ADMINISTRATIVE (FAIR) HEARING

Anyone has the right to appeal their case if they feel they have been unfairly denied benefits by the WIC Program.

A hearing may be requested orally or in writing within 60 days following the date of the incident. Participants who are terminated during a certification period and who appeal within 15 days after notification of termination, shall continue to receive program benefits until a hearing decision is reached or the certification interval ends, whichever comes first. An appeal after the 15 day time limit shall not result in continued benefits.

If submitting a written request, please include a description of the incident, date, time, place where the benefits were denied, persons involved, circumstances related to the occurrence, and name, address, and phone number of person making the request. Sign and date the written request and send to: Hawaii WIC Services Branch, 235 S. Beretania Street, Suite 701, Honolulu, Hawaii, 96813.

The State Agency will be responsible for:

- Helping applicant submit a written request for a hearing and when an oral request is made, the staff shall assist in the documentation of the request.
- Scheduling the hearing within 3 weeks from the date of receipt of the request.
- Arranging a time and location convenient to the WIC applicant.
- Giving the applicant at least 10 days written notice of the time and place of the meeting.
- Choosing a hearing authority who will conduct the hearing and make a decision of the appeal.
- Allowing the applicant or their representative to see all documents and records which might be used at the hearing; to bring witnesses; to give evidence establishing certain facts; and to question or deny any testimony or evidence.
- Notifying applicant of the decision of the hearing official in writing 45 days from the date of the request for the hearing.

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, disability, age, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotape, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

1. mail: U.S. Department of Agriculture Office of the Assistant Secretary for Civil Rights 1400 Independence Avenue, SW Washington, D.C. 20250-9410;
2. fax: (202) 690-7442; or
3. email: program.intake@usda.gov.

If you think you have been discriminated against on the basis of breastfeeding, in employment and public spaces, write the Hawaii WIC Services Branch, 235 South Beretania Street, Suite 701, Honolulu, Hawaii 96813-2419 or call (808) 586-8175 on Oahu (voice and TDD) or toll-free from neighbor islands 1-888-820-6425 (voice). This institution is an equal opportunity provider.
Welcome to the WIC Program!

This brochure helps explain your rights and responsibilities as a WIC participant.

What you can expect from WIC:
• Equal and fair treatment
• The right not to be treated differently from others because of race, color, national origin, religion, disability, political beliefs, sexual orientation, or marital or family status
• The right to tell the WIC clinic supervisor or the State WIC Office if you feel any decision about not being on WIC is unfair
• The right to ask for a Administrative (Fair) Hearing if you feel any decision about being on WIC is unfair

The WIC Staff will tell you:
• How the foods you choose can help you and your family to have better health
• How to use your eWIC card and benefits
• What foods you can get with WIC benefits
• What stores accept eWIC card and benefits
• Where to get other helpful services
• When it is time to reapply for WIC benefits
• How to request a hearing if you feel WIC benefits were unfairly denied to you

The WIC staff will provide you with:
• An eWIC card and Benefit List for WIC foods
• A list of foods that can be purchased with your eWIC card
• A transfer card if you plan to move
• Written reasons why you are taken off the program

WIC expects you to:
• Provide truthful information when applying for WIC
• Get services and receive benefits from only one WIC clinic at a time
• Keep scheduled WIC appointments or call the WIC clinic to reschedule
• Use your eWIC card correctly
• Bring your picture ID with you to all WIC appointments

Call your WIC clinic if:
• You need to reschedule a WIC appointment
• Your eWIC card is lost or stolen
• There is a change in your name, address, phone number, household size or income
• You are moving, so you can get a transfer card to bring to your new WIC clinic
• You no longer have custody of your child
• A child goes into foster care
• You have questions about breastfeeding or have stopped breastfeeding
• You have questions or concerns using your eWIC card or benefits

Important Note:
Lost or stolen eWIC benefits are not replaced. You are responsible for keeping your eWIC card and PIN safe.

You may lose your WIC benefits and be required to repay benefits received if you abuse the WIC Program in any way. Some examples of abusing the WIC Program are:
• Providing false information to get WIC benefits
• Enrolling a child not in your legal care
• Enrolling in more than one WIC clinic at the same time
• Using WIC benefits issued to the same person from more than one clinic with dates that overlap
• Trying to sell, selling, buying or giving away WIC benefits, food, formula, or breastpumps
• Accepting rain checks, credit or cash for WIC foods
• Exchanging WIC foods at the store for cash or non-WIC foods
• Getting non-WIC foods with WIC benefits
• Using eWIC card at places not allowed by WIC
• Stealing eWIC cards from the WIC office or a participant
• Being abusive to staff at the WIC clinic or store

When you enrolled in the WIC Program, you were asked to sign the following statement:

“I have been advised of my rights and obligations under the Program. I certify that the information I have provided for my eligibility determination is correct to the best of my knowledge. This certification form is being submitted in connection with the receipt of Federal assistance. Program officials may verify information on this form. I understand that intentionally misrepresenting, concealing, or withholding facts may result in paying the State Agency, in cash, the value of the food benefits improperly issued to me and may subject me to civil or criminal prosecution under State and Federal law.”