

VIII. CERTIFICATION, ELIGIBILITY & COORDINATION OF SERVICES

(Please indicate) State Agency: **South Dakota**

for FY **2023**

The review of certification, eligibility and coordination of services involves the process of determining and documenting participant eligibility (income eligibility as well as nutritional risk determination, standards, and criteria), and the coordination of certification activities with other health services.

During a disaster or public health emergency, the State agency may request to implement existing WIC regulatory and programmatic flexibilities to support the continuation of Program benefits and services. State agencies should consider the overarching authority, i.e., Stafford Act or provision(s) authorized by Congress, before developing a policy and procedure. The State agency must provide a detailed description of how it plans to operationalize the flexibility through their procedure manual where applicable. Please note the State Plan Guidance is not intended to capture a description of waivers authorized by Congress with separate reporting requirements, i.e., the Families First Coronavirus Response Act (PL 116-127).

More recently, Executive Order (EO) 13988, "*Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation*," was issued to all Federal Agencies. The EO set out policies that all persons are entitled to dignity, respect, and equal treatment under the law, no matter their gender identity or sexual orientation. The EO does not usurp section 17 of 42 U.S.C, as amended or applicable regulations. However, where appropriate, State agencies may update their policies and procedures to align with the contents of the EO

- A. **Eligibility Determination and Documentation - 246.7(c)(1); 2(1); 246.7(d)(1); (2)(v)(B)**: describe the policies and procedures for determining and documenting eligibility including the application process, residency requirements, identity requirements, documented physical presence or valid exception; proof of categorical eligibility, income limits, income eligibility documentation, determination of special populations and a definition of and policy toward the economic unit.
- B. **Nutrition Risk Determination, Documentation, and Priority Assignment - 246.4(a)(11)(i)**: describe the policies and procedures for determining and documenting nutritional risk and priority assignments. Include a copy of the nutritional risk criteria the State agency plans to use with the appropriate documentation.
- C. **Health Care Agreements, Referrals, and Coordination - 246.4(a)(6); (7); (8) and (19)**: describe the procedures for coordinating agreements and services with other health care providers at the State and local agency level including procedures to ensure that benefits are provided to persons with special needs.
- D. **Processing Standards - 246.4(a)(11)(i); 246.7(f)(2)**: describe the State agency's processing procedures to ensure that the required standards and timelines are met.
- E. **Certification Periods - 246.4(a)(11)(i); 246.7(g)**: describe the policies and procedures used to establish certification periods for participants and the autonomy (if applicable) granted to local agencies in determining eligibility time periods.
- F. **Transfer of Certification - 246.4(a)(6); (11)(i); and 246.7(k)**: describe the State agency's procedures for the transfer of certification and VOC cards ensuring that vital participant and program information is included.
- G. **Dual Participation, Participant Rights and Responsibilities, Fair Hearing Procedures, and Sanction System - 246.4(a)(11)(i); (16); (17) and (18); 246.7(h); 246.7(i)(10); 246.7(j); 246.7(l)**: describe the procedures used to detect and prevent dual participation at the State and local level, the procedures for ensuring participants are notified of their rights and responsibilities, and the procedures regarding participant fair hearings and sanction system.

A. Eligibility, Determination, and Documentation

1. Application Process

a. The State agency requires all local agencies to use a standardized application process for all persons applying for the WIC Program

Yes No

b. The State agency shares Statewide or at local agency (check one), a common income application or certification form with (check all that apply):

- No other benefit programs Medicaid
- TANF SNAP
- Maternal and Child Health (MCH) Other reduced-price health care program(s)
- Other (specify):

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

2. Residency, Identity and Physical Presence Requirements

a. The State agency requires documentation of residency

Yes

Signed statement that documentation of residency information is not available and why (e.g., homeless, theft, fire) No (Specify why, e.g., ITOs and Alaska natives who are exempt from this requirement):

b. The State agency has reciprocal agreements concerning residency with other State agencies

Yes; list States:

No

Describe any reciprocal agreements:
Dual participation agreements

c. The State agency has special residency policies and procedures for how the following special categories should be treated (check all that apply):

- Homeless applicants Institutionalized applicants
- Migrants Indian Tribal Organizations
- None Other (specify):

d. The State agency allows the following as proof of identity; please select all that apply.

- Driver's license
- Passport
- State issued identification card
- Employer issued identity card
- Documentation from participation in a means-tested program.
- Other (please list all that are accepted) [Birth Certificate](#), [Foster Child Record](#), [Health Benefit \(Insurance Card\)](#), [Immigration papers](#), [Valid Military ID](#), [Valid Visa](#), [Pay Stubs](#), [School ID](#), [Social Security Card](#), [Tax Form](#), [Voter Registration Card](#), [Crib Card/Hospital Record \(with infant's name\)](#).

e. The State agency requires physical presence of the applicant or a valid exception to be documented:

- Yes except for the following condition(s):
 - Applicant or parent/caretaker is an individual with disabilities which prevent him/her from being physically present at the WIC clinic (e.g., medical equipment, bedrest or serious illness exacerbated by coming into clinic).
 - Applicant is an infant or child receiving documented ongoing health care from any health care provider, including the local agency; being physically present would pose an unreasonable barrier; and the infant or child was present at his/her initial WIC certification.
 - Applicant is an infant under 8 weeks of age who cannot be present at the time of certification (for a reason determined appropriate by the local agency) and for whom all necessary certification information is provided.
 - Applicant is an infant or child who was present at his/her initial certification; was present at certification within the one-year period of the most recent determination; and is under the care of one or more working parent, or under the care of primary working caretakers whose status presents a barrier to bringing the infant or child in to the WIC clinic.

3. The State agency requires applicants to submit proof of categorical eligibility for (check all that apply):

- All pregnant women
- Pregnant women not visibly pregnant
- Postpartum women
- Children
- Infants
- Other (specify): [No categorical proof is required](#)

4. Income Limits for Eligibility

a. The State agency gross income limit for income eligibility is 185% of the federal income guidelines

- Yes, with no local agency exceptions
- Yes, with local agency variation
- No, with no local agency exceptions (specify State maximum percent of poverty: %)
- No, with local agency variation (specify State maximum percent of poverty: %)

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

[Policy and Procedure Manual 2.04 Income Determination & 2.05 SD WIC Income Guidelines](#)

b. The State agency implements income eligibility guidelines concurrently with Medicaid

- Yes
- No

ADDITIONAL DETAIL: Please attach a copy of the income guidelines in the Appendix or the appropriate citation in the Procedure Manual. Certification and Eligibility Appendix and/or Procedure Manual (citation): [Policy and Procedure Manual 2.04 Income Determination & 2.06 Adjunct Income Eligibility](#); WWW.sdwic.org/knowledgebase

c. The State agency requires documentation of an applicant's, or certain family members' eligibility to receive benefits in the following means-tested programs that confer adjunctive income eligibility for WIC, as set forth in [246.7\(d\)\(2\)\(vi\)](#):

Poverty Level

- TANF (specify State "percent of poverty") 209%
- SNAP 130%
- Medicaid (specify State "percent of poverty" for each) 138%
 - Pregnant women and infants 138%
 - Children 187%
 - Other categorically eligible women %

d. **The State agency uses documented eligibility for participation in other means-tested programs to establish automatic WIC income eligibility (check all that apply, and the poverty levels used for each):**

- | | <u>Poverty Level</u> |
|---|----------------------|
| <input type="checkbox"/> Free or Reduced-Price School Meals | % |
| <input type="checkbox"/> Supplemental Security Income (SSI) | % |
| <input type="checkbox"/> Other State-provided health insurance (specify State "percent of poverty" maximum %) | % |
| <input checked="" type="checkbox"/> Food Distribution Program on Indian Reservations (FDPIR) | 100% |
| <input type="checkbox"/> Other (specify): | % |

e. **Individuals are required to document that they or a family member are certified as eligible to receive TANF, Medicaid, or SNAP benefits or, under the State option, certified as eligible to receive benefits in State- administered programs by providing:**

- Program ID card (only if it includes dates of eligibility) or notice of current eligibility
- Documentation of participation in State-administered programs (and such programs require documentation of income and have income guidelines at or below WIC's income guideline of 185% of poverty).
(Program[s]:)

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

[Policy and Procedure Manual 2.04 Income Determination & 2.06 Adjunct Income Eligibility](#)

SDWIC-IT has an interface with DSS Medicaid which provides data for those active clients receiving WIC-approved Medicaid codes for eligibility and SNAP to determine adjunctive eligibility based on current participation. Evaluation: WIC income eligibility will be evaluated during the management evaluation process completed for Local Agencies or as the need arises.

5. Income Eligibility Documentation

a. **For WIC applicants whose income eligibility is not based on adjunctive or automatic income eligibility in another means-tested program, the State agency requires (check all that apply):**

- Documentation of income information
- Signed statement that documentation of income information is not available and why
- Notation in the participant record if the applicant declares no income and why
- Other (specify):

b. **Exceptions to income documentation are made for the following:**

- The necessary information is not available
- The income documentation presents an unreasonable barrier to participation as determined by the State agency
- Those applicants with no income
- Those applicants who work for cash
- Other (specify):

c. If the applicant does not supply the necessary documentation at the certification appointment, local agencies are generally instructed to do the following:

- Certification process is terminated, and no food instruments/cash-value vouchers are provided; appointment rescheduled
- Temporary certification (not to exceed 30 days) for applicants that have one qualifying nutrition risk and are able to present at least two of the three required documents (identification, residency, and income) during a certification appointment is completed and food instruments are provided. However, if applicant does not provide documentation within 30 days, certification expires, and a new eligibility determination must be conducted.
- Other (specify):

d. The State agency requires State-wide, or at local agency discretion (check one), the verification of applicant income information, if determined necessary

- No
- Yes (check all sources required, as appropriate):
 - Employer
 - Public assistance offices
 - State employment offices (wage match, unemployment)
 - Social Security Administration
 - School districts/offices
 - Collateral contacts
 - Other (specify): *Check stubs; unemployment benefit stub; earning statement; W-2 forms corresponding income tax returns; IRS tax forms; written verification such as a notarized statement, court order, etc., that confirms a person's cash income.*

e. The State agency has specific policies that define actions to be taken at a mid-certification appointment if a participant's income changes.

- Yes; Please specify
- No

f. The State agency allows documentation of alternate income procedures for Indian or Indian Health Service (IHS) operated local agencies.

- Yes
- No
- Not Applicable

g. The State agency has a specific policy that addresses income from benefits provided by a State-administered programs.

- Yes
- No

h. The State agency has a specific policy to ensure that certain types of income, such as combat pay or

Family Subsistence Supplemental Allowance (FSSA) payments for households that include service members, are excluded from consideration in the WIC income eligibility determination, as provided by law and regulation.

Yes No

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

[Policy and Procedure Manual 2.04 Income Determination](#)

6. In determining an applicant's income eligibility for WIC, the State agency excludes basic allowance for housing received by military services personnel residing off military installations and in privatized housing, whether on- or off-base.

Yes, State-wide No

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

[Policy and Procedure Manual 2.04 Income Determination](#)

7. The State agency excludes cost-of-living allowances for military personnel on duty outside of the contiguous 48 States (OCONUS COLA) from applicant income for purposes of WIC income determination.

Yes, State-wide No

8. In determining an applicant's income eligibility for WIC, the State agency excludes payments given to deployed military service members. These payments are in accordance with Chapter 5 of Title 37 of the U.S.C.

Yes, State-wide No

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

[Policy and Procedure Manual 2.04 Income Determination](#)

9. In determining an applicant's income eligibility for WIC, the State agency calculates multiple income sources received by an applicant's household at different frequencies in accordance with WIC Policy Memo 2011-7 and compares the sum to the established WIC IEGs.

Yes, State-wide No

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

[Policy and Procedure Manual 2.04 Income Determination](#)

10. The State agency defines the economic unit in accordance with WIC Policy Memo 2013-3.

Yes No (if no, why not):

Provide the definition of an economic unit used by the State agency in the Appendix or the appropriate citation in the Procedure Manual.

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

[Policy and Procedure Manual 2.04 Income Determination](#)

11. The State agency has specific policies or lists examples concerning the determination of the economic unit for (check all that apply):

Foster children
 Divorced/legally separated parents; step parents
 Absentee spouse (military hardship tours, etc.)
 Cohabitation

- Institutionalized applicants (including incarcerated applicants)
- Homeless applicants
- Minors ("emancipated" minors)
- Separate economic units under the same roof
- Striker/unemployed
- Students away at school
- Self-employed applicants
- Other (specify):

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):
[Policy and Procedure Manual 2.08 Family Size](#)

12. Mid-Certification Disqualification

a. **The State agency ensures that local agencies are required to stipulate that an individual is not automatically disqualified mid-certification since she/he no longer participates in one or more of the Programs for which they were originally determined adjunctively/automatically income eligible.**

- Yes No

b. **WIC regulations specify that when income eligibility is reassessed mid-certification, State/local agencies are required to reevaluate the Programs for which the individual could be determined adjunctively/automatically income eligible. If the individual cannot qualify based on eligibility for one of these Programs, eligibility must be determined based on WIC income guidelines and disqualification made only after all options are exhausted. The State agency ensures its policy and procedures comply with this requirement:**

- Yes No

B. Nutrition Risk Determination, Documentation and Priority Assignment

1. Nutrition Risk Determination and Documentation

a. **Professionals authorized by the State agency as Competent Professional Authorities (CPAs) to determine nutritional risk include (check all that apply):**

<u>Qualification</u> <u>Priorities</u>	<u>Can certify for:</u>	
	<u>Priorities I-III</u>	<u>All</u>
RD or Masters Level Nutritionist	<input type="checkbox"/>	<input type="checkbox"/>
Bachelor's Level Nutritionist	<input type="checkbox"/>	<input type="checkbox"/>
Physician	<input type="checkbox"/>	<input type="checkbox"/>
Physician Assistant	<input type="checkbox"/>	<input type="checkbox"/>
Registered Nurse	<input type="checkbox"/>	<input type="checkbox"/>
Licensed Practical Nurse	<input type="checkbox"/>	<input type="checkbox"/>
Home Economist	<input type="checkbox"/>	<input type="checkbox"/>
Paraprofessional	<input type="checkbox"/>	<input type="checkbox"/>
Other (Specify):		

b. **The State agency authorizes local agencies to (check all that apply):**

- Conduct Anthropometric and Hematological measurements
- Use medical referral data for Anthropometric and Hematological measurements
- Conduct measurements only when medical referral data are unavailable

Use data from a state Health Information Exchange (including access to medical referral data via a participant/physician portal)

c. The State agency uses only FNS-approved nutrition risk criteria, as referenced in Policy Memorandum #2011-5, WIC Nutrition Risk Criteria, and transmittal memorandum (dated December 17, 2020) that list the revised risk criteria requiring implementation by 10/1/2022, published on the FNS PartnerWeb, to document nutrition risk.

- Yes No

Please append a copy of the revised nutrition risk criteria in its entirety to this State Plan.

See Policy and Procedure Manual 2.13 Nutrition Risk Criteria

d. The State agency modifies nutrition risk criteria such that criteria definitions are more restrictive than nationally established definitions.

- Yes (list criteria):
- No

e. Hematological risk determination:

The State agency requires (check one of the following):

- Bloodwork data to be collected at the time of certification (Statewide).
- Bloodwork data to be collected within 90 days of certification, so long as the participant is determined to have at least one qualifying nutritional risk at the time of certification (Statewide), and the State has implemented procedures to ensure receipt of data.

The State agency ensures that hematological assessment data are current and reflective of participant status, to include a bloodwork periodicity schedule that conforms to the requirements as described in [246.7\(e\)\(1\)\(ii\)\(B\)](#).

- Yes No

The State agency allows local agencies the option of obtaining bloodwork on children ages 2-5 annually if prior certification results were normal.

- Yes No

f. Anthropometric risk determination:

The State agency allows (check one):

- Anthropometric data for certification to be no older than 60 days (Statewide)
- A shorter (less than 60 days) limit on age of anthropometric data for certification

g. Nutrition assessment:

(i) Local agencies are required to perform a complete nutrition assessment (as described in the *Value Enhanced Nutrition Assessment [VENA] Guidance*) for all participants.

- Yes No (explain):

(ii) Local agencies are required to perform a mid-certification nutrition assessment (as described in the *Guidance for Providing Quality Nutrition Services during Extended Certification Periods*) for all participants with and extended certification period.

Yes Not Applicable: (The State agency does not utilize the extended certification option for any participant category)

(iii) The State agency policy requires that nutrition assessment intake information be collected on a State agency mandated form or Management Information System (MIS).

Yes No

If yes, attach mandated forms (or MIS screen shots) or specify location in the procedure manual and reference below.

If no, the State agency assures quality of nutrition assessment by:

- Requiring local agencies to submit forms for approval
- Annually monitoring the locally developed forms during local agency review
- Other (specify): MIS development is a statewide program – all clinics utilize this system

(iv) Dietary assessment is based on professionally recognized guidelines (e.g., Dietary Guidelines for Americans, My Plate Food Guide, American Academy of Pediatrics)

Yes (specify): My Plate Food Guide,

American Academy of Pediatrics, DGAs

No (explain):

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (cite):

Please see Attachment A – SD MIS Screen Shots

2. Documentation

a. The State agency requires documentation in the applicant's case file for all nutrition risk criteria used to establish WIC eligibility (check one) (as described in FNS Policy Memorandum #2008-4, WIC Nutrition Services Documentation):

- Yes, supported by a written "exceptions" policy (e.g., policies to direct clinic staff in situations in which documentation is unavailable)
- Yes, with CPA discretion when to waive documentation requirement (no written policy)
- No (explain):

b. As a matter of policy, the State agency requires the documentation of nutritional risk criteria on a participant's certification form in the following manner:

- All identified risk criteria are recorded
- A set number of criteria is recorded (maximum number is 10 criteria)
- Local agency personnel decide how many and which criteria are recorded
- Other (specify):

3. Priority Assignments

a. Participants certified for regression

- Remain in the same priority in which they were previously assigned
- Are assigned to Priority VII, regardless of their initial priority at first certification
- Other (specify):

b. The State agency requires verification for all nutrition risk criteria that require a physician's diagnosis.

Yes No

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (cite):

Self-reported diagnoses must ask probing questions and have documentation of discussion with client. See Policy and Procedure Manual 2.13 Nutrition Risk Criteria

c. Participants may be certified for regression (check all that apply):

- A single six-month period
- One time following a certification period
- No policy, local agency discretion

d. High risk postpartum women are assigned to the following priority:

- Priority III
- Priority IV
- Priority V
- Priority VI

e. Participants certified solely due to homelessness/migrancy are assigned to the following priority:

	IV	V	VI	VII
Pregnant Women	<input checked="" type="checkbox"/>			<input type="checkbox"/>
Breastfeeding Women	<input checked="" type="checkbox"/>			<input type="checkbox"/>
Postpartum Women			<input checked="" type="checkbox"/>	<input type="checkbox"/>
Infants	<input checked="" type="checkbox"/>			<input type="checkbox"/>
Children		<input checked="" type="checkbox"/>		<input type="checkbox"/>

f. Attach a copy of any nutrition risk criteria that will be added, modified, or deleted during the coming fiscal year. For each criterion, indicate:

- Applicable participant category
- Applicable priority level(s)
- Whether a physician's diagnosis is required
- SA code number which conforms to list of codes provided by USDA for Participant Characteristics data collection

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

C. Health Care Agreements, Referrals, and Coordination

1. State Agency Referral Agreements and Coordination of Services

a. The State agency has written formal agreements that permit the sharing of participant information with the following programs/providers (indicate whether information is shared manually (M) or through ADP (A) by placing either an M or A in front of the appropriate service):

- | | |
|--|---|
| <input checked="" type="checkbox"/> SNAP | Rural/migrant health centers |
| <input type="checkbox"/> TANF | <input checked="" type="checkbox"/> Hospitals |
| <input checked="" type="checkbox"/> Medicaid | <input checked="" type="checkbox"/> Childhood immunization |
| <input type="checkbox"/> SSI | <input checked="" type="checkbox"/> Immunization registries |

- EPSDT
- M MCH programs
- M Children with special health care needs program(s)
- M Family planning
- M Other (specify): [Head Start, Bright Start Home Visiting Program, EFNEP/SNAP Ed, Delta Dental, PRAMS Survey and SD Office of Disease Prevention](#)
- Well-child programs
- Child protective services
- Private physicians
- IHS facilities

b. Formal agreements for coordination of services include:

- Responsibilities of each party
- Assurance that information is used only for program eligibility and/or outreach
- Assurance that information will remain confidential and not be shared with a third party

c. The State agency requires local agencies to coordinate services with, and/or develop referral systems for, the following (check all that apply):

- | | |
|--|--|
| <input checked="" type="checkbox"/> SNAP | <input checked="" type="checkbox"/> Children with special health care needs |
| <input checked="" type="checkbox"/> TANF | <input checked="" type="checkbox"/> Schools |
| <input checked="" type="checkbox"/> SSI | <input checked="" type="checkbox"/> Expanded Food and Nutrition Education Program (EFNEP) |
| <input checked="" type="checkbox"/> Medicaid | <input checked="" type="checkbox"/> Other food assistance program (TEFAP, FDPIR, CSFP, etc.) |
| <input checked="" type="checkbox"/> CHIP | <input checked="" type="checkbox"/> Breastfeeding promotion |
| <input checked="" type="checkbox"/> IHS facilities | <input checked="" type="checkbox"/> Child protective services |
| <input checked="" type="checkbox"/> MCH (clinics/facilities) | <input checked="" type="checkbox"/> Head Start |
| <input checked="" type="checkbox"/> Early and Periodic Screening, Diagnostic and Treatment (EPSDT) | <input checked="" type="checkbox"/> Early Head Start |
| <input checked="" type="checkbox"/> Family planning | <input checked="" type="checkbox"/> Healthy Start |
| <input checked="" type="checkbox"/> Prenatal care | <input checked="" type="checkbox"/> Substance abuse program |
| <input checked="" type="checkbox"/> Postnatal care | <input checked="" type="checkbox"/> Child abuse counseling |
| <input checked="" type="checkbox"/> Immunization | <input checked="" type="checkbox"/> Foster care agencies |
| <input checked="" type="checkbox"/> Dental services | <input checked="" type="checkbox"/> Homeless facilities |
| <input checked="" type="checkbox"/> Private physicians | <input checked="" type="checkbox"/> Mental health services |
| <input checked="" type="checkbox"/> Hospitals | <input checked="" type="checkbox"/> Rural/migrant health centers |
| <input checked="" type="checkbox"/> Well-child programs | |
| <input checked="" type="checkbox"/> Other (specify): See below | |

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

[Other from above is HIV testing and blood screening and ACA \(Affordable Care Act\) Human Services \(TTY for the deaf and visually impaired\). Refer to WIC Manual, Policy and Procedure Manual 1.04 – 1.04Z Agreements.](#)

2. Local Agency Referral Procedures

a. The State agency ensures that local agencies make available to all adults applying or re-applying for the WIC Program for themselves or on behalf of others the following types of information:

- State Medicaid Program, including presumptive eligibility determinations, where available
- Child support services
- SNAP
- Substance abuse counseling/treatment programs
- TANF, including presumptive eligibility determinations, where available
- Other State-funded medical insurance programs (specify): [Medicaid, CHIP](#)
- Other nutrition services (specify):
- EPSDT Program
- Children's Health Insurance programs (s)
- Other (specify): [Affordable Care Act](#)

b. The referral methods used by local agencies to other health and social service programs include (check all that apply and indicate the primary method of referral using the checkbox on the right):

- | | Primary |
|--|-------------------------------------|
| <input checked="" type="checkbox"/> State agency-developed referral forms | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Local agency-developed referral form | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Telephone call to referring agency | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Verbal referral to participants | <input type="checkbox"/> |
| <input type="checkbox"/> Automated client/participant information exchange | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Written literature on referral programs | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Follow-ups by staff to monitor | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Maintain a list of local resources for drug and other harmful substance abuse | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Counseling | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Other (specify): Resource/Referral list included in MIS system, Referral to Breastfeeding Peer Counselor | <input type="checkbox"/> |

c. Methods used by other health and social service programs to refer clients to the WIC Program include (check all that apply and indicate the primary method of referral using the checkbox on the right):

- | | Primary |
|---|-------------------------------------|
| <input type="checkbox"/> WIC Program referral form | <input type="checkbox"/> |
| <input type="checkbox"/> Health/social program referral form | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Telephone call | <input checked="" type="checkbox"/> |
| <input checked="" type="checkbox"/> Verbal referral | <input type="checkbox"/> |
| <input type="checkbox"/> Automated client/participant information exchange | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Written literature on the WIC Program | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> Other (specify): DSS programs refer clients to WIC throughout the year with flyers in their mailings, WIC coordinates with the 211 Helpline Center to directly schedule an appointment within the MIS system when they make referrals to the WIC Program. | |

d. The State agency has a system in place to monitor the extent to which WIC participants are using other health or social services (check all that apply):

- Yes (check): Medicaid TANF MCH SNAP
- Yes, other (specify): [WIC MIS system can track how many WIC](#)

participants are on other programs (listed above) for Participant

Characteristics Reporting

No

- e. **The State agency requires local agencies to monitor referrals to determine the extent of health or social services utilization in addition to State monitoring systems.**

Yes No

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):
[Policy and Procedure Manual 6.03 Referrals and 6.03A Resource Referral List](#)

- f. **To facilitate referrals to the Medicaid Program, the State agency provides each local agency a chart showing the maximum income limits, according to family size, applicable to pregnant women, infants, and children up to age 5 under the Medicaid Program.**

Yes No

- g. **The State agency assures that each local agency operating the Program within a hospital, and/or that has a cooperative arrangement with a hospital, advises potentially eligible individuals that receive inpatient or outpatient prenatal, maternity, or postpartum services, or that accompany a child under the age of 5 who receives well-child services, of the availability of Program services.**

Yes No

- h. **The State agency ensures that, to the extent possible, local agencies provide an opportunity for individuals who may be eligible to be certified within the hospital for participation in WIC.**

Yes No

- i. **The State agency ensures that when WIC is at maximum caseload, local agencies make referrals to:**

- Food banks
- Food pantries
- Soup kitchens or other emergency meal providers
- SNAP
- The Emergency Food Assistance Program (TEFAP)
- Food Distribution Program on Indian Reservations (FDPIR)
- Other (specify): [Salvation Army](#), [Community Crisis Centers](#), [churches](#), [Medicaid for specialized formula not WIC authorized](#)

- j. **The State agency ensures that when WIC is at maximum caseload, local agencies notify the State agency of any waiting lists established.**

Yes No

- k. **The State agency ensures that when WIC is at maximum caseload, the State agency notifies FNS of any waiting lists established.**

Yes No

- l. **The State agency ensures that when the WIC participant's family has immediate needs for food beyond what WIC might provide, local agencies make referrals to:**

- Food banks
- Food pantries

- Soup kitchens
- SNAP
- The Emergency Food Assistance Program (TEFAP)
- Food Distribution Program on Indian Reservations (FDPIR)
- Other (specify): [Medicaid for specialized formula not WIC authorized; Policy and Procedure Manual 11.01B Medicaid Formula Request Form](#)

m. Immunization Screening and Referral

The State agency assures that each local agency is meeting the requirements of WIC Policy Memorandum

#2001-7, August 30, 2001: Immunization Screening and Referral, as follows:

- Screening children under the age of two using a documented immunization history:
 - Using the minimum screening protocol; or
 - Using a more comprehensive means, (specify): [Clinic staff will review immunization records of all children 0 – 4 years of age and pregnant women](#)
 - Using another program or entity to screen and refer WIC children using a documented immunization history; (specify): [South Dakota immunization Information System \(SDIIS\) is used to monitor immunizations for all participants in South Dakota. This system is linked with our SDWIC-IT program for verification. Clients are provided immunizations in the office or referred to their medical provider. Clients are referred to medical provider if there is nothing in the registry ; or](#)
 - Implementing the minimum screening protocol is unnecessary because immunization coverage rates of WIC children by 24 months are 90% or greater; or
 - The State agency has been unable to formalize a coordination agreement with the State Immunization Program. Provide explanation of extenuating circumstances:

The State agency's policy and procedure manual has been updated to include the above immunization screening and referral protocol.

- Yes No

D. Processing Standards

1. Notification Standards

a. The State agency defines special nutritional risk applicants who are to be notified of their eligibility within 10 days of the date of the first request (at the local agency) for program benefits as the following (check all that apply):

- Pregnant women eligible as Priority I High-risk infants (optional)
- Migrant farmworkers/family members Homeless (optional)
- Optional; please specify:

b. The State agency requires local agencies to follow special policies and procedures to ensure timely certification of:

- Rural applicants Employed applicants
- No special policies/procedures

c. The State agency's policy allows it to authorize an extension of the notification period up to 15

days for special nutritional risk applicants when local agencies provide a written request with justification.

Yes No

d. Policies and procedures are in place to assure all other applicants are notified of eligibility within 20 days of first request (at the local agency) for Program benefits.

Yes No

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):
[Policy and Procedure Manual 3.01 Processing Standards and Appointment Scheduling](#)

2. Processing Standards

a. Processing standards begin when the applicant (check all that apply):

Telephones the local agencies to request

benefits

Visits the local agency in person

Makes a written request for benefits

b. The State agency requires the local agency to have a monitoring system in place to ensure processing standards are being met for all categories of applicants.

Yes No

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation): [Policy and Procedure Manual 3.01 Processing Standards and Appointment Scheduling](#)

E. Certification Periods

1. Certification Period Standards

a. (i) The State agency authorizes local agencies to certify infants under six months of age for a period extending up to the first birthday provided the quality and accessibility of health care services are not diminished:

Yes, at all local agencies

Yes, at selected local agencies

No

(ii) The State agency authorizes local agencies to certify children for a period of up to one year provided that participant children receive required health and nutrition services:

Yes, at all local agencies

Yes, at selected local agencies

No

(iii) The State agency authorizes local agencies to certify breastfeeding mothers for a period extending up to the infant's first birthday or until breastfeeding is discontinued (whichever comes first), if there is no decrease in health and nutrition services that the participant would otherwise receive during a shorter certification period:

Yes, at all local agencies

Yes, at selected local agencies

No

(iv) The State agency ensures that health care and nutrition services are not diminished for participants

certified for longer than six months:

No Yes (describe): [Documentation of health care and nutrition services are required by CPA when certification is longer than 6 months. Those certified for 1 year are assessed at 6 months, through mid-certification process, by a CPA.](#)

b. Extended certification is an option for the following (check all that apply):

- Priority I infants Priority II infants Priority IV infants
 Priority III Children Priority V Children
 Priority I Breastfeeding Women Priority IV Breastfeeding Women

c. The State agency authorizes local agencies to shorten or extend the certification period up to 30 days in certain circumstances.

Yes (If yes, provide citation indicating circumstances): No
[Policy and Procedure Manual 2.16 Certification Periods](#)

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

2. The State agency authorizes local agencies to disqualify an individual in the middle of a certification period for the following reasons (check all that apply):

- Participant volunteers the information that they are over income
 Participant abuse
 Family member found income ineligible at recertification
 Failure to pick up food instruments/cash-value vouchers for consecutive issuances
 Other (specify): [Failure to attend mid certification assessment for 1-year certifications](#)

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):
[Policy and Procedure Manual 2.16 Certification Periods, 2.04 Income Determination and 9,01 Client Compliance](#)

F. Transfer of Certification

1. Procedures for Transfer of Certification and Verification of Certification (VOC)

a. The State agency has procedures in place that are used by all local agencies for transfers of certification within the State agency (intra-State), between State agencies (inter-State), and to the WIC Overseas Program (WICO):

Intra-State	Inter-State	WIC Overseas	
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Yes
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	No

b. A participant ID card/folder is provided which also serves as a VOC:

Yes No

c. The State agency requires all local agencies to use a standardized VOC:

Yes No

d. VOCs are issued to the following (check all that apply):

- All participants
- Migrants
- Homeless
- Participants relocating during certification period
- Persons affiliated with the military who are transferred overseas
- Other (specify):

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):
[Policy and Procedure Manual 2.18 Verification of Certification](#)

2. The State agency requires all local agencies to include the following information on the VOC (check all that apply):

- Name of participant
- Date certification performed
- Date income eligibility last determined
- Nutritional risk condition of the participant
- Date certification period expires
- Signature/printed or typed name of certifying local agency official
- Name/address/phone number of certifying local agency
- Identification number or some other means of accountability
- Other (specify):

3. The State agency requires all local agencies to accept as valid all VOCs from both the domestic WIC Program and the WIC Overseas Program that contain the following essential elements:

- Participant name
- Name and address of the certifying agency
- Date the current certification period expires

4. The State agency honors the one-year certification period for transferring participants (infants, children, and breastfeeding women) even if it certifies participants every six months.

Yes No

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):
[Policy and Procedure Manual 2.18 Verification of Certification](#)

G. Dual Participation, Rights and Responsibilities, Fair Hearings, Sanctions

1. Dual Participation

a. The State agency has written procedures to prevent and detect dual participation within each local agency and between local agencies:

- Yes (Please attach any descriptions of policy in Appendix or cite appropriate section(s) of the Procedure Manual): [Policy and Procedure Manual 1.04 Agreements](#)
- No

b. The State agency has a written agreement with the Indian State agency(ies) or other geographic State agencies in proximity for the detection and prevention of dual participation (attach a copy of each applicable agreement or provide a citation of where a copy is located): [Policy and Procedure Manual 1.04 Agreements](#)

Yes No Not applicable

c. The State agency has established procedures to handle participants found in violation due to dual participation:

Yes (Please attach any descriptions of policy in Appendix or cite appropriate section(s) of the Procedure Manual): [Policy and Procedure Manual 9.05 Dual Participation](#)

No

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):
[Policy and Procedure Manual 1.04 Agreements and 9.05 Dual Participation](#)

2. Participant Rights and Responsibilities

a. The State agency has uniform notification procedures that are used by all local agencies statewide:

Yes No

b. The State agency requires all local agencies to inform applicant/participant of his/her rights and responsibilities in written form, and must be read by or to the applicant, parent, or caretaker:

Yes No

c. The State agency has implemented a policy of disqualifying participants for not picking up food instruments:

Yes No Not applicable

If yes, the policy is communicated to participants in the participant rights and responsibilities materials:

Yes No Not applicable

d. The State agency has implemented a policy to specifically inform participants that they are not allowed to sell WIC food benefits, including online:

Yes No; explain:

e. The State agency has policies and procedures to identify attempted sales of WIC food benefits in their WIC State Plan:

Yes No; explain:

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):
[Policy and Procedure Manual 2.17 Notification of Client Rights & Responsibilities and 2.17A WIC Client Agreement](#)

f. The State agency has developed special notification policies and procedures for the following:

- Applicant/participant who cannot read
- Applicant/participant who speaks in a language other than English
- Homeless
- Migrants
- Persons with disabilities
- Other (specify):

g. The State agency requires all local agencies to provide notification of participant rights and responsibilities in the following situations:

- Eligibility at each certification
- Ineligibility at initial certification
- Mid-certification disqualification
- Expiration of a certification period
- Waiting list status
- Other (specify):

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

[Policy and Procedure Manual 2.17 Notification of Client Rights & Responsibilities, 2.17A WIC Client Agreement and 2.19 Notification of Ineligibility](#)

3. Fair Hearing and Sanction System

a. The State has a law or regulation governing participant appeals:

- Yes No

b. The State agency has established statewide fair hearing procedures:

- Yes; attach fair hearing procedures for participants or specify the location in the Procedure Manual and reference in additional detail section below.
- No

c. State or local agency actions against participants include (check all that apply):

- Reclaiming the value of improperly received benefits
- Disqualification from the Program for up to one year
- Suspension from the Program mid-certification
- Other (specify):

d. Appeal hearings are held at:

- WIC State agency parent agency
- Other State agency or hearing board (specify): [Administrative Review Organization](#)
- Local WIC agency
- Other (specify):

e. Statewide fair hearing procedures include (check all that apply):

- | | |
|--|--|
| <input checked="" type="checkbox"/> Request for hearing | <input checked="" type="checkbox"/> Local agency responsibilities |
| <input checked="" type="checkbox"/> Denial or dismissal of request | <input checked="" type="checkbox"/> Continuation of benefits |
| <input checked="" type="checkbox"/> Rules of procedure | <input checked="" type="checkbox"/> Responsibilities of hearing official |
| <input checked="" type="checkbox"/> Fair hearing decision | <input type="checkbox"/> Other (specify): |
| <input checked="" type="checkbox"/> Judicial review | |

f. State agency procedures require written notification for (check all that apply):

- Appeal rights
- Request for hearing

- Denial or dismissal of request
- Notice of hearing
- Termination within certification period
- Fair hearing decision
- Judicial review
- Other (specify):

g. **The State agency has established timeframes to govern each step of the hearing process:**

- Yes
- No

h. **The State agency requires all local agencies to document any notification/correspondence in the participant's file:**

- Yes
- No

i. **The State agency has a written sanction policy for participants:**

- Yes (If yes, provide appropriate citation below)
- No

j. **The State agency has established procedures which determine the type and levels of sanctions to be applied against participants:**

- Yes
- No

ADDITIONAL DETAIL: Certification and Eligibility Appendix and/or Procedure Manual (citation):

Policy and Procedure Manual 1.10 Client Fair Hearing, 1.10A Fair Hearing Procedure for Client, 1.10B Fair Hearing Request Form, 1.10C Fair Hearing Procedure Poster, 2.17 Notification of Client Rights & Responsibilities and 2.17A WIC Client Agreement, 9.01 Client Compliance, 9.01A Client Violation Types Sanctions and 9.05 Dual Participation