## Chart Review Areas Explained

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<th>Review Area</th>
<th>Expectation</th>
<th>Caveats/Discussion</th>
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<tr>
<td><strong>Eligibility Determination</strong></td>
<td><strong>Timeline</strong>&lt;br&gt;Pregnant women and migrant farmworkers must be notified of eligibility status within 10 days. All others must be notified within 20 days.  &lt;br&gt;• When someone makes contact to request WIC benefits, they must be offered a certification appointment within this timeline  &lt;br&gt;• A participant record will be queried (for past participation) or created and an appointment must be offered. Details of the initial contact and appointment offered must be documented in system.  &lt;br&gt;• Extensions on this timeline must be approved by the State office and documentation must be maintained.  &lt;br&gt;• This applies to all initial certifications and all other certifications if there has been more than a 2-month gap in certification timeframes.</td>
<td>If appointment offered is not acceptable to the applicant, another appointment may be confirmed outside of the timelines, this is not a finding if documentation of this circumstance is clear.</td>
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<td><strong>Participant Identification (ID)</strong></td>
<td><strong>Identification</strong> for all participants must be documented in system and proof must be scanned in.  &lt;br&gt;• Must be an approved form of ID  &lt;br&gt;• Scanned proof must be legible  &lt;br&gt;• Update ID if there is a significant change (i.e. name)  &lt;br&gt;• Alternative documentation when no proof exists (Proof of Residency/ID Form)</td>
<td>If scanned ID does not match form selected in drop-down, it may be a simple human error (or may have been updated since certification) consider discussion.</td>
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<td><strong>Authorized Representative Identification</strong></td>
<td>Each authorized representative must provide proof of identity the first time they attend an appointment.  &lt;br&gt;• Must be an approved form of ID  &lt;br&gt;• Scanned proof must be legible  &lt;br&gt;• Update ID if there is a significant change (i.e. name)</td>
<td>May not have ID if auth. rep has never come into the office. Since we do not have a signature for benefits, it may be hard to determine when they come in.</td>
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<td><strong>Residence Documentation</strong></td>
<td>Each applicant must provide proof of residency.  &lt;br&gt;• Must be an approved form of residency proof documented in the system  &lt;br&gt;• Scanned proof must be legible  &lt;br&gt;• Address at the time of certification must match the proof scanned in.  &lt;br&gt;• Physical address must be used (exception for participants on reservations which may be mailing address (PO Box) or self-attestation).  &lt;br&gt;• Alternate documentation when no proof exists (“Proof of Residency/ID form, 3rd party statement or WIC affidavit”).</td>
<td>Participant may live in a neighboring state, justification must adhere to policy and verification that no dual participation exists. Updates to addresses may be made during a certification without proof scanned. Drop down proof should not be changed mid-certification unless proof is provided.</td>
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| **Income/Adj. Eligibility Verification** | Income eligibility will be determined at each certification and documented accordingly.  
  - Adjunctive eligibility (SNAP, Medicaid, TANF) will be verified and documented in system.  
    - Electronic verification for all participants with associated IDs logged  
  - All income received by the household during the month (30 days) prior to the date of the application will be scanned and documented accurately  
    - Unless past 30 days income does not reflect current situation.  
    - When single source of income is used, document comparison to IEG for given timeframe.  
  - Tribal eligibility documented appropriately  
  - Zero and Negative Income used and documented appropriately  
    - Signature should be the authorized or alternative representative listed in the chart.  
  | Some discretion may be used in determining income eligibility (i.e. newly unemployed, on maternity leave, working for cash intermittently). If questionable, research further. |
| **Verification of Certification (VOC)** | All participants who are transferring certifications from another state must present a valid VOC, which will be documented and scanned into the system.  
  - At a minimum the document must have the name, date of certification and end of certification  
  - Staff will adhere to VOC policy in issuance of benefits which may require contact with sending state (verify benefits issued/redeemed if not known)  
  If a participant is a migrant, or any participant that mentions they may be moving out of state, will be given a VOC.  
  - Migrant workers will be given VOC at each appointment  
  - For other participants, their certification will only be terminated if move out of state is imminent, otherwise this will be done if/when move has been verified |  |
| **Risk Code Assignment** | Every participant will be assigned all applicable risk codes throughout a certification period. At least 1 risk code must be assigned at all times for eligibility purposes.  
  - If no risk exists, notice of ineligibility will be provided.  
  - Certain risk codes require documentation for justification (see table)  
  - Breastfeeding dyads must be at the same priority level, appropriate code shall be assigned if different  
  - When a CPA code is resolved, documentation will be made but the code will not be removed (system assigned)  
  | At follow up appointments, if seen by paraprofessional (aide) staff, updates to codes will not be documented unless it is system generated. Codes that require healthcare professional diagnosis will be |
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| Anthropometric and Hematological Measurements | All measurements will be taken and followed up on according to policy.  
• Information from a source other than WIC will be documented in the participant folder. Any exemptions will be documented. |
| Food Package                              | A CPA is responsible to assign an appropriate food package (including all tailoring/changes to standard) for each participant.  
• Prescriptions for formula or nutritionals outside of standard will be reviewed for completeness and approved by the CPA  
• An RD who has been deferred to for FPIII food assignments will assess and provide documentation in chart for food package decisions  
• Any over or under issuance (without tailoring documentation) will be considered a finding  
• All tailoring must have CPA documentation  
• Signature for eWIC card is obtain for household.  
  o The *Alternative Means for Signature* may be used and scanned into the participant folder |
| Nutrition and Breastfeeding Education     | At least 4 education contacts will be made per 1-year certification (about quarterly), and 2 education contacts per 6-month certification (about quarterly) will be made with each participant.  
• All standards must be applied (i.e. core/required topics covered at certification; accurate information; provided in an appropriate format, etc.)  
• Documentation of information provided must be clear (i.e. use of words such as “discussed” or “provided information on...”)  
• Education should align with benefit issuance (if benefits are provided more frequent than standard, education is expected)  
• Exit Counseling form provided and documented for applicable women participants |
| Nutrition Assessment Questions            | At each certification and mid-certification appropriate questions will be completed.  
• There will be a response to each question (may refer to |
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| **(NAQ)** | an answer in another question).  
- Nutrition care plans are complete |

| **Goals** | A goal will be established with each participant at their certification appointment.  
- The goal will be Specific, Measurable, Attainable, Realistic and Timely (SMART) if possible (participant choice)  
- Follow up on the goal will be documented at subsequent appointment(s)  
- If participant declines setting a goal, documentation will made in chart |

| **Ideally a new goal would be set with each appt. and follow up would continue throughout cert. period, however, if this is not happening, consider discussion.** |

| **Participant Referral** | Referrals will be made at certification, and ongoing throughout the certification period as needed.  
- All mandatory referrals will be assessed and made (reference State Plan policy and High-Risk Table)  
- If no referral is appropriate, or is denied by participant, this must be documented  
- Follow up is required on all referrals provided  
- Additional referrals may be identified and made throughout certification period |

| **Mandatory referrals missed (or not followed up on) will be considered for a finding. If it is a referral outside of the mandatory list, and is missed/not followed up on, it may be a discussion topic.** |

| **End of Certification and Notice of Ineligibility** | Every participant in a valid certification will be provided notice of the end of their certification at least 15 days prior to the end date.  
- Notice may be in writing (scanned/logged in system) or verbally (noted in chart). EOC date is printed on shopping list, however system does log printing, so a note is needed.  
- Notice is generally provided at the last appointment of the certification, but another method is acceptable if in mandatory timeframe  
Every participant must be provided a Notice of Ineligibility if:  
- They are determined to be ineligible during a certification appointment  
- They are determined to be ineligible during a certification period due to changes in income or other criteria (i.e. categorical change from breastfeeding to non-breastfeeding over 6 months) |

| **If the participant fails to attend appointments as scheduled, and they are terminated due to non-participation, a notice is not required.  
If the participant’s certification ends as expected, they only require an EOC notice, not a NOI.  
Note: notice generated from system is same for EOC and NOI and contains information on Fair Hearings. This is the required notice for NOI, but EOC may be done informally and documented in chart.** |