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REFERENCES

USDA-FNS Code of Federal Regulations Citations:
  7 CFR 246.2 Definitions
  7 CFR 246.7(l) Certification of participants; dual participation
  7 CFR 246.12(u) Delivery systems; participant violations and sanctions
  7 CFR 246.23(c) Claims and penalties; claims

CHAPTER 2  PROGRAM COMPLIANCE

Section 1  Introduction and Definitions

Introduction

People providing WIC services have many important tasks. One of those important tasks is to help make following WIC rules the easy choice. This chapter explains prevention of and response to breaking WIC rules.

Helping everyone follow WIC rules depends on strong partnerships between clinic staff, state office staff, grocery store employees and WIC caregivers or clients. By working together, we can prevent people from breaking WIC rules. We can do this by:

- Educating clients and caregivers about shopping for WIC foods and why these foods were chosen to improve the health of their family members receiving WIC services.
- Training clients and caregivers, especially people new to the program, on how to use WIC checks correctly.

The following values and assumptions guide clinic and state staff on program compliance:

- We believe most people are honest and want to follow the rules.
- We believe the best way to help WIC families follow WIC rules is through education and prevention.
- We value clients’ rights. We want to hear what clients have to say, even if they appear to have broken a WIC rule.
- If we must check to see if a client broke a WIC rule, our investigations will be thorough and fair. During our investigations we will:
  - follow federal rules;
  - remember that clients have different abilities to learn the WIC rules;
  - remember that clients come from many cultures; and
  - recognize that many clients speak different languages.
- We are committed to make rules and policies easy to understand.
- State and clinic staff are partners; we will provide on-going training and support on WIC policies and procedures.

If clients break WIC rules because they don’t know the rules, prompt educational follow-up will help prevent future noncompliance.

Clients who break the rules on purpose can be taken off the program for up to one year, have to pay back money, and may face possible legal charges, including paying fines. WIC staff use the WIC Rights and Responsibilities form to educate clients and caregivers about WIC rules.

This important work of education, prevention and follow-up helps protect and recover valuable resources to support WIC’s mission “To improve the lifelong health and nutrition of women, infants, and young children in Washington State.”
Definitions

These definitions will help you understand policy and procedure in this chapter:

**Alternate endorser:** The WIC caregiver gives this person permission to pick up WIC checks from the WIC clinic and to do the WIC food shopping.

**Claim:** A written request for money owed by a WIC client or caregiver.

**Commodity Supplemental Food Program (CSFP):** This program provides food products to eligible clients in limited areas of Washington State. Federal rules say a person cannot be on WIC and CSFP at the same time. A family could have some people on WIC and others on CSFP. CSFP is different from the Food Distribution Program on Indian Reservations (FDPIR) and The Emergency Food Assistance Program (TEFAP).

**Complaint:** A statement to clinic or state office staff about someone who might have broken WIC rules.

**Disqualification:** When state office staff takes a WIC client or caregiver off the WIC program for up to one year for investigated and substantiated program violations.

**Disruptive behavior:** Acting in a way or using a loud voice that disturbs or stops the operation of a WIC clinic or WIC approved grocery store. This includes: refusing to leave the clinic or grocery store when asked to do so; throwing objects; or acting in a way that causes worry or fear for others.

**Dual enrollment:** This situation occurs when a WIC client is signed up for services in more than one WIC clinic, or CSFP and WIC at the same time.

**Dual participation:** Dual participation is when a client or caregiver gets more WIC checks than allowed for one month in the same WIC clinic, or in two or more WIC clinics, or gets WIC checks and the Commodity Supplemental Food Program (CSFP) food at the same time.

**Intent:** The knowledge and will to act in a particular way. For example: A reasonable person would think the WIC caregiver or client knew she or he broke a WIC rule. This determination is based on facts or evidence that includes information from people who saw what happened, from the caregiver or client themselves, or from other facts or evidence. Most of the facts or evidence should show the client or caregiver broke the rule on purpose in order to establish intent.

**Noncompliance:** An act that breaks WIC rules on purpose or accidentally. WIC rules for clients and caregivers are described on the WIC Rights and Responsibilities form.

**Physical harm:** An action towards another person that causes pain or injury, or an action towards property that causes damage.

**Examples:** Pushing, shoving, spitting, scratching, punching, kicking, biting, or throwing objects.

**Program violation:** An act which breaks WIC rules, federal or state laws, or regulations on purpose.
Rescind: WIC Nutrition Program State WIC office staff take back a decision about a WIC program violation.

Substitute Caregiver: A person authorized by a disqualified caregiver to assist an infant or child to receive uninterrupted WIC program benefits. A Substitute Caregiver is sometimes, but not always, a custodial parent.

Threats: Words or actions that show intent to hurt another person, or to damage property. These words or actions must be considered, by the person in danger, as truly possible of being carried out.

   Examples: Making a fist to another person; moving toward a person in a manner to make that person fearful; throwing an object towards a person; showing weapons or objects which can be used as weapons; making a bomb threat; or saying by words or actions that are meant to cause worry or fear. Examples of threatening statements could include: “Watch your back,” or “I’ll be waiting in the parking lot.”

Unintentional: Accidental, not deliberate, unplanned, or not done on purpose.

Verbal abuse: The act of yelling, screaming, using profanity, or making racial or ethnic remarks that are intended to hurt or worry another person.

Warning: Written notice to a WIC caregiver or client to not continue breaking WIC rules.

WIC Rights and Responsibilities (R & R): A form for clients or caregivers to sign at the beginning of each WIC eligibility period to agree to follow WIC rules. It includes written WIC rules for clients and caregivers on both sides of the form.
POLICY: Preventing Client Noncompliance

At each certification, recertification, and transfer-in, clinic staff shall talk with the WIC client or caregiver about the following to promote client compliance with WIC rules:

1. WIC rules for WIC food choices and why these foods were chosen for WIC clients;
2. how to use WIC checks correctly;
3. client’s rights and responsibilities, including following WIC rules; and
4. the consequences of breaking WIC rules; i.e., being taken off of the program for up to one year, paying money back to WIC, or facing possible legal charges, including paying fines.

Clinic staff shall take reasonable steps to provide this information to the WIC client or caregiver in their primary language. Examples of reasonable steps include using translated materials, the Language Line, and certified translators or bilingual staff in the clinic.

PROCEDURE:

Clinic staff:

A. Gives the WIC client or caregiver appropriate verbal and written information to explain the points listed above. Uses forms and materials in the WIC client or caregiver’s primary language, if possible. Examples of materials available in different languages to provide to clients and use with clients include:

1. WIC Rights and Responsibilities form (R&R),
2. WIC Appointment Folder, and
3. WIC Foods brochure.

Note: Refer to the Washington State WIC Manual Volume 1, Chapter 7 – Rights and Responsibilities, Chapter 22 – WIC Checks and Chapter 23 – Food Packages for more information regarding the Rights and Responsibilities form (R & R), WIC checks, and WIC foods. The R & R form has WIC rules on both sides of the form.

B. Encourages the WIC client or caregiver to ask questions, especially if this is her or his first time shopping for WIC foods and using WIC checks.
C. Reports any suspected or potential noncompliance or WIC rule breaking to state office staff. Refer to the “Reporting Noncompliance” policy in this chapter for more information.
POLICY: Preventing Dual Participation

Clinic staff shall tell WIC clients or caregivers at each certification, recertification, transfer-in, or transfer-out that dual participation is against WIC rules.

Dual participation is when a client or caregiver gets more WIC checks than allowed for one month in the same WIC clinic, or in two or more WIC clinics, or gets WIC checks and the Commodity Supplemental Food Program (CSFP) food at the same time.

When transferring a client into your clinic, clinic staff shall check to see if the transferring-in client is already in Client Services (CIMS) and shall examine the transfer card or other transfer documents closely to avoid creating duplicate clients or issuing more benefits than allowed.

Clinic staff shall take prompt action when state staff call about a dual enrolled client.

PROCEDURE:

Clinic staff:

A. Follows these procedures when a client is certified, recertified, or transfers in:

1. Checks to see if the client is already in Client Services before starting a new record in their clinic. The following practices help staff assess if the client has participated in WIC at their clinic or another Washington WIC clinic:
   a. Asks the client or caregiver if he or she received services at their clinic in the past.
   b. Asks the client or caregiver if he or she received services in another Washington state WIC clinic in the past.
   c. Asks if he or she used other last or first names when receiving WIC services.

2. Verbally reviews the WIC Rights and Responsibilities form with the client or caregiver. Tells them the consequences of dual participation; for example, possibly being taken off the WIC Program for one year, paying money back to the WIC Program, or facing possible legal charges, including paying fines. Refers to Volume 1, Chapter 7 – Rights and Responsibilities for more information about explaining the R & R form.

3. Explains to the client or caregiver what dual participation means, for example a client getting more WIC checks than allowed for one month in the same WIC
clinic, or in two or more WIC clinics, or getting WIC checks and the Commodity Supplemental Food Program (CSFP) food at the same time, and that it is not allowed. Refer to the definitions of dual participation and CSFP in this chapter for more information.

4. Explains to the client or caregiver to request a transfer card if they move or change clinics.

5. Reviews the transfer card or other documents to verify when the client is eligible for WIC checks at their clinic. Looks for the date checks were last issued to help decide whether to issue any more checks.

6. Before issuing checks for this month or future months, asks the client or caregiver if they have used checks for this month, or if they have any unused WIC checks for this month or future months. In many cases, clinic staff do not need to issue additional checks for a few months.

7. Provides client or caregiver information on approved stores in the local area.

Note: WIC checks in Washington State are issued on a rolling-month basis; for example, a check issued with a first-day-to-use of November 21, is good for 30 days. Although this check’s food benefit has valid dates in December, the food benefit to this client is for November. If a WIC client goes to a different WIC clinic in November and receives an additional set of WIC checks with a first-day-to-use of any day in November, they have received more checks than allowed for November.

B. Follows these procedures a client or caregiver transfers out of a clinic:

1. Tells the client or caregiver what dual participation means to the transferring client, for example a client getting WIC checks in two or more WIC clinics in the same month and that it is not allowed.

2. Provides a transfer card to the client or caregiver. Instructs them to give it to WIC staff at their new WIC clinic.


C. Follows state staff instructions for appropriate follow-up regarding a dual enrolled client.
Information:

State office staff, clinic staff, and clients or caregivers all have a shared responsibility to prevent dual participation. State office staff have responsibilities to monitor reports and assist with reducing causes of dual participation. Clinic staff have responsibilities to prevent dual participation when certifying and transferring clients in and out of their clinics. WIC clients or caregivers have responsibilities to: learn what causes dual participation, tell clinic staff if they have been on WIC before, and say if they have unused checks or have used checks for the current month when transferring into a new clinic.

Other dual participation prevention ideas include:

1. Contacting the Client Services (CIMS) Help Desk at the state WIC office to verify if a client is certified in another clinic and to find out if they already used this month’s WIC checks.

2. Responding promptly when state WIC office staff tells you a client is receiving WIC checks from two WIC clinics at the same time. Prompt response may prevent the client from using more WIC checks than allowed and can reduce the amount a client might be asked to pay back to WIC.

3. Collaborating and partnering with other Washington and bordering state clinics to prevent dual participation.

4. Providing a letter to transferring clients or caregivers with the transfer card. This letter’s purpose is to help the transferring client understand that getting WIC checks from two different WIC clinics in the same calendar month is against WIC rules. A sample letter is available in the Washington State WIC Manual Chapter 21 – Transfers/Verification of Certification.

The Commodity Supplemental Food Program (CSFP) is only available in very limited areas within Washington State.
CHAPTER 2  PROGRAM COMPLIANCE  
Section 3  Reporting and Following-up on Noncompliance

POLICY: Reporting Suspected Noncompliance

Clinic staff shall promptly report to the state WIC office any suspected WIC noncompliance by clients, caregivers, alternate endorsers, grocery store employees, clinic staff and other persons.

PROCEDURE:

Clinic staff:

A. Report suspected noncompliance to the state WIC office when a:

1. WIC client, caregiver, or alternate endorser is suspected of doing any of the following:

   a. Repeatedly trying to buy or buying non-WIC foods with WIC checks.
   b. Repeatedly trying to buy or buying more WIC food than allowed.
   c. Repeatedly trying to buy or buying infant formula not listed on the WIC check.
   d. Asking for cash back when using a WIC check.
   e. Altering the date on WIC check(s), then trying to use, or using the altered check(s).
   f. Selling, trading or giving away WIC foods or WIC checks. Selling or trading includes advertising WIC food items or WIC checks in a newspaper or on Craig’s list, selling on eBay, or at a garage or yard sale, to a consignment or other retail store.
   g. Not telling the truth about income, household size, or pregnancy, in order to obtain WIC services.
   h. Getting WIC checks from more than one WIC clinic in the same month.
   i. Getting WIC checks and CSFP foods in the same month.
   j. Threatening physical harm to WIC clinic staff, grocery store employees or to damage their property.
   k. Physically harming WIC clinic staff, grocery store employees or damaging their property.
1. Disruptive behavior at a WIC clinic or grocery store; i.e., continuing to shout, or use swear words to WIC clinic staff or grocery store employees after being asked to stop.

m. Treating WIC clinic staff or grocery store employees unfairly or poorly because of their race, color, national origin, sex, age, or disability; for example, abusive language, racial or ethnic slurs, etc.

Note: You should always follow your internal clinic or agency safety procedures if you are concerned about your safety.

State WIC Integrity Unit staff are available to help you with WIC client or caregiver noncompliance follow-up, especially when there is threatening behavior directed toward clinic staff.

2. WIC grocery store employee is suspected of doing any of the following (See the WIC Retailer Handbook for more information):

a. Offering or allowing substitution of non-WIC food when taking WIC checks.

b. Not following WIC rules for taking WIC checks.

c. Not following WIC rules to keep the minimum stock of WIC foods in the store.

d. Treating a WIC client or caregiver unfairly or poorly because of their race, color, national origin, sex, age, or disability; for example, abusive language, racial or ethnic slurs, etc.

3. Clinic staff is suspected of any of the following:

a. Knowingly certifying a person who is not eligible for WIC; for example the person is not income eligible, or at nutrition risk.

b. Giving WIC checks to anyone who is not eligible for WIC.

c. Issuing WIC checks to themselves, a family member, or friend. Refer to the Washington State WIC Manual Volume 1, Chapter 22 – WIC Checks for more information.

d. Creating fictional clients and issuing checks.

e. Treating a WIC client or caregiver unfairly or poorly because of their race, color, national origin, sex, age, or disability; for example, abusive language, racial or ethnic slurs, etc.
4. Any person who is suspected of noncompliance not mentioned above but listed in federal regulations (7 CFR 246). Refer to the federal regulations in the Washington State WIC Manual Volume 1, Appendix for more information. Consult with state WIC office staff if you are concerned about an incident and need information about situations that are not described in this chapter.

B. Reports suspected noncompliance to the state WIC office using one of the following methods. Use the first method listed unless it is inconvenient or not possible, then use the next method.

1. Call the state WIC office and ask to talk to the Customer Service Specialist.

2. Use Client Services (CIMS) “Complaints Against Clients” to report suspected noncompliance against WIC clients or caregivers and “Complaints Against Retailers” to report complaints against grocery store employees.

   a. Document the following in the complaint note field:
      
      1) Name of the person reporting the complaint;
      
      2) Specific information about the complaint including the date, time and location of the incident;
      
      3) Name of the person or store that the complaint report is about; and
      
      4) Staff name. Client Services does not sign your name automatically. Documenting your name will help state WIC office staff with successful follow-up.

   Note: Client Services allows only 200 characters in a complaint note field. Use more than one “complaint nature” from the mover box selection list to add another note field. Use “Detail Note Continued Again” or “More notes” as many times as needed to complete the complaint. Remember to save the complaint. Saving the complaint automatically sends it to the state WIC office.

Information:

Grocery store employees have the option to submit a complaint against a WIC client or caregiver by making a copy of the WIC Customer Incident Report form found in the “WIC Retailer Handbook.”
POLICY: Designating a Client Compliance Point of Contact

Every clinic coordinator shall designate a primary and backup staff member as the Client Compliance Point of Contact (POC). The Client Compliance Point of Contact’s role is to conduct or delegate WIC client or caregiver education sessions as directed by state WIC office staff and to assist state WIC office staff as they conduct investigations.

The clinic coordinator shall notify the state WIC office when the designated POC changes.

PROCEDURE:

The clinic coordinator:

A. Designates a primary and back-up staff member to be the POC for all of their agency clinic sites or for a specific clinic site.

B. Completes and sends the Client Compliance Point of Contact Form with updates to the state WIC office when there are changes. Use the Client Compliance Point of Contact Form located in the Appendix and makes copies as needed.

Note: The state office staff recommends review and update of the Client Compliance Point of Contact Form and personnel assignments once a year.

C. Ensures the designated POC receives training and instructions on prevention of client noncompliance, reporting and following-up on noncompliance.

D. Ensures the designated POC receives all current program compliance correspondence from the state WIC office; for example instructions, memorandums, policies, etc.

E. Ensures the POC performs follow-up with the WIC client or caregiver according to instructions from state office staff.

Note: State WIC Integrity Unit staff are available to assist with noncompliance follow-up, especially when there are threats or disruptive behavior directed toward clinic staff.

F. Ensures the POC takes steps to provide noncompliance follow-up education in the WIC client or caregiver’s primary language when appropriate; for example, arranges interpreters, orders materials in the client’s language and promotes use of the Language Line.
POLICY: Educational Follow-up on Complaints

The Client Compliance Point of Contact (POC) shall ensure educational follow-up on complaints against WIC clients or caregivers is conducted within 30 days of clinic receipt of the complaint. The goal of this follow-up education session with the client or caregiver is to prevent new complaints. The POC can delegate follow-up activities to ensure completion within 30 days.

PROCEDURE:

Client Compliance Point of Contact (POC):

A. Receives a written complaint against a WIC client or caregiver from the state WIC office.

B. Reviews the complaint immediately.

C. Reviews the client’s Flowsheet Notes to determine if the complaint has already been handled by clinic or state WIC office staff.

D. Determines the date of the WIC client or caregiver’s next appointment.

E. Looks in the clinic files for the client or caregiver’s signed copy of the R & R form for the current certification. If there is no R & R on file, the client or caregiver signs one at the next appointment.

F. Follows these steps if the WIC client or caregiver’s appointment is within the next 30 days:

1. Writes a note in the client’s Special Needs field to look at Flowsheet notes. Writes a note in the Flowsheet notes in the month in which the next appointment occurs to do the complaint follow-up at that appointment.

2. Talks to the client or caregiver about the complaint at the next appointment. Refer to the Sample Script for Complaint Follow-up located in the Appendix of this chapter if you need help on how to talk to the client or caregiver about the complaint.

Note: Clients or caregivers can provide a written statement in response to a complaint. Clinic staff write identifying information such as complaint date and client identification number on the form. Fax the statement to the Customer Service Specialist at the confidential fax line at 360-236-3777. Mail the statement to the Washington State WIC Nutrition Program, P O Box 47886, Olympia, WA 98504-7886.

3. Focuses the education session on information about the complaint; for example, by reviewing WIC foods, using WIC checks, and information from both sides of the R & R form. Talks to the WIC client or caregiver in their primary language.
by using the Language Line, clinic based interpreters and translated written materials.

Note: The WIC Foods Brochure, WIC Appointment Folder and the R & R are examples of materials that can be provided to the client or caregiver and are available in many languages. Refer to the Washington State WIC Manual Volume 1, Chapter 7 – Rights and Responsibilities, Chapter 22 – WIC Checks and Chapter 23 – Food Packages for information on the R & R, WIC checks and WIC foods brochure.

4. Asks the client or caregiver what questions they have.

5. Asks the client or caregiver to sign the R & R when needed. Gives the second page (yellow copy) of the two part form to the client or caregiver. Files the top page (original) of the form in the clinic’s file.

6. Documents in the client’s computer file on the current month’s Flowsheet Notes when follow-up is completed. Include the name of the person you spoke to, the topic(s) covered, the date, R & R signed (if needed), and your initials.

7. Shreds the clinic copies of the complaint once follow-up is completed. State WIC office staff maintains documentation of the original complaint.

G. Follows these steps if the WIC client or caregiver’s next appointment is not within the next 30 days:

1. Tries one time to contact the client or caregiver by phone.
   a. Document your attempt in the client’s Flowsheet notes.
   b. If you can’t reach the client or caregiver, wait until the next appointment to complete the education follow-up.

2. Reaches the client or caregiver by telephone and talks about the complaint. If you need help on how to talk to the client or caregiver about the complaint, refer to the Sample Script for Complaint Follow-up in the Appendix of this chapter.

Note: Clients or caregivers can provide a written statement in response to a complaint. Clinic staff writes identifying information such as complaint date and client identification number on the form and then faxes the statement to the Customer Service Specialist to the confidential fax line at 360-236-3777 or mails the form to Washington State WIC Nutrition Program, P O Box 47886, Olympia, WA 98504-7886.

3. Focuses their education session on information about the complaint; for example, by reviewing WIC foods, using WIC checks, and information from both sides of the R & R form. Talks to the WIC client or caregiver in their primary language.
by using the Language Line, clinic based interpreters and translated written materials.

**Note:** The WIC Foods Brochure, WIC Appointment Folder and the R & R are examples of materials that can be provided to the client or caregiver at the next appointment and are available in many languages. Refer to the Washington State WIC Manual Volume 1, Chapter 7 – Rights and Responsibilities, Chapter 22 - WIC Checks and Chapter 23 - Food Packages for information about the R & R, WIC checks and WIC foods respectively.

4. Asks the client or caregiver what questions they have.

5. Tells the client or caregiver WIC staff will check with them about their WIC shopping experience at their next appointment.

6. Informs the client or caregiver they need to sign an R & R at the next appointment if there is no signed R & R on file. Makes a note in the Special Needs field and the Flowsheet notes to ask about their WIC shopping experience and to have them sign the R & R form at the next appointment, if needed. Documents in the Flowsheet notes for the month in which their next appointment falls.

7. Documents the results of the phone call in the client’s file in the current month’s Flowsheet. Includes the name of the person spoken to, the topic(s) covered, the date, and your initials.

8. Shreds the clinic copies of the complaint once follow-up is completed. State WIC office maintains documentation of the original complaint.

9. Completes the following at the next appointment:
   a. Asks the client or caregiver about their WIC shopping experience and what questions they have.
   b. Has the client or caregiver sign the R & R when needed. Provides the client or caregiver with a copy of the signed R & R and files the original in the clinic file.

H. Contacts state WIC office Customer Services Specialist with questions or comments about handling complaint follow-up.

**Information:**

We believe most WIC clients and caregivers are honest, and if a rule appears to have been broken, it is likely to have been a mistake. Clinic staff can prevent additional mistakes by following up promptly with the client or caregiver with an education session.
If a reported noncompliant act appears to be intentional, state WIC office staff will conduct follow-up and may ask for assistance from clinic staff.
POLICY: Assisting With Client Investigations and Follow-up Actions

The state WIC Office is the lead on all investigations and initiates all follow-up actions for client noncompliance. Follow-up can include education, warning, claim, disqualification, and authorizing a substitute caregiver instead of disqualification.

When investigating a complaint against a client or caregiver, state WIC office staff will consider the actions of clinic staff or grocery store employees that may have contributed to the client’s or caregiver’s actions. Clinic staff or grocery store employees may be advised, educated, or warned about program requirements for fair and equal treatment of clients and compliance with state and federal rules, policies, and procedures.

The Client Compliance Point of Contact (POC), or other designated clinic staff, shall assist with client investigations and follow-up as directed by state WIC office staff.

PROCEDURE:

A. State WIC office staff:

1. Sends notification by phone, email or mail to the Client Compliance Point of Contact (POC) about a client investigation.

2. Asks for information from the POC or delegated clinic staff.

3. Instructs the POC or delegated clinic staff to:
   a. Ask the client or caregiver to give a voluntary statement.
      1) It is important to make every effort to allow the client or caregiver to provide the voluntary statement in his/her own words.
      2) When the client or caregiver writes the statement in another language, the state WIC office arranges for the statement to be translated.
   b. Send or fax the voluntary statement to the state WIC Integrity Unit. Send faxes to the confidential fax line at 360-236-3777. Mail statements to the Washington State WIC Nutrition Program, P O Box 47886, Olympia, WA 98504-7886.
   c. Give a client or caregiver the warning or disqualification letter at the next appointment if mail delivery is unsuccessful.
   d. Provide education to the client or caregiver. For example, provide information about WIC authorized foods, use of WIC checks, appropriate behavior in the clinic or store, or getting checks from only one clinic at a time.
   e. Review the Rights and Responsibilities with the client or caregiver.
4. Consults with clinic staff when the client is disqualified to determine the beginning and end dates of the disqualification.

5. Discusses the option of a substitute caregiver with clinic staff when appropriate.

6. Asks the POC or delegated clinic staff to document all pertinent information in the client’s file.
   a. Asks the POC or delegated clinic staff to use the Special Needs field with a brief note to alert staff to look in Flowsheet notes. The Flowsheet notes area in the client’s Client Services (CIMS) file is used for brief notes to remind clinic staff to conduct complaint education or to do a program violation follow-up task.
   b. Asks the POC or delegated clinic staff to document information in the Flowsheet notes for the month in which the note needs to be seen. For example, if checks cannot be issued in March the note is placed under March on the Flowsheet.

B. Client Compliance Point of Contact (POC):
   1. Receives notification from state WIC office staff regarding a client investigation.
   2. Provides information to state WIC office staff as requested.
   3. Follows up with the client or caregiver as directed by state WIC office staff. This could include the following:
      a. Assists the client or caregiver in giving a voluntary statement.
         1) It is important to make every effort to allow the client or caregiver to provide the voluntary statement in his/her own words.
         2) When the client or caregiver writes the statement in another language, the state WIC office arranges for the statement to be translated.
      b. Sends or faxes the voluntary statement to the state WIC Integrity Unit. Send faxes to the confidential fax line at 360-236-3777. Mail statements to the Washington State WIC Nutrition Program, P O Box 47886, Olympia, WA 98504-7886.
      c. Gives a client or caregiver the warning or disqualification letter at the next appointment if mail delivery is unsuccessful.
      d. Provides education to the client or caregiver. For example, provides information about WIC authorized foods, using WIC checks, appropriate behavior in the clinic or store, or getting checks from only one clinic at a time.
e. Reviews the Rights and Responsibilities with the client or caregiver.

4. Discusses the option of a substitute caregiver with state office staff, when appropriate.

5. Documents all pertinent information in the client’s file.
   a. Uses the Special Needs field with a brief note to alert staff to look in Flowsheet notes. The Flowsheet notes area in the client’s Client Services (CIMS) file is used for brief notes to remind clinic staff to conduct complaint education or to do a program violation follow-up task.
   b. Documents information in the Flowsheet notes for the month in which the note needs to be seen. For example, if checks cannot be issued in March the note is placed under March on the Flowsheet.
POLICY: **Compromising or Interfering With Program Investigations**

Clinic staff shall not intentionally compromise or interfere with any WIC Nutrition Program investigation. This includes, but is not limited to the following activities:

1. Providing details of an active investigation to the person who is the focus of the investigation unless authorized by state WIC office staff.

2. Coaching or directing the person who is the focus of an investigation on what action to take when contacted by state WIC office staff.

3. Withholding information or destroying documentation relevant to an investigation.

PROCEDURE:

Clinic staff:

A. Assists with WIC Nutrition Program investigations according to policy as listed above and in the policies “Assisting With Client Investigations and Follow-up Actions” and “Conducting Complaint Follow-up” in this chapter.
POLICY: Client Warnings

The State WIC Office is the lead on issuing warning letters. The State WIC Office issues client warning letters when there is substantiated noncompliance and intent to break a rule on purpose cannot be proved.

The Client Compliance Point of Contact (POC) shall assist as directed by state office staff.

PROCEDURE:

A. State office staff:
   1. Sends the original warning letter to the client and a copy of the letter to the Client Compliance Point of Contact (POC).
   2. Instructs the POC or delegated clinic staff to file the warning letter in the clinic paper file.

B. Client Compliance Point of Contact (POC):
   1. Receives and files the client warning letter.
   2. Provides information to the client or caregiver about the warning as requested by state office staff, the client or caregiver. This could include hand-delivering the warning letter to the client at a future WIC appointment, as requested by staff office staff.
POLICY: Claims and Payments

WIC clients or caregivers shall be required to pay the WIC Nutrition Program for the dollar value of food or WIC checks intentionally received or used improperly. A claim notice is included, when appropriate, with a warning or disqualification letter. The state WIC office shall manage all aspects of the claims and payment processes. The state WIC office will notify the Client Compliance Point of Contact (POC) when the client or caregiver pays the claim amount in full.

Clinic staff shall not accept cash from the client or caregiver for claim payments, pay the claim amount for the client or caregiver, or mail payments for the client or caregiver.

PROCEDURE:

A. State WIC office staff or a designated representative:

1. Sends the client or caregiver a claim letter, invoice, and pre-addressed payment envelope when an investigation leads to a determination of a program violation requiring repayment. The amount of the claim is equal to the dollar value of food or WIC checks intentionally received or used improperly.

   a. Sends an English letter unless otherwise requested or indicated in the client’s Client Services file. State WIC office staff will assure that non-English speaking or reading clients will have access to this information in their language.

   b. Includes Fair Hearing information in the claim letter.

2. Sends a second letter when the United States Post Office returns a letter, the client’s or caregiver’s address has changed, or the state WIC office staff gets additional information affecting the claim amount.

3. Sends a claim letter to the local clinic when delivery by mail was refused or if the letter was returned undeliverable. State staff may instruct clinic staff to hand deliver the claim letter to the client or caregiver at the next appointment.

4. Gives the client or caregiver options to pay the claim amount in one payment or arrange a payment plan.

   a. The state WIC office or designated representative will set up a payment plan, if requested, and send confirmation of this payment plan to the client or caregiver.

   b. The standard practice is to have clients/caregivers repay claims in 12 months or less.

5. Sends a letter to the client or caregiver, and a copy to the clinic, when the claim is paid in full. The letter includes information about how to get back on the WIC
Nutrition Program if the client was disqualified. Refer to the “Disqualification” policy in this chapter for more information.

B. Client Compliance Point of Contact (POC):

1. Follows instructions as directed by state WIC office staff.

2. Directs the client or caregiver to contact the state WIC office, if there are any questions clinic staff cannot answer.

3. Does not accept cash, checks or money orders from the client or caregiver.

4. Does not write a personal check, agency check or money order in exchange for cash from the client or caregiver.

5. Does not pay the claim amount for the client or caregiver out of local clinic funds or other funds.

6. Does not mail the claim payment for the client or caregiver.

7. Directs the client or caregiver to mail the claim payment to the address provided on the claim invoice. Informs the client or caregiver they can pay with a personal check or money order.

8. Directs the client or caregiver to enclose a copy of the invoice with the payment.

9. Documents pertinent information related to client claim in the client’s file and places paper copies of documents received from the state WIC office related to client claims and payments in the clinic or client paper filing system.

   a. Uses the Special Needs field and the Flowsheet for brief notes in the client’s Client Services file to flag a client record for time sensitive information about client claims payments. Document information on the Flowsheet in the month in which the note needs to be seen. For example, if checks cannot be issued in March the note is placed under March on the Flowsheet.

   b. Uses the Notes tab in the Follow-up wizard to document follow-up completed with the client or caregiver and for detailed or confidential information. These notes can be longer and are not subject to being written over.

Information:

Payment notices and processing of payments may be done by state office staff, Washington State Department of Health staff, or other delegated representatives.
POLICY: Disqualification

A WIC client or caregiver shall be disqualified only by state WIC office staff for up to one year for investigated and substantiated program violations.

A disqualified client or caregiver shall not be eligible to receive WIC benefits during the disqualification unless a Fair Hearing has been requested within the required timeframe and the client has a current eligibility period. Refer to the Washington State WIC Manual Volume 1, Chapter 20 – Notification, Fair Hearings and Civil Rights for more information.

Clinic staff shall issue checks monthly for clients or caregivers who have a pending disqualification, e.g., the disqualification has not yet begun due to the required 20-day notification period, or they have requested a Fair Hearing within the required timeframe.

The client or caregiver shall be allowed to reapply for WIC when any of the following three conditions exist:

1. The disqualification period is over.

2. The client or caregiver paid the claim amount in full before the end of a disqualification period. Clinic staff shall be notified by state office staff when the client or caregiver pays the claim amount in full before the end of a disqualification period. Refer to the policy “Claims and Payments” in this chapter for more information.

3. The disqualified client is a child whose caregiver has changed. The disqualification shall not follow the child to the new household. Examples include when custody of the child changes to another parent, as in cases of divorce; or the child is placed in foster care.

Note: Refer to the policy “Using a Substitute Caregiver Instead of Disqualification” for information about using a Substitute Caregiver for an infant or child instead of disqualification when custody of the child has not changed.

Disqualification cases involving threat, physical harm, repeated verbal abuse or disruptive behavior shall require the client or caregiver to serve the full disqualification period regardless of full payment of a claim amount.

Note: Household/family members of a client group with a member or members who have been disqualified from the WIC Nutrition Program shall be allowed to apply for WIC. These applicants shall be assessed for WIC eligibility according to program guidelines. Contact staff at the state WIC office Integrity Unit for guidance.
PROCEDURE:

A. State WIC office staff:
   1. Determines the beginning and end dates of the disqualification.
   2. Sends the client or caregiver the disqualification letter which includes the client’s name, program violation, duration of the disqualification, information on how to apply for a Fair Hearing, claim and payment information, a referral to Within Reach for information about other community resources, and information about how to re-apply for WIC when the disqualification period is over or the claim amount is paid in full. If the disqualification would mean an interruption of WIC benefits for an otherwise qualified infant or child, sends a Substitute Caregiver Authorization Form with the disqualification letter.
   3. Updates information for this client in Client Services (CIMS). All pertinent information regarding a client’s disqualification will display on the Disqualification tab in Client Services.
   4. Sends a copy of the Disqualification letter to the clinic.
   5. If a Substitute Caregiver is approved, sends information about the Substitute Caregiver to the POC. Substitute Caregiver information also displays on the Disqualification tab in Client Services. Refer to the policy “Using a Substitute Caregiver Instead of Disqualification” in this chapter for more information.

B. The Client Compliance Point of Contact (POC):
   1. Receives and files the clinic copy of the disqualification letter from state office staff. The client disqualification letter includes the client’s name, program violation, duration of the disqualification, information on how to apply for a Fair Hearing, claim and payment information, a referral to Within Reach for information about other community resources, Substitute Caregiver Authorization Form, and information about how to re-apply for WIC when the disqualification period is over or the claim amount is paid in full.
   2. Assists the client or caregiver when she or he requests to file a Fair Hearing or Civil Rights complaint. Refer to the State WIC Manual, Volume 1, Chapter 20 – Notification, Fair Hearings and Civil Rights for more information.
   3. Provides the client or caregiver with appropriate referrals to other community resources, if the client or caregiver requests additional information.
   4. Consults with state WIC office staff if they have questions about serving disqualified clients; for example, a disqualified client comes in for WIC services before their disqualification period is over.
5. Reassesses the client for program eligibility after the end of the disqualification, or when the claim amount has been paid in full before the end of the disqualification period, or when the disqualified child’s caregiver changes.
   
a. Disqualification cases involving threats, physical harm, repeated verbal abuse or repeated disruptive behavior require the client or caregiver to serve the full disqualification period regardless of payment in full of a claim amount.
   
b. If a child’s caregiver changes, the disqualification does not follow the child.

Example: If a child has been disqualified and is then placed with a different foster family or another parent obtains custody of the child, the disqualification does not follow the child, and it does not apply to the new caregiver. In this case, the child is reassessed for income and nutrition risk eligibility using the new household information.

6. Consults state office staff when there are questions regarding re-assessing a client’s program eligibility after a disqualification.

C. Clinic staff:

1. Assess new household members within a group that has one or all members disqualified for Program eligibility according to program guidelines.

Example: A pregnant woman is disqualified for misuse of WIC checks. Once her infant is born she may apply for WIC for the infant. Clinic staff assess the infant for WIC eligibility according to policy and procedure. State WIC Integrity Unit staff will determine if the woman is allowed to pick up and use WIC checks for the infant or if a substitute caregiver is required.

2. Contact staff at the state WIC office for guidance as needed.
POLICY: Using a Substitute Caregiver Instead of Disqualification

The WIC Nutrition Program shall allow a substitute caregiver instead of disqualification for infants, children, and women under 18 years of age.

The substitute caregiver, if authorized by the disqualified caregiver and the state WIC office, shall be required for the entire length of the disqualification or as long as the clients are WIC eligible to receive WIC benefits. The substitute caregiver shall be required to sign the WIC Rights and Responsibilities (R & R) form agreeing to abide by WIC rules.

Note: It shall be determined by state WIC office staff on a case-by-case basis if the substitute caregiver shall be responsible for all WIC Nutrition Program functions on behalf of all clients in the group or just the disqualified client.

If there is a claim associated with the disqualification, and the claim is paid in full prior to the end of the disqualification period, the disqualified client or caregiver shall be allowed to resume their role of caregiver as they reapply for WIC benefits. The only exception to this policy is when the program violation involves threats, physical harm, repeated verbal abuse or repeated disruptive behavior. Refer to the “Disqualification” policy in this chapter for more information.

The disqualified caregiver’s income shall be used for income determinations. The substitute caregiver’s income is not considered for the client’s income eligibility determinations, unless it is appropriate to do so, for example, the substitute caregiver is a member of the disqualified client’s household. Refer to Volume 1, Chapter 6 – Income for more information about income assessment and the definition of household.

PROCEDURE:

A. State WIC office staff:


2. Sends a Substitute Caregiver Authorization Form to the disqualified caregiver with the disqualification letter. The letter will include instructions for the caregiver to complete the form and send it back to the state WIC office. A separate form is needed for each child in the family group.

3. Reviews the completed form and consults with the POC on the use of a substitute caregiver.

4. Decides if a substitute caregiver will be authorized.

5. Sends a confirmation letter to the disqualified caregiver and the substitute caregiver indicating that the substitute caregiver has been approved or
disapproved and the beginning and ending dates of the substitute caregiver’s authorization for each separate child in the family group.

6. Imposes the disqualification if the client or caregiver refuses to have a substitute caregiver or does not return the authorization form within the time requested.

7. If the authorization only allows the substitute caregiver to pick up and use checks for the current certification period, the state WIC office will impose the disqualification after the end of the current certification period.

8. Notifies Client Compliance Point of Contact (POC) when a substitute caregiver is used instead of disqualification, including the following information: beginning and end dates of the disqualification period, the substitute caregiver’s address, phone number (if available), language spoken and written, and the relationship to the client or clients.

9. Designates the substitute caregiver for the amount of time chosen by the disqualified caregiver.

10. Keeps the original copy of the Substitute Caregiver Authorization form and sends a copy to the POC.

11. Decides if a subsequent substitute caregiver will be authorized.

B. Client Compliance Point of Contact (POC):

1. Receives and files the Substitute Caregiver Authorization form.

2. Checks to see if the substitute caregiver information is in each client’s file for the family group on the Disqualification tab. Note: If the substitute caregiver information is not in the client file contact the Integrity Unit at the state WIC office.

3. Reviews the R & R form with the substitute caregiver and has the substitute caregiver sign the form. Refer to the Washington State WIC Manual, Volume 1, Chapter 7 – Rights and Responsibilities.

4. Provides information about WIC foods and how to use WIC checks according to procedures outlined in the Washington State WIC Manual, Volume 1, Chapter 13 – Basic Contact, Chapter 22 – WIC Checks and Chapter 23 – Food Packages. The WIC Food Brochure and the WIC Appointment Folder are examples of materials to provide to the substitute caregiver with written information about WIC foods and using WIC checks.

5. Notifies the state WIC office staff if the substitute caregiver cannot fulfill this duty as specified in the Substitute Caregiver Form; for example, if the substitute caregiver goes on an extended vacation, etc.
6. Provides additional information to state office staff if the substitute caregiver is suspected of program abuse. For example, if clinic staff are concerned that the client or clients are not receiving the WIC foods.

**Note:** Refers to the Washington State WIC Manual Volume 1, Chapter 25 - Legal Considerations and Confidentiality for additional information about designating and using substitute caregivers.

**Information:**

State office staff must notify the Department of Social and Health Services, Child Protective Services if there is suspected abuse or neglect of a child.
APPENDIX
APPENDIX A – Client Noncompliance Investigation and Follow-Up Process

1. State WIC office receives report of suspected noncompliance from:
   - CIMS computer-generated reports
   - Clinic staff
   - Retailers
   - Third party

2. State WIC investigator conducts investigation, gathers and reviews facts and statements and compiles documentation into a case file. (If eligible, clients continue to receive uninterrupted WIC services throughout the duration of the investigation)

3. State Integrity Unit Manager reviews completed case file, determines if noncompliance is substantiated, and decides whether cross-sectional team review is warranted.

4. a. Cross-sectional team reviews the case file and makes a recommendation about the appropriate follow-up actions.

4. b. State Integrity Unit Manager determines the appropriate follow-up actions.

- State Integrity Unit staff do appropriate follow-up, including warning, claim and/or disqualification.

- State Integrity Unit staff sends follow-up letter to client and clinic.

- State staff close case.

Legend for Flowchart Shapes

Revised: 4/14/2008
Appendix B  CLIENT COMPLIANCE POINT OF CONTACT (POC) FORM

Instructions: Please fill in the boxes as completely as possible. If your primary POC has alternating days in satellite clinics, please list those also. (Example: Susan works in Richland on Monday, Wednesday and Friday, she works in Pasco on Tuesday and Thursday.) This information will help us quickly get information to the right person. Make copies of this form and send updates as needed. Send this completed form to the address or fax number listed below:

Attn: Integrity Unit  
WIC Nutrition Program  
Post Office Box 47886  
Olympia, WA 98504-7886  
Fax: 360-236-3777

Thank you for your help in maintaining an up-to-date list of POCs.

<table>
<thead>
<tr>
<th>POC Name</th>
<th>Primary POC for your clinic(s)</th>
<th>Backup POC for your clinic(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Role in Clinic</td>
<td>Yes</td>
<td>No, list specific clinic or site name(s) below</td>
</tr>
<tr>
<td>Agency Name</td>
<td>No, list specific clinic or site name(s) below</td>
<td></td>
</tr>
<tr>
<td>Is this POC for all of your sites?</td>
<td>Yes</td>
<td>No, list specific clinic or site name(s) below</td>
</tr>
<tr>
<td>Clinic or Site Name</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Primary Clinic for Your Clinics (Include street address)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Phone Number (Include extension)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fax Number</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Email</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Days you are available at primary clinic</td>
<td>Circle the days of the week you are here: Mon Tues Wed Thu Fri</td>
<td>Circle the days of the week you are here: Mon Tues Wed Thu Fri</td>
</tr>
<tr>
<td>Days you are available at alternate clinic</td>
<td>Write city name of alternate location below:</td>
<td>Write city name of alternate location below:</td>
</tr>
<tr>
<td></td>
<td>Circle the days of the week you are here Mon Tues Wed Thu Fri</td>
<td>Circle the days of the week you are here Mon Tues Wed Thu Fri</td>
</tr>
</tbody>
</table>

Name of WIC staff submitting form:
Sample Phone Script for Complaint Follow-Up

♦ Hello ________________
   (insert client/caregiver name)

♦ This is ________________ from the WIC clinic.
   (insert your name)

♦ I’m calling to ask you about your WIC shopping at ____________________.
   (insert store name)

   Can you tell me what happened on ________________?
   (insert date)

   Pause to let the client/caregiver explain in their own words.

♦ ________________, thanks for explaining.
   (insert client/caregiver name)

♦ So, on that day
   __________________
   (paraphrase what the client/caregiver said)

♦ Is this correct?  Listen to response.

♦ Let’s take a few minutes to go over the WIC foods, check cashing procedures and your rights and responsibilities as a WIC client. We may not have covered this very well before.

   Provide education relevant to the client/caregiver’s comments and the complaint.

♦ What questions do you have? Can I explain anything? Listen to response and answer questions.

♦ At your next WIC appointment we will ask about your WIC shopping.
   If they also need to sign the R & R, tell them they will be asked to review and sign the R & R form at this appointment.

♦ Thank you for talking with me today.

♦ We’ll see you on __________________________. Good-bye.