



TRANSFERS

Core WIC Training
June 2018

LEARNING OBJECTIVES

1. Examine transfer policies
2. Prescreen a potential transfer client record
3. Identify correct records to use for a transfer
4. Recall why staff do not use the Transfer-In (TI) wizard until the person is physically at the clinic
5. Identify the correct client record in the TI wizard and the "Similar Client Record(s) Found" in pop-up message
6. Locate specific information in areas of Transfer Data tab
7. Practice transferring in-state and out-of-state clients



Section 1

Introduction and Policies

Transfer Options

Washington WIC clients may transfer to:

- WIC clinics within WA State
- WIC clinics in other states and the five U.S. Territories (Puerto Rico, Guam, American Samoa, U.S. Virgin Islands, Northern Mariana Islands)
- A “WIC Overseas” program on a military base

Did you know?

WIC provides services to over 40,000 clients on U.S. military bases throughout Europe, Latin America, and the Western Pacific.



Transfer Cards

- Transfer cards are also known as VOC cards. VOC stands for Verification of Certification cards.
- **Best practice:**
Issue Transfer Cards to all clients who notify you of their plans to receive services at a different location, whether the location is in WA or out of state.

Transfer Cards in other states look different. Some states issue handwritten cards, while others print them.



WA State Transfer Cards

Washington WIC Transfer Cards include all federally required transfer documentation items.

88581563

Client Name: Barker, Daniella R
Priority: 1

Client ID #: 885820050
Income Determ. Date: Dec 20, 2007

Date of Birth: Jul 3, 1987
Eligibility Begins: Nov 13, 2007
Eligibility Ends: Aug 31, 2008

Date: 12/20/2007 **Ht:** 67" **Wt:** 123lb
Date: 12/20/2007 **HGB:** 13.0
Nutrition Risks: Pre-Pregnancy BMI < 19.8

Last Check Issued: Jun 15, 2008

EvergreenCHD-Emerald
258 E Main St
Emerald, WA 98999-
(360) 555-1312

Angie T Wright
 Clerk

Notes: \$20 FMFP issued 6/15/08.

Transfer Card

T

Notification Requirements

Basic Contact Requirement: Inform clients about the right to receive a Transfer Card.

- At the Initial Certification
- During subsequent certifications
- When clients indicate they may be moving



Display the "WIC Moving Poster" to remind clients they can transfer their WIC services if they move.



Order posters at www.prt.wa.gov

Documentation Requirements

At the time of transfer clients **must** provide:

- Proof of residency
- Proof of ID
- Transfer Card
- Any missing proofs not provided to the previous clinic



If a Washington WIC client did not receive a Transfer card from their previous WA WIC clinic, you can use transfer data in Client Services instead of a Transfer Card. The client must still provide proof of residency, ID, and any missing proofs.

Transfer Card Requirements

Federally required information on **Transfer Cards**:

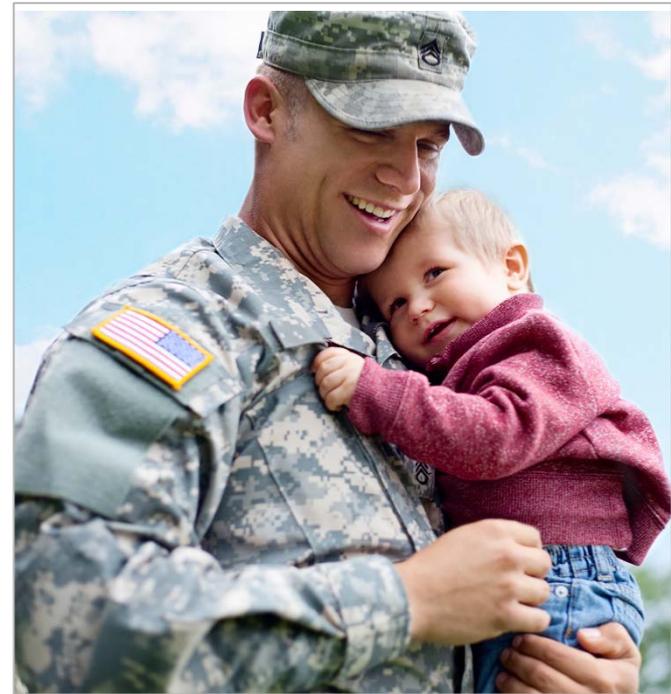
- Client **name**
- Certification **start date**
- Certification **end date**
- **Date income eligibility** was determined
- **Date** of the last **check issuance**
- **Client risk factors** at the date of certification
- **Signature of staff** who provided transfer card
- **Name of agency** that provided the transfer card
- **Client ID** number

WIC Overseas Requirements

WIC Overseas participants have different requirements.

They only have to provide:

- Client name
- Eligibility start date
- Eligibility end date





Section 2

Prescreen Wizard

Starting the Prescreening Process

Most clients will call when they need to schedule an appointment to transfer into your clinic.

When a client calls:

1. Use the Prescreen wizard to collect information on the Demographics tab.
2. Schedule a Transfer-In (TI) appointment.

Prescreen Wizard

Choose the appropriate type of client.

The screenshot displays the 'Prescreen Wizard' software interface. At the top, there are three tabs: 'Income Documentation', 'Demographics', and 'Finish'. Below the tabs, there are several checkboxes: 'Number in Household:', 'Medicaid', 'TANF', 'Basic Food Program', 'FDIR', and 'Migrant Worker'. A table with columns 'Cert Date', 'Assessed', 'Source', 'Proof', 'On File', 'Amount', 'Interval', and 'Comments' is visible. A 'Verify' dialog box is open in the center, asking 'Please choose which type of client you want to Pre-Screen:'. It has two radio button options: 'New Client/New Group' (which is selected) and 'New Client/Existing Group'. A green arrow points to the 'New Client/New Group' option. Below the dialog box, there are 'OK' and 'Cancel' buttons. The background interface includes sections for 'Proof of ID:' (listing Medical Services Card, Drivers License, WIC Appointment/ID, Social Security Card, Birth Certificate) and 'Proof of Residency:' (listing Medical Services Card/ProviderOne, WA State Drivers License, Paycheck receipt/Military LES, Utility Bill (w/physical address), WA State ID Card). There are also buttons for 'New', 'Del', 'P1 Search', 'Migrant Income Determination Date', and 'Calculate Income Eligibility'.

Prescreen Wizard

Client Services automatically searches for Washington WIC client transfer data by looking at:

- First name (first initial)
- Last name (first initial)
- Date of birth
- Gender of client



The client's eligibility may have ended at the previous clinic or the client may have used a different name. Always double-check your entries if your search results come up empty.

Prescreen Wizard: Income Tab

If your client calls you on the phone, **do not** complete the Income Tab yet.

The client **must be present** in person for income information.

Income Documentation Demographics Finish

Number in Household: Medicaid TANF Basic Food Program FDPPIR Migrant Worker

Cert Date	Assessed	Source	Proof	On File	Amount	Interval	Comments
5/1/2010	5/1/2010						

New Delete Income Table Inc Avg Adj Elig Total Income: 0

Proof of ID:
Medical Services Card/ProviderOne
Drivers License
WIC Appointment/ID Folder (Recert Only)
Social Security Card
Birth Certificate

Proof of Residency:
Medical Services Card/ProviderOne
WA State Drivers License
Paycheck receipt/Military LES
Utility Bill (w/physical address)
WA State ID Card

ProviderOne ID WA *Other:

Calculate Income Eligibility

Prescreen Wizard: Demographics Tab

Complete the Demographics Tab.

After you finish the Prescreen Wizard, the **Transfer Data tab** will appear on your desktop.

Income Documentation **Demographics** Finish

Client ID Local ID Site Contact Date

Client Last Client First MI Status

Category Gender DOB Age Yrs

Group Data

Caregiver Last Caregiver First MI

Alternate Last Alternate First MI

Phone Msg Phone Ph Notes

Addr City St Zip -

County City

City St Zip -

Mail

Spec Needs

Homeless Language for Interpreter

Migrant Language for Written Materials



Section 3

Transfer-In Wizard

Transfer-In Wizard: Find

Open the wizard, and identify the "type" of client you are transferring.



The screenshot shows a dialog box titled "Verify" with the text "Please choose which type of client you want to Transfer-In:". There are three radio button options: "New Client/New Group" (which is selected), "New Client/Existing Group", and "Existing Client". At the bottom, there are "OK" and "Cancel" buttons.

New Client/New Group: Use if client does not have a record and is not being added to an existing group.



The screenshot shows a dialog box titled "Verify" with the text "Please choose which type of client you want to Transfer-In:". There are three radio button options: "New Client/New Group", "New Client/Existing Group" (which is selected), and "Existing Client". At the bottom, there are "OK" and "Cancel" buttons.

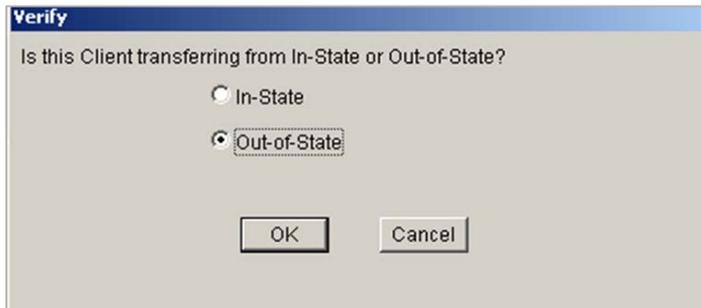
New Client/Existing Group: Use if new client belongs to an existing group.



The screenshot shows a dialog box titled "Verify" with the text "Please choose which type of client you want to Transfer-In:". There are three radio button options: "New Client/New Group", "New Client/Existing Group", and "Existing Client" (which is selected). At the bottom, there are "OK" and "Cancel" buttons.

Existing Client: Use if client already has a record in the system.

Transfer-In Wizard: Find



Verify

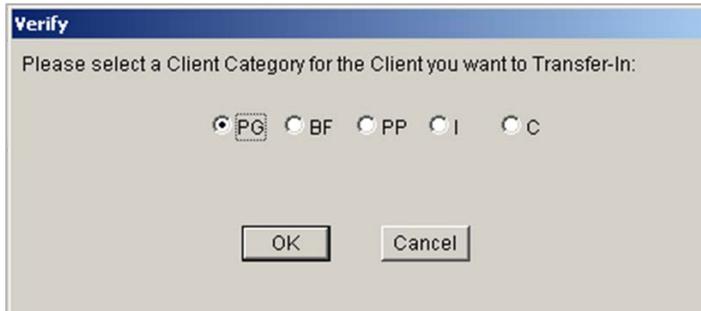
Is this Client transferring from In-State or Out-of-State?

In-State

Out-of-State

OK Cancel

Identify the client's correct categories.



Verify

Please select a Client Category for the Client you want to Transfer-In:

PG BF PP I C

OK Cancel

In-State versus Out-of-State Transfer

In-State and Out-of-State transfers use the **same Transfer-In wizard.**



Transfer-In Wizard: Income

- Don't reassess income, unless the person reports a change.
- Document proof of ID and residency.
- Edit income information as necessary.

Income Documentation | Demographics | R/E | TI | Measures | Assessment | Referrals | Basic Contact | Notes | Finish

Number in household: Medicaid TANF Basic Food Program FDPIR Migrant Worker

Cert Date	Assessed	Source	Proof	On File	Amount	Interval	Comments
5/1/2010	2/16/2010	Employment	Medical Services Card	<input type="checkbox"/>	\$1,100.00	Monthly	Transfer-In Client

New Delete Income Table Inc Avg Adj Elig Total Monthly Income: 1100.00

Copies on File

Proof of ID:
Medical Services Card/ProviderOne
Drivers License
WIC Appointment/ID Folder (Recert Only)
Not Provided
Social Security Card

Proof of Residency:
Medical Services Card/ProviderOne
WA State Drivers License
Paycheck receipt/Military LES
Not Provided
Utility Bill (w/physical address)

ProviderOne ID WA Other:

The following numbers **automatically fill in**.

- Number in Household: 1
- Source and Proof of Income: Other
- Income amount: \$0

Transfer-In Wizard: Demographics

- Verify or update any new demographics information.

Find | Income Documentation | **Demographics** | R/E | TI | Measures | Assessment | Referrals | Basic Contact | Notes | Finish

Client ID | 125924568 | Local ID | | Site | KCR-Bremerton | Contact Date | 05/01/2010

Client Last | Llamas | Client First | Robert | MI | R | Status | Pending

Category | C | Gender | M | DOB | 08/31/2006 | Age | 3 | Yrs | 8 | Mos

Group Data

Caregiver Last | Llamas | Caregiver First | Lorenzo | MI |

Alternate Last | | Alternate First | | MI |

Phone | (360) 555-5000 | Msg Phone | () - | Ph Notes |

Addr | 222 East Railroad Avenue | City | Bremerton | St | WA | Zip | 98999 - |

County | Kitsap | City | |

Mail | | City | | St | WA | Zip | - |

Spec Needs |

Homeless Language for Interpreter |

Migrant Language for Written Materials |

Transfer-In Wizard: R/E

- Always have the client **self-report** race and ethnicity information.

Find | Income Documentation | Demographics | **R/E** | TI | Measures | Assessment | Referrals | Basic Contact | Notes | Finish

Client Category

Please read the following to the caregiver.
WIC requires us to report race and ethnicity information. It is to learn about who WIC serves and does not affect your eligibility.

1. Do you consider your child Hispanic or Latino?
 Yes No

2. How do you describe your child's race? Choose all that apply.

American Indian or Alaska Native (Select from list.)

Asian

Black or African American

Native Hawaiian or other Pacific Islander

White

Transfer-In Wizard: TI

- TI stands for Transfer In.
- This tab also includes feeding method and breastfeeding fields for actively breastfeeding clients.

Find | Income Documentation | Demographics | **TI** | Measures | Assessment | Referrals | Basic Contact | Notes | Finish

Client Llamas, Robert R DOB 08/31/2006 Category C
Caregiver Llamas, Lorenzo Age 3 Yrs 8 Mos Gender M

Date Service Provided 05/01/2010 Begin Eligibility Date 03/01/2010
End Eligibility Date 08/31/2010

Birth Length in 8ths Birth Weight lb oz Gestational Age 39 wks

Breastfed Stopped Date BF Stopped 09/17/2006

Child Medical Provider

Breastfed
Currently
Stopped
Never

Date BF Stopped 00/00/0000
Date Formula/Milk Introduced 00/00/0000
Date Solids Introduced 00/00/0000

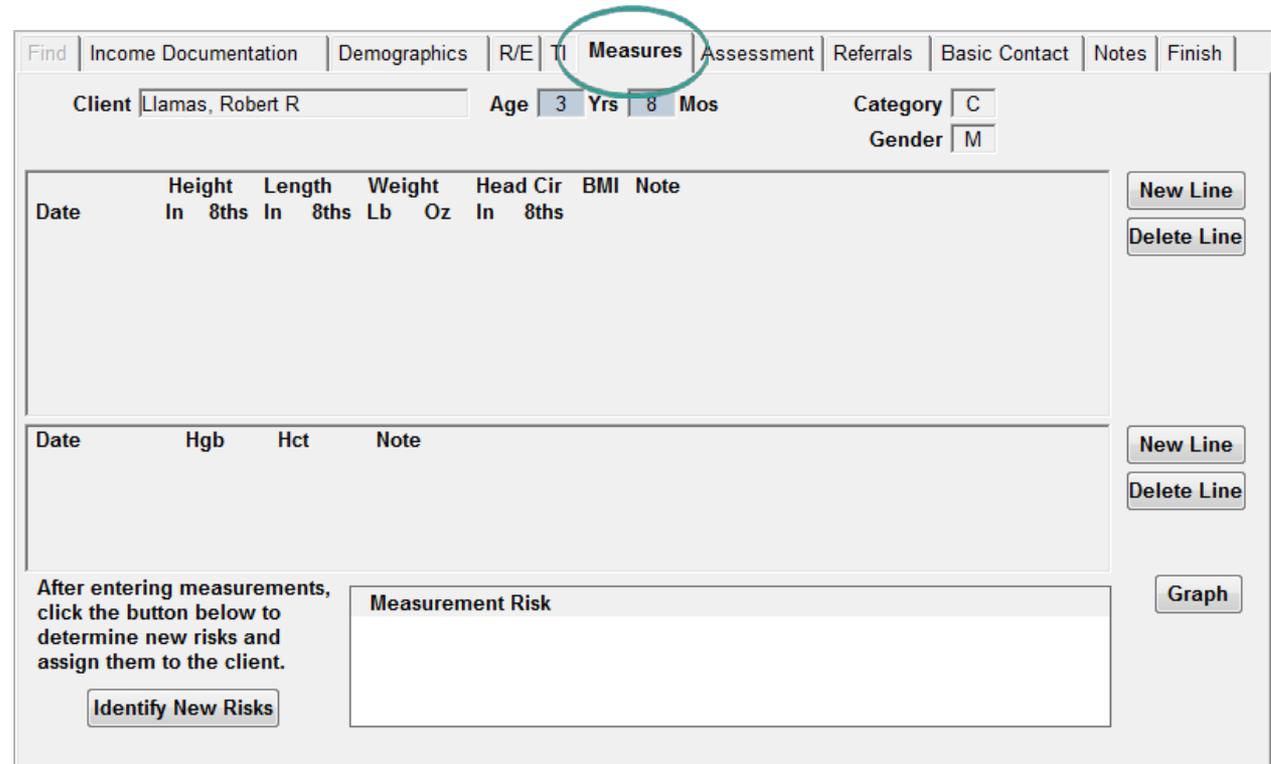
Infant Medical Provider

Feeding Method
Fully Breastfeeding
Partially Breastfeeding
Some Breastfeeding
Fully Formula Feeding

Birth Length in 8ths
Total Protein g/l
Breastfeeding D

Transfer-In Wizard: Measures

- Make sure to change the date to match the date the measurement was taken.
- Add a new line, highlight today's date and enter the measurement date before entering the measurement.



Find | Income Documentation | Demographics | R/E | **Measures** | Assessment | Referrals | Basic Contact | Notes | Finish

Client Age Yrs Mos Category Gender

Date	Height		Length		Weight		Head Cir		BMI	Note
	In	8ths	In	8ths	Lb	Oz	In	8ths		

Date	Hgb	Hct	Note

After entering measurements, click the button below to determine new risks and assign them to the client.

Measurement Risk

Transfer-In Wizard: Assess Risk

- Client Services automatically adds the risk "Out-of-State Transfer" for Out-of-Risk Transfers.

Find | Income Documentation | Demographics | R/E | TI | Measures | **Assessment** | Referrals | Basic Contact | Notes | Finish

Client: Llamas, Robert R | DOB: 08/31/2006 | Category: C
Caregiver: Llamas, Lorenzo | Age: 3 Yrs 8 Mos | Gender: M

Medical Non-Medical

Risk Factors

- Food Allergy (severe diet impact)
- Lactose Intolerance
- Gastrointestinal Disorder
- Diabetes Mellitus
- Dev. Delays Affecting Chewing/Swallowing
- Oral Health Conditions
- Severe Dental Problems
- Secondhand Smoke
- Premature <= 37 Weeks Gestation (< 24 months)
- Low Birth Weight <= 5 lbs 8 oz (< 24 months)
- Small for Gestational Age (< 24 months)

Include > | Exclude <

Assessment Questions

Date	Note	Client's Risks
02/16/2010	<input type="checkbox"/>	BMI >= 95th

Risk Factor Note: _____

Professional Discretion High Risk **HR Assigned** | Priority: 3 | **Risk Eligible**

Professional Discretion HR Note: _____ | Calculate Eligibility | Eligibility Begins: 03/01/2010 | Eligibility Ends: 08/31/2010

Transfer-In Wizard: Referrals

- Document referral information that you discuss with your transfer client.

Find | Income Documentation | Demographics | R/E | TI | Measures | Assessment | **Referrals** | Basic Contact | Notes | Finish

Referrals Made During Previous Certification

Date	Service	Has	Referred	Applied	Not Interested	Note

Referrals Made During Current Certification

Date	Service	Has	Referred	Applied	Not Interested	Note
05/01/2010	TANF	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
05/01/2010	Basic Food Program	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
05/01/2010	Medicaid	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	
05/01/2010	Child Support Enforcement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	

New Line Delete Line

Transfer-In Wizard: Basic Contact

- Document required Basic Contacts at the time of transferring in.

Find | Income Documentation | Demographics | R/E | TI | Measures | Assessment | Referrals | **Basic Contact** | Notes | Finish

Select the Basic Contacts that have been completed:

- WIC Signature Form
- ID check
- Appointment folder
- Rights & Responsibilities
- WIC check education

Include All

Voter Registration

Previous Cert	Current Cert	
<input type="radio"/> <input type="radio"/>	<input type="radio"/> Yes, Wants to Register	<input type="radio"/> Already Registered
<input type="radio"/> <input type="radio"/>	<input type="radio"/> No, Does Not Want to Register	<input type="radio"/> Declined to Answer
<input type="radio"/>	<input type="radio"/> Not Eligible to Vote	

Transfer-In Wizard: Notes

- Enter transfer related notes or skip this tab.

The screenshot displays the 'Notes' tab in the Transfer-In Wizard. The tabbed menu at the top includes 'Find', 'Income Documentation', 'Demographics', 'R/E', 'TI', 'Measures', 'Assessment', 'Referrals', 'Basic Contact', 'Notes', and 'Finish'. The 'Notes' tab is highlighted with a green circle. Below the menu, there is a table with the following structure:

Date/Time	Author	Title
-----------	--------	-------

To the right of the table, there are two buttons: 'New Line' and 'Delete Line'.

Transfer-In Wizard: Finish

- You can change the location the system takes you after you finish the Transfer-In process.

Find | Income Documentation | Demographics | R/E | TI | Measures | Assessment | Referrals | Basic Contact | Notes | **Finish**

Client | Llamas, Robert R | DOB | 08/31/2006 | Category | C
Caregiver | Llamas, Lorenzo | Age | 3 Yrs 8 Mos | Gender | M

Transfer-In has been completed.

From this Wizard, go directly to:

Find Client Appointment Book Flowsheet
 Checks

Staff | Garden, Flowers | Co-Sign |
Entered by | Garden, Flowers |

Food Package | Child | Assign Foods

Choose Finish to save or Cancel to close without saving.

Finish Cancel

If no location is chosen, you will automatically be taken to the Flowsheet.



Section 4

Similar Client Record(s) Found

Similar Client Record(s) Found Screen

When a client has an existing record in CIMS, the screen below titled "Similar Client Record(s) Found" appear.

One client



Name	Birth Date	Gender	Category	Status	Clinic
Henry, Jaysen T	1/19/2009	M	I	Active	KCR-Bremerton

Client Id: 125922486 Transfer Card Id: Clinic: KCR-Bremerton

Client Name: Henry, Jaysen T Status: Active

Category: I Gender: M Birth Date: 1/19/2009

Caregiver: Abalos, Jennifer R Missing Proofs: Eligibility: 3/12/2009 - 2/28/2010

Check Info: First Day To Use: 8/2/2009 Food Package: Formula 6 to 12*6 Rx Lost/Stolen Date: Migrancy: Migrant Race/Ethnicity: Asian Black Native Hawaiian / Pacific Islander White American Indian or Alaska Native Hispanic or Latino Ethnicity: Yes No

Selected client is a match? Yes No

Confirm that the client in front of you matches the record.

Similar Client Record(s) Found Screen

If more than one similar record is found, carefully read the detailed information for each client name.

Two clients



Similar client record(s) found

Name	Birth Date	Gender	Category	Status	Clinic
Doe, Sally	7/28/1980	F	BF	Active	Skagit CHD-Mt Vernon
Doe, Senta A	7/28/1980	F	PG	Active	Clark CPH-Vancouver

Client Id: 22222222 Transfer Card Id: Clinic: Skagit CHD-Mt Vernon

Client Name: Doe, Sally Status: Active

Category: BF Gender: F Birth Date: 7/28/1980 Delivery Date: 1/23/2008

Caregiver: Castro, Sonia Missing Proofs: Eligibility: 3/13/2008 - 8/31/2008

Check Info: First Day To Use: 4/13/2008 Food Package: B102-3 Lost/Stolen Date: Migrancy: Migrant Race/Ethnicity: Yes No
 American Indian or Alaska Native
 Asian Black Native Hawaiian / Pacific Islander White

Selected client is a match? Yes No

Details

Similar Client Record(s) Found Screen

Decide if the client in front of you is a match to either record.

- Select **No**, if none of the records match for the client.
- If one of the records **match**, select the correct record and press the **Yes** button.

Name	Birth Date	Gender	Category	Status	Clinic
Doe, Sally	7/28/1980	F	BF	Active	Skagit CHD-Mt Vernon
Doe, Senta A	7/28/1980	F	PG	Active	Clark CPH-Vancouver

Client Id: 22222222 Transfer Card Id: Clinic: Skagit CHD-Mt Vernon

Client Name: Doe, Sally Status: Active

Category: BF Gender: F Birth Date: 7/28/1980 Delivery Date: 1/23/2008

Caregiver: Castro, Sonia Missing Proofs: Eligibility: 3/13/2008 - 8/31/2008

Check Info: First Day To Use: 4/13/2008 Food Package: B102-3 Lost/Stolen Date: Migrancy: Migrant Race/Ethnicity: Yes No

American Indian or Alaska Native Asian Black Native Hawaiian / Pacific Islander White

Selected client is a match? Yes No

When you select **Yes**, the Transfer Data tab appears.

Similar Client Record(s) Found: Confusions

Question: My client says she was on WIC in a different WIC clinic. Why can't I see a Similar Client Record(s) Found message?

Answer: There could be a few reasons.

1. You may need to edit the information entered because of a typing error or because a different name was used at the previous clinic. Try your search again or ask if your client has other names she uses.
2. The client's eligibility may have ended at the previous clinic or her record has "expired". In both of these situations the client is not eligible to transfer and you will not be able to find a record for your client.

Similar Client Record(s) Found: Confusions

Question: Is the record I found really a match?

Answer: Review the details of the Similar Client Record(s) Found message with your client. Ask the following questions:

1. "Do you have a Transfer Card or anything from your last clinic that includes your client ID number?"

Items like WIC checks, Certification History reports, and Appointment folders include the client's ID number.

The screenshot shows a software interface with a blue header titled "Similar client record(s) found". Below the header is a table with columns: Name, Birth Date, Gender, Category, Status, and Clinic. The table contains two rows: "Doe, Sally" (7/28/1980, F, BF, Active, Skagit CHD-Mt Vernon) and "Doe, Senta A" (7/28/1980, F, PG, Active, Clark CPH-Vancouver). Below the table is a detailed view for "Client Name: Doe, Sally". The "Client Id:" field is circled in green and contains the value "22222222". Other fields include "Transfer Card Id:", "Clinic: Skagit CHD-Mt Vernon", "Status: Active", "Delivery Date: 1/23/2008", "Category: BF", "Gender: F", "Birth Date: 7/28/1980", "Caregiver: Castro, Sonia", "Missing Proofs", "Eligibility: 3/13/2008 - 8/31/2008", "Check Info: First Day To Use: 4/13/2008, Food Package: B102-3, Lost/Stolen Date:", "Migrancy: Migrant", "Race/Ethnicity: Hispanic or Latino Ethnicity: Yes No American Indian or Alaska Native, Asian, Black, Native Hawaiian / Pacific Islander, White

Similar Client Record(s) Found: Confusions

Question: Is the record I found really a match?

Answer: Review the details of the Similar Client Record(s) Found message with your client. Ask the following questions:

2. "At which clinic did you last receiving WIC services?"

Similar client record(s) found

Name	Birth Date	Gender	Category	Status	Clinic
Doe, Sally	7/28/1980	F	BF	Active	Skagit CHD-Mt Vernon
Doe, Senta A	7/28/1980	F	PG	Active	Clark CPH-Vancouver

Client Id: 22222222 Transfer Card Id: Clinic: Skagit CHD-Mt Vernon

Client Name: Doe, Sally Status: Active

Category: BF Gender: F Birth Date: 7/28/1980 Delivery Date: 1/23/2008

Caregiver: Castro, Sonia Missing Proofs: Eligibility: 3/13/2008 - 8/31/2008

Check Info: First Day To Use: 4/13/2008 Food Package: B102-3 Lost/Stolen Date: Migrant: Migrant

Race/Ethnicity: Asian Black Native Hawaiian / Pacific Islander White

Selected client is a match? Yes No

Similar Client Record(s) Found: Confusions

Question: Is the record I found really a match?

Answer: Review the details of the Similar Client Record(s) Found message with your client. Ask the following questions:

3. "Did you receive checks from the previous WIC clinic?
What are the dates those checks can be used"

The screenshot shows a software interface for finding similar client records. At the top, a blue header reads "Similar client record(s) found". Below this is a table with columns: Name, Birth Date, Gender, Category, Status, and Clinic. Two records are listed: "Doe, Sally" (BF, Active, Skagit CHD-Mt Vernon) and "Doe, Senta A" (PG, Active, Clark CPH-Vancouver). Below the table, a detailed view for "Client Name: Doe, Sally" is shown. This view includes fields for Client ID, Transfer Card ID, Clinic, Status, Category, Gender, Birth Date, Delivery Date, Caregiver, Missing Proofs, Eligibility, Race/Ethnicity, Migrant status, Food Package, and Lost/Stolen Date. A green circle highlights the "Check Info" section, which contains the text "First Day To Use: 4/13/2008". At the bottom of the window, there is a question "Selected client is a match?" with "Yes" and "No" buttons.

Name	Birth Date	Gender	Category	Status	Clinic
Doe, Sally	7/28/1980	F	BF	Active	Skagit CHD-Mt Vernon
Doe, Senta A	7/28/1980	F	PG	Active	Clark CPH-Vancouver

Client Name: Doe, Sally
Client ID: 22222222
Transfer Card Id:
Clinic: Skagit CHD-Mt Vernon
Status: Active
Category: BF
Gender: F
Birth Date: 7/28/1980
Delivery Date: 1/23/2008
Caregiver: Castro, Sonia
Missing Proofs:
Eligibility: 3/13/2008 - 8/31/2008
Check Info: First Day To Use: 4/13/2008
Food Package: B102
Lost/Stolen Date:
Migrancy: Migrant
Race/Ethnicity: Hispanic or Latino Ethnicity Yes No
 American Indian or Alaska Native
 Asian Black Native Hawaiian / Pacific Islander White

Selected client is a match?



Section 5

Prescription (Rx) Information

Prescription Information Policy

- Prescription information is not provided as part of transferring a record.
- Therefore, **staff must manually document prescription** information in Client Services.
- Make a note in the flowsheet to indicate a copy of the prescription is needed.

Staff must obtain and document the client's prescription information within **30 days** of the transfer.

Prescription on the Transfer Card

- On the transfer card, look for an "X" in the Rx box.
- The Rx end date is NOT available on the Transfer Data tab.

Client Id: 125922486		Transfer Card Id:		Clinic: KCR-Bremerton	
Client Name: Henry, Jaysen T					Status: Active
Category: I		Gender: M	Birth Date: 1/19/2009		
Caregiver Abalos, Jennifer R			Missing Proofs		Eligibility 3/12/2009 - 2/28/2010
Check Info First Day To Use: 8/2/2009 Food Package: Formula 6 to 12*-6 <input checked="" type="checkbox"/> Rx Lost/Stolen Date:		Migrancy <input type="checkbox"/> Migrant		Race/Ethnicity Hispanic or Latino Ethnicity Yes <input type="radio"/> No <input checked="" type="radio"/> <input type="checkbox"/> American Indian or Alaska Native <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native Hawaiian / Pacific Islander <input checked="" type="checkbox"/> White	

Re-enter All Prescription Information

- The prescription information can't be recorded until after the Transfer-In wizard is finished.
- The Transfer Data tab disappears after the Transfer-In wizard is finished. The Rx indicator disappears with it.

Find out where your clinic keeps prescription information until it can be recorded in Client Services.





What are your questions?





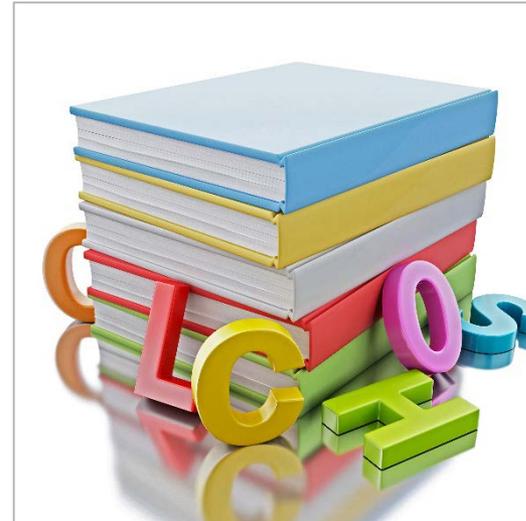
State WIC is here to help!



CIMS Support

1-800-841-1410 x 7

For questions about Client Services



LATA

1-800-841-1410 x 0

For policy-related questions



@WADeptHealth

Washington State WIC Nutrition Program

Questions? Contact us:

Email: WAWICtraining@doh.wa.gov

Phone: 1-800-841-1410

(Ask for the Communications and Training Team)

Visit our website: www.doh.wa.gov/wicstaff



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To submit a request, please call 1-800-525-0127 (TDD/TTY call 711)



DOH 960-328 August 2018



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Washington State WIC Nutrition Program

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