Staff tool for using the ProviderOne Search and documenting in Client Services
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**References:**
- WIC Manual, *Volume 1, Chapter 3 – Application and Processing Standards*
- WIC Manual, *Volume 1, Chapter 6 – Income*
### WIC Income Eligibility – There are 3 ways a client can be income eligible

| 1. Income-based assessment | The client’s **household income** meets WIC’s income eligibility guidelines.  
| | • WIC income eligibility guidelines are at or below 185% of the Federal Poverty Level (FPL). |
| 2. Adjunctive eligibility | The client is on one of these income-qualifying programs:  
| | • Medicaid - federally funded Title 19 program.  
| | • State-funded or federally funded (non-Title 19) medical assistance programs **with income guidelines the same or less than WIC’s**.  
| | • TANF - Temporary Assistance to Needy Families.  
| | • Basic Food Program – also known as food stamps and SNAP (Supplemental Nutrition Assistance Program).  
| | • FDPIR - Food Distribution Program on Indian Reservations. |
| 3. Adjunctive eligibility due to a household member | The client has **one of the following household members** on an income-qualifying program:  
| | • A pregnant woman or infant in their household who is on a Medicaid Title 19 program.  
| | • Any household member on TANF, Basic Food Program or FDPIR. |

**Note:** See the WIC manual [Volume 1, Chapter 6 – Income](#) for a definition of household size (also called economic unit) and more information about income eligibility.

### Proof of Adjunctive Eligibility

When an applicant or client **shows proof of current eligibility** for an income-qualifying program the person is **income eligible for WIC and meets WIC’s income documentation requirement.**

**The proof must show:**
- Client name
- Current eligibility dates, and
- The income-qualifying program

[The ProviderOne (P1) Services Card doesn’t list the required items for proof of eligibility.]
Having a ProviderOne card doesn’t make a person income eligible for WIC

The Health Care Authority (HCA) issues ProviderOne cards for many medical assistance programs. Not all medical assistance programs income-qualify a person for WIC.

- There are over 500 Recipient Aid Category (RAC) codes for medical assistance programs.
- State staff assess each RAC code to determine if it represents a WIC income-qualifying program according to federal regulations.
- The ProviderOne search results in Client Services are specific for WIC eligibility.

Clinic staff must use the Client Services ProviderOne search results to:

- Verify the person is currently on a WIC income-qualifying medical assistance program.
- Assess if the person makes household members adjunctively income eligible for WIC.

Client Services ProviderOne Search – 3 easy steps

1. Enter the ProviderOne ID in the field on the Income Documentation tab.
   - Enter the 9-digit number from the Services Card.
   - You don’t need to enter the “WA” at the end of the number.

2. Click the [P1 Search] button, or press Enter on the keyboard.

3. Review the Search Results pop-up window for WIC eligibility. (See the next page.)
Reviewing the Search Results

“Positive” ProviderOne Result

The “positive” search result with the person’s name highlighted in green means the person is currently on a WIC income-qualifying medical program and is income eligible for WIC.

The positive result is proof of income eligibility:

- Select Medical Services Card/ProviderOne for proof of income.
- You must document the actual household income, but you don’t need to see proof of income (like paystubs).

This statement means the person is on a Medicaid Title 19 program.

If this statement is present AND the P1 client is a pregnant woman or an infant, other household members are income eligible for WIC.

“Negative” ProviderOne Result

The “negative” search result means we don’t have data to verify the person is on a WIC income-qualifying medical program. You can’t use the negative result for any proofs. (See page 8)

- Check for other types of adjunctive eligibility. If the person isn’t on an income qualifying program assess household size and income; and see proof of income, ID and residency.
- If the person didn’t bring in paystubs, document and assess the self-reported income. If the amount is eligible (< 185% FPL), you can give a one-month grace period for any missing proofs.
- You can’t give a grace period if the self-reported income is above WIC’s guidelines.
Documenting the ProviderOne client’s adjunctive eligibility in Client Services

When the WIC client is the ProviderOne client:

1. Enter the number from the ProviderOne Service Card in the P1 field.
   - Make sure you get a **positive P1 search result**.

2. **Check the Medicaid box** at the top of the Income Documentation screen.

   ![](ProviderOne_Screen.png)

   Assess if the client makes other household members adjunctively eligible. If the following two criteria are met, the client’s household members are income eligible for WIC.
   - If the client is a pregnant woman or an infant
     **AND**
   - The following statement listed in the box below appears on the positive search result.

   "? If this ProviderOne client is a pregnant woman or an infant:
   Household members are adjunctively income eligible and meet WIC’s income and residency documentation requirements."

3. Select **Medical Services Card/ProviderOne** as proof of income, ID and residency.

4. **Document the household’s self-reported income.**
   - You don’t have to see proof of that income.
   - The proof of income eligibility is the positive P1 search result.

See the **Marsha Washington documentation example** on page 11 in the Appendix.
Documenting household member’s adjunctive eligibility in Client Services

When the WIC client has a pregnant woman or an infant on Medicaid Title 19 in the household:

1. Make sure the pregnant woman or infant has a positive ProviderOne search and the following statement is listed on the search results.

   "If this ProviderOne client is a pregnant woman or an infant:
   Household members are adjunctively income eligible and meet WIC’s income and residency documentation requirements."

   • This verifies the pregnant woman or infant is on Medicaid.

2. Click the [Adj Elig] button and check the correct box to document which household member makes this person adjunctively eligible.

   • Don’t mark the Medicaid box at the top of the screen. Only use the Medicaid box when the WIC client is also the ProviderOne client.

3. Select Medical Services Card/ProviderOne as proof of income and residency.

4. Document the household member’s P1 number in the Income comments field.
   • It’s best practice to note whose number it is. (See page 7 for an example.)

5. Document the household’s self-reported income
   • You don’t have to see proof of the household income. The proof of income eligibility is the positive P1 search result.

6. Update the client’s income eligibility when the household member no longer makes this client adjunctively eligible.

   When a pregnant woman or infant on Medicaid Title 19 changes category, they no longer make household members adjunctively eligible.

   See the next page more information.

See the George Washington documentation example on page 13 in the Appendix.
Examples of when to update income eligibility for household members:

**When a pregnant woman on Medicaid is certified as breastfeeding or postpartum**

- When the pregnant woman on Medicaid Title 19 delivers her baby, you can use her P1 number for the infant’s adjunctive income eligibility, for example when you enroll the infant, while she’s in WIC’s pregnant category.
- When you certify the mom as breastfeeding or postpartum (she’s no longer in the pregnant category), you can’t use her Medicaid Title 19 eligibility to make the baby adjunctively eligible. (See “Steps to take” listed below.)
- Use the woman’s Recertification or the infant’s Complete Certification to prompt you to reassess the baby’s and any other household member’s income eligibility.

**When an infant on Medicaid becomes a child**

- When the infant is certified as a child, you can’t use the child’s Medicaid Title 19 eligibility to make household members adjunctively eligible. (See “Steps to take” listed below.)
- Use the infant to child recertification to prompt you to check for other household members’ P1 numbers.

**Steps to take:**

1. Ask if the person has their own P1 card.
   - If the person has a P1 card, enter the number in the P1 field on their Income Documentation tab.
   - Search the P1 number for eligibility in an income-qualifying program.
2. If the person doesn’t have a P1 card or you get the negative search result, ask if the person or other household members participate in TANF, SNAP or FDPIR.
3. If there isn’t any adjunctive eligibility, assess for eligibility based on income and household size and ask for proof of income.

**Requirement:**

You must “uncheck” the Medicaid box or any box in the Adj Elig pop-up when it no longer applies.

A check in these boxes makes the person income eligible for WIC.
A few more notes about documenting the P1 number in Client Services...

You can search for the ProviderOne number without seeing the ProviderOne Card

- If a person knows the P1 number, you can enter it and use the Client Services P1 search.
- You can get the person’s P1 number by looking it up in the HCA system if you have access.
  - Once you get the number, you must enter it in Client Services and use the P1 search to check for WIC income-qualifying program eligibility.
  - Current eligibility in the HCA system doesn’t mean the person is on a WIC eligible program. The person may be on a medical assistance program that isn’t a WIC income qualifying program.

Document the ProviderOne ID in the Income Comments field

- When using a pregnant woman’s or an infant’s Medicaid eligibility for their household members’ adjunct eligibility, document the P1 number in the comment field with a brief note. (see below)
- Placing the P1 number in the income comment field makes it a permanent part of the record.

Copy = Highlight the number and press Control + C  Paste = Control + V

You can change or update the number in the ProviderOne ID field

- When you enter a P1 number and search, the number saves when you finish the wizard.
  - The number won’t save if you don’t search, or don’t finish the wizard.
- You can use the saved number to search for adjunctive eligibility at the recertification.
- You can change or update the number later as appropriate.
Steps to follow when you receive a negative ProviderOne search result

If you get the negative results it could mean:

- The client isn’t on a medical program that makes the client income eligible for WIC
- The client isn’t currently eligible for a medical program
- The clinic hasn’t received the most current information from the state WIC office – Client Services hasn’t replicated
- The state hasn’t received the most current information from HCA

1. **Check to make sure you entered the correct ProviderOne ID number.**
   - **If you entered the wrong number, correct and search again.** You can leave the Results open while you enter a new number and click [Search] or press Enter.
   
     Here’s an example of what you can say to the client or caregiver:

     “Thank you for your ProviderOne information. Our computer didn’t find that you are automatically income eligible for WIC based on your medical program eligibility. Are you currently on TANF, SNAP or FDPIR? If you aren’t on any of those programs we’ll check your household size and income to see if you are eligible for WIC…”

2. **Assess for income-based eligibility** if you entered the correct P1 number but you get the negative search result and the client isn’t on any other qualifying programs. Ask the household size and income to see if it meets WIC income guidelines.
   - Even when you get the negative search result, the client may still have a household income that is at or below 185% FPL.
   - For example, some state funded medical assistance programs have income eligibility limits up to 193% FPL. Since that’s above WIC’s income guidelines, we can’t make all the people on that program automatically income eligible for WIC. The client’s income may be at or below 185% FPL and be eligible for WIC when you assess household size and income.

3. **Give a grace period for proof of income if the self-reported income is WIC eligible and the client didn’t bring in proof of income** (like paystubs).
   - Have the person sign the Grace Period for Income form.

**Note:** Contact the state WIC office if you feel you get the negative search result in error. You must do an income-based assessment unless state staff direct you otherwise.
Appendix
Example: Documenting a client’s adjunctive eligibility

Pregnant client – Marsha Washington:

1. Enter Marsha’s ProviderOne number in the ProviderOne ID field and search to assure she is on an income-qualifying program (you get a positive search result).
2. Check the Medicaid box because Marsha is the ProviderOne client on the income-qualifying program.
   - Client Services “unchecks” the box at each recertification.
   - Search for current eligibility and then re-check the box if it applies.
3. Enter her actual self-reported income.
4. Select “Medical Services Card/ProviderOne” for her proof of income, ID and Residency.
5. Marsha is income eligible for WIC.

See how to document eligibility for her son, George, on page 13.
Example: Documenting a household member’s adjunctive eligibility

George Washington – Marsha’s son

Marsha’s son, George, is a child who doesn’t have a ProviderOne card. Marsha is pregnant and her ProviderOne Search Results show that she makes household members adjunctively income eligible.

To document George’s adjunctive eligibility:

1. **Review** Marsha’s ProviderOne Search Results on her Income Documentation Tab.
   - Look for the “?” statement. This verifies she’s on a Medicaid Title 19 program.

2. Go to George’s file and document Marsha’s P1 number in the Income Comment field.

3. **Press [Adj Elig]** to open the Adjunctive Eligibility box. **Mark the correct statement then press [Ok].**

4. Enter the actual household income, then select “Medical Services card/ProviderOne” for proof of income and residency.

5. **Review and select** the client’s proofs (the child’s ID for example).
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