Notice of Ineligibility

Policy

A person applying for WIC services who does not meet the requirements for program eligibility, shall be notified in writing of the reason(s) for the ineligibility and the right to request a fair hearing. When an applicant/participant is determined to be ineligible for income or residency, their family members are also ineligible for the program. Active participants must receive notification of ineligibility at least fifteen days prior to termination.

Purpose

To ensure applicants and participants are informed of the reasons for ineligibility and understand their right to a fair hearing to appeal such a determination.

Procedures

I. When an applicant/participant is determined to be ineligible during the (re)certification visit, provide the applicant/participant or parent/guardian/caregiver a completed Notice of Ineligibility indicating their ineligibility reason(s) (residency, category, income above limit, or no nutritional risk).

A. When an applicant/participant is determined to be ineligible for income or residency, any family member currently receiving WIC benefits must be provided a completed Notice of Ineligibility. Place the names of each family member on the form so the parent/guardian/caretaker only has to sign one form.

B. Issue one final set of benefits to any active participant, belonging to the household which has been determined to be income or residency ineligible.

1. Example: Child’s certification period 11/20/18 through 4/30/19. On January 10th, mom applies as a pregnant woman but is determined income ineligible. In order to provide the parent 15 days of notification before termination, the child is entitled to benefits through January 25th. Since the child’s January benefits are valid from January 1st to January 31st, this is considered to be the last issuance for which the child is eligible.

2. To determine if an active participant is entitled to additional benefits, add 15 days to the date income ineligibility was determined for the participant.

   a. If the active participant does not have benefits covering that day, issue a single month’s benefits before terminating the participant.
   b. If the participant has benefits covering that day, do not issue additional benefits.
   c. If the participant has benefits for additional months, staff shall void the benefits.
II. Mail the Notice of Ineligibility when ineligibility is determined after the certification visit, and when the applicant or parent/guardian/caregiver is not physically present.

Note that the form was mailed and the date it was mailed by writing “mailed on date” in lieu of the applicant's signature.

III. Retain a copy of the notice and documentation that supports the decision regarding applicant ineligibility in the ineligible file or the participant’s health record.

IV. A denial notice will automatically be sent from the notification system for applicants who are determined ineligible using Gateway.

V. Explain the fair hearing process to all applicants/participants who are deemed ineligible for program benefits.

Authority
7 CFR § 246.7(f) and (j)(5)

Definitions/Supporting Information

**Applicant**- An individual who comes into the WIC clinic requesting WIC services.

**Ineligible** – Not eligible to receive Georgia WIC Program benefits on the basis of residency, category, income or nutritional risk.

**Participant**- An individual who receives supplemental foods or vouchers, an infant who breastfeeds and does not receive supplemental foods or vouchers but whose lactating mother receives supplemental foods or vouchers, or breastfeeding women who do not receive supplemental foods or vouchers but whose infants receive supplemental foods or vouchers.