

I-WIC: Documenting Adjunctive Eligibility

WIC extends adjunctive eligibility to applicants who are certified as eligible to receive Temporary Aid to Needy Families (TANF), Medicaid (Federal- Title XIX) and Supplemental Nutrition Assistance Program (SNAP). If a participant is found to be adjunctively eligible, follow the steps below for documenting in IWIC.

Step 1: Complete the Adjunctive Eligibility Section

Use the checkboxes at the top of the Adjunctive Eligibility grid and indicate **Household Not Participating in any programs** or **Household Not Participating -By Program**, the system will automatically place a NO in the REP (reported) column for those programs checked.

The screenshot shows the I-WIC web application interface. On the left, there is a sidebar with navigation options like 'Active Record', 'Scheduling Tasks', 'Guided Script', and 'Notes and Alerts'. The main content area is titled 'Income Information' and 'Household Information'. It displays the name 'CUNNINGHAM, GRANNY' and 'CUNNINGHAM, JOHNNATHEN'. Below this is the 'Adjunct Eligibility' section, which is divided into two parts: 'Household Not Participating in any programs' and 'Household Not Participating - By Program'. The 'Household Not Participating - By Program' section has checkboxes for Medicaid, SNAP, and TANF, with TANF checked. Below this is a table with columns: 'Include In verification', 'Name', 'CAT', 'Adjunct Elig', 'Medicaid * REP VER', 'SNAP * REP VER', and 'TANF * REP VER'. The table has two rows: one for CUNNINGHAM, GRANNY (CAT PG) and one for CUNNINGHAM, JOHNNATHEN (CAT C1). Both rows have a checkmark in the 'Include In verification' column. The 'REP VER' columns for both rows are currently empty. Below the table is a 'History' section with columns for 'Interval', 'Hrs/Wk', 'Amount', 'Documentation', 'Annual', 'Date', and 'User ID'. At the bottom, there are fields for 'Household Size', 'Annual Income' (\$0.00), and 'Max Annual Income Allowed' (\$39,461.00). The page footer shows '142143001 PEORIA CITY/CHD' and 'LISA.CUNNINGHAM...'.

Complete the REP and VER columns for everyone in the Household who has a checkmark in the **Include in Verification** column. Select YES in the **REP** column for the programs in which participant(s) is participating and select **one** of those programs to verify by clicking on the checkbox in the **VER** column. Alternately, for the program you are verifying, clicking the checkbox in the **VER** column, and completing the pop-up, the system will automatically autofill the **REP** column for that program with YES.

Income Information
This is the Income for: 9400160

Adjunct Eligibility
Household Not Participating in any programs
 Medicaid, SNAP, TANF

Include In verification	Name	CAT	Adjunct Elig	Medicaid		SNAP		TANF	
				* REP	VER	* REP	VER	* REP	VER
<input checked="" type="checkbox"/>	CUNNINGHAM, GRANNY	PG	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
<input checked="" type="checkbox"/>	CUNNINGHAM, JOHNATHEN	C1	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

History

* Interval	Hrs/Wk	* Amount	* Documentation	* Annual	* Date	* User ID

Annual Income: \$ 0.00
Max Annual Income Allowed: \$ 39,461.00

Buttons: Rights and Responsibilities, Save, Cancel, Next

If there are any blanks in the REP column for any participant who has a checkmark in the Include in Verification column, you will receive the following error when saving the screen.

SNAP Reported cannot be blank for CUNNINGHAM, JOHNATHEN .
Please select value.

OK

Include In verification	Name	CAT	Adjunct Elig	Medicaid		SNAP		TANF	
				* REP	VER	* REP	VER	* REP	VER
<input checked="" type="checkbox"/>	CUNNINGHAM, GRANNY	PG	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
<input checked="" type="checkbox"/>	CUNNINGHAM, JOHNATHEN	C1	<input checked="" type="checkbox"/>	Yes	<input checked="" type="checkbox"/>		<input type="checkbox"/>	No	<input type="checkbox"/>

History

* Interval	Hrs/Wk	* Amount	* Documentation	* Annual	* Date	* User ID
Monthly	0	\$1,200.00	Adjunctive Eligibility	\$14,400.00	05/07/2021	LISA.CUNN...

Household Size: 2
Annual Income: \$ 14,400.00
Max Annual Income Allowed: \$ 31,284.00

Buttons: Rights and Responsibilities, Save, Cancel, Next

Step 2: Complete the Income Information Grid

Select the appropriate Interval choice in the **Interval** column, obtain a verbal income and enter this information in the **Amount** column. Choose *Adjunctive Eligibility* in the **Documentation** column. Enter the **Household Size** and **SAVE**. In the rare instance, when one of the household's members is not eligible for adjunctive eligibility nor meets the policy for conferring eligibility, complete the Income grid following Traditional Income screening policy.