United States
Department of
Agriculture

Food and
Nutrition
Service

3101 Park Center Drive
Alexandria, VA 22302

Reply to
Attn. of: SF-114

MAY 08 1992

Subject: Policy Memorandum 92-1A
WIC Appointments

To: Regional Directors
Supplemental Food Programs
All Regions

First of all, we would like to thank you for the consideration that each of you invested in commenting on the original policy memo on this topic, #92-1. We appreciate your concerns, and have tried to accommodate them as much as possible.

Based on the comments we received as well as extensive discussions at this level, we are re-issuing this policy as **Policy Memorandum 92-1A** (attached). Essentially, we have restated the principles included in the November 15 memo, without suggested methods for accomplishing them. We have also clarified those points which were identified through your comments as ambiguous or inconsistent, such as the issues related to multi-program application forms.

If you have already distributed the original 92-1, this new memo can easily be inserted into the sequence of policy memoranda without disrupting the process entirely. If you have not yet issued a version of 92-1 to your State agencies, please distribute this one at your earliest convenience.

RONALD J. VOGEL
Director
Supplemental Food Programs Division

Attachment

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A number of questions have been raised to this office concerning inordinate delays in scheduling appointments at local WIC agencies, and how to set up waiting lists for appointments when the local agency's resource limitations make it necessary to do so. These issues have surfaced in most regions, and have been brought to our attention either through direct questions posed by the regional offices, or from findings identified through the management evaluation process. Therefore, we believe that they warrant discussion in a general policy memo.

Three basic questions have emerged regarding appointments for WIC applicants: (1) Is it appropriate for a local agency to delay scheduling an appointment for an extended period of time? (2) Should current WIC participants requesting appointments for a subsequent (consecutive) certification receive priority over new WIC applicants when appointments are being scheduled? and (3) When do the processing timeframes begin when a joint application is used?

1. The first issue is rather complicated, because it overlaps into the difficult area of processing standards. It has been reported to us that some local agencies have been setting up appointments sometimes as long as several months after an applicant calls the WIC office to request one. Under normal circumstances, local agencies must accept and process applications within the timeframes specified in 246.7(e)(2)(iii); the regulatory stipulation in paragraph (e)(2)(ii) that the processing standards begin when an applicant visits the local agency in person cannot be used as a justification for extended delays in granting the initial appointment. Procedures which allow a local agency to refuse to schedule an appointment for an applicant to apply for WIC benefits clearly circumvent not only the specific regulatory processing standard requirements but the intent of this regulatory provision as well. State and local agencies should also keep in mind that this type of procedure is entirely contradictory to one of the fundamental precepts of the WIC Program, early intervention in pregnancy to produce improved birth outcomes. A high-risk pregnant woman, especially one in her second or third trimester, cannot physically afford to wait another 8-10 weeks to apply for WIC benefits, and then possibly have to wait 20 days more until the certification process is completed.

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FNS should work with States, and States with their local agencies, to identify such problems and to address them at the source rather than trying to "patch" the symptoms as they are manifested. However, correcting a systemic problem can take time, and the local agency may need specific guidance as to how to deal with the immediate problem while the broader-based solutions are taking effect. In such cases, we expect the State and local agencies to establish procedures which will ensure that applicants are scheduled for WIC certification appointments in a manner that conforms more or less to the existing participant priority system, so that high-risk applicants are seen and served as soon as possible. We realize that it may not always be possible to know whether a pregnant woman is a Priority I or a Priority IV from a telephone conversation, however. In that case, a local agency may have to use an essentially categorical priority system for scheduling appointments that proceeds from pregnant or breastfeeding women to infants to children to nonbreastfeeding women.

2. Currently participating individuals and new WIC applicants must be assured of equal access to the local agency's appointment system.

WIC has long held the position that once a participant's certification period is over, that participant becomes, in effect, a new applicant again. We have never ascribed any priority to current participants, and in fact, have tried to be very conscientious about not using the term "recertification" anywhere in the Program regulations or supplementary guidance. Whenever possible, we encourage local agencies to simplify their administrative processes by setting up a participant's next certification appointment at the last clinic visit or food instrument issuance; this cannot be done, however, at the expense of individuals who are requesting appointments for the first time or who are not currently active in the local health department's system. There must be equal access to appointments for current participants and new applicants.

3. As we move gradually into more coordinated benefit delivery systems, such as joint applications and one-stop-shopping for other health care/public assistance programs besides WIC, the question of when the WIC processing standards begin becomes more clouded. Please advise your State agencies that even when a joint application is used for WIC and another program, e.g., Head Start, the timelines for WIC processing standards do not begin until the applicant presents herself, and/or her infant or children, at the WIC clinic to complete the intake and certification process.

WIC regulations specify that the processing timeframes begin when the applicant visits the local WIC agency. Therefore, even though an applicant may complete the form at a non-WIC site, the processing timeframes will not begin until the individual visits the WIC clinic. The last page of the Model Joint Application Form published in December 1991 states clearly, in the Rights and Responsibilities section: "If I or people in my household have applied for WIC, and/or certain other programs, more information will be needed to determine eligibility. I will be contacted for further information as necessary." This issue will be addressed and clarified in a technical assistance package currently being developed by the Interagency Workgroup which was established to develop the joint model application form. The technical assistance package will be sent to all applicable programs' State agencies and regional offices as soon as it is complete. In the meantime, States should keep in mind that the joint application form constitutes only an indication of the individual's interest in receiving WIC benefits, and the information it provides is only preliminary; it cannot be used as a substitute for the nutritional assessment and other intake work which form the basis for all WIC eligibi

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All of these areas should be clearly addressed in State and Federal management evaluations. A detailed plan for corrective action should be required when necessary, and implementation of the revised procedures should be carefully monitored.

Please contact Donna Hines or Debbie Whitford at (703) 305-2730 if you have further questions pertaining to these issues.

Ronald J. Vogel

RONALD J. VOGEL
Director
Supplemental Food Programs Division

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