



Welcome to Healthy Together

WIC's new app helps you access all your WIC information in one place. This guide will help you download the app, connect to your account or apply for WIC, and explain next steps.

Download the App

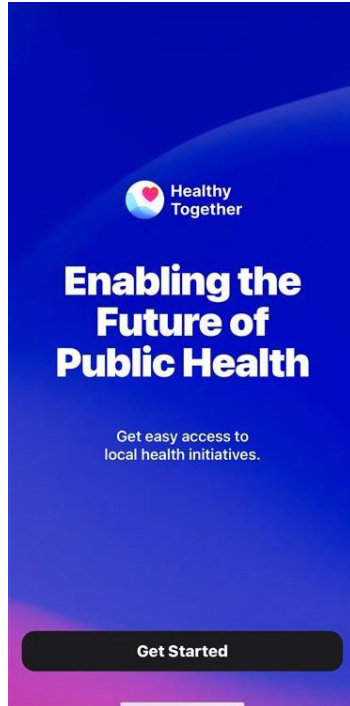
- Scan the attached QR code to navigate to the App Store
- Download the Healthy Together App



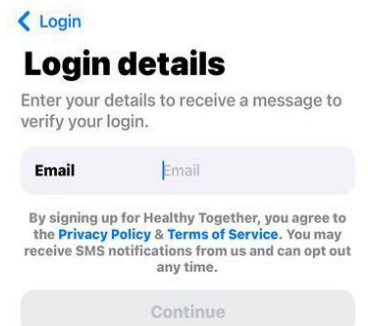
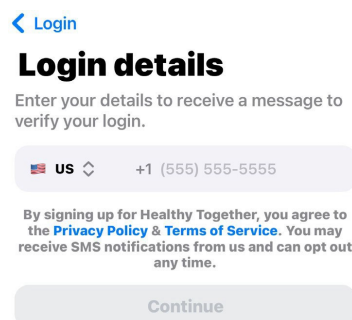
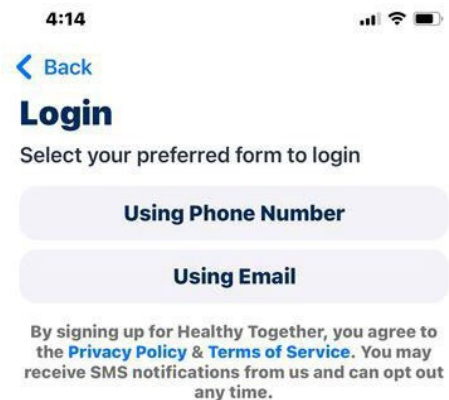
- Select Healthy Together 
- Once downloaded, follow the directions below to apply to the program

Create Account:

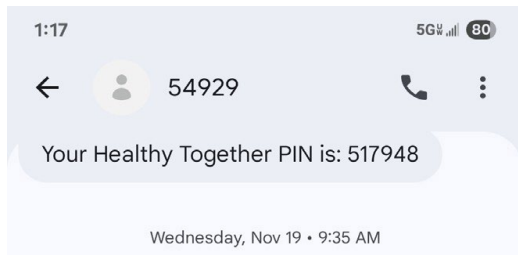
1. Select *Get Started*



2. Login or Create an Account using phone or email



3. A *PIN Validation* will be sent via text or email:



Confirm Your Email to Enable Secure Access

Confirm your email by entering the code below.

302123

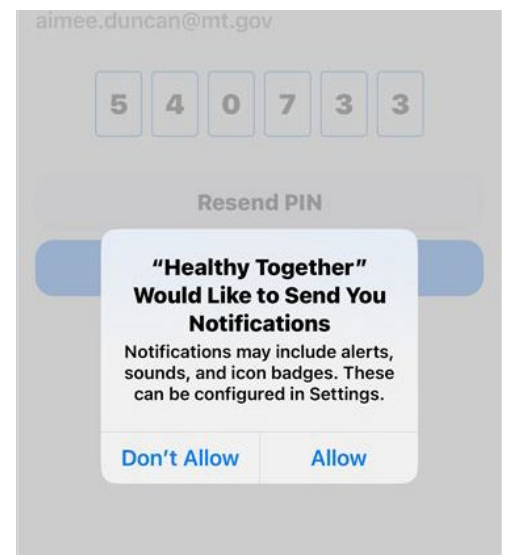
4. Enter the PIN in the app and select “allow” to make sure you receive notifications

Verify your PIN

Enter the PIN sent to **2574**

Resend PIN (0:34)

Resend PIN



5. Select *Montana WIC* from the available program options



6. To “Apply”

Apply: For brand-new participants that will ask questions about contact information and eligibility. An application will be submitted to the local WIC clinic

Close

Montana WIC [UAT]

The Special Supplemental Nutrition Program for Women, Infants, and Children helps eligible people with healthy foods, breastfeeding support, nutrition education, and referrals to local resources. You can use the Montana WIC Healthy Together mobile app:

- ✓ **To Apply for WIC**
See if you and your family members qualify for the WIC program. The information you provide will be used at your certification appointment to help determine your eligibility for the WIC program.
- ✓ **For Communication**
Receive notifications about your application and communicate with WIC staff. Be sure to turn on Push Notification Permissions.
- ✓ **To View Benefits**
After connecting your account, you'll be able to view your benefits and remaining balances for all qualified household members.

Your participation and use of the Montana WIC Healthy Together app is voluntary. Please contact WIC staff members if you have any questions.

Apply

Connect to My Account

1. Fill in the following information
(Full Legal Name is required – no nicknames)

Enter your name

Enter your legal name

First Name First Name (required)

Last Name Last Name (required)

Continue

I The I'm

Q W E R T Y U I O P

A S D F G H J K L

↑ Z X C V B N M ↵

123 space next

2. Select if anyone in your household has received WIC benefits before in Montana

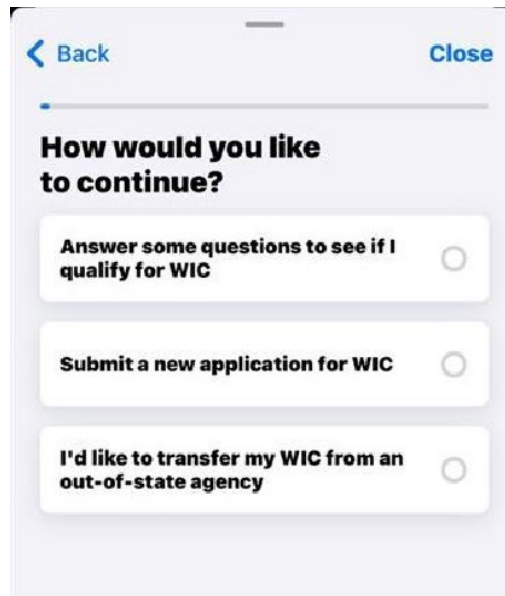
Close

Have you, or someone in your household, been on WIC in the state of Montana before?

Yes ☐

No ☐

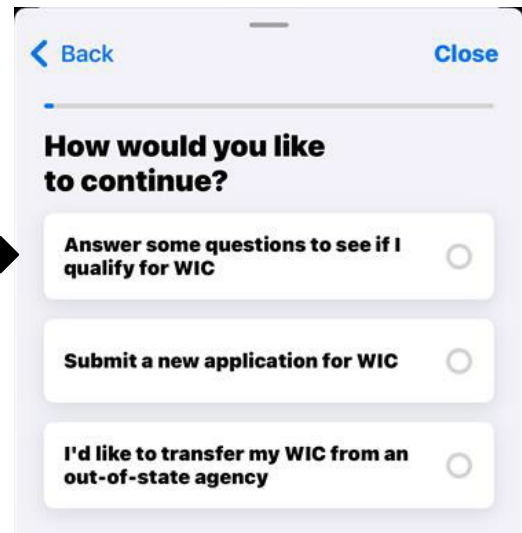
3. Select from the following options:



A mobile app screen with a light purple background. At the top, there is a blue arrow pointing left labeled 'Back' and a blue text label 'Close'. Below the header is a horizontal line. The main heading is 'How would you like to continue?'. There are three white rounded rectangular buttons stacked vertically, each with a radio button on the right. The first button says 'Answer some questions to see if I qualify for WIC'. The second button says 'Submit a new application for WIC'. The third button says 'I'd like to transfer my WIC from an out-of-state agency'.

Option 1: Answer some questions to see if I qualify for WIC:

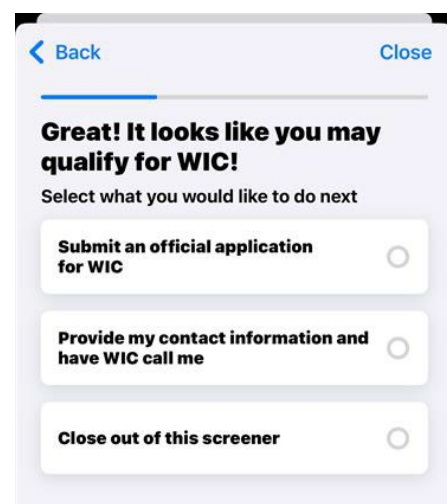
Selecting this option will bring up a series of questions about your current situation to determine if you may be eligible for WIC.



This is a duplicate of the screenshot above, showing the 'How would you like to continue?' screen with three radio button options.

At the end of the screener, you will have a few options:

- Submit an official application
- Provide your contact information for WIC to call you
- Close out



A mobile app screen with a light purple background. At the top, there is a blue arrow pointing left labeled 'Back' and a blue text label 'Close'. Below the header is a horizontal line. The main heading is 'Great! It looks like you may qualify for WIC!'. Below the heading is the text 'Select what you would like to do next'. There are three white rounded rectangular buttons stacked vertically, each with a radio button on the right. The first button says 'Submit an official application for WIC'. The second button says 'Provide my contact information and have WIC call me'. The third button says 'Close out of this screener'.

Option 2: Submit a new application for WIC:

Applying to WIC:

- Select the “Submit a new application for WIC”
- You will be taken through a series of questions about your current situation

Start an application for WIC

WIC (Women, Infants, and Children) is a program designed to help families and young children during an important time in growth and development.

1. There are many benefits including healthy food, breastfeeding support, nutrition education, and connections to local resources.
2. WIC is meant to supplement your food budget and complement your use of other resources.
3. WIC is a voluntary program and participation will not interfere with use of other programs like SNAP or Medicaid.

You can start the application process for WIC now. This form should take about 10 minutes to complete.

Continue



How it works

1. Complete the following application
2. Staff will review your information and contact you to schedule an appointment
3. During your appointment you'll need to show proof of ID, income, and address

This form does not guarantee enrollment in WIC; your eligibility will be confirmed when you have your first appointment with WIC. This institution is an equal opportunity provider.

Continue

Are you the primary contact for the household?

Yes ☐

No ☐

Continue



How did you hear about WIC?

Family/Friend ☐

SNAP or TANF or OPA ☐

Social Media/Online ☐

Health Care Provider ☐

Text ☐

Billboard ☐

Radio ☐

School/Education Facility ☐

Continue



Enter your contact information

Phone number*
+1 (406) 555-7777

Allow text messages*
Yes

Email
Enter email address

Allow email messages
Yes

Preferred contact method*
Text message

Next



Are you or someone in your household currently enrolled in any of the following programs in Montana?

Medicaid/Healthy Montana Kids Plus ☒

SNAP (Supplemental Nutrition Assistance Program) ☐

TANF (Temporary Assistance for Needy Families) ☐

FDPIR (Food Distribution Program on Indian Reservations) ☐

Best Beginnings Childcare Scholarship - Traditional ☐

School Lunch Program ☐

None of the above ☐

Next

You will be asked to provide information about the family members you are applying for:

Are there any children under the age of 5 that are currently placed in your household through foster or kinship care?

Yes ☐

No ☐

Someone in my household is:

There are multiple categories of eligibility, and your answers here help us understand what benefits you and/or your household may qualify for.

Select all that apply

Pregnant ☐

Had a pregnancy end in the last 12 months ☐

An infant or child under the age of 5 years old ☐

None of the above ☐

Next

Enter the information below for the household member who is pregnant

First name*
Enter first name

Last name*
Enter last name

Date of birth*
Enter date of birth

Next

How is the primary contact related to the household member who is pregnant?

Self ☐

Spouse or Partner ☐

Other ☐

Enter all the infants and children under the age of 5 years old in your household

Only infants and children under 5 years old qualify as children in the Women, Infants, and Children (WIC) program.

Do not add any children that are 5 years or older.

Add an infant or child under 5 >

Enter the information below for the infant or child under 5 years old

First name*
Diplodocus

Last name*
Dinosaur

Date of birth*
June 1, 2023

Next

How is the primary contact related to Diplodocus?

Father ☐

Mother ☐

Grandfather ☐

Grandmother ☐

Aunt ☐

Uncle ☐

Legal Guardian ☐

Stepfather ☐

Enter all the infants and children under the age of 5 years old in your household

Only infants and children under 5 years old qualify as children in the Women, Infants, and Children (WIC) program.

Do not add any children that are 5 years or older.

Edit

Diplodocus Dinosaur >

Add an infant or child under 5 >

Next

Next, you will be asked to enter your address and select a clinic

The first screen asks "Are you experiencing homelessness?" with "Yes" and "No" radio buttons. The second screen, titled "What is your address?", has fields for "Street Address*" (123 Jurassic St), "City*" (Helena), "State*" (Montana), and "ZIP Code*" (59601), with a "Next" button. The third screen, titled "Choose a clinic from the following list", has a search bar and two options: "HELENA WIC" (1930 9Th Ave, Helena, MT 59601) and "Other".

Before submitting, you will be asked to accept the terms and conditions

The first screen on the left asks "Anything else you would like to tell us about your application for WIC?" with an "Additional details" field and a "Next" button. The middle section is titled "Read & Accept Healthy Together's Electronic Signature Terms and Conditions" and includes an illustration of a smartphone with a pen. Below this, it states "Effective: October 15, 2022" and "Consent to Use Electronic Records and Signatures." followed by a paragraph of terms. The right section is titled "Confirmation of Your Consent." and lists three conditions for consent. At the bottom right are "Accept & Continue" and "Cancel" buttons.

Read & Accept Healthy Together's Electronic Signature Terms and Conditions

Effective: October 15, 2022

Consent to Use Electronic Records and Signatures.
You agree to accept all communications electronically and use electronic signatures ("Consent") with Twenty Labs, LLC and our controlled subsidiaries, assignees, agents and other counterparties that we contract with. Unless you agree, we are required to provide some Communications (as defined below) to you in writing.

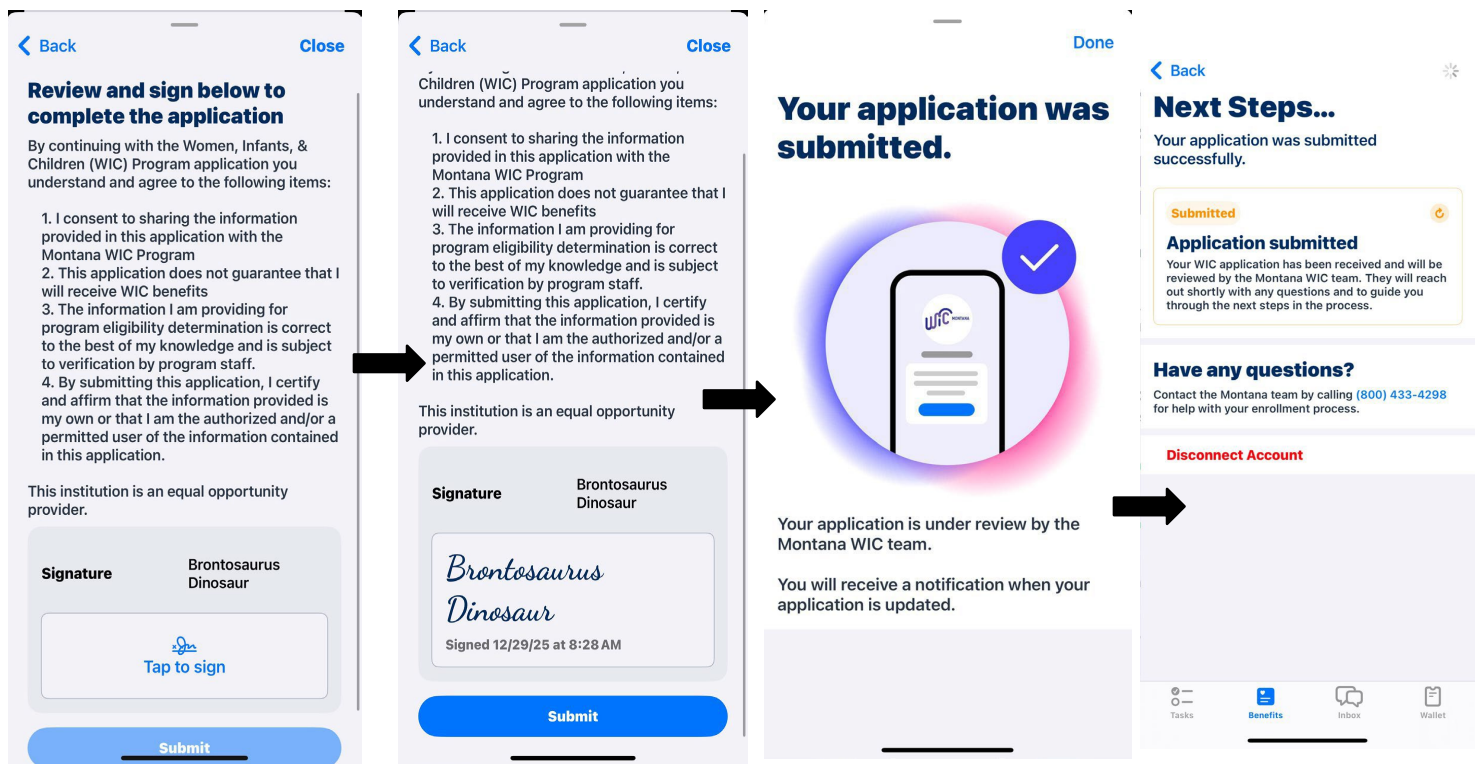
Confirmation of Your Consent.
By providing your Consent, you confirm you have reviewed the above and agree:

1. To electronically receive all Communications;
2. To use electronic signatures; and
3. That you have hardware, software (including PDF reader), and email to receive Communications electronically.

You represent that you are authorized and are providing this Consent on behalf of yourself and all of the authorized users on your account.

Accept & Continue

Cancel



Once submitted, a WIC staff member will contact you within a few days. Messages will be sent through the app, so please check your app daily for any notifications.

Next Steps:

- WIC staff will review the submitted application and follow up if additional information is needed.
- If your application is approved, WIC staff will schedule an appointment to begin the WIC enrollment process.

Option 3: I'd like to transfer my WIC from an out-of-state agency:

How would you like to continue?

Answer some questions to see if I qualify for WIC ☐

Submit a new application for WIC ☐

I'd like to transfer my WIC from an out-of-state agency ☐

Transferring WIC Services from Out of State:

- You will be taken through the following screens to answer questions and upload your transfer paperwork

How would you like to proceed?

I have WIC transfer paperwork ready to submit ☒

I want help with my WIC transfer paperwork ☐

Next

Would you like to upload your paperwork now or later?

Upload now ☒

Upload later ☐

Next

Add all household members that are on WIC in another state

Household members

Add another household member >

Enter the following details

First Name*
Tyranno

Last name*
Saurus

Date of birth*
March 1, 2023

Category*
Infant or Child

Next

Take a photo or upload your WIC transfer paperwork for Stego

Make sure the whole document is within the screen window. You'll be able to review before saving and continuing to be sure you get a good picture.

WIC TRANSFER PAPERWORK

Photos and files must be less than 50 mb

Which of the following is you?

Tyranno Saurus ☐

Stego Saurus ☐

None of the above ☐

The first screen, titled "Enter your contact information", includes fields for "Phone number*" (with a US flag icon and the number +1 (406) 555-9876), "Allow text messages*" (set to Yes), "Email" (with a placeholder "Enter email address"), and "Allow email messages" (set to Yes). A blue "Next" button is at the bottom.

The second screen, titled "Enter your residential ZIP code to search for a clinic", features a "ZIP Code" field with the value 59601 and a blue "Next" button. Below is a numeric keypad with letters for T9-style input.

The third screen, titled "Choose a clinic from the following list", has a search bar and a list of clinics. The first option is "HELENA WIC" with the address "1930 9Th Ave, Helena, MT 59601". Below it is an "Other" option. A vertical alphabetical index (A-Z) is on the right side.

Once submitted, you will be contacted by a WIC staff member within a few days. Messages will be sent through the app, so please check your app daily for any notifications.

The first screen, titled "Transfer Details Submitted", shows a large circular graphic with a smartphone icon displaying the WIC Montana logo and a blue checkmark. Below the graphic, it states: "Your transfer details information was sent to the Montana WIC team." and "You will receive a phone call soon." A "Done" button is at the top right.

The second screen, titled "Next Steps...", includes a "Submitted" status box with a checkmark icon, stating: "Transfer documents submitted. Your WIC transfer paperwork has been submitted and will be reviewed by the Montana WIC team. They will reach out shortly with any questions and to guide you through the next steps in the process." Below this is a section "Have any questions?" with the contact info: "Contact the Montana team by calling (800) 433-4298 for help with your enrollment process." At the bottom is a "Disconnect Account" button. A bottom navigation bar contains icons for "Tasks", "Benefits", "Inbox", and "Wallet".

Next Steps:

- WIC staff will review the transfer paperwork and follow up if additional information is needed.
- If approved, WIC staff will schedule a time with you to pick up your benefits card.