utility bill, etc.) shall match the address of the TANF or Medicaid recipient shown on the form; or
 - b. if the adult applying for herself or a child does not have proof that their address matches the address of the TANF or Medicaid recipient, the adult shall provide a signed written statement or Residency Form (WIC-R02) with section C completed.

- II. Persons determined income eligible for WIC under this policy shall meet the eligibility criteria for program participation outlined in **CS:01.0**.

- III. The LA staff shall document the household size and income on those participants determined income adjunctively eligible under this policy.
 - A. LA staff shall ask the applicant to verbally declare their economic unit size and income. Applicants shall not be required to provide proof of income, such as: paycheck stubs, W2 forms, or bank statements, etc. Even if the applicant's income exceeds the WIC income limits, the applicant is still adjunctively income eligible.

 - B. LA staff shall document economic unit size and income on the WIC-35 and in the WIN system for reporting purposes to the United States Department of Agriculture (USDA).

 - C. LA staff shall not compare verbally declared income with the limits in **Policy CS: 12.0**. Income eligibility under this policy shall be automatic and determined solely on the documentation of the applicant or household member's eligibility to receive benefits, as applicable, from one of the three gateway programs.

- IV. Staff shall document the gateway client identification (ID) or case number on the Gateway Verification Section of the WIC-35 for all participants determined adjunctively income eligible. (Note: A copy of the gateway document is not required.) Select "Online," "By Phone" or

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2015

Policy No. CS:08.0

“Automated” on the WIC-35 if one of these methods is used to verify current gateway eligibility. If phone or automated verification is indicated, the name of the person contacted for phone verification or the phone number used to verify gateway eligibility shall be recorded. When staff verify gateway eligibility by phone or on-line for an applicant who fails to present a written document authorizing gateway eligibility, staff shall also check or circle “27” for “Other” and complete the blank field by entering “phone”, “automated”, or “on-line” on the Gateway Income Method Section of the WIC-35.

- V. The LA has no responsibility to verify the continued eligibility of the participant in their respective gateway program(s) during the current WIC certification period.
- VI. If the participant applies for subsequent certification at the end of the current WIC certification period and is not adjunctively income eligible the applicant shall be screened in accordance with **Policy CS:07.0** for income eligibility.
- VII. Participants are not required to report income changes during certification periods nor are local agencies required to inquire about such changes. However, if information comes to the attention of the local agency during a certification period which suggests ineligibility, a reassessment of program eligibility must be performed during a certification period. Such reassessments are not required when there is 90 days or less before the expiration of the certification period. If the individual is determined ineligible, the local agency shall disqualify the individual and any other family members participating in WIC at the time of the reassessment.
 - A. Some examples of situations which trigger a mandatory reassessment when using gateway eligibility through TANF or SNAP include:
 - 1. household member certified and adjunctive eligibility has changed; or
 - 2. a change in custody, excluding DFPS placements, and/or

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2015

Policy No. CS:08.0

3. household size.
- B. Have the participant bring proof of their continued eligibility in the TANF or SNAP gateway program or proof of income to their next appointment:
1. The individual shall be issued one month of benefits and be required to bring written documentation to the next appointment.
 2. If the client fails to bring proof of continued participation in the gateway program or proof of income, the individual and any other household members participating in WIC at the time of the reassessment shall be disqualified from the Program.
 3. Any reassessment shall determine:
 - a. If the individual is certified as eligible to participate in either TANF or SNAP gateway programs; or
 - b. If the individual is a member of a household which contains a person certified as eligible to receive TANF or a member of a household in which a pregnant woman or an infant is certified as eligible to receive Medicaid; or
 - c. If the individual is income eligible under the procedures of **Policy CS:07.0**.
- C. Medicaid does not need to be reassessed if Medicaid benefits remain in participant's name.

Guidelines

The Women's Health Program provides a limited Medicaid-paid family planning benefit to women ages 18-44 with income at or below 185 percent of the federal poverty level. Only citizens and some immigrants are eligible. Benefits include an annual family planning exam and choice of contraception for 12 months. A pregnant woman is not eligible for Women's Health Program; as such, receipt of Women's Health Program cannot confer adjunctive eligibility to other household members applying for WIC. For more information go to: <http://www.texaswomenshealth.org>.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2015

Policy No. CS:09.0

Definition of Income

Purpose

To provide a statewide definition of income that is identical for all local agencies (LAs).

Authority

7 CFR Part 246.7; 25 TAC §31.22

Policy

Income is defined as gross income before deductions.

Procedures

- I. Income includes the following:
 - A. wages, salary, commissions or fees;
 - B. net income from farm and non-farm self-employment;
 - C. Social Security benefits;
 - D. dividends or interest on savings or bonds, to include interest on Certificates of Deposit (CD) and Individual Retirement Accounts (IRA); income from estates or trusts, or net rental income;
 - E. public assistance or welfare payments;
 - F. unemployment compensation;
 - G. government civilian employee or military retirement or pensions, or veterans' payments;
 - H. private pensions or annuities;
 - I. alimony or child support payments;
 - J. regular contributions from persons not living in the household;
 - K. net royalties;
 - L. lump sum payments which are considered as "new money" received in the last 30 days would include gifts, inheritances, lottery

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2015

Policy No. CS:09.0

- winnings, worker's compensation for lost income, and severance pay;
- M. student financial assistance, such as grants and scholarships, except those grants and scholarships excluded as income as listed in Section II. (C) (12) of this policy;
 - N. capital gains and interest earned on the sale amount; If there was a loss on the sale, the amount of interest earned on the sale amount is counted as income. This applies only to capital gains and losses within the past twelve months. Any sale prior to last twelve months, refer to guideline on savings account interest (Item I. (D) above).
 - O. other cash income, which includes, but is not limited to, cash amounts received or withdrawn from any source including savings, investments, trust accounts and other resources which are readily available to the family.
- II. Exclusions from income include, but are not limited to, the following:
- A. Military allowances:
 - 1. any basic allowance for quarters received by military services personnel residing on/off military installations; and
 - 2. cost of living allowance received by military services personnel residing outside the United States.
 - 3. Family Subsistence Supplemental Allowance (FSSA) payments to members of the Armed Services provided by the Department of Defense under the provisions of Public Law 109-163, the National Defense Authorization Act for Fiscal Year 2006.
 - 4. Other types of Entitlement pay, including, but not limited to Combat Pay and Hostile Fire Pay, can be excluded from income. The pay:
 - a) Must have been received in addition to basic pay
 - b) Must have been received as a result of deployment to or service in an area that is designated a combat zone
 - c) Must not have been received prior to deployment

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2015

Policy No. CS:09.0

- B. value of in-kind housing and other in-kind benefits; (Examples: employer paid or union paid portion of health insurance or other employee fringe benefits, food or housing received in lieu of wages)

- C. payments or benefits provided under certain Federal programs or acts. The payments or benefits which shall be excluded by legislative prohibition include, but are not limited to the following:
 - 1. reimbursements from the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970;
 - 2. any payment to volunteers under Title I (VISTA and others) and Title II (RSVP, foster grandparents, and others) of the Domestic Volunteer Service Act of 1973, to the extent excluded by that Act;
 - 3. payment to volunteers under section 8(b)(1)(B) of the Small Business Act (SCORE and ACE);
 - 4. income derived from certain submarginal land of the U.S. which is held in trust for certain Indian tribes;
 - 5. payments received under the Job Training Partnership Act;
 - 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; the Child Nutrition Act of 1966; and the Food Stamp Act of 1977;
 - 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 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. Certain types of student financial assistance expressly excluded by WIC regulations - Student financial assistance received from any program funded in whole or part under Title IV of the

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2015

Policy No. CS:09.0

Higher Education Act of 1965, including: the Pell Grant, Supplemental Educational Opportunity Grant, State Student Incentive Grants, National Direct Student Loan, PLUS, College Work Study, and Byrd Honor Scholarship programs; Excluded from income is any assistance received from these programs which is used for tuition and fees and including the costs for rental or purchase of any equipment, materials, or supplies required of all students in the same course of study and an allowance for books, supplies, transportation, and miscellaneous personal expenses for a student attending a higher education institution on at least a half-time basis, as determined by the institution. Grant or loan funds for room and board and for dependent care expenses must be counted as income in the WIC eligibility determination.

13. mandatory salary deduction for college under the Veterans Education Assistance;
14. payments under the Disaster Relief Act of 1974, as amended;
15. payments received under the Carl D. Perkins Vocational Education Act, as amended;
16. payments pursuant to the Agent Orange Compensation Exclusion Act;
17. payments received for Wartime Relocation of Civilians under the Civil Liberties Act of 1988;
18. value of any child care payments made under section 402(g)(1)(E) of the Social Security Act, as amended by the Family Support Act (see Guidelines Section);
19. value of any "at-risk" block grant child care payments made under section 5081 of Public Law 101-508;
20. value of any child care provided or paid for under the Child Care and Development Block Grant Act, as amended;
21. 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;
22. payments received under the Old Age Assistance Claims Settlement Act, except for per capita shares in excess of \$2000;

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2015

Policy No. CS:09.0

23. 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;
 24. 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;
 25. payments received under the Sac and Fox Indian claims agreement;
 26. payments received under the Judgment Award Authorization Act, as amended;
 27. payments for the relocation assistance of members of Navajo and Hopi Tribes;
 28. payments to the Turtle Mountain Band of Chippewas (Arizona);
 29. payments to the Blackfeet, Grosventre, and Assiniboine tribes (Montana) and the Papage (Arizona);
 30. payments to the Assiniboine Tribe of the Fort Belknap Indian community and the Assiniboine Tribe of the Fort Peck Indian Reservation (Montana);
 31. payments to the Red Lake Band of Chippewas;
 32. payments received under the Saginaw Chippewa Indian Tribe of Michigan Distribution of Judgement Funds Act; and
 33. payments to the Chippewas of Mississippi.
 34. payments received by property owners under the National Flood Insurance Program (Public Law 109-64).
- D. lump sum payments classified as "reimbursement" which are defined as monies received from insurance companies for loss or damage of real or personal property, such as a home or auto, and payments that are intended for a third party to pay for a specific expense such as payment of medical bills resulting from accident or injury;
- E. operating expenses for those individuals who are self-employed; For farm income, operating expenses include, but are not limited to, cost of feed, fertilizer, seed and other farming supplies; cash wages

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2015

Policy No. CS:09.0

paid to farmhands; depreciation; cash rent; interest on farm mortgages; farm building repairs; and farm taxes (but not State and Federal income taxes). For nonfarm self-employed persons, operating expenses include, but are not limited to, the cost of goods purchased, rent, heat, utilities, depreciation, wages and salaries paid, and business taxes (but not personal income taxes). Applicant shall complete Form WIC 32 or provide written business records.

- F. loans, such as bank loans, which are temporarily available and shall be repaid.

Guidelines

- I. LAs may need to contact the state agency (SA) for further guidance in evaluation of particular income exclusion, particularly for those with exceptions where a median income for the local area shall be determined. For example: items C. (22) and C. (23).
- II. Child Care and Development Block Grant Program income exclusion: (Item II.(C) (19) above) These benefits shall be referred to as the TANF Child Care Program, the Title IV A Child Care Program, or the Choices Child Care Program. However, names of these programs vary from state to state:
 - A. In Texas, the child care programs which provide payments that are excluded from income are the Choices Child Care Program, the Transitional Child Care Program and the At-Risk Child Care Program which are administered by the Texas Health and Human Services Commission (HHSC).
 - B. HHSC allows parents participating in these programs to make their own arrangements for child care. The hired caretakers may be grandparents, aunts or uncles; however, the payments to these relatives shall be counted as income by these relatives if they apply for WIC Program benefits.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2015

Policy No. CS:09.0

- III. Basic allowance for quarters for military personnel residing on-base or off-base is usually indicated on the military Leave Earnings Statement (LES) as:
 - A. Variable Housing Allowance (VHA);
 - B. Basic Allowance for Housing (BAH).

- IV. Regarding II. B in Procedures Section, Value of inkind housing and other inkind benefits: If an employee does not receive as part of his/her wages/salary the dollar amount contributed to health insurance, for example, but the employer includes this employer contribution as part of the employee's gross income, the LA shall deduct the employer contribution amount from the applicant/participant's gross income. (Some employers process salary payments this way for a tax advantage to the employer.)

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2016

Policy No. CS:10.0

Economic Unit for Income

Purpose

To establish a consistent method of determining income eligibility.

Authority

7 CFR Part 246.7; USDA FNS Instruction 803-3; 25 TAC §31.22

Policy

Income eligibility for WIC services shall be based on the total income of the economic unit.

Definitions

Economic Unit means all persons, related and/or unrelated, living together in the same dwelling, with the exception of the following special situations: pregnant woman, infants/children placed through DFPS (foster/kinship), and individuals who qualify as a separate economic unit.

Procedures

- I. When determining an applicant's income eligibility for WIC services:
 - A. Determine economic unit size by counting all persons living in the dwelling, with the following exceptions:
 - 1. pregnant women (see procedure II);
 - 2. individuals who reside in institutions (see procedure III);
 - 2. infants/children placed through DFPS (see procedure IV); and
 - 3. individuals who qualify as a separate economic unit (see procedure VI).

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2016

Policy No. CS:10.0

- B. Determine total economic unit income by counting all incomes of all members of the unit.
 - C. Compare the total economic unit income for the economic unit size with the Texas WIC Income Guidelines (see [Policy CS:12.0](#)).
 - D. Record unit size and income(s) on form WIC-35.
- II. For a pregnant woman, with the exception that she qualifies as a separate economic unit (refer to procedure VI. D.), increase her family size by the number of children she expects to give birth to. If she is expecting one child, count her as two individuals; if she is expecting twins, count her as three individuals. The LA shall allow applicants to waive the increase in family size.
- III. Individuals residing in institutions (e.g., homes for battered women, drug treatment centers, intermediate care facilities for mentally retarded or mentally ill persons, half-way houses, etc.) that meet the conditions specified in [Policy CS:06.0](#) are considered a separate economic unit. In this instance, the economic unit consists of the applicant and family members residing in the institution.
- IV. An infant/child placed through DFPS shall be considered a separate economic unit (a one-person economic unit).
- A. The income of the child shall be the payments made by DFPS or another outside_source for the care of the child. Note: If a child receives income, whether from a job or outside financial resource, it must be counted in the income determination.
 - B. Income reassessment during an active certification is not required for an infant/child who is later adopted since sufficient time does not typically exist to effect the change before the expiration of the certification period.
- V. When determining economic unit size:
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2016

Policy No. CS:10.0

- A. Do not include members who have been absent from the economic unit for more than six months, unless the member continues to exercise customary family responsibilities, i.e., contributes to the support of the economic unit.

- B. You may include persons temporarily absent if the following circumstances exist:
 - 1. other members still consider the economic unit to be the principal residence of the absent member; and
 - 2. the absence does not exceed six months (except in the case of school or military service); and
 - 3. the absence is for a purpose such as school, training, employment, hospitalization, institutionalization, military service etc.; and
 - 4. the absent member continues to exercise customary family responsibilities, e.g., a parent continues providing support, physical care, planning, etc.

- VI. On an exception basis, a separate economic unit (SEU) may be identified within a dwelling, if the applicant indicates that he/she shall be counted as a separate group/economic unit.
 - A. Exceptions shall be reviewed on a case by case basis. It is recommended that the Certifying Authority (CA) or WIC Certification Specialist (WCS) approve the SEU; however, LAs shall determine their own procedure on who may approve an SEU.

 - B. To qualify as an SEU, applicants shall meet the following criteria, which shows their independent source of income adequate to provide for their living expenses in their particular environment:
 - 1. The total monthly gross income of the SEU shall be equal to or greater than the amount listed on the Separate Economic Unit Screening Table in this policy and
 - 2. The SEU usually purchases and prepares food separately from the other persons who are not members of the SEU but reside in

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2016

Policy No. CS:10.0

the same dwelling or intends to purchase and prepare food separately after certification.

- B. LA staff shall identify the SEU's household members by placing a checkmark in the SEU column on the Family Certification Form (WIC-35).
- C. LA staff shall compare the SEU's monthly gross income to the SEU Screening Table in this policy to determine if the family qualifies as an SEU.
- D. After determining SEU status, any unborn fetus(es) shall be counted as part of the household size when comparing household income to the WIC Income Guidelines in **Policy CS:12.0** and completing the WIC-35.
- E. Do not certify the following as a Separate Economic Unit:
 - 1. minor children who live with their parents;
 - 2. a child under age 18 who lives with adult household members who serve as managing conservators; That is,
 - a. the household member(s) provides more than half of the child's total support; and
 - b. the family states that the child is under parent or guardian control.
 - 3. spouses: two people who are legally married, which includes two people who live together and represent themselves to the community as husband and wife.
- VII. The Certifying Authority's (CA) signature on the Supplemental Information/NVRA-WIC form constitutes approval of SEU eligibility because the CA must review the WIC-35 as part of his/her certification responsibilities.

<p>Nutrition Services Department of State Health Services</p>
--

Effective July 1, 2016

Policy No. CS:10.0

Separate Economic Unit Screening Table	
Family Size	Monthly Income
1	\$201
2	\$289
3	\$385
4	\$476
5	\$585
6	\$736
7	\$841
8	\$967
Each Additional Member	+ \$109

Based on Official USDA Food Plans: Cost of Food at Home. US Average-Thrift Plan, February 2016, individual groupings

Compare the total amount of income of the entire group considered in the economic unit to the Separate Economic Unit Screening Table. Use the WIC-35 form for all documentation.

- Is the total income of the group equal to or greater than the amount listed on the **Separate Economic Unit Screening Table** for family size?
- Does the group usually purchase and prepare food separately or intend to purchase and prepare food separately after certification?

If the answer to both of these questions is “**yes**,” the group can qualify as a SEU. Mark the box for SEU on the WIC-35.

If the answer to either of these questions is “**no**,” the group cannot qualify as a SEU. All persons living in the household and their income must be listed and screened for eligibility on the WIC-35.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective February 1, 2011

Policy No. CS:11.0

Certification of Foster Children

Purpose

To ensure individuals at nutritional risk receive program benefits.

Authority

USDA FNS Instruction 803.3; 25 TAC §31.22

Policy

Foster children shall be certified eligible for WIC Program benefits according to age, residency, income, nutritional risk requirements and physical presence. Children left in the care of a family member or friend are not considered foster children unless DFPS is involved.

Definitions

Foster child – any child placed through the Texas Department of Family and Protective Services (DFPS). A child returning to his/her parent shall not be considered a foster child.

DFPS placements include:

- A. Foster family home or group home that has been either trained and verified by DFPS; licensed by DFPS' Office of Residential Child-Care Licensing (RCCL), or verified by an RCCL-licensed child-placing agency.
- B. Residential group care facility - that has been licensed by RCCL; or a facility under the authority of another state agency.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective February 1, 2011

Policy No. CS:11.0

- C. Infant or child placed with a relative, close family friend or others who have a long standing relationship with the infant/child.

Procedures

- I. At the time of initial application, DFPS placement shall be verified. Written or verbal verification is acceptable. When verbal verification is obtained, the DFPS contact name and phone number shall be documented in the foster child's file. Verification is not required at subsequent certifications. The foster child shall be screened according to the criteria defined in Policy **CS:01.0**. Infants and children placed by DFPS with a relative, close family friend or others who have a long standing relationship with the infant/child may be screened utilizing CS:07.0 if the DFPS placement letter is not available.
- II. A foster child shall be considered a one-person household. The income of the foster child shall be the payments made by DFPS or money received from any outside source. Most relatives are not certified as foster parents and do not receive foster care payments. However, money received from any outside source for the care of the child, shall be considered as income. If the relative does not receive any money for the care of the child, the child's income will be zero.
- III. A participant who has entered foster care during the last six months or has moved from one foster care home to another foster care home during the previous six months, qualifies for risk code 903, Foster Care (see Policy **CS:18.0**). A complete nutritional risk assessment shall be done.
- IV. If eligible for WIC services, the foster child shall be issued a WIC Lone Star Card, which is separate from the foster family. Multiple foster children, including siblings, residing in the same foster home shall each be issued a separate WIC Lone Star Card.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective February 1, 2011

Policy No. CS:11.0

- V. When a participant is removed from a foster home and placed in another foster home, do not request an electronic transfer of the participant's record from the original clinic. The foster child should be served under a new participant record and shall be issued a new WIC Lone Star Card.
- A. If the child's current certification has not expired, staff shall create a new participant record by processing the certification as an in-state transfer and issuing a new PAN.
- B. The Local Agency (LA) staff shall contact their IRM liaison and request an administrative lock on the foster child's previous WIC Lone Star Card effective the first of the following month.
- Exception: LA staff may update the family certification record if:
- the foster child will continue to receive services at the same clinic,
 - the current foster parent has the WIC Lone Star Card issued for the foster child, and
 - the foster child is due benefits or has all the current benefits on the card.
- VI. When a participant is removed from a foster home and is reunited with his/her parent(s):
- A. Parent must present the child at the WIC appointment or provide written documentation from DFPS or former guardian. When verbal verification is obtained, the contact name and phone number shall be documented in the foster child's file.
- B. Staff shall contact their IRM liaison to notify the SA the child has been reunited with his/her parent(s). The SA will place an administrative lock on the foster child's WIC Lone Star Card effective the first of the following month.

Nutrition Services Department of State Health Services

Effective February 1, 2011

Policy No. CS:11.0

- C. If the child was issued benefits for the current month while in foster care, schedule an appointment for the following month.
 - D. If the child's current certification has not expired, staff shall create a new participant record by processing the certification as an in-state transfer and issuing a new PAN per policy CS:25.0.
 - E. Income must be reassessed unless there is 90 days or less before the expiration of the certification period. The child shall be issued one month of benefits and be required to provide acceptable written documentation of the household income or eligibility in a gateway program at the next appointment.
 - F. If the child's certification has expired, determine if the individual is income eligible under Policy **CS: 07.0** or **CS:08.0**.
- VII. If the foster child is later adopted, the child becomes part of the adoptive family's economic unit. Follow the procedures below:
- A. Do not reassess income if the child has an active certification period. If the child's current certification has not expired, staff shall create a new participant record by processing the certification as an in-state transfer and issue benefits.
 - B. Add the child to the adoptive family's record if the family is currently participating in the WIC program and issue benefits.
 - C. Create a record and issue a WIC Lone Star card per Policy **CS:25.0** for the adoptive family if the family is not participating in the WIC Program.
 - D. If the child was previously issued benefits for the current month, allow the adoptive family to redeem the remaining benefits and inform him/her the card will not work at the store the first of the following month. Schedule an appointment for the following month and issue benefits per procedure VII. B. or C.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective February 1, 2011

Policy No. CS:11.0

- E. The LA shall contact their IRM liaison to notify the SA the child has been adopted. The SA will place an administrative lock on the foster child's WIC Lone Star Card effective the first of the following month.

- F. A foster child who is later adopted may continue to receive Medicaid until they are 21 years old. At recertification, staff shall accept current Medicaid verification as income even if it continues to list the foster child's name rather than the adoptive name.

- G. If the adopted individual is an infant or pregnant woman, his/her Medicaid eligibility shall be used as income for the other household members per Policy **CS:08.0** Procedure I.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2016

Policy No. CS:12.0

Texas WIC Income Guidelines

Purpose

To provide a uniform statewide level of income eligibility for participants in the WIC Program.

Authority

7 CFR Part 246.7; 25 TAC §31.22; 42 USC 1786

Policy

The Texas WIC Program shall use the income guidelines updated annually in the *Federal Register* by the United States Department of Agriculture under authority of 42 USC 1786.

Procedures

- I. To participate in WIC, an applicant's/participant's gross income shall not exceed 185% of the federal income guidelines as updated annually, unless the applicant/participant is found to be adjunctively income eligible for WIC.
- II. Local agencies shall implement the annual guidelines upon notification from the state agency.

Nutrition Services Department of State Health Services

Effective July 1, 2016

Policy No. CS:12.0

WIC INCOME GUIDELINES

Family Size	Weekly	Bi-Weekly	Twice Monthly	Monthly	Annual
1	423	846	916	1,832	21,978
2	570	1,140	1,235	2,470	29,637
3	718	1,435	1,554	3,108	37,296
4	865	1,730	1,874	3,747	44,955
5	1,012	2,024	2,193	4,385	52,614
6	1,160	2,319	2,512	5,023	60,273
7	1,307	2,614	2,832	5,663	67,951
8	1,455	2,910	3,152	6,304	75,647
9	1,603	3,206	3,473	6,946	83,343
10	1,751	3,502	3,794	7,587	91,039

Nutrition Services Department of State Health Services

Effective July 1, 2016

Policy No. CS:12.0

11	1,899	3,798	4,114	8,228	98,735
12	2,047	4,094	4,435	8,870	106,431
13	2,195	4,390	4,756	9,511	114,127
14	2,343	4,686	5,076	10,152	121,823
15	2,491	4,982	5,397	10,794	129,519
16	2,639	5,278	5,718	11,435	137,215
EACH ADDITIONAL FAMILY MEMBER	+148	+296	+321	+642	+7,696

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2016

Policy No. CS:13.0

Collection and Use of Social Security Numbers

Purpose

To verify information provided by the applicant or parent/caregiver, to guard against dual participation in the WIC program and to facilitate referral to other client service(s) for which the applicant may be eligible.

Authority

7 CFR Part 246.7(d)(v)(I)
42 U.S.C. 405(c)(2)(C)(i)

Policy

At the time of initial certification, local agency (LA) staff shall ask for voluntary disclosure of social security numbers for each family member. Services shall not be denied for failure to provide social security numbers.

Procedures

- I. At the time of initial certification, LA staff shall ask applicants to voluntarily provide the social security number(s) for each family member.
- II. A verbal declaration of the social security number by the applicant or parent/caregiver is acceptable. Written proof shall not be required.
- III. If any member of the family is not eligible for a social security number or refuses to provide the social security number, note this on the Family certification form (WIC 35) so that the LA staff need not ask again.
- IV. Any social security numbers obtained shall be documented on the WIC-35.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2016

Policy No. CS:13.0

- V. Staff shall not deny benefits to any applicant who fails to disclose his/her social security number or the social security number of any family member, or who is not eligible for a social security number.

- VI. The Privacy Notice is included on the WIC-35, Family Certification form. The participant/parent/caretaker of the participant shall sign the WIC-35 attesting to the fact that he/she has been informed of this information.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. CS:14.0

**Completion of the WIC Income Questionnaire and the
Family Certification/WIC Program Income Screening Form**

Purpose

To provide instructions on completing the WIC Income Questionnaire (WIC-35-3) and the Family Certification/WIC Program Income Screening Form (WIC-35).

Authority

State Policy

Policy

The WIC Income Questionnaire (WIC-35-3) shall be utilized to document the applicant's sources of income. The Family Certification/WIC Program Income Screening Form (WIC-35) shall be utilized to record applicant and household information. These forms shall be maintained on file in the participant's or family's record, as determined by the Local Agency (LA).

Procedures

- I. The WIC Income Questionnaire (WIC-35-3) shall be used to document all sources of income or adjunctive income eligibility and shall be completed by the applicant or parent/guardian.
 - A. The WIC Income Questionnaire shall be completed prior to determining income eligibility.
 - B. All questions within the applicable section shall be answered by marking either the "Yes" or "No" box.
 - C. The question, "All the information provided reflects my usual gross household income (before deductions)," shall be marked "Yes" in

Nutrition Services Department of State Health Services

Effective October 1, 2015

Policy No. CS:14.0

order to use the information provided as verification of household income.

- D. The applicant's or parent's/guardian's printed name, signature and the date are required each time income is screened, at certifications and income reassessments.
 - E. If an applicant's or parent/guardian's income is screened within 30 calendar days of their last income screening date, the participant or parent/guardian may use the same WIC Income Questionnaire form in lieu of completing a new one. If the same form is used, he/she shall sign and date near the previous signature and date.
 - F. When the applicant or parent/guardian makes changes/corrections, they should initial near change/correction.
- II. The LA shall use the Family Certification/WIC Program Income Screening Form (WIC-35) to record all required applicant information.

Side 1 - Family Certification Form:

- A. Primary Account Number (PAN): Primary Account Number (PAN) may be recorded.
- B. Name of Applicant or Parent/Guardian #1 and #2: Record the last, first, and middle name(s) if available. This person(s) shall be the food instrument recipient. When the applicant or parent/guardian provides written authorization for another adult to attend the certification appointment, the individual should be listed as Parent/Guardian #2.
- C. Social Security Number: Record the social security number for the applicant or each parent/guardian, if available. Written proof is not required. Refer to **Policy CS: 13.0** for further information.
- D. Date of Birth: Record the date of birth of the Applicant or Parent/Guardian #1 and Parent/Guardian #2, if applicable. If the

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. CS:14.0

- applicant completes this section, confirm that the month and date were recorded in the correct order (e.g., 06-12-1980 is June 12, 1980, not the 6th of December, 1980). Make sure the year of birth is four digits, such as "06-12-1980."
- E. Sex: Indicate if the Applicant or Parent/Guardian #1 and Parent/Guardian #2, if applicable, is Male (M) or Female (F) by placing a check in the appropriate box.
- F. Identification Method:
1. Record the two digit number corresponding to the type of identification presented by the applicant or parent/guardian in the "P/G #1" box and "P/G #2" box, if applicable. For example, the "P/G #1" presented a driver's license as proof of identification. Enter "05" in the box marked "P/G #1".
 2. If "Other" is selected, document the type of identification method.
- G. Language: Check or circle the two-letter code for the language preferred/spoken by the applicant or parent/guardian. If the individual is bilingual, the LA may document this by checking or circling both languages. However, the Texas WIC Information Network (TWIN) will accept only ONE code.
- H. Out-of-State Transfer: If the family is transferring from out of state, check Yes (Y) otherwise, check No (N).
- I. Mailing Address: Enter family's mailing address (street, apartment #, if applicable, city, zip code).
- J. Residence Address: Complete this field in the following cases:
1. residence address differs from the mailing address; or
 2. mailing address is a P.O. Box.
- K. Residency Method: Check or circle the two digit number corresponding to the type of residency proof presented in the box.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. CS:14.0

For example, "P/G #1" presented a rent receipt as proof of residency. Check or circle "02" for "Rent Receipt/Rental Agreement." If a gateway program is used for documentation, check "03" for business letter. (See [Policy CS:06.0](#).)

- L. Census Tract: Optional field.
- M. Telephone number: Record the family's daytime phone number including the area code and telephone extension, if applicable.
- N. Contact: Record the name of the person who shall be contacted at the indicated telephone number if different from the applicant or parent/guardian (e.g., neighbor or relative).
- O. Gateway
 - 1. Check or circle one appropriate initial corresponding to the type of gateway participation presented by the family, if applicable. For example, Medicaid is presented. Check or circle "M" for Medicaid.
 - 2. Participation in the Women's Health Program is documented under the Medicaid option.
- P. Gateway Income Method: (If this field is completed, "Non-Gateway Income Method" shall not be completed.)
 - 1. Check or circle the appropriate number for the type of form presented, if applicable, for proof of gateway participation. For example, Your Texas Benefits Card (YTBC) is presented. Check or circle "16" for YTBC. When YTBC is presented, staff shall verify current Medicaid eligibility (see [Policy CS:08.0](#) Procedures I.B.2.) and complete the Gateway Verification section of the WIC-35.
 - 2. If "Other" is appropriate, enter "phone," "on-line," "automated" or any other form name/number not listed on the WIC-35 in the blank and check or circle "27" for "Other." If phone or automated verification is indicated, the name of the person contacted for phone verification or the phone number used to

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. CS:14.0

verify eligibility of gateway participation shall be recorded on side 2 under Gateway Verification (see III.A.3. in this policy).

- Q. Non-Gateway Income Method: (If this field is completed, the "Gateway Income Method" shall not be completed.) Check or circle the appropriate number that reflects the highest amount of income, if applicable, as income documentation. For example, a client presents paycheck stubs showing a monthly income of \$1,215 and a copy of her monthly child support check for \$150, check or circle code "01" for paycheck stubs since the income received from employment is her highest amount of income.
- R. Income Clerk User I.D.: Enter the TWIN system user ID.
- S. Date: Enter the date income eligibility was determined only if different from the date applicant was found to be eligible/ineligible to receive program benefits. The year shall be a four-digit number such as "02-28-2007."
- T. Family (Household) Size: Record the two digit number for the family size, such as "01" or "02."
- U. Monthly Income:
1. Record the household's total gross monthly income from Side 2. Record the dollar amount excluding the cents (do not round up or down).
 2. For those applying as adjunctively income eligible ask for a verbal declaration of the household's total gross monthly income and record the amount.
- V. Indicators Y/N: Place a check in the appropriate reply box, Yes (Y) or No (N), for Foster child which includes all DFPS placements, Migrant, Military family, and Homeless family.
- W. Comment: This area is provided for any additional comments.

Nutrition Services Department of State Health Services

Effective October 1, 2015

Policy No. CS:14.0

- III. Side 2 **WIC Program Income Screening**. LA staff may complete side 2 before completing side 1. If an applicant is found income ineligible, completion of side 1 is not required.
- A. For applicants applying as adjunctively income eligible, only the following is required:
1. applicant's, parent's/guardian's, or authorized adult's signature and date;
 2. staff signature, title and date; and
 3. applicant's gateway client identification (ID) or case number; and
 4. phone, automated or online gateway verification for adjunctive eligibility, if applicable. Select "By Phone", "Automated" or "Online" if one of these methods is used to verify gateway eligibility. Enter the name of the contact person verifying adjunctive income eligibility. If an automated system is used, record the phone number used to obtain verification.
- B. For applicants not using adjunctive eligibility, the following shall be completed.
1. Household Members:
 - a. Applicant or Parent/Guardian (P/G)#1: Record the Applicant or Parent/Guardian applying for benefits for themselves or on behalf of a child
 - b. P/G #2: If another parent/guardian is a member of the household (for example, a spouse), record that person's name as "P/G #2."
 2. Participant #1, Participant #2, Participant/Other:
 - a. Record all other applicants/participants starting with Participant #1 and Participant #2, and utilizing the spaces for Participant/Other as needed. Record the names of all other non-applicant members of the household in the Participant/Other spaces. All household members shall be listed even if separate economic unit (SEU) is identified.
 - b. Date of Birth (D.O.B.): Record the date of birth for each individual listed under Household Members. Written proof is not required.

Nutrition Services Department of State Health Services

Effective October 1, 2015

Policy No. CS:14.0

- c. Social Security #: Record the social security number for each applicant and household member, if available. Written proof is not required. See **Policy CS:13.0**, for further information.
- d. Employer's Name and Address and/or WIC Form Number: Record the employer's name and physical address or city where located for each employed household member. If a WIC form was used, document the WIC form number. Written proof is not required for employer's name/address.
- e. Different pay frequency/Annual: Calculate the annual income for the household members when the sources of income are on different pay frequencies. Refer to **Policy CS:07.0** for additional information on income.
- f. Same pay frequency: Record the income for the household members when the sources of income are on the same pay frequency. Refer to **Policy CS:07** for additional information on income.
- g. SEU : Refer to **Policy CS: 10.0** for the criteria for separate economic unit (SEU). If the applicant is identified as a SEU, place a check mark in the SEU column for those individuals who are members of the SEU. Add the gross income entries together for these individuals and record the total.
- h. Annual Total or Total (#1): Add the income entries from the appropriate column and record the total. Visually compare the total from the different pay frequency or same pay frequency column to the WIC Income Guidelines.
- i. Meets income guidelines (#1a): After visually comparing and confirming the applicant meets the WIC Income Guidelines, place a check in the appropriate reply box, Yes or No.
- j. Monthly Income (#2): Divide the total by 12 months and record the monthly income. The monthly income shall only be entered in TWIN when the applicant is eligible.
- k. For WIC Staff Use Only: Check the SEU box if the applicant qualifies as a SEU.
- l. Income Checked by/Staff Signature, Title and Date: The LA staff completing the screening shall sign (not initial), write

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. CS:14.0

his/her title and date the form using his/her standard/official signature and own handwriting.

- m. Applicant's or Parent's/Guardian's or Authorized Adult's Signature and Date: The applicant, parent/guardian, or authorized adult shall sign (not initial) and date the form in his/her own handwriting. Per **Policy CR:07.0**, families with special health care needs may authorize another adult to attend the initial certification or sub-certification; therefore, the authorized adult shall sign and date the form. Authorized adults for other participants can only attend sub-certifications and shall sign and date the form at that time.

- IV. **WIC Program Income Screening** when using **Online Tools**. LA staff may use the online tools income calculator to determine if an applicant is income eligible or ineligible.
 - A. Enter the household "Family Size".
 - B. Enter the name(s) of each individual with income and click "Calculate". The results page will indicate if the household is income eligible or ineligible.
 - C. Print the results page and attach it to the WIC-35. This page takes the place of the staffs' manual income calculations. The WIC-35 with the attached income calculator results page shall be filed in the appropriate chart.
 - D. For the household members listed on the income calculator results page, document their date of birth, social security number, name of employer, address (physical or city) of employer and/or WIC form number (if applicable and not listed on result page) on the documentation provided as proof of income (i.e. checkstub, etc.), on the income calculator results page or on the WIC-35.
 - E. For household members whose income is not included, document their name, date of birth, social security number on the WIC-35.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. CS:14.0

- F. Different pay frequency/Annual, Same pay frequency, Annual Total or Total (#1), Meets income guidelines (#1a), and Monthly Income (#2) from side 2 and Family (Household) Size and Monthly Income from side 1 on the WIC-35 are optional to complete since this information is documented on the income calculator results page.

- V. A WIC-35 and WIC-35-3 form shall be used to document income. The forms shall be easily accessible for audit/review.
 - A. When certification records are not kept in family folders, a notation shall be made in each individual's folder (without WIC-35s and 35-3s) indicating in which family member's folder the forms are filed. For example: "See Mary Smith's (mother's) folder for WIC-35."

 - B. Income shall be documented each time a household member is certified (except for instream migrants). If income has been documented for one household member within the last 30 calendar days, it may be used for other household members being certified within that 30-day period. WIC staff and the applicant or parent/guardian shall sign and date near the original signature on the forms. The dates should be within 30 calendar days of each other. The 30-day period does not apply to applicants who were adjunctively income eligible (refer to **Policy CS: 08.0**)

- VI. The client shall be offered the opportunity to read or have read to them the section on side 2 of the WIC-35 regarding the provision of information to the WIC Program, the verification of such information, and dual participation. If the client does not understand, the information shall be explained to the client.

- VII. LAs shall retain copies of applicants'/participants' WIC-35 and WIC-35-3, and the document(s) provided as proof of income in order to assist in the prevention of Program fraud and abuse. Copies of income document(s) are only required for applicants not adjunctively income eligible. These document(s) may be attached to the WIC-35 and shall be kept in the client's file. LA staff shall not make copies of identification and residency documents for the participant's file.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. CS:14.0

VIII. Refer to **Policy CS: 23.0** for the documents and forms required to maintain on file when an applicant is found ineligible.

Guidelines

For more information on completing the WIC Income Questionnaire (WIC-35-3), refer to the "WIC Income Questionnaire Questions and Answers" and the "WIC Income Guide" on the web at <http://www.dshs.state.tx.us/wichd/tng/resources.shtm>.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. CS:15.0

Certifying Authority

Purpose

To define the qualifications accepted in the Texas WIC Program for a Certifying Authority. To ensure that qualified professionals are making decisions about eligibility and benefits.

Authority

7 CFR Part 246.2, 246.7

Policy

It is the intent of the Texas WIC Program that nutrition professionals are available to address Nutritional Risk. Each local agency (LA) shall have at least one certifying authority (CA) responsible for certifying nutritional risk conditions at the time of certification and prescribing supplemental foods. Certifications require a CA signature prior to food benefit issuance. Refer to **Policy CS: 16.0** WIC Certification Specialist for other certifying officials.

Definition

A CA shall be one of the following:

- I. registered dietitian (RD) Registered Dietitian Nutritionist (RDN) (Academy of Nutrition and Dietetics Commission on Dietetic Registration);
- II. licensed dietitian (LD) (Licensed by the Texas State Board of Examiners of Dietitians);
- III. nutritionist with a Bachelor's or Master's degree in any of the following:

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. CS:15.0

- A. Nutrition Sciences;
 - B. Human Nutrition or Dietetics;
 - C. Community Nutrition;
 - D. Public Health Nutrition;
 - E. Clinical Nutrition;
 - F. Home Economics with Food and Nutrition major with 24-semester hours credit in food & nutrition.
- IV. dietetic technician registered (DTR) (Academy of Nutrition and Dietetics Commission on Dietetic Registration);
- V. registered nurse (RN) with Bachelor of Science in Nursing (BSN) or an associate degree;
- VI. licensed vocational nurse (LVN);
- VII. physician (MD or DO);
- VIII. physician's assistant (PA) (certified by the National Committee on Certification of Physician's Assistants or by the state medical certifying authority);
- IX. home economics or other degreed professionals with 12 or more semester hours credit in food & nutrition and 6 semester hours of science from an accredited university (see guidelines). Transcript shall be submitted to the state agency (SA).

Procedure

- I. All CAs shall successfully complete the SA nutrition modules according to **Policy TR: 03.0** Required Local Agency Training Summary
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. CS:15.0

- II. LAs with only one CA per agency shall develop a written contingency plan for CA coverage during vacations, illness or other extended leave. See **Policy GA: 20.0** Staff Fraud and Abuse and **GA: 14.0** Staffing Standards.
- III. LA staff employed prior to the date of this policy shall be grandfathered in. Documentation shall be kept at agency for monitoring purposes.

Guidelines

Nutrition classes from an accredited university include but are not limited to:

- Basic Nutrition
- Introduction to Nutrition
- Nutrition
- Nutrition in the Life Cycle
- Community Nutrition
- Nutrition and Chronic Disease
- Diabetes Management
- Weight Management and Exercise

Science classes from an accredited university include but are not limited to:

- Biology
- Microbiology
- Chemistry
- Organic Chemistry
- Anatomy
- Physiology

Any questions regarding qualifying classes should be addressed with the Clinic Services Liaison at the SA.

Nutrition Services
Department of State Health Services

Effective October 1, 2015

Policy No. CS:15.0

The LA should submit transcripts to the SA for review and approval prior to hiring a CA that did not receive their degree or specialty licensed in the United States (e.g., Nutritionist, RN, RD, MD and DO).

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: April 1, 2012

Policy No. CS: 16.0

WIC Certification Specialist

Purpose

To provide local agencies (LAs) the ability to train staff by offering a paraprofessional training program for WIC Certification Specialists (WCS). The program may be implemented with State Agency (SA) approval.

Authority

7 CFR Part 246.2, 246.7

Policy

The WIC Certification Specialist (WCS) Training Program is available through the SA. A formal application for the WCS program must be completed and approved prior to implementing the training. Upon successful completion of the program the candidate is State Certified as a WCS. The WCS Certificate may be used at any local agency within the State of Texas at the discretion of the LA Director. It does not guarantee employment at another LA, and the credentials do not guarantee the holder will be offered a position as a WCS. A WCS has the credentials to certify applicants/participants for the WIC program.

The LA shall have either a Registered Dietitian (R.D.) or Licensed Dietitian (L.D.) on staff or working as a consultant for a minimum 25 hours per month, or a full-time degreed Nutritionist. S/he shall provide adequate hours to function as a WCS Preceptor for the candidate(s) and provide oversight of the LA's WCS Program.

A local agency may request a waiver for the required minimum hours, submitted with justification for consideration by the state.

Procedure

LA Director and WCS Preceptor

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: April 1, 2012

Policy No. CS: 16.0

- I. The LA Director shall complete a WCS Program application. Applications may be obtained from the SA WCS Program Specialist. Once the application is approved, the LA may implement its WCS plan.
 - A. Candidates shall be nominated by their LA Director. LA Directors and WCS Preceptors may develop additional criteria that are over and above the state minimum requirements. The existence of a WCS program at a local agency does not automatically qualify all staff to take the program.
 - B. The LA Director or WCS Preceptor shall notify the SA of the date when training of the candidate(s) will begin.
 - C. The WCS Preceptors' signature is required to sign off upon the candidate's successful completion of the training.
 - D. LA's shall acquire candidate approval from the SA when adding additional WCS candidates to their existing WCS plan prior to beginning their training by completing Attachment C of the application and Attachment A (as needed).
 - E. LA's who do not have an existing state approved WCS plan and want to hire a "certified" WCS, may do so by completing an application waiver. A waiver may be obtained from the SA WCS Program Specialist.
 - 1. The application waiver will allow one Certified WCS to be hired without having an existing WCS plan in place.
 - 2. Additional hires will require a SA approved WCS plan/application.

- II. LAs shall provide the WCS candidate with dedicated time during their work day to study in an appropriate work space.

- III. The WCS preceptor shall complete observations of the candidate(s) performing competencies and shall submit the dates of completion along with the exam scores to the SA WCS Program Specialist.

- IV. LA's shall have the option to have their WCS's complete formula approval certification training offered by the SA.

Nutrition Services Department of State Health Services

Effective: April 1, 2012

Policy No. CS: 16.0

- A. New WCS candidates or existing certified WCS's are eligible.
- B. The LA director will select the appropriate candidates.

Candidates

- I. Candidates shall have a minimum of a high school diploma or equivalent.
- II. Candidates shall have a minimum 3 months working experience in a WIC clinic before s/he may be considered as a candidate. LA Directors may set higher minimum requirements based on their agency's needs.
 - 1. LA Directors may request a work experience waiver for direct hires from outside WIC with accompanying justification.
- III. WCS candidates shall complete the training course, including passing the WCS written and competency based exams, within 9 months. Extensions may be granted by the SA with appropriate justification from the LA Director and WCS Preceptor.
- IV. Once a candidate becomes a certified WCS, s/he shall complete a minimum 5 hours of continuing education trainings every fiscal year beginning the fiscal year after initial certification to maintain WCS certification.
 - A. Trainings may include SA trainings, LA trainings or subject appropriate trainings offered by outside entities.
 - 1. Each training will count towards one hour of credit, unless otherwise specified.
 - B. LA's shall submit verification of completion to the SA WCS Program Specialist.
- V. A certified WCS may add formula approval to their certification after successful completion of the Basic Infant Formula module and the WCS Formula Training module. Requests are made to the SA WCS Program Specialist.

Nutrition Services Department of State Health Services

Effective: April 1, 2012

Policy No. CS: 16.0

- A. A WCS may not contact a participant's Health Care Provider (HCP) for formula approvals except to obtain a missing date, signature or length of issuance for the Medical Request Form for Formula/Food. ([see policy FD:16.0](#))
 - B. A WCS certified for formula approval shall complete a minimum of one formula training per fiscal year to maintain formula certification and may count towards their continuing education.
 - 1. Trainings may include, but are not limited to new/revised formula IDL's or on-line trainings, formula conference calls, state conference formula training sessions, subject appropriate trainings offered by outside entities or the LA, or any other related state offered formula training.
 - 2. LA's shall submit verification of completion to the SA WCS Program Specialist.
 - C. The SA shall add the letter "F" to the certificate number (e.g. 1234F) to identify a WCS who has completed the formula training modules and is authorized to approve formula ([see policy FD:16.0](#)).
- VI. Upon a candidate's successful completion of the WCS Certification Training Program, the SA will issue a signed certificate of completion. The candidate may then function as a Certified WCS after the local agency Director signs the certificate.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2014

Policy No. CS:17.0

Documentation of a Complete Nutrition Assessment

Purpose

To ensure accurate and thorough determination of eligibility for WIC benefits, and identification of all nutrition risk conditions.

Authority

7 CFR Part 246.7

Policy

Local agency (LA) staff shall perform a complete nutrition assessment on every WIC applicant who is categorically eligible and whose income and residence meet program guidelines. Supporting documentation of the complete nutrition assessment shall be available for audit/review.

Procedures

- I. A nutrition assessment shall be performed by a certifying authority (CA) or a WIC Certification Specialist (WCS). Other trained WIC staff may obtain measurements diet/health histories and perform blood screens for low iron.
 - A. **Nutrition risk** factors shall be evaluated by a CA or WCS.
 - B. Every nutrition risk for which a person can qualify shall be identified and documented on the appropriate participant form.

- II. A nutrition assessment is considered complete when the following indicators of nutritional status have been evaluated:
 - A. **Current weight and height/length** – all applicants.

Nutrition Services Department of State Health Services

Effective March 1, 2014

Policy No. CS:17.0

1. The weight and height/length shall be measured and plotted according to the instructions in the Guidelines for Nutrition Assessment.
 2. The value "0 lbs, 1 ounce" for birth weight shall be entered in the Texas WIN system if the birth weight is unknown.
 3. The code "999 lbs, 0 ounces" for weight and "99 0/8 inches" for length/height shall be entered in the Texas WIN system to indicate that measurements cannot be obtained using standard clinical equipment or from a healthcare provider.
 4. Documentation of why measurements were not obtained shall be included in the participant's chart. Refer to Guidelines for Nutrition Assessment – Weighing and Measuring – Special Considerations and/or WCS Module 8: Anthropometric Data Collection.
- B. **Diet Assessment** – all applicants. Utilizing the health history and interview, an assessment of applicant's nutritional status, shall be conducted.
- C. **Hemoglobin or hematocrit** – all applicants six months of age or older.
1. All infants and children certified at ages 9 months to 24 months shall have a blood screen for low iron:
 - a. Infants shall have a blood screen between 9 – 12 months of age and again, as a child, between 15 –18 months of age.
 - b. Blood work may be performed on infants initially certified between 6 and 9 months of age for the reasons stated below and shall be documented in the client's chart.
 - i. The CA or WCS determines blood work is required because the infant may be at nutritional risk, or
 - ii. The requirement to return to the clinic for blood work between 9 and 12 months presents a barrier for program participation.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2014

Policy No. CS:17.0

- c. Premature infants shall not have a blood screen before 9 months corrected/adjusted age.
 - d. All children shall have a blood screen performed at least once every 12 months, excluding the mid-certification assessment.
 2. Pregnant women shall have a blood screen during their pregnancy. Postpartum and breastfeeding women shall have a blood screen after delivery.
 3. Assessment of iron status shall be performed according to the instructions in the Guidelines for Nutrition Assessment. A current hemoglobin/hematocrit value obtained from a healthcare provider (not older than 30 days for infants or 60 days for women and children from the certification date) is acceptable.
 4. Waiving the requirement for hemoglobin/hematocrit is allowed for limited situations and shall be documented in the client's chart. For exceptions listed in 4. a. b. c., enter the following values in the Texas WIN automated system: 99.9 for hemoglobin or 99 for hematocrit. The following exceptions are the only circumstances that would preclude a blood screen for low iron.
 - a. Applicants whose religious beliefs do not allow them to have blood drawn. A statement of refusal to have blood drawn shall be included in the applicant's certification file. Acceptable documentation includes a written, signed statement by the parent/caretaker or applicant, or written documentation by the WIC staff that is signed by the parent/caretaker or applicant.
 - b. Applicants with "life long" medical conditions such as hemophilia, fragile bones, or osteogenesis imperfecta. A written, signed statement by the healthcare provider, physician or someone working under a physician's orders is required.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2014

Policy No. CS:17.0

- c. Applicants with a treatable skin disease or with a serious skin condition, where the blood collection may cause harm to the applicant. A written, signed statement by the healthcare provider, physician or someone working under a physician's orders is required.
 - d. When a blood screen is not performed or waived, a true value for hemoglobin or hematocrit cannot be entered into the computer.
 - i. For infants certified at 7 or 8 months of age (exception C.1.b.i and ii), enter the following values in the Texas WIN automated system: 78.0 for hemoglobin or 78 for hematocrit.
 - a. These infants need to have their blood work postponed and a blood work (BW) appointment scheduled between 9 and 12 months of age.
 - b. This process will be repeated at the infants' child subsequent certification appointment when they are either 13 or 14 months old; the blood work will again be postponed until they are between 15 and 18 months old.
 - c. In both cases, the initial and subsequent certification appointments, the BW appointment code will be used and 78/78.0 will be entered in the Hct/Hgb field in Texas WIN, respectively.
- D. **Health History (Medical/Maternal history)** - all applicants.
- 1. Nutrition risk conditions related to medical/maternal history shall be assessed according to the instructions in the Guidelines for Nutrition Assessment. A health history shall be completed for each certification.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2014

Policy No. CS:17.0

2. For applicants certified as pregnant women, a medical/maternal history shall be completed during the pregnancy, and for applicants certified as postpartum and breastfeeding women, a medical/maternal history shall be collected after the termination of the pregnancy.
- III. **Medical/nutrition data** previously obtained in the WIC clinic or from a healthcare source or a referral may be used to evaluate the applicant's nutritional status in order to reduce the number of times WIC applicants are subjected to the same assessment procedures.
- A. Medical data for women and children (i.e., weight, height/length measurement, hemoglobin/hematocrit values and diet assessment) may be used for determining nutrition risk for a full certification period, if it is not more than 60 days when eligibility is determined. Medical data for applicants certified as pregnant women shall have been collected during their pregnancy, and data for applicants certified as postpartum and breastfeeding women shall have been collected after the termination of their pregnancies.
 - B. Medical data for infants (i.e., weight, height/length measurement, hemoglobin/hematocrit values and diet assessment) may be used for determining nutrition risk for a full certification period if it is not more than 30 days when eligibility is determined, with the exception of birth data.
 1. The birth weight and length of an infant shall not be accepted for certification purposes after the infant is two weeks of age.
 2. When an infant is older than two weeks of age, a current weight and length must be obtained. The birth weight and length shall be plotted in addition to current weight and length.
 3. To certify an infant that is not physically present, obtain and plot the birth weight and length, or more current data, whichever is appropriate based on the age of the infant. To prevent termination of WIC services, the infant shall be presented by six weeks of age to be weighed and

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2014

Policy No. CS:17.0

measured, and the current weight and length shall be plotted. For infants with special health care needs, see section IV below.

- C. Medical data submitted from a healthcare source, other than the local WIC agency:
 - 1. Shall be in writing, and include the data and date measurements were obtained; or
 - 2. If information is obtained via telephone by LA, staff shall document the data and date measurements were obtained.

- IV. When an applicant has **special health care needs**, special accommodations may be made in obtaining medical/nutrition data to evaluate the applicant's nutritional status. Refer to Policy CR:07.0 for the definition of special health care needs and procedures to follow in these circumstances. Refer to Policy CS:04.0 for appropriate waivers, if necessary.

- V. Documentation of a complete nutrition assessment shall be maintained in each income-eligible applicant's record and shall be available for audit/review.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. CS:18.0

Criteria For Identifying Nutrition Risk Conditions

Purpose

To provide benefits to meet the special health and nutrition needs of low-income pregnant, breastfeeding and postpartum women, infants, and children. WIC provides supplemental foods and nutrition education to participants at nutrition risk during the critical growth and development periods of pregnancy, infancy, and early childhood.

Authority

7 CFR Part 246.7

Policy

To be eligible for program benefits, all WIC Program applicants shall have a nutrition risk condition identified through the documentation of a complete nutrition assessment.

Procedures

- I. When determining eligibility, compare all data from the applicant's health history, dietary, biomedical, and anthropometric assessment to the risk conditions listed in the Texas Nutrition Risk Manual. The criteria listed in this policy reflect allowable risk conditions. The Texas Nutrition Risk Manual provides the definition, justification, clarifications/guidelines and references about each of the risk conditions.

- II. Every condition of nutrition risk identified shall be marked on the back of the category specific state agency (SA) Participant Form (titled WIC Nutrition Risk Codes). Every risk code marked on the Participant Form shall have supporting documentation, e.g., growth charts, diet and health history forms.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. CS:18.0

Guidelines

List of Allowable Nutrition Risk Conditions

The allowable nutrition risk conditions are subsequently listed by category. These risk conditions are in accordance with the national risk conditions identified and required by the United States Department of Agriculture (USDA). See the Texas Nutrition Risk Manual for complete definitions, clarification and justification of each risk criteria.

Pregnant Women

Anthropometric - Priority I

- 101 Underweight
- 111 Overweight
- 131 Low Maternal Weight Gain
- 132 Maternal Weight Loss During Pregnancy
- 133 High Maternal Weight Gain

Biochemical - Priority I

- 201 Low Hematocrit/Low Hemoglobin
- 211 Elevated Blood Lead Levels Within the Past 12 Months

Clinical/Health/Medical - Priority I

Pregnancy-Induced Conditions

- 301 Hyperemesis Gravidarum
- 302 Gestational Diabetes
- 303 History of Gestational Diabetes
- 304 History of Preeclampsia

Delivery of Low-Birth weight/Premature Infant

- 311 History of Preterm Delivery
 - 312 History of Low Birth Weight
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. CS:18.0

Prior Stillbirth Fetal or Neonatal Death

- 321 History of Spontaneous Abortion (two or more terminations of less than 20 weeks gestation or less than 500 grams), Fetal (20 weeks or greater gestation) or Neonatal Loss (28 days or less of life)

General Obstetrical Risks

- 331 Pregnancy at a Young Age
- 332 Short Interpregnancy Interval
- 333 High Parity and Young Age
- 334 Lack of or Inadequate Prenatal Care
- 335 Multifetal Gestation
- 336 Fetal Growth Restriction (FGR)
- 337 History of Birth of a Large for Gestational Age Infant
- 338 Pregnant Woman Currently Breastfeeding
- 339 History of Birth with Nutrition Related Congenital or Birth Defect

Nutrition-Related Risk Conditions (Chronic disease, Genetic Disorder, Infection)

- 341 Nutrient Deficiency Diseases
- 342 Gastro-Intestinal Disorders
- 343 Diabetes Mellitus
- 344 Thyroid Disorders
- 345 Hypertension and Prehypertension
- 346 Renal Disease
- 347 Cancer
- 348 Central Nervous System Disorders
- 349 Genetic and Congenital Disorders
- 351 Inborn Errors of Metabolism
- 352 Infectious Diseases (within the past 6 months)
- 353 Food Allergies
- 354 Celiac Disease
- 355 Lactose Intolerance
- 356 Hypoglycemia
- 357 Drug Nutrient Interactions
- 358 Eating Disorders

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. CS:18.0

- 359 Recent Major Surgery, Trauma, Burns
- 360 Other Medical Conditions
- 361 Depression
- 362 Developmental, Sensory or Motor Disabilities Interfering with the Ability to Eat

Substance Use (Drugs, Alcohol, Tobacco)

- 371 Maternal Smoking
- 372 Any Alcohol Use in Current Pregnancy
- 373 Any Illegal Drug Use in Current Pregnancy

Other Health Risks

- 381 Oral Health Conditions

Dietary - Priority IV

- 401 Failure to Meet *Dietary Guidelines for Americans*
- 480 Inappropriate Nutrition Practices for Women

Other Risks - Refer to each risk condition for priority level

Regression/Transfer

- 502 Transfer of Certification - No priority

Breastfeeding Mother/Infant Dyad

- 601 Breastfeeding Mother of Infant at Nutritional Risk - Priority I, II or IV – highest priority for which either the mother or infant is qualified for.
- 602 Breastfeeding Complications or Potential Complications - Priority I

Homelessness/Migrancy

- 801 Homelessness – Priority IV
- 802 Migrancy – Priority IV

Other Nutrition Risks

- 901 Recipient of Abuse (within past six months) – Priority IV

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. CS:18.0

- 902 Woman with Limited Ability to Make Feeding Decisions and/or Prepare Food – Priority IV
- 903 Foster Care – Priority IV
- 904 Environmental Tobacco Smoke Exposure – Priority I

Breastfeeding Women - A woman is considered a breastfeeding woman if she nurses the infant at least once a day.

Anthropometric - Priority I

- 101 Underweight
- 111 Overweight
- 133 High Maternal Weight Gain in Most Recent Pregnancy

Biochemical- Priority I

- 201 Low Hematocrit/Low Hemoglobin
- 211 Elevated Blood Lead Levels Within the Past 12 Months

Clinical/Health/Medical - Priority I

Pregnancy-Induced Conditions

- 303 History of Gestational Diabetes
- 304 History of Preeclampsia

Delivery of Low-Birth weight/Premature Infant

- 311 History of Preterm Delivery
- 312 History of Low Birth Weight

Prior Stillbirth, Fetal or Neonatal Death

- 321 History of Spontaneous Abortion (termination of less than 20 weeks gestation or less than 500 grams), Fetal (20 weeks or greater gestation) or Neonatal Loss (28 days or less of life)

General Obstetrical Risks

- 331 Pregnancy at a Young Age
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. CS:18.0

- 332 Short Interpregnancy Interval
- 333 High Parity and Young Age
- 335 Multifetal Gestation
- 337 History of Birth of a Large for Gestational Age Infant
- 339 History of Birth with Nutrition Related Congenital or Birth Defect

Nutrition-Related Risk Conditions (E.g. Chronic Disease, Genetic Disorder, Infection)

- 341 Nutrient Deficiency Diseases
- 342 Gastro-Intestinal Disorders
- 343 Diabetes Mellitus
- 344 Thyroid Disorders
- 345 Hypertension and Prehypertension
- 346 Renal Disease
- 347 Cancer
- 348 Central Nervous System Disorders
- 349 Genetic and Congenital Disorders
- 351 Inborn Errors of Metabolism
- 352 Infectious Diseases (within the past 6 months)
- 353 Food Allergies
- 354 Celiac Disease
- 355 Lactose Intolerance
- 356 Hypoglycemia
- 357 Drug Nutrient Interactions
- 358 Eating Disorders
- 359 Recent Major Surgery, Trauma, Burns
- 360 Other Medical Conditions
- 361 Depression
- 362 Developmental, Sensory or Motor Disabilities Interfering with the Ability to Eat
- 363 Pre-Diabetes

Substance Use (Drugs, Alcohol, Tobacco)

- 371 Maternal Smoking
 - 372 Alcohol Use
 - 373 Any Current Illegal Drug Use
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. CS:18.0

Other Health Risks

381 Oral Health Conditions

Dietary - Priority IV

401 Failure to Meet *Dietary Guidelines for Americans*

480 Inappropriate Nutrition Practices for Women

Other Risks - Refer to each risk condition for priority level

Regression/Transfer

501 Possibility of Regression - Priority IV

502 Transfer of Certification - No priority

Breastfeeding Mother/Infant Dyad

601 Breastfeeding Mother of Infant at Nutritional Risk - Priority I, II or IV– highest priority for which either the mother or infant is qualified for.

602 Breastfeeding Complications or Potential Complications - Priority I

Homelessness/Migrancy

801 Homelessness - Priority IV

802 Migrancy - Priority IV

Other Nutrition Risks

901 Recipient of Abuse (within past six months) - Priority IV

902 Woman with Limited Ability to Make Feeding Decisions and/or Prepare Food - Priority IV

903 Foster Care - Priority IV

904 Environmental Tobacco Smoke Exposure – Priority I

Postpartum Women

Anthropometric - Refer to each risk condition for priority level

101 Underweight - Priority III

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. CS:18.0

- 111 Overweight - Priority VI
- 133 High Maternal Weight Gain in Most Recent Pregnancy - Priority VI

Biochemical - Priority III

- 201 Low Hematocrit/Low Hemoglobin
- 211 Elevated Blood Lead Levels Within the Past 12 Months

Clinical/Health/Medical - Refer to each risk condition for priority level

Pregnancy-Induced Conditions

- 303 History of Gestational Diabetes – Priority V
- 304 History of Preeclampsia – Priority V

Delivery of Low-Birth weight/Premature Infant

- 311 History of Preterm Delivery – Priority III
- 312 History of Low Birth Weight – Priority III

Prior Stillbirth, Fetal or Neonatal Death

- 321 History of Spontaneous Abortion (termination of less than 20 weeks gestation or less than 500 grams), Fetal (20 weeks or greater gestation) or Neonatal Loss (28 days or less of life) – Priority III

General Obstetrical Risks

- 331 Pregnancy at a Young Age- Priority III
- 332 Short Interpregnancy Interval – Priority III
- 333 High Parity and Young Age – Priority III
- 335 Multifetal Gestation – Priority III
- 337 History of Birth of a Large for Gestational Age Infant – Priority V
- 339 History of Birth with Nutrition Related Congenital Birth Defect – Priority V

Nutrition-Related Risk Conditions (E.g. Chronic Disease, Genetic Disorder, Infection)

- 341 Nutrient Deficiency Diseases – Priority III
 - 342 Gastro-Intestinal Disorders – Priority III
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. CS:18.0

- 343 Diabetes Mellitus – Priority III
- 344 Thyroid Disorders – Priority III
- 345 Hypertension and Prehypertension – Priority III
- 346 Renal Disease – Priority III
- 347 Cancer – Priority III
- 348 Central Nervous System Disorders- Priority III
- 349 Genetic and Congenital Disorders – Priority III
- 351 Inborn Errors of Metabolism – Priority III
- 352 Infectious Diseases (within the past 6 months) – Priority III
- 353 Food Allergies- Priority III
- 354 Celiac Disease – Priority III
- 355 Lactose Intolerance – Priority III
- 356 Hypoglycemia – Priority III
- 357 Drug Nutrient Interactions – Priority III
- 358 Eating Disorders – Priority III
- 359 Recent Major Surgery, Trauma, Burns – Priority III
- 360 Other Medical Conditions – Priority III
- 361 Depression – Priority III
- 362 Developmental, Sensory or Motor Disabilities Interfering with the Ability to Eat – Priority III
- 363 Pre-Diabetes – Priority IV

Substance Use (Drugs, Alcohol)

- 371 Maternal Smoking – Priority VII
- 372 Alcohol Use – Priority III
- 373 Any Current Illegal Drug Use – Priority III

Other Health Risks

- 381 Oral Health Conditions – Priority III

Dietary - Priority VI

- 401 Failure to Meet *Dietary Guidelines for Americans*
- 480 Inappropriate Nutrition Practices for Women

Other Risks - Refer to each risk condition for priority level

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. CS:18.0

Regression/Transfer

- 501 Possibility of Regression - Priority VII
- 502 Transfer of Certification- No priority

Homelessness/Migrancy

- 801 Homelessness - Priority VI
- 802 Migrancy - Priority VI

Other Nutrition Risks

- 901 Recipient of Abuse (within past six months). - Priority VI
- 902 Woman with Limited Ability to Make Feeding Decisions and/or Prepare Food - Priority VI
- 903 Foster Care - Priority VI
- 904 Environmental Tobacco Smoke Exposure – Priority V

Infants

Anthropometric - Priority I

- 103 Infant Underweight
- 104 Infant At Risk of Underweight
- 112 Infant At Risk of Overweight

- 115 High Weight-for-Length
- 121 Short Stature
- 122 Infant At Risk of Short Stature
- 134 Failure to Thrive (FTT)
- 135 Inadequate Growth
- 141 Low Birth Weight
- 142 Prematurity
- 143 Very Low Birth Weight
- 151 Small for Gestational Age
- 152 Low Head Circumference
- 153 Large for Gestational Age

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. CS:18.0

Biochemical - Priority I

- 201 Low Hematocrit/Low Hemoglobin
- 211 Elevated Blood Lead Levels Within the Past 12 Months

Clinical/Health/Medical - Priority I

Nutrition-Related Risk Conditions (E.g., Chronic Disease, Genetic Disorder, Infection)

- 341 Nutrient Deficiency Diseases
- 342 Gastro-Intestinal Disorders
- 343 Diabetes Mellitus
- 344 Thyroid Disorders
- 345 Hypertension and Prehypertension
- 346 Renal Disease
- 347 Cancer
- 348 Central Nervous System Disorders
- 349 Genetic and Congenital Disorders
- 351 Inborn Errors of Metabolism
- 352 Infectious Diseases (within the past 6 months)
- 353 Food Allergies
- 354 Celiac Disease
- 355 Lactose Intolerance
- 356 Hypoglycemia
- 357 Drug Nutrient Interactions
- 359 Recent Major Surgery, Trauma, Burns
- 360 Other Medical Conditions
- 362 Developmental, Sensory or Motor Disabilities Interfering with the Ability to Eat

Other Health Risks

- 381 Oral Health Conditions
- 382 Fetal Alcohol Syndrome (FAS)

Dietary - Priority IV

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. CS:18.0

-
- 428 Dietary risk Associated with Complementary Feeding Practices (4 to 12 months)
 - 460 Inappropriate Nutrition Practices for Infants

Other Risks - Refer to each risk condition for priority level

Regression/Transfer

- 502 Transfer of Certification - No priority

Breastfeeding Mother/Infant Dyad

- 603 Breastfeeding Complications or Potential Complications - Priority I

Infant of a WIC-Eligible Mother or Mother at Risk During Pregnancy

- 701 Infant Up to 6 Months Old of WIC Mother - Priority II
- 702 Breastfeeding Infant of Woman at Nutrition Risk - Priority I, II, or IV – highest priority for which either the mother or infant is qualified for.
- 703 Infant Born of Woman with Mental Retardation or Alcohol or Drug Abuse (most recent pregnancy) - Priority I
- 704 Infant Up to 6 Months of a Woman Who Would Have Been Eligible During Pregnancy – Priority II

Homelessness/Migrancy

- 801 Homelessness - Priority IV
- 802 Migrancy - Priority IV

Other Nutrition Risks

- 901 Recipient of Abuse (within past six months) – Priority IV
- 902 Infant of Woman or Primary Caregiver with Limited Ability to Make Feeding Decisions and/or Prepare Food - Priority IV
- 903 Foster Care - Priority IV
- 904 Environmental Tobacco Smoke Exposure – Priority I

Children

Anthropometric - Priority III

- 103 Child Underweight
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. CS:18.0

- 104 Child At Risk of Underweight
- 112 Child At Risk of Overweight
- 113 Child Obese (2-5 Years of Age)
- 114 Child Overweight (2 – 5 Years of Age)
- 115 High Weight-for-Length (12 – 23 Months of Age)
- 121 Short Stature
- 122 Child At Risk of Short Stature
- 134 Failure to Thrive (FTT)
- 135 Inadequate Growth
- 141 Low Birth Weight
- 142 Prematurity
- 143 Very Low Birthweight
- 151 Small for Gestational Age
- 152 Low Head Circumference (12 – 23 Months of Age)

Biochemical - Priority III

- 201 Low Hematocrit/Low Hemoglobin
- 211 Elevated Blood Lead Levels Within the Past 12 Months

Clinical/Health/Medical - Priority III

Nutrition-Related Risk Conditions (E.g., Chronic Disease, Genetic Disorder, Infection)

- 341 Nutrient Deficiency Diseases
 - 342 Gastro-Intestinal Disorders
 - 343 Diabetes Mellitus
 - 344 Thyroid Disorders
 - 345 Hypertension and Prehypertension
 - 346 Renal Disease
 - 347 Cancer
 - 348 Central Nervous System Disorders
 - 349 Genetic and Congenital Disorders
 - 351 Inborn Errors of Metabolism
 - 352 Infectious Diseases (within the past 6 months)
 - 353 Food Allergies
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. CS:18.0

- 354 Celiac Disease
- 355 Lactose Intolerance
- 356 Hypoglycemia
- 357 Drug Nutrient Interactions
- 359 Recent Major Surgery, Trauma, Burns
- 360 Other Medical Conditions
- 362 Developmental, Sensory or Motor Disabilities Interfering with the Ability to Eat

Other Health Risks

- 381 Oral Health Conditions
- 382 Fetal Alcohol Syndrome (FAS)

Dietary - Priority V

- 401 Failure to Meet Dietary Guidelines (2 – 5 Years of Age)
- 428 Dietary Risk Associated with Complementary Feeding Practices (12 – 23 Months of Age)
- 470 Inappropriate Nutrition Practices for Children

Other Risks - Refer to each risk condition for priority level

Regression/Transfer

- 501 Possibility of Regression - Priority VII
- 502 Transfer of Certification - No priority

Homelessness/Migrancy

- 801 Homelessness - Priority V
- 802 Migrancy - Priority V

Other Nutrition Risks

- 901 Recipient of Child Abuse (within past six months) – Priority V.
 - 902 Child of Woman or Primary Caregiver with Limited Ability to Make Feeding Decisions and/or Prepare Food - Priority V
 - 903 Foster Care – Priority V
 - 904 Environmental Tobacco Smoke Exposure – Priority III
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2012

Policy No. CS:19.0

Midpoint Screening

Purpose

To ensure that the quality and accessibility of health care services for infants enrolled in WIC between birth and four months of age are not diminished.

Authority

7 CFR Part 246.7

Policy

Local agencies (LAs) shall ensure that infants enrolled during their first four months of age will receive health care services (well-child check or Texas Health Steps visit) or are assessed for growth, nutritional and immunization status at WIC between four through eight months of age (six through eight months is preferred). Food benefits shall not be denied to parents/guardians or caregivers who refuse to obtain these health care services or screening by WIC.

Procedure

- I. Infants certified before four months of age, shall be screened between four and eight months of age to determine if the infant has a healthcare provider.
- II. If the infant has a healthcare provider, staff shall inquire if the infant has had a well-child check or Texas Health Steps (THS) visit between four to eight months of age.
 - A. If the infant has had a well-child check or Texas Health Steps visit, the date of the checkup shall be entered into the Texas WIC Information Network (WIN) system.
 - B. If the infant has not had a well-child check or Texas Health Steps visit but has an appointment for the checkup between four to

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2012

Policy No. CS:19.0

eight months of age, enter today's date into the Texas WIN system. The system will not accept a future date.

- III. If the infant does not have a healthcare provider or does not have an appointment for a well-child check or Texas Health Steps visit by seven months of age, WIC staff shall offer to provide a midpoint screening performed by a Certifying Authority or WIC Certification Specialist.
- A. The screening shall include an assessment of weight, length, diet and immunization status. Weight and length shall be plotted on the appropriate growth chart and filed in the client's chart.
 - B. Inquire if parent/guardian/caregiver has any questions/concerns about the infant/family. If there are concerns, the counseling session shall be documented on the VENA Family Documentation tool (F13-06-12805) and filed in the client's chart to maintain continuity of care. Documentation on the VENA Family Documentation tool is not required when parent/guardian/caregiver does not have any questions/concerns.
 - C. Staff shall inform the parent/guardian/caregiver that the midpoint screening at the WIC clinic does not replace a well-check assessment performed by a physician or healthcare provider.
 - D. Referrals shall be made to other health care services for follow-up of any problems detected by WIC staff during the screening. Refer to Policy CS:21.0.
 - E. Staff shall enter the date that the midpoint screening was conducted at the WIC clinic in the Texas WIN system. Filing the Infant Midpoint Review (WIC-RO5) in the client's chart is optional. It is best practice to file the WIC-RO5 for a high risk or medically fragile infant.
- IV. LAs will be considered out of compliance if an infant has reached nine months of age or older and does not have a midpoint documented in the Texas WIN system.
- V. A parent/guardian/caregiver can refuse a midpoint screening.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2012

Policy No. CS:19.0

- A. If the midpoint screening is refused, the parent/guardian/caregiver shall read, sign and date the refusal statement on the WIC-R05 form.
- B. If the parent/guardian/caregiver refuses to read, sign and date the refusal statement, staff shall document the refusal and sign and date the WIC-R05 form.
- C. Staff shall enter the date of the midpoint refusal in the Texas WIN system and file the WIC-R05 form in the client's chart.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. CS:20.0

Certification Forms

Purpose

To document the eligibility of each participant.

Authority

7 CFR Part 246.7(h)

Policy

All eligibility data for each person certified for WIC shall be recorded on the appropriate forms. The forms shall be maintained on file in each participant's or family's record.

Procedures

- I. The following forms shall be on file in the participant's or family's record:
 - A. One of each of the following forms. The Local Agency (LA) shall determine where the forms shall be maintained in the record.
 1. Family Certification Form;
 2. Supplemental Information Form;
 3. WIC Income Questionnaire; and
 4. VENA Family Documentation Tool.
 - B. For information regarding WIC Forms or signed written statements used to determine residency and income eligibility or identification, refer to [Policy CS:05.0](#), [Policy CS:06.0](#), and [Policy CS:07.0](#).
 - C. The appropriate Health History form from the following:
 1. Diet Health History for Infants;
 2. Health History for Children; or
 3. Health History for Pregnant/ Breastfeeding/Postpartum Women.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. CS:20.0

- D. The appropriate nutrition risk assessment form from the following:
 - 1. Infant Participant Form/WIC Infant Nutritional Risk Codes;
 - 2. Child Participant Form/WIC Child Nutritional Risk Codes;
 - 3. Pregnant Participant Form/WIC Pregnant Nutritional Risk Codes;
 - 4. Breastfeeding Participant Form/WIC Breastfeeding Nutritional Risk Codes; or
 - 5. Postpartum Participant Form/WIC Postpartum Nutritional Risk Codes.

- E. The appropriate growth chart from the following:
 - 1. Prenatal Weight Gain-Singleton;
 - 2. Prenatal Weight Gain Grid-Multifetal;
 - 3. Girls: Birth to 24 Months;
 - 4. Boys: Birth to 24 Months;
 - 5. Girls: 2-5 Years; or
 - 6. Boys: 2-5 Years.

- II. Enter participants' certification data into the Texas WIC Information Network (WIN) system using the Family Certification Form and the appropriate Participant Form(s).

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Policy No. CS:21.0

Referral to Health Services

Purpose

To ensure participants are provided information about and referred to health services when appropriate.

Authority

7 CFR Part 246.7

Definitions

Health services: means any routine pediatric and obstetric care (such as well-child checkups, prenatal or postpartum examinations, specialty care, dentistry, and family planning).

Medical home: A healthcare professional or healthcare clinic that provides comprehensive medical care. Comprehensive care includes care of patients with illnesses and injuries, well-child exams, immunizations, and referrals for specialty care.

Follow-up: efforts the local agency (LA) makes to contact the participant and determine the outcome (disposition) of the referral.

Policy

LAs shall refer participants to health services when appropriate. A list of local resources shall be made available for distribution to all applicants and/or participants and their parents or caregivers.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Policy No. CS:21.0

Procedure

- I. LAs shall maintain an up-to-date list of local health services including resources for drug and other harmful substance abuse counseling and treatment.
- II. At each certification, LAs shall determine whether or not an applicant has a medical home. The medical home shall be documented on both the WIC Health History form (WIC-42, WIC-44, and WIC-45) and on the Participant form (WIC-36, WIC-38, WIC-39, WIC-40, WIC-41).
- III. Applicants and/or participants who do not have a medical home shall be:
 - A. given an up-to-date, written list of health services within the community; and
 - B. counseled about the importance of regular health care.
- IV. Applicants and/or participants who are identified as needing drug and other harmful substance abuse services shall be given an up-to-date, written list of drug and harmful substance abuse counseling and treatment services.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2016

Policy No. CS:22.0

Completing the Supplemental Information Form

Purpose

To legally document notice of eligibility, release of client information, and applicant/participant rights and obligations, and compliance with the National Voter Registration Act (NVRA) of 1993.

Authority

7 CFR Part 246.7(h)(7)

Policy

Local agencies (LAs) shall use the Supplemental Information Form (SIF), to document appropriate notification of eligibility, release of information, rights, and obligations and provide applicants/participants the opportunity to register to vote.

In accordance with Policy GA: 19.0, LA staff shall provide pregnant, breastfeeding and postpartum applicants/participants with Opportunity to Register to Vote NVRA at each certification. Adult parents/guardians applying on behalf of a child may receive Opportunity to Register to Vote NVRA and shall be offered a voter registration application.

Procedures

- I. At each certification, participants and parents/guardians/caretakers applying on behalf of a child shall be offered the opportunity to read, or have read to them, the Supplemental Information Form (SIF). The parent/guardian shall attend the initial certification appointment. - Refer to policy CR:07.0 for accommodations for families with special health care needs.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2016

Policy No. CS:22.0

- A. Rights and Responsibilities of a WIC Participant.** This section is to inform participants of their rights and obligations on the WIC Program (refer to Policy CR: 01.0).
- B. Required Signature Statement.**
1. The LA staff shall provide the Your Guide to Texas WIC booklet, (stock # 13-3) which includes the following USDA required information for each participant:
 - a. The purpose of the WIC Program is to provide nutritional support (i.e., education and strategies for a healthy diet, supplemental foods, referrals and breastfeeding promotion and support, during critical times of growth and development, to improve health and achieve positive health outcomes).
 - b. The nutrition assessment process is necessary to identify nutritional needs (e.g., medical conditions, dietary practices) and interests so that WIC can provide benefits that are responsive to the participant's wants and needs.
 - c. The relationship between WIC staff and the participant is a partnership – with open dialogue and two-way communication – working to achieve positive health outcomes.
 - d. WIC food benefits are prescribed for the individual, to promote and support the nutritional well-being of the participant and to help meet the recommended intake of important nutrients or foods.
 - e. The food provided by the Program is supplemental, and is not intended to provide all of the participant's daily food requirements.
 - f. Each participant must reapply at the end of the certification period and be reassessed for Program eligibility.
 2. After the applicant or parent/guardian/caretaker has been given the opportunity to read or have read to her/him the Rights and Responsibilities and Required Signature Statement, the applicant or parent/guardian/caretaker shall sign and date under 2. Required Signature Statement on the line designated as "Signature of applicant*/parent/guardian/caretaker."

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2016

Policy No. CS:22.0

- a. The SIF is a legal document. All signatures and dates on the form shall be made by the signing party in his/her own handwriting.
- b. A date stamp shall not be used, and initials shall not be used unless initials constitute the individual's official signature.
- c. The signature date shall reflect notification of eligibility within the appropriate processing timeframe (refer to Policy CS: 02.0).
- d. The signature of an additional parent/guardian/caretaker, who will also be a food benefit recipient, should be obtained if present during the certification. If the additional parent/guardian/caretaker signs the form at a later date than when eligibility was determined, that date shall be recorded next to the signature.
- e. Under extreme and unusual circumstances, a parent/guardian can provide authorization for another adult to be a food benefit recipient at an infant or child certification (e.g., parent/guardian is in the hospital, working parent not able to attend appointment). The parent/guardian shall
 - i. Write a note providing authorization including their signature.
 - ii. Complete the WIC Income Questionnaire (WIC-35-3) with their signature and provide all documents required for income screening.
- f. If a change in custody has occurred during a certification period, the new guardian shall complete and sign a new SIF. Income must be reassessed unless there are 90 days or less before the expiration of the certification period. For foster children, refer to Policy CS: 11.0.Certification of Foster Children.
- g. Eligible infant and/or child applicant/participant names shall be documented under "WIC Eligible Infants and Children." The form allows for five names. If additional children are eligible, a second form shall be completed (including the section on sharing information with the THSteps Program)

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2016

Policy No. CS:22.0

and signed. Completing the NVRA is not required on the second form.

C. Physically present:

LA staff shall document the physical presence of an applicant/participant on the SIF by checking the "Yes" or "No" box (refer to Policy CS: 04.0 for the criteria and requirements for waivers when not physically present).

1. Infants less than one month old may be certified without being physically present; however, the infant shall be presented to WIC staff by the infant's six week birth date.
 - a. All required documentation shall be presented at the certification.
 - b. The date the infant was presented shall be documented in the "For WIC Official Use Only" section. The staff person witnessing physical presence shall enter their initials next to the date the infant was presented to WIC.
2. Pregnant, breastfeeding and postpartum applicants with special healthcare needs may be certified without being physically present (refer to Policy CR: 07.0). If determined eligible, an adult acting on behalf of the pregnant, breastfeeding or postpartum woman shall sign the Required Signature Statement in section 2. on the SIF and enter the pregnant, breastfeeding or postpartum woman's name below their signature.

D. For WIC Official Use Only. This section is for the Certifying Authority's (CA) or WIC Certification Specialist's (WCS) signature. The CA or WCS shall sign and date the form as the designated WIC official authorized to certify participants. The staff member's title shall be included (abbreviations are acceptable, e.g., CA, RD, WCS). By signing the SIF, the WIC official attests to the accuracy of determination of eligibility. This form is a legal document (see signature and date requirements under I.B.2. in this policy).

E. Shared WIC Participant Information. This section refers to the release of participant information to programs the Commissioner of

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2016

Policy No. CS:22.0

the Texas Department of State Health Services has authorized to receive information for specified purposes.

1. For programs listed as 3. a., b., and c. on the SIF, applicants and parents/guardians/caretakers do not have the option of declining to permit information sharing if they decide to participate in the WIC Program.
2. For the Texas Health Steps (THSteps) Program, listed as 3.d. on the SIF, applicants and parents/guardians/caretakers have the option to disclose or decline to share information and shall place a mark in the appropriate box on the form. If the participant declines to disclose their information, LA staff shall check "99" under the "Referred To" on the Health Care/Referral section of all Participant Forms (WIC-36 through 41) of all family members being certified.

- II. **Opportunity to Register to Vote NVRA** At each certification, LA staff shall have pregnant, breastfeeding and postpartum applicants/participants read and complete the section titled "Opportunity to Register to Vote." Each LA will determine when to offer the voter registration services during the application process. Refer to Policy GA: 19.0 for the criteria and instructions on completing the Opportunity to Register to Vote and compliance with the National Voter Registration Act of 1993. Adult parents/caretakers applying on behalf of a child, are not required to complete the "Opportunity to Register to Vote" section; however, they shall be offered a voter registration application. These procedures apply to both eligible and ineligible persons.
- III. If a new family member is added, the same SIF form can be used within 30 days. For the Sharing of Information with THSteps Program, the parent/guardian/caretaker will initial by the box that they originally checked off. The parent/guardian/caretaker and staff shall sign and date by original signatures on both the SIF portions of the form where applicable. The new family member's name shall be added where applicable.

Nutrition Services Department of State Health Services

Effective January 1, 2011

Policy No. CS:23.0

Notification of Ineligibility, Termination or Expiration of Eligibility

Purpose

To ensure applicants and participants are informed of the reasons for ineligibility or termination and clearly understand their right to a fair hearing to appeal such a determination. To ensure participants are informed of the expiration date of their certification and the ability to reapply to continue receiving benefits if categorically eligible.

Authority

7 CFR Part 246.7

Policy

A person found ineligible for the program shall be notified in writing of the reason(s) for the ineligibility and of the right to a fair hearing. Local agencies (LAs) shall use the Notice of Ineligibility or Termination form (WIC-5) to document an applicant's or participant's ineligibility or termination from the program. A participant found ineligible shall keep their EBT card.

A participant who is approaching the end of WIC Program eligibility due to termination or expiration of his/her certification period shall receive notification at least 15 days prior to the end of the certification.

Definitions

Ineligible means an individual does not qualify for WIC at either initial or subsequent certification because:

- a. there is no documented condition of nutritional need (infants up to three months of age),
- b. the person's household income exceeds standards,

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. CS:23.0

- c. the person does not live within Texas,
- d. the child is five years or older,
- e. the person does not meet categorical requirements; or
- f. the person has not met the physical presence requirement.

Procedures

I. Notification of Ineligibility at Initial and Subsequent Certifications

A. When ineligibility is determined during the certification visit, the applicant or parent/guardian/caregiver shall be notified in writing at that time. Documentation of such notification shall be maintained as follows:

1. Notification of ineligibility at an initial or subsequent certification visit shall be documented on the WIC-5, Notice of Ineligibility or Termination
2. Any active participant, belonging to the household determined income or residency ineligible, shall be issued one final set of benefits (to ensure he/she is receiving a 15 day notification) before termination (see II. Notification of Termination)

Example: Child's certification period 11/20/xx through 4/30/XX. On January 10th, mom applies as a pregnant woman but is determined income ineligible. In order to provide the parent 15 days of notification before termination, the child is entitled to benefits through January 25th. Since the child's benefits are valid from January 1st to January 31st, this is considered to be the last issuance for which the child is eligible.

To determine if an active participant is entitled to additional benefits, add 15 days to the date income ineligibility was determined for the applicant. If the active participant does not have benefits on the card that day, issue a single month's benefits before terminating the

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. CS:23.0

participant. If the participant has benefits on that day, do not issue additional benefits. If the participant has benefits past the 15 days notification period staff shall void the benefits.

- B. When ineligibility is determined after the certification visit, and the applicant or parent/guardian/caregiver is not physically present, notification of ineligibility shall be mailed.
 - 1. Notification of ineligibility shall be identified on the WIC-5 form and be mailed to the applicant or parent/guardian/caregiver
 - 2. LAs shall retain a copy of the WIC-5 with a notation that the form was mailed and the date it was mailed; i.e., write "mailed" in lieu of the applicant's signature. Documentation that supports the decision regarding applicant ineligibility shall be kept on file.
 - 3. Any active participant, belonging to the household and determined income ineligible, shall be issued one final set of benefits to ensure he or she is receiving a 15-day notice before termination. (See example under I. A. 2.)

In situations where the participant has future month's benefits on the WIC Lone Star card, the parent shall be informed the card will be inactivated the month following the last set of benefits (15 day rule). LA staff shall call the Information and Response (IRM) to place a future month administrative lock on the card.

II. Notification of Termination for Active Participants

- A. A 15-day written notice shall be provided if a participant is terminated within a certification period for the following reasons:
 - 1. program abuse (includes dual participation);
 - 2. caseload management/funding shortage; and

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. CS:23.0

3. exceeds income guidelines due to a reassessment.

B Document the date of notification on the Notification of Ineligibility or Termination form (WIC-5); the documented date shall be at least 15 days before the "Action Date" of termination in the WIN system.

1. Instruct the participant/parent/guardian/caregiver to sign and date the WIC-5 if physically present at the clinic when notice and reason(s) for termination are given.
2. If the participant is not physically present, use form WIC-5 to send notification by mail. The LAs shall retain a copy of the WIC-5 with a notation that the form was mailed and the date it was mailed; i.e., write "mailed" in lieu of the applicant's signature. Documentation that supports the decision regarding applicant ineligibility shall be kept on file.
3. Participants found to exceed the income standard during an active certification, due to a reassessment of their income eligibility, shall be issued one final full set of food benefits, to ensure he or she is receiving a 15 day notification before termination. (See example under I.A.2).
4. The active participant(s) shall be terminated in the WIN system. The termination date will be recorded as the first day of the following month after the "Last Date To Spend." A participant terminated in the WIN system cannot be reactivated without recertification/subsequent certification.

III For applicants found income ineligible, LAs shall retain the following forms/documents on file:

- A. WIC-35, Family Certification/WIC Program Screening Form (completion of side 2 is required),
- B. WIC-35-3, WIC Income Questionnaire,
- C. documents provided as proof of income, and
- D. WIC-5, WIC Notification of Ineligibility or Termination

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. CS:23.0

IV. Notification of Certification Expiration

Notification of certification expiration shall be given either verbally during the last contact in person or in written form.

- V. Any individual terminated for any reason has a right to a fair hearing. (See Policy **CR:03.0.**)

Guidelines:

Refer to the Texas WIN Reference Manual for instructions on WIN Termination procedures.

Nutrition Services Department of State Health Services

Effective March 1, 2012

Policy No. CS: 24.0

Certification Periods

Purpose

To identify the length of time program participants are eligible for WIC benefits.

Authority

7 CFR Part 246.7; 25 TAC §31.25

Policy

WIC benefits will be provided to participants in accordance with the timeframes defined by federal regulations for each category.

Definition

Certification expiration date is the last day of the certification period and the last day the participant shall receive benefits.

Procedures

- I. Begin certification periods on the date the applicant is determined eligible for benefits.

- II. A pregnant woman shall be certified to receive benefits for the duration of her pregnancy, and between delivery and up to six weeks postpartum.

EXAMPLE: Expected delivery date: 11/22/yy
Date infant is six weeks old: 01/03/yy
Certification expiration date: 01/03/yy

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2012

Policy No. CS: 24.0

The benefits issued between delivery and six weeks postpartum may be issued before OR at the time of the postpartum screening.

- III. A postpartum woman who is not breastfeeding shall be certified only until she is six months postpartum. Certification shall expire on the day her infant is six months old.

EXAMPLE: Delivery date: 11/22/yy
Certification action date: 12/01/yy
Certification expiration date: 05/22/yy

- IV. A breastfeeding woman (exclusively, mostly or some breastfeeding) shall be certified for a 12 month period or until breastfeeding is discontinued. The woman's certification shall expire the day before the infant's first birthday, or the day the woman stops breastfeeding. See Policy BF: 01.0 for definition of breastfeeding woman.

EXAMPLE: Delivery date: 11/22/yy
Certification action date: 01/05/yy
Certification expiration date: 11/21/yy

- A. If a woman discontinues breastfeeding before six months postpartum, for continuation of certification, her category, risk conditions (if applicable) and food package code need to be changed in the Texas WIC Information Network (WIN) system so she may participate as a postpartum woman. If her eligibility was based solely on breastfeeding risk conditions, risk code 501, Regression, may be applicable based on her pregnancy risk conditions. If risk code 501 is not applicable, staff shall assign risk code 401, Failure to Meet Dietary Guidelines for Americans, and the woman shall be issued postpartum benefits.
- B. If a woman discontinues breastfeeding after six months postpartum, she is no longer categorically eligible. Utilizing Void Benefits, staff shall void any remaining benefits for which she is

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2012

Policy No. CS: 24.0

not eligible to receive and she shall be terminated in the WIN system.

- V. A child, up to age 5, shall be certified for a 12-month period ending on the last day of the twelfth month.

EXAMPLE: Certification action date
Certification action date: 12/14/yy
Certification expiration date: 12/31/yy

For a child turning five years of age, their eligibility will expire at the end of the month in which the child reaches his/her fifth birthday.

EXAMPLE: Child's fifth birthday
Certification action date: 01/25/yy
Child's fifth birthday: 03/19/yy
Certification expiration date: 03/31/yy

If a child is certified in the month of his/her fifth birthday, the certification must occur before the birth date in order for the child to be eligible for benefits. This includes initial and subsequent certifications.

EXAMPLE: Child certification in fifth birthday month
Child's fifth birthday: 03/19/yy
Certification action date: 03/18/yy
Certification expiration date: 03/31/yy

- IV. An infant, younger than six months at the time of initial enrollment, shall be certified up to his/ her first birthday. Certification shall expire on the day prior to the infant's first birthday.

EXAMPLE: Date of birth: 11/22/yy
Certification action date: 04/10/yy
Certification expiration date: 11/21/yy

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2012

Policy No. CS: 24.0

- V. An infant, six months or older at the time of initial enrollment, shall be certified for a six-month period ending on the last day of the sixth month.

EXAMPLE: Date of birth: 11/22/yy
Certification action date: 07/11/yy
Certification expiration date: 12/31/yy

Nutrition Services Department of State Health Services

Effective August 1, 2009

Policy CS: 25.0

Issuance of WIC Lone Star Cards

Purpose

To provide documentation of participation in the WIC Program, provide food benefits and access to the participant's/family's records in the computer system.

Authority

7 CFR Part 246.7

Policy

The local agency (LA) shall issue one WIC Lone Star Card to each new family of WIC participants.

Procedures

- I. Before a WIC Lone Star Card or replacement card is issued (refer to **Policies CS:05.0, CS:26.0**), the applicant shall present appropriate identification as stated in **Policy CS:05.0**.

- II. Once eligibility of a new family is determined, a WIC Lone Star Card is issued and assigned a PAN. The participant shall receive hands-on training in the use of the card and selecting a personal identification number (PIN). As part of the hands-on training, the participant shall select his/her personal identification number (PIN). The clinic staff load the benefits onto the card and a shopping list/benefits receipt will be printed. The participant shall sign the shopping list/benefits receipt. The clinic retains the signed original and the participant takes the signed copy. The participant removes and signs the WIC Lone Star Card.

Nutrition Services

Department of State Health Services

Effective August 1, 2009

Policy CS: 25.0

- III. LAs shall account for each WIC Lone Star Card received from the state agency and issued to participants through the inventory component of the Texas WIC Information Network (WIN) system.
- IV. Unissued WIC Lone Star Cards shall be kept in a secured area at the clinic/LA.

Guidelines

Refer to the Texas WIN EBT Quick Guide for Clinics for WIN procedures on issuing WIC Lone Star Cards.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2009

Policy CS: 26.0

Issuance of Replacement WIC Lone Star Cards

Purpose

To limit interruption of services to the WIC participant due to the loss, theft, damage, or failure of the WIC Lone Star Card.

Authority

State Policy

Policy

The local agency (LA) clinic sites shall issue replacement WIC Lone Star Cards when reported lost, stolen, or damaged by the participant/WIC Lone Star Card recipient.

Definitions

Decrement – the process of deducting (removing) WIC foods from the WIC Lone Star Card.

Hot Card – an indicator that a WIC Lone Star Card has been permanently disabled due to being lost, stolen, or damaged or administratively disabled due to a family transfer to a non-EBT clinic, partial family transfer or dual participation.

Procedures

- I. When a participant or parent/guardian reports that his/her WIC Lone Star card has been lost or stolen:
 - A. Instruct the participant or parent/guardian to call the State Agency (SA) WIC 1-800-942-3678 number to report the card as lost or

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2009

Policy CS: 26.0

- stolen. If current benefits were on the card, inform the individual that it will take six business days for replacement.
- B. The SA 1-800 operator will permanently disable the card (hot card) and instruct the participant or parent/guardian to call the clinic the next business day to schedule an appointment for a replacement card. The Local Agency Administration site and/or clinics shall view and/or print the EBT Hot Card Report at minimum on a weekly basis. The retention period for the printed report shall be determined by each LA. Instructions on how to process the EBT Hot Card Report are located at <http://www.dshs.state.tx.us/wichd/hd/qwest.shtm>
- C. When the participant calls the clinic to schedule an appointment for the replacement card, the LA staff shall confirm the card/PAN has been hot carded through the EBT Hot Card report available through TWIN.
1. If current benefits were not on the card, a replacement card may be issued as soon as the Hot Card record is received at the clinic.
 2. If benefits were on the card, schedule an appointment for a replacement card on or after the sixth business day. Five business days must elapse before the replacement benefits are available (sent by the SA) to the clinic electronically for issuance.
 3. If a family member (e.g., a newborn) is certified during the hot card period, issue a replacement card on the day of the certification with benefits for this individual. Schedule an appointment for the participant or parent/guardian to return (in accordance with I. C. 2 of this policy) to load the other family member's replacement benefits on the card.
- D. Replacement benefits, if available at the time the replacement card is issued, are automatically loaded on the replacement card when it is issued. Receipt of replacement benefits can be verified through the participant's Shopping List.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2009

Policy CS: 26.0

- E. Once benefits are received electronically at the clinic, a replacement card can be issued. The participant or parent/guardian shall present appropriate identification as stated in Policy CS:05 and select and confirm the personal identification number (PIN).
 - 1. If benefits were available on the card when the card was reported lost, stolen, or damaged, all remaining benefits for the current month will be replaced in full (regardless of the number of days remaining in the month) if the benefits are loaded within the same month. Benefits for past months will not be loaded on the card.
 - 2. If the card was lost, stolen, or damaged at the end of the month, remaining benefits for the month may be lost due to the time element, six business days for the replacement process.

 - F. A shopping list/benefits receipt shall be printed and signed by the participant or parent/guardian. The clinic staff shall:
 - 1. retain the original signed shopping list/benefits receipt and ask the participant or parent/guardian to sign the back of the WIC Lone Star Card; and
 - 2. provide the bottom copy of the shopping list/benefits receipt to the participant or parent/guardian with his/her replacement WIC Lone Star Card.

 - G. Counsel the participant or parent/guardian on the importance of taking care of his/her WIC Lone Star Card. Document in TWIN, under the issuance screen in the "comment" field, that the participant or parent/guardian was counseled.
- II. When a participant or parent/guardian reports his/her WIC Lone Star Card is damaged the following procedure shall be followed.
- Instruct the participant or parent/guardian to come to the clinic with the card to determine if a replacement card is necessary.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2009

Policy CS: 26.0

Check the card for physical damage and/or the Texas WIC Information Network (WIN) system to determine if the card is indeed damaged. If the card is damaged, the **staff** shall:

1. contact the local agency's SA Information and Response Management (IRM) liaison to disable the card. Refer to **Policy FD:04** for procedures on the disposition of the card; and
2. have the card physically available when contacting IRM. If the card is damaged and benefits are on the card, inform the individual that it will take six business days for a replacement. Follow procedures I. C through F. of this policy.

III. When a WIC Lone Star Card fails during benefit issuance due to a problem with the card that is not visible and the participant has not left the clinic (card failure could occur during transition from vouchers to the WIC Lone Star card or for an initial certification), the following procedure shall apply:

- A. The clinic staff shall contact the Automation Help Desk at 1-800-650-1328.
 1. If the Automation Help Desk determines that the card has indeed failed, the clinic must call the IRM liaison to Hot Card the PAN as damaged. The State agency will override the Hot Card waiting period.
 2. Once the Hot Card record arrives at the clinic, a new WIC Lone Star Card shall be issued.
- B. Refer to **Policy FD:04** for the disposition of a card that fails to load benefits. Code the card as D – Damaged After Issue on the Unusable WIC Lone Star Card Log.

IV. Hot Cards:

- A. Once a card has been placed on the hot card list as permanently disabled (lost/stolen/damaged) it can never again be used for redemption. In order for the participant to obtain more benefits the card must be replaced.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2009

Policy CS: 26.0

B. Cards placed on the hot card list as administratively disabled due to a family separating (splitting) and one or more family members transferring:

1. The losing clinic (EBT clinic) shall be responsible for notifying the family with the WIC Lone Star Card, by phone and/or mail, that their WIC Lone Star Card will not work the first day of the following month unless they return to the clinic with the card before that date to have the appropriate benefits removed from the card.
2. Once the benefits have been removed, the card will be reactivated for issuance and redemption.
3. If only the transferring participant exists on the WIC Lone Star Card, the card shall not be reactivated.

C. The Local Agency administration site and or clinics shall view and or print the EBT Hot Card Status/Family Notification Report at minimum on a weekly basis. The retention period for the printed report shall be determined by each L A. Instructions on how to process the EBT Hot Card Status/Family Notification Report are located at <http://www.dshs.state.tx.us/wichd/hd/qwest.shtm>.

Guidelines

Refer to the Texas WIC Information Network (WIN) EBT Quick Guide for Clinics for instructions on WIN issuance of replacement of WIC Lone Star cards.

Texas WIC Program Texas Department of Health

Effective: January 1, 2017

Procedure CS: 27.0

Enrollment of Transferring Participants

Purpose

To ensure transition of services and uninterrupted benefits for transferring participants for the entire duration of the current certification period.

Authority

7 CFR Part 246.7; State Policy

Policy

Participants transferring from another WIC local agency (LA) or from the WIC Overseas Program shall be eligible to receive WIC benefits (or priority placement if a USDA- and State agency-approved waiting list is in place) if they present valid WIC identification cards from Texas or valid proof of current certification from another state or the WIC Overseas Program.

Procedures

- I. **A transferring participant resides within Texas:** When a transferring participant resides within Texas and presents a Texas WIC Card:
 - A. Request a transfer for the participant(s) immediately through the WIC Information Network (WIN) system using the Texas WIC Card Primary Account Number (PAN). If a waiting list does not exist, schedule the participant(s) to receive benefits **on or after the 4th business day** from the date of the transfer request.

Example: Transfer requested on Tuesday. Count Wednesday as Day 1. Thursday is Day 2. Friday is Day 3. Saturday and Sunday are not considered business days so are not counted. Monday is Day 4. Schedule the client on or after Monday.

Texas WIC Program Texas Department of Health

Effective: January 1, 2017

Procedure CS: 27.0

Do not submit multiple transfer requests for the same transfer. When a clinic sends a second request before the original request is processed, the original request is overwritten and another 4-day wait begins.

- B. If the LA has a waiting list, place the participant(s) first on the list and then enroll the participant(s) according to Policy **CS:31.0**.
- C. Enroll the participant(s) immediately if no waiting list exists. Document proof of identification (Policy **CS:05.0**) and residency (Policy **CS:06.0**).
- D. Once the transfer records have been received, issue all benefits for which the participant(s) is eligible.
- E. If the participant has lost the Texas WIC Card, refer to Policy **CS:26.0**.
- F. A Supplemental Information Form (SIF) is not required.

II. **Transferring family members from clinic who have separated:**

When a family is separating (splitting) and one or more family members are transferring to another Texas WIC clinic follow this process:

- A. The gaining clinic shall contact their Information and Response Management (IRM) liaison to notify the SA that one or more family members have transferred to their site.
- B. The SA will place an administrative lock on the losing family's Texas WIC Card effective the first day of the following month. The losing clinic will be notified that the card has been locked through a daily report
- C. The losing clinic shall notify the family by phone and/or mail that their Texas WIC Card will not work beginning with the effective date of the administrative lock (on the first day of the following month) unless they return to the clinic with the card before that date.

<p style="text-align: center;">Texas WIC Program Texas Department of Health</p>

Effective: January 1, 2017

Procedure CS: 27.0

1. When the card is returned to the clinic, staff shall use the F4REMOVE option on the Standard Issuance – Benefit Issuance screen to remove the appropriate benefits from the card and reactivate the card for benefit redemption.
 2. If only the transferring participant exists on the Texas WIC Card, the card shall not be reactivated.
 3. If more than one participant is active on the card, remove future benefits for the transferred participant(s).
- D. At the gaining site, the clinic shall issue a new Texas WIC Card and benefits if the participant(s) has not been issued benefits for the current month. If benefits have been issued for the current month, the clinic shall schedule an appointment as close to the first working day of the following month.
- III. **Transfers from Out of State and the WIC Overseas Program with Verification of Certification (VOC):** When a transferring participant presents a VOC from another state or the WIC Overseas Program with the participant's name and a valid certification date, follow this process:
- A. Enroll the participant immediately if no waiting list exists. Document proof of identification (Policy **CS:05.0**) and residency (Policy **CS:06.0**). The VOC is valid until the certification period shown on the VOC expires and shall be accepted as proof of eligibility for program benefits.
 - B. If out-of-state/WIC Overseas Program proof of certification reflects a longer certification period than that authorized in Texas, the LA shall apply the originating WIC Program's certification period.
 - C. Enroll instream migrants and Indians with valid WIC VOC, even when they do not live in the LA service area. Instream migrants

Texas WIC Program Texas Department of Health

Effective: January 1, 2017

Procedure CS: 27.0

with an expired VOC shall be enrolled if income was determined in the last 12 months.

- D. Issue a Texas WIC Card to the participant.
1. If the date when food benefits were last issued is unknown, contact the other state to verify issuance. If the participant does not have current benefits and is enrolled before the 16th of the month, full month benefits will automatically be issued. If the participant is enrolled on or after the 16th of the month, a partial package will automatically be issued.
 2. If the participant has already redeemed and used his/her benefits for the current month, schedule the participant to return the following month.
 3. Document the eligibility of the out-of-state/WIC Overseas Program transferring participant in the new certification record (collect the out-of-state VOC, if available) and file in participant's file.
 4. Destroy WIC Card or food instruments/cash value vouchers from losing state.
- E. If the VOC does not reflect a specific nutrition risk condition or the participant was certified based on a nutrition risk condition not in use by Texas WIC, assign risk condition 502, Transfer of Certification. A transfer cannot be refused because another state or WIC Overseas Program has criteria that are different from the criteria in Texas. It is not necessary to obtain additional information on nutrition risk conditions or clinical data. The nutrition risk determination by the originating state is sufficient to qualify the transferring participant for benefits through the end of the current certification period.
- F. A Supplemental Information Form (SIF) is required.

Texas WIC Program Texas Department of Health

Effective: January 1, 2017

Procedure CS: 27.0

- IV. Transfers going to another State or the WIC Overseas Program with Verification of Certification (VOC):** When a participant informs the WIC clinic they are leaving Texas to participate in another state WIC program follow this process:
- A. Provide the participant a copy of their VOC to take with them to the gaining state.
 - B. Educate the family to shop for WIC benefits before leaving Texas as the Texas WIC card will not work in another state and the card must be given to the new/gaining out of state or Overseas WIC clinic.
 - C. WIC participants issued VOC cards when they transfer overseas shall be instructed that:
 - 1. There is no guarantee that the WIC Overseas Program will be operational at the overseas site where they will be transferred.
 - 2. By law only certain individuals are eligible for the WIC Overseas Program.
 - 3. Issuance of a WIC VOC card does not guarantee continued eligibility and participation in the WIC Overseas Program.
- V. A transferring participant may receive benefits at the new LA for the duration of the valid certification period documented on his/her VOC.

Guidelines

- I. Refer to the Texas WIC Information Network (WIN) Reference Manual for instructions on requesting an in-state transfer via the WIN system. Transfer of the client's WIC record is done via the nightly transmission of data from LA to the SA and back to the LA.
- II. Information about the WIC Overseas Program may be accessed on the TRICARE website at <http://www.tricare.mil/wic>.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. CS:28.0

Preventing and Detecting Dual Participation

Purpose

To prevent participants from receiving duplicate food benefits.

Authority

7 CFR Part 246.7

Policy

Each local agency (LA) shall implement preventive procedures and utilize the automated Texas WIC Information Network (WIN) System Dual Participation component to help prevent and detect dual participation.

Procedures

I. Preventing Dual Participation:

- A. At certifications and with each food instrument issuance, follow procedures for documentation of identity as stated in **Policy CS:05.0**.
- B. At certification, obtain the participant's written declaration that they and/or their child do not already participate in WIC. (This statement is included on the Supplemental Information Form, WIC-35-1.)

II. Detecting Dual Participation:

- A. Each LA shall review and investigate the client records identified by the WIN system as suspected dual participants.
- B. An alert record for each new client identified by the automated system as a suspected dual participant shall be electronically forwarded to that client's LA system. The record shall identify

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. CS:28.0

the suspected client and the client ID, LA and clinic of the possible match. It is the responsibility of the notified LA to investigate and respond electronically to the state agency (SA). If other LAs are involved, these LAs also have the responsibility to cooperate with the new LA in their investigation. Until the investigation has been completed, the client's record is locked to prevent further issuance of food instruments.

- C. The new (i.e., most recently visited) LA shall investigate the suspected dual participation prior to the next scheduled food instrument issuance.
- D. It is the new LA's responsibility to determine if the lock shall be removed and to coordinate the decision with other LAs. In the case of an actual dual participation determination, the new LA shall document electronically in the WIN system who shall keep and who shall lose the client.
- E. The system shall record the results of the investigation along with the user ID number of the LA staff person. If a second LA is involved, the SA shall transmit a record lock to that LA (i.e. the second LA shall lose the client). The only way to reverse this lock is to request a transfer.

Guidelines

- I. Dual participant screening consists of nightly evaluation of specific data fields of new client records received at the SA against the same data fields of active client data already existing at the SA.
- II. When matches are found, these client records are provided for review to the SA investigative staff. Investigative staff have 21 days to review these records to identify those which warrant further investigation at the LA level.
- III. Records which have not been reviewed by SA staff within 21 days shall be automatically defaulted to a suspected dual participation status, locked, and transmitted to the new LA for investigation.

Nutrition Services
Department of State Health Services

Effective June 1, 2002

Policy No. CS:28.0

IV. Refer to the Texas WIN Reference Manual for further information.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. CS:30.0

Caseload Management

Purpose

To ensure the delivery of WIC benefits to persons with the greatest need.
To ensure that all participants/applicants are treated equally.

Authority

State Policy

Policy

Upon notification by the state agency (SA), the local agency (LA) shall submit local caseload management policies for approval by the SA.

Procedures

- I. The LA shall submit any local caseload management plans to the SA for approval before implementation.
- II. Approval letters shall be kept on file for audit review.
- III. Caseload management policies shall be adhered to consistently and fairly with all participants.
- IV. The termination or ineligibility determination of participants/applicants for caseload management shall be documented on the Supplemental Information Form (SIF) and signed by the Certifying Authority (CA).

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. CS:31.0

Waiting List for WIC

Purpose

To ensure the delivery of WIC benefits to persons with the greatest need as soon as caseload slots are available. To ensure that LAs are not serving over their maximum approved caseload.

Authority

7 CFR Part 246.7

Policy

The local agency (LA) shall maintain a waiting list of applicants only when the total number of participants reaches the maximum available caseload.

Procedures

- I. A waiting list shall be started when monthly participation reaches maximum caseload.

- II. LAs have the following options when maintaining a waiting list:
 - A. to place all interested persons on a waiting list before they are screened for eligibility;
 - B. to screen or partially screen all applicants to determine a priority and place only eligible persons on the waiting list as follows:
 1. Exercise this option only when there are enough caseload slots available each month to realistically expect that most of the participants shall be enrolled.
 2. Partially screen to the point where eligibility is determined for the purpose of placement on a waiting list.
 - C. to screen or partially screen (see II B.) and determine the priority of the first 10 to 50 applicants on the waiting list so that

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. CS:31.0

the highest priorities may be enrolled as soon as caseload permits. The number screened shall depend on the size of project's caseload and its usual attrition rate.

- III. The LA's waiting list shall include, at a minimum, the following information about each applicant. Additional information, i.e., priority, shall be necessary if the LA determines eligibility before placement on a waiting list.
- A. applicant's name;
 - B. address and/or phone number;
 - C. age;
 - D. category of applicant (PNBIC);
 - E. date and notification of placement on the waiting list;
 - F. status as a migrant, Indian, or transfer;
 - G. date and time of appointment for screening, if known and if applicable;
 - H. date notified to schedule an appointment for screening or be enrolled, if applicable;
 - I. response to notification for appointment/enrollment; and
 - J. date of enrollment, if applicable.
- IV. Applicants shall be notified of their placement on the waiting list within 20 calendar days of their request for services.
- V. If the LA has a system for caseload management that eliminates certain low priorities or if there are not enough caseload slots to enroll low priorities, it is unnecessary to place individuals within those priorities by completing a partial, preliminary assessment of applicants. This would enable the placement of only high priority applicants on the waiting list. The nutritional assessment shall be completed at the time of enrollment.
- VI. Waiting lists are not limited to individuals initially applying for WIC. WIC participants wanting to reapply when their eligibility expires shall also be placed on waiting lists, when appropriate.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. CS:31.0

- VII. Applicants with referral data shall not be given priority for enrollment or placement on a waiting list over applicants without referral data. The LA shall have procedures to assure that applicants without referral data are afforded equal opportunity in the pool of WIC applicants.
- VIII. If an applicant insists on being placed on a waiting list, he/she shall be placed on it.
- IX. When the LA is maintaining a waiting list, WIC staff shall always explain to applicants, in-state transfers, and out of state transfers with a valid Verification of Certification (VOC) why placement on a waiting list is necessary and what it means in terms of realistic possibilities for enrollment. Referral to other health/social services shall be made when appropriate.
- X. Out of state transfers who are within their certification period and have a valid VOC or in-state transfers within their certification period shall be put on the waiting list ahead of any other applicant.
- XI. Certified applicants/participants shall be recalled from the waiting list in the following order:
 - A. Transfers--both in-state and out-of-state by;
 - 1. priority; and
 - 2. earliest date of certification.
 - B. all other applicants/participants by;
 - 1. priority; and
 - 2. earliest date of certification.
- XII. If an applicant/participant's certification has expired prior to recall from the waiting list, the applicant/participant shall reapply for WIC food instruments.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. CS:31.0

Guidelines

Available caseload slots may be estimated for the next month by:

- I. determining the number of participants whose certification expires;
plus
- II. those who will be terminated as categorically ineligible; plus
- III. those who have failed to pick up food instruments for two consecutive
months; plus
- IV. those who have terminated for other reasons, i.e., moving from the
service area.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2014

Policy No. CS:32.0

Mid-Certification Assessment for Children

Purpose

To ensure the quality and accessibility of health care and nutrition services for children are not diminished for participants certified for longer than six months.

Authority

7 CFR Part 246.7

Policy

Local agencies (LAs) shall ensure children certified for a year shall be offered a Mid-Certification Assessment, which includes a nutrition assessment (review of anthropometrics, blood work, and a brief update of the health and dietary assessment), immunization screening, nutrition education and referrals to other health and social services, within the certification period. Food benefits shall not be denied to parents/guardians who refuse to obtain these services for their children.

Procedures

- I. Children certified for a year shall be offered a mid-certification assessment between the 4th and 10th months from the “effective certification/sub-certification/recertification date”. When calculating this time period, count the month of certification as the first month. Example: For a certification done on March 10th, the Mid-Certification Assessment shall be offered and completed any time from June 1st through December 31st. Note: In Texas WIN, the “Mid Cert” field is accessible at the beginning of the fourth month and a reminder will appear on the appointment, certification and issuance screens.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2014

Policy No. CS:32.0

- A. A Mid-Certification Assessment shall be offered and documented on the Mid-Certification Assessment form, back side of the WIC-R-05, or the most current certification forms.
1. The Mid-Certification Assessment is not required for children turning five years old in less than six months from their most recent certification month. Ex: Child is certified any day in June. If his 5th birthday is any day in December or later, the mid-cert shall be done/offered.
 2. For in-state and out-of-state transfers entered in Texas WIN, the "Mid Cert" field is available, so the reminder will not appear/pop up.
 - a. If participant transfer information, such as verification of certification (VOC), does not identify risk codes, i.e. risk code 201, and contacting the participant's previous clinic/state was unsuccessful, staff shall perform the blood test.
- B. Nutrition Assessment shall include:
1. Length/height and weight: plot on the appropriate growth chart.
 2. Hemoglobin/hematocrit:
 - a. required for all children who were certified or received a mid-certification assessment between the ages of 12 to 23 months
 - b. required for children 24 months up to 5 years if the blood test value at the most recent certification was below the normal range hemoglobin: 11.1 g/dL for children 2 to less than 5 years of age; hematocrit: 33% for children 2 to less than 5 years of age).
 3. Risk code 501, Regression, may be excluded from being assigned at subsequent certification when values pertaining to height/length, weight and/or blood work improve at the Mid-Cert assessment. The table below provides guidance for these situations. For example, risk code 201, Low Hemoglobin/Low Hematocrit, was assigned at certification. At the Mid-Cert assessment the blood value is within the normal range. At sub-cert, the blood value is within the

Nutrition Services

Department of State Health Services

Effective March 1, 2014

Policy No. CS:32.0

normal range again, so risk code 501, Regression, is not assigned. When a value is within normal levels at two screenings, risk code 501 will not be assigned.

Certification	Mid-Cert	Sub Cert	Assign 501
Risk code assigned, e.g. 201, low Hgb/Hct	Value improved (does NOT meet definition), e.g. Hct/Hgb normal value	Value good, does NOT meet definition, e.g. Hct/Hgb normal value	No
Risk code assigned, e.g. 201, low Hgb/Hct	Value still meets definition of risk code, e.g. 201, low Hgb/Hct	Value improved and does NOT meet definition, e.g. Hct/Hgb normal value	Yes
Risk code not assigned, e.g. Hct/Hgb normal value	Value meets definition of risk code, e.g. 201, low Hgb/Hct	Value meets definition of risk code, e.g. 201, low Hgb/Hct	No, assign appropriate risk code, e.g. 201, low Hgb/Hct
Risk code not assigned, e.g. Hct/Hgb normal value	Value good, doesn't meet definition of risk code, e.g. Hct/Hgb normal value	Value meets definition of risk code, e.g. 201, low Hgb/Hct	No, assign appropriate risk code, e.g. 201, low Hgb/Hct

4. Health and dietary assessment – include any **major** changes in the child's health status, dietary habits or physical activity since the previous certification.
- C. Immunization screening – document for children less than 2 years of age.
 - D. Nutrition education (NE) and referrals shall be offered and documented under "Topics Discussed" and "Referrals Discussed", respectively, on the VENA Family Documentation tool. Use NE code VC00099 for the VENA counseling session, if applicable.
 - E. Medical information (including hematocrit/hemoglobin, height, and weight) shall be accepted from a health care provider if the values are within 60 days of the Mid-Certification Assessment.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2014

Policy No. CS:32.0

- F. When the Mid-Certification Assessment is completed and documented in the participant's chart, staff shall enter one of the following in the "Mid Cert" field in the Texas WIN (TWIN) system.
1. 50 is entered for a completed mid-certification
 2. 75 is entered for a completed mid-certification with blood work
 3. 99 is entered when a mid-certification assessment is refused (see II below) or refused by default. 'Refused by default' is when a participant lapses four or more months for benefit issuances in a row and therefore a mid-certification assessment appointment cannot be made within the specified timeframe (see Procedure I of this policy).

NOTE: Do not enter any other data into TWIN for the mid-certification assessment. Do not enter/update values for height, weight, blood, etc.

- II. A parent/guardian may refuse a Mid-Certification Assessment.
- A. If the parent/guardian refuses the Mid-Certification Assessment, the parent/guardian shall read, sign and date the "Refusal" section of the Mid-Certification form. The form shall be filed in the participant's chart.
 - B. If the parent/guardian refuses to read, sign and date the form, staff shall document the refusal, sign and date in the "Refusal" section of the Mid-Certification form.
 - C. Staff shall enter "99" in the "Mid Cert" field in the Texas WIN system.
- III. LAs will be considered out of compliance if a child has reached the 10th month after certification and a mid-certification assessment has not been performed, documented and/or entered into Texas WIN.
- A. The Certifying Authority/WIC Certification Specialist shall complete the Mid-Certification Assessment form. Other staff

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective March 1, 2014

Policy No. CS:32.0

may only document the height, weight and blood value on the form.

- B. The Certifying Authority/WIC Certification Specialist may perform the Mid-Certification Assessment and issue benefits. Separation of duties is not violated due to the Mid-Certification Assessment is an evaluation and not program eligibility.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Policy No. CS:33.0

High Risk Referrals

Purpose

To ensure that high risk participants are identified and referred appropriately to a health care provider (HCP), Registered Dietitian (RD), or International Board Certified Lactation Consultant (IBCLC).

Authority

7 CFR Part 246.7

Definitions

Health care provider (HCP): Also referred to as “prescriptive authority”; a medical professional who may legally diagnose medical conditions and write prescriptions. In Texas, prescriptive authorities include but are not limited to: medical doctors (M.D.), doctors of osteopathy (D.O.), physician’s assistants (P.A.), and nurse practitioners (N.P.).

Registered dietitian (RD): A credentialed nutrition professional authorized to provide management of health and diet concerns.

International Board Certified Lactation Consultant (IBCLC): A credentialed lactation professional authorized to provide clinical management of breastfeeding concerns.

Follow-up: Efforts the local agency (LA) makes to contact the participant and determine the outcome (disposition) of the referral.

Internal referrals: Referrals made to a professional within WIC (i.e., local agency RD or IBCLC).

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Policy No. CS:33.0

External referrals: Referrals made to a professional outside of WIC (e.g., health care provider or emergency room).

Policy

LAs shall develop a local High Risk policy that identifies the high-risk conditions requiring referral and the procedures for follow-up.

Procedures

- I. LAs shall develop a local High Risk policy with the following components:
 - A. High risk conditions and corresponding categorical groups requiring referral to internal and external sources.
 1. The policy must contain the following minimum risk criteria for internal referrals:
 - a. RD
 - i. Formula fed infants: FTT (RC 134), Inadequate Growth – not back to birth weight by 14 days (RC 135)
 - ii. Children: Child Underweight (RC 103)
 - iii. Pregnant women: Low Maternal Weight Gain (RC 131)
 - b. IBCLC
 - i. Breastfeeding women: Breastfeeding complications or potential complications (RC 602)
 - ii. Breastfed Infants: FTT (RC 134), Inadequate Growth – not back to birth weight by 14 days (RC 135)
 2. The policy must contain the following minimum risk criteria for external referrals:
 - a. HCP
 - i. All Infants: Inadequate Growth – not back to birth weight by 14 days (RC 135)

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Policy No. CS:33.0

- B. The policy shall include procedures detailing the referral process, including:
 - 1. Staff responsible for making the referral
 - 2. Documentation of the referral process (e.g., logs, forms).
Documentation of the referrals shall include:
 - a. Name of participant who was referred
 - b. Reason for referral
 - c. Professional to which a participant was referred
 - d. Name of person making the referral
 - e. Date of referral

- C. Procedures for follow-up, including:
 - 1. Method of follow-up to be used with participant (e.g., phone, appointment)
 - 2. Length of time between referral and follow-up
 - 3. Documentation of follow-up

- II. For external referrals, the LA shall not contact the health care provider to which a participant was referred to determine disposition of referral without the participant's consent.

- III. Per **policy GA:14.0** Staffing Standards, LAs that do not have an RD shall request a waiver and have a written contingency plan for providing referrals and high risk individual counseling while position is vacant.

- IV. LAs that do not have an IBCLC on staff should access an IBCLC via webcam tele-consult offered by the WIC Lactation Support Centers in Houston and Dallas. If a webcam tele-consult is not available, refer externally to an appropriate healthcare provider.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Policy No. CS:33.0

- V. LAs shall have a written procedure in place for participants who are identified to have Red Flag criteria. Participants who have been identified as having a Red Flag shall be immediately referred to receive urgent medical care.

A. Red Flags:

1. Infant

- a. Skin color is blue or grey
- b. Skin color above waist is yellow
- c. Poor hydration as indicated by a combination of the following:
 - i. soft spot(s) on top of head sunken in
 - ii. skin on the back of infant's hand, forearm or belly lightly pinched between the thumb and forefinger for a few seconds does not return to normal contour within three seconds
 - iii. sunken eyes
 - iv. no tears or few tears when crying
 - v. extremely dry lips, mouth or tongue
 - vi. lethargy
- d. Signs of trauma or bruising
- e. Difficult or shallow breathing, wheezing

2. Child

- a. Signs of trauma or bruising
- b. Difficult or shallow breathing, wheezing
- c. Poor hydration as indicated by a combination of the following:
 - i. skin on the back of child's hand, forearm or belly lightly pinched between the thumb and forefinger for a few seconds does not return to normal contour within three seconds
 - ii. sunken eyes
 - iii. no tears or few tears when crying
 - iv. extremely dry lips, mouth or tongue
 - v. scant, dark, or foul-smelling urine

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Policy No. CS:33.0

- vi. lethargy
- 3. Pregnant
 - a. Signs of labor initiation – regular contractions, leaking/gushing fluid from vagina
 - b. Heavy bleeding from vagina at any time of pregnancy
 - c. Injury - accident/fall/blow to the belly
 - d. Observed at clinic under the influence of alcohol or drugs/narcotics with risk of potential harm to self or others
- 4. Breastfeeding, Postpartum
 - a. Hearing voices or seeing things that are not real or having false beliefs (delusions)
 - b. Observed at clinic under the influence of alcohol or drugs/narcotics with risk of potential harm to self or others
 - c. Postpartum Mood Disorder Signs:
 - i. Thoughts of harming self or baby
 - ii. High level of anxiety
 - iii. Flat affect
 - iv. Not making eye contact with baby/not responding to infant cries/ not enjoying baby
 - v. No appetite/ inability to sleep
- 5. WIC staff should not diagnose or provide medical advice to participants.

Guidelines

- A. The criteria in this policy are minimum criteria, and LAs are encouraged to include additional criteria relevant to their local population and concerns. Participants who desire a consultation for any reason outside of these criteria shall be referred to the appropriate professional.
- B. There are examples of conditions in the High Risk Referral Guidelines tab located in the Clinic Assessment Manual to assist LAs in developing their local policy. If desired, LAs can select from

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Policy No. CS:33.0

these criteria based on the needs of their local agency and clientele. The guidelines are a resource that represents best practices for high risk referrals. However, local agencies are not required to nor limited to use all of the criteria on the list.

Guidelines for High Risk Referrals

(CS: 33.0 High Risk Referrals)

Guidelines for High Risk Referrals

All local agencies must develop a High Risk policy (in accordance with Policy CS: 33.0 High Risk Referrals) that identifies which high-risk conditions require a referral and outline the procedures for documenting and following-up these conditions. These guidelines may be used in developing local agency specific parameters for high risk referrals.

What are the referral guidelines?

The guidelines are a resource to help Local Agencies identify when a participant may be at high risk and need more skilled intervention from an expert. Use the referral guidelines to help identify high risk criteria and make referrals to the appropriate professional. These guidelines focus on best practices for making a referral to a Registered Dietitian (RD), International Board Certified Lactation Consultant (IBCLC), or Health Care Provider (HCP).

Why are these guidelines important?

The guidelines ensure that participants receive care based on their medical, physical, or emotional conditions. Referrals do not always transfer participant care away from the first WIC professional the participant sees. To refer simply means to *add* an appropriate professional to a participant's circle of care. As best practice, the original professional should remain a part of the participant's circle of care and continue to provide follow-up care as needed.

How are the guidelines used?

Use the guidelines are a tool to help Local Agencies in developing their local high risk policy. The guidelines are not part of the Local Agency policy but provide suggestions on conditions to consider for high risk referrals. Staff must provide formal referrals and documentation for the minimum criteria outlined in their Local Agency policy. WIC agencies are not limited to the examples provided in the guidelines.

Each categorical group has its own guidelines with examples of high risk criteria for that group. Some criteria might be risk code specific while others are based on physical observations or conversations with participants. There are instances where a referral is warranted in accordance with the risk code definition. Other times, a risk code is used as a reference but a referral may be necessary only for a specific portion of the risk code definition or more stringent guidelines may be placed on the parameters (i.e. Risk code #201 is referred only with a hemoglobin value lower than or equal to 8.0 g/dL). The word "N/A" will appear in the "Risk Code" column if a particular criterion is not associated with a listed risk code (i.e. A mother may indicate during a counseling session that her infant has unusual looking stools).

The guidelines indicate which professional to refer a participant to for each condition (i.e. RD, IBCLC, or HCP). There will be instances where it is appropriate to refer a participant to several or all professionals. There may be notations indicating special instructions that are relevant to certain categorical groups. If a participant is already being followed by a health care professional for the high risk condition or refuses a referral, a referral is not needed. In the case that a referral is not made, WIC staff should document the reason in the participant's chart.

It may not always be reasonable to expect formal documentation and follow-up on certain conditions. For some guidelines, a verbal referral may be sufficient and formal documentation may not be appropriate. For example – if a participant appears to have a mild rash on observation, WIC staff may verbally refer the participant to contact their health care provider for further examination. Local Agencies should train staff on how and when to offer the verbal referrals vs. when to make and note formal referrals.

Staff are encouraged to use their professional judgment on each referral on a case-by-case basis. All staff should feel empowered to refer, regardless of their position or involvement in the certification process, if they identify a client to be high risk based on observation. WIC staff should not try to diagnose or provide medical advice to participants.

What are “Red Flags”?

In some instances, participants may present with life-threatening conditions that require immediate medical attention. The “Red Flags” document contains minimum criteria outlining when a participant would need to be referred immediately to urgent/emergency care. All staff should be familiar with these criteria and follow their Local Agency's procedures for addressing these conditions. Staff should be aware of the urgent/emergency care facilities in their area.

If a WIC staff member feels threatened by a participant when making a referral for a “Red Flag,” condition, they should contact security or a local law enforcement official.

Infant Referral Guidelines

Risk Code	Infant Conditions	Refer to RD *	Refer to IBCLC *	Refer to HCP
Health/Medical				
142	Prematurity	✓	✓	
143	Very Low Birth Weight	✓	✓	
300's (341-362)	300's Risk Codes – refer to appropriate professional on an as-needed basis per CA discretion			
Weight				
N/A	Is not back to birth weight by 10 days	✓	✓	
N/A	Has lost 10% or more of birth weight	✓	✓	✓
135	Is not back to birth weight by 2 weeks of age	✓	✓	✓
135	Inadequate rate of weight gain from birth to 3 months of age	✓	✓	✓
134	Failure to thrive as diagnosed by physician	✓	✓	
Physical Appearance				
N/A	Signs of jaundice (i.e. skin color below waist or white of eyes are yellow)	✓	✓	✓
N/A	Infant appears wasted (i.e. ribs or spine easily visible, loss of buttocks or cheeks, extremely thin extremities)	✓	✓	✓
N/A	Skin with rash, splotches, or scales			✓
	Has white patches in mouth or severe diaper rash			✓
N/A	Signs of fever (i.e. skin hot to the touch or flushed)			✓
Gastrointestinal / Urinary				
N/A	Inadequate stooling (i.e. No stools for 24 hours after leaving hospital , <2 stool a day on days 1-3, black, tarry stools after day 4, or < 3 poopy diapers with poop the size of a quarter or larger by day 4 and through 6 weeks)	✓	✓	✓
N/A	Unusual appearance of stools (i.e. green, frothy or explosive stools; mucous or blood in stool)	✓	✓	✓
N/A	Excessive diarrhea or loose watery stools			✓
N/A	Excessively spitting up	✓	✓	✓
N/A	Severe vomiting			✓
N/A	Severe constipation	✓	✓	✓
N/A	Urine is dark instead of clear or pale yellow; Reddish/orange urine after day 3	✓	✓	✓
N/A	Inadequate urination: < 2 urine-soaked diapers on day 2, < 3 on day 3, < 4 on day 4, or < 5 on or after day 5	✓	✓	✓
Other Conditions				
N/A	HCP recommendation to supplement for any reason		✓	
N/A	Experienced birth trauma (forceps or vacuum assist delivery) and is not feeding well	✓	✓	

N/A	Is currently in or was discharged from special care nursery/NICU	✓	✓	
N/A	Significant change in “normal” newborn behavior – sleep, wake, consoling, feeding - Breastfed - Formula Fed		✓	✓
		✓		✓
Feeding				
N/A	Falls asleep right after starting to feed, is not showing signs of hunger, or is going too long between feedings and is not gaining adequate weight	✓	✓	
N/A	Weak suck or difficulty coordinating suck/swallow/breathe	✓	✓	
Breastfeeding				
603	Latch difficulties after WIC staff assist		✓	
603	Coming off breast often		✓	
N/A	Is having less than 8 feedings in 24 hours, feedings are lasting longer than 30 minutes, or never seems satisfied or shows signs of fullness		✓	
N/A	Can't extend tongue past gum line or has limited ability to lift the tongue		✓	
Formula Feeding				
N/A	Physician request formula mixing instructions for concentration higher than 20 kcal/ounce	✓		

* Refer to appropriate professional in instances where both RD and IBCLC are checked (i.e. breastfed infants should be referred to IBCLC).

Child Referral Guidelines/ 2 -5 years

Risk Code	Child Conditions	Refer to RD	Refer to IBCLC	Refer to HCP
Health/Medical				
201	Low Hgb or Hct: for values ≤ 8.0 g/dL (hgb) or $\leq 30.0\%$ (hct)	✓		✓
300's (341-362)	300's Risk Codes – refer to appropriate professional on an as-needed basis per CA discretion			
N/A	Hyper-metabolism or need for increased caloric intake as recommended by healthcare professional	✓		
Weight				
103	Child underweight	✓		
113	Child obese	✓		
134	Failure to thrive as diagnosed by physician	✓		
N/A	Downward crossing of 2 major percentiles on growth chart	✓		✓
Physical Appearance				
N/A	Signs of fever (i.e. skin hot to the touch or flushed)			✓
N/A	Skin with rash, splotches, or scales (not assessed or under treatment of HCP)			✓
N/A	Not meeting developmental milestones			✓
N/A	Signs of malnutrition: extremely thin extremities	✓		✓
N/A	Ribs or spine easily visible, loss of buttocks, sagging skin	✓		✓

Breastfeeding Woman Referral Guidelines

Risk Code	Breastfeeding Conditions	Refer to RD	Refer to IBCLC	Refer to HCP
Health/Medical				
N/A	Bright red (not yet tapering to brown) heavy vaginal bleeding with clots the size of a tennis ball after day 4 postpartum			✓
201	Low Hgb or Hct: for values ≤ 8.0 g/dL (hgb) or $\leq 30.0\%$ (hct)	✓		✓
300's (341-363)	300's Risk Codes – refer to appropriate professional on an as-needed basis per CA discretion			
Breastfeeding Concerns				
N/A	Problems with milk supply possibly related to medical condition or procedure (i.e. history of caesarian delivery, breast surgery or trauma, polycystic ovary syndrome, thyroid disorders, infertility, diabetes, or obesity)		✓	
N/A	History of low milk supply with previous child AND having problems with milk supply or infant weight gain or diaper output		✓	
N/A	Has multiples AND is having breastfeeding concerns or difficulties		✓	
N/A	Can't latch baby with Peer Counselor (PC)/ Designated Breastfeeding Expert (DBE) assist due to edema (swelling) of the areola, severe engorgement, flat or inverted nipples, or infant not sustaining latch without using a SNS or nipple shield or sore nipples or engorgement with no improvement 24 hours after PC/TBE assist		✓	
N/A	Reports her milk has not "come in" by 72 hours		✓	
602	Cracked or damaged nipples or sudden onset of sore nipples after the first few weeks		✓	
602	Has fever, body aches or red streaking in breast, an abscess, new lump, or lumpy area in breast, or has bright red, shiny, painful, or itchy areola/nipple		✓	✓
N/A	Forceful letdown, pain with letdown, or excessive leaking		✓	
N/A	Concerned about milk supply, breastfeeding, and considering use of formula after PC/DBE consult		✓	
N/A	Wants to breastfeed but has been advised not to by her HCP or has been told she needs to supplement		✓	
N/A	Needs assistance transitioning from bottle feeding to direct breastfeeding		✓	
Other Conditions				
N/A	Taking medication other than prescribed medications or abusing any medication		✓	✓
211	Lead poisoning		✓	✓

Pregnant Woman Referral Guidelines

Risk Code		Refer to RD	Refer to IBCLC	Refer to HCP
Health/Medical				
201	Low Hgb or Hct: for values ≤ 8.0 g/dL (hgb) or $\leq 30.0\%$ (hct)	✓		✓
300's (341-362)	300's Risk Codes – refer to appropriate professional on an as-needed basis per CA discretion			
Weight				
131	Low maternal weight gain	✓		✓
132	Maternal weight loss during pregnancy	✓		✓
133	Rapid weight gain of greater than 6.5 pounds/month for singleton pregnancy	✓		✓
Other				
N/A	Taking medication other than prescribed medications or abusing any medication			✓
N/A	Signs of fetus demise – decrease in/no movement by fetus; sudden, violent movements			✓ Immediately +
N/A	Signs of preterm labor/miscarriage/ectopic pregnancy – severe and persistent back pain, severe abdominal pain/ cramping, significant bleeding or spotting > 1 day, severe vomiting/diarrhea and vaginal pressure			✓ Immediately +
N/A	Signs of blood clots – leg or calf pain, swelling on one side, severe headaches			✓ Immediately +
N/A	Signs of pre-eclampsia, eclampsia - high blood pressure, sudden swelling in hands and face, constant and severe headaches, severe dizziness, blurred vision, muscular convulsions			✓ Immediately +

+ Pregnant women identified with these conditions should contact their HCP immediately by phone or in-person. If unable to do so, refer participant to the nearest labor & delivery triage at a hospital.

POSTPARTUM – Referral Guidelines

Risk Code	Postpartum Conditions	Refer to RD	Refer to IBCLC	Refer to HCP
Health/Medical				
201	Low Hgb or Hct: for values ≤ 8.0 g/dL (hgb) or $\leq 30.0\%$ (hct)	✓		✓
300's (341-363)	300's Risk Codes – refer to appropriate professional on an as-needed basis per CA discretion			
N/A	Bright red (not yet tapering to brown) heavy vaginal bleeding with clots the size of a tennis ball after day 4 postpartum			✓
Other Conditions				
N/A	Woman who initially breastfed, has stopped, and expresses desire to re-initiate breastfeeding		✓	
N/A	Taking medication other than prescribed medications or abusing any medication			✓

FD - Food Delivery

<p style="text-align: center;">Texas WIC Program Texas Department of Health</p>

Effective January 1, 2015

Policy No. FD: 01.0

Documentation of Food Benefits Issuance

Purpose

To provide an audit trail for food benefits issuance and to set a time frame for the use (transaction) of food benefits issuance by participants. To ensure that a record exists of food benefits issued by the local agency (LA).

Authority

7 CFR Part 246.12; Part 246.14

Policy

It is the responsibility of the LA to ensure that food benefits are correctly loaded onto the WIC EBT Card by the Texas WIC Information Network (WIN) system and released only after the participant's or food benefits recipient's signature has been obtained on the shopping list. The original signed copy of the shopping list shall constitute a daily participation log and be kept by the LA for audit/review.

Procedures

- I. Food benefits for all participants in a family shall be aggregated and loaded onto one WIC EBT Card.
- II. The participant or food benefits recipient will sign their name in ink in the "Authorized Signature" block of the shopping list. Staff shall retain the original signed copy of each shopping list. This copy shall constitute the food benefits issuance log.
- III. Staff shall file shopping lists by month of issue and retain for audit/review. (Refer to policy GA: 03.0)

<p style="text-align: center;">Texas WIC Program Texas Department of Health</p>

Effective January 1, 2015

Policy No. FD: 01.0

- IV. The participant or food benefits recipient shall receive a second copy of the shopping list as their receipt and list of available current and/or future benefits.
- V. WIC EBT Cards are to be stored in a secured location at all times.
- VII. Issuance of retroactive benefits is prohibited. Benefits can never be issued for an expired benefit period.

Nutrition Services

Texas Department of State Health Services

Effective August 1, 2009

Policy FD: 02.0

Frequency of Issuance of Food Benefits

Purpose

To provide a uniform procedure for issuing WIC benefits to participants, ensuring adequate nutrition education (NE) opportunities, and preserving coordination with other health services such as immunizations and prenatal care.

Authority

7 CFR Part 246.12

Policy

Local agencies (LAs) shall implement a benefits issuance/nutrition education routine for all participants that meets the educational and follow-up needs of the participant not to exceed each participant's total food entitlement within his/her certification period. No more than three months of food benefits can be issued at one time. The WIC Lone Star Card may hold the current months issuance plus the next 3 month's issuance. Food for all participants within the family will be aggregated on the card.

Procedures

- I. As part of the annual LA NE Plan, the LA shall describe the standard frequency of issuance for each category of participants not to exceed the maximum allowed.
- II. LAs shall meet the minimum federal requirements of two NE contacts within a certification period, either with individual counseling or group classes.

Nutrition Services

Texas Department of State Health Services

Effective August 1, 2009

Policy FD: 02.0

-
- III. The Certifying Authority shall determine individual participants who would benefit from frequent NE contacts such as: pregnant women who enter WIC late in pregnancy or individuals with high risk conditions who require individual nutrition counseling and adjust the issuance length accordingly.
- IV. If a family member's certification expires during the current month, but the family member is eligible for subsequent certification, the system will advance issue a single month's benefits to other family members after the month certification expires. If the family member is subsequently certified for the following month, up to three months issuance will resume. If any family member becomes categorically ineligible (woman attaining six month postpartum or one year breastfeeding or child turning five years old), the other family members shall still receive full advance issuance.
- V. Failure to pick up benefits:
- A. The WIN system shall automatically inactivate participants who fail to pick up benefits for two (2) consecutive months.
 - B. LAs shall reactivate, if caseload permits, participants who return before their certification period expires.
 - C. If the participant fails to return for subsequent certification, then the record will be automatically terminated for Failure to Subcertify.

Guidelines

To change the frequency of issuance of benefits in the Texas WIN system, refer to "Issuing Frequency" in the Texas WIN EBT Quick Guide for Clinics.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2009

Policy No. FD:03.0

Designated Recipients of Benefits

Purpose

To provide guidance for local agencies (LAs) in distributing benefits to participants, including participants who are unable to come to the issuance site due to illness or other reasonable circumstances or for those participants who are unable to write their names.

Authority

7 CFR Part 246.12; 25 TAC §31.23

Policy

LAs may issue benefits to pregnant, breastfeeding, and postpartum participants, as well as parents/guardians/caretakers of participants within the guidelines of this policy. Should a recipient be unable to write or become unable to pick up benefits, a proxy may be designated. All benefit recipients are entitled to full advance issuance unless otherwise determined by the Certifying Authority (CA).

Definition

Caretaker is any person, 18 years of age or older, designated by a woman participant, parent or guardian, to obtain and transact benefits. A caretaker has custodial responsibility for a participant during the majority of a participant's time awake each day.

Proxy is any person 16 years of age or older designated by a woman participant, or by a parent, guardian, or caretaker of an infant or child participant, to obtain and transact benefits.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2009

Policy No. FD:03.0

Procedures

- I. A participant who is pregnant, breastfeeding or postpartum may be designated as a benefit recipient for herself and her children, including any infants. She shall read and sign the Supplemental Information Form (SIF), form WIC-35-1, before receiving benefits.
- II. A parent, regardless of age, of a participant may be designated as the benefit recipient for his/her child, including any infants. The parent shall read and sign an SIF before receiving benefits.
- III. A caretaker of a participant may be designated as a benefit recipient for the participant. The caretaker shall read and sign an SIF before receiving benefits.
- IV. A proxy may be designated in writing by the participant or parent/guardian/caretaker to act as the benefit recipient.
 - A. The written statement shall name the proxy, and be signed and dated by the participant or parent/guardian/caretaker. The written statement shall be filed in the participant's chart and be accessible for audit/review.
 - B. Individuals unable to write may make their mark in lieu of a signature on the written statement.
 - 1. LA staff may assist clients who cannot write with preparation of the written statement; however, another staff member must witness. This option is more helpful to the family if completed at the clinic in advance of a future appointment when it is known the participant or parent/guardian/caretaker will need a proxy.
 - 2. A third party other than LA staff may also assist the participant or parent/guardian/caretaker in preparation of the written statement. Examples of a third party include but are not limited to, family members and friends.
 - C. The proxy shall provide identification for himself/herself (refer to **Policy CS: 05.0**) and the WIC Lone Star Card.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2009

Policy No. FD:03.0

- D. Proxies may receive full advance issuance of benefits. The LA shall instruct the proxy on the procedures for receiving WIC supplemental foods, including at a minimum, the procedures for redemption. Nutrition education shall be offered.
 - E. Proxies of participants residing in a homeless facility/institution may pick up and redeem food benefits in bulk for multiple participants residing in the shelter. The LA shall ensure that adult participants are allowed to participate in the process of picking up and transacting food instruments to the greatest extent possible, within the homeless facility/institutional framework, so that they are aware of the foods prescribed for them as well as the intended benefits of such foods.
- V. In certain circumstances, a proxy may be appointed by the state agency to obtain and transact benefits for an infant, child, or other participant under age 18 who is subject to disqualification but who would be at health risk, including nutritional risk, if benefits were terminated.
- VI. Local agency employees may not be designated as proxies.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2009

Policy No. FD: 04.0

Disposition of Unusable WIC Lone Star Cards

Purpose

To ensure unusable WIC Lone Star Cards are coded appropriately in the EBT WIN system or reported to the Information and Response Management (IRM), and returned to the state agency (SA) to maintain an adequate audit record.

Authority

7 CFR Part 246.12

Cross Reference

Policy GA:04.0

Policy

Local Agencies shall ensure unusable WIC Lone Star cards are documented appropriately as to disposition and returned, as applicable, to the SA.

Procedures

- I. WIC Lone Star Cards, deemed unusable **prior** to issuance, shall be appropriately coded by clinic staff in the clinic WIC EBT WIN system. Enter the **most** appropriate code from the following selection.

- | | | |
|----------|---|----------------------|
| F | - | Failed Before Issue |
| D | - | Damaged Before Issue |
| M | - | Missing Before Issue |

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2009

Policy No. FD: 04.0

- II. Cards that fail **while being loaded**, shall be reported to the SA following the provisions in **Policy CS:26.0E**.
- III. Cards deemed unusable **after** issuance shall be reported to the IRM help desk by the LA staff and returned to the local agency (LA).
- IV. Clinic staff shall complete the WIC Lone Star Card Log and submit the Log and all unusable cards to the SA on a weekly basis.
 - A. Codes for the log entries are:
 - F** - Failed Before Issue
 - D** - Damaged Before Issue
 - B** - Damaged After Issue
 - Z** - Failed After Issue
 - B. Cards that were coded in WIN as **M**(issing) Before Issue are not entered on the log as the card cannot be returned to the SA.

See next page for Unusable WIC Lone Star Card Log.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2009

Policy No: FD: 06.0

**Documenting Missing/Stolen
WIC Lone Star Cards Inventory**

Purpose

To ensure proper accountability for WIC Lone Star cards assigned to the Local Agency (LA) and/or clinic prior to issuance.

7 CFR Part 246.12

Policy

The LA and/or clinic shall document actual or suspected loss or theft of WIC Lone Star cards, including losses incurred in transit between the State Agency (SA) and the LA and between the LA and clinic.

Procedures

I. Bulk Inventory:

- A. The LA and/or the clinic shall enter the status of WIC Lone Star cards into the EBT WIC Information Network (WIN) system upon receipt of bulk shipments for shipments between the SA and the LA and/or between the LA and clinic. After ten days, the LA and/or clinic will receive a notice at every login stating WIC Lone Star Cards previously shipped from the SA and/or the LA and have not been accepted in the EBT WIN system.

- B. Missing Status:
 - 1. Shipments lost in transit between the SA and LA and/or between the LA and clinic shall be entered as "missing."
 - 2. WIC Lone Star Cards that are stolen or are suspected of having been stolen from the LA and/or clinic shall be entered as "missing."

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2009

Policy No: FD: 06.0

3. If WIC Lone Star Cards with status "missing" are later found, the LA and/or clinic may change the status from "missing" to "received."

II. **Individual Card Inventory:**

- A. Document **individual** WIC Lone Star Cards as "missing" when cards are missing or suspected of having been lost or stolen. If it is known for a fact that a card is lost or stolen, do not document it as missing. Appropriately document it as "Lost" or "Stolen."
- B. If an individual WIC Lone Star Card status is "missing" and then later found **within** 120 days of having been status "missing," the clinic may issue the card or if the card is determined to be unusable may change the card status from "missing" to "failed before issue" or "damaged before issue."
- C. If an individual WIC Lone Star Card status is "missing" then later found **after** 120 days, the card will have been automatically been placed on the permanent hot card list and cannot be issued.

- III. Refer to the EBT Quick Guide for Clinics for instructions on utilizing the WIN food instrument inventory module.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. FD:08.0

Liability of Local Agency for Food Instrument Inventory Shortages

Purpose

To assign liability for the loss of WIC food instruments and Farmers Market Nutrition Program food instruments to the entity that controls the security and disposition thereof.

Authority

7 CFR Part 246.12

Policy

Local agencies (LAs) are to be held accountable for all food benefit instruments received by them. Upon the discovery of inventory shortages, or improperly issued food benefit instruments, the state agency may assess the LA a monetary sum equal to the actual and/or redeemed value of the food benefit instruments.

Nutrition Services

Texas Department of State Health Services

Effective August 1, 2009

Policy No. FD: 09.0

Liability of Local Agency for Food Benefit Reconciliation

Purpose

To provide the state agency (SA) with a method for reconciling food benefits paid to vendors to a valid participant issuance record ensuring an adequate audit trail.

Authority

7 CFR Part 246.12

Policy

It is the responsibility of the LA to ensure that all redeemed food benefits are reconciled to a valid issuance record. The LA may be held financially accountable for all redeemed food benefits that are improperly issued. The SA may assess the LA a monetary sum equal to the actual redeemed value of food benefits improperly issued.

Procedure

- I. To ensure the propriety of redeemed food benefits as required by 7CFR Part 246.12, LAs shall investigate all redeemed food benefits that are identified as unreconciled by the SA by tracking the food benefit issuance back to the actual original retained shopping lists.
- II. LAs shall submit a signed response to the SA verifying that unreconciled transactions were compared against the LA's copy of the benefit issuance log/shopping list.

Nutrition Services

Texas Department of State Health Services

Effective August 1, 2009

Policy No. FD: 09.0

- III. If all reasonable attempts have been made and the LA cannot locate/identify the disposition of an unreconciled benefit issuance, the LA shall submit a written explanation to the SA.
- IV. LAs with an excessive or repetitive incidence of unreconciled EBT transactions shall be assessed a monetary amount based on the redeemed value of benefits.
- V. As part of the LA's on-site monitoring review, SA staff shall examine a random sampling of the signed responses submitted by an LA as proof that the LA verified unreconciled benefit issuances against the LA's copy of the benefit issuance log/shopping list. If unable to support a signed response, the LA shall be required to submit copies of the benefit issuance log/shopping lists that cover all identified unreconciled benefits paid by the SA for a 12-month period.
- VI. LAs shall have 30 days from receipt of the SA written notification to respond to identified unreconciled benefits paid by the SA. If a LA does not respond, a monetary amount based on redemption value may be assessed.

Guidelines

It is recommended that LAs file their copies of the participant's benefit issuance log/shopping lists by date and time.

Texas WIC Program Texas Department of Health

Effective January 1, 2011

Procedure FD:10.0

Issuing Food Packages for the Mother/Infant Dyad

Purpose

To establish procedures for issuing food packages to the Mother/Infant dyad.

Authority

State Policy

Policy

Mother and infant packages shall be prescribed according to the amount the mother is breastfeeding or the amount of formula provided. During the infant's birth month, the actual calendar month in which the baby is born, a woman who is partially breastfeeding shall not receive a "Mostly" Breastfeeding food package.

Procedure

I. When issuing mother/infant food packages, local agency (LA) staff shall explain the differences in food package benefits and the cash value among each of the eligible food packages. A woman may indicate her preference for and be allowed to change to a food package that best suits her needs. Refer to FD: 12.0 for food package descriptions and procedures for exchanging food packages.

II. Mother/Infant Dyad During the Birth Month

The infant's "birth month" is defined as the calendar month in which the infant is born. During the infant's birth month the mother has two options, breastfeeding or non-breastfeeding postpartum.

III. Breastfeeding

<p style="text-align: center;">Texas WIC Program Texas Department of Health</p>

Effective January 1, 2011

Procedure FD:10.0

-
- A. Exclusive - If the mother is exclusively breastfeeding, she shall be encouraged to choose the "Exclusively" Breastfeeding food package. The infant shall be issued food package 000 (code 000 is for participation, no formula).
 - B. Mostly- Not an option for birth month. After the birth month, this food package provides a partial formula package.
 - C. Some - If the mother is breastfeeding at least once a day and requests any amount of formula in the birth month, issue this food package.
 - 1. The infant shall receive a formula package that is customized to reflect the quantity of formula needed as determined by the Certifying Authority (CA) or the WIC Certification Specialist (WCS) after discussing with the mother. Local agency staff shall not automatically issue the maximum amount of formula allowed.
 - 2. Every effort shall be made to encourage and support breastfeeding. A breastfeeding woman who chooses the "Some" Breastfeeding food package in the birth month should be provided extra breastfeeding support and encouraged to choose the "Exclusively" or "Mostly" Breastfeeding Food Package for advanced issuance months.
 - a. A breastfed infant who receives less than the maximum amount of formula at initial issuance during the birth month may return to receive up to the maximum amount of formula within that month. For example, if 5 cans of powder formula are issued on the card, the breastfeeding woman can return within the month to receive the maximum amount allowed that month for that particular formula.
 - b. When a breastfeeding woman is requesting additional formula, staff shall:
 - i. Provide breastfeeding counseling according to Policy BF: 01.0 Procedure C.

Texas WIC Program Texas Department of Health

Effective January 1, 2011

Procedure FD:10.0

- ii. Inform the woman that if she chooses to continue breastfeeding at least one time a day but prefers to receive a full package of formula for her infant, she will not be eligible to receive any food benefits after the infant turns six month of age, but will be eligible to receive breastfeeding support.
- iii. If the woman still desires an increase in formula, staff shall change the woman's food package in the Texas WIC Information Network (WIN) system before changing the infant's food package and Infant Formula Plan.
- iv. LA staff shall issue up to the maximum amount of formula allowed via the Formula Exchange Module. Due to WIN system formula proration, issuing additional formula is not always possible.

III. Non-breastfeeding Postpartum

- A. If a mother requests any amount of formula and is not breastfeeding, she shall receive the Postpartum food package for the birth month (postpartum and "some" breastfeeding women receive the same food package which is referred to as the "Formula Package" in participant education materials).
- B. The infant shall receive a formula package that is customized to reflect the quantity of formula needed as determined by the Certifying Authority (CA) or the WIC Certification Specialist (WCS) after discussing with the mother. Local agency staff shall not automatically issue the maximum amount of formula allowed.

IV. Mother/Infant Dyad After the Birth Month

Any month following the infant's birth month, the mother has three options:

- A. Exclusively Breastfeeding food package
- B. Mostly Breastfeeding package or
- C. Postpartum/Some Breastfeeding food package

<p style="text-align: center;">Texas WIC Program Texas Department of Health</p>

Effective January 1, 2011

Procedure FD:10.0

Example of after the birth month: Infant date of birth: 10/27/XX
Certification date: 11/01/XX

The certification date is not during the birth month.

IV. Surrogate Mother or Mother Whose Infant is Adopted

- A. If a surrogate mother or a mother whose infant is adopted by another family is income-eligible and expresses her breastmilk and provides the milk to the surrogate or adoptive family, she shall be certified as a breastfeeding woman and issued an "Exclusively" Breastfeeding food package for as long as she continues to provide milk to the infant. Her infant will not receive a food package unless the surrogate or adoptive family qualifies and enrolls the infant in WIC separately. If the WIC-enrolled surrogate or adoptive family requests formula for the infant, the mother's food package must be adjusted accordingly.
- B. If a surrogate mother or a mother whose infant was adopted by another family is income-eligible and expresses her breastmilk and provides it to a milk bank, the mother should be encouraged to continue to provide milk to the milk bank however the mother/baby dyad is no longer intact. She shall be certified as a postpartum woman if it has been less than 6 months since delivery. This mother would not be eligible for a breast pump through WIC.

Nutrition Services

Texas Department of State Health Services

Effective August 1, 2009

Policy No. FD: 11.0

Transfer of WIC Lone Star Card Inventory

Purpose

To ensure that accurate records for accountability of inventory documents are available for use by the state agency (SA) and/or auditors.

Authority

7 CFR Part 246.12

Policy

Local agency (LA) administrative sites shall transfer only unopened packages of 300 WIC Lone Star cards through the Texas WIC Information Network (WIN) system.

Procedure

- I. WIC Lone Star cards shall be transferred from one LA to another in unopened packages of 300 WIC Lone Star cards only. A bill of lading shall be electronically processed through the Texas WIN system recording the shipment/receipt of inventory between LAs for transfer of WIC Lone Star cards.
- II. An LA shall issue only unopened packages of 300 WIC Lone Star cards to clinics within the same LA. A bill of lading shall be electronically processed through the Texas WIN system recording the shipment/receipt of inventory between LA and clinic for transfer of WIC Lone Star cards.
- III. From the clinic level, only unopened packages of 300 WIC Lone Star cards may be physically and electronically transferred back to the clinic's own LA administrative site.

Nutrition Services

Texas Department of State Health Services

Effective August 1, 2009

Policy No. FD: 11.0

-
- IV. From the clinic level, only unopened packages of 300 WIC Lone Star cards may be physically and electronically transferred to another clinic within the same LA.
 - V. In the event an LA closes and WIC Lone Star cards remain in its inventory, all WIC Lone Star cards shall be physically (but not electronically) sent back to the SA for count verification.
 - VI. Card usage records are documented by the WIN system as follows:
 - A. Bulk inventory of boxed cards are stasured as "S"hipped, "R"eceived, "M"issing, or "D"estroyed.
 - B. WIN tracks and notifies the user of available cards in the inventory. As applicable, single cards shall be stasured as "F"ailed, "M"issing, or "D"amaged.
 - C. Card inventory records are all sent via the WIN system to the state agency and recorded in the production database.

Guidelines

Refer to [Policy FD: 04.0](#) for the procedures on disposition of all unusable cards.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Procedure No. FD 12.0

Food Packages

Purpose

To establish procedures for the issuance of the allowable foods within the food packages. To assure food benefits are appropriate for each participant's health and nutritional needs.

Authority

7 CFR §246.10; 25 TAC §31.37

Policy

Food packages shall be prescribed by a Certifying Authority (CA) or WIC Certification Specialist (WCS). Monthly food benefits are valid for one calendar month, the first day of the month through the last day of that same month. Full food package benefits will be issued to participants on or before the 15th day of the month; partial food package benefits will be issued to participants obtaining food benefits on or after the 16th day of the current month. Formula issuance will be prorated for the current month based on the number of days remaining in the month (i.e. for participants receiving benefits after the first day of the current month). Participants shall only receive those foods allowed for their category, age, special dietary needs and food preparation/storage needs.

Procedures

- I. Food packages shall be prescribed by the CA or WCS in consultation with the participant and registered dietitian (R.D.) when necessary. Standard food packages shall be issued unless a participant has a need for a different type of package. The food package shall accommodate the individual's age, dietary needs, medical/nutritional conditions, and living conditions.

Nutrition Services Department of State Health Services

Effective: October 1, 2015

Procedure No. FD 12.0

- II. Assigned food packages shall be documented on the appropriate State Agency (SA) Participant Form and entered into the participant's Texas WIC Information Network (WIN) record. The Food packages are listed on the *Food Package Guide* found at <http://www.dshs.state.tx.us/wichd/nut/foods-nut.shtm>.
- III. All food package changes are the responsibility of a CA or WCS. For WCS, refer to **FD: 13.0**, **FD: 16.0** and **FD: 16.1** for further instructions regarding food package changes which include formula. Food package changes shall be documented and maintained on file for audit or review.
- IV. Individual participant food package benefits will be aggregated on the Texas WIC card (EBT card). After all family members' food packages are loaded on the Texas WIC card; a Shopping List shall be printed. The Shopping List shall be signed by the participant, parent/guardian or proxy to indicate receipt of benefits.
- V. Infant Food Packages
 - A. Food packages for the breastfeeding mother and infant dyad are closely tied and must match except when the mother is breastfeeding multiple infants with differing breastfeeding statuses or if the woman is a surrogate mother or mother whose infant is adopted (refer to **Policy FD: 10.0**).
 - B. The infant food packages include:
 - 1. Exclusively breastfeeding – for infants who are breastfed and do not receive infant formula from WIC.
 - 2. Mostly breastfed infant – for infants who are breastfed and receive approximately a half package or less of infant formula.
 - 3. Some Breastfeeding/Full Formula fed infant – for infants who are fully formula fed or are breastfed at least one time a day and receive greater than a half package of infant formula.
 - C. During the birth month, a mother has two feeding options: an exclusively breastfeeding package or a formula package (full or

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Procedure No. FD 12.0

less). The local agency (LA) staff shall identify the feeding option in the Texas WIC Information Network (WIN) system.

D. Any month following the infant's birth month, the mother may choose between an exclusively breastfeeding package, a mostly breastfeeding package or a formula fed package.

VI. Child Food Packages

Children under two years of age receive a food package with whole milk (buttermilk is not an option) and dry beans. Children two through four years of age receive a food package with fat-free, low-fat milk and/or low-fat buttermilk and a choice of dry or canned beans or peanut butter.

VII. Pregnant Women Food Packages

Women with singleton (one infant) pregnancies shall receive the Pregnant woman food package (the same food package as mostly breastfeeding women). Women who are pregnant with multiple fetuses receive the Pregnant with Multiples food package. Pregnant women who are mostly or fully breastfeeding a singleton infant (the food package cannot be issued to a pregnant women breastfeeding a child) receive the "Pregnant Exclusively or Mostly Breastfeeding" package (The "Pregnant with Multiples" and "Pregnant Mostly or Exclusively Breastfeeding" packages are the same as the Mostly Breastfeeding Multiple Infants).

VIII. Exclusively Breastfeeding Women Food Packages

The exclusively breastfeeding food package may be issued to a breastfeeding mother in any month during which the participant's infant receives no formula up to the infant's first birthday.

A. When an exclusively breastfeeding woman's status changes, staff shall change her food package before changing the infant's food package and Infant Formula Plan (IFP).

B. If an exclusively breastfeeding food package has been issued and the mother returns to the clinic to request formula for the infant, staff shall not issue formula on the card or returned formula from

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Procedure No. FD 12.0

stock for the current month if the mother has redeemed any benefits which would not allow a void and replace of her current months food package. Refer the mother to the local agency peer counselor, Department of State Health Services (DSHS) trained breastfeeding educators (see Policy BF: 02.0) or lactation consultant and/or local resources for formula.

- C. A breastfeeding woman of multiple births from the same pregnancy (e.g., twins, triplets) is eligible to receive the Exclusively Breastfeeding food package if one or more infants are not receiving formula from WIC.
- D. A breastfeeding woman who has multiple infants from the same pregnancy is eligible to receive the Exclusively Breastfeeding Multiples package (which is equivalent to 1.5 times the Exclusively Breastfeeding Package) if no infants are receiving formula from WIC.

IX. Mostly Breastfeeding Women Food Packages

- A. When a Mostly Breastfeeding food package has been issued with less than the partial maximum amount of formula and the mother returns to request additional formula for the infant within the current benefit period, follow the procedures below. If the request is to increase:
 - 1. Up to the maximum partial formula package:
 - a. Obtain the Formula Issuance History in the IFP to determine initial quantity issued.
 - b. Refer to the *Formula Maximum Quantity Table* to determine the max quantity allowed for a partial package and subtract the initial quantity issued. This number will be the new maximum allowable amount.
 - c. In the Formula Exchange Module enter new amount to issue, not to exceed the new maximum allowable amount.

Example: Initially issued and purchased two cans of Similac Sensitive Powder.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Procedure No. FD 12.0

The *Formula Maximum Quantity Table* shows the partial maximum quantity is 4 cans for the chosen month.

Subtract the two cans initially issued and purchased.

Two is the new maximum allowable amount to be added to the WIC card.

NOTE: proration is not applied as the formula does not exceed partial maximum quantity.

2. Up to the full formula package:
 - a. Provide breastfeeding counseling according to **Policy BF: 01.0** Procedure C.
 - b. Inform the woman that if she chooses to continue breastfeeding at least one time a day but prefers to receive a full package of formula for her infant, she will not be eligible to receive food benefits after the infant turns six month of age, but will be eligible to receive breastfeeding support.
 - c. If the woman still desires an increase in formula, staff shall ensure the woman's current food package can be void and replaced in the Texas WIC Information Network (WIN) system before changing the infant's food package and IFP.
 - d. Issue additional formula via the Formula Exchange Module up to the maximum allowed for that benefit period.
- X. Some Breastfeeding Women Food Packages
 - A. The Some Breastfeeding food package is issued to a woman who is up to one year postpartum who breastfeeds at least one time a day.
 1. The participant is no longer eligible to receive a food package when she is six months postpartum, but does continue to receive breastfeeding support including peer or lactation consultant counseling, breast pumps and participant-centered nutrition education, up to one year postpartum.
 2. If certified after six months postpartum, the participant should be encouraged to utilize WIC services, although she will not receive food benefits.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Procedure No. FD 12.0

- B. If certified before six months postpartum, the food package code will automatically transition to code 000 at six months postpartum.
- C. If a woman is initially certified after six months postpartum, staff shall enter food package code 000 into the WIN system.

XI. Postpartum Women Food Packages

Postpartum women who are not breastfeeding and whose infants are receiving a full formula package are issued the Postpartum food package. The non-breastfeeding women are no longer categorically eligible to receive WIC benefits after they are six months postpartum.

XII. Nonstandard Food Packages

- A. A no refrigeration or cooking facilities food package may be issued to participants when there is a lack of food storage or food preparation facilities. The food package provides smaller containers of juice and peanut butter and/or canned beans as a substitute for eggs. Dry powder milk is provided. The package excludes cheese (except for exclusively breastfeeding women, who are issued two 8ounce packages of cheese).
- B. A lactose-free milk food package may be issued to women and children when they report lactose intolerance diagnosed by a physician or describe symptoms of lactose intolerance (nausea, gas, diarrhea, abdominal bloating or cramps) when dairy products are consumed. A doctor's prescription is not required for lactose-free milk. A lactose-free milk package shall be offered before issuing the soy milk package for lactose intolerance. A trial of lactose-free milk is not required to issue soy milk.
- C. A kosher food package providing kosher milk and cheese is available only for participants who must consume kosher foods due to religious eating patterns.
- D. Soy packages with soy milk and cheese or soy milk and tofu are available by request for women and children. Reasons for issuing

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Procedure No. FD 12.0

include, but are not limited to: milk allergy, lactose intolerance, galactosemia, vegan diet and cultural practices.

- E. A low-fat milk (1% or fat-free milk) food package is available to children under two years of age for overweight, obesity or for other medical conditions such as fatty acid deficiency that is self-reported by parent/guardian/caregiver or as reported by a healthcare provider or registered dietitian (RD).
 - 1. A CA or WCS, after consultation with the parent/guardian/caregiver and/or HCP if necessary can make a determination for the need for low-fat milk based on the complete nutrition assessment (e.g., dietary intake, risk code assignment, etc.)
 - 2. A CA can approve low-fat milk for medical reasons in consultation with healthcare provider if necessary. If self-reported by a parent/guardian/caretaker, an RD must approve.

XIII. Issuing Packages with Formula

- A. For special dietary needs food packages with formula or WIC-eligible nutritionals for woman and children, refer to **Policy FD: 16.1**.
- B. For food packages with formula, the current month formula issuances shall be prorated, except for issuances on the first day of the month. The quantity of formula issued will be prorated for the current month based on the number of days remaining in the month (including the current day).
- C. Once formula has been issued to the card, the Formula Exchange Module shall be used to change the type and/or quantity of formula issued.
- D. Children and women may be issued the full quantity of formula or WIC-eligible nutritionals unless a lower quantity is specified by the healthcare provider on the Texas WIC Medical Request for

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Procedure No. FD 12.0

Formula/Food or Texas WIC Medical Request for Metabolic Formula/Food form.

- E. Formula from Returned Formula stock, when available, should be issued in conjunction with issuing and/or exchanging formula on the card for the current month only.
 - 1. Clinic staff discretion shall be used to determine the amount of returned formula to issue out of stock to an individual based on the participant's situation (e.g., transportation issues, capability, etc.).
 - 2. At least one container of formula shall be issued on the WIC Card. Refer to policy **FD: 19.0**. The Formula Exchange Module (FEM) shall be used to document the number of cans of formula given to the participant from returned formula stock.

XIV. Exchanging Food Packages

Participants can exchange a complete food package anytime during the month. However, any food package with formula cannot be exchanged for another food package in the current month. Benefits for the future months may be exchanged.

- A. If a participant has not redeemed any food benefits from the current food package, a different full food package may be issued. If the participant was issued a partial package the new package will be a partial package.
- B. If a family has redeemed a portion of the aggregated food benefits, a different food package may be issued if there are sufficient benefits remaining on the card equal to the items/quantities originally issued for the participant requesting the food package change. NOTE: The family should be informed this could affect the remaining food packages on the card. (e.g., change remaining milk on card to lactose free milk).
- C. When a food package without formula is exchanged for a food package with formula, the formula will be prorated depending on the number of days remaining in the current month.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Procedure No. FD 12.0

XV. WIC standard food packages for the 5 categories of participants are defined below:

A. **Federal Regulations Food Package I** Infants (age 0 to 1 month):

1. Exclusively breastfeeding – Breastfeeding support, No foods
2. Formula feeding - Formula
 - a. up to 823 fl. oz. reconstituted concentrate,
 - b. up to 870 fl. oz. reconstituted powder, or
 - c. up to 832 fl. oz. ready to feed

B. **Federal Regulations Food Package I** Infants (age 1 through 3 months):

1. Exclusively breastfeeding – Breastfeeding support, no foods
2. Mostly breastfeeding - Formula
 - a. up to 388 fl. oz. reconstituted concentrate,
 - b. up to 435 fl. oz. reconstituted powder, or
 - c. up to 384 fl. oz. ready to feed
3. Formula feeding - Formula
 - a. up to 823 fl. oz. reconstituted concentrate,
 - b. up to 870 fl. oz. reconstituted powder, or
 - c. up to 832 fl. oz. ready to feed

C. **Federal Regulations Food Package I** Infants (age 4 through 5 months)

1. Exclusively breastfeeding – Breastfeeding support, no foods
2. Mostly breastfeeding - Formula
 - a. up to 460 fl. oz. reconstituted concentrate,
 - b. up to 522 fl. oz. reconstituted powder, or
 - c. up to 474 fl. oz. ready to feed
3. Formula feeding - Formula
 - a. up to 896 fl. oz. reconstituted concentrate,
 - b. up to 960 fl. oz. reconstituted powder, or
 - c. up to 913 fl. oz. ready to feed

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Procedure No. FD 12.0

D. Federal Regulations Food Package II Infants (age 6 through 11 months):

1. Exclusively breastfeeding
 - a. 24 oz. of infant cereal,
 - b. 64 4-oz. containers of infant fruits and/or vegetables
 - c. 31 2.5-oz. containers of infant meats
2. Mostly breastfeeding
 - a. up to 315 fl. oz. reconstituted concentrate,
 - b. up to 384 fl. oz. reconstituted powder, or
 - c. up to 338 fl. oz. ready to feed, and
 - d. 24 oz. of infant cereal
 - e. 32 4-oz. containers of infant fruits and/or vegetables
3. Formula feeding
 - a. up to 630 fl. oz. reconstituted concentrate,
 - b. up to 696 fl. oz. reconstituted powder, or
 - c. up to 643 fl. oz. ready to feed
 - d. 24 oz. of infant cereal
 - e. 32 4-oz. containers of infant fruits and/or vegetables.

E. Federal Regulations Food Package III Infants (age 6 through 11 months) – Special Dietary Needs (requires a prescription):
Amounts as prescribed by the healthcare provider, not to exceed amounts below:

1. Mostly breastfeeding - Formula
 - a. up to 460 fl. oz. reconstituted concentrate,
 - b. up to 522 fl. oz. reconstituted powder, or
 - c. up to 474 fl. oz. ready to feed
2. Formula feeding - Formula
 - a. up to 896 fl. oz. reconstituted concentrate,
 - b. up to 960 fl. oz. reconstituted powder, or
 - c. up to 913 fl. oz. ready to feed

F. Federal Regulations Food Package III Women and Children with Special Dietary Needs (Amounts as prescribed by the healthcare provider, not to exceed amounts below):

1. Formula, up to 455 oz. liquid concentrate (or equivalent
2. amount of powder reconstituted to 910 oz. or less)

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Procedure No. FD 12.0

2. Juice (single strength) – women 2 48-oz or 11.5-12-oz frozen; children 2 64-oz or 2 16-oz frozen.
3. Whole Milk (fluid) up to amount allowed by participant
4. category (A maximum of 1 lb. of cheese may be substituted for 3 qts. of milk)
5. Cereal (adult OR infant cereal) up to amount allowed by participant category
6. Eggs – up to quantity allowed by participant category
7. Fruits and vegetables - up to quantity allowed by participant category
8. Whole wheat bread or other whole grains – up to quantity allowed by participant category
9. Beans / peanut butter, up to amount allowed by participant category

G. Federal Regulations Food Package IV Children (age 1 to 2 years):

1. Juice (single strength) – 128 fl. oz. (2 64-oz. single strength or 2 16-oz. frozen)
2. Whole Milk (fluid) – 16 qt. (A maximum of 1 lb. of cheese may be substituted for 3 qts. of milk)
3. Breakfast cereal - 36 oz.
4. Eggs – 1 dozen
5. Fruits and vegetables - \$8.00 value
6. Whole wheat bread or other whole grains – 2 lbs.
7. Beans - 1 lb.

H. Federal Regulations Food Package IV Children (age 2 through 4 years):

1. Juice (single strength) – 128 fl. oz. (2 64-oz. single strength or 2 16-oz. frozen)
2. Low-fat and fat-free milks and/or low-fat buttermilk (fluid) – 16 qt. (A maximum of 1 lb. of cheese may be substituted for three qts. of milk)
3. Breakfast cereal - 36 oz.
4. Eggs – 1 dozen
5. Fruits and vegetables - \$8.00 value

Nutrition Services Department of State Health Services

Effective: October 1, 2015

Procedure No. FD 12.0

6. Whole wheat bread or other whole grains – 2 lbs.
 7. Beans/peanut butter – 1 lb. dried beans OR 64 oz. of canned beans/peas OR 16 to 18 oz. peanut butter
- I. **Federal Regulations Food Package V** Pregnant and Mostly Breastfeeding Women:
1. Juice (single strength) – 144 fl. oz. (3 48-oz. single strength or 3 11.5-12 oz. frozen)
 2. Low-fat and fat-free milk and/or low-fat buttermilk (fluid) – 22 qt. (A maximum of 1 pound of cheese may be substituted for 3 qts. of milk)
 3. Breakfast cereal - 36 oz.
 4. Eggs – 1 dozen
 5. Fruits and vegetables - \$11.00 value
 6. Whole wheat bread or other whole grains – 1 lb.
 7. Beans/peanut butter – 1 lb. dried beans and 16 to 18 oz. peanut butter OR 1 lb. dried beans and 64 oz. canned beans/peas OR 64 oz. canned beans/peas and 16 to 18 oz. peanut butter OR 2 1-lb dried beans OR 128 oz. canned beans OR 36 oz. peanut butter.
- J. **Federal Regulations Food Package VI** Postpartum Women (Includes Texas WIC participant category Some Breastfeeding Women and Some Breastfeeding Multiple Infants from the same pregnancy):
1. Juice (single strength) – 96 fl. oz. (2 48-oz. single strength or 2 11.5-12 oz. frozen)
 2. Low-fat and fat-free milk and/or low-fat buttermilk (fluid) – 16 qt. (A maximum of 1 lb. of cheese may be substituted for 3 qt. of milk)
 3. Breakfast cereal - 36 oz.
 4. Eggs – 1 dozen
 5. Fruits and vegetables - \$11.00 value
 6. Beans/peanut butter – 1 lb. dried beans OR 64 oz. of canned beans/peas OR 16 to 18 oz. peanut butter
- K. **Federal Regulations Food Package VII** Exclusively Breastfeeding Women (this food package will also be issued to

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: October 1, 2015

Procedure No. FD 12.0

Pregnant with Multiples, "Pregnant Exclusively or Mostly Breastfeeding" and Mostly Breastfeeding Multiples from the same pregnancy:

1. Juice (single strength) – 144 fl. oz. (3 48-oz. single strength or 3 11.5-12 oz. frozen)
2. Low-fat and fat-free milk and/or low-fat buttermilk – 24 qt. (A maximum of 1 pound of cheese may be substituted for 3 qt. of milk)
3. Cheese – 1 lb.
4. Breakfast cereal - 36 oz.
5. Eggs – 2 dozen
6. Fruits and vegetables - \$11.00 value
7. Whole wheat bread or other whole grains – 1 lb.
8. Beans/peanut butter – 1 lb. dried beans and 16 to 18 oz. peanut butter OR 1 lb. dried beans and 64 oz. canned beans/peas OR 64 oz. canned beans/peas and 16 to 18 oz. peanut butter OR two 1 lb. dried beans OR 128 oz. canned beans OR 36 oz. peanut butter.
9. Tuna and/or salmon (canned) – 30 oz.

L. Exclusively Breastfeeding Women Breastfeeding Multiple Infants from the same pregnancy – receives 1.5 times food items in food package VII:

1. Juice, single strength – 216 fl. oz. (1 64-oz. single strength or 1 16-oz. frozen and 3 48-oz or 3 11.5-12-oz frozen)
2. Low-fat and fat-free milk (fluid) – 33 qt. (A maximum of 1 lb. of cheese may be substituted for 3 qt. of milk)
3. Cheese – 2.5 lbs.
4. Breakfast cereal - 54 oz.
5. Eggs – 3 dozen
6. Fruits and vegetables - \$16.50 value
7. Whole wheat bread or other whole grains – 1.5 lbs.
8. Beans/peanut butter – 2 lb. dried beans and 1 16 to 18 oz. peanut butter, or for nutritional reasons such as underweight, allergies or participant preference, combinations such as: 1 lb. dried beans and 128 oz. canned beans/peas OR 128 oz. canned beans/peas and 1 16 to 18 oz. peanut butter OR 1 lb. dried

Nutrition Services
Department of State Health Services

Effective: October 1, 2015

Procedure No. FD 12.0

beans and 1 16 to 18 oz. peanut butter and 64 oz. canned
beans/peas.

9. Tuna and/or salmon (canned) – 45 oz.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:13.0

Issuance of Contract Infant Formula

Purpose

To ensure that participants needing milk-based and soy-based infant formula receive contract formula.

Authority

State Policy; 7CFR Part 246.10 (c)

Policy

Infants who receive formula shall be issued contract formula except in cases where a contract formula would be contraindicated and non-contract formula has been prescribed for valid medical reasons. Contract formula may be issued to participants older than one year of age for valid medical reasons.

Definitions

Infant formula – Also defined as non-exempt formula. A routine formula labelled for use by full term, generally healthy infants. Such formulas include but are not limited to; milk-based, soy-based, low-lactose or added rice starch products. Infant formula may be contract or non-contract.

Primary contract infant formula – The specific infant formula for which manufacturers submit a bid to a State Agency in response to a rebate solicitation and for which a contract is awarded by the State Agency as a result of that bid.

Alternate contract infant formula – Formulas other than the primary contract infant formulas available as a result of a rebate contract awarded by a State Agency.

Non-contract infant formula – Infant formula not covered under the current rebate contract for Texas WIC.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:13.0

Procedures

- I. Contract milk-based infant formula - The primary contract milk-based infant formula shall be issued to infants unless:
 - A. An infant is already using the contract soy formula and the parent/guardian wants to continue on that formula; or
 - B. An infant is experiencing difficulties with the formula and the parent/guardian is requesting a trial with the contract soy formula.
 - C. There is a request from the health care provider (HCP) for a different formula for medical reasons, (e.g. protein hydrolysate such as Alimentum for cow's milk protein allergy).

- II. Contract soy-based infant formula – The primary contract soy-based infant formula shall be issued to infants in cases where:
 - A. The family follows a vegan (vegetarian, no dairy) diet and requires soy formula; or
 - B. There is a strong family preference and/ or caregiver request for soy formula; or
 - C. There is a prescription from an infant's health care provider for a soy-based formula for a valid medical reason (e.g. cow's milk allergy, galactosemia).

- III. Guidelines for handling reported symptoms of intolerance
 - A. If intolerance to any of the contract formulas is reported, assess whether symptom(s) of intolerance may be caused by errors in feeding, preparation, and/or storage. If symptoms appear to be due to these errors, provide appropriate counseling.
 - B. If symptoms appear to be due to a common infant problem such as spitting up, fussiness, constipation, etc., provide appropriate counseling and educational material(s).
 - C. If a parent/guardian reports symptoms of diarrhea, bloody stools, vomiting, fever, or if an infant has weight loss, poor or no weight gain, a referral shall be made to the infant's healthcare provider. Document the referral in the participant's record.

Nutrition Services Department of State Health Services

Effective October 1, 2016

Policy No. FD:13.0

- D. A contract formula with prescription may be recommended to address the infant's symptoms.
- IV. Alternate contract formula with prescription
- A. An alternate contract milk-based infant formula shall be issued by prescription only, to infants where;
 - i. An infant has tried a primary contract formula and is experiencing intolerance symptoms such as but not limited to: colic, gas, constipation, vomiting or diarrhea.
 - ii. An infant has a medical contraindication which prevents a trial of a primary contract infant formula.
 - B. Medical Request Documentation
 - i. Completion of the Texas WIC Medical Request for Formula/Food form by the HCP permits a one-time request for up to the infant's first birthday.
 - ii. If a different form is presented, it can be accepted but the length of issuance, diagnosis and trial of a primary contract formula or medical contraindication must be documented.
 - iii. Measurements, dietary and medical assessments are not needed to approve alternate contract formulas.
 - C. Approval Authority
 - i. Certifying Authorities (CA) – Any CA may approve requests for contract formulas requiring a prescription.
 - ii. WIC Certification Specialist (WCS)
 - 1. If a completed Texas WIC Medical Request for Formula/Food form for an alternate contract formula is presented it may be approved.
 - 2. If another prescription form is presented or if the form is incomplete, refer the request to a CA for approval.
 - D. In-State Transfers – If a participant received an alternate contract formula with prescription and transfers to another local clinic in Texas, the gaining clinic may use the RX expiration date available in TWIN for future issuance. Example: An infant born 1/15/16 has a prescription for Similac Sensitive which was approved through the first birthday (expiration date 1/14/17).

Nutrition Services Department of State Health Services

Effective October 1, 2016

Policy No. FD:13.0

The gaining clinic can continue to issue until 1/14/17 based on the information from the losing clinic's TWIN data. A new prescription is not needed.

- V. Contract formula retrials prior to issuing/approving non-contract infant formula to participants that meet guidelines listed in Policy FD: 16.0 Approval of Non-Contract Formulas.
 - A. Contract formula retrials may be waived with documentation for medical contraindications such as:
 - i. Acute or chronic illness or injury/disability
 - ii. Recent or pending hospitalization or surgery
 - iii. Weight loss, failure to gain weight, and FTT
 - iv. Severe intolerance symptoms like vomiting, diarrhea, blood in the stool, etc.
 - v. Foster care placement
 - B. A primary contract formula retrial shall be met by one or more of the following options:
 - i. Documented adverse reaction(s) to the primary contract formula within the past 30 days. Verbal declaration by the parent/guardian is acceptable.
 - ii. A trial can be waived due to medical contraindications (see Procedure V. A. above).
 - C. An alternate contract formula (instead of the primary contract formula) may be offered for a retrial if the HCP provides medical documentation.
- VI. Issuance of contract formula to a participant older than one year of age requires a prescription, assessment, documentation and approval as described in Policy FD: 16.0 Approval of Non-Contract Formulas.
- VII. Concentrating (or altering standard dilution of) primary contract formula
 - A. A request from a prescriptive authority is required for WIC staff to provide instructions for mixing formula to concentrations other than the standard dilution. It is not necessary to contact the state office for approval to provide mixing instructions for contract formula. Document that mixing instructions were provided by WIC staff as requested by the HCP.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:13.0

- B. Mixing instructions for concentrating the primary contract formulas to 22, 24, 27, and 30 kcal/oz. can be accessed at: <http://dshs.texas.gov/wichd/nut/foods-nut.shtm>
- C. The maximum amount of formula issued shall not be increased due to the reduced volume resulting from concentration.
- D. Contact the formula pager at (512) 499-6814 for other issues related to formula dilution.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2009

Policy No. FD:15.0

Issuance of Ready-to-Use Formula

Purpose

To ensure the availability of ready-to-use formula to WIC participants with specific needs.

Authority

7 CFR Part 246.10

Policy

Ready-to-use (RTU) formula shall be issued under the appropriate circumstances as outlined in this policy and as determined by a certification authority (CA).

Procedure

- I. RTU formula shall only be issued due to one or more of the following conditions:
 - A. There is an unsafe, unsanitary or limited water supply;
 - B. The parent/caretaker or participant is unable to correctly dilute or prepare formula due to physical or mental disability; or
 - C. The formula is available only in a RTU form and there is no comparable substitute.
 - D. The use of ready-to-use **exempt** formula for infants, and any formula for women and children, better accommodates a participant's condition (e.g. compromised immune system). Refer to the specific formula in the Texas WIC Formulary;
 - E. The use of ready-to-use **exempt** formula for infants, and any formula for women and children, improves a participant's compliance in consuming the prescribed formula. Refer to the specific formula in the Texas WIC Formulary.
- II. The continued issuance of RTU shall be evaluated at subsequent certifications.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2009

Policy No. FD:15.0

- III. When issuing RTU formula, a CA shall document the reason for issuance in the participant's record.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.0

Approval of Non-Contract Formulas

Purpose

To ensure that infant formulas, exempt formula and WIC-eligible nutritionals requiring medical documentation are approved for appropriate medical reasons in compliance with WIC regulations.

Authority

7 CFR Part 246.10; State Policy

Policy

Non-contract formula may be approved for valid medical conditions when the use of WIC contract formula is contraindicated.

Definitions

Formula(s) – The term “formula(s)” used throughout this policy refers to all contract and non-contract formulas, including milk and soy-based, low-lactose formulas, nutritional beverages, additives such as human milk fortifiers and modular products, nutritional supplements and WIC-eligible nutritionals.

Infant Formula – Also defined as non-exempt formula. A routine formula labeled for use by full term, generally healthy infants or toddlers. Such formulas include milk-based, soy-based, low-lactose, or added rice starch products. Infant formula may be contract or non-contract.

Exempt Formula - Therapeutic formula intended and labeled for use by individuals with specific medical and/or dietary conditions.

WIC-Eligible Nutritionals - Certain enteral products that are specifically formulated to provide nutritional support for individuals with a qualifying

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.0

condition, when the use of conventional foods is precluded, restricted, or inadequate. Such WIC-eligible nutritionals must serve the purpose of a food, meal or diet (may be nutritionally complete or incomplete) and provide a source of calories and one or more nutrients; be designed for enteral digestion via an oral or tube feeding (e.g., Pediasure); and may not be a conventional food, drug, flavoring, or enzyme.

Non-Contract Infant Formula—Infant formula not covered under the current rebate contract for Texas WIC.

Approval Authority - Designated agency staff who are authorized by criteria outlined in this policy to approve formula; e.g., L.V.N., R.N., L.D., R.D., Nutritionist, and other Certifying Authorities (C.A.) as specified in policy CS: 15.0 *Certifying Authority*. Certified WIC Certification Specialists (WCS's) are authorized to approve formula after successful completion of the state WCS formula approval training and with local agency (LA) WIC director and preceptor approval. The Certified WCS must be designated "formula certified" to approve selected formulas as designated in the Texas WIC Formulary.

Health Care Provider (HCP) - Also referred to as "prescriptive authority"; a medical professional who may legally diagnose medical conditions and write prescriptions. In Texas, prescriptive authorities include but are not limited to: medical doctors (M.D.), doctors of osteopathy (D.O.), physician assistants (P.A.), and nurse practitioners (N.P.).

Prescription(s) - Medical documentation required to approve formula.

Procedures

- I. Formula approval requirements
 - A. Prescription
 1. Prescription documentation - *The Texas WIC Medical Request for Formula/Food F13-06-13152* (hereafter referred to as Medical Request form), and the *Texas WIC Medical Request for*
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.0

Metabolic Formula/Food both located at <http://dshs.texas.gov/wichd/nut/foods-nut.shtm> are required to provide medical documentation for formula. LA developed forms are not permitted.

- a. Incomplete written prescriptions shall be followed up with a phone call to the HCP to obtain any missing information provided the prescription has the signature/ stamp of the prescriptive authority. Missing information shall be documented in the "For WIC use only" section of the Medical Request form. The original prescription information shall not be altered.
- b. Verbal prescriptions are acceptable. Record the information that is received verbally on a Medical Request form and fax it to the HCP for a signature. Staff may accept the verbal RX and issue the requested formula for one month. After the signed form is received back from the HCP, the formula may continue to be issued for the length of time requested as specified in the Texas WIC Formulary. The Medical Request form shall be filed in the participant's chart.
- c. Changes (such as a different formula or a new diagnosis), obtained after discussion with the HCP may be documented in the "for WIC use only" section of the Medical Request form.
- d. Extending an existing written medical request – A recently expired medical request may be extended for exempt formulas/WIC eligible nutritionals only by contacting the HCP for verbal approval. This extension may occur once and for up to 6 months under the following select circumstances:
 - i. The previous medical request is no more than 30 days past the expiration date.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.0

- ii. The diagnosis and formula requested have not changed.
- iii. Documentation in the “for WIC use only” section of the Medical Request form includes:
 - 1) New length of issuance
 - 2) Name of HCP providing verbal authorization
 - 3) Date of phone conversation
 - 4) Signature of CA
- e. Faxed/electronic prescriptions are acceptable.
- f. Requests for formula received on non-WIC forms. Non-WIC forms shall be official documents from the prescribing entity such as: hospital prescriptions, HCP prescription pad, discharge papers or summaries. These may be accepted if:
 - i. The documents contain all prescription requirements listed in section IA.2. of this policy or;
 - ii. The participant is an infant less than 6 months of age and supplemental foods are not an option during the issuance time frame and all other needed information is available or;
 - iii. One of the above documents is presented and the HCP cannot be contacted, the formula may be approved for one month if the document contains at least the following information:
 - 1) Date
 - 2) Hospital name or other identifying information
 - 3) Name of formula
 - 4) Patient or guardian name
 - 5) Reason for issuance can be clearly inferred (e.g., ≤37 weeks gestation or birth weight less than or equal to 5lbs. 8oz.)
- g. If a prescription is received that requires additional information, clarification, discussion, etc. and the HCP

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.0

- cannot be reached, call the State Agency (SA) formula pager at (512) 499-6814 if needed, for assistance.
2. Prescription requirements - Completed written prescriptions include the following information:
 - a. Name of participant
 - b. Name of formula
 - c. Amount needed per day and/or;
 - d. Authorized prescribed amount of formula and/or supplemental foods and their amounts (see Policy *FD: 12.0 Food Packages* for maximum amounts)
 - e. Requested length of issuance
 - f. Medical diagnosis or reason(s) for which formula or food is prescribed
 - g. Contact information of the prescriptive authority
 - h. Signature of the prescriptive authority (signature and/or medical office stamps are acceptable)
 - i. Date prescription was written
- B. Nutrition assessment –
1. A complete nutrition assessment is required under the following circumstances:
 - a. When weight gain or growth need to be monitored.
Examples: Neosure or Enfacare for prematurity or low birth weight, and Pediasure or Kid Essentials for failure to thrive, etc.
 - b. When staff contact State Agency (SA) staff for a formula approval decision. This includes State Approval formulas excluding metabolic formulas.
 2. The following information shall be included in a nutrition assessment (when one is completed) and considered for the formula approval decision:
 - a. Anthropometric measurements – weight and length/height shall be plotted on the growth chart. Measurements can be
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.0

- obtained from the HCP. Use the date the measurements were taken to plot on the growth chart.
- i. Measurements obtained from the HCP shall not be older than 30 days for infants, children, and women.
 - ii. It is best practice to use measurements that were taken within 7 days for infants.
 - iii. Current weight and height may be critical to the care of medically fragile infants or children diagnosed with failure-to-thrive.
 - iv. Use professional judgment when deciding whether to use measurements provided that are older than 7 days.
 - v. Contact the formula pager at (512) 499-6814 if measurements are beyond the 30 day timeframe.
 - vi. For preterm infants, corrected weight and length for age shall be plotted up until the infant/child is 2 years chronological age.
 - vii. If a growth problem is identified during an assessment, the participant's HCP shall be notified (by phone, fax, or letter) if the HCP has not assessed the participant since the formula was last prescribed. A growth problem is defined as weight loss, inadequate or no weight gain, or excessive weight gain.
- b. Dietary intake/dietary history (as needed for the approval decision)
 - c. Formula history
 - d. Pertinent medical history (as needed for the approval decision)
3. At a minimum, all non-contract formula approval requests shall include a formula history which consists of a review of formulas tried and symptoms experienced.
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.0

4. Refer to the *Texas WIC Formulary* for the nutrition assessment requirements for each specific formula.
- C. Length of approval
1. The approval authority shall determine how long a formula shall be issued based on length of time a formula is requested, the participant's health history and nutrition assessment (if completed).
 2. A prescription may be approved for the full length of time requested.
 3. It may also be approved for a shorter length of time than requested. The original prescription is still valid if approved for a shorter length of time.
 4. Prescriptions that cross certification expiration dates may be extended for the remaining length of the request at the time of certification.
Example: Neocate Jr. is approved January 2nd for 6 months. The approval time period is January through June. The certification expires at the end of February. Initial issuance is for 2 months (January – February). Four additional months may be issued after the certification is entered in February. No further formula approval is needed at that time.
 5. Specific details on length of issuance can be found in the *Texas WIC Formulary* located at:
<http://dshs.texas.gov/wichd/nut/foods-nut.shtm>. Additional requirements may apply to specific formulas.
- II. Documentation for formula approval – The *Formula Approval Form* located at: <http://dshs.texas.gov/wichd/nut/foods-nut.shtm> (or locally developed form) may be used for formula approval documentation when indicated.
- A. Texas WIC information network (TWIN) documentation – the following fields shall be entered into TWIN:
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.0

1. Food package code
 2. Formula code
 3. Prescription expiration date (the last day of the month for which the formula is approved)
 4. Restricted supplemental foods shall be refused if appropriate
 - B. Participant record documentation
 1. Name of the appropriate LA or SA staff approval person
 2. Date the formula is approved
 3. Reason(s) for denial, if appropriate
 4. Notification of denial, if applicable
 5. Any additional useful information to support approval or denial of formula
 - C. Notifying HCP – Staff shall notify the HCP if the requested formula cannot be issued or is not approved by WIC. This notification may be by phone, fax or email.
 - D. Other formula approval considerations
 1. When an exempt formula/ WIC eligible nutritional has been prescribed for a valid medical condition, do not challenge with or issue a different formula without first obtaining approval from the prescriptive authority.

Example: Neocate DHA/ARA was prescribed for severe multiple allergies including cow and soymilk allergies. Do not issue a protein hydrolysate (e.g., Nutramigen LGG) without HCP approval.
 2. A participant does not need to be challenged on contract formula prior to issuing an exempt formula/WIC-eligible nutritional.

Example: Nutramigen LGG was prescribed for cow milk allergy. A trial of contract soy formula does not need to occur first.
 3. Prematurity classification – If the HCP does not write “prematurity or low birth weight” as the diagnosis for a formula
-

Nutrition Services Department of State Health Services

Effective October 1, 2016

Policy No. FD:16.0

typically requested for an infant less than or equal to 37 weeks gestation assume that prematurity is the diagnosis.

4. Special accommodations for an assessment shall be offered to families with special health care needs (refer to Policy *CR: 07.0*). If a physical presence waiver is in place, use the most recent measurements when available, if needed.

III. Approval of non-contract infant formula – Refer to the form “*Non-Contract Infant Formula Approval Guidance*” and/or the policy sections A-E below.

- A. New Texas WIC participants born (or initially certified) on or after 10/1/16 will no longer be eligible to receive non-contract infant formulas.
- B. Participants previously prescribed these formulas may continue to be eligible for them if they meet the following criteria:
 1. Date of birth (DOB) (or initially certified) on or prior to 9/30/16.
 2. Previous issuance of a non-contract infant formula from Texas WIC.
 3. Presentation of a completed prescription form with one or more qualifying medical conditions.
- C. After evaluation and approval by appropriate LA or SA staff, the formula may be issued until the prescription expiration date.
- D. Evaluation consists of review of the prescription form and comparison with the latest version of the *Texas WIC Formulary*.
- E. Contract formula retrials are no longer required every 3 months. Instead, a trial of contract formula is required after the end of the prescription expiration date, unless medically contraindicated.

Example: Enfamil AR was issued and approved prior to 10/1/16. A new RX was presented on 10/10/16 for 6 months (no benefits in hand). The retrial is now required in March 2017 prior to the next approval time period which begins in April 2017.

1. If a contract formula has not been tried since the last approval and no medical contraindication was provided, a primary
-

Nutrition Services Department of State Health Services

Effective October 1, 2016

Policy No. FD:16.0

contract formula or an alternate contract formula (with complete and valid prescription) may be provided.

2. If a contract formula has not been tried since the last approval and the parent or guardian refuses a retri al, contact the HCP for permission for a retri al or a medical contraindication to refuse the retri al.
3. If a participant requests to change from a non-contract infant formula to a contract infant formula and has a current valid prescription for the non-contract infant formula:
 - a. Attempt to verify the change with the HCP that wrote the original prescription. This may be accepted verbally.
 - b. If the HCP cannot be reached, inform the HCP of the formula change via fax. The faxed form used to inform the HCP must include:
 - i. Name of participant and date of birth
 - ii. Clinic name and contact information
 - iii. The names of the current formula and the new formula requested
 - iv. A signed statement from the participant indicating acknowledgement of the requested formula change.
 - c. One final month of the original formula may be provided pending any possible medical objections from the HCP.
 - d. An optional form has been created for this purpose. It is entitled; "Texas WIC Formula Change" form and can be found at: <http://dshs.texas.gov/wichd/nut/foods-nut.shtm>.

IV. WIC staff formula approval authority information

- A. Reference materials can be found at <http://dshs.texas.gov/wichd/nut/foods-nut.shtm>. The following documents shall be referred to when approving formula:
 1. *Texas WIC Formulary* – The formulary includes:
 - a. Reasons for issuance
 - b. Description of product
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.0

- c. Maximum length of issuance
 - d. Nutrition assessment instructions
 - 2. *Formula Maximum Quantity Table* – For maximum quantities of formula by age and feeding option
 - 3. *Formula Code List* – For formula codes and other information regarding packaging and ordering formula
 - B. LA Approvals
 - 1. Approval authorities shall approve any formula listed in the *Texas WIC Formulary* (with the exceptions listed in Section IV.C.) under the following conditions:
 - a. Prescription is complete, signed and does not require any clarification by the HCP.
 - b. Qualifying condition or medical reason is the same as that listed in the *Texas WIC Formulary*.
 - 2. If the formula is requested for a reason not found in the Texas WIC formulary, consult with a LA RD or SA.
 - 3. The LA RD, using professional judgment, may approve these formulas (with the exception of metabolic formulas) for valid medical reasons **not** listed in the *Texas WIC Formulary*. Documentation of the reason for approval is required.

Example: The following situation would be outside the guidelines for this formula as described in the Texas WIC Formulary - EnfaCare request for a 13 month old child, born at 34 weeks gestation who was 4 lbs. at birth, developmentally delayed and not eating baby food. The LA RD could make a determination and decision without contacting the SA for approval. A brief description of the reason for the decision is to be included in the formula approval documentation.
 - 4. Formulary approval exceptions by LA RD's may not conflict with other policy restrictions.
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.0

Example: Similac Sensitive RTU due to intolerance symptoms on powder is in conflict with *FD: 15.0 Issuance of Ready-to-Use Formula*. Such medical exceptions are to be referred to SA formula approval staff.

5. If information is missing on the Medical Request form, appropriate LA staff shall contact the HCP to obtain the information.
 6. If the missing information is limited to length of issuance, date, or signature, any staff member may call the HCP or fax back the request to be signed.
 7. If any other aspect of the request requires discussion with the HCP, refer to the LA nutritionist, RD or SA for guidance before calling the HCP.
 8. WCS may not contact the HCP to discuss or clarify requests unless so directed by a CA.
- C. SA Approval– For formulas requiring SA approval per the *Texas WIC Formulary* contact the SA before contacting the HCP.
1. Formulas that require state office approval are indicated in the *Texas WIC Formulary*. These include but are not limited to:
 - a. First time metabolic requests
 - b. Human milk fortifiers (HMF)
 - c. 24 calorie or higher ready-to-use (RTU) formulas for premature infants
 - d. Modular products
 2. The SA shall also be contacted:
 - a. When a LA RD is not available
 - b. When prescribed formula is:
 - i. prescribed for reasons other than those listed in the *Texas WIC Formulary* and the LA RD needs assistance;
 - ii. not listed in the *Texas WIC Formulary* and/or;
 - iii. not described in any guidelines or memos issued by the SA;
-

Nutrition Services
Department of State Health Services

Effective October 1, 2016

Policy No. FD:16.0

c. For consultation or technical assistance any time.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.1

Issuance of Formula Food Packages

Purpose

To ensure that Texas WIC participants receive the infant formula, exempt formula, WIC-eligible nutritionals and supplemental foods that meet their nutritional needs.

Authority

7 CFR Part 246.10; State Policy

Policy

WIC participants may be issued non-contract formula for valid medical conditions when the use of WIC contract formula is contraindicated.

Definitions

Formula(s) - The term "formula(s)" used throughout this policy refers to all contract and non-contract formulas, including milk and soy-based infant formulas, nutritional beverages, additives such as human milk fortifiers and modular products, nutritional supplements and WIC-eligible nutritional products.

Infant Formula – Also defined as non-exempt formula. A routine formula labeled for use by full term, generally healthy infants or toddlers. Such formulas include milk and soy-based, low-lactose, or added rice starch products. Infant formula may be contract or non-contract.

Exempt Formula - Therapeutic formula intended and labeled for use by individuals with specific medical and/or dietary conditions.

WIC-Eligible Nutritionals – Certain enteral products that are specifically formulated to provide nutritional support for individuals with a qualifying

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.1

condition, when the use of conventional foods is precluded, restricted, or inadequate. Such WIC-eligible nutritionals must serve the purpose of a food, meal or diet (may be nutritionally complete or incomplete) and provide a source of calories and one or more nutrients; be designed for enteral digestion via an oral or tube feeding (e.g., Pediasure); and may not be a conventional food, drug, flavoring, or enzyme.

Approval Authority - Designated agency staff who are authorized to approve formula; e.g., L.V.N., R.N., L.D., R.D., Nutritionist, and other Certifying Authorities (C.A.) as specified in policy *CS: 15.0 Certifying Authority*. Certified WIC Certification Specialists (WCS's) are authorized to approve formula after successful completion of the state WCS formula approval training and with local agency (LA) WIC director and preceptor approval. The Certified WCS must be designated "formula certified" to approve selected formulas as designated in the Texas WIC Formulary.

Non-Contract Infant Formula – Infant formula not covered under the current rebate contract for Texas WIC.

Health Care Provider (HCP) - Also referred to as "prescriptive authority"; a medical professional who may legally diagnose medical conditions and write prescriptions. In Texas, prescriptive authorities include but are not limited to: medical doctors (M.D.), doctors of osteopathy (D.O.), physician assistants (P.A.), and nurse practitioners (N.P.).

Medical Home - A healthcare professional or healthcare clinic that provides comprehensive medical care. Comprehensive care includes care of patients with illnesses and injuries, well-child exams, immunizations, and referrals for specialty care.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.1

Prescription(s) - Medical documentation required to approve formula.

Procedures

- I. General requirements for the issuance of non-contract formula
 - A. Valid prescription approved by appropriate approval authority.

 - B. Food package, formula code, formula quantity, food(s) to omit and the formula expiration date determined by the appropriate approval authority.

 - C. Appropriate documentation provided in TWIN and participant chart. Reference materials can be found at: <http://dshs.texas.gov/wichd/nut/foods-nut.shtm>. The following documents shall be referred to when issuing formula:
 - 1. *Texas WIC Food Package Guide*
 - 2. *Formula Code List*
 - 3. *Texas WIC Formula Maximum Quantity Table*

- II. Formula and Food Package Issuance Information
 - A. *6-11 Months RX More Formula Only Package*
 - 1. Infants six months of age or older, whose medical condition (e.g., developmental delay) prevents them from consuming supplemental infant foods, are eligible to receive formula at the same monthly allowance as provided to infants ages 4 through 5 months.
 - 2. *The RX More Formula Only* food package shall be prescribed to those participants for whom the HCP has indicated "formula only", or has marked to omit both infant cereal and infant fruits/vegetables on the Medical Request form.
 - a. Developmentally delayed, premature and/or tube fed infants for whom the HCP has not indicated "formula only", shall be

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.1

scheduled to return to the clinic no earlier than 3 months of age, but before 6 months of age to determine the appropriate food package to issue after they turn 6 months of age.

- b. *The RX More Formula Only* food package may be issued once staff receives this information from the HCP. This food package may be issued prior to 6 months of age.
- c. If supplemental food authorization cannot be obtained from the HCP, do not issue supplemental food or the *RX More Formula Only* food package instead, issue the standard 6-11 months formula food package and refuse the supplemental foods.

B. Formula Food Packages for Children and Women

- 1. **Formula Only Food Package** – Choose this package if all foods are to be omitted due to the child’s medical condition. No additional formula is provided in the absence of supplemental food.
 - 2. **Formula with Infant Cereal and Baby Food** – This package provides the following foods:
 - a. Formula
 - b. Juice
 - c. Infant cereal
 - d. Fruits and vegetables cash value or baby fruits and vegetables. Parent/guardian may choose in consultation with staff.
 - 3. Not all combinations of formula and food options are available. Choose the food package option that is closest to meeting the medical/nutritional needs of the child or woman. Individual supplemental foods can be refused at issuance if they are not needed or wanted by the participant and/or HCP.
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.1

C. Metabolic Formula Approval and Issuance

1. Products prescribed for inborn-errors of metabolism (e.g., PKU) require a completed *Texas WIC Medical Request for Metabolic Formula/Food* from a DSHS approved metabolic center. This form is available on the web at:
<http://dshs.texas.gov/wichd/nut/foods-nut.shtm>
2. WIC staff are not to issue metabolic products to participants until their diagnosis has been confirmed by a metabolic geneticist. A list of recognized metabolic centers and metabolic dietitians can be found at: <http://dshs.texas.gov/wichd/nut/foods-nut.shtm>. Initial requests for metabolic products require state agency (SA) approval. Subsequent requests may be approved by a CA provided that the Metabolic Request form is completely filled out as described in II.C. 1 - 2 above.
3. Families with members who have metabolic disorders shall be given the option to participate in nutrition education, but are not required to do so. WIC staff shall not provide any individual counseling regarding appropriate metabolic diets for participants with metabolic disorders. Refer to WIC Policy *CR: 07.0 Provision of Services to Families with Special Health Care Needs*.

D. Concentrated Non-Contract Formulas

1. Federal regulations set a maximum formula allowance that cannot be exceeded regardless of the prescribed concentration rate.
 2. Refer to a LA RD or call the SA for technical assistance related to altering the standard dilution of non-contract formulas. The parent/guardian should be informed that the amount of formula provided by WIC may not be enough to last the entire month.
 3. When instructions for altering the dilution of formula are provided by the HCP, WIC staff are not required to do any
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.1

additional approval or assessment. Place a copy of the mixing instructions provided by the HCP in the participant's chart. Determine if the parent is mixing correctly according to the instructions.

4. When instructions for altering the standard dilution of formula are provided by WIC staff, a prescription, assessment, and documentation are required.
- E. Goat's Milk, Rice Milk or Almond Milk are not authorized supplemental food items and cannot be issued.
- F. Supplemental Food Issuance With or Without Formula
1. Food without formula – If a participant is receiving formula from another assistance program (such as Medicaid, Newborn Screening, CHIP, etc.) and not from WIC, the HCP shall be consulted to determine the appropriate supplemental foods to issue for the medical condition. This may be obtained verbally and documented in the participant's chart.
 2. Interpretation of formula quantity when an exact amount is specified – When a HCP requests a specific number of containers of formula per month or ounces per day;
 - a. Infants – Issue maximum amount allowed or contact the SA for assistance if significantly less than maximum is requested.
 - b. Children – Provide the number of containers requested per day. You may round up to the nearest full packaging unit as long as this is less than the maximum amount allowed per month (e.g., round up to the nearest 6 pack).
 3. Selection of Appropriate Supplemental Foods –
 - a. The HCP can defer supplemental foods selection to the Nutritionist/RD when utilizing a version of the Texas Medical Request Form with the statement: "The RD/Nutritionist can
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.1

determine the appropriate supplemental foods and amounts if left blank.”

- b. Unless otherwise noted by the HCP, the Nutritionist/RD can choose the appropriate supplemental foods, amounts and the length of issuance for the participant’s diagnosis, age, preferences, developmental readiness and food allergies.
- c. When accepting a form without the above or a similar statement the approval authority must contact the HCP if supplemental foods are not prescribed or indicated.
- d. The approval authority may obtain verbal authorization to make appropriate food selections from the HCP and document on the medical request form.

III. Transfers and Prescriptions from Other States and Foreign Countries

A. Out-of-State Transfers

1. Prescription available:

- a. Non-contract infant formula - these formulas are not allowed for first time Texas issuance. Issue a primary contract formula.
- b. Exempt/WIC eligible nutritional or alternate contract formula – The prescription can be honored for up to 3 months. Alternate contract formula prescriptions can be honored as long as the prescription is valid (up to end of certification period).

2. No prescription available:

- a. Non-contract infant formula – Issue a primary contract formula.
 - b. Exempt/WIC eligible nutritional – may issue the food and formula previously issued in the other state for one month and refer them to a Texas HCP for a new prescription.
 - c. Contact the state agency if there are questions about the appropriate food package. Document formula and reason needed. Ensure the reason is comparable to the Texas WIC Formulary.
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.1

B. In-State Transfers

1. Prescription or expiration date available:
 - a. Issue up to 3 months as appropriate. A new prescription will be needed at the next issuance period.
2. No prescription or expiration date available:
 - a. Attempt to contact previous HCP to verify medical need for formula.
 - b. May issue one month to allow time to connect with new local HCP.
3. Foster care – If there is no current prescription available and no documentation from the previous caregiver, issue one month of the requested formula until a new HCP can provide an updated prescription.

C. Prescriptions from Other States (Not transfers)

1. Prescriptions from other States may be accepted for up to 3 months to allow the participant time to obtain a new medical provider.
2. If allowed food information is not available, staff may contact the out-of-state medical provider to obtain it.
3. If staff cannot obtain this information, formula only may be provided.
4. If a participant's medical home is located in another state, prescriptions may be accepted from that location provided that they contain all required information. Approval time period is not limited to 3 months in these situations.

- D. Foreign Prescriptions - Prescriptions from foreign countries, including Mexico, may be approved by the SA for 1 month only. Thereafter, a current prescription from a local U.S. HCP shall be required.
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.1

- IV. Coordination with Medicaid – WIC staff shall refer participants to Medicaid in the following situations:
 - A. When additional formula is needed beyond what WIC can supply.
 - B. If the needed formula is not on the Texas WIC Formulary and cannot be supplied by WIC.
 - C. If the participant is no longer categorically eligible.
 - D. Contact the formula pager for Medicaid referral assistance.
 - V. Maximum Quantities of Formula and Food
 - A. Do not exceed maximum issuance of formula. Formula issuance includes issuance, formula exchange, and any other transaction involving formula.
 - B. Refer to Policy *FD: 12.0 Food Packages* for maximum monthly allowances of formula and supplemental foods.
 - C. Medical documentation is needed for all contract formulas (other than the primary milk and soy-based formulas), non-contract formulas and supplemental foods that are issued with formula for infants.
 - D. Medical documentation is needed for all formula and supplemental foods (including whole milk) that are issued with formula for women and children one year of age and older.
 - VI. Non-Compliant Issuance of Non-Contract Formulas
 - A. LAs shall be required to reimburse the SA for non-compliant issuance of non-contract formula in accordance with this policy. The
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. FD:16.1

amount of reimbursement shall be equal to the dollar amount that was paid to the vendor.

- B. Non-compliant issuance of non-contract formula includes any one of the following:
1. A prescription or medical request form was not provided and no documentation exists to support the reason to issue non-contract formula.
 2. A prescription or medical request form was provided but the participant did not qualify to receive non-contract formula
 3. Formula was issued to the participant beyond the prescribed and authorized length of issuance.
 4. The amount of formula issued exceeded the maximum allowable amount for the form of the formula, infant's age, and feeding option.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: March 1, 2012

Policy No. FD:18.0

Definition

Drop shipment – The shipping of exempt formula and/or medical foods from a supplier directly to the WIC LA.

Locally available formula – exempt formula and/or medical foods that are carried by or can be ordered from a local vendor.

Standard milk or soy-based infant formula - refers to any infant or toddler formula used to feed generally healthy infants or toddlers without special dietary needs. Standard formulas may be contract or non-contract formulas. (e.g., Similac Advance, Enfamil Premium, or Good Start Soy etc.).

Benefit-month refers to the valid period in which benefits can be used. The benefit-month is the first day of the month through the last day of the month.

Recipient – The adult person obtaining formula either for themselves or for infant(s) or child(ren). This person may also be known as a participant, client, parent, guardian, caregiver or proxy.

Procedure

- I. When formula is to be drop shipped:
 - A. Approval is required by appropriate LA or State Agency (SA) staff.
 - B. The Certifying Authority (CA) shall choose the formula code and quantity of formula to be shipped. Consult Formula Code List at: <http://www.dshs.state.tx.us/wichd/nut/foods-nut.shtm> for assistance with packaging challenges that may require ordering less than the issued amount of formula.
 - C. Issue benefits onto the WIC EBT Card. Print the shopping list.
Note: Make all necessary changes prior to printing the drop ship order form if the formula quantity needs to be reduced, a formula exchange is needed or multiple formulas are to be issued.
 - D. After benefit issuance, the computer generated drop ship order form is printed from the formula exchange module (FEM).
 - E. The EBT card and PIN number are required to access and print the drop ship order form.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: March 1, 2012

Policy No. FD:18.0

- F. Print a separate form for each month drop ship formula is issued to the EBT card. Example: If formula benefits are issued for the months of January, February and March, print a form for January, then for February and then for March.
- G. Instruct the recipient not to buy the formula to be drop shipped with the WIC EBT Card. Have the recipient sign the following statement:

"The WIC clinic has special ordered the formula, _____, for my infant/child because it is not available locally. I understand that I am not to purchase any of this formula with my WIC EBT Card. If I buy this formula with my WIC EBT Card, I will have to pay for the cost of that formula.

Spanish and Vietnamese translations of this statement are available and posted on the WIC website at <http://www.dshs.state.tx.us/wichd/nut/foods-nut.shtm>.

1. This signed statement shall be attached to the clinic copy of the signed shopping list.
 2. This shopping list is to be retained in the clinic with the other shopping lists and shall constitute the food instrument benefit issuance log.
 3. A second copy of the shopping list with the statement is to be given to the recipient. The recipient's copy does not have to be signed.
- H. Clinic completes the "To be completed by Clinic" section of the WIC Formula Drop Ship Order Form generated by TXWIN. ALL information that is not pre-populated must be manually entered on the form. Do not leave any section blank.
 - I. Be certain to check that the pre-populated information is correct.
 - J. Order only one-months' worth of formula at a time and request that it be drop-shipped to the clinic. State agency approval is required for delivery to any address other than the clinic address.
 - K. The clinic determines where to order the drop ship formula and obtains the price per item. Shipping charges, if any, shall be listed separately on the WIC Formula Drop Ship Order Form. The SA must approve overnight delivery (if this is a separate added expense).

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: March 1, 2012

Policy No. FD:18.0

- L. Formula may be ordered earlier than the first day of the benefit month, but cannot be given to the recipient before the first day or after the last day of the benefit month.
- M. Inform the recipient of the date they should return to pick up formula and that it will only be held in the clinic for approximately seven days (not to exceed the last day of the benefit month).
- N. The recipient may leave the clinic at this step.
- O. Fax the order form to the vendor. NOTE: Vendors should not ship formula until a copy of the order form has been received.
- P. Vendor ships the formula to the clinic.
- Q. Upon receipt of the formula by the LA:
 - 1. Confirm the formula is undamaged and the type and quantity are correct.
 - 2. If all is in order, circle "Y" on the drop ship order form. If the formula is damaged or incorrect, contact the vendor and/or the formula pager for assistance.
 - 3. Clinic staff signs and dates the original WIC Formula Drop Ship Order Form. The "to be completed by vendor" section will be blank.
 - 4. Contact the recipient to pick up the formula.
 - 5. Document all attempts to contact the recipient.
 - 6. When the recipient comes into the clinic, have the recipient sign and date the WIC Formula Drop Ship Order form indicating that they received the formula.
 - 7. Confirm that the current PAN in the participant's possession matches the PAN written on the WIC Formula Drop Ship Order Form.
 - 8. If the PAN is not correct (as might happen due to a lost card), draw a single line through the incorrect PAN (so that it is still legible) and write the correct PAN below or next to it on the WIC Formula Drop Ship Order form. Include a brief note of explanation for why the PAN has changed such as lost card, custody change etc.
 - 9. Verify that the date signed is in the same month as the benefit month printed on the form.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: March 1, 2012

Policy No. FD:18.0

Example: If the benefit month is June, then the date the recipient signs the form must be in June. It cannot be dated in May or July.

R. The original signed WIC Formula Drop Ship Order Form for the current month shall be **immediately** faxed to the vendor. This order form shall be faxed no later than the last day of the benefit-month. This is to prevent the vendor from missing the valid time period for submission of the order form to the SA for claim payment.

S. Call the vendor to confirm that the faxed and completed order form was received and retain all documentation.

T. Each LA shall implement a procedure to document and track drop ship orders placed, received, and issued. Documentation shall be maintained in a central file with a reference copy of the *SA WIC Formula Drop Ship Procedures* for monitoring or auditing purposes.

- II. Local agency liability for formula payment – The LA shall be required to pay for formula in the following situations:
- A. The LA causes a vendor to miss an opportunity to submit a claim for payment within the valid time period by:
 - 1. Not faxing the signed WIC Drop Ship Order form to the vendor on or before the last day of the benefit month or;
 - 2. Submitting an order form that is incomplete or inaccurate.
Example: missing or incorrect information such as benefit month, PAN, no caregiver signature etc...
 - B. The formula is provided to the participant before the benefit month begins or after the benefit month ends.
 - C. The formula quantity ordered and provided to the recipient is greater than the quantity issued to the participant. (e.g. 113 cans of Pediasure Enteral is the maximum amount allowed for a child. 113 cans are ordered and given to the recipient. However, benefits were issued after the first of the benefit month resulting in a pro-rated amount of 80. Only 80 should be ordered. The LA could be responsible for paying for 33 cans given in error.)
 - D. Other situations which result in an inability to process a valid claim within the valid time period.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: March 1, 2012

Policy No. FD:18.0

- III. What to do if the formula is not picked up:
After approximately (7) seven calendar days, with no contact between the LA and the recipient (e.g. phone disconnected, no response to postcard, messages not returned, etc...) the LA shall contact the vendor to arrange to return the formula. Return shipment charges are a WIC allowable expense.

- IV. Prior to placing future orders, staff shall:
 - A. Contact the recipient to ensure that the formula is still needed.
 - B. Call the vendor to ensure that the formula is in stock and has not changed in price.

- V. The LA should contact the formula pager at (512) 499-6814 for any issues regarding drop ship (e.g. formula exchanges, packaging issues, etc...).

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: July 1, 2013

Policy No. FD: 19.0

Exchanging and Managing Returned Formula Inventory

Purpose To establish a procedure for accepting, exchanging, and issuing returned formula to WIC participants.

Authority

State Policy

Policy

Formula exchange requests shall be completed using the Texas WIC Information Network (TWIN) formula exchange module. Formula returned to the clinic shall be documented on a state Returned Formula Log. Participants shall not receive more than the maximum amount of formula allowed by federal regulation. This includes formula issued to the WIC EBT card, formula provided from the clinic's returned formula inventory, and formula that has already been used in the current month by the participant.

Definitions

Returned formula – Formula originally purchased by WIC using the WIC EBT Card or drop shipped that is returned to the clinic.

Donated formula – Formula that was not purchased with WIC benefits, e.g., formula provided to a participant by their healthcare provider (HCP) or a hospital.

Formula Exchange Module (FEM) – Function in TWIN that allows changes to formula that has been issued to the card such as issuing out and/or taking in returned formula, exchanging one formula for another, issuing multiple formulas, and altering the quantity of formula issued.

Procedures

- I. Exchanging, Issuing, or Returning Formula Using the TWIN Formula Exchange Module (FEM)

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: July 1, 2013

Policy No. FD: 19.0

A. General Principles

1. Staff shall issue formula from returned formula inventory, if available, to WIC participants for current month formula issuances and current month formula exchanges. Returned formula may not be issued to participants as part of their advance month benefits.
2. The amount of returned formula shall be credited using the FEM and a prorated amount of the new formula may be added to the WIC EBT card. When current month benefits are issued, at least one container of formula shall be issued to the WIC EBT card. The remaining quantity of formula may be issued from returned formula inventory.
3. When a formula exchange is initiated, the computer system will not allow all formula to be issued out of inventory. It will require at least one can to remain on the WIC EBT card. If any formula was purchased, the parent/guardian or participant shall bring their WIC EBT card and unopened containers of formula to the WIC clinic. Participants should be informed that they may not receive an equal number of containers in exchange. Cans that are not required as part of the exchange may be kept by the participant.

Example: A participant brings in 5 cans of Similac Advance powder to exchange for Similac Sensitive powder on the 28th of the month. TWIN will only allow for 1 can of Similac Sensitive to be issued to the WIC EBT card. The participant may choose to keep the remaining 4 cans of Similac Advance or she may return them to the clinic. If returned to WIC, all 5 cans would then be recorded on the Returned Formula Log.
4. Whenever formula exchange involves returning and/or issuing formula from returned formula inventory, the details of the exchange must be documented. The documentation may be either a printout of the "Formula Exchange Monthly Detail" screen or a written explanation of the cans returned and/or issued out of the returned formula inventory. The screen print-out or documented explanation shall be filed with or recorded on the Returned Formula Log.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: July 1, 2013

Policy No. FD: 19.0

5. LAs shall develop written procedures that provide a mechanism for informing staff of formulas currently in returned formula inventory.
6. The SA does not require the LA to accept or manage donated formula. If an LA chooses to accept donated formula, they shall develop a local policy for donated formula management. LAs are not required to log donated formula on the Returned Formula Log.
Example: A mom brings in 10 cans of formula. Six cans are Similac Advance that she received from WIC 10 months ago; the other 4 cans are Enfamil Premium that she received from the hospital when the infant was born. The Similac Advance is added to the Returned Stock. Enfamil Premium is donated formula and does not have to be accepted or logged.
7. The FEM may be used to increase (up to the federally allowed maximum) or decrease the quantity of formula for a selected benefit period once formula is issued to the card. For the current benefit month, the quantity of formula that may be increased is the lesser of:
 - a. The difference between the maximum quantity allowed and the quantity issued OR;
 - b. The prorated quantity based on the number of days remaining in the month.
 - i. **Example one:** Ten cans of formula (from the 31 can default maximum allowed) were initially issued for the current month. If the date is on or before the 10th day of the current month, up to 21 additional cans may be issued.
 - ii. **Example two:** Ten cans of formula (from the 31 can default maximum allowed) were initially issued for the current month. If the date is after the 10th day of the current month, a prorated quantity of less than 21 additional cans may be issued. The actual additional quantity will be based on the number of days remaining in the month.
8. When the FEM is used to exchange formula, any unused formula already purchased during the benefit period shall be returned to the clinic. Only the number of cans returned will be considered in

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: July 1, 2013

Policy No. FD: 19.0

the formula exchanges. Once the exchange is made and issued on the card, additional cans cannot be returned for exchange.

- a. Inform the parent/guardian that all cans being considered shall be brought in for exchange at the same time.
 - b. **Example:** Parent has six unused cans of formula and only returns three to the clinic. It is not possible to exchange the other three cans on another day.
9. Open formula containers shall not be accepted or included in a returned formula count.
10. When returned formula inventory is available, clinics shall use formula from returned inventory in preference to issuing on the card. Clinic staff discretion shall be used to determine the amount of returned formula to issue out of inventory to an individual based on the participant's situation, e.g., transportation issues, ability to carry, etc.

B. Exchanges Involving Returned Formula

1. Issuing Out Returned Formula - If the clinic has the requested/prescribed formula in returned formula inventory:
 - a. Use the FEM to document the formula exchange. Refer to Texas WIN EBT Quick Guide for WIC Clinics for the computer procedures on formula exchanges.
 - b. Once all formula exchange information is entered in the FEM, print the "Formula Exchange Monthly Detail" screen by pressing the Print Screen key. This must be done PRIOR to pressing the F10 Save key or the information will be lost. If the "Formula Exchange Monthly Detail" screen is not printed, staff shall provide a documented explanation of the formula exchange on the Returned Formula Log.
 - c. The Formula Exchange Monthly Detail screen or documented explanation shall be filed with or recorded on the Returned Formula Log to provide an audit trail of returned formula.
 - d. Document the amount of formula the participant is receiving as well as other relevant information on the appropriate Returned Formula Log:
 - i. Name of the formula
 - ii. Name of the formula recipient

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: July 1, 2013

Policy No. FD: 19.0

- iii. Number of containers being issued from returned inventory
- iv. Signature of the parent/guardian or participant
- v. Staff initials
- vi. Reason code
 - 1) 1-Exchange – Use when changing formulas; old formula being returned and/or new formula being issued from inventory
 - 2) 2-Issued in Lieu of Benefits on Card – Use when formula is not changing and some quantity of formula is issued out of returned inventory instead of being issued to the card
 - 3) 3-Formula Sent To/Received from Another Site or LA – When formula is to be shipped to or received from another site or LA
 - 4) 4-Participant No Longer Using – When WIC purchased formula is returned to the clinic but is not exchanged for another formula
 - 5) 5-Exception with State Approval – Issued out for other reasons as requested by SA staff
 - 6) D-Damaged – When formula is damaged while in storage or when returned during an exchange transaction
 - 7) E-Expired – Unused formula stored in clinic or drop-shipped with an expiration date that has passed. Drop-shipped expired formula requires SA notification before destruction
- 2. Taking In Returned Formula - If the clinic does not have the requested or prescribed formula in returned formula inventory:
 - a. Use the FEM to document the formula return. Refer to Texas WIN EBT Quick Guide for WIC Clinics for the computer procedures on formula exchanges. Issue the requested or prescribed formula on the WIC EBT card.
 - b. Once all formula exchange information is entered in the FEM, print the “Formula Exchange Monthly Detail” screen by pressing the Print Screen key. This must be done PRIOR to pressing the F10 Save key or the information will be lost. If

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: July 1, 2013

Policy No. FD: 19.0

the "Formula Exchange Monthly Detail" screen is not printed, staff shall provide a documented explanation of the formula exchange on the Returned Formula Log.

- c. The Formula Exchange Monthly Detail screen or documented explanation shall be filed with or recorded on the Returned Formula Log to provide an audit trail of returned formula.
- d. Document the amount of formula the participant returned as well as other relevant information as outlined in I.B.1.d. on the appropriate Returned Formula Log and secure the formula in a locked location in returned inventory.

C. Formula Inventory Management - Returned formula shall be issued to WIC participants in a timely manner to prevent formula from expiring.

- 1. LAs shall maintain a perpetual inventory of returned, issued, and shipped formula using the state-developed Returned Formula Log forms. Records not providing a clear audit trail of returned formula will be deemed out of compliance. LAs that cannot account for returned formula may be required to reimburse the SA the dollar amount of any missing formula (based on the average cost to the state for that brand, type, and form).
- 2. When a parent/guardian or participant returns a specialized formula or a formula that will expire within the next four to six months:
 - a. Relocate the formula within the LA if a participant from another clinic site can use the formula.
 - b. If the formula cannot be issued within the LA, the SA shall be contacted immediately. All formula expiring within four months shall be reported to the SA to ensure adequate time to relocate the formula. If the LA receives formula that is already within four months of expiring, they shall report the formula immediately. The SA will assist in relocating formula to a clinic that can use it. The original LA will ship the formula to the receiving LA.
 - c. LAs shall provide documentation that the state was notified of formula that will soon expire. Documentation may be noted on the Returned Formula Log. LAs may contact the formula pager

Nutrition Services Department of State Health Services

Effective: July 1, 2013

Policy No. FD: 19.0

- at (512) 499-6814 and obtain a state problem number or they may email state formula staff.
 - 3. It is best practice to:
 - a. Check and record expiration dates from the formula cans
 - b. Issue out "earlier to expire" formula first
 - 4. Expired Formula
 - a. If it is impossible to relocate returned formula before it expires, the expired formula shall be disposed of by following the procedure outlined in section I.C.6.
 - b. Exception: Expired formula that was drop shipped shall not be destroyed without notifying the SA for approval first. Contact the formula pager at (512) 499-6814 for approval and instructions.
 - c. Expired formula shall never be provided to a participant, whether returned or donated.
 - 5. Damaged Formula - LAs shall accept damaged cans of formula when providing formula exchange for valid reasons. This assumes that the total number of cans returned is no more than the maximum amount allowed for the formula for a month.
 - a. The accepted cans shall be included in the count considered for formula exchange.
 - b. Open formula containers shall not be accepted or included in a returned formula count.
 - 6. Disposing of Damaged/Expired Formula –
 - a. Damaged/expired containers of formula will be disposed of promptly and appropriately.
 - b. In the presence of a witness (staff member), a second staff member shall open damaged containers of formula and dispose of the contents. Both witness and staff member shall sign and date the appropriate Returned Formula Log confirming the quantity of formula disposed.
- II. Exchanging Food Packages
- A. A participant may exchange a complete food package anytime except if the current month's food package includes formula.
 - B. If a participant has not redeemed any food benefits from the current full food package, a new full food package may be issued as a

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: July 1, 2013

Policy No. FD: 19.0

replacement. If the participant was issued a partial package, the replacement package will be a partial package.

- C. If a family has redeemed some of the aggregated benefits, a replacement food package can be issued if there are sufficient benefits remaining on the card equal to the items/quantities originally issued for the participant requesting the food package change. **Note:** The family must be notified this could affect the remaining food packages on the card (e.g., changing remaining milk on card to lactose-free milk).
- D. When a food package without formula is exchanged for a food package with formula, the formula will be prorated depending on the number of days remaining in the month.

III. Exchanging Food Packages with Formula

- A. Formula packages cannot be exchanged for food packages in the current month because formula is prorated. Benefits for the future months can be exchanged.
- B. When exchanging mother/infant food packages, the mother's food package shall always be changed FIRST, before changing the infant's food package or formula quantity.
- C. When a formula has been issued to an infant and a mother requests a change to the exclusively breastfeeding package, staff may change future month benefits, but not the current month's benefits. The mother's food package shall be changed first, before changing the infant's food package.
- D. The FEM shall be used to exchange or replace all formulas once benefits have been issued to the card.
- E. The exchange of formula occurring during the current month will be prorated based on the number of days remaining in the month.
Example: A client initially received 31 cans of Similac Advance concentrated liquid formula for May during April issuance. The client comes in May 20th to exchange formulas with all 31 cans still remaining on the card. If all of the Similac Advance concentrate on the card is to be exchanged for Similac Sensitive concentrate, the replacement formula Similac Sensitive will be prorated based on the 12 days remaining in the month.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: July 1, 2013

Policy No. FD: 19.0

- IV. Exchanging Formula for the Mostly Breastfeeding Infant – If a participant needs to exchange formula after issuance for the current month:
- A. Allow the formula exchange module to calculate the new exchanged quantity.
 - B. The FEM will calculate the quantity for maximum issuance without regard to breastfeeding status.
 - C. To determine the amount to issue to a mostly breastfeeding infant, divide the maximum issuance by 2 and round down. Manually replace this “quantity” with the new exchanged “quantity.”
Example: Participant has 3 cans of Similac Advance on the card to exchange for Similac Sensitive. The formula exchange module allows 7 cans of Similac Sensitive to be issued. 7 divided by 2 is 3.5 cans. Round down to 3 cans. Change the “new quantity” from 7 to 3 or less if the mother requests/needs less.
 - D. Save this amount and issue.
 - E. Adjust any future months that were already issued to the card by changing the formula quantity to an amount equal to or less than the maximum amount allowed for the formula type and infant’s age.
 - F. Use the Maximum Quantity Formula Table to determine the maximum quantities allowed for the mostly breastfed infant as a reference or contact the formula beeper at (512) 499-6814 for assistance.
 - G. Communicate the quantity needed to the staff member assigned to issue benefits to the EBT card.

GA - General Administration

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2008

Policy No. GA:01.0

Confidentiality of Applicant/Participant Information

Purpose

To ensure compliance with Federal Regulations and to protect the right to privacy of WIC applicants/participants.

Authority

7 CFR Part 246.26

Policy

All applicant/participant information shall be kept confidential.

Definition

Applicant/participant information – any information about a participant or applicant, whether it is obtained from the applicant or participant, another source, or generated as a result of WIC application, certification, or participation, that individually identifies an applicant or participant and/or a family member(s). Applicant or participant information is confidential, regardless of the original source and exclusive of previously applicable confidentiality provided in accordance with other Federal, State or local law.

Procedures

- I. Each local agency (LA) is responsible for restricting the use and disclosure of information obtained from program applicants or participants.

- II. An applicant/participant or the parent/guardian of an infant or child applicant/participant has the right to access all information they have provided the WIC Program.

Nutrition Services Department of State Health Services

Effective October 1, 2008

Policy No. GA:01.0

- A. Any other information in the file or record need not be provided. This includes such things as documentation of income provided by third parties and staff assessments of participant's behavior or condition, unless required by Federal, State, or local law or policy or unless the information supports a State or local agency decision being appealed in relation to a participant fair hearing.
 - B. The LA shall provide a copy of the applicant/participant record free of charge to the applicant/participant or the parent/guardian of an applicant/participant.
- III. Disclosing information for WIC purposes to persons or entities other than the applicant/ participant or the parent/guardian of an infant or child applicant/participant is restricted to certain entities/persons as follows.
- A. Those persons directly connected with the administration and/or enforcement of the Program.
 - 1. This includes other WIC state or local agencies as may be necessary to provide uninterrupted continuation of services when transferring, WIC officials at the federal level, and the Comptroller General of the United States.
 - 2. A release signed by the WIC participant or parent/guardian is not necessary in these situations.
 - B. A third-party with the written consent of the applicant/participant or the parent/guardian.
- IV. Disclosure of information for non-WIC purposes is restricted to:
- A. That which is necessary to comply with the State laws on child abuse/neglect reporting and in accordance with the Department of State Health Services *Child Abuse Screening, Documenting, and Reporting Policy for Contractors/Provider*;
 - B. That which is necessary to comply with an official investigation of a crime where identification by WIC staff of a WIC client is needed. As long as the person is not identified as a WIC

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2008

Policy No. GA:01.0

applicant or participant, his/her identity may be divulged if the WIC staffer has seen documentation of the person's identity. For example: A WIC staff person's purse is stolen from the clinic. A video tape of a person using the WIC staff person's credit card is obtained by the police and shown to the WIC staff person. The staffer can state, "I saw this person in the clinic on such and such a day at such and such a time and she showed me an ID that said her name was Mary Smith." Do not reveal whether or not the person was a WIC applicant or participant.

- C. A third party with the written consent of the applicant/participant or the parent/guardian;
- D. Organizations that serve persons eligible for the WIC program for certain permitted non-WIC uses as designated in writing by the Department of State Health Services (DSHS) Commissioner of Health.
 - 1. The applicant or recipient must be notified either at the time of application or through a subsequent notice as the situation warrants. The subsequent notice may be mailed or presented to the client in person, as applicable.
 - 2. The SA or an LA must enter into a written agreement with the other public organization or with the program area of DSHS or the local WIC agency that will use the information. **Prior SA approval is required** before an LA can enter into any such agreement. Contact the Information and Response Management (IRM) staff at (512) 341-4400 (option 6, followed by option 4) to start the approval process.
 - 3. The written agreement must specify that the information may be used only for:
 - a. establishing the eligibility of WIC applicant/participants for the other organization's program(s); or

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2008

Policy No. GA:01.0

-
- b. conducting outreach to WIC applicants/participants for the other program(s)
 - c. enhancing the health, education, or well-being of WIC applicants/participants who are currently enrolled in such programs, including the reporting of known or suspected child abuse or neglect that is not otherwise required by State law;
 - d. Streamlining administrative procedures in order to minimize burdens on staff, applicants, or participants in either the receiving program or the WIC program; and/or
 - e. Assessing and evaluating the responsiveness of a State's health care needs and health care outcomes.
- 6. The written agreement must contain the receiving organization's assurance that it will not use the information for any other purpose or disclose to a third party.
 - 7. The State agency will decide whether or not an applicant/participant has the right to refuse to sign the release form concerning data release agreements. This also applies to agreements the LA may enter into with another entity. Whether or not an applicant/participant or parent/guardian has the right to refuse to share their data will be indicated on the Supplemental Information Form (SIF WIC-35-1) for state level data sharing initiatives. When an LA data sharing initiative is approved by the SA, the LA will provide a locally produced notice to the client.
- V. Release forms authorizing disclosure to private physicians or other health care providers may be included as part of the WIC application/certification process. All other requests for applicants/participants to sign voluntary release forms must occur after the application/certification process is complete.
- VI. Routine access to WIC applicant/participant information shall be limited to WIC staff, managers, and administrators who are responsible for the ongoing conduct of program operations. This

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2008

Policy No. GA:01.0

provision excludes operational personnel not certifying and serving WIC applicants/participants and administrators who do not directly supervise WIC staff.

- VII. At all other times, applicant/participant information shall be kept confidential.
 - A. WIC staff may discuss applicant/participant information with other WIC staff as appropriate. Discussion shall take place in private areas where the information cannot be overheard by other participants, staff from other programs, or the general public.
 - B. WIC staff shall ensure that a professional attitude is maintained at all times about applicant/participant information. This includes respecting the applicant/participant's privacy and maintaining respect for the dignity of the applicant/participant at all times.

- VIII. Regarding release of anonymous information: requests for data in aggregate or summary form may be granted as long as the released information excludes any items which would identify program participants/applicants.

- IX. Regarding release of joint program application form information: In using a joint application form, LAs shall not require applicants to apply for benefits in all programs for which the joint application is intended. Applicants shall be given the opportunity to choose, in writing, the programs for which they wish to apply. In so designating, the applicant is consenting only to the use and sharing of information on the form by the agencies specified and no written agreement is needed among programs.

- X. Confidential WIC applicant/participant information may be disclosed pursuant to a valid subpoena in accordance with the following procedures.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2008

Policy No. GA:01.0

- A. For documentation purposes, LAs shall immediately, upon receipt of a subpoena, notify the SA by contacting the IRM staff at 512/341-4400 (option 6 followed by option 4).
- B. The LA shall consult with legal counsel at its own agency to determine whether the information requested is in fact confidential and prohibited from release as stated in the subpoena. LAs may wish to provide their counsel with a copy of this policy and/or the federal regulations governing WIC confidentiality at 7 CFR §246.26 available at:
<http://www.fns.usda.gov/wic/lawsandregulations/default.htm>
- C. If the LA determines the information is confidential and prohibited from disclosure as stated in the subpoena, the LA shall attempt to quash the subpoena unless the SA or LA determines that disclosing the confidential information is in the best interests of the WIC Program. Such a determination should only be made infrequently.
 1. Inform the requestor of the WIC confidentiality provisions and request a signed client release. Often the requestor is amenable to obtaining a client release rather than deal with a situation where the LA, in the absence of a release, has no choice but to attempt to quash the subpoena.
 2. If the SA or LA seeks to quash the subpoena or decides it is in the best interests of the Program to release the information, inform the court or the receiving party that the information is confidential under federal regulations and try to limit the disclosure by:
 - a. providing only the specific information requested in the subpoena and no other information; and
 - b. limiting to the greatest extent possible the public access to the disclosed information.
- D. LAs should also comply with any Local Agency policies governing subpoenas, unless the local policies conflict with SA policy.

Nutrition Services
Department of State Health Services

Effective October 1, 2008

Policy No. GA:01.0

- XI. In responding to search warrants, the LA must comply with the following procedures:
- A. Upon receipt of a search warrant, immediately notify the SA by contacting the Information and Response Management (IRM) staff at 512/341-4400 (option 6 followed by option 4).
 - B. Immediately notify legal counsel for the LA and comply with any LA protocol concerning search warrants.
 - C. Comply with the search warrant; and
 - D. Inform the individuals serving the warrant that the information being sought is confidential and seek to limit the disclosure by providing only the information requested in the search warrant and limiting to the greatest extent possible the public access to the confidential information disclosed.
- XII. Local agencies may choose to negotiate an MOU with programs that routinely request WIC client information with client permission. These MOUs would set forth performance conditions in writing to which both parties have agreed. Some examples are:
- A. the information required to be stated on the request in order for the local agency to accept the release form (e.g., an itemized list of the information being requested; a timeframe for the information such as the most recent or all information ever collected);
 - B. the timeframes for filling a request (e.g., the local agency will complete all requests within 5 working days); and/or
 - C. performance conditions the other agency/program requests of WIC that are acceptable to the local agency.

Nutrition Services
Department of State Health Services

Effective October 1, 2008

Policy No. GA:01.0

Quick Guide to Release of Client Information
To be used for a WIC purpose

To Whom?	Persons <u>directly</u> connected with administration and/or enforcement of WIC – includes, but is not limited to, staff of other WIC LAs, both in and out of state; independent auditors under contract to the LA and LA auditors; USDA officials; and DSHS OIG investigators. Note: do not assume that requests from these entities are always for a WIC-purpose.	Other third parties Example: participant’s doctor in order to obtain prescription for exempt formula, which is a WIC purpose
Consent of client required?	No	Yes
Notice to client required?	No	Yes as part of the release form

Nutrition Services
Department of State Health Services

Effective October 1, 2008

Policy No. GA:01.0

Quick Guide to Release of Client Information
To be used for a non-WIC purpose

To Whom?	Those whom State law requires for reporting of suspected child abuse/neglect. Examples: Department of Family and Protective Services (DFPS); local or state law enforcement	Programs run by DSHS, LAs or other public organizations that serve persons eligible for WIC. Examples: Texas Health Steps for outreach to their program, which is a non-WIC purpose	Other third parties, excluding criminal cases (see IV.B) Examples: Law office representing participant in custody dispute, which is a non-WIC purpose.
Written designation by Commissioner of Health and MOU between the SA/LA and the other entity?	No	Yes	No
Restricted to certain purposes only?	Yes	Yes	No
Consent of client required?	No	Optional – SA has discretion to decide	Yes
Notice to client?	No	Yes	Yes

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. GA:02.0

Claims Against Local Agencies

Purpose

To ensure program funds are used only for those purposes defined by the federal laws and regulations.

Authority

7 CFR Part 246.13, 246.23; XO:0111 (TDH Administrative Policy)

Policy

If the state agency (SA) determines through a review of the local agency's (LA's) reports, program or financial analysis, monitoring, audit, or otherwise, that any program funds provided to a LA for supplemental foods or administrative purposes were, through LA negligence or fraud, misused or otherwise diverted from program purposes, a claim shall be assessed by the SA against the LA.

Procedures

- I. The SA shall assess a formal claim against the LA for program funds misused or diverted from program purposes.
- II. The LA shall be notified in writing of the financial claim and the reasons for the claim. Repayment and/or rebuttal shall be due within 30 days receipt of the notification letter.
- III. The LA shall have full opportunity to submit evidence, explanation or information concerning alleged instances of misuse or diversion of program funds.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. GA:02.0

- IV. Failure of the LA to justify and/or reimburse the SA for the financial claim shall result in the SA reducing the LA's administrative voucher(s) sufficient to recover the monies due the SA.

- V. The LA is not liable for program funds provided for supplemental foods obtained by a participant or parent/caretaker of a participant who intentionally makes a false or misleading statement or intentionally misrepresents, conceals or withholds facts to obtain program benefits, unless the LA has knowledge of the participant, parent, caretaker abuse and the LA fails to report the abuse to the SA. See **Policy GA:12.0**.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2009

Policy No. GA:03.0

Records Retention

Purpose

To ensure that full and complete records are available to answer all questions related to the propriety of program operations.

Authority

7 CFR Part 246.25

Policy

Prior written approval from the state agency (SA) shall be obtained before any financial or program records are destroyed.

Procedures

- I. Once the SA issues an annual notification indicating which records may be destroyed, the local agency (LA) may destroy records accordingly. Types of records that may be destroyed include but are not limited to the following:
 - A. certification;
 - B. report of operations;
 - C. food instrument inventory;
 - D. vendor information;
 - E. nutrition education;
 - F. food instrument log (carbon copy of voucher with signature) ;
 - G. participation log; and
 - H. sample formula log.

- II. The LA shall submit to the SA a request for approval to destroy program records that are not included in the annual notification. This request shall include a description of the records to be destroyed and shall indicate the period to which such records pertain.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2009

Policy No. GA:03.0

- III. The request shall be reviewed based upon the following criteria:
 - A. Financial records and documents shall be retained for a minimum of three years following the date of submission of the final expenditure report for the period to which the reports pertain, with the following qualification:
 - 1. The records shall be retained beyond the three-year period if audit findings have not been resolved.
 - 2. Records for nonexpendable property shall be retained for three years after its final disposition.
 - B. All other records and documents shall be retained for three years following the date of submission of the final expenditure report for the period to which the reports pertain, unless audit findings remain unresolved.
- IV. The LA shall receive written notification of the SA's decision.
- V. The LA shall have a written plan on how records shall be disposed. The plan shall be kept on file for audit/review.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. GA:04.0

Contracts with Local Agencies

Purpose

To comply with State and Federal requirements and to provide documentation of the responsibilities assumed by each of the contracting parties.

Authority

7 CFR Part 246.6

Policy

Each local agency (LA) shall have an executed contract with the Texas Department of Health (TDH) that is renewed each year the LA is in good standing with TDH and the WIC Program.

Procedures

- I. An existing LA in good standing or a new LA that has been selected to participate in the WIC Program shall receive a contract that has been prepared by TDH and signed by both parties, i.e., TDH and an authorized official of the LA.
- II. Contracts shall contain terms and conditions related to the provision of WIC services. Requirements for doing business with TDH shall be included in each contract in the form of the General Provisions document. Contracts shall incorporate WIC Program rules and policies by reference.
- III. LAs shall have an executed contract in place (i.e., signed by both parties) prior to receiving a cash advance or payment on billings submitted.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. GA:04.0

- IV. LAs shall work with their host agencies to ensure that contracts are signed in an expeditious manner.
- V. TDH is not obligated to renew a contract with an existing LA.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. GA:05.0

Local Agencies Agreement for the Provision of Health Services

Purpose

To establish a referral mechanism for the provision of health services to WIC participants in need of such services.

Authority

7 CFR Part 246.6

Policy

All local agencies (LA) that do not themselves have available health services shall enter into a written agreement with another health agency that does provide such services.

Procedures

- I. A written agreement shall be initiated by the LA for the provision of health services, if the LA does not provide those services directly.
- II. The agreement shall include a mutually agreed upon statement that a referral linkage exists between both parties for the provision of WIC and needed health services for WIC participants.
- III. The agreement may be renewable yearly, or may be for the life of the WIC Program, but the time frame shall be indicated in the agreement.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. GA:06.0

Coordination of Program Operations

Purpose

To simplify procedures and reduce the duplication of efforts between WIC and other health care providers in the community. To reduce the number of times WIC applicants/participants are subjected to the same assessment procedures.

Authority

State Policy

Policy

To the extent possible, local agencies (LAs) shall use the health and medical data from other health care providers to determine the eligibility of WIC applicants, and shall ensure that WIC participants are given information obtained in the WIC eligibility process to share with their health care providers.

Procedures

- I. Each LA shall develop and implement a plan to encourage the exchange of health and medical data with other health care providers via the applicant/participant. A written copy of the plan shall be available at the LA. At a minimum, the plan shall describe steps the LA shall take to encourage:
 - A. applicants and participants to bring health/medical data from their health care providers; and
 - B. external health care providers to provide WIC participants with health data needed to determine WIC eligibility. (See **Policy CS:17.0** for length of time referral data is valid.)

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. GA:06.0

Guidelines

Programs with whom local agencies may coordinate include but are not limited to the following:

- I. Family Planning;
- II. Immunization;
- III. Maternal and Child Health;
- IV. Texas Health Steps (EPSDT);
- V. breastfeeding support and education groups;
- VI. Food Stamps;
- VII. Medicaid;
- VIII. alcohol and drug abuse counseling;
- IX. Child Protective Services (CPS);
- X. Texas Interagency Council on Early Childhood Intervention (ECI);
- XI. Children with Special Health Care Needs (CSHCN);
- XII. Children's Health Insurance Program (CHIP).

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. GA:07.0

Referral to Food Assistance

Purpose

To ensure that otherwise eligible applicants are notified about other sources of food assistance in the local area.

Authority

7 CFR Part 246.7(b); State Policy

Policy

Each local agency (LA) shall provide information about other potential sources of food assistance in the local area to individuals who apply in person to participate in the Program, but who cannot be served because the program is operating at capacity in the local area.

Procedures

- I. If a LA is currently in caseload management or has a waiting list, all potentially eligible WIC applicants or those who have been terminated for caseload management shall be notified of sources of food assistance in the local area.
- II. The LA shall develop a written list of potential sources to include at least name, address, and phone number.

Guidelines

Examples of sources include, but are not limited to food banks, food pantries, soup kitchens, Food Stamp Program, Temporary Emergency Food Assistance Program, community centers, and churches.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2007

Policy No. GA:08.0

Provision of Information on the Food Stamp, Temporary Assistance to Needy Families, Medicaid, THSteps, Children’s Health Insurance, Children’s Health Insurance Perinatal, Women’s Health, and Child Support Enforcement Programs to WIC Applicants and Participants

Purpose

To ensure that WIC applicants/participants receive written information about the Food Stamp, Temporary Assistance to Needy Families (TANF), Medicaid, THSteps, Children’s Health Insurance Program (CHIP), Children’s Health Insurance Program Perinatal, Women’s Health, and Child Support Enforcement Programs.

Authority

7 CFR Part 246.7 (b); State Policy

Policy

Local agencies (LA) shall provide written information concerning these programs to all adult applicants applying for the WIC Program for themselves or on behalf of others.

Procedures

- I. Upon initial application to the WIC Program, all adults applying for the program for themselves or on behalf of others shall be provided written information about Food Stamps, TANF, THSteps, Medicaid, the Child Health Insurance Program and the Child Health Insurance Perinatal Program, the Women’s Health Program (WHP), and the Child Support Enforcement Program. Posting information in a public area does not satisfy this requirement. Applicants must individually receive written information at initial application.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2007

Policy No. GA:08.0

- A. If such individuals are not currently participating in Medicaid but appear to have family income below the applicable maximum income limits for the program, the LA shall refer these individuals to Medicaid, including the referral of infants and children to the THS Program.
 - B. Information on Medicaid shall include the following:
 - 1. a description of the services Medicaid provides;
 - 2. maximum income limits, according to family size, applicable to pregnant women, infants, and children up to age 5 which are used by the Medicaid Program for income screening; and
 - 3. an explanation that Medicaid counts a pregnant woman as if she were a family of two.
 - C. Information on the Women's Health Program shall include the following:
 - 1. A description of the services WHP provides;
 - 2. a WHP application;
 - 3. and an explanation that WIC clients are adjunctively income-eligible for the WHP. Participation in WIC may be documented by a copy of a Verification of Certification (VOC), an EBT shopping list, or a food voucher.
 - a. LAs shall provide a Verification of Certification to any client who requests one in a timely manner.
 - b. LAs are encouraged to explain that WIC applicants are not required to complete the list of income for the household or provide proof of income other than the copy of the VOC, shopping list, or food voucher. This information is not clearly stated on the WHP application form.
- II. At subsequent certifications, written information about these programs shall also be made available. LAs may post written information in a public area to satisfy this requirement or continue to individually provide written information to each person.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2007

Policy No. GA:08.0

- III. LAs may use the fact sheets provided by the SA or produce their own written information about these programs in a different format, if so desired. LAs shall provide local addresses and phone numbers for local program providers.
- IV. Each clinic is required to keep a supply of WHP application forms available for any applicant or participant who requests one.
- V. Documentation that written information was provided to adult participants/applicants or to adults applying on behalf of others is not required.

Guidelines

CHIP – provides eligible children with coverage for a full range of health services including regular checkups, immunizations, prescription drugs, lab tests, X-rays, hospital visits and more. The program is designed for families who earn too much money to qualify for Medicaid, yet cannot afford to buy private insurance for their children. For more information go to: <http://www.chipmedicaid.com/>

CHIP Perinatal - provides basic prenatal care for unborn children of women who do not qualify for Medicaid because of income or immigration status. Undocumented persons can qualify. Household income must not exceed 200% of the federal poverty level. Coverage starts before the child is born and continues after birth for a total of 12 continuous months. Once born, the child will receive benefits that are similar to traditional CHIP benefits for the duration of the 12-month coverage period. For more information Go to: <http://www.hhsc.state.tx.us/chip/perinatal/index.htm>

Child Support Enforcement – provides assistance in these areas: locating an absent parent; establishing paternity; establishing and enforcing child support orders; establishing and enforcing medical support orders; reviewing and adjusting child support payments. For more information go to: <http://www.oag.state.tx.us/cs/about/index.shtml#services>

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2007

Policy No. GA:08.0

Food Stamps – assists low-income households to purchase food. For more information go to:

<http://www.hhsc.state.tx.us/help/Food/snap.shtml>

Medicaid – provides medical services to low-income persons, including hospital services, doctor’s services, and prescriptions. For more information go to:

<http://www.hhsc.state.tx.us/medicaid/index.html>

TANF – provides financial and medical assistance to needy dependent children and the parents or relatives with whom they are living. For more information go to:

<http://www.hhsc.state.tx.us/Help/Financial/temporary-assistance.shtml>

THSteps – provides comprehensive and preventive health services through the Medicaid Program for persons younger than 21 years old. For more information go to:

<http://www.dshs.state.tx.us/thsteps/default.shtm>

Women’s Health Program – provides a limited Medicaid-paid family planning benefit to women ages 18-44 with income at or below 185 percent of the federal poverty level. Only citizens and some immigrants are eligible. Benefits include an annual family planning exam and choice of contraception for 12 months. For more information go to:

<http://texaswomenshealth.org/>

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. GA:09.0

Local Agency Coordination with Hospitals

Purpose

To facilitate the enrollment of newborn infants, or pregnant women at nutrition risk at the earliest possible date.

Authority

7 CFR Part 246.6(f)

Policy

Any local agency (LA) which either operates a WIC program or clinic site within a hospital or has a cooperative agreement with one of more hospitals shall advise potentially eligible individuals that receive inpatient or outpatient prenatal, maternity, or postpartum services, or accompany a child under the age of five who receives well-child services, of the availability of Program benefits. In addition, to the extent possible, the LA shall provide an opportunity for individuals who may be eligible for WIC to be certified within the hospital for participation in the program.

Procedures

- I. All hospital patients/clients who are categorically eligible for the WIC program shall be provided information about the program. At a minimum, this information shall include eligibility criteria, the name, address and phone number of the LA, and/or the state agency 1-800 number.

- II. Whenever feasible, the LA shall provide an opportunity for certification at the hospital. This may be done by agreement with the hospital to provide adequate space for WIC services.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. GA:11.0

Verbal and Physical Abuse by Participants

Purpose

To provide a measure of corrective action and a means of deterrence to participants from behavior that interferes with or distracts from the delivery of WIC services to others.

Authority

7 CFR Part 246.9, 246.12; 25 T.A.C. §31.30

Policy

Participants or parents, guardians, client-designated proxies, state agency-appointed proxies or caretakers of participants who threaten to harm, or who have physically harmed local agency (LA), vendor or state agency (SA) staff shall be sanctioned.

Definitions

Verbal abuse is the verbal threat of physical harm.

Procedures

- I. If a participant or parent, guardian, client-designated proxy, SA-appointed proxy or caretaker of participant begins to verbally abuse a WIC employee, the following procedures shall be followed:
 - A. The employee shall remain calm, attempt to calm the participant, and try to remain in control of the situation.
 - B. The employee shall attempt to contact his/her supervisor to handle the problem. If not possible, another WIC employee shall be summoned to serve as both witness and as a possible mediator.

Nutrition Services Department of State Health Services

Effective June 1, 2002

Policy No. GA:11.0

- C. The incident shall not be allowed to disrupt the entire clinic operations. The participant shall be politely, but firmly, asked either to leave the immediate premises and to discuss the problem elsewhere (private office, or outside, but away from the food issuance or clinic setting), or to leave and return another time when privacy can be obtained.

- II. Participants or parents, guardians, client-designated proxies, SA-appointed proxies or caretakers of participants shall not be sanctioned for rude or vulgar language.

- III. If a person actually physically harms a WIC employee, or damages WIC property, it is imperative that a security guard or police be called immediately. The injured WIC employee shall be removed immediately from the area and, to the extent possible, WIC property shall be protected.

- IV. The following procedures shall be used in handling incidents of participant abuse:
 - A. Every incident of verbal abuse, or physical abuse shall be documented. Written statements shall be prepared and included in the participant's file by all WIC staff involved.
 - B. The LA WIC Director or designee shall make every effort to counsel with a WIC participant who uses rude or vulgar language in order to correct the problem before it escalates.
 - C. When a participant, parent, guardian, client-designated proxy, SA-appointed proxy or caretaker of participant threatens to harm or physically harms a LA, vendor or SA staff person, the SA shall be contacted and may choose to disqualify the individual for a specific time period. Any civil or criminal action shall be taken at the discretion of the WIC employee, LA or SA.
 - D. In the event that an incident occurs, the LA WIC Director shall send a written report immediately to the SA WIC Director that includes the following:

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. GA:11.0

1. participant's name, address, etc.;
 2. description of the incident;
 3. statements from personnel involved;
 4. rationale of actions taken by LA director; and
 5. copy of policy report, if available.
- V. Any participant suspended under this policy shall have every right to appeal. Those individuals who appeal a suspension within 15 days of the advanced written notice of suspension shall continue to receive program benefits until such time the hearing official reaches a decision or the certification expires, whichever comes first.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2014

Policy No. GA:12.0

Participant Violations

Purpose

To provide an equitable control for identifying, reporting and investigating alleged WIC Program violations by participants and parents, guardians, client-designated proxies, state agency-appointed proxies or caretakers of participants.

Authority

7 CFR §246.7, §246.9, §246.12

Texas Government Code §531.102(d), §531.102(g), § 531.102(h)

Policy

Local agency (LA) staff shall report alleged WIC Program violations by participants and parents, guardians, client-designated proxies, state agency-appointed proxies or caretakers of participants to the Office of Inspector General (OIG) for follow up and action.

Participants and parents, guardians, client-designated proxies, state agency-appointed proxies, or caretakers of participants identified and documented as having committed program violations will be sanctioned.

I Definitions

Participant Violation - any intentional act of a participant, parent, guardian or caretaker of an infant or child participant that violates Federal or State statutes, regulations, rules, policies or procedures governing the WIC Program. Violations include the following:

- A. making a false or misleading statement;

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2014

Policy No. GA:12.0

- B. misrepresenting, concealing, or withholding facts to obtain WIC benefits including:
 - 1. failure to report correct income during the certification process;
 - 2. failure to report members of the household and/or their income during the certification process; and/or
 - 3. not residing at the residence claimed during the certification process.

- C. simultaneous or dual participation (receipt of food instruments) in more than one WIC clinic during the same calendar month (see Policy CS:28.0) or in the Commodity Supplemental Food Program during the same period of time as WIC;

- D. selling or exchanging, offering to sell or exchange, or allowing any other person to sell, exchange, or offer to sell or exchange, any food instrument or benefit issued to the participant or any WIC food that is the same type as a WIC food item included in the participant's WIC food package prescribed by the WIC Program, for cash, credit, non-food item(s), or unauthorized food(s), including food(s) in excess of that authorized; an offer shall include any offer that is made verbally, in print, or online through a website such as Craigslist, Facebook, Twitter, eBay, or other website.

- E. alteration of a food instrument; or

- F. threatening to harm or physically harming LA, vendor or SA staff.

II. Procedures

- A. Once a participant violation is suspected or a complaint is received, the LA and the IRM shall follow the following steps:
 - 1. Document, to the fullest extent possible, the suspected/alleged participant violation and submit a report of it to the OIG either

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2014

Policy No. GA:12.0

online at <https://oig.hhsc.state.tx.us/wafrep/> or by calling 1-800-436-6184. The OIG has an online form for fraud and abuse referrals.

2. When submitting a report of a suspected/alleged participant violation to the OIG, attach copies of certification records or other pertinent records, and printed screens of postings on Craigslist, Facebook, Twitter, eBay, or other website that contain or relate to an offer to sell or exchange any food instrument or benefit issued to the participant or any WIC food that is the same type as a WIC food item included in the participant's WIC food package prescribed by the WIC Program, including food(s) in excess of that authorized.
- B. The LA shall comply with requests from the Health and Human Services Commission Office of Inspector General's investigation protocol as follows:
1. The OIG staff will contact the WIC clinic, identify themselves, and follow these steps:
 - a. Obtain the name of the manager, supervisor, or nutritionist and fax number of the clinic;
 - b. Fax the request for documents to the manager, supervisor, or nutritionist;
 - c. Call the clinic contact to verify the fax arrived; and
 - d. Email the LA WIC Director the same day, notifying her/him of the records requested and the name of the manager, supervisor, or nutritionist to whom the request was faxed.
 2. The LA shall provide any requested documents to OIG within ten (10) business days of the date of the request. The day following the date of request is day one. The OIG will notify the WIC Director when the requested documents are not received within ten (10) working days of the date of the request.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2014

Policy No. GA:12.0

3. Requests from the OIG will include all certifying documents for the time period being requested, such as the application (WIC-35); Supplemental Information Form (SIF); copies of check stubs; any other documents furnished by the applicant during the certification process; any documents furnished by the clinic during the certification process; and the names, business addresses, and phone numbers of the employees who completed the certification.
4. When additional documents are required after the initial request, the OIG will contact the clinic person initially identified as the contact person.
5. In order to ensure a timely response to investigative staff, LAs are required to update the state agency regarding any changes to clinic locations, phone numbers, fax numbers, WIC director e-mail address, clinic managers, supervisors, nutritionists, and hours of operation.
6. Interviews with clients at the LA:
 - a. When an interview with a client will be conducted at the LA, OIG will contact the clinic manager, supervisor, or nutritionist five business days prior to the interview to ensure interview space at the clinic is available during working hours. The OIG will notify the manager, supervisor, or nutritionist and the LA WIC Director of the date, time, and place of the scheduled interview(s).
 - b. Upon arrival at the clinic, the OIG investigator(s) will notify the manager, supervisor, or nutritionist of their presence to receive instruction on space availability to conduct the interview(s).

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2014

Policy No. GA:12.0

7. Each LA shall establish internal procedures for their agency on how to assist the OIG investigators in accordance with this policy when the agency is contacted during an investigation.
- C. Upon a final determination by the OIG that a participant violation has occurred, participants and parents, guardians, client-designated proxies, SA-appointed proxies, or caretakers of participants identified and documented as having committed a participant violation shall be sanctioned as follows:
1. For a participant violation in which a claim of \$100 or more is assessed, the participant shall be disqualified for one year.
 2. When the SA or the OIG assesses a second or subsequent claim of any amount, the participant shall be disqualified for one year.
 3. For an offense in which a participant has illegally received benefits at more than one WIC office and the SA or the OIG assesses a claim for such dual participation, the participant shall be disqualified for one year.
 4. For a participant violation in which a participant has sold or exchanged, offered to sell or exchange, or allowed any other person to sell, exchange, or offer to sell or exchange, any food instrument or benefit issued to the participant or any WIC food that is the same type as a WIC food item included in the participant's WIC food package prescribed by the WIC Program, including food(s) in excess of that authorized, the participant shall be disqualified for a period of six months for a first offense and 12 months for a second or subsequent offense.
 5. Upon a final determination by the OIG that a participant violation does not warrant a one-year mandatory disqualification, the following sanctions will apply.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2014

Policy No. GA:12.0

- a. If a participant or a parent, guardian, client-designated proxy, state agency-appointed proxy, or caretaker of a participant sells or exchanges, offers to sell or exchange, or allows any other person to sell, exchange, or offer to sell or exchange, any food instrument or benefit issued to the participant or any WIC food that is the same type as a WIC food item included in the participant's WIC food package prescribed by the WIC Program, including food(s) in excess of that authorized, for any of the following items, the participant shall be disqualified for a period of six months for a first offense and 12 months for a second or subsequent offense:
 - i. cash, credit or non-food items;
 - ii. firearms, explosives, ammunition, controlled substances, alcohol, or tobacco products;
 - iii. non-food items not listed in 25 TAC §31.30(f)(2); or
 - iv. unauthorized food, including foods in excess of that authorized.
 - b. If a participant or a parent, guardian, client-designated proxy, state agency-appointed proxy, or caretaker of a participant threatens to harm local agency, vendor, or state agency staff, the participant shall be disqualified for a period of six months for the first offense and 12 months for a second or subsequent offense.
 - c. If a participant or a parent, guardian, client-designated proxy, state agency-appointed proxy, or caretaker of a participant physically harms local agency, vendor, or state agency staff, the participant shall be disqualified for a period of six months for the first offense and 12 months for a second or subsequent offense.
6. Exceptions to disqualification:
- a. The SA or the OIG may decide not to impose a disqualification if, for a participant violation that results in a claim assessed against the participant, parent, guardian,

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2014

Policy No. GA:12.0

-
- client designated proxy, SA-appointed proxy, or caretaker of a participant, full restitution is made within 30 days of receipt of a letter demanding repayment or a repayment schedule is agreed on.
- b. The SA may permit a disqualified participant to reapply for the program before the end of a disqualification period if, in the case of a participant violation for which a claim was assessed against the participant or parent, guardian, client-designated proxy, SA-appointed proxy, or caretaker of a participant, full restitution is made or a repayment schedule is agreed upon.
 - c. The SA may issue a waiver to appoint a person as a special proxy to transact food instruments and receive nutrition education for an infant, child, or participant under age 18 when the infant, child, or participant under age 18 will incur a serious health risk from the suspension of benefits.
7. The SA shall attempt to recover, in cash, the value of the benefits received by a participant or the parent, guardian, client-designated proxy, state agency-appointed proxy or caretaker of a participant as a result of a participant violation, other than a violation that consists solely of an offer to sell or exchange a food instrument or benefit issued to the participant or a WIC food that is the same type as a WIC food item included in the participant's WIC food package prescribed by the WIC Program, including food(s) in excess of that authorized.
- a. The SA or the OIG shall determine the amount of the benefits improperly received by a participant through an independent review of local agency records and such other procedures as the SA considers necessary under the specific circumstances.

Nutrition Services Department of State Health Services

Effective June 1, 2014

Policy No. GA:12.0

- b. In cases involving criminal prosecutions for violations of law, repayment of the cash value of benefits improperly received shall become a part of any restitution agreement with the prosecutor. In such cases, the participant shall not have the right to a fair hearing by the department.
 - c. In cases involving an administrative claim but no criminal prosecution, the OIG shall notify the participant or parent, caretaker, or guardian of a participant in writing that a financial claim has been established and shall request repayment of an amount equal to the value of the benefits improperly received. The written notification shall include the reasons for the claim, the value of the benefits improperly received, repayment methods, and the participant's right to a fair hearing.
 - d. Collection of a financial claim assessed against a participant by offset of future benefits is not authorized.
- D. The SA will notify the LA WIC Director about participant sanctions and provide any further instructions according to the particular incident and circumstances. As applicable, the SA may direct the LA to initiate sanctions.
- E. The SA shall provide a hearing procedure through which any individual may appeal an action which results in a claim against the individual for repayment of the cash value of improperly issued benefits or results in the denial of participation in, or disqualification from, the Program. Refer to Policy CR:03.0, Fair Hearing Procedure for Applicants/Participants.
- F. In all cases where it is found that a participant, parent, guardian, client-designated proxy, SA-appointed proxy, or caretaker of a participant unlawfully received benefits due to a WIC participant violation, including, but not limited to, dual participation, the SA and the OIG has the option to refer the matter for criminal prosecution.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2014

Policy No. GA:12.0

- G. If during an investigation, information is developed that indicates fraud and abuse in excess of \$1,000 or other major criminal activity, including large scale vendor trafficking in food instruments, firearms or narcotics, or involvement by organized crime elements, the State agency should immediately advise its FNS regional office, which will refer the case to the appropriate USDA Office of the Inspector General (OIG) regional office. In such cases, the State agency should hold further investigative action in abeyance, pending USDA OIG action. In such instances, the FNS regional office will notify the State agency of whether USDA OIG intends to assume the investigation. If USDA OIG does not assume the investigation, the State agency should refer the case to State and/or local law enforcement authorities for investigation and/or prosecution under applicable State or local laws.

- H. Failure to follow these procedures and/or to keep applicable documents per the records retention requirements may cause the LA to assume the liability for the amount of improperly issued program benefits.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. GA:13.0

Access to Appointments

Purpose

To reduce barriers to participation in the WIC Program by providing services during non-traditional hours.

Authority

7 CFR Part 246.7(b)(4); Texas Health and Safety Code Chapter 32, Section 32.021 (as amended by 75th Legislature).

Policy

Each local agency (LA) shall provide services to applicants/participants during the extended clinic operating hours as required by the Texas Health and Safety Code, Chapter 32, Section 32.021.

Definitions

- I. Traditional Clinic Hours: Hours of clinic operation between 8:00 a.m. and 5:00 p.m., Monday - Friday.
- II. Extended Clinic Hours: Hours of clinic operation before 8:00 am. or after 5:00 p.m., Monday - Friday, or on Saturday or Sunday.

Procedures

- I. Each LA shall offer extended clinic hours as described below:
 - A. Each LA shall offer extended hours that reflect the best method to serve participants in the community.
 - 1. Extended operating hours shall be offered on weekday evenings and Saturdays and may be offered on Sundays, to provide increased access to WIC services.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. GA:13.0

2. Each individual clinic within a LA is not required to offer extended operating hours. However, a reasonable effort shall be made to ensure that extended hours are distributed among clinics to ensure coverage of the entire service area.
 3. The methodology for determining the level of compliance with this requirement is shown in the APO spreadsheet posted on the WIC Director page.
- B. The lunch hour shall not be considered an extended clinic hour; however, operation during the lunch hour is encouraged.
 - C. Working individuals or students shall be given priority consideration for appointments during extended hours of operation. Other WIC participants or applicants shall be allowed to fill appointments that are not taken by working individuals or students.
 - D. During extended hours of operation, clinics shall offer the same services provided during traditional clinic hours including certification, nutrition education and counseling, and food instrument issuance. Certain blocks of time, including extended hours, may be set aside exclusively for one or more of these activities as long as all of the services are offered during extended hours at times that meet the needs of working participants and students. In no case shall traveling, answering of telephone lines, or other administrative activity, by itself, be counted as extended clinic hours.
 - E. Hours of operation shall be posted at each WIC clinic site.
 - F. LAs shall report changes in the operating hours of individual clinics to the SA as the changes occur.
 - G. LAs may use the option of scheduling extended hours in a way that reflects the best way to serve participants in their own community. LAs shall provide the justification of the extended hours scheduled and assurances that participation levels shall remain constant or grow. If participation levels decrease, the state agency (SA) may implement the 20% total extended hour requirement.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2011

Policy No. GA:13.0

- II. Each LA shall provide the SA an Annual Plan of Operations that includes the information requested and electronically submit to annualplansforops@dshs.state.tx.us on the APO spreadsheet posted on the WIC Director page.
 - A. The Annual Plan of Operations shall require the following information on LA clinic operations:
 - 1. The LA shall submit a complete list of clinic sites, including site number, hours, physical address, and telephone numbers for appointments and technical assistance at each site. The Clinic Information Form may be used to document the above information.
 - 2. All traditional and extended clinic hours shall be summed to provide an agency's total number of hours used to determine compliance with this policy, except as noted. The total number of clinic hours shall be divided by the total number of extended hours to determine the percentage of extended hours offered.
 - B. The Annual Plan of Operation shall be received at the SA not later than March 1st for implementation on October 1st of that year.
 - C. The Annual Plan of Operations shall be updated when the total number of extended hours provided by a LA changes by more than 5% or at the request of the SA.
 - D. Approval of the Annual Plan of Operations is required prior to subsequent contracting with an agency.

- III. Each LA shall provide extended hours according to the needs of the community. In extraordinary circumstances where a WIC LA cannot provide extended hours, the LA may request a temporary waiver. Waivers shall be approved only for the period of time necessary to resolve the extraordinary circumstances that preclude compliance with this policy. In no case shall the total period of time covered by a waiver(s) exceed two years.

<p>Nutrition Services Department of State Health Services</p>

Effective October 1, 2011

Policy No. GA:14.0

Staffing Standards

Purpose

To ensure the delivery of quality services that meets the needs of WIC participants.

Authority

State Policy

Policy

Each local agency (LA) shall ensure that qualified staff are available to provide WIC services.

Procedures

- I. Each LA shall employ a registered dietitian (RD) or contract with a RD.
- II. Each LA shall employ a lactation consultant (LC) or contract with a LC.
- III. Each LA shall employ a peer counselor (PC) or contract with a PC. (refer to Policy BF:03.0 for the definition of a PC)
- III. Each LA shall employ a nutritionist (refer to Policy CS:15.0 for definition of nutritionist). LAs with multiple clinic sites shall have one nutritionist per full-time site equivalent (see Guidelines).
- IV. LAs with only one competent authority (CA) on staff shall have a written contingency plan for CA back-up coverage.
- V. LAs that are unable to meet the staffing standards (e.g., LAs which are spread geographically across large areas) may request a waiver. A justification must be submitted with the request.

<p>Nutrition Services Department of State Health Services</p>

Effective October 1, 2011

Policy No. GA:14.0

- VI. LAs obtaining a waiver shall have a written plan for providing high-risk individual counseling.

Guidelines

A "full-time site equivalent" is equal to 172 hours of service per month. To determine a full-time site equivalent, add up the number of hours the full-time and part-time clinics are open for services each month, then divide by 172. This will indicate the number of nutritionists.

For example:

2 full-time sites both open 172 hours per month = 344 hours

5 part-time sites each open 85 hours per month = 425 hours

344 hours plus 425 hours = 769 total hours

769 total hours divided by 172 hours of service per month =
4.5 full-time site equivalents and 4.5 FTE nutritionists.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. GA:16.0

**Compliance with the Clinical Laboratory
Improvement Amendments of 1988**

Purpose

To ensure that all local agencies (LAs) are in compliance with the Clinical Laboratory Improvement Amendments (CLIA) of 1988.

Authority

42 CFR Part 353; Public Law 100-578

Policy

Each LA shall obtain appropriate CLIA certification. The CLIA Certificate or copy shall be kept on file and available for quality assurance monitoring review.

Procedure

- I. The Patient Quality Care Unit of the Health Care Quality Section of the Department of State Health Services (DSHS) shall be contacted to obtain an application and specific requirements for CLIA certification. All costs pertaining to registration and certification for CLIA are WIC allowable expenditures.

- II. A Certificate of Waiver may be obtained by LAs performing hemoglobin by copper sulfate, HemoCue Hemoglobin System, and/or spun microhematocrit tests. A certificate is valid for a maximum of two years and requires a registration and certificate fee. Laboratories with a Certificate of Waiver are not subject to routine inspections.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. GA:16.0

- III. WIC LAs not co-located with their parent agency shall apply for their own certification when the parent agency has a high complexity certification.
- IV. WIC LAs co-located with their parent agency may obtain their own certification, with their Laboratory Director's approval, or choose to continue under the parent agency's certificate.
- V. WIC LAs that perform only waived hematocrit/hemoglobin testing may obtain their own Certificate of Waiver, with their Laboratory Director's approval, or choose to continue under the parent agency's certificate when the parent agency has a moderate complexity certification.
- VI. WIC LAs falling under their parent agency's CLIA certification are subject to any sanctions imposed on the parent agency as a result of routine inspections. If a parent agency's CLIA certification is suspended, limited or revoked and the LA operates under their parent agency's CLIA certification, the LA shall also lose its testing ability.

Guidelines

For an application and specific requirements for CLIA certification contact DSHS at <http://www.dshs.state.tx.us/HFP/clia.shtm>.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. GA:17.0

No Smoking Policy in Local Agency Facilities

Purpose

To avoid the hazardous effects of smoking and second-hand smoke and to promote health and well-being by prohibiting smoking in any site providing WIC services.

Authority

Public Law 103-111

Policy

Smoking shall not be allowed in any local agency (LA) clinic area or administrative office area where program functions are performed.

Procedures

- I. All WIC clinics and administrative offices shall post "No Smoking" signs as appropriate.
- II. All clinics which are operated as satellite operations, where WIC services may only be operated once per week or monthly, shall post "No Smoking" signs on the days when the WIC Program is operating at these sites, if there is no existing ban on smoking in place already. This includes, but is not limited to, such sites as churches, schools, or community health centers.
- III. WIC staff shall not smoke outdoors at the public entrances to buildings where the clients enter for services.
- IV. WIC employees, while in the performance of their official duties, shall not smoke.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2011

Policy No. GA:18.0

Research or Auxiliary Services Involving WIC Participants

Purpose

To protect the confidentiality of WIC participants and to ensure that all WIC research and auxiliary services conducted at the local agency (LA) are appropriate and reasonable.

Authority

State Policy

Policy

State agency (SA) approval shall be obtained prior to any research or auxiliary service being conducted at a LA that would involve the use of WIC participants as subjects, the use of WIC participants' records, or any data collection from WIC participants.

Definition

Auxiliary Services – Any outreach or health/educational services provided to WIC participants by nutritional health or social programs, LA's parent organization etc. during the WIC visit.

Research – Any study, investigation, experiment, or survey aimed at the discovery of information or facts, the testing of a hypothesis or theory by external researchers, academic institutions, etc.

Procedure

- I. Any research conducted by LA WIC staff, the LA's parent organization, external researchers, academic institutions, graduate students, etc. intending to use WIC participants as subjects in research projects, shall obtain prior approval from the SA WIC Program. The Request For Research or Auxiliary Services From Texas Special Supplemental

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2011

Policy No. GA:18.0

Nutrition Program for Women, Infants and Children (WIC) Clinics – Application Packet may be obtained at the WIC State Office – Clinic Services Branch.

- II. Any auxiliary service that involves WIC participants or WIC clinic space shall obtain prior approval from the SA WIC Program. The Request For Research or Auxiliary Services From Texas Special Supplemental Nutrition Program for Women, Infants and Children (WIC) Clinics – Application Packet may be obtained at the WIC State Office – Clinic Services Branch.
- III. If necessary, LAs shall also have the approval of their parent agency prior to any research or auxiliary services being conducted with WIC participants.
- IV. LAs have the right to refuse any research or auxiliary service request if the LA believes it would not be in the best interest of the participants or would be a burden to the LA staff.
- V. If the SA approves the research or auxiliary services, the entity conducting the research may need to submit an application to the DSHS Institutional Review Board (IRB) if deemed necessary by the SA. The DSHS IRB shall approve the research or service before it begins.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2015

Policy No. GA:19.0

Compliance with the National Voter Registration Act of 1993

Purpose

To ensure all local agencies (LAs) are in compliance with the National Voter Registration Act (NVRA) of 1993.

Authority

Public Law 103-31

Policy

Each LA shall provide adult applicants/participants or adult parents/caregivers applying on behalf of a child with the opportunity to register to vote at application or subsequent certification and at the time a client reports a change of address. In addition, each LA shall document those who decline to register to vote.

Procedures

- I. All adult applicants/participants (i.e., pregnant, breastfeeding, or postpartum women) or adult parents/caregivers applying on behalf of a child shall be provided with the opportunity to register to vote at the time of certification, each subsequent certification, and any time the applicant/participant or parent/caregiver reports a change of address. (An adult is defined as an individual at least 17 years and 10 months of age. LA staff may determine a person's age solely by reviewing any available documents filed by the applicant. If an individual's age cannot be determined, the agency shall offer the individual the opportunity to register to vote.) Each LA may determine at what point in the application process to offer voter registration services. (In order to avoid any barrier effect, it may be advisable to provide such services after completion of the WIC application process.)

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2015

Policy No. GA:19.0

-
- A. LA staff shall provide adult applicants/participants (i.e., pregnant, breastfeeding, postpartum women) with Form NVRA-WIC, Opportunity to Register to Vote.
 - B. Adult parents/caregivers applying on behalf of a child may receive Form NVRA-WIC, Opportunity to Register to Vote, and shall be offered a voter registration application.
- II. If a pregnant, breastfeeding, or postpartum applicant/participant does not wish to register to vote, LA staff shall have the applicant/participant complete and sign the declination statement on Form NVRA-WIC, Opportunity to Register to Vote.
- A. Staff shall provide assistance to the applicant/participant in understanding the declination process, if requested, including assistance in the appropriate language.
 - B. If the applicant/participant chooses not to sign Form NVRA-WIC, Opportunity to Register to Vote, the LA staff shall initial the appropriate box on Form NVRA-WIC designated "For Agency Use."
 - C. If the applicant/participant chooses not to sign Form NVRA-WIC, Opportunity to Register to Vote, but does choose to take a Voter registration application home, staff shall note on the form that an application was taken home by the applicant/participant.
 - D. Information relating to a declination to register to vote shall not be used for any purpose other than voter registration and internal WIC audit/review.
 - E. Completed declination statements (form NVRA-WIC, Opportunity to Register to Vote) shall be retained for 22 months at the LA.
 - 1. LAs shall either file the forms separately or in the client's file.
 - 2. The forms shall be available for audit/review.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2015

Policy No. GA:19.0

- III. LA staff shall provide assistance to any applicant/participant who requests help in reading or completing forms, including assistance in the appropriate language.
- IV. LA staff shall inform the applicant/participant that the decision whether or not to register to vote shall have no effect on the application for WIC benefits.
- V. Except for those applicants/participants who are not of voter registration age; i.e., under age 17 years and 10 months, LA staff shall not make a determination about her eligibility to register to vote.
- VI. Staff are prohibited from influencing an applicant's/participant's political preference or party registration, displaying any political preference or party affiliation, or making any statement or taking any action where the purpose or effect is to discourage the individual from registering to vote, or making any statement or taking any action whose purpose or effect is to lead the individual to believe that a decision whether or not to register has any bearing on the availability of WIC services or benefits.
- VII. If the applicant/participant or parent/caregiver chooses to register to vote, LA staff shall provide the individual with the mail-in voter registration application and any assistance necessary in understanding or completing the form, including assistance in the appropriate language.
 - A. The applicant/participant or parent/caretaker may choose to take the mail-in voter registration application home and complete it on his/her own and then mail to the Texas Secretary of State on his/her own or return to the LA and LA staff shall mail it to the Texas Secretary of State.
 - B. The applicant/participant or parent/caregiver may choose to complete the mail-in voter registration application while at the WIC appointment.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2015

Policy No. GA:19.0

1. The appropriate LA employee shall review the form for completeness in the presence of the client.
2. If the mail-in voter registration application does not contain all the required information and the required signature, the LA employee shall return the application to the client for completion.
3. Street addresses are required. Rural routes or post office boxes are not acceptable as a "Residence Address." Clients shall put a description such as "northwest corner of Elm and Maple" or "Bill Smith's Ranch" if their residence only has a rural route or post office box address. A homeless or displaced person shall use either a shelter address or describe where they sleep at night; for example, "under the south end of the 1st Street Bridge." In all cases, a mailing address shall be provided.
4. Clients who are not able to write may make a "mark" for their signature. WIC staff shall then print the client's name and sign their own name as witness. (A witnessing signature by WIC staff serves only as a declaration that the staff person witnessed the applicant make a signature mark and does not constitute a declaration that any or all of the information provided by the applicant is correct and true.)

VIII. The LA shall transmit the mail-in voter registration applications to the following address within five (5) days of receipt.

SECRETARY OF STATE
ELECTIONS DIVISION
PO BOX 12887
AUSTIN TX 78711-9972

- A. All registration forms collected in a five day period may be batched together and mailed in a single envelope.
- B. Mailing costs associated with transmission of the forms to the Secretary of State are allowable costs.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2015

Policy No. GA:19.0

-
- IX. If an LA provides certification or subsequent certification services during a home visit or in any other non-clinic setting, the client shall also be given an opportunity to register to vote following the procedures outlined above.
- X. Each LA shall appoint a person to act as liaison with the county voter registrars in their service area.
- A. The SA shall provide each LA with a listing of the voter registrars for each county in their service area. This is located on the internet at www.sos.state.tx.us/elections/voter/votregduties.shtml .
- B. It is recommended that the NVRA liaison contact the voter registrars in their service area to encourage communication and to assure effective processing of the voter registration material.
- C. It is recommended that the NVRA liaison be responsible for ensuring an adequate supply of forms are available at all sites, for periodically observing LA staff to ensure the requirements of NVRA are understood and met, for training new employees, and for resolving questions and problems that arise.
- XI. An individual who visits a WIC site on a walk-in basis, but is not applying for WIC services for themselves or their child, may request and be provided with a voter registration application.
- A. Staff shall not routinely provide the Form NVRA-WIC, Opportunity to Register to Vote, to such individuals.
- B. Completed voter registration applications from such individuals shall be transmitted to the Texas Secretary of State along with the completed WIC client applications if the individual chooses to leave their completed application with the WIC staff.
- XII. All costs associated with implementation of the NVRA are allowable WIC costs.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2015

Policy No. GA:19.0

-
- XIII. The SA shall provide training materials to the LA in order to ensure uniform application of the law and this policy and shall oversee and monitor LAs for compliance with the provisions of this policy.
 - XIV. In all cases where a client has a complaint, the client shall be provided with the Secretary of State's Election Division's toll-free number, 1-800-252-8683, and the number of the local county voter registrar.
 - XV. When a client question arises which the WIC staff cannot answer, LA staff shall first call the Secretary of State's Election Division's toll-free number for assistance while the client is present. If the line is continually busy, LA staff may then call the IRM staff at the state office for assistance.
 - XVI. Form NVRA-WIC, Opportunity to Register to Vote and/or the voter registration application shall not be revised by the LA.

Guidelines

- I. WIC staff may wish to advise clients who choose to register, that voter registrars, and not the local WIC office, shall send the voter a registration certificate if the application is valid and accepted or notify the voter that the application was rejected or challenged. Voters should hear from their county registrar in approximately 30 days from the receipt of the voter registration application.
- II. Because telephone numbers and gender are listed as "optional" on the voter registration application, LA staff may receive questions about the use of this data. Staff should refer clients to the toll free number operated by the Secretary of State for the most current information on what items on a voter registration application are available under open records laws.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2016

Policy No. GA:20.0

Staff Fraud and Abuse

Purpose

To preserve the integrity of the certification and food delivery processes by requiring local agencies (LAs) to follow standardized procedures regarding staffing of clinic for prevention of fraud and abuse. To prevent conflict of interest or the appearance of conflict of interest between any employee of a local agency (LA) and a food vendor within the LA's jurisdiction.

Authority

7 CFR Part 246.12

Policy

Local agencies shall have a policy to prevent and detect staff fraud and abuse. To ensure no appearance of conflict of interest exists, local agency employees shall be prohibited from:

- I. participating in any component of the certification process and issuing food benefits to himself/herself, relatives and close friends,
- II. determining eligibility for all certification criteria and issuing benefits for the same participant (there must be separation of duties) and
- III. having financial interest in any food vendor who is authorized to accept WIC food instruments within the LA's jurisdiction.

Alleged WIC Program abuse by staff shall be reported to appropriate LA and State agency (SA) staff for investigation and resolution.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2016

Policy No. GA:20.0

Definitions

Abuse - may include but is not limited to:

- I. sale of supplemental foods or food instruments to or exchange with other individuals or entities;
- II. falsifying certification documents in order to obtain/provide food benefits;
- III. intentionally sharing computer passwords with co-workers for the purpose of illegally issuing food benefits;
- IV. threatening to harm or physically harming participants and/or LA, vendor or SA staff.

Employee - a person whose salary is paid in whole or any part by funds provided by the WIC Program.

Relatives - persons who are within the second degree of affinity and consanguinity include spouse, parents, children, grandchildren and grandparents, brothers, sisters, aunts, uncles, nieces, nephews, first cousins, stepparents, stepchildren, stepbrothers, and stepsisters by blood or marriage.

Close friend - cannot be defined in a way that fits every situation; therefore, local agencies have authority to determine if a WIC applicant or participant is a close friend of a local agency WIC employee.

Separation of duties - staff who determines income eligibility cannot determine nutritional risk. It is acceptable for one staff member to conduct part of the certification, e.g., determine nutrition risk and also issue benefits, if another staff member determines income eligibility.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2016

Policy No. GA:20.0

Procedures

- I. LAs shall develop a policy addressing procedures to prevent and detect staff fraud and abuse. The policy must be submitted to the SA for approval prior to implementation. At a minimum, the policy shall include the following elements:
 - A. Requirements for logging off computers and not sharing computer passwords.
 - B. An annual requirement for LA employees to sign and date a locally produced form each fiscal year, October 1st through September 30th, which contains the following statements. The statement must be signed prior to hiring to detect potential staff fraud/abuse. The signed and dated statements must be maintained on file and made available for audit/review.

"I certify that neither I nor any individual related to me within the second degree of affinity (marriage), or within the second degree of consanguinity (kinship) has any financial interest as owner, officer, director, or partner in any food vendor who is authorized to accept WIC food instruments within the local agency's jurisdiction.

I certify that I will not participate in any component of the certification process and issue food benefits, at certification, to myself, a relative or close friend."

1. If an employee is not able to sign the annual statement, the LA must notify the SA and document the employee's conflict of interest. The LA is responsible for advising their employee and ensuring that there is not fraud, conflict of interest or abuse by that employee. Procedures to ensure there is not conflict of interest must be clearly documented and kept on file. All documents shall be

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2016

Policy No. GA:20.0

made available for audit or review.

2. The WIC employee who is scheduled or who has a relative or close friend scheduled for a certification appointment shall notify the WIC director or clinic supervisor so that arrangements can be made for another WIC employee to certify and/or issue the food instruments. WIC employees may only provide nutrition education to relatives and close friends.
 3. LAs not having staff available to certify a WIC relative or close friend may call the SA Clinic Services Branch to obtain assistance in the certification process. The "telephone certification" shall be documented with faxed signatures from the SA staff. Advance notice to the SA is required to ensure applicants are assisted in a timely manner. A 24-hour notice may be necessary to ensure that a SA employee is available to assist with the certification.
- C. Procedures for circumstances when separation of duties is not possible because only one employee is available to conduct certifications or no certifier is available.
1. The procedures may include the following:
 - a. Reschedule certification appointments.
 - b. The WIC director or clinic supervisor will make arrangements for an employee from another clinic to serve as a second person involved in the certification process.
 - c. The WIC director or clinic supervisor will make arrangements for the staff member to call a certifying authority (CA) or a WIC Certification Specialist (WCS) at another clinic to assist the clinic by conducting a certification over the telephone.
 - i. The "telephone certification" shall be documented in the record and include a faxed

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2016

Policy No. GA:20.0

- Supplemental Information Form (SIF) with the signature of the CA or WCS.
- ii. When a WCS conducts the certification, the participant shall receive only one month of benefits if the qualifying risk conditions are not approved for WCS counseling (e.g., medium or high risk).
2. If a CA or WCS from another clinic is not available, the LA shall include the following requirements in the procedures. Documentation shall be kept on file.
 - a. A supervisory review of all non-breastfeeding infant certification records and at least 20 percent of a random sample of remaining certification records. The record review shall be completed within 2 weeks. It is recommended that staff is rotated so that the same person is not the only person that is known at the clinic.
 - b. Documentation of a quality assurance telephone survey to a random sample of ten percent of the participants serviced on that particular day(s). The survey shall be completed within 30 days (see Guidelines in this policy for sample questions). At a minimum, five questions shall be asked.
 3. Clinics with multiple WIC staff that allow one staff person to perform all eligibility and certification functions including issuing food benefits is not recommended as it does not meet the strict definition of separation of duties. If the Local Agency uses this option they must follow the above review of records (Section C.2.a). An additional file review of 10 percent of each clinic's certification files must be conducted every six months by the Local Agency Director or designee. Documentation of both reviews must be maintained on file.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2016

Policy No. GA:20.0

- D. A system for documenting, reporting and follow-up of suspected/alleged abuse, including SA notification.
 - E. Procedures for referring any case for criminal prosecution.
- II. Failure to follow these procedures may cause the LA to assume the liability for the amount of improperly issued program benefits.
- III. Any exceptions to this policy shall be submitted in writing to the SA for approval. The LA policy and any required documentation in this policy shall be made available for review during quality assurance monitoring visits.
- IV. When problems are detected, the WIC Director or designee shall take immediate action to resolve the problem. If fraud or abuse is suspected, the LA shall notify the Information and Response Management (IRM) liaisons of the SA for follow up and necessary action within 72 hours.

Guidelines

The LA may use the following questions as part of the quality assurance survey.

This is (name of employee making the call) from the WIC clinic. Our records indicate you had an appointment in the WIC clinic on (date). Is that correct?

1. Can you verify who was seen on the day of the appointment?
2. Were weight gain or growth for (the above mentioned person) discussed?

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective December 1, 2016

Policy No. GA:20.0

3. Were the blood results for (the above mentioned person) discussed?
4. What breastfeeding information did you discuss or receive? (pregnant women only).
5. Were you treated with courtesy and respect by the WIC staff? If not, please tell me what happened.
6. How long were you in the WIC clinic that day?
7. When you left the clinic, did you understand about the eligibility requirements and the use of your WIC benefits (vouchers or WIC Lone Star card)? (initial certifications only).
8. What questions or concerns would you like to discuss with a nutritionist or me?

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. GA:21.0

Open, Relocate, or Close a Clinic Site

Purpose

To establish the requirements for opening, relocating, or closing a Local Agency (LA) clinic site.

Authority

State Policy

Policy

Local Agency shall obtain prior written approval before opening, relocating, or closing a clinic site.

Definitions

Clinic Site Justification – a required form for LA to complete when requesting State Agency (SA) approval in order to open, relocate, or close a LA clinic site. The link to the form is: <http://www.dshs.texas.gov/wichd/wicdir.shtm>.

Procedures

- I. Opening or relocating a clinic site
 - A. The LA shall submit a completed Clinic Site Justification form to the SA for approval one hundred twenty (120) days prior to the proposed start date of the new clinic site. The form shall include but is not limited to:
 1. Justification of need for new clinic or relocation of existing clinic site;
 2. A list of LA's current sites, operating hours, participation and staff at each site;

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. GA:21.0

3. Potential clinic site including: address, size and cost of clinic space;
 4. Whether the new clinic will provide services to a specialized group (e.g. migrants, colonias, military);
 5. Whether the clinic will be co-located with other health services;
 6. The percentage of potential eligibles in the county where clinic is to be opened;
 7. The number of WIC vendors in the proposed clinic area;
 8. Timeframes, both for opening of clinic and reaching full participation;
 9. Anticipated staffing, caseload and clinic schedule
 10. Name and location of closest WIC clinic (miles) near the proposed site including other LA WIC clinics;
 11. Anticipated costs associated with clinic (e.g. equipment, refurbishment and personnel costs); and
 12. Other pertinent information.
- B. The SA shall approve or disapprove the request in writing; factors considered in the approval process include but are not limited to:
1. Whether or not another LA serves the same area;
 2. LA's financial status;
 3. The LA's processing timeframes as required by CS:02.0; and
 4. Whether the number of potential eligibles supports the need for a new clinic.
- C. Once the LA receives approval to open new site or relocate an existing site, LA shall complete the request to add a new or relocate a clinic site found at <http://www.dshs.texas.gov/wichd/hd/chg-reg.shtm> at least forty-five (45) days prior to clinic start date and the LA should refer to AUT: 7.0 for any additional computer needs.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. GA:21.0

- II. Closing a clinic site
 - A. The LA shall submit a completed Clinic Site Justification form to the SA for approval ninety (90) days prior to the proposed close date of the clinic site. The form shall include but is not limited to:
 - 1. Justification of need for closing the clinic site.
 - 2. A list of LA's current sites and participation at each site;
 - 3. The percentage of potential eligibles in the county where clinic is to be closed;
 - 4. Closest WIC clinic (miles);
 - 5. Plan for serving site's current participants;
 - 6. Plan for notification of current participants; and
 - 7. Other pertinent information.
 - B. The SA shall approve or disapprove the request in writing; factors considered in the approval process include but are not limited to:
 - 1. The number of participants and potential eligibles to be affected;
 - 2. Distance to the nearest WIC clinic (miles);
 - 3. Financial impact on local agency; and
 - 4. Clinic staffing.
 - C. Once the LA receives approval to close existing site, the LA shall complete the request to close a clinic site found at <http://www.dshs.texas.gov/wichd/hd/mailclose.shtm> at least forty-five (45) days prior to clinic closing date.
- III. LA shall submit the completed Clinic Site Justification form by email to Clinic.Site.Requests@dshs.texas.gov.
- IV. The LA shall retain written SA approval to be available for audit/review.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2011

Policy No: GA: 22.0

Full Use of Federal Funds

Purpose

To ensure full use of federal funds as required by U.S. Department of Agriculture.

Authority

Section 12(b) of the Richard B. Russell National School Lunch Act, 42 U.S.C. 1760(b), as amended by Section 361 of the Healthy, Hunger-Free Kids Act of 2010 (Public Law 111-296)

Policy

Each Local Agency (Agency) will support full use of Federal funds provided by the Department of State Health Services for administration of the Special Supplemental Nutrition Program for Women, Infants and Children (WIC). The Agency will exclude such funds from budget restrictions or limitations including, at a minimum, hiring freezes, work furloughs, and travel restrictions affecting the WIC Program.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective April 1, 2015

Policy No. GA: 23.0

REQUIRED OUTREACH TO FATHERS

Purpose

To increase a father's participation in the prenatal period of his child's life by describing ways that a father can be positively involved prenatally and to communicate the importance of a father's role during pregnancy.

Authority

Texas Health and Safety Code, 32.0211

Policy

Local agencies (LAs) shall make the booklet, *Maps for Dads: A Guide to Taking Care of Your New Baby*, available to WIC participants.

Guidelines

Maps for Dads: A Guide to Taking Care of Your New Baby shall be ordered from the Attorney General's office by e-mailing <https://www.texasattorneygeneral.gov/cs/child-support-publications>

IM - Immunizations

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2012

Policy No. IM:11.0

Screening of and Referral for Immunizations

Purpose

To ensure that local agencies screen and refer WIC infant and children applicants and participants in an effort to meet DSHS immunization requirements.

Authority

State Policy

Policy

Local agencies shall screen infant and children applicants and participants for current immunization status during application, recertification, and mid-certification assessment visits. In an effort to increase immunization rates in Texas, local agencies shall refer applicants/participants to immunization providers when necessary.

Procedures

- I. Screening immunization records and making referrals for immunizations shall occur during applicants'/participants' certification and mid-certification visits.
- II. Local agencies shall designate which staff members are responsible for screening immunization records. When immunization records are available, immunization status, current or not current, shall be marked on the applicant's/participant's certification form and noted in the TWIN system. If immunizations are not current, referrals to immunization providers shall be made. If immunization records are not available, participants will be reminded to bring their records to their next certification appointment for review.
- III. Information on timely immunizations shall be provided to applicants/participants. At a minimum, WIC staff shall provide a DSHS immunization schedule or post a DSHS immunization schedule for

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective July 1, 2012

Policy No. IM:11.0

applicants/participants to view. The annually updated schedule can be accessed at
http://www.dshs.state.tx.us/immunize/Schedule/schedule_child.shtm.

- IV. Local agencies shall identify providers who offer immunizations in their communities. This information shall be made available to applicants/participants.

NE - Nutrition Education

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: March 1, 2014

Policy No. NE:01.0

Standards for Nutrition Education Contacts

Purpose

To ensure nutrition education (NE) is made available to all participants and addresses the nutritional needs of the participants.

Authority

7 CFR Part 246.11,

Policy

WIC participants shall be offered NE according to standards and staff qualifications.

Definitions

Nutrition education means individual or group sessions and the provision of materials designed to improve health status and achieve positive change in dietary and physical activity habits, and that emphasize the relationship between nutrition, physical activity, and health, all in keeping with the personal and cultural preferences of the individual.

Procedures

- I. All adult participants and parent/guardians/caregivers of infants shall be offered two NE contacts per each six-month certification period or offered every three months to women or parent/guardian/caregivers of infants and/or children certified for a period exceeding six months.

- II. All NE contacts shall:
 - A. Be provided by qualified staff (*Policy NE:02.0, TR:03.0*).
 - B. Address participants' questions and concerns.
 - C. Be delivered using current client-centered learning principles.
 - D. Meet participant's language and cultural preferences.
 - E. Include professional assessment by WIC staff to determine issues to be addressed and stress the positive, long-term benefits of nutrition education.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: March 1, 2014

Policy No. NE:01.0

- F. Be offered at no cost to participants.
 - G. Consist of accurate messages and current information.
 - H. Be documented with the correct NE code in the WIN system.
 - I. Offer a variety of NE delivery methods and accept certificates or codes for completion of web based lessons at www.texaswic.org.
 - J. Include evaluation to ensure appropriateness and effectiveness.
(*Policy QA:01.0, NE:02.0*).
- III. Substance abuse information shall be provided to all pregnant, breastfeeding, postpartum women and to parents or caregivers of infants and children.
- IV. Breastfeeding information and support shall be provided to all pregnant and postpartum participants.
- V. Types of Nutrition education contacts include:
- A. Individual counseling shall be provided at initial certification, subsequent certification, mid-certification assessment at the request of the participant, and:
 - 1. Shall include the completion of the *VENA Family Documentation Tool* (Stock No. 13-06-12805)
 - 2. May be conducted in place of group class at benefit issuance. In this instance, it is optional to complete a VENA Documentation Tool.
 - 3. Staff shall:
 - a. complete assessment forms, review previous VENA tool (if applicable) and sign or initial;
 - b. attempt to establish rapport;
 - c. attempt to identify and explore parents' concerns using active listening skills and open ended questions;
 - d. summarize conversation and if appropriate assist participant in setting goal;
 - e. provide appropriate referrals; and
 - f. attempt to conclude on a positive note.
 - B. Group classes shall:
 - 1. Be offered at benefit issuance between certifications to all participants in the form of discussion based groups, poster or

Nutrition Services

Department of State Health Services

Effective: March 1, 2014

Policy No. NE:01.0

- bulletin board group sessions, breastfeeding support group meetings, lessons with activities and or videos, health fairs or other client-centered methods such as garden-based classes, grocery tours etc. Certificates or codes for completion for web-based lessons provided at texaswic.org shall be accepted.
2. Be presented by qualified staff, who have been trained on the subject matter prior to teaching the class (*Policies: NE:02.0; TR:03.0* and LA NE Coordinator/WIC Director's discretion).
 3. Be scheduled as indicated in the current NE plan.
 4. Be a SA or LA developed lesson plan (Policy *NE:04.0*).
 5. Always have a staff member present in the classroom.
 6. Be offered according to participant's category, risk conditions, interests, time considerations, preferred language and cultural needs; participants may choose a preferred class.
 7. Allocate time for participants to ask questions related to the class topic. If the educator is unable to answer the question, then the information shall be obtained and made available to the participant.
- C. Self-paced lessons may serve as a NE contact if:
1. It is SA or LA developed (Policy *NE:04.0*);
 2. The participant completes the questions and a designated staff member reviews the answers with the participant prior to benefit issuance; and
 3. It is not substituted for individual counseling at certification and mid-certification assessment.
- D. *Texaswic.org* lessons shall be accepted as an NE contact by Local Agencies.
- E. Take home lessons shall:
1. Consist of an activity and evaluation; and
 2. Can be provided by the SA or be a video, a book or a lesson developed by the LA and approved by SA or LA registered dietitian.
- F. Breastfeeding support group meetings shall be led by an IBCLC, a trained Peer Counselor or any Certifying Authority who has completed their required BF training (*Policy BF:04.0; TR:03.0*).
1. Local agencies shall submit a breastfeeding support group schedule to their SA liaison and include at least:

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: March 1, 2014

Policy No. NE:01.0

- a. one main topic that will be addressed at each meeting;
 - b. one objective for the named topic(s); and
 - c. one evaluation question for each named topic.
 - G. Alternate forms of nutrition education
 - 1. Participants may receive WIC NE contacts from outside agencies or certain professional persons at the discretion of the LA NE coordinator and based on standards specified in Procedure II, with the approval of the SA NE Section. Examples include but are not limited to: La Leche League, diabetes support groups, and nutrition counseling by a registered dietitian. Nutrition education codes shall be assigned by the SA, at the request of the Local Agency
 - 2. For families of children with special health care needs, see *Policy CR:07.0*.
- VI. Nutrition education may be declined by participants.
 - A. Food benefits shall be issued to all participants, even those who decline nutrition education.
 - B. Participants unable to stay for a NE contact or who decline a NE contact shall be issued food benefits as soon as possible. When a participant declines or refuses NE or is unable to receive NE due to an emergency, the NE code field in Texas WIN should be left blank. The blank field indicates that no NE was provided.
- VII. Each LA is responsible for ensuring that the equipment and materials necessary to conduct NE classes or counseling is available at all clinic sites in accordance with the approved *NE/BF Plan (Policies AC:33.0, AC:34.0, NE:02.0)*.
- VIII. Local Agency NE expenditures shall be in accordance with *Policies AC:33.0 and AC:34.0*.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: March 1, 2014

Policy No. NE: 02.0

**Local Agency Nutrition Education Coordinator Responsibilities and
Nutrition Education/Breastfeeding Plan**

Purpose

To ensure that a qualified, designated staff administers (plans, implements and evaluates) nutrition education. To assure that nutrition education is planned, scheduled and provided to address the nutritional needs of the program participants.

Authority

7 CFR Part 246.11; State Agency

Policy

All staff providing Nutrition Education (NE) shall have appropriate qualifications and complete required training. Each local agency (LA) shall follow an approved Nutrition Education/Breastfeeding Promotion (NE/BF) Plan. The LA Nutrition Education coordinator shall ensure that lessons and materials presented to WIC participants contain accurate, current, culturally appropriate, and professionally recognized nutrition information.

Procedure

Each LA shall designate a NE Coordinator to oversee NE activities. All staff providing NE shall have appropriate qualifications and complete required training (Refer to TR:03.0).

- I. The designated LA NE coordinator shall be a registered dietitian (RD) licensed dietitian (LD), or a certifying authority (CA), preferably a degreed nutritionist with 24 semester hours of food and nutrition (CS: 15.0, CS:16.0).

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: March 1, 2014

Policy No. NE: 02.0

- II. The NE coordinator shall complete all the required trainings (TR:03.0) within specified timeframes. Documentation of the completion shall be kept on file at the LA for review.

- III. The NE coordinator shall attend the Texas WIC Program's Nutrition/Breastfeeding Conference every year. Other conferences or trainings may be accepted in lieu of this conference, with the approval of the state agency (SA).

- IV. The NE coordinator is responsible for planning, implementing and evaluating NE at the LA.
 - A. Planning Nutrition Education
 - 1. The NE/BF Plan shall be submitted to the SA by the designated date. The plan shall be in effect October 1 through September 30.
 - 2. The SA shall have the option to withhold reimbursement if the NE/BF Plan and/or required revisions are not submitted by September 30, or the date agreed upon between the SA and local agency.
 - 3. A new LA shall submit a NE/BF Plan no later than the end of the third month of operation.
 - 4. When the NE/BF plan is approved, the LA shall receive final notification from the SA. The LA shall maintain the approval letter on file with the NE/BF Plan.
 - 5. Changes to the class schedule shall be submitted electronically to SA NE liaison prior to teaching the class.
 - 6. The NE coordinator shall work with the BF coordinator to submit the NE/BF Plan. See policy BF 02.0 for information specific to the breastfeeding portion of the NE/BF Plan.
 - B. Implementing Nutrition Education
 - 1. Nutrition education materials used at the LA shall:
 - a. be accurate, current, and relevant in content.
 - b. be based on sound, established and scientific evidence.
 - c. meet the cultural and language needs of the participants.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: March 1, 2014

Policy No. NE: 02.0

- d. Be provided by SA or approved by SA or LA registered dietitian.
 - 2. All clinic sites must have current NE resources such as pamphlets, videos, lesson outlines, and other materials required for effective delivery of nutrition education.
 - 3. The LA shall maintain a current inventory of NE and BF lessons and materials provided by the state agency. Deleted and out-of-date materials shall not be used for participant education.
- C. Evaluating Nutrition Education
- 1. Quality management activities related to NE shall be conducted annually (at minimum) by the LA and:
 - a. Shall include observation of group and individual nutrition education sessions to ensure accurate and appropriate delivery of information in a client-centered way.
 - b. Results should be used to determine and plan staff training.
 - 2. Participant feedback related to NE should be used to plan future education activities.

Nutrition Services Department of State Health Services

Effective August 1, 2003

Policy No. NE:03.0

The Nutrition Education/Breastfeeding Plan

Purpose

To assure that nutrition education is planned, scheduled and provided to address the nutritional needs of program participants.

Authority

7 CFR Part 246.11; State Policy

Policy

Each local agency (LA) shall follow an approved Nutrition Education/Breastfeeding Promotion (NE/BF) Plan.

Procedures

- I. Each LA shall submit the NE/BF Plan annually according to the instructions from the state agency (SA).
 - A. The plan shall be submitted to the SA by the designated date. The plan shall be in effect October 1 through September 30.
 - B. A complete copy of the plan shall be kept on file at the LA, including portions of the plan not required to be sent to the SA.
 - C. A new LA shall submit an NE/BF Plan no later than the end of the third month of operation.
 - D. See **Policy BF:02.0** for information specific to the BF portion of the NE/BF Plan.

- II. Each LA NE/BF Plan shall be reviewed by SA staff.
 - A. Written or oral requests for revisions and additions may be made by SA NE staff during the annual NE/BF Plan review. The LA shall respond to the requests by the date specified.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2003

Policy No. NE:03.0

- B. When the plan is approved, the LA shall receive final written notification from the SA. The LA shall maintain the approval letter on file with the NE/BF Plan.

- III. The SA shall have the option to withhold reimbursement if the NE/BF Plan and/or required revisions are not submitted by September 30, or the date agreed upon between the SA and LA.

- IV. LAs shall submit to the SA verbal or written amendments to approved NE/BF Plans.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: March 1, 2014

Policy No. NE: 04.0

Nutrition Education Lessons and Materials

Purpose

To ensure that lessons and materials presented to WIC participants contain accurate, current, professionally recognized nutrition information.

Authority

State Policy

Policy

The local agency (LA) may use state agency (SA) developed lessons and materials and/or LA developed lessons to provide nutrition education (NE) to participants. All materials shall contain accurate information that is appropriate for the category and risk condition(s) of the participant.

Procedures

- I. Local Agencies shall maintain a current inventory of NE and breastfeeding (BF) lessons and materials as listed in their current class schedule. Deleted and out-of-date materials shall not be used for participant education.
- II. Every lesson used by the LAs shall have a code assigned by the SA. Local Agencies shall contact their SA liaison to request code for LA-developed lessons.
- III. Local Agencies can develop and use their own lessons and materials for nutrition education.
 - A. Local Agency-developed lessons and materials that are created by Registered Dietitians (RDs) or Licensed Dietitians (LD) are not required to be submitted to the SA for approval. However, LA-developed lessons shall be submitted to the SA to obtain a NE code.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: March 1, 2014

Policy No. NE: 04.0

- B. LA-developed lessons and materials created by non-RDs or LDs must be submitted to the SA for review, approval, and coding prior to using in the clinic. Lessons that are submitted to the SA for review must:
 - 1. be written in the *CCNE Lesson Template, Self-Paced and Bulletin Board Worksheet* or *Nutrition/Health/Breastfeeding Template*; and
 - 2. include corresponding checklists and any LA developed materials/handouts.
- C. LA-developed materials must include the USDA nondiscrimination statement (refer to policy CR:02.0).
- D. Local Agencies are responsible for maintaining LA-developed lessons and materials to ensure information provided to participants remains current and accurate.
- E. If the LA substantially changes a SA lesson, the lesson shall be viewed as a new lesson developed by the LA and the lesson shall be submitted to the SA for review, comment and coding as directed in this policy. Adapting discussion questions to better meet participants' needs during a client-centered lesson is not considered a substantial change, assuming the staff facilitating the lesson is appropriately trained (TR:03.0). Substantial modifications include:
 - 1. changes in the lesson's objectives;
 - 2. new methods of presentation (for example, replacing the video with a discussion or game); and
 - 3. replacing original materials (pamphlets, audiovisuals, or posters) with materials which are not state approved/developed or which cover a different topic than the lesson.
- F. Other NE materials (handouts, fliers, newsletters, etc.) developed by LAs RDs or LDs do not need to be submitted to the SA for approval. Nutrition materials developed by LAs without RDs or LDs shall be submitted to the SA for approval before using for WIC NE. Follow policy CR:02.0 to determine if the USDA nondiscrimination statement should be included in LA developed NE materials.
- G. Materials obtained from non-WIC agencies/organizations for educational use in WIC clinics must be reviewed by the LA's NE Coordinator to ensure:
 - 1. content, literacy level, and language of the materials are appropriate;

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: March 1, 2014

Policy No. NE: 04.0

2. applicable copyright laws are followed; and
3. material is obtained from a recognized professional organization such as:
 - a. American Academy of Pediatrics;
 - b. American Dental Association;
 - c. American Heart Association; or
 - d. March of Dimes

For all other inquiries on non-WIC materials, LAs shall contact their SA nutrition education liaison.

OR - Outreach

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2005

Policy No. OR:01.0

Local Agency Outreach

Purpose

To ensure that potentially eligible persons in each local agency's (LA's) service area are aware of the WIC Program and know where to seek services.

Authority

7 CFR Part 246.4 (a)(7), 246.4 (a)(20)

Policy

Each LA shall develop and implement a plan for outreach, which emphasizes the enrollment of women in their first trimester and migrants.

Definitions

Outreach means informing potentially eligible persons about the benefits and availability of the WIC Program.

Grassroots organizations are any organizations at the local level which interact with potential or actual participants, particularly minorities and women, such as a community action program, civic organization, migrant group, church, neighborhood council, local chapter of the National Association for the Advancement of Colored People (NAACP), or other similar group.

Procedures

- I. Each LA shall develop and implement an outreach plan.
 - A. The outreach plan shall be updated on an annual basis.
 - B. A copy of the plan shall be maintained at the LA .

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2005

Policy No. OR:01.0

-
- C. Documentation of all outreach activities including dates shall be maintained at the LA .

 - II. At a minimum, the outreach plan shall include: distribution of information twice a year about WIC, to organizations, including grassroots organizations, and agencies that serve or work with potentially eligible persons. Although not mandatory, it is suggested that the outreach plan also include announcements, articles and/or appearances about WIC in local radio, television, and/or newspapers on an annual basis.

 - III. Outreach conducted by the state agency (SA) shall not be considered a part of the LA's outreach activities.

 - IV. At a minimum, all outreach information shall include:
 - A. location of the local WIC Program and a phone number for more information; and
 - B. a current statement of nondiscrimination (see [Policy CR:02.0](#)).

 - V. Printed outreach materials and oral presentations shall also include:
 - A. a description of WIC benefits; and
 - B. criteria for participation, i.e., income, residence, categorical, and nutritional risk.

 - VI. When LAs are operating at maximum caseload, outreach shall be targeted to persons who are at high risk. LAs operating at maximum caseload are not exempt from outreach.

 - VII. Outreach shall be provided in an appropriate language in areas where a substantial number of persons are non-English speaking.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2005

Policy No. OR:01.0

Guidelines

Organizations and agencies that deal with potentially eligible persons include, but are not limited to:

- I. health and medical organizations;
- II. hospitals, community health centers, physicians, and pharmacies;
- III. Texas Department of Human Services for Food Stamps, Medicaid, and TANF;
- IV. private and public social service agencies;
- V. farm worker organizations;
- VI. military bases;
- VII. Native American tribal organizations;
- VIII. public and private childcare centers including Headstart;
- IX. public housing authorities;
- X. churches and other religious organizations;
- XI. schools; and
- XII. grassroots organizations.

QA - Quality Assurance

Local Agency Self Audit

Purpose

To ensure the delivery of high quality services that meet the needs of participants and that are in compliance with state policies and federal regulations.

Authority

7 CFR Part 246.19

Policy

As part of a written quality management (QM) plan, each local agency (LA) shall conduct a self-audit that encompasses an evaluation of its certification process, nutrition education, financial management, administrative policies and procedures, facility, and food delivery systems to ensure that WIC services are provided in accordance with State Agency (SA) WIC policies and federal regulations.

Procedures

- I. The written quality management plan shall be developed and implemented in coordination with the parent agency for the internal review and evaluation of services provided. Deviation from the quality management plan is acceptable if justified and documented.
- II. The quality management plan, at a minimum, shall identify:
 - A. A multi-disciplinary quality management committee to meet quarterly, at a minimum.
 - B. Designated staff responsible for implementation of the quality management plan.

Nutrition Services

Department of State Health Services

Effective August 1, 2016

Policy No. QA:01.0

- C. Client satisfaction surveys to be conducted annually, at a minimum, at all sites in the appropriate languages and the actions to be taken based on the results of the surveys.
 - D. Food delivery audits to be conducted every six months at all sites using state agency (SA) worksheets FDA-1 and FDA-2.
 - E. Financial management audits to be conducted annually using SA worksheet FA-1.
 - F. Clinical self-audits (certification process, nutrition education, administrative policies and procedures, and records) to be conducted twice each fiscal year (As stated in the DSHS Standards for Public Health Clinic Services) using the SA Quality Management Core Tool, WIC Tool and all record review worksheets.
 - 1. The quality management tools are available on the web at <http://www.dshs.state.tx.us/qmb/>.
 - 2. If LAs use different forms/tools for the clinical self-audit, then the forms/tools shall include all of the review criteria, which pertain to WIC services, listed on the quality management tools.
- III. Traveling team staff is only required to be observed and have records reviewed at one of the travel team sites each fiscal year. The facility audits need to be done at ALL clinic sites each fiscal year.
- IV. The quality management plan shall identify the number of observations that shall be conducted and the number of records that shall be reviewed.
- V. Once a self-audit has been conducted, a corrective action plan shall be developed to correct the findings/deficiencies. The corrective action plan may include staff training and/or technical assistance from the SA.

VI. The corrective action plan shall be appropriate for the findings. For example: (1) If only one staff member is having problems plotting, it is appropriate to make a corrective action plan to work individually with that one staff member; (2) If several Certifying Authorities (CAs) are having difficulty with counseling, it is appropriate to plan a staff training on counseling.

VII. Self-audits, the corrective action plan and implementation of the corrective action plan shall be clearly documented and kept on file at the LA according to the retention period per Policy GA:03.0 following the date of the self-audits. All documentation shall be made available to an outside auditor and quality assurance monitoring review team.

Guidelines

- I. Self-audits are an opportunity to develop or improve systems for the delivery of WIC services. Training provides one way to disseminate information to staff; however, additional ongoing methods of ensuring improved service delivery should be considered.
- II. The corrective action plan should include staff training and technical assistance, timelines for correction of problems, follow up activities, and coordination with the host agency on systemic issues.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. QA:03.0

Quality Assurance Monitoring of Local Agencies

Purpose

To ensure that local agencies (LAs) comprehend and comply with federal, state and local regulations, policies, and procedures.

Authority

7 CFR Part 246.11, 246.19; Quality Assurance Policies

Policy

Each LA's clinical operations, fiscal management and food delivery systems shall be monitored for compliance with state and federal regulations, rules and policies at least once every two years.

Procedures

- I. Upon notification by the state agency (SA) of a quality assurance monitoring visit, the LA shall make available requested documentation including but not limited to: participant records, clinic hours of operation and schedule of activities, employee timesheets, formula logs, nutrition education materials, equipment inventory, etc.
- II. LA WIC Director shall encourage the host agency's executive director and other appropriate personnel to attend the entrance and exit conferences.
- III. Upon receipt of the quality assurance site visit report, the LA shall submit a corrective action plan as required within the specified time frame. SA staff shall review the plan and may request additional information or explanation from the LA.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. QA:03.0

- IV. The LA shall maintain documentation of all corrective actions taken, technical assistance received, and training attended in accordance with its SA-approved corrective action plan.

TR - Training

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. TR:01.0

In-Service Orientation to New Local Agencies

Purpose

To effectively provide the local agencies (LAs) with the most current information on the operation of WIC at the local level as required by federal and state regulations and/or guidelines.

Authority

State Policy

Policy

Prior to the start-up of any new LA, the LA staff shall attend an orientation by state agency (SA) personnel. The orientation shall cover topics on clinic operations, financial management, nutrition education, food delivery requirements, and automation.

Definitions

New LA is defined as an agency with a new contract and/or a new LA number.

Procedures

- I. No less than one week prior to the start-up date of any LA, LA staff shall attend a WIC orientation conducted by a core group of SA staff representing the certification process, clinical services, nutrition education, financial management, food delivery, and automation.
- II. New LA staff that shall attend an orientation include the following:
 - A. a new LA with staff that has never provided WIC services; and

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. TR:01.0

- B. a new LA with staff with some WIC experience that requests an orientation.

- III. A new LA that has staff with some WIC experience but doesn't request an orientation shall be offered one and encouraged to attend the New Staff Certification Training, as deemed appropriate.

- IV. The orientation shall be scheduled jointly by the SA and the LA.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective June 1, 2002

Policy No. TR:02.0

Orientation/Training of Local Agency Directors

Purpose

To provide a comprehensive working knowledge of WIC rules, regulations, and guidelines to local agency (LA) Directors.

Authority

State Policy

Policy

All new LA directors shall attend a comprehensive WIC orientation and training provided by the state agency (SA).

Procedures

New LA directors shall attend the SA WIC Directors Orientation within six months of employment.

Guidelines

New WIC directors may choose to visit a LA recommended by the SA to assist in their training.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. TR:03.0

Required Local Agency Training/Summary

Purpose

To ensure systematic training that addresses local agency (LA) staff performance issues, provide updates and broadens staff's knowledge of various topics related to public health, nutrition, and WIC, and encourages continuing education and the optimum utilization of all resources in order to serve clients in the most effective, efficient and courteous manner.

Authority

State Policy

Policy

The LA shall designate a training coordinator and all LAs shall provide and document specific trainings for appropriate staff within required timeframes.

Procedures

- I. The LA shall submit the training coordinator's name to the state agency (SA) at the time of selection. No further notification is necessary unless the coordinator changes.
- II. The training coordinator shall ensure that:
 - A. appropriate and timely staff training is conducted for LA staff; and
 - B. staff training and education be documented and maintained for review during monitoring visits.
- III. The required LA trainings shall:
 - A. Ensure that all staff involved in program operations has abilities and skills required to completely perform their assigned duties.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. TR:03.0

- B. Include topics which address performance problems identified in Quality Assurance (QA) observations and or record reviews.
- IV. Method of storage and format of the documentation for required staff trainings are at the discretion of the LA director. Training documentation shall include:
 - A. name of employee;
 - B. job title;
 - C. training topic; and
 - D. date training was completed.
- V. Required trainings must be completed within specific timeframes, as listed in the Training Requirement chart. All staff responsible for the procedure and/ or technique listed in the Training Requirement chart shall be trained on the procedure before performing it independently. Link to Training Requirement charts: <http://www.dshs.state.tx.us/wichd/tng/tng1.shtm>
 - A. CA, WCS, clerical staff, Peer Counselors, and Peer Dads shall receive training monthly.
 - B. New staff, including contract staff, must complete all required trainings in the following sections listed in the Training Requirement chart prior to performing duties independently:
 - 1. Core Skills;
 - 2. Clinic Services;
 - 3. Nutrition Knowledge, Education and Counseling; and
 - 4. Breastfeeding.
 - C. All staff are required to complete annual trainings such as:
 - 1. civil rights: staff such as administrators, janitors, etc. who do not come in contact with WIC applicants/participants are not required to receive civil rights and customer service training. All other existing staff shall receive civil rights training (see [Policy CR: 08.0](#)).
 - 2. customer service; and

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2015

Policy No. TR:03.0

3. security awareness training: LA or parent agency developed training must include:
 - a. ongoing security of the system, staff, and data; and
 - b. disaster recovery and program business continuity.
 4. SA developed civil rights, customer service, and security awareness self-paced training modules are also available.
- D. Upon completion of the Basic Nutrition module the remaining modules may be completed in any order within the required timeframes as listed in the Training Requirement chart.
- E. SA developed training modules and/or locally developed training programs may be used to train staff.
- F. Self-paced training and hands-on skills training may be completed simultaneously or at the discretion of the LA Director.

WV - WIC Vendor Operations

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

WIC Vendor Agreement/Policy Violations

Purpose

To describe State Agency (SA) procedures for monitoring compliance of vendors with the WIC vendor agreement and WIC program policies. To inform WIC vendors of sanctions, that will be imposed by the SA for non-compliance.

Authority

7 CFR Section 246.12; WIC Vendor Agreement

Policy

Vendors who fail to comply, either intentionally or unintentionally, with the Vendor Agreement and/or policies of the WIC Program shall be sanctioned. The SA and/or representatives of the SA shall document the circumstances of a vendor's noncompliance. Sanctions shall be imposed consistently among vendors and shall be fully documented.

Procedure

- I. The SA and/or representatives of the SA shall routinely monitor the operations of authorized WIC vendors during the term of the WIC Vendor Agreement.
 - A. Monitoring techniques employed shall include but are not limited to:
 1. Routine on-site store reviews by the SA and/or SA representative
 2. Covert in-store compliance buys by the SA and/or SA representative
 3. Invoice and EBT claim audits
 4. Periodic reviews of vendor redemption reports.
 5. On-site inspections by a city, county, district or health authority;

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

- B. Criteria used by the SA and/or SA representative to initiate an invoice audit and/or compliance buy shall include but are not limited to:
 - 1. Price differences identified as a result of the on-site store review or compliance buy
 - 2. Apparent discrepancy in vendor's in-store stock compared to the volume of WIC redemptions
 - 3. Indicators that the vendor is "high risk".

 - C. "High risk" vendors
High risk vendors are those that the SA has determined pose the highest risk of non-compliance with the WIC Vendor Agreement and/or policies.
- II. Monitoring by routine on-site store reviews may be conducted by the SA and/or SA representative.
- A. During the on-site store review, the SA and/or SA representative shall identify him/herself to store personnel and proceed to complete the on-site review. The store assessment may include, but is not limited to, the following procedures:
 - 1. Collect shelf prices and verify that prices are prominently displayed for authorized WIC products.
 - 2. Examine the adequacy of stock
 - 3. Examine expiration dates on WIC food items.
 - 4. Examine WIC signage at the store.
 - 5. Examine for compliance with the requirements for declared traditionally Least Expensive Brands (LEB).
 - 6. Examine adherence to restriction on vendor incentive items in accordance with WIC Policy WV:09.0.
 - 7. Test for other requirements as stated in policy and the WIC Vendor Agreement.

 - B. The SA and/or SA representative shall compare the prices obtained during the review to at least one recently submitted claim. All identified overcharges from the prices obtained during the review shall

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

be recovered and a written warning on more serious sanctions, if appropriate, shall be transmitted to the vendor.

- C. The vendor will be notified by letter of the results within 60 days of the date of the on-site review.

III. Monitoring by On-Site Inspections by a city, county, district, or health authority

- A. The vendor may receive an on-site inspection by a public health authority for compliance with the Health and Safety Code. Violations may result in a disqualification from the WIC Program in addition to any other penalties as a result of non-compliance with the Health and Safety Code.
- B. If it is determined by inspection or other means, such as a compliance buy or on-site review, that an authorized WIC vendor purchased infant formula and/or other WIC food items from a wholesale distributor not licensed in Texas in accordance with the Texas Health and Safety Code Chapter 431 and Texas Administrative Code Chapter 229, or from a food manufacturer not registered with the U.S. Food and Drug Administration, or from a retail store not holding a permit in accordance with the Texas Health and Safety Code Chapter 437, or from an entity not on the list provided by WIC of approved formula sources:
 - 1. A warning shall not be issued.
 - 2. One incident shall result in the disqualification of the vendor for one year.
 - 3. The SA shall not accept a CMP in lieu of disqualification.

IV. Monitoring by Invoice Audit

- A. The SA and/or SA Representative may request up to 12 months purchase invoices from a vendor for analysis to determine that all claims submitted by the vendor are supported by invoices.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

1. The vendor shall be given 60 days from receipt of a written request to submit purchase invoices to the SA and/or SA representative, as time is of the essence.
 2. The 60-day period to submit purchase invoices is considered an opportunity to justify or correct a vendor overcharge or other error, as permitted by 7 CFR Section 246.12(k)(3).
 3. The vendor's failure to supply purchase invoices to the SA within the 60 day period shall result in disqualification from participation in the WIC Program. The disqualification date for failure to submit purchase invoices within the 60-day period will be included in the written notification
 4. Additional purchase invoices/records shall not be accepted by the SA and/or the SA representative after expiration of the 60-day period unless directed to do so by the WIC Program Director.
- B. Required components of an acceptable purchase invoice:
1. The purchase invoice shall reflect the name and address of the wholesaler, food manufacturer or retail food store, a customer number and/or the name and address of the vendor (or any other identifier that specifically identifies the vendor to whom the items were sold), date of the purchase, list of the items purchased (that adequately describes the purchased items, such as a stock number or UPC), size, quantity, unit price, and dollar extension for the quantity purchased.
 2. Retail cash tickets shall include the name and address of the store or a code number by which the store location can be identified, the date of purchase, description of the exact items purchased, the unit price of the items purchased and the total amount purchased.
 - a. Cash tickets, which do not completely describe the actual item, shall have a computer code, which can be verified by contacting the store at which the merchandise was purchased.
 - b. Cash tickets which do not specifically identify the product purchased may be verified by the SA and/or SA representative through communication with the vendor's corporate office.
 3. Affidavits, Statements of Fact, and oral statements shall not be accepted from a vendor under audit as evidence of inventory. Only

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

purchase invoices or retail cash tickets as described in item B.1 and B.2 of this section shall be accepted from a vendor under audit as evidence of inventory.

C. Invoice Audit Sanctions

1. If acceptable purchase invoices do not support amounts paid to the vendor for WIC claims submitted to the SA, the SA shall recover the monies overpaid to the vendor.
2. Since the review of multiple invoices is a SA audit of the vendor's adequate maintenance of sufficient inventory of WIC-eligible food items to support WIC claims over a wide span of time ranging from several months up to 12 months, unsubstantiated WIC sales paid to the vendor in more than one month for a specific food item category/subcategory by UPC in a quantity that exceeds the manufacturer's standard case quantity of that food item shall constitute a pattern of violations and shall result in disqualification of the vendor for three years, unless the vendor provides acceptable purchase invoices and/or cash receipts to the auditor during the audit period that clearly demonstrates, in the auditor's opinion, that no pattern exists for any item for which there is an unsubstantiated sale. In making the determination a quantity exceeds the manufacturer's standard case quantity for a food item, the SA and/or SA Representative shall utilize the WIC Listing of Manufacturer's Standard Case Quantity for Food Items.
 - a. The SA shall not accept a Civil Money Penalty (CMP) in lieu of disqualification unless it determines inadequate participant access to other authorized vendors in the area.
 - b. The vendor shall be notified in writing of the invoice audit disallowance and afforded 20 days from receipt of the written notification to submit additional purchase invoices. The 20-day period to submit additional purchase invoices is considered an opportunity to justify or correct a vendor overcharge or other error, as permitted by 7 CFR Section 246.12(k)(3) of WIC Program regulations. In addition, the written notification will include the effective date of the three-year disqualification if

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

- acceptable purchase invoices do not support amounts paid to the vendor for WIC claims submitted to the SA.
3. If unsubstantiated sales of one or more WIC items are identified but a pattern of more than one month of claiming reimbursement for the sale of an amount of a specific supplemental food item which exceeds the vendor's documented inventory of that supplemental food item is not identified in an amount greater than the manufacturer's standard case quantity, the vendor shall receive a written warning. In making the determination a quantity exceeds the manufacturer's standard case quantity for a food item, the SA and/or SA Representative shall utilize the WIC Listing of Manufacturer's Standard Case Quantity for Food Items.
 - a. The vendor shall be notified in writing of the invoice audit disallowance and afforded 20 days from receipt of the written notification to submit additional purchase invoices. The 20-day period to submit additional purchase invoices is considered an opportunity to justify or correct a vendor overcharge or other error, as permitted by 7 CFR Section 246.12(k)(3) of WIC Program regulations.
 - b. In addition, the written warning shall notify the vendor that if a subsequent invoice audit within three years of the date of the written notification identifies any additional unsubstantiated WIC sales paid to the vendor for a specific food item for which the vendor previously claimed reimbursement but could not document in the vendor's inventory, the subsequently identified additional unsubstantiated WIC sales shall constitute a pattern of claiming reimbursement for the sale of an amount of a specific supplemental food item which exceeds the vendor's documented inventory of that supplemental food item, and the vendor will be disqualified for three years.
 4. In accordance with Federal Regulations 7 CFR Section 246.12(h)(3) and the WIC Vendor Agreement, it is the vendor's responsibility to maintain inventory records used for Federal and State tax reporting purposes and other records the SA may require for a minimum of three years.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

5. The vendor claim determination by the SA and/or SA representative regarding the amount of the unsubstantiated WIC sales is not subject to administrative review.

V. Monitoring by Compliance Buys

- A. Definition of a compliance buy: A covert in-store investigation by one or more SA and/or SA Representatives posing as WIC participants or the parent/guardian/proxy of WIC participants using WIC EBT food benefits to test the vendor's compliance with the Vendor Agreement, program policies, and/or rules. The SA and/or SA Representative does not reveal to store personnel that he/she is a SA and/or SA representative during the visit.
 1. If no sanctionable violations are detected on the first monitoring activity, a second compliance monitoring activity is conducted. There is no minimum time interval requirement between the first non-violative compliance monitoring activity and the second compliance monitoring activity. If no sanctionable violations are detected on the second compliance monitoring activity, the vendor is notified in writing within 20 days of the second compliance monitoring activity and the investigation is closed.
 2. If one or more sanctionable violations are detected during a compliance buy, a notice of an in-store violation will be sent to the vendor in writing within 10 business days, with the exception of notice of violations pertaining to trafficking in food instruments, selling/buying firearms, ammunition, explosives, controlled substances, alcohol, alcoholic beverages or tobacco products.
 3. If necessary, follow-up compliance monitoring activities will be conducted until two passes (compliance buys and/or on-site reviews) are conducted with no sanctionable violations or alternately, until evidence of WIC Program noncompliance is established. Both the initial and follow-up compliance monitoring activities will be considered in determining whether sanctions are applicable. The initial and follow-up compliance monitoring activities and subsequent follow-up period constitute a single investigation.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

4. All compliance monitoring activity relevant to an investigation must be conducted within a 24 consecutive month period. Compliance monitoring activities older than 24 months will be removed from consideration and only those remaining within the open investigation can be used for the determination of a pattern and subsequent levying of a sanction.
- B. Definition of a positive pass: A compliance buy pass and/or on-site review in which evidence of a sanctionable violation of the Vendor Agreement, program policies, and/or rules is obtained. Sanctionable violations identified during compliance buys and on-site reviews may be aggregated to constitute a pattern.
- C. A compliance buy may test for, but not be limited to, areas of potential non-compliance as follows:
1. A SA and/or SA representative may attempt to transact WIC EBT food benefits for unauthorized package/product sizes, unauthorized food items, unauthorized brands of food items, non-food items, excess quantity of foods, credit (including rain checks which are not allowable), and/or cash.
 2. A SA and/or SA representative may also test for overcharging, being charged for foods not received, and/or compliance with the vendor's declared traditionally LEB of products and the related requirement that prices for WIC-approved foods be prominently displayed either on the food item, on the shelf where the food item is displayed, or otherwise displayed where WIC participants can easily see them.
 3. A SA and/or SA representative may test the WIC EBT in-lane system's ability to accurately sell authorized fruits and vegetables in a WIC EBT transaction.
 4. A SA and/or SA representative may also test for other violations of policies and the Vendor Agreement.
- D. For trafficking in WIC EBT food instruments or selling firearms, ammunition, explosives, or controlled substances (as defined in section 102 of the Controlled Substances Act (21 U.S.C. 802)) in

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

exchange for WIC EBT transaction payments. A vendor is not entitled to receive any compensation for revenues lost as a result of such violation.

1. For conviction of a vendor for a violation of trafficking or illegal sales, the SA shall permanently disqualify the vendor. The SA shall not accept a CMP, for any reason, in lieu of permanent disqualification for conviction of a vendor for trafficking in WIC EBT food instruments or selling firearms, ammunition, explosives, or controlled substances.
2. For an administrative finding, the SA shall disqualify a vendor for six years for:
 - a. One incident of buying or selling WIC EBT food benefits and/or transactions for cash (trafficking); or
 - b. One incident of selling firearms, ammunition, explosives, or controlled substances as defined in 21 U.S.C. 802, in exchange for and/or utilizing WIC EBT food benefits.
3. For redemption of WIC EBT food benefits and/or transactions for cash (trafficking), firearms, ammunition, explosives, and/or controlled substances:
 - a. The unauthorized item(s) shall not be paid.
 - b. A warning shall not be issued.
 - c. The SA shall not accept a CMP in lieu of disqualification unless:
 - i. It determines inadequate participant access to other authorized vendors in the area will result from such a disqualification; and
 - ii. The SA determines that the vendor had an effective policy and program in effect to prevent trafficking; and
 - iii. The ownership was not aware of, did not approve of, and was not involved in the conduct of the violation.
 - d. If the vendor receives a second sanction for this violation, the second sanction shall be doubled and no CMP would be considered in lieu of a disqualification.
 - e. Sanctions for subsequent violations after the second sanction shall also be doubled with no possibility of a CMP.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

- E. For redemption of WIC EBT food benefits for alcohol or alcoholic beverages or tobacco products:
 - 1. The unauthorized item(s) shall not be paid.
 - 2. A warning shall not be issued.
 - 3. One incident shall result in the disqualification of the vendor for three years.
 - 4. The SA shall not accept a CMP in lieu of disqualification unless it determines inadequate participant access.
 - 5. If the vendor receives a second sanction for this violation, the second sanction shall be doubled.
 - 6. Sanctions for subsequent violations after the second sanction shall also be doubled.

- F. For redemption of WIC EBT food benefits that indicate charging the SA more than the customary selling price charged other customers, the overcharges shall not be paid.
 - 1. One positive compliance monitoring activity will result in a single written warning to the vendor.
 - 2. Follow-up compliance monitoring activities may be conducted after the warning has been received by the vendor.
 - 3. Three or more positive passes shall constitute a pattern.
 - 4. A pattern of violations shall result in disqualification for three years.
 - 5. The SA shall not accept a CMP in lieu of disqualification unless it determines inadequate participant access.
 - 6. If there is a difference between the posted shelf price for an item and the price scanned by the store's integrated cash register system, then the scanned price will be deemed the "customary selling price." If a store operates a WIC EBT stand beside system, the store's integrated legacy cash register system scanned price will be deemed the "customary selling price." If a store does not have an integrated cash register system, the posted shelf price for an item is the "customary selling price."

- G. For transactions which indicate charging for foods not received by the WIC EBT recipient:
 - 1. The charge for a food item not received shall not be paid.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

2. One positive compliance monitoring activity will result in a single written warning to the vendor.
 3. Follow-up compliance monitoring activities may be conducted after the warning has been received by the vendor.
 4. Three or more positive passes shall constitute a pattern.
 5. A pattern of violations shall result in disqualification for three years.
 6. The SA shall not accept a CMP in lieu of disqualification unless it determines inadequate participant access.
- H. For acceptance of the WIC EBT card at an unauthorized vendor outlet and submitting the transaction to the SA for payment through an alternate authorized vendor outlet:
1. The transaction shall not be paid.
 2. One incident shall result in a disqualification of the authorized vendor outlet for three years.
 3. The unauthorized vendor outlet shall not be eligible to apply for WIC authorization for:
 - a. three years from the date of the unauthorized vendor outlet's receipt of SA notification; or
 - b. if the unauthorized vendor outlet is currently disqualified from the Program for a period in excess of three years, the longer period shall apply.
 4. The SA shall not accept a CMP from the authorized vendor outlet in lieu of disqualification unless it determines inadequate participant access to other authorized vendors in the area will result from such a disqualification.
 5. If the authorized vendor outlet receives a second sanction for this violation, the second sanction will be doubled.
 6. Sanctions for subsequent violations after the second sanction shall also be doubled.
- I. For redemption of WIC EBT food benefits for credit, issuance of rain checks, and/or providing non-food items other than alcohol or alcoholic beverages, cash, tobacco products, firearms, ammunition, explosives, and/or controlled substances as defined in 21 U.S.C. 802:
1. The unauthorized item(s) shall not be paid.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

2. One positive compliance monitoring activity will result in a single written warning to the vendor.
 3. Follow-up compliance monitoring activities may be conducted after the warning has been received by the vendor.
 4. Three or more positive passes shall constitute a pattern.
 5. A pattern of violations shall result in disqualification for three years.
 6. The SA shall not accept a CMP in lieu of disqualification unless it determines inadequate participant access.
 7. If the vendor receives a second sanction for this violation, the second sanction will be doubled.
 8. Sanctions for subsequent violations after the second sanction shall also be doubled.
- J. For violating WIC Policy WV:09.0, restriction on vendor incentive items, in any way:
1. One incident shall result in a written warning.
 2. A second incident shall result in disqualification of the vendor for one year.
 3. The state will not accept a CMP in lieu of disqualification.
 4. The state reserves the right to detect violations through any compliance monitoring technique.
- K. For acceptance of WIC EBT food benefits at an authorized vendor outlet and submitting the transactions to the SA for payment through an alternate authorized outlet, a written warning shall be issued to both vendor outlets.
1. The transaction shall not be paid.
 2. One incident shall result in a single written warning to the vendor that accepted the WIC EBT food benefits and the vendor that submitted the transaction for payment.
 3. If a vendor participates in a second incident, the store outlet shall be disqualified for three months.
 4. The SA will not accept a CMP in lieu of disqualification unless it determines inadequate participant access.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

For the following Procedures V.L-V, the vendor will receive two warnings, one after each compliance monitoring activity in which a sanctionable violation occurs that does not require immediate disqualification.

- L. For redemption of WIC EBT food benefits for infant formula not authorized on the EBT card:
 - 1. The transaction(s) shall not be paid.
 - 2. Three or more positive passes shall constitute a pattern.
 - 3. A pattern of violations shall result in disqualification for one year.
 - 4. The SA shall not accept a CMP in lieu of disqualification unless it determines inadequate participant access.

- M. For redemption of WIC EBT food benefits for unauthorized food items or package sizes of food other than formula and/or charging for quantities of foods provided in excess of those authorized on the WIC EBT card:
 - 1. The unauthorized item(s) shall not be paid.
 - 2. Three or more positive passes shall constitute a pattern.
 - 3. A pattern of violations shall result in disqualification for one year.
 - 4. The SA shall not accept a CMP in lieu of disqualification unless it determines inadequate participant access.

- N. For store personnel entering the WIC EBT recipient's PIN and/or accepting the WIC EBT purchase transaction in lieu of the WIC EBT recipient:
 - 1. Three or more positive passes shall constitute a pattern.
 - 2. A pattern of violations shall result in disqualification for one year.
 - 3. The SA will not accept a CMP in lieu of disqualification.

- O. For using WIC allowable food scan codes from WIC food items, UPC codebooks, and/or UPC barcode/PLU reference sheets to provide an unauthorized food item and/or to provide an authorized WIC food item with a different UPC/PLU:
 - 1. The unauthorized item will not be paid. The price difference between the amount charged to the SA and the WIC authorized item provided will not be paid.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

2. Three or more positive passes shall constitute a pattern.
 3. A pattern of violations shall result in disqualification for one year.
 4. The SA will not accept a CMP in lieu of disqualification.
- P. For failure to prominently display the shelf prices of all WIC authorized foods within the store's commercial area and/or in the drive-thru service area:
1. Three or more positive passes shall constitute a pattern.
 2. A pattern of violations shall result in disqualification for one month.
 3. The SA will accept a CMP in lieu of disqualification.
- Q. For redemption of WIC EBT food benefits for brands that are not the vendor's declared least expensive brand when the declared products are in stock:
1. The price difference between the non-declared item sold and the declared item in stock shall not be paid.
 2. Three or more positive passes shall constitute a pattern.
 3. A pattern of violations shall result in disqualification for one month.
 4. The SA will accept a CMP in lieu of disqualification.
- R. For refusing to sell an authorized item in an authorized size when the price falls within the "not to exceed price".
1. Three or more positive passes shall constitute a pattern.
 2. A pattern of violations shall result in disqualification for one month.
 3. The SA will accept a CMP in lieu of disqualification.
- S. For failing to offer WIC customers the same courtesies and discounts offered to other customers such as manufacturers' cents off coupons, buy one get one free, buy one get one at a reduced price, free ounces added by manufacturer, store loyalty cards, volume discounts, incentive items, or trading stamps:
1. Three or more positive passes shall constitute a pattern.
 2. A pattern of violations shall result in disqualification for one month.
 3. The SA will accept a CMP in lieu of disqualification.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

Manufacturers' Coupons – The price of WIC-approved food items bought with a cents-off coupon must be reduced by the same amount for the WIC participant as it would for any other customer. The savings from the coupon would reduce the amount being charged to the WIC Program. If a cents-off coupon offers free additional non-WIC items with the purchase of a specific WIC food, the participant may take advantage of this promotion at no additional cost to the Program. The coupon amount will be applied to the transaction total.

Buy One Get One Free – In these promotions, the vendor sells one WIC approved food item and provides a second identical item or a different WIC approved item at no extra cost. If the participant has one or more units of the advertised item on the EBT card, only the value of the purchased item will be deducted from the card and the participant will receive the second item free. Therefore, if the second item is a WIC approved item, the value and item will not be deducted from the card. The participant will then be able to purchase any remaining units of the item from their benefit balance. If the second or free item is not a WIC approved item, there is no impact on the WIC Program and the participant is allowed to participate and benefit from these types of promotions.

Buy One Get One at a Reduced Price – In these instances, a retail vendor will sell one WIC approved food item at full price and sell a second identical item or a different WIC approved item at a reduced price. If the participant has one unit of the item on the EBT card, the WIC participant will pay for that item by having the unit or benefit deducted from the card, and must use cash or some other means of payment to purchase the second item. If the participant has two of the items in the EBT benefit balance, the balance of both items will be deducted from the balance at the time of purchase. WIC will be charged the full price for the first item and the reduced price for the second item. If the WIC participant wishes to preserve his/her WIC benefits and purchase the reduced price items with

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

cash or some other tender, the vendor must allow the customer that option.

Free Ounces Added to Item by Manufacturer – Manufacturers may add extra ounces to their products at no extra cost to the customer. Participants may use their EBT benefits to purchase WIC approved food items that have bonus ounces added to the package. Any additional ounces included in the package will not be deducted from the remaining EBT benefit balance.

Store/Loyalty Shopping Cards – WIC participants should be provided the opportunity to use store/loyalty-shopping cards if they so choose. The portion of the loyalty card discount applicable to the WIC-redeemed items should reduce the cost of the transaction to the WIC Program.

Volume Discounts – When a discount percentage is applied to the total dollar amount of the WIC and non-WIC items purchased, the pro-rata share of the discount applicable to the WIC purchases should reduce the cost of the transaction to the WIC Program.

- T. For seeking restitution from participants for invalidated transactions:
 - 1. Three or more positive passes shall constitute a pattern.
 - 2. A pattern of violations shall result in disqualification for one month.
 - 3. The SA will accept a CMP in lieu of disqualification.

- U. For failing to label three or more declared traditionally LEB items with SA-furnished pink stickers or store stickers/signage authorized by the SA:
 - 1. Three or more positive passes shall constitute a pattern.
 - 2. A pattern of violations shall result in disqualification for one month.
 - 3. The SA will accept a CMP in lieu of disqualification. The CMP shall not exceed \$1,000.
 - 4. A subsequent violation within a 12-month period from the date of the first disqualification notification shall result in disqualification for one month or a CMP double the first infraction, not to exceed \$2,000.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

5. An additional violation within 24 months from the date of the first disqualification notification shall result in disqualification for one month or a CMP triple the first infraction, not to exceed \$3,000.
- V. For improperly labeling WIC foods as follows:
1. Labeling a product within the LEB categories as WIC approved with a pink sticker when it is not the vendor's declared least expensive brand, unless the vendor is temporarily out of the declared least expensive brand;
 2. Labeling a food as WIC approved when it is not authorized; and
 3. Labeling a food as WIC approved with a pink sticker while failing to label other WIC approved foods within the same category, such as labeling one brand cereal but not other WIC approved brands of cereal.
 4. Labeling a product with a pink sticker within a LEB category as WIC approved when the store has not declared a LEB food item in the LEB category.
 - a. Three or more positive passes shall constitute a pattern.
 - b. A pattern of violations shall result in disqualification for one month.
 - c. The SA will accept a CMP in lieu of disqualification. The CMP shall not exceed \$1,000.
 - d. A subsequent violation within a 12-month period from the date of the first disqualification notification shall result in disqualification for one month or a CMP double the first infraction, not to exceed \$2,000.
 - e. An additional violation within 24 months from the date of the first disqualification notification shall result in disqualification for one month or a CMP triple the first infraction, not to exceed \$3,000.
- VI. The SA and/or SA Representative may review or assess a vendor's compliance with the requirements of the WIC Vendor Agreement at any time during the vendor agreement's effective period.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

- A. Breach of contract will be governed by State law and specific terms and conditions of the vendor agreement.

- B. The SA may impose specific penalties as described in Section VI.C below for violation of any of the following vendor responsibilities required in the WIC Vendor Agreement applicable to the EBT System:
 - 1. Failure to maintain a SA certified in-store WIC EBT system that ensures system availability during all hours the store is open;
 - 2. Failure of a store's WIC EBT system to maintain the system's accuracy, integrity, or performance required and under which requirements the WIC in-store system was certified regardless of whether the failure is caused by system malfunction or staff intervention.
 - 3. Failure to ensure the WIC EBT redemption process allows a reasonable degree of security for protecting PIN numbers used by WIC recipients;
 - 4. Failure to release food benefits to the WIC participant any time the WIC EBT Card is decremented.

- C. If the vendor fails to meet any of the WIC EBT requirements listed in Section VI.B above, the SA shall issue a written warning for the first violation. A second violation within a 12-month period for the same activity will result in a one-month disqualification from participating in the WIC Program or the vendor may request a CMP in the amount of one thousand dollars (\$1,000.00) as an alternative to the disqualification. A third violation within a 12-month period in the same activity will result in a one-month disqualification from participating in the WIC Program or the vendor may request a CMP in the amount of three-thousand dollars (\$3,000.00) as an alternative to the disqualification. Subsequent violations in the same activity, or a total of five cumulative violations regardless of activity, within a 12-month period will result in additional one-month disqualifications from participation in the WIC Program or the vendor may request a CMP in the amount of three-thousand dollars (\$3,000.00). A vendor may request a CMP as described in Section X.A-B below as an alternative to

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

each one-month disqualification period beyond the initial two disqualifications.

- VII. The SA and/or SA Representative may review or assess any authorized vendor at any time during the vendor agreement period using the selection criteria in effect at the time of the review or reassessment, including but not limited to charging competitive prices and/or compliance with selling declared traditionally LEB's.
- A. For charging the WIC Program food prices that are determined to be non-competitive as defined by WIC Policy WV:10.0, the Vendor Agreement shall be sanctioned according to the following:
1. From a preliminary review of the vendor's pricing, the SA will provide a non-compliant vendor with a written notification (warning) of non-compliance.
 2. Upon a subsequent assessment by the SA within a 12-month period, if the vendor's prices are again found to be non-competitive the SA will terminate the Vendor Agreement and the SA will not consider an application from that vendor for a full six-month period.
 3. The SA will not accept a CMP in lieu of a termination of the Vendor Agreement unless it determines inadequate participant access.
- B. For not redeeming at least 85% of its declared traditionally LEB in the respective food categories as defined by WIC Policy WV: 02.0, the vendor shall be sanctioned according to the following:
1. From a preliminary review of the vendor's UPC redemptions, the state will provide a non-compliant vendor with a written notification (warning) of non-compliance.
 2. Upon subsequent assessment by the SA within a specified 12-month period, if the vendor's UPC redemptions are again found to be non-compliant with the least expensive brands declared, the SA shall issue a second notice of non-compliance to the vendor.
 3. If the vendor's UPC redemptions are again found to be non-compliant with the LEB declared within the specified 12-month period, the SA shall disqualify the vendor for a one-month period and must therefore terminate the Vendor Agreement for non-compliance with LEB

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

requirements. The SA will accept a CMP in the amount of \$1,000 in lieu of disqualifying the vendor and terminating the Vendor Agreement

4. A subsequent violation within a 6-month period from the date of the first termination notification shall result in disqualification for one month or a CMP double the first infraction of \$2,000.
5. An additional violation within 6 months from the date of the first termination notification shall result in disqualification for one month or a CMP triple the first infraction of \$3,000.
6. A third subsequent violation within 6 months from the original termination date [6th overall violation] shall result in termination from the WIC Program for six months. The six violations identified shall constitute a persistent pattern of non-compliance with the requirement to sell the store's declared least expensive brand products to WIC at the 85% level. There will be no option to pay a CMP in lieu of termination for a 6th overall violation.
7. A vendor who is actively working with the Program's EBT Operations branch on changes to its ECR system to automatically enforce LEB requirements may be exempt from sanctions. To qualify for this exemption to LEB enforcement sanctions, the vendor must contact the SA in advance of the start of system modifications and submit a timeline for justification. It is at the SA's discretion to modify or terminate the timeline once approved (See WIC Policy WV:02.0).

VIII. A vendor's termination of the Vendor Agreement after having received notification by the SA and/or SA representative of a violation shall not deprive the SA of jurisdiction to impose sanctions for Program violations as set forth in this policy (WV:01.0). If the outlet/vendor fails to request a hearing according to WIC Policy WV:13.0, the SA shall impose the sanction proposed in the notice to the vendor.

IX. The vendor shall be provided a written notice of administrative action containing the results of any on-site store review, invoice audit, and/or compliance buy and any resultant WIC Program violations and sanctions.

X. Civil Money Penalty (CMP)

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

- A. With the exception of CMPs specified in Sections V.U, V.V, VI.C, and VII.B. above, vendors may request a CMP as an alternative to disqualification for six months or less, unless otherwise not allowed. Prior to a hearing on the matter, the outlet/vendor may choose either to accept the disqualification or to pay the CMP. Following a hearing, the hearing examiner on behalf of the SA, may uphold a disqualification or allow a CMP ranging from the minimum of the pre-hearing amount as calculated, but may also include all the administrative costs of the SA associated with preparing and conducting the hearing. If the vendor does not request a hearing, the

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

request to pay a CMP must be made within 15 days of receipt of the state's written notification of disqualification. The CMP payment must be submitted to the state prior to the disqualification effective date.

- B. For violations resulting in a disqualification of one but not more than six months, the CMP shall be calculated as follows:
 - 1. Determine the vendor's average monthly redemptions for the most current six-month period available and multiply by 0.10 (10%) and multiply the resulting amount by the number of months the vendor would have been disqualified.
 - 2. The amount of the resulting CMP shall not exceed \$ 11,000 for any number of violations within a violation type nor more than \$49,000 as part of a single investigation.
- C. One or more violations within a violation type during one compliance buy or one routine monitoring visit shall be considered one violation.
- D. If more than one violation type rises to the level of a pattern, the
- E. CMP will be calculated based on the offense for which the most severe sanction would be required.
- F. The SA will not accept a CMP in lieu of a proposed disqualification period longer than six months unless the SA determines that disqualification would result in inadequate participant access. If the disqualification period longer than six months is waived due to inadequate participant access, the CMP shall be calculated in accordance with X.B.1., with the resultant amount being multiplied by the number of months the vendor would have been disqualified.
- G. The determination by the SA regarding inadequate participant access is not subject to administrative review.
- H. If the SA determines disqualification would result in inadequate participant access, the CMP may be waived except for violations that warrant a disqualification of more than six months.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

- I. When during the course of a single investigation, the SA determines a vendor has committed multiple violations, the SA shall, in the event of a determination of inadequate participant access, impose a CMP for violations within each violation type. The total amount of the CMPs imposed as a result of a single investigation shall not exceed \$49,000.
 - 1. If the vendor receives a second disqualification for the following violations as defined in this policy and elects to pay a CMP, the CMP shall be doubled but shall not exceed \$49,000:
 - 2. Redemption of WIC EBT food benefits for infant formula not authorized on the WIC EBT card;
 - 3. Redemption of WIC EBT food benefits for unauthorized brands or package sizes of food and/or charging for quantities of foods provided in excess of those authorized on the WIC EBT card;
 - 4. Redemption of WIC EBT food benefits in LEB categories for brand products other than the declared LEB when the declared items are in stock;
 - 5. Redemption of WIC EBT food benefits for unauthorized foods;
 - 6. Redemption of WIC EBT food benefits for foods not received;
 - 7. Charging the SA more than the customary selling price charged other customers for the same items;
 - 8. Redemption of WIC EBT food benefits for credit, including rain checks, and/or non-food items other than alcohol, alcoholic beverages, cash, tobacco products, firearms, ammunition, explosives, controlled substances;
 - 9. Redemption of WIC EBT food benefits for cash (trafficking), firearms, ammunition, explosives, or controlled substances;
 - 10. Redemption of WIC EBT food benefits outside authorized channels; and/or
 - 11. Unsubstantiated WIC sales.

- J. No CMP shall be accepted in lieu of a third and subsequent sanction(s) for violations listed in item I. of this section.

- K. The SA may agree to accept CMPs paid in installments as appropriate. If the vendor does not pay, pays only partially, or fails to pay a CMP

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

assessed in lieu of disqualification in a timely manner, the SA shall disqualify the vendor for the length of the disqualification corresponding to the violation for which the CMP was assessed.

- XI. Disqualification for violations identified during one Vendor Agreement period may be imposed in any subsequent Vendor Agreement period, if the vendor has been notified in writing at least 20 days prior to the disqualification period.
- XII. For violations requiring more than one incident to establish a pattern of noncompliance, the number of incidents shall be aggregated by type. The most severe sanction applicable among all the violation types shall be imposed.
- XIII. Disqualification from the Supplemental Nutrition Assistance Program (SNAP) (formerly known as the Food Stamp Program) shall result in an automatic disqualification of the same duration from the WIC Program. The disqualification shall be for the same length of time as the SNAP disqualification, may begin at a later date than the SNAP disqualification, and is not subject to administrative or judicial review under the WIC Program.
- XIV. The SA shall disqualify a vendor who has been assessed a CMP in SNAP based on hardship, as provided by the SNAP regulations, 7 CFR §278.6.
 - A. The length of the disqualification shall correspond to the period for which the vendor would otherwise have been disqualified in the SNAP.
 - B. If the SA determines that inadequate participant access would result, no disqualification shall be imposed.
- XV. A vendor's disqualification from the WIC Program may result in disqualification of the vendor's SNAP authorization, which is not subject to administrative or judicial review under the SNAP regulations, 7 CFR §278.6(e)(8).

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

- XVI. A vendor being disqualified shall be given at least 20 days prior notice before the proposed disqualification becomes effective, unless specifically excepted in this section:
- A. The SA will provide administrative reviews for any adverse action affecting participation as defined in WIC Policy WV:13.0, with the following exceptions:
1. The validity or appropriateness of the SA's vendor limiting or selection criteria for minimum variety and quantity of supplemental foods, business integrity, and current SNAP disqualification or civil money penalty for hardship;
 2. The validity or appropriateness of the SA's participant access criteria and the SA's participant access determination concerning whether disqualification of a vendor would result in inadequate participant access.
 3. The validity or appropriateness of the SA's selection criteria for competitive price, including, but not limited to, vendor peer group criteria and the criteria used to identify vendors that are above 50-percent vendors or comparable to above-50-percent vendors;
 4. Denial of authorization if the SA's vendor authorization is subject to the procurement procedures applicable to the SA.
 5. Expiration of the vendor agreement;
 6. Disputes regarding WIC EBT food instrument and cash-value benefit payments or claims assessed against a vendor (other than the opportunity to justify or correct a vendor overcharge or other errors, as permitted by 7 CFR §246.12(k)(3));
 7. SA disqualification of a vendor based on a disqualification from the SNAP;
 8. The validity or appropriateness of the SA's prohibition of incentive items and the SA's denial of an above-50-percent vendor's request to provide an incentive item to customers;
 9. The SA's determination whether to notify a vendor in writing when an investigation reveals an initial violation for which a pattern of violations must be established in order to impose a sanction;
 10. The SA's determination whether a vendor had an effective policy and program in effect to prevent trafficking and that the

Nutrition Services Department of State Health Services

Effective January 1, 2017

Policy No. WV:01.0

ownership of the vendor was not aware of, did not approve of, and was not involved in the conduct of the violation;

11. The SA's determination to include or exclude an infant formula manufacturer, wholesaler, distributor, or retailer from the list provided by the SA to a vendor; and
12. The validity or appropriateness of the provisions contained in the SA's WIC Vendor Agreement. Neither the SA nor a vendor is obligated to enter into or renew a vendor agreement. The WIC Vendor Agreement does not constitute a license or a property interest. Available recourse for any vendor wishing to dispute the terms of the vendor agreement is termination or nonrenewal of the WIC Vendor Agreement.

- B. Disqualifications which take effect upon receipt by the vendor of the notice of disqualification from the SA and which do not require 20 days prior notice include the following:
1. Conviction for trafficking in food instruments;
 2. Conviction for selling firearms, ammunition, explosives, or controlled substances in exchange for food instruments; and
 3. Appealed disqualifications in which the Hearing Officer rules in favor of the SA.
- C. Vendors who wish to appeal shall provide the SA with a written request for a hearing within 20 days of receipt of the adverse action disqualification notice. The request shall, at a minimum, describe the action that is being appealed.

XVII. The SA shall notify USDA of permanently disqualified PWIC vendors on a quarterly basis. FNS WIC Program staff will report the information in the System for Award Management (SAM).

XVIII. The WIC Vendor Agreement does not constitute a license or a property interest. If the vendor wishes to continue to be authorized beyond the period of its current Vendor Agreement, the vendor must reapply for authorization. If a vendor is disqualified, the SA will terminate the Vendor Agreement, and the vendor will have to reapply in order to be

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

authorized after the disqualification period is over. In all cases, the vendor's new application will be subject to the SA's vendor selection criteria and any vendor limiting criteria in effect at the time of the reapplication.

- XIX. A vendor who commits fraud or abuse of the WIC Program is liable to prosecution under applicable federal, state or local laws. Those who have willfully misapplied, stolen or fraudulently obtained program funds will be subject to a fine of not more than \$25,000 or imprisonment for not more than five years or both, if the value of the funds is \$100 or more. If the value is less than \$100, the penalties are a fine of not more than \$1,000 or imprisonment for not more than one year or both. These criminal penalties are in addition to those administrative sanctions already stated.
- XX. WIC vendors are not permitted to use either the acronym "WIC" or the WIC logo, including facsimiles thereof, in total or in part, either in the official name in which the vendor is registered or in a different name under which it does business. WIC vendors are also not permitted to use the WIC acronym or the WIC logo on signs, pamphlets, posters, or brochures. For violations pertaining to the use of the acronym "WIC" or the WIC logo, the SA and/or SA representative shall issue a written warning. For a subsequent violation after having received a written warning, the SA and/or SA representative shall disqualify the vendor for three months. The SA will accept a CMP in lieu of disqualification.

Vendors' use of the WIC acronym and logo is authorized only under the following conditions:

- A. SA-issued posters, signs, labels or other items.
- B. Vendors may have a sign, pamphlet, poster or brochure indicating that WIC food instruments are accepted (For example: "WIC CARD ACCEPTED HERE" or "WIC Accepted Here") in English and/or Spanish, as long as the letters are printed in the same size of all capital letters or capital and lower case letters and in the same print style. In all instances when wording pertaining to the acceptance of the WIC food

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

instrument is adjacent to the store name and visible from the exterior of the building, the font size must be smaller than the store's name.

- C. Vendors are required to use state-furnished pink "WIC Approved Item" labels on shelves of declared traditionally least expensive brands.

Under certain conditions, the SA may approve store-supplied LEB "WIC Approved Item" labels and/or signage. Stores must send a written request and justification to the State if the stores want to supply their own LEB labels and/or signage.

1. Must submit an actual sample to the SA in the same pink color used for SA produced labels, and must receive approval in writing prior to the use of any vendor supplied shelf label. All costs associated with developing, printing, storing, supplying and using vendor-supplied labels must be paid by the vendor.
2. Vendor's must submit a picture to the SA for "WIC Approved Item" signage and must receive approval in writing prior to the use of the signage. The approval is not perpetual. If approval is granted, it will expire when the Vendor Agreement expires. All costs associated with developing, printing, storing, supplying and using vendor designed signage must be paid by the vendor.

- D. Vendors may label their non-LEB WIC approved foods with the "Texas WIC Smart Choices Healthy Families" logo. The labeling of all or none within a food group is not mandated for non-LEB WIC approved foods when a vendor uses the "Smart Choices" label. A vendor would not be in violation of this policy if only one non-LEB WIC authorized brand within a food group such as cereal was labeled with "Texas WIC Smart Choices Healthy Families" and the other WIC-authorized cereal brands were not labeled.

XXI. Third or Subsequent Mandatory Sanction (Ref. 246.12(I)(1)(vi))

When a vendor, who previously has been assessed two or more sanctions for violation of a federal regulation listed in 7 CFR Part 246.12(I)(1)(ii) through 246.12(I)(1)(iv), receives another sanction for any of these

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective January 1, 2017

Policy No. WV:01.0

violations, the SA must double the third sanction and all subsequent sanctions. The SA may not impose CMP in lieu of disqualification for third or subsequent sanctions for these violations.

XXII. Expiration of a Vendor Agreement Without Renewal

- A. If the vendor allows its Vendor Agreement to expire because of the vendor's history of noncompliance with the provisions of the Vendor Agreement or the WIC Program procedures, policies, rules, and/or regulations, the SA will not consider the vendor's application to participate for six months after the expiration of the vendor's prior Vendor Agreement.

- B. If the vendor allows its Vendor Agreement to expire because the vendor or a representative of the vendor has failed to complete WIC vendor training for a period of more than three years, the SA will not consider the vendor's application to participate until the vendor or the vendor's representative completes WIC vendor training.

<p style="text-align: center;">Texas WIC Program Department of State Health Services</p>
--

Effective January 1, 2017

Policy No. WV:02.0

Least Expensive Brands Declaration

Purpose

To promote vendor compliance with selling declared least expensive brand (LEB) products, to promote cost-efficiency, to reduce vendor/participant confusion when identifying the least expensive brands of WIC foods, and to reduce the time required to conduct WIC transactions.

Authority

Vendor Agreement

Policy

At the time of authorization and reauthorization, all vendors shall declare the traditionally least expensive brand (LEB) for each type and size of WIC authorized milk, fluid and frozen juice, dried peas/beans/lentils, cheese, whole wheat bread, whole grain bread, wheat tortillas, corn tortillas, and brown rice the vendor's outlet(s) shall sell when prescribed on a WIC EBT food instrument. The State Agency (SA) recognizes an outlet may periodically experience out-of-stock situations and therefore not have 100% compliance with this requirement. However, at least 85% of an outlet's WIC monthly redemptions within these food types (category/subcategories) must be the vendor's declared traditionally least expensive brands (LEB). Vendor outlets that do not have at least 85% WIC LEB redemptions in each of these food types redeemed are subject to termination of their Vendor Agreements in accordance with Section VII of this policy.

Procedures

- I. At the time of authorization and reauthorization, each vendor shall complete the "Least Expensive Brand Declaration" form, listing the product brand name as well as the Universal Product Code (UPC) for

Texas WIC Program

Department of State Health Services

Effective January 1, 2017

Policy No. WV:02.0

each product declared as the traditionally least expensive brand. Only one declaration form is necessary if the traditionally least expensive brands are exactly the same for all outlets within one account. If the traditionally least expensive brand varies from outlet to outlet, then a declaration form shall be submitted for each individual outlet within an account. As a minimum, a new LEB Declaration form(s) shall be submitted with each authorized and reauthorized Vendor Agreement. No vendor will be authorized to participate in the WIC Program without submitting the declaration form(s) as a part of the vendor approval process. It is the vendor's responsibility to notify the SA of changes to its LEB declaration and submit a change request form immediately. Failure to update an LEB declaration is a violation of the Vendor Agreement and can result in a monitor's findings and termination for selling non-LEB brands.

- II. Stores are required to label their declared traditionally least expensive brands of milk, dried peas/beans/lentils, fluid and frozen juices, cheese, whole wheat bread, whole grain bread, wheat tortillas, corn tortillas, and brown rice with the uniform SA issued "WIC Approved Item" pink label. The SA shall supply uniform "WIC Approved Item" labels to stores. Also the vendor may generate pink labels from the Texas WIC website and reproduce them on Avery 5160 labels.

Under certain conditions, the SA may approve store-supplied "WIC Approved Item" labels and/or signage. Stores must send a written request and justification to the SA if the stores want to supply their own labels and/or signage.

- A. Vendors must submit an actual sample to the SA WIC Office in the same pink color used for state-produced labels, and must receive approval in writing prior to the use of any store-supplied label. All costs associated with developing, printing, storing, supplying and using store-supplied labels must be paid by the store.

- B. Vendors must submit a picture to the SA WIC Office for "WIC

<p style="text-align: center;">Texas WIC Program Department of State Health Services</p>
--

Effective January 1, 2017

Policy No. WV:02.0

Approved Item" signage and must receive approval in writing prior to the use of the signage. All cost associated with developing, printing, storing, supplying and using store-designed signage must be paid by the vendor.

- III. It is the vendor's responsibility to assure "WIC Approved Item" pink shelf labels are clearly placed designating the appropriate LEB food items.
- IV. If the vendor chooses to label other allowable non-LEB WIC food types with the pink labels, all of the allowable foods the store carries within the food group shall be labeled (i.e. if one cereal is labeled, then all allowable cereals - national brands as well as house brands shall be labeled). The only exception to this is the labeling of infant formula. Only the two standard contract milk-based and soy-based brands of formula in powder and concentrate should be labeled. Instead of using pink labels on non-LEB WIC categories of foods, the SA encourages vendors to use the "Texas WIC Smart Choices Health Families" labels.
- V. In the event a store needs to change a traditionally least expensive brand, it shall submit, to the SA, a change request form stating the new declared traditionally least expensive brand and UPC. The new declared LEB brand must be in the SA's Approved Products List (APL) or the vendor must contact the SA WIC Office to determine if the new product/brand can be authorized by WIC.
- VI. In the event a vendor runs out of the traditionally least expensive brand, the store shall sell the next least expensive brand of that product available on the shelf at that time. The next least expensive brand must be in the SA's APL.
- VII. A vendor's failure to have its declared traditionally least expensive brands (LEB) be at least 85% of its WIC redemptions in each of the applicable WIC food categories during a process month is cause for

<p style="text-align: center;">Texas WIC Program Department of State Health Services</p>
--

Effective January 1, 2017

Policy No. WV:02.0

termination of the Vendor Agreement. The sale of non-LEB brands listed in the Approved Products List at prices equal to or less than the unit price of the declared LEB is consistent with the intent of the LEB program and does not harm the SA. The SA will include the redemptions of the non-LEB brand(s) sold at equal to or less than the unit price of the declared LEB in the final computation as part of meeting the 85% compliance requirement. At the SA's discretion a vendor's wholesale supply issues, interim changes to LEB declarations within a review month, and/or low volume of WIC sales may result in sanctions being waived on a case-by-case basis.

- A. The SA may perform a review of the vendor's compliance with selling its declared least expensive brands at any time during the term of the Vendor Agreement. The State agency shall provide a noncompliant vendor with written notification of noncompliance determined from the review. The written warning of noncompliance provides the vendor the opportunity to update the store's LEB declaration form and take other measures to ensure that the store is selling the declared traditionally least expensive brands for a minimum of 85% of the redemptions for each of the categories of foods declared. Also, the warning letter shall specify a consecutive 12-month period during which subsequent assessments will be conducted.
- B. If the vendor fails to comply with selling the declared least expensive brands on a subsequent assessment within the 12-month period specified in the first warning letter, the SA shall issue the vendor a second warning notice of non-compliance. If there are no further violations within the 12-month period specified in the first warning letter, the violation period shall be considered closed and the vendor will be considered in compliance with LEB sales requirements.
- C. If, however, the vendor's redemptions are again found to be non-compliant within the 12-month period specified in the first

<p style="text-align: center;">Texas WIC Program Department of State Health Services</p>
--

Effective January 1, 2017

Policy No. WV:02.0

warning letter [3rd overall violation], the SA shall terminate the Vendor Agreement for a one-month period. The SA will accept a civil monetary penalty (CMP) in lieu of termination of the Vendor Agreement in the amount of \$1,000. If the vendor pays the CMP in lieu of termination, the vendor's liability for continued LEB sanctions for violations will continue for an additional 6-month period from the termination date specified in the original termination notice. If no further violation is found within the 6-month period from the original termination date, the vendor shall be considered in compliance with LEB sales requirements.

- D. A subsequent violation within a 6-month period from the original termination date [4th overall violation] shall result in disqualification for one month or a CMP of \$2000, double the first infraction.
- E. A second subsequent violation within 6 months from the original termination date [5th overall violation] shall result in disqualification for one month or a CMP of \$3000, triple the first infraction.
- F. A third subsequent violation within 6 months from the original termination date [6th overall violation] shall result in termination from the WIC Program for six months. The six violations identified in VII.A-F, taken together, shall constitute a persistent pattern of non-compliance with the requirement to sell the store's declared least expensive brand products to WIC at the 85% level. There will be no option to pay a CMP in lieu of termination for a 6th overall violation.
- G. A vendor who is actively working with the Program's EBT Operations branch on changes to its ECR system to automatically enforce LEB requirements may be exempt from sanctions. To qualify for this exemption to LEB enforcement sanctions, the

<p style="text-align: center;">Texas WIC Program Department of State Health Services</p>
--

Effective January 1, 2017

Policy No. WV:02.0

vendor must contact the SA in advance of the start of system modifications and submit a timeline for justification. It is at the SA's discretion to modify or terminate the timeline once approved.

Guidelines

It is strongly recommended that a store employee be assigned to verify the accuracy of label placement each day.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective April 1, 2015

Policy No. WV:03.0

Inadequate Participant Access

Purpose

To ensure that disqualifying a vendor for contract/policy violations does not result in inadequate participant access to WIC foods. The issue is one of participant access, not participant convenience.

Authority

7 CFR Part 246.12

Policy

Prior to disqualifying a vendor from participation in the WIC Program, the state agency (SA) shall consider the adequacy of access by participants to authorized vendors in the local area.

Procedures

- I. Prior to the disqualification of a WIC authorized vendor, the SA shall make a determination as to the adequacy of participant access to WIC foods. When making the determination, the SA shall consider the proximity of other authorized vendors to the vendor facing disqualification and any geographic barriers to accessing such vendors by participants. Specifically, participant access shall be determined to be adequate when:
 - A. at least one authorized vendor is located within a 10 mile radius of the disqualified vendor; and
 - B. the SA considered but found no geographic barriers for participants to access another authorized vendor. Such barriers might include, but are not limited to, bridges or interstate highways not open to foot traffic, rivers, or steep terrain not accessible by roadways. Any determination finding inadequate

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective April 1, 2015

Policy No. WV:03.0

participant access shall be made in consultation with the applicable local agency.

- II. Prior to a disqualification, the SA shall document in the file of each vendor disqualified, the adequacy of participant access, including any supporting information thereto.
- III. If the SA, in its sole discretion, determines that disqualifying a vendor would result in inadequate participant access, the SA shall impose a Civil Money Penalty (CMP) on the vendor in violation in lieu of disqualification except when prohibited by 7 CFR Part 246.12. The amount of the CMP is determined using the calculations set forth in Policy WV:01.0.
- IV. In accordance with 7 CFR Part 246.12 (f) (2) (xviii), the SA's determination regarding participant access is not subject to administrative review.

**Disputes Related to the Late Submission of WIC EBT Transactions
and/or Submission of Malformed Transactions**

Purpose

To provide a procedure by which vendors can demonstrate that an unusual circumstance or event occurred which precluded their submitting electronic benefit transfer (EBT) transactions to the State Agency (SA) within the prescribed time limitation and/or resulted in the EBT transactions being malformed when received by the SA.

Authority

Vendor Agreement

Policy

An authorized vendor may dispute the reduction of claims for late submission of WIC EBT transactions and/or submission of malformed transactions as outlined in this policy.

The SA is the sole arbiter of disputes submitted for resolution under this policy. Only disputes at the vendor outlet level will be considered (no account/corporate disputes covering multiple store locations). However, account level/corporate representatives may dispute the reduction of a claim on behalf of any one of the account's subordinate outlets. A malformed transaction is defined as a transaction received by the SA that was incorrect or incomplete either prior to or during insertion into the claim file. Each dispute will be evaluated based on its merit as provided in this policy. There is no guarantee that the dispute(s) will be resolved in favor of the vendor by the SA.

- I. Disputes related to a reduced claim file fall into two categories:

Nutrition Services
Department of State Health Services

Effective: December 1, 2016

Policy No. WV:05.0

- A. Disputes related to the submission of late claims
- B. Disputes related to the submission of malformed claims
- II. The SA may allow vendors to submit additional types of disputes if Federal or State regulatory changes impact retail ECR system code statewide. The SA shall issue an exception memorandum stating the situation precipitating the allowance of additional types of disputes and the applicable time periods.
- III. Under this policy, no dispute resolution procedure is available for claims that have not been received electronically by the SA for payment, transactions reduced to zero by the SA for electronic signature errors, sales of unauthorized foods, or sales that exceed not-to-exceed pricing limits.
- IV. Disputes related to the submission of late claims:
 - A. A request for dispute resolution must be received by the SA within 45 days from the transaction date or 30 calendar days of the date the vendor is notified of the claim's reduction in the electronic Auto Reconciliation File (ARF), whichever is sooner.
 - B. The vendor must provide a written explanation of the circumstances that prevented the timely submission of the WIC EBT transaction(s) and/or the system change that caused the transactions to be late. If the WIC EBT late claim submission was the result of an error file rejected by the SA, the vendor must include this information in its written explanation specifying the original claim file name that was rejected.
- V. Disputes related to the submission of malformed claims:
 - A. A request for dispute resolution based on the submission of a malformed claim must be received within 45 days from the transaction date or 30 calendar days of the notification of claim reduction for malformed claim through the ARF, whichever is sooner.

Nutrition Services
Department of State Health Services

Effective: December 1, 2016

Policy No. WV:05.0

- B. The vendor must submit a written dispute request providing the name of the claim file rejected and an explanation of the event that caused the malformed submission of the WIC EBT claim or individual transaction(s). Additionally, a vendor must provide evidence that clearly demonstrates the transaction(s) involved in the reduction was a valid WIC transaction(s) at the store. The vendor must provide evidence from the transaction log and/or electronic receipt copies that show proof of the card being present in the lane and WIC-eligible items being purchased. At a minimum, the evidence must provide the PAN, date/time, lane #, trace #, UPCs purchased, and category/subcategory information. The burden of proof that the transaction(s) and circumstances surrounding the disputed transaction(s) are valid rests with the vendor. There is no guarantee that the dispute(s) will be resolved in favor of the vendor.

VI. State Agency Review of Vendor Disputes

- A. The SA will review each dispute submitted under this policy, assess the merit and circumstances related to the dispute as documented by the submitter and as researched by SA staff, and render a decision on the dispute within 30 calendar days of receipt of the vendor's dispute request. This timeframe is only an administrative requirement for the SA and does not provide a basis for overturning the dispute if a decision is not made within the specified time. This 30-day period commences on the date of receipt of the dispute request. If a vendor fails to provide complete documentation as described in Section IV.B and/or Section V.B above at the time of the dispute request, the SA will only consider any subsequent information submitted if time is available within the 30-day period. The 30-day period will not be adjusted by subsequent submission of information unless the Director, Vendor Management and Operations, determines the situation to be extraordinary, in which case the 30-day deadline may be extended to accommodate the circumstances. There is no guarantee that the dispute(s) will be resolved in favor of the vendor.

Nutrition Services
Department of State Health Services

Effective: December 1, 2016

Policy No. WV:05.0

-
- B. The SA is the sole arbiter of disputes submitted under this policy. The SA's assessment and decisions on the resolution of the dispute are final and not subject to further appeal.
 - C. Disputes involving \$500 or more require approval from the United States Department of Agriculture (USDA) before payment can be authorized. Disputes referred to USDA for approval increase the time required for a determination regarding payment. There is no guarantee that the dispute(s) will be resolved in favor of the vendor.
- VII. No dispute requests will be accepted by the SA after November 30th for any transaction that occurred on/prior to September 30th of the same calendar year regardless of any other time frames stated in this policy.
- VIII. A vendor must submit its written request for dispute resolution to the SA via email to: WICEBTVendorRedemptions@dshs.texas.gov
- IX. If the outlet's dispute is denied, the vendor will receive a written notification explaining the reason for the denial.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective November 1, 2016

Policy No. WV:08.0

WIC Vendor Training

Purpose

To define State Agency (SA) requirements and United States Department of Agriculture federal regulations regarding WIC vendor training.

Authority

7 CFR Part 246.12

Policy

At least one designated representative from each vendor outlet with a current Vendor Agreement must complete the WIC State Agency (SA) administered training.

Procedures

- I. At the time of a vendor's initial selection, reauthorization, or after a break in the Agreement term between the vendor and the WIC Program, a representative from each vendor outlet must complete a training that is in an interactive format.
- II. Each WIC vendor outlet with a current agreement must complete SA approved interactive training annually.

Nutrition Services
Department of State Health Services

Effective November 1, 2016

Policy No. WV:08.0

- III. A vendor outlet's agreement will not be authorized or reauthorized if a representative has not completed SA approved interactive training.
- IV. Each vendor must inform and train its cashiers and other staff on the most current WIC Program policies and procedures.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2012

Policy No. WV:09.0

Restriction on Vendor Incentive Items

Purpose

To describe state agency (SA) requirements regarding the use of incentive items and other free merchandise provided by WIC authorized vendors and to ensure that the WIC Program does not pay the cost of incentive items in the form of higher food prices.

Authority

Child Nutrition and WIC Reauthorization Act of 2004, P.L. 108-265; 7 CFR 246.12; 7CFR 246.18.

Policy

WIC authorized vendors cannot offer incentive items to WIC customers that are not offered to non-WIC customers. Offering incentive items solely to WIC participants is prohibited by Federal WIC regulations.

In addition, the State Agency is prohibited from authorizing or making payments to above-50-percent vendors as described below that provide incentive items or other free merchandise, except food or merchandise of nominal value (as determined by the SA) to customers unless the vendor provides proof that the vendor obtained the incentive items or free merchandise at no cost.

Procedure

- I. The incentive item and free merchandise restriction applies to for-profit vendors:
 - A. Who are WIC-only vendors or predominantly WIC vendors whose WIC redemptions exceed 50% of their annual gross food sales, or
 - B. Who are new applicant vendors likely to meet the criteria of item I.A..
-

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2012

Policy No. WV:09.0

- II. The vendor must obtain written approval from the SA for all incentive items they intend to provide to customers.
 - A. The vendor must submit a list of incentive items, the cost of each item and documentation, such as an invoice or similar document indicating the cost of each incentive item.
 - 1. Three types of acceptable incentive items are:
 - (a) merchandise obtained at no cost to the vendor and provided to all customers without charge, or merchandise sold to all customers at or above cost, subject to documentation.
 - (b) food of nominal value and merchandise of nominal value, i.e., having a per item cost of less than \$2.00.
 - (c) food sales and specials which involve no cost or only a nominal value for the vendor regarding the food items involved and do not result in a higher charge for foods redeemed with WIC EBT food instruments.
 - B. The cost of the incentive items cannot exceed \$1.99.
 - C. The WIC Acronym and/or logo cannot be used on incentive items.
 - D. The vendor cannot give or sell an incentive item to any customer for less than cost.
 - E. Vendors are not permitted to provide services to any customers such as transportation of customers to and from the vendor's premises, or delivery of supplemental foods to customer residences.
 - F. Vendors may provide only one incentive item of nominal value per shopper per shopping visit, regardless of the number of participants or WIC EBT food instruments involved, unless the item was obtained by the vendor at no cost or the sum of the cost of the multiple items provided to a client does not exceed \$1.99.
 - G. Under no circumstances are vendors allowed to give lottery tickets or cash as incentive items.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2012

Policy No. WV:09.0

- III. Vendors found to have violated the provisions of this policy will be sanctioned in accordance with WIC Policy WV:01.0.

Nutrition Services Department of State Health Services

Effective September 1, 2016

Policy No. WV: 10.0

WIC Vendor Authorization and Competitive Pricing Determination

PURPOSE

This policy provides information on the types of vendors authorized by the United States Department of Agriculture Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) program and the requirements for becoming an authorized vendor; competitive pricing; and vendor agreement details.

AUTHORITY

7 CFR Sections 246.2 and 246.12

I. DEFINITIONS

The following definitions are provided to assist in explaining various acronyms and/or details of certain processes. These definitions do not constitute a comprehensive listing of all terms nor do they replace definitions in the regulations at 7 CFR Part 246. In the event of conflict between the definitions listed in this policy and also in 7 CFR Part 246, the latter shall prevail with the exception of definitions only listed in this policy.

Approved Product List (APL) – A comprehensive listing of WIC approved food items which list Universal Product Code (UPC) and/or Price Look-Up (PLU) information. Information is separated by food category/subcategory.

Arms-length Transaction – A transaction in which the buyers and sellers of a product act independently and have no relationship to each other. The concept of an arms-length transaction is to ensure that both parties in the deal are acting in their own self-interest and are not subject to any pressure or duress from the other party.

Category/subcategory – A category is a group of similar food items (e.g. whole milk, regular milk, infant cereal, infant foods); and a subcategory is the further division of the category based on certain characteristics. For example, whole milk is divided into different

Nutrition Services Department of State Health Services

Effective September 1, 2016

Policy No. WV: 10.0

subcategories based on size (e.g. gallon, half gallon, and quart).

Competitive Pricing Classification – A peer group designation for WIC authorized vendors based upon the amount of WIC sales.

Continuous Basis – On any given day of operation a grocer retail store offers for sale, and normally displays in a public area, a variety of food items.

Electronic Benefit Transfer (EBT) – Offline system that utilizes a smart card with an embedded microchip that permits electronic access to WIC participants' food benefits. A point-of-sale system equipped with a smart card reader checks the WIC benefits to be purchased against the benefits on the chip, authorizes the transaction, and uploads the day's transactions to a host.

EBT Capable means the WIC vendor demonstrates that their cash register system or payment device can accurately and securely obtain WIC food balances associated with an EBT card, maintain the necessary files such as the authorized product list, hot card file and claim file and successfully complete WIC EBT purchases.

Exempt infant formula – Any infant formula which is represented and labeled for use by an infant (1) who has an inborn error of metabolism or a low birth weight, or (2) who otherwise has an unusual medical or dietary problem, in accordance with 21 U.S.C. 350a(h).

Full-Line Grocer – A retailer that stocks and offers for sale on a continuous basis a variety of food products. A vendor type as defined in Section II of this policy.

Least Expensive Brand (LEB) – The least expensive brand food product traditionally sold 26 or more weeks throughout the year for each type and size of WIC authorized foods. The LEB food item categories include milk, juice, dried peas/beans/lentils, cheese, whole wheat bread, whole grain bread, wheat tortillas, corn tortillas, and brown rice.

Level III WIC EBT Certification – A series of steps completed by a vendor applicant or WIC authorized vendor ascertaining EBT system capability.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective September 1, 2016

Policy No. WV: 10.0

Local Agency (LA) – An agency established at the local level that represents various clinics within a specified jurisdiction, and is responsible for issuing benefits to WIC participants.

Maximum Allowable Reimbursement (MAR) – A price limit derived monthly by the WIC Program’s end-of-process month analysis of claims paid. MAR limit varies by competitive pricing classification. The MAR for Traditional WICs (TWIC) is 125% of the average prices paid to TWICs in each price region and sales volume band for the various WIC authorized food types by category/subcategory. The MAR for Predominantly WICs (PWIC) is 100% of the statewide average prices paid to TWICs for the various WIC-authorized food types by category/subcategory.

Minimum Stocking Requirement – A vendor must stock minimum food types and quantities, as described by the United States Department of Agriculture (USDA) 7 CFR 246.12.

Minimum Stocking Requirement for Full-Line Grocer – Vendor must maintain a minimum stock of food in the following categories in addition to the minimum stocking requirement for Other Retailers as defined in section II of this policy: (1) fresh vegetables, (2) fresh fruits, (3) frozen vegetables, (4) frozen fruits, (5) fresh and frozen fish, poultry, and meats, (6) canned fish, (7) canned fruits, (8) canned vegetables, and (9) bread.

Minimum Stocking Requirement for Pharmacy - A pharmacy is exempt from minimum stocking requirements.

Minimum Stocking Requirement for Other Retailer – Vendor must maintain a minimum stock of food in the following categories as defined in Section II of this policy: (1) dairy, (2) canned fish, (3) whole grains, (4) fruits and vegetables, (5) infant formula and food items, and (6) eggs, beans, peanut butter, and juice.

Not To Exceed (NTE) Amount – The maximum price that the State Agency will pay for a food type (e.g. milk, juice, cereal, eggs, etc.). The NTE amount is set as a reasonableness amount, set high enough so that the food type can be purchased anywhere in the state. The NTE amount is shown in the APL sent electronically to WIC authorized vendors

Nutrition Services Department of State Health Services

Effective September 1, 2016

Policy No. WV: 10.0

through their EBT system. The NTE amount is enforced as a pre-payment edit, and is NOT the end-of-process month MAR limitation defined elsewhere. NTE adjustments reduce the reimbursement total to the vendor prior to payment by the State Agency (SA), without regard to TWIC or PWIC status, and does not affect the MAR pricing calculations.

On-site Evaluation – An evaluation, more detailed than the vendor evaluation (as outlined in Section III of this policy), that is conducted on-site at the vendor outlet location, and is utilized to determine final selection as an approved WIC vendor. See Section IV for more information.

Pharmacy – A facility at which a prescription drug or medication order is received, processed, or dispensed under Texas Health and Safety Code. A vendor type as defined in Section II of this policy.

Predominantly-WIC (PWIC) – A competitive pricing classification given to an outlet that has or is expected to have WIC food sales above 50% of the outlet's total sales of foods that are eligible for purchase using benefits issued by the Supplemental Nutrition Assistance Program (SNAP). A PWIC is also known as an Above-50-percent vendor as described in 7 CFR Part 246.

Price region – A geographic area comprised of designated zip codes or one or more counties. Such areas may or may not be contiguous.

Primary contract brand infant formula - The specific infant formula for which manufacturers submit a bid to the State Agency (SA) in response to a rebate solicitation under 42 USC 1786, and for which a contract is awarded by the State Agency as a result of that bid.

Sales Volume Band – A competitive pricing grouping determined by the SA and based on monthly WIC sales volume. Sales bands consist of (1) Band 1: \$0.00 - \$1,999.99, (2) Band 2: \$2,000.00 - \$5,999.99, (3) Band 3: \$6,000.00 – \$19,999.99, and (4) Band 4: \$20,000.00 or greater.

SNAP – The Supplemental Nutrition Assistance Program, formerly the Food Stamp Program.

Special Supplemental Nutrition Program for Women, Infants, &

Nutrition Services Department of State Health Services

Effective September 1, 2016

Policy No. WV: 10.0

Children (WIC) – Federal assistance program of the Food and Nutrition Service (FNS) of the United States Department of Agriculture (USDA) for supplemental foods, healthcare referrals, and nutrition education for low-income pregnant women, breastfeeding and non-breastfeeding postpartum women, and infants, and children up to age 5 who are found to be at nutritional risk.

State Agency (SA) - The Department of State Health Services, Texas, in its role as administrator of the WIC Program.

Statewide Average Price Paid – The average price paid to TWICs for a WIC approved food type by category/subcategory. This function is used in competitive pricing.

Traditional WIC (TWIC) – A competitive pricing classification given to an outlet that has or is expected to have, WIC food sales that constitute up to 50% of the outlet's total sales of foods that are eligible for purchase using benefits issued by the SNAP.

United States General Services Administration (USGSA) – Provides centralized procurement for the federal government, offering products, services, and facilities that federal agencies need to serve the public. USGSA oversees and manages the System for Award Management.

Vendor Agreement – The formal and legally binding agreement between the Texas Department of State Health Services and a WIC authorized vendor.

Vendor Interactive Training – A training session for vendors that allows interaction with SA staff for addressing questions.

Vendor Evaluation – An assessment completed of vendor applicants and WIC authorized vendors during the initial selection phase. A vendor evaluation is also known as a pre-authorization visit where a list of criteria is verified by SA staff and/or certified by the vendor applicant.

Vendor Outlet – A retail grocery store which operates and transacts WIC food benefits at a fixed location, has an electric utility hook-up, is a store structure situated on a cement or pier-and-beam foundation

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective September 1, 2016

Policy No. WV: 10.0

that is not used simultaneously as a residence, has a minimum business area of 1,000 square feet, has clearly identifying signage that closely matches the retail store name (abbreviated version acceptable) listed on the WIC Vendor Application, and is walk-in accessible directly from the street or parking lot.

Vendor Type – A distinct group that a WIC authorized vendor is identified under based on physical attributes and food stock of the vendor outlet.

WIC EBT Benefits – WIC food package benefits issued to a WIC participant onto a WIC smart card, which is used at a WIC authorized vendor outlet for redemption.

WIC EBT Transaction – One or more items purchased at one time using an EBT card.

WIC Eligible Medical Foods – *Types of medical foods:* (1) concentrated liquid, (2) powdered, (3) ready-to-feed (RTF) or ready-to-use (RTU) liquid, (4) RTF or RTU solid/bar, and (5) semi-solid formulas having the consistency of "pudding." *Requirements include:* (1) medical documentation required for issuance, (2) medically necessary and prescribed by a physician when conventional foods cannot be consumed by woman or children with special dietary needs, (3) intended for use as an oral feeding; formulas administered through a nasogastric tube may be substituted, and (4) should serve as a major source of nutrients but may have to be supplemented by additional special nutritional products. *Items not allowed:* (1) formulas used solely for the purpose of enhancing nutrient take or managing body weight (e.g., vitamin pills, weight control products), (2) medicines or drugs, (3) hyperalimentation feedings (nourishment administered through a vein), (4) enzymes, (5) oral rehydration fluids or electrolyte solutions, (6) flavoring agent, and (7) feeding utensils or devices (e.g., feeding tubes, bags, pumps) designed to administer a WIC-eligible formula.

WIC Authorized Vendor - A sole proprietorship, partnership, cooperative association, corporation, or other business entity operating one or more stores authorized by the SA to provide authorized supplemental foods to WIC participants under a retail food delivery system.

Nutrition Services Department of State Health Services

Effective September 1, 2016

Policy No. WV: 10.0

II. VENDOR TYPE

The SA has identified 3 vendor types. An applicant vendor shall self-declare a type on the WIC vendor application. The SA will verify and validate the self-declared vendor type during evaluation under vendor selection (Section III of this policy).

A. Full-Line Grocer

1. A Full-Line Grocer stocks and offers for sale a variety of food products on a continuous basis in all of the following food groups: (1) Fresh Vegetables, (2) Fresh Fruits, (3) Frozen Vegetables, (4) Frozen Fruits, (5) Fresh and Frozen Fish, Poultry, and Meats, (6) Canned Fish, (7) Canned Fruits, (8) Canned Vegetables, and (9) Bread.
2. A Full-Line Grocer must stock the following quantities of food products at a minimum in addition to the stocking requirements for Other Retailers on an ongoing basis.
 - a. *Fresh Vegetables*: 2 pounds each of at least 5 different varieties of dark green and orange/red vegetables. Examples: broccoli, collard greens, mustard greens, kale, , romaine lettuce, spinach, turnip greens, acorn squash, butternut squash, carrots, hubbard squash, red peppers, and/or sweet potatoes.
 - b. *Fresh Fruits*: 2 pounds each of at least 5 different fresh fruits. Examples: apples, bananas, oranges, pears, peaches, plums, grapes, tomatoes, and/or grapefruit.
 - c. *Frozen Vegetables*: 24 packages of vegetables, minimum of 4 different varieties of frozen vegetables. Examples: mixed vegetables, corn, corn on the cob, peas, broccoli, carrots, cauliflower, green beans, squash, and/or spinach.
 - d. *Frozen Fruits*: 24 packages of fruit, with a minimum of at least 3 different varieties of frozen fruits. Examples: strawberries (sliced or whole), peaches, blueberries, mixed fruit, blackberries, raspberries, pineapple, fruit medley, and/or mixed berries.
 - e. *Fresh and Frozen Fish, Poultry, and Meats*:
 - i. 3 pounds of at least 2 types of fresh and/or frozen fish from the following: Salmon, Trout, Herring, Mackerel, Tilapia, Tuna, Cod, Red Fish, or Halibut.
 - ii. 5 pounds of fresh and/or frozen poultry consisting of at least 3 types of cuts. Examples of cuts include whole, halves, leg

Nutrition Services Department of State Health Services

Effective September 1, 2016

Policy No. WV: 10.0

- quarters, wings, etc. of chicken and/or turkey.
 - iii. 5 pounds of fresh and/or frozen beef and/or pork with at least 3 types of cuts (i.e. chops, steaks, hamburger, roasts, bacon, sausage, etc.). NOTE: Luncheon and deli style meats and sausages do not apply.
 - iv. A vendor may substitute additional quantities of fresh and/or frozen fish from the types cited in 5(a) above in place of stocking fresh and/or frozen beef and pork up to the entire 5 pounds of required meats.

 - f. *Canned Fish*: 12 cans of salmon and/or tuna.
 - g. *Canned Fruits*: 24 cans of fruit, with a minimum of 3 different varieties. Examples: peaches, pears, pineapple, mixed fruit and fruit cocktail.
 - h. *Canned Vegetables*: 24 cans of vegetables, with a minimum of 3 different varieties. Examples: peas, green beans, corn (cream or niblet), beets, carrot, spinach or beans.
 - i. *Bread*: 10 loaves of 20-24 ounce bread in at least 2 varieties and/or brands.
3. A Full-Line Grocer must have posted hours of operation reflecting a minimum of 6 days per week between 9:00 am and 6:00 pm daily.
 4. A Full-Line Grocer may elect not to sell infant formula to the WIC Program if it believes it can't do so cost effectively. Applicant vendor must declare choice on the vendor application.
 5. A Full-Line Grocer must have a valid SNAP authorization to participate on the WIC Program.

B. Pharmacy

1. A Pharmacy is a retail location at which a prescription drug or medication order is received, processed, or dispensed under Texas Health and Safety Code, Chapter 483 or the Comprehensive Drug Abuse Prevention and Control Act of 1970 (21 U.S.C. §801 et seq.).
2. A Pharmacy may only provide exempt infant formula or WIC eligible medical foods, and shall not be authorized to redeem WIC EBT Benefits for other WIC authorized foods, including primary contract brand infant formula. A Pharmacy is exempt from minimum stocking requirements.
3. Upon request, an exempt pharmacy will make available to SA invoices

Nutrition Services Department of State Health Services

Effective September 1, 2016

Policy No. WV: 10.0

or receipts documenting the purchase of its exempt infant formulas and/or WIC-eligible medical foods.

4. Specifics on WIC-Eligible Medical Foods
 - a. If the vendor outlet offers WIC-eligible medical foods on its shelves, prices must be posted along with proper labeling.
 - b. Refer to definition of WIC Eligible Medical Foods for additional details on types, requirements, and items not allowed.

C. Other Retailers

1. Other Retailers may consist of general merchandise retailers, convenience retailers, specialty retailers, and all other retailers not classified as a Full-Line Grocer or Pharmacy.
2. Other Retailers stock and offer for sale the following quantities of food products on a continuous basis in all of the following food groups: (1) Dairy, (2) Canned Fish, (3) Whole Grains, (4) Fruits and Vegetables, (5) Infant Formula and Food Items, and (6) Eggs, Beans, Peanut Butter, and Juice.
3. Other Retailers must stock the following quantities of food products at a minimum on a continuous basis.
 - a. *Dairy*
 - i. 3 pounds of domestic cheese.
 - ii. 13.5 gallons of milk, some of which must be available in half-gallon and 1-quart containers and include any combination of the following types of milk: whole milk, 1%, ½%, skim, fat-free milk, lactose-free milk, or buttermilk.
 - b. *Canned Fish*
 - i. 12 cans of tuna, salmon, or a combination of both.
 - c. *Whole Grains*
 - i. 108 ounces of breakfast cereal, including 36 ounces each of a whole grain cereal and at least 2 of the following types of cereal: oat, corn, wheat, rice, and multi-grain.
 - ii. 4 pounds of at least 2 types of whole grain foods. One type must be 16-ounce 100% whole wheat bread. Whole grain foods include whole grain bread, brown rice, oatmeal, corn tortillas, and wheat tortillas.
 - d. *Fruits and Vegetables*
 - i. 10 pounds of 2 types of fresh vegetables (e.g., broccoli, squash, etc.).
 - ii. 10 pounds of 2 types of fresh fruits (e.g., apples, oranges, etc.).

Nutrition Services Department of State Health Services

Effective September 1, 2016

Policy No. WV: 10.0

e. Infant Formula and Food Items

(Note: WIC authorized vendor may elect not to provide infant formula, if applicable then disregard this requirement).

Retailer must declare choice on vendor application.

- i. 31 cans of milk concentrate infant formula (contract brand).
- ii. 31 cans of soy concentrate infant formula (contract brand).
- iii. 9 cans of milk-based powder formula (contract brand).
- iv. 9 cans of soy powder formula (contract brand).
- v. 2, 8-ounce boxes of infant cereal (contract brand).
- vi. 64, 4-ounce containers of single ingredient infant fruits and vegetables.
- vii. 24, 2.5-ounce containers of single ingredient infant meat.
- viii. Specifics on Formula - If a WIC authorized vendor elects to provide infant formula, the following applies:
 1. A WIC authorized vendor shall purchase all its infant formula directly from:
 - a. Food wholesalers currently licensed in Texas in accordance with the Health and Safety Code, Chapter 431, the Texas Food, Drug, and Cosmetic Act, and 25 Texas Administrative Code, Chapter 229, who are Authorized Distributors of Record (ADOR) for Abbott Laboratories, Mead Johnson Nutrition Group, and/or Nestle, Inc.
 - b. Food manufacturers registered with the U.S. Food and Drug Administration, or
 - c. Retail food stores holding permits in accordance with the Health and Safety Code, Chapter 437 that purchase infant formula directly from Abbott Laboratories, Mead Johnson Nutrition Group, and/or Nestle, Inc.

f. Eggs, Beans, Peanut Butter and Juice

- i. 3, 1-dozen Grade A or AA large, medium, or small size eggs.
- ii. 3, 1-pound bags of dry beans.
- iii. 3, 18-ounce jars of peanut butter.
- iv. 12 containers of authorized juice of at least 2 flavors. Each flavor shall be available in both a 48-ounce and 64-ounce fluid container.

III. VENDOR SELECTION

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective September 1, 2016

Policy No. WV: 10.0

If a vendor applicant previously participated on the WIC Program but was disqualified, terminated, or voluntarily allowed its Agreement to expire, regardless of the reason, the store is considered a NEW applicant and must meet all criteria contained in this policy.

A. Initial Selection

1. The SA shall approve an interested vendor applicant for initial authorization as a WIC authorized vendor or authorized vendor outlet if the following items are met:
 - a. The SA receives an accurate and completed WIC vendor application from the vendor applicant.
 - b. The SA receives a completed and properly signed "Gross Food Sales Certification Form" indicating the vendor applicant's estimated gross food sales, defined as foods that can be purchased with SNAP benefits, and the percent estimated to be derived from WIC food sales.
 - c. The SA approves the Vendor Evaluation, which consists of the following and subject to Section V-Vendor Selection denials.
 - i. Vendor applicant certifies its outlet exists at the stated address on the vendor application, the facility has a minimum business area of 1,000 square feet, and signage closely matches the applicant vendor name listed on the vendor application. The SA or LA representative shall verify the physical location by making an on-site visit to the location.
 - ii. Vendor applicant certifies that an arms-length transaction has occurred if the vendor applicant purchases or acquires a vendor outlet that was in the process of being disqualified or was disqualified from the WIC program at the time of purchase/acquisition. Refer to Section V of this policy for specifics on authorization denials.
 - iii. Vendor applicant self-declares vendor type on application.
 - iv. Vendor applicant submits a valid retail food operations permit, food manufacturer's permit, or pharmacy license from the applicable city, county, district, or state authority.
 - v. Vendor applicant submits a valid Texas Sales and Use Tax Permit from the Texas Comptroller of Public Accounts.
 - vi. Vendor applicant submits proposed shelf prices of WIC approved foods. Vendor applicant certifies that submitted

Nutrition Services Department of State Health Services

Effective September 1, 2016

Policy No. WV: 10.0

- pricing will be posted and identifiable on opening day of the vendor outlet, and that shelf pricing shall not exceed the NTE contained in the APL, to ensure competitive pricing.
 - vii. Vendor applicant agrees to maintain Minimum Stocking Requirements on an ongoing basis as detailed in Section II of this policy.
 - viii. Vendor applicant agrees to have business integrity and certifies that during the last 6 years, current owners, officers, or managers have not been convicted of nor had a civil judgment for any activity indicating a lack of business integrity. Refer to Section V of this policy for specifics on authorization denials.
 - ix. Vendor applicant certifies that it does not appear on a USGSA or State of Texas suspension or debarment list. Refer to Section V of this policy for specifics on authorization denials.
 - x. Vendor applicant certifies that it is not currently disqualified from SNAP and has not been assessed a SNAP Civil Money Penalty for hardship for which a disqualification period that would otherwise have been imposed has not expired. If vendor meets any of these items then vendor applicant shall not be considered as a WIC authorized vendor.
- d. The SA received an accurate and completed LEB form from the vendor applicant.
 - e. The vendor applicant and/or WIC authorized vendor is required to comply with all criteria on day of opening vendor outlet.
- B. Final Selection
- 1. The SA shall determine final selection of an initially selected WIC authorized vendor or vendor outlet if the following items are met:
 - a. Vendor applicant passes its on-site evaluation, as detailed in Section IV of this policy.
 - b. Vendor applicant WIC-approved food shelf prices do not exceed the NTE contained in the APL.
 - c. Vendor applicant has no apparent conflict of interest with the vendor outlet designated LA or with the SA.
 - d. Vendor applicant has a history of compliance with WIC Program rules, policies, and procedures, if applicable.
 - e. Vendor applicant has participated in vendor interactive training.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective September 1, 2016

Policy No. WV: 10.0

- C. Upon final selection by the SA, the vendor applicant shall receive a full term WIC Vendor Agreement as detailed in Section VII of this policy. If final selection is disapproved by the SA, the applicant vendor shall be denied authorization. The vendor applicant shall have appeal rights as outlined in Texas WIC policy WV 13.0.

IV. ON-SITE EVALUATION

- A. An on-site evaluation shall be conducted at the authorized vendor outlet site at least two weeks after the vendor outlet opening day. The on-site evaluation will confirm shelf prices, minimum stock, and competitive pricing of WIC authorized food items. The SA shall coordinate with the LA and the WIC authorized vendor to schedule the on-site evaluation, and either the SA or LA representative shall complete the evaluation. The vendor applicant and/or WIC authorized vendor is required to comply with all criteria as described in this policy on day of opening vendor outlet.
- B. The on-site evaluation shall be conducted by either the SA or LA representative. The SA or LA representative shall:
 - 1. Collect WIC authorized food shelf prices. Shelf prices will be verified against actual WIC EBT claim data for competitive pricing purposes.
 - 2. Verify and validate minimum stocking requirements by vendor type as defined in Section II of this policy.
 - 3. Verify and validate that the WIC authorized vendor outlet is clean, as determined by the SA or LA representative, with fresh merchandise (not having for sale expired food items). Expired food dates on WIC authorized food products are prohibited.
 - 4. Verify and validate that the WIC authorized vendor outlet has posted prices for all WIC authorized food products along with proper labeling.
 - 5. Verify and validate that the WIC authorized vendor outlet agrees not to allow home delivery of food products purchased with WIC EBT benefits.
 - 6. Verify and validate that the WIC authorized vendor outlet has participated in vendor interactive training.
- C. The WIC authorized vendor shall have the opportunity to review the information of the on-site evaluation. The SA or LA representative shall provide a copy of the completed on-site evaluation form to the vendor

Nutrition Services Department of State Health Services

Effective September 1, 2016

Policy No. WV: 10.0

outlet representative at the time of the on-site evaluation.

- D. A vendor shall receive up to two on-site evaluation passes. If the vendor fails both passes they are not eligible for another evaluation until at least six months from the last evaluation.

V. VENDOR SELECTION DENIALS

- A. The SA shall notify a vendor applicant in writing of any authorization disapproval(s). Such notification will include appeal rights consistent with 7 CFR 246.18 as outlined in Texas WIC policy WV 13.0.
- B. A vendor applicant and/or WIC authorized vendor shall be denied authorization for providing false information at any point during the vendor selection process or failing either the initial or final selection process, which includes but is not limited to the Vendor Evaluation or On-site Evaluation.
- C. A vendor applicant deemed ineligible for initial authorization may be authorized on a case-by-case basis, if the vendor is needed to address inadequate participant access to WIC authorized vendor outlets as outlined in Texas WIC Policy WV 3.0.
- D. A vendor applicant and/or WIC authorized vendor shall be denied authorization if the vendor purchases or acquires a vendor outlet that was in the process of being disqualified or was disqualified from the WIC program at the time of acquisition. If the SA determines that the transaction was not an arms-length transaction, the vendor application shall not be considered until the disqualification period has been served.
- E. A vendor applicant and/or WIC authorized vendor shall be denied authorization if an owner, partner, principal stockholder, officer, director, manager, or operator of the vendor applicant and/or WIC authorized vendor was an owner, partner, principal stockholder, officer, director, manager, or operator of another WIC authorized vendor or authorized vendor outlet which has been disqualified or which has violated WIC Program Vendor Agreement procedures, policies, rules, or regulations.
- F. New outlets for an existing WIC authorized vendor shall be denied

Nutrition Services Department of State Health Services

Effective September 1, 2016

Policy No. WV: 10.0

authorization if 50% or more of its vendor outlets is in a disqualification or termination status at the time of submission requesting authorization of new vendor outlets. Business integrity, which includes, but is not limited to prior non-compliance with the WIC Program's federal and state statutes and regulations, rules, policies, and procedures shall be considered by the SA when evaluating new outlets.

- G. If a representative from the SA or LA visits an applicant vendor outlet or WIC authorized vendor outlet to conduct the required on-site evaluation at a time previously agreed upon, and the vendor outlet cannot be evaluated and/or is not ready for the evaluation at the agreed upon time, the vendor outlet shall be deemed to have failed the evaluation, and the vendor outlet shall not be authorized.
- H. A vendor applicant or WIC authorized vendor that fails to accurately provide certification of business integrity shall not be considered for authorization.
- I. A vendor applicant or WIC authorized vendor that appears on a USGSA or State of Texas suspension or debarment list shall not be considered as a WIC authorized vendor or vendor outlet.

VI. VENDOR COMPETITIVE PRICING AND MAXIMUM ALLOWABLE REIMBURSEMENT

- A. Competitive Pricing Classification
 - 1. WIC authorized vendors shall be classified as PWIC, TWIC, or Other for competitive pricing purposes. A PWIC shall have above 50% in WIC sales. A TWIC shall have up to 50% in WIC sales, and the SA may reassign any WIC authorized vendor to the Other classification and/or an alternative comparison group when the WIC authorized vendor is a national discount superstore, a pharmacy, a vendor that has elected to provide only exempt infant formula, a military commissary, or a vendor that is not, in the SA's judgment, characteristic of other comparison groups. The SA may also reassign a WIC authorized vendor to an alternative comparison group if the vendor is the only vendor outlet in its comparison grouping. At the SA's discretion, some stores, including but not limited to Wal-Mart and/or Military Commissaries, may be placed into their own comparison group.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective September 1, 2016

Policy No. WV: 10.0

2. WIC authorized vendors shall be initially classified based on their vendor type, as verified by the SA during the on-site evaluation. A Full-line Grocer shall be classified as a TWIC unless the Full-line Grocer indicates that (1) its store opening is dependent on WIC authorization, or (2) the Full-line Grocer indicates it receives, or expects to derive, more than 50% of its annual food sales revenue from WIC sales. A Pharmacy and Other retailers shall be classified as PWIC. These classifications shall remain in effect until the vendor submits to the SA documentation substantiating WIC sales. [NOTE: Documentation consists of sales and use tax and/or fuel reports submitted to the State Comptroller.]
3. WIC authorized vendors shall be properly classified after 4 months of WIC sales. An analysis of WIC sales shall be completed to determine proper classification, which consists of examining a vendor outlet's SNAP sales to determine if they exceed WIC sales. If a vendor outlets SNAP sales exceed WIC sales then the vendor outlet will classified as a TWIC. If WIC sales exceed SNAP sales, then the store will be classified as PWIC. WIC authorized vendors shall have the opportunity to provide documentation substantiating WIC sales comprising 50% or less of gross food sales. [NOTE: Documentation consists of sales and use tax and/or fuel reports submitted to the State Comptroller. Documentation must show that WIC sales for the 4-month period were less than or equal to 50% of total gross food sales counting only foods eligible for sale under the SNAP in order to qualify as a TWIC.]
4. If the WIC authorized vendor fails to provide documentation to substantiate WIC sales in a timely manner (defined as submittal within 30-days), or documentation fails to support the preferred classification then the vendor will be classified as PWIC.
5. WIC authorized vendors may petition the SA for reclassification by submitting a written request to the SA and stating the reasons upon which vendor believes it should be reclassified as well as the comparison group it should be placed in. The WIC authorized vendor shall have appeal rights as outlined in Texas WIC policy WV 13.0.
6. The SA will assess a Pharmacy for status as a TWIC or PWIC vendor. Pharmacies are subject to the Not to Exceed amounts but may be exempted from competitive price criteria and maximum allowable reimbursement levels as allowed under the provisions of 7 CFR 246.12(g)(4)(iv) for redemption of exempt infant formula and/or WIC-eligible medical food.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective September 1, 2016

Policy No. WV: 10.0

B. Calculation and Use of Competitive Pricing Data

1. Food prices by category/subcategory shall be compared for competitive pricing purposes according to the criteria below, in addition to Section VI(C).
 - a. TWICs pricing shall be compared utilizing price regions and sales volume bands. WIC sales volume bands are:
 - Band 1 = \$0.00 - \$1,999.99
 - Band 2 = \$2,000.00 - \$5,999.99
 - Band 3 = \$6,000.00 - \$19,999.99
 - Band 4 = \$20,000 or greater
 - b. TWICs pricing determined through the end-of-process month analysis shall not collectively exceed 110% of the average prices paid to TWICs in the process month.
 - c. PWICs pricing shall be compared utilizing the statewide average pricing of TWICs.
 - d. PWICs pricing determined through the end-of-process month analysis shall not have a recoupment that exceeds 8% of the total dollar amount paid to PWICs in the process month.
 - e. The SA will confirm cost neutrality between TWICs and PWICs by ensuring that prices paid, after all edits and recoupments, to PWICs does not exceed the statewide average price paid to TWICs (regardless of their price region or WIC sales volume band).
 - f. Both TWICs and PWICs shall be held to a MAR derived from the prices paid to TWICs.
 - g. New authorized WIC vendors and authorized outlets shall have food prices (collected during the on-site evaluation) compared to the statewide average pricing of TWICs. The SA may exclude the prices of Wal-Mart and/or Military Commissaries in the averages.
2. Not To Exceed (NTE) Pricing
 - a. A NTE amount is put in place across the board for all WIC approved foods by food category/subcategory and is applicable to any competitive pricing classification.
 - b. NTE amounts are enforced as prepayment edits on each unit of food product (e.g. by ounce, pound, can, etc.) purchased within a calendar month for claims processing.
3. Maximum Allowable Reimbursement (MAR)
 - a. TWICs will be held to a MAR of 125% of the average price paid (after edits and recoupments) by food category/subcategory, for their respective price region and sales volume band. When

Nutrition Services Department of State Health Services

Effective September 1, 2016

Policy No. WV: 10.0

calculating average prices the SA may exclude prices paid to Wal-Mart and/or Military Commissaries.

- b. PWICs will be held to a MAR equal to the statewide average price paid by food category/subcategory to TWICs. Prices paid to Wal-Mart and/or Military Commissaries will be included in the calculation.
- c. At the end of each calendar month an analysis shall be completed to determine the average payment totals in order to implement the MAR reimbursement calculation process. WIC approved food category/subcategory items, except fruits and vegetables, exempt infant formula, and WIC medical foods shall be analyzed. The MAR will be implemented by dividing the total price paid for a month for a food category/subcategory by the total number of units redeemed by TWICs in the price region and band.
- d. TWICs that received reimbursement for an amount that exceeds the 125% of the average price of one or more category/subcategories for the vendor's respective price region and sales volume band will have a recoupment adjustment of the difference (reimbursement amount less 125% of the average price amount) that will be applied against a subsequent month's claim(s).
- e. PWICs that received reimbursement for an amount higher than the statewide average pricing of one or more category/subcategories of TWICs will have a recoupment adjustment of the difference (reimbursement amount less average amount) that will be applied against a subsequent month's claim(s).

C. Remaining Competitively Priced

- 1. Upon selection as a WIC authorized vendor or authorized vendor outlet, the vendor must not increase its food shelf pricing to a level that exceeds the pricing by food category/subcategory for its approved cost competitiveness classification (TWIC or PWIC) (refer to Section VI(A) and (B) in this policy). A vendor's failure to remain cost competitive (CFR 246.12(h)(3)(viii)) is cause for termination of the Vendor Agreement.
- 2. The SA may perform reviews of a WIC vendor's compliance with competitive pricing at any time during the term of the Vendor Agreement. The SA shall provide written notification of non-compliance to any WIC vendor. If on a subsequent assessment within a 12-month period the non-compliant vendor fails to comply with competitive pricing, the SA will terminate the Vendor Agreement.
- 3. If WIC authorized vendors classified as TWIC, have overall prices that

Nutrition Services Department of State Health Services

Effective September 1, 2016

Policy No. WV: 10.0

are at or below 110% of the average price paid within its respective price region and sales volume band (averages calculated using prices paid to TWICs and excluding prices paid to PWICs) then the vendor will be deemed price competitive.

4. If WIC authorized vendors classified as PWIC, have overall prices that are at or below the statewide average prices paid to TWICs then the vendor will be deemed price competitive.
5. A WIC authorized vendor shall have a vendor outlet terminated for non-competitive pricing and must wait a period of 6 months before that vendor outlet is considered for re-authorization. A vendor may apply for authorization after the 6 month waiting period.

VII. VENDOR AGREEMENT

- A. If a vendor applicant or WIC authorized vendor passes initial selection, the SA shall authorize the vendor and provide a WIC Vendor Agreement for a period of up to 3 years, which shall include all authorized outlets. If a vendor applicant does not pass final selection the WIC Vendor Agreement will be terminated and the authorization denied within 60 days of the final selection approval date. The disqualification of one outlet does not affect the authorization of other outlets covered by the Vendor Agreement.
- B. A vendor applicant or WIC authorized vendor must not conduct WIC EBT transactions at the vendor outlet for which application is being made until the vendor receives a WIC Vendor Agreement fully executed that encompasses that outlet.
- C. A Pharmacy that submits a claim for a WIC-eligible food item other than an exempt infant formula and/or WIC-eligible medical food will be disqualified as a WIC authorized vendor. The pharmacy may not apply for designation again until 6 months after the date of the SA's disqualification notification. Pharmacies with a current Vendor Agreement who seek reauthorization shall reapply and shall be evaluated for issuance of a subsequent Vendor Agreement under WIC Program procedures, policies, rules, and regulations and shall be reauthorized unless notified in writing by the SA at least 15 days before expiration of the Vendor Agreement
- D. A change of ownership of an authorized vendor outlet or account terminates the authorization of that vendor outlet under the Vendor

Nutrition Services Department of State Health Services

Effective September 1, 2016

Policy No. WV: 10.0

Agreement. A change of ownership occurs when all, or substantially all, of the property or assets of a vendor are acquired by a purchaser in an arms-length transaction, as determined by the SA.

1. If a store/location under previous ownership is not disqualified or is not in the process of being disqualified at the time of acquisition, and/or the previous owner has not been notified that the vendor agreement for that store location/business will be allowed to expire, and the acquiring party is in compliance with the rules, regulations, and vendor qualification criteria of the WIC Program, the acquiring party may, upon request, be considered for authorization as a WIC vendor.
 - a. The applicant vendor must submit a written notification stating that a change of ownership has been effected and duly executed by the seller and purchaser or their duly authorized officers or other agents.
 - b. The notification shall include, at a minimum, the following information and any other information the SA deems necessary: name and business address of the seller; name and business address of the purchaser; WIC vendor account number and outlet number, if applicable; name and street address of the vendor outlet location(s); effective date of ownership change; and State of Texas Comptroller tax ID number of the new owner.
2. WIC authorized vendors shall provide the SA with written notification prior to the sale, including the date the outlet being sold will cease to accept WIC EBT food benefits.

E. The SA may implement a vendor moratorium at any time during the Vendor Agreement period.

F. The Vendor Agreement does not constitute a license, since a vendor does not require the SA's approval to engage in the retail grocery business in Texas and the vendor would not effectively be deprived of this right in the absence of WIC Program authorization.

G. The Vendor Agreement does not convey any property interest, since federal law does not give rise to a legitimate claim of entitlement for vendors.

H. The terms of authorization are established in the Vendor Agreement. The

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective September 1, 2016

Policy No. WV: 10.0

Vendor must comply with all applicable Federal and State statutes, regulations, policies, and procedures governing the WIC Program. The contractual relationship ends with the expiration or termination of the Vendor Agreement. Termination of the Vendor Agreement including a WIC authorized vendor's unilateral termination after receipt of notification of a violation, does not deprive the SA of jurisdiction to impose price adjustments, claims, or sanctions for vendor errors or WIC Program violations. Such notification will include appeal rights consistent with 7 CFR 246.18 as outlined in Texas WIC policy WV 13.0.

- I. The SA may amend a WIC vendor Policy or State of Texas Administrative Code rule during the term of the agreement with written notification to WIC vendors.
- J. The SA as well as officers, agents, and employees of the State Agency are not responsible for losses incurred by a vendor as a result of the disqualification, termination, and/or expiration of the Vendor Agreement.
- K. Upon the WIC Vendor Agreement end date, the vendor must reapply for authorization of the agreement to continue as a WIC vendor. In accordance with WV 11.0 and the WIC Vendor Agreement, an on-site evaluation may be conducted at any time during the Agreement period.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2016

Policy No. WV: 11.0

Selection of WIC Vendors for Reauthorization for Participation

Purpose

To describe State Agency (SA) procedures for selecting vendors for reauthorization from one WIC Vendor Agreement period to another with no break in service. A break in service occurs when a vendor quits, is disqualified, terminated and/or the Vendor Agreement expired and is not renewed.

Authority

7 CFR Section 246.12; 246.18

Policy

- I. WIC authorized vendors with a current Vendor Agreement who seek reauthorization shall reapply and shall be evaluated for issuance of a subsequent Vendor Agreement under WIC Program procedures, policies, rules, and regulations and shall be authorized unless notified in writing by the SA at least 15 days before expiration of the Vendor Agreement.

- II. Prior to reauthorization, the SA shall assess and review the qualifications of all vendors to assure that each continues to meet the WIC Program's Selection Criteria, in accordance with WIC policy WV: 10.0. Criteria utilized in assessment and determination of qualifications for reauthorization include, but are not limited to:
 - A. Competitive prices in accordance with WIC Policy WV: 10.0.

 - sC. Redemption of declared Least Expensive Brands (LEB) in accordance with WIC Policy WV: 02.0.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2016

Policy No. WV: 11.0

- D. Previous compliance with WIC Program procedures, policies, rules, and regulations. The vendor has satisfactorily complied with WIC EBT food instrument redemption and transaction submission procedures, policies, rules, and regulations.
 - E. Use of the WIC acronym or WIC logo. If the SA determines that the vendor failed to comply with the prohibitions on the use of the WIC acronym or WIC logo, after having received at least three written warnings, or having been disqualified for and/or having paid a Civil Money Penalty (CMP) in lieu of a disqualification for failing to comply with WIC Policy in regard to the use of the WIC Acronym and/ or logo, the WIC Vendor Agreement will not be renewed. If the vendor receives a warning after paying a CMP or receives a warning after being disqualified for failing to comply with the prohibitions on the use of the WIC Acronym and/or logo, the Vendor Agreement will not be renewed.
 - F. Failure to attend vendor training. The vendor agreement shall not be renewed if a vendor or a vendor representative has not attended a WIC vendor training within three years from the last date a vendor representative attended a WIC vendor training.
 - G. Valid Permit. All vendors must have a valid retail food operation permit or food manufacturer's permit from the applicable city, county, district, or state health authority.
- III. A history of noncompliance with WIC Program procedures, policies, rules, and regulations shall be considered by the SA in determining if the vendor is eligible for a subsequent agreement.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective August 1, 2016

Policy No. WV: 11.0

-
- IV. The SA may allow a vendor's agreement to expire and not be renewed if the vendor has a history of noncompliance with provisions in the Vendor Agreement or the WIC Program procedures, policies, rules, and/or regulations.
- A. Expiration of the Vendor Agreement is not subject to appeal.
 - B. In the event the vendor's agreement has been allowed to expire due to previous noncompliance, a vendor's request for reauthorization shall not be considered until at least six months from the expiration date of the vendor's last agreement.
- V. The SA will terminate the Vendor's Agreement during its term if the vendor no longer meets vendor selection and/or limiting criteria, including but not limited to:
- A. Competitive pricing in accordance with Policy WV: 10.0
 - B. LEB redemptions in accordance with WIC Policy WV: 2.0
 - C. Noncompliance with the Vendor Agreement, Federal/State statutes, and/or WIC Program regulations, policies, and procedures.

Termination of the Agreement is subject to administrative review in accordance with Policy WV: 01.0 and Policy WV: 13.0. In the event the Vendor Agreement is terminated, the vendor's request for subsequent application shall not be considered until at least six months from the date of termination.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. WV:12.0

WIC EBT RETAIL VENDOR ECR SYSTEMS

PURPOSE

To define retail vendor and State Agency (SA) responsibilities for Electronic Benefit Transfer (EBT) food delivery systems.

AUTHORITY

42 US Code §1786(h)(12)(E-G); 24612 W-AA

POLICY

A WIC applicant vendor must demonstrate the capability to accept WIC program benefits electronically through the SA's EBT system prior to authorization to participate in the WIC Program. The retail vendor may demonstrate this capability by using its own multifunctional equipment or through use of a separate system that transacts only WIC EBT smart card redemptions. Limited SA reimbursement for single function equipment to retailers is available as outlined in this policy.

Notwithstanding the provisions of this policy, reimbursements will not be paid unless the SA has concluded that sufficient funds are available for this purpose.

EBT System Components and Responsibilities

I. Texas WIC EBT System

- A. WIC food benefits in Texas are provided to eligible participants with the use of a smart card at authorized retail vendors throughout the state.
- B. Current retail vendors must maintain a certified electronic cash register (ECR) system in each authorized vendor outlet that accurately redeems WIC benefits from participants' smart cards and accurately submits claims for reimbursement of WIC food

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. WV:12.0

benefits, and receives Hot Card Lists (HCL), Approved Product Lists (APL), and Auto Reconciliation Files (ARF) from the EBT host system.

- C. An EBT host system will be available to accept and process the vendor's claims/payments for the reimbursement of food benefits accepted by the retailer and to provide HCL files, APL files, and ARF files to the vendor.
- D. A retailer who applies to become a WIC vendor must demonstrate its capability to accept WIC Program benefits and exchange claim, APL, HCL, and ARF files electronically prior to being authorized by the WIC Program.

II. State Reimbursements for WIC Retailer ECR Systems

- A. An authorized store that conducts WIC business at a location that has not previously received an ECR reimbursement from the WIC Program may request reimbursement for a WIC-only ECR system as provided in Sections II & III of this policy if:
 - 1. The vendor is not able to accept WIC electronic benefit transfers using its current ECR equipment or modification of that equipment.
 - 2. The vendor purchases a new certified ECR system or modifies existing equipment from an approved Texas point-of-sale (POS) system provider in a configuration that has been previously certified by the WIC Program.
 - 3. To be eligible for reimbursement the ECR system must be used solely for WIC sales either by functional limitations or by license and not used as a multi-tender system. This includes, but is not limited to, the ability to read magnetic stripe cards or accept cash purchases through the use of a cash drawer. This does not preclude the system from including a hybrid smart card/magnetic stripe card reader, but the magnetic stripe card capability must not be active.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. WV:12.0

4. Current vendor locations participating in the WIC Program using multi-tender ECR systems are not eligible for reimbursement in addition to any previous reimbursement received prior to the effective date of this policy.

B. Amount of Potential Reimbursements

1. WIC will reimburse authorized vendors purchasing a commercial one-lane ECR system, or modification to existing system, up to the maximum amount listed in Section II.B.3.
2. Reimbursement for the purchase of a one-lane commercial WIC-system is also contingent on a retail vendor's continuing compliance with the WIC vendor agreement, plus federal and state statutes, regulations, policies, and procedures governing the WIC Program. Additionally, the following terms and conditions apply to the reimbursement of WIC-only ECR systems:
 - a. Vendors will be considered for initial ECR reimbursement as described above in Section II.B.1 after six months (180 days) of WIC Program operations. If at that point the vendor has complied with the WIC Vendor Agreement, policies, and all on-going selection criteria during the first six months of operation, WIC will process the vendor's ECR reimbursement request. If the vendor has not met all requirements of the WIC Vendor Agreement, policies, and on-going selection criteria during the first six months of operation or the vendor is pending termination for any reason, the vendor shall be ineligible for ECR reimbursement under this policy.
 - b. Vendors will be evaluated at least twice annually to ensure they continue to meet on-going selection criteria. If the vendor fails to meet on-going selection criteria, the Vendor Agreement will be terminated and the vendor must return to the WIC Program a pro rata share of the total original ECR reimbursement received to the SA. Reimbursement to the SA is based on the pro rata straight-line unused portion

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. WV:12.0

of the 12 months since the ECR system was certified by the SA.

- c. Any retail vendor that receives ECR reimbursement that is terminated from the WIC Program for fraud, abuse, or violation of WIC policies or who ceases to participate as a WIC vendor within 12 months of the EBT capable date, will return a pro rata share of the total reimbursement to the SA unless the vendor is re-authorized by the WIC Program within a six-month period following termination. Vendor repayment to the SA is based on the pro-rata straight-line unused portion of the 12 months since the ECR system was deemed EBT-capable. If the vendor re-applies after the six-month period, the vendor must become EBT capable without further reimbursement.
- d. The SA, at its option, may waive the return of the pro rata share of the total ECR reimbursement described in Section II.B.2.b-c if an authorized WIC vendor outlet ceases to participate as a WIC vendor and the ECR equipment at the closing outlet is transferred to another WIC-authorized vendor outlet (or account) within the same corporate structure and used solely for the purpose of WIC EBT food benefit redemptions.
- e. THE SA will not provide any ECR reimbursement to a store vendor/owner at a store location that has previously received an ECR reimbursement. If an existing vendor sells any or all of its stores after the SA has reimbursed the vendor for the purchase of an ECR, as a condition of being eligible for reimbursement, the selling vendor agrees in advance of any such sale that the WIC-only ECR system will be provided to the purchaser of the store(s) as part of the sale. Failure of the purchasing vendor to seek, accept, or maintain the seller's ECR system does not obligate the SA to provide additional ECR reimbursement for any previously reimbursed store location(s).

Nutrition Services Department of State Health Services

Effective October 1, 2016

Policy No. WV:12.0

- f. Any ECR system purchased and reimbursed under this policy must be used solely for the purpose of transacting WIC EBT benefits for a period of one year. If the WIC ECR system reimbursed under this policy is used for the transaction of any tender other than WIC (including, but not limited to cash, credit, and/or magnetic stripe card), the vendor must return the full amount of any reimbursement it received to the SA.
 - g. Terminations, as referenced in Section II.B.2.c, are subject to the consideration of participant access as described in WIC Policy WV 03.0.
3. Reimbursement will be based on the actual cost of a WIC-only one-lane ECR system at a cost not exceeding \$2,000.00, plus tax. If a vendor purchases a WIC-only one lane system that exceeds \$2,000.00 plus tax, the vendor's reimbursement will be capped at \$2,000.00, plus tax.

The SA will reimburse the eligible vendor up to the maximum amount listed above, plus applicable State sales tax, for a one-lane WIC ECR system. This reimbursement can only be applied to a complete WIC-capable one-lane ECR system to be used for conducting transactions in a retail outlet that conducts WIC business.

- 4. Regardless of any provision of this policy, any system that does not ultimately achieve in-store WIC certification will not be eligible for reimbursement by the SA.
- 5. Enforcement of all warranties and maintenance agreements is a responsibility of the individual vendor.
- 6. A retail vendor is not precluded from leasing equipment for use in WIC EBT at its own option and cost. The leasing of ECR equipment for use in WIC EBT is not reimbursable under this policy. Leasing of ECR equipment does not relieve the vendor from the EBT capability requirements elsewhere in this document.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. WV:12.0

III. REIMBURSEMENT PROCEDURE

- A. The vendor must initiate the ECR reimbursement request for an ECR system by submitting the following documentation no later than 180 calendar days after the store's system is deemed EBT Capable:
1. The Completed Reimbursement Request Form to the SA for reimbursement (see Attachment 1). Reimbursement Requests received more than 180 calendar days after the store EBT capable date will not be paid.
 2. An invoice from a Texas WIC-approved ECR vendor that is numbered and dated and identifies the retail vendor by name, the store's physical address, equipment configuration for a one-lane system including confirmation that the system is limited by license or software to function solely to transact only WIC transactions, and detailed item pricing for the equipment.
 3. Proof of payment (check, money order, receipt for cash, or ECR vendor installation that the invoice has been paid in full). Promissory notes will not be considered as proof of payment.
 4. Any signed Vendor Agreement addenda, if required, to authorize the reimbursement.
 5. WIC vendors who meet the requirements listed in Section II.B.2.a and Sections III.A.1-4 will be reimbursed according to Section II.B.3. The SA will process a State Purchase Voucher to reimburse the vendor within 30-calendar days of receipt of all completed and approved documentation.
- B. Payment for vendor requests for ECR reimbursement that are received within 180 calendar days of EBT Capable and that meet all the requirements of Section II.A above, in addition to 6 months of WIC Program Operations, will be considered for payment. If the request for ECR reimbursement and all subordinate requirements/documentation

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective October 1, 2016

Policy No. WV:12.0

are not received within 180 calendar days after installation, the vendor will not be paid a reimbursement by the SA.

- IV. Reimbursement procedures provided in this policy are subject to change if funds become unavailable or policy and/or guidance from USDA related to reimbursement changes. All changes, revisions, or waiver of this policy and its procedures must be approved by the Director, Texas WIC Nutrition Services Section. These changes, revisions, or waivers may be implemented on an emergency basis or through the normal approval/revision cycle depending on circumstances.

Nutrition Services
Department of State Health Services

Effective October 1, 2016

Policy No. WV:12.0

WIC-Only ECR Reimbursement Request

WIC Vendor Information:

*Name _____ Account# _____
Outlet# _____

*Store's Physical Address:

Contact Person: _____

Telephone No. _____

** Store name and address must match information in WIC Vendor Agreement*

EBT ECR System Information:

ECR System Provider:

ECR Vendor's Invoice No. _____

Date of Invoice _____

Date of ECR System deemed EBT Capable:

Date of ECR Vendor provided Training to WIC-Vendor:

Type of Payment for ECR System:

Cash

Check

Proof of Payment Attached:

Yes

Money Order

No

Credit Card

Note: ECR Vendor's Invoice must be attached to this Request for ECR Reimbursement. Invoice must meet all the requirements of State Policy WV:12.0, Section III.A.

Nutrition Services
Department of State Health Services

Effective October 1, 2016

Policy No. WV:12.0

WIC Vendor Certification:

I certify that the information provided in this Request for ECR Reimbursement is true and correct to the best of my knowledge and that the ECR system will be used solely for the purpose of processing WIC EBT transactions.

WIC-Vendor Signature

Date

State Use Only:

1. Vendor Eligibility for Reimbursement:

Date EBT Capable: _____ # Lanes _____

If not Eligible, Reason:

2. ECR Vendor Invoice Complete and Paid by WIC Vendor (See State Policy WV:12.0, Section III.A):

Yes

No. Deficiency:

3. Amount of Reimbursement for which vendor is eligible:

\$ _____

Comments:

Approval:

1. WIC Staff Review: _____

2. Manager Approval: _____

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: December 1, 2016

Policy No. WV:13.0

WIC Vendor Right to Administrative Review

Purpose

To describe State Agency (SA) process for providing the right of administrative review (also known as Fair Hearing, pursuant to the Texas Administrative Code, Title 25, section § 1.41 to § 1.55) to a WIC vendor who has experienced and wishes to appeal an adverse action exercised by the SA and/or SA representative.

Authority

7 CFR Sections 246.12 and 246.18; the Vendor Agreement; and the Texas Administrative Code, Title 25, section § 1.41 to § 1.55

I. Adverse Actions Subject to Full Administrative Review

The SA will provide vendors the opportunity for a full administrative review, pursuant to the Texas Administrative Code, Title 25, section § 1.41 to § 1.55, to appeal the following adverse actions:

- A. Denial of authorization based on the application of the vendor selection criteria for minimum variety and quantity of authorized supplemental foods or on a determination that the vendor is attempting to circumvent a sanction
- B. Termination of an agreement for cause
- C. Disqualification
- D. Imposition of a fine or a civil money penalty in lieu of disqualification.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: December 1, 2016

Policy No. WV:13.0

II. *Adverse Actions Subject to Abbreviated Administrative Review*

The SA will provide Abbreviated Administrative Reviews to vendors that appeal the following adverse actions. An Abbreviated Administrative Review is an internal, formal desk review in which the contested issue is evaluated and decided by a neutral employee of the SA, designated by the director or director designee. The SA, at its sole discretion, may decide to provide a full administrative review for any of these types of adverse actions:

- A. Denial of authorization based on the vendor selection criteria for business integrity or for a current Supplemental Nutrition Assistance Program (SNAP), formerly known as the Food Stamp Program, disqualification or Civil Money Penalty (CMP) for hardship.
- B. Denial of authorization based on the application of the vendor selection criteria for competitive price.
- C. The application of the SA's vendor peer group criteria and the criteria used to identify vendors that are above-50-percent vendors or comparable to above-50-percent vendors.
- D. Denial of authorization based on a SA established vendor selection criterion if the basis of the denial is a WIC vendor sanction or a SNAP withdrawal of authorization or disqualification.
- E. Denial of authorization based on the SA's vendor limiting criteria.
- F. Denial of authorization because a vendor submitted its application outside the timeframes during which applications are being accepted and processed as established by the SA.
- G. Termination of an agreement because of a change in ownership or location or cessation of operations.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: December 1, 2016

Policy No. WV:13.0

- H. Disqualification based on a trafficking conviction.
 - I. Disqualification based on the imposition of a SNAP CMP for hardship.
 - J. Disqualification or a CMP imposed in lieu of disqualification based on a mandatory sanction imposed by another WIC State Agency (i.e. Arkansas, New Mexico);
 - K. A CMP imposed in lieu of disqualification based on a SNAP disqualification; and,
 - L. Denial of an application based on a determination of whether an applicant vendor is currently authorized by SNAP.
- III. The SA will not provide administrative reviews (Full or Abbreviated) to vendors that appeal the following actions:
- A. The validity or appropriateness of the SA's vendor limiting or selection criteria for minimum variety and quantity of supplemental foods, business integrity, and current SNAP disqualification or civil money penalty for hardship.
 - B. The validity or appropriateness of the SA's selection criteria for competitive price, including, but not limited to, vendor peer group criteria and the criteria used to identify vendors that are above-50-percent vendors or comparable to above-50-percent vendors.
 - C. The validity or appropriateness of SA's participant access criteria and the SA's participant access determinations concerning whether disqualification of a vendor would result in inadequate participant access.
 - D. The SA's determination to include or exclude an infant formula manufacturer, wholesale, distributor, or retailer from the SA's

Nutrition Services Department of State Health Services

Effective: December 1, 2016

Policy No. WV:13.0

list of infant formula wholesalers, distributors, and retailers licensed under State law (including regulations), and infant formula manufacturers registered with the Food and Drug Administration (FDA) that provide infant formula.

- E. The validity or appropriateness of the SA's prohibition of incentive items and the SA's denial of an above-50-percent vendor's request to provide an incentive item to customers.
- F. The SA's determination whether to notify a vendor in writing when an investigation reveals an initial violation for which a pattern of violations must be established in order to impose a sanction.
- G. The SA's determination whether a vendor had an effective policy and program in effect to prevent trafficking and that the ownership of the vendor was not aware of, did not approve of, and was not involved in the conduct of the violation.
- H. Denial of authorization if the SA's vendor authorization is subject to the procurement procedures applicable to the SA.
- I. The expiration of a vendor's agreement.
- J. Disputes regarding WIC EBT food instrument and cash-value benefit payments or claims assessed against a vendor (other than the opportunity to justify or correct a vendor overcharge or other error).
- K. Disqualification of a vendor as a result of disqualification from the SNAP.
- L. The validity or appropriateness of the SA's WIC Vendor Agreement provisions.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: December 1, 2016

Policy No. WV:13.0

IV. Full Administrative Review Procedures

- A. The SA and/or SA representative shall provide a vendor with written notification of an adverse action, the cause(s) for the action, the effective date of the action, and the right to appeal the adverse action through a Full Administrative Review. The Full Administrative Review process provides the vendor with a fair hearing before a neutral hearing examiner.
- B. The SA and/or SA representative shall provide a vendor with written notice of an adverse action at least 20 days prior to the effective date of the action.

Exception: When a vendor is denied authorization or is disqualified due, in whole or in part, to conviction for trafficking in food instruments or selling firearms, ammunition, explosives, or controlled substances in exchange for food instruments, the SA and/or SA representative must make the denial of authorization or disqualification effective on the date of receipt of the notice of adverse action. This disqualification from WIC may result in disqualification as a retailer in SNAP. Such disqualification is not subject to administrative or judicial review under SNAP.

- C. A vendor wishing to appeal an adverse action shall submit to the SA a written request for a hearing within 20 days of notification of denial or adverse action. The date of notification of denial of authorization or adverse action shall be the date the letter is transmitted to the vendor (e.g.: email date).

The vendor's request for a hearing must be received by the SA on or before the 20th day from the notification of denial or adverse action, with the responsibility for timely submission residing with the affected vendor. The written request shall, at a minimum, describe the action being appealed.

Nutrition Services Department of State Health Services

Effective: December 1, 2016

Policy No. WV:13.0

- D. When a vendor appeals an adverse action, the adverse action may, at the sole discretion of the SA, be postponed until a hearing decision is reached, with the exception in Section IV.B above.
1. Appealing an adverse action does not relieve a vendor permitted to continue participating in the program while an appeal is pending from the obligation of continued compliance with the terms of the written agreement with the SA.
 2. The SA will not postpone the collection of a disallowance or vendor claim and/or an invoice audit disallowance and/or dispute regarding electronic benefit transaction or cash-value benefit transaction disallowance pending a hearing decision.
- E. The SA shall provide a vendor appealing an adverse action the following:
1. At least ten days advance notice of the time and place for the hearing;
 2. The opportunity to only reschedule the hearing one time for a maximum extension of 15 business days from the originally scheduled hearing date. On a case-by-case basis, the Hearing Examiner may consider extreme circumstances for extending beyond the one extension and/or beyond 15 business days.
 3. The opportunity to examine the case file, claim file, and any other documents or records the SA intends to use at the fair hearing at a reasonable time before and during the hearing. There shall be no other discovery.
 4. The opportunity to be represented by counsel if desired.

Nutrition Services Department of State Health Services

Effective: December 1, 2016

Policy No. WV:13.0

5. The opportunity to call witnesses and present documentary evidence.
6. The opportunity to confront and cross-examine adverse witnesses except that such examination shall be conducted behind a protective screen or other device when necessary to protect the identity of monitors.
7. An impartial decision-maker who will prepare a written decision based solely on whether the SA has correctly applied federal and state statutes, regulations, rules, policies and procedures governing the program according to the evidence presented at the hearing.
8. Written notification of the final decision within 90 days from the date of receipt of the vendor's request for a hearing. This timeframe is only an administrative requirement for the state agency and does not provide a basis for overturning the state agency's adverse action if a decision is not made within the specified timeframes.

V. Abbreviated Administrative Review Procedure

- A. The SA shall provide a vendor with written notification of the adverse action, the cause(s) for the action, the effective date of the action, and the right to appeal the adverse action through the Abbreviated Administrative Review procedures described in this Section.
- B. The SA shall provide a vendor notice of the adverse action at least 20 days prior to the effective date of the action, except when the adverse action results from denial of authorization, which is effective on receipt of the notice.
- C. A vendor shall submit to the SA a written request for a review within 20 days of the receipt of the notice of adverse action.

Nutrition Services Department of State Health Services

Effective: December 1, 2016

Policy No. WV:13.0

The vendor's request for a review must be received by the SA on or before the 20th day from receipt of the notice of denial or adverse action, with the responsibility for timely submission residing with the affected vendor. The written request shall, at a minimum, describe the action being appealed and explanations, clarifications, or other factual evidence that the vendor believes relevant to the review.

- D. When a vendor appeals an adverse action through the Abbreviated Administrative Review process with the exception of denial of authorization which must take effect on the date of receipt of the notice, the adverse action may, at the sole discretion of the State WIC Program, be postponed until the review is completed and a decision is rendered by the SA.
1. Appealing an adverse action does not relieve a vendor, permitted to continue participating in the program while a review is pending, from the obligation of continued compliance with the terms of the written agreement or contract with the SA.
 2. The SA will not postpone the collection of a disallowance or vendor claim and/or an invoice audit disallowance and/or dispute regarding electronic benefit transaction or cash-value benefit transaction disallowance pending a hearing decision.
- E. The SA shall provide a vendor appealing an adverse action through the Abbreviated Administrative Review process the following:
1. A review of the adverse action decision and information submitted by the vendor under Section II.C above by a decision-maker other than the person who rendered the initial decision.
 2. A final decision of the reviewing official based solely on whether the SA has correctly applied Federal and State

Nutrition Services Department of State Health Services

Effective: December 1, 2016

Policy No. WV:13.0

statutes, regulations, policies, and procedures governing the WIC Program, according to the information provided to the vendor concerning the cause(s) for the adverse action and the vendor's response.

3. Written notification of the reviewing official's final decision within 30 days from the date of receipt of the request for an Abbreviated Administrative Review by a vendor. This timeframe is only an administrative requirement for the state agency and does not provide a basis for overturning the state agency's adverse action if a decision is not made within the specified timeframes.

- VI. The SA is not responsible for losses incurred by the vendor as a result of disqualification and/or denial of an application to participate.
- VII. If the results in a final decision of Full Administrative Review or an Abbreviated Administrative Review are adverse to the vendor:
 - A. The vendor may seek judicial review of the decision to the extent authorized by state law. The SA or its legal counsel shall not provide legal advice to adverse parties concerning judicial review of final administrative decisions. Appellants must seek advice from their own attorneys.
 - B. The appealed adverse action is effective the date the vendor is notified of the Full or Abbreviated Administrative Review final decision except as noted in Sections IV.B and V.B above.

<p style="text-align: center;">Nutrition Services Department of State Health Services</p>

Effective: December 1, 2011

Policy No. WV:13.1

Appeal Procedures
For WIC Farmers' Markets/Farmers

Purpose

To ensure that each WIC farmers' market association and authorized farmer has the opportunity to appeal an adverse action taken by the State Agency (SA).

Authority

7 CFR Part 246; State Policy

Policy

A farmers' market association or farmer adversely affected by a SA action affecting participation has the right to appeal, with the exception of expiration/nonrenewal of a Farmers' Market Association Agreement.

Procedure

- I. The SA shall provide written notice of disqualification at least 20 days prior to the effective date of disqualification. The SA shall provide the farmers' market or farmer to be affected with the cause(s) for, the effective date of, and the option to appeal the adverse action within 20 days of receipt of the notification.
- II. To appeal the action, the affected market or farmer shall provide the SA with a written request for a hearing within 20 days of receipt of the notification. The request shall, at a minimum, describe the action that is being appealed.
 - A. The adverse action affecting a participating market or farmer shall not be postponed until a hearing decision is reached if the cause was for redeeming WIC Electronic Benefits Transfer (EBT) cash value benefits (CVB) for cash, and/or non-food items. If the cause was not cash and/or non-food items, the adverse action affecting a participating market or farmer shall be postponed pending a hearing decision.

Nutrition Services Department of State Health Services

Effective: December 1, 2011

Policy No. WV:13.1

- B. Appealing an adverse action does not relieve a farmers' market or a farmer permitted to continue in the program while the appeal is in process from the responsibility of continued compliance with the terms of the written agreement with the SA and the farmer's agreement with the Farmers' Market Association.

- III. In response to the request for a hearing, the SA shall provide the farmers' market or farmer:
 - A. At least ten days advance notice of the time and the place for the hearing;
 - B. An opportunity to reschedule the hearing one time;
 - C. An opportunity to review all written case records prior to the hearing;
 - D. The opportunity to present their case with witnesses and counsel if desired;
 - E. The opportunity to confront and cross-examine adverse witnesses;
 - F. An impartial decision maker who shall prepare a written decision based solely on the evidence presented at the hearing, and the statutory and regulatory provisions governing the program; and
 - G. Written notification of the decision.

- IV. In the event a hearing decision is reached in favor of the SA, the adverse action may be imposed in part or in whole during subsequent WIC Farmers' Market Agreements.

- V. The SA shall not be responsible for losses incurred by the farmers' market or farmer as a result of disqualification and/or denial of application to participate.

If a decision is rendered against the farmers' market or farmer and the appellant expresses an interest in pursuing a higher review of the decision, the SA shall explain the right to pursue judicial review of the decision.