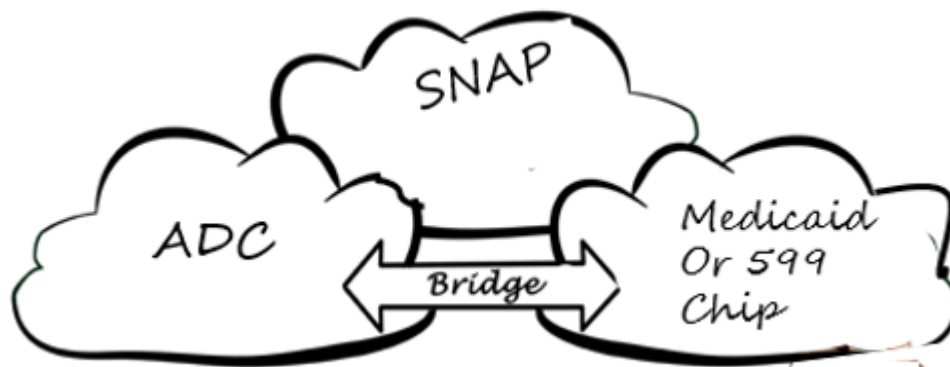
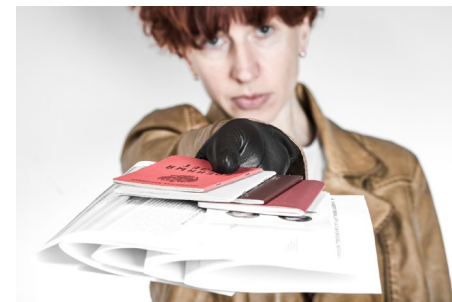


Assessing for Adjunct Income Eligibility

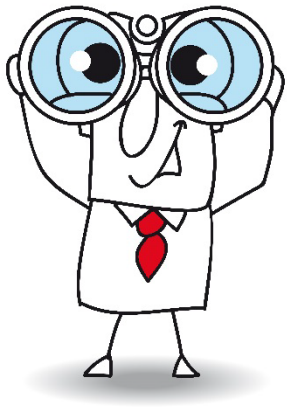


USDA Requirement

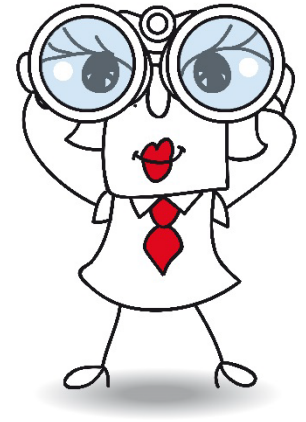


To assess applicants to determine if they are **adjunct income eligible** for WIC

due to their current participation in **ADC, SNAP, Medicaid, or 599 CHIP**



WIC Clerks:



It is your job to verify
if currently participating
in one or more of these income
qualifying programs



VERIFICATION



If you are able to verify adjunct income eligibility, then the client is **automatically income eligible** for WIC

- That means, they do not need to provide proof of other income sources to qualify for WIC.
- We document income based on their verbal declaration

4 Adjunct Eligible Programs:

- **Medicaid**
- **SNAP** – Special Supplemental Nutrition Assistance Program
- **ADC** – Aid to Dependent Children
- **599 CHIP** – Children's Health Insurance Program



MEDICAID

Pays for a variety of
medical services for
low-income Nebraskans

Medicaid

Helps pay medical services for low income people including those who are aged, blind, disabled, children and others who meet certain requirements.

Medicaid Customer Service Center:

Toll Free: 855-632-7633

Lincoln Local Calls: 402-473-7000

Omaha Local Calls: 402-595-1178

TTY: 402-471-7256

Apply Online at:

www.accessnebraska.ne.gov

<https://dhhs.ne.gov/Documents/ACCESSNebraskaMedicaidBrochure.pdf>

Previously called
Food Stamps



Supplemental
Nutrition
Assistance
Program



- Helps low income people buy food;
- Benefit amount is placed on an EBT card accepted by most grocery stores



This is SNAP. It is a WIC adjunct eligible program for every family who is receiving.



Why Summer EBT?

- \$120 in grocery benefits for each eligible school-aged child.
- Summer EBT is in addition to other benefits like free SUN Meals, SNAP, and WIC.
- Choose the foods your kids love and keep them fueled all summer long.

Scan to learn about the Summer EBT program!



 DHHS.SEBT@Nebraska.gov
 (800) 383-4278, option 5
 <https://dhhs.ne.gov/Pages/Summer-EBT.aspx>

Funding provided in part by the United States Department of Agriculture. Summer 2025.



- Benefits (\$120) is placed on an EBT card at one time.
- Family considered eligible for WIC from day benefits placed on card for 120 days after, regardless of when they use the benefits.

ADC – Aid to Dependent Children

- Cash assistance for living expenses like rent, utilities, clothes
- Often the only source of income for a family
- Also may be called TANF (Temporary Assistance to Needy Families) in Nebraska

599 CHIP – Children’s Health Insurance Program

How WIC Clerks verify current participation?

- Review documentation; Look at the dates
- Documents can be accepted as proof of participation **only if dated within the last 30 days**

New Medicaid Card

599 CHIP Card

Notice Of Action Form

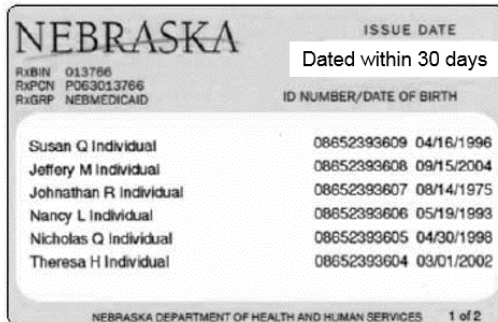
ReliaCard: Paper or
Online Statement –

Showing ADC deposit for the current
month

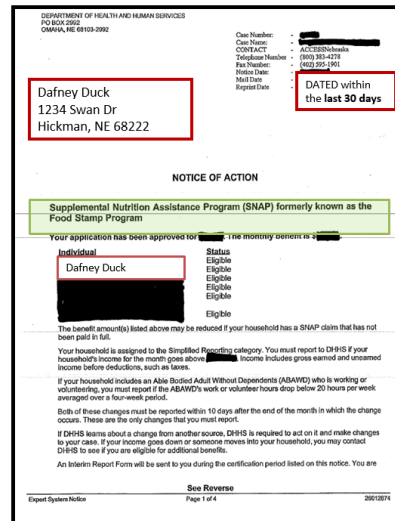
Chase: Paper or online
Statement –

Showing SNAP deposit
in the current month

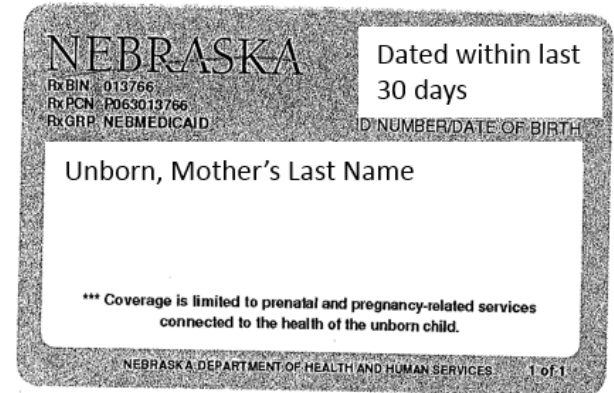
Acceptable Proof if dated within 30 days:



Medicaid Card



Notice Of Action
Tells if getting ADC,
SNAP, Medicaid

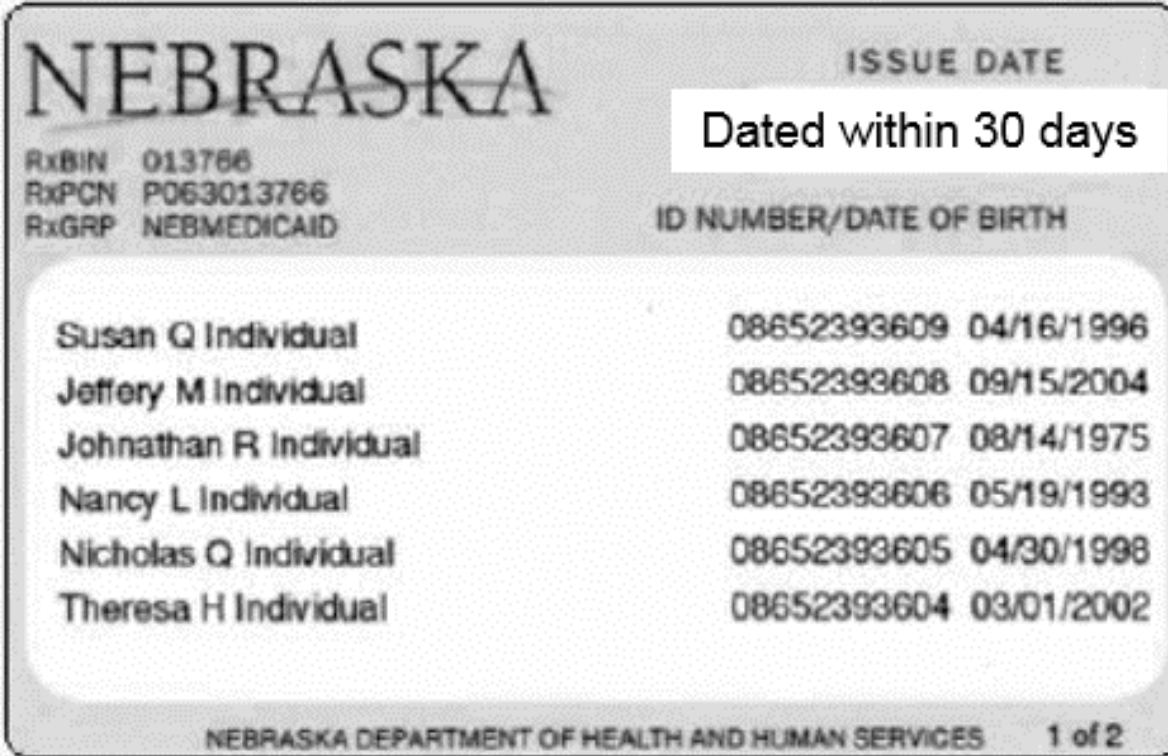


599 CHIP Card

ReliaCard Statement –
Showing current ADC deposit

Snap Statement –
Showing current SNAP deposit

Sample Medicaid Card – Dated within last 30 days



A sample Nebraska Medicaid card with a white box highlighting the issue date. The card lists several individuals and their corresponding ID numbers and birth dates.

NEBRASKA		ISSUE DATE
RxBIN 013766		Dated within 30 days
RxPCN P063013766		
RxGRP NEBMEDICAID	ID NUMBER/DATE OF BIRTH	
Susan Q Individual	08652393609 04/16/1996	
Jeffery M Individual	08652393608 09/15/2004	
Johnathan R Individual	08652393607 08/14/1975	
Nancy L Individual	08652393606 05/19/1993	
Nicholas Q Individual	08652393605 04/30/1998	
Theresa H Individual	08652393604 03/01/2002	

NEBRASKA DEPARTMENT OF HEALTH AND HUMAN SERVICES 1 of 2

To use this card alone as proof of Adjunct Eligibility,
it must be dated within the last 30 days

Sample Notice of Action – dated within last 30 days

To use this Notice of Action Form alone as proof of Adjunct Eligibility, it must be dated within the last 30 days

DEPARTMENT OF HEALTH AND HUMAN SERVICES
PO BOX 2992
OMAHA, NE 68103-2992

Case Number: - [REDACTED]
Case Name: - [REDACTED]
CONTACT - ACCESSNebraska
Telephone Number - (800) 383-4278
Fax Number: - (402) 595-1901
Notice Date: - [REDACTED]
Mail Date: - [REDACTED]
Reprint Date: - [REDACTED]

Dafney Duck
1234 Swan Dr
Hickman, NE 68222

DATED within
the last 30 days

NOTICE OF ACTION

Supplemental Nutrition Assistance Program (SNAP) formerly known as the Food Stamp Program

Your application has been approved for [REDACTED]. The monthly benefit is \$ [REDACTED].

Individual

Dafney Duck

Status

Eligible
Eligible
Eligible
Eligible
Eligible
Eligible

The benefit amount(s) listed above may be reduced if your household has a SNAP claim that has not been paid in full.

Your household is assigned to the Simplified Reporting category. You must report to DHHS if your household's income for the month goes above [REDACTED]. Income includes gross earned and unearned income before deductions, such as taxes.

If your household includes an Able Bodied Adult Without Dependents (ABAWD) who is working or volunteering, you must report if the ABAWD's work or volunteer hours drop below 20 hours per week averaged over a four-week period.

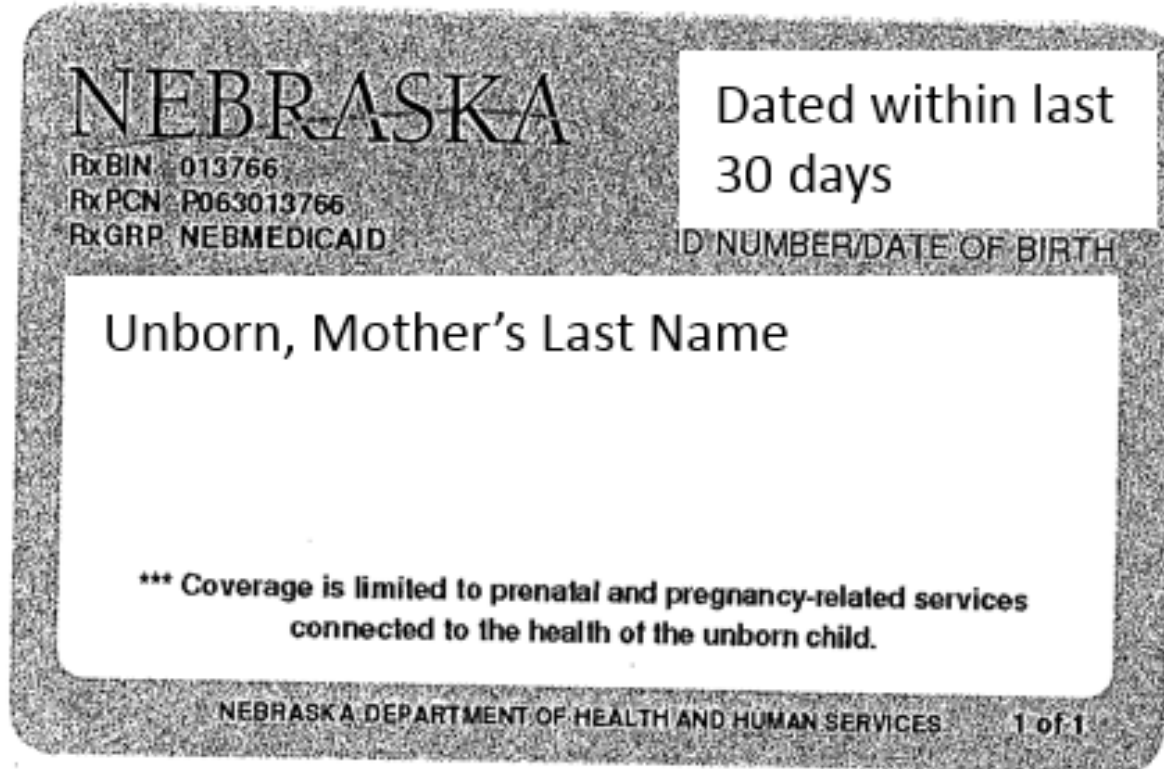
Both of these changes must be reported within 10 days after the end of the month in which the change occurs. These are the only changes that you must report.

If DHHS learns about a change from another source, DHHS is required to act on it and make changes to your case. If your income goes down or someone moves into your household, you may contact DHHS to see if you are eligible for additional benefits.

An Interim Report Form will be sent to you during the certification period listed on this notice. You are

See Reverse

Sample 599 Chip Card – dated within last 30 days



To use this card alone as proof of Adjunct Eligibility, it must be dated within the last 30 days

ReliaCard®

Card Number: *****6069 Balance : \$ 1.58
Cardholder: Sally Sue

Card Information

Card Activity

Statement

Change PIN

Change User Password

Bill Pay

Alerts

Logout

[Print Friendly View of Page](#)

Statement

December 2012

Month December

Cardholder number: *****6069

Name: Sally Sue

Address: 501 South 7th St.
Lincoln, NE 68508

Statement Activity from: 12/01/2012 to 12/31/2012

Beginning Card Balance as of 12/01/2012: \$0.00

Funding Transactions

Date	Description	Amount
Date-Current Month	ADD FUNDS STATE OF NE NE HHS NFO	\$256.00

Card Transactions

Date	Description	Amount
12/13/2012	PURCHASE WAL WAL-MART SUPER 911 LINCOLN (N) NE Terminal# 19430023	-\$120.00
12/12/2012		-\$134.42

ADC Deposit – must be in the current month to be considered adjunct eligible



Quick Links

- Account Summary
- Transaction Activity
- Account Management
- Messages
- My Alerts

Home > Transaction Activity

Transaction Activity

Print | Help

Name: Sally Sue

- To view a list of transactions for a specific time period, enter a Start and Stop date and select Search.
- The date range entered should not exceed a 12-month period of time - any 12 months for which there are transactions
- To view a list of transactions beginning with a specific date, enter a Start Date and select Search.
- 90 days of transactions is the default range when no End date is entered.
- Current date is the default Start Date when no Start Date is entered.
- Transactions list begins with current date.
- 90 days of transactions is the default range when no dates are entered

All Accounts SNAP Denied

Start Date End Date Search Reset

Pending Deposits

Date	Deposit Type	Deposit Amount	Available Date	Account
No transactions were found.				

Pending Transactions

Date	Transaction Type	Transaction Amount	Location	Card #	Account
No transactions were found.					

Completed Transactions

Date	Transaction Type	Location	Account	Card #	Debit Amt.	Credit Amt.	Available
01/18/2013	POS Purchase Debit	WAL-MART # 4700 N 27TH STREET LIN	SNAP	6617	\$ 122.45	0.00	
01/15/2013	POS Purchase Debit	Wal-Mart S 1943 WAL-SAMS LINCOLN (I	SNAP	6617	\$ 66.28	0.00	
01/09/2013	POS Purchase Debit	RUSS'S MAR 1709 WASHINGTON LINCS	SNAP	6617	\$ 36.60	0.00	
01/06/2013	POS Purchase Debit	WAL-MART # 4700 N 27TH STREET LIN	SNAP	6617	\$ 100.20	0.00	
Date-Current Month	Deposit - Benefit Issuance Transmission	BENEFIT UPDATE	SNAP	6617	0.00	\$ 581.00	
12/30/2012	POS Purchase Debit	Wal-Mart S 1943 WAL-SAMS LINCOLN (I	SNAP	6617	\$ 39.00	0.00	

SNAP Deposit – must be in the current month to be considered adjunct eligible

Can also call for deposit information

If documents are new (dated in last 30 days) and show current participation, you can use them as proof of adjunct income eligibility

Many times, however, the documents will not be dated within 30 days, so you can't use them as proof alone

NMES Phone LINE

Nebraska Medicaid Eligibility Line



DIAL

- 402-471-9580 or
- 1-800-642-6092

Listen

- Welcome to Health and Human Services line
- Press 2

Enter

- Provider number:

Coach to provide the # to write in the #

Press

- 1 – to enter Medicaid Number or
- 2 – to enter SS Number

Enter

- Medicaid number followed by # or
- SS number followed by #

Enter

- Today's date, followed by # sign (ie. 012013#)

Listen

- It will tell you who you are calling for

Press

- 1 – if the name is correct

Listen

- To see if they are eligible for that month

Verifying Medicaid Participation Using Website

MEDICAID ONLINE VERIFICATION -- STEPS

Medicaid Web Link: <https://cicsppr1.ecs.Nebraska.gov.3113/RFS6>

Must log in once every 30 days or will have to call help desk to have password reset

IF you do not log in at least once/year your account will be deleted.

State of Nebraska

RFS6
PROD

NEBRASKA MEDICAID ELIGIBILITY SYSTEM

04:02PM 05/07/2020

NPI: ATYPICAL PROVIDER NUMBER:

RECIPIENT NUMBER:

RECIPIENT SSN:

ELIGIBILITY DATE (MMCCYY):

RECIPIENT LAST NAME:

RECIPIENT FIRST NAME:

RECIPIENT MIDDLE INITIAL:

RECIPIENT DOB (MM/DD/CCYY): / /

RECIPIENT GENDER:

MEDICAID ONLINE VERIFICATION -- STEPS

Medicaid Web Link: <https://cicsppr1.ecs.Nebraska.gov:3113/RFS6>

State of Nebraska

RFS6
PROD

NEBRASKA MEDICAID ELIGIBILITY SYSTEM

04:02PM 05/07/2020

Enter WIC Provider Number Here

NPI:

RECIPIENT NUMBER:

ATYPICAL PROVIDER NUMBER:

RECIPIENT SSN:

ELIGIBILITY DATE (MMCCYY): ← Enter current month as mm/yyyy

RECIPIENT LAST NAME:

RECIPIENT FIRST NAME:

RECIPIENT MIDDLE INITIAL:

RECIPIENT DOB (MM/DD/CCYY): / /

RECIPIENT GENDER:

Enter Name, social security number or Medicaid number in the GREEN areas

HELP END CANCEL EXIT ENTER

MEDICAID ONLINE VERIFICATION -- STEPS

Look for 1, 4, 5, or 6 in the Status Box.

One of these numbers indicates the person is eligible for Medicaid for the month.

The screenshot displays the 'State of Nebraska' Medicaid Eligibility System interface. The main window shows recipient details for 'RF27 PROD'. The 'STATUS' field is circled in green and contains the number '1'. Other fields include 'ELIG BEG: 10/01/2016', 'ELIG END: 10/31/2016', 'DOB: 11/02/2011', 'GENDER: M', and 'COPAY STATUS: 0'. A help window titled 'ASSIST/TS Web Help' is overlaid on the bottom left, listing status codes: 1 = Medicaid Eligible, 2 = Not Eligible, 3 = Recipient number has changed - Reason Close Code 370, 4 = Presumptive, 5 = Medicaid Eligible for part of the month requested, 6 = Coverage is limited to prenatal and pregnancy-related services connected to the health of the unborn child, and 7 = Medicaid eligibility pending. The help window also has a green border around the list.

State of Nebraska

RF27 PROD NEBRASKA MEDICAID ELIGIBILITY SYSTEM 12:02PM 10/25/2016

ELIGIBILITY DATE: 102016

NPI: "ATYPICAL PROVIDER NUMB: " 70000000600

RECIPIENT NUMB: STATUS: 1 ELIG BEG: 10/01/2016 ELIG END: 10/31/2016

RECIPIENT NAME: RECIPIENT SSN: DOB: 11/02/2011 GENDER: M COPAY STATUS: 0

AGENCY: ACCESS NEBRASKA PHONE: 1-888-632-7633

RECIPIENT STATUS - Internet Explorer

ASSIST/TS Web Help

1 = Medicaid Eligible

2 = Not Eligible

3 = Recipient number has changed - Reason Close Code 370

4 = Presumptive

5 = Medicaid Eligible for part of the month requested

6 = Coverage is limited to prenatal and pregnancy-related services connected to the health of the unborn child

7 = Medicaid eligibility pending

BEG: END: COB OF

MEDICAID ONLINE VERIFICATION -- STEPS

When: The STATUS is 5, check the ELIG BEG and ELIG END dates to see what dates of the month the person is eligible. See the example below.

The screenshot displays the 'State of Nebraska' Medicaid Eligibility System interface. The header includes 'RF27 PROD', 'NEBRASKA MEDICAID ELIGIBILITY SYSTEM', '12:02PM', and '10/25/2016'. The 'ELIGIBILITY DATE:' is '102016'. The recipient's 'STATUS' is '1', and the 'ELIG BEG' (10/01/2016) and 'ELIG END' (10/31/2016) dates are circled in green. Other fields include 'NPI', 'ATYPICAL PROVIDER NUMB: 70000000600', 'RECIPIENT NUMB:', 'RECIPIENT NAME:', 'RECIPIENT SSN:', 'DOB: 11/02/2011', 'GENDER: M', 'COPAY STATUS: 0', 'AGENCY: ACCESS NEBRASKA', and 'PHONE: 1-888-632-7633'.

Field	Value
RF27 PROD	NEBRASKA MEDICAID ELIGIBILITY SYSTEM
	12:02PM 10/25/2016
	ELIGIBILITY DATE: 102016
NPI:	"ATYPICAL PROVIDER NUMB: " 70000000600
RECIPIENT NUMB:	STATUS: 1 ELIG BEG: 10/01/2016 ELIG END: 10/31/2016
RECIPIENT NAME:	
RECIPIENT SSN:	DOB: 11/02/2011 GENDER: M COPAY STATUS: 0
AGENCY: ACCESS NEBRASKA	PHONE: 1-888-632-7633

When: The STATUS is 6, this designates a 599CHIP mom or baby.

When: The STATUS is 2 or 7, the person is not eligible for Medicaid during the month checked. They would not be adjunctive eligible for WIC

If documents are
older than 30 days:



- **Call NMES Phone Line** – to try to verify active enrollment for Medicaid, 599 CHIP ..
- **Try reprinting Notice of Action Form** for ADC & SNAP and recheck if eligible or not

If adjunct eligibility can be verified through seeing current documentation or by calling the NMES Line, then client is marked as adjunct eligible in Journey and a verbal income declaration amount is documented.

Simply ask client how much money is coming into the household and enter the amount in Journey.

In contrast,

Those who are not adjunct eligible will have to undergo a full income assessment by showing proof of all income for all household members in the past 30 days.

The income path questions are asked to ensure all income is considered when not adjunct income eligible

For example, this includes:

- Situations you could not verify current participation in one of the Adjunct Eligibility programs
- Clients who have applied and are listed as pending
- Clients who forget to bring documentation of Adjunct Eligibility and you do not have enough information to call and verify

To document Adjunct Income Eligibility in Journey:

Economic Unit Wilimina Flantstone | 1 of 1

Record Dates 02/28/2016 | 1 of 1 | New / Edit / Delete

Import Sources

Check Income Eligibility

Household Size: 3

Summary Period: Annual Monthly

Total Income:

1 Link Adjunct Eligibility

Add Row

Remove Row

Signature

Income Determination

Sources	Proof	Amount	Period
---------	-------	--------	--------

Adjunct Eligibility

Participant	Category	Proof	MA(Title ...)	MA ID	SNAP	TANF	599 CHIP
Pebbles Flantstone	Child	<input type="text"/>	<input checked="" type="checkbox"/>	12345	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Medicaid Phone/Com
Medicaid Card Issue
Notice of Action
SNAP Phone/Compu
Relicard Phone/Com

2 **3** **4**

5 Close

9001 Proof is a required field.

To document Adjunct Income Eligibility in Journey - continued:

Case: 207419 Wilimina Flantstone 45 - 10 BEDROCK

Income

Economic Unit: Wilimina Flantstone 1 of 1

Record Dates: 02/28/2016 1 of 1 New Edit Delete

Import Sources

Check Income Eligibility

Household Size: 3

Summary Period: Annual Monthly Total Income:

Link Adjunct Eligibility

6 Add Row

Remove Row

Signature

7 Income Determination Sources

8 Proof

9 Amount

10 Period

11 Verbal

Sources	Proof	Amount	Period	Verbal
Employment Verbal Income for Adj Eligible Child Support Social Security/Disability Unemployment Compensation Tax Forms - Self Employed/Farmer ADC Foster care TANF - see adjunctive Alimony Savings/Trust Accounts Other Lottery/Gambling Winnings Zero Income	Medicaid verification Pay stub (paper or electronic) Tax Forms/1040 Child Support/Alimony Military LES Foster Placement Papers/w Notice of Action - DHHS SNAP verification Social Security/Retirement/ Disability Unemployment Letter/Notic Bank Statement - Savings/C Self Employment documents Written Statement from em Other - document in Note c Affidavit	\$200.00	Weekly	Verbal

Verbal Income for Adj Elig

Medicaid Verification

Journey applies the Adjunct Eligibility Rules

- WIC applicants can be Adjunct Eligible based on their own participation in one of the Adjunct Eligibility Programs
- Or WIC applicants might be eligible based on another person's participation in one of the Adjunct Eligibility Program in their household

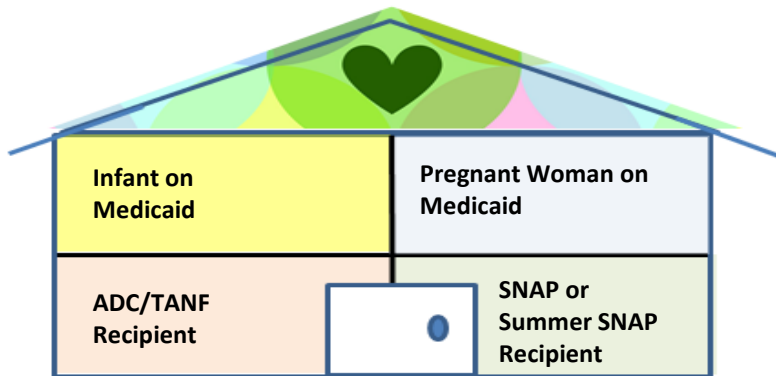
Journey applies the rules

- If an infant or pregnant woman in the household is receiving Medicaid, then all members of the household are adjunct income eligible for WIC
- If anyone in the household receives ADC or SNAP, than all members of the household are eligible for WIC
- If a child in the family is receiving Medicaid, than that child is automatically income eligible for WIC (this includes foster children, since foster children are on Medicaid)
- If a pregnant woman receiving 599 CHIP for her unborn baby, than mom is adjunct income eligible for WIC during her pregnancy until the baby is born. New baby is adjunct income eligible for WIC for twelve months after the baby was born.

Conferring Adjunct Income Eligibility

WIC applicants verified as participating in ADC, SNAP, or Medicaid, are income eligible for WIC

ALL household members are income eligible for WIC if the household includes...



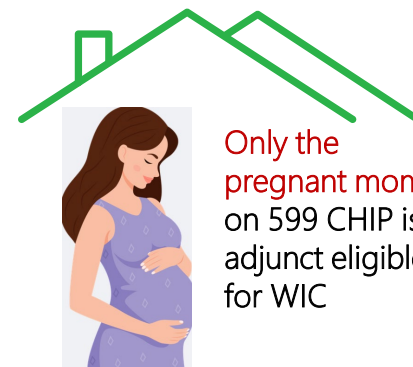
The presence of 1 of the above people in the household, makes ALL members of the household adjunct income eligible for WIC as long as they are categorically eligible for the program.

WIC Clerks must verify active participation in one of these programs; we do not need to do a full income assessment screening for those who are adjunct eligible.



Only the CHILD on Medicaid is adjunct eligible for WIC

Children (over 1 year) on Medicaid do not confer eligibility to anyone else in the household. Others would need to qualify based on another adjunct eligible program or based on income.



Only the pregnant mom on 599 CHIP is adjunct eligible for WIC

Pregnant women on 599 CHIP do not confer eligibility to anyone else in the household. Any others in the home would have to qualify based on other program participant or on income.



Scenario #1:

- Family has an appointment, and you are calling to remind them. The appointment is to recert the 3-year-old and to certify mom as a new pregnant WIC participant. Mom tells you the 3-year-old is on Medicaid, but that she is not.
 - *Who would be adjunct eligible from this family?*
 - *What would you tell mom to bring for proof?*



Scenario #2:

- A family is here for their appointment. Family has breastfeeding mom, 1 month old infant and a 2-year-old. Mom tells you she applied for Medicaid and SNAP last month. She has not heard anything from DHHS about if they are eligible or not.
 - *What is the first thing you would do?*
 - *Who would be adjunct eligible from this family?*



Scenario #3:

- A family is here for their appointment today. We seeing a 1-year-old, a 3-year-old and a 4-year-old. The family also has two older school age children. When you ask if anyone is getting Medicaid, SNAP or ADC, mom says no.
 - *What is the first thing you would do?*
 - *Would anyone be adjunct eligible from this family?*



Scenario #4:

- Dad is here for the appointment to recertify Charlie who is 2 years old. You ask if the family is receiving Medicaid, SNAP or ADC. Dad says no.
 - *What is the first thing you would do?*
 - *Would anyone be adjunct eligible from this family?*

Newborn Infants Waiting on Medicaid Cards



Babies applying for WIC within the first 60 days after birth:



Who do not have a Medicaid card yet



And did not bring proof of income



IF you can verify mom's Medicaid



Then the infant is adjunct income eligible until the end of the month of his/her first birthday

599 Chip

Adjunct Income Eligibility

WIC applicants verified as participating in 599 Chip are automatically income eligible for WIC.

A Pregnant Woman
(receiving 599 CHIP) for
unborn baby



.....is adjunct income
eligible for WIC (during her
pregnancy)

599 CHIP:

- is **not** Medicaid
- is **only** for pregnant teens and women.
- **does not confer** adjunct income eligibility to anyone else in the family while she is pregnant like Medicaid does.
- **ends** for undocumented moms at delivery
- **ends** for others a one year postpartum

Adjunct Income Eligibility

WIC applicants verified as participating in 599 Chip may be automatically income eligible for WIC.

When 599 Chip Baby is born.....



....The baby becomes adjunct income eligible for WIC, if the baby is enrolled in WIC until they turn one year old.


If you are seeing a 599 CHIP infant for WIC **after they were born:**

They are **not** adjunct eligible under 599 CHIP

These babies **will be** adjunct income eligible under their own Medicaid until they are one year old

OR see proof of income

Documenting Income for Pregnant Mom with 599CHIP

Adjunct Eligibility							
Participant	Category	Proof	MA(Title ...	MA ID	SNAP	TANF	599 CHIP
 Mommy M Test	Pregnant	Medicaid Phone/...	<input type="checkbox"/>	123456789	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Jimmy Test	Child		<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Income Determination						
Sources	Proof	Amount	Period	Note		
 Verbal Income for Adj Eligible	Medicaid verification	\$2,500.00	 Monthly	verbal		



Scenario #1:

- A pregnant mom is here to apply for herself. When you ask, she tells you she just heard that she will get Medicaid for her unborn baby. She did not bring any proof of this.
 - *What is the first thing you would do?*
 - *Who would be adjunct eligible from this family?*
 - *How would you determine the family size for this family?*



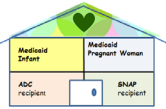


Scenario #2:

- A mom is here with her 2-week-old baby to apply for WIC. She tells you that she has 599CHIP.
 - *What is the first thing you would do?*
 - *Who would be adjunct eligible from this family?*
 - *Why?*



QUICK TIPS



- SNAP Website and Phone Number
 - **Phone Number: 877-247-6328**
 - **Check for the last deposit**
 - **Website: www.ebtedge.com**
 - **OR download ebtEDGE app onto phone**

- ReliaCard Website and Phone Number
 - **Phone Number: 866-276-5114**
 - **Website: www.usbankreliacard.com**



QUICK TIPS

- iServe Nebraska Website

<https://iserve.nebraska.gov/>

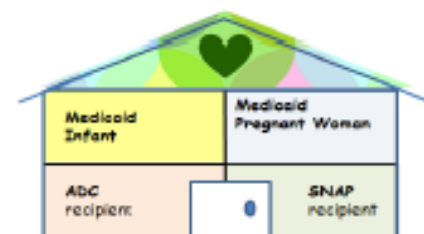
- NMES Line

- **1-800-642-6092**

- **402-471-9580**

Assess if anyone in the household would make the entire household adjunct income eligible

1. Does household include an **infant** on Medicaid?
2. Does household include a **pregnant woman** on Medicaid?
3. Does household include and **ADC recipient**
4. Does household include a **SNAP recipient**



The presence of 1 of the above people in the household, makes ALL members of the household adjunct income eligible for WIC. (must verify one)

Assess household for children on Medicaid

1. Does household include **CHILD <5 on Medicaid?**
2. Does the household include **Foster Child <5?**

Foster children are automatically adjunct income eligible for WIC since they are all on Medicaid.



- Medicaid
- Is a Foster Child under age 5

Only the CHILD or Foster Child is income eligible for WIC, not the entire household.

The END