(Please indicate) State Agency: West Virginia for FY 2020

Food delivery and food instrument (FI) (*Food instrument* means a voucher, check, electronic benefits transfer card (EBT), coupon or other document which is used by a participant to obtain supplemental foods) accountability and control involve the production, issuance, redemption, and monitoring of automated and manual food instruments through retail systems and the delivery of WIC Program foods by non-retail methods, i.e., home delivery and direct distribution.

Retail Food Delivery Systems

- A. <u>Food Instrument Control Overview</u> 246.4(a)(11)(iii), (a)(14)(i), (a)(14)(vi), and (a)(14)(xii): describe the policies and procedures used by the State agency in producing, monitoring and accounting for the use of food instruments.
- B. <u>Food Instrument Pick-up and Transaction</u> 246.4(a)(11)(iii) and (a)(14)(vi): describe the State agency's procedures for issuing food instruments to participants, including procedures for verification, prorating food packages, training and proxy policies.
- C. <u>Food Instrument Redemption and Disposition</u> 246.4(a)(14)(vi): describe the procedures used to reconcile food instruments as either issued or voided, and as either redeemed or unredeemed, and redeemed food instruments as either validly issued, lost/stolen/damaged, expired, duplicate, or not matching issuance records.
- D. <u>Manual Food Instruments</u> 246.4(a)(11)(iii), (a)(14)(i), (a)(14)(vi) and (a)(14)(ix): describe the procedures for issuing and accounting for manual food instruments, including the procedures for documentation and disposition.
- E. <u>Special Food Instrument Issuance Accommodations</u> 246.4(a)(11)(iii), (a)(14)(i), (a)(14)(vi), (a)(14)(ix), (a)(ix), (a)(
- F. <u>Vendor Cost Containment System Certification</u> 246.4(a)(14)(xv), 246.12(g)(4)(vi): describe the competitive pricing and reimbursement methods that the State agency will implement to ensure that average payments per food instrument to above-50-percent vendors do not exceed average payments per food instrument to comparable regular vendors.

Non-Retail Food Delivery Systems

- G. <u>Home Food Delivery Systems</u> 246.4(a)(11)(iii), 246.4(a)(14)(i), (a)(14)(vi), (a)(14)(vii) and (a)(14)(xii): describe how the State agency's home delivery system operates including but not limited to the types of authorized home food delivery contractors, the frequency of deliveries, and the procedures for documenting deliveries and ensuring safe food delivery of WIC foods, if applicable.
- H. <u>Direct Distribution Food Delivery Systems</u> 246.4(a)(11)(iii), (a)(14)(i), and (a)(14)(vi), (a)(14)(vii), and (a)(14)(xii): describe the methodology and procedures used in the direct distribution of supplemental foods, including types of foods distributed, warehouse and distribution centers, the verification process, and assurance of food safety, as applicable.

Electronic Benefit Transfer (EBT) Implementation and Management

I. <u>Electronic Benefit Transfer (EBT)</u>: 246.4(a)(1), (a)(14)(xix), (a)(14)(xx), (a)(19), 246.12(h)(3), (w)-(bb): describe the policies and procedures the State agency is using to implement and operate EBT

A. Food Delivery and Food Instrument Control Overview

1.	Food Instruments - General						
a.	The State agency uses the following types of FIs (check all that apply):						
	☐ Automated-point of certification	☐ Automated-point of certification					
	☐ Manual-individual prescription						
	☐ Pre-printed manual-standard prescription						
	☐ Automated-central generation						
	⊠ EBT						
	☐ Other (specify):						
b.	The State agency conducts FI inventories (appropriate column to designate primary re	Place an S=[State agency] or L=[Local agency] under the sponsibility):					
	Automated - EBT Cards Daily/perpetually X Other (Specify): Local Agency	Physical - Paper Fls Daily Weekly Monthly Other (specify):					
c.	The FI contains/allows for the following information (check all that apply):						
	⊠ Not applicable	☐ Local agency identifier					
	☐ Participant WIC ID number	☐ Vendor/farmer endorsement					
	☐ Countersignature for participant/proxy	☐ Authorized supplemental foods					
	☐ First date of use	☐ Last date of use					
	☐ Redemption period	☐ Serial number					
	☐ Purchase price	☐ Signature space					
Pro	ovide a facsimile or FI in Appendix or cite Pro	ocedure Manual:					
d.	The EBT system allows for the following (c	heck all that apply):					
	☑ A unique and sequential number benefit issuance identifier						
	⊠ Each EBT purchase is matched to an authorized vendor, farmer, or farmers' market prior to authorizing payment per 7 CFR 246.12(x)(3)						
		foods					
	$\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ $	for electronic benefits					
e.	The State agency provides a toll-free numb	er for participant/vendor/farmer inquiries on:					
	☐ Paper Food Instrument ☐ Cash-value	voucher ⊠ EBT Card/Sleeve □ None					

ADDITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation): Food Instrument Accountability a. Fls are delivered to local agencies by: ☐ State agency staff □ Local agency staff □ US Postal Service ☐ On-demand printing ⊠ Contracted service (e.g., UPS, Purolator, etc.) ☐ Other (specify): Fls (blank stock and preprinted ready for issuance) are delivered to the local agency (check all that apply): **Blank Preprinted** ☐ Not applicable ☐ Not applicable □ Weekly □ Weekly □ Twice a month □ Twice a month □ Once a month □ Once a month ☐ Once every two months ☐ Once every two months ☐ Other (specify): Blank Specify: No FI's EBT cards only Preprinted Specify: The State agency uses the following procedures to ensure that unclaimed FIs are not being used fraudulently (check all that apply): ☐ Signatures on the documentation of receipt are compared for similarities in writing style implying one person signed for multiple participants ☐ Local agencies conduct an initial review to void food instruments for participants known to have been terminated from the Program ☐ Inventories of food instruments are not conducted by the same local agency staff responsible for issuing/voiding food instruments ☐ Procedures are in place to ensure the proper disposal of unused/duplicate/voided FIs ☑ Other (specify): N/A to WV as an EBT state ADDITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation): The State agency has established food delivery procedures in cases of natural disaster and emergencies for the following (check all that apply):

ADDITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation):

☐ Automated issuance

☐ Home food delivery

☐ Manual Issuance

□ Direct distribution

□ Mailing

B. Food Instrument Pick-up

1. Food Instrument Pick-Up Policy and Procedures

a.	Food instru	ments are issued by (c	heck all that app	oly):			
			All Locals	Most Locals	Some Locals		
	Local agency	director	\boxtimes				
	Local agency	nutritionist	\boxtimes				
		paraprofessional	\boxtimes				
	Clerical staff		\boxtimes				
	Other (specif	y):					
b.	The State ag	gency utilizes a particip	ant identificatio	n card:			
		\square Yes, with photo	□ No				
	If yes, issua	nce is controlled nume	erically and each	card is accounted	l for:		
	⊠ Yes	□ No					
C.	The State ag	gency requires the follo :	owing proof of re	eceipt when issuin	g automated food		
	☐ Participar	nt/parent/caretaker/proxy	y signature block	on register confirm	ng receipt		
	•	opy of food instrument		J			
		ency staff initials					
	☐ Date of food instrument pick-up						
	☐ Stub with	participant signature or	initials				
	Other (sp	pecify): Electronic signat	ure by				
	participant, p	oarent/guardian, caretak	er,				
	proxy or WIC	C staff					
d.	The State ag	gency has a policy to p	rorate food pack	cages for the follo	ving:		
	⊠ Late FI pi	ck-up	☐ Certification	due to expire withi	n 30 days		
	☐ Mid-mont	th certification		ify): Adding an add	tional family member		
e.		gency requires local ag check all that apply):	ency staff to pro	ovide each new pa	rticipant/parent/caretaker/p	proxy with	
		ed vendors/farmers	Selecting	WIC-approved for	ds		
		ction procedures	☐ Signature	e on FIs			
	Use of prediction of the prediction of	оху	⊠ Reporting	g problems/request	ng assistance		
	☑ Participant violations (i.e. selling or offering to sell WIC benefits)						
		ecify): Rights and Respo	onsibilities				
f.		gency requires local ag ners/farmers' markets:		ovide participants	with a list of authorized		
	⊠ Yes	□ No					
g.		gency permits a partici rket in the State:	pant to transact	food instruments	with any authorized vendo	r or farmer	
	⊠ Yes	□ No					

ADDITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation):

2.	The State agency's proxy policy includes the following:
	☐ Limits the number of participants a single proxy may sign for, except that a proxy may pick up FIs for all homeless WIC participants in a facility
	☐ Limits proxy to a specified number of FI pick-ups
	□ Limits proxy to a minimum age
	☐ Limits proxy assignment to local WIC staff
	☑ Other (specify): Limits number of proxies
ΑD	ODITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation):
C. I	Food Instrument Redemption and Disposition
1.	•
a.	The State agency system assures 100% disposition of all issued FIs
	⊠ Yes □ No
	If no, specify the circumstances that prevent 100% disposition:
b.	Local agencies are supplied with a report on the final disposition of its FIs:
	Yes (specify period): No No
C.	The State agency monitors each local agency's:
	□ Number of manual FIs utilized
	□ Number of unclaimed FIs
	□ Number of voided FIs
	□ Number of redeemed FIs with no issuance record
ΑD	DDITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation):
2.	Unclaimed, Voided, Prorated Fls
a.	The State agency requires local agencies to return "unclaimed/not picked up" Fls:
	oxtimes Not applicable $oxtimes$ Daily $oxtimes$ Weekly $oxtimes$ Monthly
	☐ Other (specify):
b.	The State agency requires local agencies to return "voided" FIs:
	oxtimes Not applicable $oxtimes$ Daily $oxtimes$ Weekly $oxtimes$ Monthly
	☐ Other (specify):
ΑD	ODITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation):
3.	Lost/Stolen/Damaged Food Instruments
a.	The State agency requires local agencies to report lost/stolen/damaged FIs to (check all that apply):
	☑ State agency☐ Police department☐ State agency's banking institution☐ EBT Coordinator

		-800 number for EBT support				
b.	Replacement/duplication	ate FIs Issuance				
	(1) Replacement/du	uplicate Fls are issued when Fls are reported <u>lost</u> :				
	□ No					
	☐ Depends on the	circumstances				
		issued, it is done):				
		tely				
	☐ Following	g notification of State agency/bank agency				
	☐ After a	day waiting period (specify number of days)				
	(2) Replacement/du	uplicate Fls are issued when Fls are reported <u>stolen</u> :				
	□ No					
	\square Depends on the	ne circumstances				
		reissued, it is done):				
	⊠ Immedia	•				
		g notification of State agency/bank agency				
	☐ After a	day waiting period (specify number of days)				
	(3) Replacement/du	plicate FIs are issued when FIs are reported <u>damaged</u> :				
	□ No					
	☐ Depends on the circumstances					
	•	reissued, it is done):				
	□ After a	notification of State agency/bank agency day waiting period (specify number of days)				
	☐ Other (specify)					
c.	ls a police report re	quired before replacement benefits are issued when reported stolen?				
	□ Yes ⊠ No					
d.		r its banking institution takes the following action after it is notified by the local agency o d Fls (check all that apply):				
	\square Stops payment on	the lost/stolen/damaged FIs				
	\square Notifies vendor or	farmer				
		eactivate EBT card and reissue a new card				
		py/citation of the State agency's policy and procedures that ensure that lost/stolen Fls d OR lost/stolen/damaged EBT cards will be replaced and associated benefits transferred (xix)).				
	Policy and Proced	ure 3.07				
e.	The local agency do	ocuments in the participant's file that replacement FIs were issued:				
	⊠ Yes □ N	o				
f.		nat lost/stolen/damaged FIs are transacted by the participant who reported them lost/				
	☐ A claim for cash re	epayment is issued to participant				

☐ Participant is disqualified; specify the period of time: ☐ Participant receives a warning q. If lost/stolen/damaged FIs are transacted by someone other than the participant, the following actions are taken, check all that apply: ☐ Reported to police for investigation ☐ State agency or local agency does an investigation ☐ State agency or local agency notifies the participant ADDITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation): h. The State agency monitors the level of reported lost/stolen/damaged FIs by local agency: □ No 4. Food Instrument Redemption Screening (7 CFR 246.12(k)(1)) Describe in detail how the State agency sets maximum allowable reimbursement levels for payment of food instruments (including whether the State agency uses vendors' shelf prices to set maximum reimbursement levels and how reimbursement levels are linked to competitive price criteria). If the State agency sets maximum allowable reimbursement levels differently for above-50-percent vendors and regular vendors, please explain the different methods used. The Crossroads State Agency Model gathers cost by requested redemption at UPC level for every product purchased with EBT benefits. As a result, a maximum allowable reimbursement level (MARL) is applied to each authorized item based on two (2) standard deviations of the average cost by peer group over the last 30 days of redemptions. If price is over 25% of the average, then approval has to be manual, and the price is not included in MARL calculation. Competitive cost selection criteria utilized the shelf price survey for applicants and current vendors (as collected at reauthorization and updated at monitoring). A food basket analysis is conducted using the most common WIC food packages (fully formula fed infant, pregnant woman, 12 – 23 month child, and 2 – 5 yr. child) plus a 15% inflation factor. The prices reported on the applicant Vendor Price Survey will be the determinant as to whether the applicant's prices are within 15% of the average reported prices within the individual vendor class. West Virginia does not authorize above 50%-vendors. (1) The State agency establishes maximum allowable reimbursement levels for: ⊠ Yes □ No (a) Each peer group (b) Each food instrument or food category ☐ No □ No (c) Other (please specify): At subcategory or UPC depending on volume. (2) The State agency establishes maximum allowable reimbursement levels using: (a) Standard deviations □ No If yes, specify the standard deviation number and explain how the State agency determined the standard deviation it used is appropriate: 2 std deviations - this is what is recommended within crossroads system. 2nd standard deviation against actual redemptions to the peer group and UPC level if enough volume which is 10 individual purchases. (b) A percentage above the average redemption amount ☐ Yes ⊠ No If yes, specify the percentage and explain how the State agency determined that this percentage is appropriate. ☐ No (c) Other (please specify): Redemption prices developed by vendor class, category, subcategory and UPC

(3) The maximum allowable reimbursement levels include a factor to reflect:

IX. FOOD DELIVERY and FOOD INSTRUMENT (FI) ACCOUNTABILITY AND CONTROL

7

	☐ Yes	⊠ No	Wholes	sale price fluctuations; explain:
	□ Yes	⊠ No	Inflation	n: explain:
	□ Yes	⊠ No	Other (please specify):
	b. The State a to detect th			gh a pre-edit (before payment) or post-edit (after payment) process
	Not Applicable	Pre-Edit Screen	Post-Edit Screen	
				Purchase price exceeds price limitations (FI only)
	\boxtimes			Purchase price missing
	\boxtimes			Altered purchase price
				Vendor/farmer identification missing Invalid/counterfeit vendor/farmer identification
	\boxtimes			Transacted before specified period
	\boxtimes			Transacted before specified period Transacted after specified period
	\boxtimes			Redeemed after specified period
	\boxtimes			Altered dates
	\boxtimes			Missing signature
	\boxtimes			Mismatched signature
	\boxtimes			Altered signature
	\boxtimes			Other (specify):
d. e.	 □ Reimburses □ Rejects the f □ Other (pleas Where pre-edi ⋈ All FIs □ Other (pleas 	the vendor the vendo tood instrum tood instrum the specify): the specify):	for amounts user at the peer gonent, but allow nent without a lare used, the centage of FI	up to the maximum allowable reimbursement amount group average the vendor to resubmit the vendor to resubmit the vendor to resubmit the proportion of FIs reviewed includes:
	rejects food in			
	Pre-Edit	Post-		
	\boxtimes		No	ot To Exceed or Maximum Prices
			Pe	ercentage above average (%)
			Ar	mount above average (\$)
			Ot	ther (specify):
	The following	actions ar	e used to con	ntrol against unauthorized stores redeeming Fls:
		to-date list	of authorized	vendors to participants at certification and/or FI issuance
	•			rket stamp when vendor/farmer/farmers' market is no longer authorized
				unauthorized store redeems FIs
	State agenometric submitted f	cy or its bar or redempt	nking institutio	on checks vendor/farmer/farmers' market ID numbers on food instruments a authorized vendor/farmer/farmers' market list before paying vendors/pmitted for redemption
	☐ Inform all p	articipants	who might use	e the unauthorized store

	☑ Other (specify): EBT processor has listing of all authorized stores,					
	transaction will not go through for an unauthorized vendor					
ΑD	DITIONAL DETAIL: Food Delivery Appendix: and/or Procedure Manual (citation):					
5.	Price Lists					
a.	Price list information is routinely collected from vendors:					
b.	Price list data are collected:					
	 ☑ Real Time or Daily via EBT system ☑ Monthly ☑ Quarterly ☑ Semiannually ☑ Other (specify): At routine monitoring visit and at reauthorization application 					
c.	Price data are collected by:					
	⊠ State agency staff					
	□ Local agency staff					
	☐ Reports are submitted by vendors					
	□ EBT system					
	☑ Other (specify): EBT redemptions					
d.	The data collected has food prices for (check all that apply):					
	☑ All brands and sizes of supplemental foods					
	☐ Most commonly redeemed food items; please specify:					
	⊠ All authorized vendors					
	☐ A sample of authorized vendors (please describe the sampling method used):					
	☑ Other (specify): EBT redemptions					
e.	The State agency/local agency verifies price data provided by vendors:					
	☐ During routine monitoring visits					
	☐ Does not verify on a routine basis					
	☑ Other (explain): At reauthorization					
	$\hfill \square$ If the vendor is identified as a high-risk vendor; please explain the method:					
f.	The State agency/local agency analyzes price data:					
	☐ Manually on a routine or as needed basis					
	☐ Generate estimated food instrument values					
	☐ Help inform WIC staff on vendor selection decisions					
	☑ Develop vendor peer groups☐ Flag individual food instruments that appear to be overcharges					
	☐ Other (specify):					
	□ Other (Specify).					

6. System to Detect Suspected Overcharges

a. Does the State agency screen for suspected overcharges:

IX. FOOD DELIVERY and FOOD INSTRUMENT (FI) ACCOUNTABILITY AND CONTROL ☐ Yes, vendor claims are issued for overcharges ☐ No, the State agency makes price adjustments to food instruments submitted for redemption at amounts above edit limits. □ No, the State agency does not identify overcharges and/or issue claims for overcharges. (Proceed to section *D.* Manual Food Instruments. days to report, and manual adjustment/claim procedure is initiated with WIC TPP The methods used to identify vendor overcharges are: □ Comparison of vendor's reported prices to charged prices Comparison of redemption values of vendor with other vendors in the vendor's peer group □ Comparison of redemption values of vendor with all vendors ☑ Other (specify): Having the NTE set at the UPC level helps to keep vendors from overcharging on individual items; however, if there is a mistake, the vendor has 10 days to report transaction for manual adjustment process. To receive payment or justify and correct a claim for a price adjustment or vendor overcharge, the vendor must: (Check all that apply) ☐ Provide an updated price list ☐ Provide written justification for the higher prices d. What action(s) is/are taken when a vendor overcharge occurs? (Check all that apply) ⊠ Routine monitoring or remedial vendor training is conducted □ Vendor is terminated for cause □ Vendor is sanctioned ☐ Other (specify): ADDITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation): D. Manual Food Instruments **☑ DOES NOT APPLY (PROCEED TO NEXT SECTION) Manual Fls Policy** Manual FIs are utilized for the following reasons: □ New participants ☐ Automated FIs not available ☐ Mutilated automated FIs ☐ Wrong food package on automated FI ☐ Wrong dollar amount on automated FI ☐ Provide for the special needs of the homeless □ Food package tailoring

☐ Routine monitoring visits (i.e., educational buys) of vendors/farmers

IX. FOOD DELIVERY and FOOD INSTRUMENT (FI) ACCOUNTABILITY AND CONTROL ☐ Compliance buys of vendors/farmers ☐ Special conditions, e.g., disasters ☐ Other (specify): b. The State agency requires the following for completing the manual FI register: ☐ Participant/proxy signature ☐ Local agency staff initials □ Date of FI pick-up ☐ Other (specify): Manual FIs have a "Not to Exceed Value" of: ☐ Same dollar amount for all manual food instruments \$ ☐ Variable dollar amount depending on type of prescription on manual FI ☐ Variable dollar amount depending on participant category on manual FI ☐ No limit ☐ Other (specify): ADDITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation): 2. **Manual FI Documentation and Disposition** A report containing the serial numbers of manual FIs issued by local agencies is sent to the State agency: ☐ Not applicable □ Weekly ☐ Monthly ☐ Other (specify): b. Local agencies are required to provide documentation to substantiate a valid or invalid certification record for manual FIs issued and redeemed but for which no participant record currently exists by utilizing: ☐ Turnaround documents to establish valid certification records ☐ Telephone calls to the State/local agency on irregularities ☐ Other (specify): c. If the manual FI inventories do not achieve 100% reconciliation of all issued and unissued FIs, the local agency (check all that apply): ☐ Reports the FI serial numbers to the State agency ☐ Provides the FI serial numbers to local vendors/farmers ☐ Other (specify): (Provide a copy/citation of the State agency's prescribed procedures if the manual FI inventory cannot be reconciled.) ADDITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation): E. Special FI Issuance Accommodations 1. Alternative FI Issuance a. The State agency has implemented the following FI issuance policy (check all that apply):

All participants are required to pick up FIs at the clinic or local agency, except in unusual circumstances

Participants/proxies are required to show identification at FI card pick up

☐ FI cards are routinely mailed to participants except (1) when the participant is scheduled for nutrition education (including breastfeeding promotion and support activities) or a certification appointment and (2) in areas where

	SNAP benefits are not mailed, as these areas are known to have experienced high mail issuance losses				
☐ Benefits are provided electronically to a location such as a grocery store under certain conditions; thus participants may not always pick up FIs at the clinic					thus
	☐ Other (specify):				
2.	Mailing Policy/Procedures	3			
a.	The State agency provides participants:	s local agencies	with guidelines/procedures	for mailing FIs to individ	ual
	☐ Yes ⊠ No				
b.			whenever certification appouport activities) is schedule		n education
	□ Yes ⊠ No				
c.	The State agency has imp	lemented the fol	lowing policy regarding ma	iling FIs (check all that ap	pply):
	☐ FIs are sent first class ma	ail *(first class is c	onsidered <i>regular</i> mail		
	\square FIs are sent registered m	ail			
	☐ FIs are sent certified mail				
	\square FIs are sent restricted ma	ail			
	☐ Return receipt is requeste	ed on FIs sent cei	rtified mail		
	\square Envelope specifies, "Do r	not forward, returr	n to sender" or "Do not forwar	d, address correction requ	ested"
	⊠ Other (specify): EBT card	s must be picked	up at the clinic and are not m	nailed	
d.	The State agency approve	s mailing Fls un	der the following conditions	s (check all that apply):	
		State-Wide	LA with SA Approval	Case by Case	
	Participant hardship				
	Travel-related issues				
	Better clinic management				
	Participant safety				
	Participant convenience				
	Cost effectiveness				
	Other				
	, , ,		ny reason. However, for reas ent having to come to clinic. E		•
e.	When mailing Fls, docume	entation of FI iss	uance is:		
	☐ Signed by the participant	at the following F	FI pick-up/visit		
☐ Noted "mailed" and initialed/dated by local agency staff					
	☐ Signed and dated by loca	al agency staff aft	ter return receipt is received		
	Other (specify): This is N ∴	/A to WV as FIs (EBT cards) are never mailed.		
ΑC	DITIONAL DETAIL: Food D	elivery Appendix	k and/or Procedure Manual ((citation):	
3.	Participants who receive I	FIs by mail are s	ent:		
	☐ One month of FIs		☐ Two months of FIs		
	☐ Three months of FIs	Σ	☐ Other (specify): N/A		

ADDITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation):

F. Vendor Cost Containment System Certification

If the State agency has authorized or plans to authorize any above-50% vendors, FNS must certify the State agency's vendor cost containment system. The State agency that has not yet received FNS certification must submit a request for certification/recertification that contains the following information.

☑ DOES NOT APPLY (PROCEED TO SECTION G)

1. Calculation of new competitive price levels

Describe how the State agency derived or will derive new competitive price levels for regular vendors, which exclude the prices of above-50-percent vendors.

- 2. Maximum allowable reimbursement levels for regular vendors and above-50-percent vendors
- Explain how the State agency will ensure that average payments to above-50-percent vendors do not exceed average payments to comparable regular vendors.

b.	The State agency plans to exempt above-50-percent vendors from the calculated competitive price criteria and maximum allowable reimbursement levels.		
	☐ Yes	$\hfill \square$ No If yes, how many vendors will be exempted?	
	Are these ven	dors needed to ensure participant access to supplemental foods?	
	□ Yes	□ No	
C.	The State agency applies peer-group-specific maximum allowable reimbursement levels to food instruments during the food instrument redemption process.		
	□ Yes	\square No If yes, describe the procedure or process used:	
3.	(i.e., separatel	State agency's methodology for grouping above-50-percent vendors in its peer group system y or in peer groups with regular vendors) and the criteria the State agency uses to identify endors for each group of above-50-percent vendors.	
4.	_	ncy plans to exempt <i>non-profit</i> above-50-percent vendors from competitive price criteria and wable reimbursement levels.	
	☐ Yes	☐ No If yes, provide the following information in detail:	
a.		eason the State agency has decided to exempt such vendors (i.e., the benefits to the program) er of non-profit vendors to be exempted.	
b.	Describe the r supplemental	eason the non-profit above-50-percent vendors are needed to ensure participant access to foods.	
c.	Does the State	e agency collect shelf prices from non-profit vendors?	
	□ Yes	□ No	
d.	Describe how	the prices of the non-profit vendors compare to those of other vendors in their geographic area	

that are subject to competitive price criteria and allowable reimbursement levels.

e.	Describe how the State agency establishes the level of reimbursement for the non-profit above-50-percent vendors that it has exempted.			
5.	The State agency has fully implemented the competitive price criteria and maximum allowable reimbursemen methodologies described in items 1 and 2 above.			
	□ Yes	□ No		
		ncy has not fully implemented the revised competitive price and maximum allowable reimbursement describe the current status of this effort and include the timetable for achieving full implementation.		
6.	The State ager	ncy plans to exempt <i>pharmacy</i> vendors from competitive price criteria and maximum allowable t levels.		
	□ Yes	□ No		
		agency has confirmed that these pharmacies provide only exempt infant formula and/or WIC-eligible s to program participants.		
7.	Does the State	agency collect shelf prices from pharmacies that provide only exempt infant formula?		
	☐ Yes	□ No		
8.	. Complete the table on the following page to demonstrate that the State agency's procedure for establishing and implementing competitive price criteria and maximum allowable reimbursement levels ensures that average payments per food instrument or food item to above-50% vendors do not exceed average payments to regular vendors.			
9.	per food instru report, describ	and cite of a copy of the report(s) that the State agency will use to monitor average payments ument to above-50% vendors and regular vendors. If the State agency does not have such a see the State agency's plans to develop and implement a report(s) for monitoring purposes, report contents or fields.		

Table 1. Data for WIC Vendor Cost Containment Certification – Overview

Please provide the following information on the regular vendors and the above-50-percent vendors authorized by the State agency as of June 30th. If data are not available through June 30th, the State agency should enter data for the period for which data are available, replacing "June" with the month to which the data are applicable.

1. How many authorized regular vendors did the State agency have as of June 30th? (or month of:	1.
2. For all authorized regular vendors, what was the total amount of WIC redemptions paid as of June 30?	2.
3. How many above-50-percent vendors did the State agency have as of June 30th?	3.
a. Non-pharmacy above-50-percent vendors	a.
Number of WIC-only stores	•
 Number of other types of above-50-percent vendors (excluding pharmacies) 	•
b. Above-50-percent pharmacy vendors	b.
c. Total above-50-percent vendors (sum of a and b)	c.
4. What was the total amount of redemptions paid to these above-50-percent vendors as of June 30th?	4.
a. Non-pharmacy above-50-percent vendors	a.
b. Above-50-percent pharmacy vendors	b.
c. Total above-50-percent vendors (sum of a and b)	c.
5. How many peer groups of above-50-percent vendors (either separate peer groups or groups with regular vendors) has the State agency identified?	5.
6. How many above-50-percent vendors and regular vendors has the State agency authorized that do <u>not</u> meet competitive price criteria, but are needed to ensure participant access to supplemental foods?	6. above-50%: regular vendors:

Supplemental WIC State Plan Guidance section IX.I – Vendor Cost Neutrality Assessment will be issued in the spring.

G. Home Food Delivery Systems ☑ DOES NOT APPLY (PROCEED TO NEXT SECTION) Home Food Delivery Systems Overview a. Home delivery vendors include (check all that apply): □ Dairies ☐ Private delivery service doing WIC business only ☐ Private delivery service ☐ Other (specify): b. Participants who receive home food delivery: ☐ Are notified in writing of the types and quantities of foods ☐ Are issued FIs that they sign and provide to the vendor when the food is delivered ☐ Are delivered not more than a one-month supply of supplemental foods at any one time ☐ Indicate by authorized signature on a FI, receipt or signature document, the supplemental foods received ☐ Other (specify): c. Supplemental foods may be delivered: □ Only to the participant of record ☐ To the participant of record or proxy of record ☐ To any adult at home during time of delivery ☐ To anyone at home at the time of delivery ☐ Other (specify): ADDITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation): 2. Documentation a. The forms verifying delivery are reconciled against vendor invoices: □ Weekly ☐ Monthly reconciliation of the signed FIs or other signed receipts or signature documents from participant or proxies. ☐ Other (specify): b. Signatures of participants who sign the food receipt document/FIs are compared to the signature on file. □ No ☐ Yes, sample ☐ Yes 100% ADDITIONAL DETAIL: Food Delivery Appendix and/or Procedure Manual (citation): H. Direct Distribution Food Delivery Systems **⋈** DOES NOT APPLY **Direct Distribution Food Delivery - General** a. The State agency uses a direct distribution food delivery system to: ☐ Distribute all of its WIC Program foods ☐ Distribute only exempt infant formula and/or medical foods

☐ Distribute (specify):

b.	The State agency uses:				
	☐ Warehouse not used				
	☐ One central warehouse, deliveries directly to local agencies				
	☐ One central warehouse from which foods are sent to one or more subsidiary warehouses before delivery to local agencies				
	☐ Other (specify):				
C.	Warehouses are operated by:				
٠.	•				
	☐ State agency	☐ Local a	gency		
	☐ Other state or public agency	☐ Under o	contract with a	a private business	
	☐ Other (specify):				
d.	Warehouses used for storage of WIC (Please specify which commodities)		also used to	store other FNS program commodities	
	☐ Yes ☐ No Specify commo	dities:			
ΑC	DITIONAL DETAIL: Food Delivery App	pendix and/	or Procedure	Manual (citation):	
	Food Distribution	•		,	
a.	Foods are distributed to participants:	:			
	☐ Grocery store fashion				
	□ Pre-packaged				
	☐ Other (specify):				
b.	o. Participants receiving food are required to sign:				
	☐ A register once for all foods receive	d			
	\square A register/form for each food item re	eceived			
	☐ Other (specify):				
c.	Foods are distributed to participants:	:			
	☐ Monthly				
	\square Not to exceed a one-month supply a	at any one tir	ne to any par	ticipant	
	☐ Other (specify):				
d.	Participants with limited access to fa	cilities used	l for distribu	tion have available to them:	
	Service	es provided	d by:		
	Lo	cal	Other		
		jency	Sources		
	Tromo donvory	」 ¬			
	Cost-free transportation				
	Other [(if other, specify):				
	(ii otilei, specity).				

ADDITIONAL DETAIL: Food Delivery Appendix: and/or Procedure Manual (citation):

- 3. Warehouse Insurance and Inspections
- a. Insurance for the warehouse covers (check all that apply):

	IX. FOOD D	ELIVERY	and FOOD IN	STRUMENT (FI) ACCOUNTABILITY AND CONTROL
	☐ Theft	☐ Fire	□ Infestation	□ Spoilage
	☐ Other (specify):		
b.	Warehouses are	e inspected	d by a public auth	nority responsible for enforcing:
	☐ Fire safety law	s and regu	lations (specify da	te and grade of last inspection):
	☐ Sanitation law	s and regul	ations (specify da	te and grade of last inspection):
	☐ Other (specify):		
ΑD	DDITIONAL DETA	IL: Food De	elivery Appendix	: and/or Procedure Manual (citation):
4.	Monitoring and	Inventory	Control	
	control (separa	tion of duti	es for intake and	Is for ensuring WIC supplemental foods are under proper inventory inventory; stock rotation; performance of perpetual and physical uance records; etc.).
I. E	Electronic Bene	fit Transfe	er (EBT)	
1.	Is EBT impleme	nted statev	vide?	
	⊠ Yes (Proceed	to question	2)	
	☐ No (Continue	,		
a.	Does the State	agency hav	e an active EBT	Project as of July 31, 2016?
	☐ Yes	□ No		
b.	Does the State	agency foll	ow APD requirer	nents for EBT management and reporting?
	☐ Yes	□ No		
C.	Does the State	plan to mee	et the October 1,	2020 EBT implementation deadline?
	☐ Yes	□ No		
2.	What is the State 246.12(bb)(2)?	te agency p	oolicy for permitt	ing replacement cards and transfer of balances per 7 CFR
	the request. If a is also listed in the	request ha	ppens outside of b roved Shopping C	er card balances as requested when cards are lost/stolen, at the time of pusiness hours, there is an 800 number on the back of the EBT card and it builde that each participant receives. Participants can call the 800 number all then have to go into clinic to get a replacement card during regular
3.	What are the St cards per 7 CFF			providing customer service during non-business hours for EBT
	There is an 800	number or	the back of the	EBT card for afterhours customer service.
4.	Does the State	agency use	the formula for	EBT terminal minimum lane coverage in 7 CFR 246.12(z)?
	⊠ Yes	□ No		
a.	If no, please pro CFR 246.12(z)(2		ate of the approv	al of the approved alternative installation formula as required per 7
5.	Does the State	agency use	the NUPC datak	pase?
	⊠ Yes	□ No		